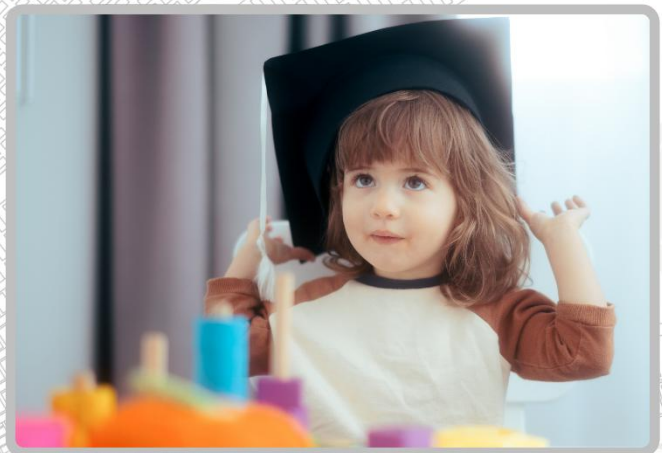
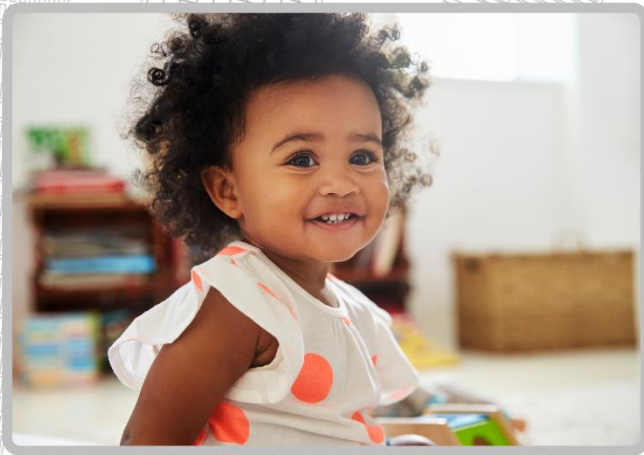


GROWING UP IN HOUSTON

Assessing the Quality of Life of Our Children



children
at Risk

18TH
EDITION

GROWING UP IN HOUSTON

Assessing the Quality of Life of Our Children

ACKNOWLEDGEMENTS

Growing Up in Houston reflects the sustained efforts of a dedicated team and builds upon the research and advocacy of previous editions of this report. CHILDREN AT RISK gratefully acknowledges the generous support of our funders and partners, including the United Way for Greater Houston, whose continued collaboration makes this work possible. We also extend our appreciation to the many donors whose contributions sustain our research and advocacy on behalf of Houston's children.

We hope this report serves as a valuable resource for policymakers, practitioners, and community stakeholders committed to improving outcomes for children and families across the Houston region.

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UNITED WAY
Greater Houston

MESSAGE FROM THE CEO

Understanding how children are faring in our community begins with data—but it doesn't end there. Data must be translated into insight, and insight into action. That is the purpose of Growing Up in Houston. It is my honor, as President and CEO of CHILDREN AT RISK, to introduce the eighteenth edition of *Growing Up in Houston: Assessing the Quality of Life of Our Children* (GUIH).

This report is the result of ongoing collaboration with the United Way of Greater Houston and many other committed partners. Together, we aim to provide a clear and comprehensive picture of the conditions shaping children's lives across Harris County. By grounding conversations in evidence, this publication helps leaders, advocates, and communities identify where progress is happening—and where it is not.

The story that emerges this year is one of both growth and strain. Harris County continues to expand rapidly and grow more diverse, bringing new energy and opportunity to the region. At the same time, many families are navigating increasing pressures. Too many children still live in poverty, struggle to access consistent health care, or lack reliable access to nutritious food and stable housing. In many cases, the systems designed to support families have not kept pace with where and how communities are growing.

We are also seeing shifts that require renewed attention. Children's mental health challenges are more visible and more urgent. Preventive care, including vaccinations and prenatal services, is unevenly accessed. And while there are encouraging signs—such as strong high school graduation rates and steady academic performance—these gains are not shared equally across all communities.

What this report makes clear is that improving outcomes for children will require intentional, coordinated effort. Solutions cannot exist in silos. Progress depends on aligning policies and investments across education, health, housing, and economic systems, while ensuring that equity remains central to every decision.

At CHILDREN AT RISK, we believe that every child deserves the opportunity to thrive. This report is intended to inform, but also to inspire action. We encourage policymakers, educators, community leaders, and families to use these findings to drive meaningful change.

Houston's future depends on how well we support its children today. The path forward is clear—what matters now is the will to act.

For Children!



Robert Sanborn, Ed.D.,
President & CEO

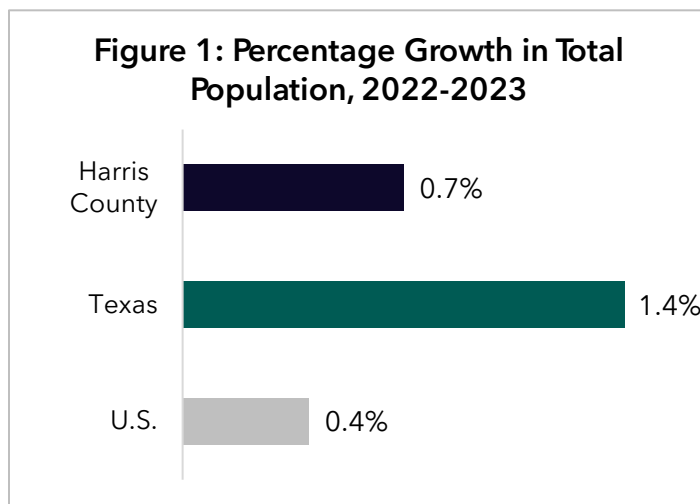
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POPULATION

