

2020 Home Visiting Needs Assessment Race-Ethnicity Brief

Findings from the Race-Ethnicity Analysis

2020 Home Visiting Needs Assessment revealed the persistent racial and ethnic disparities and inequities in several domains that are addressed by the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) and Home Visiting Services Account (HVSA) programs in Washington State. The results of the race-ethnicity analysis are highlighted in this brief with detailed methods, including a discussion of the indicators chosen, available in the [final report](#). Seven race-ethnicity groups, defined by the U.S. Office of Management and Budget, were assessed in four domains (Table 1).

This analysis identified four priority population groups for Washington State: non-Hispanic American Indian/Alaska Natives, non-Hispanic Blacks, non-Hispanic Pacific Islanders, and Hispanics. These four population groups were prioritized based on outcomes across four domains: Socioeconomic Status (SES), Maternal and Child Health (MCH), Behavioral Health, and Education (Table 1). Within each domain, three to five indicators were examined by race-ethnicity groups. For each indicator, the population group scored Very High (standard deviation [SD] ≥ 1), High (SD ≥ 0.5) or Average (SD < 0.5). Within each domain, a group was deemed high priority if at least half of the indicators within a domain were identified as High or Very High. If a population group was high priority in at least two domains, then they were counted as a final priority population for Washington State. Detailed results by each domain are presented in the Appendix.

The race-ethnicity analysis shows that non-Hispanic American Indian/Alaska Natives were high priority in all four domains considered, while non-Hispanic Blacks were high priority in three of the four domains. Non-Hispanic Pacific Islanders and Hispanics were high priority in two of the four domains. (Table 1).

Table 1. Race-Ethnicity Analysis Results Summary: Priority Status

	SES	MCH	Behavioral Health	Education
NH-AIAN	Very High	Very High	Very High	High
NH-Black	High	Very High	Average	High
NH-Pacific Islander	Average	Very High	Average	High
Hispanic	High	Average	Average	High
NH-Asian	Average	Average	Average	Average
NH-White	Average	Average	Average	Average
NH-Multi-Race	Average	Average	Average	Average

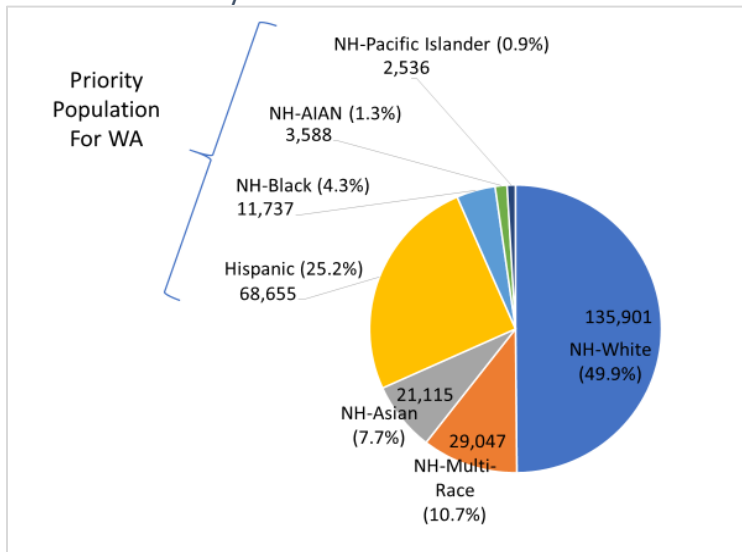
Note. SD=standard deviation; NH=non-Hispanic; AIAN=American Indian/Alaska Native; SES=socioeconomic status; MCH=maternal and child health.

Where Children Ages 0-2 of Priority Groups Reside

The results of the race-ethnicity analysis should be used alongside the findings of the geographic analysis in the [final report](#) (i.e., county level and school locale level analysis) to help understand where the needs are geographically and demographically. Here we present the general areas where children ages 0-2 of priority groups reside within our state. The population estimates on April 1, 2019 of Washington State Office of Financial Management were used to examine the numbers and proportions of children ages 0-2 by race-

ethnicity groups and by county. Non-Hispanic American Indian/Alaskan Native, non-Hispanic Black, non-Hispanic Pacific Islander, and Hispanic children ages 0-2 accounted for 1.3%, 4.3%, 0.9%, and 25.2% of the total population of children ages 0-2 in Washington State, respectively (Figure 1).

