

N E W A R K Kids Count 2018

A City Profile of Child Well-Being





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Advocates for Children of New Jersey is the trusted, independent voice putting children's needs first for more than 35 years. Our work results in better laws and policies, more effective funding and stronger services for children and families. And it means that more children are given the chance to grow up safe, healthy, and educated.

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Introduction

How to use the Newark Data Book

For over 20 years, Advocates for Children of New Jersey has published the Newark Kids Count Data Book, a one-stop source for child well-being data on the state's largest city. Newark Kids Count includes the latest statistics, along with five-year trend data, in the following areas: demographics, family economic security, food insecurity, child health, child protection, child care, education and teens.

This year's data book features a special section on childhood lead exposure and prevention efforts in Newark.

Policymakers, including elected officials and government agencies, use the data to make informed decisions.

Service providers use the data to improve their response to emerging child-related issues in their communities or cities.

Grant writers use the data to write proposals and solicit support for programs that help children and families.

Concerned residents become better, more informed advocates using the data to identify and address problems facing children and families in their community.

A few things to remember:

- Moments and Trends.
 - ACNJ collects and displays data for multiple years including the most recent year available. The most recent moment may tell us one fact
 - (such as the number of births in a given year), while the trend line tells us something else (births to teens declined over the last five years).
- Newark vs. Essex vs. New Jersey data. ACNJ compares
 Newark data to Essex County and New Jersey statewide data where
 available. These comparisons help tell whether trends are occurring
 equally in all places (such as the unemployment rate, p. 21) or
 whether trends are changing faster in one place (such as the
 number of foreign-born children, p. 15).
- Calculations and Data Sources. When using this book, please take into account that some percentages and numbers are based on estimates. Smaller geographies, like cities, counties, or school districts sometimes result in suppressed data or significant margins of error. Additionally, certain indicators represent different points in time such as school years, fiscal years, or calendar years. Please review the data sources listed at the end of each section for further information on individual indicators.



Special Section

Childhood Lead Exposure in Newark

"My sister's son got lead

hyperactive and it affected

his learning. It happened

two years ago, and now

ADHD and it's probably

they're saying he has

because of the lead."

- Newark parent

poisoning. He was real

Introduction

Newark's progress in reducing lead poisoning in children is a powerful success story of advocacy, policy change and education. But Newark's legacy of lead continues to leach into the

bodies of its most vulnerable children.

Newark has made progress towards reducing the number of children exposed to lead. But far too many children remain at risk of lead exposure and more than a quarter of tested children continue to have some level of lead in their blood. Newark's kids need extensive targeted investment to end lead poisoning.

Although some programs exist to prevent or test for lead in Newark, families may not take full advantage of these programs due

to limited community knowledge of these programs, the high cost of lead remediation and abatement and a lack of coordination with other programs.

City officials, health care providers and community-based organizations need to develop a lead prevention strategy that contacts families and children directly where they live, work, play and receive services.



Impacts of Lead

State law now recognizes that children exposed to lead, even at low levels, are in danger of harmful mental and physical health outcomes.

Lead is a toxic metal that can cause lifelong harm to mental and physical health. When young children are exposed at even very low levels, it can lead to impaired brain development that cannot be reversed. Children may not show symptoms until they are in school, but child lead exposure has been linked with aggression, attention deficit hyperactivity disorder and poor memory. There is no safe level of lead for children.

Because lead exposure may not come with immediate symptoms, the problem can fly under the radar. But every so often, the public is reminded of the continued presence of lead. In early 2016, Newark public school buildings were found to have water sources with lead levels above the legal limit. This led to changes in state

law and increased public awareness campaigns about lead.

Notably, the State of New Jersey passed legislation that reduced the amount of lead needed to trigger medical case management to 5 micrograms per deciliter, in line with federal recommendations. The State has also provided \$20 million in additional funding for lead prevention and treatment efforts, after underfunding these programs for years. [See page 5 for more details].

Timeline of developments in lead poisoning and prevention



1978

Use of lead paint is banned in the United States. Before 1978, lead paint and varnish were regularly used in homes and businesses. Newark was home to many paint manufacturers which regularly produced lead paint.



New Jersey's universal lead screening law, which ACNJ helped to pass, required local health departments to screen all New Jersey children for elevated blood lead levels. This year, lead was finally banned from gasoline.



2000

A coalition of New Jersey advocacy groups, headed by the American Civil Liberties Union and ACNJ, began a campaign to improve lead screening rates. This coalition worked with state departments, local health departments, child care centers and health care providers to develop better lead surveillance and accountability systems for doctors, hospitals, insurance companies and local departments

of health.



2004

The State of New Jersey began funding the Lead Hazard Control Assistance Fund, created by legislation authored by Newark state Senator Ronald Rice. This fund used a tax on paint cans to pay for lead removal and control projects. That same year, New Jersey published its lead poisoning elimination plan as required by the Centers for Disease Control and Prevention (CDC).



2004-2015

After the fund was created, governors and state legislative budgets diverted money from the Lead Hazard Control Assistance Fund to pay for other government programs. Between \$77 and \$154 million was diverted from the fund, leaving it with only \$23 million over this 12-year period.¹



2016

JANUARY:

Governor Christie vetoes legislation that would have added \$10 million into lead paint removal from old housing.

MARCH:

Newark Public Schools announces that 30 school buildings recorded elevated levels of lead in school water supplies.

OCTOBER:

Governor Christie creates \$10 million lead remediation pilot program to 8 non-profit organizations throughout the state to remove lead from 500 housing units. La Casa de Don Pedro received a grant to remediate homes in Essex County including Newark, East Orange and Irvington.

2017

FEBRUARY:

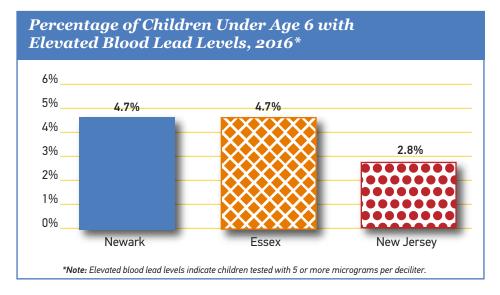
Governor Christie signs legislation lowering the blood lead level requiring health department action to 5 micrograms per deciliter and approves \$10 million in his budget to help local health departments pay for the added costs of providing services to these children.

MARCH:

Newark Public Schools announces that its repairs and replacements ensure that all students have access to safe and clean drinking water.

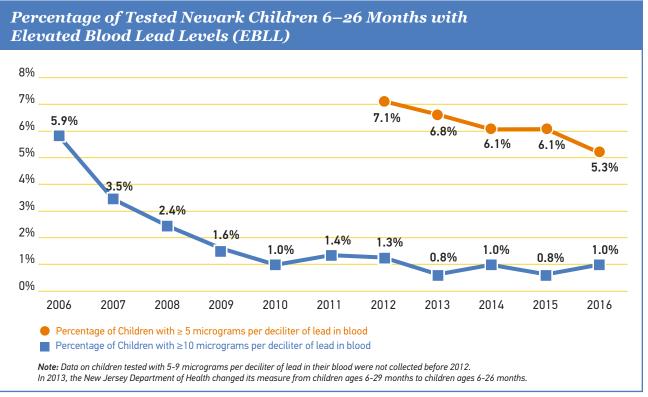
Newark's rates of lead exposure have historically been above the state average and remain that way to this day.

As a result, the city has been the focal point for efforts to reduce lead poisoning and exposure.



Past Successes

Thanks to substantial state and federal investment, the number of children tested with high levels of lead in their blood has declined substantially since 2005. In the vear 2000, an advocacy coalition, led by ACNJ and the ACLU, began a campaign to ensure that all children in New Jersey are tested for lead. This led to the State creating an information management system to track and monitor screening and treatment activities. Major state legislation in 2003 funded lead remediation and prevention efforts. Additionally, many New Jersey municipalities received federal housing grants to reduce lead hazards. Newark currently receives a federal Housing and Urban Development grant to reduce lead hazards in homes.



Notably, the number of children under ages 6-26 months tested with more than 10 micrograms per deciliter of lead in their blood declined from 5.9 percent

in 2006 to 1.0 percent in 2016.

Newark has also seen a decline in the number of children testing at the new reference level of 5 micrograms per deciliter. New Jersey only began tracking this data in 2012 and the new lower reference level took effect in 2017.

Prior efforts to improve testing rates have continued to show positive effects. Newark continues to have a high rate of children being tested for lead poisoning — 57 percent for children under age 6, and 59 percent for children 6-26 months. This is substantially higher than the state rate for both age groups.

In short, Newark has continued testing a majority of children for lead in their blood, with fewer children being found with high levels each year.



"This winter, my kitchen

window fell out. And we

put it back but the windows

in my house all need to be

replaced. But they haven't

done anything except wrap

the windows in plastic to

keep the heat in."

- Newark parent

Remaining Challenges

Despite the progress in Newark, the harmful effects of lead remain. Research shows that poverty and old housing stock are strong indicators of lead risk.²

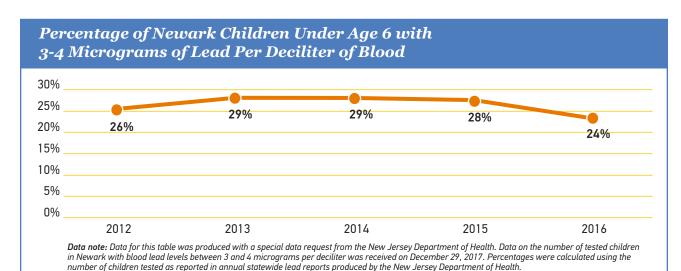
Newark has high rates of both. As indicated in this year's Newark Kids Count, 37 percent of Newark families with children live under the poverty level. Additionally, Newark's housing stock is relatively old, with 73 percent of households living in homes built before 1980, two years after lead paint was banned.

The most up-to-date science recognizes that even very small amounts of lead in a child's body can cause lifelong damage. The State of New Jersey has recognized this fact by lowering the blood lead level necessary to trigger state action, from 10 micrograms per deciliter to 5. This reflects federal CDC recommendations.

But even below this 5 microgram per deciliter threshold, small amounts of lead can affect a child's brain development, even impacting academic achievement in their teen years.³

Although the number of children with extremely high lead levels has declined over time, low-level exposure in Newark children remains pervasive. Roughly one quarter of Newark kids have some detectable lead in their blood — below the legal limit but still impacting their development.

Children who test in the 3-4 microgram per deciliter range are not required to receive additional medical case management, but they are likely being exposed to lead in their environment.





Programs That Target Prevention

When a child is tested for lead and has an elevated blood lead level, the City of Newark Department of Health and Community Wellness begins a process to find the source of a child's lead exposure and eliminate it. If the lead source is found to be a home, the homeowner is required to abate or remove the lead.

Beyond this legally mandated abatement program, however, various services for lead prevention exist throughout Newark:

- La Casa de Don Pedro has received a \$1 million grant from the New Jersey Department of Community Affairs to help get the lead out of 1- and 2-family homes in Newark.
- The City of Newark Department of Health and Community Wellness provides free lead inspections to any family who requests them, as

- well as free blood lead testing for children at its clinic. For information about these free services, call 1-800-734-7083.
- The City of Newark Department of Health and Community Wellness provides temporary lead-safe housing for families displaced by lead abatement work.
- The City of Newark Water and Sewer Department provides free lead testing for water and is providing homeowners with a program to replace lead water lines for free. Residents who suspect their water contains lead should contact the Department of Water and Sewer Utilities at (973) 733-6303 or by e-mail at waterandsewer@ci.newark.nj.us to arrange to have their water tested for lead and/or get a service line inspection for free.

Newark completes its home investigations and abatements at a lower rate than other New Jersey health departments with high caseloads and similar demographics.

Activity Status for Cases with Elevated Blood Lead Levels, 2016

Local Health Department	Cases Referred	Investigation Required	Investigation Completed	% Investigation Completed	Abatement Required	Abatement Completed	% Abatement Completed
Newark	86	38	6	16%	14	0	0%
Jersey City	61	45	44	98%	18	6	33%
Trenton	40	31	31	100%	24	3	13%
Paterson	29	26	26	100%	15	8	53%
Irvington	28	12	12	100%	9	1	11%
Plainfield	25	19	18	95%	16	8	50%

Note: Health departments may provide lead case management for cases outside their city limits.

There may be multiple causes of this slow abatement rate. One obstacle is the impact of the cost of abatement on landlords, particularly those who own only a few properties. Other factors that can lead to a longer abatement process include difficulty in identifying absentee property owners and lengthy enforcement actions against property owners.



