



Sierra Health Foundation | Black Child Legacy Campaign

# Annual Community Indicator Report 2022

*Child Death Data Through 2019*








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# KEY TAKEAWAYS: REDUCTION OF BLACK/AFRICAN AMERICAN CHILD DEATHS IN SACRAMENTO COUNTY

The following sections highlight progress toward the Blue Ribbon Commission 2020 goals to reduce Black/African American child deaths in Sacramento County and the BCLC focus area, as well as insights into social and community indicators which may impact the causes of racial disparities among child deaths. The table below displays the 2020 Blue Ribbon Commission goals, their status as of the most current data (2019), and pertinent notes.

## Progress Made on Reduction of Leading Preventable Causes of Black/African American Child Death

| Leading Causes of Deaths:  | 2020 Goal:                    | 2019 Status:         |   |
|--|-------------------------------|----------------------|---|
|  <b>Overall Child Deaths (ages 0-17)</b>                      | <b>10% to 20%</b> Reduction   | <b>30%</b> Reduction | <p>Overall, Black/African American child deaths in Sacramento County decreased 30% since 2012-2014, exceeding the 2020 goal. However, Black/African American children continue to have a child death rate twice that of all other races.</p> <p>Future work should focus on further reducing disparities.</p>   |
|  <b>Perinatal Conditions (ages &lt; 1 month)</b>            | At Least <b>23%</b> Reduction | <b>12%</b> Reduction | <p>Deaths related to perinatal conditions have decreased for Black/African American children, though the 2020 goal has not yet been met.</p> <p>BCLC should continue to provide services for Black/African American pregnant women with the goal of receiving earlier prenatal care, decreasing preterm births, and increasing infant birth weight.</p>   |
|  <b>Infant Sleep-Related (ISR) Deaths (ages 0-1)</b>        | At Least <b>33%</b> Reduction | <b>57%</b> Reduction | <p>ISR deaths have decreased substantially and rates exceed the 2020 goal, though a disparity gap still remains between Black/African American children and all other races. Black/African American children experience ISR deaths at 3.2 times the rate of all other races.</p> <p>Future efforts should aim to reduce this disparity gap and further decrease ISR deaths among Black/African American children.</p> |
|  <b>Child Abuse and Neglect (CAN) Homicides (ages 0-17)</b> | At Least <b>25%</b> Reduction | <b>76%</b> Reduction | <p>Although great strides have been made toward decreasing CAN homicides and the 2020 goal has been exceeded, a disparity gap remains; Black/African American children experience CAN homicides at a rate that is 1.7 times higher than children of all other races.</p> <p>Future efforts should aim to reduce this disparity gap and further decrease CAN homicides in Black/African Americans.</p>                 |
|  <b>Third-Party Homicides (ages 0-17)</b>                   | At Least <b>48%</b> Reduction | <b>13%</b> Reduction | <p>Despite goals to decrease third-party homicides among Black/African American children, there has been a 13% increase in rates. Current rates are greatly influenced by 2017, which had a larger number of such homicides than surrounding years.</p> <p>Further support is needed to mitigate this increase and resume a downward trend.</p>   |






# REDUCING BLACK/ AFRICAN AMERICAN CHILD DEATHS

In 2011, the Sacramento County Child Death Review Team (CDRT) released a 20-Year report revealing that Black/African American children were dying at twice the rate (102 per 100,000) of any other ethnic group.<sup>1</sup> The four leading causes of the disproportionate Black/African American child deaths were perinatal conditions, infant sleep-related (ISR) deaths, child abuse and neglect (CAN), and third-party homicides.

In response to these alarming findings, the Sacramento County Board of Supervisors created the Blue Ribbon Commission on Disproportionate African American Child Deaths which established a set of recommendations to reduce African American child deaths between 10% and 20% by 2020. This report, updated annually to track progress toward the Blue Ribbon Commission goals, identifies progress as of 2019 — the most current data available on Black/African American child deaths in Sacramento County, along with the most recent data available for community trends (varies between 2019 and 2021).

## Leading Preventable Causes of Black/African American Child Death

In addition to the overall reduction goal, the Blue Ribbon Commission established the following goals for each of the four leading causes of disproportionate Black/African American child deaths by 2020.

|   |  |  |                               |
|---|--|--|-------------------------------|
|   | <b>Overall Child Deaths</b>                    | All child deaths, ages 0-17, including natural and preventable causes.   | <b>10% to 20% reduction</b>   |
|  | <b>Perinatal Conditions</b>                    | Deaths include, but are not limited to, prematurity, low birthweight, placental abruption, and congenital infections. This includes deaths through one-month post-birth.                             | <b>At least 23% reduction</b> |
|  | <b>Infant Sleep-Related Deaths</b>             | Includes any infant death that occurs in the sleep environment, including Sudden Infant Death Syndrome, Sudden Unexpected Infant Death Syndrome, and Undetermined Manner/Undetermined Natural Death. | <b>At least 33% reduction</b> |
|  | <b>Child Abuse and Neglect Homicides (CAN)</b> | Deaths caused by abuse or neglect perpetrated by a caregiver, such as a parent, guardian, babysitter, or family friend. CAN homicides include all children ages 0-17.                                | <b>At least 25% reduction</b> |
|  | <b>Third-Party Homicides</b>                   | Intentional or accidental deaths caused by strangers, acquaintances, or friends who were not caregivers. Counts include all children ages 0-17.  | <b>At least 48% reduction</b> |

## Why does disparity matter?

Disparity is a term to describe a difference between two values. For example, Black/African American children are over-represented in the Child Protective Services system compared to all other races. This report highlights the disparity in child death and other community-wide indicators by comparing the Black/African American population with the population of all other racial/ethnic groups in Sacramento County. Social, economic, and environmental factors play an extremely important role in the health and well-being of children and their families. All community-wide indicators listed in this report are intimately tied to at least one of the causes of death above and provide valuable insight for planned interventions with the intention of decreasing overall Black/African American child death.

<sup>1</sup> Including those whose race/ethnicity was White, Hispanic, Asian/Pacific Islander, Multi-Racial, or Other.

## BACKGROUND OF THE BLACK CHILD LEGACY CAMPAIGN (BCLC)

The BCLC movement was established by the Steering Committee on Reduction of African American Child Deaths (RAACD), a community-driven body of dedicated individuals working to reduce deaths among African American children in Sacramento County. The Committee was established by a resolution of the Sacramento County Board of Supervisors in June 2013. It is funded by Sacramento County, the City of Sacramento, and First 5 Sacramento, and is managed by The Center at Sierra Health Foundation. The Steering Committee's ultimate charge is to provide coordination and oversight of efforts, create a strategic plan, monitor implementation, evaluate, and report on progress toward reducing the disproportionate number of Black/African American child deaths.



The Steering Committee is currently comprised of the following members:

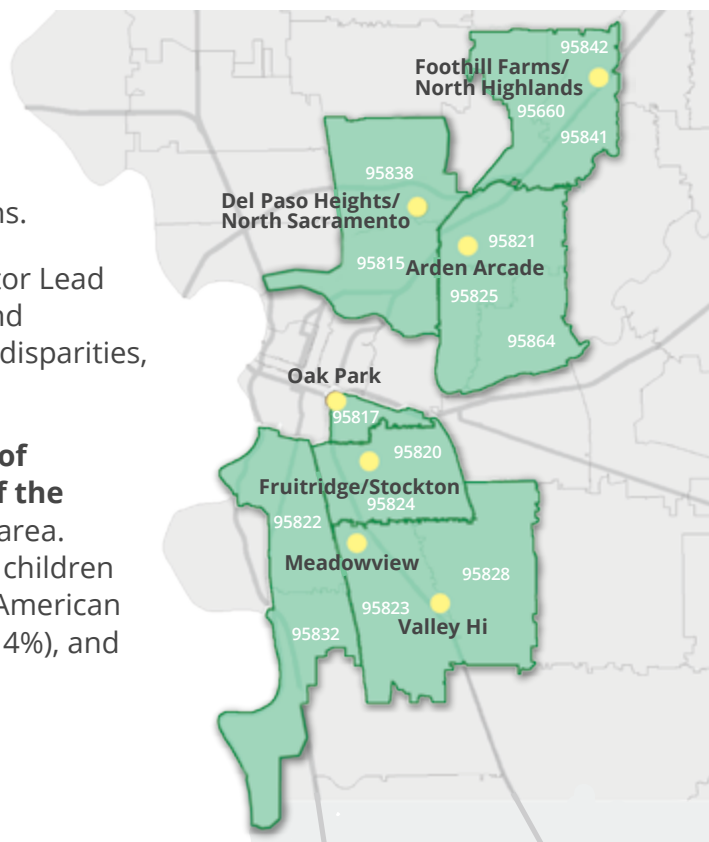
- ▶ Pastor Alice Baber-Banks
- ▶ Debra Cummings
- ▶ Dr. Ethan Cutts
- ▶ Robert Davis
- ▶ Julie Davis-Jaffe
- ▶ Paris Dye
- ▶ Linda Fong-Somera
- ▶ Keith Herron
- ▶ Chet P. Hewitt
- ▶ Stephanie Hopkins
- ▶ Pastor Robert Jones
- ▶ Dr. Olivia Kasirye
- ▶ Kim Pearson
- ▶ Tina Roberts
- ▶ Shannon Shaw
- ▶ Kimberly Williams
- ▶ Marlon Yarber
- ▶ Gina Roberson
- ▶ Dr. Ryan Quist

## BCLC FOCUS AREA

The BCLC focus area includes the seven neighborhoods in Sacramento County that RAACD identified as experiencing the highest number of Black/African American child deaths.

Each neighborhood has a Community Incubator Lead (CIL) organization, charged with prevention and intervention efforts to reduce the child death disparities, targeting the leading causes discussed above.

**Overall, Black/African American residents of Sacramento County comprise about 10% of the total population and 13% of the BCLC focus area.** Within the BCLC focus area, nearly one in five children (ages 0-17) in Meadowview are Black/African American (18%), followed by Valley Hi (15%), Oak Park (14%), and Foothill Farms/North Highlands (13%).<sup>2</sup>



**FIGURE 1 — BCLC FOCUS AREA POPULATION (2020)**

|                                   | Youth (0-17)   | Black/AA % of 0-17 | Total Population | Black/AA % of Total |
|-----------------------------------|----------------|--------------------|------------------|---------------------|
| <b>BCLC Focus Area</b>            | <b>134,919</b> | <b>12.4%</b>       | <b>532,030</b>   | <b>12.6%</b>        |
| Arden Arcade                      | 22,063         | 8.8%               | 98,703           | 8.6%                |
| Del Paso Heights/North Sacramento | 18,569         | 11.4%              | 66,034           | 13.6%               |
| Foothill Farms/North Highlands    | 23,315         | 12.7%              | 90,170           | 11.7%               |
| Fruitridge/Stockton               | 16,373         | 7.3%               | 65,358           | 8.4%                |
| Meadowview                        | 13,726         | 18.4%              | 57,818           | 17.7%               |
| Oak Park                          | 1,881          | 13.5%              | 13,966           | 12.1%               |
| Valley Hi                         | 38,992         | 14.5%              | 139,981          | 15.6%               |
| <b>Sacramento County</b>          | <b>363,852</b> | <b>9.8%</b>        | <b>1,537,948</b> | <b>9.7%</b>         |

Source: US Census Bureau, American Community Survey 5-Year Estimates (2020). Percent Black/AA refers to the proportion categorized as Black or African American alone and will exclude those who are multiracial, including those with Hispanic ethnicity. Results should be interpreted with caution due to large margins of error by zip code.