Figure 1. Number and Proportion of Children ages 0-2 by Race and Ethnicity in 2019



Note. NH=non-Hispanic; AIAN=American Indian/Alaska Native.
Data Source: Office of Financial Management, Estimates of April 1 population by age, sex, race and Hispanic origin for 2019.

The largest number of non-Hispanic American Indian/Alaskan Native children ages 0-2 reside in Yakima, King, Pierce, Spokane, and Snohomish County, together accounting for 49% of non-Hispanic American Indian/Alaskan Native children ages 0-2. The majority (59%) of Hispanic children ages 0-2 reside in King, Yakima, Pierce, Snohomish, and Benton County. For both non-Hispanic American Indian/Alaskan Native and Hispanic children ages 0-2, about 95% are scattered throughout 20 counties. On the other hand, non-Hispanic Black children ages 0-2 and non-Hispanic Pacific Islander children ages 0-2 are more concentrated in densely populated counties: 82% of non-Hispanic Black children and 83% of non-Hispanic Pacific Islander children reside in King, Pierce, Snohomish, and Spokane County.

COVID-19 Pandemic and the Needs of Washington’s Priority Population Groups

Data used for the race-ethnicity analysis in the 2020 Needs Assessment were collected before the pandemic. The results were consistent with findings from prior 2010 and [2017 needs assessments](#). Since the COVID-19 pandemic started in early 2020, it has adversely affected the most vulnerable communities throughout Washington State. As seen nationally, COVID-19 has taken a disproportionate toll on communities of color, specifically the same race-ethnicity groups identified in this Needs Assessment as high priority groups. Between mid-January and mid-August in 2020, age-adjusted COVID-19 case rates per 100,000 population were over seven times higher for Hispanic and non-Hispanic Pacific Islander groups compared to non-Hispanic Whites; and over 2.5 times higher among non-Hispanic Black and non-Hispanic American Indian/Alaska Native groups compared to non-Hispanic Whites. Age-adjusted COVID-19 hospitalization rates and age-adjusted COVID-19 death rates were higher among the four population groups compared to non-Hispanic Whites. These results suggest that inequities in socio-economic status, education, physical, mental and emotional health are all interrelated, and that they are disproportionately affecting a wide range of outcomes for the racial and ethnic minority groups.

The findings of the race-ethnicity analysis underscore the need for a renewed emphasis on equity and on targeting priority race-ethnicity groups by home visiting programs in Washington State, in an effort to address and mitigate the adverse effects of systemic racism and inequity that persist. Further work is needed to examine a broader range of outcomes and more nuanced subcategories of racial and ethnic groups.

Appendix. Detailed Race-Ethnicity Analysis Results by Domain

1. Socioeconomic Status (SES) Domain

Non-Hispanic American Indian/Alaska Native, non-Hispanic Black, and Hispanic groups were the priority groups for the SES domain, with at least half the indicators (i.e., two indicators) above the very high or high threshold. Non-Hispanic American Indian/Alaska Natives had the highest rates for poverty, unemployment, and female headed household while non-Hispanic Blacks had the second highest rates for poverty and female headed household. Hispanics had the third highest rates for poverty and female headed household. Hispanics and Asians faced more limited English disparities.

