# A PORTRAIT OF <br> NEW YORK CITY 2018 <br> WELL-BEING IN THE FIVE BOROUGHS AND THE GREATER METRO AREA 



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Kristen and Sarah

## Key Findings

## Relative to the United States

 as a whole, New York City and the greater metro area are doing well in terms of the three building blocks of the HD Index.A Portrait of New York City 2018 examines well-being and access to opportunity for different geographies and demographic groups in New York City and the greater New York-New Jersey-Connecticut metropolitan area using the framework of human development. Relying solely on economic statistics can result in a misleading picture of the opportunities and well-being of everyday people. To remedy this and complement money metrics like gross domestic product, the United Nations developed the Human Development Index-a composite score of life expectancy, education, and income indicators. Measure of America (MOA) has adapted this index to the US context. Using data from the US Census Bureau and state and city health departments to measure these three fundamental dimensions of well-being and access to opportunity, MOA combined these measurements into a single number on a 0 -to-10-point scale. This is the American Human Development (HD) Index.

Relative to the United States as a whole, New York City and the greater metro area are doing well in terms of the three building blocks of the HD Indexon average, New Yorkers are ahead in terms of access to knowledge, a long and healthy life, and a decent standard of living. But a look beneath the surface of these relatively high averages uncovers deep and disturbing disparities on all three fronts. Calculating scores by towns, neighborhoods, and even smaller geographic units, as well as by race and ethnicity, gender, and nativity, allows for side-by-side comparisons that highlight the advantages and challenges encountered by different groups and communities. NYC residents are more likely than the average American to hold a bachelor's or graduate degree, but almost one in five New Yorkers lacks the barebones credential of a high school diploma; the typical worker earns more in NYC than in the United States overall, but there is an $\$ 81,000$ gap between the highest- and lowest-earning neighborhoods in the city; and while the average New Yorker outlives the average American by three years, an Asian child born in the Bronx can expect to live 17.5 years longer than a black child born in Manhattan.

The city and the metro area, as well as the communities within them, are not discrete. Millions of people traverse these boundaries daily to go to work or class, to visit friends and family, to see a play or spend a day at the beach. The well-being of residents of the metro area has an impact on that of residents of the city proper, and vice versa-the fates of all New Yorkers, as well as our tri-state neighbors, are joined together. And while an exploration of human development in the city and the metro area reveals many similarities, the report also identifies key differences that lend insight into the challenges facing New Yorkers and their tri-state neighbors today.

While we explore the three dimensions of the index separately, earnings and education are tightly intertwined-though women's economic returns on
education are less than men's-and neighborhoods and demographic groups that score low on one dimension of the index often score low on the other. (Health is the exception-immigrants and Latinos have much higher life expectancies than one would expect given their earnings; this phenomenon is discussed on PAGE 106.) The well-being challenges faced by certain New York metro area and NYC communities are compounded by stark residential segregation by race and ethnicity, income, and education level. This report also examines a range of issues that contribute to and/or are compounded by the well-being challenges faced by many New York City communities, such as health inequities, racism, residential segregation, and mass incarceration. Bringing to light the interlocking barriers to opportunity in the region is the first step toward crafting targeted, data-informed policies that expand the freedom and opportunities of all New Yorkers.

Using data on educational attainment and enrollment rates, median personal earnings, and life expectancy at birth, Measure of America calculated American Human Development Index scores for 170 neighborhood and town clusters in the New York metro area; for the five boroughs and for 188 neighborhood tabulation areas in New York City; for the four major racial and ethnic groups; for women and men; and for US- and foreign-born residents.

## Human Development in the New York Metro Area

- While the majority of the Portrait, including the chapters on health, earnings, and education, focuses on NYC proper, well-being in the greater metro area lends important regional context, and is discussed in depth in the first section of this report. The American Human Development Index score for the greater New York metro area (6.32) is higher than the score for the city proper (5.98) and the United States as a whole (5.17).
- Despite a longer life expectancy and higher education levels, women score slightly lower than men on the index ( 6.25 vs . 6.30) due to a $\mathbf{\$ 1 2 , 5 0 0}$ gender earnings gap. Women earn less than men in every racial and ethnic group, though the size of the gap varies. Measure of America has also calculated earnings by Asian subgroup for this report, and the gender differences within some of these groups are striking.
- Of the four major racial and ethnic groups studied in this report, Asian metro area residents score highest on the HD Index, followed by white, black, and Latino residents. The Asian and white scores are similar (7.54 and 7.16, respectively), as are the black and Latino scores (4.87 and 4.83).

Bringing to light the interlocking barriers to
opportunity in the region is the first step toward crafting targeted, datainformed policies that expand the freedom and opportunities of all New Yorkers.

- Asians in the metro area score higher on the HD Index than Asians in the city proper, while the reverse is true for whites. Black and Latino residents score third and fourth, respectively, in both. But black city residents fare slightly better than their metro area counterparts, while for Latinos, the reverse is true ( 4.83 in the metro area vs. 4.58 in the city).
- The top-scoring neighborhood and town cluster of the 170 analyzed in the metro area is the Upper East Side in New York City (9.36). This area also scores highest in terms of education. The highest earnings are also found in Manhattan, in Battery Park City, Greenwich Village, and Soho. Southeast Westchester County fares best in terms of life expectancy.
- Southwest Newark, New Jersey has the lowest HD Index score and the lowest average life expectancy. The Hunts Point, Longwood, and Melrose section of the Bronx has the lowest education score, and Belmont, Crotona Park East, and East Tremont, also in the Bronx, has the lowest earnings.


## THE FIVE NEW YORKS

Two communities just a few miles apart may afford their residents vastly different opportunities. By the same token, metro area residents separated by significant distance can share remarkably similar experiences when it comes to well-being and access to opportunity, and face the same obstacles to realizing their potential. To highlight such community similarities and differences across the tri-state area, Measure of America sorted the 170 neighborhood and town clusters in the metropolitan region into the Five New Yorks according to where they fall on the HD Index.

- Gilded New York: The eleven neighborhood and town clusters that make up Gilded New York score above 8.50 on the HD Index, with an impressive average score of 9.18.
- Opportunity-Rich New York: Opportunity-Rich New York is comprised of fortytwo neighborhood and town clusters with scores between 7.00 and 8.49. Only five of these communities are in New York City proper.
- Main Street New York: Seventy-four neighborhood and town clusters, home to nearly 10 million metro area residents, land near the middle of the index, between 5.50 and 6.99 .
- Struggling New York: Thirty-four neighborhood and town clusters score between 4.00 and 5.49 on the index, together comprising Struggling New York.
- Precarious New York: The nine neighborhood and town clusters that make up Precarious New York score less than 4.00 on the HD Index. More than 1.3 million people live in Precarious New York.


## table 19 Human Development Index for the Five New Yorks

|  | $\begin{gathered} \text { Hop } \\ \text { Rovec } \end{gathered}$ | $\begin{aligned} & \text { LIFE } \\ & \text { EXPECTANCY } \\ & \text { AT BIRTH } \\ & \text { (vears) } \end{aligned}$ |  | $\begin{aligned} & \text { AT LEAST } \\ & \text { BACHELOR'S } \\ & \text { DEGREE } \\ & \text { (\% of adults } 25 \end{aligned}$ | $\begin{aligned} & \text { GRADUATE OR } \\ & \text { PROFESSIONAL } \\ & \text { DEGREE } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| united states | 5.17 | 79.3 | 12.9 | 30.6 | 11.6 | 77.3 | \$31,416 |
| 1 GILDED <br> New York | $\begin{gathered} 8.50 \\ \text { To } \\ 10.00 \end{gathered}$ | 86.2 | 5.0 | 72.7 | 35.8 | 85.6 | \$69,136 |
| 2 OPPORTUNITYRICH New York | $\begin{gathered} 7.00 \\ \text { то } \\ 8.49 \end{gathered}$ | 84.2 | 7.4 | 51.3 | 22.6 | 83.4 | \$50,342 |
| 3 MAIN STREET <br> New York | $\begin{gathered} 5.50 \\ \text { то } \\ 6.99 \end{gathered}$ | 82.4 | 12.5 | 35.6 | 14.0 | 80.8 | \$39,043 |
| 4 STRUGGLING <br> New York | $\begin{gathered} 4.00 \\ \text { то } \\ 5.49 \end{gathered}$ | 80.7 | 22.6 | 24.6 | 9.2 | 77.6 | \$28,587 |
| 5 PRECARIOUS <br> New York | $\begin{gathered} \text { BELOW } \\ 4.00 \end{gathered}$ | 78.5 | 32.0 | 13.9 | 3.4 | 76.6 | \$22,342 |

Sources: Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

Of the ten
highest-scoring neighborhoods, nine are in Manhattan and one is in Brooklyn. All ten lowestscoring neighborhoods are in the Bronx.

## Human Development in New York City

## KEY FINDINGS: AMERICAN HUMAN DEVELOPMENT INDEX

- New York City scores 5.98 out of 10 on the American Human Development Index, higher than the United States but lower than the New York metro area. The city also has higher highs and lower lows than the greater metro area.
- On average, Asian and white New Yorkers enjoy relatively high levels of well-being, while black and Latino New Yorkers have HD Index scores below the city average. White residents have the highest score (7.63) and Latino residents have the lowest (4.58).
- Women score higher than men on the HD Index (6.16 vs. 5.87 ) due to higher average life expectancies and education levels.
- Carnegie Hill on the Upper East Side has the highest score (9.34) of all 188 NYC neighborhood tabulation areas. Of the ten highest-scoring neighborhoods, nine are in Manhattan and one is in Brooklyn. All ten lowest-scoring neighborhoods are in the Bronx. Claremont-Bathgate scores the lowest (2.71).
- Like the metro area, New York City is highly segregated by race, income, and education level. There is a strong positive relationship between a neighborhood's HD Index score and its proportion of white residents, while neighborhoods with higher shares of Latino residents tend to have lower index scores.
- HD Index scores can be used to track improvements over time, but in a city where neighborhoods are rapidly transforming, it can be difficult to determine if rising well-being levels are due to better outcomes for existing residents or to changes in population demographics. According to an analysis of the racial compositions of the fifty-nine NYC community districts since 2000, the black share of the population has decreased by more than 5 percentage points in fourteen neighborhoods. At the same time, many traditionally black and Latino neighborhoods experienced an influx of white residents.


## Health

## KEY FINDINGS: A LONG AND HEALTHY LIFE

- A child born today in New York City can expect to live for 82.3 years. If New York City were a country, it would rank eighth in life expectancy, tied with Sweden. But the life expectancies of the longest- and shortestlived neighborhoods and racial and ethnic groups are separated by gaps of over ten years.
- Foreign-born New Yorkers can expect to live six years longer, on average, than those born in the United States. This life expectancy advantage tends to fade the longer immigrants live in the United States.
- There is a five-year life expectancy gap between NYC men ( 80.2 years) and women ( 85.3 years). Some of this gap has a biological basis, but the ways in which men and women are socialized also plays a role.
- More than a decade separates the life expectancy of the city's Asian residents (89.3 years) and its black residents (79.2 years). Latinos and whites fall between the two; Latinos are the second-longest-lived group ( 83.5 years), and whites are the third ( 82.6 years).
- There is a thirteen-year difference in life expectancy between the longest- and shortest-lived NYC community district; residents of Bayside, Douglaston, and Little Neck in Queens have a life expectancy of 89.6 years, compared to a 76.7 -year life expectancy for residents of Brownsville and Ocean Hill in Brooklyn.
- Heart disease and cancer are the two leading causes of death across all four racial and ethnic groups, but black New Yorkers are more likely to die from preventable causes such as infant death in the first twenty-eight days, HIV, and homicide.

Latinos are the second-longestlived group in New York City, outliving whites by almost one year.

## Although

New York City scores higher on the Education Index than the United States as a whole due to higher levels of bachelor's and graduate degree attainment, almost one in five adults in the city lacks a high school diploma.

## Education

## KEY FINDINGS: ACCESS TO KNOWLEDGE

- New York City scores 5.45 on the Education Index, calculated using a combination of school enrollment rates and adult high school, bachelor's, and graduate degree attainment rates. Although New York scores higher on the Education Index than the United States as a whole ( 5.45 compared to 5.17) due to higher levels of bachelor's and graduate degree attainment, almost one in five adults in the city lacks a high school diploma.
- On average, women in New York City have higher educational attainment levels than men, with an Education Index score of 5.52, compared to 5.37.
- Education Index scores of US- and foreign-born New Yorkers are separated by nearly three points-6.44 compared to 3.54 . Foreign-born New Yorkers are less likely to be enrolled in school and less likely to have attained a high school, bachelor's, or graduate degree. Educational attainment and enrollment rates for immigrant New Yorkers vary considerably by race and ethnicity, however.
- White residents score the highest on the Education Index (7.67). Asians score second highest (5.76), but educational outcomes vary considerably by Asian subgroup. Black New Yorkers come in third (4.54) and Latino New Yorkers have the lowest score (3.24), though, again, educational attainment varies by subgroup.
- Education Index scores vary tremendously across New York City neighborhoods, ranging from Carnegie Hill on the Upper East Side, with a score of 9.50 , to North Corona in Queens, which scores just 1.38.
- Low Education Index scores are associated with higher rates of poverty, child poverty, unemployment, incarceration, and births to teenagers. Higher education scores are associated with higher median personal earnings.


## Earnings

## KEY FINDINGS: A DECENT STANDARD OF LIVING

- To gauge living standards, Measure of America uses median personal earnings, the wages of the person at the midpoint of the earnings distribution; half of all workers earn more, half earn less. The wages of all workers, full- and part-time, are included. NYC median personal earnings are $\$ 35,934$, above the US median of $\$ 31,416$. But there are vast disparities in earnings among different racial and ethnic groups. The typical white worker takes home $\$ 52,290$, over $\$ 20,000$ more than the typical Asian or black worker (with median earnings of $\$ 32,156$ and $\$ 32,059$, respectively) and twice the earnings of the typical Latino worker $(\$ 25,086)$.
- White city residents earn $\$ 16,000$ more than white Americans in general. Asian city residents are the only group that earns less than their US counterparts.
- Men earn \$7,000 more than women in NYC, despite women's superior performance on the Education Index. The gender earnings gap exists across all of the major racial and ethnic groups. It is widest for white workers-white men typically earn $\$ 13,100$ more than white women in the city. Black men and women have the smallest gender earnings gap, likely a sign of disproportionate discrimination faced by black men rather than an advantage for black women.
- US-born New Yorkers make $\$ 11,000$ more than foreign-born New Yorkers. NYC Asians have the largest gap: Asians born in the United States earn over $\$ 18,000$ more than those who immigrated.
- Manhattanites take home twice the earnings of Bronx residents. All ten of the highest-earning neighborhoods are in Manhattan; eight of the ten lowest-earning neighborhoods are in the Bronx.
- Earnings range from a median of $\$ 95,000$ in Carnegie Hill on the Upper East Side to $\$ 14,400$ in the Bronx neighborhood of Belmont.
- Over 50 percent of New Yorkers qualify as rent burdened (spending more than 30 percent of their incomes on rent and utilities), the third-highest rate of the ten most populous US metro areas.
- There is a strong negative relationship between incarceration rates and earnings in New York City neighborhoods.


## Conclusion

## SETTING A GOAL AND WORKING TOGETHER TO ACHIEVE IT

Shoring up the foundations of well-being for all residents as well as building on the strengths and expanding the opportunities of the groups that are struggling today is key to a flourishing New York tomorrow. The fates of different groups of New Yorkers are inextricably linked. The report thus concludes with an ambitious but realistic goal: to increase well-being for all city residents and narrow the gaps between groups, resulting in an increase in the HD Index— from today's 5.98 to 6.60 by 2025 . To achieve this goal in a way that results in measurable well-being improvements for all, with a focus on the most vulnerable residents, the following areas are priorities:

- HEALTH: Structuring neighborhood, school, and work environments such that the healthiest choices are also easy choices and addressing the particular health challenges of black New Yorkers will extend life expectancy for all and achieve significant gains for the group with the lowest life expectancy. Investing in the social determinants of health in black communities and reducing antiblack racism, which exacts a heavy toll on the health of black New Yorkers, are particularly important.

Target: Increase average life expectancy by one year, from 82.3 years to 83.3 years, by 2025.

- EDUCATION: Better educational outcomes require that we address the social and economic disadvantages that threaten children's stability, protect them from harm, and promote healthy cognitive development in the early years; improve school quality such that all children have good choices; and address the disproportionate rates of youth disconnection among black and Latino young people. A focus on Struggling NY and Precarious NY and on Latinos citywide will help narrow the gaps in educational attainment and quality.

Target: Increase enrollment by 6 percent and boost adult educational attainment by 6 percent by 2025 .

- EARNINGS: Increasing wages, addressing the affordable housing crisis, reducing the toll of justice involvement in high-incarceration neighborhoods, and reducing the gender earnings gap will lift median personal earnings, enabling greater economic security and a chance for all New Yorkers to invest in themselves and provide a safe, stable environment for the next generation. This will require a laser focus on workers whose median personal earnings are very low, namely those in Precarious NY lunder \$22,000 annual median personal earnings) and Struggling NY (under $\$ 29,000$ ).

Target: Increase median earnings by \$4,000 by 2025 (in inflation-adjusted dollars).

## THE NYC GOAL: Raise the Level of Well-Being for All and Narrow the Gap Between Groups

## $2018 \rightarrow 2025$

Today's New York City HD Index score is 5.98 out of a possible 10. The goal is to increase the HD Index score to $\mathbf{6 . 6 0}$ by 2025. Achieving this demanding but attainable goal in a way that results in measurable well-being improvements for all with a focus on the city's most vulnerable residents will require the following changes in health, education, and earnings over the next seven years.

## LIFE EXPECTANCY



HEALTH: Address key determinants and drivers of health disparity to extend life expectancy for all with targeted efforts for black residents, the group with the lowest life expectancies.
$\checkmark$ All: Increase average life expectancy at birth by one year from 82.3 years to 83.3 years.
$\checkmark$ Narrow the Gap: Increase the life expectancy of black New Yorkers, currently 79.2 years, by at least two years.

ENROLLMENT \& ADULT EDUCATIONAL ATTAINMENT


EDUCATION: Increase school enrollment and educational degree attainment with a focus on Struggling New York and Precarious New York.

All: Increase enrollment and attainment by 6 percent. This would require an additional 102,000 young people ages 3-24 enrolled in school, 184,000 more adults having high school or equivalency diplomas, 130,000 more four-year college grads, and 59,000 more graduate or professional degrees.
$\checkmark$ Narrow the Gap: Focus school enrollment and educational attainment policies and programs in Struggling and Precarious New York, with particular attention to Latino families.

## MEDIAN PERSONAL EARNINGS



EARNINGS: Wages of workers at the high end of the earnings scale have been rising faster, so lifting the median with an eye toward greater income equality will require a laser focus on the wages of low- and mid-wage workers and factors such as employment discrimination and the toll of incarceration on individuals and families that thwart economic security.

All: Increase NYC median personal earnings by $\$ 4,000$, from today's \$36,000 to \$40,000.

Narrow the Gap: Lift
the earnings from \$22,000
(Precarious NYC) and \$28,000 (Struggling NYC).

# Understanding Human Development 



## Introduction

The New York metropolitan area is a bustling epicenter of finance, industry, culture, and social progress. With three major airports and the largest transit system in North America, the metro area is a destination for people from all corners of the globe. New York City is the most populous US city, as ethnically diverse as it is teeming with opportunities in the arts and design, health sciences, financial services, trade, tourism, manufacturing, and more. The urban cityscape is larger than life, but farms, forests, beaches, and mountains are just a train ride away. New York attracts the enterprising and the aspiring, the believers and the dreamers, the movers and the shakers.

But New York is also a place of profound structural inequality. In a city infamous for skyhigh rents, too many residents strain to make ends meet, and too many families struggle to navigate a complicated educational system that often leaves the neediest behind. While some New Yorkers reap the benefits of high incomes and access to world-class resources, more than half the population lives in a different world, bereft of the opportunities and freedoms afforded to the well-off. And these inequalities have grave consequences: remarkable gaps in life expectancy, segregated and unequal schools and neighborhood services, unquantifiable barriers to civic participation, and increasingly unattainable upward mobility.

New York City is also home to dedicated individuals and organizations that prioritize underserved communities and give hope for a brighter future for all New Yorkers. This report highlights programs and policies that hold tremendous promise to improve well-being. The very existence of this report is evidence of the combined efforts and contributions of city agencies, nonprofit organizations, and educational institutions, whose members served on advisory boards and were generous with their time, ideas, and data. See PAGE 4 for a full list of those who contributed support, leadership, and inputs to this project. The Portrait and its concluding recommendations are the culmination of inputs from over seventy public and private partners. We are optimistic that the recommendations in the Portrait of New York City will bolster the efforts of those working to make change and bring data and evidence to those who have the most power to alter the sociopolitical, environmental, and economic forces that shape people's everyday lives.

Why have such a diverse range of stakeholders in New York coalesced around this report and its framework, the human development approach? Because, at its heart, human development is about the real freedom ordinary people have to decide what to do, who to be, and how to live. Human development is formally defined as the process of improving people's well-being and expanding their freedoms and opportunities. The approach puts people at the center of analysis and considers how political, social, environmental, and economic forces interact to shape the range of choices open to them.

New York City is home to dedicated individuals and organizations that prioritize underserved communities and give hope for a brighter future for all New Yorkers.

Human
development is about the real freedom ordinary people have to decide what to do, who to be, and how to live.

The human development concept is the brainchild of the late economist Dr. Mahbub ul Haq. In his work at the World Bank in the 1970s, and later as minister of finance in his home country, Pakistan, Dr. Haq argued that existing measures of human progress failed to account for the true purpose of development: to improve people's lives. He believed the closely tracked measure of gross domestic product (GDP) was a particularly inadequate measure of well-being. To explain why, Dr. Haq often cited the example of Vietnam and Pakistan. In the late 1980s, the two countries had the same GDP per capita-around $\$ 2,000$ per year-but Vietnamese lived a full eight years longer than Pakistanis and were twice as likely to be able to read. In other words, money alone did not tell the whole story; the same income was buying two dramatically different levels of well-being.

Working with Harvard professor and Nobel laureate Amartya Sen and other gifted economists, Dr. Haq devised not only the idea of human development but also a way to measure it: the Human Development Index. He introduced this new way of thinking about and measuring progress in the first Human Development Report, which was released in 1990 under the auspices of the United Nations Development Program. The report ranked all the world's countries not by the size of their economies but rather by the well-being of their people. Since then, the annual Human Development Report has served as the global gold standard for understanding and tracking human well-being. In addition, more than 160 countries have produced national human development reports in the last two decades; these reports have raised taboo subjects, brought to light long-ignored inequities, and spurred public debate and political engagement.

In 2007, Measure of America adapted the approach and index, which were designed with developing countries in mind, to the context of an affluent democracy and released a first-ever American Human Development Report in 2008. ${ }^{1}$ Since then, organizations and communities across the country have worked with Measure of America to understand community needs and shape evidencebased policies and people-centered investments using this powerful approach (see box 3).

The human development approach rests on a sturdy conceptual framework: Amartya Sen's seminal work on capabilities. ${ }^{2}$ Capabilities can be understood as a person's "tool kit" for living a freely chosen life of value. Capabilities shape the real possibilities open to people, govern the freedom they have to lead the kind of lives they want to live, and ultimately determine what a person can do and become. We tend to think of capabilities as an individual's skills and talents. In the human development approach, the word's meaning is far more expansive. Valued capabilities include good health, access to knowledge, sufficient income, physical safety, religious freedom, political participation, love and friendship, societal respect, equality under the law, social inclusion, access to the natural world, self-expression, agency, the ability to influence decisions that affect one's life, and more. Some capabilities are built through one's own efforts, such as working
hard in school, eating a healthy diet, and getting physical exercise; others are the result of the conditions and institutions around a person, such as having access to high-quality schools, stores that sell nutritious food, and parks in which to safely walk or jog; many result from the interplay between the two. Some capabilities are bestowed on people through an accident of birth: having rich parents or wellconnected, powerful relatives. Others are impeded by neglect or family violence. Capabilities can stem from legally protected rights, such as freedom of conscience or assembly, or freedom from arbitrary detention. Capabilities can be built or eroded by the state of the economy, the state of the natural environment, the state of public discourse, or the state of our democracy.

## How Is Human Development Measured?

Trying to measure all the facets of this expansive concept would be madness. Thus, the UN Human Development Index as well as the adapted American Human Development Index measure just three fundamental human development dimensions: a long and healthy life, access to knowledge, and a decent standard of living (see FIGURE 1). Why only three areas, and why these three in particular? People around the world view them as core building blocks of a life of value, freedom, and dignity; healthy lives, good educations, and decent wages are not controversial aims. In addition, these foundational capabilities make possible other capabilities, such as adequate housing in safe neighborhoods. From a practical perspective, these are areas that one can measure comparatively easily; reliable and regularly collected proxy indicators are available for each. From both a methodological and a communications point of view, indexes with large numbers of indicators can be tricky. Using many indicators can lead to counting the same phenomenon two or three times, to confusing results, and to a false equivalence between fundamental and derivative issues. Indexes that include scores of indicators can be difficult to explain and understand, diluting their advocacy power.

It is important, however, to be realistic about the limitations of a parsimonious index like this one. It doesn't include environmental indicators or indicators amenable to very short-term change. To address these limitations, this volume includes a Global Goals Dashboard that reflects what the global community has identified as the most pressing issues of our time (see PAGE 56). The Human Development Index is not the end of a discussion on well-being; it is the start. Once disparities in basic outcomes have been identified using the index and its constituent parts, the critical task is to examine the why-the underlying conditions, historical factors, policy choices, and more that have led to different outcomes for different groups of New Yorkers. For this exploration, a whole host of other indicators is required-indicators that are included in the dashboard as well as others.

Two Approaches to Understanding Progress in America


TRADITIONAL Approach


HUMAN DEVELOPMENT Approach

Now for the technical part. The American Human Development Index for the New York metropolitan region is comprised of the following indicators:

- A Long and Healthy Life is measured using life expectancy at birth. It is calculated for New York City using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. For the New York metropolitan region, it is calculated using mortality data from the Connecticut Department of Public Health, New Jersey Department of Health, New York State Department of Health, and New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.
- Access to Knowledge is measured using two indicators: school enrollment for the population 3 to 24 years of age and educational degree attainment for those 25 and older. A one-third weight is applied to the enrollment indicator and a two-thirds weight to the degree attainment indicator to reflect the relative importance of earning degrees as compared to attending school. Both are from the US Census Bureau's 2015 American Community Survey.
- A Decent Standard of Living is measured using median earnings of all full- and part-time workers ages 16 and older from the same 2015 American Community Survey.

The three components are weighted equally on the premise that each is equally important for human well-being.

In broad terms, the first steps for calculating the index are to compile or calculate the four indicators that comprise it: life expectancy, school enrollment, educational degree attainment, and median personal earnings. Because these indicators use different scales (years, dollars, percent), they must be put on a common scale so they can be combined. Three subindexes, one for each of the three dimensions that make up the index-health, education, and earnings-are created on a scale of 0 to 10 . The process requires the selection of minimum and maximum values-or "goalposts"-for each of the four indicators. These goalposts are determined based on the range of the indicator observed from the data and also taking into account possible increases and decreases in years to come. For life expectancy, for example, the goalposts are ninety years at the high end and sixtysix years at the low end. The three subindexes are then added together and divided by three to yield the American Human Development Index value. ${ }^{3}$ (A description of how the index is calculated is contained in the Methodological Note.)

In this report and others, the index score is presented for the whole population-the score for the New York metropolitan area is 6.32 out of 10 , and the score for New York City is 5.98 out of 10 -as well as for different slices of the
population. In Measure of America's national work, scores are presented, for instance, by state and congressional district. For this report, index scores are presented by demographic group and by geography. The sections that address well-being through a demographic lens present scores by race and ethnicity; by gender; and by nativity. The sections that address well-being through a geographic lens present scores for the metropolitan area's 170 public use microdata areas (PUMAs) and the city's five boroughs and 188 neighborhood tabulation areas (NTAs). The pages that follow first present the results of the overall index, then explore in greater detail its constituent parts: health, education, and earnings.

FIGURE 1 Human Development: From Concept to Measurement


## The Benefits of the

## Human Development Index

## An overreliance

 on economic metrics such as GDP can provide misleading information about the everyday conditions of people's lives.New York City is a data-rich place with strong laws on public data transparency and excellent data analysis and research capacity. Working closely with experts in economic, social, political, and environmental data and analysis, Measure of America has endeavored to complement, not duplicate, these efforts. Measure of America has used official government statistics to create something new: an American Human Development (HD) Index using an easy-to-understand composite of comparable indicators of health, education, and living standards. Five features of this work make the American HD Index particularly useful for understanding and addressing inequities in the New York region.

It supplements money metrics with human metrics. An overreliance on economic metrics such as GDP can provide misleading information about the everyday conditions of people's lives. Connecticut and Wyoming, for instance, have nearly the same state GDP. Yet Connecticut residents, on average, can expect to outlive their western compatriots by two and a half years, are far more likely to have bachelor's degrees, and typically earn $\$ 7,000$ more per year.

It directly measures the distribution of opportunity in a way that is easy to understand. The wide variation in American HD Index scores makes plain the extent of fundamental disparities among New Yorkers-among neighborhoods across the region, among racial and ethnic groups, and between women and men.

It connects sectors to show problems, and their solutions, from a peoplecentered perspective. The cross-sectoral American HD Index broadens the analysis of the interlocking factors that create opportunities and fuel both advantage and disadvantage. For example, if every adult in New York State who never completed

## Box 1 What about Cost of Living?



A common question about the standard of living indicator, median personal earnings, is whether it has been adjusted for the cost of living. It has not. The cost of living varies far more within New York City than between the city and other places, and methodologies for adjusting for cost of living do not sufficiently account for local variation. In addition, living costs are invariably higher in areas with
desirable community assets and amenities that are conducive to higher levels of well-being. For example, neighborhoods with higher housing costs-the major portion of cost of living-typically have better public schools, more opportunities for recreation and entertainment, less crime, and better public transportation options. Thus, to adjust for cost of living would be to push to the side some of the factors that the HD Index is measuring. In addition, people pay more to live in places where they perceive the quality of life to be
higher. Many people pay more to live in the New York metropolitan area because of the enormous range and concentration of world-class cultural institutions and limitless professional opportunities. Adjusting for cost of living masks the richness of experience that comes with living in New York and implies that it is not meaningfully different from living in a smaller, less opportunity-rich city such as Phoenix, AZ, or even a comparably priced city abroad, such as Copenhagen, Denmark.

## Box 2 A Portrait of Los Angeles County 2018: Moving from Shared Understanding to Community Action

The first question that comes up when presenting a human development report to a new audience is this: How is the index used to make a difference? The Portrait of Los Angeles County project offers concrete examples of ways that New York City, a comparable region in size, diversity, and dynamism, can use the data and analysis in this report to improve well-being. Aiming to confront inequality in the sprawling county, Los Angeles County's philanthropic community commissioned Measure of America to produce The Portrait of Los Angeles County in 2016. The project was funded by a consortium of fourteen grantmakers and the Los Angeles County Quality and Productivity Commission's Productivity Investment Fund and benefited from the inputs of more than seventy stakeholders from all sectors. The Portrait of Los Angeles County report concludes with ten policy priorities for achieving the goal of raising LA County's HD Index score 1 point-from 5.43 to 6.43 -by 2024. Since its release less than six months ago in November 2017, county leaders have
taken these priorities seriously in planning, funding, and developing strategies to target the communities that score the lowest on the index.
Examples include the following:

- The report itself constitutes a first-of-its-kind collaboration across agencies and sectors within the county government; the cross-agency advisory committee established for the project continues to meet with a view to bringing resources together to address pressing human needs the report identified.
- The County Quality and Productivity Commission's Productivity Investment Fund support allowed Measure of America to hire an on-the-ground coordinator to aid implementation efforts, thus greatly increasing collaboration and communication between existing networks within and outside government.
- The County Commission's Manager's Network has requested every county department to develop new or expanded
proposals to improve equity within one of the ten policy priorities identified in the report.
- The Portrait has catalyzed efforts to expand early care and education for children with participation from the Policy Roundtable for Child Care and Development, Child Care Planning Council, LA Unified School District School Board, and the newly formed Prevention Plan Early Childhood Education working group.
- Cross-agency work is underway, with representatives from the departments of health, air quality, fire, transportation, and others, to address the low HD Index scores and serious environmental concerns of the thirteen communities along the I-710 freewaywhose well-being challenges were identified in the report.
high school magically did, the United Way/Measure of America Common Good Forecaster projects over 337,000 more eligible voters would vote. Why? Because there is a robust relationship between an educated electorate and the quality of our democracy. Schooling instills greater acceptance of free speech and democratic values, more understanding of the issues on which we vote, and increased confidence to select able leaders. ${ }^{4}$

It focuses on outcomes. The Human Development Index focuses on the end result of efforts to bring about change. While many data points help us understand specific problems related to people's lives (like unemployment rates) or quantify efforts to address these problems (for example, funding for job training or minimum wage policies), we often stop short of measuring the impact of these efforts: Are programs and investments making a difference? Is economic security improving as a result? Are people's living standards rising?

It counts everyone. The Human Development Index moves away from the binary us-them view of advantage and disadvantage provided by today's poverty measure to one in which everyone can see him- or herself along the same continuum. This more inclusive analysis, based on objective data, can help to stimulate a less polarized, partisan conversation.

## What the Human Development Index Reveals: The New York Metropolitan Area



Introduction: The Regional Context
Variation by Gender, Race and Ethnicity, Nativity, and Geography
Spotlight on Vital Regional Issues:
Residential Segregation, Transportation, Environmental Justice, and Immigration
Global Goals Dashboard
The Five New Yorks

# Introduction: The Regional Context 

There are roughly three New Yorks. There is, first, the New York of the man or woman who was born there, who takes the city for granted and accepts its size, its turbulence as natural and inevitable. Second, there is the New York of the commuter-the city that is devoured by locusts each day and spat out each night. Third, there is New York of the person who was born somewhere else and came to New York in quest of something.... Commuters give the city its tidal restlessness, natives give it solidity and continuity, but the settlers give it passion.

## E. B. White, Here Is New York

E. B. White wrote those words seventy years ago, yet his description of New York as many cities at once is, if anything, truer today than it was in 1948. New York remains one place to those who have always lived here; another to those who regularly come and go from surrounding suburbs and cities for work or pleasure; still another for those who came "in quest of something" from other states or, as is the case for more than one in three NYC residents, faraway countries. But there are also many New Yorks from the perspective of well-being and access to opportunity. Some living in the city or traveling in from neighboring communities for work or pleasure enjoy perhaps the highest levels of well-being not just in the country but in the world; for others, limited capabilities mean a severely circumscribed range of choices and opportunities.

Everyone knows that the five boroughs and the larger tri-state area are home to rich and poor alike; the income inequality that characterizes our city and region is readily apparent and colors our lived experience, sorting us into everything from neighborhoods and schools to buses, subway lines, commuter trains, and Ubers. Yet although the evidence is in plain sight, the depth of the poverty that exists here remains invisible to many, as do the boundless advantages afforded to those perched at the top of the scale. Even harder to discern from the outside are the host of inequalities beyond paychecks and assets-in health, education, social capital, family structure and stability, equality before the law, exposure to trauma, and more-and what those inequalities, which often fall thick and fast on the same communities, mean for people's choices and chances.

The five boroughs of New York City will get the lion's share of attention in this report, but the city does not exist in isolation; it is part and parcel of the larger New York metropolitan area. Just as what happens in New York City affects the surrounding areas, so too does the regional context influence the choices and opportunities open to residents of the Big Apple.

Following the lead of the ninety year-old Regional Plan Association, this report defines greater New York as the thirty-one-county New York-New Jersey-Connecticut metropolitan region (see MAP 1). ${ }^{1}$ Metropolitan areas are based around a key city or group of cities and include suburban and exurban

New York City does not exist in isolation; it is part and parcel of the larger New York metropolitan area.

People living
in the New York metro area have longer lives, more education, and higher earnings than people in the rest of the country, on average.
communities that share significant economic and cultural ties with the urban center. Tri-state area residents share public transportation systems and highways; together they stew in traffic on the Long Island Expressway, the Brooklyn-Queens Expressway, and the New Jersey Turnpike and jostle for space below ground on the New York subway. In the summer, they lie towel-to-towel at Island Beach State Park or on Jones Beach. They inhabit the same media markets and cheer for (and jeer) the same New York sports teams; they experience the same weather, from Superstorm Sandy in 2012 to 2017's bomb cyclone; they speak literally hundreds of languages, but understand that a long sandwich on a roll is called a hero-not a grinder or a hoagie. The commuters E. B. White described are more numerous and dispersed today, participating in a regional labor market that crosses city and state lines.

The New York metro area has a higher Human Development Index score than the United States by a large margin-6.32 for greater New York compared to 5.17 for the country as a whole. People living here have longer lives, more education, and higher earnings than people in the rest of the country, on average. But the high overall score masks the significant variation that exists by race and place within the region. Thus this chapter will present index scores for the tri-state area disaggregated by demographic group (women and men; major racial and ethnic groups; US- and foreign-born residents) and by geography (170 groups of towns and neighborhoods defined by the US Census Bureau). These categories are not unrelated-quite the opposite. Due to the sharp residential segregation by race and ethnicity, national origin, and income that characterizes not just greater New York but major metropolitan areas across the United States, there is significant overlap between demographics and geography. Following this section is one called "The Five New Yorks." Because grappling with 170 different geographies across three states is difficult, in addition to presenting the full ranked list of town and neighborhood clusters, we have grouped areas with like scores together, creating "Five New Yorks" with distinct well-being profiles; these New Yorks cut across county and state lines (see PAGES 58-81).

## Variation by Gender

Tri-state area women have a slightly lower HD Index score than their male counterparts. Though women live almost five years longer than men and are more likely to be enrolled in school and have high school, bachelor's, and graduate degrees, they earn roughly $\$ 12,500$ less. This gap is more than double the gender earnings gap in America's second-largest metro area, Los Angeles, $\$ 5,792$. The gap between women and men varies by race and ethnicity, however, as table 2 shows.

TABLE 2 Human Development Index by Gender and by Race and Ethnicity

|  | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL t\% of adults 25+1 | $\begin{aligned} & \text { AT LEAST } \\ & \text { HIGH SCHOOL } \\ & \text { DIPLOMA (\% of } \\ & \text { adults } 25+\text { ) } \end{aligned}$ | AT LEAST BACHELOR'S DEGREE $1 \%$ of adults $25+$ ) | GRADUATE OR PROFESSIONAL DEGREE (\% of adults $25+$ ) | SCHOOL ENROLLMENT (\% ages 3 to 24 ) | MEDIAN EARNINGS (\$) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| UNITED STATES | 5.17 | 79.3 | 12.9 | 87.1 | 30.6 | 11.6 | 77.3 | 31,416 |
| NEW YORK METRO AREA | 6.32 | 82.2 | 13.9 | 86.1 | 38.6 | 16.0 | 80.6 | 38,641 |
| Men | 6.30 | 79.8 | 14.1 | 85.9 | 38.3 | 15.6 | 79.9 | 45,005 |
| Women | 6.25 | 84.4 | 13.6 | 86.4 | 38.8 | 16.4 | 81.4 | 32,459 |
| Asian | 7.54 | 86.6 | 16.8 | 83.2 | 54.2 | 22.9 | 85.4 | 41,583 |
| White | 7.16 | 81.1 | 6.2 | 93.8 | 47.7 | 20.7 | 82.6 | 50,253 |
| Black | 4.87 | 77.9 | 14.9 | 85.1 | 23.8 | 8.8 | 77.8 | 32,223 |
| Latino | 4.83 | 83.9 | 30.9 | 69.1 | 17.9 | 5.7 | 77.4 | 26,040 |
| Asian Women | 7.74 | 90.0 | 17.8 | 82.2 | 53.7 | 21.3 | 85.9 | 37,404 |
| Asian Men | 7.66 | 85.6 | 15.7 | 84.3 | 54.8 | 24.8 | 85.0 | 45,795 |
| White Men | 7.44 | 80.1 | 6.3 | 93.7 | 48.4 | 20.3 | 82.2 | 60,417 |
| White Women | 7.15 | 84.5 | 6.2 | 93.8 | 47.0 | 21.1 | 83.1 | 40,496 |
| Black Women | 5.39 | 81.5 | 14.5 | 85.5 | 25.6 | 9.9 | 78.7 | 31,304 |
| Latina Women | 4.73 | 85.4 | 29.7 | 70.3 | 19.6 | 6.5 | 78.6 | 21,834 |
| Latino Men | 4.68 | 81.2 | 32.1 | 67.9 | 16.0 | 5.0 | 76.2 | 29,905 |
| Black Men | 4.62 | 75.6 | 15.4 | 84.6 | 21.5 | 7.5 | 76.8 | 34,509 |

Sources: Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

## Variation by Race and Ethnicity

The racial and ethnic categories featured in this report-Asian, black, Latino, and white-are defined by the White House Office of Management and Budget. One disadvantage of these categorizations is that they are extremely broad. For example, black New York residents born here and black residents who are immigrants

The well-being ranking by race and ethnicity is as follows: Asian residents have the highest score, followed by whites, blacks, and Latinos. from the Caribbean have very different health outcomes. As internally diverse as these racial and ethnic categories are, however, the fact that such large disparities consistently exist between them, not just in greater New York but also in other states and at the national level, shows that, despite their limitations, race and ethnicity provide meaningful lenses through which to assess well-being.

The well-being ranking by race and ethnicity is as follows: Asian residents have the highest score, followed by whites, blacks, and Latinos. In the metro area as a whole, Asians and whites have very similar HD Index scores, as do blacks and Latinos.

The Asian score is 7.54 , with Asian women edging out Asian men slightly. Asian life expectancy is the highest of any group, 86.6 years, and higher still for Asian women: an Asian baby girl born today in greater New York can expect to live to see her ninetieth birthday in 2108. More than half of all Asian adults hold bachelor's degrees, and 22.9 percent hold graduate degrees, also the highest share among the four major racial and ethnic groups. Earnings, \$41,583, though higher than the metro area median, nonetheless fall far short of white earnings, $\$ 50,253$. The difference between white men and Asian men is even larger, nearly $\$ 15,000$.

The category "Asian" includes third- and fourth-generation Americans who trace their heritage to East Asia as well as new arrivals from that region; refugees from Vietnam who fled the trauma of war in the 1970s as well as those who came from far more stable circumstances via family reunification in recent decades; comparatively well-educated, affluent Indians who came for educational and job opportunities and settled in the suburbs as well as the fast-growing Bangladeshi population, whose members disproportionately live in poverty; and all their American-born children and grandchildren. As the data in this report show, Asian Americans do well when taken as a group, but a closer examination shows wide disparities in well-being among the category's linguistically and culturally diverse subgroups.

The metro area score for Asians is higher than the NYC-alone score for Asians, 6.88. Though life expectancy is almost three years longer for city Asians, due most likely to the larger share of immigrants in the five boroughs limmigrants, on average, live longer than the US-born), educational attainment levels and earnings are both lower. City Asians' median personal earnings are $\$ 32,156$, some $\$ 9,000$ less than metro area Asians' earnings (see box 5).

Unfortunately, due to data limitations, Measure of America was unable to calculate life expectancy by Asian subgroup for the metropolitan area, which means that this report does not present HD Index scores for these groups.

Education and earnings data were available, however, and appear in tABLE 3. Some Asian subgroups, such as Indians, Japanese, and Filipinos, have high levels of education and earnings across the board, indicating levels of well-being that surpass those of metro area Asians as a whole. Bangladeshi, Vietnamese, and Pakistani metro area residents have lower education levels and earnings than metro area Asians on average. Differences between men and women are quite striking among some Asian subgroups.

Chinese women and men have remarkably similar education and earnings outcomes, but gender differences are sharp among other subgroups. Indian men earn the most ( $\$ 65,049$ ) of any race/ethnicity/gender combination in the metro area, followed closely by Japanese men $(\$ 64,424)$. The wage gap between Indian women and men is extremely large, over $\$ 23,000$. Taiwanese men have better educational outcomes than their female counterparts. Three in ten Vietnamese women did not graduate high school, the largest share among Asian subgroups.

TABLE 3 Human Development Indicators by ASIAN Subgroup in the Metro Area

|  | LESS THAN HIGH SCHOOL (\% of adults 25+) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEREREE } \\ \text { (\% of adults } 25+1 \end{gathered}$ | GRADUATE DEGREE (\% of adutts 25+) | SCHOOL ENROLLMENT (\% ages 3 to 24 ) | MEDIAN EARNINGS (\$) | population <br> (\#) | PERCENT OF METRO AREA POP THATLLVESIN NYC |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Bangladeshi | 19.8 | 34.1 | 11.9 | 79.2 | 25,084 | 75,130 | 79.0 |
| Men | 17.6 | 40.9 | 12.5 | 78.0 | 27,166 | 39,396 | 81.6 |
| Women | 22.3 | 26.9 |  | 80.6 | 18,928 | 35,734 | 76.3 |
| Chinese | 28.0 | 42.6 | 18.9 | 85.2 | 35,424 | 763,314 | 70.8 |
| Men | 27.3 | 42.4 | 19.9 | 84.5 | 37,130 | 359,801 | 71.1 |
| Women | 28.7 | 42.7 | 18.0 | 86.0 | 32,038 | 403,513 | 70.6 |
| Filipino | 4.9 | 66.8 | 14.0 | 86.5 | 50,329 | 222,779 | 36.0 |
| Men | 4.6 | 62.3 | 12.6 | 87.9 | 44,409 | 94,758 | 32.2 |
| Women | 5.1 | 69.8 | 14.9 | 85.1 | 52,398 | 128,021 | 38.8 |
| Indian | 11.2 | 64.2 | 34.2 | 85.9 | 52,796 | 678,805 | 34.2 |
| Men | 9.8 | 65.2 | 36.6 | 86.2 | 65,049 | 345,920 | 34.1 |
| Women | 12.6 | 63.2 | 31.6 | 85.7 | 41,838 | 332,885 | 34.4 |
| Japanese | 3.2 | 68.9 | 21.4 | 91.7 | 52,168 | 41,551 | 55.8 |
| Men | 3.3 | 80.9 |  | 87.7 | 64,424 | 16,823 | 57.4 |
| Women | 3.2 | 61.9 | 21.2 | 98.2 |  | 24,728 | 54.8 |
| Korean | 6.1 | 62.2 | 19.4 | 88.6 | 43,452 | 218,965 | 41.6 |
| Men | 4.0 | 64.3 | 21.4 | 85.2 | 49,484 | 99,362 | 38.8 |
| Women | 7.8 | 60.4 | 17.8 | 92.1 | 37,931 | 119,603 | 43.9 |
| Pakistani | 18.9 | 42.5 | 19.2 | 85.6 | 30,928 | 109,846 | 50.4 |
| Men | 16.0 | 44.3 | 22.1 | 89.8 | 32,681 | 59,789 | 55.4 |
| Women | 22.6 | 40.1 | 15.4 | 81.3 |  | 50,057 | 44.5 |
| Taiwanese | 7.6 | 79.7 | 50.2 | 74.4 |  | 16,220 | 47.6 |
| Men | 5.4 | 86.1 | 63.5 | 86.0 |  | 6,558 | 46.2 |
| Women | 9.0 | 75.3 | 41.1 | 66.9 |  | 9,662 | 48.5 |
| Vietnamese | 28.6 | 37.2 | 12.6 | 77.1 | 30,575 | 38,175 | 36.6 |
| Men | 26.2 | 34.3 |  | 76.7 | 30,768 | 19,657 | 36.5 |
| Women | 30.7 | 40.0 |  | 77.8 |  | 18,518 | 36.7 |

[^1]
## Variation in Asian Earnings-High

 and LowIndian Men

\$38,641
\$18,928

NY Metro Area Median

Bangladeshi Women

An astonishing 86 percent of Taiwanese men and 81 percent of Japanese men hold bachelor's degrees, and nearly two in three Taiwanese men hold graduate degrees.

Bangladeshi women have the lowest rate of adult bachelor's degree attainment (26.9 percent) and the lowest earnings (\$18,928); in the New York metro area, only Mexican women earn less. Bangladeshis ( 79.0 percent), Chinese ( 70.8 percent), Japanese ( 55.8 percent), and Pakistanis ( 50.4 percent) are more likely to live in the five boroughs than outside, whereas for other Asian subgroups, the opposite is true. About two-thirds of Filipinos, Indians, and Vietnamese live outside New York City proper.

Whites have the second-highest index score, 7.16. Men outscore women slightly; though white women live four years longer and the two are neck and neck on education indicators, white men out-earn their female counterparts by a whopping $\mathbf{\$ 2 0 , 0 0 0}$. Metro area whites can expect to live about a year less than the metro area average. Close to half of all white adults hold bachelor's degrees, and one in five has earned a graduate degree. Whites pull away from other groups when it comes to earnings, with median personal earnings of more than $\$ 50,000$. White men command among the highest wages in the metro area of all major racial and ethnic groups, more than $\$ 60,000$-twice the earnings of Latino men.

Whites living in New York City proper have a slightly higher index score than metro area whites, 7.75. Interestingly, city whites live two years longer than whites in the region as a whole.

Black people living in greater New York score 4.87. The well-being gap between black women and men is the largest of any group, largely due to differences in life expectancy; black women live nearly six years longer than their male counterparts. On the other hand, the earnings gap between women and men is the smallest among the four major racial and ethnic groups, $\$ 3,205$. Overall, blacks in the metro area have the shortest life expectancy as well as educational attainment and earnings well below the metro area figures.

Though the difference in HD Index score between blacks in the five boroughs and blacks in the larger metro area is small, 5.07 compared with 4.87, respectively, their subindexes show some important differences. Black NYC residents live about two years longer than black metro area residents overall but have slightly lower levels of educational attainment.

Latino metro area residents have the lowest score among the major racial and ethnic groups, 4.83, and the gap between women and men is the smallest. Latinos have a higher-than-average life expectancy, 83.9 years. Their greatest well-being challenges are in education and earnings. Roughly a third of Latinos lack a high school diploma, and the share of adults with at least a bachelor's degree is half that of the metro area as a whole. These educational challenges are reflected in the very low earnings for this group, $\$ 26,040$. Latina women earn the least of all race/gender groups, taking home slightly more than one-third of what white men earn.

Latinos living in the city proper have a lower well-being score than Latinos in the larger metro area, 4.72. The education and earnings challenges are more pronounced for Latinos in the five boroughs but so are their life expectancy advantages. These differences relate to immigration patterns to some degree (see TABLE 6).

Latinos, like Asians, are not a monolithic group. Latinos who trace their heritage to Central America and Mexico are about twice as likely to lack high school diplomas as those who trace their heritage to South America. Close to three in ten Latinos from the Spanish-speaking Caribbean lack high school degrees, but the rate is likely lower for Cubans than for Puerto Ricans and Dominicans if New York trends follow national trends. In every subgroup, women have higher levels of education than men-but in every subgroup, men earn more.

| TABLE 4 Human Development Indicators by LATINO Subgroup in the Metro Area |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | LESS THAN HIGH SCHOOL (\% of adutts $25+$ ) | $\begin{aligned} & \text { AT LEAST } \\ & \text { BACHELOR'S } \\ & \text { DEGRE } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | graduate DEGREE (\% of adults 25+1 | SCHOOL ENROLLMENT [\% ages 3 to 24] | MEDIAN EARNINGS (\$) | POPULATION <br> [聿] | PERCENT OF METRO AREA POP THAT LIVES INNYC |
| PR, DR, Cuban | 28.7 | 17.4 | 5.2 | 76.8 | 27,767 | 2,570,099 | 53.3 |
| Men | 28.8 | 16.0 | 4.5 | 75.2 | 32,160 | 1,212,211 | 52.4 |
| Women | 28.6 | 18.5 | 5.9 | 78.3 | 24,045 | 1,357,888 | 54.2 |
| Central American | 43.9 | 12.3 | 3.8 | 72.8 | 23,729 | 623,193 | 29.9 |
| Men | 47.1 | 10.3 | 2.8 | 70.2 | 26,239 | 337,044 | 27.1 |
| Women | 40.2 | 14.5 | 5.0 | 76.1 | 19,838 | 286,149 | 33.1 |
| Mexican | 44.6 | 12.0 | 4.6 | 77.6 | 21,701 | 631,286 | 53.3 |
| Men | 44.6 | 9.5 | 3.9 | 77.8 | 24,520 | 341,649 | 53.8 |
| Women | 44.7 | 15.2 | 5.4 | 77.4 | 17,161 | 289,637 | 52.7 |
| South American | 22.4 | 22.4 | 7.1 | 80.4 | 26,241 | 968,151 | 38.7 |
| Men | 23.7 | 19.6 | 6.1 | 80.2 | 30,871 | 481,530 | 38.7 |
| Women | 21.1 | 25.1 | 8.0 | 80.6 | 21,547 | 486,621 | 38.6 |
| Other Latino | 32.3 | 23.2 | 8.9 | 84.8 | 26,242 | 172,134 | 46.6 |
| Men | 32.5 | 25.7 | 9.9 | 83.9 | 30,920 | 91,321 | 47.5 |
| Women | 32.0 | 20.5 | 7.9 | 85.8 | 22,402 | 80,813 | 45.6 |
| Spaniard | 13.2 | 48.2 | 22.0 | 85.3 | 47,073 | 64,647 | 38.6 |
| Men | 11.5 | 47.1 | 23.7 | 89.2 | 52,386 | 30,696 | 35.2 |
| Women | 14.8 | 49.3 | 20.3 | 82.5 | 41,623 | 33,951 | 41.7 |

[^2]
## box 5 A TALE OF TWO COMMUNITIES: A $\mathbf{\$ 5 0 , 0 0 0}$ Earnings Gap among Asians

Among the racial and ethnic groups for which data are available, Asians have the highest Human Development Index score in the New York metro area. Asian workers in the United States typically earn $\$ 36,300$, slightly above the median earnings of the typical white worker, who brings home $\$ 35,000$. The comparative success of Asians on earnings and educational indicators has given rise to the "model minority" myth, which proposes that, through hard work and studiousness, Asians across the board have achieved economic success. One of the troublesome assumptions of this myth is that it overlooks the great diversity of circumstances and outcomes of Asian groups in the United States. Asians are not a monolithic group; the nearly 2.5 million Asian residents of the metro area are both native and foreign-born, immigrated to the United States recently or decades ago, and come from countries that are stable and prosperous as well as poorly governed and impoverished. These different journeys result in residents with very different capabilities and well-being outcomes. Stereotypes that paint them as one homogenous group can result in some getting lost in the numbers, left out of efforts to make sure every child reaches their full potential.

Two metro area communities illustrate the widely diverging circumstances. Superficially, the Brooklyn communities of Bensonhurst and Bath Beach (New York City's Community District 11) have a lot in common with Southwest Middlesex County in New Jersey. Both have similar population sizes $(115,000$ in Southwest Middlesex and 188,000 in Bensonhurst) and are roughly 40 percent Asian and 45 percent white with the remainder of the population mainly Latino in
the Bensonhurst area and black in Southwest Middlesex. In both, roughly seven in ten of the Asian residents are immigrants. Broad health outcomes in both are very good, with average life expectancies of 82.5 years in the Bensonhurst area and 83.9 years in Southwest Middlesex.

While demographically similar, these two communities' financial numbers are worlds apart. The typical worker in Southwest Middlesex earns about $\$ 52,000$, well above the metro area median of roughly $\$ 39,000$. In Brooklyn's Bensonhurst and Bath Beach, median earnings are \$27,000, a striking \$25,000 difference. This gap in turn manifests itself in an array of other differences; Southwest Middlesex residents are nearly twice as likely to own their homes 164 percent as compared with 34 percent in Bensonhurst) and have lower rates of poverty ( 6 percent vs. 20 percent) and child poverty ( 6 percent vs. 28 percent). Zeroing in on the Asian populations in these two communities, the gap is even more pronounced. The overall earnings gap between Asians, $\$ 50,000$, is double the actual earnings in Bensonhurst. For men, the Asian earnings gap is a whopping \$70,000. While the earnings of Asian women in Southwest Middlesex are on par with the area's median, Asian men earn nearly twice thatclose to $\$ 100,000$.

This pair of neighborhoods is a stark example of Asian diversity—both economic and geographic. Nearly 90 percent of Bensonhurst-area Asians trace their roots to China, while 70 percent of Middlesex Asians are of Indian background. Indians have the highest earnings of the eight most populous Asian subgroups in the New York metro area, almost \$53,000.

Chinese residents land in the middle of the pack with earnings just under $\$ 35,500$, while Bangladeshis are at the bottom.

The generalization that all Asian Americans are economically secure hurts communities like Bensonhurst and Bath Beach, as well as Chinese New Yorkers and other groups whose day-to-day realities are far from what Asian-wide data might suggest. And this goes beyond earnings; a recent study found that wealth inequality is much greater among Asians, many of whom have little to no assets to fall back on, than among whites. ${ }^{2}$ The enormous economic diversity underneath the Asian average makes the disaggregation of data by subgroup vital in order to identify areas of need, a challenge that the Asian nonprofit community is well aware of and that can (and should) be addressed through data-collecting efforts.

New York Metro Area
Earnings by Asian Subgroup
$\left.\begin{array}{|c|c|}\hline & \text { ASIAN } \\ \text { SUBGROUP }\end{array} \begin{array}{c}\text { MEDIAN } \\ \text { EARNINGS } \\ \text { (\$) }\end{array}\right\}$

SOURCES: US Census Bureau ACS, 2015


## Variation by Nativity

## Earnings for the foreign-born lag those of the USborn by almost \$10,000.

A final demographic lens through which to explore metro area well-being is nativity. As with Asian and Latino subgroups, we were not able to calculate index scores by nativity as we did not have access to the data required to calculate one component of the index, life expectancy at birth. We do, however, have education and earnings data (see TABLE 6). The greatest difference between US- and foreign-born residents on these measures is the share of adults without high school diplomas; foreign-born residents are three times as likely to lack this credential as native-born residents. They are less likely to have bachelor's and graduate degrees and to be enrolled in school. Earnings for the foreign-born lag those of the US-born by almost $\$ 10,000$.

Native-born residents of all racial and ethnic groups perform better on high school completion than foreign-born residents. US-born Asians also have higher education indicators and earnings than foreign-born Asians across the board; the same is true for Latinos. US-born blacks are slightly less likely than their foreign-born counterparts to hold bachelor's and graduate degrees, and they earn some $\$ 4,000$ less. US-born whites are more likely to hold bachelor's degrees but less likely to hold graduate degrees than their foreign-born counterparts, and earn approximately just $\$ 700$ more.

## table 6 How Do US-Born Residents

 and Immigrants Compare?|  | $\begin{aligned} & \text { LESS THAN } \\ & \text { HIGH SCHOOL } \\ & (\% \text { of adults } 25+\text { ) } \end{aligned}$ | MEDIAN EARNINGS (\$) |
| :---: | :---: | :---: |
| Native-Born | 8.2 | 41,730 |
| Foreign-Born | 24.2 | 32,074 |
| Asian |  |  |
| Native-Born | 4.8 | 44,955 |
| Foreign-Born | 18.6 | 41,253 |
| Black |  |  |
| Native-Born | 14.1 | 31,226 |
| Foreign-Born | 16.4 | 35,553 |
| Latino |  |  |
| Native-Born | 20.3 | 30,357 |
| Foreign-Born | 38.6 | 23,940 |
| White |  |  |
| Native-Born | 4.7 | 50,321 |
| Foreign-Born | 14.9 | 49,538 |

Source: US Census Bureau ACS, 2015.

## Variation by Geography

The American Human Development Index score for the New York metro region as a whole, 6.32 , is higher than the national score, 5.17. But much more interesting and useful is understanding the range of human development outcomes within the New York metro area.

At the top of the scale is New York City's Upper East Side, with a score of 9.36. At the bottom is Southwest Newark, with a score of 3.10 (see MAP 8). A baby born
today to a family living on the Upper East Side can expect to live nearly fourteen years longer than a baby born today to a family living in Southwest Newark. Upper East Side adults are nearly six times as likely to have bachelor's degrees as adults living in Newark and have median earnings more than three times as high ( $\$ 75,313$ compared to $\$ 23,192$ ).

The unit of analysis for this section is the public use microdata area (PUMA), of which there are 170 in the tri-state area. PUMA boundaries are defined by the Census Bureau. They are all similar in size, containing at least 100,000 people. The Census Bureau splits densely populated urban and suburban counties like those found in the New York metro area into groups of adjacent neighborhoods (within New York City) and towns and cities (in northern New Jersey, southern Connecticut, the Lower Hudson Valley, and Long Island).

These designations are not perfect, as they sometimes join together socioeconomically dissimilar areas and thus mask pockets of affluence or disadvantage. For instance, the area called Westchester County (South Central) is majority nonwhite and includes the cities of New Rochelle and Mount Vernon along with the towns of Pelham and Eastchester. Median personal earnings are about \$41,000, and 43 percent of adults have bachelor's degrees. But it also contains Bronxville, a village one square mile in size that is 92 percent white and where median household income exceeds $\$ 200,000$, median personal earnings are $\$ 94,212$, and eight in ten adults hold bachelor's degrees. Similarly, the very high-scoring (8.49) and hypergentrifying area within Manhattan that encompasses Community Districts 4 and 5 (the neighborhoods of Chelsea, Clinton, and the Midtown Business District) also contains the Chelsea-Elliot New York City Housing Authority development, home to some 2,500 low-income public housing residents. Working with averages invariably throws up anomalies like these, and this report will highlight them. Nonetheless, despite their shortcomings, these PUMA groupings much more often than not bring together geographically contiguous areas that share basic socioeconomic conditions. Sometimes the PUMA boundary aligns with a city boundary; such is the case for Yonkers (see sIDEbAR). Other times, the PUMA boundary joins similar suburban towns and gives the area the name of the largest one or two towns; for example, the New Jersey towns of Summit, Mountainside, Springfield, New Providence, Berkeley Heights, part of Cranford, part of Scotch Plains, and the northern half of Westfield are combined into the Summit and Westfield PUMA.

## Yonkers, NY



Summit and Westfield, NJ


And within New York City, PUMA boundaries align with community district boundaries.

Of the ten neighborhood and town clusters with the highest scores, four are in Manhattan and one is in Brooklyn (see table 7). Northern New Jersey claims two of the top ten spots, and Long Island, Westchester, and southern Connecticut are each home to one. All are either affluent NYC neighborhoods or well-to-do suburban towns.

## TABLE 7 Top- and Bottom-Scoring Areas by HD Index

| RANK | PUMA NA | hdindex |
| :---: | :---: | :---: |
| TOP 10 |  |  |
| 1 | NY: NYC-Manhattan Community District 8-Upper East Side | 9.36 |
| 2 | NY: Nassau County (Northwest)-North Hempstead | 9.10 |
|  | NY: NYC-Manhattan Community Districts 1 \& 2-Battery Park City, Greenwich Village \& Soho | 8.97 |
|  | NJ: Bergen County (East)-Tenafly, Park Ridge \& Cresskill | 8.95 |
| 5 | NJ: Union County (Northwest)-Summit \& Westfield | 8.92 |
| 6 | CT: Fairfield, New Canaan, Wilton, Weston \& Easton | 8.88 |
|  | NY: NYC-Manhattan Community District 7-Upper West Side \& West Side | 8.86 |
|  | NY: Westchester County (Northeast)-Chappaqua, Pound Ridge, Bedford Hills, Katonah | 8.81 |
|  | NY: NYC-Manhattan Community District 6-Murray Hill, Gramercy \& Stuyvesant Town | 8.76 |
| 10 | NY: NYC-Brooklyn Community District 6-Park Slope, Carroll Gardens \& Red Hook | 8.70 |


| BOTTOM 10 |  |  |
| :--- | :--- | :--- |
| 161 NJ: Mercer County (West Central)-Trenton | 4.04 |  |
| 162 | NY: NYC-Bronx Community District 5-Morris Heights, Fordham South \& Mount Hope | 3.98 |
| 163 NJ: Passaic County (Southeast)-Paterson | 3.98 |  |
| 164 NY: NYC-Brooklyn Community District 16-Brownsville \& Ocean Hill | 3.88 |  |
| 165 | NJ: Essex County (Southeast)-Newark (North \& East) | 3.86 |
| 166 NY: NYC-Bronx Community District 4-Concourse, Highbridge \& Mount Eden | 3.59 |  |
| 167 | NY: NYC-Bronx Community District 7-Bedford Park, Fordham North \& Norwood | 3.48 |
| 168 NY: NYC-Bronx Community District 3 \& 6-Belmont, Crotona Park East \& East Tremont | 3.32 |  |
| 169 | NY: NYC-Bronx Community District 1 \& 2-Hunts Point, Longwood \& Melrose | $\mathbf{3 . 3 2}$ |
| 170 NJ: Essex County (Southeast)-Newark (Southwest) | $\mathbf{3 . 1 0}$ |  |

Sources: Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

## Among the ten PUMAs with the lowest scores, five are in the Bronx, four are in New Jersey, and one is in Brooklyn; these areas are formerly industrial cities from which manufacturing has long departed or long-neglected majorityminority urban neighborhoods (or both).

Looking at the three components of the American Human Development Index separately creates a different set of highest- and lowest-scoring areas. On the following pages we explore health, education, and earnings outcomes by place across the region.

MAP 8 Human Development Index in the Metro Area


## HEALTH

For health, the top spot goes to Southeast Westchester County; life expectancy in Larchmont, Mamaroneck, Harrison, Rye, Port Chester, Rye Brook, and Purchase is an astonishing 90.4 years. Other Westchester towns also excel in health. Life expectancy is 89.4 in and around Chappaqua, Pound Ridge, Bedford Hills, and Katonah and 86.6 in and around White Plains, Scarsdale, Hartsdale, and the River Towns. Queens has notably long life expectancies in several areas: 89.6 in Bayside, Douglaston, and Little Neck; 89.0 in Queens Village, Cambria Heights, and Rosedale; and 86.5 in Flushing, Murray Hill, and Whitestone.

Four New Jersey PUMAs are among the bottom ten: Jersey City (78.1), East Orange (78.0), Trenton (77.1), and Southwest Newark (73.3). Connecticut's New Haven (78.4) and Waterbury (77.8) are as well, along with East Harlem (78.3) and Central Harlem (78.0) in Manhattan; Belmont, Crotona Park East, and East Tremont (77.6) in the Bronx; and Brownsville and Ocean Hill (76.7) in Brooklyn.
table 9 Top- and Bottom-Scoring Areas by Life Expectancy

| RANK | - PUMA NAME | LIFE EXPECTANCY AT BIRTH (YEARS) |
| :---: | :---: | :---: |
| TOP 10 |  |  |
| 1 | NY: Westchester County (Southeast) | 90.4 |
| 2 | NY: NYC-Queens Community District 11-Bayside, Douglaston \& Little Neck | 89.6 |
| 3 | NY: Westchester County (Northeast) | 89.4 |
| 4 | NY: NYC-Queens Community District 13-Queens Village, Cambria Heights/Rosedale | 89.0 |
| 5 | NY: Nassau County (Northwest)-North Hempstead Town (North) | 88.3 |
| 6 | NY: NYC-Manhattan Community District 6-Murray Hill, Gramercy \& Stuyvesant Town | 87.0 |
| 7 | NJ: Bergen County (Southeast)-Fort Lee, Cliffside Park \& Palisades Park Boroughs | 86.6 |
| 8 | NY: Westchester County (Central)-White Plains | 86.6 |
| 9 | NY: NYC-Queens Community District 7-Flushing, Murray Hill \& Whitestone | 86.5 |
| 10 | NY: NYC-Manhattan Community District 8-Upper East Side | 86.4 |
| BOTTOM 10 |  |  |
| 161 | CT: New Haven | 78.4 |
| 162 | NY: NYC-Manhattan Community District 11-East Harlem | 78.3 |
| 163 | NJ: Hudson County (Central)-Jersey City (South) | 78.1 |
| 164 | NJ: Essex County (South Central)-East Orange | 78.0 |
| 165 | NY: NYC-Manhattan Community District 10-Central Harlem | 78.0 |
| 166 | CT: Waterbury | 77.8 |
| 167 | NY: NYC-Bronx Community District 3 \& 6-Belmont, Crotona Park East \& East Tremont | 77.6 |
| 168 | NJ: Mercer County (West Central)-Trenton | 77.1 |
| 169 | NY: NYC-Brooklyn Community District 16-Brownsville \& Ocean Hill | 76.7 |
| 170 | NJ: Essex County (Southeast)-Newark (Southwest) | 73.3 |

Source: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.

MAP 10 Life Expectancy in the Metro Area


## EDUCATION

In terms of education, the Upper East Side again tops the charts, with an astonishing eight in ten adults holding bachelor's degrees and four in ten holding graduate degrees. The lowest score is found in the Hunts Point, Longwood, and Melrose section of the Bronx, where four in ten adults did not complete high school (see MAP 12). The top- and bottom-scoring areas are just five miles apart. Aside from the Upper East Side, the Park Slope and Carroll Gardens neighborhoods of Brownstone Brooklyn, and Battery Park City, Greenwich Village, and Soho, the top education scores are found outside the city in comparatively affluent New Jersey, Long Island, Connecticut, and Westchester towns.

The Bronx is home to concentrated educational disadvantage, with five of the lowest-scoring areas. Bushwick in Brooklyn; Islip on Long Island; and Newark, Paterson, and Elizabeth in New Jersey are also among the lowest-scoring areas for education.

> The Bronx is home to concentrated educational disadvantage, with five of the lowest-scoring areas. TABLE 11 Top- and Bottom-Scoring Areas by Education Index

| Rank pumaname | education index |
| :---: | :---: |
| TOP 10 |  |
| 1 NY: NYC-Manhattan Community District 8-Upper East Side | 9.57 |
| 2 NJ: Union County (Northwest)-Summit City \& Westfield Town (North) | 9.51 |
| 3 CT: Fairfield, New Canaan, Wilton, Weston \& Easton Towns | 9.39 |
| 4 NY: Nassau County (Northwest)-North Hempstead Town (North) | 9.23 |
| 5 NY: Westchester County (Central)-White Plains City | 8.84 |
| 6 NJ: Essex County (Southwest) | 8.79 |
| 7 NY: NYC-Brooklyn Community District 6-Park Slope, Carroll Gardens \& Red Hook | 8.76 |
| 8 NJ: Mercer County (North)-Princeton Borough | 8.66 |
| 9 NJ: Morris County (South)-Morristown Town, Madison \& Florham Park Boroughs | 8.65 |
| 10 NY: NYC-Manhattan Community District 1 \& 2-Battery Park City, Greenwich Village/Soho | 8.62 |
| BOTTOM 10 |  |
| 161 NJ: Essex County (Southeast)-Newark City (North \& East) | 3.31 |
| 162 NY: NYC-Bronx Community District 9-Castle Hill, Clason Point \& Parkchester | 3.31 |
| 163 NY: NYC-Bronx Community District 4-Concourse, Highbridge \& Mount Eden | 3.25 |
| 164 NY: Suffolk County (Central)-Islip Town (Northwest) | 3.24 |
| 165 NY: NYC-Brooklyn Community District 4-Bushwick | 3.09 |
| 166 NJ: Passaic County (Southeast)-Paterson City | 3.06 |
| 167 NY: NYC-Bronx Community District 3 \& 6-Belmont, Crotona Park East/East Tremont | 3.03 |
| 168 NJ: Union County (Northeast)-Elizabeth City | 2.95 |
| 169 NY: NYC-Bronx Community District 7-Bedford Park, Fordham North \& Norwood | 2.65 |
| 170 NY: NYC-Bronx Community District 1 \& 2-Hunts Point, Longwood \& Melrose | 2.54 |

[^3]MAP 12 Education Index in the Metro Area


## INCOME

In terms of median personal earnings, the high of $\$ 86,164$ is found in Manhattan, in Battery Park City, Greenwich Village, and Soho. The low, $\$ 21,306$, is found in Belmont, Crotona Park East, and East Tremont in the Bronx (see MAP 14). Manhattan nabs half the top ten spots; communities in New Jersey's Bergen, Union, and Somerset Counties account for three; and Brooklyn and Connecticut each have one. Half of the locales with the lowest median personal earnings are found in the Bronx. Newark and Paterson are among the lowest-earning areas, as are Sunset Park and Windsor Terrace in Brooklyn and Elmhurst and South Corona in Queens.
table 13 Top- and Bottom-Scoring Areas by Earnings

| Rank | PUMA NAMES | MEDIAN EARNINGS (\$) |
| :---: | :---: | :---: |
| TOP 10 |  |  |
| 1 | NY: Manhattan Community District 1 \& 2-Battery Park City, Greenwich Village/Soho | 86,164 |
|  | NY: Manhattan Community District 4 \& 5-Chelsea, Clinton \& Midtown Business District | 80,264 |
|  | NY: Manhattan Community District 6-Murray Hill, Gramercy \& Stuyvesant Town | 76,879 |
| 4 | NY: Manhattan Community District 8-Upper East Side | 75,313 |
| 5 | NY: Brooklyn Community District 6-Park Slope, Carroll Gardens \& Red Hook | 70,081 |
| 6 | NJ: Tenafly, Park Ridge \& Cresskill, NJ | 67,379 |
|  | NY: Manhattan Community District 7-Upper West Side \& West Side | 66,666 |
|  | NJ: Summit City \& Westfield Town, NJ (North) | 62,705 |
|  | NJ: Somerset County, NJ (North \& West) | 61,676 |
| 10 | CT: Fairfield, New Canaan, Wilton, Weston \& Easton, CT | 61,237 |
| BOTTOM 10 |  |  |
| 161 | NY: Queens Community District 4-Elmhurst \& South Corona | 23,632 |
| 162 | NJ: Newark, NJ (Southwest) | 23,192 |
| 163 | NJ: Newark, NJ (North \& East) | 22,966 |
| 164 | NY: Bronx Community District 5-Morris Heights, Fordham South \& Mount Hope | 22,494 |
| 165 | NJ: Paterson, NJ | 22,256 |
| 166 | NY: Brooklyn Community District 7-Sunset Park \& Windsor Terrace | 22,025 |
| 167 | NY: Bronx Community District 1 \& 2-Hunts Point, Longwood \& Melrose | 21,687 |
| 168 | NY: Bronx Community District 4-Concourse, Highbridge \& Mount Eden | 21,577 |
| 169 | NY: Bronx Community District 7-Bedford Park, Fordham North \& Norwood | 21,341 |
| 170 | NY: Bronx Community District 3 \& 6-Belmont, Crotona Park East/East Tremont | 21,306 |

[^4]MAP 14 Earnings in the Metro Area


## Most Segregated US

 Metro Areas
## BLACK

1 Milwaukee-WaukeshaWest Allis, WI
2 New York-Northern New Jersey-Long Island, NY-NJ-PA
3 Chicago-Naperville-Joliet, IL-IN-WI

## LATINO

1 Springfield, MA
2 Los Angeles-Long BeachSanta Ana, CA
3 New York-Northern New Jersey-Long Island, NY-NJ-PA

## ASIAN

1 Buffalo-Niagara Falls, NY
2 Pittsburgh, PA
3 New York-Northern New Jersey-Long Island, NY-NJ-PA

Source: William H. Frey analysis of 1990, 2000, and 2010 Censuses

## Spotlight on Vital Regional Issues

## WHO LIVES WHERE AND WHY IT MATTERS

Taken as a whole, the New York metro area is wildly diverse. But, like most large metro areas, greater New York is bedeviled by persistently high levels of residential segregation-by race and ethnicity, by national origin, and by income, occupational category, and educational level. While there are certainly areas of the city proper that are highly diverse block by block-the 7 train's ten-mile route from Flushing to Hudson Yards famously passes through neighborhoods where literally hundreds of languages are spoken³-in most of the metro area, people live near others who are similar to them in terms of both race and ethnicity and economic circumstances.