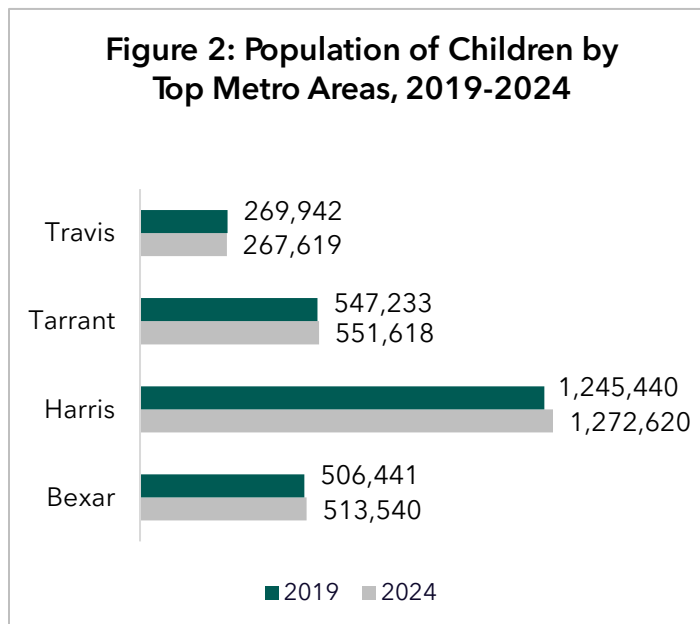
Harris County continues to be a key contributor to Texas’ rapid population growth at a current population estimate of 5 million as of 2024.ⁱ Between 2022 and 2023, the County’s population grew by 0.7%, a pace that remains higher than national growth over the same period (Fig. 1). Texas as a whole, saw a 1.4% increase in population, more than triple the 0.4% growth seen across the United States.ⁱⁱ In 2024 alone, Texas added 563,000 new residents, more than any other state.ⁱⁱⁱ These shifts highlight the fast-paced growth Texas and Harris County are experiencing relative to the nation.



A CLOSER LOOK

This growth is a result of multiple factors. From 2023 to 2024, Texas led the nation in both natural population growth and domestic migration and ranked third nationally in international migration.

- Natural Population (+158,753)
- Domestic Migration (+85,267)
- International Migration (+319,569)

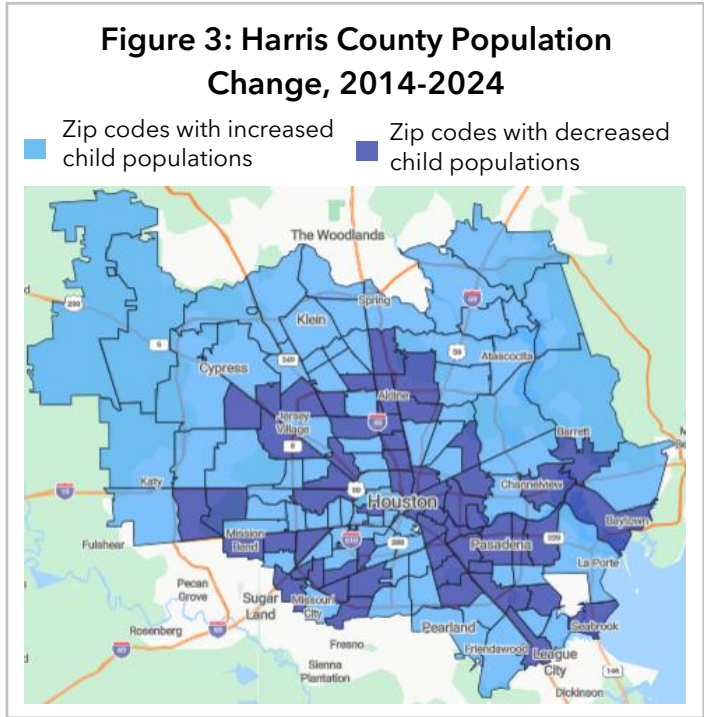


Harris County has the largest child population (under 18 years old), in Texas, with 1,272,620 children in 2024—more than any other county in the state (Fig. 2).^{iv} **Over the past five years, the county has experienced faster growth than any other county in Texas.** This substantial and growing population makes Harris County a critical focus for child-centered policy and advocacy efforts. In 2023, children accounted for 26.4% of the county’s total population, exceeding the statewide average of 24.9%.^v Overall, Harris County is home to approximately 17% of all children in Texas.

Geography

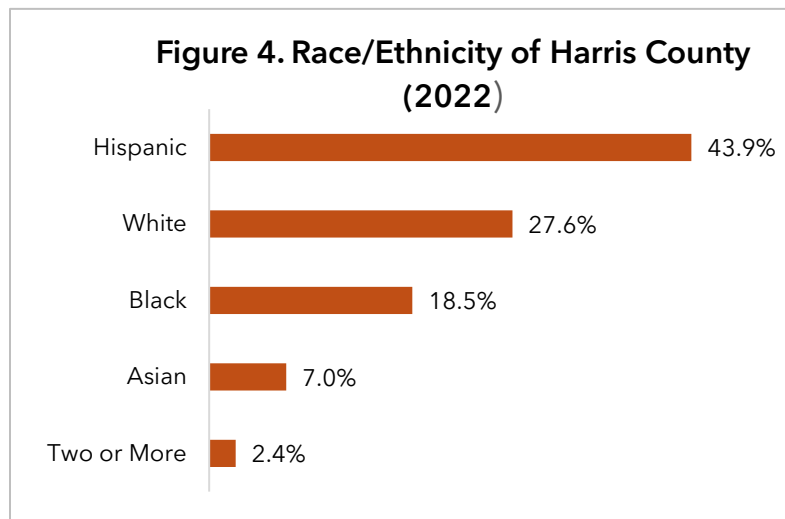
Where families live in Harris County also tells an important story. Data from the 2024 census shows growth of children are in the suburbs— places like Katy, Cypress, Klein and Spring – rather than central Houston.^{vi} This reflects the broader trend of suburban growth, where families move outward in search of more affordable housing, larger homes, and access to suburban schools and amenities (Fig. 3).^{vii}

Rapid growth in these areas can outpace the services families need. National research on suburban poverty finds that as more low-income families move to the suburbs, these communities now house the largest and fastest-growing share of people in poverty, while the anti-poverty infrastructure built for cities has not kept up—leaving many suburbs with a relatively thin safety net and growing gaps in transportation, services, and local resources.^{viii} This is most apparent in healthcare access: while about 38% of the U.S. population lives in suburban areas, almost 40% of all uninsured Americans live there as well—roughly 1 in 7 suburban residents.^{ix}