Figure 2-a. Population living below 100% FPL, 2014-2018

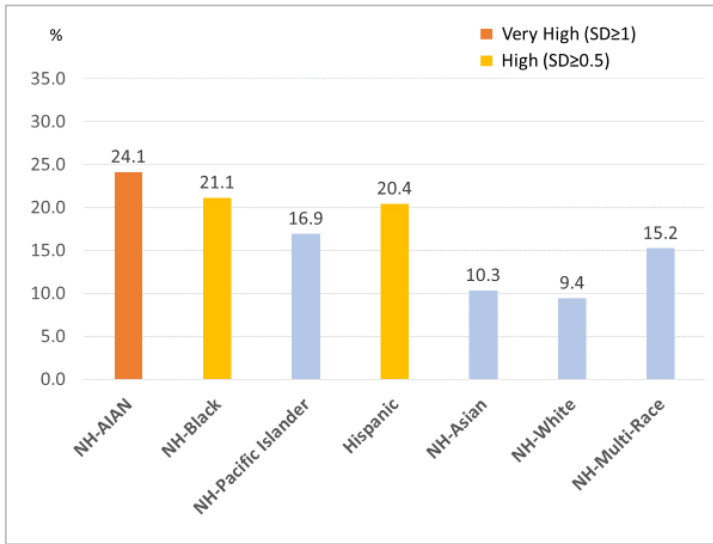


Figure 2-b. Unemployment rate, 2014-2018

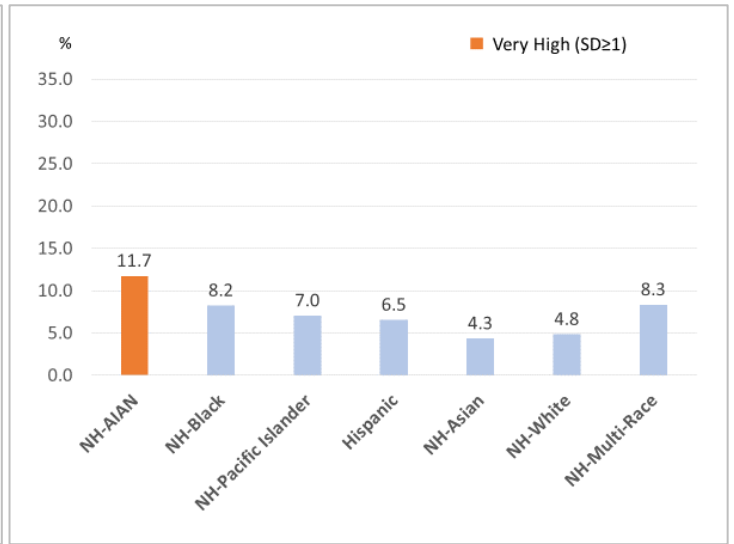


Figure 2-c. Limited English-Speaking Household, 2014-2018

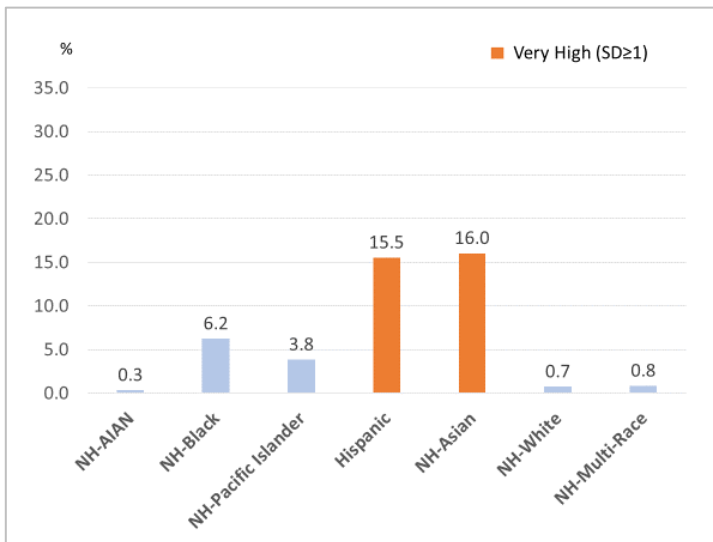
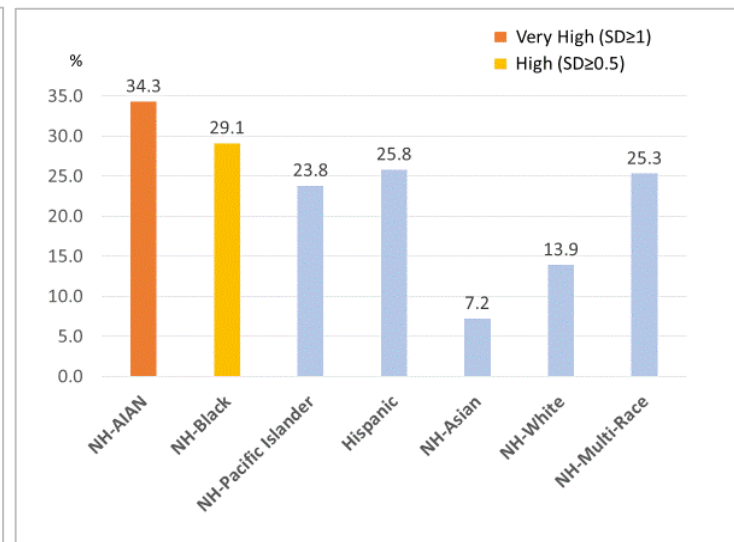