Residential segregation matters because where you live gives form to your daily routine and defines key aspects of your quality of life; it affects the jobs and schools you and your family have access to, determines your level of exposure to various risks, such as crime and pollution, and shapes the social world and life chances of your children. For those excluded from opportunity-rich communitieseither financially or by virtue of discrimination, past and present-segregation harms well-being and hinders mobility.

Among the country's 102 most populous metropolitan areas (those with populations of 500,000 or more), the New York metro area ranks second for the level of segregation of black residents and third for the levels of segregation for both Latino and Asian residents. ${ }^{4}$ MAP 15 provides a visualization of residential segregation in greater New York, color coded by race and ethnicity. Each dot represents 500 people.

Greater New York also stands out for its level of residential segregation by income. Residential segregation by income has grown nationwide since the 1970s, due largely to rising income inequality; in the 1970s, two in three families lived in middle-class neighborhoods, compared to just 43 percent by 2007. ${ }^{5}$ The situation is particularly stark in the tri-state area. Among the 100 largest metro areas in the years from 2010 to 2014, three tri-state area urban clusters-NewarkUnion in New Jersey, Bridgeport-Stamford-Norwalk in Connecticut, and New York-Wayne-White Plains in New York—were among the top five most segregated metros by income overall. In other words, poor families were more likely to live in poor neighborhoods and affluent families were more likely to live in affluent neighborhoods than in most other urban areas in the United States. In addition, Bridgeport-Stamford-Norwalk and New York-Wayne-White Plains occupied the first and second positions among the 100 metros for the segregation of the affluent; ${ }^{6}$ rich families in these metros were more likely than families pretty much anywhere else in the country to live among other rich families.

Residential segregation has dramatic and distinct consequences for both low- and high-income families; because "opportunities and resources are unevenly distributed in time and space, some neighborhoods have safer streets,


> Although there are certainly exceptions, both high-scoring and low-scoring parts of greater New York are often clustered together.
higher home values, better services, more effective schools, and more supportive peer environments than others." ${ }^{77}$ Tri-state area residents of high-HD Index city neighborhoods like the Upper East Side and Battery Park City and tony suburban towns like Rye and Roslyn benefit from cumulative, concentrated advantagethe affluence, educational attainment, political power, and social networks of their neighbors multiply their personal capabilities and dramatically expand their access to resources and opportunities. The collective social and financial capital concentrated in such communities ensures that residents' voices are heardand heeded-when it comes to siting a sewage treatment plant or improving a local playground.

Residents of low-HD Index NYC neighborhoods like Castle Hill or Brownsville or cities like Trenton or Waterbury suffer the effects of concentrated, cumulative disadvantage-a heaping on of challenges such as poverty, discrimination, social exclusion, violence, mass incarceration, housing instability, exposure to pollution, and family fragility. The struggles of individual families are mirrored and magnified by the struggles of those around them. These communities tend to be geographically isolated, ill-served by public transportation, and comprised largely of Latinos, blacks, and immigrants with limited formal education, who are more likely to settle in historically under-resourced neighborhoods. ${ }^{8}$ Elected officials are far less responsive to the needs of these communities and their low-income residents; ${ }^{9}$ the indifference of their elected officials combined with poor-quality public services and aggressive neighborhood policing, particularly of young men of color, contributes to distrust of local government institutions. ${ }^{10}$

Although there are certainly exceptions, both high-scoring and low-scoring parts of greater New York are often clustered together. The Bronx, Paterson, Newark, and Bridgeport, for instance, are home to large swaths of contiguous neighborhoods that have experienced decades of disinvestment. At the opposite end of the spectrum, Manhattan's East Side; Long Island's North Shore; Connecticut's Gold Coast; lower Westchester County villages like Larchmont, Scarsdale, Ardsley, and the River Towns; and adjacent New Jersey boroughs like Summit, New Providence, Berkeley Heights, and Westfield are all home to long-established high-income communities chock-a-block with amenities and opportunities. This geographic clustering intensifies the positive effects of living in a high-HD locale and the negative effects of living in a low-HD locale. A person living in Summit who is looking for a good job or internship, enriching activities for his or her children, a medical specialist, healthy food, or a safe, pleasant place to exercise is surrounded by options. Residents of tri-state area communities with low HD Index scores, on the other hand, are not only less likely to find green space, good schools, economic opportunities, and other resources in their neighborhoods, they are also less likely to find them in nearby communities, contributing to social isolation and exclusion. The way the region's different communities are served by public transportation - with low-income neighborhoods whose residents most rely
on public transportation often suffering the poorest quality servicesintensifies this phenomenon.

Residential segregation is so widespread and deeply entrenched in greater New York as to seem natural and immutable. It is anything but. Residential segregation by race has its roots in a poisonous web of discriminatory housing policies at the local, state, and federal levels in effect from the 1930s through the 1970s. Though outlawed for decades, these past policies cast their long shadow into the present. For instance, redlining-the name given to the process the federal government's mortgage-lending institution, the Home Owners' Loan Corporation (HOLC), used to assess neighborhoods for "mortgage risk"—blocked nonwhite communities from receiving federally guaranteed housing loans during the New Deal era by labeling black and brown neighborhoods as "risky" investments. ${ }^{11}$ (The name "redlining" comes from the fact that so-called "risky" areas were colored red on HOLC's residential security maps; areas deemed least risky were colored green.) It also kept black World War II veterans from benefiting from the GI Bill's housing loans. ${ }^{12}$ These and other discriminatory policies, which kept black families from building wealth the way white families typically did, through their homes' appreciation and tax breaks like the mortgage interest deduction, lie at the root of today's black-white wealth gap and shaped the patterns of residential segregation that persist even now.

Residential segregation today is also maintained by zoning laws across metro area suburbs that limit or prohibit multifamily housing and require that single-family houses sit on lots that meet minimum size requirements, making the construction of apartments and affordable houses extremely difficult; by skyrocketing income inequality and the resulting gentrification of formerly affordable neighborhoods; and by the ways school districts are drawn and funded, which concentrate affluent, mostly white families in towns known for good public schools and exclude low-income children from the educational resources that could enable social mobility. And residential segregation is also reflected in the metro area transportation system, the topic of the next section.

## Residential

## Same Tracks, Different Commuters



Metro area commutes can be nasty, brutish, and, unfortunately, anything but short.

## THE COLOR OF TRANSPORTATION

On any given weekday morning, nearly everyone standing on the southbound side of the Metro-North platform in Chappaqua waiting for the 7:55 a.m. express to Grand Central Station is white. Their rush-hour train will fly through lower Westchester County and the Bronx, stopping just twice before plunging below ground at 96th Street, covering the thirty-three-mile route in about fifty minutes; trains like this one run reliably every twenty minutes during the morning and evening rushes, taking workers to and from office jobs in the city.

In contrast, most of the people who got off the northbound train from Grand Central across the Chappaqua station platform moments before were black or Latino. Some of the riders boarded at Grand Central, many after a subway ride from Queens or Brooklyn. Others transferred from the 6:31 a.m. local that made seventeen stops in Harlem, the Bronx, and lower Westchester County before connecting to the Chappaqua-bound train in White Plains. For a person boarding at the Melrose station in the Morrisania section of the Bronx, the twenty-six-mile train trip took a little over an hour (in addition to the bus ride or walk from home to the Melrose station). People who commute north to Chappaqua for work tend to provide services to town residents; they clean houses, care for the young and elderly, staff kitchens and wait tables, or work in construction, landscaping, and maintenance.

The morning scene at the Chappaqua station is a stark manifestation of the ways race and ethnicity, income, and occupational category interact with residential segregation, congestion, and transportation infrastructure across the metro area. Transportation is a human development issue because affordable, accessible, and dependable transportation expands the opportunities people have to access jobs, health and education services, and recreation without eating up what are often their scarcest, most valuable resources-time and money. Quality public transportation, in short, gives people freedom.

Metro area commutes can be nasty, brutish, and, unfortunately, anything but short. Decades of disinvestment and mismanagement, the long-term neglect of maintenance, and the lingering effects of Hurricane Sandy in 2012 have joined forces to create a crisis underground; the New York City subway system has the "worst on-time performance of any major rapid transit system in the world." ${ }^{13}$ And for New Yorkers seeking relief from the sardine-can conditions and seemingly endless delays by fleeing to the surface, it's out of the frying pan and into the fire. New York ranks third on a recent list of 100 major global metro areas for the number of peak hours the average car commuter spent in traffic congestion in 2017—ninety-one hours—and the Cross Bronx Expressway has the dubious distinction of being the country's worst traffic corridor, with the "average driver on the 4.7-mile stretch wasting 118 hours per year in congestion, an increase of 37 percent over [2016]."14 As app-based ride-sharing services have poured into the city, traffic has slowed-the average traffic speed in Midtown was 4.7 miles per hour in 2017, down from 6.7 miles per hour in $2012^{15}$ —affecting not only the Uber, Lyft, and Via patrons themselves but
also slowing buses to a crawl, impeding emergency vehicles, and adding to the cost of the delivery services NYC businesses depend upon.

But some New Yorkers have the resources to insulate themselves from at least some of the stresses of commuting, like overcrowding and unpredictability. These New Yorkers are more likely to be white; to work in management, business, science, and the arts; and to live in areas with high HD Index scores, which tend to be comparatively well served by reliable public transportation. Others, particularly people of color, people working in service industries, and residents of areas that score poorly on the Human Development Index, are more likely to be at the mercy of a transportation system that fails to meet their needs but from which they cannot afford to exit. They are also more likely to pay the price for other people's transportation choices, particularly car commutes; communities that abut heavily trafficked roads like the Cross Bronx Expressway, which generate health-harming particulate matter and other pollutants, are disproportionately home to low-income people of color. The paragraphs below tease out specific aspects of commuting, from commute time to type of transportation. Together they tell a story of inequitable access, uneven distribution of resources, and a disconnect between who benefits from different types of transportation and who pays the costs.

## WHERE DO RESIDENTS OF THE NEW YORK METRO AREA LIVE AND WORK?

Counties. More than half of all employed residents work in the county where they live. Of those who live outside the five boroughs, 14 percent commute to New York City. And of those who live in the five boroughs, 8 percent do a "reverse commute," swimming against the tide each morning and evening as they make their way to their jobs and back again. The four counties with the largest shares of workers commuting into New York City—Nassau (32 percent of workers commute to the city), Westchester (30 percent), Hudson (29 percent), and Bergen (21 percent)—are geographically closest to the city and have the shortest average commute times among city-bound commuters.

Race and ethnicity. Roughly two-thirds of metro area whites both live and work outside the city, 23 percent both live and work in the city, and 10 percent commute into the city from surrounding counties. About half of Latinos both live and work outside the city, 40 percent both live and work in the city, and 6 percent commute into the city. The largest shares of black and Asian residents, nearly half of both groups, live and work in the city, and just under 40 percent live and work outside the city. Asians workers are the most likely to live outside the city and commute in; 12 percent do (see TAble 16).

## HOW MUCH TIME DO THEY SPEND COMMUTING EACH WAY?

Counties. Workers who live in counties outside the five boroughs but work in the city have the longest commutes, on average. Despite the geographic concentration of the five boroughs, city residents who commute to work across


Who is more likely to be at the mercy of a transportation system that fails to meet their needs but from which they cannot afford to exit?

People of color

- People working in service industries
- Residents of areas that score poorly on the HD Index


## White workers

 have the shortest commutes on average, followed by Latino, Asian, and black workers.How Long Does It Take To...


Commute within own county of residence

25 min.
Commute between two counties outside NYC


Commute between two NYC boroughs


Commute into NYC

64 min.

TABLE 16 Commuting to and from NYC by Race and Ethnicity

|  | ALL METRO AREA <br> COMMUTERS (\%) | ASIAN <br> COMMUTERS (\%) | BLACK <br> WHERE | LATINO <br> COMMUTERS (\%) | WHITE <br> COMMUTERS (\%) |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Lives and works outside NYC | 54 | 37 | 39 | 50 | 65 |
| Lives and works in NYC | 34 | 46 | 49 | 41 | 23 |
| Commutes into NYC | 9 | 12 | 8 | 6 | 10 |
| Commutes out of NYC | 3 | 5 | 4 | 3 | 2 |
| TOTAL | 100 | 100 | 100 | 100 | 100 |
| How MUCH TIME |  |  |  |  |  |
| Average commute time (mins) | $\mathbf{3 5}$ | $\mathbf{3 9}$ | $\mathbf{4 0}$ | $\mathbf{3 5}$ | $\mathbf{3 3}$ |

Source: US Census Bureau ACS, 2015.
borough lines have the second-longest average travel times, a consequence of the Manhattan-centric design of the subway system and the tremendous traffic congestion across the city. NYC residents who commute out of the city come next, followed by non-NYC residents commuting to other non-NYC counties, and finally, with the shortest commutes, non-NYC residents who live and work in the same county (see sidebar).

Race and ethnicity. White workers have the shortest commutes on average, followed by Latino, Asian, and black workers (see table 16).

Mode of transportation. Those who walk, bike, or grab a cab get to work in less than twenty-five minutes, on average. Those who drive have average commutes of just under thirty minutes, and those who take the subway to work spend almost fifty minutes commuting. Bus commutes tend to take fifty-one minutes, longer than all other modes of transportation except ferries and trains. Those who take the train have the longest commutes, about one hour and fifteen minutes on average. Though longer, train commutes are, on average, more predictable and less overcrowded than subway commutes (see sidebar on right page).

## WHO USES WHICH MODES OF TRANSPORTATION? Trains, planes, and automobiles

 How New York metro area residents get to work varies by location, race and ethnicity, and occupation. The built environment in New York City proper is very different from those of the surrounding counties, and these differences are reflected in the transportation options available to commuters. For example, white workers are the most likely to walk to work in the city but the least likely to do so outside the city, where Latinos are the most likely; walking to work in the city is viewed as a perk for those who can afford to live near their offices, but walking to work outside the city is more likely to be a necessity for those without cars or access to public transportation.People of color depend on the bus. Black and Latino workers together make up less than half of commuters in the city and 30 percent of commuters in surrounding
counties but about 60 percent of bus commuters in both. Outside of NYC, of those commuting within their own county by bus, a whopping 77 percent are black or Latino, and 46 percent are black or Latino blue-collar workers more specifically. ${ }^{16}$ Black and Latino residents are more likely than white residents to live in geographically isolated pockets of the metro area, far from the reach of the subway or train lines, and because these groups are disproportionately low income, they are less likely to own cars. Nearly all white workers outside the city who commute within their own county do so by car (94 percent).

Non-NYC dwellers. Outside New York City, the car is king: about three-quarters of Asians, blacks, and Latinos and almost 90 percent of whites drive to work. Among black and Latino commuters, another 10 percent get to work by bus. Among white and Asian commuters, 6 and 8 percent, respectively, take the train to work (primarily to commute into the city).

NYC dwellers. While cars are ubiquitous in smaller cities as well as the suburbs and exurbs, nearly half of all NYC-dwelling workers commute by subway-half of Latinos and 45 percent of all other groups. The second most popular way to get to work for all groups in the city is by car. The bus comes in third among blacks and Latinos, but for whites and Asians, walking takes the third spot.

Occupations. Workers in management, business, science, and the arts are the most likely to take the train and least likely to take the bus. Over 80 percent of train commuters work in management or sales and office occupations. Though train commutes are the longest on average, they are comfortable (nearly everyone gets a seat), comparatively quiet, and more reliable than other types, and many commuters use their train time to work or read. Service workers are the most likely to take the bus or the subway and the least likely to drive to work. Production and construction workers are the most likely to drive and least likely to take the subway.

## HOW WELL ARE NYC NEIGHBORHOODS SERVED BY PUBLIC TRANSPORTATION?

While city residents rely on public transportation far more than those in the surrounding metro area, not all neighborhoods are served equally. According to the Regional Plan Association, less than two-thirds of the city's population lives within walking distance of a subway station. Among the neighborhoods with poor access to subways, there are many whose high population density justifies subway access. These neighborhoods, whose low-income residents rely heavily on public transportation to get to work, include the Bronx in the southeast and along the Third Avenue corridor, East Harlem and the Lower East Side in Manhattan, central and northeastern Queens (North Corona, College Point, Pomonok, and Fresh Meadows), and southeastern Brooklyn (Flatlands, Canarsie, and Marine Park). ${ }^{17}$ Some of these neighborhoods, like those in the Bronx and North Corona in Queens, are located in low-HDI areas, where the lack of public transportation converges with other wellbeing challenges. In many cases, the metro area residents most in need of reliable, affordable public transportation are also those facing the greatest barriers to access.


Nine in Ten Residents Commute by Car, Subway or Bus


Historically disenfranchised communitiescommunities of color and low-income communitiestend to bear the brunt of environmental harm.

## ENVIRONMENTAL JUSTICE IN NEW JERSEY'S INDUSTRIAL CORRIDOR

Most people recognize the connection between living in a clean environment and enjoying a long and healthy life, and the effects of pollution on physical health are well documented and widely known. The concept of environmental justice brings to the fore another connection between the environment and human development: income and education, which to a large extent determine political power, affect who gets a say in environmental decisions, and, as a result, who is exposed to environmental hazards. ${ }^{18}$ The principle underlying environmental justice is that everyone, not just those who enjoy a privileged position in society, deserves protection from environmental toxins. But reality is often far from this ideal.

The affluent protect themselves from hazards by living in neighborhoods where zoning prohibits polluting industries, by influencing policymakers to site potential hazards like waste transfer stations far from their homes and schools, and by having the social, political, and economic power to fight financially formidable commercial interests. ${ }^{19}$ Historically disenfranchised communitiescommunities of color and low-income communities-tend to bear the brunt of environmental harm, while those who benefit most from polluting activities are best positioned to escape it. Research in this vein has found that both socioeconomic standing and race-independent of income-determine exposure to environmental hazards. ${ }^{20}$

The capabilities approach sees all aspects of advantage and disadvantage as interconnected and mutually reinforcing; similarly, environmental justice views environmental harm as a piece of the larger puzzle of inequality. A recent Measure of America report found that thirteen of the nineteen Los Angeles County communities with the lowest Human Development Index scores (under 4.00) also had some of the highest levels of exposure to environmental hazards; they were clustered along Interstate-710 ("the 710"), a commercial corridor laden with polluting industries and overloaded with truck traffic, and had populations that were over 90 percent black and Latino. ${ }^{21}$

In the New York metro area, a similarly striking example of environmental injustice is found along an eleven-mile stretch of the New Jersey Turnpike. A tour of this corridor makes evident the industrial history and character of the area. The seaports of Elizabeth and Newark's South Ward, which together form Port NewarkElizabeth, the third-largest seaport in the United States, is essentially covered with diesel particulate pollution from transportation and industry that is typically co-located with ports. ${ }^{22}$ The journey from Elizabeth into Linden includes a large oil refinery and a plant that processes crude oil into gasoline, jet fuel, and heating oil. While its toxic air emissions have been falling over the years due to stricter regulations, this plant is historically one of the largest emitters in the state. ${ }^{23}$

Though the area appears entirely industrial, especially to those whizzing through at sixty miles per hour, three-quarters of a million people live in
residential communities bordering and sometimes interspersed with these industrial sites. All the towns along this corridor are majority-minority, with major racial and ethnic groups varying by town, and the area as a whole ranks high on the demographic indicator of linguistic isolation (linguistic isolation is a concentration of families in which everyone over 14 years of age speaks English "less than well"). ${ }^{24}$ In Elizabeth, half of residents were not born in the United States, and in parts of Newark and Elizabeth, over a quarter of adults have not completed high school, leading to median earnings under $\$ 25,000$. The average life expectancy in Southwest Newark is 73.3 years, the lowest in the state and a full eight years less than in Elizabeth, Carteret, and Perth Amboy. Nationally, this corridor ranks in the ninetieth percentile for environmental hazard indicators such as diesel particulate matter, the respiratory hazard index, traffic proximity, and superfund and hazardous waste site proximity. ${ }^{25}$

All of these data point to communities that are disadvantaged and overburdened both environmentally and economically, and it shows in their health.

## New Jersey Turnpike Industrial Corridor


table 17 HD Index in New Jersey's Industrial Corridor

| PUMA NAME | FIVE NEW YORKS | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ |  | $\left.\begin{array}{\|c} \text { LESS THAN } \\ \text { HEG SCHOOL } \\ (\% \% \text { odults } \\ 25+1) \end{array} \right\rvert\,$ | MEDIAN EARNINGS (\$) | UNEMPLOYMENT RATE, 16 AND OVER (\%) | $\begin{gathered} \text { ASIAN } \\ (\%){ }^{2} \end{gathered}$ | $\underset{[\%]}{\text { BLACK }}$ | Latino [\%] | WHITE [\%] | FOREIGNBORN (\%) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ESSEX COUNTY (SOUTHEAST) - NEWARK CITY (NORTH \& EAST) | Precarious | 3.86 | 79.6 | 28.8 | 22,966 | 12.0 | 1.7 | 23.5 | 53.5 | 16.7 | 37.0 |
| ESSEX COUNTY (SOUTHEAST) <br> - NEWARK CITY (SOUTHWEST) | Precarious | 3.10 | 73.3 | 21.1 | 23,192 | 19.2 | 1.9 | 82.2 | 11.2 | 2.5 | 22.3 |
| UNION COUNTY (NORTHEAST) - ELIZABETH CITY | Struggling | 4.22 | 81.2 | 28.4 | 25,574 | 8.6 | 1.8 | 17.2 | 64.1 | 14.3 | 49.2 |
| UNION COUNTY (SOUTHEAST) - LINDEN, RAHWAY CITIES \& ROSELLE BOROUGH (SOUTH) | Struggling | 5.30 | 79.8 | 12.4 | 36,019 | 7.3 | 2.6 | 26.9 | 24.4 | 43.7 | 26.1 |
| MIDDLESEX COUNTY (NORTHEAST)- CARTERET BOROUGH | Main Street | 6.61 | 81.6 | 10.1 | 44,424 | 5.0 | 25.0 | 11.7 | 17.5 | 43.8 | 33.3 |
| MIDDLESEX COUNTY (EAST CENTRAL)- PERTH AMBOY CITY \& SAYREVILLE BOROUGH | Main Street | 5.55 | 81.4 | 20.9 | 36,100 | 6.1 | 9.4 | 8.7 | 44.9 | 35.9 | 33.5 |

[^5]
## B0X 18 Immigration to the Suburbs

Of the country's 100 largest metro areas, greater New York saw the largest increase in its foreign-born population between 2000 and 2013, adding close to 800,000 people. ${ }^{26}$ New York City, home to Ellis Island and long the gateway for immigrants into the United States, continues to attract newcomers, but its suburbs are increasingly becoming immigrant magnets as well. For the first time ever, there are more foreign-born metro-area residents living outside the city than in it. ${ }^{27}$

Overall, the share of foreignborn residents increased from 24 percent in 2000 to 28 percent in 2016. The change is most noticeable in areas outside the city, where foreign-born residents made up 17 percent of the population in 2000 but 22 percent in 2016. In the city, on the other hand, the foreignborn share has barely increased since 2000-from 36 percent to 37 percent. The share of foreignborn residents increased by 9 percentage points in Middlesex County, NJ, followed by 8 points in the Bronx and Mercer County, NJ; 7 points in Staten Island; and 6 points in Somerset, Bergen, Hudson, Union, and Warren Counties in New Jersey. The share of foreign-born residents decreased in Brooklyn and stayed flat in Manhattan. ${ }^{28}$ The absolute number of foreign-born residents has grown the most in the Bronx, followed by Hudson, Middlesex, Bergen, Suffolk, Nassau, and Westchester Counties, where there are between 36,000 and 57,000 more foreign-born residents today than in 2006.

It is difficult to tell for sure
whether immigrants bypass the city to settle directly in the suburbs, or if they first live in the city then move to the suburbs, perhaps more quickly than in previous generations, but the data provide some clues. The share of recent immigrants (those who arrived after 2010) out of all immigrants is the largest in Hudson County ( 25 percent), followed by Manhattan (22 percent), Middlesex County (20 percent), and Essex County, the Bronx, and Passaic County (18 percent). Overall, the share of recent immigrants is virtually the same in the city versus the surrounding counties (17 and 16 percent respectively). ${ }^{29}$ This suggests that there is no reason to believe that immigrants in the suburbs have been in the United States for much longer than those in the city.

## So why are immigrants

## increasingly choosing the suburbs over the urban core?

 Some argue that the promise of homeownership, a more financially viable prospect in suburbs than in increasingly high-cost city centers, attracts immigrants who yearn for the permanence, legitimacy, and stability owning a home provides. ${ }^{30}$ This explanation may well apply to New York City, where housing costs in much of the city, including former immigrant enclaves such as Chinatown, the Lower East Side, and Crown Heights, have skyrocketed in recent years. And some immigrants head to the suburbs in search of the same things as native-born residents-better schools, more space, backyards, less noise, greater safety, and a less-hectic pace.

## Warren, Hunterdon, and Litchfield Counties Saw the Largest Increase in the Share of Immigrants

| COUNTY | $\begin{aligned} & \text { FOREIGN- } \\ & \text { BORN } \end{aligned}$ $2000 \text { (\%) }$ | $\begin{aligned} & \text { FOREIGN- } \\ & \text { BORN } \\ & 2016 \text { (\%) } \end{aligned}$ | PERCENT CHANGE 2000-2016 |
| :---: | :---: | :---: | :---: |
| NJ Warren County | 6 | 11 | 97 |
| NJ Hunterdon County | 6 | 12 | 84 |
| CT Litchfield County | 5 | 9 | 64 |
| NJ Mercer County | 14 | 22 | 55 |
| NY Putnam County | 9 | 13 | 51 |
| NJ Sussex County | 6 | 8 | 49 |
| NY Staten Island | 16 | 23 | 43 |
| NY Suffolk County | 11 | 16 | 42 |
| CT New Haven County | 9 | 13 | 40 |
| NY Dutchess County | 8 | 12 | 38 |
| NJ Monmouth County | 10 | 14 | 38 |
| NJ Middlesex County | 24 | 33 | 36 |
| NJ Somerset County | 18 | 24 | 35 |
| NY Orange County | 8 | 11 | 31 |
| NJ Ocean County | 7 | 8 | 30 |
| NY Ulster County | 6 | 8 | 30 |
| NY Bronx | 29 | 37 | 29 |
| CT Fairfield County | 17 | 22 | 29 |
| NJ Morris County | 15 | 20 | 27 |
| NY Nassau County | 18 | 22 | 26 |
| NJ Bergen County | 25 | 31 | 24 |
| NJ Union County | 25 | 31 | 23 |
| NY Rockland County | 19 | 23 | 20 |
| NJ Essex County | 21 | 25 | 17 |
| NJ Passaic County | 27 | 31 | 15 |
| NY Westchester County | 22 | 26 | 15 |
| NJ Hudson County | 39 | 44 | 15 |
| NY Sullivan County | 8 | 9 | 11 |
| NY Queens | 46 | 47 | 2 |
| NY Manhattan | 29 | 30 | 1 |
| NY Brooklyn | 38 | 36 | -4 |

The Metro-Area Immigrant Population Increased by 1.1 Million People from 2000 to 2016


Sources: US Census Bureau Summary File 3, 2000 and ACS, 2016.

More Immigrants Moved to the Bronx than to Any Other Metro-Area County

## The Share of the Population that Is Foreign Born Grew the Most Outside the Five Boroughs



## Global Goals Dashboard

As a supplement to the American HD Index, we have included this Global Goals Dashboard. It is a distilled version of the Sustainable Development Goals (SDGs) and their associated indicators. The SDGs are the global blueprint for a just and sustainable future. The United Nations coordinated the inputs of 193 countries and thousands of civil society organizations to arrive at a set of seventeen goals and 169 targets to be achieved in all countries by 2030. The SDGs offer a way to understand and address critical barriers to well-being, economic growth and prosperity, and environmental sustainability in the United States and to put American challenges and opportunities within a global context. The United States played a leading role in negotiating these goals; as a result, they reflect American values and priorities.

The spirit behind the global goals is not just to meet the goals as measured by global or national averages but rather to spur meaningful action in states and cities, counties and communities. The true aim is meeting the goals everywhere and for everyone, not just in aggregate at the national level. Doing so in the United States will require adapting the global goals in terms of relevant geographic units of analysis (states, metro areas, or counties), population groups (major racial and ethnic groups, women and men, foreign- and US-born residents), and indicators.

## The Global Goals Dashboard

| SUSTAINABLE DEVELOPMENT GOALS |  | NO POVERTY | ZERO HUNGER$2^{\text {III }}$ |  | GOOD HEALTH \& WELL-BEING$3-10$ |  |  | QUALITY EDUCATION $4$  | INNOVATION <br> 9 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | INDICATOR | Poverty <br> (\% in households with incomes below federal poverty line) | Child <br> Poverty <br> (\% of children in households with incomes below 200\% of federal poverty line) | SNAP <br> Benefits <br> \% of <br> households <br> based on race <br> of household <br> head) | Low Birth <br> Weight <br> Babies <br> (\% based <br> on race of <br> mother) | Life <br> Expectancy at Birth <br> (years) | No Health Insurance <br> (\% of total population) | Preschool Enrollment <br> (\% of 3- and <br> 4 -year-olds) | Did Not <br> Complete High School <br> \% of adults age 25+] | Completed at Least Bachelor's Degree (\% of adults age 25+) |
|  | United States | 14.0 | 41.4 | 12.4 | 8.2 | 79.3 | 8.6 | 48.0 | 12.9 | 30.6 |
|  | New York Metro Area | 13.1 | 37.3 | 13.1 | 8.0 | 82.2 | 7.2 | 63.5 | 13.9 | 38.6 |
|  | Asian | 12.6 | 33.2 | 10.3 | 7.9 | 86.6 | 7.8 | 58.4 | 16.8 | 54.2 |
|  | Black | 18.2 | 48.9 | 23.7 | 9.6 | 77.9 | 7.6 | 66.5 | 14.9 | 23.8 |
|  | Latino | 21.5 | 54.9 | 27.7 | 7.7 | 83.9 | 14.5 | 56.7 | 30.9 | 17.9 |
|  | White | 7.5 | 21.8 | 5.6 | 3.9 | 81.1 | 3.5 | 68.9 | 6.2 | 47.7 |
|  | Men | 11.6 | 36.8 | N/A | N/A | 79.8 | 8.6 | 64.5 | 14.1 | 38.3 |
|  | Women | 14.5 | 37.9 | N/A | N/A | 84.4 | 6.0 | 62.4 | 13.6 | 38.8 |

Sources: See Methodological Note starting on page 222.

This Global Goals Dashboard was created by picking from among the seventeen SDG goals those that are most meaningful to Americans and grouping and adapting them to the US context. A focus was placed on including those that were available by county and for the major US racial and ethnic groups. This dashboard is a work in progress, a foundation on which government and civil society actors in the greater metropolitan area can build in response to local wellbeing priorities.

What does this Global Goals Dashboard show? First and foremost, it underscores the importance of calculating and analyzing disaggregated data. Compared to the United States as a whole, the New York metropolitan area fares significantly better in preschool enrollment and adults with a bachelor's degree, which are among the indicators in the education and access to information goals. This suggests that New York is closer to the SDG target on these indicators than the country as a whole. Yet the rate at which Latinos in the New York metro area complete bachelor's degrees is 12.7 percentage points lower than the national average and 20.7 percentage points lower than the metro area average, a fact that would be missed looking just at the metropolitan figure. Meeting the goals everywhere and for everyone demands particular attention to tracking the progress of historically disadvantaged groups, and disaggregated data is vital for this task. Second, it shows, as do other data in this report, the continued salience of race and ethnicity for understanding the distribution of well-being and access to opportunity.

|  | SUSTAINABLE DEVELOPMENT GOALS | GENDER EQUALITY 5 |  | DECENT WORK |  | SUSTAINABLE COMMUNTIES |  |  | ACCESS TO JUSTICE $16 y$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | INDICATOR | Teen <br> Births <br> (births to girls <br> ages 15 to 19 <br> per 1,000) | Female to Male Earnings Iratio using median personal earnings) | Disconnected Youth <br> (\% ages 16 to 24 not in school and not working) | Unemployed (\% ages 16 and older) | Renters Spending $30 \%$ or More on Housing (\%) | Commute 60 Minutes or More One Way (\% of workers) | Take <br> Public <br> Transportation, walk, or bicycle to work (\% of commuters) | Jail <br> laverage daily population per 100,000 adults 16 and older based on last known residence) |
|  | United States | 20.3 | 71.3 | 11.7 | 5.8 | 49.7 | 9.1 | 8.8 | 327.2 |
|  | New York Metro Area | 11.4 | 72.1 | 11.5 | 6.1 | 53.3 | 20.6 | 36.1 | 172.4 |
|  | Asian | N/A | 81.7 | 7.4 | 4.8 | 49.0 | 26.8 | 48.4 | 18.9 |
|  | Black | 12.8 | 90.7 | 17.1 | 9.7 | 57.0 | 26.3 | 47.2 | 507.7 |
|  | Latino | 25.0 | 73.0 | 14.6 | 7.5 | 60.6 | 19.9 | 43.5 | 204.4 |
|  | White | 2.3 | 67.0 | 8.4 | 4.6 | 49.3 | 17.8 | 26.8 | 82.6 |
|  | Men | N/A | N/A | 12.5 | 6.1 | N/A | 22.4 | 34.7 | 335.1 |
|  | Women | N/A | N/A | 10.5 | 6.1 | N/A | 18.5 | 37.7 | 27.4 |

## The Five New Yorks

> The Five New
> Yorks offer a way to make sense of how index scores translate into the day-to-day realities and reallife opportunities of regular people.

## HD Index Range of the Five New Yorks

## $8.50-10.00$

7.00-8.49
5.50-6.99
4.00-5.49
below 4.00

Looking at regional human development highs and lows is informative, and the striking gap between the ten highest- and lowest-scoring areas within the metro area confirms the "two New Yorks" narrative with which we are all familiar. But most tri-state area dwellers don't inhabit these well-being extremes; rather, they find themselves somewhere along the vast space in the middle, in one of the other neighborhood and town clusters that make up the greater metro area.

Making sense of 170 localities is difficult. Thus in this section of the report, the 170 New York metro area PUMAs are sorted into "Five New Yorks." Applying this approach to the New York metro area, among the most diverse places in the world, offers a way to make sense of this sprawling metropolis and gain a better grasp on how Human Development Index scores translate into the day-to-day realities and real-life opportunities of regular people. The Five New Yorks open a new window through which to understand advantage and disadvantage metro-area-wide and can help make common cause among different places and groups of people, all with a view to addressing the constraints on human freedom that hold back far too many New Yorkers.

This approach is based on Measure of America work in California. In the two volumes of the Portrait of California series, we presented the state's 265 PUMAs sorted not by location but by their scores on the American Human Development Index along its 10 -point scale. ${ }^{31}$ By using the HD Index score to sort county, town, and neighborhood clusters, we created "Five Californias," each with its own wellbeing profile. We argued that, in terms of well-being and access to opportunity, people from what we called Elite Enclave California neighborhoods on the Palos Verdes Peninsula in Los Angeles County (index score: 8.24) had far more in common with people in Bay Area towns like Mill Valley and Sausalito (7.90) than with fellow Angelenos living just a few miles away in Compton (3.09). Similarly, residents of Compton shared constraints on their ability to live with dignity and security with those hundreds of miles away in parts of Fresno (3.20).

Grouping New York metro area communities and towns according to their American Human Development Index scores not only highlights striking differences between the Five New Yorks, but also provides a useful tool for looking at what neighborhoods, towns, and cities separated by distance have in common. A family living in Westfield, NJ (where the HD Index score is 8.92), likely has more in common with families living in Wilton, CT (8.88), the Upper West Side (8.86), and Northeast Westchester County (8.81) in terms of education, earnings, social capital, and access to opportunity than with a family living eight miles away in Elizabeth (4.22). The family in Elizabeth may experience barriers to opportunity shared by families in Bridgeport, CT (4.24), Trenton, NJ (4.04), and Bushwick, Brooklyn (4.58).

## table 19 Human Development Index for the Five New Yorks



Sources: Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

Not everyone will share all the traits ascribed to the New York in which they live-a range of well-being can be found in each.

Key indicators for the Five New Yorks can be found in TABLE 19. The Five New Yorks framing groups PUMAs within a range of HD Index scores together while preserving the "bell-curve"-type distribution of HD Index scores across PUMAs. ${ }^{32}$

A few caveats are in order.
First, not everyone will share all the traits ascribed to the New York in which they live-a range of well-being can be found in each. Some people with low earnings live in Gilded or Opportunity-Rich New York, for example. Living in a rich area but not being rich oneself certainly has implications for various aspects of human development, such as access to opportunity, community amenities, and social inclusion; relative deprivation can increase prejudice, harm health, and erode social cohesion, for example. In addition, there are a few instances of dissimilar towns being combined in the data; for instance, Greenwich, Connecticut, a town known for its affluence, is grouped with Stamford, a more racially and economically mixed community, thus diluting the effect of Greenwich's high earnings and education levels on its overall score. Nonetheless, these vignettes, rooted in analysis of US government and State of New York, New Jersey, and Connecticut data, reflect outcomes of the typical resident. Although each of the 170 places included in this section of the report is unique in its combination of human development outcomes, demographics, environment, resources, history, and more, those with similar HD Index scores share a great deal.

Second, keep in mind that the American Human Development Index is not a measure of income alone; in fact, not being just a money metric is the Index's raison d'être. It is a holistic measure of well-being that also includes health and education indicators. Thus some readers might find it surprising that Palisades Park, NJ, falls into Opportunity-Rich New York—along with the affluent communities of Princeton, NJ, and Darien, CT. Residents of Palisades Park, a majority of whom are foreign born and most of whom are either Asian or Latino, have extremely long life expectancies (ranking seventh of the 170 PUMAs) and strong educational outcomes, pulling them into this second-highest category. Though they may earn less than some others in the metro area, they are living longer than nearly everyone, an undeniable human development win. Similarly, some of the 1.6 million residents of Gilded New York will recognize that they belong in the top group, especially if they are among the financial " 1 percent" and enjoy its attendant material trappings-mansions, trust funds, etc. Many others, perhaps some of them reading these words right now, will be reluctant to agree that they are part of Gilded New York, however; in fact, they might minimize their advantages and describe themselves as middle class. ${ }^{33}$

But in expensive parts of Manhattan and Brooklyn and the surrounding
suburbs, living what looks like a "normal" middle-class life actually requires an upper-class income. Someone who lives in Park Slope, Brooklyn, drives an old car and sends her kids to public school can argue that she is middle class-but that argument falls apart if her household income tops $\$ 300,000$, her family lives in an apartment worth $\$ 2$ million (ten times the US median home value), and she has a graduate degree. People tend to compare themselves to people they know and to people who are "above" them in various status hierarchies. Residential segregation makes it likely that people will live near others of similar economic circumstances, thus normalizing and, in their minds, possibly erasing their comparative privilege. Because in a city like New York there will always be people with extraordinary wealth, fame, and luxurious lifestyles to compare oneself to, it's easy to identify such people as the rich ones and situate oneself among the ordinary people. ${ }^{34}$

Third, this Five New Yorks framing is not meant to imply that the fates of any one New York can be detached from the fates of the other four. The residents of the Five New Yorks have access to distinct sets of opportunities and face very different challenges; their lives can be lived in ways that make them appear quite separate from one another. But in fundamental ways, their lives are interdependent, the boundaries between them are permeable, and their fates are linked. The choices of people in Gilded and Opportunity-Rich New York to, for example, forgo public transportation for a car service or withdraw from the New York City public school system for private schools or suburban districts means that critical public services upon which millions depend lose politically influential advocates, worsening their decline. The poor educational outcomes of many in Struggling New York, driven by disinvestment and segregation, means that the metro area as a whole may one day lack a globally competitive workforce, impeding economic growth region-wide and preventing all metro area residents from benefiting from the talents of a potential Sonia Sotomayor, Carl Sagan, or Colin Powell, all native New Yorkers raised in the Struggling New Yorks of their time. The economic disenfranchisement and social exclusion of people in Precarious New York leave open few avenues for legitimate employment, fueling crime that harms everyone. Only by breaking down the walls that separate the Five New Yorks can the whole metro area prosper in ways that are sustainable and just.

Fourth, we recognize that the name Five New Yorks is likely problematic for tri-state-area residents of New Jersey and Connecticut. The name is meant to encompass the New York metro area as a whole.

## Residential

 segregation makes it likely that people will live near others of similar economic circumstances, thus normalizing and, in their minds, possibly erasing their comparative privilege.
## The Five New Yorks

## GILDED New York

## 1,557,337

People live here
\% OF POPULATION (NY METRO AREA)


RACE \& ETHNICITY


NATIVITY


## POVERTY

## 6\%

Gilded New York comprises eleven neighborhood and town clusters. Four are in Manhattan and one is in Brooklyn-the Gilded Big Apple. The rest make up the Gilded Suburbs: two are in New Jersey, two are in Westchester County, one is on Long Island, and one is in Connecticut.

Gilded New York is an opportunity wonderland where the extraordinarily well educated and affluent have access to the best the world has to offer. With an average HD Index score of 9.18, residents of Gilded New York enjoy higher levels of well-being and greater access to opportunity than people almost anywhere else in the United States. They have unmatched freedom to decide who to be and how to live and to pursue the personal and professional goals that matter to them. Gilded New Yorkers have more economic and political power than other metro area


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residents; higher voting rates, the social cohesion necessary for collective action, and money to support causes and candidates with the result that politicians are responsive to their demands. Parents in Gilded New York can offer their children a cornucopia of advantages, experiences, and opportunities, maximizing the likelihood that they will realize their full potential and positioning them well to live freely chosen, rewarding lives.

Gilded residents excel across human development dimensions. A baby born today in Gilded New York can expect to live 86.2 years, four years longer than the metro area average. Nearly three in four adults hold bachelor's degrees, and one in three holds a graduate or professional degree. The sky-high educational attainment level of this group shapes the range of their occupational choices, drives their high salaries, and contributes to their longevity.

Taken as a whole, Gilded New York is 71.8 percent white, 10.4 percent Asian, 11.0 percent Latino, and 4.3 percent black; 21.5 percent of residents are foreign born. In each of the communities that make up Gilded New York, the population is majority white and majority native born.

## GILDED New York

| YOUTH |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | Single mother |
| 5\% <br> Child poverty (under 18) | 80\% <br> Preschool enrollment | 19\% <br> Under 18 years old | 7\% <br> Disconnected youth | 24\% of households have children |



## In Gilded

## New York,

 children benefit not only from the time, resources, and social capital of their parents, but also of their well-connected neighbors.
## WORKING IN GILDED NEW YORK

Two in every three workers are employed in the highest-paying occupational category-management, business, science, and arts occupations-and median personal earnings are just shy of $\$ 70,000$. The unemployment rate is just 4 percent. Gilded New Yorkers have the shortest average commute time among the five groups, about a half an hour, and the smallest share of commuters who must travel an hour or more each way to get to work, 13.8 percent. Their educational attainment and resulting labor market success allow them to enjoy comparative prestige, agency, and independence in their work, all of which contribute to life satisfaction and good health.

## GROWING UP IN GILDED NEW YORK

Children living in Gilded New York experience myriad advantages. Between 75.6 percent and 90.2 percent of households with children in Gilded New York are headed by married couples. Children who grow up in a home with their two biological parents have better outcomes, on average, than children growing up in single-parent or step-parent households; for example, they are less likely to drop out of high school, experience youth disconnection, become teen parents, and be unemployed as adults. ${ }^{35}$ In Gilded New York, children benefit not only from the time, resources, and social capital of their parents, but also of their wellconnected neighbors. The child poverty rate is extremely low, 5.5 percent, and 80.0 percent of 3 - and 4 -year-olds are enrolled in preschool. The physical, social, and environmental characteristics of the neighborhoods in which they are growing up contribute to optimal development: crime rates are extremely low, opportunities for outdoor play and exercise are numerous (especially in the Gilded Suburbs), and environmental hazards are few. Only 6.5 percent of young people between the ages of 16 and 24 are considered "disconnected"-out of school and out of work-far below the metro area rate of 11.5 percent.

Public schools in the Gilded Suburbs consistently rank among the best in the country, attracting well-qualified, experienced teachers with good salaries and benefits, enjoying high levels of per-pupil spending, and benefiting from the active involvement of well-educated parent volunteers. Gilded city-dwellers tend to have the skills and resources required to successfully navigate the byzantine New York City public middle and high school choice processes, and if they are unhappy with their options, they have the wherewithal to pay for private school or move elsewhere. ${ }^{36}$ Education has traditionally functioned as an engine of social mobility in the United States, but in Gilded New York, parents use it to buttress their children's already advantaged position.

## HOUSING IN GILDED NEW YORK

Real estate costs, zoning regulations, rental unit supply, and the legacy of discriminatory housing policies erect powerful barriers to entry for those seeking to move to a Gilded New York community. Median home values in Gilded New York range from $\$ 600,000$ to $\$ 1.1$ million (average home values are higher still). In the New Jersey, Westchester, Long Island, and Connecticut communities of Gilded New York, between 64 percent and 82 percent of housing units are single-family dwellings, and between 70 percent and 86 percent of units are owner-occupiedleaving few options for those seeking rental units, especially affordable ones. Zoning laws, high property values, and neighborhood resistance make building affordable multifamily housing well-nigh impossible. Far more rental units are available in Gilded Big Apple neighborhoods, but, in the immortal words of 2010 gubernatorial candidate Jimmy McMillan, the rent is too damn high.

## OPPORTUNITY IN GILDED NEW YORK

To be sure, intelligence and hard work are integral to the success of many who live in Gilded New York. But Gilded New Yorkers benefit disproportionately from public investments in higher education, and from the overall tax system, which allows them to build wealth through mortgage deductions and favorable treatment of investment income. Research suggests that the social mobility ladder is especially "sticky" at the top and bottom of the income scale-meaning that those born into high-income families are disproportionately likely to become high-income adults, while those born to poor families are disproportionately likely to become poor adults. Thus it is reasonable to assume that many Gilded New Yorkers owe their success at least in part to the lottery of birth-having been born to affluent or at least highly motivated parents. They also stand a good chance of being able to pass their favorable status on to their children.

## The rent is

 too damn high for all but the most affluent.|  |  |
| :--- | :---: |
| TABLE 20 HD INDEX in GILDED NY |  |
|  | HD |
| NYC: Manhattan-Upper East Side | $\mathbf{9 . 3 6}$ |
| NY: North Hempstead (North) | $\mathbf{9 . 1 0}$ |
| NYC: Manhattan-Battery Park City, Greenwich Village \& Soho | $\mathbf{8 . 9 7}$ |
| NJ: Tenafly, Park Ridge \& Cresskill | $\mathbf{8 . 9 5}$ |
| NJ: Summit \& Westfield (North) | $\mathbf{8 . 9 2}$ |
| CT: Fairfield, New Canaan, Wilton, Weston \& Easton | $\mathbf{8 . 8 8}$ |
| NYC: Manhattan-Upper West Side \& West Side | $\mathbf{8 . 8 6}$ |
| NY: Westchester County (Northeast) | $\mathbf{8 . 8 1}$ |
| NYC: Manhattan-Murray Hill, Gramercy \& Stuyvesant Town | $\mathbf{8 . 7 6}$ |
| NYC: Brooklyn-Park Slope, Carroll Gardens \& Red Hook | $\mathbf{8 . 7 0}$ |
| NY: White Plains, Scarsdale, River Towns | $\mathbf{8 . 5 7}$ |

## The Five New Yorks

## OPPORTUNITY-RICH New York

## 5,194,653 <br> People live here

\% OF POPULATION (NY METRO AREA)


## 22.7\%



NATIVITY


## POVERTY

## 6\%

Opportunity-rich communities in the New York metro area are largely found outside the five boroughs. Of the forty-two neighborhood and town clusters in this group, only five are found within the city proper. The remainder are suburban and exurban communities; nineteen are in New Jersey, eleven are on Long Island, four are in Connecticut, two are in Westchester County, and one is in Rockland County.


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The neighborhood and town clusters that make up Opportunity-Rich New York fall broadly into two categories:

Diverse Urban Opportunity-Rich, PUMAs that are less than 52 percent white and can be found mostly in Queens, Brooklyn, and New Jersey's Bergen, Middlesex, and Somerset Counties.
White Suburb/Exurb Opportunity-Rich, majority-white PUMAs that are largely in New Jersey and farther out from the urban core.

Residents of Opportunity-Rich New York have extremely high levels of wellbeing. Their score of 7.68 is higher than the well-being score of every US state and all but five of the country's 435 congressional districts. Life expectancy is two years longer than the metro area average and nearly five years longer than the US average. Only 7.4 percent of adults lack a high school degree, about half the metro area average. More than one in two adults holds a bachelor's degree, and more than one in five holds a graduate degree. Median personal earnings, \$50,342, surpass the metro area median by more than $\$ 11,000$ and the national median by almost \$19,000.


They benefit from public investment in education, health, and infrastructure as well as from the investments that they and often their family members have made in their education and housing.

Neither Opportunity-Rich New Yorkers nor their fellow metro area residents in Gilded New York are immune to misfortune, but their rich set of capabilities acts as a buffer against the vagaries of life and provides the means to recover from serious setbacks. These capabilities include their educations, which not only help them secure well-paying jobs but also imbue them with greater ability to cope with change, build healthy relationships, parent effectively, practice healthy behaviors, and participate in the decisions that affect them. ${ }^{37}$ Their capabilities also include jobs with good wages and benefits like health insurance and sick leave, assets like retirement accounts and home equity, access to public goods such as parks and high-quality schools, and social capital and societal respect, to name just a few. They benefit from public investment in education, health, and infrastructure as well as from the investments that they and often their family members have made in their education and housing. They have the financial, social, and educational resources to ensure that their children realize their full potential, setting them on a positive life trajectory.

## HOUSING IN OPPORTUNITY-RICH NEW YORK

Despite their advantages vis-à-vis other metro area residents, Opportunity-Rich New Yorkers probably don't see themselves as highly privileged. Housing costs are a major reason why: nearly one in two renters has to spend more than a third of his or her income on housing costs each month, and owners in Opportunity-Rich communities in New Jersey and New York face the country's highest property tax bills in addition to their mortgage payments. Another reason is the dominance of the affluent across various aspects of life; Opportunity-Rich residents cannot avoid seeing how the Gilded live, and it's human nature to compare oneself not to the people below you in the social hierarchy but to those above. Home-ownership rates are higher in Opportunity-Rich than in any of the other New Yorks, almost 70 percent, and median home values range from $\$ 276,000$ in Northwest New Haven County to $\$ 900,000$ in Manhattan's Chelsea, Clinton, and Midtown neighborhoods.

## WORKING IN OPPORTUNITY-RICH NEW YORK

Relatively higher-wage management, business, science, and arts occupations account for the majority of employment in each of these communities.

## GROWING UP IN OPPORTUNITY-RICH NEW YORK

Children are off to a good start in Opportunity-Rich New York. Children tend to grow up in two-parent households; the rate ranges from 53 percent in Chelsea, Clinton, and Midtown to 91.5 percent in Smithtown on Long Island. (The Chelsea, Clinton, and Midtown rate is anomalously low for this group; all but two have rates above 70 percent and the majority are in the 80 s or 90 s.) Two-thirds of 3 - and 4 -year-olds are enrolled in preschool, a sharp drop from the 80 percent found in Gilded New York but still above the metro area average of 63 percent. Just 7.6 percent of young people between the ages of 16 and 24 are disconnected.

## MUTUALLY REINFORCING ADVANTAGES IN OPPORTUNITY-RICH NEW YORK

The various advantages in Opportunity-Rich New York reinforce one another. For example, high property values ensure that schools have ample funding, and welleducated parents prime their children for school success; the high-performing schools that result boost housing values and help families build wealth.

| TABLE 21 HD INDEX in OPPORTUNITY-RICH NY |  |
| :---: | :---: |
|  | $\underset{\text { INDEX }}{\text { HD }}$ |
| NYC: Manhattan-Chelsea, Clinton \& Midtown | 8.49 |
| NJ: Somerset County (North \& West) | 8.46 |
| NYC: Queens-Bayside, Douglaston \& Little Neck | 8.40 |
| NJ: Ridgewood Village, Glen Rock \& Westwood | 8.36 |
| NJ: Morristown, Madison \& Florham Park | 8.36 |
| NJ: Essex County (Northwest) | 8.36 |
| NJ: Princeton | 8.29 |
| NJ: Essex County (Southwest) | 8.19 |
| NJ: Middlesex County (Southwest) | 8.17 |
| NYC: Queens-Forest Hills \& Rego Park | 8.07 |
| NJ: Morris County (West) | 8.01 |
| NY: Orangetown, Clarkstown (South) \& Ramapo (Southeast) | 7.99 |
| NY: Hempstead (East Central) | 7.89 |
| NY: Oyster Bay (North) \& Glen Cove | 7.84 |
| NJ: Ramsey, Oakland \& Franklin Lakes | 7.83 |
| NJ: Fort Lee, Cliffside Park \& Palisades Park | 7.79 |
| NJ: Lincoln Park | 7.79 |
| NYC: Brooklyn-Brooklyn Heights \& Fort Greene | 7.71 |
| NY: Hempstead (Southwest) \& Long Beach | 7.68 |
| NJ: Somerset County (South) | 7.67 |
| NY: Smithtown | 7.65 |
| CT: Norwalk, Westport \& Darien | 7.64 |
| NJ: Hunterdon County | 7.61 |
| NY: North Hempstead (South) | 7.60 |
| NY: Huntington (South) | 7.56 |
| NY: Oyster Bay (Central) | 7.54 |
| CT: Stamford \& Greenwich | 7.29 |
| NY: Westchester County (Southeast) | 7.28 |
| NY: Huntington (North) | 7.27 |
| NJ: Freehold | 7.26 |
| NY: Hempstead (Northwest) | 7.23 |
| NJ: Monmouth County (Central) | 7.22 |
| NJ: Red Bank \& Tinton Falls (North) | 7.21 |
| NY: Hempstead (Southeast) | 7.17 |
| NJ: South Plainfield \& Middlesex | 7.16 |
| NJ: Middlesex County (Southeast) | 7.15 |
| NY: Brookhaven (North) | 7.12 |
| CT: Stratford, Shelton, Trumbull, Newtown \& Monroe | 7.10 |
| CT: New Haven County (Northwest) | 7.08 |
| NY: New Rochelle \& Mount Vernon | 7.06 |
| NYC: Queens-Queens Village, Cambria Heights \& Rosedale | 7.04 |
| NJ: Metuchen | 7.02 |

[^6]
## The Five New Yorks

3 MAIN STREET New York

## 9,887,424

People live here
\% OF POPULATION (NY METRO AREA)

43.3\%

RACE \& ETHNICITY


NATIVITY


## POVERTY

## $12 \%$

Nearly ten million people call Main Street New York home. Residents of the seventy-four neighborhood and town clusters that fall within this New York enjoy higher levels of well-being than the majority of Americans and have an index score on par with that of the top-ranked US state, Connecticut. Main Street's HD Index value of 6.32 is higher than that of 391 of the 435 US congressional districts. But the New York metro area's high cost of living, driven by necessary expenditures that have higher prices tags here than in the rest of the country-housing, transportation, child care, and state and local taxes-keeps many markers associated with middle-class life out of reach for Main Streeters, especially those with scores near the bottom of this grouping; they share some of the economic insecurity experienced by those in Struggling New York.


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Life expectancy in Main Street New York is 82.4 years, lower than in Gilded and Opportunity-Rich New York, but a bit higher than the New York metro average. Main Street is also faring better than the metro area as a whole when it comes to the share of adults with high school diplomas, but slightly worse in terms of the share of adults with four-year college degrees ( 35.6 percent) and graduate degrees ( 14.0 percent). Median personal earnings are $\$ 39,043$, about the metro area median.

One in four residents of Main Street is foreign born. The population is 56.3 percent white, 20.2 percent Latino, 11.4 percent black, and 9.8 percent Asian. Though Main Street overall is 56.3 percent white, twenty-eight Main Street PUMAs are majority nonwhite. All but three of those PUMAs are classified as urban areas. They are found largely in Brooklyn and Queens and in inner-ring cities in northern and central New Jersey and lower Westchester County like Union, Jersey City, Yonkers, Perth Amboy, and New Brunswick.

Of the forty-six PUMAs that are majority white, thirty-nine are classified as either suburban or rural. The three PUMAs that are majority black are all found in Brooklyn: East Flatbush, Farragut, and Rugby; Canarsie and Flatlands; and Crown Heights North and Prospect Heights. The one majority-Asian PUMA in Main Street is in Queens-Flushing, Murray Hill, and Whitestone. Hudson County, NJ,

## The poverty rate is 12 percent, nearly double the rate in Opportunity-Rich New York.

## MAIN STREET New York

YOUTH


17\% Child poverty (under 18)


60\%
Preschool enrollment


21\%
Under 18 years old


11\%
Disconnected youth


31\%
of households
have children


> Accessing quality schools for their children is a challenge for many Main Street families.
is home to Main Street's two majority-Latino PUMAs: West New York, Secaucus, and Guttenberg, which is 68 percent Latino; and Union and Hoboken, which is 53 percent Latino. More than half the population is foreign born in six Main Street PUMAs: Flushing, Murray Hill, and Whitestone; Sunnyside and Woodside; Richmond Hill and Woodhaven in Queens; East Flatbush, Farragut, and Rugby and Sheepshead Bay, Gerritsen Beach, and Homecrest in Brooklyn; and West New York, Secaucus, and Guttenberg in New Jersey.

## WORKING IN MAIN STREET NEW YORK

About four in ten workers have jobs in the highest-paying occupational categorymanagement, business, science, and arts-one in four works in sales and office occupations, and nearly one in four works in the service sector. The poverty rate is 12.0 percent, nearly double the rate in Opportunity-Rich New York.

## HOUSING IN MAIN STREET NEW YORK

The rate of homeownership, 57.3 percent, is higher than the metro area rate. Of the roughly four in ten households that rent, more than half spend more than 30 percent of their incomes on housing and nearly three in ten allocate more than half their monthly incomes to rent. The median home value spans a huge range, from $\$ 915,000$ in fast-gentrifying Greenpoint and Williamsburg in Brooklyn to $\$ 213,900$ in rural Ulster County. Of the eighteen areas with the highest home values in Main Street New York, all but two are in New York City proper, mostly Queens and Brooklyn, and the home-value range for just these city areas is $\$ 444,000$ to $\$ 915,000$.

## GROWING UP IN MAIN STREET NEW YORK

The child poverty rate, 17.1 percent, is more than 10 points higher than the Opportunity-Rich rate. About six in ten 3 - and 4 -year-olds attend preschool. The share of children growing up in a house with two parents varies widely by place. In about half the PUMAs, at least three in four households with children are headed by married couples; in eighteen PUMAs, a third or more households with children are headed by single parents. Single parents can and do raise happy, healthy, successful children; research shows, however, that children, on average, benefit from having the time, financial resources, and emotional support of their two biological parents.

Accessing quality schools for their children is a challenge for many Main Street families. For Main Street parents in the five boroughs, the middle and high school choice processes are fraught and consequential; the time and effort required to secure a seat in a good school is daunting, and if the process doesn't work out, the financial crunch many families face makes it more difficult to exit the system for a private school option. In addition, Main Street NYC families (largely located in Brooklyn and Queens) often have farther to travel to reach a high-quality school, especially when compared to Manhattan families. In many immigrant neighborhoods, the desire to have one's child test into a specialized high school
or a well-regarded middle school and reach that first critical rung on the social mobility ladder makes test prep a thriving industry.

## OPPORTUNITY IN MAIN STREET NEW YORK

Residents of Main Street New York fall roughly in the middle of the well-being distribution. But structural changes in the economy, such as automation, the decline of unions, and increases in the share of workers employed in the service sector, coupled with rising health-care and housing costs, mean that many Main Streeters lack the basic economic security traditionally associated with middleclass American life. In addition, gentrification in the city proper has pushed many middle-class New Yorkers to far-flung parts of the metro area. A positive change, however, is the increased diversity of middle-class Main Street.

| TAble 22 HD INDEX in MAIN STREET NY | $\begin{gathered} \text { HD } \\ \text { INDEX } \end{gathered}$ |  | $\begin{array}{\|l\|l\|} \text { HDD } \\ \text { INDE } \end{array}$ |
| :---: | :---: | :---: | :---: |
| N : Union City \& Hoboken | 6.99 | CT: West Haven, Milford \& Orange | 6.32 |
| NY: Oyster Bay (South) | 6.98 | CT: Hamden, Ansonia, Seymour, Derby, Woodbridge \& Bethany | 6.30 |
| NJ: Dover \& Kinnelon | 6.97 | NY: Brookhaven (Central) | 6.30 |
| NJ: Jersey City (North) | 6.95 | NJ: Hawthorne \& Clifton (Northwest) | 6.30 |
| CT: East Haven, Branford, Guilford, Madison \& North Branford | 6.95 | NJ: Keansburg | 6.24 |
| NYC: Brooklyn-Greenpoint \& Williamsburg | 6.94 | NY: Babylon (Southeast) | 6.24 |
| NJ: Ringwood, Wanaque \& Pompton Lakes | 6.93 | NYC: Bronx-Riverdale, Fieldston \& Kingsbridge | 6.24 |
| NY: Hempstead (West Central) | 6.90 | NJ: Point Pleasant | 6.16 |
| NY: Islip (East) | 6.86 | NJ : Warren County | 6.14 |
| NJ: Bergenfield, Paramus, Dumont \& New Milford | 6.83 | CT: Litchfield County | 6.11 |
| NY: New City \& Congers | 6.81 | NJ: Mercer County (South) | 6.11 |
| NYC: Staten Island-Tottenville, Great Kills \& Annadale | 6.81 | NYC: Queens-Briarwood, Fresh Meadows \& Hillcrest | 6.09 |
| NJ: Tinton Falls (South) | 6.80 | CT: Meriden, Wallingford \& North Haven | 6.08 |
| CT: Danbury, Ridgefield, Bethel, Brookfield, New Fairfield, Redding \& Sherman | 6.75 | NJ: Ocean County (South) | 6.08 |
| NY: Orange County (Southeast) | 6.74 | NYC: Queens-Flushing, Murray Hill \& Whitestone | 6.07 |
| NYC: Manhattan-Chinatown \& Lower East Side | 6.72 | NYC: Manhattan-Hamilton Heights, Manhattanville \& West Harlem | 6.03 |
| NY: Westchester County (Northwest) | 6.67 | NJ: West New York, Secaucus \& Guttenberg | 6.03 |
| NJ: North Plainfield \& Somerville | 6.67 | NYC: Queens-Ridgewood, Glendale \& Middle Village | 5.98 |
| NY: Hempstead (Northeast) | 6.64 | NJ: New Brunswick, South River \& Highland Park | 5.97 |
| NYC: Brooklyn-Bay Ridge \& Dyker Heights | 6.63 | NJ: Long Branch, Asbury Park \& Eatontown | 5.94 |
| NJ: Carteret | 6.61 | NY: Dutchess County (Southwest) | 5.89 |
| NY: Yonkers | 6.60 | NY: Brookhaven (South) | 5.83 |
| NJ: Fair Lawn, Garfield \& Lodi | 6.60 | NY: Babylon (Northwest) | 5.81 |
| NY: Suffolk County (East) | 6.57 | NJ: Plainfield \& Westfield (South) | 5.81 |
| NJ: Hackensack \& Englewood (West) | 6.56 | NY: Spring Valley, Suffern \& Monsey | 5.81 |
| NY: Putnam County | 6.53 | NYC: Brooklyn-Flatbush \& Midwood | 5.80 |
| NYC: Queens-Astoria \& Long Island City | 6.52 | NYC: Queens-Howard Beach \& Ozone Park | 5.80 |
| NY: Dutchess County (North \& East) | 6.52 | NYC: Staten Island-Port Richmond, Stapleton \& Mariners Harbor | 5.80 |
| NYC: Brooklyn-Canarsie \& Flatlands | 6.51 | NJ: Ocean County (Northwest) | 5.79 |
| NYC: Staten Island-New Springville \& South Beach | 6.47 | NYC: Brooklyn-East Flatbush, Farragut \& Rugby | 5.74 |
| NY: Islip (South) | 6.43 | NJ: Roselle Park | 5.71 |
| NJ: Sussex County | 6.43 | NYC: Bronx-Co-op City, Pelham Bay \& Schuylerville | 5.70 |
| NYC: Brooklyn-Sheepshead Bay, Gerritsen Beach \& Homecrest | 6.35 | NY: Ulster County (East) | 5.70 |
| NJ: Rutherford, North Arlington \& Hasbrouck Heights | 6.34 | NY: Greater Newburgh | 5.70 |
| NYC: Queens-Sunnyside \& Woodside | 6.33 | NYC: Brooklyn-Crown Heights North \& Prospect Heights | 5.64 |
| NJ: Essex County (Northeast) | 6.32 | NYC: Queens-Richmond Hill \& Woodhaven | 5.62 |
| NY: Brookhaven (West Central) | 6.32 | NJ: Perth Amboy \& Sayreville | 5.55 |

## The Five New Yorks

## 4 STRUGGLING New York

## 4,884,730

People live here
\% OF POPULATION (NY METRO AREA)

21.4\%

RACE \& ETHNICITY


NATIVITY


## POVERTY

22\%

Struggling New York scores 4.88 on the HD Index. People living in Struggling New York experience many more barriers to opportunity than do those in Gilded, Opportunity-Rich, and Main Street New York and have lower levels of well-being, on average, than people in the greater New York metro area or in the country as a whole. Burdened by unremitting economic pressure and reliant on overstretched and often inadequate public services, from schools to transportation to health care, Struggling New Yorkers face a circumscribed set of choices and opportunities.

One in three Struggling New Yorkers is foreign-born. Struggling New York is majority-minority: 34.1 percent of residents are Latino, 27.6 are white, 27.4 percent are black, and 8.5 percent are Asian. Blacks and Latinos are overrepresented in Struggling New York; whites and Asians are underrepresented.


THE MEASURE OF AMERICA SERIES

Struggling New Yorkers have a life expectancy of 80.7 years-lower than the metro area average but still better than the country as a whole. Educational attainment in Struggling New York is low; 22.5 percent of adults lack the barebones credential of a high school diploma, severely limiting their job options, and just one in four has the bachelor's degree that employers increasingly require. Earnings, $\$ 28,587$, are roughly $\$ 10,000$ less than the metro median.

Thirty-four PUMAs make up Struggling New York. One is classified as rural (Sullivan and Ulster Counties); five are classified as suburban (Northwest Orange County, NY; Linden, Rahway, and Roselle in Union County, NJ; Islip on Long Island; and two areas in Ocean County, NJ); and twenty-eight are classified as urban. Eighteen of the urban areas are in New York City. The ten that are outside New

## Earnings,

 \$28,587, are roughly \$10,000 less than the metro median. York City include many industrial, midsized cities: New Haven, Waterbury, and Bridgeport in Connecticut; and Trenton, East Orange, Elizabeth, parts of Jersey City, Bayonne, Kearney, and Passaic in New Jersey.
## STRUGGLING New York

YOUTH


31\%
Child poverty (under 18)


61\% Preschool enrollment


24\%
Under 18 years old



35\%
of households have children


## The absence

of well-paying. middle-skills jobs limits opportunity in Struggling New York.

In Central Harlem, East Harlem, and BedfordStuyvesant, the rate of people held in local jails is between 200 percent and 350 percent higher than the citywide rate.

These cities, along with most of the NYC PUMAs that are part of Struggling New York, were once home to thriving industries, from brass production in Waterbury to the manufacture of insulated wires in Passaic to shipping and warehousing in Sunset Park. The long-ago manufacturing might of Struggling New York is enshrined on the iconic sign visible from northeast corridor trains as they cross the Delaware River, "Trenton Makes the World Takes." The sharp decline in labor-intensive industrial production in the United States, driven chiefly by automation and off-shoring, hit Struggling New York very hard, and the white flight and resulting disinvestment of the 1970s intensified the marginalization of many of these communities. Some industry remains-for instance, pharmaceutical and chemical production plants and oil refineries can still be found in northern New Jersey-but most of the industries that once brought middle-class living standards to working-class metro area families are shuttered today. Former industrial sites are often seen as potential loft-style apartments for the wealthy rather than as engines for local economic development and job creation.

## WORKING IN STRUGGLING NEW YORK

The absence of well-paying, middle-skills jobs limits opportunity in Struggling New York. Although management, business, science, and arts occupations are still major sources of employment, accounting for 29.4 percent of workers, the majority of workers can be found in occupations that tend to be lower paying: service occupations ( 26.3 percent), sales and office occupations ( 23.0 percent), construction and maintenance occupations ( 8.2 percent), and production, transportation, and moving occupations ( 13.1 percent). High real estate costs and lower earnings meet in the high share of renters who spend more than a third of their incomes on housing, 57.3 percent, and in the share who spend more than half their incomes on housing, 31.8 percent. Nearly two in three households in Struggling New York rent.

## GROWING UP IN STRUGGLING NEW YORK

Mothers and fathers in Struggling New York, like all parents, do their level best to give their children the strongest possible start in life, but the material and social resources they have to devote to this all-important task are far fewer than those available to Main Street, Opportunity-Rich, and Gilded New York parents. The child poverty rate in Struggling New York is 30.9 percent. Highquality early care and education can help support parents and supplement the resources available to children, but only six in ten 3- and 4 -year-olds are enrolled in preschool. One in seven teens and young adults ages 16 to $24,14.9$ percent, are neither working nor in school; they are cut off from opportunities to build skills and earn credentials required to live flourishing lives. Education has long
offered working-class New Yorkers the promise of social mobility. Unfortunately, children growing up in Struggling New York neighborhoods in NYC face a host of obstacles to accessing the city's best-performing elementary, middle, and high schools. School districts in midsized cities in Struggling New York like Trenton and Bridgeport face outsized challenges and lack sufficient resources to address them; as a result, they tend to fall to the bottom of school quality rankings.

## HOUSING IN STRUGGLING NEW YORK

Workers in Struggling New York face longer commutes than average; 22.9 percent endure commutes longer than one hour each way, limiting the time parents can spend with their children. In twenty of the thirty-four Struggling New York areas, between 32 percent and 55 percent of households with children are headed by married parents, far less than found farther up the well-being scale; this means that far fewer children benefit from not only the material support but also the day-to-day presence of two adults invested in their well-being.