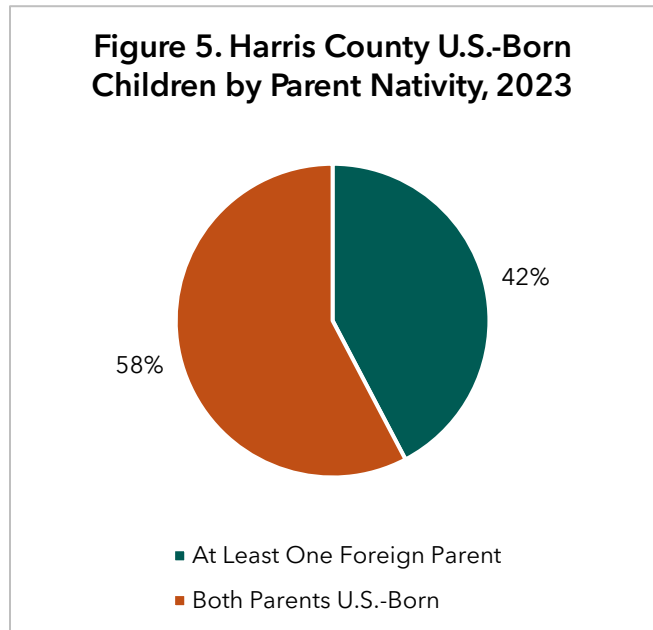


Demographics

Examining Harris County’s population make-up (Fig. 4) over the years highlights demographic shifts in its residents. From 2011 to 2022, the share of non-Hispanic White residents declined from 32.6% to 27.6%, while Hispanic residents grew from 40.3% to 43.9% and Asian Americans from 6.2% to 7.0%.^x Harris County’s Black population remained notably high at 18.5% - the same as last year.



Harris County is home to a large immigrant community. Many children in Harris County grow up in immigrant households. Of the 1.1 million U.S.-born children in Harris County, over 450,000 of them live in households with at least one foreign-born parent (Fig. 5).^{xi} Even when children are citizens themselves, having immigrant parents can introduce unique challenges. Parents may struggle with finding stable employment, working irregular schedules, or lacking access to employer-sponsored health insurance.^{xii}

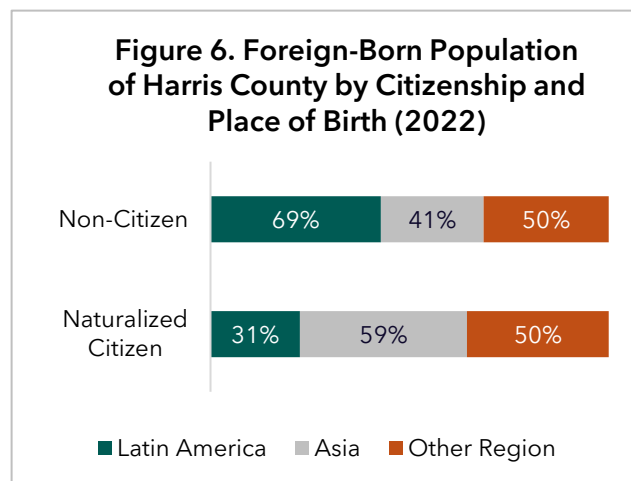


DEFINING IMMIGRATION STATUS

A U.S. citizen, defined by the U.S. Census, is someone who was born in the nation, born abroad to at least one U.S. citizen, or has undergone naturalization.

Immigrants are defined to be individuals who were born outside of the United States and later moved to the country. They can be either documented or undocumented, with varying rights and access to services based on citizenship status.

In 2023, over 1.2 million residents were foreign-born.^{xiii} The largest groups are from Latin America, followed by Asia. Asia’s higher naturalization rate likely reflects a combination of more accessible pathways to citizenship for many Asian immigrants (through employment- and family-based visas), their relatively high levels of educational attainment, and post-1965 immigration policies expanded opportunities for immigration from specific Asian countries (Fig. 6).^{xiv,xv} Stronger immigrant support networks may also help ease the process of naturalization.^{xvi} A similar pattern appears among immigrants from many other regions: most are naturalized U.S. citizens rather than non-citizens.^{xvii}



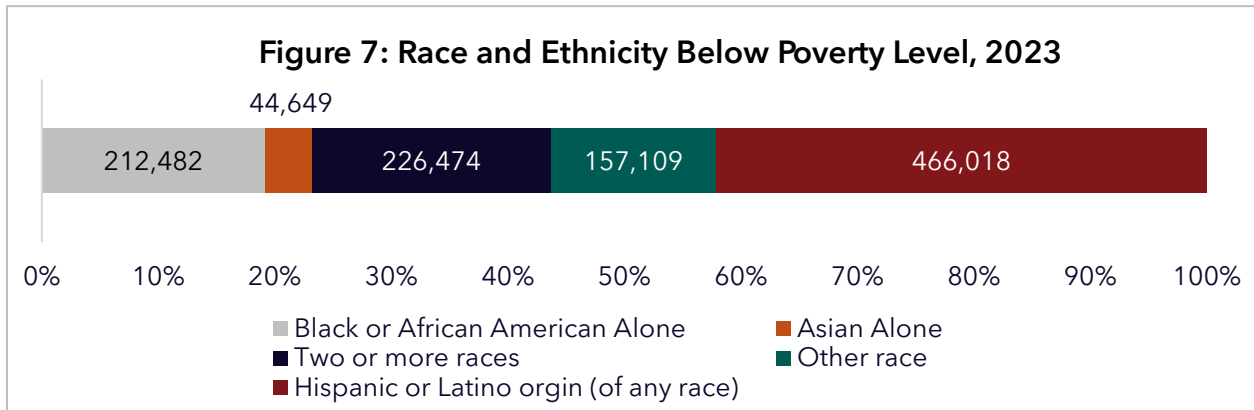
In 2022, foreign-born children made up 7.6% of the county's child population – more than 83,000 kids.^{xviii} Non-citizenship carries real consequences for families and children. Children whose parents are undocumented, or non-citizens often live with stress and fear of deportation. Children in these households may experience anxiety, depression, or behavioral struggles – and in extreme cases, separation from parents can lead to long-term trauma.^{xix} Mothers who are not citizens face added barriers in accessing prenatal care, putting both maternal and child health at risk.^{xx}