Figure 2-d. Female Headed Household, 2014-2018



Note. FPL=federal poverty level; SD=standard deviation; NH=non-Hispanic; AIAN=American Indian/Alaska Native. Population living below 100% federal poverty level is calculated using the poverty guidelines updated periodically in the Federal Register by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2). Data Source: American Community Survey.

2. Maternal and Child Health (MCH) Domain

Non-Hispanic American Indian/Alaska Native, non-Hispanic Black, and non-Hispanic Pacific Islander groups were identified as the priority groups for the MCH domain, being above both thresholds for at least half the indicators (i.e., two out of four indicators). MCH measures considered are mainly focused on pregnancy and delivery outcomes where non-Hispanic Black, non-Hispanic American Indian/Alaska Native, and non-Hispanic Pacific Islander groups have shown higher rates of low birth weight infants and/or preterm delivery, both contributing to high infant mortality rates. It should be noted that although the infant mortality rate for non-Hispanic Pacific Islanders (6.7 per 1,000 live births) was not above the threshold in our analysis, it is considerably higher than the Healthy People 2020 goal of 6.0 infant deaths per 1,000 live births.¹

Figure 3-a. Preterm birth, 2014-2018

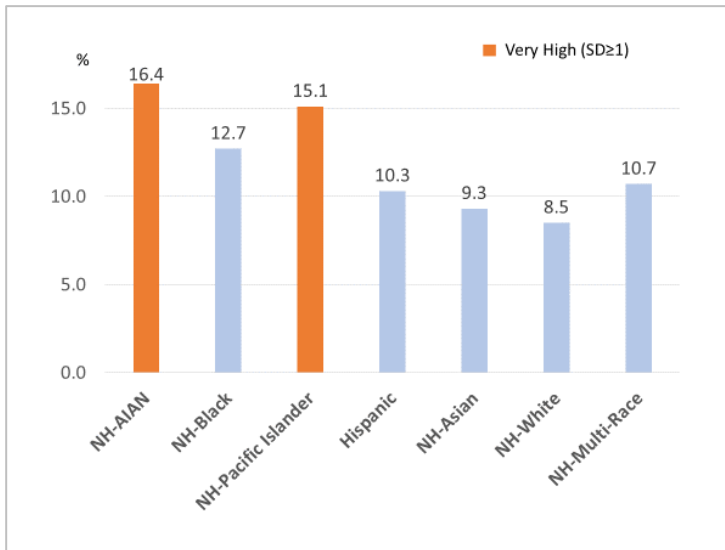


Figure 3-b. Low birth weight, 2014-2018

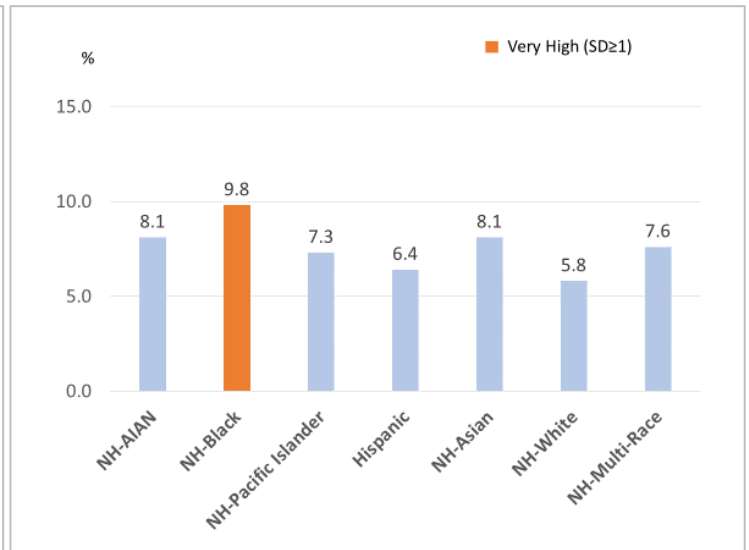


Figure 3-c. Infant mortality rate, 2011-2017

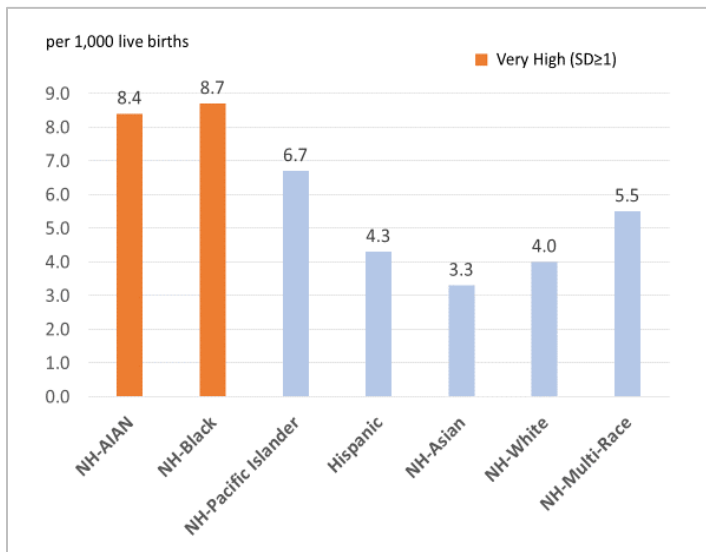
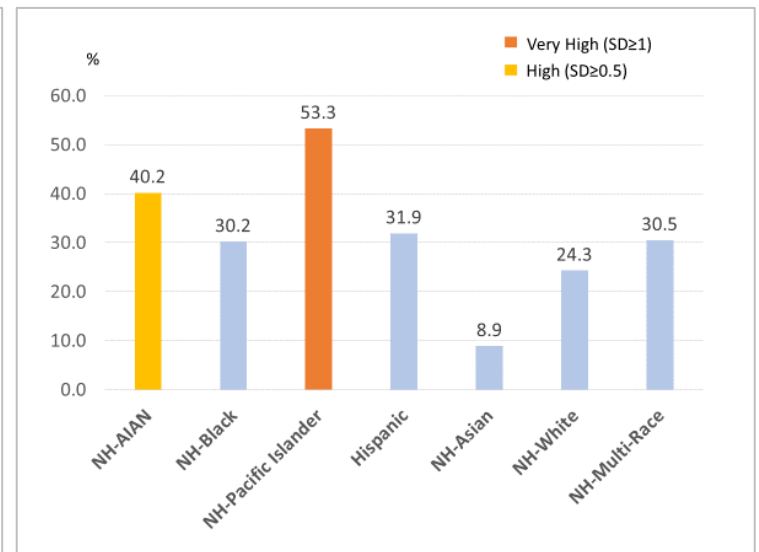


Figure 3-d. Pre-pregnancy obesity, 2014-2018



Note. SD=standard deviation; NH=non-Hispanic; AIAN=American Indian/Alaska Native. Data Sources: Birth Certificate for preterm birth (3a), low birth weight (3b), and pre-pregnancy obesity (3d). Death and Birth Certificate for infant mortality (3c).

¹ Healthy People. 2020 Topics & Objectives. Maternal, Infant, and Child Health. <https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health/objectives>

3. Behavioral Health Domain

Behavioral Health Domain represents substance use and mental health. The selection of indicators was determined by availability of recent data disaggregated by race, ethnicity and geography. Tenth grade alcohol binge drinking and drug use from Healthy Youth Survey were used because they are reliable information for teenage drug and alcohol use, which is likely to continue into young adulthood.