Challenges for Newark's Lead Remediation Program: Lessons from Focus Groups

Despite the availability of some resources to help reduce the burden of lead in Newark, the removal of lead in the city has slowed considerably. Programs face difficulty recruiting properties to be inspected and remediated.

"I think [the information you get from doctors] all depends on the health insurance you have and if it's the clinic. If you're a parent who doesn't have the time and you're rushing into the clinic or you're waiting four hours to see the doctor, you're not asking all the questions. The clinic doesn't really give that much information especially if it's just a normal checkup. It should be mandatory to give more information." - Newark parent ACNJ performed focus groups with a total of 27 parents of young children at two early childhood centers in Newark (one in the South Ward and the other in the West Ward) to better understand the obstacles to using programs that address lead.

The participants demonstrated some understanding of how children are lead poisoned (paint chips, paint dust and drinking water coming through lead pipes) and how lead impacts child development (neurological damage). Parents also knew that their children needed to be lead tested and most recalled conversations with their doctors about testing. Newark preschool programs require that students have received a blood lead test as part of

the enrollment process. A few parents stated that although their children must have been tested at some point, they did not recall the lead test in particular or any conversation about the impacts of lead.

However, participants were largely unaware of programs to remediate lead in homes and other lead-related programs such as free lead screening provided by the City of Newark and lead inspection programs for homes. Of 27 participants, only two had previously heard of lead remediation programs, and they were both school employees. As participants noted, referrals from doctors to services beyond education about lead itself were minimal, as long as the blood lead levels were below the action level. Additionally, many programs require the cooperation of landlords, who may be reluctant to assume the cost of lead remediation and abatement repairs which often cost between \$10,000 to \$20,000. Participants wondered how the city was holding landlords accountable if they failed to act.

When discussing program enrollment, participants also were concerned about eligibility. Some programs have income caps that require residents to make under a certain income. Conversely, a few participants expressed concerns that families on Medicaid received lower-quality treatment from health care providers.

Yet participants remained hopeful that better information about the impact of lead and lead prevention efforts would yield positive results. Participants indicated that knowing about the long-term irreversible effects of lead on young children helped make it a higher priority for themselves.



Targeting the Highest-Risk Groups

Given the high cost of lead remediation and abatement, an effective lead removal strategy should involve targeting areas with a high concentration of older housing and children in poverty. Tested blood lead levels can identify clusters of housing that may have high risk for containing lead.

ACNJ requested ZIP-code level data on lead testing and high blood lead levels from the CDC to help identify high-risk areas, which could better target and allocate resources.

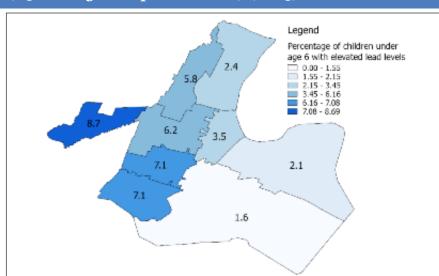
For example, in 2015 the West Ward's Ivy Hill and Vailsburg sections (ZIP code 07106) had high rates of children testing at elevated blood

lead levels, with 8.7 percent of children with high blood lead levels, compared with 2.2 percent of children in the Ironbound (ZIP code 07105). However, the 07106 ZIP code routinely has the lowest percentage of young children who are actually tested for lead, with only 40 percent of kids under age 6 tested, compared with 70 percent in ZIP code 07108 (Clinton Hill).

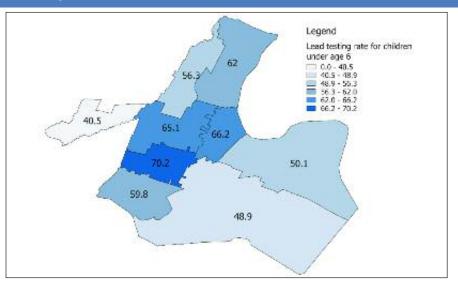
"People have lots of issues to worry about. Lead poisoning does not necessarily stand out in their mind, 'Oh let me get a lead test.' People have jobs, worry about paying bills and taking care of kids, so it's hard to focus on lead."

- Newark parent

Percentage of Children Under Age 6 with Elevated Blood Lead Levels (>5 micrograms per deciliter) (2015)



Percentage of Children Under Age 6 Tested for Lead (2015)



Data Note: The ZIP-code-level data was calculated using a data request from the CDC for the number of children tested for lead and the number of children with elevated blood lead levels by ZIP code. Percentages were calculated using population under age 6 from American Community Survey tables produced by the U.S. Census Bureau, Table B17020, 2015 Five-Year Estimates. ZIP code geography was provided by the City of Newark. For interactive maps, visit https://acnj.org/kids-count/newark-kids-count/newark-kids-count/

Focusing additional testing and inspection efforts in higher risk areas may help direct limited services where they are most needed and where children may be under-served. Improved data transparency and sharing is needed to further target neighborhoods block by block for intensive outreach and remediation efforts.

Traditional methods of transmitting information to families seem to have been minimally effective. Marketing efforts focused on advertisements and school bulletin boards did not seem to make an impact on the focus group participants. As one focus group participant noted, "Billboards or posters about lead poisoning [are not] very effective unless you're really paying attention or looking for those signs." Instead, families received most of their information from word-of-mouth communication and suggested distributing information at events where neighborhood residents already gather, using local information hubs such as houses of worship, barbershops and local gatherings such as block parties. Participants also discussed social-mediabased videos and an updated city website, although there was disagreement about whether families in need would access these resources.

Recommendations: How to Eliminate Lead for the Next Generation

There is no safe level of lead in a child's body. As long as lead remains in the homes and environment of Newark, its children will remain at risk for lifelong cognitive and developmental problems.

As discussed earlier, federal, state and local advocacy successfully addressed the most severe lead hazards, but the persistent lead exposure will continue for the next generation unless drastic steps are

taken. The next steps for protecting Newark's children from lead will require innovation, investment and community engagement.

City

"Our difficulty has always

been with how the city

holds private landlords

things they're supposed

to do. Call code enforce-

ment, and they might

not necessarily come

around... in a timely

fashion. So that's the

difficulty for a lot of

families, being able

landlords accountable."

to hold private

- Newark parent

accountable for the

Distributing Information to the Public

- Utilize all city services that regularly contact families to distribute information about lead risks and prevention, including clinics, recreation/wellness programs, etc.
- Develop a public information strategy to disseminate information through existing local information hubs in target neighborhoods, such as houses of worship, local businesses, neighborhood associations, child care centers, etc.
- Develop a public lead-safe housing registry and map of tested homes with lead available for the public
- Distribute data on housing-based lead hazards, such as locations of homes identified as having lead present, failure rate of dust wipe and visual inspection tests, etc.
- Enter into data-sharing agreements with local community groups focused on lead to better target families with some lead exposure for information and referrals to additional services
- Proactively test uncovered soil around the city for lead levels and distribute findings publicly

Targeting Resources to High-Risk Neighborhoods

- Perform data analysis on existing lead and housing data to identify high-risk neighborhoods
- Set target of proactively inspecting all pre-1978 housing in specific high-risk neighborhoods, prioritizing general housing inspections with a focus on visual checks for peeling paint and a dust wipe of all homes within target areas to determine lead risk

Investigate Creative Solutions to Improve Lead Inspection in **Housing**

- Create an ordinance to require all rental units to test for lead at time of transfer
- Prevent landlords with open lead abatement cases from seeking eviction of tenants in court
- Pilot small community grants with target of inspecting and testing specific number of homes in target neighborhoods

Community Groups and Foundations

- Develop and expand lead education efforts to target child care, WIC clinics, houses of worship, local businesses and other places where children and families gather
- Create incentive programs for families to participate in home lead inspection
- Create incentive programs for landlords to participate in lead remediation or abatement efforts
- Train local neighborhood leaders on lead prevention to spread the word on lead

Health Care Providers

- Standardize follow-up information and questions for blood lead tests even when levels are below 5 micrograms per deciliter, to ensure that families understand their results and perform surveys to assess family housing for potential lead hazards (particularly peeling paint)
- Provide referral and follow-up counseling for preventive care (effects of lead, cleaning techniques, diet/nutrition and programs that may be able to remove lead from the home)
- Develop community health outreach workers who can help families navigate follow-up services if their child is found to have any detectable lead in their blood test

State and Federal Government

- Ensure continued and expanded funding of state lead remediation efforts, including full funding of the lead hazard and abatement fund
- Fully fund federal housing lead remediation and abatement grants and remove barriers to accessibility such as restrictions on neighborhoods, blood lead levels, etc.
- Distribute more detailed data on lead-tested children and abated homes and publish data more frequently (monthly or quarterly basis, with public data dashboard)
- Develop amendment to State Medicaid plan to leverage CHIP and Medicaid funding to pay for lead abatement and remediation for children with high blood lead levels, as Maryland has done
- Target Department of Community Affairs building inspections of multifamily dwellings to neighborhoods with highest lead risk (prior elevated blood lead level cases, high percentages of households in old housing and in poverty, etc.)
- Provide incentive funds or tax credits for homeowners and landlords to remediate or control lead

Conclusion

A comprehensive strategy for Newark to reduce lead poisoning and exposure at a large scale will require collaborative efforts between federal and state government, City of Newark departments, health care providers, community groups, municipal courts, community development corporations, houses of worship, philanthropic organizations and property owners throughout the city.

Children A	ges 6-26	Months*	Tested for	or Lead											
			2012*			2013			2014			2015			2016
	#	% Levels	% Levels	#	% Levels	% Levels	#	% Levels	% Levels	#	% Levels	% Levels	#	% Levels	% Levels
	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL
Newark	5,435	24	7.1	5,337	30	6.8	5,228	31	6.1	5,163	30	6.1	4,908	26	5.3
Essex	11,730	26	6.8	10,835	31	5.9	10,678	31	5.5	10,664	27	5.2	10,792	22	4.8
New Jersey	103,380	22	3.6	92,572	25	3.0	90,683	27	2.9	93,128	25	2.8	94,909	19	2.4

^{*}In 2013, the state health department began tracking children ages 6-26 months, rather than 6-29 months. The 2012 year in this table continues to reflect the older 6-29 months age range.

Children U	nder 6 Ye	ears of A	ge Tested	d for Lea	d										
			2012*			2013			2014			2015			2016
	#	% Levels	% Levels	#	% Levels	% Levels	#	% Levels	% Levels	#	% Levels	% Levels	#	% Levels	% Levels
	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL	Tested	3-4 µg/dL	≥ 5µg/dL
Newark	13,879	26	6.4	14,607	29	6.0	14,030	29	5.7	14,257	28	5.5	14,190	24	4.7
Essex	26,790	28	6.6	26,847	29	5.7	25,407	30	3.6	26,095	27	5.2	26,527	21	4.7
New Jersey	183,617	23	3.8	176,520	24	3.4	171,271	25	3.2	172,859	24	3.1	175,002	18	2.8

■ Data Sources and Technical Notes:

All data, unless otherwise noted, was provided by the New Jersey Department of Health, Public Health Services Branch, Division of Family Health Services. Annual reports on childhood lead exposure in New Jersey are available on the Department of Health website at http://www.state.nj.us/health/childhoodlead/data.shtml. Data on children testing between 3-4 micrograms per deciliter were provided by a special data request to the Department of Health on December 29, 2017.

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Section 1

Demographics

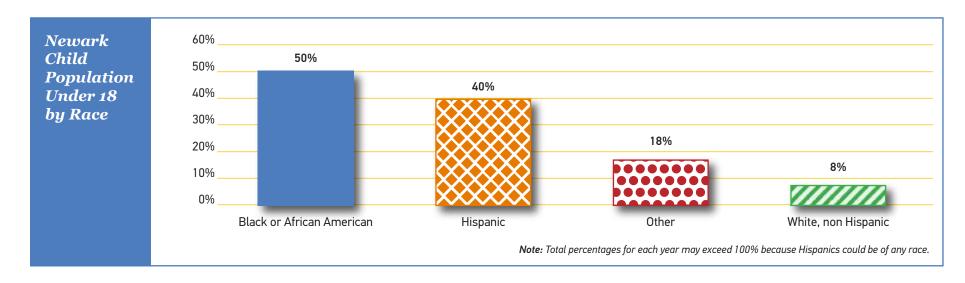
Demographic Trends

The city of Newark saw a 10 percent decline in its child population from 2012 to 2016, while the total city population remained consistent during the same period. Although total births to Newark mothers held steady from 2011 to 2015, the number of births to unmarried women declined by 10 percent. As of 2016, foreign-born children made up 8 percent of the city's child population.