A PATH FORWARD

- Rapid suburban growth among low-income families is creating the largest and fastest-growing segment of people experiencing poverty—without a corresponding expansion in services and safety-net programs to meet their needs.
- Expand access to economic supports and affordable healthcare for immigrant families by improving benefit eligibility, increasing community outreach, and promoting stable employment opportunities for parents.
- Strengthen protections and support systems for children in mixed-status families by expanding access to mental health services, funding community-based family support programs, and adopting policies that reduce the risk of family separation.

POVERTY AND BASIC NEEDS

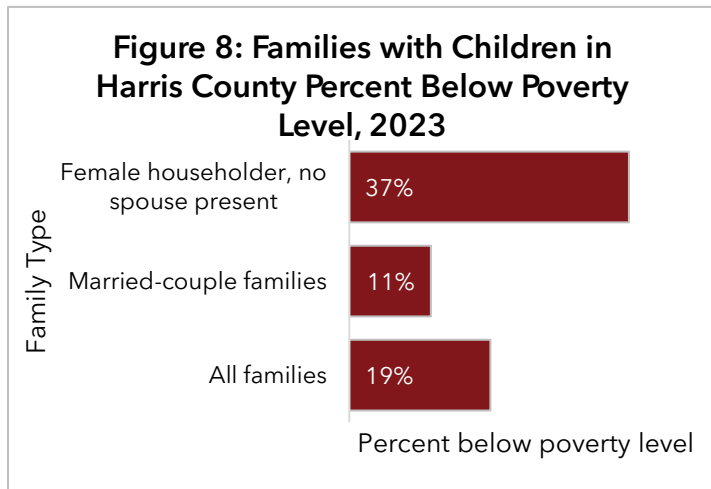
Poverty continues to shape the daily realities of many children. Since 2018, we’ve seen Texas’ child poverty rate decrease every year, while Harris County’s rate has remained elevated.^{xxi} Recent Census estimates show that 23.2% of children in Harris County live below the federal poverty line—higher than the Texas rate of 18.9% and the national rate of 16.3%.^{xxii} Young children face the greatest challenges: in 2023, roughly one in four children under age five experienced poverty. Black, Hispanic, and Indigenous children are disproportionately represented among families with the lowest incomes, reflecting long-standing inequities in access to housing, education, and economic opportunity (Fig. 7).^{xxiii}



In 2023, more than 20% of Black residents and Hispanic residents in Harris County lived below the poverty line, compared to the 9.3% of White residents.^{xxiv} Black and Hispanic children face socioeconomic challenges tied to historic and ongoing barriers that limit access to resources.^{xxv} Many of these children living in poverty attend underfunded schools, reducing their access to quality instruction and tools for success—further fueling the cycle of poverty.^{xxvi}

Poverty rates highlight significant inequalities for children. Among children in households where poverty status is measured, children in married-couple households fare the best at 10.7% children, while all family households follow at 18.5% children.

Single-mother households face the highest poverty rate at 36.7% equating to 171,451 children experiencing the most economic hardship (Fig. 8).^{xxvii}