## SPECIAL ISSUES IN STRUGGLING NEW YORK

An issue that is far less prominent in the lives of Main Street, Opportunity-Rich, and especially Gilded New Yorkers but which is quite consequential for wellbeing in Struggling and Precarious New York is the impact of aggressive policing and mass incarceration on low-income black and brown communities. ${ }^{38}$ In poor urban communities of color, incarceration has become a normative experience, one that affects the incarcerated person (and his family) not just for his period of confinement but often for the rest of his life. In some American cities, half of all young black men are somehow under the control of the state, either in prison or jail or on probation or parole. ${ }^{39}$ This topic is discussed in greater detail in the following section on Precarious New York, where the impact of mass incarceration is most severe. Several Struggling New York communities located in New York City proper have extremely high incarceration rates; in Central Harlem, East Harlem, and Bedford-Stuyvesant, the rate of people held in local jails is between 200 percent and 350 percent higher than the citywide rate. ${ }^{40}$

| TABLE 23 HD INDEX in STRUGGLING NY |  |
| :---: | :---: |
|  | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ |
| NY: Orange County (Northwest) | 5.46 |
| NJ: Bayonne, Kearney \& Harrison | 5.43 |
| NYC: Brooklyn-Crown Heights South, Prospect Lefferts \& Wingate | 5.40 |
| NYC: Queens-Far Rockaway, Breezy Point \& Broad Channel | 5.39 |
| NYC: Brooklyn-Bensonhurst \& Bath Beach | 5.35 |
| NJ: Linden, Rahway \& Roselle (South) | 5.30 |
| NYC: Manhattan-Central Harlem | 5.29 |
| NYC: Brooklyn-Borough Park, Kensington \& Ocean Parkway | 5.28 |
| NYC: Bronx-Wakefield, Williamsbridge \& Woodlawn | 5.25 |
| NYC: Bronx-Pelham Parkway, Morris Park \& Laconia | 5.24 |
| NYC: Queens-Jamaica, Hollis \& St. Albans | 5.24 |
| NYC: Manhattan-Washington Heights, Inwood \& Marble Hill | 5.18 |
| NY: Hempstead (North Central)-Meadowbrook Corridor | 5.14 |
| NY: Sullivan \& Ulster (West) Counties | 5.12 |
| NYC: Brooklyn-Brighton Beach \& Coney Island | 5.08 |
| NJ: Ocean County (North Central) | 5.08 |
| NYC: Queens-Elmhurst \& South Corona | 5.00 |
| NJ: Beachwood | 4.91 |
| NJ: East Orange | 4.90 |
| NYC: Queens-Jackson Heights \& North Corona | 4.87 |
| NJ: Passaic \& Clifton (Southeast) | 4.87 |
| NYC: Manhattan-East Harlem | 4.82 |
| NYC: Brooklyn-Bedford-Stuyvesant | 4.82 |
| CT: New Haven | 4.65 |
| NY: Islip (Northwest) | 4.61 |
| NYC: Brooklyn-Bushwick | 4.58 |
| NJ: Jersey City (South) | 4.52 |
| NYC: Brooklyn-East New York \& Starrett City | 4.46 |
| NYC: Bronx-Castle Hill, Clason Point \& Parkchester | 4.44 |
| NYC:Brooklyn-Sunset Park \& Windsor Terrace | 4.42 |
| CT: Waterbury | 4.34 |
| CT: Bridgeport | 4.24 |
| NJ: Elizabeth | 4.22 |
| NJ : Trenton | 4.04 |

## The Five New Yorks

## PRECARIOUS New York

## 1,326,625

People live here
\% OF POPULATION (NY METRO AREA)


RACE \& ETHNICITY


NATIVITY


## POVERTY

## $35 \%$

Precarious New York is home to more than 1.3 million people living in nine urban PUMAs. Five Precarious New York areas are in the Bronx and one is in Brooklyn. Three are in New Jersey: two are sections of Newark and the third is the city of Paterson. Precarious New York is majority-minority: slightly more than half the residents are Latino and slightly over one-third are black.

Life expectancy in Precarious New York is nearly four years less than in the metro area as a whole and nearly eight years less than in Gilded New York. Median earnings are just \$22,342-similar to the median personal wage in America in the 1960s (in today's dollars). A third of adults lack high school diplomas and just one in seven holds a bachelor's degree.


THE MEASURE OF AMERICA SERIES

## WORKING IN PRECARIOUS NEW YORK

Service occupations make up 34.9 percent of jobs, and a plurality of employment in all nine areas. Only one in five workers is employed in relatively higherwage management, business, science, and arts occupations. Sales and office occupations (22.6), construction and maintenance occupations ( 7.7 percent), and production, transportation, and moving occupations ( 15.0 percent) make up the remainder. In none of these communities are median personal earnings higher than \$30,000.

## HOUSING IN PRECARIOUS NEW YORK

Between 73 percent and 96 percent of housing is renter occupied. Two in three renters face a high rent burden and another one in three face an extremely high rent burden, meaning that many renters are living in housing that they cannot truly afford. They make rent by cutting back on other necessities-skipping meals, going without medical care, letting the ConEd bill ride and hoping the electricity isn't shut off. This severe and unremitting economic pressure creates toxic stress that harms cardiovascular health, drives health-risk behaviors, and impairs child

In none of these communities are median personal earnings higher than $\$ 30,000$. well-being and development.


> 1 $888^{\circ}$ More than one in every five teens and young adults between the ages of 16 and 24 are out of school and out of work in Precarious New York.

By 2015, the number of US residents confined in state and federal prisons increased more than sevenfold from the early 1970's, to roughly 1.5 million people.

## GROWING UP IN PRECARIOUS NEW YORK

Precarious New York has the largest share of children among the Five New Yorks; 26.8 percent of residents are under 18. Growing up in Precarious New York exposes children to a range of developmental risks, poverty chief among them; the child poverty rate is 47.2 percent. Community cohesion, family support, and a loving, stable connection to a sensitive primary caregiver lessen poverty's harmful effects on a child, and strong family ties doubtless promote the healthy development of countless children in Precarious New York. Even so, factors outside parents' control, such as exposure to pollution, under-resourced schools, high rates of violent crime, and aggressive policing disproportionately threaten child well-being in Precarious New York. More than one in every five teens and young adults between the ages of 16 and 24 are out of school and out of work. These young people are unmoored from the institutions that confer the credentials necessary to thrive as adults; give structure to their days; and provide them with opportunities to discover interests, form social networks, develop skills, and build confidence. The on-time high school graduate rate for teens from the six PUMAs in NYC proper that fall in Precarious New York hover around 60 percent, some ten percentage points below the citywide rate. Precarious New Yorkers have the longest commute times among the five groups; one in four has a commute longer than one hour each way, eating into time that families could otherwise spend together. Between 38.7 and 66.2 percent of households are headed by a single mother.

## SPECIAL ISSUES IN PRECARIOUS NEW YORK

As mentioned above, mass incarceration serves to severely circumscribe the choices and opportunities of people living in Precarious and, to a lesser extent, Struggling New York. In the early 1970s, about 200,000 US residents were confined in state and federal prisons; by 2015, that number had increased more than sevenfold to roughly 1.5 million people. Adding in local jails, some 2.2 million people are now behind bars. ${ }^{41}$ Mass incarceration, the result not of an increase in crime but rather an increase in the severity of sentencing laws and policies, has had a wildly disproportionate impact on people of color, particularly black men. Actions that would be treated with mercy and dismissed as typical teenage antics in the suburbs-marijuana possession, under-age drinking, and partying in boisterous, noisy groups-are more likely to be treated as misdemeanors or worse in Precarious New York, ensnaring young people in a criminal justice apparatus from which it is difficult to break free. According to the Sentencing Project, one in every ten black men in their thirties in the United States is in prison or jail on any
given day, and a black teenager born in 2001 faces a heartbreaking one in three chance of being imprisoned at some point in his life. ${ }^{42}$ Civil rights lawyer and legal scholar Michelle Alexander writes in her book The New Jim Crow: Mass Incarceration in the Age of Colorblindness that mass incarceration serves as a gateway to racial stigmatization, legalized discrimination, and permanent marginalization and social exclusion by locking "a huge percentage of the African American community out of the mainstream society and economy." Precarious New York neighborhoods in the city proper have the highest incarceration rates of the fifty-nine NYC community districts. The incarceration rates in majority-minority Paterson and Newark are extremely high as well. New Jersey has the unfortunate distinction of being the US state with the highest black-white incarceration rate differential; blacks are more than twelve times as likely to be behind bars as whites. ${ }^{43}$

Something missing from the numbers but ever present in the daily lives of Precarious New Yorkers is social exclusion. Social exclusion is driven by unequal economic, political, social, and cultural processes lamong them mass incarceration) and entrenched by the present-day residential segregation by race and ethnicity that resulted from discriminatory housing policies over decades.

## Social exclusion leads to unequal access to much of what is good and valuable

 in society: education, job opportunities, equality under the law, physical safety, societal respect, social capital, the ability to trust institutions, and much more. The physical and psychological toll of social exclusion-of being marginalized, discriminated against, and looked down upon, of being on the outside looking in, seeing arrayed before you a wealth of resources, experiences, and opportunities unmatched in the history of the world that others enjoy but you cannot accessis grave.|  |  |
| :--- | :---: |
| TABLE 24 HD INDEX in PRECARIOUS NY |  |
|  |  |
| NYC: Bronx-Morris Heights, Fordham South \& Mount Hope | 3.99 |
| NJ: Paterson | 3.98 |
| NYC: Brooklyn-Brownsville \& Ocean Hill | 3.88 |
| NJ: Newark (North \& East) | 3.86 |
| NYC: Bronx-Concourse, Highbridge \& Mount Eden | 3.60 |
| NYC: Bronx-Bedford Park, Fordham North \& Norwood | 3.48 |
| NYC: Bronx-Belmont, Crotona Park East \& East Tremont | 3.32 |
| NYC: Bronx-Hunts Point, Longwood \& Melrose | 3.32 |
| NJ: Newark (Southwest) | 3.10 |

## New York City Spotlight: What the HD Index Reveals about New York City

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## Introduction

Variation by Race and Ethnicity
Variation by Gender
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Variation by Nativity
Variation by Geography: Neighborhood Tabulation Areas
What About Neighborhood Change?

## Introduction

New York City residents, 8.6 million strong, make up a third of the total metro area population. The Big Apple has higher highs and lower lows than the larger metro area when looked at through the lens of well-being outcomes. The following section explores Human Development Index scores for NYC's major racial and ethnic groups, women and men, US-born and immigrant residents, the five boroughs, and the 188 neighborhood tabulation areas (NTAs). These areas were created by the Department of City Planning by combining groups of census tracts to more or less correspond to the boundaries of locally recognized neighborhoods. The minimum population size of an NTA is 13,000 residents.

## Variation by Race and Ethnicity

The overall American Human Development Index score for New York City is 5.98, which puts city well-being levels in between the New York metro area score of 6.32 and the US score of 5.17 (see sidebar). Within the city, the scores for the four most populous major racial and ethnic groups vary from relatively high levels of wellbeing among white and Asian residents to far lower levels among black and Latino New Yorkers (see table 1). New York City differs from the greater metro area in terms of racial and ethnic group well-being scores in several ways. First, the peaks are a bit higher and the valleys are slightly lower. Second, while in the metro area Asian residents have the highest index score of the four racial and ethnic groups, in the city, Asians score below whites.

HD Index in Comparison


# The score for whites in New York City is considerably higher than for white Americans as a whole. 

The following are some notable human development strengths and challenges for each of the major racial and ethnic groups:

In New York City, white residents have the highest American Human Development Index score, 7.63. The score for whites in New York City is considerably higher than for white Americans as a whole. NYC white residents, on average, have far higher levels of educational attainment than the national average: nearly six in ten ( 57.4 percent) hold bachelor's degrees and more than one in four hold graduate degrees. Earnings are also at the top of the chart, $\$ 52,290$, about $\$ 16,000$ more than the city's median earnings. As will be discussed further below, however, white New Yorkers rank near the bottom of the four groups in terms of life expectancy.

While the overall picture for this group is very positive, the scores of white residents across the boroughs range from 8.80 in Manhattan to 6.23 in the Bronx, where relatively low rates of high school graduation for adults, far lower earnings, and poorer health outcomes create this startling gap (see FIGURE 2).

FIGURE 2 Human Development Index by Borough: WHITE Residents


Sources: Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

Asian residents have the second-highest well-being score, 6.80. This is in contrast to the US and most states, where Asians tend to have the highest well-being levels of any group, largely due to robust health outcomes and very high educational attainment levels. The Asian NYC score is lower than the score for Asians in both the United States, 7.38, and the greater New York City metro area, 7.54.

The strongest human development dimension for NYC Asians is health; they can expect to live longer than members of any other racial or ethnic group in the city, an average life expectancy of 89.3 years. This is almost two years
longer than the US Asian population and seven years longer than the average New Yorker.

The education picture for Asian NYC residents is mixed. One in four adults ages 25 and older never completed high school, largely attributable to the educational opportunities immigrants had in their home countries; only 5.4 percent of nativeborn Asian New Yorkers lack a high school diploma compared to 28.3 percent of foreign-born Asians. On the other hand, Asian residents have obtained bachelor's and graduate degrees at higher rates than the average New Yorker, and the proportion of Asian young people ages 3 to 24 enrolled in school is the highest of any group in the city. This split record on educational attainment can be traced to the socioeconomic diversity of Asian immigrants, as well as the differing educational opportunities of immigrants and their children. But like immigrant groups before them, second-generation Asian New Yorkers tend to have far higher levels of educational attainment than their parents, as evidenced by the very high enrollment rate of 82.1 percent among young people. Median earnings, $\$ 32,156$, are the second area contributing to lower NYC outcomes. Asian workers in New York City earn below the city median, and typical earnings are $\$ 20,000$ less than white workers.

Asians living in Manhattan have the highest HD Index score for the group, 8.97, and Asians living in Brooklyn have the lowest score, 5.80 (see FIGURE 3).

As discussed above, the Census Bureau-defined category "Asian" is extremely broad; it includes US-born citizens who trace their heritage to a wide range of Asian countries as well as Asian immigrants from extraordinarily diverse circumstances, some of whom made the United States home long ago and others who are recent arrivals. Among the ten largest NYC Asian subgroups, Taiwanese

FIgURE 3 Human Development Index by Borough: ASIAN Residents


Sources: Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

Foreign-born and native-born Asians have the widest education and earnings gaps of the major racial and ethnic groups.

New Yorkers have some of the highest levels of educational attainment; nearly three quarters have college degrees and almost 40 percent have graduate degrees. At the other end of the spectrum, 35 percent of adults of Chinese background do not have a high school diploma, and only about a third of Chinese, Pakistani, and Bangladeshi adults in New York City are college graduates. Japanese New Yorkers have the highest median earnings, nearly $\$ 51,000-$ more than twice the earnings of Bangladeshi New Yorkers, $\$ 23,460$. The high school attainment and earnings of Bangladeshi and Chinese New Yorkers are more similar to those of the average Latino than those of the average Asian in New York City. Foreign-born and nativeborn Asians have the widest education and earnings gaps of the major racial and ethnic groups. Variation in HD Index scores by nativity is discussed further below. Due to the small population size and unavailability of mortality data for ethnic subgroups, we were not able to calculate life expectancy for these subgroups.

TABLE $\&$ Human Development Indicators for ASIAN Subgroups in NYC

| ASIAN SUBGROUP | LESS THAN HIGH SCHOOL (\% of adults 25 + ) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEEREE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}$ | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults $25+$ ) | SCHOOL ENROLLMENT (\% ages 3 to 24 | MEDIAN EARNINGS $(\$)$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Bangladeshi | 21.4 | 32.8 | 12.0 | 78.9 | 23,460 |
| Chinese | 35.0 | 33.5 | 11.8 | 83.3 | 26,674 |
| Filipino | 4.9 | 66.5 | 15.4 | 85.0 | 45,739 |
| Indian | 20.5 | 45.2 | 22.0 | 78.7 | 36,537 |
| Japanese | 2.1 | 70.9 | 24.9 | 85.9 | 50,978 |
| Korean | 9.9 | 55.8 | 17.0 | 85.9 | 42,105 |
| Pakistani | 24.6 | 32.7 | 12.7 | 84.4 | 30,998 |
| Taiwanese | 13.4 | 73.7 | 38.8 | 78.9 |  |
| Two or More Asian | 21.3 | 48.6 |  | 84.1 |  |
| Vietnamese | 32.9 | 41.6 |  | 65.7 |  |

Source: US Census Bureau ACS, 2015. Note: Statistically unreliable estimates have been omitted.

Black residents rank third of the four groups, with an index score of 4.99. This score is well below the NYC average score of 5.98 , but black well-being outcomes are better in New York City than in the country as a whole-the national black score is 3.91 . Black adults perform better than the NYC average when it comes to adults completing high school but lag behind the city average in adult bachelor's and graduate degree attainment. Black New York residents, as in the country as a whole, have the poorest health outcomes of the four major racial and ethnic groups, with a life expectancy three years shy of the NYC average. The good news is that black NYC residents can expect to live, on average, over three years longer than the average black American 179.2 years compared to 75.8 years).

## FIGURE 5 Human Development Index by Borough: BLACK Residents



Sources: Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

Blacks living in Queens have the highest score of New York City blacks, 5.88; blacks living in the Bronx and Manhattan have the lowest score, 4.69 (see figure 5).

Latino New Yorkers have the lowest American Human Development Index score of the four racial and ethnic groups, 4.58. Like both black and white New Yorkers, however, they are doing better their US counterparts, with a national index score of 4.34. The biggest human development challenge the index reveals for Latinos is education. About a third of adults ages 25 and older did not complete high school, and the share of adults with bachelor's degrees, 17.2 percent, is about half the NYC average. Earnings are the lowest of the four major racial and ethnic groups, $\$ 25,086$ compared to the NYC median of $\$ 35,934$, and less than half the earnings of white New Yorkers. Latinos perform very well on health, however, with the second-longest life expectancies among the city's major racial and ethnic groups, an average of 83.5 years. Typically, groups with longer life expectancies have higher levels of education; Latinos break this mold, a phenomenon known as the Latino Health Paradox, which will be explored below.

Latinos in Queens have the highest score among New York City Latinos, 5.55. Latinos in the Bronx have a very low score, 3.95 (see figure 6).

Like Asians, Latinos in New York City are not a monolith; different Latino subgroups have varying levels of educational attainment and median earnings (see table 7). Those who trace their roots to Spain have the highest levels of education and earnings of the six Latino subgroups for which sufficient data are available; Spaniards earn over $\$ 50,000,57$ percent have four-year degrees, and almost 30 percent have graduate degrees-figures nearly identical to those of New York City whites. South Americans have the second-highest levels of education; almost three quarters have a high school diploma and 22 percent have college degrees.

## Sexual Orientation and Gender Identity

The Human Development Index relies on data from the US Census Bureau American Community Survey and from mortality records from health departments. Neither of these data sources currently record sexual orientation or gender identity, making it impossible to calculate the HD Index for LGBTQ New Yorkers. There are, however, several smaller, often local, surveys that provide health, education, and standard of living data by sexual orientation and gender identity. Though limited, these data give us a glimpse into well-being challenges in the LGBTQ community. This discussion follows in the relevant chapters.

FIGURE 6 Human Development Index by Borough: LATINO Residents


Sources: Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

TABLE 7 Human Development Indicators for LATINO Subgroups in NYC

| LATINO SUBGROUP | $\begin{aligned} & \text { LESS THAN } \\ & \text { HIGH SCHOOL } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | AT LEAST BACHELOR'S DEGREE <br> (\% of adults 25+) | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults 25+] | SCHOOL ENROLLMENT (\% ages 3 to 24) | MEDIAN EARNINGS (\$) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Central American | 37.0 | 17.9 | 5.6 | 73.0 | 26,183 |
| Mexican | 44.8 | 12.9 | 5.6 | 78.4 | 21,191 |
| Other Latino | 37.6 | 20.0 |  | 81.8 | 26,934 |
| Puerto Rican, Dominican, and Cuban | 33.8 | 15.6 | 4.8 | 74.8 | 25,763 |
| South American | 26.9 | 22.3 | 8.0 | 76.7 | 25,085 |
| Spaniard | 11.9 | 56.8 | 29.5 | 76.3 | 51,373 |

Source: US Census Bureau ACS, 2015. Note: Statistically unreliable estimates have been omitted.

## Variation by Gender

New York City women have higher Human Development Index scores than men, on average, 6.16 vs. 5.87 (see SIDEBAR on page 89). They can expect to outlive their male counterparts by an average of five years and are slightly ahead in terms of educational attainment, but men earn about \$7,000 more. In the United States, women have taken to heart the notion that education is an assured route to expanding options beyond traditional lower-paying "female" occupations and that competing in today's globalized knowledge economy requires higher education; girls and young women today are graduating high school and college at higher rates than men across the nation. Yet, as the numbers show, higher educational achievement has not automatically translated into higher earnings. The earnings gap between men and women will be explored in the standard of living chapter. See sidebar for a discusion about sexual orientation and gender identity.

## Variation by Nativity

Foreign-born residents have lower American Human Development Index scores than their native-born city peers (see SIDEbAR). The rate of foreign-born adults without a high school diploma, 27.4 percent, is more than twice that of native-born adults, 11.5 percent; foreign-born adults are also less likely to have college or advanced degrees, and young foreign-born residents are less likely to be enrolled in school than their native-born peers. US-born New Yorkers outearn foreign-born New Yorkers by nearly $\$ 11,000$. Foreign-born New Yorkers, however, live about six years longer, a paradox that will be explored in the health chapter.

The well-being gaps by nativity status are most pronounced among
Asians; compared to foreign-born Asians, native-born Asians are about five times as likely to have a high school diploma, twice as likely to have college degrees, and earn $\$ 18,000$ more on average (see table 8). The gaps in educational attainment and earnings are the smallest between foreign-born and native-born blacks. In fact, foreign-born blacks out-earn native-born blacks by $\$ 4,000$, even though native-born blacks have slightly higher rates of educational attainment.

| TABLE 8 Human Development Indicators by Nativity in NYC |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | LESS THAN HIGH SCHOOL (\% of adults 25+) | AT LEAST BACHELOR'S DEGREE <br> (\% of adults 25+] | GRADUATE DEGREE (\% of adutts $25+$ ) | SCHOOL ENROLLMENT <br> (\%ages 3 to 24) | MEDIAN EARNINGS 2015 (\$) |
| Foreign-Born NYC | 27.4 | 28.7 | 11.7 | 67.7 | 30,565 |
| Native-Born NYC | 11.5 | 44.2 | 18.3 | 80.5 | 41,312 |
| Asian Native-Born | 5.4 | 73.2 | 26.1 | 84.9 | 48,917 |
| Asian Foreign-Born | 28.3 | 37.0 | 13.5 | 76.7 | 30,648 |
| Black Native-Born | 15.7 | 25.1 | 8.8 | 78.4 | 30,932 |
| Black Foreign-Born | 18.4 | 21.9 | 8.4 | 66.1 | 34,978 |
| Latino Native-Born | 24.1 | 22.0 | 8.0 | 78.9 | 30,047 |
| Latino Foreign-Born | 41.7 | 13.6 | 4.2 | 59.4 | 22,214 |
| White Native-Born | 4.4 | 60.9 | 26.9 | 82.3 | 55,835 |
| White Foreign-Born | 13.5 | 48.3 | 24.2 | 72.4 | 48,309 |
| Source: US Census Bureau ACS, 2015. |  |  |  |  |  |

In the chapters that follow, the distribution of well-being by race and ethnicity and gender in health, education, and earnings will be explored further.

## Human Development Index by GENDER



Human Development
Index by NATIVITY Index by NATIVITY


## Variation by Geography: Neighborhood Tabulation Areas

New York City's 188 neighborhood tabulation areas are a study in well-being contrasts, recording some of the highest and lowest scores in the nation. As MAP 10 shows, with darker colors representing higher well-being levels, Manhattan has a disproportionate number of neighborhood areas in the highest category of human development-the nine highest index scores are in Manhattan and the tenth is Brooklyn Heights-Cobble Hill in Brooklyn (see TABLE 9). Unsurprisingly to those who know the struggles faced by too many Bronx residents, all of the neighborhoods in the bottom ten are in the Bronx. Index scores range from 9.34 in the Upper East Side-Carnegie Hill in Manhattan to 2.71 in Claremont-Bathgate

Index scores range from 9.34 in the Upper East SideCarnegie Hill in Manhattan to 2.71 in ClaremontBathgate in the Bronx.

## TABLE 9 Human Development Index in the Top- and Bottom-Ten Neighborhood Tabulation Areas

| RANK NTA | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | LIFE EXPECTANCY AT BIRTH (years) | EDUCATION INDEX (out of 10 ) | MEDIAN EARNINGS (\$) |
| :---: | :---: | :---: | :---: | :---: |
| UNITED STATES | 5.17 | 79.3 | 5.17 | 31,416 |
| NEW YORK CITY | 5.98 | 82.3 | 5.45 | 35,934 |
| TOP |  |  |  |  |
| 1 Upper East Side-Carnegie Hill | 9.34 | 86.4 | 9.50 | 94,963 |
| 2 Lincoln Square | 9.16 | 85.9 | 9.18 | 92,125 |
| 3 West Village | 9.05 | 85.9 | 8.85 | 84,612 |
| 4 Lenox Hill-Roosevelt Island | 8.96 | 86.4 | 8.37 | 76,452 |
| 5 Upper West Side | 8.95 | 85.9 | 8.93 | 63,287 |
| 6 SoHo-TriBeCa-Civic Center-Little Italy | 8.93 | 85.9 | 8.50 | 83,061 |
| 7 Yorkville | 8.83 | 86.4 | 7.98 | 70,831 |
| 8 Gramercy | 8.81 | 87.0 | 7.71 | 71,028 |
| 9 Battery Park City-Lower Manhattan | 8.69 | 85.9 | 7.78 | 85,566 |
| 10 Brooklyn Heights-Cobble Hill | 8.61 | 81.6 | 9.32 | 71,421 |
| BOTTOM |  |  |  |  |
| 179 Kingsbridge Heights | 3.39 | 79.7 | 2.87 | 19,881 |
| 180 Morrisania-Melrose | 3.38 | 77.6 | 2.89 | 22,288 |
| 181 Crotona Park East | 3.32 | 77.6 | 2.78 | 22,098 |
| 182 Longwood | 3.30 | 78.5 | 2.42 | 21,892 |
| 183 Melrose South-Mott Haven North | 3.24 | 78.5 | 2.68 | 20,586 |
| 184 Hunts Point | 3.18 | 78.5 | 2.26 | 21,281 |
| 185 Mott Haven-Port Morris | 2.91 | 78.5 | 2.03 | 19,619 |
| 186 East Tremont | 2.88 | 77.6 | 2.29 | 19,623 |
| 187 Belmont | 2.87 | 77.6 | 3.79 | 14,411 |
| 188 Claremont-Bathgate | 2.71 | 77.6 | 2.51 | 17,620 |

Source: Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2011-2015.

MAP 10 Human Development in New York City by Neighborhood Tabulation Area


FIGURE 11 HD Index Range by Borough


Sources: Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.
in the Bronx. There is also enormous neighborhood variation within boroughs; top NTAs score in the 7 to 9 range and bottom neighborhoods in the 2 (Bronx) to 5 (Staten Island) range. In each borough, the lowest-scoring NTAs are experiencing considerable challenges across the three well-being dimensions (see FIGURE 11).

The sharp residential segregation by race and ethnicity, income, and educational level discussed above in the context of the greater metro area is also found in New York City. MAP 12 provides a visual representation of residential segregation in the city, color coded by race and ethnicity. Because of the extent to which city residents disproportionately tend to live in locales with people who share their race or ethnicity, there is significant overlap between well-being outcomes by demography and by geography. This is especially the case for both predominantly Latino and predominantly white neighborhoods. There is a strong positive relationship between the proportion of white residents in an NTA and its HD Index score (Pearson's correlation is 0.70 ). Conversely, as the proportion of Latino residents in an NTA increases, the HD Index score of that NTA tends to decrease (0.71). The correlation between black and Asian NTA population shares in terms of HD Index score are moderate (negative) and weak (positive), respectively.

Residential segregation by race, while no longer legal, is nonetheless the de facto, on-the-ground reality for many New Yorkers, as it is for many Americans. It produces concentrations of poverty and isolation as well as islands of affluence and connection. Measure of America's research on disconnected youth-young people ages 16 to 24 who are neither in school nor working-shows the dramatically different consequences of neighborhood segregation for young people depending


## Over the past

 decade, earnings have increased the most in two types of areas: majority-white, high-scoring neighborhoods and those that have become increasingly white.on their race. MOA found that the more segregated black and white residents are from one another within a metro area, the lower the likelihood of disconnection is among white youth, but the higher the likelihood is among black youth. ' In other words, residential segregation by race disproportionately harms the life chances of black teenagers and young adults. Why? People living in poor communities have to contend not only with the disadvantages of low family incomes but also the effects of living among others struggling with the same damaging effects of poverty in neighborhoods often characterized by disinvestment and neglect: underinvestment in schools and after-school programs, transport systems, recreational facilities, etc. And their social networks tend to be confined to others facing similar economic struggles. The affluent, on the other hand, enjoy the rewards of their own higher incomes while also benefiting from their neighbors' advantages. Together, they are able to create an opportunity wonderland for their children regularly characterized by good schools, strong social networks, a rich variety of extracurricular activities, contacts for internship opportunities, and proximity to other adults with a wide range of skills, experience, and connections. To be sure, these communities can be competitive hothouses with levels of stress that can be harmful to teens, but there can be little doubt as to which extreme is worse for the typical young person. ${ }^{2}$

## What about Neighborhood Change?

A snapshot of well-being today is a useful tool to assess how New Yorkers are faring, but it is not without its limitations. The well-being scores in this sectionand most of the data contained in this report-capture a specific moment in time. Yet our city is far from static; in New York as in many other dynamic US cities, no discussion of well-being is complete without acknowledging the rapid demographic change shaping neighborhoods and the implications of this change on human development.

One important characteristic of the change is the shifts in the racial and ethnic compositions of many New York City neighborhoods. The analysis that follows focuses on the city's fifty-nine community districts because important data related to change over time is relatively readily available for these districts from the decennial census and the annual American Community Survey. Since 2000, the Latino and Asian shares of the population have increased in a number of neighborhoods, particularly in the Bronx for Latinos, and in the Bensonhurst and Flushing areas for Asians. The share of white residents has increased in several traditionally black and Latino neighborhoods in Central Brooklyn and Harlem, such as Bedford-Stuyvesant, Central Harlem, and Bushwick. The increase has been drastic in some cases; in Bedford-Stuyvesant, for example, the white share of the neighborhood's population grew from under 2 percent in 2000 to nearly 18 percent in 2016-a 17 percentage point increase. In these same
areas, black residents now make up a smaller share of the population than they did in 2000. White residents have decreased as a share of the population in areas far from Manhattan-that is, Staten Island, south Brooklyn, much of Queens, and parts of the Bronx (see FIGURE 13).

Rapid neighborhood change in the last two decades makes it difficult to assess if improvements in neighborhood well-being outcomes are due to progress or are simply a reflection of the outcomes among a new population.
In terms of college attainment, both may be true. All six neighborhoods where the share of adults with college degrees has increased by over 100 percent since the turn of the millennium (in north/central Brooklyn and Harlem) have seen an influx of white residents. But there have also been gains of over 80 percent in college degree attainment in a number of Bronx neighborhoods, suggesting progress in low-income communities of color. For example, since 2000, the share of adults over 25 with a college degree has increased from 5 percent to 10 percent in Melrose and Mott Haven, the neighborhood with the lowest well-being score in the city, made up almost entirely of Latino and black residents.

Over the past decade, earnings have increased the most in two types of areas: majority-white, high-scoring neighborhoods (Chelsea, Clinton, and Midtown Business District; and Battery Park City, Greenwich Village, and Soho) and those that have become increasingly white (Greenpoint and Williamsburg; Chinatown and Lower East Side; Park Slope, Carroll Gardens, and Red Hook; Central Harlem; Brooklyn Heights, and Fort Greene; Bushwick, Crown Heights North, and Prospect Heights; and Hamilton Heights, Manhattanville, and West Harlem). In the Bronx, only one neighborhood has seen a modest increase in earnings, Hunts Point, Longwood, and Melrose. Since 2000, earnings have increased most in Manhattan (21 percent) and in Brooklyn ( 7 percent), and the largest decrease has been in the Bronx (13 percent). ${ }^{3}$

The three chapters that follow take a more in-depth look at the gaps discussed above in health, education, and earnings and explore key factors that are driving the gaps. They examine the distribution of well-being through several lenses, including by geography, by race and ethnicity, by gender, and for US-born New Yorkers and immigrants.

## FIgURE 13 Change in Population Share Since 2000

## ASIAN

The Asian share of the population has seen the greatest INCREASES in Queens and South Brooklyn.


## BLACK

The black share of the population has DECREASED most in Central Brooklyn and Harlem.

## LATINO

The Latino share of the population has INCREASED the most in Bronx neighborhoods.

## WHITE

The white share of the population has INCREASED most in Central Brooklyn and Harlem.


## BOX 14 Homelessness, an Enduring Crisis in Our City

One issue that crosses every basic human development sector is homelessness, an enduring crisis in New York City. Homelessness undermines the most basic pillars of well-being, with devastating impacts not only for the individuals experiencing it but for all of us. The link between homelessness and standard of living is the most direct and obvious: economic hardship can land a struggling individual or family on the street, and the instability of homelessness makes earning a living extremely difficult, creating a downward spiral of causes and consequences. The connection between homelessness and health also runs in both directions. Poor physical or mental health can make it difficult to earn a living in addition to medical care being a costly financial burden, sometimes precipitating a descent into homelessness. Homelessness in turn exposes individuals to a myriad of health hazards-from communicable diseases and malnutrition to violence and accidents.
The daily conditions—chronic stress, limited access to personal hygiene, exposure to the elements-compound existing physical and mental health conditions. Homelessness is also linked to poorer academic outcomes in children, including higher chronic absenteeism and dropout rates and lower math and English proficiency rates. ${ }^{4}$

The effects of homelessness on individuals are conspicuous and numerous. Less understood are its effects on our communities and our city. Housing the homeless is not just the right thing to do, it is also an investment in all residents having the conditions to contribute economically, culturally, and otherwise to the vitality of our city. Our future is inextricably linked to that of other New Yorkers, including the homeless; they are our children's classmates and our former neighbors; they ride the same subways and buy coffee at the same stands. Large-scale homelessness is detrimental to public health, property values, and tourism. The criminalization of homelessness overtaxes the criminal justice system,
and the health effects of being homeless cause a preventable burden on emergency health systems.

Homelessness is on the rise in New York City. In 2017, 129, 803 unique individuals spent at least one night in a shelter, and the average number of New Yorkers sleeping in shelters each night reached over 63,000both all-time record highs. ${ }^{5}$ Three quarters of New York's homeless are families, which include about 23,700 children. ${ }^{6}$ The top three


Source: New York City Department of Homeless Services Data Dashboard, 2016.
reasons families with children cited for entering homeless shelters are domestic violence ( 30 percent), eviction ( 25 percent), and overcrowding (17 percent). ${ }^{7}$ Nine percent of NYC public school students were homeless in the 2015-2016 school year, an increase of almost 50 percent since the 2010-2011 school year.

Homelessness is so ubiquitous today that it is easy to forget that it wasn't always so. The large-scale homelessness we see today in cities across the country dates back only a few decades. In New York City, the decline of single-room housing, which provided a low-cost option for the poor, the disabled, and the elderly, and the deinstitutionalization of tens of thousands of mentally ill patients into city streets, are credited with catalyzing the crisis in the

1970s. By 1981, advocates had secured the legal right to shelter in New York City, a victory that has set New York apart from other cities. But a severe lack of affordable housing and the failure to adequately address poverty have exacerbated homelessness. ${ }^{8}$

Despite the de Blasio administration's efforts, homelessness persists without signs of easing. The mayor's affordable housing plan envisions 15,000 supportive housing units-housing with on-site services in areas such as physical and mental health, substance abuse, job training, and case management-over a period of fifteen years. This would represent only 5 percent of the total 300,000 promised affordable housing units. ${ }^{9}$ The administration's homelessness plan projects a decrease of 2,500 individuals in shelters over five years-only a 4 percent decrease. ${ }^{10}$ These are steps in the right direction, but critics argue they do not match the scale of the issue. ${ }^{11}$

Meaningful change will only happen if the city commits to accepting the costsmonetary and political-that these efforts will require. Additional resources must be invested in proven solutions starting with a "housing first" approach, moving chronically homeless individuals directly into housing and connecting them to the support services they need-ideally flexible, voluntary services on site. ${ }^{12}$ And we must all have the courage to make difficult, sometimes unpopular, choices. Extreme NIMBY-ism borne out of legitimate concerns as well as misconceptions and stigma delay, and sometimes stop, the creation of much-needed facilities. Lastly, the health, education, and standard of living gaps discussed in this report are at the root of homelessness and must be addressed.
Though the circumstances and experiences of the housed and homeless are incredibly different, we all share the same urban ecosystem, and a better quality of life for homeless New Yorkers means a better quality of life in New York City, period.

The three chapters that follow take a more in-depth look at the gaps discussed in health, education, and earnings and explore key factors that are driving the gaps.

They examine the distribution of well-being through several lenses, including by geography, by race and ethnicity, by gender, and for US-born New Yorkers and immigrants.

## A Long and Healthy Life



## Introduction

## Variation by Gender

[^7]
## Introduction

Living a long and healthy life is humankind's cardinal capability. Being aliveavoiding premature mortality and being protected from arbitrary denial of lifeis quite simply the prerequisite for the development and exercise of all other capabilities. ${ }^{1}$ And being healthy-attaining the highest possible standard of physical and mental health-maximizes the likelihood that a person will realize his or her full potential and, as a result, lead a flourishing, freely chosen life.

Health is both a cause and a consequence of a person's overall well-being. Poor health can profoundly limit growth and fulfillment across a range of capabilities, from agency and autonomy to political participation and social inclusion. And health is inextricably linked to the other two components of the American Human Development Index, access to knowledge and a decent standard of living. Ill health and disabling conditions can hinder access to educational opportunities, disrupt academic progress, and limit educational attainment. Poor health can dramatically lower a person's material living standards by narrowing the range of possible employment options, causing job loss, or triggering an avalanche of medical bills that wipe out savings and bring the risks of bankruptcy, foreclosure, and homelessness. ${ }^{2}$ On the other side, people with more education tend to live longer and enjoy better physical and mental health; they have more knowledge about health risks, are more likely to have jobs with health insurance, and are more likely to engage in health-promoting behaviors like exercise. Those with greater financial resources are better able to protect themselves from health risks like pollution, violent crime, poor-quality housing, and the risk of unintentional injury. Better-educated people with high earnings are also more likely to enjoy societal respect and less likely to suffer social exclusion, both of which can lead to toxic stress that harms the cardiovascular system. In sum, good physical and mental health enhance people's real freedom to pursue the goals that matter to them, whereas poor health too often narrows the horizons of the possible.

In the American Human Development Index, the proxy for a long and healthy life is life expectancy at birth, defined as the number of years that a baby born today can expect to live if current patterns of mortality continue throughout his or her lifetime. Although living a long life and living a healthy life are not synonymous, in general, those who manage to elude all causes of mortality until their eighties or nineties are healthier than the average person, and life expectancy is a widely used summary measure of population health. The life expectancy estimates in this chapter were calculated using mortality data from the New York City Department of Health and Mental Hygiene, 2010-2014.

Compared to the country as a whole, New York City is well ahead in terms of life expectancy at birth. A baby born today in the city can expect to live 82.3 years, surpassing average US life expectancy by three years. Life expectancy in the

A baby born today in the city can expect to live 82.3 years, surpassing average US life expectancy by three years.

nation's second-largest city, Los Angeles, is about the same as New York's, 82.1 years. If New York City were a country las many of its residents already seem to think it is), it would be tied for eighth place with Sweden in longevity (see figure 1). The good news is that New York overall is doing well and that some populations are living much longer than average-with particular populations reaching nearly 90 years on average. The bad news is that the gaps between the longest- and shortest-lived neighborhoods and the longest- and shortest-lived racial and ethnic groups are more than ten years.
figure 1 If New York City Were a Country, It Would Be Tied
for Eighth in Longevity


Sources: Countries: World Health Organization, World Health Statistics, 2014. New York City: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene, 2010-2014.

This chapter will present the life expectancy for New York City by gender, by nativity, and by race and ethnicity, as well as by community district. It will also review differing leading causes of death and notable health disparities-differences in health outcomes that are avoidable, unnecessary, and unjust-across these groups. ${ }^{3}$ Unfortunately, due to the lack of data, we are unable to present life expectancy for LGBTQ New Yorkers, though we do explore some issues related to LGBTQ health in box 2.

Two key concepts inform this analysis. The first is the notion of the social determinants of health, defined by the World Health Organization as "the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics"4 (see FIGURE 3). Central to this approach is the idea that while doctors and medicines are critical once we fall ill or are injured, the main drivers of health disparities between groups lie not in the health-care system but in the conditions of people's daily lives. Safe neighborhoods, clean air, full-service grocery stores, healthy school lunches, places to exercise safely, educational equality, employment that offers security, dignity, and agency: these and other things like them are key to keeping people healthy.

The second (and related) concept that informs this analysis is health equity.

## Box 2 LGBTQ Health Issues

Because mortality records do not indicate sexual orientation or gender identity, it is not possible to calculate life expectancy by these criteria, but other data illuminate some of the health challenges the LGBTQ population faces.
Disparities start at an early age; as mentioned in the education chapter, half of New York City's students who identified as LGBTQ reported depressive symptoms, 31 percent said they had considered suicide, and 20 percent reported having attempted suicide-all well above the rates for non-LGBTQ students. ${ }^{5}$

LGBTQ adults also disproportionately experience mental health concerns; 23 percent of lesbian, gay, and bisexual adults in New York City report being in fair or poor mental health, more than twice the rate for straight adults (see SIDEBAR). ${ }^{6}$ There are also disparities in physical health for certain groups; though HIV rates have been decreasing, sexual orientation continues to be a risk factor.? A national survey reveals that, compared to other LGBTQ respondents, transgender individuals are more likely to face financial barriers to health-care access, to have inadequate insurance, and to report
being in fair or poor health. ${ }^{8}$ LGBTQ seniors face additional barriers as they age; they are less likely to have children who can help them navigate the health-care system, and those who are unmarried do not have access to Social Security benefits after the deaths of their partners. ${ }^{9}$ Researchers have also found higher rates of substance abuse and smoking, violence victimization, unhealthy weight control or perception, and lower rates of mammography and Pap smear screening among LGBTQ populations. ${ }^{10}$

Negative experiences and fear of discrimination may prevent LGBTQ patients from disclosing their sexual orientation and/or gender identity to health-care providers. This is of particular importance among LGBTQ seniors, whose experiences with stigma and discrimination are likely worse than for younger generations. ${ }^{11}$ In a national survey, a third of transgender respondents reported having a negative experience with a healthcare provider, and almost a quarter reported not seeking medical care out of fear of being mistreated. ${ }^{12}$

## LGBTQ Mental Health Disparities

NYC ADULTS
Fair or poor mental health LGBTQ 23\% Non-LGBTQ 10\%

NYC STUDENTS
Depressive symptoms
LGBTQ 50\%

Non-LGBTQ 25\%
Considered suicide
LGBTQ $31 \%$

Non-LGBTQ 11\%
Attempted suicide
LGBTQ 20\%
Non-LGBTQ $6 \%$

Sources: Adults: NYC Health and Nutrition Examination Survey (HANES), 2013-2014. Students: NYC Youth Risk Behavior Survey (YRBS), 2015.

Health inequities are health differences that are avoidable and unfair and which adversely affect a socially disadvantaged group; this disadvantage can be based on race and ethnicity, religion, socioeconomic status, gender, sexual orientation, disability status, or other characteristics linked to discrimination and social exclusion. ${ }^{13,14}$ Examples of health inequities in New York City are an infant mortality rate for black babies that is three times the rate for white babies; a teenage pregnancy rate for low-income girls that is 45 percent higher than the rate for girls citywide; and a rate of asthma-related emergency department visits among children that is 63 percent higher in high-poverty neighborhoods than it is citywide. ${ }^{15}$

At its most basic level, health equity means that everyone should have an equal opportunity to live a long and healthy life. Creating this equality of opportunity requires "societal action to remove obstacles such as poverty and discrimination and their consequences-including powerlessness and lack of access to good jobs, education, housing, environments, and health care" ${ }^{16}$-in other words, it requires attention to making the social determinants of health more equitable, fair, and just across groups.

> Health inequities are health differences that are avoidable and unfair and which adversely affect a socially disadvantaged group.

## FIgure 3 The Social Determinants of Health

The social determinants of health are defined as the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are shaped by a wider set of forces: economics, social policies, and politics.
-World Health Organization ${ }^{17}$ See examples below.


## Variation by Gender

New York City women outlive their male counterparts by about five years, on average. Female life expectancy is 85.3 years and male life expectancy is 80.2 years. Around the world, women tend to live longer than men, pointing to some biological differences between the sexes that advantage women, particularly when it comes to the leading cause of death, heart disease. ${ }^{18}$

But the striking variation in the male-female life expectancy gap in different places and among different racial and ethnic groups points to the existence of social, cultural, and economic contributors as well. In five countries (Russia, Belarus, Lithuania, Rwanda, and Syria), women outlive men by ten years or more;
at the other end of the spectrum, in Mali, which has one of the highest maternal mortality rates in the world, women live only about one month longer than men, on average. ${ }^{19,20}$ In New York City, the gender gap is widest in the Bronx, 6.3 years. Women live the longest lives in Queens, where female life expectancy is 87.4 years, and the shortest on Staten Island, where female life expectancy is 83.2 , four years less. Men likewise have the longest life expectancy in Queens (82.3) but the shortest in the Bronx (76.9) (see sidebar).

Gender norms-which define what girls and boys, women and men, are expected to do and be in specific social contexts-create differing patterns of healthpromoting and health-risk behaviors. ${ }^{21}$ Risky behaviors, violence and domination, and eschewal of health care and healthy options of different sorts are ways that some men demonstrate or "perform" masculinity. As a result, compared to girls and women, boys and men are more likely to die by homicide, by suicide, and as a result of unintentional injuries like car crashes; ${ }^{22}$ are more likely to engage in substance abuse; ${ }^{23}$ are more likely to be exposed to health risks at work; ${ }^{24}$ and more often resort to violence. ${ }^{25}$ They are also less likely to seek medical care. ${ }^{26}$ Under stress, women are more likely to "tend and befriend," practicing "nurturant activities...that promote safety and reduce distress" and creating and maintaining social support networks they can turn to for help; ${ }^{27}$ men are more likely to act impulsively ${ }^{28}$ and resort to "fight-or-flight" behaviors-striking out or fleeing, literally or via substance use. All these factors conspire to lower male life expectancy in ways that are not natural or inevitable but rather the result of internalized social norms about what it means to be a man or a woman in our society-norms that can and do change.

The ways in which men are socialized don't just harm men's health; women also pay a steep health price in the forms of gender-based violence (GBV) and intimate-partner violence (IPV). GBV and IPV affect people of all genders and sexual orientations. Transgender women and other LGBTQ people, for example, face a heightened risk of violence in the form of hate-motivated attacks and killings, and nearly all perpetrators of such acts are men. ${ }^{29}$ When it comes to IPV, the majority of survivors are women and the majority of perpetrators are men. In addition to the physical injuries IPV survivors undergo, compared to women who do not experience IPV, women who do face a heightened risk of stroke and heart disease ${ }^{30}$ and are twice as likely to experience depression or have alcohol-use disorders. ${ }^{31}$ According to the Centers for Disease Control and Prevention, over half of female homicides for which the circumstances were known were related to IPV, and victims were nearly always killed by a current or former male intimate partner. ${ }^{32}$ Younger women, particularly young women who are black, Native American, or Latina, face the highest risk. ${ }^{33}$

## Gender Gaps in Life Expectancy



NEW YORK CITY




Staten Island


Manhattan
4.4 years

## Variation by Nativity

Foreign-born New Yorkers enjoy a commanding life expectancy lead over US-born New Yorkers, nearly six years (see sidebar). New York is not alone in this; research consistently shows that, on average, immigrants live longer than native-born Americans, but this life expectancy advantage tends to wear off the longer a person lives in the United States. ${ }^{34}$ (This phenomenon as it applies to Latinos, particularly Mexican immigrants to the US, is known as the Latino Health Paradox and is discussed in greater depth below.) Over one-third of New York City residents are foreign born, and their health outcomes have a powerful effect on the city's average life expectancy.

Although the effects of nativity vary, some reasons immigrants may become less healthy the longer they stay include the following: ${ }^{35}$

- Acculturation and related stress. Adopting or struggling to adapt to the habits and social norms of a new culture land often shedding those of their home culture) can be a stressful process that weighs heavily on immigrants. New family dynamics and gender roles, the loss of social status or occupational prestige, the struggle to learn a new language, difficulty finding work, and the trauma of displacement and loss of the familiar can take a toll.
- Diet. The standard American diet is infamous for its poor health effects. The most affordable and available foods tend to be heavily processed and unhealthy, often replacing local fruits and vegetables and whole grains from immigrants' previous diets.
- Health behaviors. Immigrants may have different health behaviors related to smoking, drinking alcohol, physical activity, and more. Lower smoking rates among immigrants than among native-born residents is a primary health-protective factor for immigrants, accounting for a large share of their life expectancy advantage. ${ }^{36}$
- Documentation status. Arriving in the United States as an undocumented immigrant brings many challenges, especially in the current political climate. Undocumented immigrants are far more likely than others to avoid the heath-care system and go without needed care; they also face a heightened risk of alcohol and substance abuse, as well as mental health problems.


## Variation by Race and Ethnicity

More than a decade separates the life expectancy of the city's Asian residents, 89.3 years, and its black residents, 79.2 years. Latinos and whites fall between the two; Latinos are the second-longest-lived group (83.5) and whites are third (82.6) (see figure 4).

Figure 4 Life Expectancy Comparison

LIFE EXPECTANCY AT BIRTH (YEARS)


Source: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.

In New York City as a whole as well as for each racial and ethnic group, heart disease and cancer are the leading causes of death (see table 5). After those two causes, however, the lists differ by race and ethnicity, evidence of health inequities among different groups of New Yorkers.

Asians live the longest in New York City, just shy of 90 years. Asians demonstrate a similarly strong life expectancy advantage nationally, as well as in every US state, county, or metro area for which Measure of America has ever calculated life expectancy. Although Asians are less likely than whites to die of some causes, such as drug overdose and car crashes (they are the only group of New Yorkers for whom substance abuse does not figure among the leading causes of death), in general their health advantage lies in the fact that they tend to outlive whites regardless of cause of death-in other words, they are as likely to die of leading causes of death like heart disease and cancer, but they die at later ages. This may be in part because among the major US racial and ethnic groups, Asians have the lowest blood sugar levels and are the least likely to be overweight or to smoke; in addition, health-promoting social norms around cooking and eating may provide a protective health benefit. ${ }^{37}$

As mentioned elsewhere in this report, however, Asians are not a monolithic group (nor are any of the other racial and ethnic categories). Due to data availability, it is not possible to provide life expectancy calculations for Asian

More than a decade separates the life expectancy of the city's Asian residents, 89.3
years, and its black residents, 79.2 years.

TABLE 5 Leading Causes of Death by Race and Ethnicity in NYC

|  | NYC OVERALL | ASIAN AND PACIFIC ISLANDER | BLACK | LATINo | WHITE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | Heart Disease | Heart Disease | Heart Disease | Heart Disease | Heart Disease |
| 2 | Cancer | Cancer | Cancer | Cancer | Cancer |
| 3 | Influenza (Flu) <br> \& Pneumonia | Influenza (Flu) <br> \& Pneumonia | Diabetes | Accidents | Accidents |
| 4 | Accidents | Stroke | Stroke | Influenza (Flu) \& Pneumonia | Influenza (Flu) \& Pneumonia |
| 5 | Diabetes | Diabetes | Influenza (Flu) <br> \& Pneumonia | Diabetes | Chronic Lower Respiratory Diseases |
| 6 | Stroke | Chronic Lower Respiratory Diseases | Hypertension \& Renal Diseases | Stroke | Stroke |
| 7 | Chronic Lower Respiratory Diseases | Accidents | Chronic Lower Respiratory Diseases | Chronic Lower Respiratory Diseases | Substance Overdose (excluding alcohol) |
| 8 | Hypertension \& Renal Diseases | Alzheimer's Disease | Accidents | Substance Overdose (excluding alcohol) | Diabetes |
| 9 | Alzheimer's Disease | Hypertension \& Renal Diseases | HIV | Alzheimer's Disease | Alzheimer's Disease |
| 10 | Substance Overdose (excluding alcohol) | Suicide | Homicide | Hypertension \& Renal Diseases | Hypertension <br> \& Renal Diseases |
| 11 | Chronic Liver Disease \& Cirrhosis | Kidney Disease | Substance Overdose (excluding alcohol) | Chronic Liver Disease \& Cirrhosis | Suicide |
| 12 | Suicide | Parkinson's Disease | Alzheimer's Disease | Septicemia | Chronic Liver Disease <br> \& Cirrhosis |
| 13 | Septicemia | Septicemia | Kidney Disease | HIV | Septicemia |
| 14 | HIV | Chronic Liver Disease \& Cirrhosis | Infant death in the first 28 days after birth | Viral Hepatitis | Parkinson's Disease |
| 15 | Kidney Disease | Birth defects | Septicemia | Homicide | Kidney Disease |

Source: New York City Department of Health and Mental Hygiene, Epiquery Mortality Data, 2015.
subgroups. Doing so would be ideal, as considerable variation exists. For city residents who trace their heritage to China, cancer rather than heart disease tops the list of leading causes of death. Cancer accounts for one in three deaths of Chinese New Yorkers, compared to one in four for all New Yorkers. Stroke, suicide, and nephritis are also disproportionate health challenges in this population. ${ }^{38}$

Measure of America was able to obtain mortality data disaggregated by Asian subgroup for a report similar to this one, A Portrait of Los Angeles County. The availability of disaggregated health data in Los Angeles was due to years of effort on the part of Asian American advocacy organizations; California governor Jerry Brown signed a bill requiring disaggregation of health data by Asian
subgroup in 2016. ${ }^{39}$ The life expectancy differences Measure of America found were striking. Native Hawaiians and other Pacific Islanders had LA County's lowest life expectancy among all racial and ethnic groups, just 75.4 years. Among Asian subgroups, Indian and Chinese LA County residents had the longest life expectancies, 88.1 years. It is reasonable to assume that similar differences exist among New York City subgroups. Such data are critical to understanding and addressing health disparities among Asian residents of the city, but unfortunately they are not currently available.

For both Asian and white New Yorkers, suicide is among the fifteen leading causes of death. (Suicide also ranks third among the leading causes of death for young people ages 15-24 of all races and second for those in the 25-35 age range. ${ }^{40}$ ) Nine in ten people who lose their lives to suicide experience some form of mental illness or substance abuse, pointing to the need for access to and destigmatization of mental health services. Less well known but well supported by evidence is the need for population-based interventions to restrict or delay access to the means of suicide. In the popular imagination, a person intent on taking his or her own life will find a way to do it. In reality, however, suicide is frequently an impulsive act undertaken in a moment of intense psychic pain, rage, or hopeless despair; removing or even delaying access to the means of lethal self-harm in that moment is a highly effective deterrent in such cases. Steps like limiting access to firearms (the most common means of suicide), erecting suicide barriers and nets on bridges and other high places, and even packaging pills in blister packs rather than loose in a bottle have the potential to save countless lives. ${ }^{41}$

The strongest evidence for the effectiveness of this approach comes through a natural experiment. In the 1950s, about half of all suicides in Britain were accomplished via inhaling the lethal carbon monoxide produced by the coal gas people used to fuel their stoves; every kitchen housed the means for lethal self-harm, and the phrase "sticking one's head in the oven" was shorthand for killing oneself. Over the course of the 1960s and ' 70 s , coal gas was phased out in favor of natural gas for environmental reasons, and during that period, the suicide rate decreased by a third and has remained at that level. ${ }^{42}$ People unable to kill themselves with their ovens did not walk outside and throw themselves in front of a taxi; the moment of intense pain passed, and with it the urgent desire to end their lives. Similar results have been found with the erection of suicide barriers. ${ }^{43}$

Latinos have the second-longest life expectancy in New York City, 83.5 years. They also have the second-longest life expectancy nationally and in all other geographies for which MOA has calculated life expectancy. This finding surprises many. The world over, people with higher levels of educational attainment tend to live longer. The phenomenon of low educational levels paired with long life expectancies among Latinos in the United States is known as the Latino Health Paradox (see sidebar), and it is found in the country as a whole as well as in other areas Measure of America has studied (particularly California). Several factors

> For both Asian and white New Yorkers, suicide is among the fifteen leading causes of death.

## Latino Health Paradox

- Lower smoking rates
- Social support and family cohesion
- Healthy diet during pregnancy
may contribute to longer life spans for Latinos in the United States. Lower rates of smoking are a likely contributor given smoking's ties to heart disease, cancer, and stroke, all leading causes of death. Research around positive birth outcomes for Latino/a infants and mothers points to protective aspects of Latino culture, such as social support, family cohesion, and a healthy diet during pregnancy, that may confer health benefits to the Latino population more broadly. Further research on this topic is needed. ${ }^{44}$

As described above, the Latino health advantage seems to wear off the longer Latinos are in the United States. Foreign-born Latinos tend to have better health outcomes than those who either were born in the United States or have spent a significant amount of time in this country. These findings suggest that immigrants come to adopt the preferences of the people they live among, a process of acculturation that has significant adverse impacts on health (with some beneficial impacts as well.). ${ }^{45}$ Understanding the various factors contributing to these outcomes could inform efforts to ensure that immigrants and their children retain their health-promoting habits.

Several health inequities are evident from the leading causes of death table (table 5). Viral hepatitis is among the leading causes of death for Latinos, but for no other group. Hepatitis C can be treated and cured. Hepatitis B cannot be cured, but it can be prevented with vaccination and treated to limit disease progression. ${ }^{46}$ HIV is a leading cause of death for Latino and black New Yorkers, but not for Asians or whites. The same is true for homicide. What these causes of death all have in common is that they are preventable. Hepatitis and HIV are both sexually transmitted as well as transmitted via intravenous drug use and via birth; access to information and preventative services, particularly for pregnant women and higher-risk populations like men who have sex with men, are needed to reduce the disproportionate burden of these diseases. The New York City Department of Health and Mental Hygiene has prioritized this issue.

White New Yorkers can expect to live 82.6 years, longer than their counterparts in the larger metro area, 81.1 years. Why do white New Yorkers, whose earnings are double those of Latinos and who have higher rates of insurance coverage and better educational outcomes than any other racial or ethnic group in the city, have a shorter life expectancy than either Latinos or Asians? One reason may be that both white and black residents have far fewer immigrants among their ranks than either Latinos or Asians, and immigrant New Yorkers command a considerable life-expectancy lead over US-born residents. ${ }^{47}$ Another is that whites have higher rates of health-risk behaviors such as smoking and binge drinking. They are also the group for which accidental drug overdose ranks highest among the leading causes of death.

Princeton University scholars Anne Case and Angus Deaton argue that a nationwide increase in mortality among middle-age whites is due to increases in "drug overdoses, suicides, and alcohol-related liver mortality-particularly
among those with a high school degree or less." Although mortality for Latinos, blacks, and whites with college degrees fell between 2000 and 2014, mortality for whites without college degrees rose. They attributed these "deaths of despair" to decreased labor market opportunities for whites with limited education, as well as the decline of marriage, increased social isolation, and detachment from the labor force. It is tempting, therefore, to weave the lower comparative life expectancy of New York City whites into the "deaths of despair" narrative; however, Case and Deaton note that the I-95 corridor, New York, and New Jersey, did not experience this increased white mortality between 1999 and 2015, ${ }^{48}$ and the New York City Department of Health and Mental Hygiene found that white life expectancy in the city increased by 1.7 years between 2004 and 2013.49

Black New Yorkers have the lowest life expectancy, 79.2 years. Some trends are quite positive, however; between 2004 and 2013, black New Yorkers gained 2.8 years in life expectancy, the largest gain among major racial and ethnic groups, and black residents of New York City live 3.4 years longer than black Americans overall. In addition, the black-white mortality gap continues to narrow. ${ }^{50}$

Nonetheless, health inequities continue to be a major obstacle to flourishing, freely chosen lives for black New Yorkers. Black residents of the five boroughs have the highest total mortality among the major racial and ethnic groups, 717.8 deaths per 100,000 people per year, nearly double the Asian rate and 22 percent above the white rate of $586.4 .{ }^{51}$ Black New Yorkers have the highest rate of premature death, defined as dying before age 75 ( 57 percent vs. a white rate of 32 percent).

Mortality rates for the two leading causes of death for all racial and ethnic groups, heart disease and cancer, are higher for black residents. In addition, black New Yorkers face unique health burdens: among their leading causes of death is infant death in the first twenty-eight days, a heartbreaking cause that didn't make the top fifteen for any other group. Black New Yorkers also die disproportionately from HIV and homicide.

Although infant death has declined dramatically in the city since 2004, stark racial inequities persist: black babies are nearly three times as likely to die as white babies, an increase in the racial gap since 2005, when they were twice as likely to die. ${ }^{52}$ The leading cause of death among infants is prematurity-a short gestational period and a resulting low birth weight. Part of the heightened risk of infant death for black New Yorkers is that blacks experience greater socioeconomic disadvantage than whites, and many of types of socioeconomic disadvantage are associated with infant death. For example, the New York City death rate for babies born to mothers with a high school degree or less is twice that of mothers with a bachelor's degree or more, and unmarried mothers face twice the risk of married mothers. Babies born in New York City to girls less than 18 years old face the highest risk of death, and the teen birth rate in 2014 for black girls was 2.5 times higher than for white girls. Babies born in high-poverty city neighborhoods are

Black New Yorkers gained 2.8 years in life expectancy, the largest gain among major racial and ethnic groups.

> Black adolescent boys in the United States are nineteen times as likely to lose their lives to homicide as white adolescent boys.
1.5 times as likely to die as babies born in low-poverty neighborhoods. Babies of US-born mothers face a 50 percent greater chance of dying than babies of foreignborn mothers ( 4.8 vs. 3.2 percent); most black New Yorkers are native-born. ${ }^{53}$

But evidence is mounting that these and other factors, such as access to prenatal care and social support, don't fully explain the mortality rate. Although education has a protective effect for women generally, for example, black women with graduate degrees are more likely to lose their babies to infant death than white women whose educations stopped in the eighth grade. ${ }^{54}$ Racism and the unremitting stress it creates has emerged as a probable cause of both infant mortality and maternal mortality and morbidity as well as the high rates of overall black mortality (see box 6).

Homicide is another severe health inequity experienced by black New Yorkers. In 2017, homicide fell to a low not seen since the 1950s, ${ }^{55}$ a cause for celebration that has benefited New Yorkers of all racial and ethnic groups. But as we have seen with other causes of death, the gaps in mortality between black New Yorkers and other groups remain large; homicide takes a wildly disproportionate toll on the lives of black people, especially young men. Homicide is the tenth-leading cause of death for black New Yorkers and the fifth-leading cause of preventable death. ${ }^{56}$ A November 2017 UNICEF report calculated that black adolescent boys in the United States are nineteen times as likely to lose their lives to homicide as white adolescent boys-and about as likely to be victims of homicide as an adolescent boy living in war-torn South Sudan. Black adolescent girls are five times as likely to be killed as white adolescent girls. ${ }^{57}$ In New York City, homicide is the leading cause of death for young people ages 15-24; one in five young-adult New Yorkers who died in 2015 was killed by another person. Although New York has strong gun control laws, an "iron pipeline" of illegal trafficking connects the city to states like Virginia, Georgia, and the Carolinas, where gun laws are extremely lax.

## BOX 6 Racism Harms Health

How does racism harm health? Racism increases the frequency and severity of stressors to which a person is exposed as he or she goes about their day; these stressors range from frightening encounters with police or disrespectful treatment in public places to the anxiety of economic insecurity (black New Yorkers are more likely to be be poor) or worry about school quality (black children are disproportionately concentrated in lowperforming schools). Black women experience greater exposure to chronic stressors across their life course than women of other racial
and ethnic groups. Chronic stress harms the cardiovascular and other systems by constantly stimulating the fight-or-flight response and thus flooding the body with cortisol, adrenalin, and other hormones, causing excessive wear and tear on key physical systems. The accumulation of stressors and the response to them can be identified through a combination of several markers, such as blood pressure, cholesterol levels, and urinary epinephrine and cortisol, which together are referred to as the allostatic load. A high allostatic load is associated with worse health outcomes. ${ }^{58,59}$

## box 7 A TALE OF TWO BLACK COMMUNITIES: Across the Street and Eight Years Apart



A large body of research on health equity points to a major area of concern: the high rates of premature death and low life expectancy of black Americans. The underpinning health disadvantages have roots in a long history of racism, social exclusion, and economic disadvantage. The current state of black health in New York sheds light on the public health issues facing black Americans, and offers hope: black New Yorkers outlive the average black American by four years. One Brooklyn neighborhood in particular stands out; in East Flatbush,
Farragut, and Rugby, where nearly 90 percent of residents are black, a baby born today can expect to live $\mathbf{8 4 . 6}$ years-longer than the average white, Latino, or black New Yorker. But not all black New Yorkers experience such stellar health outcomes. A baby born in Brownsville and Ocean Hill, where 75 percent of residents are black and 21 percent are Latino, can expect to live 76.7 years-nearly eight years less than their neighbors just across East 98th Street in East Flatbush.

Health outcomes in Brownsville and Ocean Hill are nothing short of alarming. Residents have the city's highest rate of premature deaths overall; the highest rates of death due to hypertension and renal disease, cancer, and diabetes; and the highest rate of avoidable diabetes hospitalizations. Alcohol- and drug-related, assault, and psychiatric hospitalizations are all among the highest in the city. The rate of premature deaths in East Flatbush (205 deaths per 100,000 residents), on the other hand, is only slightly higher than the citywide average, and respiratory disease deaths and substance abuse deaths are among the lowest. Community Board 16 in Brownsville identified crime as one of the neighborhood's most pressing issues. Although crime there has declined in recent years, the perception of safety has been found to affect social activity, mental health, and outdoor physical activity in much the same way as actual neighborhood crime
does. ${ }^{60,61}$ In a 2010 survey conducted by the Center for Court Innovation, roughly 40 percent of female Brownsville residents and a quarter of male residents reported feeling unsafe on the street, walking to and from the subway, and in parks. ${ }^{62}$

Brownsville also has the second-highest incarceration rate in the city. Contact with the prison system has been linked to poor health even when controlling for drug use and income, possibly due to the stigma that comes with having a criminal record. ${ }^{63}$

A drive through these two neighborhoods reveals another notable difference: much of Brownsville consists of NYCHA developments, while only a few small projects pepper East Flatbush. Documented poor housing conditions in NYCHA developments raise concerns for tenant health. ${ }^{64,65}$

Poor health outcomes in Brownsville are in large part responsible for the wide gap between the two neighborhoodsbut also driving the gap is East Flatbush's surprisingly long life expectancy. In addition to more-favorable social determinants of health, East Flatbush appears to benefit from an immigrant health advantage. Over half of the population is foreign born, compared to 30 percent in Brownsville; 75 percent of foreignborn East Flatbush residents are of Caribbean origin. The health of black Americans varies by nativity and origin; children with foreign-born mothers have better health outcomes than those with native-born mothers. ${ }^{66}$ Black immigrants from Europe, however, do not have the same health advantage as those from minority-white areas like Africa, suggesting that racial context may impact black health. ${ }^{67,68}$

Brownsville faces many challenges, but it also has a key asset-a community that is dedicated to improving quality of life. A number of initiatives have sprung up in recent years to combat the most pressing issues facing the neighborhood, from reducing violence and unemployment to remaking public spaces. ${ }^{69}$

## Variation by Geography: Borough and Community District

Life expectancy at birth is higher in New York City than in the metro area, the state, or the country as a whole. Because New York City has a high degree of residential segregation (see PAGE 92), the life expectancy patterns by race and ethnicity discussed above are reflected in geographic patterns.

TABLE 8 Life Expectancy by Borough and Race and Ethnicity

| OVERALL | ASIAN | BLACK | LATINO | WHITE |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| NYC | $\mathbf{8 2 . 3}$ | $\mathbf{8 9 . 3}$ | $\mathbf{7 9 . 2}$ | $\mathbf{8 3 . 5}$ | $\mathbf{8 2 . 6}$ |
| BRONX | $\mathbf{8 0 . 4}$ | 94.1 | 78.5 | 82.7 | 79.5 |
| BROOKLYN | $\mathbf{8 2 . 0}$ | 88.9 | 80.2 | 82.5 | 82.8 |
| MANHATTAN | $\mathbf{8 4 . 2}$ | 89.8 | 76.6 | 84.8 | 82.6 |
| QUEENS | $\mathbf{8 5 . 1}$ | $\mathbf{8 1 . 1}$ | 90.3 | 82.6 | 89.2 |
| STATEN ISLAND | 90.4 | 78.2 | 82.3 | 83.5 |  |

Source: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.

## The five

community districts with the longest life expectancies, all above 86 years, are located in Queens and Manhattan.

Life expectancy at birth is highest in Queens ( 85.1 years) and lowest in the Bronx ( 80.4 years). Asians living in the Bronx have the longest lives, well over 90 years, and black residents of Manhattan have the shortest (76.6) (see table 8).

Due to the small population size of neighborhood tabulation areas, it was not possible to reliably calculate life expectancy for this geography. Instead, life expectancy was calculated by Public Use Microdata Area (PUMA), a geography with boundaries that for the most part align with those of community districts. For the purpose of calculating the American Human Development Index for neighborhood tabulation areas, the life expectancy value for each PUMA was applied to the neighborhood tabulation areas within it.

The five community districts with the longest life expectancies, all above 86 years, are located in Queens and Manhattan. Two are majority white, one is majority Asian, one is split fairly evenly between whites and Asians, and all four have very low black populations. The remaining district, Queens Village, Cambria Heights, and Rosedale, is 56 percent black, four in ten residents are foreign-born, and the poverty rate is a quite low 6.6 percent. The community districts with the shortest life expectancies, all under 79 years, are found in Harlem, Central Brooklyn, and the Bronx. All score near or below average on the Education Index, are home to relatively fewer immigrants, and have poverty rates ranging from 24 percent to 42 percent (see MAP 9 and TABLE 10). Health conditions in Brownsville, the lowest-scoring area, are discussed in box 7.

## MAP 9 Life Expectancy in NYC



## TABLE 10 Top- and Bottom-Five Community Districts by Life Expectancy

|  |  | LIFE EXPECTANCY <br> AT BIRTH (YEARS) |
| :--- | :--- | :--- |
| TOP 5 |  |  |
| $\mathbf{1}$ QUEENS Community District 11-Bayside, Douglaston \& Little Neck | 89.6 |  |
| $\mathbf{2}$ | QUEENS Community District 13-Queens Village, Cambria Heights \& Rosedale | 89.0 |
| $\mathbf{3}$ MANHATTAN Community District 6-Murray Hill, Gramercy \& Stuyvesant Town | 87.0 |  |
| $\mathbf{4}$ QUEENS Community District 7-Flushing, Murray Hill \& Whitestone | 86.5 |  |
| $\mathbf{5}$ MANHATTAN Community District 8-Upper East Side | 86.4 |  |
|  |  |  |
| B0TTOM 5 |  |  |
| $\mathbf{5 5}$ | BRONX Community Districts 1 \& 2-Hunts Point, Longwood \& Melrose | 78.5 |
| $\mathbf{5 6}$ MANHATTAN Manhattan Community District 11-East Harlem | 78.3 |  |
| $\mathbf{5 7}$ MANHATTAN Community District 10-Central Harlem | 78.0 |  |
| $\mathbf{5 8}$ | BRONX Community Districts 3 \& 6-Belmont, Crotona Park East \& East Tremont | 77.6 |
| 59 | BROOKLYN Community District 16-Brownsville \& Ocean Hill | 76.7 |

Source: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.

## Poverty is

 associated with a lower life expectancy across NYC community districts.The leading causes of death in the neighborhoods with the longest and shortest life expectancies point to important differences. While heart disease and cancer occupy the first and second positions when it comes to leading causes of death at both the bottom and the top of the life expectancy scale, suicide is among the leading causes of death in three of the top-scoring neighborhoods (Flushing, the Upper East Side, and the Upper West Side), and HIV is among the leading causes of death in eight of the bottom-scoring neighborhoods (Brownsville, Morrisania, East Tremont, Central Harlem, East Harlem, Mott Haven, Hunts Point, Bedford-Stuyvesant, and Concourse/Highbridge).

Homicide also shows a sharp divide. For NYC community districts, the five-year average age-adjusted homicide rate in 2015 was highest in Brownsville (20.8 deaths per 100,000 people), followed by Mott Haven at 12.2, Morrisania at 12.0, Bedford-Stuyvesant at 11.4, and East Flatbush at 10.8. In contrast, in eight community districts, the rate was less than 1.0 death per 100,000 people: Battery Park/Tribeca, the Upper East Side, Bay Ridge, Bayside, Greenwich Village/SOHO, Murray Hill, Rego Park/Forest Hills, and Tottenville. ${ }^{70}$

Poverty is associated with a lower life expectancy across NYC community districts. Although the death rate decreased between 2005 and 2014 in rich and poor neighborhoods alike, it fell more in low-poverty areas ( 28.0 percent) than in high-poverty areas ( 15.2 percent), and the all-cause death rate is 1.7 times higher in very high- vs. low-poverty neighborhoods. ${ }^{71}$

## Improving Population Health and Eliminating Health Inequities: What Will It Take?

The previous section explored the leading causes of death for different groups of New Yorkers and identified a host of health inequities. This section will explore some factors that contribute to health inequities in New York City, including poverty, racism, income inequality, residential segregation, and health-risk behaviors, and identify ways to improve the health of all New Yorkers as well as narrow the gaps between groups.