Total Population	2012	2013	2014	2015	2016	% Change 12-16
Newark	277,718	278,436	280,577	281,913	281,770	1
Essex	787,744	789,565	795,723	797,434	796,914	1
New Jersey	8,864,590	8,899,339	8,938,175	8,958,013	8,944,469	1
Newark's % of Essex	35	35	35	35	35	
Newark's % of NJ	3	3	3	3	3	
Child Population U						
	2012	2013	2014	2015	2016	% Change 12-16
Newark	73,052	69,780	72,446	68,415	65,706	-10
Essex	192,736	191,944	192,125	191,267	189,492	-2
New Jersey	2,026,738	2,021,897	2,012,197	1,998,865	1,984,439	-2
Newark's % of Essex	38	36	38	36	35	
Newark's % of NJ	4	3	4	3	3	
Child Population U	nder Age 18	as a Perce	entage of T	otal Popul	lation	
	2012	2013	2014	2015	2016	
Newark	26	25	26	24	23	
Essex	24	24	24	24	24	
New Jersey	23	23	23	22	22	

Newark's Child Population Under 18 by Race											
		2012		2013		2014		2015		2016	% Change 12-16
	Number	%	Number								
Black or African American	37,176	51	36,954	53	36,989	51	34,861	51	33,162	50	-11
White, non-Hispanic	5,173	7	4,393	6	4,152	6	4,556	7	5,477	8	6
Hispanic	27,989	38	29,172	42	29,635	41	28,200	41	26,423	40	-6
Other	17,001	23	15,162	22	17,803	25	13,189	19	11,866	18	-30

Note: Total percentages for each year may exceed 100% because Hispanics could be of any race.



Foreign-Born Children											
		2012		2013		2014		2015		2016	% Change 12-16
	Number	%	Number								
Newark	4,412	6	4,698	7	4,091	6	6,301	9	5,378	8	22
Essex	9,521	5	11,566	6	9,522	5	13,199	7	11,686	6	23
New Jersey	111,291	5	112,675	6	103,338	5	108,649	5	108,663	5	-2

1 Demographics

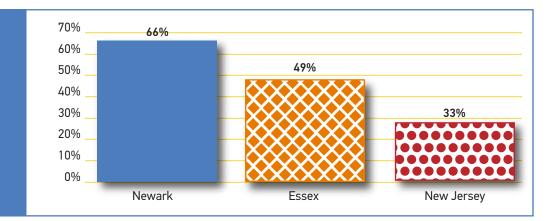
Total Births

	2011	2012	2013	2014	2015	% Change 11-15
Newark	4,353	4,358	4,193	4,153	4,245	-2
Essex	10,534	10,392	10,210	10,218	10,294	-2
New Jersey	105,474	103,778	102,326	102,813	102,199	-3

Births to Unmarried Women

	2011	2012	2013	2014	2015	% Change 11-15
Newark	3,146	3,129	2,966	2,973	2,819	-10
Essex	5,508	5,441	5,225	5,245	5,081	-8
New Jersey	37,245	36,559	35,577	35,583	33,831	-9

Percentage Births to Unmarried Women Newark Vs. Essex Vs. NJ, 2015



What is a Household?

Household is a specific term used by the U.S. Census Bureau in its surveys. The census definition, however, may conflict with the traditional idea of what a household might be. When looking at census data, a household is one person or multiple people occupying a single housing unit. For example, two unrelated roommates, a multigenerational family and a single individual are all considered households under the census definition.

Households Headed by One Po	Parent
-----------------------------	--------

		2012		2013		2014		2015		2016	% Change 12-16
	Number	%	Number								
Newark	24,266	65	22,789	66	21,968	61	22,338	64	19,288	61	-21
Essex	47,224	46	45,591	46	42,724	43	43,960	45	41,360	44	-12
New Jersey	344,237	31	341,570	32	341,498	32	326,222	31	322,303	31	-6



Many children in New Jersey live with a grandparent. Sometimes that grandparent is the child's legal guardian, and in other cases, the child simply shares a home with that grandparent. We report two different census measures of these trends. The first tracks grandparents who cared for their grandchildren at any point during the year. The second refers to children who live in the same home as a grandparent.

Number of Grandparents Caring for Their Grandchildren

	2012	2013	2014	2015	2016	% Change 12-16
Newark	2,428	3,552	2,659	2,857	2,008	-17
Essex	5,109	6,457	5,091	6,106	4,463	-13
New Jersey	48,550	53,032	49,690	47,118	45,734	-6

Number of Grandchildren Under 18 Living with a Grandparent Householder

	2012	2013	2014	2015	2016	% Change 12-16
Newark	6,272	6,576	7,557	7,652	6,555	5
Essex	12,890	15,677	15,135	14,388	15,894	23
New Jersey	115,005	131,546	127,307	123,318	128,874	12

Data Sources and Technical Notes:

Total Population, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B01001.

Child Population Under Age 18, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B01001.

Child Population Under Age 18, as a Percentage of Total Population, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B01001.

Newark's Child Population Under 18 by Race, 2012-2016. For children under age 18 as reported by the U.S. Census Bureau, American Community Survey charts B01001B, B01001F, B01001H, and B01001I. Black or African American and Other categories may include individuals who identified as Hispanic.

Foreign-Born Children, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B05003.

Total Births, 2011-2015. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 6, 2017.

Births to Unmarried Women, 2011–2015. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 6, 2017.

Percentage of Births to Unmarried Women, 2015. The percentage of births to unmarried women out of the total number of live births. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 6, 2017.

Households Headed by One Parent, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B11005. Includes family and non-family households. Data are for households with children under age 18.

Number of Grandparents Caring for their Grandchildren, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B10050.

Number of Grandchildren Under 18 Living with a Grandparent Householder, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B10001.

■ References:

¹ McFalls, J.A. (2003). What's a Houshold? What's a Family? Population Reference Bureau. Retrieved November 29, 2016 from http://www.prb.org/Publications/Articles/2003/WhatsaHouseholdWhatsaFamily.aspx.

Section 2

Family Economic Security

What Does Poverty Mean?

Since the late 1950s, the federal government has used the poverty threshold to determine the number of individuals living in poverty within the United States. The measure is based on the cost of a basic food diet and adjusted for inflation and family size. The same poverty threshold is used for the entire nation and does not account for the higher cost of living in certain states like New Jersey, where 200 percent of the poverty threshold, or an annual income of \$48,678 for a family of four, is more reflective of the families struggling to make ends meet in our state. While the

poverty threshold is produced by the U.S. Census Bureau, federal poverty guidelines—used to determine eligibility for certain federal programs—are released by the U.S. Department of Health and Human Services and are based on the census's thresholds. Individuals or families living below 100 percent of the federal poverty level (FPL) are considered to be living in poverty. In 2016, this figure equated to an annual income of \$24,339 for a family of four.

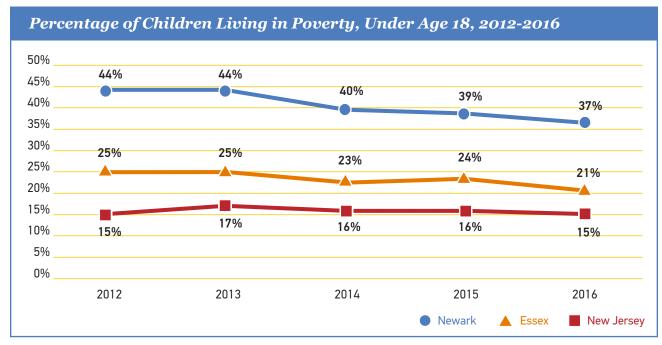
Number of Economically Disadvantaged Children, Under Age 18

Newark	2012	2013	2014	2015	2016	% Change 12-16
Extreme Poverty (Below 50% of FPL)	16,619	13,656	12,941	11,141	12,445	-25
Poverty (Below 100% of FPL)	31,450	30,313	28,572	26,801	23,802	-24
Low-Income (Below 200% of FPL)	51,544	48,487	49,260	47,256	43,824	-15
Essex						
Extreme Poverty (Below 50% of FPL)	24,213	21,487	18,693	19,334	16,579	-32
Poverty (Below 100% of FPL)	48,110	47,116	44,471	45,258	39,423	-18
Low-Income (Below 200% of FPL)	87,637	83,568	83,324	84,695	82,595	-6
New Jersey						
Extreme Poverty (Below 50% of FPL)	152,777	151,706	139,456	139,182	114,533	-25
Poverty (Below 100% of FPL)	310,226	333,375	315,563	308,238	285,479	-8
Low-Income (Below 200% of FPL)	645,985	654,284	640,897	632,941	616,618	-5

Percentage of Children Economically Disadvantaged, Under Age 18

Newark	2012	2013	2014	2015	2016
Extreme Poverty (Below 50% of F	PL) 23	20	18	16	19
Poverty (Below 100% of FPL)	44	44	40	39	37
Low-Income (Below 200% of FPL)	71	71	69	70	68
Essex					
Extreme Poverty (Below 50% of FI	PL) 13	11	10	10	9
Poverty (Below 100% of FPL)	25	25	23	24	21
Low-Income (Below 200% of FPL)	46	44	44	45	44
New Jersey					
Extreme Poverty (Below 50% of FI	PL) 8	8	7	7	6
Poverty (Below 100% of FPL)	15	17	16	16	15
Low-Income (Below 200% of FPL)	32	33	32	32	31

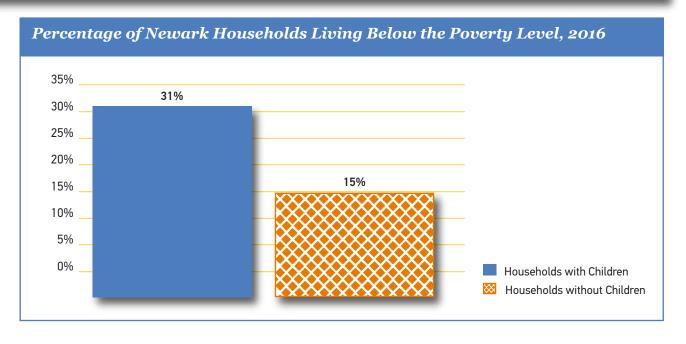


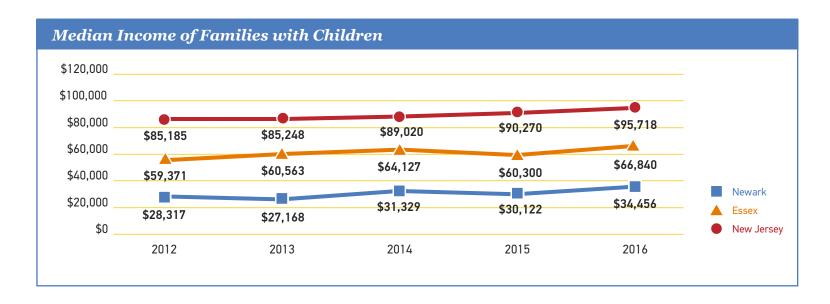


Family Economic Security

Total Population Livin	ng Below Poverty Lei	vel									
		2012		2013		2014		2015		2016	% Change 12-16
	Number	%	Number	%	Number	%	Number	%	Number	%	Number
Newark	81,038	29	81,061	29	76,086	27	78,569	28	76,005	27	-6
Essex	134,527	17	137,499	17	130,789	16	133,126	17	127,170	16	-5
New Jersey	934,943	11	998,549	11	972,903	11	946,114	11	915,913	10	-2

Households with Children Living Below the Poverty Level											
		2012		2013		2014		2015		2016	% Change 12-16
	Number	%	Number								
Newark	13,730	37	12,851	38	11,964	33	12,994	37	9,715	31	-29
Essex	21,630	21	20,736	21	19,043	19	21,361	22	16,722	18	-23
New Jersey	140,595	13	145,619	14	134,517	13	135,485	13	121,653	12	-13





Number Unemployed

	2013	2014	2015	2016	2017*	% Change 13-17
Newark	14,908	12,318	10,697	9,207	9,385	-37
Essex	36,616	30,048	25,957	22,334	22,120	-40
New Jersey	372,318	304,280	262,642	224,327	217,068	-42

^{*2017} figures preliminary as of November

Unemployment Rate

	2013	2014	2015	2016	2017*	% Change 13-17
Newark	12.4	10.4	9.0	7.9	8.2	-34
Essex	9.7	8.0	6.9	6.0	6.1	-37
New Jersey	8.2	6.7	5.8	5.0	4.8	-41