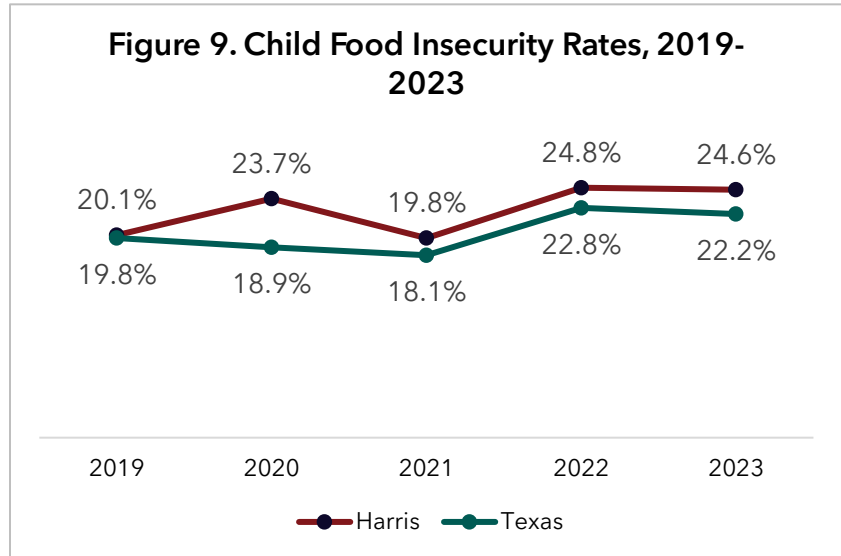


Public Benefits

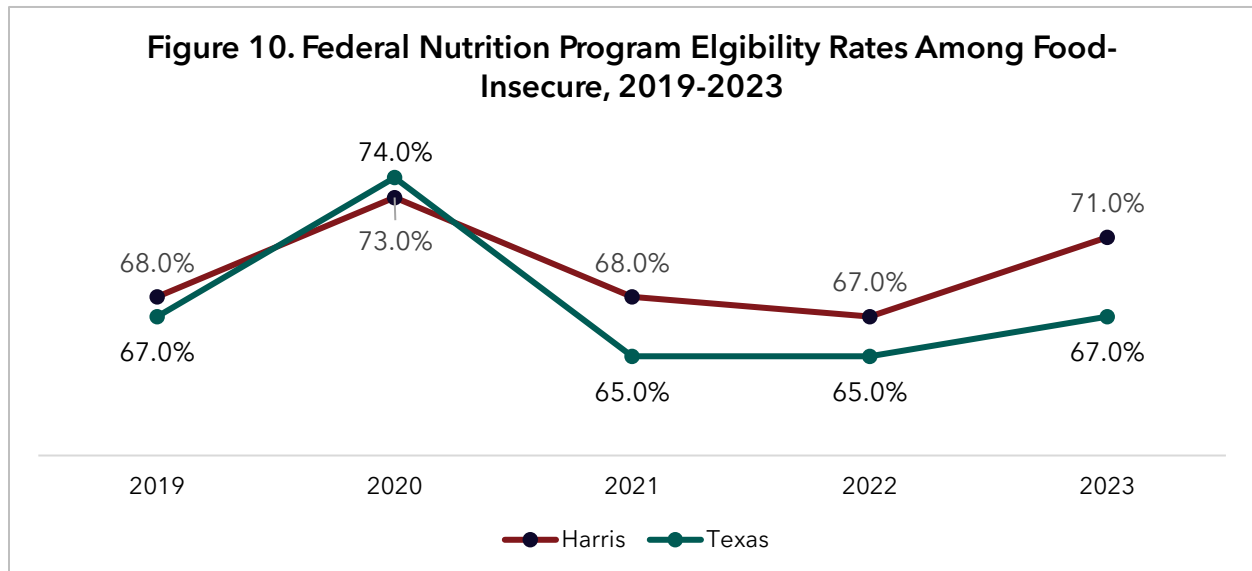
Over four in ten children in female-headed households depend on public programs for support, marginally lower than the percentage living below the poverty line.^{xxviii} For male-headed households, nearly one-fourth of children rely on public assistance. These numbers show how single-parent households, especially those led by women, are disproportionately affected by economic instability.

Food and Nutrition

Food insecurity continues to affect a significant share of children in Harris County. The USDA defines food insecurity as a household-level condition of limited or uncertain access to nutritionally adequate food, and research shows that families facing it often contend with low or unstable incomes, high living costs, and community factors such as limited transportation

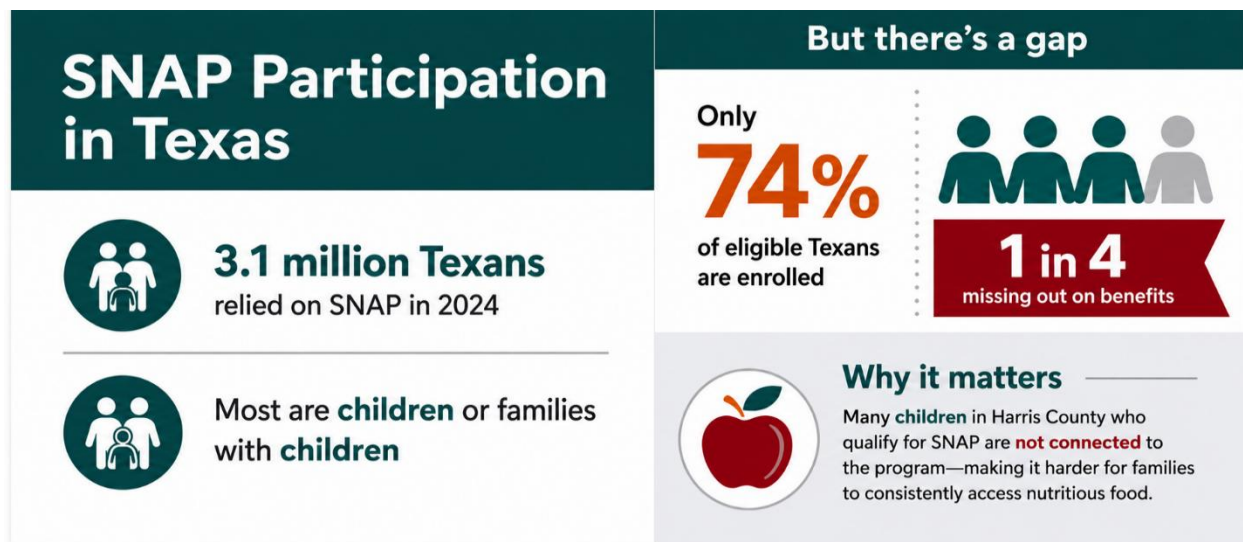


options and unequal access to well-resourced schools.^{xxix,xxx} In 2023, an estimated 24.6% of children in Harris County experienced food insecurity, higher than the statewide rate of 22.2% (Fig. 9). Feeding America’s Map the Meal Gap data also show that among food-insecure children in Harris County, about 71% were eligible for federal nutrition programs such as SNAP and WIC, slightly above the state average.^{xxxi}



A large share of food-insecure children in Harris County qualify for federal nutrition programs. These programs—such as SNAP, WIC, and free or reduced-price school meals—serve as the primary safety net for families struggling to afford groceries. Eligibility rates reflected in Figure 10 indicate the percentage of food insecure households with incomes low enough to meet federal thresholds, even when parents work full-time. It further highlights the percentage of food insecure families that are not eligible for federal nutrition programs and are left without sufficient supports. For families, these supports often bridge the gap during periods of unstable employment, rising food prices, or unexpected expenses.^{xxxii}

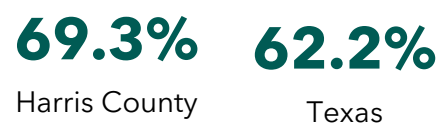
Even when families are eligible for federal supports, many still do not receive them. SNAP remains the primary nutrition assistance program for low-income households,^{xxxiii} and most beneficiaries in Texas are children or families with children.^{xxxiv}



Economically Disadvantaged

In the 2023-2024 school year, Harris County public schools enrolled more than 886,000 students, of whom over 614,000 (69.3%) were classified as economically disadvantaged – meaning they were eligible for free meals, reduced-price meals, or met other qualifying criteria such as participation in SNAP, TANF, foster care, or migrant education programs. This combined measure, drawn from TEA's PEIMS October snapshot,^{xxxv} provides a more comprehensive picture of student poverty than federal poverty statistics alone, capturing households that may fall just above official poverty thresholds but still face significant economic

Harris County is home to more economically disadvantaged students, compared to the rest of the state.



hardship. Harris County's economically disadvantaged rate of 69.3% sits notably above the statewide rate of 62.2% (3.4 of 5.5 million students), underscoring the depth of economic need among Houston-area school-age children.