<sup>2</sup> Interpret results with caution due to large margins of error in Black/African American population counts by zip code

# SACRAMENTO CHILD DEATH INDICATORS







Data from the Sacramento Child Death Review Team (CDRT) are used to measure rates of child death, as well as the projected goals for reducing Black/African American Child Deaths. This is in accordance with the CDRT Report and subsequent formation of the Blue Ribbon Commission on Disproportionate African American Child Deaths.

Trends in child deaths are reported as three-year rates to minimize the impact of fluctuations in counts from year-to-year. Three-year rates are determined by calculating the total number of deaths within the three-year period, divided by the total number of births or child population (0-17) across the three years. These values are then multiplied by 1,000 for infants or 100,000 for children.

CDRT data are reported through the 2019 calendar year. The following sections represent trends from the 2012-2014 baseline through 2017-2019.

## Sacramento County Child Deaths (2017-2019)

In total, 353 children ages 0-17 died during 2017-2019. Black/African American children represented 19.5% of deaths, although Black/African American children comprised only 11% of children ages 0-17 countywide in 2019. Additionally, Black/African American children were disproportionately overrepresented among the leading causes of child death. For instance, Black/African American children comprised 43% of all third-party homicides (0-17), and nearly one-quarter (24%) of infant sleep related deaths.

|   | Child Deaths, by Cause (2017-2019)   | Total (N) | Black/AA % of Total |
|---|--|-----------|---------------------|
|   |  All Child Deaths (0-17)            | 353       | 19.5%               |
| <b>Leading Causes of Black/African American Child Death (Sacramento County)</b> |  Perinatal Conditions (≤ 1 month)   | 94        | 22.3%               |
|   |  Infant Sleep-Related (< 12 months) | 37        | 24.3%               |
|   |  CAN Homicide (0-17)                | 12        | 16.7%               |
|   |  Third Party Homicide (0-17)        | 14        | 42.9%               |
|   |  All Other Causes (0-17)            | 196       | 15.8%               |

Source: Child Death Review Team Report 2017, 2018, 2019.

The following sections explore each cause of death in Sacramento County since 2012-2014, and the status on the Blue Ribbon Commission goals for reducing African American child deaths by 2020.

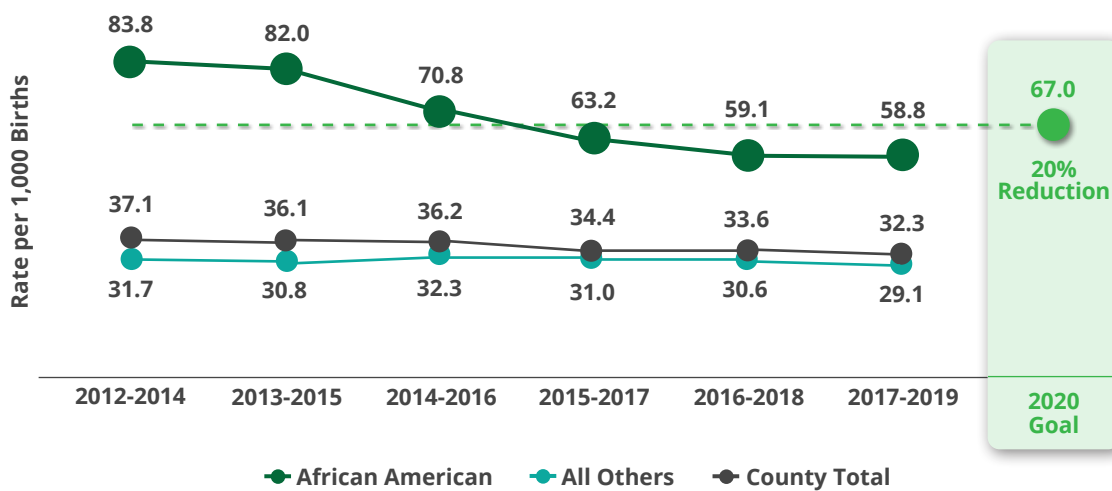
# OVERALL CHILD DEATH (0-17)

## 2020 Reduction Goal:

### Reduce Black/African American Child Deaths by 10%-20%

Countywide, child deaths declined 13% between 2012-2014 (37.1 per 100,000 children) and 2017-2019 (32.3 per 100,000). Among Black/African American children, deaths decreased 30% between 2012-2014 (83.8 per 100,000 children) and 2017-2019 (58.8 per 100,000) — exceeding the 2020 Blue Ribbon Commission goal. Additionally, the disparity between Black/African American child deaths and child deaths among all other races decreased 43%. However, despite the narrowing disparity gap, Black/African American children remain about twice as likely to die between the ages of 0 and 17, compared to all other races. Future work should focus on further reducing this disparity.

FIGURE 2 — CHILD DEATH RATE (0-17) – ROLLING THREE-YEAR RATES



Source: Sacramento County Child Death Review Team Report 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019.

Note: Rate is per 100,000 children. Rates may vary slightly compared to previous reports due to updates to historical population counts.

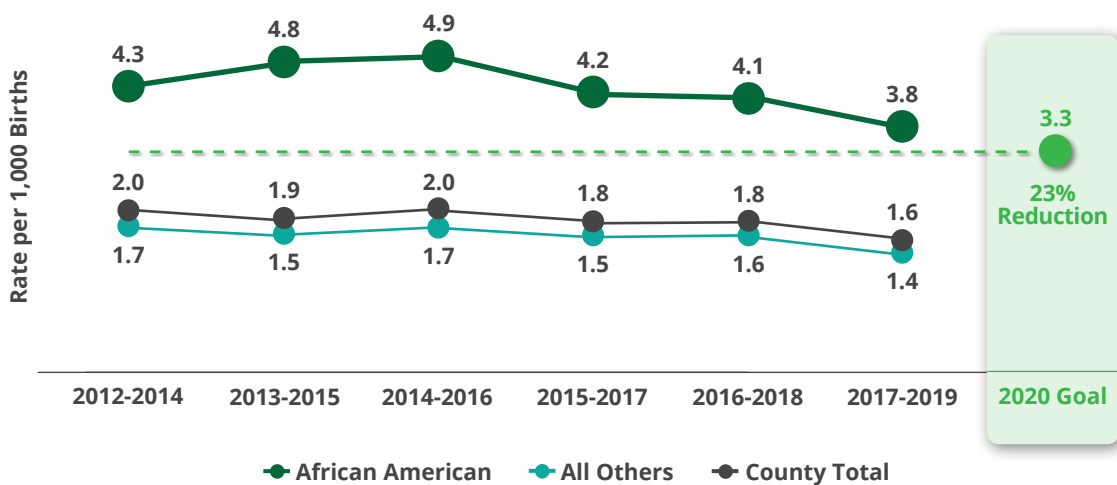


## Perinatal Conditions

### 2020 Reduction Goal: Reduce Black/African American Deaths Due to Perinatal Conditions by (at least) 23%

The Sacramento County infant death rate due to perinatal conditions (i.e., prematurity, low birthweight, placental abruption, congenital infections through one-month post-birth) is less than two per 1,000 births. Black/African American infants have a higher rate of infant deaths due to perinatal conditions, though this rate has been **steadily declining** since a slight uptick in 2014-2016 (4.9 per 1,000 births). In 2017-2019, Black/African American infants were dying from perinatal conditions at a rate of 3.8 per 1,000 births. This rate remains 13% higher than the 2020 Commission goal (3.3 per 1,000) and 2.7 times greater than all other races, although the disparity gap decreased 10% compared with 2012-2014 rates.

FIGURE 3 — INFANT DEATH RATE DUE TO PERINATAL CONDITIONS - ROLLING THREE-YEAR RATES



Source: Sacramento County Child Death Review Team Report 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019.

Note: Rate is per 1,000 births. Rates may vary slightly compared to previous reports due to updates to historical population counts.

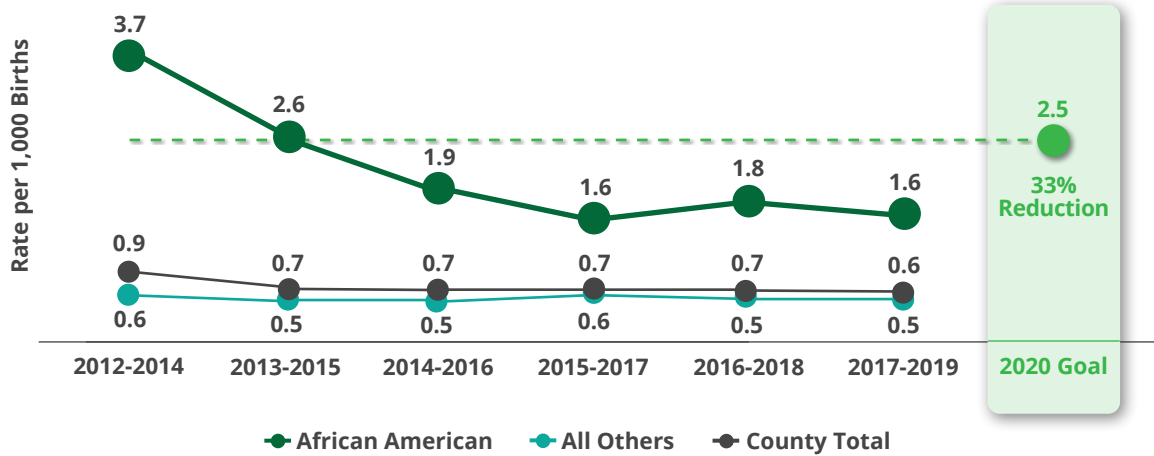


## Infant Sleep-Related

### 2020 Reduction Goal: Reduce Black/African American Sleep Related Deaths by (at least) 33%

The countywide rate of infant sleep related (ISR) deaths (infant deaths occurring in the sleep environment) is less than one per 1,000 births. Sleep-related deaths have declined 56% from 2012-2014 (3.7 per 1,000 births) to 2017-2019 (1.6 per 1,000 births) for Black/African American infants. This reduction exceeds the Commission goal to reduce Black/African American ISR deaths by 33%. ISR deaths remain 3.2 times greater among Black/African American infants, compared with all other races, while the disparity gap has decreased 65% since 2012-2014.

**FIGURE 4 — INFANT DEATH RATE DUE TO SLEEP-RELATED CAUSES – ROLLING THREE-YEAR RATES**



Source: : Sacramento County Child Death Review Team Report 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019.