^{*2017} figures preliminary as of November

Family Economic Security

Federal Earned	l Income Tax	Credits (EITC)									
	Number of Claims	2011 Avg. Claim Amt.	Number of Claims	2012 Avg. Claim Amt.	Number of Claims	2013 Avg. Claim Amt.	Number of Claims	2014 Avg. Claim Amt.	Number of Claims	2015 Avg. Claim Amt.	% Chang Number of Claims	Avg. Claim Amt.
Newark	39,425	\$2,534	38,638	\$4,380	39,982	\$2,689	40,325	\$2,762	40,318	\$2,772	2	9
Essex	77,447	\$2,388	76,686	\$4,291	79,791	\$2,523	79,799	\$2,585	79,146	\$2,601	2	9
New Jersey	562,894	\$2,170	563,291	\$3,195	589,026	\$2,283	594,723	\$2,318	592,377	\$2,353	5	8

NJ Earned In	come Tax Cı	redits, All Re	cipients									
	# Credits Issued	Total Amt. of Credits Issued	2014 Avg. Credit Amt.	# Credits Issued	Total Amt. of Credits Issued	2015 Avg. Credit Amt.	# Credits Issued	Total Amt. of Credits Issued	2016 Avg. Credit Amt.	# Credits Issued	% Change Total Amt. of Credits Issued	e 14-16 Avg. Credit Amt.
Newark	30,497	\$14,778,195	\$485	32,055	\$23,676,405	\$739	32,105	\$27,718,096	\$863	5	88	78
Essex	64,133	\$29,418,289	\$459	66,687	\$46,634,466	\$699	66,504	\$53,983,112	\$812	4	84	77
New Jersey	522,732	\$222,577,939	\$426	539,138	\$350,515,051	\$650	533,493	\$404,766,950	\$759	2	82	78

NJ Earned In	NJ Earned Income Tax Credits, Recipients with at Least 1 Dependent Under Age 19											
	# Credits Issued	Total Amt. of Credits Issued	2014 Avg. Credit Amt.	# Credits Issued	Total Amt. of Credits Issued	2015 Avg. Credit Amt.	# Credits Issued	Total Amt. of Credits Issued	2016 Avg. Credit Amt.	# Credits Issued	% Change Total Amt. of Credits Issued	Avg. Credit Amt.
Newark	21,877	\$13,555,111	\$620	22,804	\$21,666,062	\$950	22,909	\$25,457,127	\$1,111	5	88	79
Essex	44,192	\$26,630,632	\$603	45,649	\$42,174,839	\$924	45,519	\$48,919,414	\$1,075	3	84	78
New Jersey	337,388	\$198,982,307	\$590	345,042	\$312,920,154	\$907	340,535	\$361,614,068	\$1,062	1	82	80

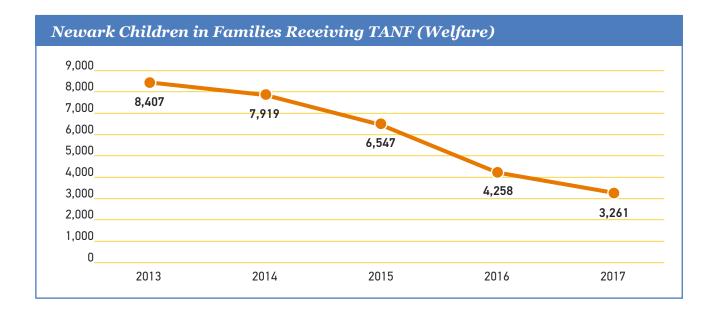


The New Jersey Earned Income Tax Credit

Tax credits are a vital economic support for many low-income working families and an advantage to New Jersey businesses, as many of these dollars are spent in the communities where these families live. The New Jersey State Earned Income Tax Credit (EITC) rewards work and increases take-home pay for families by lowering the amount of taxes owed and, in some instances, providing a refund. The total dollar amount of tax credits issued during the 2016 tax year increased substantially over the amounts in the prior two years. New Jersey's EITC increased from 20 percent of the Federal Earned Income Tax Credit in 2014 to 30 percent in 2015 and 35 percent in 2016, giving the state's working poor a financial boost. Governor Chris Christie signed this increase into law in 2015, after cutting the state EITC from 25 to 20 percent of the federal EITC in 2010.

Children in Families Receiving TANF (Welfare)

	2013	2014	2015	2016	2017	% Change 13-17
Newark	8,407	7,919	6,547	4,258	3,261	-61
Essex	12,738	11,949	9,668	6,442	4,650	-63
New Jersey	64,379	58,948	48,899	36,218	28,458	-56



What is TANF?

The Temporary Assistance for Needy Families (TANF) program, more commonly referred to as welfare, provides cash assistance to needy families through a federally funded block grant given to individual states. The State of New Jersey operates the welfare reform program known as WorkFirst NJ using TANF funds. WorkFirst NJ participants are eligible for the program for a maximum of five years. For more information on WorkFirst NJ, visit http://www.state.nj.us/humanservices/dfd/programs/workfirstnj/.

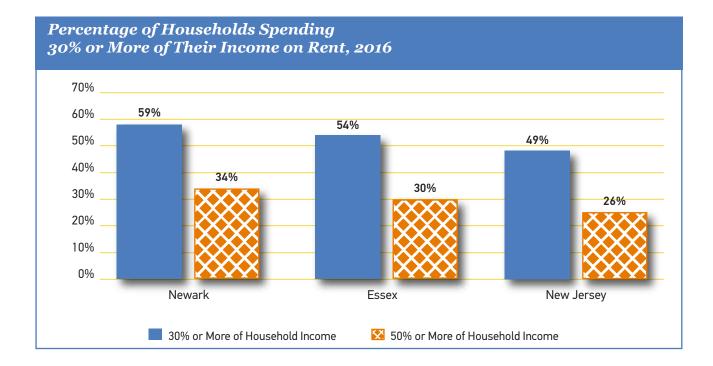
Family Economic Security

Median Rent

	2012	2013	2014	2015	2016	% Change 12-16
Newark	\$927	\$934	\$981	\$978	\$1,013	9
Essex	\$999	\$1,034	\$1,077	\$1,075	\$1,093	9
New Jersey	\$1,148	\$1,171	\$1,202	\$1,214	\$1,244	8

Percentage of Households Spending 30% or More of Their Income on Rent

	2012	2013	2014	2015	2016	% Change 12-16
Newark	56	55	57	62	59	5
Essex	54	53	53	56	54	0
New Jersey	51	51	50	50	49	-4





When Are Housing Costs Too High?

According to the U.S. Department of Housing and Urban Development (HUD), a family paying more than 30 percent of their earnings on housing costs is spending too much on their rent or mortgage (Visit: https://portal.hud.gov/hudportal/HUD?src =/program offices/comm planning/affordablehousing/). When a family spends too much money on rent, they have less to spend on other necessities, such as food or transportation. The 30 percent of income standard has been in use since the 1930s.1 In 2016, 59 percent of Newark families spent a significant portion of their income on rent — far higher than the statewide figure of 49 percent. The 2016 median monthly rent for Newark residents was \$1,013, just \$231 less than the statewide median rent. With a median income of less than \$35,000, Newark families with children face disproportionately high housing costs.

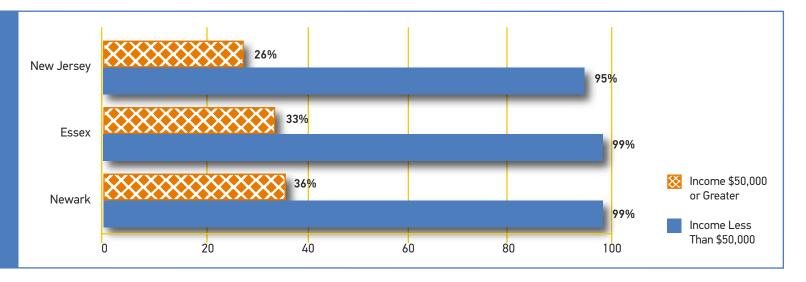
Percentage of Occupied Housing Units That Are Owner-Occupied

	2012	2013	2014	2015	2016	% Change 12-16
Newark	22	22	23	21	21	-5
Essex	45	45	44	42	43	-4
New Jersey	65	64	63	63	63	-3

Percentage of Mortgage Owners Spending More Than 30% of Income on Housing Costs

	2012	2013	2014	2015	2016	% Change 12-16
Newark	72	65	53	62	56	-22
Essex	50	47	46	43	43	-14
New Jersey	44	41	40	39	37	-16

Percentage of
Mortgage Owners
Spending More
than 30% of
Income on Housing,
by Income,
2016



References:

Schwartz, M., Wilson, E. Who Can Afford to Live in a Home?: A look at data from the 2006 American Community Survey. Retrieved March 30, 2017 from https://www.census.gov/hous-ing/census/publications/who-can-afford.pdf.

■ Data Sources and Technical Notes:

Number of Economically Disadvantaged Children, Under Age 18, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B17024.

Percentage of Economically Disadvantaged Children, Under Age 18, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B17024.

Federal Poverty Threshold for a Family of Four, 2016. Threshold for a family of four, with two adults and two children living in poverty. As reported by the U.S. Census Bureau.

Percentage of Children Living in Poverty, Under Age 18, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B17024.

Total Population Living Below the Poverty Level, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B17001.

Households with Children Living Below the Poverty Level, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B17010.

Percentage of Newark Households with and without Children Living Below the Poverty Level, 2016. As reported by the U.S. Census Bureau, American Community Survey chart, B17010.

Median Income of Families with Children, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B19125.

Number Unemployed, 2013–2017. U.S. Department of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics. The Bureau of Labor Statistics defines an unemployed person as someone who does not have a job, has actively looked for work in the prior 4 weeks, and is currently available for work. Numbers are not seasonally adjusted and are annual averages for 2013–2016; 2017 data are preliminary as of November. Please note that data reported in previous Newark Kids Count reports have been updated to reflect revised inputs, re-estimation and new statewide controls, per the Bureau of Labor Statistics.

Unemployment Rate, 2012-2016. U.S. Department of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics. Rates are not seasonally adjusted and are annual averages for 2012-2015; 2016 data are preliminary as of November. Please note that data reported in previous Newark Kids Count reports have been updated to reflect revised inputs, re-estimation and new statewide controls, per the Bureau of Labor Statistics.

Federal Earned Income Tax Credits (EITC), 2011-2015. Number of New Jersey Taxpayers claiming a federal EITC and average claim, as reported by the U.S. Internal Revenue Service.

N.J. Earned Income Tax Credits (EITC), All Recipients, 2014-2016. Number of New Jersey Taxpayers receiving a state EITC credit, total amount of EITC credits issued and average credit amount, as reported by the N.J. Department of Treasury.

N.J. Earned Income Tax Credits (EITC), Recipients with at Least 1
Dependent Under Age 19, 2014-2016. Number of New Jersey taxpayers with at least one dependent under age 19 receiving a state EITC credit, total amount of EITC credits issued and average credit amount, as reported by the N.J. Department of Treasury.

Children in Families Receiving TANF (Welfare), 2013-2017. As reported by the N.J. Department of Human Services, Division of Family Development. Data are from June of each year.

Median Rent, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B25064.

Percentage of Households Spending More than 30% of Their Income on Rent, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart, B25070.

Percentage of Occupied Housing Units that are Owner-Occupied, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart DP-04: Selected Housing Characteristics.

Percentage of Mortgage Owners Spending More than 30 Percent of Income on Housing Costs, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart DP-04: Selected Housing Characteristics.

Percentage of Mortgage Owners Spending More than 30 Percent of Income on Housing, by Income, 2016. As reported by the U.S. Census Bureau, American Community Survey chart B25101.



Section 3

Food Insecurity

Children Receivin	ng NJ SNAP (fo	rmerly Fo	od Stamps	;)		
	2013	2014	2015	2016	2017	% Change 13-17
Newark	34,215	35,612	33,390	34,532	31,573	-8
Essex	64,362	64,464	62,064	62,327	55,898	-13
New Jersey	419,410	417,044	415,927	406,259	373,920	-11

Individuals E	nrolled in W	IC							
		2014	2015		2016		2017		
Newark	1	2,849	12,889		12,709	12	2,137		
Essex	2	2,564	22,248		21,825	20),792		
New Jersey	18	0,154	178,852		171,530	163	3,305		
WIC Reported	d Participant	2014		2015			2016		2017
	#	%	#	%		#	%	#	%
Newark	11,823	92	12,162	94	11	,533	91	10,707	88
Essex	20,583	91	20,555	92	19	,620	90	18,311	88
New Jersey	166,945	93	161,558	90	154	,612	90	146,416	90

What are SNAP and WIC?

The Supplemental Nutrition Assistance Program (SNAP) is the largest food safety net program in the United States, providing low-income families with nutritious food. Eligible New Jersey applicants can have an income of no more than 185 percent of the federal poverty guidelines or \$45,510 for a family of four in 2017. During that same year, more than 30,000 Newark children lived in families receiving SNAP benefits.