To increase the average life expectancy of New Yorkers, it is critical to tackle heart disease and cancer, which occupy the first and second spots among leading causes of death for the city overall as well as for each major racial and ethnic group, for each borough, and for the longest- and shortest-living neighborhoods alike. Influenza and pneumonia, accidents, diabetes, chronic respiratory diseases (lung diseases like emphysema), and stroke are likewise among the top killers across race and place in New York City, though the order varies. What differs is when and how different groups begin to accumulate risk factors for these maladies; the age at which they fall ill; the kinds of medical treatments, economic resources, and social supports to which they have access; and the age at which they die. These differences are health inequities rooted in the social determinants of health.

Certain causes of death rise to the top fifteen only for some groups. For New York City residents who are black-and for no other group-health inequities are heartbreakingly apparent in the first month of life; infant death in the first twentyeight days is among the leading causes of death. Homicide also makes the list. For black and Latino residents, but not for Asian or white New Yorkers, HIV is among the leading causes of death. Latinos disproportionately lose their lives to hepatitis (see box 11).

What these causes of death have in common is that they are, in large part, preventable. This is not to say that it's possible to sidestep dying altogether, or that prevention is the task of the individual alone or possible in all cases. For instance, smoking is a leading cause of lung cancer, but as many as one in five lung cancer patients have never used tobacco; exposure to carcinogens, such as radon gas, secondhand smoke, air pollution, and workplace toxins like asbestos, also causes lung cancer. ${ }^{72}$ Some people have genetic predispositions to certain diseases (though the degree to which those genetic predispositions manifest themselves is in some cases dependent upon environmental factors ${ }^{733}$ ) or were born with congenital disorders that shorten life. But while genetic factors, the choices individual people make, and access to medical care loom large in the mind of the public as the main drivers of health outcomes, in reality the greatest life expectancy gains of the last

As many as one in five lung cancer patients have never used tobacco.

## box 11 Sexually Transmitted Infections

Sexually transmitted infections are more prevalent among some groups of New Yorkers, including adolescents (especially chlamydia and gonorrhea), people who inject drugs, men who identify as gay or bisexual, men who have sex with men regardless of how they identify (especially young black and Latino men who have sex with men), and people who are transgender. Preventing sexually transmitted infections like HIV and hepatitis requires culturally competent, nonjudgmental, age-appropriate information campaigns and health-care services. ${ }^{74}$ Vaccines for HPV (which causes cervical cancer) as well as hepatitis A and B (which cause liver cancer) are critical, as is consistent condom use. Men who have sex with men represent about seven in ten new HIV diagnoses; pre-exposure prophylaxis in the form of a daily pill (PrEP)
greatly reduces the risk of HIV infection, and emergency postexposure prophylaxis also reduces the risk even after exposure, provided the medicine is taken within in three days. ${ }^{75}$ Testing is likewise vital; an estimated 15 percent of HIV-positive Americans do not know their status. ${ }^{76}$

The good news is that the number of new HIV diagnoses continues to decline, dropping 8.6 percent between 2015 and 2016, and the number of new diagnoses for men who have sex with men is at its lowest point since 2001. ${ }^{77}$ The bad news is that racial and spatial disparities persist. In addition to the higher rates of HIV among black and Latino New Yorkers, the neighborhoods of Central Harlem, Morningside Heights, East Harlem, and Chelsea-Clinton had the highest HIV diagnosis rates in 2016. ${ }^{78}$

> The greatest life expectancy gains of the last century have come from investment in public goods.
century have come from investment in public goods like safe water supply and sanitary sewage disposal, the introduction of vaccines and antibiotics, regulations requiring that people wear seat belts and cars be outfitted with air bags, radically transformed social norms around drunk driving, taxes on cigarettes, and more. ${ }^{79}$ While death itself is not preventable, death by certain causes-homicide or drug overdose, for instance-certainly is, as is a large share of premature death by other causes. The CDC calculated that if the US mortality rate from leading causes of death was the same as the mortality rates in the country's three best-performing states, some 250,000 deaths by heart disease, cancer, chronic lower respiratory disease, stroke, and unintentional injuries like car crashes would be averted. ${ }^{80}$

What, then, contributes to these premature and preventable deaths? Several key factors are listed below. They are presented individually, but in reality they are all interconnected contributors; racism, for instance, is a driving force behind residential segregation; concentrated poverty gives rise to health-harming neighborhood conditions; people of color are disproportionately poor; the stress of poverty, racism, and neighborhood crime fuel physical reactions to stress as well as health-risk behaviors.

## POVERTY

Poverty is commonly thought of as a lack of money, and that's certainly a key ingredient, but it can be more broadly understood as simultaneously experiencing deprivations across many domains, ${ }^{81}$ such as education, social connectedness and respect, psychological well-being, physical safety, assets and economic security, empowerment, the quality of employment, and the quality of public services. A group of graduate students living in an overcrowded student apartment and just managing to pay for groceries might be cash-strapped, but they would not be considered poor in this sense.

Poverty harms health in several ways. People living in poverty are less able to insulate themselves from health risks, such as dilapidated housing, exposure to pollution, work-place hazards, and neighborhood violence, and as a result, experience higher levels of chronic diseases like asthma (see Box 12) and face greater challenges in managing them (see box 13). The stress of having no economic cushion whatsoever-living so close to the edge that missing even one or two days of work because of a sprained ankle means that Con Ed will turn off the lights—puts the body in a constant state of high-alert, "weathering" the cardiovascular system prematurely. ${ }^{82}$ Low-income New Yorkers tend to live in neighborhoods that provide fewer opportunities for safe outdoor recreation like walking and running. ${ }^{83}$ They also have less access to high-quality medical care and generally don't have the money to pay for health-enhancing supports like gym memberships, therapy, or nutritionists. And research shows that while local officials may well champion the rights of their constituents, in general government is far more responsive to the wishes of the affluent than to the needs of people living in poverty. ${ }^{84}$

Exposure to poverty in childhood casts a dark shadow across the life course. It is associated with a heightened risk of cardiovascular disease and mortality as well as all-cause mortality. ${ }^{85}$ Children who lived in poverty before age 9 face a heightened risk of developing mental health disorders; the longer a person lived in poverty as a child, the worse his or her mental health as an adult. ${ }^{86}$

## Box 12 Socioeconomic Status and Chronic Disease Management

Heart disease and cancer, the leading causes of death, are not the only chronic diseases that affect the lives and, in some cases, contribute to the premature deaths of those afflicted by them. Chronic conditions

## like asthma, Crohn's disease, type 1

diabetes (T1D), rheumatoid arthritis, and psoriasis are spread fairly evenly across the population, but the degree to which they impose limitations on people's daily lives is profoundly influenced by socioeconomic status (SES). Key to keeping symptoms at bay and avoiding potentially life-threatening complications is proactive disease management—a feat that takes knowledge, money, time, and a trusting relationship with medical providers. Educational background, insurance coverage, access to quality medical care, trust in the medical system, the ability to miss work for medical treatments, access to information, and living in a conducive environment-all elements critical to successful disease management-are largely the product of a person's SES in combination
with his or her race and ethnicity. Managing many chronic conditions, among them Crohn's disease and T1D, requires, along with medications, significant modifications to daily life-adherence to a specific diet, regular exercise, and, for Crohn's patients, keeping stress levels low-that are often more difficult for those who lack resources and live in lowincome neighborhoods to make.

Crohn's disease patients with lower SES tend to have higher hospitalization rates, service usage, and related mortality than those with higher SES. ${ }^{87}$ A decades-long study following T1D patients found that those with lower incomes and levels of education were at a higher risk for diabetes complications, possibly due to less support for and understanding of self-management. ${ }^{88}$ Another study found that patients of low SES who had psoriasis responded less well to psoriasis treatment than those of relatively higher SES, possibly due to challenges in carrying out medical instructions. ${ }^{89}$

## RACISM

Some of the disproportionate stress that black New Yorkers face stems from the fact that they are more likely to be poor and to live in segregated neighborhoods than other groups (itself a consequence of racism). But while education and affluence attenuate the impact of racism, they do not eliminate it. Affluent black families (those making $\$ 100,000$ or more) are more likely to live in poor neighborhoods than white families with similar or lower incomes (as low as $\$ 25,000$ ), meaning that they are more likely to be exposed to the adverse neighborhood environments associated with poverty regardless of their earnings. ${ }^{90}$ More difficult to quantify but also critical is the toll that living day to day as a black person in America can take. Middle-class white people don't sit their sons down as they approach adolescence to explain to them how to respond if a police officer approaches them; they don't literally fear for their lives if they are stopped for failing to signal a turn; they aren't mistaken for the housekeeper when they open the front door of their own home, the valet while standing outside a restaurant, a thief when sitting in their own car. The stress that anti-black racism creates can be difficult for people who are not black to understand, but its toll on black people's health is very real.

The ways in which racism, particularly anti-black racism, contributes to poor health outcomes, including poor outcomes for infants and mothers and higher rates of all-cause mortality, was explored further on PAGE 111.

## HEALTH-RISK BEHAVIORS

Several years ago, Measure of America coined the term "the fatal four" to describe the factors underlying the most common causes of death and thus the majority of premature deaths: smoking, excessive drinking, poor diet, and physical inactivity. ${ }^{11}$ The rise of the opioid epidemic and the presence of substance overdose among the leading causes of death for New York City and every racial and ethnic group within it except for Asians has prompted the addition of a fifth cause: substance abuse.

People make decisions about their health and health behaviors within the context of their daily lives, influenced by their family backgrounds, financial resources and access to information, and the environments within which they live and work. It's very easy to say, "Eat less, exercise more" in response to the obesity epidemic, or "Just say no" to smoking, drug use, or excess drinking. If it were as easy to do as it is to say, no one would smoke and everyone would maintain a healthy body weight. In reality, social and economic conditions-from chronic stress to lack of treatment options to fear of crime that limits opportunities for exercise to the flooding of poor neighborhoods with fast-food outlets and advertising-fuel the "fatal five" behavioral health risks (see figure 13). Tackling these endemic behaviors requires that we move beyond questions of individual willpower to approaches that focus not just on the person but also the environment in which that person lives and makes decisions about his or her health. Smoking rates have fallen sharply in the last decades not because Americans experienced a sudden rush of will-power but because of laws,
taxes, public health campaigns, and changing social norms that made smoking more expensive, difficult, and socially taboo.

Scolding and shaming are worse than useless in the fight against health-risk behaviors. People who want to get clean, lose weight, or take up exercise often require help in addressing factors like depression, stress, pain, and addiction that fuel their health-risk behaviors. Public education and prevention programs that keep people from taking up harmful habits in the first place and neighborhood, school, and work environments in which healthy choices are not just possible but probable are important approaches. Ultimately, structuring built environments so that the healthiest choice is also the easiest choice-the essence of "choice architecture" -is a job for society as a whole. School administrators should ensure that milk

Box 13 How Social Conditions Fuel Health-Risk Behaviors

and water, not soda and sports drinks, are available at lunch time; businesses can encourage exercise by making staircases well-lit, attractive, and more convenient than elevators; municipal road departments can design sidewalks and bike paths that are safe, well-maintained, and accessible.

People who experience residential segregation face greater mortality risks than those who do not.

## INEQUALITY

Greater income inequality is associated with lower average life expectancy. ${ }^{92}$ Poverty is about experiencing various kinds of deprivation at once; income inequality is about relative income and wealth and the distance between the richest people in society and the poorest. Huge income gaps, the likes of which we see in New York City, harm the health of those lower down the ladder in three ways. First, the awareness of one's position on the lower rungs of the social hierarchy can engender stress, diminish self-esteem, and fray the bonds of social cohesion, all of which can harm health. 93,94 Second, as the rich increasingly segregate themselves in affluent enclaves, they are less likely to need and therefore to demand public goods designed to serve the whole population, such as schools, public transportation systems, policing, and parks. ${ }^{95}$ The underinvestment in public goods that results when the affluent exit the commons-taking their money and their political clout with them-harms the health of lower-income communities that depend on, for instance, public hospitals, public transit, public colleges, and more. The very rich are also better able to keep health hazards like waste transfer stations far from their homes, whereas people living in poverty often lack the political power to do so. ${ }^{96}$ Finally, income inequality in New York City has fueled an affordable housing crisis, making neighborhoods with healthsupporting amenities out of reach to more and more New Yorkers and fraying the fabric of neighborhood cohesion.

## RESIDENTIAL SEGREGATION

New York is highly segregated by race and ethnicity as well as by income. In a sense, poverty, racism, and inequality are the key ingredients of the residential segregation so pervasive in the city. Rather than repeating the points from the previous sections, suffice it to say that for low-income people of color, the lived experience of residential segregation is shaped by each of these inequities as well as the interaction among them, which arguably intensifies their collective effects. Living in poverty in a middleclass area may be difficult in some respects, but it potentially offers an environment with more positive social determinants of health, such as higher-quality schools, more convenient health facilities, better transit options, more varied social networks, and safer neighborhoods; living in poverty amidst others in similar straits can create a sense of solidarity, but it can also expose one to more health risks lenvironmental health hazards and crime, for instance) and afford fewer protective factors (good public services). Even when characteristics like sex, race, and income are held constant, research shows that people who experience residential segregation face greater mortality risks than those who do not. ${ }^{97}$

## B0X 14 Asthma and Housing

Asthma is linked to genetic susceptibility but is often triggered by exposure to allergens like mice, cockroaches, and mold; indoor air pollution, in particular cigarette smoke; and outdoor pollution, such as diesel exhaust and industrial toxins. Poor-quality housing is strongly associated with asthma morbidity. ${ }^{98}$ Asthma is treatable when triggers are well understood and outpatient care is available and accessible, and many asthma attacks can be prevented through patient education and access to appropriate medication.

In New York City, asthma affects 13.3 percent of children under age 12an estimated 174,000 children. Children living in high-poverty households as well as black and Latino children are disproportionately likely to be diagnosed with asthma. ${ }^{99}$ Prevalence also varies by place; in 2010, nearly a third of asthmarelated emergency room visits were children from the Bronx. ${ }^{100}$ Asthma rates tend to be underestimated, largely due to lack of primary care and diagnosis for many people.

The NYC Department of Health tracks and analyzes avoidable asthma hospitalization rates for adults-i.e., those that could have been prevented by quality outpatient care. A map of preventable asthma hospitalizations makes evident a connection between them and the amount of public housing in a neighborhood. Residents in neighborhoods with high rates of avoidable asthma hospitalizations and high concentrations of public housingmainly in the South Bronx and central Brooklyn-are also more likely to report fair-to-poor housing conditions. ${ }^{101}$ This connection suggests several possibilities, namely that New Yorkers living in public housing may have higher asthma rates
than other New Yorkers, that public housing residents may have less access to education and medication to manage asthma and thus avoid hospitalization, and that conditions in public housing trigger asthma attacks. Most likely, it is some combination of these factors. The poor living conditions in New York City Housing Authority (NYCHA) housing projects, including heating and mold issues, are common knowledge among New Yorkers. NYCHA is aware of this and has committed to repairing and improving conditions. The costs required to repair leaking roofs, mitigate mold, and address other factors related to asthma attacks across the more than 300 public housing developments in the city, however, far outstrip available resources.

## Child Asthma in NYC

|  | ASTHMA PREVALENCE (\% of children 12 and younger | ASTHMA PREVALENCE (\# of children 12 and younger] |
| :---: | :---: | :---: |
| ALL NYC CHILDREN | 13.3 | 174,000 |
| Race And Ethnicity |  |  |
| Asian and Pacific Islander | 10.0 | 15,000 |
| Black | 21.7 | 66,000 |
| Latino | 15.1 | 70,000 |
| White | 4.2 | 14,000 |
| Household Income (\% of federal poverty level) |  |  |
| High poverty $(\leqslant 200 \%)$ | 15.9 | 111,000 |
| Medium poverty (200-399\%) | 13.7 | 24,000 |
| Low poverty $(400 \% \rightarrow$ ) | 7.6 | 21,000 |

Source: NYC Child Community Health Survey, 2015.


## Access to Knowledge



Introduction

## Variation by Gender

Variation by Nativity
z.
o Variation by Race and Ethnicity
u
un
Variation by Geography
上 Making Educational Equity a Reality: What Will It Take?

## Introduction

New York City performs better than the country as a whole on the Education Index-5.45 as compared with 5.17 -but worse than the larger metropolitan area, which scores 6.0. But the city's overall performance is split: a higher percentage of New York City adults hold bachelor's and graduate degrees than adults nationally, but the city is also home to a larger share of adults who did not graduate high school, nearly one in five. That New York at once does better and worse than the country as a whole in educational attainment reflects and contributes to the significant inequality that characterizes the Big Apple.

|  |  | HIGHEST DEGREE ATTAINED |  |  |  | SCHOOL ENROLLMENT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | EDUCATION INDEX | Less than high school | High school diploma | Bachelor's degree dead | duate gree |  |
| UNITED STATES | 5.17 | 12.9\% | 56.5\% | 19.0\% | 11.6\% | 77.3\% |
| NY Metro | 6.00 | 13.8 | 47.6 | 22.6 | 16.0 | 80.6 |
| New York City | 5.45 | 19.1 | 44.1 | 21.7 | 15.1 | 78.6 |

Source: US Census Bureau ACS, 2015.

Education is a means to a host of desirable ends, better jobs and bigger paychecks to name two of the most commonly cited. People with higher levels of education earn more and are less likely to be unemployed than those whose formal educations ended with high school; they are also concentrated in higher-paying occupations that tend to be more interesting and engaging and to offer better working conditions, greater societal respect, more autonomy, and more extensive benefits. In 2016, the unemployment rate for bachelor's degree holders was 2.7 percent, about half the rate for high school graduates ( 5.2 percent) and about a third the rate for those without a high school diploma ( 7.4 percent). Earnings move in lockstep with educational attainment, with bachelor's degree holders earning about double, on average, what high school graduates earn, and those with professional degrees earning one and a half times what college graduates take home. ${ }^{1}$

But the benefits of education are not just economic. For society as a whole, higher levels of educational attainment are associated with less crime, lower incarceration rates, and greater civic engagement, political participation, tolerance of difference, and support for the rights of others. For individuals, more education is associated with better health and longer lives, including a reduced risk of dementia and chronic disease, better mental health, and fewer health-risk behaviors; more stable interpersonal relationships, higher marriage rates, and

A higher percentage of New York City adults hold bachelor's and graduate degrees than adults nationally.

> Education is essential to agency, selfsufficiency, and the real freedom a person has to decide what to do and who to be.
lower divorce rates; more effective coping skills; increased resilience; and greater ability to adjust to change. ${ }^{2}$ Education is essential to agency, self-sufficiency, and the real freedom a person has to decide what to do and who to be. It's not just an opportunity to learn about academic subjects but about oneself; as John Dewey writes in Experience and Education, "Collateral learning in the way of formation of enduring attitudes, of likes and dislikes, may be and often is much more important than the spelling lesson or lesson in geography or history that is learned." Education also offers the promise of social mobility.

Access to knowledge in the American Human Development Index is measured using two indicators that are combined into an Education Index. The first is school enrollment for the population between the ages of 3 and 24 ; this indicator captures everyone who is currently in school, from preschool-age toddlers to 24 -yearolds in college or graduate school. The second indicator is educational degree
attainment for the population age 25 and older. This indicator presents a snapshot of education in a place or among a group at one point in time. (Keep in mind that the share of the population with high school diplomas refers only to adults over 25; it is not a measure of the current high school graduation rate. The graduation rate of today's NYC high school students, 74 percent, is an important indicator, and one we explore in this chapter, but it is not part of the index.)

The school enrollment indicator counts for one-third the weight of the education dimension of the Human Development Index, and the degree attainment indicator counts for the remaining two-thirds; these relative proportions reflect the difficulty of as well as the payoff for earning a degree as compared to simply enrolling in school. Data for both indicators come from the annual American Community Survey of the US Census Bureau. While access to education is critical, so is the quality of that education. Unfortunately, no comparable, reliable indicators of quality are available across the country, so none are included in the American Human Development Index. We do, however, incorporate such measures into the analysis when they exist.

Finally, in the human development framework, access to knowledge goes beyond formal education. It includes people's capability to learn about all the things that shape their options and affect their quality of life-big-picture questions like how society works, who has power, whom to trust, and who you are in the world as well as the mundane but critical stuff of everyday life like how to swim, ride a bike, or drive a car; how to shop for groceries and cook a healthy meal; how to find a job, find an apartment, and pay the bills; how to be a good partner and a good parent; or how to behave appropriately in different situations, from a job interview to a funeral. People learn these sorts of things from their parents and extended families, through interactions with peers and mentors, through religious belief and practice, on the job, and through their social networks. Knowledge accessed outside the formal education system is as or sometimes more consequential in people's lives than what is learned in the classroom; although this kind of knowledge cannot be measured with the index, it is discussed later in this chapter.

## Variation by Gender

In New York City, as in other places Measure of America has studied, women have higher Education Index scores than men, on average. Women ages 25 and up are slightly more likely than their male counterparts to have graduated high school and earned bachelor's and graduate degrees. Girls and young women are also slightly more likely to be enrolled in school than boys and young men.


Source: US Census Bureau ACS, 2015.

## Variation by Nativity

US-born New Yorkers have much higher levels of educational attainment than foreign-born New Yorkers, with an Education Index score nearly three points higher ( 6.44 compared to 3.54 ). The share of immigrant New York City adults who lack a high school degree is nearly two and a half times the share of US-born adults who do (27.4 percent, compared to 11.5 percent). Compared to foreign-born residents, US-born New Yorkers are about 50 percent more likely to hold bachelor's and graduate degrees, and native-born children and young adults are nearly 13 percentage points more likely to be enrolled in school. Significant variation exists among racial and ethnic groups, however, as well as by national origin.

TABLE 3 Education Index by NATIVITY in NYC


[^8]
## Variation by Race and Ethnicity

New York City whites have the highest Education Index score, 7.67. Nearly six in ten hold bachelor's degrees, and one in four holds a graduate degree.

New York City whites have the highest Education Index score, 7.67. Nearly six in ten hold bachelor's degrees, and one in four holds a graduate degree. Asian residents score lower in NYC than they do in the country as a whole, chiefly because of the large share of adults without high school degrees, one in four. Black New Yorkers have an Education Index score of 4.54; they lag behind in bachelor's degree attainment in particular. Latino residents have the lowest Education Index score, largely because of the high proportion of adults without high school diplomas, one in three (see table 4).

None of these groups is monolithic; significant variation by gender, by nativity, and by national origin means it's difficult to make blanket statements.

White New Yorkers have the highest rate of bachelor's degree attainment, 57.4 percent, as well as the highest rate of graduate degree attainment, 26.1 percent. Women and men have very similar outcomes; women are slightly more likely to lack high school degrees and to hold graduate degrees; men are slightly more

likely to hold bachelor's degrees and boys and young men are slightly more likely to be enrolled in school. US-born white New Yorkers have far better educational outcomes than foreign-born white New Yorkers on all the education indicators except for graduate degree attainment, where their rates are similar; a little over one-fourth of native-born whites and a little under one-fourth of foreign-born whites hold graduate degrees.

Asian residents of New York City rank second in educational outcomes. US-born Asian residents of NYC have better educational outcomes than foreignborn Asian residents. Five times as many foreign-born as native-born adults lack high school diplomas, and about half as many hold bachelor's degrees. In the aggregate, Asian women and Asian men in New York City have quite similar educational outcomes. Sharp differences exist between and within different Asian subgroups, however. TABLE 5 presents indicators for the nine Asian subgroups in New York City whose populations are large enough to calculate reliable estimates across the education indicators; they appear in order of population size.

Chinese and Vietnamese residents are more likely than residents of other subgroups to lack high school diplomas; roughly a third lack this barebones credential. At the same time, Chinese city residents are nearly as likely as the average New Yorker to hold a bachelor's degree ( 33.5 percent), and Vietnamese city residents are more likely ( 41.6 percent). Japanese, Filipino, and Korean adults living in New York City have high rates of bachelor's degree attainment, and relatively few lack high school diplomas. As discussed in the section on well-being in the larger metropolitan region on PAGE 29, significant differences exist between Asian subgroups living in the city proper and those living in the surrounding areas. For Asians taken as a whole as well as for most Asian subgroups, those living outside the city tend to have better educational outcomes than those living in the five boroughs.

In some groups, such as residents who trace their heritage to China, the educational attainments of women and men are quite similar. In others, outcomes differ sharply by gender; for instance, though both Japanese women and men are much more likely than the average NYC resident to hold a bachelor's degree, more than 22 percentage points separate them ( 85.0 percent of men hold bachelor's degrees, compared to 62.7 percent of women).

Many people are puzzled by what seems to be a disconnect between the comparatively low earnings and educational attainment of, for instance, Chinese immigrants in New York City and the disproportionate representation of children of Chinese heritage in the city's most elite high schools. It is important to note, first of all, the split performance of Chinese adults-while a third did not graduate high school, over a third hold bachelor's degrees. Immigration reform in 1965 brought a wave of new Asian immigrants to New York City; due to new immigration requirements, a large share of them were highly skilled and credentialed compared to both the population in New York City and the populations in their home countries.

## Adults Without a High School Diploma



> For Asians taken as a whole as well as for most Asian subgroups, those living outside the city tend to have better educational outcomes than those living in the five boroughs.

Many were not able to find work in their fields of expertise due to language barriers, difficulties in transferring credentials between countries, discrimination, and other factors, starting small businesses or working in the service sector instead. Despite their low incomes, these well-educated Asian immigrants created a thriving middle class that "generates ethnic capital, creates ethnic institutions," and successfully imports "cultural institutions and practices from their countries of origin and recreates them in the United States." ${ }^{3}$

This social capital (highly educated parents) combined with institutions and practices llike after-school and weekend learning and test-prep centers, a norm in China, Korea, and Japan) position second-generation children to succeed in school. Scholars argue that more socioeconomically disadvantaged Asian subgroups, such as less-educated Chinese and Vietnamese immigrants, benefit from the institutions, norms, achievement "mindset," and knowledge networks

TABLE 5 Education Indicators by ASIAN Subgroup in NYC

| GROUP | LESS THAN HIGH SCHOOL (\% of adults $25+$ | AT LEAST BACHELOR'S DEGREE (\% of adults 25*) | GRADUATE DEGREE <br> (\% of adults $25+$ ) | SCHOOL ENROLLMENT <br> (\% ages 3 to 24) |
| :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY | 19.1 | 36.8 | 15.1 | 78.6 |
| Chinese | 35.0 | 33.5 | 11.8 | 83.3 |
| Male | 34.4 | 32.8 | 11.9 | 83.6 |
| Female | 35.6 | 34.1 | 11.6 | 83.0 |
| Indian | 20.5 | 45.2 | 22.0 | 78.7 |
| Male | 18.6 | 45.9 | 23.8 | 77.8 |
| Female | 22.5 | 44.4 | 20.0 | 79.7 |
| Korean | 9.9 | 55.8 | 17.0 | 85.9 |
| Male | 6.1 | 54.3 | 15.6 | 78.9 |
| Female | 12.6 | 56.9 | 18.0 | 92.2 |
| Filipino | 4.9 | 66.5 | 15.4 | 85.0 |
| Male | 4.9 | 64.3 |  | 92.5 |
| Female | 4.9 | 67.8 | 17.2 | 78.1 |
| Bangladeshi | 21.4 | 32.8 | 12.0 | 78.9 |
| Male | 19.3 | 39.1 |  | 79.2 |
| Female | 23.8 | 25.7 |  | 78.5 |
| Pakistani | 24.6 | 32.7 | 12.7 | 84.4 |
| Male | 19.7 | 34.6 |  | 83.2 |
| Female | 32.1 | 29.8 |  | 86.0 |
| Japanese | 2.1 | 70.9 | 24.9 | 85.9 |
| Male | 2.9 | 85.0 |  | 82.8 |
| Female | 1.6 | 62.7 |  | 94.4 |
| Vietnamese | 32.9 | 41.6 |  | 65.7 |
| Male | 32.2 |  |  |  |
| Female | 33.7 | 46.6 |  |  |
| Taiwanese | 13.4 | 73.7 | 38.8 | 78.9 |
| Male | 12.0 | 77.4 |  | 84.7 |
| Female | 14.2 | 71.5 |  |  |

Source: US Census Bureau ACS, 2015. Note: Unreliable estimates have been omitted.
established by more affluent and settled Asian groups. Not only do children of well-educated immigrants have a more advantageous starting point as they climb the education ladder as well as greater access to educational supports on the way up, they also benefit from higher expectations from teachers and positive social stereotypes with regard to academic achievement. ${ }^{4}$

Black New Yorkers rank third in terms of educational outcomes, with smaller shares of adults who are college graduates and lower enrollment rates than either Asians or whites. In terms of adults with at least a high school diploma, however, black New Yorkers are above the citywide rate, 83.2 percent compared to 80.9 percent.

Black residents of New York City who were born in the United States perform better than black residents born abroad on all educational indicators, but the differences between them are fairly small, except for the difference in school enrollment, where US-born black residents are ahead by some 12 percentage points. Black women have better educational outcomes than black men in high school, college, and graduate degree attainment and are also ahead in school enrollment. The education gap between black women and men is smaller than the life expectancy gap between them.

The gap in degree attainment between black and white adults in New York City is a lingering modern-day manifestation of past discrimination as well as the result of present-day bias. Social science research has time and again demonstrated the strong link between the socioeconomic status and educational attainment of parents and the academic achievements of their children; ${ }^{5.6,7}$ the parents of today's black adults were denied access to a range of educational, employment, and residential options, limiting their educations and earnings, which in turn served to curtail their children's eventual educational outcomes. In addition, research has found that the black-white gap in educational achievement is at least in part a result of the considerable black-white gap in wealth; for every dollar of wealth white households hold, black households hold just seven cents. ${ }^{8}$ Parental wealth has been shown to have a strong effect on the educational attainment of children, ${ }^{9}$ predicting both college attendance and college completion. ${ }^{10}$ In addition to covering the costs of college itself, wealth allows parents to buy homes in neighborhoods with good schools where college-going is the norm; mitigates stress that interferes with learning by helping families weather temporary job loss, illness, or unexpected expenditures; creates a sense of security and stability; increases self-esteem and self-confidence, which can improve school engagement and performance; ${ }^{11}$ and allows parents and children alike to plan for a future that involves higher education.

Latino residents of the five boroughs have the lowest overall levels of educational attainment and enrollment among the city's four largest racial and ethnic groups. More than a third of adults ages 25 and older lack a high school diploma, and the share of adults with bachelor's degrees, 17.2 percent, is less than half the citywide rate. The high rate of adults who did not complete high school is driven in large part by the high rate among Latino immigrants; 41.7 percent

The black-white gap in educational achievement is<br>at least in part<br>a result of the considerable black-white gap in wealth.

## ii

 Latino and black children are often harmed by negative stereotypes about their academic achievement.of adults lack this important credential, compared to 24.1 percent of US-born Latino residents. This difference reflects the limited opportunities for secondary education available to Latino immigrants in their countries of origin. Latina women have slightly better educational outcomes than their male counterparts.

Noteworthy differences exist among Latino subgroups. New York City residents who trace their heritage to Mexico experience the greatest challenges in education. As is the case with Asian residents, disparities in educational outcomes stem from differences in the capabilities various immigrant groups bring with them. Because of immigration policy, Asian immigrants were and are more likely to have higher levels of education than either people from their home countries who did not emigrate or people in the United States. Immigrants from Mexico, on the other hand, are less likely to hold college degrees than the average adult living in Mexico or in the United States. ${ }^{12}$ Thus their children start further down the education ladder and face a steeper climb. Mexico does not have the same sort of infrastructure of after-school-and-weekend private schools that prepare students for specific exams and admissions tests as exist in many Asian countries, and thus did not import this model to the United States. And whereas Asian children benefit from high academic expectations as a result of positive stereotyping, Latino children (as well as black children) are often harmed by negative stereotypes about their academic achievement.

TABLE 6 Education Indicators by LATINO Subgroup in NYC

| LATINo/A SUBGROUP | $\begin{aligned} & \text { LESS THAN } \\ & \text { HIGH SCHOOL } \end{aligned}$ $\text { [\% of adults } 25+\text { ] }$ | AT LEAST BACHELOR'S DEGREE (\% of adults $25+$ ) | GRADUATE DEGREE <br> [\% of adults $25+$ | SCHOOL ENROLLMENT <br> [\% ages 3 to 24] |
| :---: | :---: | :---: | :---: | :---: |
| Puerto Rican, Dominican, Cuban | 33.8 | 15.6 | 4.8 | 74.8 |
| Male | 34.2 | 14.4 | 4.2 | 73.5 |
| Female | 33.5 | 16.4 | 5.2 | 76.2 |
| South American | 26.9 | 22.3 | 8.0 | 76.7 |
| Male | 29.1 | 20.6 | 7.9 | 75.5 |
| Female | 24.7 | 24.0 | 8.2 | 77.8 |
| Mexican | 44.8 | 12.9 | 5.6 | 78.4 |
| Male | 45.2 | 10.7 |  | 80.0 |
| Female | 44.3 | 15.9 |  | 76.8 |
| Central American | 37.0 | 17.9 | 5.6 | 73.0 |
| Male | 38.5 | 15.3 |  | 69.7 |
| Female | 35.7 | 20.2 |  | 76.8 |
| Spaniard | 11.9 | 56.8 | 29.5 | 76.3 |
| Male | 11.0 | 57.4 |  | 85.4 |
| Female | 12.7 | 56.3 |  | 71.6 |

[^9]
## Variation by Geography

Among the five boroughs, Education Index scores range from 3.74 (the Bronx) to 7.21 (Manhattan). Staten Island comes in second with a score of 5.97 , Brooklyn is third at 5.31, and Queens is fourth at 5.10. Among the most striking indicators is the high share of Manhattan adults with bachelor's degrees, more than six in ten. The next-closest is Brooklyn, where slightly over one in three adults holds a four-year college degree. Another indicator that jumps out is that three in every ten adults over age $\mathbf{2 5}$ in the Bronx lack a high school diploma, a basic requirement for nearly any job that pays a decent wage.

Educational outcomes vary tremendously across New York City neighborhoods, ranging from the top-scoring Carnegie Hill on the Upper East Side, with a score of 9.50 on the Education Index, to the bottom-scoring North Corona in Queens, which scores just 1.38 (see MAP 9 and TABLE 8). Among the top ten are seven neighborhoods in Manhattan, two in Brooklyn (Brooklyn Heights-Cobble Hill and Park Slope-Gowanus), and one in the Bronx (Riverdale). Among the bottom ten are seven neighborhoods in the Bronx, two in Brooklyn (Sunset Park East and Bushwick North), and one in Queens (North Corona). The lowest scores on the Education Index are found in the Bronx and Central Brooklyn in areas that are relatively isolated from more prosperous areas of the city.

Across New York City neighborhood tabulation areas, low scores on the Education Index are strongly associated with a host of negative human development outcomes, including poverty (Pearson's correlation: 0.74), child poverty ( 0.79 ), unemployment (0.70), incarceration (0.65), and births to teenagers (0.79). Low education scores are also strongly associated with the share of the population that is Latino (0.71). Higher

TABLE 7 Education Index by BOROUGH in NYC


[^10]
## Measuring the Relationship Between Two Indicators

The Pearson's correlation is an indicator of the strength of the relationship between two variables that ranges from - 1 to 1 . A negative correlation means that as the first indicator increases, the second indicator decreases; snowfall and sunscreen sales are negatively correlated. A positive correlation means that the two variables move in the same direction; snowfall and snow shovel sales are positively correlated. The further the score from zero, the stronger the relationship. Scores above 0.6 or below - 0.6 represent a strong relationship.
education scores are strongly associated with median personal earnings (0.85) as well as with the share of of the population that is white (0.75). Because of New York City's stark segregation by race and ethnicity, neighborhood variation is strongly associated with the racial and ethnic make-up of the city's NTAs.
table 8 Education Index in New York City by Neighborhood Tabulation Area: Top and Bottom Ten

|  | HIGHEST DEGREE ATTAINED |  |  |  |  |  | $\begin{gathered} \text { SCHOOL } \\ \text { ENROLLMENT } \end{gathered}$ | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| TOP 10 | EDUCATION INDEX |  | ss than gh school | High school diploma | Bachelor degree $\qquad$ | Graduate degree \| |  |  |
| MANHATTAN: Upper East Side-Carnegie Hill | 9.50 | 1.9\% | 13.1\% | 37.1\% |  | 47.8\% | 89.7\% | 9.34 |
| BROOKLYN: Brooklyn Heights -Cobble Hill | 9.32 | $\vdots 2.5$ | 20.2 | 37.4 |  | 39.8 | 87.9 | 8.61 |
| MANHATTAN: Lincoln Square | 9.18 | $\vdots 2.7$ | 15.4 | 33.5 |  | 48.4 | 86.4 | 9.16 |
| MANHATTAN: <br> Upper West Side | 8.93 | 7.6 | 19.5 | 32.0 |  | 41.0 | 83.8 | 8.95 |
| MANHATTAN: <br> Morningside Heights | 8.91 | 11.2 | 23.7 |  | 6.3 | 38.8 | 86.9 | 7.19 |
| MANHATTAN: West Village | 8.85 | 1.41 |  | 44.0 |  | 40.6 | 83.0 | 9.05 |
| BRONX: North Riverdale -Fieldston-Riverdale | 8.81 | 7.3 | 35.1 |  | 25.6 | 32.0 | 90.7 | 7.80 |
| MANHATTAN: SoHo-TriBeCa -Civic Center-Little Italy | 8.50 | 9.1 | 16.6 |  | 1.9 | 32.4 | 80.3 | 8.93 |
| MANHATTAN: Lenox Hill -Roosevelt Island | 8.37 | 3.1 | 19.7 | 37.9 |  | 39.2 | 77.9 | 8.96 |
| BROOKLYN: <br> Park Slope-Gowanus | 8.30 | 7.1 | 18.6 | 36.3 |  | 38.0 | 77.1 | 8.34 |


| BOTTOM 10 | HIGHEST DEGREE ATTAINED |  |  |  |  | SCHOOL ENROLLMENT | $\stackrel{H D}{\text { NDEX }}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | EDUCATION INDEX | Less than high school | High school diploma | Bachelor's degree $\qquad$ | Graduate degree $\qquad$ |  |  |
| BRONX: <br> Claremont-Bathgate | 2.51 | 38.4\% |  | 50.4\% | $9.0 \% ~ 2.2 \%$ | 74.7\% | 2.71 |
| BRONX: <br> Soundview-Bruckner | 2.43 | 39.2 |  | 48.9 | 8.93 .0 | 73.5 | 3.65 |
| BRONX: <br> Longwood | 2.42 | 42.8 |  | 46.0 | 7.73 .5 | 75.3 | 3.30 |
| BROOKLYN: <br> Sunset Park East | 2.42 |  |  | 31.1 | 9.7 4.6 | 78.8 | 3.60 |
| BROOKLYN: <br> Bushwick North | 2.42 | 42.4 |  | 36.8 | 15.25 .6 | 69.5 | 3.83 |
| BRONX: West Farms -Bronx River | 2.36 | 38.2 |  | 51.1 | 8.02 .7 | 73.0 | 3.68 |
| BRONX: <br> East Tremont | 2.29 | 41.5 |  | 47.6 | 8.12 .8 | 73.6 | 2.88 |
| BRONX: <br> Hunts Point | 2.26 | 39.3 |  | 50.1 | 8.0 2.6: | 72.6 | 3.18 |
| BRONX: <br> Mott Haven-Port Morris | 2.03 | 44.2 |  | 47.0 | 6.91 .9 : | 73.7 | 2.91 |
| QUEENS: <br> North Corona | 1.38 | 46.6 |  | 46.0 | 5.02 .4 | 68.3 | 3.82 |

## MAP 9 Education Index in NYC



## box 10 A TALE OF TWO LATINO COMMUNITIES: More Diplomas on the Other Side of the Hudson

Among the most persistent human development challenges for Latinos is educational attainment; Latinos have the lowest Education Index not only in New York City, but in the New York metro area and in the country as a whole. But while majorityLatino neighborhoods tend to lag behind in education across the metro area, important differences exist.

West New York, Secaucus, and Guttenberg in Hudson County, NJ, and Jackson Heights and North Corona in Queens are two predominantly Latino clusters of neighborhoods in the metro area with many commonalities. Latinos make up an equally large share of the population in both 168 percent and 67 percent), with the remaining population made up
predominantly of white and Asian residents, and both are majority foreign-born ( 51 percent and 59 percent). The life expectancy in both neighborhood clusters is predictably high, given the Latino and immigrant shares of the population. The rates of poverty, homeownership, and married households are also similar, and the rates of single-mother households in both places are below the national average. But when it comes to educational attainment, the Hudson County neighborhood cluster is an outlier among majority-Latino neighborhoods, outperforming not just Jackson Heights and North Corona but most other majority-Latino neighborhood clusters in the metro area.

## Latino Educational Attainment and Earnings by Gender



The Jackson Heights and North Corona neighborhood cluster in Queens falls below the US average on education and standard of living. The Hudson County neighborhood cluster, on the other hand, is roughly on par with the United States in education and income-with lower rates of adults with high school degrees, but higher rates of college education and higher median personal earnings-and its long life expectancy bumps its HD Index score over the national score. The New Jersey neighborhood cluster seems to have the best of both worlds: above-average educational outcomes and earnings rare for majority-Latino locales, while retaining its Latino health advantage.

In the Hudson County towns, 80.6 percent of adults have at least a high school diploma, while only 67.5 percent of Jackson Heights and North Corona adults do, and over a third of adults have a bachelor's degree or higher, compared to less than one in five Jackson Heights adults and three in ten American adults. Likely related, there is also a nearly $\$ 8,000$ gap in median personal earnings-workers in the Hudson County towns earn $\$ 32,200$, slightly more than the median American worker, while those in Jackson Heights and North Corona earn \$24,300.

Looking at only the Latino populations in these two neighborhood clusters, the share of adults with less than a high school diploma is 10 percentage points higher in the Queens neighborhoods than in the Jersey neighborhoods (37 percent vs. 27 percent). A little over 40 percent of Latino adults in West New York, Secaucus, and Guttenberg have at least some college education, while only a little over a quarter of those in Jackson Heights and North Corona do. In addition to land likely as a result of) better educational outcomes, Latinos in the New Jersey neighborhoods also earn about $\$ 2,500$ more on average.

Breaking the numbers down by gender, we see that Latino men and women both have higher levels of education in the Hudson County neighborhoods compared to their Queens counterparts. But earnings are a different story.

The Hudson County neighborhoods' earnings advantage is driven almost entirely by higher male earnings. While Latino men earn almost $\$ 5,000$ more in West New York, Secaucus, and Guttenberg Towns than in Jackson Heights and North Corona, there is very little difference in female earnings-in both neighborhood clusters, women earn about the same as the average Latina in the United States. Latina women in the Hudson County neighborhoods are not only more likely to have higher levels of education, but are also more likely to work in management and business occupations and
less likely to work in service occupations. This, however, is not reflected in their earnings. In other words, more education translates into higher pay for men but not for women. Education has intrinsic benefits aside from boosting earning power, so the higher educational attainment level of Latina women in the Hudson County neighborhoods is still good news. But removing the barriers women, especially women of color, face in the workforce will make investments in education more fruitful.

A look at the local schools can give us insight into how adult educational attainment will look in the years to come. A recent MOA study of on-time high school graduation rates in NYC by neighborhood of residence found that three quarters (75.2 percent) of students residing in Jackson Heights and North Corona graduated high school in four years-similar to the citywide rate of 73 percent. ${ }^{13} \mathrm{~A}$ glance at the on-time high school graduation rates of the public high schools in West New York, Secaucus, and Guttenberg reveal far better student outcomes; school-wide rates are between 82.7 percent and an impressive 94 percent. Public high school students classified as Hispanic have graduation rates comparable to those of their white classmates, and Latino graduation rates in West New York, Secaucus, and Guttenberg are on par with those of Asian and white students in New York City. This bodes well for the future of West New York-area Latinos, who will likely see a narrowing of the adult educational attainment gap in years to come.

## Latino Grad Rates in NJ Neighborhood Surpass Those of NYC Whites



Source: State of NJ Department of Education, Adjusted Cohort Graduation Rates and NYC Department of Education, Graduation Rate Report, 2016.

# Making Educational Equity a Reality: What Will It Take? 

Globalization and technological change have made achieving economic selfsufficiency and security much more difficult for poorly educated Americans.

Two-thirds of the Education Index measures the educational attainment of adults over age 25-it represents the stock of education in different places and for demographic groups. The differences we see today were years in the making, firmly rooted in the social, political, and economic inequities apparent across the city. And one-third of the Education Index represents the enrollment of children and young adults ages 3 to 24 in school.

What the Education Index fails to capture, however, is the quality of the formal education different groups of New York City children receive as well as the ways in which out-of-school experiences set their educational trajectories. These issues-educational quality and the social determinants of educational success, such as poverty, parental capabilities, residential segregation, and neighborhood conditions-are the focus of this section. In a time when globalization and technological change have made achieving economic self-sufficiency and security much more difficult for poorly educated Americans, what is required for today's young people to thrive in school and beyond?

A person's educational options and academic performance today are formed in large part by the nature and quality of what came before. Social, emotional, and cognitive learning in the earliest years lay the foundation for the development of language and psychosocial skills like cooperation, focus, and self-control, which then lead to early school successes. These successes, especially mastery of literacy and numeracy basics and the establishment of warm relationships with teachers, build self-confidence and set the stage for mastery of more complex topics. The idea that initial strengths make subsequent strengths more likely is known as the "Matthew effect." ${ }^{14}$ The term comes from the Gospel according to Matthew: "For whoever has will be given more, and they will have an abundance. Whoever does not have, even what they have will be taken from them." Sadly, it works both ways. Children who experience trauma, chronic stress, material deprivation, and exposure to environmental toxins often enter school behind their classmates and experience early scholastic challenges that can harm selfesteem, alienate them from school, and influence their educational trajectories in negative ways.

## UNEQUAL STARTS: CRITICAL DIFFERENCES IN EARLY HOME ENVIRONMENTS

Research has long shown that the socioeconomic gaps that separate families also create educational gaps that exist before a child has stepped foot in his or her kindergarten class and tend to widen throughout childhood and young adulthood. ${ }^{15}$ Parents across New York City strive to provide their children with the best possible start in life, and children flourish in a variety of settings; there is no one right way to
raise children. It is undeniable, however, that parents vary greatly in the resources (financial, psychological, cognitive, and more) they are able to bring to bear on childrearing; social and economic disadvantages throw up formidable barriers to the ability of parents to help children realize their dreams. Dismantling these barriers requires investing in families, neighborhoods, and schools so that they can better meet the material, emotional, health, and educational needs of the youngest New Yorkers. Emotional connection and attachment to a stable caregiver, protection from harm, and appropriate cognitive stimulation in the earliest years lay the groundwork for scholastic success and, beyond that, a healthy, productive, and joyful life. The absence of these key ingredients can lead to lifelong learning, health, behavioral, and psychosocial challenges.

Attachment. Primary relationships with parents, families, and other caregivers are the entire world to a baby or young child. It is through these relationships that children learn about love, trust, and security; develop ways to cope with frustration, sadness, and fear; and establish a secure base from which they can explore and discover. Warm, consistent interactions with loving, emotionally available caregivers who are attuned to the individual needs of a child and provide appropriate stimulation are the foundation upon which all future cognitive, linguistic, social, emotional, and moral capabilities are built. ${ }^{16}$ Such loving attachments mitigate the effects of poverty for children in neighborhoods across the city. ${ }^{17}$ Disruptions in child-caregiver attachment-due to factors such as family break-up, high levels of stress in the household, untreated mental illness or addiction, or incarceration of a family member-imperil the development of capabilities necessary to form and maintain relationships, regulate emotions, behave appropriately, and learn in school; such disruptions are more likely to occur in Precarious and Struggling New York. Supporting parents emotionally, practically, and financially helps them be the parents they want to be.

Protection. Protection from adverse childhood events-physical, sexual, and emotional abuse; physical or emotional neglect; witnessing violence against family members; untreated or poorly treated mental illness or addiction disorders in the household-is also key. Such events are not only traumatic when they occur but also heighten children's future risk of social, cognitive, and emotional impairment; health-risk behaviors; social problems; and disease and early death. ${ }^{18}$ The idea that childhood harm does lasting damage is a painful and disquieting idea, a truth that as a society we try to disguise from ourselves with the "What doesn't kill you makes you stronger" fairytale. Sadly, although children can be resilient, especially if given professional support to heal, in general adversity does not make people stronger.
Prolonged exposure to stress creates physiological reactions that damage the highly plastic brains of young children, leading to lasting challenges in cognition, emotional regulation, behavior, and physical and mental health. Also critical is protection from harms in the environment, from lead paint and asthmas triggers in the home to air pollution and contaminated soil in neighborhoods.

Loving attachments mitigate the effects of poverty for children in neighborhoods across the city.


By age 3, two full years before the first day of kindergarten, the children of affluent parents had vocabularies twice the size of children of parents living in poverty.

Appropriate stimulation. Home environments differ greatly in the types of cognitive stimulation on offer, from the number of books available to the types of activities small children are engaged in to the frequency and manner with which parents speak to their very young children. Some differences relate to materials conditions; middle-class parents can afford more books, puzzles, materials like finger paint and play dough, and outings to the zoo or local children's museum than low-income parents can, for instance. Others relate to parenting behaviors. ${ }^{19}$ Better-educated parents are more likely to read to their small children than those with less education as well as to restrict TV watching. ${ }^{20}$ A landmark study two decades ago found that professional parents uttered more than 2,000 words to their children every waking hour, and low-income mothers receiving public assistance uttered about 600 words per hour; as a result, by age 3 , two full years before the first day of kindergarten, the children of affluent parents had vocabularies twice the size of children of parents living in poverty. ${ }^{21}$ The study also found that affluent parents engaged in more child-directed conversations, interacted for longer periods, used a richer vocabulary, and made more positive statements ("Good job!") than low-income parents; they were also more likely to ask children questions and to make suggestions, whereas low-income parents more often gave direct commands (i.e., "Would you like to come sit down next to me?" vs. "Sit here."). ${ }^{22}$ The quality of parent-child interactions, especially parents praising and expressing delight in the child, is critical to healthy attachment. ${ }^{23}$ The steady diet of verbal interaction and encouragement that is typically part and parcel of life for young children in middleclass households, along with a give-and-take conversational style, engenders skills and behaviors among young children that are rewarded in school settings.

Caring for infants and toddlers and providing them with not only learning materials and enriching experiences but also a steady stream of positive interaction is challenging for any new parent, but is especially so for families already struggling with the basics of survival. Financial stress, housing insecurity, isolation, long commutes, time poverty, jobs where they are not necessarily treated with respect and over which they have little control, and the needs of other family members can easily get in the way of the most devoted parents' best intentions.

## How can we start to level the playing field for children born to families lacking the resources of their more-affluent peers? The key is to support their parents.

Home visitation programs, in which specially trained professionals visit new mothers in their homes before birth and typically for up to two years afterward, have been shown to improve birth outcomes, enhance child development, lower the incidence of child maltreatment and accidental injury, improve maternal health and use of health care, reduce harsh parenting, improve the provision of stimulating activities, improve school performance, and even reduce the likelihood of dropout and contact with the juvenile justice system. ${ }^{24,25,26}$ High-quality home visitation helps to ease the stress many new parents face, connect them to resources of various sorts, alleviate the loneliness and isolation of parenting an infant, and broaden their knowledge of child development and age-appropriate expectations for behavior. It helps parents understand how negative experiences in their own childhoods can influence parenting in harmful ways, assists them in making their home environments safe and enriching, and imbues them with concrete parenting skills that strengthen their bonds with their children, foster resilience, and build self-confidence. ${ }^{27}$ Not all programs are effective; having highly trained professionals is imperative.

Other zero-to-three programs for at-risk infants and toddlers, such as the Infant Health and Development Project, which provided a range of interventions, including home visitation, enriched child care, parenting groups, and referrals, have been shown to improve language, cognitive development, and spatial skills, especially for children whose parents had limited education. ${ }^{28}$ Integrating programs for expectant mothers with pediatric clinics is also a successful model.

New York City offers such home visitation programs, among them the Nurse Family Partnership, which visits first-time pregnant women who are low-income and live in designated zip codes at home for up to two years, ${ }^{29}$ and the Newborn Home Visiting Program, which sends health workers to homes in Brooklyn, the South Bronx, and Harlem for a one-time visit. ${ }^{30}$ New York State also offers home visiting through their Healthy Families New York program. ${ }^{31}$

Providing low-income families with unearned cash transfers has also been shown to make a difference across a range of child outcomes. Even relatively modest amounts eased families' economic stress and were associated with better outcomes, especially for the poorest families. ${ }^{32,33}$

The social, emotional, and cognitive development of young children living in poverty can also be enhanced by high-quality, center-based childcare. The key ingredient of quality is the educational level of care providers; it correlates with quality of care ${ }^{34}$ and affects the developmental gains of children. ${ }^{35}$ The cost of highquality, center-based care for infants and toddlers (\$1,800 month in New York City, on average) is out of reach for low- and middle-income New Yorkers, and there are far too few subsidized spots; just 14 percent of babies and toddlers in New York City whose families qualify for subsidized early childhood education receive it. ${ }^{36}$


Just 14 percent of babies and toddlers in New York City whose families qualify for subsidized early childhood education
receive it.

In addition, abundant evidence shows that high-quality preschool can help to close the gap in school readiness by providing opportunities for young children to build the social and emotional skills that promote early school success, such as persistence, impulse control, turn-taking, and the like. ${ }^{37}$ The city's universal pre-K program and ambitious plans to expand it to include 3 -year-olds are policies informed by a strong evidence base. They have shown early success in preparing many of our littlest New Yorkers for school while also helping families balance their caring and work responsibilities (see box 11).

## box 11 Pre-K in New York City

Preschool is widely acknowledged as one of the best social policy investments; studies have repeatedly found that investing in high-quality early education yields a lifetime of benefits to children, their families, and society as a whole. One recent analysis estimated a 13 percent annual return on investment. ${ }^{38}$ In recent years, New York City has emerged as a model for early childhood education.

In 2014, after much skepticism from both sides of the aisle, the city successfully rolled out a universal pre-K program offering free preschool to all 4 -year-olds in New York City. In an impressive two years, full-day, city-funded preschool programs increased from 20,000 seats to 70,000 seats, and the first round of evaluations gave the program high marks. ${ }^{39}$

The program has not been without criticism; some consider it a subsidy for the middle class, suggesting many of the new pre-K
seats have gone to children who would have otherwise enrolled in private preschools. ${ }^{40}$ (The counterargument is that universal programs tend to enjoy greater popular support than means-tested programs; this is one reason why Social Security is regarded as the "third rail" of American politics while public assistance is under frequent assault with far fewer defenders.) Enrollment in some low-income neighborhoods has remained low in spite of outreach efforts. ${ }^{41}$ Others point out that the program has yet to address racial and socioeconomic segregation in its classrooms. ${ }^{42}$

Last spring, the city announced its " $3-\mathrm{K}$ for All" plan to expand universal pre-K to all 3-yearolds. A limited pilot program has launched in the South Bronx and Brownsville. The main challenge is money; the administration would need to secure $\$ 700$ million in state and federal funding to implement the program citywide. ${ }^{43}$

## Preschool Expands in the Five Boroughs



Source: NYC Department of Education, Annual Enrollment Snapshots, 2012-2018.
Note: Includes 3- and 4-year-olds in half- and full-day programs

## THE OPPORTUNITY ARMS RACE: OPPORTUNITY HOARDING AND HOW IT WIDENS INEQUALITY

The term opportunity hoarding was originally coined by sociologist Charles Tilly to describe the ways in which Italian American immigrants in Mamaroneck, New York, all with roots in the same village in Italy, banded together to lock down modest but secure livelihoods in landscaping in ways that boxed out potential competitors from other racial and ethnic groups. ${ }^{44}$ More recently, the term has been used to describe the behavior of affluent parents seeking to amass advantages that allow their children to maintain their class position regardless of their ability.

Social mobility, long the promise of America, is generally thought of as people moving up the socioeconomic ladder. But since status is relative-it's about where people are in the social hierarchy in relation to one another, not in relation to an absolute standard-in reality mobility creates winners and losers; "upward mobility without downward mobility is a mathematical impossibility," as Richard V. Reeves and Kimberly Howard starkly state in their paper "The Glass Floor." ${ }^{45}$

Opportunity hoarding is one way affluent parents keep their own particular children from moving down the ladder; that some four in ten people who were in the top fifth of the income distribution as children remain there as adults suggest that this strategy is often a successful one. ${ }^{46}$ What does opportunity hoarding look like in practice? Two things matter most: the quality of a child's school and opportunities for learning outside of it. These two ingredients often go hand-in-hand. Children who attend the best schools also disproportionately benefit from the most enrichment after school, on the weekends, and in the summer. In addition to the differences in everyday life between children growing up in affluent and poor circumstances described above, affluent children participate in a dizzying array of extra schooling of all sorts, from musical munchkins classes for toddlers to after-school learning centers that shore up math skills to test prep courses to ready children for high-stakes exams like the SAT and ACT. Because so many middle- and upper-class families are engaged in an extracurricular arms race to give their children a leg up in the college admissions process, the distance between these families and low-income families continues to widen. Whereas low-income children tend to lose academic skills over the summer, affluent children gain knowledge in summer camps and on family vacations. ${ }^{47}$ And affluent children with weak skills are at least as likely to be the objects of extracurricular spending-with the goal of bringing them at least to the level of their age-mates-as children who have shown a special talent that parents want to nurture. ${ }^{48}$

It's sometimes difficult to identify a bright line between fostering a child's talents with, for instance, private music lessons or a costly science summer program, and taking steps that many would find unfair, such as taking advantage of admissions preferences at elite universities for the children of alumni. ${ }^{49}$ One way to think of it is that opportunity hoarding uses special access not generally available to others (a personal relationship, membership in an elite institution) to monopolize a scarce

> Whereas lowincome children tend to lose academic skills over the summer, affluent children gain knowledge in summer camps and on family vacations.
resource-there are likely enough piano teachers out there such that every aspiring Glenn Gould with money to pay for lessons could have them, but there are a fixed, very limited number of seats in the freshman class of an elite university, or summer internships at a prestigious newspaper, law firm, bank, or consulting firm. At some point along the continuum, Reeves and Howard argue, the praiseworthy quest of parents to do right by their own children crosses the line "into systematic opportunity hoarding at the top of the income distribution." ${ }^{50}$

Another component of opportunity hoarding relates directly to school quality. In the metropolitan region, affluent parents are generally successful in ensuring that their child has access to a high-quality school. They succeed at this either by moving to towns with high entry fees in the form of home prices and equally high barriers that exclude poor families, such as zoning laws that prohibit multifamily housing, or by successfully navigating the New York City public school choice system and then working hard to preserve what they perceive to be the advantages of their school of choice. The good news is that while there are certainly vocal parents who resist, for instance, quotas to distribute low-income children throughout a New York City district, as recently happened on the Upper West Side, there are also parents and educators who champion such plans. ${ }^{51}$

## RESIDENTIAL SEGREGATION

New York State, the New York metro area, and New York City all have the dubious distinction of having the most racially segregated schools in the country. ${ }^{52}$

Part of the segregation in the metro area reflects an urban-suburban split; though white children represent about 35 percent of all children in the metro area, they represent 60 percent of children in the suburbs and just 15 percent of enrollment in urban public schools. ${ }^{53}$ In wealthy suburban areas outside New York City land beyond the borders of struggling cities like Yonkers, Paterson, and Bridgeport), where local property taxes cover a large share of educational expenses and funding for educational enhancements are topped up by well-funded PTAs, schools have more resources of all sorts: more experienced and effective teachers, a wider array of academic offerings like advanced placement courses, thriving music and arts programs, more extracurricular activities, more involved parents, more guidance counselors, and better-maintained buildings and grounds. The cost of entry in such towns is prohibitively high for most families; they offer comparatively few rentals, and houses come with price tags that often start in the high six figures. Because of the racial wealth gap, comparatively few black families can afford to live in these towns (see box 12); they are disproportionately white and Asian.

The city doesn't depend on funding tied to the hyper-local real estate tax base in the way that suburban towns do; all the schools are funded from the same pot. Nonetheless, residential segregation in combination with school choice (described below) powerfully shape both school segregation and educational quality across the city's schools. In 2014, in nearly two-thirds of the thirty-two New

## Box 12 The Black-White Wealth Gap and the Black-White Education Gap

The net worth of black families is about one-tenth the net worth of white families; ${ }^{54}$ a chief cause of this modern-day disparity is the nation's history of discriminatory housing policies and practices. Black families were long excluded from programs like federally guaranteed mortgages that allowed white families to accumulate wealth by buying homes and benefiting from appreciation and tax savings. They were steered away from
neighborhoods with amenities like good schools that enhanced and safeguarded housing values, even when they could afford them, a practice outlawed in the mid-1970s. ${ }^{55,56}$ And in more recent years, they were more likely to be offered the types of subprime mortgages that fueled the housing bust and resulted in a wave of foreclosures that hit black and brown families the hardest, wiping out their assets and widening the wealth gap. ${ }^{57}$

York City school districts, white students made up fewer than one in ten students; this was the case for all Bronx districts, two-thirds of Brooklyn districts, and half of Manhattan districts. ${ }^{58}$ Charter schools in New York City have unusually low rates of integration; the UCLA Civil Rights Project identified three in four charter schools as "apartheid schools," with less than one percent white enrollment; 90 percent as highly segregated, with less than ten percent white students; and just 8 percent as multiracial, with a share of white students comparable to the share NYC-wide. ${ }^{59}$ This begs the question: Why are charter schools seen as the answer to educating black and brown children in NYC when almost no white or Asian parents send their children to such schools, especially those with narrow academic offerings and a "no-excuses" ethos?

The chief way in which school segregation by race affects academic achievement is via exposure to poverty. ${ }^{60}$ Black and Latino children are more likely to be exposed to poverty than white or Asian students for several reasons. First, they are more likely to be poor than white or Asian children, so going to an all- or nearly-all black or Latino school increases a child's exposure to poor schoolmates. In addition, black and Latino families are more likely to live in poor neighborhoods than white families with the same incomes. Lastly, school choice policies, which evidence shows result in increased isolation and concentration of poor black and brown children left behind in less desirable schools, further intensify their exposure to poor schoolmates. ${ }^{61}$ Going to a high-poverty school can limit educational achievement in several ways; such a school may be less able to attract qualified teachers; it may be prone to more violence and disruption; it may have physical facilities and resources less conducive to learning; parents may be less able to advocate effectively and have fewer resources to devote to the school; and other students may have weaker academic skills, lowering demand for an advanced curriculum and making class interactions less fruitful. ${ }^{62}$

> In gentrifying areas, more than half the families send their children out of their zones, usually toward wealthier areas.

## SCHOOL QUALITY AND THE PROMISE OF SCHOOL CHOICE

School quality in New York City is highly uneven; the city is home to world-class schools like Stuyvesant High School that send well-prepared graduates to the country's most competitive colleges as well as a whole category of high school, educational option high schools, where fewer than six in ten students earn a high school diploma in four years. Sharp differences exist in the early grades, as well. Most Upper East Side third-graders who attend public school meet or exceed math and reading proficiency standards: on the one-to-four proficiency scales, they have an average score 3.7 on the state-mandated math assessment and 3.4 on the reading assessment. Children living in Belmont and East Tremont in the Bronx have an average score of 2.5 in math and 2.4 in reading on the four-point scales, meaning that most children there are below proficiency standards for their grade. ${ }^{63}$

What accounts for these varied outcomes on basic benchmarks of academic achievement? Research shows that the socioeconomic conditions of children's neighborhoods, the income and educational attainment levels of their parents, the quality of the schools they attend, and their educational outcomes, such as on-time high school graduation, are closely linked. One way that the city has sought to break the link between school quality and both neighborhood and family socioeconomic status is by introducing mandatory school choice for high school and middle school admissions as well as expanding options for elementary students.

The questions of school quality and racial segregation in schools as they relate to school choice tend to center around the middle- and high school-choice processes; the assumption of most people and organizations working to understand these issues-MOA included-has been that young children almost always attend their zoned, neighborhood school, with choice only starting to play a role in the later grades. But research by the New School's Center for New York City Affairs upends that assumption, finding that 40 percent of all public school kindergarteners do not attend their zoned school. ${ }^{64}$

Families living in high-income areas, which tend to be majority white, are more likely to send their children to their zoned neighborhood school. In gentrifying areas, on the other hand, where the student population is more likely to be racially and economically mixed, more than half the families send their children out of their zones, usually toward wealthier areas nearer the city's core business district. Black families, who tend to live disproportionately in low-income neighborhoods even if they are middle income, are the most likely to send their children outside their zone; 60 percent do. The children least likely to leave their zones are low-income children (those eligible for free lunch) and English language learners. This indicates that the students left behind in zoned schools are disproportionately poor and learning English; that black families disproportionately seek out schools outside their zones; and that more affluent families doubly benefit-they are both more likely to be happy with their
neighborhood schools and better able to navigate leaving their zone if they are not (if, for example, they are living in a mixed-income gentrifying neighborhood).

These trends are magnified in upper grades, where choice is mandatory rather than optional. In two recent reports, High School Graduation in New York City: Is Neighborhood Still Destiny? and Who Graduates? New Findings on NYC High School Admissions and Graduation Rates, Measure of America analyzed the latest data to look at high school graduation by the community district in which students lived as well as through the lens of the types of high school programs students were admitted to. One of the animating motivations behind the universal high school choice program that New York City began in 2004 was to weaken the well-known link between the socioeconomic characteristics of neighborhoods and the quality of the schools children living in those neighborhoods attended. The idea was that school choice would allow at least some students from low-income neighborhoods to bypass the inferior schools nearby, access higher-quality education elsewhere in the city, and experience better educational outcomes. In the longer term, parents and students voting with their feet would push poor-quality schools to improve or risk depopulation and eventual closure. The purpose of these reports was to explore how well school choice was meeting these goals.

The NYC Department of Education deserves credit for steadily boosting the on-time graduation rate over the last decade in the face of difficult challenges, including residential segregation in city neighborhoods, poverty, language barriers, and a chronic shortage of funds. Nonetheless, what Measure of America found was unsettling. Neighborhood disparities dwarfed those by race and ethnicity and gender, with 34 percentage points separating the best- and worst-performing districts. Only about six in ten public school students who lived in Morris Heights, Fordham South, and Mount Hope in the Bronx graduated high school in four years. Well over nine in ten students who set out every weekday from Manhattan's Battery Park City, Greenwich Village, Soho, and Tribeca did. The higher the child poverty rate in a community district, the less likely a young person living in that district was to graduate high school on time. Household income also marched in lockstep with community district graduation rates: the higher the median household income in a district, the higher the graduation rate of students who lived there. Students who came from neighborhoods that faced multiple disadvantages, particularly poverty and low levels of adult education, were considerably less likely to graduate high school on time than students from other parts of the city. Even though many students were no longer going to school in their own neighborhoods, their neighborhoods were still exerting a powerful influence on their academic achievement. Far too many young people from low-income black and Latino neighborhoods in the Bronx and central Brooklyn are winding up in high schools with low graduation rates, going to school mostly with other teens who share their socioeconomic disadvantages. For them, the link between neighborhood conditions and school quality remains as strong as ever, even if the school they now attend is farther from home.


Only about six in ten public school students who lived in Morris Heights, Fordham South, and Mount Hope in the Bronx graduated high school in
four years.

> The Bronx has the highest youth disconnection rate not just in the New York area, but of all urban counties in the United States: 23.4 percent.

We also found significant variation in the graduation rate depending on the type of high school program a student was admitted to. A striking 97.4 percent of students admitted to high school based on the highly competitive Specialized High School Admissions Test (SHSAT) graduated on time in 2015, compared to only 59.8 percent of those admitted to educational option programs and 68.1 percent of those admitted to limited unscreened programs, both of which have few if any admission requirements. Educational option and limited unscreened programs together educate nearly 35,000 city teenagers. Overall, 16.6 percent of Asian American students were admitted to specialized high schools, compared to only 1.1 percent of black students and 1.1 percent of Latino students. Well over half of all black and Latino students were admitted to either an educational option or a limited unscreened program, compared to roughly one in five white or Asian students.

Too many high school (and middle school) students don't really have a choice because there are simply too few good schools. The lion's share of spots in them are filled by students whose parents have the knowledge, skills, and time to successfully navigate the byzantine choice process; their out-of-school challenges are too great; and they did not leave elementary and middle school with the skills they needed to perform well in high school-in large part due to the inequalities out of the starting gate described above. School choice means that some young people are able to access high-quality educational opportunities, but those who are left behind find themselves in highly segregated schools where poverty creates a formidable obstacle to achievement. In the game of musical chairs that is school choice, when the music stops, the children without seats are disproportionately poor, English learners, and black or Latino; they are also more likely to be homeless (see box 13).

## B0X 13 One in Ten Public School Students Is Homeless

New York City's housing and homelessness crisis is reflected in its schools; the number of homeless students-those living on the streets, in a shelter, in a hotel, or doubled up with family or friends-has been on the rise, reaching an astounding 111,500 children in the 2016-2017 school year. ${ }^{65}$ Students who are not stably housed are more likely to be chronically absent and to transfer schools in the middle of the year, and are less likely to be proficient in math and English. ${ }^{66}$ These gaps in attendance and achievement persist even
after students are rehoused. ${ }^{67}$ A recent audit found that the Department of Education is not doing enough to track attendance or reach out to chronically absent homeless students, in part due to the overwhelming caseloads assigned to social workers. ${ }^{68}$ Another recent study found a vast need for more resources and calls for an office to be established within the Department of Education focused specifically on the education of students who are homeless or in foster care. ${ }^{69}$

## YOUTH DISCONNECTION

Since Measure of America first wrote about youth disconnection in 2012, ${ }^{70}$ public awareness of both the plight and the promise of these young people-teens and young adults between the ages of 16 and 24 who are neither working nor in school-has grown by leaps and bounds. The rate of disconnected youth in the United States has declined every year since 2010, thanks in great part to the recovery from the Great Recession. But there are still 4.6 million disconnected young people in the United States, ${ }^{71}$ and racial and ethnic disparities persist. Although disconnection declined for all racial and ethnic groups between 2010 and 2017, the gap between the groups with the highest and lowest rates-Native American and Asian youth-has not changed considerably.

Youth disconnection matters to human development because many of the capabilities that lay the foundation for a person's life are accrued during young adulthood. Early experiences with the autonomy of adulthood-participating in clubs and organizations of one's choosing, learning to drive, earning a first paycheck, choosing a college major-build confidence and a sense of agency. Those detached from school and work during the critical years of emerging adulthood ${ }^{72}$ miss out on these and other positive firsts, experiences that allow young people to garner credentials, develop psychosocial skills, and build networks that aid in the transition to the workforce as well as shape their sense of self. Young people who go through a spell of disconnection during this critical period of their lives often experience the repercussions years down the road in the form of limited educational attainment, lower wages, higher rates of unemployment, and worse health. And society as a whole suffers from a huge loss of human potential and tax revenue, as well as a host of ills associated with poor socioeconomic outcomes like higher rates of crime.

Today, the rate of disconnection in the New York metro area, 11.5 percent, is slightly lower that of the country as a whole, 11.7 percent ${ }^{73}$ however, New York lags behind comparable areas, ranking seventh among the ten largest metro areas in the country after Boston, Philadelphia, Los Angeles, Washington, DC, Atlanta, Miami, and Chicago. Only Dallas and Houston have higher rates of disconnection. Within the metro area, Ocean County in New Jersey has the lowest rate of disconnection, 7.2 percent. The Bronx has the highest rate not just in the New York area, but of all urban counties in the United States: 23.4 percent. Of the ten counties with the lowest rates of disconnection in the New York area, eight are suburban.

## Youth Disconnection Rates by Gender and Race and Ethnicity



Source: Measure of America calculations using US Census Bureau ACS, 2016.

Youth Disconnection by Asian and Latino Subgroups

| ASIAN | \% | \# |
| :---: | :---: | :---: |
|  | 7.5\% | 18,774 |
| CHINESE | 7.0 | 6,066 |
| Men | 7.8 | 3,277 |
| Women | 6.2 | 2,789 |
| INDIAN | 8.6 | 6,216 |
| Men | 7.9 | 2,823 |
| Women | 9.2 | 3,393 |
| FILIPINO | 6.3 | 1,418 |
| PAKISTANI | 9.3 | 1,540 |
| LATINO | \% | \# |
|  | 15.6 | 114,141 |
| MEXICAN | 15.3 | 14,905 |
| Men | 13.3 | 6,608 |
| Women | 17.4 | 8,297 |
| PR, DR, CUBAN | 17.3 | 67,465 |
| Men | 18.5 | 36,582 |
| Women | 16.1 | 30,883 |
| CENTRAL AMERICAN | 15.2 | 14,055 |
| Men | 12.8 | 6,587 |
| Women | 18.2 | 7,468 |
| SOUTH AMERICAN | 11.2 | 13,160 |
| Men | 10.6 | 6,308 |
| Women | 11.7 | 6,852 |
| OTHER LATINO | 12.9 | 3,546 |
| Men | 14.2 | 2,181 |

Source: Measure of America calculations using US Census Bureau ACS, 2016.

This is not surprising considering that suburban areas have the lowest rates of disconnection nationwide. ${ }^{74}$ Of the ten counties with the highest rates, six are urban centers-the five boroughs and Essex, New Jersey. New York City alone has a rate of 14.8 percent, considerably higher than the wider metro area.