Note: Rate is per 1,000 births. Rates may vary slightly compared to previous reports due to updates to historical population counts

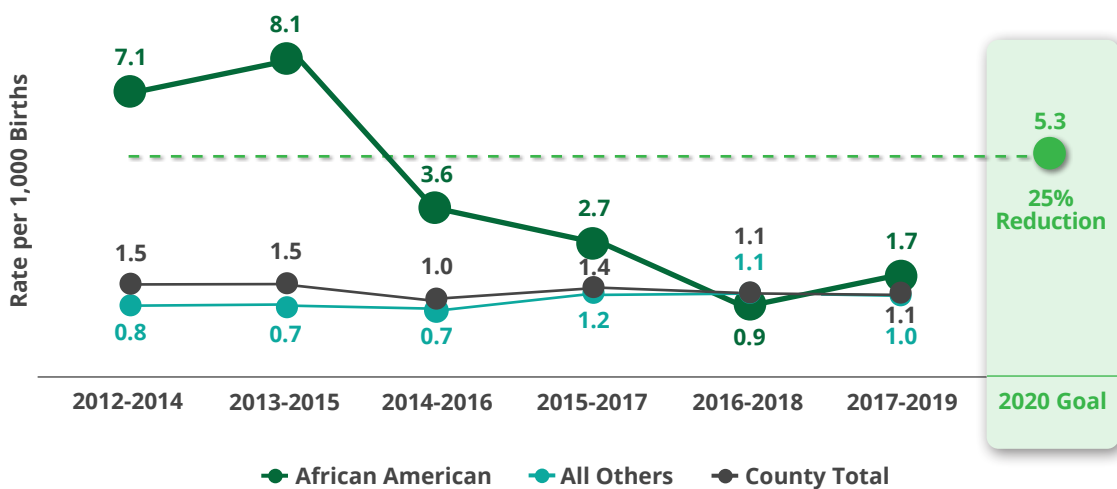


## Child Abuse and Neglect (0-17)

### 2020 Reduction Goal: Reduce Black/African American child abuse and neglect deaths by (at least) 25%

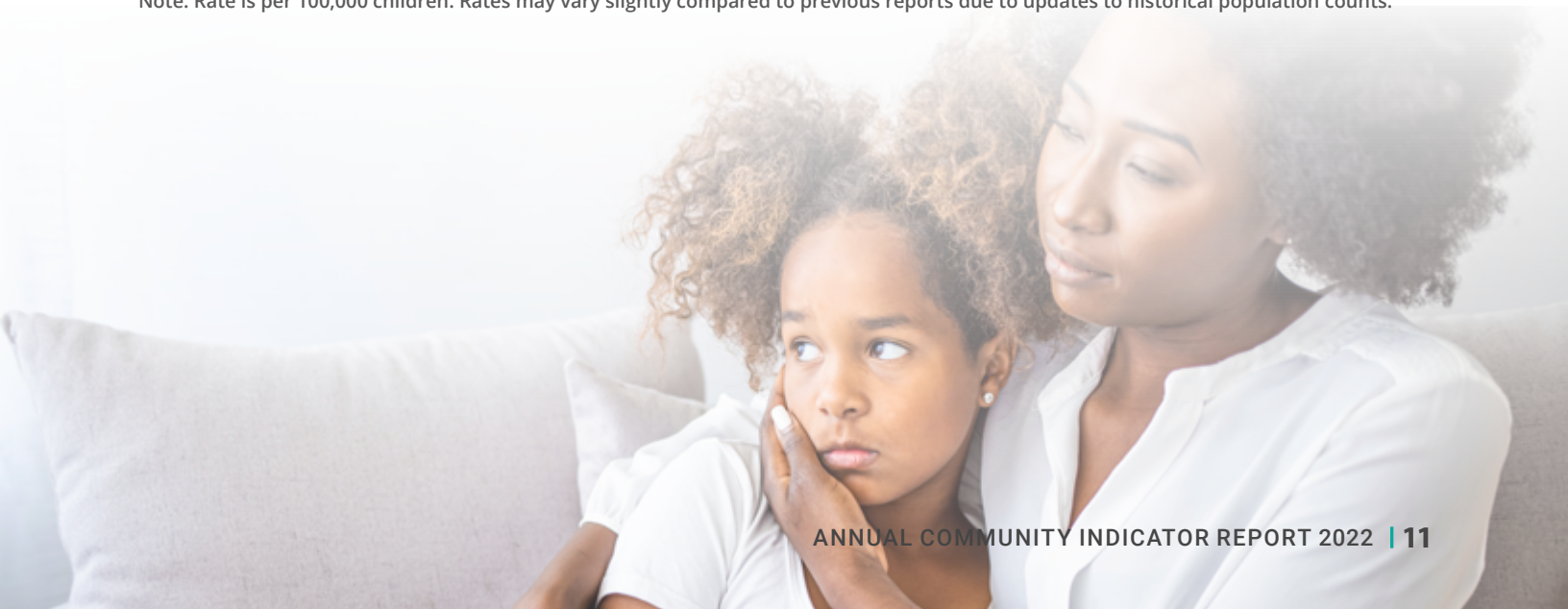
The countywide rate of child abuse and neglect (CAN) homicides for all children has remained relatively stable between 2012-2014 and 2017-2019. In 2012-2014, the rate of CAN homicides among Black/African American children was 7.1 per 100,000 children. The rate of Black/African American CAN homicides decreased 76% by 2017-2019 (1.7 per 100,000). The 2017-2019 rate reflects a slight increase from 2016-2018 (0.9 per 100,000) although the rate remains well below the Blue Ribbon Commission’s 2020 goal and reflects an increase of just one individual death. Additionally, the disparity gap between Black/African Americans and all other races has decreased 89% since 2012-2014.

FIGURE 5 — CHILD ABUSE AND NEGLECT HOMICIDES - ROLLING THREE-YEAR RATES



Source: Sacramento County Child Death Review Team Report 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019.

Note: Rate is per 100,000 children. Rates may vary slightly compared to previous reports due to updates to historical population counts.



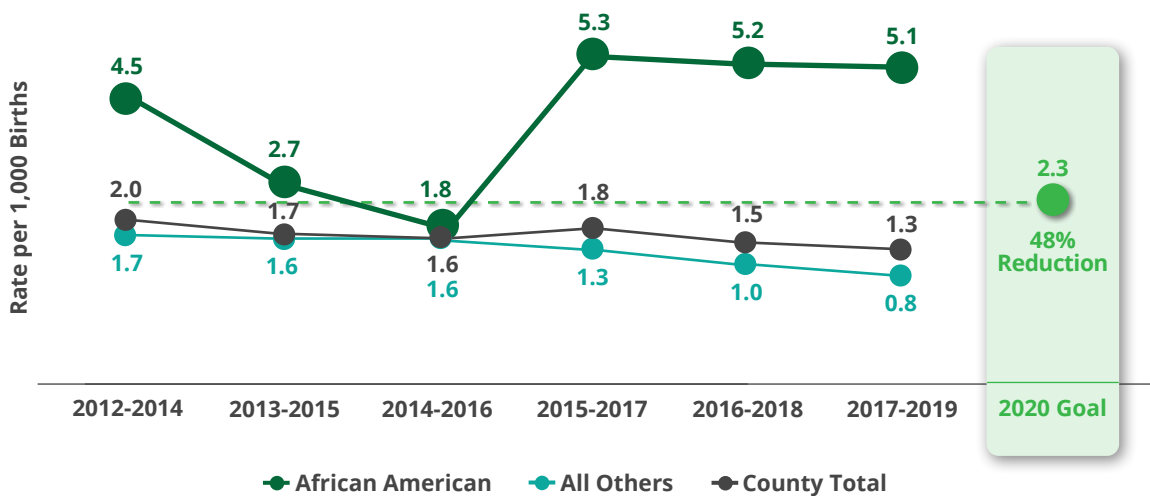
## Third-Party Homicide (0-17)

### 2020 Reduction Goal:

**Reduce Black/African American Third-Party Homicide child deaths by (at least) 48%**

The countywide rate of third-party homicides gradually declined from 2012-2014 (2.0 per 100,000) to 2017-2019 (1.3 per 100,000). Unfortunately, the rate of third-party homicides among Black/African American Children increased after declining between 2012-2014 and 2014-2016. The rate of third-party homicides among Black/African American children increased 15% since the baseline rate and was more than six times greater than the rate of third-party homicides among all other races. These higher rates since 2015-2017 are largely impacted by an increase in third-party deaths in 2017 (4 total deaths), while there has only been one reported third-party homicide death each other year between 2015 and 2019.

**FIGURE 6 — THIRD-PARTY HOMICIDE RATES - ROLLING THREE-YEAR RATES**



Source: Sacramento County Child Death Review Team Report 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019. Rate is per 100,000 children. Rates may vary slightly compared to previous reports due to updates to historical population counts.

# COMMUNITY CHILD WELLNESS INDICATORS

The following section explores community characteristics — also referred to as social *determinants of health* — which impact the well-being of children and families in Sacramento County. Communities that are less empowered, have lower socioeconomic status, and have higher exposure to risk factors — including chronic stress and systemic racism — have worse health and shorter lives.<sup>i</sup>

**Understanding and actively addressing underlying community-level factors can improve health equity, reduce child death rates, and improve quality of life.**

According to the U.S. Department of Health and Human Services Healthy People 2030,<sup>ii</sup> social determinants of health can be categorized into five domains: economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context.

The sections below explore various social determinants of health which can inform trends related to the four leading causes of child death within Sacramento County and the BCLC Focus Area. This section also includes an exploration of the California Strong Start Index for infants born in Sacramento County and the BCLC focus area.

## Social Determinants of Health



Source: Healthy People 2030

**FIGURE 7 — COMMUNITY INDICATORS FOR SACRAMENTO COUNTY AND THE BCLC FOCUS AREA**



### Education Access and Quality

- Educational Attainment
- Chronic Absenteeism



### Economic Stability

- Children Living in Poverty
- Youth Homelessness



### Health Care Access and Quality

- Prenatal Care
- Preterm Births
- Low Birthweight



### Social and Community Context

- Child Maltreatment
- Foster Care
- Juvenile Felony Arrests
- Impacts of COVID-19



### Neighborhood and Built Environment

- Neighborhood Safety
- Food Safety

# POVERTY AND EDUCATION

## Children Living in Poverty

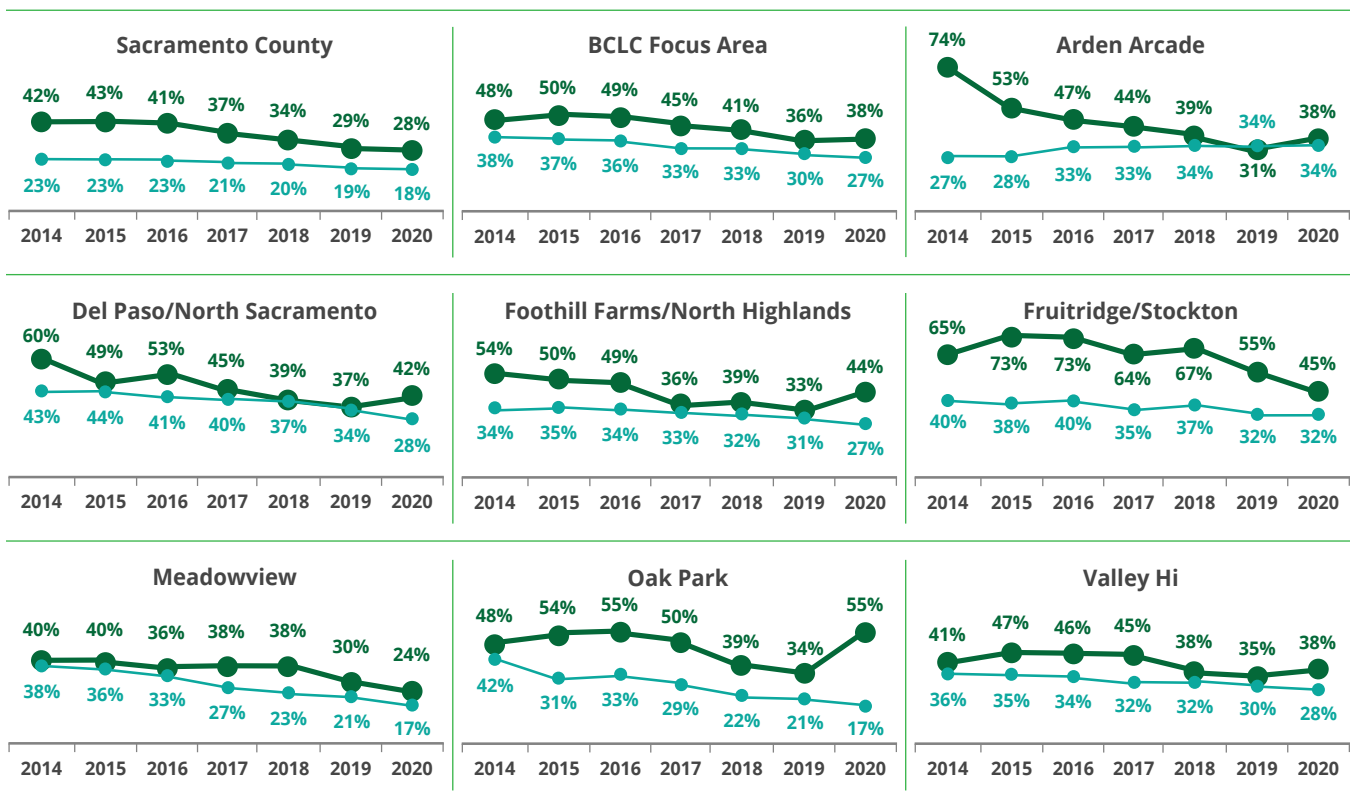
**Why this matters to BCLC:** According to the Casey Foundation, children of color are more likely to live in high-poverty communities, compared with white children. Living in poverty has detrimental effects on children’s health and well-being. Children living in high or concentrated-poverty have limited access to healthy foods, quality schooling, and medical care. Living in poverty also increases exposure to environmental hazards, financial hardships, chronic stress, and illness.<sup>iii</sup>