The Supplemental Nutrition Program for Women, Infants and Children (WIC) provides supplemental nutritious food to pregnant, breastfeeding and postpartum women, infants and children up to the age of five. WIC is available to New Jersey households with incomes up to 185 percent of the federal poverty guidelines. As of 2017, 12 percent of Newark residents eligible for WIC did not receive these benefits, an increase from the previous three years. For more information on SNAP and WIC, visit https://fns.usda.gov.

What is the Community Eligibility Provision?

The Community Eligibility Provision (CEP) is a federal option that allows high-poverty schools to provide free meals to all students. In exchange, these schools receive increased federal reimbursements and reduced paperwork requirements. Schools have the option of implementing the program district-wide or only within specific schools. In order to be

eligible for CEP, 40 percent or more of enrolled students must be "identified students" — meaning they already qualify for free school meals through their participation in programs like TANF or SNAP or because they are homeless or in foster care.

School Breakfast Participation, 2016-17

School District	# of Students Eligible for Free/Reduced-Price Breakfast	Eligible Students as % of Total Enrollment	% Eligible Students Served Breakfast
Newark Public Schools	28,466	79	67
Discovery Charter School	105	93	90
Great Oaks Legacy Charter School***	1,154	89	47
Lady Liberty Academy Charter School**	429	96	69
Maria L. Varisco-Rogers Charter School	383	71	58
Marion P. Thomas Charter School	1,199	90	27
Merit Preparatory Charter School**	336	88	92
New Horizons Community Charter School**	465	97	51
Newark Educators Charter School	249	84	48
Newark Prep Charter School**	429	100	11
North Star Academy	3,901	87	29
Paulo Freire Charter School	145	54	12
People's Preparatory Charter High School**	364	96	15
Philip's Academy Charter School	162	43	14
Robert Treat Academy Charter School	508	74	18
Roseville Community Charter School**	277	88	56
Team Academy Charter School	3,253	88	60
The Gray Charter School	227	65	13
University Heights Charter School**	605	87	29

^{**}Indicates full participation in the Community Eligibility Provision (CEP).

Note: Supplemental data for Discovery Charter School, Great Oaks Legacy Charter School and People's Preparatory Charter High School came directly from school officials. The 2016-17 school year was the last operational year for Merit Preparatory Charter School, Newark Prep Charter School and Paulo Freire Charter School.

Data Sources and Technical Notes:

Children Receiving N.J. SNAP (formerly Food Stamps), 2013-2017. As reported by the N.J. Department of Human Services, Division of Family Development. Data are from June of each year.

Individuals Enrolled in WIC, 2014-2017. Number of women, infants and children enrolled in the WIC program, which include healthcare referrals, immunizations screenings, nutrition counseling and a monthly food stipend. As reported by the N.J. Department of Health for the quarter ending June 30th of each year.

WIC Reported Participants, 2014-2017. The number and percentage of women, infants and children receiving nutritional benefits through WIC. As reported by the N.J. Department of Health for the quarter ending June 30th of each year.

School Breakfast Participation, 2016-17. The number of students eligible, or qualifying, for a free or reduced-price breakfast as well as the percentage eligible out of total enrollment as reported by the N.J. Department of Education. Enrollment Data. Percentage eligible students served breakfast represents the average daily number of students receiving a f ree or reduced-price breakfast over the total number of eligible students. Average daily number of students receiving a free or reduced price breakfast obtained from the N.J. Department of Agriculture as of April 2017. Data account for participation in the CEP program in which all enrolled students are eligible for a free breakfast or lunch. Supplemental data for Discovery Charter School, Great Oaks Legacy Charter School and People's Preparatory Charter High School came directly from school officials. The 2016-17 school year was the last operational vear for Merit Preparatory Charter School, Newark Prep Charter School and Paulo Freire Charter School.

^{***}Indicates partial participation in the Community Eligibility Provision (CEP).

Section 4

Child Health

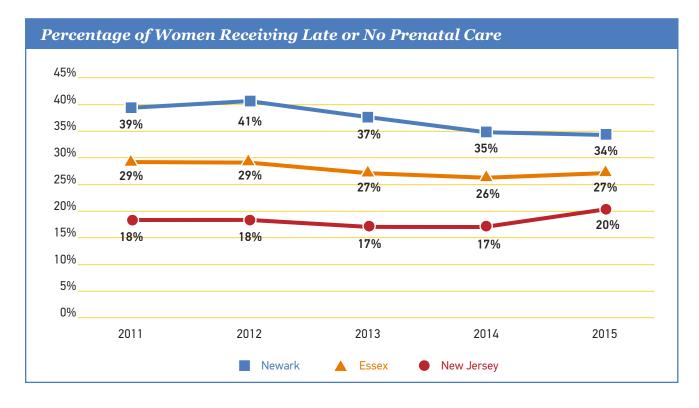


Infant Health

Healthy starts for Newark infants begin with quality prenatal care early in a mother's pregnancy. Women who receive late prenatal care—or who do not receive prenatal care entirely—expose their babies to a greater chance of health problems later in life. Newark moms have made some strides in this area since 2011, with the percentage of births to women receiving late or no prenatal care dropping from 39 percent to 34 percent. However, a higher percentage of Newark moms receive late or no prenatal care than mothers within Essex County or New Jersey overall.

Women Receiving Late or No Prenatal Care

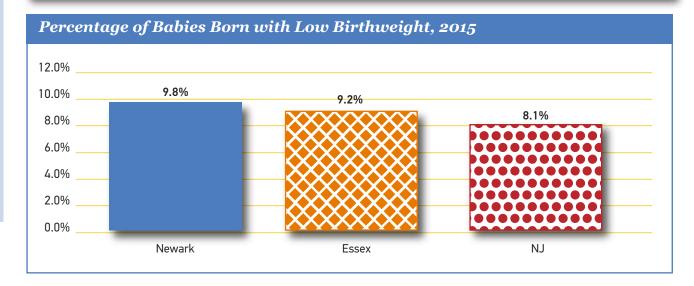
	2011	2012	2013	2014	2015	% Change 11-15
Newark	1,687	1,768	1,549	1,457	1,448	-14
Essex	3,100	3,065	2,714	2,647	2,783	-10
New Jersey	19,127	18,226	17,079	17,117	20,506	7



What is a Low Birthweight?

A low birthweight baby is any infant born weighing less than 2,500 grams, or roughly 5.5 pounds. Low birthweight babies may be more likely to develop certain health problems, such as respiratory distress syndrome, than infants born with normal birthweights. Long term, low birthweight babies may be at a greater risk of developing chronic conditions such as diabetes. In 2015, 9.8 percent of Newark babies were born with low birthweights, compared to 8.1 percent of babies born statewide—this trend has remained consistent since 2011.

Babies Born with	Low Birthweigi	hts				
	2011	2012	2013	2014	2015	% Change 11-15
Newark	456	428	443	430	414	-9
Essex	1,064	963	983	990	950	-11
New Jersey	8,901	8,447	8,445	8,249	8,241	-7



Infant Mortality		2011		2012		2013		2014		2015	% Change 11-15
	#	Rate**	#								
Newark	30	6.9	20	4.6	36	8.6	48	11.6	32	7.5	7
Essex	61	5.8	50	4.8	65	6.4	73	7.1	64	6.2	5
New Jersey	528	5.0	454	4.4	464	4.5	455	4.4	487	4.8	-8

^{**}Rate is the number of infant deaths per 1,000 live births.

What is New Jersey's Child Fatality and Near Fatality Review Board?

The New Jersey Child Fatality and Near Fatality Review Board (CFNFRB) was formed in 1997 through the New Jersey Comprehensive Child Abuse Prevention and Treatment Act in an effort to determine the causes of and ways to prevent child deaths and near deaths. The board consists of six different teams. each with their own sets of responsibilities and areas of focus. Team members come from a variety of backgrounds, including law enforcement, medicine, education and the non-profit sector. The board conducts in-depth reviews of select child death cases, such as when the cause of death may be a result of abuse or neglect or if the cause is undetermined. For more information on the CFNFRB and to review their annual reports, visit http://www.nj.gov/dcf/ providers/boards/fatality/.

Child Deaths (Ages 1-14)

	2011	2012	2013	2014	2015
Newark	14	14	13	12	12
Essex	28	26	26	27	25
New Jersey	203	196	182	202	191

Infants with Neon	natal Abstinen	ce Syndro	ome		
	2011	2012	2013	2014	2015
Newark	40	49	35	32	43
Essex	58	62	57	44	60
New Jersey	639	667	692	745	824

What is Neonatal Abstinence Syndrome?

Neonatal Abstinence Syndrome (NAS) occurs when an infant is exposed prenatally to drugs. Most babies develop NAS as a result of a mother who used opioids while still pregnant, although other types of drugs such as sleeping pills and antidepressants can also lead to NAS.² Because opioid-exposed infants are more likely to be born with a low birthweight or suffer from seizures, they tend to remain at the hospital for a prolonged period after they are born.³ Other signs and symptoms of NAS include fevers, irritability, a distinct high pitch wail and a tendency to gain weight more slowly than infants without NAS.⁴

In 2015, 43 infants in Newark suffered from Neonatal Abstinence Syndrome, more than two-thirds of Essex County's cases.

Asthma Admissio	ns to the Hospit	tal (Ages c)-1 <i>7</i>)			
	2011	2012	2013	2014	2015	% Change 11-15
Newark	406	333	234	272	264	-35
Essex	719	623	470	492	453	-37
New Jersey	3,918	4,139	3,684	3,747	2,896	-26
Acthma Palatad	Emanganau Poo	m Vicite (A a a a a a a a a a a a a a a a a a a a			
Asthma-Related I	Emergency Roo		Ages 0-17)			
Asthma-Related I	Emergency Root	m Visits (2 2012	Ages 0-17)	2014	2015	% Change 11-15
Asthma-Related I				2014 1,497	2015 1,592	% Change 11-15
	2011	2012	2013			-

Asthma-Related Admissions to the Hospital vs. Emergency Room Visits: How Do They Differ?

Asthma is a chronic health condition affecting many children in the city of Newark. Medication and preventive care can effectively manage asthma, but severe symptoms may require care at a hospital—by visiting the emergency room, or in serious cases, being admitted for in-patient care. Asthma-related emergency room visit data do not reflect child

patients who were later admitted to the same hospital for in-patient care. Since 2011, the number of asthma-related hospital admissions for children under age 18 has declined by 35 percent; yet the number of asthma-induced emergency room visits has been more consistent over time.

Child Health

Children Under 18 Without Health Insurance											
		2012		2013		2014		2015		2016	% Change 12-16
	Number	%	Number	%	Number	%	Number	%	Number	%	Number
Newark	4,702	6.5	5,436	7.8	5,365	7.4	4,434	6.5	5,951	9.1	27
Essex	10,374	5.4	11,783	6.2	10,131	5.3	11,613	6.1	10,052	5.3	-3
New Jersey	102,816	5.1	112,117	5.6	91,842	4.6	74,594	3.7	70,039	3.5	-32

What is NJ FamilyCare?

NJ FamilyCare is New Jersey's publicly funded health insurance program, supported by federal Medicaid and Children's Health Insurance Program (CHIP) dollars, state funding and premiums paid for children in families with a household income between 200 and 350 percent of the federal poverty level. Qualified state residents of any age may be eligible for free or low-cost health insurance that covers doctor visits, prescriptions, vision, dental care, mental health and substance use services and hospitalization. For more information, visit http://www.njfamilycare.org.

Children Receiving NJ FamilyCare/Medicaid										
	2013	2014	2015	2016	2017	% Change 13-17				
Newark	54,724	53,728	54,071	53,463	56,985	4				
Essex	97,911	95,291	96,202	94,684	100,738	3				
New Jersey	712,848	708,334	759,360	764,809	772,857	8				

■ Data Sources and Technical Notes:

Women Receiving Late or No Prenatal Care, 2011–2015. Live births for which the mother received late prenatal care (onset in second or third trimester) and no prenatal care, as reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 10, 2017.

Number of Babies Born with Low Birthweight, 2011-2015. The number of babies born weighing less than 2,500 grams as reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 10, 2017.

Percentage of Babies Born with Low Birthweight, 2015. The percentage of babies born weighing less than 2,500 grams out of the total number of live births. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 10, 2017.

Infant Mortality, 2011-2015. The number of infants under one year who died during that year. Rate is the number of infant deaths per 1,000 live births. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Death and Birth Certificate Databases. Data accessed as of October 10, 2017.