Not all New Yorkers fare the same; Asian teenagers and young adults are the least likely to be disconnected in the city and wider metro area, followed by whites, Latinos, and blacks. For all four major racial and ethnic groups, the disconnection rate is higher in the city than in the metro area (see SIDEBAR on PAGE 149). Generally speaking, young men tend to have higher rates of disconnection. Latinos in the New York area are an exception. The widest gender gap is found among black young people, driven by the high rate of disconnection among black boys and young men.

While Asian youth have the lowest rate of disconnection in the New York area, rates vary by subgroup, from 6.3 percent among Filipinos to 9.3 among Pakistanis—a rate higher than that of New York whites. Latino rates also vary considerably by subgroup, from 11.2 among South American youth to 17.3 percent among those who trace their roots to the Spanish-speaking Caribbean. Young women in some Latino subgroups have higher disconnection rates than their male peers; Central American and Mexican girls have particularly high rates that are closer to those of black boys than to boys in their own subgroups-18.2 percent and 17.4 percent respectively (see SIDEBAR).

As noted in the "Who Lives Where and Why It Matters" section (see PAGE 44), race and place are closely related in New York due to a long history of residential segregation. Today, New York remains one of the most racially segregated metro areas in the country, and the disconnection rates of its neighborhoods are often a reflection of their racial and ethnic composition. Residential segregation, which concentrates resources into islands of opportunity and reinforces historical advantage and disadvantage, is in itself associated with higher rates of disconnection for black youth and lower rates for white youth. ${ }^{75}$

The New York City neighborhoods with the highest youth disconnection rate are Hunts Point, Longwood, and Melrose in the Bronx, where 29 percent, or nearly 7,600 young people, are disconnected (see FIGURE 14). These neighborhoods score low on the overall HD Index (3.32), and more than 40 percent of adults lack a high school diploma. Median earnings are also near the bottom of the pack at just under \$22,000. More than half of children under 18 live in poverty, and more than 11 percent of the workforce is unemployed. Of the ten community districts with the highest disconnection rates, nine are in the Bronx or Brooklyn; between two in ten and three in ten young people are out of school and work. Most of these districts are found in Precarious or Struggling New York; none has an HD Index score above 6, and eight have scores below 5.
These community districts are made up of mainly people of color-all but one
(Bedford-Stuyvesant) are over 80 percent black and Latino. None have Asian populations above 7 percent, and the highest white population is 21.3 percent in Bedford-Stuyvesant.

At the other extreme, the Gilded New York neighborhoods of Battery Park City, Greenwich Village, and Soho have the lowest disconnection rate, 4.9 percent. These neighborhoods also have the highest median earnings in the entire metro area. Almost 40 percent of adults have graduate degrees, and less than 4 percent of children live in poverty. The ten lowest rates of youth disconnection in the city range from 4.9 percent in Battery Park City, Greenwich Village, and Soho to 10.3 percent in Hamilton Heights, Manhattanville, and West Harlem in Manhattan.
While the neighborhoods with the highest rates of disconnection are consistently communities of color, those with the lowest rates are somewhat more diverse. Half are in Manhattan, and the other half are in Queens or Brooklyn. HD Index scores range from 5.03 in Brighton Beach and Coney Island to 9.36 in the Upper East Side; half have HD Index scores above 8-the remaining five, located in Queens, Brooklyn, and Manhattan, score lower on earnings and education. Half have majority-white populations, and half are majority-minority.

Disconnected New Yorkers differ from their connected peers in a number of ways. About 13 percent of disconnected youth in the New York metro area are disabled, compared to less than 4 percent of those who are connected (see box 15). Among young women, 18.9 percent of those disconnected are mothers, compared to less than 5 percent of connected girls. More than a fifth of disconnected youth dropped out of high school, compared to less than 3 percent of their connected peers, and almost 4 percent of disconnected youth-and 10.5 percent of disconnected black boys-are institutionalized, compared to less than 1 percent of connected young adults. These characteristics give us a glimpse into the challenges disconnected young people in the New York metro area face, and can guide strategies to reconnect them.

The relatively low rates of disconnection in some New York City neighborhoods, including diverse ones, are encouraging, but the steep and numerous challenges facing young New Yorkers in the most disadvantaged neighborhoods, as well as those with characteristics that put them at a higher risk of disconnection, must be addressed if the city is to close well-being gaps.

The good news is that increasingly effective networks of groups and individuals are addressing these root causes. Three strategies stand out. First, these networks are working together across previously fractured systemsschools, the private sector, the criminal justice system, philanthropy, workforce development, and others-to attack the unequal conditions of daily life that persist in high-disconnection communities. Second, they are including the views and voices of youth themselves. Finally, they are using data to set goals and work together to achieve them.


Among young women, 18.9 percent of those disconnected are mothers, compared to less than 5 percent of connected girls.

FIGURE 14 Youth Disconnection by New York City Community District

|  | \% | \# |  | \% | \# |
| :---: | :---: | :---: | :---: | :---: | :---: |
| New York City | 14.8 | 141,555 | Brooklyn CD 2 - <br> Brooklyn Heights \& Fort Greene | 13.2 | 1,971 |
| Manhattan CD 1 \& 2 - <br> Battery Park City, Greenwich Village \& Soho | 4.9 | 777 | Bronx CD 11 - <br> Pelham Parkway, Morris Park \& Laconia | 13.2 | 1,950 |
| Queens CD 11 - <br> Bayside, Douglaston \& Little Neck | 5.1 | 487 | Brooklyn CD 6 - <br> Park Slope, Carroll Gardens \& Red Hook | 13.3 | 1,090 |
| Manhattan CD 8 Upper East Side | 7.0 | 870 | Bronx CD 10 Coop City, Pelham Bay \& Schuylerville | 13.6 | 1,553 |
| Manhattan CD 6 - <br> Murray Hill, Gramercy \& Stuyvesant Town | 7.5 | 1,209 | Queens CD 4 - <br> Elmhurst \& South Corona | 13.9 | 2,175 |
| Manhattan CD 4 \& 5 - <br> Chelsea, Clinton \& Midtown Business District | 7.9 | 1,100 | Brooklyn CD 15 - <br> Sheepshead Bay, Gerritsen Beach \& Homecrest | 14.5 | 2,045 |
| Queens CD 7 - <br> Flushing, Murray Hill \& Whitestone | 8.9 | 2,030 | Staten Island CD 3 - <br> Tottenville, Great Kills \& Annadale | 14.6 | 2,504 |
| Queens CD 2 - <br> Sunnyside \& Woodside | 9.0 | 1,124 | Brooklyn CD 7 - <br> Sunset Park \& Windsor Terrace | 14.7 | 2,181 |
| Brooklyn CD 11 - <br> Bensonhurst \& Bath Beach | 9.8 | 1,792 | Brooklyn CD 9 - <br> Crown Heights South, Prospect Lefferts \& Wingate | 15.0 | 1,971 |
| Brooklyn CD 13 - <br> Brighton Beach \& Coney Island | 10.0 | 1,172 | Bronx CD 12 - <br> Wakefield, Williamsbridge \& Woodlawn | 15.2 | 2,741 |
| Manhattan CD 9 - <br> Hamilton Heights, Manhattanville \& West Harlem | 10.3 | 2,440 | Brooklyn CD 18 Canarsie \& Flatlands | 15.2 | 3,971 |
| Queens CD 8 - <br> Briarwood, Fresh Meadows \& Hillcrest | 10.5 | 2,192 | Brooklyn CD 14 Flatbush \& Midwood | 15.9 | 3,289 |
| Queens CD 3 - <br> Jackson Heights \& North Corona | 10.5 | 2,019 | $\begin{aligned} & \text { Manhattan CD } 11 \text { - } \\ & \text { East Harlem } \end{aligned}$ | 16.1 | 2,972 |
| Manhattan CD 7 - <br> Upper West Side \& West Side | 11.3 | 1,375 | Queens CD 12 - <br> Jamaica, Hollis \& St. Albans | 16.7 | 5,113 |
| Queens CD 13 - <br> Queens Village, Cambria Heights \& Rosedale | 11.3 | 2,641 | Staten Island CD 1 - <br> Port Richmond, Stapleton \& Mariner's Harbor | 17.0 | 3,922 |
| Bronx CD 8 - <br> Riverdale, Fieldston \& Kingsbridge | 11.4 | 1,353 | Manhattan CD 12 - <br> Washington Heights, Inwood \& Marble Hill | 18.2 | 5,039 |
| Manhattan CD 3 - <br> Chinatown \& Lower East Side | 11.5 | 2,325 | Brooklyn CD 8 - <br> Crown Heights North \& Prospect Heights | 19.2 | 3,209 |
| Brooklyn CD 4 Bushwick | 11.6 | 2,440 | Bronx CD 4 - <br> Concourse, Highbridge \& Mount Eden | 19.5 | 4,246 |
| Queens CD 6 - <br> Forest Hills \& Rego Park | 11.8 | 803 | Brooklyn CD 3 - <br> Bedford-Stuyvesant | 19.6 | 3,821 |
| Brooklyn CD 10 - <br> Bay Ridge \& Dyker Heights | 12.2 | 1,454 | Brooklyn CD 17 East Flatbush, Farragut \& Rugby | 19.8 | 3,280 |
| Queens CD 1 - <br> Astoria \& Long Island City | 12.3 | 2,155 | Bronx CD 3 \& 6 - <br> Belmont, Crotona Park East \& East Tremont | 19.8 | 5,851 |
| Queens CD 10 - <br> Howard Beach \& Ozone Park | 12.6 | 2,176 | Bronx CD 7 - <br> Bedford Park, Fordham North \& Norwood | 20.3 | 3,699 |
| Brooklyn CD 12 - <br> Borough Park, Kensington \& Ocean Parkway | 12.7 | 2,435 | Bronx CD 5 - <br> Morris Heights, Fordham South \& Mount Hope | 21.5 | 4,459 |
| Queens CD 14 - <br> Far Rockaway, Breezy Point \& Broad Channel | 12.8 | 1,744 | Bronx CD 9 - <br> Castle Hill, Clason Point \& Parkchester | 21.7 | 5,392 |
| Queens CD 5 - <br> Ridgewood, Glendale \& Middle Village | 12.8 | 2,591 | Brooklyn CD 16 Brownsville \& Ocean Hill | 22.2 | 3,467 |
| Staten Island CD 2 - <br> New Springville \& South Beach | 12.9 | 1,890 | Brooklyn CD 5 - <br> East New York \& Starrett City | 22.6 | 4,845 |
| Queens CD 9- <br> Richmond Hill \& Woodhaven | 13.1 | 2,773 | Manhattan CD 10 - <br> Central Harlem | 24.3 | 3,816 |
| Brooklyn CD 1 - <br> Greenpoint \& Williamsburg | 13.2 | 2,241 | Bronx CD 1 \& 2 Hunts Point, Longwood \& Melrose | 29.0 | 7,579 |

Source: Measure of America calculations using US Census Bureau ACS, 2016.

## ENROLLING IN AND GRADUATING FROM COLLEGE

Family socioeconomic status plays a huge role in college enrollment and college completion. Nationwide, 58 percent of students from high-income families earn bachelor's degrees by age 24 , compared to just 12 percent of students from low-income families-a nearly fivefold difference. The share of low-income young people who earn bachelor's degrees is only 6 percentage points higher today than it was in 1965 but the share of high-income young people who obtain four-year college degrees has shot up 18 percentage points from the 1965 rate of 40 percent. ${ }^{76} \mathrm{~A}$ ten-year longitudinal study by the National Center for Educational Statistics found that at every level of ability, low-income young people were much less likely to earn bachelor's degrees than high-income students; in fact, a low-income student with math scores in the top quarter was only as likely to graduate with a bachelor's degree as a high-income student with below-average math scores. ${ }^{77}$ Academic preparation, family expectations and knowledge about college, lack of financial resources, and, related to that, the need to work, all conspire to impede college completion for low-income young people (see box 16).

Given the national context, the disparate rates of college attendance among New York City young people of different socioeconomic status are not surprising, nor are the comparatively low rates of young people going on to bachelor's degree programs; eight in ten of the roughly one million NYC public school students are low-income, qualifying for free- or reduced-price lunch. A 2017 study of

## Box 15 NYC Education and Disabilities

Historically, having a disability has been a significant barrier to education, but following the passage of landmark legislation, including the Americans with Disabilities Act (ADA) and the Individuals with Disabilities Education Act (IDEA), the rights of students with disabilities have expanded in the United States. Today, nearly one in five students in New York City public schools has a disability and, as mandated by IDEA, the city provides each student with a disability with an individualized education program (IEP), assistive technology, and related services or a voucher to receive those services outside school. ${ }^{78}$ But gaps in educational outcomes remain. Roughly one in ten students with disabilities in grades 3-8 is proficient in English and math, compared to nearly half of students without disabilities, and those with disabilities are more than twice as likely as their peers without disabilities to not graduate high school on time. ${ }^{79}$

Some of the barriers that students with disabilities continue to face are disproportionate school discipline, difficulty accessing needed services, and insufficient support transitioning from school to adulthood. A recent report found that the system of vouchers for disability services is difficult for families to navigate and leaves many students without services. ${ }^{80}$ Students with disabilities are also more likely to be suspended than their peers, which disrupts learning. ${ }^{81}$

Several initiatives aim to level the playing field. The city plans to open Transition and College Access Centers to provide students with disabilities and schools with more resources to plan for life after high school. ${ }^{82}$ The Cerebral Palsy Foundation has partnered with the city to launch the "Just Say Hi" campaign to create more inclusive environments in NYC schools. ${ }^{83}$ Efforts are also being made to improve data collection on this diverse student population. ${ }^{84}$

> The majority of the college-going differences relate to differences in students' socioeconomic backgrounds and past academic experiences.

high school practices associated with rates of enrollment in four-year bachelor's programs found that only 28 percent of New York City public school students who entered high school in 2007 then enrolled in a four-year college program the fall following their high school graduations. ${ }^{85}$ But the share of college-going students varied widely by school; in half of all high schools, less than 28 percent of students went onto to a four-year college; only one in ten high schools saw more than half their students enroll in college after high school graduation.

Researchers found that the majority of the college-going differences related to differences in students' socioeconomic backgrounds and past academic experiences, disparities described in the sections above. They argued that because "inequities in college preparation and access open up early in the school trajectory, prior to high school, and continue to drive student outcomes," high schools cannot be entirely responsible for post-secondary outcomes; they write, "much of what prepares and motivates a student to attend college has already begun to take shape even before students walk through the doors on the first day of high school." ${ }^{86}$ The study did find, however, that two school-level approaches were associated with higher rates of college-going: establishing high expectations for students' postsecondary attainment and encouraging a school-wide culture of AP test-taking (with such tests acting as a proxy for the existence of academically rigorous advanced courses).

## Box 16 Will Free Tuition Help?

The New York State Excelsior Scholarship, which provides up to $\$ 5,500$ for tuition at New York's public colleges to top up other tuition benefits like Pell grants and thus makes tuition free, commenced its inaugural year in the fall of 2017. Students coming from households with incomes below $\$ 100,000$ qualified (this figure will rise to $\$ 110,000$ in 2018-19 and \$125,000 in 201920). ${ }^{87}$ In its first year, 22,000 students made use of the Excelsior Scholarship, resulting in 53 percent of CUNY and SUNY in-state students (about 210,000 out of 400,000 ) receiving free tuition thanks to a combination of Excelsior, Pell, TAP, and other grants.

The program is a boon to middle-class families who earn too much for some forms of need-based aid but not enough that footing the whole college bill lincluding room and board) is easily accomplished. The program is less well suited to the neediest students, however. First, the scholarship requires that students take on a full course load of at least thirty credits per year, attend
full-time, and attend continuously with no breaks. ${ }^{88}$ These continuous attendance and full course load requirements are a challenge for low-income and nontraditional students, who often need to work at least part-time to cover expenses, who may have caretaking responsibilities, or who need to take breaks in enrollment to tend to family matters or earn additional money. ${ }^{89}$ The scholarship is more in line with the requirements of traditional, full-time students in their late teens and early twenties. Second, the scholarship is only used after other forms of aid have been exhausted and only covers tuition, whereas the neediest students, who already have most of their tuition subsidized, need help with room and board and textbook expenses. ${ }^{90}$ While a portion of the middle class will benefit from the scholarship-a good first step-it does not alleviate significant expenses for low-income students like room and board, nor is it likely to attract atypical students.

## A Decent Standard of Living



Introduction

Variation by Race and Ethnicity

Variation by Gender
IN THIS SECTION
Variation by Nativity
Variation by Neighborhood

Closing the Gaps in Standard of Living: What Will It Take?

## Introduction


#### Abstract

As the analysis above demonstrates, New York City is a haven for healthy, educated residents able to contribute to a vibrant economy and keep pace with today's rapid labor market shifts. One of the challenges for policymakers at every level is to support actions that will provide all residents, regardless of socioeconomic status, equal access to opportunity in a region with a strong economy but deep inequalities.

Because material well-being is a critical ingredient to overall well-being, one-third of the American Human Development Index is devoted to the capabilities people have to enjoy a decent material standard of living: to have the money necessary to live well, afford health care, be well-nourished, feel secure about the future, pursue educational opportunities and leisure activities, and much more.


## Box 1 Measuring Living Standards in the American Human Development Index

Many different measures are used to understand and compare living standards across groups and places. The American Human Development Index uses median personal earnings, the wages and salaries of all full- and part-time workers 16 years of age and older, obtained annually through the US Census Bureau's American Community Survey. Median personal earnings differ from other income and earnings measures in important ways and were chosen as a meaningful proxy for a decent standard of living.

## Personal $\leftarrow$ vs. $\rightarrow$ Household

Using personal earnings rather than household earnings allows us to compare the relative command women and men have over economic resources. While many households are headed jointly by married couples, who typically share their incomes, more than half are not. The share of married-couple households has been falling since the 1970s; it fell below the halfway mark in 2011 and is continuing a downward trend. In addition, not all married couples stay that way. Cohabitating couples who share resources can also part company.
Part-time $\leftarrow$ vs. $\rightarrow$ Full-time
The earnings of part-time workers are included in median personal earnings. While some workers prefer not to or do not need to work full time, others work part time because they cannot find full-time jobs or affordable child care, or they have responsibilities, such as elder care, that make full-time work impossible.

## Earnings $\leftarrow$ vs. $\rightarrow$ Income

Earnings are the wages or salaries people earn from their paid jobs. Income is a broader category that includes not just earnings, which make up the largest share of income for most Americans, but also pensions and Social Security benefits, child support payments, public assistance, annuities, stock dividends, funds generated from rental properties, and interest. Earnings are typically lower than income.

Median $\leftarrow$ vs. $\rightarrow$ Average
The median gives a better indication than the average of how the ordinary worker is faring. The median earnings figure is the midpoint of the earnings distribution-half the population is earning more than the median amount and half is earning less. In contrast, averages can be misleading in situations of high inequality; the presence of a few people taking home enormous sums will pull the average far above what the vast majority are actually earning.

Many different measures can be used to gauge people's material standard of living. The American Human Development Index uses median personal earningsthe wages and salaries of all full- and part-time workers 16 years of age and older. This measure was chosen as a way to reflect the resources of the ordinary worker (thus the median, or midpoint, of earnings rather than mean, or average, earnings) and to capture the command that both women and men have over economic resources (thus the focus on personal rather than household earnings). See box 1 for further details on median personal earnings.

Wealth provides essential economic security today and improves children's life chances tomorrow.

Box 2 What about Wealth?

Neither earnings nor incomes include wealth. Wealth (or net worth) is the value of everything a person owns-a house or other real estate, stocks, businesses, retirement savings, and more-minus anything they owe, including liabilities or debts such as unpaid mortgage principal. Disparities in wealth eclipse disparities in income or earnings, in New York City and across the United States.
Unfortunately, wealth is extremely hard to measure, in part because the values of assets like stocks and real estate are constantly changing, and also because the very wealthiest are likely to be missed in random sampling and often decline to participate in surveys. Several surveys produce reliable wealth data on the United States as a whole, but few provide data on smaller geographic areas like counties or detailed information on racial and ethnic groups. Wealth thus cannot be incorporated into the American Human Development Index.

Wealth provides essential economic security today and improves children's life chances and expands their opportunities tomorrow by allowing parents to live in areas with good schools, save and pay for college, and offer help with a first car or mortgage, setting their children on a path to financial independence. Savings and assets are also a cushion against future events beyond our control-recession, natural disasters, or illness. According to the most recent Survey of Consumer Finance, US wealth is rising for all, but the disparities between racial and ethnic groups are not
shrinking. In 2016, while white families had average net worth of $\$ 933,700$, Latino family wealth was \$191,200, and black family wealth was $\$ 138,200.1$

This unacceptable wealth divide, rooted in part in the structures by which wealth has been constructed in the United States, points to the urgent need for policy actions to break down barriers to wealthbuilding and help those with few assets build a more stable future.

FAMILY WEALTH


[^11]
## Variation by Race and Ethnicity

The typical worker in New York City earns roughly \$36,000 a year, above the US median of $\$ 31,000$. But the distribution of these earnings by race and ethnicity shows considerable variation. White workers earn the most by far, $\$ 52,290$. Asian and black workers come in second and third, with very similar median earnings of $\$ 32,156$ and $\$ 32,059$ respectively. Lastly, Latino median earnings are $\$ 25,086$, less than half of white earnings.

White workers in New York City earn over \$17,000 more than their US counterparts, the largest difference by far of the four major groups studied for this report (see FIGURE 3). The differences in FIGURE 3 are not adjusted to take into account cost of living, so part of this variation is undoubtedly due to the city's high cost of living. Another important factor may be the types of jobs held by white workers in New York City compared to nationally. White city residents are far more likely to work in relatively higher-paid management, business, science, and arts occupations (59 percent) than their US counterparts (42 percent, about the same as the NYC average). ${ }^{2}$ White city residents out-earn neighbors of the other four racial and ethnic groups in each of the five boroughs. White Manhattanites, about three-quarters of whom work in management, business, science, or arts occupations, have particularly high median earnings, $\$ 74,000$, triple that of their

FIGURE 3 Median Earnings by Race and Ethnicity in the US and NYC


Source: US Census Bureau ACS, 2015.

FIGURE 4 Earnings by Race and Ethnicity in the Five Boroughs


Source: US Census Bureau ACS, 2015

Latino neighbors. White workers in the Bronx, on the other hand, earn $\$ 40,000-$ still $\$ 10,000$ higher than the earnings of Asian and black Bronx residents.

Asian earnings of $\$ 32,156$ in New York City put the group ahead of black and Latino workers in terms of typical earnings, but Asian workers are the only major racial or ethnic group earning less in New York City than in the United States overall (see FIGURE 3). Within the city, Asian earnings vary considerably, from nearly double the typical earnings of black Manhattanites to similar earnings to blacks in the Bronx. Asian workers in Manhattan earn more than $\$ 60,000$, nearly two and a half times as much as their Asian peers in Brooklyn. Asian earnings in Brooklyn, $\$ 24,810$, are the lowest of any racial or ethnic group in the borough.

A more granular breakdown of earnings among various Asian subgroups is essential to understand and address the economic challenges of groups with the lowest earnings (see sidebar). Japanese New Yorkers, the subgroup with the highest educational attainment levels, earn nearly as much as white workers in the city, about $\$ 51,000$. Filipinos and Koreans, also highly educated, have earnings over $\$ 40,000$. New Yorkers of Chinese and Bangladeshi heritage earn the least of the seven most populous Asian subgroups, both under $\$ 30,000$. In each case, earnings and education track closely; one-fifth of Bangladeshi adults and over one-third of Chinese adults did not complete high school.

Black workers in New York City earn slightly less than Asian workers and about $\$ 4,000$ less than the typical New Yorker. The range of black earnings across the city's five boroughs is the smallest of the five major racial and ethnic groups; there is only a $\$ 6,000$ difference between black earnings in Queens, at the higher end, and the Bronx. The gap between white earnings in Manhattan and the Bronx is roughly $\$ 34,000$.

Latino workers have the lowest earnings in New York City, \$25,086-only about $\$ 1,500$ higher than US Latinos. Latino workers earn less than their neighbors in all boroughs except for Brooklyn, where they earn about the same as Asian workers. Latinos have the highest earnings in Staten Island, \$32,315. Latino earnings in the Bronx are the lowest of any group in any borough, less than two-thirds of the city median at $\$ 21,579$. Among Latino residents in the city, those of Spanish heritage earn the most by far $-\$ 51,400$, nearly double what the next subgroup earns (see SIDEBAR). Those of Mexican heritage earn the least, $\$ 21,200$. All other Latino subgroups-South Americans, Caribbean, Central American, and other-have fairly similar earnings, between $\$ 25,000$ and $\$ 27,000$.

## Variation by Gender

While women, on average, live longer and are slightly more likely to have earned a bachelor's degree, men in New York City typically earn about \$7,000 more. Wage inequality is not just a women's issue; in high-cost New York City, most families depend on women's earnings to make ends meet. The gender earnings gap is also a consequential issue for children growing up in female-headed households, which comprise 10 percent of all NYC households. The size of the gender earnings gap varies considerably for each of the major racial and ethnic groups for which data are available, from $\$ 3,441$ for black workers to $\$ 13,136$ for white workers.

In the city, the white gender pay gap is the largest, $\$ 13,100$. White women earn 79 cents for every dollar a white man earns-the same proportional gap as that of Latinos, who have the second-largest earnings gap, $\$ 5,600$. The gender pay gap is smallest between black men and women, roughly $\$ 3,400$, and black


# The white pay gap between men and women is the largest of the four major racial and ethnic groups by far. 

women make 90 cents per black male dollar-the same proportional gap as that of Asians, who have a similar earnings gap of $\$ 3,600$. Among Asian subgroups, the pay gap varies widely; Indian men out-earn Indian women by $\$ 10,600$ while Chinese men and women earn about the same amount. Among Latino subgroups, South Americans have the largest gender pay gap, $\$ 8,300$. Those who identify as "other Latino" and Central Americans have the smallest earnings gap between men and women (see figure 6).

Several trends may explain why white women experience the widest pay gap of all major racial and ethnic groups. First, white New Yorkers have the highest Education Index score, and research shows that the gender pay gap is wider among college graduates. ${ }^{3}$ A second contributing factor is the "fatherhood bonus," the boost in wages men experience when having children. This boost is greatest among men at the top of the income distribution. In New York City, these men are disproportionately white. ${ }^{4}$ Research also suggests that jobs that require inflexible schedules and reward long hours, such as those in corporate, financial, and legal fields, have the widest gender gaps; ${ }^{5}$ these fields are typically disproportionately white-and in New York, they also require particularly long hours. ${ }^{6}$ Any combination of these factors together may explain why the white gender gap is so wide.

The narrower gender pay gaps among people of color, however, should not be taken as a sign of gender equality in these groups. They are more likely a reflection of the lower earnings of men of color, particularly for black and Latino men. In other words, it's not that women of color have an advantage, but rather that white men have an even greater advantage than men of color. This is particularly true for black workers; new research has found that black and white girls from comparable households grow up to have about the same earnings, but black men consistently earn less than white men, even if they grew up in homes with comparable family structures and incomes.?

The gender gap in earnings is the result of a number of factors revolving around the reality of women's reproductive role and the assumptions employers make about the impact that role might have on women's work performance and availability, the educational and career choices women make, and age-old wage discrimination having little to do with these other factors.

[^12]They include:

- Responsibilities for caretaking labor. Social norms around work in and outside the home have changed significantly over the past generation, but as women have joined men in the paid workforce in droves, men have been slower to share caretaking responsibilities. As a result, women still shoulder the majority of the child and elder care, domestic work, and emotional labor that family life requires. One consequence of this imbalance is that women are more likely to work part time, contributing to lower earnings. In 2016, 37 percent of New York City women were not full-time, year-round workers, compared to 27 percent of men. ${ }^{8}$
- Marriage and motherhood penalty. Relatedly, having children hurts women's careers but boosts men's; while men's paychecks tend to grow if they have children-especially for high-income men-women pay a wage penalty for leaving the workforce to care for children. ${ }^{9}$ In the two years leading up to and one year after the birth of a child, the gap in earnings between husband and wife doubles. ${ }^{10}$ Studies of women with college degrees shows that the gender pay gap grows over the course of their careers, more so for those who are married. ${ }^{11}$ The fact that mothers are more likely to work fewer hours and trade high earnings for more flexible, family-friendly jobs surely impacts wages, but evidence also indicates employers discriminate more against mothers than women in general in hiring and promotion decisions. ${ }^{12}$ The bias against mothers in the workforce can also affect women who don't have children; research suggests that, even though family-friendly leave policies help retain

Figure 7 Key Factors Behind the Gender Earnings Gap


## Even in FemaleDominated Occupations, Men Earn More

Home Healthcare
Workers


Source: US Census Bureau, Longitudinal Employer-Household Dynamics: Quarterly Workforce Indicators, 2016.
women in the workforce, the expectation that women will work shorter hours or take time off in the future may result in employers being less willing to invest resources in female employees in the form of promotions, discriminating against women regardless of their actual intentions to have children. ${ }^{13}$

- Inflexible work culture. The gender pay gap tends to be widest in occupations that disproportionately reward long, inflexible in-person hours and constant availability, like law and business. Jobs that pay proportionally to hours worked and don't penalize flexibility, such as pharmacist, have smaller pay gaps. ${ }^{14}$ Creating a work culture that does not penalize workers seeking a reasonable work-life balance would benefit everyone.
- Women work different jobs. Women tend to be concentrated in lowerpaying occupations and industries, in part because of their choices of fields of study. Fewer women major in science and engineering, for example, than in education or social work, resulting in lower economic payoffs. It must be noted, however, that gender differences between occupations account for only 15 percent of the overall pay gap, while pay gaps within occupations account for 85 percent. In other words, if women and men were distributed equally across occupations, it would only eliminate 15 percent of the pay gap. ${ }^{15}$
- Wage discrimination. Research shows that much of the pay gap is explained by women not getting raises and promotions at the same rate as their male colleagues. ${ }^{16}$ Even when working in the same occupational category, and even in female-dominated occupations, men tend to earn more than women. In New York, women make up 90 percent of the home health-care workforce, yet the average monthly salary for female home health-care workers in 2016 was just under $\$ 2,000$, while the average for their male colleagues was $\$ 3,200$. Women also make up 80 percent of day-care workers, but their average monthly salary was $\$ 2,700$, compared to male day-care workers' average salary of $\$ 3,400$ (see sidebar). ${ }^{17}$


## Variation by Nativity

New York City is a metropolis constantly in the process of reinvention. One major contributing factor is its immigrant population-more than one in three New Yorkers were born outside the United States and more than half of babies born in the city have foreign-born mothers. It's a cycle of arriving, settling in and building a life, working, raising families, and contributing new spices and accents to the city's rich cultural, economic, social, and civic life. That process brings with it both opportunities and considerable challenges. Some of those challenges (see box 8) are reflected in earnings: immigrant annual earnings are nearly $\$ 11,000$ less than those of US-born New Yorkers, with a much larger earnings gap for Asian workers lover $\$ 18,000$ ). Black New Yorkers are the only major racial group where foreignborn residents earn more, though by a much smaller margin than the gaps for the other groups (see sidebar).

## BOX 8 Closing the Immigrant Earnings Gap

Raising the earnings of immigrants requires closing the knowledge and skills gaps newcomers often face. English language proficiency, educational deficits, difficulty obtaining credit for credentials received overseas, and immigration status are four of the barriers immigrants can face in their efforts to find a place in a new labor market, even for educated professionals. Those who arrive with limited formal education can face a daunting task in navigating the adult education system. Highly educated immigrants sometimes face difficulties translating or transferring credentials from their home country, too often leading to underemployment. And in addition to language and education barriers, those without citizenship can face the risk of exploitation due to their immigration status. In the absence of proper services, predatory employment agencies too often take their place, adding to the difficulties that come with starting life in a new country. Facing these challenges, many immigrants opt to work for, or indeed become, small business owners. In fact, immigrants own almost half of New York City's small businesses. ${ }^{18}$ Managing a small business in New York City, however, is no small feat, even for native-born, English-speaking New Yorkers.

Some support for these various hurdles exists, provided by the city and community-based organizations. Demand, however, far outstrips supply, and more outreach in immigrant neighborhoods, using appropriate languages, would go a long way to unlock this source of human capital. For help with continuing adult education, community-based organizations are providing referrals and advice, mentoring and networking, and wraparound services such as child care. Advertising and expanding existing small business assistance services in immigrant neighborhoods can help immigrant entrepreneurs comply with rules and regulations. Additionally, business owners and workers alike can benefit from expanding training programs and English for speakers of other languages (ESOL) programs to address language and skill gaps. ${ }^{19}$ Supporting existing programs tailored to immigrants, like the Immigrant Business Initiative, and creating new ones can help small businesses expand beyond ethnic markets. Immigrant business owners stand to benefit enormously from general small business initiatives, such as increasing spaces in new developments, streamlining business compliance information and other resources into a comprehensive online portal, and creating incentives for lenders to make small loans. ${ }^{20}$ Nurturing the entrepreneurship and talent of today's immigrants is an investment in the city's future that, if the past is any guide, will pay off handsomely.

## Earnings by

 Nativity and Race and Ethnicity\$55,835

\$50K
Asian Native Born \$48,917
White Foreign Born \$48,309

Black Foreign Born \$34,978 Black Native Born \$30,932
Asian Foreign Born \$30,648
Latino Native Born \$30,047

- Latino Foreign Born \$22,214

LGBTQ
New Yorkers

## $21 \%$

Believe they were denied a promotion, not hired,
fired or forced to resign

## 18\%

Experienced homelessness

Transgender New Yorkers

42\%
Believe they were denied a promotion, not hired, fired or forced to resign

38\% Experienced homelessness

Source: Office of the NYC Comptroller. "Results of a Survey of LGBTQ New Yorkers," June 2017.

## Box 9 Workplace Discrimination in NYC by Sexual Orientation and Gender Identity

As mentioned above, data used to calculate the HD Index are not currently available by either sexual orientation or gender identity, making analysis of earnings for these groups impossible within the index framework. The NYC Comptroller's Office has conducted a survey of LGBTQ New Yorkers that shows the magnitude of the barriers LGBTQ respondents continue to face in employment in spite of workplace
anti-discrimination laws on the books. In the survey, 21 percent of LGBTQ respondents and 42 percent of transgender respondents believed they were discriminated against in the workplace because of their sexual orientation or gender identity. Transgender individuals are also more likely to experience economic insecurity; 38 percent reported experiencing homelessness at some point in their lives (see SIDEBAR).

## Variation by Geography

## BOROUGH AND NEIGHBORHOOD TABULATION AREA

Recent research on neighborhood incomes and poverty underscores the role that neighborhood income plays in children's future earnings potential. Researchers Douglas Massey and Jonathan Rothwell found that parents' incomes are, of course, highly determinant of children's lifetime earnings, but that the influence of neighborhood income has previously been underestimated. Growing up in a lowincome neighborhood in a metro area characterized by residential segregation by income deeply affects future earnings. The study estimates that the impact of income by neighborhood is almost two-thirds as large as the effect of the income of one's own parents, with an earnings differential of \$910,000 over a lifetime between children who were raised in a bottom- vs. a top-quartile neighborhood. ${ }^{21}$ This new research further underscores the importance of identifying communities with very low earnings and addressing root causes of those weak outcomes.

Calculating earnings by NYC neighborhood shows enormous variation. Overall, Manhattan residents top the charts, with typical earnings over $\$ 52,000$, followed by Staten Island residents, who earn roughly $\$ 42,000$. Brooklyn and Queens residents have similar earnings, in the range of $\$ 33,500$. Bronx workers earn the least, less than half of what Manhattan workers take home (see SIDEbAR, PAGE 170 ).

Earnings by neighborhood tabulation area (NTA) are more or less consistent with these borough trends: the ten highest-earning NTAs are all located in Manhattan while eight of the bottom ten are in the Bronx, with the remaining two in Brooklyn (see table 11). Median earnings range from nearly $\$ 95,000$ in Manhattan's Upper East Side to \$14,400 for residents of the largely Latino community of Belmont in the Bronx. Belmont residents have typical wages and salaries well below the poverty threshold for a family of two. This $\$ 81,000$ earnings gap, which leaves residents worlds apart in terms of access to a decent standard of living, is found between two communities located only a few miles apart (see MAP 10).

## MAP 10 Earnings in NYC



Residential segregation by race and ethnicity overlaps strongly with economic divides in the city. Of the twenty highest-earning neighborhoods, all but one are majority white. Eighteen of the bottom twenty neighborhoods are majorityminority. All but one of these bottom twenty neighborhoods have child poverty rates over 45 percent. Notably, high-earning neighborhoods all have very low incarceration rates, as is discussed further below.

TABLE 11 Earnings in Top- and Bottom-Twenty Neighborhood Tabulation Areas

| RANK BOROUGH NEIGHBORHOOD TABULATION AREA | MEDIAN PERSONAL EARNINGS (\$) |
| :---: | :---: |
| TOP 20 |  |
| 1 MANHATTAN: Upper East Side-Carnegie Hill | 94,963 |
| 2 MANHATTAN: Lincoln Square | 92,125 |
| 3 MANHATTAN: Turtle Bay-East Midtown | 89,595 |
| 4 MANHATTAN: Battery Park City-Lower Manhattan | 85,566 |
| 5 MANHATTAN: Midtown-Midtown South | 85,332 |
| 6 MANHATTAN: West Village | 84,612 |
| 7 MANHATTAN: SoHo-TriBeCa-Civic Center-Little Italy | 83,061 |
| 8 MANHATTAN: Hudson Yards-Chelsea-Flat Iron-Union Square | 77.696 |
| 9 MANHATTAN: Murray Hill-Kips Bay | 77,434 |
| 10 MANHATTAN: Lenox Hill-Roosevelt Island | 76,452 |
| 11 BROOKLYN: Brooklyn Heights-Cobble Hill | 71,421 |
| 12 MANHATTAN: Gramercy | 71,028 |
| 13 MANHATTAN: Yorkville | 70,831 |
| 14 MANHATTAN: Stuyvesant Town-Cooper Village | 63,699 |
| 15 MANHATTAN: Upper West Side | 63,287 |
| 16 MANHATTAN: Clinton | 63,149 |
| 17 BROOKLYN: Park Slope-Gowanus | 61,094 |
| 18 BROOKLYN: DUMBO-Vinegar Hill-Downtown Brooklyn-Boerum Hill | 59,553 |
| 19 BROOKLYN: Carroll Gardens-Columbia Street-Red Hook | 58,546 |
| 20 MANHATTAN: East Village | 55,749 |

## BOTTOM 20

| 169 | BRONX: Longwood | 21,892 |
| :--- | :--- | :--- |
| 170 | BRONX: Borough Park | 21,773 |

171 BRONX: West Farms-Bronx River 21,654
172 BRONX: East Concourse-Concourse Village 21,557
173 BRONX: Hunts Point 21,281
174 BRONX: Soundview-Bruckner 21,181
175 BRONX: Highbridge 21,152
176 BROOKLYN: North Corona $\quad 20,970$
77 BRONX: Melrose South-Mott Haven North 20,586
178 BRONX: West Concourse $\quad 20,506$
179 BRONX: Fordham South $\quad$ 20,405
$\begin{array}{ll}30 \text { BRONX: University Heights-Morris Heights } & 20,002\end{array}$
81 BRONX: Kingsbridge Heights 19,881
2 BRONX: Mount Hope 19,658
83 BRONX: East Tremont $\quad 19,623$
84 BRONX: Mott Haven-Port Morris 19,619
5 BROOKLYN: Sunset Park East 18,568
BROOKLYN: Williamsburg 18,016
BRONX: Claremont-Bathgate 17,620
$\begin{array}{ll}\text { BRONX: Belmont } & 14,411\end{array}$

Source: US Census Bureau ACS, 2011-2015.

# Closing the Gaps in Standard of Living: What Will It Take? 


#### Abstract

The income divide between the haves and the have-nots in New York City is clear from the above analysis, with consequential impacts on the well-being of today's residents and that of their children tomorrow. Recent important policy actions such as the statewide minimum wage raise to $\$ 15$ per hour and paid family leave law, the city's paid sick leave law, the expansion of proven alternative-toincarceration programs that reduce the number of incarcerated people without negatively impacting safety, and other initiatives are all major accomplishments. Today's strong economy provides opportunities to do even more. The issue of the mismatch between those most in need of public transportation for reaching employment and the lack of reliable, affordable options for this population is discussed extensively above. Three additional areas in particular require continued focus and innovation in order to ensure a decent standard of living for all the city's residents, in the areas of wages, housing, and incarceration.


## WAGES

One clear way to redress these enormous racial and ethnic disparities is raises for the lowest-paid workers. The good news is that after a long period of stagnant earnings, workers at the low end are finally getting this raise. While for many New Yorkers, $\$ 15$ per hour to pay for decent housing much less to raise a family still seems like a cruel joke, it was a hard-fought battle that will affect more than a million workers.

Far from the common myth of minimum wage workers being mostly teenagers living at home and working part-time or summer jobs, minimum wage workers in New York City are nearly all ( 95 percent) age 20 or older, two-thirds work full-time, over half have at least some college education, and a third have children. ${ }^{22}$ Raising the minimum wage to $\$ 15$ will mean expanded options and opportunities for 1.4 million city workers and their families. People of color comprise the majority of New York City's population who are in line for raises: 36.7 percent are Hispanic, and 21.5 percent are black.

While the climb to $\$ 15$ is deliberately phased to allow employers time to adjust-the full $\$ 15$ per hour doesn't arrive until December 31, 2019 la bit earlier for fast food chains)-this policy brings hope that some of the extreme racial and ethnic disparities discussed in this chapter will narrow as a result. The next step is to index minimum wages to inflation after they have reached $\$ 15$, as is the case for most salaried workers, to remove this recurrent issue from the political process and to enable both workers and employers to plan for the future in an economically rational way.

## Who Are Minimum Wage Workers?



Source: Economic Policy Institute Briefing Paper 416, 2016.


While the struggle for a pay raise at the bottom has finally resulted in tremendous progress for minimum wage city (and New York State) workers, wages for those in the middle are not rising. The laws of supply and demand generally hold that low unemployment lten years into a recovery, US unemployment has dipped down to the lowest rate since 2000) means higher wages, but the legislated increase in the minimum wage in a number of states and the dramatically larger paychecks at the top have put stagnation in the middle in stark relief. Factors often attributed to the anemic wage increase for mid-wage workers are the lower bargaining power that has resulted from the decline of unions; competition from imports, automation, and outsourcing as a result of globalization; and the disappearance of jobs in the middle due to the hourglass-shaped distribution of the labor market. More recently, new factors have come into play that have meant not only depressed wages but also increased economic insecurity.
The new gig economy, characterized by shorter-term contracts and freelance work, has brought desired flexibility for some, but uncertainty and a lack of benefits for many. ${ }^{23}$

Finally, as is discussed above, boosting women's wages is a sure route to higher HD Index scores and better outcomes for children, especially those growing up in female-headed households. Some of the earnings gap can be traced to the courses of study women have traditionally chosen, to the fact that women are more likely to work part time, and to occupational differences. The gender division of labor, a term that describes who does what when it comes to work in and outside the home, is also a culprit. A main reason women are more likely to work part time is that they shoulder a disproportionate share of unpaid work in the home, including child care and elder care. While de facto illegal, discrimination against women, especially mothers, in pay, hiring, and promotion still exists. And, as the recent wave of sexual harassment claims and subsequent deluge of personal stories blanketing the media makes abundantly clear, women today encounter sexual pressure, coercion, and even assault in the workplace to an astonishing degree; too many women see their careers derailed by the impacts of sexual harassment and the threat of retaliation. Paid parental and sick leave are important policy steps forward. More access to subsidized child care is needed; enforcement-with teeth-of existing employment regulations and discrimination laws is essential; and zero tolerance for anyone who sexually harasses a colleague is imperative in order to continue to make progress on this issue.

## AFFORDABLE HOUSING

Safe and stable housing is the ultimate human development issue because for New York families, it is a fulcrum of opportunity (see sIdebar). This is especially the case for children, whose school outcomes are disturbed by the instability of frequent moves and whose health and safety can be deeply compromised by poor housing conditions. Housing in New York, much more than just a place to live,
determines how safe our children are playing outside, who their peers are, what schools younger children attend, the quality of the air we breathe, how long it takes us to commute to work, and more.

By any measure, New York City faces a crisis of affordable housing. Its most pernicious manifestation is in the rise in homelessness, as discussed above, but housing insecurity, overcrowding, and the pressure to come up with an unaffordable rent every month has negative impacts on the health and quality of life of the housed as well. New York City has the third-highest rent burden rate among the ten most populous metro areas-higher than all except Los Angeles and San Diego (see sidebar). In the Big Apple, just over half of renters spend 30 percent or more of their household income on housing-related costs. This burden is felt by many but is especially heavy for low-income residents, for whom the leftover 70 percent is a far smaller amount than for those with larger paychecks.

The standard formula used to determine affordability is paying under 30 percent of one's income on housing-related costs-rent plus utilities. More than this is considered rent burdened. An analysis of households renting one- and two-bedroom units done for this report reveals that citywide, about one-fifth of renters spend less than $\$ 750$ monthly on housing-related costs, just under half spend between $\$ 750$ and $\$ 1,500$, and just over one-third spends more than $\$ 1,500$-a minimum of $\$ 18,000$ annually in housing alone. But the composition by community district of these three different housing price levels varies widely. TABLE 12 shows the many different combinations of rental prices. Focusing on rental housing-since the lion's share of NYC housing is rentals and this is the housing accessible to most New Yorkers at the lower end of the income scale-in ten of the fifty-nine NYC community districts, there is a decent portion of affordable (under $\$ 750 /$ month) housing. These districts are found in every borough but Staten Island. These seemingly low rents, however, are still unaffordable to about half of those occupying the units, based on the standard of 30 percent of one's income on housing. Of these ten districts, four-East Harlem, Central Harlem, BedfordStuyvesant, and Chinatown and the Lower East Side, are in rapidly gentrifying neighborhoods where, in addition to the under $\$ 750$ units, a fairly large share of residents pay over $\$ 1,500$ in rent (see table 12). This bifurcated housing picture plays out across the city. In East Harlem, for example, about half of renters pay $\$ 750$ or less, yet nearly a quarter pay over $\$ 1,500$. This analysis looks at the rents current tenants pay, not apartments currently on the market. The median rental listing on the market in East Harlem in 2016 was in the range of about $\$ 3,000$ for a two-bedroom apartment. ${ }^{24}$ Long-time residents who are displaced or move for any other reason must face this market rate or go elsewhere. As of 2015, there were over 5,000 families in East Harlem on the public housing waiting list. ${ }^{25}$

The bright side is that urban living has become highly desirable once again, thanks in part to falling crime rates, economic opportunity for the collegeeducated, and a culture shift across the US. New York City is among the most

## Rent Burden in the Ten Most Populous US Metro Areas

table 12 Rent Costs by Community District for One- and Two-Bedroom Rentals

|  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |

Source: Measure of America calculations using US Census Bureau ACS, 2012-2016.
attractive places to live for those who can afford it. The downside is tremendous pressure on housing. Mayor de Blasio put housing affordability front and center of his mayoral campaign, and while his housing affordability plan has rolled out successfully, some see it as a weak-or even counterproductive-effort to address a massive crisis. Perhaps the most popular part of the plan has been the guarantee of free legal services in housing court for low-income tenants. A second prong of the plan, the promise to create or protect 300,000 affordable housing units by 2026, has been portrayed as one of the most ambitious housing plans in the country, but its methods have received mixed reviews. In order to create new affordable units, the city has rezoned areas in a number of low- and moderate-income neighborhoods to allow increased density and offered developers tax breaks on investments in return for making a share of the units in new developments affordable. Criticisms of the rezoning-and-building strategy are that the city foregoes millions in tax revenue in exchange for too few affordable units; that it is inviting developers into low- and moderate-income neighborhoods and compounding gentrification las one advocacy group put it, an "effort to sell off neighborhoods to luxury developers in exchange for mere scraps" ${ }^{26}$ ); and that many of the "affordable" units are only affordable to upper-middle-income tenants.

The de Blasio Housing New York plan, launched in 2014, has been meeting its stated goals; the housing crisis, however, is not showing signs of slowing down. Homelessness is at an all-time high and there are about 700 affordable housing lottery applications per available unit. ${ }^{27}$ So what can be done? With little hope the federal government will invest in affordable housing in the coming years, local government is the locus of action. Advocates are calling for a larger share of new housing units to be reserved for low-income New Yorkers who face the greatest risk of displacement. ${ }^{28}$ Raising funds through a sales tax devoted exclusively to building new housing-as Los Angeles recently did for homeless housing-would eliminate the need for enormous tax breaks to developers. ${ }^{29}$ Others have suggested embracing innovative housing alternatives such as the "tiny homes" concept to small apartment units with shared amenities-a sort of modern-day Single Room Occupancy. ${ }^{30}$ The mayor's recent Housing New York 2.0 revision of the original plan incorporates this idea with "micro-units" and a design competition for tiny homes in "otherwise undevelopable" small City-owned parcels. ${ }^{31}$

Aside from new housing, preservation is also crucial. The rapid loss of the city's existing affordable housing stock is one of the forces driving the affordability crisis. The updated housing plan unveiled a new strategy to combat displacement-funds to help nonprofit developers acquire and preserve buildings to "lock in long-term affordability." ${ }^{32}$ Currently, rent-stabilized units become deregulated at $\$ 2,700$ per month in rent, providing incentives for landowners to evict tenants to renovate apartments and thus legally raise rent to above this limit. The result is the swift pace of deregulation underway, drastically depleting the stock of affordable housing.

> Urban living has become highly desirable once again, thanks in part to falling crime rates, economic opportunity for the collegeeducated, and a culture shift across the US.

## Bох 13 Population Change in Five Brooklyn Neighborhoods, 2000-2010

The housing affordability crisis and its multiple ripple effects, arguably the well-being issue du jour in New York City, cannot be properly addressed without discussing gentrification. A term with which New Yorkers are well acquainted, gentrification describes neighborhood transformations often characterized by changing racial composition, rising incomes and rents, shifting business activity, and displacement of long-time residents.

Gentrification is a complex and contentious issue; some of the changes it can bring, such as more reliable transportation, better sanitation and other services, and cleanup of abandoned properties, can be positive and welcome. But these changes rarely occur in a vacuum.

## Gentrification is a

 complex and contentious issue; some of the changes it can bring can be positive and welcome. But these changes rarely occur in a vacuum. At the core of the debate is the question of who reaps the benefits and who bears the costs.At the core of the debate is the question of who reaps the benefits and who bears the costs. While better services are sorely needed in neighborhoods long suffering from disinvestment, the timing
is an affront to long-time residents; are those improvements an effort to address disinvestment or rather new investments to attract new residents-a whiter, more educated, higher-earning group? More importantly, regardless of the intended recipients of improvements, upscale change can be a threat. When sidewalks and streetlights are repaired and garbage service and school resourcing improve, is it a better quality of life or displacement that awaits original residents? There is no single answer here. Some stay and perceive the improvements and new opportunities to outweigh the costs, others stay but feel disoriented and even unwelcome and struggle with rising rents and prices. And some are displaced. In a city of renters, an increase in property values is not likely to enrich long-time residents-on the contrary, it raises their cost of living and may even push them out.

Quantifying displacement is not easy, and establishing causality between gentrification and displacement is even more difficult. But in New York City, there have been undeniable shifts in the composition of residents in a number of neighborhoods. The five neighborhoods with the largest increase in white residents accompanied by a decrease in residents of another racial or ethnic group are all found in Brooklyn-Bedford-Stuyvesant, Williamsburg, Clinton Hill, Park Slope and Gowanus, and Crown Heights North. Between 2000 and 2010, these neighborhoods all saw an increase of between 6,700 and 15,600 white residents paired with a simultaneous decrease in black residents (Bedford, Crown Heights North), Latino residents (Williamsburg), or both (Clinton Hill, Park Slope and Gowanus). These numbers alone cannot give an exact picture of displacement in these areas. Two points in time cannot account for movement in and out in
intervening years, a newcomer displacing an original resident of the same race, and other nuances the data do not capture. Nevertheless, in these neighborhoods it is clear that sizeable increases in the number of white residents have been accompanied by considerable decreases in black and Latino residents.

> Neighborhood change and revitalization are inevitable parts of the urban cycle-the question is whether policymakers can support the revitalization of communities without large-scale displacement and destabilization, and how.

Neighborhood change and revitalization are inevitable parts of the urban cycle-the question is whether policymakers can support the revitalization of communities without large-scale displacement and destabilization, and how. Certain strategies can bolster the benefits and mitigate the harms of gentrification, such as including the voices of residents in decision-making processes, integrating truly affordable housing into development plans, putting in place protections against displacement, and reinvesting real estate profits into public spaces and services that benefit all residents. ${ }^{33}$ These strategies can go a long way toward steering revitalization to support human development for all.

## BROOKLYN

## Thinh in in

What was the net population change in each neighborhood?


Sources: Measure of America calculations using US Census Bureau, 2010 and US2010 Longitudinal Tract Data Base, 2000.

On Manhattan's Upper West Side, for example, a quarter of rent-stabilized apartments were deregulated between 2007 and 2015. ${ }^{34}$ Getting rid of this $\$ 2,700$ threshold would eliminate that incentive to evict tenants and preserve thousands of existing affordable units. The de Blasio administration recently vowed to fight to eliminate this threshold and to limit the "major capital improvements" option, but these reforms are not up to the city alone; housing laws are decided by state legislators in Albany. This raises a political problem; New York City developers contribute large sums of money to state legislator campaigns, including to legislators outside New York City whose constituents are not affected by rent regulation laws. ${ }^{35}$

## INCARCERATION

New York City's jail incarceration rate (based on the last reported address in New York City of the justice-involved individual) stands at the lowest rate of the ten most populous US counties. NYC is reported as one county in this analysis. Its rate of 162.3 incarcerated residents per 100,000 total residents in the 15-64-year age range is less than half the rate of Dallas and well under the corresponding rates in Chicago, Los Angeles, and Miami-Dade (see FIGURE 14). ${ }^{36}$

Notwithstanding the comparatively lower impact of incarceration on the city's residents, in the 2017 fiscal year, the New York City corrections system admitted nearly 60,000 new people, with a daily average of 9,500 behind bars. ${ }^{37}$ Three-quarters of these people were being held pending the outcome of their case, most because

FIGURE 14 Jail Incarceration Rates of the Ten Most Populous US Counties


Source: Vera Institute of Justice, 2013-2015. Note: Jail incarceration rates exclude those being held in prison. Not all state jail population rates are available. NYC's five counties are reported as one county for this analysis.
they could not afford bail. ${ }^{38}$ And the racial disparities in New York, as across the nation, are glaring. This disparity is an unmistakable contributing factor to the low earnings discussed above among black men and the smallest gender earnings gap compared to every other racial and ethnic group. Recent works by Michelle Alexander (The New Jim Crow: Mass Incarceration in the Age of Colorblindness) and others have made it impossible to ignore the facts and impacts of mass incarceration on black communities, and New York City is no exception. While roughly one-fifth (22 percent) of the city's population is black, they represent more than half ( 53 percent) of the population that is incarcerated. Latino residents are also disproportionately represented among the prison population; 34 percent of incarcerated people but only 29 percent of the city population is Latino. Said another way, just over half of the city's population is black or Latino, and yet nine out of ten people in prison or jail are people of color. Only 7 percent of people experiencing incarceration are white, though white residents make up one-third of the city's population (see FIGURE 15). ${ }^{39}$

The human development impact on people in prison or jail needs no elaboration-spending time behind bars alters one's trajectory forever in the form of reduced freedom and curtailed options and opportunities in every realm. For children, parental incarceration is devastating. It heightens risks of trauma, stigma, and feelings of guilt and loss and introduces economic instability through the impact on parents' employment and housing upon release. This distortion of family life has harmed inner-city neighborhoods across the United States.


## Just over half

 of the city's population is black or Latino, and yet nine out of ten people in prison or jail are people of color.Focusing in particular on the impacts on income, FIGURE 16 shows a strong negative relationship between neighborhood earnings and incarceration. The NTAs with average to low median personal earnings are strongly associated with high incarceration rates of adults who lived in those neighborhoods upon admission to NYC Department of Corrections facilities, with a Pearson's correlation of -0.50 . Not all low-earning neighborhoods have high incarceration rates, but all neighborhoods with high incarceration rates have average to low earnings. Virtually all of the thirty NTAs with incarceration rates above 900 per 100,000 residents labout two and a half times the NYC rate of 390 per 100,000) have earnings below the NYC median. The lonely point at the very top of the figure is Ocean Hill, just east of Bedford-Stuyvesant and Crown Heights, Brooklyn, with earnings just under $\$ 30,000$ and the highest incarceration rate in the city by far. An alarming two in every hundred adults from this neighborhood are incarcerated within the city's Department of Corrections alone, not accounting for residents imprisoned in other state or federal prisons outside the city.

The punishment of incarceration lasts far beyond the time spent behind bars. Felony records have profound effects on a formerly incarcerated person's job prospects, housing, political participation, and personal relationships. A robust body of research has shown that employers view applicants with criminal records as less trustworthy, and landlords regularly discriminate against those who were formerly incarcerated. ${ }^{40}$ In New York City, justice-involved individuals are prohibited

## Not all

low-earning neighborhoods have high incarceration rates, but all neighborhoods with high incarceration rates have average to low earnings.

FIGURE 16 There Is a Strong Negative Relationship between Incarceration and Earnings in NYC Neighborhoods


Source: Jail: NYC Department of Corrections, 2011-2016. Earnings: US Census Bureau ACS, 2011-2015.
from voting while in prison and on parole, ${ }^{41}$ and nearly three-quarters of this disenfranchised population are black or Latino. ${ }^{42}$ Additionally, whether someone who was formerly incarcerated can occupy public housing is discretionary. ${ }^{43}$ In many cases, conviction for the possession of controlled substances renders someone ineligible for federal education aid (temporarily for the first and second offenses and permanently after a third), an enormous obstacle for reentering into society. ${ }^{44}$

New York State and City have made significant strides toward ending mass incarceration, with a precipitous decline since the early 1990s in both crime and the size of the incarcerated population. ${ }^{45}$ Unlike other states, New York does not disqualify formerly incarcerated people from receiving cash assistance, Temporary Assistance for Needy Families (TANF), or Supplemental Nutrition Assistance Program (SNAP) benefits. ${ }^{46}$ In 2015, New York City passed a bill that removes the felony conviction check box on job applications and, two years later, passed a law that allows people with nonviolent criminal records older than a decade to apply for their records to be permanently sealed. ${ }^{47}$

There has also been a tremendous effort to reduce the rate at which cases result in prison sentences using a range of efforts, including alternative-to-incarceration programs, ${ }^{48}$ pretrial release programs, nonviolent drug courts, and other communitybased alternatives. ${ }^{49}$ The drastic reduction in the drug offender prison population through diversion to treatment saves taxpayers $\$ 5,144$ per offender ${ }^{50}$ (the annual cost of housing someone in a New York City jail is $\$ 247,000$ ). ${ }^{51}$

Focusing in particular on teenagers, pilot programs meant to divert adolescents into more age-appropriate social services and community-based facilities have seen some success. ${ }^{52}$ Brooklyn Justice Initiatives has called for bail reform that minimizes pretrial detention and provides judges with alternative sentencing options such as social services and clinical interventions aimed at 16- to 21 -year-olds in Brownsville and Red Hook. ${ }^{53}$ Offering these young people concrete steps toward educational success and financial independence is critical. The pioneer of some of these legal diversions, Judge Jonathan Lippman, also headed a commissioned report on NYC incarceration reform in 2017.54 The report recommends that money bails and sentences that are thirty days or fewer be eliminated altogether. ${ }^{55}$ Finally, the report supports the tireless work of advocates over decades to shut down Riker's Island and recommends cutting the prison population in half over the next decade. ${ }^{56}$ Mayor de Blasio and the City Council have agreed to follow through on replacing Riker's with smaller, community-based facilities in a ten-year plan. ${ }^{57}$

> While both the rate and toll of incarceration continue to be massive public policy issues, New York State and City have made significant strides toward ending mass incarceration.

## Conclusion



## Setting a Goal and Working Together to Achieve It

Shoring up the foundations of well-being for all residents as well as building on the strengths and expanding the opportunities of the groups that are struggling today are key to a flourishing New York tomorrow; the fates of different groups of New Yorkers are inextricably linked.

We thus conclude by proposing an ambitious but achievable goal: to increase well-being for all city residents and narrow the gaps between groups, resulting in an increase in the American Human Development Index from today's score of 5.98 to 6.60 by 2025. To achieve this goal in a way that results in measurable well-being improvements for all, particularly for the most vulnerable residents, we propose the following targets:

- Health Target: Increase average life expectancy for all New Yorkers by one year, from 82.3 years to 83.3 years, by 2025, and boost life expectancy for black New Yorkers by two years, from 79.2 to 81.2, over the same time period.
- Education Target: Increase enrollment by 6 percent and boost adult educational attainment by 6 percent by 2025
- Earnings Target: Increase median earnings by $\$ 4,000$ by 2025 (in inflation-adjusted dollars).

What will it take to reach these health, education, and earnings targets and realize an increase in the NYC HD Index score of roughly 10 percent? The wellbeing gaps between places and demographic groups in New York City and the larger metro area that the American Human Development Index reveals stem from the unequal distribution of resources of all sorts: political power, social capital, public goods like schools and subway stops, money in the form of earnings and assets, and more. The list of priority areas for action that starts on PAGE 188 highlights concrete ways that more equitable access to these resources can boost index scores and improve life for all New Yorkers.

But it is important first to acknowledge that the profoundly unequal distribution of that which is valued in our society didn't just spring up out of nowhere; it is rooted in several interlinked social and economic problems that together circumscribe the life chances of some while easing the paths of others. Addressing these thorny structural issues-gender inequality, human poverty, income inequality, racism, and residential segregation-is a complex challenge. Nonetheless, it is critical to acknowledge the ways they hinder progress toward equity and freedom for all and to work to dismantle them. We do not attempt to rank these issues in terms of importance, but rather list them alphabetically.

## THE NYC GOAL: Raise the Level of Well-Being for All and Narrow the Gap Between Groups

## $2018 \rightarrow 2025$

Today's New York City HD Index score is 5.98 out of a possible 10. The goal is to increase the HD Index score to 6.60 by 2025. Achieving this demanding but attainable goal in a way that results in measurable well-being improvements for all with a focus on the city's most vulnerable residents will require the following changes in health, education, and earnings over the next seven years.

## LIFE EXPECTANCY



HEALTH: Address key determinants and drivers of health disparity to extend life expectancy for all with targeted efforts for black residents, the group with the lowest life expectancies.
$\checkmark$ All: Increase average life expectancy at birth by one year from 82.3 years to 83.3 years.
$\checkmark$ Narrow the Gap: Increase the life expectancy of black New Yorkers, currently 79.2 years, by at least two years.

ENROLLMENT \& ADULT EDUCATIONAL ATTAINMENT


EDUCATION: Increase school enrollment and educational degree attainment with a focus on Struggling New York and Precarious New York.

All: Increase enrollment and attainment by 6 percent. This would require an additional 102,000 young people ages 3-24 enrolled in school, 184,000 more adults having high school or equivalency diplomas, 130,000 more four-year college grads, and 59,000 more graduate or professional degrees.
$\checkmark$ Narrow the Gap: Focus school enrollment and educational attainment policies and programs in Struggling and Precarious New York, with particular attention to Latino families.

## MEDIAN PERSONAL EARNINGS



EARNINGS: Wages of workers at the high end of the earnings scale have been rising faster, so lifting the median with an eye toward greater income equality will require a laser focus on the wages of low- and mid-wage workers and factors such as employment discrimination and the toll of incarceration on individuals and families that thwart economic security.

All: Increase NYC median personal earnings by $\$ 4,000$, from today's $\$ 36,000$ to $\$ 40,000$.

Narrow the Gap: Lift the earnings from \$22,000 (Precarious NYC) and \$28,000 (Struggling NYC).

We fully acknowledge that they are interwoven and overlapping, and, as a result, it is impossible to draw clear lines between them. Many people live their lives at the intersection of more than one of these axes of inequality: a woman of color may face both sexism and racism; a black or Latino family that lives in a severely disadvantaged neighborhood may be grappling with the negative effects of residential segregation, human poverty, and racism as well as the interaction among them.

Gender inequality. Though girls and women today have freedoms their grandmothers could only imagine, some modern wrongs-wage discrimination, sexual harassment, and intimate partner violence, for example-would be all too familiar to their female forbearers. Public policies, workplace practices, social institutions, political representation, and societal expectations continue to lag behind today's reality, and hard-won rights are under threat. Gender discrimination, implicit bias, and social norms around what it means to be a woman or a man in our society still place limits on what girls and women can do and be. They can also harm men's health, keep boys from flourishing in ways that are authentic to who they are, and rob fathers of the chance to share in the day-today care of their children.

Human poverty. Human poverty is about more than the lack of money; it is about lacking a host of basic human capabilities required for sustaining a decent life. These capabilities include good educations, safe living environments, high-quality public services, agency and voice, social inclusion and societal respect, equal treatment under the law, a say in the decisions that affect one's life, and the promise of social mobility. In one of the richest cities in the world, one in five people experience not only material deprivation but also the indignity, exclusion, and stress that are poverty's constant companions. ${ }^{1}$ Intergenerational poverty is a reality in low-income neighborhoods across the city; because children who grow up poor experience greater deprivation and more adverse childhood events than other children, they tend to have difficulties moving out of poverty as adults and as they raise their own children. ${ }^{2}$ City programs like the increase in the minimum wage to $\$ 15$ an hour by 2019 and universal pre-K have helped to ease the burdens on poor families, but much more is needed, such as more robust income supports and greater housing assistance.

In one of the richest cities in the world, one in five people experience not only material deprivation but also the indignity, exclusion, and stress that are poverty's constant companions.

## Residential

 segregation, chokes social and economic mobility and robs too many black and Latino children of a fair shot at a flourishing, freely chosen life.Income inequality. In New York State, the top 1 percent of earners bring home 45 times more than the wages and salaries of the bottom 99 percent of earners combined-the largest gap of any US state. In Manhattan, the gap is even bigger: the top 1 percent earns a jaw-dropping 116 times more than the remaining 99 percent. ${ }^{3}$ The gaps in wealth are larger still. Higher levels of inequality are associated with more crime, worse health outcomes, greater residential segregation, higher rental costs, underinvestment in social goods like public education, weakened civic institutions, upward social comparison that leads to resentment and frustration and erodes social cohesion, and reduced social mobility. ${ }^{4}$

Racial discrimination. At the root of the disheartening inequities black New Yorkers experience-higher rates of infant mortality and poor pregnancy outcomes, lower life expectancy, disproportionate experience of harsh school discipline, higher rates of youth disconnection, gaps in earnings and employment rates, chasms in incarceration rates, and discriminatory treatment in public from everyone from shopkeepers to police officers-is anti-black racism. More than 150 years after the end of the Civil War, race remains central to determining life chances, and stigma and stereotypes still constrain people's choices and opportunities. Everyone has unconscious biases; implicit bias training, which New York City is using in many of its departments, can help people recognize and neutralize biases and assumptions that lead them to treat black people differently. Though it can be uncomfortable, people from other racial and ethnic groups, whites in particular, need to grapple with their conscious and unconscious biases and change their behavior.

Residential segregation. Of the country's 102 most populous metro areas, the New York metro area is the second most-segregated for blacks and the third most-segregated for Asians and Latinos. Residential segregation by race and ethnicity and by income create vastly different living environments across the metro area and in the city proper, concentrating money, power, social capital, security, and first-rate public goods in affluent, mostly white areas and poverty, deteriorating housing, poor-quality public services, and environmental risks in the places where low-income black and Latino families live. Neighborhoods shape social networks, create powerful norms, pattern expectations and aspirations, and play an outsized role in shaping the life chances of children, ${ }^{5}$ who are more likely than adults to live in segregated areas. ${ }^{6}$ Residential segregation, created not by happenstance or personal preference but by deliberate policy, chokes social and economic mobility and robs too many black and Latino children of a fair shot at a flourishing, freely chosen life.

## box 2 The New York Metro Region: Looking Ahead

New York City does not exist in isolation from the wider tri-state area, and many wellbeing concerns-transportation equity and environmental sustainability, for example-are regional in nature. Our final recommendations to boost American Human Development Index scores focus on the five boroughs; this focus allowed us to zero in on concrete, measurable, attainable goals that the city, as a cohesive political and administrative body, can work toward. It is nonetheless imperative to look beyond city limits and work toward a more equitable region where all residents have the tools to live freely chosen lives of value.

The recommendations in this report are meant to complement rather than compete with goals set by others, and for direction on how to improve well-being in the region, we turned to the experts, the Regional Plan
Association (RPA). The RPA, a ninety-yearold research and advocacy organization, is recognized as the authority in long-term planning for the tri-state region. As this report was being written, the RPA released its Fourth
Regional Plan, a blueprint for the region's growth and development for the coming decades. The Fourth Regional Plan is built on four core values-equity, prosperity, health, and sustainability-that are in line with our definition of development and the belief that progress depends in large part on closing the gaps created by historical disadvantage. Grounded in these values and with its sights on the year 2040, the Plan identifies a number of priorities, which fall into four areas: governance reform, transportation, climate change, and affordability. These
priorities include overhauling the planning and development process to be more efficient and inclusive; improving and modernizing transportation systems, from sidewalks to airports; mitigating and adapting to climate change; and ensuring the economic security of all residents. These priorities are accompanied by detailed strategies, like adopting participatory budgeting to foster civic engagement at the local level and turning city street design upside down by prioritizing pedestrians, cyclists, and transit users, followed by goods movement, shared services, and, lastly, the private automobile.

Certain priorities and strategies of the Fourth Regional Plan directly overlap with the recommendations in this report, like preserving and expanding affordable housing, closing gaps along racial, ethnic and gender lines, addressing the homelessness crisis, increasing life expectancy, reducing de facto racial segregation, and increasing real incomes, particularly for low-income families. Others, like improving the regional rail system, are regional in nature and do not appear on our recommendations; however, all share the same end goal of this reportto expand opportunity for all residents. For this reason, rather than offering a new set of regional recommendations, we support those offered by the RPA and urge those working to improve well-being and equity in the wider New York metro region to use the Plan as a guide.

More information and the full text of the Fourth Regional Plan can be found at www.RPA.org.

## Recommendations for Action

MAKE THE HEALTHY CHOICE THE EASIEST AND MOST LIKELY CHOICE

Smoking rates in the United States declined dramatically over the past few decades not because of a massive collective wave of will power but as a result of a web of extremely effective laws, taxes, public health campaigns, and changing norms that together made cigarette smoking more expensive, inconvenient, and socially undesirable. The myriad individual health choices we make each day happen within the context of opportunities and limitations in our larger environment. Public education, legislation, and prevention programs that keep people from taking up harmful habits in the first place and neighborhood, school, and work environments in which healthy choices are not just possible but the easiest and most likely choice are key to longer lives.

## ADDRESS THE HEALTH CHALLENGES OF BLACK NEW YORKERS

Black New Yorkers have the lowest life expectancy of the four major racial and ethnic groups studied in this report. Examples of health inequities in New York City are a black infant mortality rate that is three times the rate for white babies and the tragic toll of homicide on black adolescent boys, who are nineteen times as likely to lose their lives to homicide as white adolescent boys. Working to end the implicit bias black New Yorkers face in employment, in health care, in schools, and in treatment by law enforcement and addressing racial battle fatigue would reduce the chronic stress so detrimental to health; making living while black less stressful is critical. Addressing residential segregation is likewise imperative.

## SUPPORT THE DEVELOPMENT OF THE LITTLEST NEW YORKERS

We cannot continue to pin all of our hopes on schools to remedy the educational gaps that develop well before a child's first day in kindergarten and widen through childhood. Nearly all parents have the same goal: to give their children the best start in life. But the resources they have to bring to this task vary immensely. Disruptions such as homelessness, untreated mental illness or addiction, and incarceration of a family member as well as abuse and neglect pose particularly acute threats to child development. And more common challenges, such as poverty, unemployment, limited parental education, or a family breakup, can also hamper parents' ability to be the mothers and fathers they want to be. Early childhood is a unique life stage when proven, high-quality interventions can change the trajectory of a child's life; as a society, we should seize that chance in ways that support and empower parents, families, and communities with knowledge and resources, delivered with kindness, cultural sensitivity, and respect. New York City's universal pre-K, now expanding to include three-year-olds, was truly a leap in the right direction. Expanding home visitation to every family that wants it and improving the quality of early childhood care are important next steps.

## RETHINK SCHOOL CHOICE

The city has managed to increase the on-time high school graduation rate every year for a decade, an impressive achievement for the country's largest public school system—especially given that three in four of the system's 1.1 million students live in poverty. Nonetheless, huge gaps in school quality and student outcomes exist between racial and ethnic groups, neighborhoods, and types of schools. Part of the reason is residential segregation; poor children and black and Latino children are disproportionately concentrated in schools where a large majority of children are poor, and these schools tend to have fewer resources, less qualified teachers, fewer advanced classes, more children with special needs, and a less rich, demanding curriculum. Part relates to the individual challenges that students from low-income families are more likely to face, such as moving a lot, poor health or nutrition, or exposure to violence, all of which interfere with learning. Part stems from the fact that there are just too few good schools. But part of the inequality in outcomes stems from the school choice process itself. The children left behind in the schools from which others have fled, particularly children from low-income black and Latino neighborhoods in the Bronx and Central Brooklyn, end up learning alongside other children who share their socioeconomic disadvantages, robbed of the resources, effective parental advocates, and peers that would otherwise improve their scholastic prospects. For these children, the link between neighborhood conditions and school quality that school choice was meant to break remains as strong as ever. Such children need the very best schools we as a society can provide them; today, they get the worst ones.