**Sacramento County:** Black/African American children in Sacramento County are more likely to live in poverty compared to all other groups. However, the proportion of Black/African American children (ages 0-17) living below the federal poverty level decreased from 42% in 2014 to 28% in 2020. In 2020, the federal poverty level for a family of four was \$26,200,<sup>iv</sup> while the median household income in Sacramento County was \$70,684.<sup>v</sup>

**BCLC Focus Area:** The BCLC focus area continues to have higher rates of children living below poverty level compared with the county, overall. The **rate of Black/African American children living in poverty in the BCLC focus area decreased 10 percentage points** between 2014 and 2020. Among the BCLC neighborhoods, Arden Arcade had the sharpest decline in Black/African American children living in poverty since 2014 (49% decrease). On the other hand, Black/African American children living in poverty increased 15% since 2014.

**FIGURE 8 — CHILDREN LIVING BELOW POVERTY LEVEL (0-17)**

Percentage of **Black/African American** and **All Other** children under 18 living below poverty level



Source: US Census American Community Survey, 5-year estimates (2014 through 2020).

## Educational Attainment

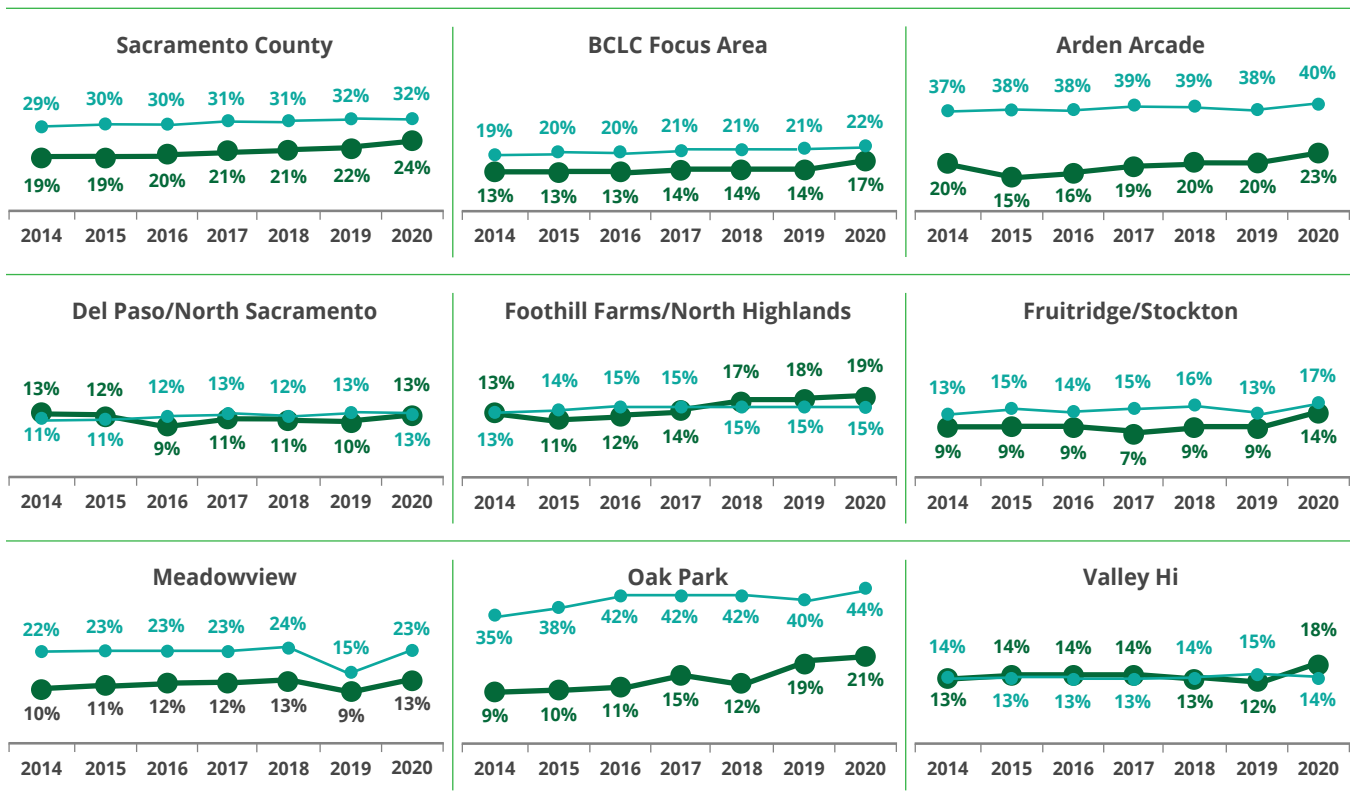
**Why this matters to BCLC:** For many, attaining a bachelor’s degree or higher can contribute to improved quality of life. Having a degree increases career and earnings opportunities. In fact, it is estimated that college graduates can earn about \$1 million more in their lifetime than non-graduates.<sup>vi</sup> Additionally, parents’ education attainment can impact their children’s academic success and achievement-oriented behaviors.<sup>vii</sup> While not measured here, adults that forego college can also benefit from technical and vocational education and training programs, which are more affordable, offer flexible scheduling, and have high rates of job placement in higher-paying jobs.<sup>viii, ix</sup>

**Sacramento County:** In 2020, about one-quarter (24%) of Black/African American residents in Sacramento County attained a bachelor’s degree or higher, an increase of five percentage points from 2014. However, compared with all other racial groups, Black/African Americans remain less likely to have a bachelor’s degree or higher.

**BCLC Focus Area:** In the BCLC Focus Area, Black/African Americans also have lower rates of attaining at least a bachelor’s degree compared with all other racial groups, though the rate has increased four percentage points between 2014 (13%) and 2020 (17%). Residents in Oak Park have the largest gap between Black/African Americans and all other racial groups with at least a bachelor’s degree (23 percentage point difference). However, **rates are increasing across all BCLC neighborhoods.**

**FIGURE 9 — BACHELOR’S DEGREE OR HIGHER**

Percentage of **Black/African American** and **All Other** adults 25-years and older with a bachelor’s degree or higher



Source: US Census American Community Survey, 5-year estimates (2014 through 2020).

## Youth Homelessness

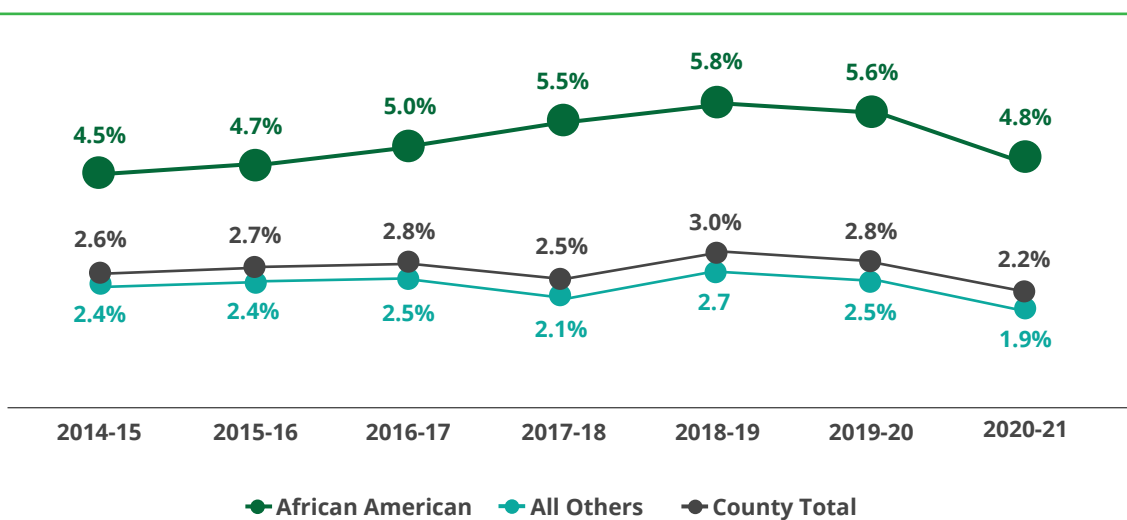
**Why this matters to BCLC:** Homelessness is among the Adverse Childhood Experiences (ACEs), or potentially traumatic events experienced before adulthood that can impact a person’s health, opportunities, and stability throughout their lifetime. Family conflict/dynamics, race/ethnicity, sexual orientation, sexual activity, problems in school, pregnancy, substance abuse, and foster care are key risk factors which increase the odds of youth homelessness. About half of Black/African American youth who run away do so before the age of 14. Youth homelessness has potentially vast negative consequences, including unmet basic needs, untreated mental health disorders, substance use, sexual exploitation, sexually transmitted diseases/HIV, physical victimization, and suicide.<sup>x, xi</sup>

**Sacramento County:** In the 2020-21 academic year, 2.2% of students enrolled in Sacramento County public schools were homeless, a 15% decrease from 2014-15 (2.6%). The proportion of Black/African American students that were homeless (4.8%) was 2.5 times greater than all other racial groups (1.9%). However, the proportion of Black/African American students that were homeless decreased for the second consecutive year, following consistent increases between 2014-15 and 2018-19. *However, it is important to note that homeless youth often have disruptions to their education, and this measure may be an incomplete representation of youth homelessness in Sacramento County.*

**BCLC Focus Area:** Neighborhood-level data for the BCLC focus area are not available.

**FIGURE 10 — HOMELESS YOUTH ENROLLED IN SACRAMENTO COUNTY PUBLIC SCHOOLS**

Percentage of **Black/African American** and **All Other** children enrolled in the public school system that are homeless



Source: California Department of Education, DataQuest.