Child Deaths (Ages 1-14), 2011-2015. The number of children between ages one and 14 who died during that year, as reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Death Certificate Database. Data accessed as of October 10, 2017.

Infants with Neonatal Abstinence Syndrome, 2011-2015. The number of infants with any listed diagnosis of Neonatal Abstinence Syndrome, represented by ICD-9 codes 779.5 and 760.72. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Discharge Data Collection System. Data accessed as of January 29, 2018.

Asthma Admissions to the Hospital, (Ages 0-17), 2011-2015. Number of New Jersey inpatient hospital discharges with a primary asthma diagnosis for residents 0-17 years of age. Counts do not include out of state hospitalizations for New Jersey residents. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Discharge Data Collection System. Data accessed as of October 13, 2017.

Asthma-Related Emergency Room Visits (Ages 0-17), 2011-2015. Number of New Jersey emergency department discharges with a primary asthma diagnosis for residents 0-17 years of age. Counts do not include out of state hospitalizations for New Jersey residents. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Discharge Data Collection System. Data accessed as of October 13, 2017.

Children Receiving NJ FamilyCare/Medicaid, 2013–2017. As reported by the N.J. Department of Human Services. Data are from March of each year and are point in time snapshots that do not reflect any retroactivity. Includes children under age 18 enrolled in Medicaid, which is available to children living in families earning below 133 percent of the federal poverty level and children enrolled in the SCHIP portion of NJ FamilyCare, which is available to children living in families earning between 134 percent and 350 percent of the federal poverty level. Data have been updated for prior years.

Children Under 18 Without Health Insurance, 2012-2016. As reported by the U.S. Census Bureau, American Community Survey chart B27001.

References:

- March of Dimes. (2014). Low Birthweight. Retrieved January 11, 2017, from http://www.marchofdimes.org/baby/low-birthweight.aspx
- March of Dimes. (2015) Neonatal Abstinence Syndrome (NAS). Retrieved October 16, 2017 from https://www.marchofdimes.org /neonatal-abstinence-syndrome-(nas).aspx
- March of Dimes. (2015) Neonatal Abstinence Syndrome (NAS). Retrieved October 16, 2017 from https://www.marchofdimes.org/neonatal-abstinence-syndrome-(nas).aspx
- Kocherlakota, P. (2014). Neonatal Abstinence Syndrome. Retrieved October 16, 2017 from www.pediatrics.org/ cgi/doi/10.1542/peds.2013-3524.

Child Protection



What is CP&P?

The Division of Child Protection and Permanency (CP&P), formerly the Division of Youth and Family Services (DYFS), operates within the New Jersey Department of Children and Families as the state's child welfare and protection agency. CP&P is responsible for investigating reports of child abuse and neglect and, if necessary, arranging for the child's protection and services for the family. When children cannot remain at home due to safety concerns, CP&P may ask the family court to place the child into foster care and to seek another permanent home for children who cannot be safely reunified with their parent(s) within the timeframes provided by law.

Children Under Child Protection and Permanency (CP&P) Supervision

	2013	2014	2015	2016	2017	% Change 13-17
Newark	4,287	4,186	4,125	3,758	3,960	-8
Essex	6,564	6,598	6,410	5,881	6,216	-5
New Jersey	51,864	51,412	50,792	48,169	47,762	-8

	2013	2014	2015	2016	2017	% Change 13-17
Newark	3,421	3,377	3,289	2,948	3,145	-8
Essex	5,214	5,327	5,180	4,723	5,079	-3
New Jersey	44,234	43,752	43,291	41,044	41,155	-7

	2013	2014	2015	2016	2017	% Change 13-17
Newark	866	809	836	810	815	-6
Essex	1,350	1,271	1,230	1,158	1,137	-16
New Jersey	7,630	7,660	7,501	7,125	6,607	-13



Child Welfare Monitor

New Jersey's child protection system is currently under court supervision, as part of a 2004 agreement under the federal class action lawsuit Charlie and Nadine H. v. Christie. The Center for the Study of Social Policy (CSSP) (http://www.cssp.org) currently serves as the Federal Monitor. As Monitor, CSSP is charged with evaluating how well New Jersey is meeting the performance measures established by the court settlement. The Monitor issues data reports, typically covering six-month periods. The Monitor's reports, which contain more child protection data, can be viewed on the Department of Children and Families' website, http://www.nj.gov/ dcf/about/welfare/federal/. The most recent monitor's report, released on January 11, 2018, showed progress in many areas, and room for improvement in others.

Number of Children Reported for Abuse/Neglect

	2012	2013	2014	2015	2016	% Change 12-16
Newark	5,939	6,047	5,578	5,811	5,834	-2
Essex	10,344	10,479	9,627	10,044	10,123	-2
New Jersey	92,924	94,486	90,135	89,441	88,972	-4

Children with Substantiated/Established Findings of Abuse/Neglect

	2012	2013	2014	2015	2016	% Change 12-16
Newark	680	944	821	664	632	-7
Essex	1,100	1,443	1,305	1,084	1,003	-9
New Jersey	9,250	11,972	11,556	9,397	8,256	-11

Note: Data from 2013 onwards include both substantiated and established findings.

Percentage of Reported Children with Substantiated/Established Findings of Abuse/Neglect

	2012	2013	2014	2015	2016
Newark	11.4	15.6	14.7	11.4	10.8
Essex	10.6	13.8	13.6	10.8	9.9
New Jersey	10.0	12.7	12.8	10.5	9.3

■ Data Sources and Technical Notes:

Children Under Child Protection and Permanency (CP&P) Supervision, 2013–2017. As reported by the N.J. Department of Children and Families. Data are as of June 30 for each year.

Children Receiving In-Home CP&P Services, 2013–2017. As reported by the N.J. Department of Children and Families. Data are as of June 30 for each year.

Children in Out-of-Home CP&P Placement, 2013-2017. As reported by the N.J. Department of Children and Families. Data are as of June 30 for each year.

Number of Children Reported for Abuse/Neglect, 2012–2016. Number of children who were reported for child abuse/neglect. As reported by the N.J. Department of Children and Families for each calendar year.

Children with Substantiated/Established Findings of Abuse/ Neglect, 2012-2016. The number of children found to be victims of child abuse/neglect. As reported by the N.J. Department of Children and Families for each calendar year. In 2013, the N.J. Department of Children and Families added two possible findings of child abuse neglect investigations—"established" and "not established". Previously, investigators could only determine whether reported abuse/neglect was "substantiated" or "unfounded".

Percentage of Reported Children with Substantiated/Established Findings of Abuse/ Neglect, 2012-2016. Based on the number of children found to be substantiated or established victims of child abuse/neglect out of the number of children reported for abuse or neglect. As reported by the N.J. Department of Children and Families. In 2013, the N.J. Department of Children and families added two possible findings of child abuse/neglect investigations—"established" and "not established". Previously, investigators could only determine whether reported abuse/neglect was "substantiated" or "unfounded".

Child Care

Licensed Child Care Centers and Registered Family Child Care Providers: How Do They Differ?

Licensed child care centers and registered family child care providers both offer child care to children under the age of 13. However, there are key differences in the number of children they are permitted to serve and the locations in which they operate. Licensed child care centers serve a minimum of six children and must adhere to state licensing requirements. Registered family child care providers care for a maximum of five children at a time in their own homes. Family child care providers who register voluntarily through New Jersey's Child Care Resource and Referral Agencies are required to meet state regulations primarily related to health and safety concerns. In 2017, an additional requirement was signed into law requiring these providers to undergo fingerprinting and a criminal history background check.

Licensed Child Care Centers									
	2013	2014	2015	2016	2017	% Change 13-17			
Newark	183	173	156	144	139	-24			
Essex	520	505	483	479	448	-14			
New Jersey	4,037	3,987	3,949	3,936	3,803	-6			
Child Care Cente	r Capacity								
Child Care Cente	r Capacity 2013	2014	2015	2016	2017	% Change 13-17			
Child Care Cente	1 0	2014 17,214	2015 17,103	2016 15,357	2017 15,355	% Change 13-17			
	2013								

Child Care Center Capacity Defined

"Child care center capacity" refers to the number of children a center is licensed to serve. This does not mean, however, that a center is necessarily providing services to that same number of children. Typically, the number of children served falls below the center's licensed capacity.

Registered Family Child Care Providers								
	2013	2014	2015	2016	2017	% Change 13-17		
Newark	160	138	163	146	137	-14		
Essex	353	332	291	268	259	-27		
New Jersey	2,120	2,054	2,020	1,922	1,794	-15		

Families Receiving State-Funded Home Visitation Programs

	2014	2015	2016	2017	% Change 14-17	
Newark	299	291	356	347	16	
Essex	615	659	796	711	16	
New Jersey	6,489	6,857	7,096	7,041	9	

New Jersey's Home Visitation Programs

Home visitation is defined as families receiving regularly scheduled visits by either a trained home visitor or a nurse. The state's home visitation programs are designed to help mothers and fathers build healthy environments for their infants and young children by promoting infant and child health, nurturing positive parent-child relationships and linking parents to resources and supports. This service is typically

provided to families facing poverty and other risk factors, with visits starting before or immediately after birth. In 2017, Newark families participating in home visitation programs grew by 16 percent from 2014. A review of home visitation programs has found them to be effective in improving child health and development.¹

■ References:

Sama-Miller, E., Kaers, L., Mraz-Esposito, A., Zukiewicz, M., Avellar, S., Paulsell, D., Del Grosso, P. (2017). Home Visiting Evidence of Effectiveness Review: Executive Summary. Retrieved February 1, 2018 from https://homvee.acf.hhs.gov/homvee.acf.hhs.gov/homvee.acf.hhs.gov/homvee.executive.summary.august.2017.html final 508 compliant.pdf.

■ Data Sources and Technical Notes:

Licensed Child Care Centers, 2013–2017. The number of state licensed child care centers. As reported by the N.J. Department of Children and Families. Data are as of June for each year, 2015 Newark figures are as of November.

Child Care Center Capacity, 2013-2017. The capacity of state licensed child care centers. As reported by the N.J. Department of Children and Families. Data are as of June for each year, 2015 Newark figures are as of November.

Registered Family Child Care Providers, 2013-2017. For 2013, Newark data are reported by Programs for Parents which is designated as the Child Care Resource and Referral Agency for Essex County by the N.J. Department of Human Services, Division of Family Development. All other data are from the N.J. Department of Children and Families and are as of June. Family child care providers comply with state requirements, but operate as independent small businesses.

Families Receiving State-Funded Home Visitation Programs, 2014-2017. As reported by the N.J. Department of Children and Families. Data are as of June for each year and include data for three home visitation programs: Nurse Family Partnership, Healthy Families-TIP Program and Parents and Teachers. This includes only evidence-based programs funded through the N.J. Department of Children and Families. Home visitation is defined as families receiving regularly scheduled visits by either a trained home visitor or a nurse with a bachelor's of science degree in nursing (BSN).

Education



Early Education in Newark

All 3- and 4-year-olds have access to free, full-day, high-quality preschool in Newark. Since 1999 when the existing state-funded preschool program began, tens of thousands of Newark children have benefitted from this strong start. With qualified early learning teachers, small class sizes and a strong curriculum, New Jersey's nationally recognized preschool model helps young children attain the skills necessary to be successful in kindergarten and beyond. To meet the local needs of families, Newark uses a "mixed-delivery system," meaning young children can attend preschool through Newark Public Schools, Head Start or a qualified private child care center in their neighborhoods.

Enrollment has trended up: in 2017, more than 7,000 children living in the city of Newark benefitted from state-funded preschool.