Non-Hispanic American Indian/Alaska Native group was the only priority group identified for Behavioral Health Domain, being above both thresholds for at least half the indicators (i.e., three out of five indicators). Non-Hispanic American Indian/Alaska Native group consistently showed high rates across teenage drug and alcohol use, overdose deaths, depression, and suicide. While the burden of this domain on non-Hispanic American Indian/Alaska Native group is profound, several other groups have concerning results on select indicators in this domain.

Figure 4-a. Tenth grade alcohol binge drinking, 2014-2018

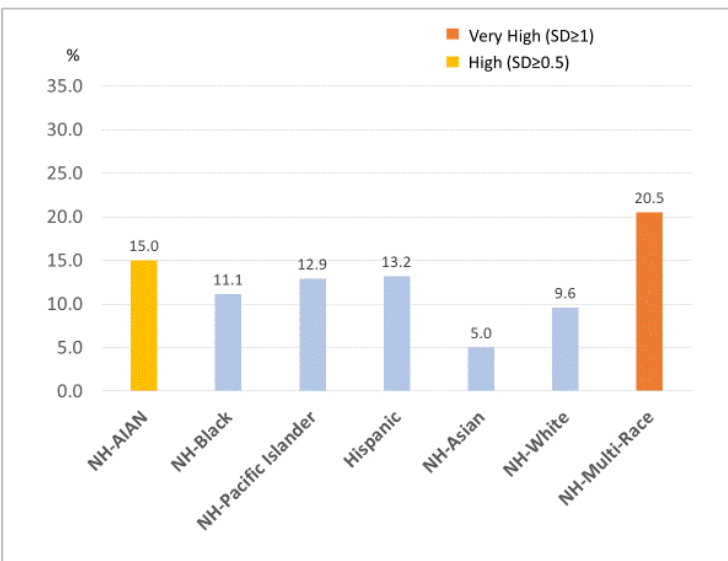


Figure 4-b. Tenth grade drug use including marijuana, 2014-2018

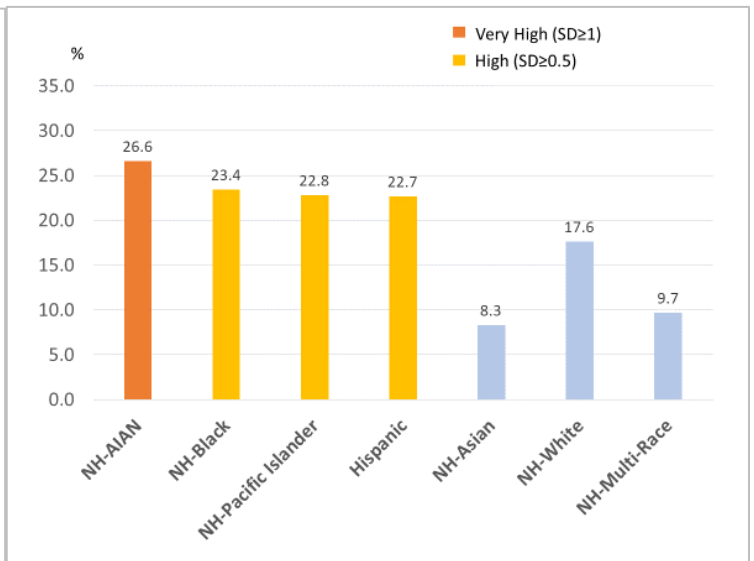


Figure 4-c. Drug overdose resident deaths per 100,000 persons, 2014-2018

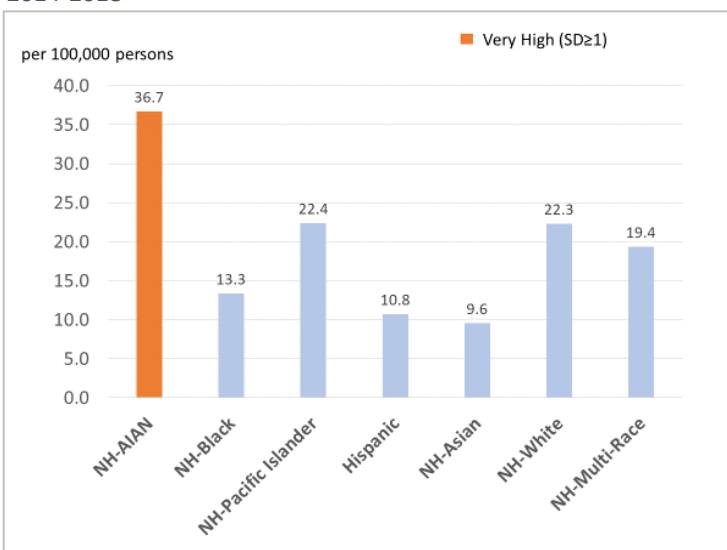


Figure 4-d. Depression diagnosis (ever), 2014-2018

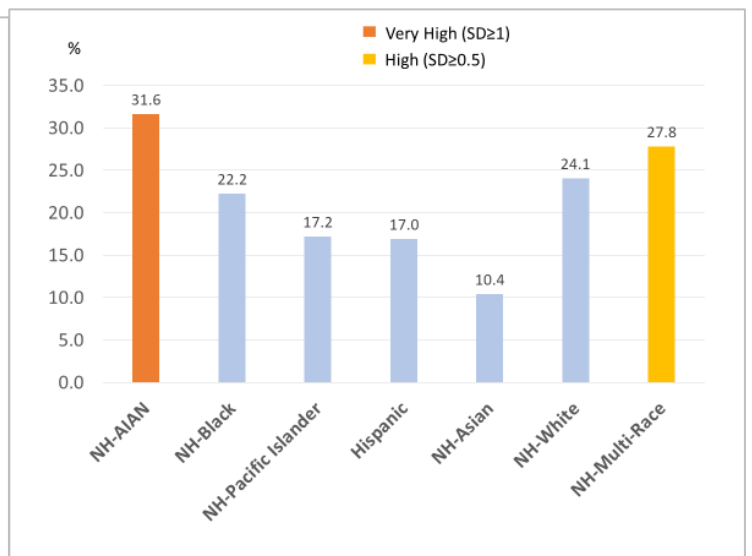
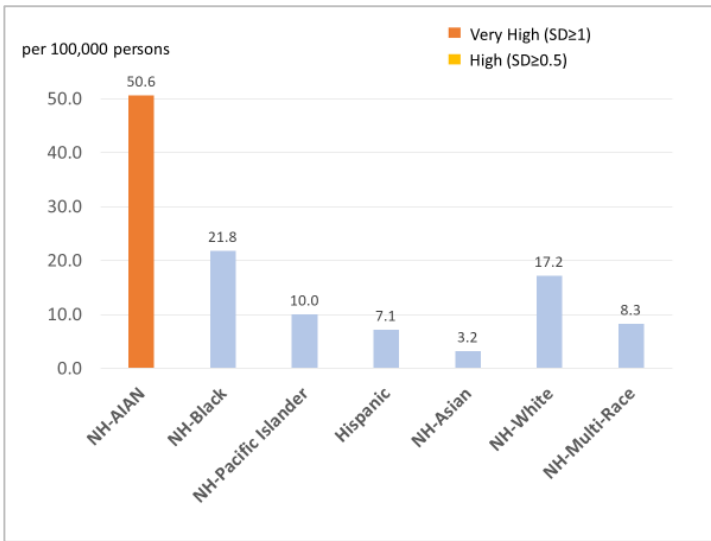


Figure 4-e. Suicide rate ages 14-54 per 100,000 persons ages 14-54, 2014-2018



Note. SD=standard deviation; NH=non-Hispanic; AIAN=American Indian/Alaska Native.

Data Sources: Healthy Youth Survey for tenth grade alcohol binge drinking (4a) and tenth grade drug use including marijuana (4b). Death Certificates and Comprehensive Hospital Abstract Reporting System (CHARS) for drug overdose resident deaths(4c) and suicide rate (4e). Behavioral Risk Factor Surveillance System (BRFSS) for depression diagnosis (4d).

4. Education Domain

The scale for the indicators for the Education domain are reversed because they represent better outcomes when the value is higher (e.g., % kindergarten ready). Non-Hispanic American Indian/Alaska Native, non-Hispanic Black, non-Hispanic Pacific Islander, and Hispanic groups were identified as the priority groups for the Education Domain, being below both thresholds for at least half the indicators (i.e., two out of three indicators). It should be noted that no group is meeting the DCYF State goal of 90% for kindergarten readiness.