Note: Public school enrollment is not a complete measure of youth homelessness as homeless individuals often experience significant disruptions to their education.



## Absenteeism

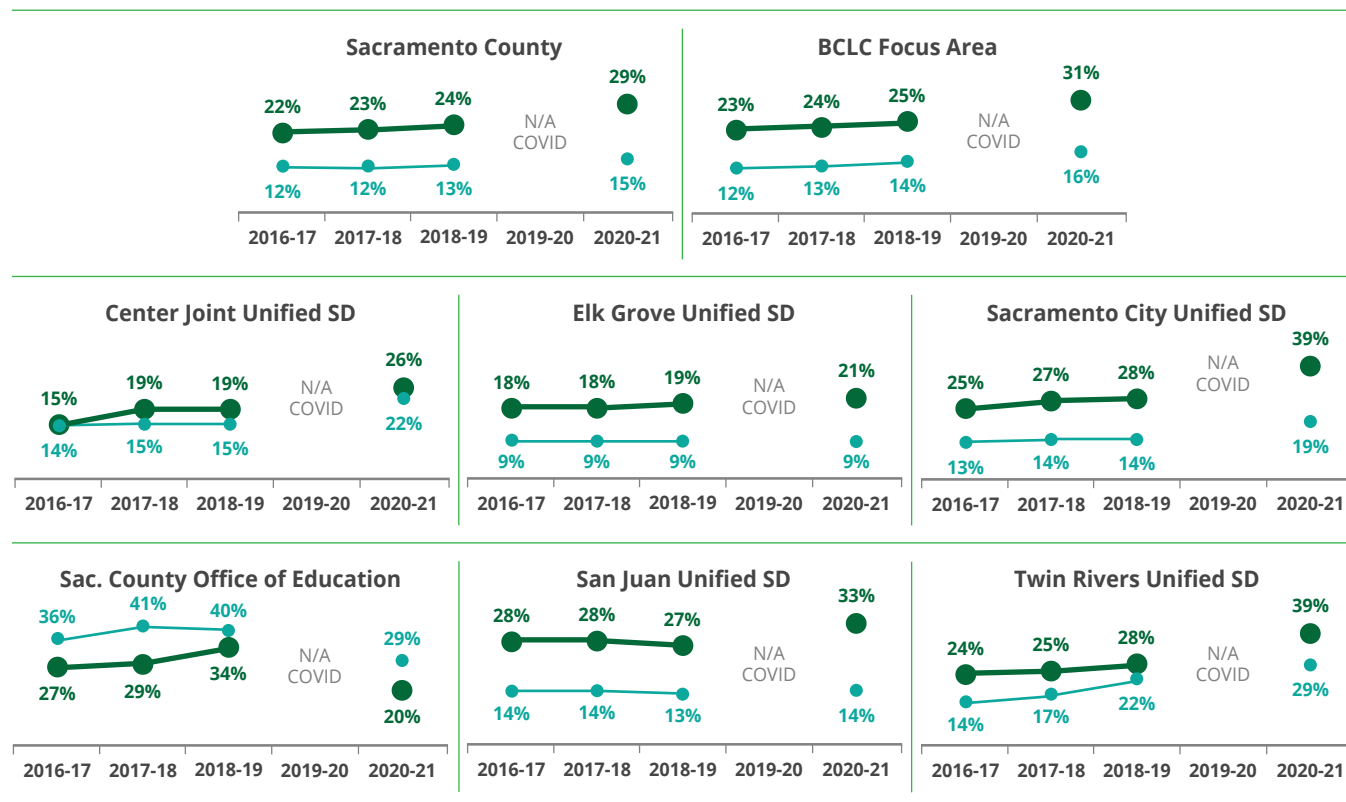
**Why this matters to BCLC:** Chronic absenteeism (missing at least 10% of school days) is associated with adverse academic and socioeconomic outcomes, such as increased likelihood of course failures, dropout, and lower achievement. Chronic absence may be a cause and/or an effect of poor student outcomes and socioeconomic challenges, ranging from student or family-specific factors (e.g., unstable housing, at home responsibilities) to school or community-specific factors (e.g., poor student-teacher interactions, geographic access to school).<sup>xii</sup>

**Sacramento County:** Countywide rates of chronic absenteeism are increasing in Sacramento County. Nearly twice as many Black/African American students (29%) were chronically absent in 2020-21, compared with all other racial groups (15%).

**BCLC Focus Area:** Chronic absenteeism rates in the BCLC focus area were comparable to countywide, with chronic absenteeism increasing for most districts in this focus area. More than one-third of Black/African American students in the Sacramento City Unified School District (39%) and Twin Rivers Unified School District (39%) were chronically absent in 2020-21, followed by 33% in the San Juan Unified School District.

**FIGURE 11 — CHRONICALLY ABSENT STUDENTS**

Percentage of **Black/African American** and **All Other** students who were determined to be chronically absent



Source: California Department of Education, DataQuest.

Note: Each school district serves zip codes spanning across multiple neighborhoods in the BCLC Focus Area.

# PREGNANCY AND BIRTH OUTCOMES

## Prenatal Care

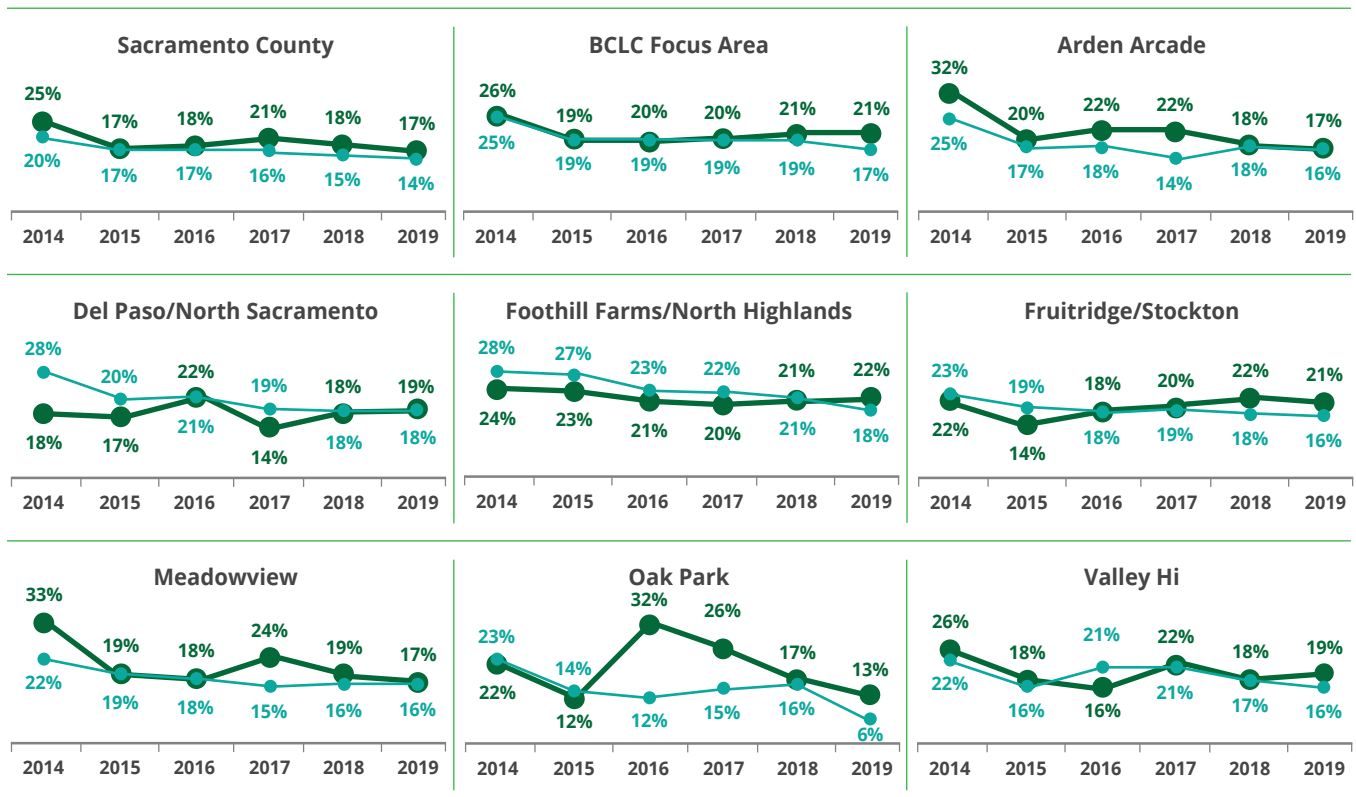
**Why this matters to BCLC:** According to Be Healthy Sacramento, babies whose mothers do not receive prenatal care have an increased likelihood of adverse birth outcomes or death, compared to those born to mothers who receive care. Beginning prenatal care in the first trimester allows for early identification and intervention of health problems or health-compromising behaviors that can be detrimental in the initial stages of fetal development. Access to (early) prenatal care can improve birth outcomes and reduce the likelihood of complications during pregnancy and childbirth.<sup>xiii</sup>

**Sacramento County:** The proportion of women who delayed or did not receive prenatal care is declining, suggesting that at least four out of five pregnant women in Sacramento County are receiving prenatal care during the first trimester. Countywide, Black/African American mothers are slightly more likely to delay or have no prenatal care, although the current disparity gap (20%) has decreased since 2014 (25%).

**BCLC Focus Area:** The proportion of Black/African American women in the BCLC focus area who did not initiate prenatal care in the first trimester is slightly higher than countywide rates. In 2019, about one in five Black/African American women the BCLC focus area did not initiate prenatal care in the first trimester.

**FIGURE 12 — PRENATAL CARE INITIATED AFTER THE FIRST TRIMESTER**

Percentage of **Black/African American** and **All Other** births with delayed (or no) prenatal care



Source: Data Request, Sacramento County Department of Health Services, Public Health Division, Epidemiology Department