State-Funded Preschool Enrollment

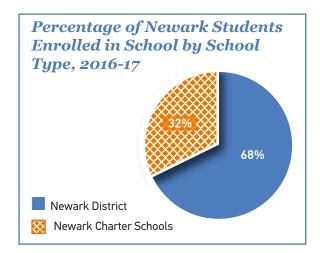
	2012-13	2013-14	2014-15	2015-16	2016-17	% Change 13-17
Newark	6,404	6,541	6,180	6,821	7,024	10
Essex	9,961	10,017	9,664	10,206	10,484	5
New Jersey	51,860	51,924	51,232	51,934	51,371	-1

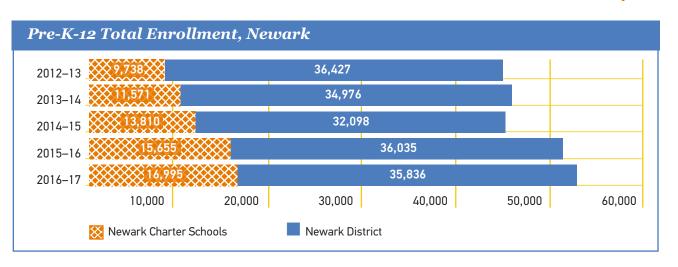
Kindergarten Enrollment

	2012-13	2013-14	2014-15	2015-16	2016-17	% Change 13-17
Newark District	2,767	1,505	1,137	2,508	2,423	-12
Newark Charter Schools	1,147	1,373	1,562	1,606	1,744	52
Newark Total	3,914	2,878	2,699	4,114	4,167	6
Essex	10,236	8,828	8,876	9,980	9,995	-2
New Jersey	95,101	92,018	91,570	91,703	90,740	-5

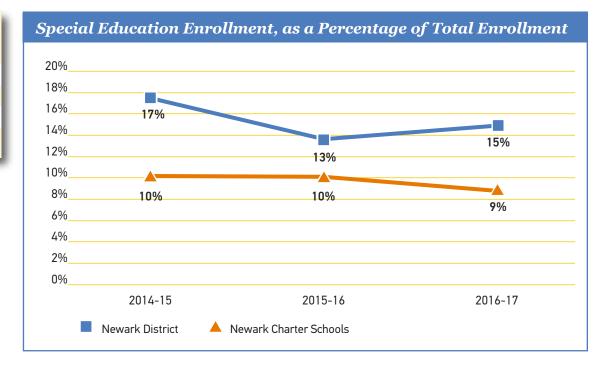
Pre-K-12 Total Enrollment, Newark

	2012-13	2013-14	2014-15	2015-16	2016-17	% Change 13-17
Newark District	36,427	34,976	32,098	36,035	35,836	-2
Newark Charter Schools	9,738	11,571	13,810	15,655	16,995	75
Newark Total	46,165	46,547	45,908	51,690	52,831	14





Special Education Enrollment, Ages 3-21								
	2014-15	2015-16	2016-17					
Newark District	5,725	5,400	5,812					
Newark Charter Schools	1,339	1,511	1,561					
Newark Total	7,064	6,911	7,373					
Note: Includes public and non-public students								

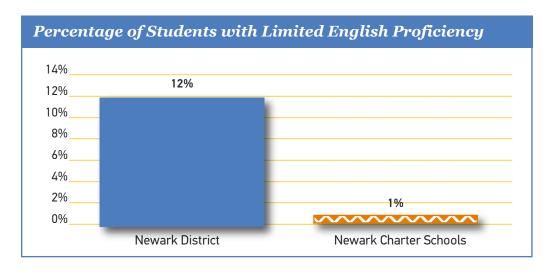


7 Education

Number of Homeless Students								
	2013-14	2014-15	2015-16	2016-17	% Change 14-17			
Newark Public Schools	585	664	580	683	17			
Note: Data are cumulative as of June of each year.								

What is a Homeless Student?

A homeless student is defined as any youth lacking a regular and adequate nighttime residence. Included in this definition is a broad set of living arrangements — children living in hotels or motels, public places or sharing housing with other families due to a lack of suitable housing or financial stability. This definition was provided by the McKinney-Vento Homeless Assistance Act and amended through the Every Student Succeeds Act (ESSA) in 2016. Under the ESSA amendment, children awaiting foster care placement are no longer defined as homeless. Legally, the state is required to provide a number of services to homeless children including the appointment of a homeless student liaison who helps students and parents with enrollment, transportation arrangements and accessing services. For more information on homeless students, visit http://nche.ed.gov/ or for more information on homeless students at the state level, visit http://www.state.nj.us/education/students/homeless/

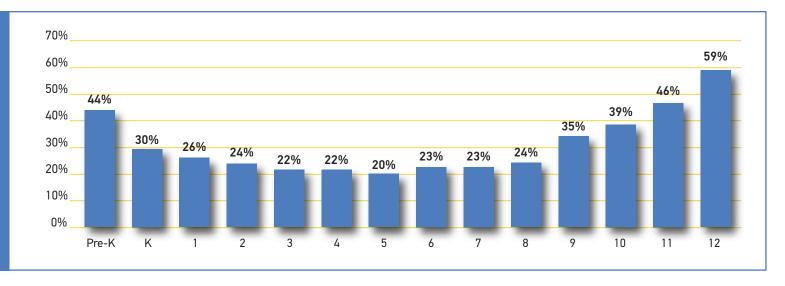


Students with Limited English Proficiency					
	2016-17				
Newark District	4,221				
Newark Charter Schools	192				
Newark Total	4,413				
Essex	7,527				
New Jersey	72,257				

When is a Student "Limited English Proficient?"

The N.J. Department of Education uses the term limited English proficient (LEP) to describe students whose first language is other than English or who has difficulty reading, writing and understanding English. The State of New Jersey administers an annual survey to assess the languages spoken in students' homes in an effort to identify LEP students. Children with limited English proficiency may require additional services to allow them to be successful in the district's academic program. For the 2016-17 school year, 4,221 LEP students attended Newark Public Schools, compared to 192 LEP students in the city's charter schools.

Percentage of NPS Students Chronically Absent by Grade, 2016-17



Chronic Absenteeism in Newark

Newark high schools play an essential role in building the next generation of young minds for college and career readiness. Yet, high achievement may be unattainable if students do not attend class regularly. In grades K-8, the highest rate of chronically absent students occurred in kindergarten, with 30 percent of students missing too much school. Preschool students also showed high rates of chronic absenteeism at 44 percent. Among high school students, ninth graders had the lowest rate of chronic

absenteeism, with 35 percent of students absent. High school seniors posted a 59 percent chronic absenteeism rate, the highest out of all grades and nearly double the kindergarten absenteeism rate. Students who miss 10 percent of school days (about two days a month) are more likely to fall behind in school and not graduate on time. For more information on chronic absenteeism in Newark's high schools, read ACNJ's *Showing Up Matters: A Look at Absenteeism Inside Newark's High Schools* on our website, acnj.org.

School Violence Incidents					2012-13					2015-16
	Violence	Vandalism	Weapons	Substances	HIB*	Violence	Vandalism	Weapons	Substances	HIB*
Newark District	197	81	39	30	172	194	58	35	37	72
Newark Charter Schools	100	11	10	4	63	346	32	18	26	30
Newark Total	297	92	49	34	235	540	90	53	63	102
Essex	814	190	127	197	500	1,026	177	118	236	744
New Jersey	7,895	1,751	1,047	3,358	7,740	8,261	1,423	1,000	3,010	5,995
*Harassment, Intimidation and Bullying incid	lents									

Newark District English Language Arts PARCC Results

					2015-16						2016-17
	% Met/ Exceeded Expectations	# Registered	# Tested	# Not Tested	% Not Tested		% Met/ Exceeded Expectations	# Registered	# Tested	# Not Tested	% Not Tested
3rd Grade											
Newark District	24	2,796	2,714	82	3		27	2,727	2,659	68	2
New Jersey	48	102,560	99,046	3,514	3		50	101,159	98,884	2,275	2
4th Grade											
Newark District	27	2,780	2,698	82	3		30	2,731	2,673	58	2
New Jersey	54	101,013	96,823	4,190	4		56	103,051	100,288	2,763	3
7th Grade											
Newark District	32	2,491	2,362	129	5		36	2,503	2,431	72	3
New Jersey	56	101,995	95,979	6,016	6		59	102,648	98,926	3,722	4
10th Grade											
Newark District	26	2,117	1,697	420	20		27	2,240	1,926	314	14
New Jersey	44	97,547	84,921	12,626	13		46	97,244	85,598	11,646	12
11th Grade											
Newark District	30	1,968	1,598	370	19	•	28	2,139	1,675	464	22
New Jersey	40	89,371	68,876	20,495	23		38	88,594	68,568	20,026	23

Newark District Math PARCC Results

					2015-16						2016-17
	% Met/ Exceeded Expectations	# Registered	# Tested	# Not Tested	% Not Tested		% Met/ Exceeded Expectations	# Registered	# Tested	# Not Tested	% Not Tested
3rd Grade						_					
Newark District	28	2,857	2,750	107	4		35	2,812	2,734	78	3
New Jersey	52	103,393	99,847	3,546	3		53	102,212	99,991	2,221	2
4th Grade											
Newark District	23	2,850	2,760	90	3		26	2,816	2,744	72	3
New Jersey	47	101,832	97,620	4,212	4		47	104,071	101,323	2,748	3
7th Grade						_					
Newark District	17	2,564	2,447	117	5		20	2,597	2,515	82	3
New Jersey	39	99,030	93,114	5,916	6		40	99,701	95,955	3,746	4
Algebra I											
Newark District	25	2,471	2,050	421	17		21	2,347	2,165	182	8
New Jersey	41	115,282	105,998	9,284	8		42*	115,108	110,215	4,893	4
Geometry											
Newark District	6	1,676	1,322	354	21		10	1,970	1,814	156	8
New Jersey	27	95,821	84,549	11,272	12		30	96,701	88,079	8,622	9
Algebra II						_					
Newark District	7	2,047	1,539	508	25		7	2,039	1,706	333	16
New Jersey	25	92,404	74,549	17,855	19		27	92,835	74,931	17,904	19

 $^{^*}$ This figure reflects the % Met/Exceeded Expectations reported on the N.J. Department of Education's state assessment report PDFs.

Newark Charter English Language Arts PARCC Results

		2015-16		2016-17
	% Met/ Exceeded Expectations	# Tested	% Met/ Exceeded Expectations	# Tested
3rd Grade				
Newark Charter	47	1,375	51	1,501
New Jersey	48	99,046	50	98,884
4th Grade				
Newark Charter	55	1,197	57	1,395
New Jersey	54	96,823	56	100,288
7th Grade				
Newark Charter	59	1,131	40	1,263
New Jersey	56	95,979	59	98,926
10th Grade				
Newark Charter	34	694	37	862
New Jersey	44	84,921	46	85,598
11th Grade				
Newark Charter	47	573	47	590
New Jersey	40	68,876	38	68,568

^{*}Select charter schools have been suppressed and therefore are not included in weighted averages

Newark Charter Math PARCC Results

		2015-16		2016-17
	% Met/ Exceeded Expectations	# Tested	% Met/ Exceeded Expectations	# Tested
3rd Grade				
Newark Charter	54	1,375	64	1,415
New Jersey	52	99,847	53	99,991
4th Grade				
Newark Charter	47	1,194	45	1,396
New Jersey	47	97,620	47	101,323
7th Grade				
Newark Charter	43	1,131	42	1,191
New Jersey	39	93,114	40	95,955
Algebra I				
Newark Charter	39	1,133	32	1,631
New Jersey	41	105,998	42**	110,215
Geometry				
Newark Charter	15	690	21	861
New Jersey	27	84,549	30	88,079
Algebra II				
Newark Charter	7	431	10	499
New Jersey	25	74,549	27	74,931
		1.1		

^{*}Select charter schools have been suppressed and therefore are not included in weighted averages

^{**}This figure reflects the % Met/Exceeded Expectations reported on the N.J. Department of Education's state assessment report PDFs.

High School Graduation Rates						
	2011-12	2012-13	2013-14	2014-15	2015-16	
Newark District	69	68	69	70	73	
New Jersey	86	88	89	90	90	

Average SAT Score, by High School

	Math	Critical Reading	2014-15 Participation Rate	Math	Critical Reading	2015-16 Participation Rate
American History High School	426	395	100	446	451	67
Arts High School	397	401	90	460	473	75
Bard Early College High School	453	436	94	493	494	71
Barringer Arts High School	326	312	100	372	376	76
Central High School	341	330	81	387	392	47
East Side High School	404	374	62	426	419	48
Fast Track Success Academy	N/A	N/A	N/A	S	S	9
Malcolm X Shabazz High School	353	343	53	392	398	55
Marion P. Thomas Charter School	340	341	68	402	422	44
Newark Prep Charter School	N/A	N/A	N/A	433	446	100
Newark Vocational High School	344	340	18	443	456	13
North Star Academy Charter School	525	492	100	571	571	82
People's Preparatory Charter School	395	373	99	431	452	28
Paulo Freire Charter School	N/A	N/A	N/A	417	438	72
Science Park High School	586	530	100	590	570	87
Technology High School	462	415	93	486	478	70
University High School	448	421	89	481	466	67
Weequahic High School	368	355	46	380	389	46
New Jersey Average	518	496	79	538	537	58

Note: S indicates that data does not meet suppression rules; N/A indicates data unavailable. Newark Vocational High School and Newark Early College High School are both housed within West Side High.