## MEANINGFULLY ADDRESS YOUTH DISCONNECTION AMONG BLACK AND LATINO YOUTH

In some NYC neighborhoods, only about 5 percent of young people ages 16 to 24 are "disconnected"-neither working nor in school. In others, including seven community districts in Brooklyn, the Bronx, and Manhattan, upwards of 20 percent of teens and young adults are. These districts are 80 percent or more black and Latino. Following almost a decade of falling youth unemployment and rising graduation rates, those who remain disconnected face challenges that hard work and grit alone are unlikely to overcome. Cities across the nation have been tackling youth disconnection by setting goals across previously fractured sectors (education, business, criminal justice, philanthropy, etc.); building education and workforce systems that offer high-quality opportunities and counter discriminatory attitudes; and designing programs characterized by paid work, long-term commitments, and increased guidance to help young people navigate the transition to adulthood.

> Huge gaps in school quality and student outcomes exist between racial and ethnic groups, neighborhoods, and types of schools.

New Yorkers themselves have to be willing to make room in their neighborhoods for supportive housing and shelters.

## PREVENT AND ELIMINATE HOMELESSNESS

One sure method to increase life expectancy, improve children's educational outcomes, and raise incomes is to reduce the share of the population that experiences both long-term and intermittent homelessness. New York City has some of the country's strongest shelter laws and has developed ambitious targets and strong collaboration with philanthropic and nonprofit sector partners. Yet homelessness endures. Success in moving the dial on this issue will only occur if the city accepts the costs-both fiscal and political-of tackling the affordable housing crisis; expanding services in mental health, substance abuse, domestic violence, and other reasons people enter shelters; and scaling up supportive housing for the chronically homeless. But the city can't do it alone; New Yorkers themselves have to be willing to make room in their neighborhoods for supportive housing and shelters.

## PRESERVE AND EXPAND AFFORDABLE HOUSING

While its most visible and pernicious consequence is homelessness, the affordable housing crisis in New York City has negative health, education, and earnings impacts on low- and middle-income families and individuals in neighborhoods across the city. Addressing this crisis requires policies, investments, and incentives that will stanch the loss of the existing affordable housing stock, increase the pace of construction of new affordable units with priority access for those who face the greatest risk of displacement, and improve stagnating living standards for the middle class, who struggle to stay in a city with notoriously high rental prices.

## ADDRESS THE CHALLENGES OF MID-WAGE WORKERS

The successful Fight for $\$ 15$ movement for minimum-wage workers will improve the lives of low-income New Yorkers across the city. The time is ripe to expand the focus to include workers in the middle. Because of far-reaching shifts in the economy and labor market, jobs that pay middle-class wages are disappearing in New York City and across the country. Added to this is the more recent "gig economy" trend of short-term contracts and freelance work with few benefits and little job security. These wage trends combined with sky-high housing costs mean that mid-wage workers are really struggling. Many of the forces and policies that affect middle-class wages are beyond the city's control. But legislation and programs to increase housing affordability are essential, as is regulating the gig economy in ways that allow workers to experience its advantages (work flexibility, independence, and opportunities for entrepreneurship) without entirely losing economic security and standard worker protections.

## PROMOTE GENDER EQUITY IN PAY

The low relative pay of women is a drag on the city's Income Index score; boosting women's wages is a sure route to higher HD Index scores and better outcomes for children, especially those growing up in female-headed households. Some of this gap can be linked to women's traditional courses of study, to the fact that women are more likely to work part time, and to occupational differences. The gender division of labor-who does what when it comes to work in and outside the homeis also a culprit; women typically assume the bulk of responsibility for unpaid care work: looking after children, caring for older relatives, doing housework, communicating with schools and doctors, and more. And as the \#MeToo movement has made abundantly clear, women encounter harassment, and even assault, in the workplace to a shocking degree, incidents that derail careers and have long-lasting mental and physical health impacts. New paid parental and sick leave policies are important steps forward, as is the city's universal 3 - and pre-K. More access to subsidized child care; enforcement-with teeth-of existing employment regulations and discrimination laws; and zero tolerance of sexual harassment are all imperative in order to make progress on the wage divide.

## CONTINUE TO REDUCE INCARCERATION RATES AND THEIR COLLATERAL CONSEQUENCES

New York City is making tremendous strides in reducing rates of incarceration and the collateral harms of arrests and sentences. But many consequences, a result of federal, state, and local laws, continue to curtail the rights and opportunities of people with criminal records in many aspects of life-work, housing, voting, job licensing and certificate programs, eligibility for social support, and the fines and fees they incur long after they have served their time. We must continue to support the dismantling of restrictions and mechanisms that have devastating human development impacts on individuals, their families, and whole communities.

## INVEST IN A MORE EQUITABLE TRANSPORTATION SYSTEM

Transportation is a critical human development issue because safe, convenient, and dependable transportation expands opportunities and options. A reliable transportation system allows residents to access jobs, health and education services, and recreation without depleting the finite, valuable resources of time and money. Decades of disinvestment and mismanagement, long-term neglect of maintenance, and the lingering effects of Hurricane Sandy in 2012 have together created a system characterized by inequitable access and quality and a disconnect between those who benefit from different types of transportation and those who pays the costs.

Boosting women's wages is a sure route to higher HD Index scores and better outcomes for children, especially those growing up in female-headed households.

# American Human Development Indicators 

The following indicator tables were prepared using the latest available official government data. All data are standardized in order to ensure comparability.

To download Excel or .csv files for the indicators, go to: www.measureofamerica.org/download-agreement.

New York Metropolitan Region
Five New Yorks

| RANK | $\begin{gathered} \text { HD } \\ \text { INDEX } \end{gathered}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults $25+$ ) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEGREE } \\ \text { (\%f adults } 25+\text { ) } \end{gathered}$ | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults $25+$ ) | school ENROLLMENT (\% ages 3 to 24 ) | MEDIAN EARNINGS (\$) | education index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK METROPOLITAN | 6.32 | 82.2 | 13.9 | 38.6 | 16.0 | 80.6 | 38,641 | 6.00 |
| 1 Gilded New York | 9.18 | 86.2 | 5.0 | 72.7 | 35.8 | 85.6 | 69,136 | 9.11 |
| 2 Opportunity-Rich New York | 7.68 | 84.2 | 7.4 | 51.3 | 22.6 | 83.4 | 50,342 | 7.41 |
| 3 Main Street New York | 6.32 | 82.4 | 12.5 | 35.6 | 14.0 | 80.8 | 39,043 | 5.85 |
| 4 Struggling New York | 4.88 | 80.7 | 22.6 | 24.6 | 9.2 | 77.6 | 28,587 | 4.40 |
| 5 Precarious New York | 3.59 | 78.5 | 32.0 | 13.9 | 3.4 | 76.6 | 22,342 | 3.16 |

## DATA SOURCES:

Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.
Education and earnings: US Census Bureau ACS, 2015.

## New York Metropolitan Region HD Index by Gender and Race/Ethnicity

| Rank | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | EXPECTANCY AT BIRTH (years) | Less than HIGH SCHOOL (\% of adults $25+$ | AT LEAST BACHELOR'S DEGRE (\% of adults $25+$ ) | graduate or PROFESSIONAL DEGREE <br> (\% of adults $25+$ ) | SCHOOL ENROLLMENT [\% ages 3 to 24 ] | MEDIAN EARNINGS (\$) | Education index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| UNITED STATES | 5.17 | 79.3 | 12.9 | 30.6 | 11.6 | 77.3 | 31,416 | 5.17 |
| NEW YORK METROPOLITAN | 6.32 | 82.2 | 13.9 | 38.6 | 16.0 | 80.6 | 38,641 | 6.00 |
| GENDER |  |  |  |  |  |  |  |  |
| 1 Men | 6.30 | 79.8 | 14.1 | 38.3 | 15.6 | 79.9 | 45,005 | 5.89 |
| 2 Women | 6.25 | 84.4 | 13.6 | 38.8 | 16.4 | 81.4 | 32,459 | 6.10 |
| RACE/ETHNICITY |  |  |  |  |  |  |  |  |
| 1 Asian | 7.54 | 86.6 | 16.8 | 54.2 | 22.9 | 85.4 | 41,583 | 7.32 |
| 2 White | 7.16 | 81.1 | 6.2 | 47.7 | 20.7 | 82.6 | 50,253 | 7.14 |
| 3 Black | 4.87 | 77.9 | 14.9 | 23.8 | 8.8 | 77.8 | 32,223 | 4.70 |
| 4 Latino | 4.83 | 83.9 | 30.9 | 17.9 | 5.7 | 77.4 | 26,040 | 3.55 |
| GENDER AND RACE/ETHNICITY |  |  |  |  |  |  |  |  |
| 1 Asian Women | 7.74 | 90.0 | 17.8 | 53.7 | 21.3 | 85.9 | 37,404 | 7.23 |
| 2 Asian Men | 7.66 | 85.6 | 15.7 | 54.8 | 24.8 | 85.0 | 45,795 | 7.44 |
| 3 White Men | 7.44 | 80.1 | 6.3 | 48.4 | 20.3 | 82.2 | 60,417 | 7.11 |
| 4 White Women | 7.15 | 84.5 | 6.2 | 47.0 | 21.1 | 83.1 | 40,496 | 7.18 |
| 5 Black Women | 5.39 | 81.5 | 14.5 | 25.6 | 9.9 | 78.7 | 31,304 | 4.94 |
| 6 Black Men | 4.62 | 75.6 | 15.4 | 21.5 | 7.5 | 76.8 | 34,509 | 4.43 |
| 7 Latina Women | 4.73 | 85.4 | 29.7 | 19.6 | 6.5 | 78.6 | 21,834 | 3.83 |
| 8 Latino Men | 4.68 | 81.2 | 32.1 | 16.0 | 5.0 | 76.2 | 29,905 | 3.27 |

[^13]
## New York Metropolitan Region Human Development Indicators for Asian and Latino Subgroups

| ASIAN SUBGROUP | $\begin{aligned} & \text { LESS THAN } \\ & \text { HIGH SCHOOL } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | $\begin{aligned} & \text { AT LEAST } \\ & \text { BACHELOR'S } \\ & \text { DEGREE } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults $25+$ ) | SCHOOL ENROLLMENT (\% ages 3 to 24 ) | MEDIAN EARNINGS $(\$)$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Chinese | 28.0 | 42.6 | 18.9 | 85.2 | 35,424 |
| Men | 27.3 | 42.4 | 19.9 | 84.5 | 37,130 |
| Women | 28.7 | 42.7 | 18.0 | 86.0 | 32,038 |
| Indian | 11.2 | 64.2 | 34.2 | 85.9 | 52,796 |
| Men | 9.8 | 65.2 | 36.6 | 86.2 | 65,049 |
| Women | 12.6 | 63.2 | 31.6 | 85.7 | 41,838 |
| Korean | 6.1 | 62.2 | 19.4 | 88.6 | 43,452 |
| Men | 4.0 | 64.3 | 21.4 | 85.2 | 49,484 |
| Women | 7.8 | 60.4 | 17.8 | 92.1 | 37,931 |
| Filipino | 4.9 | 66.8 | 14.0 | 86.5 | 50,329 |
| Men | 4.6 | 62.3 | 12.6 | 87.9 | 44,409 |
| Women | 5.1 | 69.8 | 14.9 | 85.1 | 52,398 |
| Bangladeshi | 19.8 | 34.1 | 11.9 | 79.2 | 25,084 |
| Men | 17.6 | 40.9 | 12.5 | 78.0 | 27,166 |
| Women | 22.3 | 26.9 |  | 80.6 | 18,928 |
| Pakistani | 18.9 | 42.5 | 19.2 | 85.6 | 30,928 |
| Men | 16.0 | 44.3 | 22.1 | 89.8 | 32,681 |
| Women | 22.6 | 40.1 | 15.4 | 81.3 |  |
| Japanese | 3.2 | 68.9 | 21.4 | 91.7 | 52,168 |
| Men | 3.3 | 80.9 |  | 87.7 | 64,424 |
| Women | 3.2 | 61.9 | 21.2 | 98.2 |  |
| Two or More Asian | 16.7 | 48.3 |  | 89.9 |  |
| Men | 14.2 | 56.2 |  | 87.3 |  |
| Women | 18.5 | 42.5 |  | 92.6 |  |
| Vietnamese | 28.6 | 37.2 | 12.6 | 77.1 | 30,575 |
| Men | 26.2 | 34.3 |  | 76.7 | 30,768 |
| Women | 30.7 | 40.0 |  | 77.8 |  |
| Taiwanese | 7.6 | 79.7 | 50.2 | 74.4 |  |
| Men | 5.4 | 86.1 | 63.5 | 86.0 |  |
| Women | 9.0 | 75.3 | 41.1 | 66.9 |  |


| Latino/A SUBGRoup |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| PR, DR, Cuban | $\mathbf{2 8 . 7}$ | $\mathbf{1 7 . 4}$ | $\mathbf{5 . 2}$ | $\mathbf{7 6 . 8}$ | $\mathbf{2 7 , 7 6 7}$ |
| Men | 28.8 | 16.0 | 4.5 | 75.2 | 32,160 |
| Women | 28.6 | 18.5 | 5.9 | 78.3 | 24,045 |
| Central American | $\mathbf{4 3 . 9}$ | $\mathbf{1 2 . 3}$ | $\mathbf{3 . 8}$ | $\mathbf{7 2 . 8}$ | $\mathbf{2 3 , 7 2 9}$ |
| Men | 47.1 | 10.3 | 2.8 | 70.2 | 26,239 |
| Women | 40.2 | 14.5 | 5.0 | 76.1 | 19,838 |
| Mexican | $\mathbf{4 4 . 6}$ | $\mathbf{1 2 . 0}$ | $\mathbf{4 . 6}$ | $\mathbf{7 7 . 6}$ | $\mathbf{2 1 , 7 0 1}$ |
| Men | 44.6 | 9.5 | 3.9 | 77.8 | 24,520 |
| Women | 44.7 | 15.2 | 5.4 | 77.4 | $\mathbf{1 7 , 1 6 1}$ |
| South American | $\mathbf{2 2 . 4}$ | $\mathbf{2 2 . 4}$ | $\mathbf{7 . 1}$ | $\mathbf{8 0 . 4}$ | $\mathbf{2 6 , 2 4 1}$ |
| Men | 23.7 | 19.6 | 6.1 | 80.2 | $\mathbf{3 0 , 8 7 1}$ |
| Women | 21.1 | 25.1 | 8.0 | 80.6 | 21,547 |
| Other Latino | $\mathbf{3 2 . 3}$ | $\mathbf{2 3 . 2}$ | $\mathbf{8 . 9}$ | $\mathbf{8 4 . 8}$ | $\mathbf{2 6 , 2 4 2}$ |
| Men | 32.5 | 25.7 | 9.9 | 83.9 | 30,920 |
| Women | 32.0 | 20.5 | 7.9 | 85.8 | 22,402 |
| Spaniard | $\mathbf{1 3 . 2}$ | $\mathbf{4 8 . 2}$ | $\mathbf{2 2 . 0}$ | $\mathbf{8 5 . 3}$ | $\mathbf{4 7 , 0 7 3}$ |
| Men | 11.5 | 47.1 | 23.7 | 89.2 | 52,386 |
| Women | 14.8 | 49.3 | 20.3 | 82.5 | $\mathbf{4 1 , 6 2 3}$ |

DATA SOURCE: US Census Bureau ACS, 2015.

New York Metropolitan Region
Human Development Indicators by Nativity

| ORDERED BY POPULATION SIZE |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| NATIVITY | $\begin{aligned} & \text { LESS THAN } \\ & \text { HIGH SCHOOL } \\ & (\% \text { of adults } 25+\text { ) } \end{aligned}$ | AT LEAST BACHELOR'S DEGREE [\% of adults $25+$ ] | GRADUATE OR PROFESSIONAL DEGREE <br> [\% of adults $25+$ ] | SCHOOL ENROLLMENT (\%ages 3 to 24) | MEDIAN EARNINGS (\$) |
| Native-Born | 8.2 | 41.8 | 17.3 | 81.9 | 41,730 |
| Foreign-Born | 24.2 | 32.6 | 13.6 | 69.8 | 32,074 |
| Asian |  |  |  |  |  |
| Native-Born | 4.8 | 73.6 | 29.8 | 87.5 | 44,955 |
| Foreign-Born | 18.6 | 51.4 | 21.9 | 80.9 | 41,253 |
| Black |  |  |  |  |  |
| Native-Born | 14.1 | 23.5 | 8.4 | 78.7 | 31,226 |
| Foreign-Born | 16.4 | 24.3 | 9.5 | 68.0 | 35,553 |
| Latino |  |  |  |  |  |
| Native-Born | 20.3 | 22.9 | 8.0 | 80.4 | 30,357 |
| Foreign-Born | 38.6 | 14.1 | 4.1 | 61.0 | 23,940 |
| White |  |  |  |  |  |
| Native-Born | 4.7 | 48.4 | 20.7 | 82.9 | 50,321 |
| Foreign-Born | 14.9 | 43.8 | 21.1 | 75.4 | 49,538 |

## DATA SOURCE:

Education and earnings: US Census Bureau ACS, 2015

New York City
HD Index by Gender and Race/Ethnicity

| GROUP | $\stackrel{\text { HD }}{\text { INDEX }}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults $25+$ ) | AT LEAST <br> BACHELOR'S DEGREE <br> (\% of adults $25+$ ) | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults $25+$ ) | SCHOOL ENROLLMENT (\%ages 3 to 24) | MEDIAN EARNINGS (\$) | education Index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| UNITED STATES | 5.17 | 79.3 | 12.9 | 30.6 | 11.6 | 77.3 | 31,416 | 5.17 |
| NEW YORK METROPOLITAN | 6.32 | 82.2 | 13.9 | 38.6 | 16.0 | 80.6 | 38,641 | 6.00 |
| NEW YORK CITY (ALL FIVE BOROUGHS) | 5.98 | 82.3 | 19.1 | 36.8 | 15.1 | 78.6 | 35,934 | 5.45 |
| Women | 6.16 | 85.3 | 19.0 | 37.2 | 15.6 | 78.8 | 32,102 | 5.52 |
| Men | 5.87 | 80.2 | 19.3 | 36.3 | 14.6 | 78.4 | 39,313 | 5.37 |
| White | 7.63 | 82.6 | 6.9 | 57.4 | 26.1 | 81.5 | 52,290 | 7.67 |
| Asian | 6.80 | 89.3 | 25.1 | 42.1 | 15.3 | 82.1 | 32,156 | 5.76 |
| Black | 4.99 | 79.2 | 16.8 | 23.7 | 8.6 | 77.1 | 32,059 | 4.54 |
| Latino | 4.58 | 83.5 | 34.1 | 17.2 | 5.8 | 75.8 | 25,086 | 3.25 |
| Bronx | 4.38 | 80.4 | 29.4 | 19.4 | 6.7 | 77.4 | 25,767 | 3.74 |
| Women | 4.58 | 83.3 | 28.6 | 20.9 | 7.4 | 78.1 | 22,967 | 3.93 |
| Men | 4.06 | 76.9 | 30.3 | 17.7 | 5.7 | 76.8 | 28,502 | 3.52 |
| Asian | 6.69 | 94.1 | 23.8 | 38.3 | 16.3 | 80.6 | 30,223 | 5.55 |
| White | 6.23 | 79.5 | 15.8 | 36.5 | 18.1 | 88.0 | 40,026 | 6.61 |
| Black | 4.69 | 78.5 | 20.1 | 21.8 | 6.7 | 78.2 | 30,241 | 4.33 |
| Latino | 3.95 | 82.7 | 38.4 | 12.8 | 3.4 | 75.8 | 21,579 | 2.75 |
| Brooklyn | 5.75 | 82.0 | 19.4 | 34.9 | 13.9 | 78.7 | 33,738 | 5.31 |
| Women | 5.88 | 84.3 | 19.1 | 35.6 | 14.5 | 78.8 | 30,735 | 5.39 |
| Men | 5.57 | 79.2 | 19.7 | 34.1 | 13.2 | 78.7 | 37,261 | 5.22 |
| White | 7.24 | 82.8 | 8.8 | 54.0 | 23.4 | 81.0 | 46,130 | 7.27 |
| Asian | 5.80 | 88.9 | 36.7 | 32.2 | 10.5 | 83.4 | 24,810 | 4.72 |
| Black | 5.06 | 80.2 | 16.1 | 21.7 | 7.7 | 76.5 | 31,714 | 4.39 |
| Latino | 4.42 | 82.5 | 36.1 | 18.4 | 6.6 | 75.2 | 25,030 | 3.18 |
| Manhattan | 7.71 | 84.2 | 13.0 | 60.8 | 28.8 | 76.6 | 52,364 | 7.21 |
| Men | 7.81 | 81.8 | 12.6 | 61.4 | 29.1 | 77.7 | 61,791 | 7.37 |
| Women | 7.78 | 86.2 | 13.5 | 60.2 | 28.6 | 75.6 | 49,017 | 7.06 |
| Asian | 8.97 | 89.8 | 14.8 | 66.9 | 32.0 | 78.0 | 60,318 | 7.68 |
| White | 8.80 | 82.6 | 1.5 | 83.3 | 39.6 | 79.5 | 73,982 | 9.47 |
| Latino | 4.95 | 84.8 | 34.7 | 23.7 | 10.7 | 74.6 | 25,753 | 3.60 |
| Black | 4.69 | 76.6 | 18.4 | 30.7 | 14.1 | 71.8 | 33,061 | 4.52 |
| Queens | 6.07 | 85.1 | 19.5 | 31.3 | 11.0 | 79.6 | 33,161 | 5.10 |
| Women | 6.32 | 87.4 | 19.0 | 31.8 | 11.7 | 80.3 | 31,510 | 5.24 |
| Men | 5.79 | 82.3 | 19.9 | 30.7 | 10.2 | 78.9 | 35,627 | 4.96 |
| White | 7.18 | 83.5 | 9.5 | 42.5 | 18.1 | 83.2 | 46,846 | 6.70 |
| Asian | 6.72 | 90.3 | 23.6 | 38.0 | 11.1 | 82.0 | 31,149 | 5.44 |
| Black | 5.88 | 82.6 | 14.2 | 25.9 | 9.3 | 78.8 | 36,246 | 4.94 |
| Latino | 5.55 | 89.2 | 29.1 | 16.9 | 4.8 | 76.0 | 26,444 | 3.42 |
| Staten Island | 6.35 | 81.1 | 10.2 | 32.6 | 14.7 | 82.1 | 41,893 | 5.97 |
| Men | 6.37 | 78.8 | 9.8 | 31.9 | 13.7 | 81.2 | 49,765 | 5.83 |
| Women | 6.36 | 83.2 | 10.6 | 33.1 | 15.6 | 83.1 | 36,429 | 6.11 |
| Asian | 8.24 | 90.4 | 14.9 | 48.4 | 22.8 | 91.7 | 43,101 | 7.74 |
| White | 6.75 | 80.9 | 7.1 | 34.7 | 16.4 | 80.6 | 49,213 | 6.14 |
| Latino | 5.43 | 82.3 | 18.5 | 17.4 | 5.2 | 82.5 | 32,315 | 4.55 |
| Black | 5.08 | 78.2 | 15.4 | 23.8 | 10.4 | 80.8 | 33,143 | 5.03 |

DATA SOURCES:
Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.
Education and earnings: US Census Bureau ACS, 2015.

New York City
Human Development Indicators: Race/Ethnicity by Gender

| GROUP |  | AT LEAST BACHELOR'S DEGREE (\% of adults 25+] | GRADUATE OR PROFESSIONAL DEGREE $\text { ( } \% \text { of adults } 25+\text { ) }$ | SCHOOL ENROLLMENT [\%ages 3 to 24] | MEDIAN EARNINGS (\$) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Asian |  |  |  |  |  |
| Men | 24.1 | 41.7 | 15.7 | 81.6 | 34,700 |
| Women | 26.0 | 42.4 | 14.9 | 82.6 | 31,135 |
| Black |  |  |  |  |  |
| Men | 17.8 | 21.4 | 7.5 | 76.5 | 34,423 |
| Women | 16.1 | 25.4 | 9.5 | 77.7 | 30,982 |
| Latino |  |  |  |  |  |
| Men | 35.1 | 15.9 | 5.5 | 75.0 | 27,143 |
| Women | 33.2 | 18.4 | 6.2 | 76.7 | 21,538 |
| White |  |  |  |  |  |
| Men | 6.7 | 57.6 | 25.0 | 82.6 | 61,199 |
| Women | 7.1 | 57.2 | 27.2 | 80.3 | 48,063 |

DATA SOURCE: US Census Bureau ACS, 2015.

## New York City <br> Human Development Indicators for Asian and Latino Subgroups

| ASIAN SUBGROUP | $\begin{aligned} & \text { LESS THAN } \\ & \text { HIGH SCHOOL } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | AT LEAST BACHELOR'S DEGREE \% of adults $25+$ ) | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults $25+$ ] | SCHOOL ENROLLMENT [\% ages 3 to 24] | $\qquad$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Chinese | 35.0 | 33.5 | 11.8 | 83.3 | 26,674 |
| Men | 34.4 | 32.8 | 11.9 | 83.6 | 27,218 |
| Women | 35.6 | 34.1 | 11.6 | 83.0 | 25,696 |
| Indian | 20.5 | 45.2 | 22.0 | 78.7 | 36,537 |
| Men | 18.6 | 45.9 | 23.8 | 77.8 | 42,256 |
| Women | 22.5 | 44.4 | 20.0 | 79.7 | 31,616 |
| Korean | 9.9 | 55.8 | 17.0 | 85.9 | 42,105 |
| Men | 6.1 | 54.3 | 15.6 | 78.9 | 45,001 |
| Women | 12.6 | 56.9 | 18.0 | 92.2 |  |
| Filipino | 4.9 | 66.5 | 15.4 | 85.0 | 45,739 |
| Men | 4.9 | 64.3 |  | 92.5 | 41,803 |
| Women | 4.9 | 67.8 | 17.2 | 78.1 | 49,805 |
| Bangladeshi | 21.4 | 32.8 | 12.0 | 78.9 | 23,460 |
| Men | 19.3 | 39.1 |  | 79.2 | 25,861 |
| Women | 23.8 | 25.7 |  | 78.5 |  |
| Pakistani | 24.6 | 32.7 | 12.7 | 84.4 | 30,998 |
| Men | 19.7 | 34.6 |  | 83.2 | 31,240 |
| Women | 32.1 | 29.8 |  | 86.0 |  |
| Japanese | 2.1 | 70.9 | 24.9 | 85.9 | 50,978 |
| Men | 2.9 | 85.0 |  | 82.8 | 61,235 |
| Women | 1.6 | 62.7 |  | 94.4 |  |
| Two or More Asian | 21.3 | 48.6 |  | 84.1 |  |
| Two or More Asian Male | 20.8 | 54.2 |  | 81.5 |  |
| Two or More Asian Female | 21.6 |  |  | 86.1 |  |
| Vietnamese | 32.9 | 41.6 |  | 65.7 |  |
| Men | 32.2 |  |  |  | 31,773 |
| Women | 33.7 | 46.6 |  |  |  |
| Taiwanese | 13.4 | 73.7 | 38.8 | 78.9 |  |
| Men | 12.0 | 77.4 |  | 84.7 |  |
| Women | 14.2 | 71.5 |  |  |  |


| LATINo/A SUBGROUP |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
| PR, DR, Cuban | $\mathbf{3 3 . 8}$ | $\mathbf{1 5 . 6}$ | $\mathbf{4 . 8}$ | $\mathbf{7 4 . 8}$ | $\mathbf{2 5 , 7 6 3}$ |
| Men | 34.2 | 14.4 | 4.2 | 73.5 | 29,365 |
| Women | 33.5 | 16.4 | 5.2 | 76.2 | 22,336 |
| South American | $\mathbf{2 6 . 9}$ | $\mathbf{2 2 . 3}$ | $\mathbf{8 . 0}$ | $\mathbf{7 6 . 7}$ | $\mathbf{2 5 , 0 8 5}$ |
| Men | 29.1 | 20.6 | 7.9 | 75.5 | 28,945 |
| Women | 24.7 | 24.0 | 8.2 | 77.8 | 20,649 |
| Mexican | $\mathbf{4 4 . 8}$ | $\mathbf{1 2 . 9}$ | $\mathbf{5 . 6}$ | $\mathbf{7 8 . 4}$ | $\mathbf{2 1 , 1 9 1}$ |
| Men | 45.2 | 10.7 |  | 80.0 | 23,052 |
| Women | 44.3 | 15.9 |  | 76.8 | $\mathbf{1 6 , 5 6 7}$ |
| Central American | $\mathbf{3 7 . 0}$ | $\mathbf{1 7 . 9}$ | $\mathbf{5 . 6}$ | $\mathbf{7 3 . 0}$ | $\mathbf{2 6 , 1 8 3}$ |
| Men | 38.5 | 15.3 |  | 69.7 | 27,953 |
| Women | 35.7 | 20.2 |  | 76.8 | 22,732 |
| Other Latino | $\mathbf{3 7 . 6}$ | $\mathbf{2 0 . 0}$ |  | $\mathbf{8 1 . 8}$ | $\mathbf{2 6 , 9 3 4}$ |
| Men | 38.2 |  |  | 80.7 | 29,091 |
| Women | 37.0 | 17.0 |  | 83.3 | $\mathbf{2 4 , 2 0 1}$ |
| Spaniard | $\mathbf{1 1 . 9}$ | $\mathbf{5 6 . 8}$ | $\mathbf{2 9 . 5}$ | $\mathbf{7 6 . 3}$ | $\mathbf{5 1 , 3 7 3}$ |
| Men | 11.0 | 57.4 |  | 85.4 |  |
| Women | 12.7 | 56.3 |  | 71.6 |  |

DATA SOURCE: US Census Bureau ACS, 2015.

## New York City <br> HD Index by Nativity

| GROUP | $\underset{\text { INDEX }}{\text { HD }}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults $25+$ ) | AT LEAST BACHELOR'S DEGREE <br> (\% of adults $25+$ ) | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of aduts $25+$ ) | $\begin{aligned} & \text { SCHOOL } \\ & \text { ENROLLMENT } \\ & \text { (\% ages } 3 \text { to 24) } \end{aligned}$ | MEDIAN EARNINGS (\$) | EdUCATION INDEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Native-born | 6.37 | 80.4 | 11.5 | 44.2 | 18.3 | 80.5 | 41,312 | 6.44 |
| Foreign-born | 5.53 | 86.3 | 27.4 | 28.7 | 11.7 | 67.7 | 30,565 | 3.54 |
| Asian |  |  |  |  |  |  |  |  |
| Native-Born |  |  | 5.4 | 73.2 | 26.1 | 84.9 | 48,917 |  |
| Foreign-Born |  |  | 28.3 | 37.0 | 13.5 | 76.7 | 30,648 |  |
| Black |  |  |  |  |  |  |  |  |
| Native-Born |  |  | 15.7 | 25.1 | 8.8 | 78.4 | 30,932 |  |
| Foreign-Born |  |  | 18.4 | 21.9 | 8.4 | 66.1 | 34,978 |  |
| Latino |  |  |  |  |  |  |  |  |
| Native-Born |  |  | 24.1 | 22.0 | 8.0 | 78.9 | 30,047 |  |
| Foreign-Born |  |  | 41.7 | 13.6 | 4.2 | 59.4 | 22,214 |  |
| White |  |  |  |  |  |  |  |  |
| Native-Born |  |  | 4.4 | 60.9 | 26.9 | 82.3 | 55,835 |  |
| Foreign-Born |  |  | 13.5 | 48.3 | 24.2 | 72.4 | 48,309 |  |

## DATA SOURCES:

Life expectancy: Measure of America calculations using mortality data from the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014.
Education and earnings: US Census Bureau ACS, 2015.

## New York Metropolitan Region <br> HD Index by Public Use Microdata Area (PUMA)

| RANK | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults $25+$ ) | AT LEAST BACHELOR'S DEGREE $(\%$ of adults $25+)$ | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults $25+$ ) | SCHOOL ENROLLMENT (\% ages 3 to 24 | MEDIAN EARNINGS (\$] | $\begin{aligned} & \text { EdUCATION } \\ & \text { INDEX } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| UNITED STATES | 5.17 | 79.3 | 12.9 | 30.6 | 11.6 | 77.3 | 31,416 | 5.17 |
| NEW YORK METROPOLITAN | 6.32 | 82.2 | 13.9 | 38.6 | 16.0 | 80.6 | 38,641 | 6.00 |


| GILDED NY |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NY: NYC-Manhattan Community District 8-Upper East Side | 9.36 | 86.4 | 2.0 | 79.0 | 40.6 | 90.5 | 75,313 | 9.57 |
| NY:Nassau County (Northwest)-North Hempstead Town (North) | 9.10 | 88.3 | 3.4 | 66.8 | 31.1 | 89.5 | 55,783 | 9.23 |
| NY: NYC-Manhattan Community District 1 \& 2-Battery Park City, Greenwich Village \& Soho | 8.97 | 85.9 | 2.9 | 85.5 | 38.8 | 80.5 | 86,164 | 8.62 |
| NJ: Bergen County (East)-Tenafly, Park Ridge \& Cresskill Boroughs | 8.95 | 86.1 | 4.3 | 64.3 | 26.5 | 85.1 | 67,379 | 8.46 |
| NJ: Union County (Northwest)-Summit City \& Westfield Town (North) | 8.92 | 84.5 | 2.9 | 68.1 | 32.7 | 90.8 | 62,705 | 9.51 |
| 6 CT: Fairfield, New Canaan, Wilton, Weston \& Easton Towns | 8.88 | 84.8 | 3.9 | 68.6 | 29.7 | 91.2 | 61,237 | 9.39 |
| NY: NYC-Manhattan Community District 7-Upper West Side \& West Side | 8.86 | 85.9 | 8.2 | 72.8 | 38.6 | 77.2 | 66,666 | 8.30 |
| NY: Westchester County (Northeast) | 8.81 | 89.3 | 7.1 | 59.6 | 28.7 | 87.5 | 51,888 | 8.45 |
| NY: NYC-Manhattan Community District 6-Murray Hill, Gramercy \& Stuyvesant Town | 8.76 | 87.0 | 2.5 | 84.8 | 39.0 | 69.2 | 76,879 | 7.54 |
| NY: NYC-Brooklyn Community District 6-Park Slope, Carroll Gardens \& Red Hook | 8.70 | 83.6 | 8.5 | 75.0 | 41.1 | 82.0 | 70,081 | 8.76 |
| 11 NY: Westchester County (Central)-White Plains City | 8.57 | 86.6 | 9.3 | 61.7 | 35.1 | 88.6 | 52,193 | 8.84 |
| OPPORTUNITY-RICH NY |  |  |  |  |  |  |  |  |
| NY: NYC-Manhattan Community District 4 \& 5-Chelsea, Clinton \& Midtown Business District | 8.49 | 84.0 | 4.9 | 75.1 | 32.7 | 73.6 | 80,264 | 7.96 |
| NJ: Somerset County (North \& West) | 8.46 | 84.4 | 2.6 | 66.9 | 30.2 | 79.2 | 61,676 | 8.25 |
| NY: NYC-Queens Community District 11-Bayside, Douglaston \& Little Neck | 8.40 | 89.6 | 10.8 | 44.1 | 18.5 | 89.7 | 49,927 | 7.35 |
| NJ: Bergen County (Central)-Ridgewood Village, Glen Rock \& Westwood Boroughs | 8.36 | 83.8 | 5.3 | 65.0 | 26.3 | 85.7 | 59,098 | 8.50 |
| NJ: Morris County (South)-Morristown Town, Madison \& Florham Park Boroughs | 8.36 | 83.4 | 4.4 | 63.8 | 29.4 | 86.1 | 59,345 | 8.65 |
| NJ: Essex County (Northwest) | 8.36 | 83.3 | 5.6 | 59.1 | 24.3 | 90.1 | 60,475 | 8.54 |
| NJ: Mercer County (North)-Princeton Borough | 8.29 | 85.3 | 5.8 | 63.4 | 36.6 | 83.6 | 51,216 | 8.66 |
| 8 NJ :Essex County (Southwest) | 8.19 | 84.0 | 7.8 | 61.8 | 29.4 | 90.0 | 52,253 | 8.79 |
| NJ: Middlesex County (Southwest) | 8.17 | 84.5 | 4.7 | 62.3 | 29.0 | 85.9 | 52,024 | 8.54 |


| Rank | $\stackrel{\text { HD }}{\text { INDEX }}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults 25+) | AT LEAST BACHELOR'S DEGRE (\% of adults 25+] | GRADUATE OR PROFESSIONAL DEGREE $\qquad$ | school ENROLLMENT [\% ages 3 to 24 ] | MEDIAN EARNINGS <br> (\$) | EdUCATION IndEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| OPPORTUNITY-RICH NY (CONTINUED) |  |  |  |  |  |  |  |  |
| 10 <br> NY: NYC-Queens Community District 6-Forest Hills \& Rego Park | 8.07 | 85.7 | 7.2 | 55.0 | 25.0 | 86.6 | 50,162 | 7.99 |
| 11 NJ: Morris County (West) | 8.01 | 84.8 | 3.2 | 52.3 | 19.6 | 88.8 | 51,264 | 8.02 |
| 12 NY: Rockland County (South)-Orangetown, Clarkstown (South) \& Ramapo (Southeast) Towns | 7.99 | 86.2 | 8.3 | 44.0 | 21.4 | 89.2 | 50,192 | 7.54 |
| 13 <br> NY: Nassau County (Central)-Hempstead Town (East Central) | 7.89 | 82.7 | 4.5 | 53.4 | 22.0 | 84.2 | 57,879 | 7.68 |
| $14 \begin{aligned} & \text { NY: Nassau County (Northeast)-Oyster Bay Town (North) \& } \\ & \text { Glen Cove City }\end{aligned}$ | 7.84 | 84.1 | 6.2 | 58.9 | 26.1 | 82.5 | 50,919 | 7.87 |
| 15 NJ: Bergen County (Northwest)-Ramsey, Oakland \& Franklin Lakes Boroughs | 7.83 | 82.9 | 3.8 | 53.9 | 19.2 | 90.5 | 51,802 | 8.20 |
| 16 NJ: Bergen County (Southeast)-Fort Lee, Cliffside Park \& Palisades Park Boroughs | 7.79 | 86.6 | 7.8 | 50.0 | 15.0 | 83.9 | 48,123 | 7.04 |
| 17 NJ: Morris County (East)-Lincoln Park Borough | 7.79 | 83.0 | 6.1 | 51.6 | 21.9 | 84.1 | 55,908 | 7.51 |
| 18 NY: NYC-Brooklyn Community District 2-Brooklyn Heights \& Fort Greene | 7.71 | 81.6 | 12.3 | 62.2 | 30.2 | 76.7 | 59,809 | 7.38 |
| 19 NY: Nassau County (Southwest)-Hempstead Town (Southwest) \& Long Beach City | 7.68 | 84.8 | 5.9 | 49.7 | 26.6 | 82.0 | 48,422 | 7.44 |
| 20 NJ: Somerset County (South) | 7.67 | 84.4 | 2.8 | 56.6 | 27.4 | 78.0 | 48,476 | 7.55 |
| 21 NY: Suffolk County (Northwest)-Smithtown Town | 7.65 | 83.5 | 3.3 | 46.2 | 20.3 | 86.7 | 50,644 | 7.57 |
| 22 CT: Norwalk, Westport \& Darien Towns | 7.64 | 84.8 | 8.3 | 52.6 | 23.7 | 83.6 | 47,159 | 7.50 |
| 23 NJ: Hunterdon County | 7.61 | 83.9 | 5.8 | 52.4 | 18.8 | 81.0 | 51,773 | 7.13 |
| 24 NY: Nassau County (West Central)-North Hempstead Town (South) | 7.60 | 86.3 | 9.9 | 45.1 | 19.6 | 86.6 | 44,048 | 7.20 |
| 25 NY: Suffolk County (Northwest)-Huntington Town (South) | 7.56 | 83.0 | 4.8 | 48.2 | 23.4 | 84.9 | 50,522 | 7.56 |
| 26 NY: Nassau County (East Central)-Oyster Bay Town (Central) | 7.54 | 83.8 | 7.6 | 48.1 | 21.8 | 82.3 | 50,694 | 7.12 |
| 27 CT: Stamford \& Greenwich Towns | 7.29 | 84.3 | 8.6 | 51.1 | 23.3 | 78.6 | 45,434 | 6.91 |
| 28 NY: Westchester County (Southeast) | 7.28 | 90.4 | 14.9 | 52.2 | 25.4 | 76.8 | 33,637 | 6.60 |
| 29 NY: Suffolk County (Northwest)-Huntington Town (North) | 7.27 | 82.9 | 8.2 | 51.4 | 21.9 | 84.1 | 45,540 | 7.41 |
| 30 NJ : Monmouth County (Southwest)-Freehold Borough | 7.26 | 82.9 | 5.4 | 46.9 | 19.2 | 84.6 | 46,350 | 7.26 |
| 31 NY: Nassau County (West Central)-Hempstead Town (Northwest) | 7.23 | 85.9 | 9.3 | 39.1 | 16.5 | 77.9 | 45,846 | 5.99 |

## New York Metropolitan Region

HD Index by Public Use Microdata Area (PUMA) (Continued)


| RANK | $\begin{aligned} & \text { HDD } \\ & \text { INDEX } \end{aligned}$ | $\begin{aligned} & \text { EXFE } \\ & \text { EXPCTANCY } \\ & \text { AT BIRTH } \\ & \text { (years) } \end{aligned}$ | LESS THAN HIGH SCHOOL (\% of adults $25+$ | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEGREE } \\ (\% \text { of adults } 25+1) \end{gathered}$ | $\begin{gathered} \text { GRADUATE OR } \\ \text { PRRFESSIONAL } \\ \text { DEGEE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}$ | SCHOOL ENROLLMENT [\% ages 3 to 24) | MEDIAN EARNINGS (\$) | $\begin{aligned} & \text { education } \\ & \text { index } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MAIN STREET NY (CONTINUED) |  |  |  |  |  |  |  |  |
| 11 NY: Rockland County (North)-New City \& Congers | 6.81 | 84.7 | 12.3 | 37.7 | 15.5 | 87.6 | 37,335 | 6.66 |
| 12 NY: NYC-Staten Island Community District 3-Tottenville, Great Kills \& Annadale | 6.81 | 81.7 | 6.0 | 32.4 | 14.3 | 81.3 | 48,808 | 6.06 |
| 13 NJ: Monmouth County (Southeast)-Tinton Falls Borough (South) | 6.80 | 82.7 | 5.7 | 45.8 | 16.8 | 83.3 | 40,016 | 6.97 |
| 14 CT: Danbury, Ridgefield, Bethel, Brookfield, New Fairfield, | 6.75 | 83.7 | 11.0 | 44.0 | 18.8 | 78.6 | 40,743 | 6.30 |
| 15 NY: Orange County (Southeast) | 6.74 | 83.3 | 9.3 | 34.5 | 15.8 | 85.3 | 40,500 | 6.46 |
| 16 <br> NY: NYC-Manhattan Community District 3-Chinatown \& Lower East Side | 6.72 | 83.2 | 22.8 | 43.9 | 15.2 | 77.9 | 46,130 | 5.54 |
| 17 NY: Westchester County (Northwest) | 6.67 | 83.6 | 15.1 | 41.7 | 21.3 | 84.5 | 37,471 | 6.69 |
| 18 NJ: Somerset County (Central)-North Plainfield \& Somerville Boroughs | 6.67 | 82.4 | 8.9 | 38.3 | 16.3 | 83.6 | 41,239 | 6.50 |
| 19 NY: Nassau County (Central)-Hempstead Town (Northeast) | 6.64 | 83.6 | 8.9 | 34.1 | 13.1 | 79.0 | 42,347 | 5.74 |
| 20 NY: NYC-Brooklyn Community District 10-Bay Ridge \& Dyker Heights | 6.63 | 83.2 | 17.4 | 42.9 | 15.7 | 81.6 | 41,048 | 6.11 |
| 21 NJ: Middlesex County (Northeast)-Carteret Borough | 6.61 | 81.6 | 10.1 | 33.4 | 11.6 | 84.9 | 44,424 | 6.14 |
| 22 NY: Westchester County (Southwest)-Yonkers City | 6.60 | 85.9 | 17.1 | 31.4 | 13.2 | 81.1 | 37,882 | 5.45 |
| 23 NJ: Bergen County (West Central)-Fair Lawn Borough, Garfield City \& Lodi Borough | 6.60 | 82.7 | 9.1 | 32.3 | 9.7 | 85.3 | 41,832 | 6.10 |
| 24 NY: Suffolk County (East) | 6.57 | 83.0 | 7.6 | 34.7 | 16.1 | 78.2 | 41,788 | 5.87 |
| 25 NJ: Bergen County (South Central)-Hackensack \& Englewood (West) Cities | 6.56 | 83.3 | 8.8 | 46.3 | 16.3 | 73.0 | 41,007 | 5.85 |
| 26 NY: Putnam County | 6.53 | 82.2 | 6.5 | 36.0 | 12.3 | 82.0 | 41,100 | 6.18 |
| 27 NY: NYC-Queens Community District 1-Astoria \& Long Island City | 6.52 | 83.3 | 16.1 | 45.7 | 15.2 | 76.2 | 40,684 | 5.76 |
| 28 NY: Dutchess County (North \& East) | 6.52 | 82.9 | 8.7 | 37.5 | 17.8 | 85.8 | 36,146 | 6.75 |
| 29 <br> NY: NYC-Brooklyn Community District 18-Canarsie \& Flatlands | 6.51 | 83.5 | 11.4 | 30.6 | 11.2 | 83.7 | 39,843 | 5.83 |
| 30 NY: NYC-Staten Island Community District 2-New Springville \& South Beach | 6.47 | 81.7 | 9.9 | 33.3 | 15.2 | 83.1 | 41,768 | 6.14 |
| 31 NY: Suffolk County (Southwest)-Islip Town (South) | 6.43 | 81.0 | 9.8 | 36.7 | 17.6 | 83.3 | 41,010 | 6.42 |
| 32 NJ : Sussex County | 6.43 | 81.8 | 4.8 | 35.4 | 9.7 | 81.3 | 41,302 | 6.04 |

## New York Metropolitan Region <br> HD Index by Public Use Microdata Area (PUMA) <br> (Continued)

| Rank | $\stackrel{\text { HD }}{\text { INDEX }}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults $25+$ | AT LeASt <br> BACHELOR'S DEGREE <br> (\% of adults $25+$ ) | GRADUATE OR PROFESSIONAL DEGREE (\% of adults 25+) | SCHOOL ENROLLMENT (\% ages 3 to 24] | $\qquad$ | EDUCATION INDEX index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MAIN STREET NY (CONTINUED) |  |  |  |  |  |  |  |  |
| 33 NY: NYC-Brooklyn Community District 15-Sheepshead Bay, Gerritsen Beach \& Homecrest | 6.35 | 83.5 | 15.4 | 39.6 | 16.4 | 80.9 | 36,109 | 6.02 |
| 34 NJ: Bergen County (Southwest)-Rutherford, North <br> 34 Arlington \& Hasbrouck Heights Boroughs | 6.34 | 80.5 | 10.0 | 37.8 | 11.1 | 82.5 | 42,479 | 6.09 |
| 35 NY: NYC-Queens Community District 2-Sunnyside \& Woodside | 6.33 | 84.4 | 19.5 | 37.0 | 12.9 | 82.2 | 35,495 | 5.69 |
| 36 NJ: Essex County (Northeast) | 6.32 | 82.9 | 11.8 | 38.7 | 11.6 | 73.1 | 41,651 | 5.19 |
| 37 NY: Suffolk County (Central)-Brookhaven Town (West Central) | 6.32 | 80.8 | 7.0 | 28.2 | 13.5 | 77.4 | 45,654 | 5.42 |
| 38 CT: West Haven, Milford \& Orange Towns | 6.32 | 80.2 | 8.3 | 37.6 | 17.0 | 84.2 | 40,085 | 6.59 |
| 39 CT: Hamden, Ansonia, Seymour, Derby, Woodbridge \& Bethany Towns | 6.30 | 80.7 | 9.1 | 38.7 | 19.1 | 79.5 | 40,533 | 6.25 |
| 40 NY: Suffolk County (Central)-Brookhaven Town (Central) | 6.30 | 80.7 | 11.4 | 29.9 | 11.0 | 84.5 | 42,899 | 5.86 |
| 41 NJ: Passaic County (Central)-Hawthorne Borough \& Clifton City (Northwest) | 6.30 | 81.3 | 7.4 | 33.9 | 9.8 | 81.1 | 41,381 | 5.81 |
| 42 NJ: Monmouth County (Northwest)-Keansburg Borough | 6.24 | 79.8 | 9.6 | 40.2 | 15.6 | 85.1 | 39,168 | 6.67 |
| 43 NY: Suffolk County (Southwest)-Babylon Town (Southeast) | 6.24 | 81.9 | 8.8 | 30.6 | 13.5 | 81.2 | 39,036 | 5.81 |
| 44 <br> NY: NYC-Bronx Community District 8-Riverdale, Fieldston \& Kingsbridge | 6.24 | 81.3 | 17.9 | 44.0 | 24.4 | 79.8 | 37,315 | 6.35 |
| 45 NJ: Ocean County (Northeast)-Point Pleasant Borough | 6.16 | 80.2 | 4.3 | 38.0 | 12.1 | 78.8 | 40,345 | 6.05 |
| 46 NJ: Warren County | 6.14 | 82.1 | 12.3 | 33.0 | 9.9 | 84.0 | 36,734 | 5.86 |
| 47 CT: Litchfield County | 6.11 | 81.0 | 9.0 | 33.8 | 14.5 | 76.1 | 40,823 | 5.50 |
| 48 NJ: Mercer County (South) | 6.11 | 81.3 | 11.3 | 28.8 | 10.9 | 81.1 | 40,016 | 5.49 |
| 49 NY: NYC-Queens Community District 8-Briarwood, Fresh Meadows \& Hillcrest | 6.09 | 84.2 | 14.8 | 42.1 | 13.0 | 78.7 | 31,880 | 5.79 |
| 50 CT: Meriden, Wallingford \& North Haven Towns | 6.08 | 80.5 | 7.5 | 28.6 | 10.7 | 80.8 | 40,598 | 5.62 |
| $51 \mathrm{NJ}:$ Ocean County (South) | 6.08 | 81.4 | 8.0 | 30.3 | 9.7 | 80.7 | 38,597 | 5.62 |
| 52 NY: NYC-Queens Community District 7-Flushing, Murray Hill \& Whitestone | 6.07 | 86.5 | 23.7 | 26.9 | 9.0 | 82.3 | 31,381 | 4.90 |
| 53 NY: NYC-Manhattan Community District 9-Hamilton Heights, Manhattanville \& West Harlem | 6.03 | 82.3 | 21.6 | 51.2 | 30.2 | 76.6 | 31,763 | 6.46 |
| 54 NJ: Hudson County (North)-West New York, Secaucus \& Guttenberg Towns | 6.03 | 85.2 | 19.4 | 34.0 | 12.8 | 77.9 | 32,190 | 5.15 |


| RANK | $\begin{aligned} & \text { HDD } \\ & \text { INDEX } \end{aligned}$ | LIFE EXPECTANCY AT BIRTH lyears) | LESS THAN HIGH SCHOOL (\% of adults $25+$ ) | AT LEAST BACHELOR'S DEGREE <br> [\% of adults 25+ | $\begin{gathered} \text { GRADUATE OR } \\ \text { PROFESSIONAL } \\ \text { DEGREE } \\ \text { (\% of adults 25+) } \end{gathered}$ | SCHOOL ENROLLMENT (\%ages 3 to 24) | MEDIAN EARNINGS (\$) | Education INDEX index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MAIN STREET NY (CONTINUED) |  |  |  |  |  |  |  |  |
| 55 NY: NYC-Queens Community District 5-Ridgewood, Glendale \& Middle Village | 5.98 | 83.8 | 16.9 | 25.7 | 9.1 | 76.8 | 36,893 | 4.62 |
| 56 NJ: Middlesex County (Central)-New Brunswick City, South River \& Highland Park Boroughs | 5.97 | 81.4 | 21.0 | 36.8 | 13.5 | 88.1 | 33,867 | 6.20 |
| 57 NJ: Monmouth County (East Central)-Long Branch, Asbury Park Cities \& Eatontown Borough | 5.94 | 81.5 | 9.7 | 37.4 | 16.1 | 79.0 | 34,406 | 5.98 |
| 58 NY: Dutchess County (Southwest) | 5.89 | 81.8 | 9.9 | 32.6 | 13.0 | 77.8 | 35,255 | 5.51 |
| 59 NY: Suffolk County (South Central)-Brookhaven Town (South) | 5.83 | 80.0 | 13.5 | 26.7 | 12.9 | 82.0 | 38,532 | 5.48 |
| 60 NY: Suffolk County (West Central)-Babylon Town (Northwest) | 5.81 | 81.5 | 14.1 | 26.7 | 9.4 | 83.4 | 35,015 | 5.43 |
| 61 NJ : Union County (Southwest)-Plainfield City \& Westfield Town (South) | 5.81 | 81.9 | 16.6 | 39.0 | 17.8 | 76.0 | 33,648 | 5.54 |
| 62 NY: Rockland County (West)-Spring Valley, Suffern Villages \& Monsey | 5.81 | 83.4 | 16.5 | 29.9 | 13.2 | 84.4 | 29,918 | 5.73 |
| 63 NY: NYC-Brooklyn Community District 14-Flatbush \& Midwood | 5.80 | 82.5 | 16.0 | 37.7 | 14.0 | 84.3 | 29,867 | 6.12 |
| 4 NY: NYC-Queens Community District 10-Howard Beach \& Ozone Park | 5.80 | 85.8 | 21.4 | 23.6 | 5.1 | 76.8 | 32,453 | 4.15 |
| 65 NY: NYC-Staten Island Community District 1-Port Richmond, Stapleton \& Mariners Harbor | 5.80 | 79.7 | 14.9 | 32.1 | 14.8 | 82.0 | 37,130 | 5.74 |
| 66 NJ : Ocean County (Northwest) | 5.79 | 80.8 | 8.4 | 23.9 | 7.6 | 81.6 | 36,801 | 5.30 |
| 67 NY: NYC-Brooklyn Community District 17-East Flatbush, Farragut \& Rugby | 5.74 | 84.6 | 14.9 | 20.6 | 8.3 | 74.0 | 33,874 | 4.18 |
| 68 NJ: Union County (North Central)-Roselle Park Borough | 5.71 | 81.7 | 12.7 | 28.2 | 9.6 | 79.0 | 34,605 | 5.15 |
| 69 NY: NYC-Bronx Community District 10-Co-op City, Pelham Bay \& Schuylerville | 5.70 | 82.2 | 15.3 | 25.2 | 10.1 | 73.9 | 37,123 | 4.43 |
| 70 NY: Ulster County (East) | 5.70 | 81.3 | 9.2 | 31.6 | 14.7 | 81.3 | 31,711 | 5.90 |
| 71 NY: Orange County (Northeast)-Greater Newburgh City | 5.70 | 81.0 | 10.2 | 28.7 | 10.3 | 74.9 | 37,136 | 4.92 |
| 72 NY: NYC-Brooklyn Community District 8-Crown Heights North \& Prospect Heights | 5.64 | 80.0 | 13.3 | 38.8 | 14.2 | 72.4 | 37,101 | 5.17 |
| 73 NY: NYC-Queens Community District 9-Richmond Hill \& Woodhaven | 5.62 | 84.2 | 21.4 | 29.0 | 9.2 | 79.4 | 29,975 | 4.82 |
| $74 \begin{aligned} & \text { NJ: Middlesex County (East Central)-Perth Amboy City \& } \\ & \text { Sayreville Borough }\end{aligned}$ | 5.55 | 81.4 | 20.9 | 27.1 | 7.4 | 77.6 | 36,100 | 4.51 |

## New York Metropolitan Region <br> HD Index by Public Use Microdata Area (PUMA) <br> (Continued)

|  | ANK | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | $\begin{aligned} & \text { EXPECTANCY } \\ & \text { AT BIRTH } \\ & \text { (years) } \end{aligned}$ | LESS THAN HIGH SCHOOL (\% of adults 25+) | AT LeAst BACHELOR'S DEGREE (\% of adults $25+$ ) | $\begin{gathered} \text { GRADUATE OR } \\ \text { PROFESSONAL } \\ \text { DEGREE } \\ \text { \% of adults } 25+1 \end{gathered}$ | SCHOOL ENROLLMENT (\% ages 3 to 24) | MEDIAN EARNINGS (\$) | $\begin{aligned} & \text { EDUCATION } \\ & \text { INDEX } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| STRUGGLING NY |  |  |  |  |  |  |  |  |  |
| 1 | NY: Orange County (Northwest) | 5.46 | 80.5 | 10.0 | 26.8 | 10.5 | 73.8 | 35,283 | 4.75 |
| 2 | NJ: Hudson County (South \& West)-Bayonne City, Kearney \& Harrison Towns | 5.43 | 80.0 | 13.1 | 29.1 | 9.6 | 80.5 | 33,048 | 5.31 |
| 3 | NY: NYC-Brooklyn Community District 9-Crown Heights South, Prospect Lefferts \& Wingate | 5.40 | 82.8 | 17.7 | 26.2 | 11.0 | 74.7 | 31,143 | 4.49 |
| 4 | NY: NYC-Queens Community District 14-Far Rockaway, Breezy Point \& Broad Channel | 5.39 | 79.1 | 23.4 | 30.4 | 11.9 | 80.0 | 36,162 | 4.97 |
| 5 | NY: NYC-Brooklyn Community District 11-Bensonhurst \& Bath Beach | 5.35 | 83.9 | 27.5 | 28.0 | 9.8 | 83.1 | 26,907 | 4.88 |
| 6 | NJ: Union County (Southeast)-Linden, Rahway Cities \& Roselle Borough (South) | 5.30 | 79.8 | 12.4 | 25.4 | 8.2 | 73.1 | 36,019 | 4.41 |
| 7 | NY: NYC-Manhattan Community District 10-Central Harlem | 5.29 | 78.0 | 16.7 | 37.8 | 19.6 | 76.1 | 33,918 | 5.57 |
| 8 | NY: NYC-Brooklyn Community District 12-Borough Park, Kensington \& Ocean Parkway | 5.28 | 84.3 | 26.3 | 27.0 | 11.4 | 83.7 | 24,977 | 5.02 |
| 9 | NY: NYC-Bronx Community District 12-Wakefield, Williamsbridge \& Woodlawn | 5.25 | 82.3 | 19.7 | 23.2 | 6.4 | 78.8 | 30,098 | 4.46 |
|  | NY: NYC-Bronx Community District 11-Pelham Parkway, Morris Park \& Laconia | 5.24 | 81.7 | 24.4 | 23.0 | 8.2 | 80.8 | 30,944 | 4.50 |
|  | NY: NYC-Queens Community District 12-Jamaica, Hollis \& St. Albans | 5.24 | 83.1 | 20.6 | 19.9 | 6.5 | 76.6 | 30,345 | 4.06 |
|  | NY: NYC-Manhattan Community District 12-Washington Heights, Inwood \& Marble Hill | 5.18 | 85.5 | 28.7 | 31.8 | 13.7 | 69.3 | 26,308 | 3.86 |
|  | NY: Nassau County (Central)-Hempstead Town (North Centrall-Meadowbrook Corridor | 5.14 | 81.0 | 23.3 | 25.2 | 10.3 | 77.1 | 31,544 | 4.39 |
|  | NY: Sullivan \& Ulster (West) Counties | 5.12 | 80.8 | 13.6 | 27.3 | 11.4 | 70.6 | 31,699 | 4.35 |
|  | NY: NYC-Brooklyn Community District 13-Brighton Beach \& Coney Island | 5.08 | 79.8 | 19.6 | 38.2 | 14.7 | 82.5 | 26,670 | 5.84 |
|  | NJ: Ocean County (North Central) | 5.08 | 79.8 | 12.8 | 25.7 | 7.8 | 84.5 | 28,208 | 5.48 |
|  | NY: NYC-Queens Community District 4-Elmhurst \& South Corona | 5.00 | 85.2 | 28.8 | 22.8 | 7.7 | 80.2 | 23,632 | 4.22 |
|  | NJ: Ocean County (Central)-Beachwood Borough | 4.91 | 79.1 | 10.2 | 21.6 | 6.4 | 74.4 | 31,866 | 4.38 |
|  | NJ: Essex County (South Central)-East Orange City | 4.90 | 78.0 | 14.9 | 26.4 | 10.8 | 80.0 | 30,567 | 5.12 |
| 20 | NY: NYC-Queens Community District 3-Jackson Heights \& North Corona | 4.87 | 85.5 | 32.5 | 19.1 | 6.0 | 76.8 | 24,340 | 3.49 |
| 21 | NJ: Passaic County (South)-Passaic \& Clifton (Southeast) Cities | 4.87 | 80.8 | 23.9 | 21.1 | 6.1 | 80.8 | 28,476 | 4.35 |
|  | NY: NYC-Manhattan Community District 11-East Harlem | 4.82 | 78.3 | 26.6 | 31.3 | 12.5 | 74.9 | 32,108 | 4.41 |


| RANK | $\begin{aligned} & \text { HDD } \\ & \text { INDEX } \end{aligned}$ | EXPECTANCY AT BIRTH (years) | Less than HIGH SCHOOL (\% of adults $25+$ ) | AT LEAST BACHELOR'S DEGREE [\% of adults $25+$ ] | GRADUATE OR PROFESSIONAL DEGREE <br> (\% of adults $25+$ ) | SCHOOL ENROLLMENT [\%ages 3 to 24) | $\begin{aligned} & \text { MEDIAN } \\ & \text { EARNINGS } \end{aligned}$ (\$) | EDUCATION INDEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| STRUGGLING NY CONTINUED) |  |  |  |  |  |  |  |  |
| 23 NY: NYC-Brooklyn Community District 3-BedfordStuyvesant | 4.82 | 78.8 | 18.7 | 28.0 | 9.1 | 75.5 | 30,566 | 4.52 |
| 24 CT: New Haven Town | 4.65 | 78.4 | 15.9 | 33.8 | 17.9 | 78.6 | 24,974 | 5.59 |
| 25 NY: Suffolk County (Central)-Islip Town (Northwest) | 4.61 | 80.9 | 28.8 | 12.6 | 3.6 | 76.6 | 29,576 | 3.24 |
| 26 NY: NYC-Brooklyn Community District 4-Bushwick | 4.58 | 80.1 | 26.5 | 28.1 | 6.9 | 65.1 | 31,510 | 3.09 |
| 27 NJ: Hudson County (Central)-Jersey City (South) | 4.52 | 78.1 | 17.7 | 27.0 | 7.6 | 81.5 | 26,147 | 5.02 |
| 28 <br> NY: NYC-Brooklyn Community District 5-East New York \& Starrett City | 4.46 | 78.8 | 22.9 | 15.3 | 5.2 | 75.6 | 29,861 | 3.60 |
| 29 NY: NYC-Bronx Community District 9-Castle Hill, Clason Point \& Parkchester | 4.44 | 81.6 | 31.6 | 14.5 | 4.5 | 77.3 | 26,262 | 3.32 |
| 30 NY: NYC-Brooklyn Community District 7-Sunset Park \& Windsor Terrace | 4.42 | 83.4 | 45.1 | 28.0 | 11.3 | 78.2 | 22,025 | 3.69 |
| 31 CT: Waterbury Town | 4.34 | 77.8 | 23.2 | 13.6 | 4.9 | 80.5 | 28,740 | 3.97 |
| 32 CT: Bridgeport Town | 4.24 | 78.8 | 22.1 | 21.0 | 8.4 | 74.3 | 26,089 | 3.91 |
| 33 NJ : Union County (Northeast)-Elizabeth City | 4.22 | 81.2 | 28.4 | 10.7 | 4.4 | 73.8 | 25,574 | 2.95 |
| 34 NJ: Mercer County (West Central)-Trenton City | 4.04 | 77.1 | 21.4 | 16.9 | 6.6 | 79.7 | 25,397 | 4.19 |
| PRECARIOUS NY |  |  |  |  |  |  |  |  |
| 1 NY: NYC-Bronx Community District 5-Morris Heights, Fordham South \& Mount Hope | 3.99 | 80.7 | 33.4 | 13.3 | 2.8 | 80.1 | 22,494 | 3.37 |
| 2 NJ: Passaic County (Southeast)-Paterson City | 3.98 | 81.6 | 30.0 | 8.6 | 1.4 | 78.1 | 22,256 | 3.06 |
| 3 <br> NY: NYC-Brooklyn Community District 16-Brownsville \& Ocean Hill | 3.88 | 76.7 | 24.0 | 15.1 | 4.2 | 76.3 | 26,586 | 3.57 |
| 4 NJ: Essex County (Southeast)-Newark City (North \& East) | 3.86 | 79.6 | 28.8 | 17.7 | 4.5 | 74.5 | 22,966 | 3.31 |
| 5 <br> NY: NYC-Bronx Community District 4-Concourse, Highbridge \& Mount Eden | 3.60 | 78.9 | 35.9 | 15.0 | 3.4 | 79.0 | 21,577 | 3.25 |
| NY: NYC-Bronx Community District 7-Bedford Park, Fordham North \& Norwood | 3.48 | 79.7 | 31.3 | 17.2 | 3.9 | 69.3 | 21,341 | 2.65 |
| 7 NY: NYC-Bronx Community District 3 \& 6-Belmont, Crotona Park East \& East Tremont | 3.32 | 77.6 | 37.8 | 13.0 | 3.5 | 78.4 | 21,306 | 3.03 |
| 8 NY: NYC-Bronx Community District 1 \& 2-Hunts Point, Longwood \& Melrose | 3.32 | 78.5 | 41.7 | 12.0 | 3.1 | 75.8 | 21,687 | 2.54 |
| 9 NJ: Essex County (Southeast)-Newark City (Southwest) | 3.10 | 73.3 | 21.1 | 13.6 | 4.2 | 75.7 | 23,192 | 3.58 |

DATA SOURCES:
Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and populations data from US Census Bureau, 2010-2014.
Education and earnings: US Census Bureau ACS, 2015.