Economically disadvantaged status is widely used in education research as a proxy for child poverty precisely because it captures a broader and more realistic slice of financial hardship than federal poverty line designations alone. Research consistently demonstrates that economic disadvantage has significant negative effects on children's academic performance, cognitive development, and overall school readiness, with impacts that extend well beyond hunger to include housing instability, limited access to healthcare, and reduced exposure to enriching out-of-school experiences.^{xxxvi,xxxvii} Children from economically disadvantaged households show lower average math and reading scores, higher rates of grade repetition, and elevated risk of dropping out compared to their more economically secure peers.^{xxxviii} For Harris County, where more than two in three public school students meet the threshold for economic disadvantage, these patterns represent a systemic condition shaping educational outcomes across the region. Therefore, addressing economic disadvantage is central to any serious effort to improve educational equity and long-term workforce outcomes in the Houston area.

Economic Stability

Reliance on Temporary Assistance for Needy Families (TANF) in Harris County reflects both the depth of need among low-income families and the program's limited reach. Across Texas, TANF serves a relatively small share of families living in poverty. As of 2024, fewer than 1 in 20 low-income families nationwide receive TANF cash assistance, and Texas has one of the lowest participation rates in the country.^{xxxix} This pattern is evident in Harris County, where many families experiencing financial hardship—particularly those with children—do not receive cash assistance despite qualifying.

Although Texas receives federal TANF funding, the state's restrictive eligibility policies, low benefit levels, and limited investment in direct cash assistance prevent the program from reaching all eligible families in need. In Harris County, where child poverty remains a persistent challenge, TANF plays a modest but important role for families with very low incomes. Monthly benefits in Texas are among the lowest in the nation—for example, a family of three typically receives less than \$300 per month in TANF assistance.^{xl} This limited benefit level reduces the program's ability to stabilize families or prevent deeper poverty, especially in a high-cost metro area like Houston.

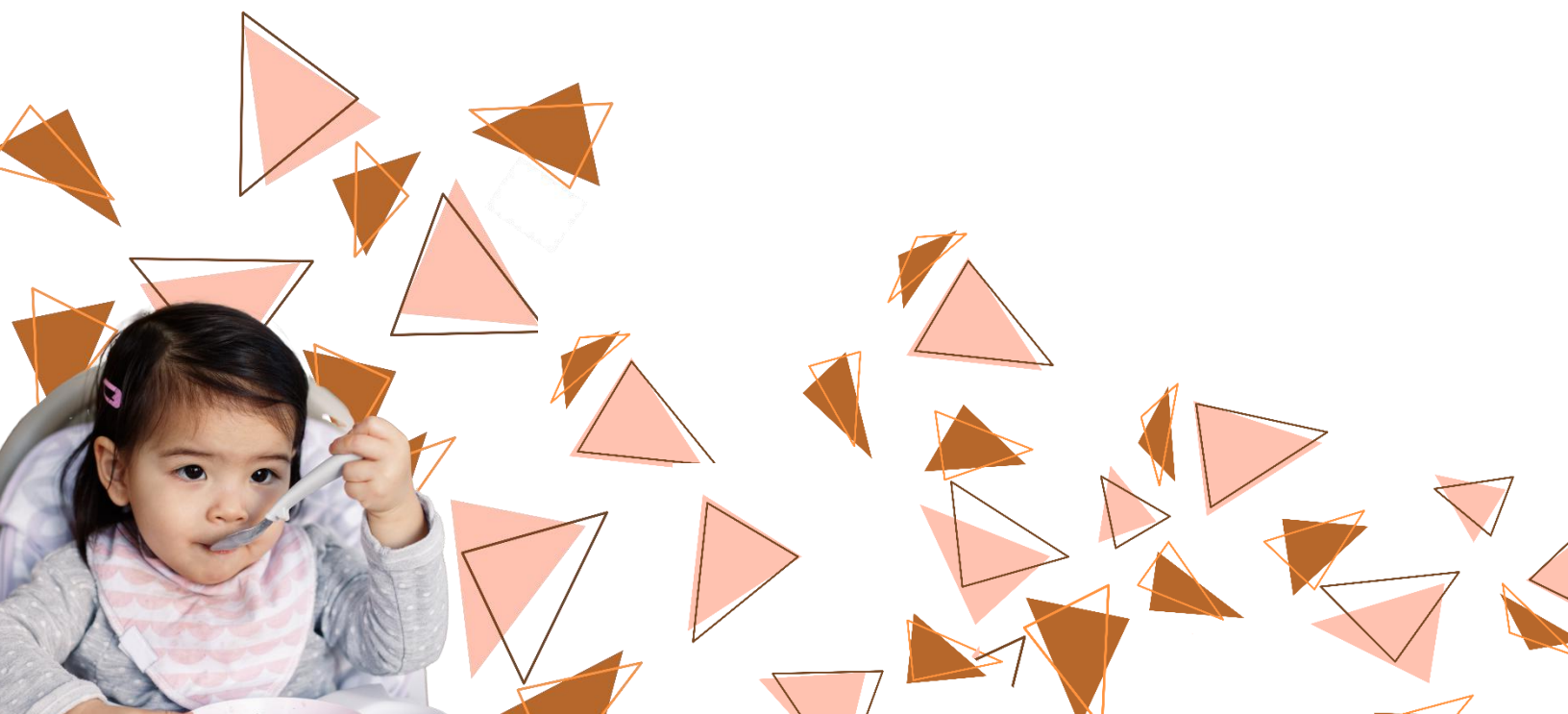
Administrative barriers and strict eligibility rules further constrain access. Texas maintains stringent income thresholds, work requirements, and asset limits, which can make it difficult for families—particularly those with unstable employment or caregiving responsibilities—to qualify

or remain enrolled. As a result, while thousands of families in Harris County rely on TANF at any given time, many more who could benefit are left without support.