7 Education

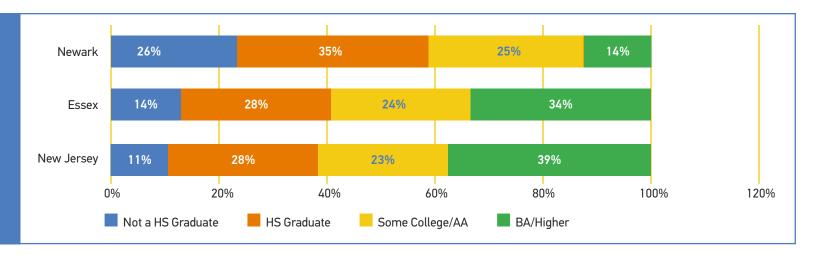
Percentage of Graduates Enrolled in a Post-Secondary Institution, 2015-16*

	% Schoolwide	% Economically Disadvantaged	% Students with Disabilities
American History High School	74	74	S
Arts High School	75	76	S
Bard Early College High School	76	72	S
Barringer Arts High School	48	51	S
Barringer S.T.E.A.M	46	46	24
Central High School	51	49	25
East Side High School	57	59	51
Fast Track Success Academy	S	S	S
Malcom X Shabazz High School	36	36	26
Marion P. Thomas Charter School	55	53	S
Newark Early College High School	58	60	S
Newark Leadership Academy	S	S	S
Newark Vocational High School	36	36	27
North Star Academy Charter School	94	96	S
People's Preparatory Charter School	79	79	S
Science Park High School	82	85	S
TEAM Academy Charter School	83	84	S
Technology High School	78	76	S
University High School	78	73	S
Weequahic High School	37	36	S

^{*} Post-secondary institutions include 2-year or 4-year institutions.

Note: S indicates that data does not meet suppression rules. Newark Vocational High School and Newark Early College High School are both housed within West Side High.

Highest Education Levels for People Ages 25+, Newark vs. Essex vs. NJ, 2016



Data Sources and Technical Notes:

State-Funded Preschool Enrollments, 2012-13 through 2016-17. Number of three- and four-year-old students enrolled in half- and full-day New Jersey Department of Education-approved preschools, operated both in-district and in community centers, as reported by the N.J. Department of Education. Excludes children enrolled in Head Start or other federally-funded programs that do not receive any state aid.

Kindergarten Enrollment, 2012-13 through 2016-17. As reported by the N.J. Department of Education, Enrollment Data. Includes both full and half day programs. Data include both traditional district and charter schools.

Pre-K – 12 Total Enrollment, Newark, 2012-13 through 2016-17. As reported by the N.J. Department of Education. Enrollment Data. Data include both traditional district and charter schools.

Special Education Enrollment, Ages 3-21, 2014-15 through 2016-17. As reported by the N.J. Department of Education. Number of students who are classified, ages 3-21. Data include both traditional district schools and charter schools and public and non-public students. Charter totals may be higher due to suppression of districts with fewer than 10 students.

Special Education Enrollment, as a Percentage of Total Enrollment, 2014-15 through 2016-17. As reported by the N.J. Department of Education. Percentage of total enrollment of students who are classified, ages 3-21. Special Education counts include both traditional district schools and charter schools and public and non-public students. Charter figures may differ due to suppression of districts with fewer than 10 students. Total enrollment data based on October general education enrollment data for each year.

Number of Homeless Students, 2013-14 through 2016-17. As reported by Newark Public Schools. Data are as of June for each school year listed and do not include charter schools. Represents any student identified as homeless during the given school year.

Students with Limited English Proficiency, 2016–17. As reported by the N.J. Department of Education, October enrollment counts.

Percentage of Students with Limited English Proficiency, 2016-17. As reported by the N.J. Department of Education, October enrollment counts.

Percentage of NPS Students Chronically Absent by Grade, 2016-17. Data for grades K-12. As reported by Newark Public Schools, June 2017 Month Attendance Report. Data do not include charter schools.

School Violence Incidents, 2012-13, 2015-16. As reported by the NJ Department of Education, Commissioner of Education's Report on Violence, Vandalism and Substance Abuse in New Jersey Public Schools. More than one type of offense may be reported for a single incident.

Newark English Language Arts and Math PARCC Results, Grades 3, 4, 7, 10, 11, and Algebra I, Geometry, and Algebra II Math Exams, 2015-16 through 2016-17. As reported by the N.J. Department of Education, New Jersey Statewide Assessment Reports for each year. Includes general education students, special education students, and foreign-language students. Data include both traditional district as well as charter schools. Percentage meeting or exceeding standards are those students scoring Level 4 or Level 5. Data suppressed in some instances to suppressed students' confidentiality. The number of untested students refers to all students who did not receive a valid score. Charter data are averages and or totals from individual charter schools; charter data are weighted and calculated by ACNJ. Due to suppressed data in some charter schools, the percent not tested was not calculated.

High School Graduation Rates, 2011-12 through 2015-16. As reported by the N.J. Department of Education, Adjusted Cohort Graduation Rate Data. Data are not available prior to the 2010-11 school year. In 2011 the Department of Education changed the way that graduation rates are calculated to the 4-year adjusted cohort graduation rate.

Average SAT Score, by High School, 2014-15 through 2015-16. As reported by the N.J. Department of Education, New Jersey School Performance Report data.

Percentage of Graduates Enrolled in a Post-Secondary Institution, 2015-16. As reported by the N.J. Department of Education, N.J. School Performance Report Data. These data reflect the percentage of the 2014 high school graduation class that were enrolled in post-secondary institutions in October 2016. The data are pulled from the National Student Clearinghouse. Students who enroll in post-secondary institutions outside of the United States are not included. Data for some categories unavailable.

Highest Education Level for People Ages 25+, Newark, Essex, N.J., 2016. As reported by the U.S. Census Bureau, American Community Survey chart B15002.

Teens

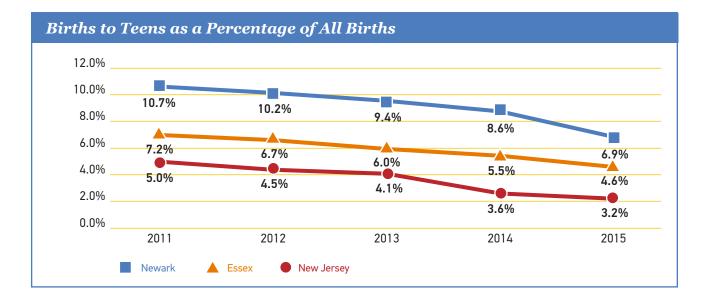


Data Trends for Teens

Consistent with trends from previous years, the most recent data show a decline in the number of teen births, fewer Newark youth diagnosed with a sexually transmitted infection and fewer juvenile arrests. Juvenile admissions to detention continue to decrease, with 2016 admissions in Newark accounting for roughly half of what they were in 2012. Yet, Newark admissions to juvenile detention continue to comprise more than half of Essex County's annual juvenile detention admissions.

Births to Teens (Ages 15-19)

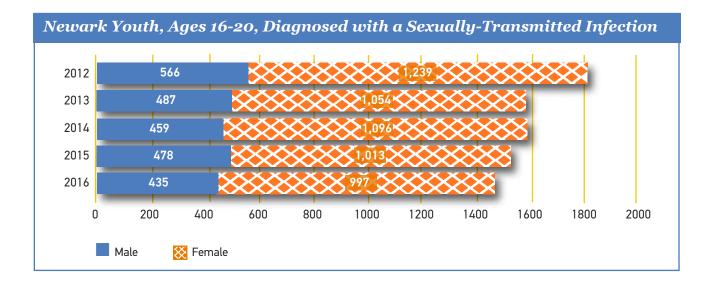
	2011	2012	2013	2014	2015	% Change 11-15
Newark	464	446	394	358	292	-37
Essex	757	700	617	559	474	-37
New Jersey	5,285	4,719	4,216	3,688	3,261	-38



Teen Deaths (Ages 15-19)							
	2011	2012	2013	2014	2015		
Newark	11	15	13	17	12		
Essex	23	27	26	33	19		
New Jersey	214	213	193	199	184		

Youth Ages 16-20 Diagnosed with a Sexually Transmitted Infection, By Gender

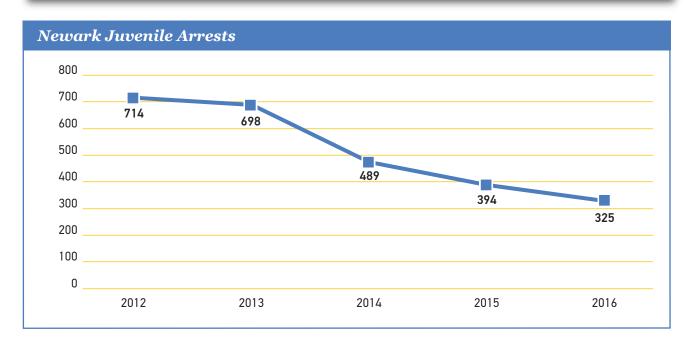
		2012		2013		2014		2015		2016	% Chai	nge 12-16
	Male	Female	Male	Female								
Newark	566	1,239	487	1,054	459	1,096	478	1,013	435	997	-23	-20
Essex	856	2,078	776	1,767	744	1,790	798	1,814	749	1,831	-13	-12
New Jersey	3,004	9,773	2,943	9,340	2,921	8,990	3,230	9,124	3,525	10,098	17	3



The New Jersey Youth Resource Spot

The Office of Adolescent Services, within the N.J. Department of Children and Families, has a website specially geared for youth and those who work with them, the New Jersey Youth Resource Spot (http://www.njyrs.org/). Youth and stakeholders can easily learn about relevant policy, resources in their communities and CP&P services for which they may be eligible. Visit the site to learn more.

Juvenile Arrests	2012	2013	2014	2015	2016*	% Change 12-16	
Newark	714	698	489	394	325	-54	
Essex	2,721	2,622	2,440	1,942	N/A	N/A	
New Jersey	29,961	24,795	24,306	21,411	N/A	N/A	
* Please note that 2016 data only reported for Newark.							



Newark Annual Admissions to Detention

	2012	2013	2014	2015	2016	% Change 12-16
Total Admissions:	540	555	429	420	276	-49
By Gender:						
Males	485	486	377	379	248	-49
Females	55	69	52	41	28	-49
By Race:						
African American	481	495	381	390	250	-48
Caucasian	0	1	1	1	1	N/A
Hispanic	59	59	47	29	25	-58
Newark's Percentage Essex Admissions	of 62	63	57	60	52	

Essex County Annual Admissions to Detention

2012	2013	2014	2015	2016	% Change 12-16
874	882	753	703	529	-39

What is the Juvenile Detention Alternatives Initiative?

New Jersey's Juvenile Detention Alternatives Initiative (JDAI), was formed in 2004 with the support and leadership of the Annie E. Casey Foundation and is managed by the state's Juvenile Justice Commission (JJC). Since the program's inception, JDAI has resulted in a dramatic decrease in detention populations throughout New Jersey without risk to public safety. JDAI fosters a fundamental shift in the way law enforcement, prosecutors, judges and public defenders handle juvenile crime cases by moving the focus from locking kids up to returning them to their communities and addressing the issues that led to criminal behavior. Detention centers are reserved only for more serious youth offenders. JDAI has helped reduce costs considerably, due to the reduction in the daily population in detention and subsequent closure of many county detention centers. To learn more about the JJC and JDAI, visit http://www.nj.gov/oag/jjc/index.html.

■ Data Sources and Technical Notes:

Births to Teens, Ages 15-19, 2011-2015. The number of births to teenagers as reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 10, 2017.

Births to Teens as a Percentage of All Births, 2011-2015. As reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Birth Certificate Database. Data accessed as of October 10, 2017.

Teen Deaths, Ages 15-19, 2011-2015. The number of teenagers who died in that year, as reported by the N.J. Department of Health, New Jersey State Health Assessment Data, New Jersey Death Certificate Database. Data accessed as of October 10, 2017.

Youth Ages 16-20 Diagnosed with a Sexually-Transmitted Infection, by Gender, 2012-2016, (Chart and Table). Youth under age 21 diagnosed with chlamydia, gonorrhea or syphilis as reported by the N.J. Department of Health, Sexually-Transmitted Disease Control Program. Does not include youth whose gender was unknown or unreported.

Juvenile Arrests, 2012-2016. Newark data as reported by the Newark Police Department. Essex and New Jersey data as reported by the N.J. Department of Law and Public Safety, Division of State Police, Uniform Crime Report. 2016 data for Essex and New Jersey were not yet available.

Newark Annual Admissions to Detention, 2012-2016. The number of juveniles admitted to detention. As reported by the New Jersey Juvenile Justice Commission.

Essex County Annual Admissions to Detention, 2012-2016. As reported by the New Jersey Juvenile Justice Commission.



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