## Preterm Births

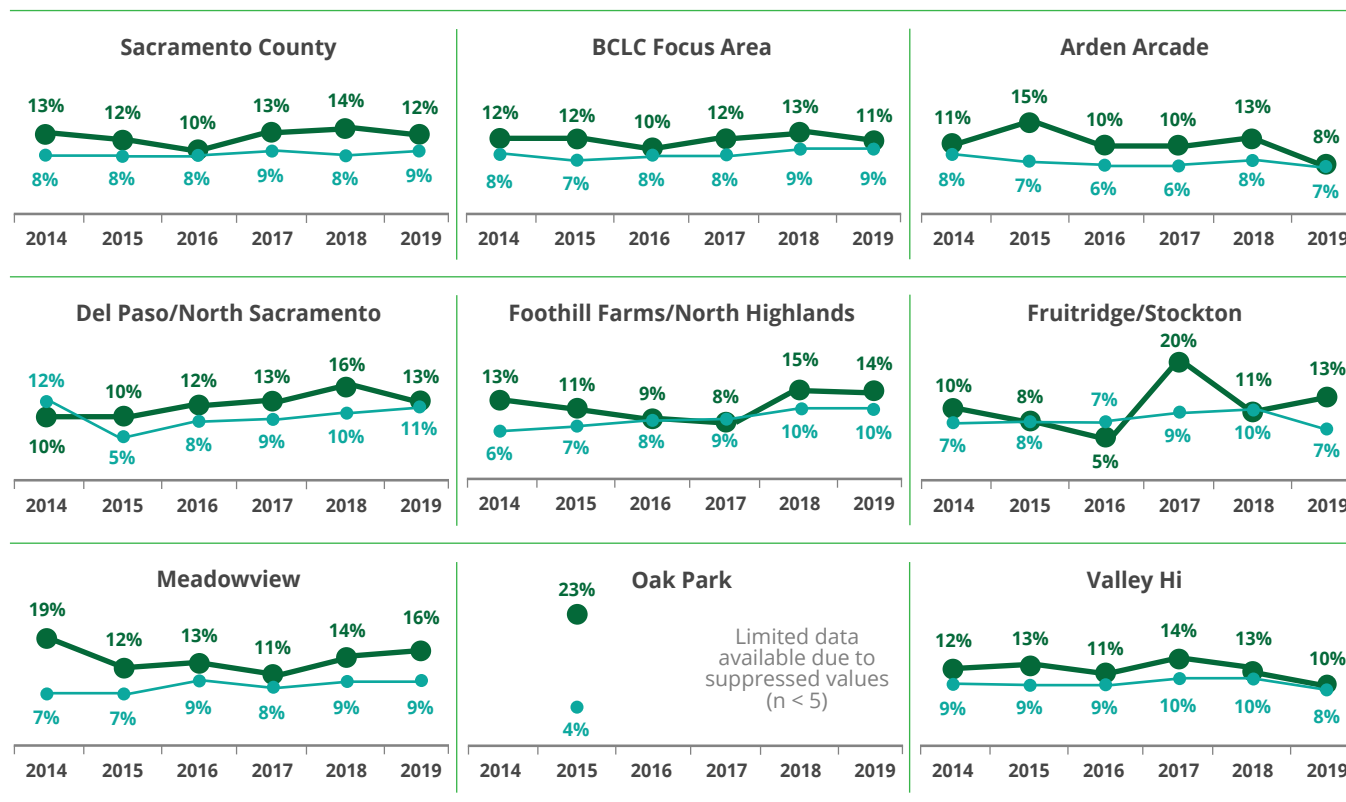
**Why this matters to BCLC:** Preterm births refer to babies born before 37 weeks of gestation. Preterm births are among the leading causes of newborn deaths<sup>xiv</sup> and increases the risk of immediate and long-term disabilities (e.g., developmental delays, vision or hearing problems). Additionally, there are racial disparities in the rate of preterm births. Across the United States, Black/African American women were about 50% more likely to deliver preterm in 2020, compared with White or Hispanic women.<sup>xv</sup>

**Sacramento County:** Between 2014 and 2019, about 9% of Sacramento County infants were born preterm. Each year, more Black/African American infants were born preterm compared to all other races. In 2019, the proportion of preterm Black/African American infants declined two percentage points compared with 2018.

**BCLC Focus Area:** Overall, the rate of preterm births in the BCLC focus area are similar to countywide rates. Rates varied between years and neighborhoods within the BCLC focus area. In 2019, the proportion of infants born preterm in Arden Arcade (8%) and Valley Hi (10%) were below the BCLC focus area overall rate (11%).

**FIGURE 13 — PRETERM BIRTHS**

Percentage of **Black/African American** and **All Other** births that were preterm



Source: Data Request, Sacramento County Department of Health Services, Public Health Division, Epidemiology Department

## Low Birthweight Births

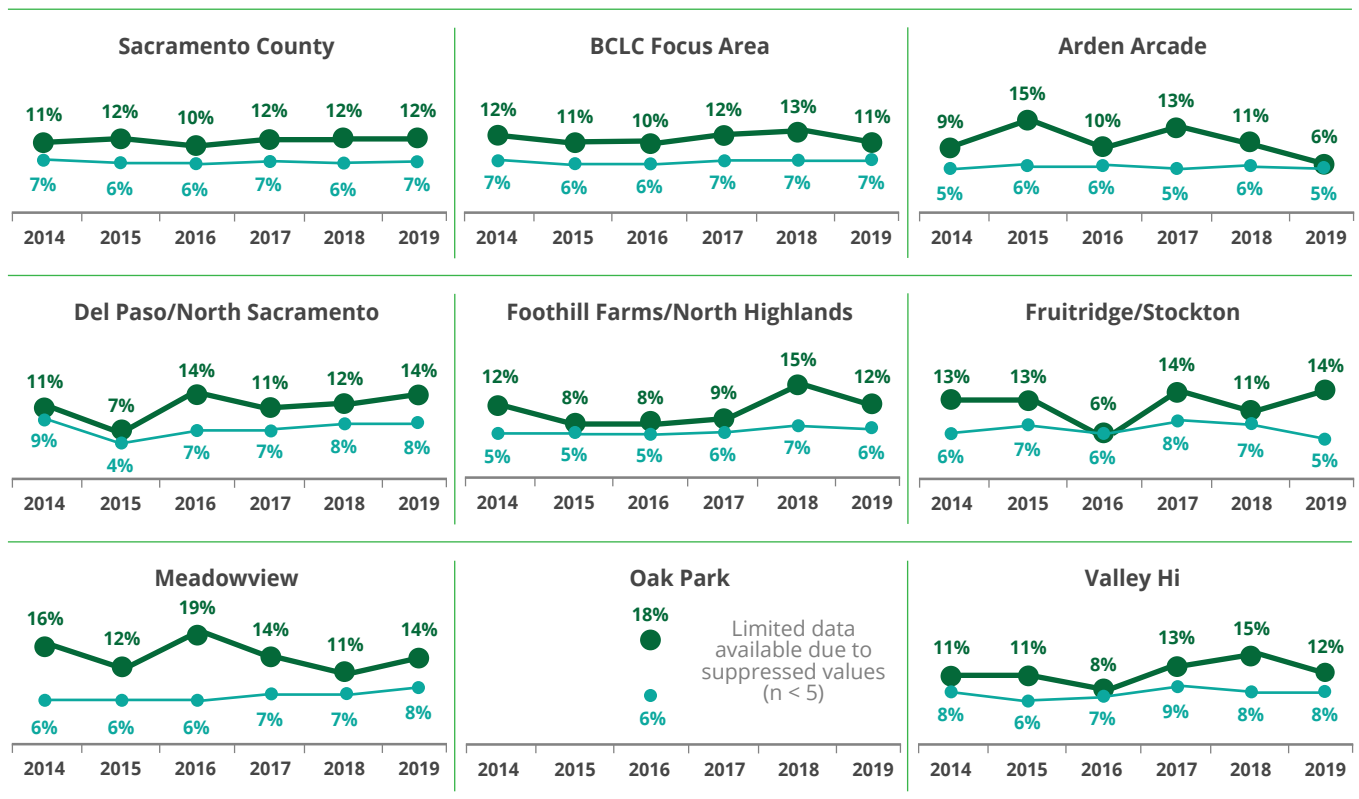
**Why this matters to BCLC:** Babies born with low birthweight (less than 5 pounds, 8 ounces) have an increased risk of health problems and are more at risk of sudden unexpected infant death. Preterm birth and fetal growth restrictions are the most common causes of low birthweight, followed by other health or environmental factors affecting the mother (e.g., chronic health conditions, exposure to air pollution). Additionally, racism disproportionately impacts the health and well-being of communities of color, which increases the risk of pregnancy complications.<sup>xvi</sup>

**Sacramento County:** Each year, the proportion of Black/African American infants born with a low birthweight is nearly twice the rate of all other races. In 2019, 12% of Black/African American infants had low birthweight, compared with 7% among all other racial groups.

**BCLC Focus Area:** The proportion of Black/African American babies born with low birthweight in the BCLC focus area is similar to the countywide rate. Within the BCLC Focus Area, Del Paso/North Sacramento, Fruitridge/Stockton, and Meadowview had the highest rate of low birthweight births in 2019 (14% among Black/African Americans), while Arden Arcade had the lowest rate among Black/African American infants born in 2019 (6% low birthweight).

**FIGURE 14 — LOW BIRTHWEIGHT**

Percentage of **Black/African American** and **All Other** births that were born below 2,500 grams (5 pounds 8 ounces)



Source: Data Request, Sacramento County Department of Health Services, Public Health Division, Epidemiology Department

# ASSET MAPPING: STRONG START INDEX

The California Strong Start Index (CASSI) measures twelve conditions into which children are born, summarized into four domains: *Family*, *Health*, *Service*, and *Financial* to establish an overall and standardized birth asset score. The following sections highlight the CASSI assets for Sacramento County and the BCLC focus area.

**On average, infants born in Sacramento County have nine out of twelve strong start assets at birth**, comparable with statewide rates. Black/African American children have a slightly lower average number of CASSI assets compared with countywide. However, **nearly two-thirds of (63.6%) of Black/African American babies born in Sacramento County between 2016 and 2019 had positive maternal and child health indicators**,<sup>3</sup> comparable to the countywide rate (66.7%).<sup>xvii</sup>

## California Strong Start Index Asset Measures

### Family

- ▶ Legal parentage established at birth
- ▶ Born to non-teen parents
- ▶ Born to parents with at least a HS diploma

### Health

- ▶ Healthy birthweight
- ▶ Absence of congenital anomalies, abnormalities, or complications at birth
- ▶ Absence of transmissible (mother-to-child) infections

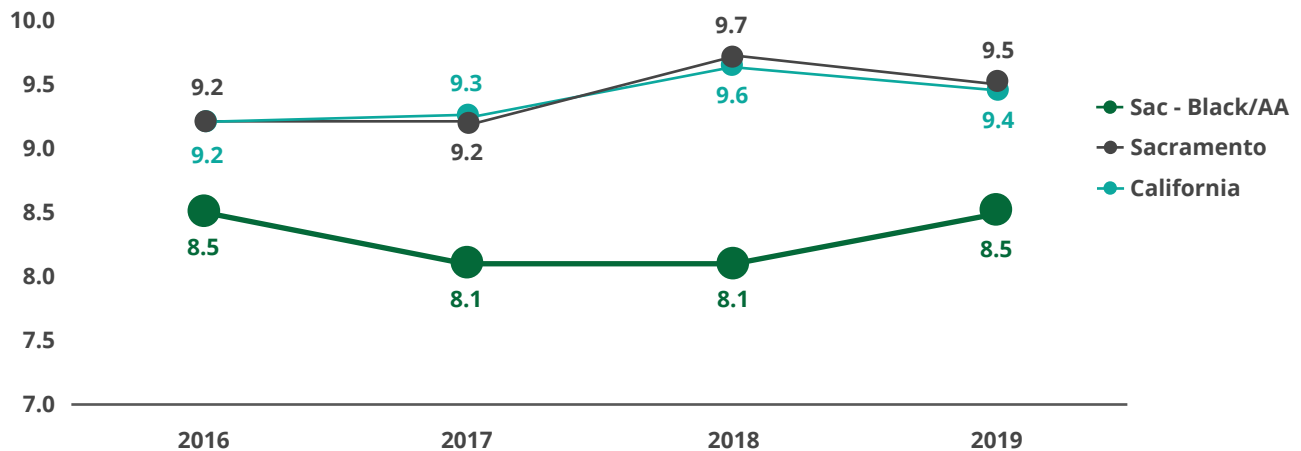
### Service

- ▶ Access to and receipt of timely prenatal care
- ▶ Receipt of nutritional services (WIC) if eligible
- ▶ Hospital with high percentage of births with timely prenatal care

### Financial

- ▶ Ability to afford and access healthcare
- ▶ Born to a parent with a college degree
- ▶ Born to parents with employment history