Overall, TANF in Harris County functions as a narrow safety net rather than a broad-based support system. The combination of low participation rates, modest benefit levels, and restrictive policies means that the program reaches only a fraction of families facing economic hardship, limiting its effectiveness in reducing child poverty and promoting long-term stability. In recent years, children's health insurance coverage in the United States has shown signs of erosion following earlier gains. By 2024, approximately 4.6 million children (6.1%) under age 19 were uninsured nationwide.^{xii} While this remains below levels seen in the early 2000s, it reflects a concerning reversal tied to policy changes and the unwinding of COVID-19 pandemic-era protections.

Texas continues to rank among the states with the highest uninsured rates for children. As of 2024, about 13.6% of children in Texas lacked health insurance—roughly double the national average.^{xiii} Across all ages, Texas also maintains the highest uninsured rate in the country, with approximately 17–18% of residents uninsured, compared to about 8–9% nationally.^{xiiii}

Harris County reflects—and in some cases intensifies—statewide trends. With a large and diverse population, including a significant share of immigrant families, barriers to coverage are particularly pronounced. Many families experience gaps in employer-sponsored insurance due to low-wage or unstable employment, while others face eligibility or enrollment challenges tied to immigration status, language access, or administrative hurdles.^{xliv}



Health Coverage: Medicaid and CHIP

Figure 11. Statewide Number of Children <21 Years Old Receiving Medicaid Services, 2022-2024

Year	2021	2022	2023	2024
Indicator	3,885,070	4,275,372	3,855,695	3,068,792

Figure 12. Harris County Number of Children <18 Years Old Receiving Children’s Health Insurance Program, 2021-2024

Year	2021	2022	2023	2024
Indicator	175,776	64,756	89,904	165,595

The unwinding of pandemic-era Medicaid protections beginning in 2023 has had a notable impact statewide (Fig. 11). Many families in Harris County have lost coverage due to procedural issues such as renewal barriers and administrative churn.^{xlv} As a result, children in the county remain at elevated risk of being uninsured or experiencing coverage disruptions—especially in mixed-status households.

Public programs continue to play a central role. Medicaid and the Children’s Health Insurance Program (CHIP) remain the primary sources of coverage for children from low-income households in Harris County (Fig. 12), but gaps in enrollment, retention, and outreach persist—particularly in rapidly growing suburban areas where access to services may be more limited.^{xlvi}

Women, Infants and Children (WIC)

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) continues to play a critical role in improving the nutritional health of women, infants, and young children from low-income households. The program provides nutrition education, healthy foods, breastfeeding support, and referrals to health and social services—helping reduce the risks associated with poor nutrition during early childhood and pregnancy.^{xlvii}

WIC serves pregnant, breastfeeding, and postpartum women, as well as infants and children under age five who are at nutritional risk. To qualify, families must have incomes at or below 185% of the federal poverty level. In 2024, this equates to approximately \$57,720 annually for a family of four, reflecting increases in federal income guidelines over time.^{xlviii} Services are provided at no cost to eligible participants.

Nationally and in Texas, WIC participation declined throughout the 2010s but has begun to stabilize and modestly rebound in recent years. In 2022, approximately 6.2 million individuals participated in WIC nationwide, including women, infants, and children.^{xlix} Historically, Texas

consistently has one of the largest WIC caseloads in the country, serving over 800,000 participants monthly and still seeing high counts well over 500,000 over the past several years (Fig. 13).^l

Figure 13. Statewide WIC Participation Count, 2019-2024

Year	2020	2021	2022	2023	2024
Indicator	307,025	486,476	507,415	554,434	574,330

Figure 14. Harris County WIC Participation Count, 2019-2024

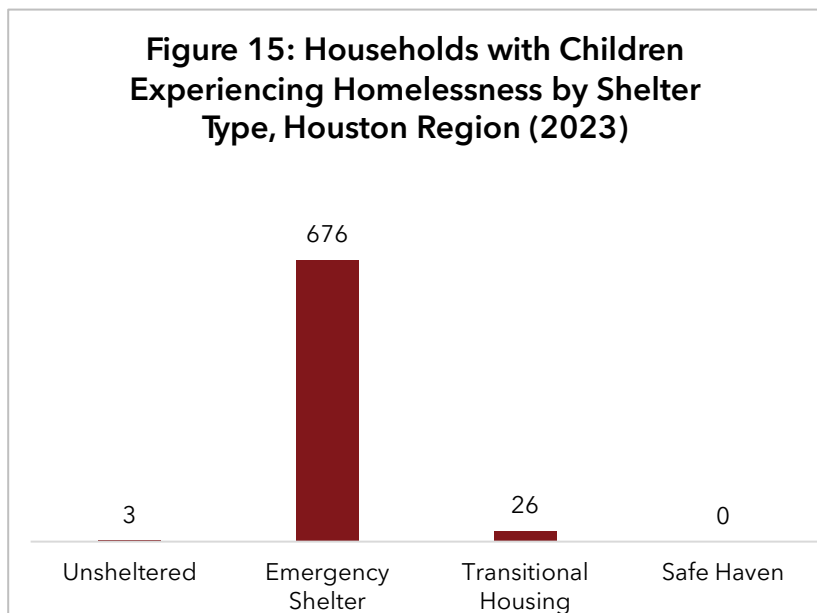
Year	2020	2021	2022	2023	2024
Indicator	68,712	86,495	94,638	104,726	108,249

Harris County remains one of the largest WIC service areas in Texas, reflecting both its population size and the level of rising need with each year (Fig. 14).

The program continues to serve a highly diverse population, with the majority of participants identifying as Hispanic/Latino, followed by Black and White families.^l This reflects broader demographic trends in the county.