New York City
HD Index by Neighborhood Tabulation Area

|  |  | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults 25+] | Lire EXPECTANCY AT BIRTH (years) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEGREE } \\ \text { O of adults } 25+\}) \end{gathered}$ | $\begin{gathered} \text { GRADUATE } \\ \text { DEGREE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}$ | SCHOOL ENROLLMENT (\%ages 3 to 24) | MEDIAN EARNINGS (\$) | EDUCATION INDEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | NEW YORK CITY | 5.98 | 82.3 | 19.1 | 80.9 | 36.8 | 15.1 | 78.6 | 35,934 | 5.45 |
| 1 | MANHATTAN: Upper East Side-Carnegie Hill | 9.34 | 86.4 | 1.9 | 98.1 | 84.9 | 47.8 | 89.7 | 94,963 | 9.50 |
| 2 | MANHATTAN: Lincoln Square | 9.16 | 85.9 | 2.7 | 97.3 | 81.9 | 48.4 | 86.4 | 92,125 | 9.18 |
| 3 | MANHATTAN: West Village | 9.05 | 85.9 | 1.4 | 98.6 | 84.6 | 40.6 | 83.0 | 84,612 | 8.85 |
| 4 | MANHATTAN: Lenox Hill-Roosevelt Island | 8.96 | 86.4 | 3.1 | 96.9 | 77.2 | 39.2 | 77.9 | 76,452 | 8.37 |
| 5 | MANHATTAN: Upper West Side | 8.95 | 85.9 | 7.6 | 92.4 | 73.0 | 41.0 | 83.8 | 63,287 | 8.93 |
| 6 | MANHATTAN: SoHo-TriBeCa-Civic CenterLittle Italy | 8.93 | 85.9 | 9.1 | 90.9 | 74.3 | 32.4 | 80.3 | 83,061 | 8.50 |
| 7 | MANHATTAN: Yorkville | 8.83 | 86.4 | 3.4 | 96.6 | 78.8 | 35.9 | 73.8 | 70,831 | 7.98 |
| 8 | MANHATTAN: Gramercy | 8.81 | 87.0 | 2.4 | 97.6 | 79.5 | 34.1 | 70.9 | 71,028 | 7.71 |
| 9 | MANHATTAN: Battery Park City-Lower Manhattan | 8.69 | 85.9 | 2.9 | 97.1 | 84.3 | 37.8 | 71.7 | 85,566 | 7.78 |
| 10 | BROOKLYN: Brooklyn Heights-Cobble Hill | 8.61 | 81.6 | 2.5 | 97.5 | 77.3 | 39.8 | 87.9 | 71,421 | 9.32 |
| 11 | MANHATTAN: Turtle Bay-East Midtown | 8.60 | 87.0 | 1.7 | 98.3 | 82.0 | 38.4 | 64.1 | 89,595 | 7.06 |
| 12 | MANHATTAN: Hudson Yards-Chelsea-Flat Iron-Union Square | 8.59 | 84.0 | 5.9 | 94.1 | 74.4 | 34.7 | 76.7 | 77,696 | 8.26 |
| 13 | QUEENS: Douglas Manor-Douglaston-Little Neck | 8.58 | 89.6 | 7.7 | 92.3 | 49.0 | 21.0 | 88.5 | 51,465 | 7.71 |
| 14 | MANHATTAN: Murray Hill-Kips Bay | 8.55 | 87.0 | 4.6 | 95.4 | 75.4 | 32.9 | 62.6 | 77,434 | 6.91 |
| 15 | MANHATTAN: Stuyvesant Town-Cooper Village | 8.51 | 87.0 | 3.8 | 96.2 | 79.4 | 38.7 | 64.7 | 63,699 | 7.12 |
| 16 | BROOKLYN: Park Slope-Gowanus | 8.34 | 83.6 | 7.1 | 92.9 | 74.3 | 38.0 | 77.1 | 61,094 | 8.30 |
| 17 | MANHATTAN: Midtown-Midtown South | 8.29 | 84.0 | 3.9 | 96.1 | 77.3 | 39.5 | 67.2 | 85,332 | 7.36 |
| 18 | QUEENS: Oakland Gardens | 8.23 | 89.6 | 9.6 | 90.4 | 46.4 | 19.6 | 87.3 | 46,670 | 7.33 |
| 19 | QuEENS: Forest Hills | 8.19 | 85.7 | 7.3 | 92.7 | 55.7 | 26.0 | 85.2 | 53,174 | 7.93 |
| 20 | QUEENS: Ft. Totten-Bay Terrace-Clearview | 8.10 | 86.5 | 8.0 | 92.0 | 46.4 | 22.2 | 85.2 | 53,440 | 7.31 |
| 21 | BROOKLYN: Carroll Gardens-Columbia Street-Red Hook | 8.07 | 83.6 | 12.4 | 87.6 | 62.3 | 29.7 | 81.2 | 58,546 | 7.78 |
| 22 | MANHATTAN: East Village | 8.06 | 83.2 | 6.0 | 94.0 | 71.7 | 27.8 | 79.5 | 55,749 | 8.23 |


| RANK |  | $\begin{gathered} \text { HD } \\ \text { INDEX } \end{gathered}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults 25+] | LIFE EXPECTANCY AT BIRTH (years) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEGREE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}$ | $\begin{aligned} & \text { GRADUATE } \\ & \text { DEGREE } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | SCHOOL ENROLLMENT (\%ages 3 to 24) | $\qquad$ | $\underset{\text { EDUCATION }}{\text { INDEX }}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |  |
| 23 | Queens: Bayside-Bayside Hills | 7.97 | 89.6 | 11.0 | 89.0 | 43.7 | 17.5 | 85.2 | 44,552 | 6.85 |
| 24 | MANHATTAN: Clinton | 7.93 | 84.0 | 6.8 | 93.2 | 69.1 | 28.5 | 57.2 | 63,149 | 6.67 |
| 25 | QUEENS: Glen Oaks-Floral Park-New Hyde Park | 7.90 | 89.0 | 9.3 | 90.7 | 41.8 | 19.8 | 76.7 | 49,882 | 6.14 |
| 26 | BRONX: North Riverdale-Fieldston-Riverdale | 7.80 | 81.3 | 7.3 | 92.7 | 57.6 | 32.1 | 90.7 | 51,489 | 8.81 |
| 27 | BROOKLYN: Windsor Terrace | 7.64 | 83.4 | 9.2 | 90.8 | 63.4 | 30.9 | 74.5 | 52,135 | 7.39 |
| 28 | Queens: Auburndale | 7.62 | 89.6 | 13.9 | 86.1 | 37.8 | 15.7 | 85.8 | 40,739 | 6.44 |
| 29 | BROOKLYN: DUMBO-Vinegar Hill-Downtown Brooklyn-Boerum Hill | 7.56 | 81.6 | 14.1 | 85.9 | 58.3 | 27.5 | 76.3 | 59,553 | 6.96 |
| 30 | Queens: Rego Park | 7.34 | 85.7 | 9.9 | 90.1 | 49.2 | 20.1 | 81.1 | 42,944 | 6.87 |
| 31 | Queens: Whitestone | 7.31 | 86.5 | 13.7 | 86.3 | 35.5 | 12.9 | 85.9 | 44,292 | 6.23 |
| 32 | BROOKLYN: Prospect Heights | 7.30 | 80.0 | 6.5 | 93.5 | 66.8 | 32.2 | 76.0 | 51,618 | 7.85 |
| 33 | QUEENS: Bellerose | 7.29 | 89.0 | 12.5 | 87.5 | 34.1 | 13.8 | 81.8 | 39,754 | 5.87 |
| 34 | QUEENS: Kew Gardens | 7.22 | 84.2 | 11.0 | 89.0 | 47.0 | 21.5 | 81.7 | 44,672 | 6.84 |
| 35 | Queens: Cambria Heights | 7.20 | 89.0 | 9.7 | 90.3 | 31.0 | 13.2 | 81.6 | 38,483 | 5.81 |
| 36 | MANHATTAN: Morningside Heights | 7.19 | 82.3 | 11.2 | 88.8 | 65.1 | 38.8 | 86.9 | 36,877 | 8.91 |
| 37 | QUEENS: Rosedale | 7.14 | 89.0 | 10.8 | 89.2 | 29.6 | 9.9 | 81.9 | 38,757 | 5.59 |
| 38 | BROOKLYN: Greenpoint | 7.13 | 82.8 | 8.5 | 91.5 | 56.0 | 20.3 | 73.0 | 49,422 | 6.48 |
| 39 | QUEENS: Jamaica Estates-Holliswood | 7.12 | 84.2 | 13.9 | 86.1 | 44.3 | 18.7 | 87.0 | 41,983 | 6.98 |
| 40 | QUEENS: Laurelton | 7.10 | 89.0 | 12.2 | 87.8 | 27.3 | 10.2 | 82.2 | 38,825 | 5.47 |
| 41 | BRONX: Spuyten Duyvil-Kingsbridge | 7.07 | 81.3 | 13.5 | 86.5 | 48.5 | 24.3 | 85.7 | 46,675 | 7.30 |
| 42 | STATEN ISLAND: Oakwood-Oakwood Beach | 7.05 | 81.7 | 9.3 | 90.7 | 31.6 | 13.7 | 85.8 | 52,578 | 6.28 |
| 43 | BROOKLYN: Bay Ridge | 7.05 | 83.2 | 13.6 | 86.4 | 45.4 | 18.4 | 83.8 | 45,049 | 6.72 |
| 44 | QUEENS: Lindenwood-Howard Beach | 6.96 | 85.8 | 14.8 | 85.2 | 27.3 | 9.2 | 83.4 | 44,597 | 5.42 |

New York City
HD Index by Neighborhood Tabulation Area (continued)

|  |  | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | LIFE <br> EXPECTANCY <br> AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults 25+] | LIFE =XPECTANCY AT BIRTH (years) | AT LEAST <br> BACHELOR'S DEGREE <br> (\% of adults $25+$ ) | $\begin{array}{\|l} \text { GRADUATE } \\ \text { DEGREE } \\ (\% \text { of adultt } 25+) \end{array}$ | SCHOOL ENROLLMENT (\% ages 3 to 24) | MEDIAN EARNINGS (\$) <br> (\$) | EDUCATION INDEX INDEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |  |
| 45 | Queens: Fresh Meadows-Utopia | 6.94 | 84.2 | 12.6 | 87.4 | 47.3 | 18.7 | 82.8 | 40,078 | 6.77 |
| 46 | STATEN ISLAND: Charleston-Richmond Valley-Tottenville | 6.94 | 81.7 | 8.7 | 91.3 | 33.3 | 12.5 | 85.0 | 50,171 | 6.25 |
| 47 | BROOKLYN: Clinton Hill | 6.92 | 81.6 | 9.0 | 91.0 | 56.1 | 24.2 | 81.2 | 42,469 | 7.40 |
| 48 | STATEN ISLAND: Rossville-Woodrow | 6.92 | 81.7 | 7.7 | 92.3 | 32.0 | 14.8 | 81.2 | 51,922 | 5.98 |
| 49 | Queens: Middle Village | 6.91 | 83.8 | 13.7 | 86.3 | 31.6 | 11.3 | 83.6 | 46,807 | 5.77 |
| 50 | queens: Kew Gardens Hills | 6.88 | 84.2 | 11.6 | 88.4 | 42.1 | 17.6 | 84.9 | 39,285 | 6.73 |
| 51 | BROOKLYN: Georgetown-Marine Park-Bergen Beach-Mill Basin | 6.86 | 83.5 | 9.2 | 90.8 | 36.5 | 14.5 | 83.2 | 43,348 | 6.29 |
| 52 | STATEN ISLAND: Westerleigh | 6.86 | 79.7 | 7.3 | 92.7 | 35.6 | 15.7 | 86.3 | 51,269 | 6.68 |
| 53 | staten island: Great Kills | 6.86 | 81.7 | 7.7 | 92.3 | 31.3 | 12.7 | 84.1 | 49,321 | 6.13 |
| 54 | STATEN ISLAND: Todt Hill-Emerson HillHeartland Village-Lighthouse Hill | 6.81 | 81.7 | 10.6 | 89.4 | 34.8 | 16.0 | 86.4 | 45,673 | 6.52 |
| 55 | QUEENS: Springfield Gardens SouthBrookville | 6.78 | 89.0 | 14.4 | 85.6 | 24.8 | 9.6 | 80.8 | 35,759 | 5.09 |
| 56 | STATEN ISLAND: Arden Heights | 6.78 | 81.7 | 8.4 | 91.6 | 33.4 | 12.6 | 80.9 | 49,548 | 5.88 |
| 57 | QUEENS: Breezy Point-Belle Harbor-Rockaway Park-Broad Channel | 6.76 | 79.1 | 11.8 | 88.2 | 37.7 | 16.4 | 88.0 | 50,305 | 6.77 |
| 58 | STATEN ISLAND: Grasmere-Arrochar-Ft. <br> Wadsworth | 6.72 | 81.7 | 12.9 | 87.1 | 37.9 | 14.8 | 86.9 | 43,805 | 6.55 |
| 59 | BROOKLYN: North Side-South Side | 6.68 | 82.8 | 15.0 | 85.0 | 54.0 | 19.5 | 71.1 | 44,236 | 5.88 |
| 60 | STATEN ISLAND: Annadale-Huguenot- <br> Prince's Bay-Eltingville | 6.67 | 81.7 | 8.1 | 91.9 | 32.5 | 11.9 | 80.0 | 48,264 | 5.74 |
| 61 | Staten istand: New Dorp-Midland Beach | 6.58 | 81.7 | 9.5 | 90.5 | 31.1 | 11.6 | 84.3 | 44,525 | 6.01 |
| 62 | BROOKLYN: Sheepshead Bay-Gerritsen Beach-Manhattan Beach | 6.56 | 83.5 | 13.8 | 86.2 | 39.3 | 13.9 | 82.3 | 39,061 | 6.10 |
| 63 | BROOKLYN: Madison | 6.54 | 83.5 | 14.5 | 85.5 | 40.1 | 15.7 | 84.8 | 36,923 | 6.42 |
| 64 | QUEENS: Steinway | 6.49 | 83.3 | 13.9 | 86.1 | 46.0 | 16.0 | 74.9 | 40,055 | 5.78 |
| 65 | QUEENS: Hunters Point-Sunnyside-West Maspeth | 6.48 | 84.4 | 17.0 | 83.0 | 43.3 | 16.1 | 77.8 | 37,269 | 5.81 |
| 66 | BROOKLYN: Fort Greene | 6.44 | 81.6 | 18.1 | 81.9 | 48.9 | 24.9 | 70.4 | 44,105 | 5.69 |


| RANK |  | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | LIFE EXPECTANCY AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults $25+1$ | LIFE EXPECTANCY AT BIRTH (years) | AT LEASt BACHELOR'S DEGREE <br> (\% of adults $25+$ ) | $\left\|\begin{array}{c} \text { GRADUATE } \\ \text { DEGREE } \\ (\% \text { of adults } 25+1 \end{array}\right\|$ | SCHOOL ENROLLMENT (\% ages 3 to 24 ) | MEDIAN EARNINGS (\$) | EDUCATION INDEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |
| 67 | STATEN ISLAND: New Springville-BloomfieldTravis | 6.43 | 81.7 | 10.5 | 89.5 | 29.4 | 11.5 | 86.1 | 41,497 | 6.06 |
| 68 | QUEENS: Queens Village | 6.41 | 89.0 | 17.2 | 82.8 | 21.2 | 6.3 | 79.9 | 32,786 | 4.58 |
| 69 | STATEN ISLAND: New Brighton-Silver Lake | 6.35 | 79.7 | 12.0 | 88.0 | 36.6 | 16.5 | 80.2 | 45,544 | 5.97 |
| 70 | QUEENS: Astoria | 6.34 | 83.3 | 15.3 | 84.7 | 45.5 | 15.9 | 72.1 | 39,609 | 5.42 |
| 71 | QueENS: Briarwood-Jamaica Hills | 6.33 | 84.2 | 17.6 | 82.4 | 39.3 | 14.7 | 82.5 | 34,485 | 5.98 |
| 72 | BROOKLYN: Ocean Parkway South | 6.29 | 84.3 | 13.7 | 86.3 | 39.0 | 17.0 | 80.9 | 33,113 | 6.09 |
| 73 | BRONX: Pelham Bay-Country Club-City Island | 6.28 | 82.2 | 17.6 | 82.4 | 26.2 | 10.3 | 78.7 | 44,857 | 4.84 |
| 74 | BROOKLYN: Flatlands | 6.27 | 83.5 | 13.7 | 86.3 | 29.6 | 11.3 | 82.2 | 37,412 | 5.54 |
| 75 | BROOKLYN: West Brighton | 6.27 | 79.8 | 5.7 | 94.3 | 47.6 | 18.0 | 83.2 | 37,226 | 7.09 |
| 76 | BRONX: Schuylerville-Throgs NeckEdgewater Park | 6.22 | 82.2 | 17.5 | 82.5 | 24.5 | 9.5 | 82.0 | 42,410 | 5.05 |
| 77 | Queens: Murray Hill | 6.18 | 86.5 | 20.5 | 79.5 | 26.9 | 10.4 | 82.9 | 31,748 | 5.15 |
| 78 | QUEENS: Glendale | 6.16 | 83.8 | 14.5 | 85.5 | 23.4 | 8.0 | 79.0 | 39,081 | 4.78 |
| 79 | BROOKLYN: East Flatbush-Farragut | 6.13 | 84.6 | 12.7 | 87.3 | 23.4 | 8.9 | 82.0 | 34,617 | 5.20 |
| 80 | QUEENS: Maspeth | 6.12 | 83.8 | 15.0 | 85.0 | 25.8 | 8.5 | 81.7 | 36,381 | 5.14 |
| 81 | STATEN ISLAND: Old Town-Dongan Hills- <br> South Beach | 6.11 | 81.7 | 12.2 | 87.8 | 28.9 | 11.5 | 78.8 | 40,565 | 5.27 |
| 82 | BROOKLYN: Bath Beach | 6.10 | 83.9 | 23.3 | 76.7 | 32.4 | 11.3 | 80.3 | 36,354 | 5.06 |
| 83 | BROOKLYN: Homecrest | 6.07 | 83.5 | 16.4 | 83.6 | 34.8 | 12.5 | 80.4 | 34,129 | 5.54 |
| 84 | BROOKLYN: Canarsie | 6.05 | 83.5 | 15.2 | 84.8 | 25.1 | 8.9 | 82.4 | 35,678 | 5.20 |
| 85 | BRONX: Pelham Parkway | 5.99 | 81.7 | 19.9 | 80.1 | 31.4 | 13.4 | 82.2 | 37,373 | 5.44 |
| 86 | Queens: Springfield Gardens North | 5.99 | 83.1 | 12.5 | 87.5 | 24.6 | 6.6 | 80.1 | 36,918 | 4.97 |
| 87 | BROOKLYN: Midwood | 5.91 | 82.5 | 13.7 | 86.3 | 42.1 | 17.9 | 81.7 | 30,192 | 6.35 |
| 88 | QuEENS: Ozone Park | 5.90 | 85.8 | 21.0 | 79.0 | 22.0 | 8.0 | 76.5 | 33,676 | 4.19 |

## New York City

HD Index by Neighborhood Tabulation Area (continued)

| RANK |  | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | LIFE <br> EXPECTANCY <br> AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults 25+) | LIFE EXPECTANCY AT BIRTH (years) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEGREE } \\ (\% \text { of adults } 25+) \end{gathered}$ | $\begin{gathered} \text { GRADUATE } \\ \text { DEGREE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}$ | SCHOOL ENROLLMENT (\% ages 3 to 24) | $\qquad$ | EDUCATION INDEX INDEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |  |
|  | Queens: East Flushing | 5.88 | 86.5 | 22.9 | 77.1 | 27.2 | 8.0 | 82.7 | 28,850 | 4.93 |
|  | BROOKLYN: East Williamsburg | 5.88 | 82.8 | 21.4 | 78.6 | 41.0 | 11.3 | 68.1 | 38,966 | 4.36 |
| 91 | QUEENS: Pomonok-Flushing HeightsHillcrest | 5.88 | 84.2 | 15.9 | 84.1 | 30.5 | 11.1 | 86.1 | 28,835 | 5.86 |
|  | QUEENS: Woodside | 5.86 | 84.4 | 22.1 | 77.9 | 32.6 | 10.3 | 80.5 | 31,469 | 5.10 |
|  | BRONX: Co-op City | 5.83 | 82.2 | 14.8 | 85.2 | 25.7 | 10.2 | 79.4 | 36,163 | 5.01 |
|  | BROOKLYN: Kensington-Ocean Parkway | 5.83 | 84.3 | 17.9 | 82.1 | 39.0 | 15.8 | 79.4 | 28,684 | 5.71 |
|  | Queens: St. Albans | 5.82 | 83.1 | 12.6 | 87.4 | 22.6 | 8.5 | 79.5 | 34,669 | 4.90 |
|  | Queens: College Point | 5.77 | 86.5 | 21.3 | 78.7 | 21.0 | 5.8 | 74.6 | 32,094 | 3.85 |
|  | BROOKLYN: Erasmus | 5.73 | 84.6 | 17.6 | 82.4 | 20.5 | 6.5 | 78.1 | 32,866 | 4.36 |
| 98 | STATEN ISLAND: Grymes Hill-Clifton-Fox Hills | 5.67 | 79.7 | 16.8 | 83.2 | 29.6 | 12.8 | 83.0 | 36,165 | 5.54 |
|  | BRONX: Woodlawn-Wakefield | 5.65 | 82.3 | 16.9 | 83.1 | 28.7 | 8.8 | 77.8 | 34,014 | 4.83 |
| 100 | QUEENS: Old Astoria | 5.65 | 83.3 | 21.3 | 78.7 | 39.8 | 12.3 | 71.7 | 32,471 | 4.71 |
|  | MANHATTAN: Central Harlem South | 5.63 | 78.0 | 17.1 | 82.9 | 43.4 | 20.2 | 70.6 | 40,822 | 5.30 |
|  | BROOKLYN: Brighton Beach | 5.62 | 79.8 | 12.5 | 87.5 | 41.8 | 13.8 | 79.5 | 32,845 | 6.00 |
|  | Queens: Queensboro Hill | 5.60 | 86.5 | 29.7 | 70.3 | 24.7 | 9.1 | 82.0 | 27,089 | 4.50 |
|  | MANHATTAN: Washington Heights North | 5.59 | 85.5 | 26.7 | 73.3 | 38.3 | 16.2 | 73.7 | 27,610 | 4.76 |
|  | QuEENS: Jackson Heights | 5.57 | 85.5 | 24.4 | 75.6 | 27.3 | 9.7 | 78.0 | 28,427 | 4.50 |
| 106 | BROOKLYN: Bensonhurst East | 5.55 | 83.9 | 26.8 | 73.2 | 28.7 | 9.6 | 81.3 | 29,928 | 4.76 |
| 107 | BRONX: Allerton-Pelham Gardens | 5.54 | 81.7 | 22.1 | 77.9 | 25.2 | 10.5 | 78.9 | 34,608 | 4.62 |
| 108 | BROOKLYN: Rugby-Remsen Village | 5.54 | 84.6 | 17.3 | 82.7 | 19.4 | 6.3 | 73.3 | 32,496 | 3.87 |
| 109 | STATEN ISLAND: Mariner's Harbor-ArlingtonPort Ivory-Graniteville | 5.53 | 79.7 | 17.5 | 82.5 | 24.2 | 8.6 | 78.6 | 38,503 | 4.68 |
| 110 | Queens: Elmhurst-Maspeth | 5.52 | 84.4 | 24.7 | 75.3 | 28.7 | 8.4 | 79.3 | 29,207 | 4.61 |


| RANK | $\begin{gathered} \text { HD } \\ \text { INDEX } \end{gathered}$ | LIFE <br> EXPECTANCY <br> AT BIRTH (years) | LESS THAN HIGH SCHOOL \% of adults 25+] | Lire EXPECTANCY AT BIRTH (years) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELOR'S } \\ \text { DEGREE } \\ \text { O of adults } 25+\}) \end{gathered}$ | $\begin{aligned} & \text { GRADUATE } \\ & \text { DEGREE } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | SCHOOL ENROLLMENT (\% ages 3 to 24 ) | $\qquad$ | EDUCATION INDEX index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |
| 111 BROOKLYN: Prospect Lefferts GardensWingate | 5.49 | 82.8 | 18.0 | 82.0 | 25.0 | 9.5 | 76.7 | 32,047 | 4.55 |
| 112 Brooklyn: Crown Heights South | 5.47 | 82.8 | 16.3 | 83.7 | 29.9 | 11.2 | 77.5 | 29,863 | 4.99 |
| 113 BROOKLYN: Flatbush | 5.46 | 82.5 | 19.6 | 80.4 | 33.3 | 12.4 | 76.6 | 30,430 | 4.96 |
| 114 MANHATTAN: Lower East Side | 5.43 | 83.2 | 28.6 | 71.4 | 32.1 | 10.1 | 77.1 | 30,862 | 4.45 |
| 115 QUEENS: Ridgewood | 5.39 | 83.8 | 22.0 | 78.0 | 21.8 | 6.7 | 72.3 | 32,836 | 3.68 |
| 116 BRONX: Parkchester | 5.35 | 81.6 | 19.8 | 80.2 | 26.0 | 10.1 | 74.6 | 33,584 | 4.34 |
| 117 Queens: Hollis | 5.35 | 83.1 | 18.1 | 81.9 | 22.7 | 7.1 | 77.7 | 30,222 | 4.43 |
| 118 QUEENS: Flushing | 5.35 | 86.5 | 26.8 | 73.2 | 24.9 | 8.1 | 82.0 | 24,024 | 4.59 |
| 119 Queens: South Ozone Park | 5.33 | 85.8 | 25.2 | 74.8 | 17.4 | 4.3 | 77.4 | 28,146 | 3.72 |
| 120 <br> STATEN ISLAND: West New Brighton-New Brighton-St. George | 5.33 | 79.7 | 16.1 | 83.9 | 27.4 | 10.3 | 73.2 | 36,589 | 4.44 |
| 121 Queens: Baisley Park | 5.28 | 83.1 | 17.2 | 82.8 | 17.0 | 5.7 | 77.2 | 30,736 | 4.11 |
| 122 Queens: Richmond Hill | 5.27 | 84.2 | 27.5 | 72.5 | 21.3 | 5.8 | 80.7 | 28,265 | 4.18 |
| 123 STATEN ISLAND: Port Richmond | 5.25 | 79.7 | 14.3 | 85.7 | 21.8 | 8.4 | 76.2 | 35,263 | 4.47 |
| 124 BROOKLYN: Dyker Heights | 5.24 | 83.2 | 28.9 | 71.1 | 26.7 | 9.8 | 81.3 | 28,012 | 4.59 |
| 125 BROOKLYN: Bensonhurst West | 5.23 | 83.9 | 29.0 | 71.0 | 25.0 | 7.2 | 79.9 | 27,976 | 4.26 |
| 126 MANHATTAN: Chinatown | 5.23 | 83.2 | 37.1 | 62.9 | 33.4 | 9.4 | 74.4 | 30,819 | 3.85 |
| 127 BRONX: Eastchester-Edenwald-Baychester | 5.22 | 82.3 | 20.6 | 79.4 | 22.4 | 6.7 | 76.7 | 30,910 | 4.19 |
| 128 QUEENS: Woodhaven | 5.19 | 84.2 | 23.8 | 76.2 | 21.9 | 6.6 | 74.4 | 28,830 | 3.80 |
| 129 MANHATTAN: Marble Hill-Inwood | 5.12 | 85.5 | 28.4 | 71.6 | 30.0 | 12.0 | 72.7 | 24,963 | 4.04 |
| 130 QUEENS: Elmhurst | 5.11 | 85.2 | 29.9 | 70.1 | 26.1 | 7.6 | 74.9 | 26,256 | 3.81 |
| 131 BROOKLYN: Crown Heights North | 5.10 | 80.0 | 20.8 | 79.2 | 28.5 | 10.3 | 74.4 | 32,851 | 4.39 |
| 132 STATEN ISLAND: Stapleton-Rosebank | 5.09 | 79.7 | 18.4 | 81.6 | 25.1 | 9.4 | 72.8 | 34,452 | 4.15 |

## New York City <br> HD Index by Neighborhood Tabulation Area (continued)

| RANK | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | $\begin{aligned} & \text { LIFE } \\ & \text { EXPECTANCY } \\ & \text { AT BIATH } \\ & \text { lyears) } \end{aligned}$ | LESS THAN HIGH SCHOOL (\% of adults 25+1 | LIFE =XPECTANCY AT BIRTH (years) | $\begin{gathered} \text { AT LEAST } \\ \text { BACHELER'S } \\ \text { DEGREE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}$ | $\begin{aligned} & \text { GRADUATE } \\ & \text { DEGREE } \\ & \text { (\% of adults } 25+\text { ) } \end{aligned}$ | SCHOOL ENROLLMENT (\% ages 3 to 24) |  | EDUCATION INDEX index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |
| 133 MANHATTAN: East Harlem South | 5.06 | 78.3 | 23.4 | 76.6 | 38.1 | 16.3 | 73.2 | 33,352 | 4.86 |
| 134 BROOKLYN: Gravesend | 5.06 | 79.8 | 22.7 | 77.3 | 30.0 | 11.6 | 82.8 | 28,800 | 5.23 |
| 135 MANHATTAN: Hamilton Heights | 5.04 | 82.3 | 25.9 | 74.1 | 31.6 | 13.1 | 73.4 | 28,052 | 4.33 |
| 136 QUEENS: South Jamaica | 5.03 | 83.1 | 22.4 | 77.6 | 15.6 | 4.7 | 77.1 | 28,970 | 3.76 |
| 137 BRONX: Williamsbridge-Olinville | 5.02 | 82.3 | 21.5 | 78.5 | 17.9 | 4.9 | 77.2 | 29,440 | 3.92 |
| 138 QUEENS: Hammels-Arverne-Edgemere | 4.94 | 79.1 | 25.5 | 74.5 | 19.3 | 5.6 | 81.7 | 32,983 | 4.26 |
| 139 QUEENS: East Elmhurst | 4.94 | 85.5 | 24.2 | 75.8 | 17.1 | 5.0 | 76.4 | 24,371 | 3.68 |
| 140 BRONX: Van Nest-Morris Park-Westchester Square | 4.90 | 81.7 | 25.3 | 74.7 | 20.8 | 6.8 | 79.8 | 27,812 | 4.21 |
| 141 BROOKLYN: Stuyvesant Heights | 4.82 | 78.8 | 23.3 | 76.7 | 23.4 | 8.2 | 73.6 | 33,473 | 3.89 |
| 142 BRONX: Soundview-Castle Hill-Clason PointHarding Park | 4.78 | 81.6 | 26.0 | 74.0 | 15.9 | 4.7 | 74.9 | 30,047 | 3.40 |
| 143 QUEENS: Queensbridge-Ravenswood-Long Island City | 4.77 | 83.3 | 28.3 | 71.7 | 23.7 | 6.4 | 76.4 | 25,113 | 3.87 |
| 144 BROOKLYN: Bedford | 4.75 | 78.8 | 22.2 | 77.8 | 28.8 | 10.8 | 77.4 | 29,082 | 4.65 |
| 145 MANHATTAN: Central Harlem North-Polo Grounds | 4.65 | 78.0 | 21.0 | 79.0 | 30.1 | 12.5 | 73.2 | 30,305 | 4.44 |
| 146 BRONX: Van Cortlandt Village | 4.65 | 81.3 | 27.3 | 72.7 | 20.8 | 8.2 | 74.1 | 27,816 | 3.64 |
| 147 BROOKLYN: Borough Park | 4.64 | 84.3 | 28.2 | 71.8 | 17.9 | 6.9 | 80.9 | 21,773 | 4.06 |
| 148 MANHATTAN: Washington Heights South | 4.62 | 85.5 | 32.6 | 67.4 | 27.1 | 9.8 | 70.7 | 21,956 | 3.44 |
| 149 BRONX: Westchester-Unionport | 4.62 | 81.6 | 25.5 | 74.5 | 18.0 | 4.9 | 72.1 | 28,547 | 3.26 |
| 150 QUEENS: Far Rockaway-Bayswater | 4.62 | 79.1 | 28.4 | 71.6 | 23.3 | 9.3 | 74.2 | 30,705 | 3.77 |
| 151 BRONX: Bronxdale | 4.59 | 81.7 | 28.5 | 71.5 | 17.8 | 6.6 | 75.1 | 27,068 | 3.47 |
| 152 BROOKLYN: Starrett City | 4.58 | 78.8 | 22.8 | 77.2 | 22.0 | 10.8 | 73.4 | 29,987 | 3.94 |
| 153 QUEENS: Corona | 4.57 | 85.2 | 33.9 | 66.1 | 14.1 | 4.2 | 77.6 | 22,651 | 3.20 |
| 154 QUEENS: Jamaica | 4.56 | 83.1 | 32.3 | 67.7 | 20.5 | 5.8 | 79.4 | 23,535 | 3.80 |


| RANK | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ | LIFE AT BIRTH (years) | LESS THAN HIGH SCHOOL (\% of adults 25+) | LIFE EXPECTANCY AT BIRTH (years) | AT LEAST BACHELOR'S degre (\% of adults 25 +) | $\left\lvert\, \begin{gathered} \text { GRADUATE } \\ \text { DEGREE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}\right.$ | SCHOOL ENROLLMENT (\% ages 3 to 24) | MEDIAN EARNINGS (\$) | EDUCATION index |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |
| 155 BROOKLYN: East New York | 4.40 | 78.8 | 21.2 | 78.8 | 14.1 | 4.1 | 75.0 | 29,483 | 3.52 |
| 156 BROOKLYN: Sunset Park West | 4.28 | 83.4 | 39.1 | 60.9 | 22.4 | 8.4 | 74.5 | 22,206 | 3.24 |
| 157 Manhattan: East Harlem North | 4.27 | 78.3 | 29.2 | 70.8 | 24.4 | 9.5 | 74.4 | 27,593 | 3.81 |
| 158 MANHATTAN: Manhattanville | 4.21 | 82.3 | 32.4 | 67.6 | 26.5 | 10.9 | 70.6 | 22,304 | 3.46 |
| 159 BROOKLYN: Bushwick South | 4.19 | 80.1 | 33.3 | 66.7 | 21.6 | 5.2 | 71.0 | 26,939 | 2.98 |
| 160 BRONX: Norwood | 4.17 | 79.7 | 28.3 | 71.7 | 20.7 | 6.1 | 73.4 | 25,688 | 3.43 |
| 161 BROoklyn: Ocean Hill | 4.09 | 76.7 | 27.1 | 72.9 | 15.2 | 4.0 | 76.0 | 29,848 | 3.40 |
| 162 BROOKLYN: Cypress Hills-City Line | 3.96 | 78.8 | 27.4 | 72.6 | 12.8 | 3.6 | 71.5 | 26,924 | 2.83 |
| 163 BROOKLYN: Seagate-Coney Island | 3.95 | 79.8 | 30.0 | 70.0 | 22.0 | 7.0 | 75.4 | 22,452 | 3.65 |
| 164 BRONX: Bedford Park-Fordham North | 3.93 | 79.7 | 32.3 | 67.7 | 14.6 | 4.3 | 70.7 | 25,899 | 2.65 |
| 165 BROOKLYN: Williamsburg | 3.87 | 82.8 | 28.1 | 71.9 | 8.5 | 3.4 | 82.8 | 18,016 | 3.68 |
| 166 BROOKLYN: Bushwick North | 3.83 | 80.1 | 42.4 | 57.6 | 20.8 | 5.6 | 69.5 | 25,108 | 2.42 |
| 167 QUEENS: North Corona | 3.82 | 85.5 | 46.6 | 53.4 | 7.4 | 2.4 | 68.3 | 20,970 | 1.38 |
| 168 BRONX: University Heights-Morris Heights | 3.68 | 80.7 | 32.3 | 67.7 | 12.6 | 3.4 | 78.5 | 20,002 | 3.26 |
| 169 BRONX: West Farms-Bronx River | 3.68 | 81.6 | 38.2 | 61.8 | 10.7 | 2.7 | 73.0 | 21,654 | 2.36 |
| 170 BRONX: Soundview-Bruckner | 3.65 | 81.6 | 39.2 | 60.8 | 11.9 | 3.0 | 73.5 | 21,181 | 2.43 |
| 171 brooklyn: East New York (Pennsylvania Av) | 3.64 | 76.7 | 27.8 | 72.2 | 10.5 | 2.5 | 75.4 | 25,930 | 3.03 |
| 172 BROOKLYN: Sunset Park East | 3.60 | 83.4 | 54.6 | 45.4 | 14.3 | 4.6 | 78.8 | 18,568 | 2.42 |
| 173 BROOKLYN: Brownsville | 3.57 | 76.7 | 27.5 | 72.5 | 11.1 | 2.9 | 75.5 | 24,881 | 3.10 |
| 174 BRONX: Highbridge | 3.51 | 78.9 | 34.3 | 65.7 | 13.1 | 3.1 | 78.1 | 21,152 | 3.14 |
| 175 BRONX: Mount Hope | 3.49 | 80.7 | 36.3 | 63.7 | 13.4 | 4.6 | 74.8 | 19,658 | 2.81 |
| 176 BRONX: Fordham South | 3.49 | 80.7 | 39.1 | 60.9 | 11.4 | 3.7 | 74.5 | 20,405 | 2.53 |

## New York City

HD Index by Neighborhood Tabulation Area (continued)

| RANK | $\begin{aligned} & \text { HD } \\ & \text { INDEX } \end{aligned}$ |  | LESS THAN HIGH SCHOOL (\% of adults $25+1$ | LIFE EXPECTANCY AT BIRTH (years) | at least <br> BACHELOR'S DEGREE (\% of adults $25+$ ) | $\begin{gathered} \text { GRADUATE } \\ \text { DEGREE } \\ \text { (\% of adults } 25+\text { ) } \end{gathered}$ | SCHOOL ENROLLMENT (\% ages 3 to 24) | MEDIAN EARNINGS (\$) | EDUCATION INDEX |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NEW YORK CITY (CONTINUED) |  |  |  |  |  |  |  |  |  |
| 177 BRONX: East Concourse-Concourse Village | 3.45 | 78.9 | 37.6 | 62.4 | 15.2 | 4.8 | 74.4 | 21,557 | 2.82 |
| 178 BRONX: West Concourse | 3.45 | 78.9 | 36.0 | 64.0 | 13.8 | 3.2 | 78.7 | 20,506 | 3.16 |
| 179 BRONX: Kingsbridge Heights | 3.39 | 79.7 | 33.2 | 66.8 | 19.3 | 4.5 | 71.2 | 19,881 | 2.87 |
| 180 BRONX: Morrisania-Melrose | 3.38 | 77.6 | 36.5 | 63.5 | 12.6 | 3.7 | 76.5 | 22,288 | 2.89 |
| 181 BRONX: Crotona Park East | 3.32 | 77.6 | 37.3 | 62.7 | 13.7 | 2.4 | 75.7 | 22,098 | 2.78 |
| 182 BRONX: Longwood | 3.30 | 78.5 | 42.8 | 57.2 | 11.2 | 3.5 | 75.3 | 21,892 | 2.42 |
| 183 BRONX: Melrose South-Mott Haven North | 3.24 | 78.5 | 40.4 | 59.6 | 11.4 | 3.1 | 76.9 | 20,586 | 2.68 |
| 184 BRONX: Hunts Point | 3.18 | 78.5 | 39.3 | 60.7 | 10.6 | 2.6 | 72.6 | 21,281 | 2.26 |
| 185 BRONX: Mott Haven-Port Morris | 2.91 | 78.5 | 44.3 | 55.7 | 8.7 | 1.9 | 73.7 | 19,619 | 2.03 |
| 186 BRONX: East Tremont | 2.88 | 77.6 | 41.5 | 58.5 | 10.9 | 2.8 | 73.6 | 19,623 | 2.29 |
| 187 BRONX: Belmont | 2.87 | 77.6 | 37.2 | 62.8 | 13.2 | 4.8 | 85.3 | 14,411 | 3.77 |
| 188 BRONX: Claremont-Bathgate | 2.71 | 77.6 | 38.4 | 61.6 | 11.2 | 2.2 | 74.7 | 17,620 | 2.51 |

## DATA SOURCES:

Life expectancy: Values imputed from the PUMA value. Measure of America calculations using mortality data from the New York City Department of Health and Mental
Hygiene and population data from US Census Bureau, 2010-2014.
Education: US Census Bureau ACS, 2011-2015.
Earnings: New York City Department of City Planning, 2011-2015.

## Methodological Note

## Human Development

Human development is about what people can do and be. It is formally defined as the process of improving people's well-being and expanding their freedoms and opportunities. The human development approach emphasizes the everyday experiences of ordinary people, encompassing the range of factors that shape their opportunities and enable them to live lives of value and choice. People with high levels of human development can invest in themselves and their families and live to their full potential; those without find many doors shut and many choices and opportunities out of reach.

The human development concept was developed by the late economist Mahbub ul Haq. In his work at the World Bank in the 1970s, and later as minister of finance in his own country of Pakistan, Dr. Haq argued that existing measures of human progress failed to account for the true purpose of development-to improve people's lives. In particular, he believed that the commonly used measure of gross domestic product failed to adequately measure well-being. Working with Nobel laureate Amartya Sen and other gifted economists, Dr. Haq published the first Human Development Report, commissioned by the United Nations Development Programme in 1990.

## The American Human Development Index

The human development approach is extremely broad, encompassing the wide range of economic, social, political, psychological, environmental, and cultural factors that expand or restrict people's
opportunities and freedoms. But the American Human Development (HD) Index is comparatively narrow, a composite measure that combines a limited number of indicators into a single score. The HD Index is an easily understood numerical measure that reflects what most people believe are the basic ingredients of human well-being: health, education, and income. The value of the HD Index varies between 0 and 10 , with a score of 10 being the maximum possible that can be achieved on the aggregate factors that make up the index.

## Data Sources

The analysis in this report includes well-being estimates for the entire New York metropolitan area and the 170 census-defined public use microdata areas (PUMAs) contained within it, as well as for New York City, the five boroughs, and the 188 New York City neighborhood tabulation areas (NTAs). PUMAs are substate geographic units designated by the US Census Bureau. They have populations of at least 100,000 and generally less than 200,000. The New York metro area comprises New York City and the surrounding counties in New Jersey, Connecticut, and New York State as defined by the Regional Plan Association. A total of thirty-one counties are included in the metro area, ranging in population size from under 75,000 residents in Sullivan County to over 2.5 million in Kings County (Brooklyn).

The American Human Development Index for $A$ Portrait of New York City 2018 was calculated using several datasets. Mortality data used to calculate life expectancy are from the New York City Department of Health and Mental Hygiene, the New York State Department of Health, the New Jersey Department
of Health, and the Connecticut Department of Public Health. The education, earnings, and population data all come from the American Community Survey (ACS), a product of the US Census Bureau. The ACS is an ongoing survey that collects data from a representative percentage of the population every year using standard sampling methods.

For places with large populations, such as New York City, the Census Bureau publishes one-year estimates. All data for the metropolitan area, New York City, and PUMAs in this report are calculated using one-year data from 2015, the most recent survey available at the time of writing. For lesspopulous places such as NTAs, one-year estimates are often either unreliable due to small population sizes or simply not available. Therefore, multiyear 2011-2015 ACS estimates are used for these smaller geographical areas. Source notes below all tables in A Portrait of New York City 2018 show the exact year or years of data presented.

The New York metro area boasts one of the country's largest immigrant populations. The ACS contains responses from both documented and undocumented individuals but, for ACS 2015, did not require respondents to indicate their immigration status. Nevertheless, undocumented immigrants are harder to accurately count than documented immigrants. They are less likely to speak English, may be reluctant to disclose information to strangers, and are more likely to live in temporary housing. Estimating the size of the undocumented population is challenging, and there are many different approaches to this calculation. Using one methodology developed by the Pew Research Center, we estimate that in the metro area, the undocumented population comprises about 25 percent ${ }^{1}$ of the total foreign-born population, or approximately $1,565,700$ people. This is not to say that over one million people are missing from the analysis contained in this report, but rather that an estimated 5 to 7 percent of this population may be undercounted.

©HEALTH: A long and healthy life is measured using life expectancy at birth. Life expectancy at birth was calculated by Measure of America using data from the New York City Department of Health and Mental Hygiene, the New York State Department of Health, the New Jersey Department of Health, and the Connecticut Department of Public Health from 2010-2014 and population data from the US Census Bureau and the CDC WONDER Bridged-Race Population Estimates from 2010-2014. Life expectancy calculations for foreign-born and US-born NYC residents were conducted by the NYC Department of Health and Mental Hygiene. Life expectancy estimates for New York City overall and NYC racial and ethnic groups include death records of NYC residents who died outside of the city but within New York State. Life expectancy was calculated using abridged life tables using the Chiang II methodology. These abridged life tables aggregate death numerators and population denominators into age groups, rather than using single years of age as in complete life tables. The aggregated groups are ages under 1, 1-4, 5-9, 10-14...80-84, and 85 and older. The upper age band is capped at 85 and over. Age-specific mortality rates are used within the life table to calculate the probability of a death event at each age interval. These probabilities are then applied to a hypothetical population cohort of newborns (e0). Life expectancy at birth in a geographic area can be defined as an estimate of the average number of years a newborn baby would live if they experienced the particular area's age-specific mortality rates for that time period throughout their life. Population sizes were too small at the NTA level for reliable life expectancy estimates; therefore, the NTA estimates are imputed from the corresponding PUMA.
Data from the New York State Department of Health contained a higher rate of missing addresses than expected, especially in Westchester County. There was not enough mortality data to calculate Native American life expectancy.

EDUCATION: Access to education is measured using two indicators: net school enrollment for the population ages 3 through 24 and degree attainment for the population ages 25 and older (based on the proportions of the adult population that has earned at least a high school diploma, at least a bachelor's degree, and a graduate or professional degree). All educational attainment and enrollment figures come from Measure of America analysis of data from the US Census Bureau ACS. Single-year 2015 ACS estimates were used for New York metro area and New York City HD Index calculations except those for NTAs, which utilize multiyear 2011-2015 estimates.

도INCOME: A decent standard of living is measured using the median personal earnings of all workers ages 16 and older. Median personal earnings data come from the US Census Bureau ACS. Single-year 2015 ACS estimates were used for the metro area and New York City HD Index calculations except those for NTAs, which utilize multiyear 2011-2015 estimates. The NYC Department of City Planning's Population Division provided median earnings for the NTAs.

## Calculating the American Human Development Index

The first step in calculating the HD Index is to calculate a subindex for each of the three dimensions separately. This is done in order to transform indicators on different scales-years, dollars, etc.-into a common scale from 0 to 10. In order to calculate these indices-the health, education, and income indices-minimum and maximum values (goalposts) must be chosen for each underlying indicator.

Performance in each dimension is expressed as a value between 0 and 10 by applying the following general formula:

FORMULA
Dimension Index $=\frac{\text { actual value }- \text { minimum value }}{\text { maximum value }- \text { minimum value }} \times 10$

Since all three components range from 0 to 10 , the HD Index, in which all three indices are weighted equally, also varies from 0 to 10 , with 10 representing the highest level of human development.

The goalposts were determined based on the range of the indicator observed in all possible groupings in the United States, taking into account possible increases and decreases for years to come. The goalposts for the four principal indicators that make up the American Human Development Index are shown in the table below. To ensure that the HD Index is comparable over time, the health and education indicator goalposts do not change from year to year while the income goalposts are only adjusted for inflation using the CPI-U-RS from the Bureau of Labor Statistics. Because earnings data and the earnings goalposts are presented in dollars of the same year, these goalposts reflect a constant amount of purchasing power regardless of the year, making Income Index results comparable over time. In cases where an estimate for a population group or geographic area falls above or below the set goalpost for that indicator, a maximum value of 10 or a minimum value of 0 is imputed for the purposes of calculating the HD Index.

| INDICATOR | Maximum <br> value | Minimum <br> value |
| :--- | :---: | :---: |
| Life expectancy at birth | 90 years | 66 years |
| Educational attainment score | 2.0 | 0.5 |
| Combined net enrollment ratio | $95 \%$ | $\vdots 0 \%$ |
| Median personal earnings* | $\$ 66,751$ | $\$ 15,777$ |

*Earnings goalposts were originally set at $\$ 13,000$ and $\$ 55,000$ in 2005 dollars.
degree of sampling and nonsampling error inherent in data from the Census Bureau's annual ACS. Not all differences between estimates for two places or groups may reflect a true difference between those places or groups. Comparisons between similar values on any indicator should be made with caution since these differences may not be statistically significant. Direct comparisons between estimates that are not statistically significant at a 90 percent confidence level have been noted in the text.

## Geographic and Population Groups Used in This Report

## WITHIN THE NEW YORK METRO AREA

The "Five New Yorks" framing is a way to compare different areas within the region that share similar HD Index scores. For A Portrait of New York City 2018, Measure of America sorted the public use microdata areas into one of the Five New Yorks using the following thresholds:

## Gilded New York

HD Index scores equal to or greater than 8.50
Opportunity-Rich New York
HD Index scores equal to or greater than 7.00 and less than 8.50

## Main Street New York

HD Index scores equal to or greater than 5.50 and less than 7.00

## Struggling New York

HD Index scores equal to or greater than 4.00 and less than 5.50

## Precarious New York

HD Index scores less than 4.00

The Five New Yorks are also presented as five separate units of analysis in order to permit some exploration of the broad demographic and socioeconomic disparities between people living in communities with different human development outcomes. For this analysis, Measure of America

## EXAMPLE

## Calculating the HD Index for New York City

HEALTH Index
Life expectancy at birth for New York City is 82.26
years. The Health Index is then:
Health Index $=\frac{82.26-66}{90-66} \times 10=6.77$

## EDUCATION Index

In 2015, 80.9 percent of New York City's residents 25 years and older had at least a high school diploma, 36.8 percent had at least a bachelor's degree, and 15.1 percent had a graduate or professional degree. Therefore, the Educational Attainment Score is $0.809+0.368+0.151=1.33$. The Educational Attainment Index is then:

$$
\text { Educational Attainment Index }=\frac{1.33-0.5}{2.0-0.5} \times 10=5.52
$$

School enrollment (net enrollment ratio) was 78.5 percent, so the Enrollment Index is:

$$
\text { Enrollment Index }=\frac{78.5-60}{95-60} \times 10=5.30
$$

The Educational Attainment Index and the Enrollment Index are then combined to obtain the Education Index. The Education Index gives a $2 / 3$ weight to the Educational Attainment Index and a $1 / 3$ weight to the Enrollment Index to reflect the relative ease of enrolling students in school as compared with the relative difficulty of completing a meaningful course of education (signified by the attainment of degrees):

$$
\text { Education Index }=\frac{2}{3} 5.52+\frac{1}{3} 5.30=5.44
$$

## INCOME Index

Median personal earnings for the typical worker in New York City in 2015 were $\$ 35,934$. The Income Index is then:

$$
\text { Income Index }=\frac{\log (35,934)-\log (15,777.62)}{\log (66,751.48)-\log (15,777.62)} \times 10=5.71
$$

HUMAN DEVELOPMENT Index
Once these indices have been calculated, the HD Index is obtained by taking the average of the three indices:

$$
\text { HD Index }=\frac{6.77+5.44+5.71}{3}=\mathbf{5 . 9 8}
$$

aggregated PUMAs based on their average HD Index scores to identify Gilded, Opportunity-Rich, Main Street, Struggling, and Precarious New York. The Five New Yorks represent the average score for that group of PUMAs; there will always be individuals who are doing better or worse than the HD Index score for that geography-no place is homogeneous.

Public use microdata areas or PUMAs are substate geographic units designated by the US Census Bureau. PUMAs have populations of at least 100,000 and generally less than 200,000. The New York metro area has a total of 170 PUMAs. PUMAs used in this report were delineated for the 2010 census and were named by the local State Census Data Center.

Racial and ethnic groups in this report are based on definitions established by the White House Office of Management and Budget (OMB) and used by the US Census Bureau and other government entities. Since 1997 the OMB has recognized five racial groups and two ethnic categories. The racial groups include Native Americans, blacks, Asians, Native Hawaiians and other Pacific Islanders, and whites. The ethnic categories are Latino and not Latino. People of Latino ethnicity may be of any race. In this report, these racial groups include only non-Latino members of these groups who self-identify with that race group alone and no other. Census data also include some detail on the specific ancestries of the resident population. Detailed race and ancestry data were used to identify members of the largest Asian subgroups and all Latino/Hispanic subgroups in the New York metro area for the purposes of this report.

## WITHIN NEW YORK CITY

Neighborhood tabulation areas are used by the NYC Department of City Planning for zoning and sustainability planning. They have a minimum population of 13,000 residents and are built from census tracts. There are 188 residential NTAs in NYC.

## Accounting for Cost-of-Living Differences

As the report details, the New York metro area is an expensive place to live with particularly high housing costs. Any comparisons with other cities or national data in terms of food, shelter, and clothing, therefore, must take this into account. There is currently no suitable nationwide measure, official or not, of the cost of living that could be used as a basis for adjusting for differences across regions. The Consumer Price Index (CPI), calculated by the US Bureau of Labor Statistics, helps in understanding changes in the purchasing power of the dollar over time. The CPI is sometimes mistaken for a cost-ofliving index, but in fact it is best used as a measure of the change in the cost of a set of goods and services over time in a given place. The Council for Community and Economic Research's 2016 Cost of Living Index ranked Manhattan as the most expensive urban area for the cost of consumer goods and services for professional households in the top income quintile. Brooklyn ranked fourth and Stamford, Connecticut, ranked ninth. ${ }^{2}$ Like any summary of a large area, however, these rankings should be interpreted with caution. This is in part because cost-of-living variations within compact regions, such as states or cities or between neighborhoods in the same urban area, are often more pronounced than variations between states and regions. Further, while costs vary across the nation, they are often higher in areas with more community assets that are conducive to higher levels of well-being. For example, neighborhoods with higher housing costs are often places with higher-quality public services such as schools, recreation facilities, and transport systems and safer and cleaner neighborhoods. Thus, to adjust for cost of living would be to explain away some of the factors that the HD Index is measuring.

## Global Goals Dashboard

Poverty (\% in households with incomes below federal poverty line) NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: US Census Bureau, American Community Survey, Table S1701, 2016.

Child Poverty (\% of children in households with incomes below $\mathbf{2 0 0 \%}$ of federal poverty line) NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: Census Bureau, American Community Survey, Table B17024, 2016.

SNAP Benefits (\% of households based on race of household head) US Census Bureau, American Community Survey, Table S2201, 2016.

Low Birth Weight Babies (\% based on race of mother) CDC Wonder, 2016.

Life Expectancy at Birth (years) NY
Metro: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population estimates from CDC WONDER and US Census Bureau, 2010-2014. US: Measure of America calculations using US Centers for Disease Control and Prevention mortality data and population estimates from CDC WONDER, 2010-2014.

## No Health Insurance (\% of population)

NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: US Census Bureau, American Community Survey, Table S2701, 2016.

Preschool Enrollment (\% of 3- and 4-year olds) NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: US Census Bureau, American Community Survey, Table S1401, 2016.

Did Not Complete High School (\% of adults 25+) US Census Bureau, American Community Survey, Public Use Microdata Sample, 2015.

Completed at Least Bachelor's Degree (\% of adults $\mathbf{2 5 +}$ ) US Census Bureau, American Community Survey, Public Use Microdata Sample, 2015.

Teen Births (births to girls ages $\mathbf{1 5}$ to 19 per 1,000 girls) CDC Wonder, 2016. Counties with fewer than 10 births have been omitted. For NYC Metro rate, Hunterdon, Putnam, and Sullivan are omitted. For Black rate, Litchfield, Hunterdon, Morris, Sussex, Warren, Putnam, Rockland, Sullivan, and Ulster are omitted. For White rate, Hudson, Hunterdon, Putnam, and Sullivan are omitted. For Latino rate, Hunterdon, Sussex, Warren, Putnam, Sullivan, and Ulster are omitted.

Ratio of Female to Male Median Personal Earnings (\$) NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: US Census Bureau, American Community Survey, Table B20017, 2016.

Disconnected Youth (\% ages 16 to 24 not in school and not working) NY Metro: Measure of America calculation using data from the US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016.

Unemployed (\% ages 16 and older) NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: US Census Bureau, American Community Survey, Table S2301, 2016.

Renters Spending 30\% or More on Housing (\%) US and NY Metro: US Census Bureau, American Community Survey, Table B25070, 2016. Racial groups: US Census Bureau, American Community Survey Selected Population Tables, Table B25070, 2011-2015.

Commute 60 Minutes or More One Way (\% of workers) NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: US Census Bureau, American Community Survey, Table B08303, 2016.

Take Public Transportation, Walk, or Bicycle to Work (\% of commuters) NY Metro: US Census Bureau, American Community Survey, Public Use Microdata Sample, 2016. US: US Census Bureau, American Community Survey, Table B08006, 2016.

Jail (average daily population per 100,000 adults 16 and older based on last known residence) Vera Institute of Justice, 2015. Population weighted average of the counties composing the metro area.

## Notes

## Understanding Human Development

${ }^{1}$ Burd-Sharps, Lewis, and Borges Martins, The Measure of America.
${ }^{2}$ Sen, "Development as Capability Expansion.'
${ }^{3}$ This explanatory chapter and other texts and diagrams that provide definitions and other background information draw heavily on standard text that appears, with some adaptations, in all Measure of America Human Development Reports.
${ }^{4}$ Common Good Forecaster (www. measureofamerica.org/forecaster) using November 2012 Current Population Survey (CPS) Voting and Registration Supplement and US Census Bureau American Community Survey education data.

## What the Human Development Index Reveals: The New York Metropolitan Area

${ }^{1}$ The Regional Plan Association has for ninety years sought to improve the prosperity, sustainability, and quality of life in the New York-New Jersey-Connecticut metropolitan region through work in transportation, economic development and real estate, environment and open space, and other issues. Their recently released Fourth Regional Plan was a valuable resource in preparing this report.
${ }^{2}$ Weller and Thompson, Wealth Inequality Among Asian Americans Greater Than Among Whites.
${ }^{3}$ Endangered Language Alliance, "A New Language Map of Queens."
${ }^{4}$ William H. Frey, Brookings Institution and University of Michigan Social Science Data Analysis Network's analysis of 1990, 2000, and 2010 Census Decennial Census tract data.
${ }^{5}$ Reardon and Bischoff, Growth in the Residential Segregation of Families by Income, 1970-2009.
${ }^{6}$ Diversity and Disparities Project, data tool.
${ }^{7}$ Massey, "Residential Segregation and Neighborhood Conditions in U.S. Metropolitan Areas."
${ }^{8}$ Pastor, Sadd, and Hipp, "Which Came First? Toxic Facilities, Minority Move-in, and Environmental Justice."
${ }^{9}$ Gilens and Page, "Testing Theories of American Politics: Elites, Interest Groups, and Average Citizens" and Bartels, "Economic Inequality and Political Representation."
${ }^{10}$ Nunnally, Trust in Black America.
${ }^{11}$ Aaronson, Hartley, and Mazumder, "The Effects of the 1930s HOLC 'Redlining' Maps."
${ }^{12}$ Katznelson, When Affirmative Action Was White.
${ }^{13}$ New York Times. " M.T.A. Delays: How Did the Subway Get So Bad?"
${ }^{14}$ INRIX, Inc., "Press Release: Los Angeles Tops INRIX Global Congestion Ranking."
${ }^{15}$ Fix NYC Advisory Panel, Fix NYC Advisory Panel Report.
${ }^{16}$ Blue-collar workers are defined as those working in construction, production, and service jobs.
${ }^{17}$ Regional Plan Association, "Fourth Regional Plan: Build New Subway Lines to Underserved Areas of the City."
${ }^{18}$ Pastor et al., "The Haves, the HaveNots, and the Health of Everyone."
${ }^{19}$ Ibid.
${ }^{20}$ Pastor, Sadd, and Morello-Frosch, "The Air Is Always Cleaner on the Other Side."
${ }^{21}$ Lewis and Burd-Sharps, A Portrait of Los Angeles County.
${ }^{22}$ Rivlin-Nadler, "Hell on Wheels: Port Authority's Broken Promise Is Choking Newark's Kids."
${ }^{23}$ Muscave, "Investigation: Bayway Refinery Largest of 137 worst Central Jersey Polluters."
${ }^{24}$ The linguistic isolation indicator is defined by the EPA as the "percent of people in a block group living in linguistically isolated households. A household in which all members age 14 years and over speak a non-English language and also speak English less than "very well" (have difficulty with English) is linguistically isolated."
${ }^{25}$ Environmental Protection Agency, "Environmental Justice Screening and Mapping Tool (Version 2017)."
${ }^{26}$ Wilson and Svajlenka, Immigrants Continue to Disperse, with Fastest Growth in the Suburbs.
${ }^{27}$ MOA analysis of US Census Bureau American Community Survey 1-year estimates for 2006 and 2016, table B05001, and ACS 2000 data.
${ }^{28} \mathrm{lbid}$.
${ }^{29}$ US Census Bureau, American Community Survey 2016, table B05005.
${ }^{30}$ Snyder, "'To the Suburbs!' Lessons from Minorities and the New Immigrants"
${ }^{31}$ Burd-Sharps and Lewis, A Portrait of California 2011 and A Portrait of California 2014-2015.
${ }^{32}$ In other words, there are many PUMAs with HD Index scores around the average but relatively fewer with very high or very low scores. Cluster analysis using k-medians clustering produced broadly similar groupings, as a partial validation of this approach.
${ }^{33}$ Sherman, Uneasy Street: The Anxieties of Affluence.
${ }^{34} \mathrm{Ibid}$.
${ }^{35}$ McLanahan and Sandefur, Growing Up with a Single Parent: What Hurts, What Helps.
${ }^{36}$ Lewis and Burd-Sharps, Who Graduates? New Findings on NYC High School Admissions and Graduation Rates.
${ }^{37}$ Burd-Sharps, Lewis, and Borges Martins, The Measure of America.

38 Thanks to Kelly Lytle Hernandez and Terry Allen for raising this issue in their commentary on A Portrait of Los Angeles County, which can be found at http://items.ssrc.org/access-to-freedom-caged-la/.
${ }^{39}$ Alexander, The New Jim Crow, 9.
${ }^{40}$ NYC Department of Corrections and Department of Health and Mental Hygiene, 2014.
${ }^{41}$ The Sentencing Project, "Fact Sheet: Trends in U.S. Corrections."
$4^{42}$ lbid.
${ }^{43}$ Nellis, The Color of Justice.

## What the Human Development Index Reveals: New York City

${ }^{1}$ Lewis and Burd-Sharps, Zeroing In on Place and Race.
${ }^{2}$ Ibid.
${ }^{3}$ The historical year of comparison is 2005-2007. For the borough data, it is 2017.
${ }^{4}$ Institute for Children, Poverty \& Homelessness, The Atlas of Student Homelessness in New York City 2017.
${ }^{5}$ Routhier, State of the Homeless 2018.
${ }^{6}$ Ibid.
${ }^{7}$ Routhier, "Briefing Paper: Family Homelessness in NYC."
${ }^{8}$ Coalition for the Homeless, "Why Are So Many People Homeless?"
${ }^{9}$ NYC Housing and Preservation, Housing New York 2.0.
${ }^{10}$ NYC Department of Homeless Services, Turning the Tide on Homelessness in New York City.
${ }^{11}$ Routhier, State of the Homeless 2018.
${ }^{12}$ Coalition for the Homeless, "Proven Solutions"

## A Long and Healthy Life

${ }^{1}$ Vizard and Burchardt, "Developing a Capability List: Final Recommendations of the Equalities Review Steering Group on Measurement."
${ }^{2}$ National Public Radio, "Patients' Perspectives on Health Care in the United States."
${ }^{3}$ Braveman, "What Is Health Equity: And How Does a Life-Course Approach Take Us Further Toward It?"
${ }^{4}$ World Health Organization, "Key Concepts: Social Determinants of Health."
${ }^{5}$ Kull et al., "Stressors, Mental Health, and Sources of Support among LGBTQ Public High School Students in New York City."
${ }^{6}$ Measure of America analysis of New York City Health and Nutrition Examination Survey 2013 data.
${ }^{7}$ New York City Department of Health and Mental Hygiene, "HIV/AIDS among Men Who Have Sex With Men (MSM) in New York City, 2016."
${ }^{8}$ Frazer and Howe, Transgender Health and Economic Insecurity.
${ }^{9}$ National LGBT Health Education Center, Understanding the Health Needs of LGBT People.
${ }^{10}$ Ibid.
${ }^{11}$ Ibid.
12 James et al., The Report of the 2015 U.S. Transgender Survey.
${ }^{13}$ Braveman, "What Are Health Disparities and Health Equity? We Need to Be Clear."

14 NYC Center for Health Equity.
${ }^{15}$ Mettey, Take Care New York 2020.
${ }^{16}$ Braveman, "What Is Health Equity: And How Does a Life-Course Approach Take Us Further Toward It?"
${ }^{17}$ World Health Organization, "Key Concepts: Social Determinants of Health."
${ }^{18}$ Desjardins, "Why Is Life Expectancy Longer for Women Than It Is for Men?"
${ }^{19}$ Central Intelligence Agency, "The World Factbook: Maternal Mortality Rate."
${ }^{20}$ Hutt, "In Which Countries Do Women Outlive Men by More Than a Decade?"
${ }^{21}$ Mahalik, Burns, and Syzdek, "Masculinity and Perceived Normative Health Behaviors as Predictors of Men's Health Behaviors."

222015 data from the Centers for Disease Control and Prevention's Web-Based Injury Statistics Query and Reporting System (WISQARS™).
${ }^{23}$ Greenfield et al., "Substance Abuse in Women."
${ }^{24}$ Rivera Drew and Henning Smith, "Within-Occupation and Industry Sex, Race, and Educational Differences in Exposures to Workplace Hazards."
${ }^{25}$ Federal Bureau of Investigation, " 2014 Crime in the United States."
${ }^{26}$ Thompson et al., "The Influence of Gender and Other Patient Characteristics on Health Care-Seeking Behaviour."
${ }^{27}$ Taylor et al., "Biobehavioral Responses to Stress in Females: Tend-andBefriend, not Fight-or-Flight."
${ }^{28}$ Cross, Copping, and Campbell, "Sex Differences in Impulsivity: A MetaAnalysis."
${ }^{29}$ UN High Commissioner for Human Rights, "Discrimination and Violence against Individuals Based on Their Sexual Orientation and Gender Identity" and Roberts et al., "Understanding Who Commits Hate Crime and Why They Do lt."
${ }^{30}$ Centers for Disease Control and Prevention, "Intimate Partner Violence: Consequences."
${ }^{31}$ World Health Organization, "Violence against Women: Health Impact."
${ }^{32}$ Petrosky et al., "Racial and Ethnic Differences in Homicides of Adult Women and the Role of Intimate Partner Violence - United States, 2003-2014."
${ }^{33}$ Ibid.
${ }^{34}$ National Academies of Science, Engineering, and Medicine, "Health Status and Access to Care."
${ }^{35}$ Teruya, Bazargan-Hejazi, and Drew,"The Immigrant and Hispanic Paradoxes."
${ }^{36}$ Blue and Fenelon,"Explaining Low Mortality among US Immigrants Relative to Native-Born Americans: The Role of Smoking."
${ }^{37}$ Acciai, Noah, and Firebaugh, "Pinpointing the Sources of the Asian Mortality Advantage in the United States."
${ }^{38}$ Li, Sun, and Huynh, "Mortality among Chinese New Yorkers."
${ }^{39}$ Fuchs, "California Governor Signs Bill to Disaggregate Asian-American Health Data."
${ }^{40}$ Li et al., Summary of Vital Statistics, 2014.
${ }^{41}$ Institute of Medicine, Reducing Suicide: A National Imperative.
${ }^{42}$ Anderson, "The Urge to End It All."
${ }^{43}$ Beautrais, "Suicide by Jumping: A Review of Research and Prevention Strategies."
${ }^{44}$ Abraído-Lanza et al., "The Latino Mortality Paradox: A Test of the 'Salmon Bias' and Healthy Migrant Hypotheses."
${ }^{45}$ Abraído-Lanza, Chao, and Flórez, "Do Healthy Behaviors Decline with Greater Acculturation? Implications for the Latino Mortality Paradox."
${ }^{46}$ New York City Department of Health and Mental Hygiene, Annual Report: Hepatitis $B$ and $C$ in New York City, 2016.
${ }^{47}$ US Census Bureau American Community Survey 2011-2015, table S0501.
${ }^{48}$ Case and Deaton, "Mortality and Morbidity in the 21st Century."
49 Li et al., Summary of Vital Statistics, 2014
${ }^{50}$ New York State Department of Health, New York State Health Equity Report.
${ }^{51}$ Ibid.
${ }^{52}$ Li et al., Summary of Vital Statistics, 2014.
${ }^{53} \mathrm{Ibid}$.
${ }^{54}$ Reeves and Bowen Matthew, "6 Charts Showing Race Gaps within the American Middle Class."
${ }^{55}$ Southall, "Crime in New York City Plunges to a Level Not Seen Since the 1950s."
${ }^{56}$ Li et al., Summary of Vital Statistics, 2015.
${ }^{57}$ UNICEF, A Familiar Face: Violence in the Lives of Children and Adolescents.
${ }^{58}$ Alhusen et al., "Racial Discrimination and Adverse Birth Outcomes: An Integrative Review."
${ }^{59}$ Mauss, "Measuring Allostatic Load in the Workforce: A Systematic Review."
${ }^{60}$ Forsyth et al., "Perceived and Police Reported Neighborhood Crime: Linkages to Adolescent Activity Behaviors and Weight Status";Evenson et al., "Associations of Adult Physical Activity with Perceived Safety and Police-Recorded Crime: The Multiethnic Study of Atherosclerosis."
${ }^{61}$ Stafford et al., "Association between Fear of Crime and Mental Health and Physical Functioning."
${ }^{62}$ Hynynen, "Community Perceptions of Brownsville."
${ }^{63}$ Schnittker and John. "Enduring Stigma: The Long-Term Effects of Incarceration on Health."
${ }^{64}$ Office of the New York City Comptroller Scott M. Stringer, How New York Lives.
${ }^{65}$ Krieger and Higgins, "Housing and Health: Time Again for Public Health Action."
${ }^{66}$ Hendi, Mehta, and Elo, "Health among Black Children by Maternal and Child Nativity."
${ }^{67}$ Elo, Mehta, and Huang, "Health of Native-Born and Foreign-Born Black Residents in the United States."
${ }^{68}$ Read and Emerson, "Racial Context, Black Immigration and the U.S. Black/ White Health Disparity."
${ }^{69}$ Khan, "Brownsville: No Label Necessary."
${ }^{70}$ Li et al., Summary of Vital Statistics, 2015.
${ }^{71}$ Li et al., Summary of Vital Statistics, 2014.
${ }^{72}$ Simon, "Lung Cancer Risks for NonSmokers."
${ }^{73}$ Genetics Home Reference, "What Is Epigenetics?"
${ }^{74}$ New York City Department of Health and Mental Hygiene, "Preventing Sexually Transmitted Infections."
${ }^{75}$ NYC Health, "Sexually Transmitted Infections (STIs)"
${ }^{76}$ CDC, "HIV in the United States."
${ }^{77}$ New York City Department of Health and Mental Hygiene, HIV Surveillance Annual Report, 2016.
${ }^{78} \mathrm{Ibid}$.
${ }^{79}$ Ferriman, "BMJ Readers Choose the 'Sanitary Revolution' as Greatest Medical Advance Since 1840."
${ }^{80}$ Yoon et al., "Potentially Preventable Deaths from the Five Leading Causes of Death.'
${ }^{81}$ Alkire and Foster, "Understandings and Misunderstandings of Multidimensional Poverty Measurement."
${ }^{82}$ Geronimus et al., "'Weathering' and Age Patterns of Allostatic Load Scores Among Blacks and Whites in the United States."
${ }^{83}$ Weiss et al., "Reconsidering Access: Park Facilities and Neighborhood Disamenities in New York City."
${ }^{84}$ Bartels, "Political Inequality in Affluent Democracies: The Social Welfare Deficit."
${ }^{85}$ Cohen, "Childhood Socioeconomic Status and Adult Health."
${ }^{86}$ Evans and Cassells, "Childhood Poverty, Cumulative Risk Exposure, and Mental Health in Emerging Adults."
${ }^{87}$ Wardle et al., "Literature Review: Impacts of Socioeconomic Status on the Risk of Inflammatory Bowel Disease and Its Outcomes."
${ }^{88}$ Secrest et al., "Associations between Socioeconomic Status and Major Complications in Type 1 Diabetes."
${ }^{89}$ Sorensen et al., "Lower Socioeconomic Status Is Associated With Decreased Therapeutic Response to the Biologic Agents in Psoriasis Patients."
${ }^{90}$ Eligon and Gebeloff, "Affluent and Black, and Still Trapped by Segregation."
${ }^{91}$ Lewis and Burd-Sharps, The Measure of America 2010-2011.
${ }^{92}$ Wilkinson, "Income Distribution and Life Expectancy."
${ }^{93}$ Marmot, The Status Syndrome.
${ }^{94}$ Pickett and Wilkinson, The Spirit Level.
${ }^{95}$ Gilens, Affluence and Influence.
${ }^{96}$ Mohai and Saha, "Which Came First, People or Pollution? Assessing the Disparate Siting and Post-siting Demographic Change Hypotheses of Environmental Injustice."
${ }^{97}$ Popescu et al., "Racial Residential Segregation, Socioeconomic Disparities, and the White-Black Survival Gap."
${ }^{98}$ Hughes et al., "Pediatric Asthma Health Disparities: Race, Hardship, Housing, and Asthma in a National Survey."
${ }^{99}$ New York City Department of Health and Mental Hygiene, Child Health Data, 2015. Accessed through EpiQuery.
${ }^{100}$ Citizens' Committee for Children of New York, "Concentrations of Risk: Asthma and Poor Housing Conditions."
${ }^{101}$ Retrieved from Citizens' Committee for Children of New York's Keeping Track Online tool. "Fair to Poor Housing," data from US Census Bureau's Housing Vacancy Survey, http://data.cccnewyork. org/data/map/22/fair-to-poorhousing\#22/a/3/39/20/a.

## Access to Knowledge

${ }^{1}$ Bureau of Labor Statistics, "Unemployment Rates and Earnings by Educational Attainment, 2016."
${ }^{2}$ Lewis and Burd-Sharps, A Portrait of Los Angeles County.
${ }^{3}$ Lee and Zhou, The Asian American Achievement Paradox.
${ }^{4}$ Zhou and Lee, "Hyper-Selectivity and the Remaking of Culture: Understanding the Asian American Achievement Paradox."
${ }^{5}$ Duncan, Brooks-Gunn, and Klebanov, "Economic Deprivation and Early Childhood Development."
${ }^{6}$ Brooks-Gunn, Klebanov, and Duncan, "Ethnic Differences in Children's Intelligence Test Scores."
${ }^{7}$ Yeung and Conley. "Black-White Achievement Gap and Family Wealth."
${ }^{8}$ Darity et al., What We Get Wrong About Closing the Racial Wealth Gap.
${ }^{9}$ Conley, "Capital for College."
${ }^{10}$ Meschede et al., "'Family Achievements?': How a College Degree Accumulates Wealth for Whites and Not For Blacks."
${ }^{11}$ Conley, "Capital for College."
${ }^{12}$ Zhou and Lee, "Hyper-Selectivity and the Remaking of Culture: Understanding the Asian American Achievement Paradox."
${ }^{13}$ Lewis and Burd-Sharps, Who Graduates?
${ }^{14}$ Morgan, Farkas, and Hibel, "Matthew Effects for Whom?"
${ }^{15}$ Office of Human Services Policy, "ASPE Research Brief: The Early Achievement and Development Gap."
${ }^{16}$ Karen, Becoming Attached.
${ }^{17}$ Morris et al., "Targeting Parenting in Early Childhood."
${ }^{18}$ Substance Abuse and Mental Health Services Administration, "Adverse Childhood Experiences."
${ }^{19}$ Lugo-Gil and Tamis-LeMonda, "Family Resources and Parenting Quality: Links to Children's Cognitive Development Across the First 3 Years."
${ }^{20}$ Lee, Bartolic, and Vanderwater, "Predicting Children's Media Use in the USA."
${ }^{21}$ Hart and Risley, Meaningful Differences in the Everyday Experience of Young American Children.
${ }^{22}$ Ibid.
${ }^{23}$ Morris et al., "Targeting Parenting in Early Childhood."
${ }^{24}$ Council on Child and Adolescent Health, "The Role of Home-Visitation Programs in Improving Health Outcomes for Children and Families."
${ }^{25}$ Currie and Rossin-Slater, "EarlyLife Origins of Lifecycle Well-Being: Research and Policy Implications."
${ }^{26}$ Heckman et al., "An Analysis of the Memphis Nurse-Family Partnership Program."
${ }^{27}$ Karoly, Kilburn, and Cannon, Early Childhood Intervention: Proven Results, Future Promise.
${ }^{28}$ Votruba-Drzal, "Economic Disparities in Middle Childhood Development" and ChildTrends, "Program: Infant Health and Development Program (IHDP)"
${ }^{29}$ NYC Resources, "Nurse Home Visit for Pregnant Women."
${ }^{30}$ NYC Health, "Newborn Home Visiting Program."
${ }^{31}$ Healthy Families New York. "How Does HFNY work?"
${ }^{32}$ Aizer et al., "The Long-Term Impact of Cash Transfers to Poor Families."
${ }^{33}$ Dahl and Lochner, "The Impact of Family Income on Child Achievement: Evidence from the Earned Income Tax Credit."
${ }^{34}$ Kelley and Camilli, "The Impact of Teacher Education on Outcomes in Center-Based Early Childhood Education Programs."
${ }^{35}$ Gong, "Does Having a Preschool Teacher with a Bachelor's Degree Matter for Children's Development Outcomes?"
${ }^{36}$ Gendell, "NYC Gets an 'Incomplete' Grade In Early Childhood Education."
${ }^{37}$ Nix et al., "Promoting Children's Social-Emotional Skills in Preschool Can Enhance Academic and Behavioral Functioning in Kindergarten."
${ }^{38}$ García et al., "The Life-Cycle Benefits of an Influential Early Childhood Program."
${ }^{39}$ NYC Department of Education, "Pre-K for All 2014-15 Evaluation Response Memo."
${ }^{40}$ Castillo and Fuller, "Expanding Preschool in New York City - Lifting Poor Children or Middling Families?"
${ }^{41}$ National Public Radio, "New York City Mayor Goes All-In On Free Preschool."
${ }^{42}$ Potter, Diversity in New York City's Universal Pre-K Classrooms.
${ }^{43}$ Cramer et al., "Five Boroughs in Five Days."
${ }^{44}$ Tilly, Durable Inequality.
${ }^{45}$ Reeves and Howard, The Glass Floor.
46 Ibid .
${ }^{47}$ Quinn and Polikoff, "Summer Learning Loss: What Is It, and What Can We Do About It?"
${ }^{48}$ Lareau, Unequal Childhoods.
${ }^{49}$ Reeves and Howard, The Glass Floor
${ }^{50} \mathrm{Ibid}$.
${ }^{51}$ Gay, "Parents Do What the Mayor Hasn't-Integrate Schools."
${ }^{52}$ Kucsera and Orfield, New York State's Extreme School Segregation: Inequality, Inaction and a Damaged Future.
${ }^{53} \mathrm{Ibid}$.
${ }^{54}$ Wilson, "Racial Inequalities in Wages, Income, and Wealth Show That MLK's Work Remains Unfinished."
${ }^{55}$ Katznelson, When Affirmative Action Was White.
${ }^{56}$ Rothstein, The Color of Law.
${ }^{57}$ Burd-Sharps and Rasch, Impact of the US Housing Crisis on the Racial Wealth Gap Across Generations.
${ }^{58}$ Kucsera and Orfield, New York State's Extreme School Segregation.
${ }^{59} \mathrm{Ibid}$.
${ }^{60}$ Reardon, "School Segregation and Racial Academic Achievement Gaps."
${ }^{61}$ Ibid.
${ }^{62} 1 \mathrm{bid}$.
${ }^{63}$ Measure of America calculations of Department of Education data obtained by special request. Level 1 indicates that a student is well below the proficiency standard for their grade; Level 2, that they are partially proficient; Level 3, that they are proficient; and Level 4, that they exceed the proficiency standard.
${ }^{64}$ Mader, Hemphill, and Abbas, "Race, Class, and Choice in New York City Elementary Schools."
${ }^{65}$ New York State Technical and Education Assistance Center for Homeless Students (NYSTEACHS), "Data on Homelessness in New York State."
${ }^{66}$ Institute for Children, Poverty \& Homelessness, The Atlas of Student Homelessness in New York City 2017.
${ }^{67}$ Ibid.
${ }^{68}$ Landa, "Audit Report on the Department of Education's Efforts to Monitor and Address School Attendance of Homeless Children Residing in Shelters."
${ }^{69}$ Advocates for Children of New York and Citizens' Committee for Children of New York, "Recommendations for Improving School Access and Success for Rising Numbers of Students in Temporary Housing."
${ }^{70}$ Burd-Sharps and Lewis, One in Seven.
${ }^{71}$ Burd-Sharps and Lewis, More than a Million Reasons for Hope.
${ }^{72}$ Arnett, "Emerging Adulthood."
${ }^{73}$ Metro area here uses the US Census Bureau's definition of metropolitan statistical area (MSA) and is different from the definition used in the rest of the report.
${ }^{74}$ Burd-Sharps and Lewis, More than a Million Reasons for Hope.
${ }^{75}$ Lewis and Burd-Sharps, Zeroing In on Place and Race.
${ }^{76}$ Cahalan et al., "Indicators of Higher Education Equity in the United States."
${ }^{77}$ National Center for Education Statistics, "Postsecondary Attainment: Differences by Socioeconomic Status."
${ }^{78}$ Equality Indicators, "Disability and Education."
${ }^{79}$ Ibid.
${ }^{80}$ Office of the New York City Public Advocate Letitia James, "New York City Schools Are Failing to Provide Mandated Supports to Children with Disabilities."
${ }^{81}$ Equality Indicators, "Disability and Education."
${ }^{82}$ Zimmerman, "To Help Students with Disabilities Transition to Adulthood, New York City Is Opening New Resource Hubs in Every Borough."
${ }^{83}$ Cerebral Palsy Foundation, "'Just Say Hi' in NYC Schools."
${ }^{84}$ Equality Indicators, "Disability and Education."
${ }^{85}$ Coca and Black, "The Significance of High School Practices on Students' Four-Year College Enrollment."
${ }^{86} \mathrm{Ibid}$.
${ }^{87}$ Smith, "Free Impact on N.Y. Community Colleges."
${ }^{88}$ Seltzer, "New York Free College Goes to 22,000 and Counting."
${ }^{89}$ Chen, "75,000 Apply for State College Scholarships, but Many Won't Qualify."
${ }^{90}$ Coate, "The Excelsior Scholarship: Who Gets a Free Ride?"