FIGURE 15 — AVERAGE NUMBER OF STRONG START ASSETS, SACRAMENTO COUNTY AND STATEWIDE



Source: California Strong Start Index

<sup>3</sup> Including timely prenatal care, normal gestational age, and healthy birthweight

# CHILD ABUSE, MALTREATMENT & FOSTER CARE

## Child Abuse and Maltreatment

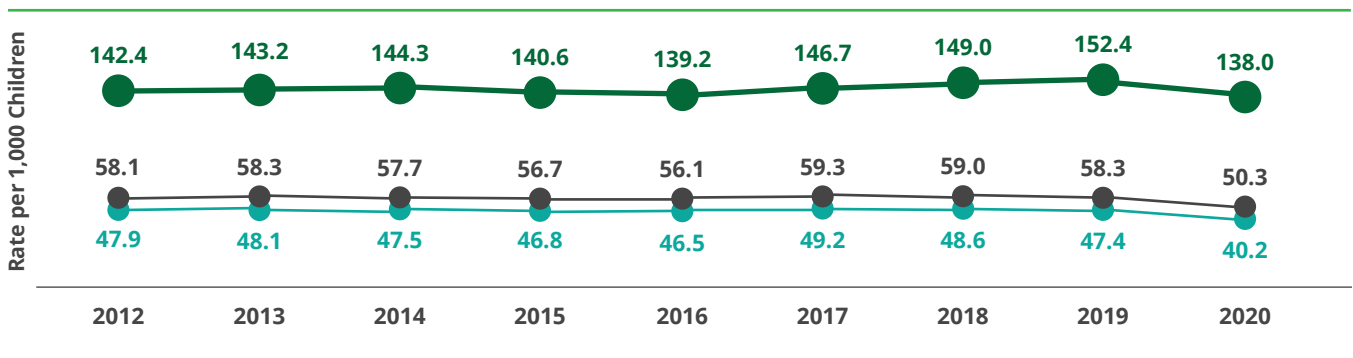
**Why this matters to BCLC:** Child abuse and maltreatment are among the Adverse Childhood Experiences (ACEs), potentially traumatic events that can have lasting physical, psychological, and intellectual impacts on individuals. Abuse and neglect can be damaging to a child’s sense of self, relationships, and functioning at home, work, and school.<sup>xviii</sup> Substantiated child abuse allegations are an indication of increased risk of fatal child maltreatment, one of the leading causes of death which disproportionately affect Black/African American children in Sacramento County.

**Sacramento County:** Countywide CPS allegation rates have remained relatively stable, although lower rates in 2020 may be a result of the COVID-19 pandemic impacting children’s access to mandated reporters. The rate of child abuse allegations is 3.4 times greater for Black/African Americans (138.0 per 1,000 children) compared with all other races (40.2). Similarly, substantiated child abuse allegations among Black/African American children (21.7 per 1,000) are 3.9 times greater than all other races (5.6). However, substantiated allegations among Black/African American children have declined 15% since 2012 (25.6 per 1,000).

**BCLC Focus Area:** Neighborhood-level data for the BCLC focus area are not available.

**FIGURE 16 — RATE OF CHILD ABUSE ALLEGATIONS (SUBSTANTIATED OR UNSUBSTANTIATED)**

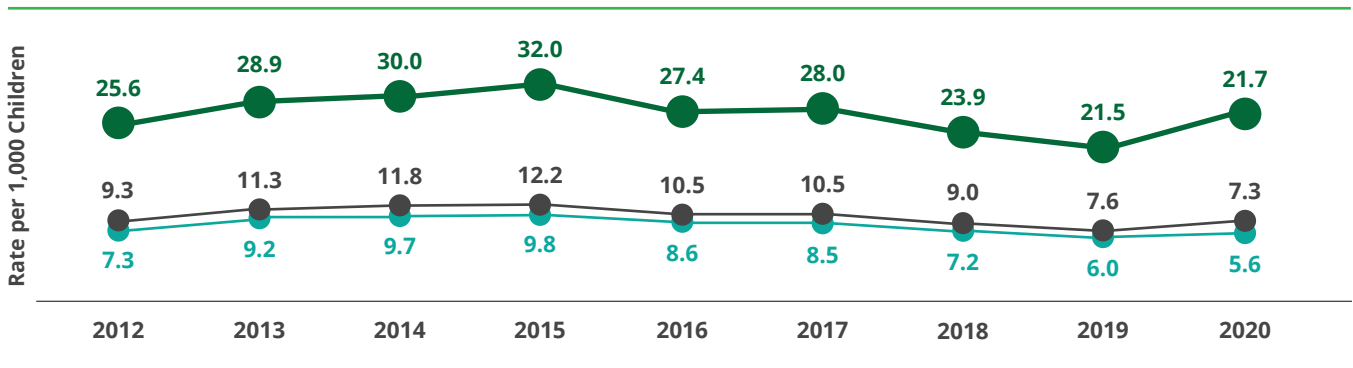
CPS Allegation Rate of **Black/African American, All Other** children, and **County Total**



Source: California Child Welfare Indicators Project, University of California Berkeley

**FIGURE 17 — RATE OF SUBSTANTIATED CPS ALLEGATIONS**

CPS Allegation Rate of **Black/African American, All Other** children, and **County Total**



Source: California Child Welfare Indicators Project, University of California Berkeley

## Foster Care

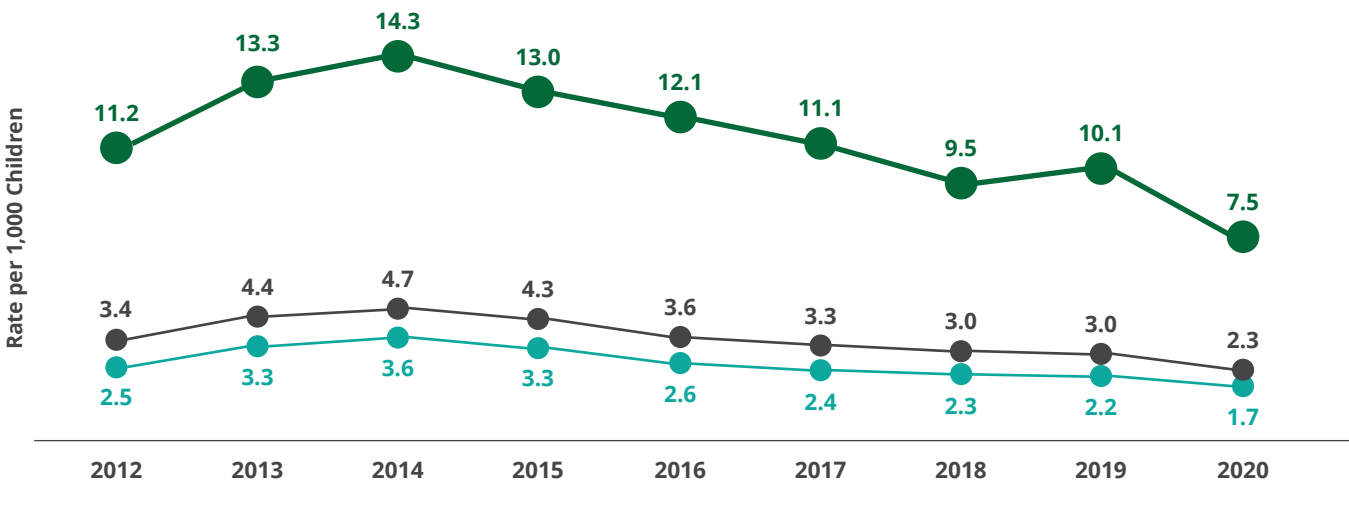
**Why this matters to BCLC:** Children and youth who cannot safely remain at home and must enter foster care have likely experienced trauma such as abuse and/or neglect. These children are at a higher risk of substance abuse, delinquency, unstable housing/homelessness, inadequate education/job training and employment, as well as physical, behavioral, and mental health problems.<sup>xix</sup> Black/African American children are disproportionately represented in foster care nationwide (23%),<sup>4</sup> are more likely to experience multiple placements, less likely to be reunited with their families, and more likely to experience poor social and behavioral outcomes.<sup>xx</sup>

**Sacramento County:** Countywide rates of foster care entry have been steadily declining since a peak of 4.7 per 1,000 children in 2014. In 2020, foster care entry rates were at their lowest rates for all groups, although COVID-19 stay-at-home orders and school closures resulted in a sharp drop in child abuse/maltreatment reports nationwide.<sup>xxi</sup> The 2020 foster care entry rate for Black/African American children in Sacramento County was 7.5 per 1,000 children — a 33% decrease since 2012. Foster care entry rates remain 4.4 times greater for Black/African American children compared to all other races.

**BCLC Focus Area:** Neighborhood-level data for the BCLC focus area are not available.

**FIGURE 18 — FOSTER CARE ENTRY RATES**

Foster Care Entry Rate of **Black/African American** and **All Other** children with **County Total**



Source: California Child Welfare Indicators Project, University of California Berkeley

<sup>4</sup> Non-Hispanic Black/African American children comprise 22.8% of children in foster care, while Non-Hispanic Black/African American children comprise 13.7% of the total child population.

# JUVENILE FELONY ARRESTS

## Juvenile Felony Arrests

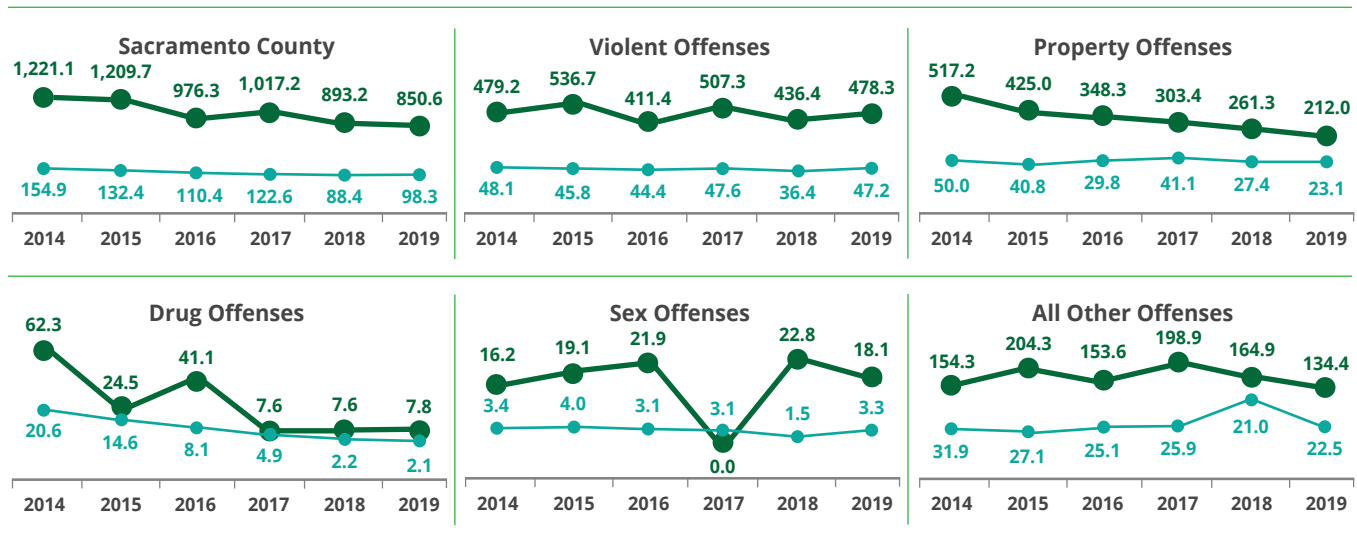
**Why this matters to BCLC:** Youth who are detained or incarcerated have a higher risk of negative and long-term consequences such as mental health problems, school dropout, employment problems, and rearrests. Many youth enter the juvenile justice system with existing physical or psychological needs and/or adverse/traumatic childhood experiences. Children of color are disproportionately represented in the justice system, including disproportionate rates of arrest. Communities with high rates of youth incarceration also have higher rates of poverty and less access to resources and basic needs (e.g., inadequate housing, health care).<sup>xxii</sup>

**Sacramento County:** The overall rate of juvenile felony arrests in Sacramento County has been steadily declining for Black/African American youth and all other races. However, 2019 juvenile felony arrests were about 8.7 times greater for Black/African American youth (850.6 per 100,000 children) compared with all other races (98.3 per 100,000). Among Black/African American youth, arrests for property offenses and drug offenses, and other offenses not specified have been steadily declining. In 2019, felony arrests for violent offenses were ten times greater for Black/African American youth, compared with all other races.

