

# The Childhood Opportunity Gap

*Understanding It. Measuring It. Closing It.*

CHHIRJ's work is guided by a basic American aspiration. It is the hope that people who live in the United States – no matter where they come from, where they live or their race or ethnicity – will have fair chances to fulfill their potentials. CHHIRJ raises awareness about and advances policies and practices to close the “Childhood Opportunity Gap.” The term is shorthand for a powerful, precise way to understand, measure and devise remedies for the vast and growing inequalities between children of different racial and economic groups and between neighborhoods.

## What is the Childhood Opportunity Gap?

We define the **Childhood Opportunity Gap** as *the difference between the life chances afforded children who live in high poverty neighborhoods and attend high poverty schools vs. the life chances afforded children who live in low-poverty neighborhoods and attend low-poverty schools.*

Scientists, doctors, educators and other experts point to a constellation of conditions that have an impact on learning, educational quality and physical and mental health. These conditions include (but are not limited to) exposure to violence and crime, high levels of racial segregation, concentrated poverty, stress, lack of recreation opportunities, poor transportation infrastructure that limits access to employment, and high prevalence of fast food. The degree to which a child experiences these conditions depends largely upon whether or not he lives in a high poverty neighborhood and attends a high poverty school.

A growing body of work in the social determinants of health field suggests that residential racial and ethnic segregation itself — in part the result of racial discrimination — sits at the beginning of a long, twisted chain of events, ending with vastly reduced opportunities.

Most recently, Dr. Dolores Acevedo-Garcia and her colleagues have built a considerable body of evidence that links residential segregation to racial inequalities in health.<sup>1</sup> Segregation constrains socioeconomic advancement by limiting job opportunities; decreasing the value of home ownership; and increasing exposure to crime and violence, unhealthy fast food, inferior public services and low quality health facilities.<sup>2</sup>

“Residential segregation,” researchers write in a 2008 study, “is at the root of racial and ethnic disparities in access to opportunity neighborhoods.”<sup>3</sup>

Research also demonstrates that, in particular combinations, these conditions determine whether or not schools will function smoothly, whether or not teachers can do their jobs well and whether or not young people will have the opportunity to develop their potentials in the classroom and beyond.

**Closing the Childhood Opportunity Gap requires a wide range of interlocking solutions. Ideally, remedies would combat the symptoms of concentrated poverty and work to reduce racial and socioeconomic isolation.**

## Who is Affected?

**Poor children of color are most likely to attend schools and live in neighborhoods of concentrated disadvantage where the conditions that give rise to the Childhood Opportunity Gap are common.**

In 2007, 64 percent of African American students and 63 percent of Latino students attended high-poverty schools. Only 21 percent of white children attended such schools.<sup>4</sup>

Even poor white children are far less likely than poor children of color to experience conditions that contribute to the Childhood Opportunity Gap. The typical poor white child lives in a neighborhood where 13 percent of his neighbors are poor. The typical poor African American and the typical poor Latino child live in neighborhoods where 30 percent of his neighbors

are poor.<sup>4</sup> Meanwhile, the decline in concentrated poverty during the healthy economy of the 1990s is reversing. Increasing numbers of people are living in high-poverty neighborhoods.<sup>5</sup>

January 2010

A CHHIRJ Policy Brief

## Developing a Wide Range of Interlocking Solutions

### How is the Opportunity Gap Different from the Achievement Gap?

The “Achievement Gap” — test score differences between white children and children of color — deserves urgent, careful attention. But we have long known that differences in learning outcomes are symptoms of larger racial and economic inequalities that have widened along with increasing gaps in educational outcomes. Because this gap is not created by schools alone, it is unrealistic to expect that educators alone can eliminate differences in learning outcomes. It is crucial that we locate the source of complex social problems more honestly so that we can develop solutions to attack all the sources of inequality. Solutions need to come from a variety of sectors — housing, transportation, employment, health, and education.

### What Does the Childhood Opportunity Gap Look Like?

**Evidence of the Childhood Opportunity Gap shows up in every sector of life.**

Rather than listing a depressing array of statistics here, this rendering of inequities in Oakland, California reflects what we find across the nation:

“Compared with a White child in the Oakland Hills, an African American born in West Oakland is 1.5 times more likely to be born premature or low birth weight, seven times more likely to be born into poverty, twice as likely to live in a home that is rented, and four times more likely to have parents with only a high school education or less. As a toddler, this child is 2.5 times more likely to be behind in vaccinations. By fourth grade, this child is four times less likely to read at grade level and is likely to live in a neighborhood with twice the concentration of liquor stores and more fast food outlets. Ultimately, this adolescent is 5.6 times more likely to drop out of school and less likely to attend a four-year college than a White adolescent. As an adult, he will be five times more likely to be hospitalized for diabetes, twice as likely to be hospitalized for and to die of heart disease, three times more likely to die of stroke, and twice as likely to die of cancer. Born in West Oakland, this person can expect to die almost 15 years earlier than a White person born in the Oakland Hills.”<sup>6</sup>

### Can I Measure the Childhood Opportunity Gap?

The nature and size of inequalities differs from region to region and from state to state. In measuring the Childhood Opportunity Gap in your area, be sure to choose a wide enough lens. In other words, measure differences between an urban neighborhood and a suburban neighborhood, not merely between census tracts in one municipality. Choose a lot of variables to examine, such as: school performance, health outcomes, housing conditions and transportation infrastructure. Examine what municipalities have in common and how conditions have changed over time. More and more “suburbs” are confronting challenges we traditionally associate with the city. As Professor Myron Orfield has shown, these commonalities can engender powerful coalitions that win political attention and resources to reduce the Childhood Opportunity Gap.<sup>7</sup> Using a system called “opportunity mapping,” the Kirwan Institute for the Study of Race and Ethnicity evaluates metropolitan areas with data from education, employment, transportation, child care and health care.<sup>8</sup>

### What Are Some Strategies for Closing the Childhood Opportunity Gap?

**1** Coordinate social services so families and children can receive assistance in overcoming mental and physical health challenges associated with high-poverty neighborhoods. Provide young people enrichment programs after school and in summer that include the opportunity both for neighborhood improvement and for work and education enrichment outside their neighborhoods.