Figure 5-a. Kindergarten readiness, 2018-2019

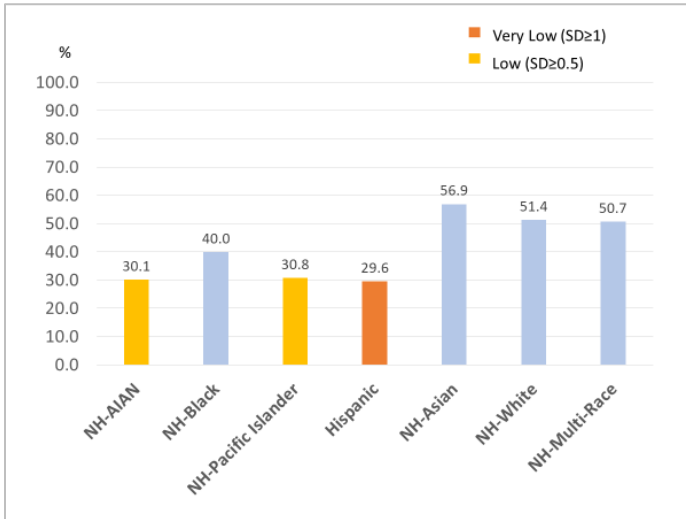


Figure 5-b. Met 3rd grade English Language Arts Standards, 2018-2019

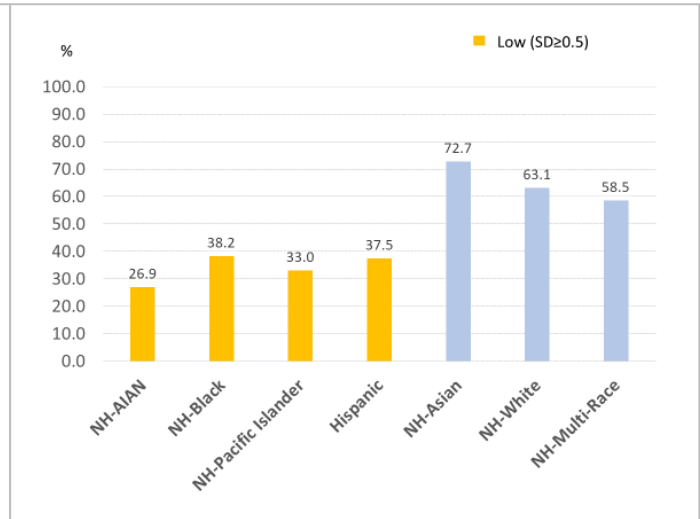
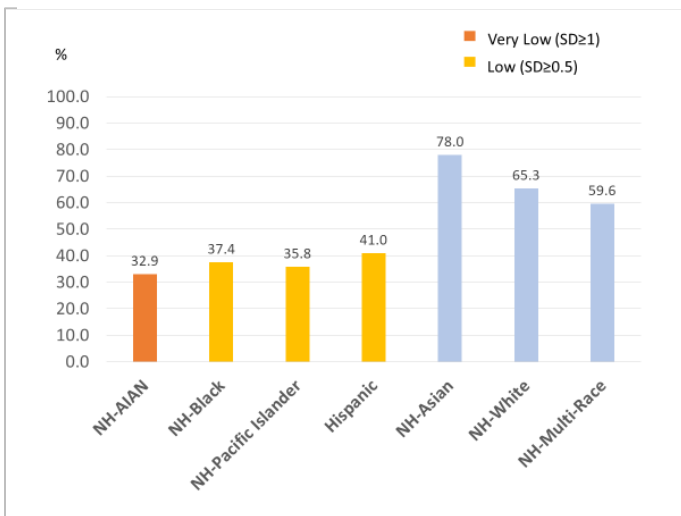


Figure 5-c. Met 3rd grade Math Standards, 2018-2019



Note. SD=standard deviation; NH=non-Hispanic; AIAN=American Indian/Alaska Native.
Data Source: Washington Office of Superintendent of Public Instruction Washington State Report Card.