**BCLC Focus Area:** Neighborhood-level data for the BCLC focus area are not available.

**FIGURE 19 — JUVENILE FELONY ARRESTS**

*Black/African American and All Other juveniles with a felony arrest (rate per 100,000 children)*



Source: California Department of Justice, Crime Statistics: Arrests



# NEIGHBORHOOD SAFETY AND FOOD SECURITY

## Neighborhood Characteristics

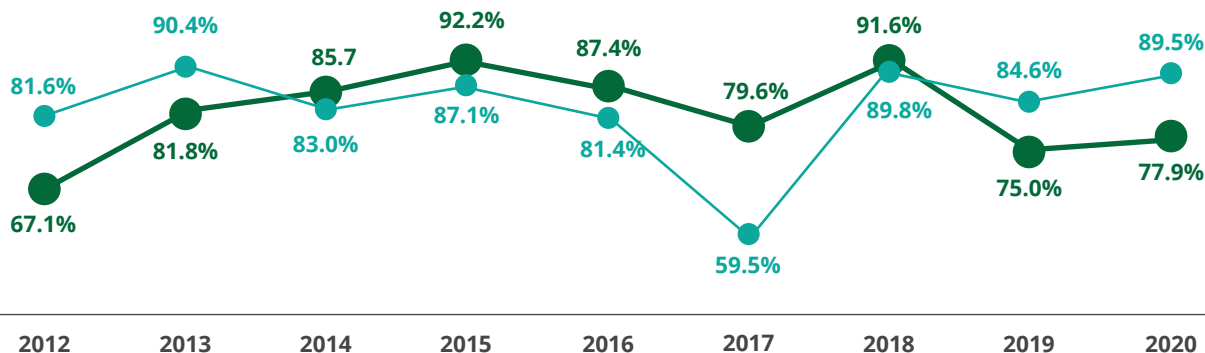
**Why this matters to BCLC:** Various forms of neighborhood and interpersonal violence (e.g., child abuse, domestic violence, gun violence) are leading causes of injury, disability, and premature death. Violence and fear of violence increase the risk of poor health outcomes and act as a barriers to healthy behaviors, economic development, and community support.<sup>xxiii</sup>

**Sacramento County:** The proportion of Sacramento County participants in the California Health Interview Survey feeling safe in their neighborhood fluctuated between 2012 and 2020. In 2020, about 78% of Black/African Americans in Sacramento County felt safe in their neighborhood all or most of the time, about 12 percentage points less than all other groups combined. The proportion of Black/African Americans feeling safe all or most of the time increased 16% since 2012.

**BCLC Focus Area:** Neighborhood-level data for the BCLC focus area are not available.

**FIGURE 20 — FEELING SAFE IN NEIGHBORHOOD**

Percentage of **Black/African American** and **All Other** Adults who feel safe in their neighborhood all or most of the time.



Source: California Health Interview Survey (includes statistically unstable estimates)



## Food Security

**Why this matters to BCLC:** Food security is an ongoing challenge linked to global, community, and individual-level factors. Communities of color experience higher rates of poverty and food insecurity as a result of structural inequities and racism.<sup>xxiv</sup> According to Feeding America, one in four Black children are food insecure in the US. Food insecurity has serious implications for children’s physical and mental health, academic achievement, and future economic success.<sup>xxv</sup>

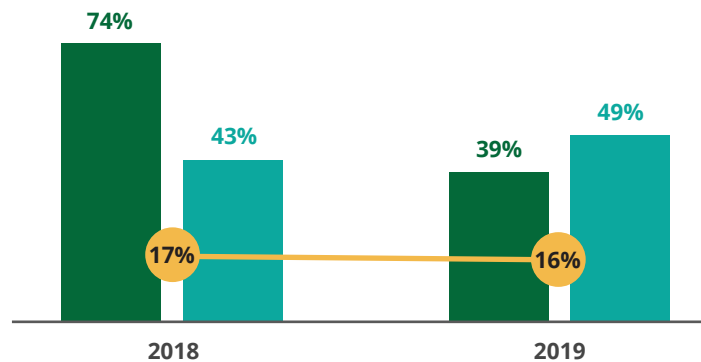
**Sacramento County:** Between 2018 and 2019, the percentage of Black/African American adults who experienced food insecurity (according to the California Health Interview Survey or CHIS) decreased significantly, while food insecurity increased slightly for all other racial groups. The countywide rate of child food insecurity (according to Feeding America) remained stable between 2018 (17% food insecure) and 2019 (16%).

Note, this significant decrease among Black/African Americans within Sacramento County may be a result of a) increased utilization of community resources, b) statistically unstable estimates among Black/African American CHIS respondents, and/or c) a reflection of nationwide trends. According to the US Department of Agriculture,<sup>xxvi</sup> prior to COVID-19, nationwide food insecurity in 2019 (10.5% of households) significantly declined from 2018 (11.1%). The 2019 rate of food insecurity was also the lowest since prior to the 2008 recession.<sup>5</sup>

**BCLC Focus Area:** Neighborhood-level data for the BCLC focus area are not available.

### FIGURE 21 — FOOD INSECURITY RATES, ADULT AND CHILDREN

Percentage of **Black/African American** and **All Other** Adults experiencing food insecurity, with Countywide **Child Food Insecurity** rate.



Source: California Health Interview Survey (Adult Food Insecurity); Feeding America (Child Food Insecurity). Adult rates of food insecurity were unavailable for 2020; and due to methodological changes, historical rates of food insecurity among children were unavailable.

<sup>5</sup> Due to methodological differences among USDA nationwide estimates and countywide estimates using CHIS, comparisons between measures are not discussed here. Use caution in comparing estimates.

# COVID-19 PANDEMIC

## Impacts of COVID-19

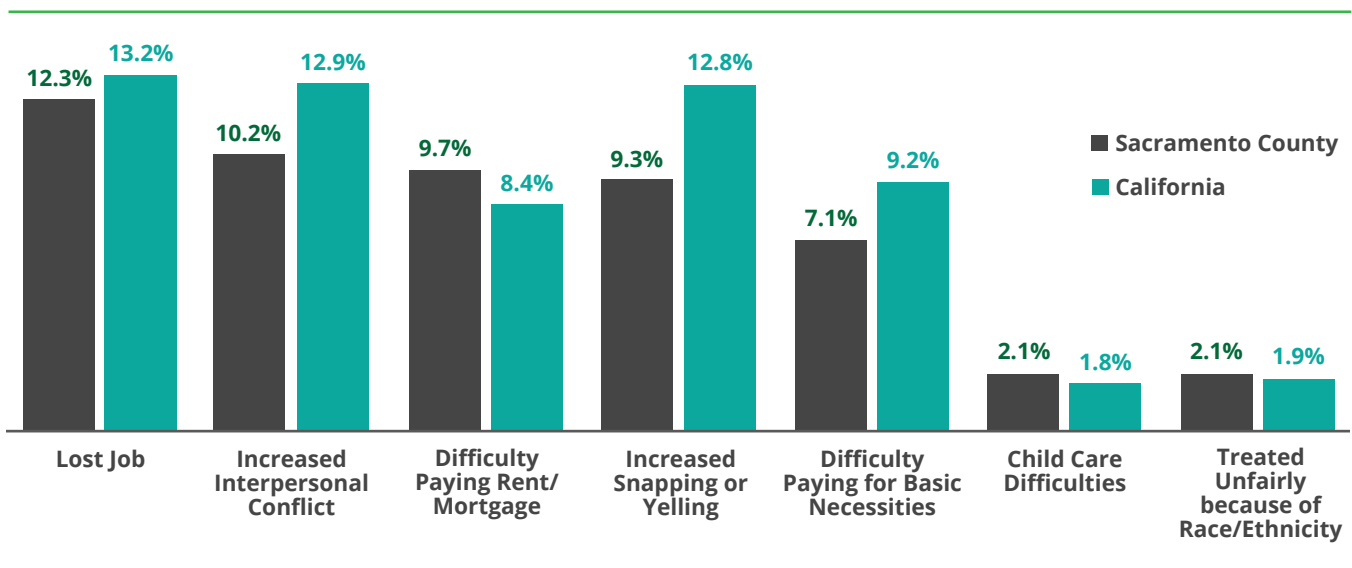
**Why this matters to BCLC:** The COVID-19 pandemic is a universal crisis, with immediate and long-term impacts on children and families. Children’s lives are affected by the emotional, socio-economic, and racial impacts of the pandemic. For example, job loss and global recessions increased the number of households in poverty, intensified hardships, and created dire situations for those with less access to social protection.<sup>xxvii</sup>

**Sacramento County:** In 2020, about one in ten Sacramento County residents participating in the California Health Interview Survey lost their job (12.3%), experienced a household with increased interpersonal conflict (10.2%), and/or had difficulty paying their rent/mortgage (9.7%) due to COVID-19.

While data by race/ethnicity are not available for the COVID-19 measures presented below, data consistently indicate the pandemic’s disproportionate impact on communities of color. These communities are more likely to experience health disparities exacerbating the widespread impact of the pandemic. Structural racism, discrimination, and social determinants of health (e.g., lower socioeconomic status, hazardous environments, less access to health care/COVID-19 testing) “continuously undermine the health and well-being of these communities.”<sup>xxviii</sup> In particular, Black/African Americans disproportionately experience structural racism/discrimination, poverty (e.g., homelessness, low wage jobs, imprisonment), residential segregation, and the underlying health conditions resulting in poorer outcomes and exacerbated impact during the pandemic.<sup>xxix</sup>

**BCLC Focus Area:** Neighborhood-level data for the BCLC focus area are not available.

**FIGURE 22 — IMPACT OF COVID-19 ON SACRAMENTO COUNTY FAMILIES (2020)**



Source: California Health Interview Survey, 2020. Countywide data for Black/African Americans suppressed/not available.

**Change will not come if we wait for  
some other time. We are the ones we've  
been waiting for. We are the change  
that we seek.**

— President Barack Obama



## REFERENCES AND ENDNOTES

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## PHOTO CREDITS

- Black Child Legacy Campaign photos that feature: 1) two mothers standing with their children, 2) two basketball players, 3) Dr. Martin Luther King, Jr. Day march, 4) teenagers golfing, and 5) BCLC steering committee are provided by Sierra Health Foundation.
- All additional stock photos posed by models are provided by Adobe Stock.



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