**2** Reduce the share of people who live in high poverty neighborhoods. Support development of “mobility” programs that allow people to move from high-poverty neighborhoods and schools and that include counseling for potential movers. Enforce anti-discrimination laws in housing. Build more affordable housing in higher income communities.

**3** Support activities, events, and efforts in neighborhoods of concentrated disadvantage that bring neighbors together to meet and collaborate on initiatives to create healthier environments.

**4** Allow poor children in “low opportunity” neighborhoods the choice to attend low poverty schools that are not overwhelmed with challenges manifest in high-poverty neighborhoods. Charter schools should enroll a diverse student body from a region, rather than one district. Coordinate public transportation so families can take advantage of schooling opportunities beyond their neighborhoods.

**5** Local and state governments, foundations, and private business should provide funds to assist efforts to increase access to healthier food outlets, recreational activities and stress reduction within communities of concentrated disadvantage.

<sup>1</sup> Dolores Acevedo-Garcia & Theresa Osypuk, *Impacts of Housing and Neighborhoods on Health: Pathways, Racial/Ethnic Disparities, and Policy Directions*, in SEGREGATION: THE RISING COSTS FOR AMERICA 197 (James Carr & Nandinee Kutty eds. 2008); David Williams & Chiquita Collins, *Racial Residential Segregation: A Fundamental Cause of Racial Disparities in Health*, 116 PUB. HEALTH REP. 404 (2001); Dolores Acevedo-Garcia et al., *Future Directions in Residential Segregation and Health Research: A Multilevel Approach*, 93 AM. J. OF PUB. HEALTH 215 (2003).

<sup>2</sup> Dolores Acevedo-Garcia et al., *Toward a Policy-Relevant Analysis of Geographic and Racial/Ethnic Disparities in Child Health*, 27 HEALTH AFF. 321, 325 (2008) [hereinafter “Policy-Relevant Analysis”].

<sup>3</sup> NATIONAL CENTER FOR EDUCATION STATISTICS, U.S. DEPARTMENT OF EDUCATION, THE CONDITION OF EDUCATION 2009, 196 (2009) (see Table A-25-1), available at <http://nces.ed.gov/pub2009/2009081.pdf>. “High poverty” is defined here as a school where at least half the students came from families with incomes so low that they qualify for the government’s free and reduced lunch program.

<sup>4</sup> Acevedo-Garcia et al., *Policy-Relevant Analysis*, *supra* note 2.

<sup>5</sup> ELIZABETH KNEIBERNE & ALAN BERUBE, METROPOLITAN POLICY PROGRAM AT BROOKINGS, REVERSAL OF FORTUNE: A NEW LOOK AT CONCENTRATED POVERTY IN THE 2000S (2008), available at [http://www.brookings.edu/~media/Files/rc/papers/2008/08\\_concentrated\\_poverty\\_kneibone/concentrated\\_poverty.pdf](http://www.brookings.edu/~media/Files/rc/papers/2008/08_concentrated_poverty_kneibone/concentrated_poverty.pdf).

<sup>6</sup> ALAMEDA COUNTY PUBLIC HEALTH DEPARTMENT, LIFE AND DEATH FROM UNNATURAL CAUSES: HEALTH AND SOCIAL EQUITY IN ALAMEDA COUNTY, viii (2008), available at [http://www.acphd.org/AXBYCZ/Admin/DataReports/00\\_2008\\_full\\_report.pdf](http://www.acphd.org/AXBYCZ/Admin/DataReports/00_2008_full_report.pdf).

<sup>7</sup> See, e.g., MYRON ORFIELD & BARIS GUNUS-DAWES, METROPOLITAN PLANNING ORGANIZATION REFORM: A NATIONAL AGENDA FOR REFORMING METROPOLITAN GOVERNANCE (2009), available at [http://www.irpumn.org/uls/resources/projects/MPO\\_Reform\\_A\\_National\\_Agenda.pdf](http://www.irpumn.org/uls/resources/projects/MPO_Reform_A_National_Agenda.pdf).

<sup>8</sup> To learn more about opportunity mapping, see <http://kirwaninstitute.org/research/gismapping/opportunity-mapping>.

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CHHIRJ is dedicated to breaking down the structural barriers to social, political and economic membership for people who live in the United States. We place emphasis upon closing the opportunity gap for children who live in neighborhoods of concentrated disadvantage, redirecting the pipeline that funnels too many children of color into prison, and creating pathways home for people returning to their communities after incarceration. We produce briefs and presentations for wide audiences, issue reports and testimony and convene and connect diverse groups of people engaged in social justice work.

CHHIRJ wishes to acknowledge the generous support of the Charles Stewart Mott Foundation and the California Endowment.