## A Decent Standard of Living

${ }^{1}$ Dettling et al., " Recent Trends in Wealth-Holding by Race and Ethnicity."
${ }^{2}$ US Census Bureau American Community Survey 2015, Table S0201.
${ }^{3}$ Goldin et al., "The Expanding Gender Earnings Gap."
${ }^{4}$ Budig, The Fatherhood Bonus and The Motherhood Penalty: Parenthood and the Gender Gap in Pay.
${ }^{5}$ Goldin, "A Grand Gender Convergence: Its Last Chapter."
${ }^{6}$ Office of the New York City Comptroller Scott M. Stringer, "NYC Economic Brief: The Hardest Working Cities."
${ }^{7}$ Chetty et al., "Race and Economic Opportunity in the United States: An Intergenerational Perspective."
${ }^{8}$ US Census Bureau American Community Survey 2016, table B23022.
${ }^{9}$ Budig and England, "The Wage Penalty for Motherhood."
${ }^{10}$ Chung et al., "The Parental Gender Earnings Gap in the United States."
${ }^{11}$ Gunn, "The Gender Gap Widens with Age."
${ }^{12}$ Correll, Benard, and Paik, "Getting a Job: Is There a Motherhood Penalty?"
${ }^{13}$ Thomas, "The Impact of Mandated Maternity Benefits on the Gender Differential in Promotions: Examining the Role of Adverse Selection."
${ }^{14}$ Goldin, "How to Achieve Gender Equality."
${ }^{15} \mathrm{Ibid}$.
${ }^{16}$ Goldin et al., "The Expanding Gender Earnings Gap."
${ }^{17}$ US Census Bureau, Longitudinal Employer-Household Dynamics: Quarterly Workforce Indicators.
${ }^{18}$ NYC Small Business Services, Unlocking Potential: Empowering New York City's Immigrant Entrepreneurs.
${ }^{19}$ Asian American Federation, NYC's Economic Engine: Contributions and Challenges of Asian Small Businesses.
${ }^{20}$ Euchner, Scale Up New York: Creating Middle Class Jobs by Growing New York City's Small Businesses.
${ }^{21}$ Rothwell and Massey, "Geographic Effects on Intergenerational Income Mobility." Note: These estimates are adjusted for regional purchasing power to take into consideration cost-of-living differences between metropolitan statistical areas.
${ }^{22}$ Cooper, "Raising the New York State Minimum Wage to $\$ 15$ by July 2021 Would Lift Wages for 3.2 Million Workers."
${ }^{23}$ Storm, "With Official Unemployment This Low, Why Are Wages Rising So Slowly?"
${ }^{24}$ Zillow Research, "Median Rent List Price by Neighborhood."
${ }^{25}$ NYC Housing Authority 2015 data accessed through DATA2GO.NYC. http:// bit.ly/2GoA4Hp.
${ }^{26}$ Real Affordability for All Coalition, "Increasing Real Affordability in New York City: An Action Plan for Mayor de Blasio's Second Term."
${ }^{27}$ Greenberg, "Tenants Under Siege."
${ }^{28}$ Real Affordability for All Coalition, "Increasing Real Affordability in New York City: An Action Plan for Mayor de Blasio's Second Term."
${ }^{29}$ Greenberg, "Tenants Under Siege."
${ }^{30}$ Yager and Stern, 21st Century SROs: Can Small Housing Units Help Meet the Need for Affordable Housing in New York City?
${ }^{31}$ NYC Housing and Preservation, Housing New York 2.0.
${ }^{32}$ NYC Housing and Preservation, "Neighborhood Pillars."
${ }^{33}$ Lewis and Burd-Sharps, A Portrait of Los Angeles County, 127.
${ }^{34}$ Greenberg, "Tenants Under Siege."
${ }^{35} \mathrm{Ibid}$.
${ }^{36}$ Vera Institute, "Jail Incarceration Rate (per 100,000 Residents Age 15-64), 2015."
${ }^{37}$ NYC Department of Correction, "NYC Department of Correction at a Glance."
${ }^{38}$ Independent Commission on New York City Criminal Justice and Incarceration Reform, "A More Just New York City."
${ }^{39}$ NYC Department of Correction, "NYC Department of Correction at a Glance."
${ }^{40}$ Herbert, Morenoff, and Harding, "Homelessness and Housing Insecurity Among Former Prisoners."
${ }^{41}$ Brennan Center for Justice, "Voting Rights Restoration Efforts in New York."
${ }^{42} \mathrm{Ibid}$.
${ }^{43}$ Baer, "Collateral Consequences of Conviction."
${ }^{44} \mathrm{Ibid}$.
${ }^{45}$ Mayor's Office of Criminal Justice, The Jail Population.
${ }^{46}$ Baer, "Collateral Consequences of Conviction."
${ }^{47}$ Rankin, "NYC Approves Bill That Removes Felony Conviction Check Box From Job Applications."
${ }^{48}$ Young, Porter and Caputo, Alternative to Incarceration Programs for Felony Offenders in New York City.

49 Berman and Wolf, "Alternatives to Incarceration: The New York Story."
${ }^{50} \mathrm{Ibid}$.
${ }^{51}$ Independent Commission on New York City Criminal Justice and Incarceration Reform, A More Just New York City.
${ }^{52}$ Berman and Wolf, "Alternatives to Incarceration: The New York Story."
${ }^{53} \mathrm{Ibid}$.
54 Independent Commission on New York City Criminal Justice and Incarceration Reform, A More Just New York City.
${ }^{55} \mathrm{lbid}$.
${ }^{56} \mathrm{Ibid}$.
${ }^{57}$ NYC Office of the Mayor, "Mayor de Blasio and City Council Reach Agreement to Replace Rikers Island Jails with Community-Based Facilities."

## Conclusion

${ }^{1}$ Mayor's Office for Economic Opportunity, The New York City Government Poverty Measure, 2005-2016.
${ }^{2}$ Wagmiller and Adelman, "Childhood and Intergenerational Poverty."
${ }^{3}$ Sommeiller, Price, and Wazeter, Income Inequality in the U.S. by State, Metropolitan Area, and County.
${ }^{4}$ Metz, Neil, and Mariya Burdina, "How Neighborhood Inequality Leads to Higher Crime Rates"; Kawachi and Kennedy, "Income Inequality and Health: Pathways and Mechanisms"; Watson, New Housing, Income Inequality, and Distressed Metropolitan Areas; Dong, "The Impact of Income Inequality on Rental Affordability."
${ }^{5}$ Sharkey, Stuck in Place: Urban Neighborhoods and the End of Progress toward Racial Equality.
${ }^{6}$ Owens, "Racial Residential Segregation of School-Age Children and Adults."

## Methodological Note

${ }^{1}$ Pew Research Center, "U.S. Metro Areas with the Most Unauthorized Immigrants."
${ }^{2}$ Council for Community and Economic Research, "Cost of Living Index."

## Bibliography

Aaronson, Daniel, Daniel Hartley, and Bhash Mazumder. "The Effects of the 1930s HOLC 'Redlining' Maps." Working Paper no. 2017-12, Federal Reserve Bank of Chicago, 2017. https:// www.chicagofed.org/publications/ working-papers/2017/wp2017-12.

Abraído-Lanza, Ana F., Maria T. Chao, and Karen R. Flórez. "Do Healthy Behaviors Decline with Greater Acculturation? Implications for the Latino Mortality Paradox." Social Science \& Medicine 61, no. 6 (2005): 1243-55.

Abraído-Lanza, Ana F., Bruce P. Dohrenwend, Daisy S. Ng-Mak, and J. Blake Turner. "The Latino Mortality Paradox: A Test of the 'Salmon Bias' and Healthy Migrant Hypotheses." American Journal of Public Health 89, no. 10 (1999): 1543-8.

Acciai, Francesco, Aggie J. Noah, and Glenn Firebaugh. "Pinpointing the Sources of the Asian Mortality Advantage in the United States." Journal of Epidemiology and Community Health 69, no. 10 (2015): 1006-1011.

Advocates for Children of New York and Citizens' Committee for Children of New York. "Recommendations for Improving School Access and Success for Rising Numbers of Students in Temporary Housing." http://www. advocatesforchildren.org/sites/ default/files/on_page/recs_improving_school_access_sth.pdf?pt=1.

Aizer, Anna, Shari Eli, Joseph Ferrie, and Adriana Lleras-Muney. "The LongTerm Impact of Cash Transfers to Poor Families." NBER Working Paper No. 20103, National Bureau of Economic Research, Cambridge, MA, May 2014. http://www.nber.org/ papers/w20103.pdf.

Alexander, Michelle. The New Jim Crow: Mass Incarceration in the Age of Colorblindness. New York: The New Press, 2012.

Alhusen, Jeanne L., Kelly Bower, Elizabeth Epstein, and Phyllis Sharps. "Racial Discrimination and Adverse Birth Outcomes: An Integrative Review." Journal of Midwifery \& Women's Health 61, no. 6 (2016): 707-720.
Alkire, Sabina, and James Foster. "Understandings and Misunderstandings of Multidimensional Poverty Measurement." Working Paper no. 43, Oxford Poverty \& Human Development Initiative (OPHI), 2011. http://www. ophi.org.uk/wp-content/uploads/ ophi-wp43.pdf.

Anderson, Scott. "The Urge to End It All." New York Times Magazine, July 6, 2018. https://www.nytimes. com/2008/07/06/magazine/06suicidet.html?mtrref=undefined.

Arnett, Jeffrey Jensen. "Emerging Adulthood: A Theory of Development From the Late Teens Through the Twenties." American Psychologist 55, no. 5 (2000): 469-480.

Asian American Federation. NYC's Economic Engine: Contributions and Challenges of Asian Small Businesses. New York, 2016. http://www.aafny. org/doc/AAF_small_biz.pdf.

Baer, Harold. "Collateral Consequences of Conviction: A Reminder of Some Possible Civil Penalties." 2011. https:// www.nysba.org/uploadedFiles/ NYSBA/Sections/Criminal_Justice/ Records_of_Conviction/BaerCollater-alConsequences-WEB.pdf.

Bartels, Larry M. "Economic Inequality and Political Representation." Princeton University, November 2002. https://www.russellsage.org/sites/ all/files/u4/Bartels\%20EIPR.pdf.
"Political Inequality in Affluent Democracies: The Social Welfare Deficit." Vanderbilt University, Center for the Study of Democratic Institutions, draft, March 2017. https://www. vanderbilt.edu/csdi/includes/Working_Paper_5_2017.pdf.

Beautrais, Annette. "Suicide by Jumping: A Review of Research and Prevention Strategies." Crisis: The Journal of Crisis Intervention and Suicide Prevention 20, suppl. 1 (2007): 58-63.

Berman, Greg, and Robert V. Wolf, "Alternatives to Incarceration: The New York Story." Government, Law and Policy Journal 16, no. 2 (2014): 36-40.

Blue, Laura, and Andrew Fenelon. "Explaining Low Mortality among US Immigrants Relative to Native-Born Americans: The Role of Smoking." International Journal of Epidemiology 40, no. 3 (2011): 786-793.

Braveman, Paula. "What Are Health Disparities and Health Equity? We Need to Be Clear." Public Health Reports 129 suppl. 2 (2014): 5-8.
. "What Is Health Equity: And How Does a Life-Course Approach Take Us Further Toward It?" Maternal and Child Health Journal 18, no. 2 (2014): 366-372.

Brennan Center for Justice. "Voting Rights Restoration Efforts in New York." New York University School of Law, April 18, 2018. https://www.bren-nancenter.org/analysis/voting-rights-restoration-efforts-new-york.

Brooks-Gunn, Jeanne, Pamela K. Klebanov, and Greg J. Duncan. "Ethnic Differences in Children's Intelligence Test Scores: Role of Economic Deprivation, Home Environment, and Maternal Characteristics." Child Development 67, no. 2 (1996): 396-408.

Budig, Michelle J. The Fatherhood Bonus and The Motherhood Penalty: Parenthood and the Gender Gap in Pay. Washington, DC: Third Way, 2014. https://www.thirdway.org/report/the-fatherhood-bonus-and-the-mother-hood-penalty-parenthood-and-the-gender-gap-in-pay.

Budig, Michelle, and Paula England. "The Wage Penalty for Motherhood." American Sociological Review 66, no. 2 (2001): 204-25.

Burd-Sharps, Sarah, Patrick Guyer, Ted Lechterman, and Kristen Lewis. "Child Well-Being in the US: Proposal for the Development of a 'Tots Index' Using the Human Development Conceptual Framework." In Global Child Poverty and Well-Being: Measurement, Concepts, Policy and Action, edited by Alberto Minujin and Shailen Nandy, 155-78. Bristol: The Policy Press, 2012.

Burd-Sharps, Sarah, and Kristen Lewis. A Portrait of California: California Human Development Report 2011. New York: Measure of America, Social Science Research Council. http://bit ly/YAsfZk.
Geographies of Opportunity. New York: Social Science Research Council, 2015. http://www.mea-sureofamerica.org/congressional-districts-2015/.
-. More than a Million Reasons for Hope: Youth Disconnection in the America Today. New York: Measure of America, Social Science Research Council, March 2018. http://www. measureofamerica.org/youth-discon-nection-2018/.
——. One in Seven: Ranking Youth Disconnection in the 25 Largest Metro Areas. New York: Measure of America, Social Science Research Council, September 2012. http://www.measureo-famerica.org/one-in-seven/.
__. Promising Gains, Persistent Gaps: Youth Disconnection in America. New York: Social Science Research Council, 2017. https://ssrc-static. s3.amazonaws.com/moa/Promising\ Gains\ Final.pdf.

Burd-Sharps, Sarah, Kristen Lewis, and Eduardo Borges Martins. The Measure of America: American Human Development Report 2008-2009. New York: Columbia University Press, 2008.

Burd-Sharps, Sarah, and Rebecca Rasch. Impact of the US Housing Crisis on the Racial Wealth Gap across Generations. New York: Social Science Research Council, 2015. http://www.measureo-famerica.org/discrimination-and-the-great-recession/.

Bureau of Labor Statistics. "Unemployment rates and earnings by educational attainment, 2016." Employment Projections. https://www.bls.gov/ emp/ep_chart_001.htm.

Cahalan, M.. , L. W. Perna, M. Yamashita, R. Ruiz, and K. Franklin. Indicators of Higher Education Equity in the United States: 2017 Trend Report. Washington, DC: Pell Institute for the Study of Higher Education, Council for Education Opportunity (COE) and Alliance for Higher Education and Democracy (AHEAD) of the University of Pennsylvania. http://pellinstitute.org/ downloads/publications-Indicators_ of_Higher_Education_Equity_in_the_ US_2017_Historical_Trend_Report. pdf.

Case, Anne, and Angus Deaton. "Mortality and Morbidity in the 21st Century." Brookings Papers on Economic Activity, Brookings Institution, Washington, DC, 2017. https://www.brookings. edu/wp-content/uploads/2017/08/ casetextsp17bpea.pdf.

Castillo, Elise, and Bruce Fuller. "Expanding Preschool in New York City - Lifting Poor Children or Middling Families?" Institute of Human Development, University of California, Berkeley, 2015. https://gse berkeley. edu/sites/default/files/docs/NYC\%20 Pre-k\%20Brief\%20150305_print.pdf.

Centers for Disease Control and Prevention. "HIV in the United States: At a Glance." Last updated November 29. 2017. https://www.cdc.gov/hiv/statistics/overview/ataglance.html.
. "Intimate Partner Violence: Consequences." https://www.cdc.gov/ violenceprevention/intimatepartnerviolence/consequences.html.

Central Intelligence Agency. "The World Factbook: Maternal Mortality Rate." 2015. https://www.cia.gov/library/ publications/the-world-factbook/ rankorder/2223rank.html.

Cerebral Palsy Foundation. "'Just Say Hi' in NYC Schools." http://yourcpf.org/ just-say-hi-in-nyc-schools/.
Chen, David W. "75,000 Apply for State College Scholarships, but Many Won't Qualify." New York Times, August 25, 2017. https://www.nytimes. com/2017/08/25/nyregion/excelsior-college-scholarship-program-newyork.html.

Chetty, Raj, Nathaniel Hendren, Maggie R. Jones, and Sonya R. Porter. "Race and Economic Opportunity in the United States: An Intergenerational Perspective." Working paper, The Equality of Opportunity Project, March 2018. http://www.equality-ofopportunity.org/documents/.
ChildTrends. "Program: Infant Health and Development Program (IHDP)" March 28, 2002. https://www.childtrends. org/programs/infant-health-and-development-program-ihdp/.

Chung, YoonKyung, Barbara Downs, Danielle H. Sandler, and Robert Sienkiewicz. "The Parental Gender Earnings Gap in the United States." CES Working Paper 17-68, Center for Economic Studies (CES), Washington, DC, November 2017. https://www2.census. gov/ces/wp/2017/CES-WP-17-68.pdf.
Citizens' Committee for Children of New York. "Concentrations of Risk: Asthma and Poor Housing Conditions." February 28, 2013. https://www. cccnewyork.org/blog/concentrations-of-risk-asthma-and-poor-housingconditions/.
. 'Keeping Track Online tool. "Fair to Poor Housing."

Coalition for the Homeless. "Proven Solutions" http://www.coalitionforthe-homeless.org/ending-homelessness/ proven-solutions/.
___ "Why Are So Many People Homeless?" http://www.coalitionforth-ehomeless.org/the-catastrophe-of-homelessness/why-are-so-many-people-homeless/.

Coate, Patrick. "The Excelsior Scholarship: Who Gets a Free Ride?" American Institute for Economic Research, June 2, 2017. https://www.aier.org/ research/excelsior-scholarship-who-gets-free-ride.
Coca, Vanessa, and Kristin Black. "The Significance of High School Practices on Students' Four-Year College Enrollment." Working Paper, Research Alliance for NYC Schools, New York University, March 2017. https://steinhardt.nyu.edu/research_alliance/ publications/hs_practices_four_year_ enrollment.

Cohen, Sheldon, Denise JanickiĐDeverts, Edith Chen, and Karen A. Matthews. "Childhood Socioeconomic Status and Adult Health." Annals of the New York Academy of Sciences 1186 (2010): 37-55.

Conley, Dalton. "Capital for College: Parental Assets and Postsecondary Schooling." Sociology of Education 74, no. 1 (2001): 59-72.

Cooper, David. "Raising the New York State Minimum Wage to $\$ 15$ by July 2021 Would Lift Wages for 3.2 Million Workers." EPI Briefing Paper \#416, Economic Policy Institute, Washington, DC, January 2016. https://www. epi.org/publication/raising-new-york-state-minimum-wage-to-15/.
Correll, Shelley J., Stephen Benard, and In Paik. "Getting a Job: Is There a Motherhood Penalty?" American Journal of Sociology 112, no. 5 (2007): 1297-339.

Council for Community and Economic Research. "Cost of Living Index: COLI Release Highlights, 2016 Annual Average." http://coli.org/coli-release-highlights-2016-annual-average/
Council on Child and Adolescent Health. "The Role of Home-Visitation Programs in Improving Health Outcomes for Children and Families." Pediatrics 101, no. 3 (1998): 486-9.

Cramer, Philissa, Alex Zimmerman, Christina Veiga, and Monica Disare. "Five Boroughs in Five Days: Follow Along with Chancellor Carranza on His Inaugural School Tours." Chalkbeat, April 12, 2018. https://www. chalkbeat.org/posts/ny/2018/04/10/a-week-onto-the-job-chancellor-rich-ard-carranza-steps-into-new-york-city-schools/.

Cross, Catharine P., Lee T. Copping, and Anne Campbell. "Sex Differences in Impulsivity: A Meta-Analysis." Psychological Bulletin 137, no. 1 (2011): 97-130.
CUNY School of Public Health. "NYC Health and Examination Survey (HANES)," 2013-2014. http:// nychanes.org/data/.
Currie, Janet, and Maya Rossin-Slater. "Early-Life Origins of Lifecycle WellBeing: Research and Policy Implications." Journal of Policy Analysis and Management 34, no. 1 (2015): 208-42.

Dahl, Gordon B., and Lance Lochner. "The Impact of Family Income on Child Achievement: Evidence from the Earned Income Tax Credit." American Economic Review 102, no. 5 (2012): 1927-56.

Darity, William Jr., Darrick Hamilton, Mark Paul, Alan Aja, Anne Price, Antonio Moore, and Caterina Chiopris. What We Get Wrong About Closing the Racial Wealth Gap. Durham, NC: Samuel DuBois Cook Center on Social Equity and Insight Center for Community Economic Development, April 2018. https://socialequity.duke.edu/sites/ socialequity.duke.edu/files/siteimages/FINAL\ COMPLETE\  REPORT_.pdf.

Desjardins, Bertrand. "Why Is Life Expectancy Longer for Women Than It Is for Men?" Scientific American, August 30, 2004. https://www.scientificamerican. com/article/why-is-life-expectancylo/.

Dettling, Lisa J., Joanne W. Hsu, Lindsay Jacobs, Kevin B. Moore, and Jeffrey P. Thompson. "Recent Trends in Wealth-Holding by Race and Ethnicity: Evidence from the Survey of Consumer Finances." FEDS Notes, Board of Governors of the Federal Reserve System, September 27, 2017. https:// www.federalreserve.gov/econres/ notes/feds-notes/recent-trends-in-wealth-holding-by-race-and-eth-nicity-evidence-from-the-survey-of-consumer-finances-20170927.htm.

Diversity and Disparities Project, data tool. Brown University. https://s4.ad. brown.edu/Projects/diversity/IncSegsorting/Default.aspx.
Dong, Hongwei. "The Impact of Income Inequality on Rental Affordability: An Empirical Study in Large American Metropolitan Areas." Urban Studies (2017): 1-17.

Duncan, Greg J., Jeanne Brooks-Gunn and Pamela Kato Klebanov. "Economic Deprivation and Early Childhood Development." Child Development 65, no. 2 (1994): 296-318.

Eligon, John, and Robert Gebeloff. "Affluent and Black, and Still Trapped by Segregation." New York Times, August 20, 2016. https://www.nytimes. com/2016/08/21/us/milwaukee-segregation-wealthy-black-families. html.
Elo, Irma, Neil Mehta, and Cheng Huang. "Health of Native-Born and ForeignBorn Black Residents in the United States: Evidence from the 2000 Census of Population and the Na tional Health Interview Survey." PARC Working Paper Series 17, University of Pennsylvania, 2008. http://reposi-tory.upenn.edu/parc_working_papers/17.

Endangered Language Alliance. "A New Language Map of Queens." October 18, 2016. http://elalliance. org/2016/10/a-new-language-map-of-queens/.

Equality Indicators. "Disability and Education: Gaps in Outcomes, Services, and Discipline." Volume 29. Institute for State and Local Governance (ISLG) of the City University of New York, April 2018. http://equalityindicators. org/wp-content/uploads/2018/04/ Narrowing-the-Gap-Vol29_Disabilities.pdf.

Euchner, Charles. Scale Up New York: Creating Middle Class Jobs by Growing New York City's Small Businesses. New York: Center for an Urban Future, November 2016. https://nycfuture.org/pdf/CUF_Scale_Up_New_ York.pdf.

Evans, Gary W., and Rochelle C. Cassells. "Childhood Poverty, Cumulative Risk Exposure, and Mental Health in Emerging Adults." Clinical Psychological Science 2, no. 3, (2013): 287-96.

Evenson, Kelly R., Richard Block, Ana V. Diez Roux, Aileen P. McGinn, Fang Wen, and Daniel A. Rodríguez. "Associations of Adult Physical Activity with Perceived Safety and Police-Recorded Crime: The Multi-ethnic Study of Atherosclerosis." International Journal of Behavioral Nutrition and Physical Activity 9, no. 146 (2012).

Federal Bureau of Investigation. "2014 Crime in the United States: Ten-Year Arrest Trends by Sex, 2005-2014." https://ucr.fbi.gov/crime-in-theu.s/2014/crime-in-the-u.s.-2014/ tables/table-33.

Ferriman, Annabel. "BMJ Readers Choose the 'Sanitary Revolution' as Greatest Medical Advance Since 1840." BMJ: British Medical Journal 334, no. 7585 (2007): 111.

Fix NYC Advisory Panel. Fix NYC Advisory Panel Report. January 2018. http:// hntb.com/HNTB/media/HNTBMe-diaLibrary/Home/Fix-NYC-PanelReport.pdf.

Forsyth, Ann, Melanie Wall, Tse Choo, Nicole Larson, David Van Riper, and Dianne Neumark-Sztainer. "Perceived and Police Reported Neighborhood Crime: Linkages to Adolescent Activity Behaviors and Weight Status." Journal of Adolescent Health: Official Publication of the Society for Adolescent Medicine 57, no. 2 (2015): 222-28.

Frazer, Somjen, and Erin Howe. Transgender Health and Economic Insecurity. New York: The Lesbian, Gay, Bisexual, \& Transgender Community Center, 2015. https://gaycenter.org/ recovery-health/health/lgbt-healthnetwork/\#reports.
Fuchs, Chris. "California Governor Signs Bill to Disaggregate Asian-American Health Data." NBC News, September 27, 2016. https://www.nbcnews.com/ news/asian-america/california-gov-ernor-signs-bill-disaggregate-asian-american-health-data-n655361.

García, Jorge Luis, James J. Heckman, Duncan Ermini Leaf, and María José Prados. "The Life-cycle Benefits of an Influential Early Childhood Program." The Heckman Equation, 2016. https://cehd.uchicago.edu/?page_ id=276\#abccba.

Gay, Mara. "Parents Do What the Mayor Hasn't - Integrate Schools." New York Times, May 3, 2018. https://www. nytimes.com/2018/05/03/opinion/ de-blasio-segregation-schools-new-york-city.html.
Gendell, Stephanie. "NYC Gets an Incomplete' Grade In Early Childhood Education." The New School Center for New York City Affairs, February 3, 2016. http://www.centernyc.org/ earlyeducation/.
Genetics Home Reference. "What Is Epigenetics?" May 8, 2018. https://ghr. nlm.nih.gov/primer/howgeneswork/ epigenome.

Geronimus, Arline T., Margaret Hicken, Danya Keene, and John Bound. "'Weathering' and Age Patterns of Allostatic Load Scores Among Blacks and Whites in the United States." American Journal of Public Health 96, no. 5 (2006): 826-33.

Gilens, Martin. Affluence and Influence: Economic Inequality and Political Power in America. Princeton, NJ: Princeton University Press, 2012.
Gilens, Martin, and Benjamin I. Page. "Testing Theories of American Politics: Elites, Interest Groups, and Average Citizens." Perspectives on Politics 12, no. 3 (2014): 564-81.

Goldin, Claudia. "A Grand Gender Convergence: Its Last Chapter." American Economic Review 104, no. 4 (2014): 1091-119.
. "How to Achieve Gender Equality." Milken Institute Review, Third Quarter, 2015. http://scholar.harvard.edu/ files/goldin/files/gender_equality. pdf?m=1440439230.

Goldin, Claudia, Sari Pekkala Kerr, Claudia Olivetti, and Erling Barth. "The Expanding Gender Earnings Gap: Evidence from the LEHD-2000 Census." American Economic Review: Papers and Proceedings 107, no. 5 (2017): 110-14.

Gong, Xin. "Does Having a Preschool Teacher with a Bachelor's Degree Matter for Children's Development Outcomes?" Columbia University Academic Commons, 2015. https:// doi.org/10.7916/D88914RH.

Greenberg, Michael. "Tenants Under Siege: Inside New York City's Housing Crisis." New York Review of Books, August 17, 2017. http://www.nybooks. com/articles/2017/08/17/tenants-under-siege-inside-new-york-city-housing-crisis/.
Greenfield, Shelly F., Sudie E. Back, Katie Lawson, and Kathleen T. Brady. "Substance Abuse in Women." Psychiatric Clinics of North America 33, no. 2 (2010): 339-55.

Griffith, Derek M., Jonetta Johnson, Rong Zhang, Harold W. Neighbors, and James S. Jackson. "Ethnicity, Nativity and the Health of American Blacks." Journal of Health Care for the Poor and Underserved 22, no. 1 (2011): 142-56.

Gunn, Dwyer. "The Gender Gap Widens with Age." National Bureau of Economic Research, 2018. http://www. nber.org/digest/jul17/w23381.shtml.

Hart, Betty, and Todd R. Risley. Meaningful Differences in the Everyday Experience of Young American Children. Baltimore, MD: Brookes Publishing Co., 1995.

Healthy Families New York. "How Does HFNY Work?" http://www.healthyfamiliesnewyork.org/HomeVisits/ process.htm.

Heckman, James J., Margaret L. Holland, Kevin K. Makino, Rodrigo Pinto, and Maria Rosales-Rueda. "An Analysis of the Memphis Nurse-Family Partnership Program." NBER Working Paper No. 23610, National Bureau of Economic Research, Cambridge, MA, July 2017. http://www.nber.org/ papers/w23610.

Hendi, Arun S., Neil K. Mehta, and Irma T. Elo. "Health Among Black Children by Maternal and Child Nativity." American Journal of Public Health 105, no. 4 (2015): 703-10.

Herbert, Claire W., Jeffrey D. Morenoff, and David J. Harding. "Homelessness and Housing Insecurity Among Former Prisoners." Russell Sage Foundation Journal of the Social Sciences 1, no. 2 (2015): 44-79.

Hughes, Helen K., Elizabeth C. Matsui, Megan M. Tschudy, Craig E. Pollack, and Corinne A. Keet. "Pediatric Asthma Health Disparities: Race, Hardship, Housing, and Asthma in a National Survey." Academic Pediatrics 17, no. 2 (2017): 127-34.

Human Rights Campaign. "LGBTQ Youth in the Foster Care System." https://assets2.hrc.org/files/assets/resources/ HRC-YouthFosterCare-IssueBriefFINAL.pdf.

Hutt, Rosamond. "In Which Countries Do Women Outlive Men by More Than a Decade?" World Economic Forum, May 20, 2016. https://www.weforum.org/ agenda/2016/05/countries-where-women-outlive-men-by-decade/.

Hynynen, Suvi. Community Perceptions of Brownsville: A Survey of Neighborhood Quality of Life, Safety, and Services. New York: Center for Court Innovation, 2011. https://www.courtinnovation.org/sites/default/files/ documents/Brownsville\%200p\%20 Data\%20FINAL.pdf.

Independent Commission on New York City Criminal Justice and Incarceration Reform. A More Just New York City: Independent Commission on New York City Criminal Justice and Incarceration Reform. April 2017. https://assets.documentcloud.org/ documents/3533809/Independent-Commission-on-New-York-CityCriminal.pdf.
INRIX, Inc. "Press Release: Los Angeles Tops INRIX Global Congestion Ranking." February 5, 2018. http://inrix. com/press-releases/scorecard-2017/.
Institute for Children, Poverty \& Homelessness (ICPH). The Atlas of Student Homelessness in New York City 2017. New York: ICPH, 2017. http://www. icphusa.org/new_york_city/map-atlas-student-homelessness-new-york-city-2017/.

Institute of Medicine. Reducing Suicide: A National Imperative, eds. S. K. Goldsmith, T. C. Pellmar, A. M. Kleinman, and W. E. Bunney. Washington, DC: The National Academies Press, 2002.

James, S. E., J. L. Herman, S. Rankin, M. Keisling, L. Mottet, and M. Anafi. The Report of the 2015 U.S. Transgender Survey. Washington, DC: National Center for Transgender Equality, 2016. https://transequality.org/sites/ default/files/docs/usts/USTS-Full-Report-Dec17.pdf.

Karen, Robert. Becoming Attached: First Relationships and How They Shape Our Capacity to Love. New York: Oxford University Press, 1998.

Karoly, Lynn A., M. Rebecca Kilburn, and Jill S. Cannon. Early Childhood Intervention: Proven Results, Future Promise. Santa Monica, CA: RAND Corporation, 2005. https://www.rand. org/content/dam/rand/pubs/monographs/2005/RAND_MG341.pdf.
Katznelson, Ira. When Affirmative Action Was White: An Untold History of Racial Inequality in Twentieth-Century America. New York: W. W. Norton \& Company, 2005.

Kawachi, Ichiro and Bruce P. Kennedy. "Income Inequality and Health: Pathways and Mechanisms." HSR: Health Services Research 34, no. 1 (1999): 215-227.

Kelley, Pamela and Gregory Camilli. "The Impact of Teacher Education on Outcomes in Center-Based Early Childhood Education Programs: A Metaanalysis." National Institute for Early Education Research, September 1, 2007. http://nieer.org/research-report/the-impact-of-teacher-education-on-outcomes-in-center-based-early-childhood-education-programs-a-meta-analysis.
Khan, Yasmeen. "Brownsville: No Label Necessary." WNYC, January 29, 2018. https://www.wnyc.org/story/browns-ville-no-label-necessary/.

Kosciw, Joseph G., Emily A. Greytak, Noreen M. Giga, Christian Villenas, and David J. Danischewski. The 2015 National School Climate Survey: The Experiences of Lesbian, Gay, Bisexual, Transgender, and Queer Youth in Our Nation's Schools. GLSEN, 2016. https://www.glsen.org/article/2015-national-school-climate-survey
Krieger, James, and Donna L. Higgins. "Housing and Health: Time Again for Public Health Action." American Journal of Public Health 92, no. 5 (2002): 758-68.

Kucsera, John, and Gary Orfield. New York State's Extreme School Segregation: Inequality, Inaction and a Damaged Future. Los Angeles, CA: The Civil Rights Project, UCLA, March 2014 https://civilrightsproject.ucla.edu/ research/k-12-education/integration-and-diversity/ny-norflet-report-placeholder/Kucsera-New-York-Extreme-Segregation-2014.pdf.

Kull, Melissa, Lauren Murray, Marivel Davila, Carol Yoon, and Willem van der Mei. "Stressors, Mental Health, and Sources of Support among LGBTQ Public High School Students in New York City." Epi Data Brief (93), New York City Department of Health and Mental Hygiene, September 2017. https://www1.nyc.gov/assets/doh/ downloads/pdf/epi/databrief93.pdf.

Landa, Marjorie. "Audit Report on the Department of Education's Efforts to Monitor and Address School Attendance of Homeless Children Residing in Shelters." Office of the New York City Comptroller Scott M. Stringer. https://comptroller.nyc. gov/wp-content/uploads/documents/ MG16_098A.pdf.

Lareau, Annette. Unequal Childhoods: Class, Race, and Family Life. Berkeley, CA: University of California Press, 2011.

Lee, Jennifer, and Min Zhou. The Asian American Achievement Paradox. New York: Russell Sage Foundation, 2015.

Lee, Sook-Jung, Silvia Bartolic, and Elizabeth A. Vanderwater. "Predicting Children's Media Use in the USA: Differences in Cross-Sectional and Longitudinal Analysis." British Journal of Developmental Psychology 27, no. 1 (2009): 123-43

Lewis, Kristen, and Sarah Burd-Sharps. A Portrait of California 2014-2015: California Human Development Report. New York: Measure of America, Social Science Research Council. http:// bit.ly/1 FJJupK.
. A Portrait of Los Angeles County: Los Angeles County Human Development Report 2017-2018. New York: Measure of America, Social Science Research Council, 2017. http://www.measureo-famerica.org/los-angeles-county/.
. The Measure of America 2010-2011. New York: New York University Press, 2010.
-_. Who Graduates? New Findings on NYC High School Admissions and Graduation Rates. New York: Measure of America, Social Science Research Council, May 5, 2017. http://www. measureofamerica.org/who-graduates/.
_-_Zeroing In on Place and Race: Youth Disconnection in America's Cities. New York: Measure of America, Social Science Research Council, June 10, 2015. https://www.measureofameri-ca.org/youth-disconnection-2015/.
Li, Wenhui, Mary Huynh, E. Lee, L. LasnerFrater, A. Castro, D. Kelley, J. Kennedy, G. Maduro, K. Sebek, Y. Sun, G. Van Wye. Summary of Vital Statistics, 2014: The City of New York. New York, NY: New York City Department of Health and Mental Hygiene, Office of Vital Statistics, 2016. http://www1. nyc.gov/assets/doh/downloads/pdf/ vs/2014sum.pdf.

Li, Wenhui, Mary Huynh, K. Sebek, A. Castro, D. Gurr, D. Kelley, J. Kennedy, G. Maduro, E. Lee, Y. Sun, P. Zheng, and G. Van Wye. Summary of Vital Statistics, 2015: The City of New York. New York, NY: New York City Department of Health and Mental Hygiene, Bureau of Vital Statistics, 2017. http:// www1.nyc.gov/assets/doh/downloads/pdf/vs/2015sum.pdf.

Li, Wenhui, Ying Sun, and Mary Huynh. "Mortality among Chinese New Yorkers." Epi Data Brief (91), New York City Department of Health and Mental Hygiene,: Epi Data Brief (91); June 2017. https://www1.nyc.gov/assets/ doh/downloads/pdf/epi/databrief91. pdf.
Lugo-Gil, Julieta, and Catherine S. TamisLeMonda. "Family Resources and Parenting Quality: Links to Children's Cognitive Development Across the First 3 Years." Child Development 79, no. 4 (2008): 1065-85.
Mader, Nicole, Clara Hemphill, and Qasim Abbas. "Race, Class, and Choice in New York City Elementary Schools." Urban Matters, May 2, 2018. http:// www.centernyc.org/race-class-andchoice/.
Mahalik, James R., Shaun M. Burns, and Matthew Syzdek. "Masculinity and Perceived Normative Health Behaviors as Predictors of Men's Health Behaviors." Social Science and Medicine 64, no. 11 (2007): 2201-9.

Marmot, Michael G. The Status Syndrome: How Social Standing Affects Our Health and Longevity. New York: Henry Holt, 2004.

Massey, Douglas S. "Residential Segregation and Neighborhood Conditions in U.S. Metropolitan Areas." In America Becoming: Racial Trends and Their Consequences, Edited by Neil J. Smelser, William Julius Wilson, and Faith Mitchell. Volume I. Washington, DC: National Academies Press, 2001.

Mauss, Daniel, Jian Li, Burkhard Schmidt, Peter Angerer, Marc N. Jarczok. "Measuring Allostatic Load in the Workforce: A Systematic Review." Industrial Health 53, no. 1 (2015): 5-20.

Mayor's Office of Criminal Justice. The Jail Population: Recent Declines and Opportunities for Further Reductions. Justice Brief, 2017. http://www1.nyc. gov/assets/criminaljustice/down-loads/pdfs/justice_brief_jailpopulation.pdf.
Mayor's Office for Economic Opportunity. The New York City Government Poverty Measure, 2005-2016. April 2018. http://www1.nyc.gov/site/opportunity/ poverty-in-nyc/poverty-measure. page.
McLanahan, Sara, and Gary Sandefur. Growing Up with a Single Parent: What Hurts, What Helps. Cambridge, MA: Harvard University Press, 1994.
Meschede, Tatjana, Joanna Taylor, Alexis Mann, and Thomas Shapiro. "'Family Achievements?': How a College Degree Accumulates Wealth for Whites and Not For Blacks." Federal Reserve Bank of St. Louis Review 99, no. 1 (2017): 121-37.

Mettey, A., A. Garcia, L. Isaac, N. Linos, O. Barbot, and M. T. Bassett. Take Care New York 2020: Every Neighborhood, Every New Yorker, Everyone's Health Counts. New York City Department of Health and Mental Hygiene, October 2015. https://www1.nyc.gov/assets/ doh/downloads/pdf/tcny/tcny-2020. pdf.

Metz, Neil, and Mariya Burdina. "How Neighborhood Inequality Leads to Higher Crime Rates." LSE US Centre (blog), June 8, 2016. http://blogs.Ise. ac.uk/usappblog/2016/07/08/how-neighborhood-inequality-leads-to-higher-crime-rates/.

Muscave, Nick. "Investigation: Bayway Refinery Largest of 137 Worst Central Jersey Polluters." My Central Jersey, September 29, 2016. https://www. mycentraljersey.com/story/news/ local/land-environment/nj-enviro-watchdog/2016/09/29/investigation-bayway-refinery-largest-137-worst-central-jersey-polluters/91164162/.
Mohai, Paul, and Robin Saha. "Which Came First, People or Pollution? Assessing the Disparate Siting and Post-siting Demographic Change Hypotheses of Environmental Injustice." Environmental Research Letters 10, no. 11 (2015).

Morgan, Paul L., George Farkas, and Jacob Hibel. "Matthew Effects for Whom?" Learning Disability Quarterly 31, no. 4 (2008): 187-98.

Morris, Amanda S., Lara R. Robinson, Jennifer Hays-Grudo, Angelika H. Claussen, Sophie A. Hartwig, and Amy E. Treat. "Targeting Parenting in Early Childhood: A Public Health Approach to Improve Outcomes for Children Living in Poverty." Child Development 88, no. 2 (2017): 388-97.
National Academies of Science, Engineering, and Medicine. "Health Status and Access to Care." In The Integration of Immigrants into American Society, 377-411. Washington, DC: National Academies Press, 2015.
National Center for Education Statistics (NCES). "Postsecondary Attainment: Differences by Socioeconomic Status." Last updated May 2015. https:// nces.ed.gov/programs/coe/indicator_tva.asp\#f2.
National LGBT Health Education Center. Understanding the Health Needs of LGBT People. Boston, MA: Fenway Institute, March 2016. http://www. lgbthealtheducation.org/wp-content/ uploads/LGBTHealthDisparitiesMar2016.pdf.
National Public Radio. "New York City Mayor Goes All-In On Free Preschool." September 8, 2015. http://www.npr.org/sections/ ed/2015/09/08/438584249/new-york-city-mayor-goes-all-in-on-freepreschool.
---. "Patients' Perspectives on Health Care in the United States." February 2016. https://www.npr.org/assets/ img/2016/02/26/PatientPerspectives. pdf.

Nellis, Ashley. The Color of Justice: Racial and Ethnic Disparities in State Prisons. Washington, DC: The Sentencing Project 2016. http://www sentencingproject.org/wp-content/ uploads/2016/06/The-Color-of-Jus-tice-Racial-and-Ethnic-Disparity-in-State-Prisons.pdf.

New York City Department of Health and Mental Hygiene. Annual Report: Hepatitis B and C in New York City, 2016. 2017. https://www1.nyc.gov/assets/ doh/downloads/pdf/cd/hepatitis-b-and-c-annual-report-2016.pdf.
__. "Child Community Health Survey." 2015. https://a816-healthpsi.nyc.gov/ epiquery/Child/CCHSIndex.html.
___. "Epiquery Mortality Data." 2015. https://a816-healthpsi.nyc.gov/epiquery/VS/index.html.
——. HIV Surveillance Annual Report, 2016. HIV Epidemiology and and Field Services Program, December 2016. https://www1.nyc.gov/assets/doh/ downloads/pdf/dires/hiv-surveil-lance-annualreport-2016.pdf.
"HIV/AIDS Among Men Who Have Sex With Men (MSM) in New York City, 2016." HIV Epidemiology and and Field Services Program, December 2017. http://www1.nyc.gov/assets/ doh/downloads/pdf/dires/hiv-aids-inmsm.pdf.
__. "Newborn Home Visiting Program." https://www1.nyc.gov/site/doh/ health/health-topics/pregnancy-newborn-visiting.page.
__. "NYC Youth Risk Behavior Survey." 2015. https://www1.nyc.gov/site/doh/ data/data-sets/nyc-youth-risk-be-havior-survey-public-use-data.page.

Pregnancy-Associated Mortality: New York City, 2006-2010. Bureau of Maternal, Infant and Reproductive Health, 2015. https://www1.nyc.gov/assets/ doh/downloads/pdf/ms/pregnancy-associated-mortality-report.pdf.
"Preventing Sexually Transmitted Infections." City Health Information 32, no. 4 (2013): 19-27. https://www1.nyc. gov/assets/doh/downloads/pdf/chi/ chi-32-4.pdf.
_—. Severe Maternal Morbidity in New York City, 2008-2012. Bureau of Maternal, Infant and Reproductive Health, 2016. https://www1.nyc.gov/ assets/doh/downloads/pdf/data/ma-ternal-morbidity-report-08-12.pdf.
"Sexually Transmitted Infections (STIs)" http://www1.nyc.gov/site/doh/ health/health-topics/sexually-trans-mitted-diseases.page.

New York City Department of Homeless Services. "DHS Data Dashboard Charts FY 2016." 2016.

New York Times. "M.T.A. Delays: How Did the Subway Get So Bad?" February 20, 2018. https://www.nytimes. com/2018/02/20/nyregion/mta-traindelays.html.

New York State Department of Health and Mental Hygiene. New York State Health Equity Report: County Edition. January 2016. https://www.health. ny.gov/statistics/community/minority/ docs/2016_health_equity_report.pdf.

New York State Technical and Education Assistance Center for Homeless Students (NYSTEACHS), "Data on Homelessness in New York State." Data collected by the New York State Education Department in the Student Information Repository System (SIRS). http://nysteachs.org/infotopic/statistics.html\#data.

Nix, Robert L., Karen L. Bierman, Celene E. Domitrovich, and Sukhdeep Gill. "Promoting Children's SocialEmotional Skills in Preschool Can Enhance Academic and Behavioral Functioning in Kindergarten: Findings from Head Start REDI." Early Education and Development 24, no. 7 (2013).

Nunnally, Shayla C. Trust in Black America: Race, Discrimination, and Politics. New York: New York University Press, 2012.

NYC Center for Health Equity home page. https://www1.nyc.gov/site/doh/ health/neighborhood-health/center-for-health-equity.page.

NYC Department of Correction, 2011-2016. From New York City Neighborhood Health Atlas. https://public.tableau. com/profile/nyc.health\#!/vizhome/ NewYorkCityNeighborhoodHealthAtlas/Home

NYC Department of Correction. "NYC Department of Correction at a Glance: Information through all 12 months of FY 2017." 2017. https://www1. nyc.gov/assets/doc/downloads/pdf/ DOC_At_a_Glance-9-14-17.pdf.

NYC Department of Education. "Pre-K for All 2014-15 Evaluation Response Memo." http://schools.nyc.gov/ NR/rdonlyres/6EFAA57A-DA49-4D5F-87C9-E8CE3E63A59B/0/Year1ResponseMemo_FINAL.pdf.

NYC Department of Homeless Services. Turning the Tide on Homelessness in New York City. 2017. http://www1.nyc. gov/assets/dhs/downloads/pdf/turn-ing-the-tide-on-homelessness.pdf.

NYC Housing and Preservation. Housing New York 2.0. http://www1.nyc.gov/ assets/hpd/downloads/pdf/about/ hny-2.pdf.

NYC Housing and Preservation. "Neighborhood Pillars: A New Financing Tool for Nonprofit Organizations to Acquire and Preserve Affordability in Existing Buildings." http://www1. nyc.gov/assets/hpd/downloads/pdf/ about/neighborhood-pillars.pdf.

NYC Office of the Mayor. "Mayor de Blasio and City Council Reach Agreement to Replace Rikers Island Jails with Community-Based Facilities." February 14, 2018. http://www1.nyc.gov/ office-of-the-mayor/news/094-18/ mayor-de-blasio-city-council-reach-agreement-replace-rikers-island-jails-with\#/0.

NYC Resources. 'Nurse Home Visit for Pregnant Women." Official Website of the City of New York. http://www1. nyc.gov/nyc-resources/service/1202/ nurse-home-visit-for-pregnantwomen.

NYC Small Business Services. Unlocking Potential: Empowering New York City's Immigrant Entrepreneurs. https:// www1.nyc.gov/assets/sbs/downloads/ pdf/about/reports/ibi_report.pdf.

Office of Human Services Policy. "ASPE Research Brief: The Early Achievement and Development Gap." US Department of Health and Human Services, March 2014. https://aspe. hhs.gov/system/files/pdf/180276/ rb_AchievementGap.pdf.

Office of the New York City Comptroller Scott M. Stringer. How New York Lives: An Analysis of the City's Housing Maintenance Conditions. Bureau of Fiscal and Budget Studies, September 2014. https://comptroller.nyc. gov/wp-content/uploads/documents/ How_New_York_Lives.pdf.
. "NYC Economic Brief: The Hardest Working Cities." March 2015. https:// comptroller.nyc.gov/wp-content/ uploads/documents/Longest_Work_ Weeks_March_2015.pdf.
__. "Results of a Survey of LGBTQ New Yorkers." June 20, 2017. https:// comptroller.nyc.gov/reports/results-of-a-survey-of-lgbtq-new-yorkers/.

Office of the New York City Public Advocate Letitia James. "New York City Schools Are Failing to Provide Mandated Supports to Children with Disabilities." Policy and Investigative Report: Denial of Service, July 2017. https://pubadvocate.nyc.gov/sites/ advocate.nyc.gov/files/denial_of_service_report_7717_1.pdf.
Owens, Ann. "Racial Residential Segregation of School-Age Children and Adults: The Role of Schooling as a Segregating Force." Russell Sage Foundation Journal of the Social Sciences 3, no. 2 (2017): 63-80.

Pastor, Manuel, Lara Cushing, Rachel Mo-rello-Frosch, and Madeline Wander. "The Haves, the Have-Nots, and the Health of Everyone: The Relationship between Social Inequality and Environmental Quality." Annual Review of Public Health 36 (2015): 193-209.

Pastor, Manuel, Jim Sadd, and John Hipp. "Which Came First? Toxic Facilities, Minority Move-In, and Environmental Justice." Journal of Urban Affairs 23, no. 1 (2001): 1-21.

Pastor, Manuel, Jim Sadd, and Rachel Morello-Frosch. "The Air Is Always Cleaner on the Other Side: Race, Space, and Air Toxics Exposures in California." Journal of Urban Affairs 27, no. 2 (2005): 127-48.

Petrosky, Emiko, Janet M. Blair, Carter J. Betz, Katherine A. Fowler, Shane P.D. Jack, and Bridget H. Lyons. "Racial and Ethnic Differences in Homicides of Adult Women and the Role of Intimate Partner Violence - United States, 2003-2014" Morbidity and Mortality Weekly Report (MMWR) 66, no. 28 (2017): 741-46.

Pickett, Kate, and Richard G. Wilkinson. The Spirit Level: Why Equality Is Better for Everyone. London: Penguin, 2010.
Potter, Halley. Diversity in New York City's Universal Pre-K Classrooms. New York: The Century Foundation, September 2016. https://tcf.org/content/ report/diversity-new-york-citys-universal-pre-k-classrooms/.

Pew Research Center. "U.S. Metro Areas with the Most Unauthorized Immigrants." February 9, 2017. http://www.pewresearch.org/fact-tank/2017/02/09/us-metro-areas-unauthorized-immigrants/ft_17-0131_unauthorizedmetros_table.

Popescu, Ioana, Erin Duffy, Joshua Mendelsohn, and José J. Escarce. "Racial Residential Segregation, Socioeconomic Disparities, and the WhiteBlack Survival Gap." PLoS ONE 13, no. 2 (2018).

Quinn, David M., and Morgan Polikoff, "Summer Learning Loss: What Is It, and What Can We Do About It?" Brookings Institute, September 14, 2017. https://www.brookings.edu/re-search/summer-learning-loss-what-is-it-and-what-can-we-do-about-it/.

Rankin, Kenrya. "NYC Approves Bill That Removes Felony Conviction Check Box From Job Applications." ColorLines, June 12, 2015. https:// www.colorlines.com/articles/nyc-approves-bill-removes-felony-convic-tion-check-box-job-applications.
Read, Jen'nan Ghazal and Michael O. Emerson. "Racial Context, Black Immigration and the U.S. Black/White Health Disparity." Social Forces 84, no. 1 (2005): 181-99.

Real Affordability for All Coalition. "Increasing Real Affordability in New York City: An Action Plan for Mayor de Blasio's Second Term." September 2017. http://nycommunities.org/sites/default/files/FINAL\ PLATFORM\  FOR\%20RELEASE_V.11.pdf.

Reardon, Sean F. "School Segregation and Racial Academic Achievement Gaps." Russell Sage Foundation Journal of the Social Sciences 2, no. 5 (2016): 34-57.

Reardon, Sean F., and Kendra Bischoff. Growth in the Residential Segregation of Families by Income, 1970-2009. US2010 Project, November 2011. https://s4.ad.brown.edu/Projects/Diversity/Data/Report/report111111.pdf.

Reeves, Richard V., and Kimberly Howard. The Glass Floor: Education, Downward Mobility and Opportunity Hoarding. Washington, DC: Center on Children and Families at Brookings, November 2013. https://www.brookings.edu/ wp-content/uploads/2016/06/glass-floor-downward-mobility-equality-opportunity-hoarding-reeves-howard. pdf.

Reeves, Richard V., and Dayna Bowen Matthew. "6 Charts Showing Race Gaps Within the American Middle Class." Social Mobility Memos (blog), Brookings Institute, October 21, 2016. https://www.brookings.edu/blog/so-cial-mobility-memos/2016/10/21/6-charts-showing-race-gaps-within-the-american-middle-class/.

Regional Plan Association, "Fourth Regional Plan: Build New Subway Lines to Underserved Areas of the City." http://fourthplan.org/action/newsubways.

Rivera Drew, Julia A., and Carrie Henning Smith. "Within-Occupation and Industry Sex, Race, and Educational Differences in Exposures to Workplace Hazards." Working Paper no. 2014-3, University of Minnesota, Minnesota Population Center, 2014. https://pop.umn.edu/sites/pop.umn. edu/files/wp-2014-3.pdf.

Rivlin-Nadler, Max. "Hell on Wheels: Port Authority's Broken Promise Is Choking Newark's Kids." Village Voice, May 3, 2016. https://www.villagevoice. com/2016/05/03/hell-on-wheels-port-authoritys-broken-promise-is-choking-newarks-kids/.
Roberts, Colin, Martin Innes, Matthew Williams, Jasmin Tregidga, and David Gadd. "Understanding Who Commits Hate Crime and Why They Do It." Welsh Government Social Research, no. 38/2013, 2013. https://orca.cf.ac. uk/58880/1/understanding-who-commits-hate-crime-and-why-they-do-it-en.pdf.

Rothstein, Richard. The Color of Law: A Forgotten History of How Our Government Segregated America. New York: Liveright, 2017.
Rothwell, Jonathan T., and Douglas S. Massey. "Geographic Effects on Intergenerational Income Mobility." Economic Geography 91, no. 1 (2015): 83-106.

Routhier, Giselle. State of the Homeless 2018, Fate of a Generation: How the City and State Can Tackle Homelessness by Bringing Housing Investment to Scale. New York: Coalition for the Homeless, March 2018. http://www. coalitionforthehomeless.org/wp-con-tent/uploads/2018/03/CFHStateoftheHomeless2018.pdf.

Routhier, Giselle. "Briefing Paper: Family Homelessness in NYC." Coalition for the Homeless, New York, January 2017. http://www.coalition-forthehomeless.org/wp-content/ uploads/2017/01/Family-Homeless-ness-1-2017_FINAL.pdf.

Schnittker, Jason, and Andrea John. "Enduring Stigma: The Long-Term Effects of Incarceration on Health." Journal of Health and Social Behavior 48, no. 2 (2007): 115-30.

Secrest, Aaron M., Tina Costacou, Bruce Gutelius, Rachel G. Miller, Thomas J. Songer, and Trevor J. Orchard. "Associations between Socioeconomic Status and Major Complications in Type 1 Diabetes: The Pittsburgh Epidemiology of Diabetes Complication (EDC) Study." Annals of Epidemiology 21, no. 5 (2011): 374-81.

Sen, Amartya. "Development as Capability Expansion." In Readings in Human Development, edited by Sakiko FukudaParr and A. K. Shiva Kumar. New Delhi and New York: Oxford University Press, 2003.

The Sentencing Project. "Fact Sheet: Trends in U.S. Corrections." June 2017. https://sentencingproject.org/ wp-content/uploads/2016/01/Trends-in-US-Corrections.pdf.

Seltzer, Rick. "New York Free College Goes to 22,000 and Counting." Inside Higher Ed, October 3, 2017. https://www.insidehighered.com/ news/2017/10/13/impact-new-yorks-free-tuition-program-two-communi-ty-colleges.

Sharkey, Patrick. Stuck in Place: Urban Neighborhoods and the End of Progress toward Racial Equality. Chicago, IL: The University of Chicago Press, 2013.

Sherman, Rachel. Uneasy Street: The Anxieties of Affluence. Princeton, NJ: Princeton University Press, 2017.

Simon, Stacey. "Lung Cancer Risks for Non-Smokers." American Cancer Society, November 6, 2017. https://www. cancer.org/latest-news/why-lung-cancer-strikes-nonsmokers.html.

Smith, Ashley A. "Free Impact on N.Y. Community Colleges." Inside Higher Ed, October 13, 2017. https://www.insidehighered.com/news/2017/10/13/ impact-new-yorks-free-tuition-pro-gram-two-community-colleges.
Snyder, Anne. "'To the Suburbs!' Lessons from Minorities and the New Immigrants." In America's Housing Crisis. Chapman University Press, 2015. http://opportunityurbanism.org/ wp-content/uploads/2016/10/COU-Housing-Crisis-Report.pdf.

Sommeiller, Estelle, Mark Price, and Ellis Wazeter. Income Inequality in the U.S. by State, Metropolitan Area, and County. Washington, DC: Economic Policy Institute, June 16, 2016. https://www. epi.org/publication/income-inequali-ty-in-the-us/.

Sorensen, Eric P., Haitham Algzlan, Shiuchung Au, Caren Garber, Kristina Fanucci, Michelle Bichchau Nguyen, and Alice B. Gottlieb. "Lower Socioeconomic Status Is Associated With Decreased Therapeutic Response to the Biologic Agents in Psoriasis Patients." Journal of Drugs in Dermatology 15, no. 2 (2016): 147-53.

Southall, Ashley. "Crime in New York City Plunges to a Level Not Seen Since the 1950s." New York Times, December 27, 2017. https://www.nytimes. com/2017/12/27/nyregion/new-york-city-crime-2017.html.

Stafford, Mai, Tarani Chandola, and Michael Marmot. "Association between Fear of Crime and Mental Health and Physical Functioning." American Journal of Public Health 97, no. 11 (2007): 2076-81.

State Street Wire Staff. "Chevron to Pay N.J. $\$ 231,000$ in Civil Penalty to Resolve Perth Amboy Plant Concerns." The Observer, July 18, 2012. http://ob-server.com/2012/07/chevron-to-pay-n-j-231000-in-civil-penalty-to-re-solve-perth-amboy-plant-concerns/.

Paul R. Sterzing, Paul R., Jeffrey Edleson, Aaron Fisher, and Rachel E. Gartner. "Polyvictimization Prevalence Rates for Sexual and Gender Minority Adolescents: Breaking Down the Silos of Victimization Research." University of California, Berkeley, November 2017. https://www.ncjrs.gov/pdffiles1/nij/ grants/251353.pdf.
Storm, Servaas. "With Official Unemployment This Low, Why Are Wages Rising So Slowly?" Institute for New Economic Thinking, February 26, 2018. https://www.ineteconomics. org/perspectives/blog/with-official-unemployment-this-low-why-are-wages-rising-so-slowly.
Substance Abuse and Mental Health Services Administration (SAMHSA). "Adverse Childhood Experiences." Last updated September 5, 2017. https:// www.samhsa.gov/capt/practicing-effective-prevention/prevention-be-havioral-health/adverse-childhoodexperiences.

Taylor, Shelley E., Laura Cousino Klein, Brian P Lewis, Tara L. Gruenewald, Gurung, A. R. Regan, and John A. Updegraff."Biobehavioral Responses to Stress in Females: Tend-andBefriend, not Fight-or-Flight." Psychological Review 107, no. 3 (2000): 411-29.

Teruya, Stacey A., Shahrzad BazarganHejazi, and Charles R. Drew. "The Immigrant and Hispanic Paradoxes: A Systematic Review of Their Predictions and Effects." Hispanic Journal of Behavioral Sciences 35, no. 4 (2013): 486-509.

Thomas, Mallika. "The Impact of Mandated Maternity Benefits on the Gender Differential in Promotions: Examining the Role of Adverse Selection." Cornell University, Institute for Compensation Studies, 2016. https://digitalcommons.ilr.cornell.edu/ics/16/.

Thompson, Ashley E., Yvonne Anisimowicz, Baukje Miedema, William Hogg, Walter P. Wodchis, and Kris Aubrey Bassler. "The Influence of Gender and Other Patient Characteristics on Health Care-Seeking Behaviour: A QUALICOPC Study." BMC Family Practice 17, no. 38 (2016).
Tilly, Charles. Durable Inequality. Oakland, CA: University of California Press, 1999.

UN High Commissioner for Human Rights. "Discrimination and Violence against Individuals Based on their Sexual Orientation and Gender Identity." June 2015. http://www.ohchr.org/ Documents/Issues/Discrimination/ LGBT/A_HRC_29_23_One_pager_ en.pdf.

UNICEF. A Familiar Face: Violence in the Lives of Children and Adolescents. Division of Data, Research and Policy, November 2017. https://www.unicef. org/publications/index_101397.html.

US2010 Longitudinal Tract Database, 2000. https://s4.ad.brown.edu/projects/diversity/researcher/bridging.htm.

US Census Bureau American Community Survey 2015.

US Census Bureau American Community Survey 2011-2015.

US Census Bureau American Community Survey 2016.

US Census Bureau, Longitudinal Employ-er-Household Dynamics: Quarterly Workforce Indicators.

US Census Bureau, Census 2000, Summary File 3.

US Environmental Protection Agency. "Environmental Justice Screening and Mapping Tool (Version 2017)." https:// ejscreen.epa.gov/mapper/.

Vera Institute. "Jail Incarceration Rate (per 100,000 residents age 15-64), 2015." Incarceration Trends tool. http:// trends.vera.org/incarceration-rates.

Vizard, Polly, and Tania Burchardt. "Developing a capability list: Final Recommendations of the Equalities Review Steering Group on Measurement." Centre for Analysis of Social Exclusion, London School of Economics, April 2007. http://sticerd.Ise.ac.uk/ dps/case/cp/CASEpaper121.pdf.

Votruba-Drzal, Elizabeth. "Economic Disparities in Middle Childhood Development: Does Income Matter?" Developmental Psychology 42 no. 6 (2006): 1154-67.

Wagmiller, Robert L., and Robert M. Adelman. "Childhood and Intergenerational Poverty: The Long-Term Consequences of Growing Up Poor." National Center for Children in Poverty New York, 2009. http://www.nccp.org/ publications/pub_909.html.

Wardle, Richard A., Andrew J. Wardle, Creanaa Charadva, Subratab Ghosh, and Gordon W. Moran. "Literature Review: Impacts of Socioeconomic Status on the Risk of Inflammatory Bowel Disease and Its Outcomes." European Journal of Gastroenterology \& Hepatology 29, no. 8 (2017): 879-84.

Watson, Tara. New Housing, Income Inequality, and Distressed Metropolitan Areas. Washington, DC: Brookings Institution, September 2007. https:// www.brookings.edu/wp-content/ uploads/2016/06/09newhousing_watson.pdf.

Weiss, Christopher C., Marnie Purciel, Michael Bader, James W. Quinn, Gina Lovasi, Kathryn M. Neckerman, and Andrew G. Rundle. "Reconsidering Access: Park Facilities and Neighborhood Disamenities in New York City." Journal of Urban Health : Bulletin of the New York Academy of Medicine 88, no. 2 (2011): 297-310.

Weller, Christian E., and Jeffrey Thompson. "Wealth Inequality Among Asian Americans Greater Than Among Whites." Center for American Progress, 2016. https://www. americanprogress.org/issues/race/ reports/2016/12/20/295359/wealth-inequality-among-asian-americans-greater-than-among-whites/.

Wilkinson, Richard G. "Income Distribution and Life Expectancy." BMJ: British Medical Journal 304, no. 6820 (1992): 165-8.

Wilson, Jill H., and Nicole Prchal Svajlenka. "Immigrants Continue to Disperse, with Fastest Growth in the Suburbs." Brookings Institution,. October 29, 2014. https://www. brookings.edu/research/immigrants-continue-to-disperse-with-fastest-growth-in-the-suburbs/.
Wilson, Valerie. "Racial inequalities in wages, income, and wealth show that MLK's work remains unfinished." Economic Policy Institute, January 11, 2018. https://www.epi.org/publi-cation/racial-inequalities-in-wages-income-and-wealth-show-that-mlks-work-remains-unfinished/.

World Health Organization. "Key Concepts: Social Determinants of Health." http://www.who.int/social_determinants/thecommission/finalreport/ key_concepts/en/index.html.
-__. "Violence Against Women: Health Impact." http://www.who.int/reproductivehealth/publications/violence/ VAW_health_impact.jpeg?ua=1.
"World Health Statistics 2014." http://www.who.int/gho/publications/ world_health_statistics/2014/en/.
Yager, Jessica, and Eric Stern. 21st Century SROs: Can Small Housing Units Help Meet the Need for Affordable Housing in New York City? NYU Furman Center, January 31, 2018. http://furmancenter.org/research/ publication/21st-century-sros-can-small-housing-units-help-meet-the-need-for-affordable.

Yeung, W. Jean, and Dalton Conley. "BlackWhite Achievement Gap and Family Wealth." Child Development 79, no. 2 (2008): 303-24

Yoon, Paula W., Brigham Bastian, Robert N. Anderson, Janet L. Collins, Harold W. Jaffe. "Potentially Preventable Deaths from the Five Leading Causes of Death - United States, 20082010." Morbidity and Mortality Weekly Report (MMWR) 63, no. 17 (2014).

Young, Douglas, Rachel Porter and Gail A. Caputo. Alternative to Incarceration Programs for Felony Offenders in New York City. Vera Institute of Justice, August 1999. https://storage. googleapis.com/vera-web-assets/ downloads/Publications/alternative-to-incarceration-programs-for-felony-offenders-in-new-york-city/ legacy_downloads/364.6yd_2.pdf.

Zhou, Min, and Jennifer Lee. "Hyper-Selectivity and the Remaking of Culture: Understanding the Asian American Achievement Paradox." Asian American Journal of Psychology 8, no. 1 (2017): 7-15.

Zillow Research. "Median Rent List Price by Neighborhood." 2016. https://www. zillow.com/research/data/.

Zimmerman, Alex. "To Help Students with Disabilities Transition to Adulthood, New York City Is Opening New Resource Hubs in Every Borough." Chalkbeat, December 6, 2017. https://www.chalkbeat.org/posts/ ny/2017/12/06/to-help-students-with-disabilities-transition-to-adult-hood-new-york-city-is-opening-new-resource-hubs-in-every-borough/.

## Who Are We?

## nimbiantivim

New York City Population




# A PORTRAIT OF NEW YORK CITY 2018 <br> WELL-BEING IN THE FIVE BOROUGHS AND THE GREATER METRO AREA <br> While many measures tell us how the economy is doing, A Portrait of New York City tells us how ordinary people are doing. 

## ADVANCE PRAISE:


#### Abstract

"A Portrait of New York City is exactly the type of local data-driven research that policy-makers and Community Board members need in order to make sense of complex demographic trends and make informed decisions to improve the life prospects of all New York City residents."

—Gale A. Brewer, Manhattan Borough President > "The Community Based Strategies (CBS) team in the Division of Prevention at the NYC Administration for Children's Services (ACS) knows that meaningful change for the well-being of children and families in NYC requires innovative methods in analysis to inform the planning of family-centered programs and supports. This report is an outstanding example of how to make meaning of insights from data, evidence, and stakeholder feedback in a way that is both accessible and actionable." > —Markus Kessler, Senior Advisor, New York City Administration for Children's Services


"If you live or work in New York City, this portrait of the city's people, seen through the lenses of race, gender, ethnicity, and geography, will be endlessly fascinating. And if you fund nonprofits with the goal of creating a more equitable, thriving, and sustainable city, this book is required reading.'

—Ronna D. Brown, President, Philanthropy New York


#### Abstract

"This report from Measure of America brilliantly articulates the stark, profound, and disparate realities faced by New Yorkers depending on race, ethnicity, and neighborhood. The report also helps us understand that in order to have a New York City we can all be proud of we must work strategically and collectively to solve our most urgent problems."


> —Sheena Wright, President \& CEO, United Way of New York City

## MADE POSSIBLE BY FUNDING FROM

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For interactive maps, data, and videos, visit www.measureofamerica.org To obtain copies of this report, email contactameasureofamerica.org

## ABOUT THE REPORT

A Portrait of New York City 2018 is an exploration of well-being and access to opportunity of residents of New York City and the greater metro area. It uses the human development framework and index to present American Human Development Index scores for places and demographic groups and examines a range of critical issues, including health, education, living standards, housing, homelessness, residential segregation, incarceration, and inequality.

## ABOUT THE DESIGN

HUMANTIFIC is an internationally recognized SenseMaking for ChangeMaking firm located in New York and Madrid.

## ABOUT THE PROJECT

Measure of America is a nonpartisan project of the nonprofit Social Science Research Council. It creates easy-to-use yet methodologically sound tools for understanding well-being and opportunity in America and stimulates fact-based dialogue about these issues. Through hard copy and online reports, interactive maps, and custom-built dashboards, Measure of America works closely with partners to breathe life into numbers, using data to identify areas of need, pinpoint levers for change, and track progress over time.

Kristen Lewis and Sarah Burd-Sharps are co-founders of Measure of America and co-authors of The Measure of America series of national, state, county, and city reports. They both previously worked on human development issues in countries around the world.


[^0]:    Suggested citation:
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[^1]:    Source: US Census Bureau ACS, 2015. Note: Unreliable estimates have been omitted.

[^2]:    Source: US Census Bureau ACS, 2015

[^3]:    Source: US Census Bureau ACS, 2015

[^4]:    Source: US Census Bureau ACS, 2015.

[^5]:    Sources: Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC Wonder and the US Census Bureau, 2010-2014. Education and earnings: US Census Bureau ACS, 2015.

[^6]:    Nearly one in two renters has to spend more than a third of his or her income on housing costs each month, and owners in Opportunity-Rich communities in New Jersey and New York face the country's highest property tax bills in addition to their mortgage payments.

[^7]:    Variation by Nativity
    IN THIS SECTION
    Variation by Race and Ethnicity
    Variation by Geography: Borough and Community District
    $\geq$ Improving Population Health and Eliminating Health Inequities: What Will It Take?

[^8]:    Source: US Census Bureau ACS, 2015.

[^9]:    Source: US Census Bureau ACS, 2015. Note: Unreliable estimates have been omitted.

[^10]:    Source: US Census Bureau ACS, 2015.

[^11]:    Source: Board of Governors of the Federal Reserve System.

[^12]:    Source: US Census Bureau ACS, 2015.

[^13]:    DATA SOURCES:
    Life expectancy: Measure of America calculations using mortality data from the Connecticut Department of Public Health, NJ Department of Health, New York State Department of Health, and the New York City Department of Health and Mental Hygiene and population data from CDC
    Wonder and the US Census Bureau, 2010-2014.
    Education and earnings: US Census Bureau ACS, 2015.