Housing

Harris County’s youth face growing housing instability driven by both homelessness and the rising cost of housing. Point-in-Time estimates, a national initiative to annually count the number of people experiencing homelessness, and the Coalition for the Homeless of Houston/Harris County Continuum of Care data show that hundreds of unaccompanied youth experience homelessness on



any given night in the Houston region, with many more cycling in and out of unstable living situations over the course of a year (Fig. 15).^{lii} These young people are especially vulnerable to disruptions in education, employment, and health, and often lack the family or financial support needed to secure stable housing.^{liii}

At the same time, housing affordability remains a significant barrier. In Harris County, a substantial share of renters are cost-burdened, meaning they spend more than 30% of their income on housing.^{liv} For youth and young adults –many of whom are working low-wage jobs or transitioning out of foster care–finding affordable units is particularly difficult.^{lv} Fair market rent for a one-bedroom apartment in the Houston area has continued to rise in recent years, outpacing wages for entry-level workers and making independent living unattainable without assistance.^{lvi}

While transitional housing programs exist to bridge this gap, supply remains limited relative to need. Local providers offer transitional and rapid re-housing units specifically for youth, typically up to age 24, but capacity is constrained, with few dedicated beds and units available across the region.^{lvii} Waitlists are common, and eligibility requirements can further restrict access. As a result, many youth remain unstably housed or return to unsafe environments, underscoring the need for expanded investments in affordable housing and youth-specific support services.

A PATH FORWARD

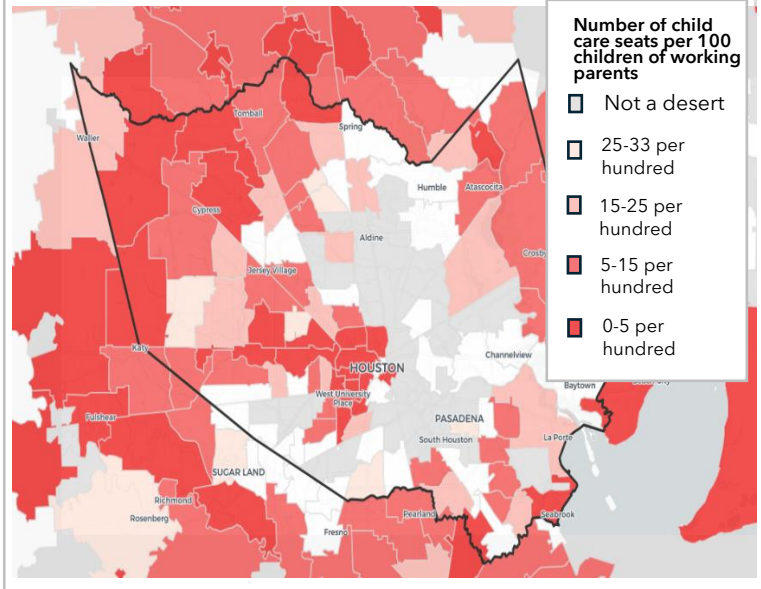
- **Reduce Child Poverty Through Direct Economic Supports:** Expand refundable tax credits (state EITC/CTC) and increase access to cash assistance to stabilize family income—especially for single-parent households, who face the highest poverty rates.
- **Strengthen and Modernize TANF:** Increase benefit levels, ease eligibility restrictions, and reduce administrative barriers so more low-income families can access meaningful cash support.
- **Improve Access to Nutrition Programs (SNAP, WIC, School Meals):** Invest in outreach, simplify enrollment and recertification, and expand community-based navigation to ensure eligible families receive benefits.
- **Address Food Insecurity Through Local and Federal Action:** Expand school meal programs, summer nutrition access, and food distribution infrastructure in high-need communities to reduce the high rate of child food insecurity.
- **Expand Health Coverage for Children and Families:** Streamline Medicaid/CHIP enrollment and renewal processes, reduce procedural disenrollments, and expand outreach—particularly for immigrant and mixed-status families.
- **Invest in Immigrant Family Access to Services:** Increase language access, culturally responsive outreach, and policies that ensure children can access services regardless of parental immigration status.
- **Expand Affordable Housing and Youth Supports:** Increase funding for affordable housing, rental assistance, and youth-specific transitional housing to address rising housing instability and homelessness.
- **Target Supports to High-Need Communities:** Use data to direct investments toward neighborhoods with high poverty, food insecurity, and limited access to services—particularly in growing suburban areas.

EDUCATION

The Early Childhood Experience

Four of every five low-income children in Texas live in a zip code that is considered a Texas Rising Star (TRS) desert, a quality-based child care rating system managed by the Texas Workforce Commission (TWC).^{lviii} Child care access is a major challenge for Harris County families. Affordable, high-quality care is out of reach for many working parents, especially those with low incomes (Fig. 16). While Texas offers subsidies to help families pay for child care, the supply falls far short of the demand. Only about 60% of providers across the state accept subsidies, and federal Child Care Development Block Grant (CCDBG) funds reach just 13% of eligible families – leaving many without child care options.^{lix}

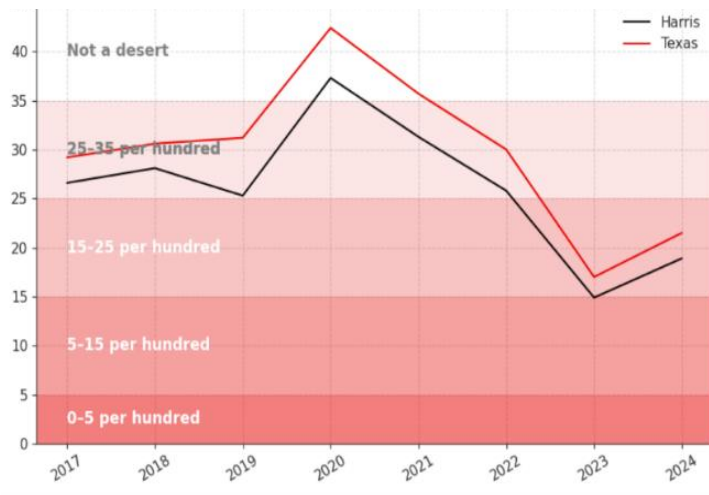
Figure 16: Harris County zip codes classified as a Subsidy Child Care Desert, 2026



Child Care Deserts

Harris County faces especially deep gaps in subsidized child care. In 2024, 87 zip codes in the county were classified as Child Care Deserts, meaning the supply of subsidized care met less than one-third of the demand.^{lx} Figure 17 shows that the supply of subsidized child care seats for every 100 children of low-income working parents has fallen sharply in recent years, in both Harris County and Texas, while Harris County continues to trail the statewide pattern. After

Figure 17: Changes in subsidized child care availability for every 100 children of low-income working families



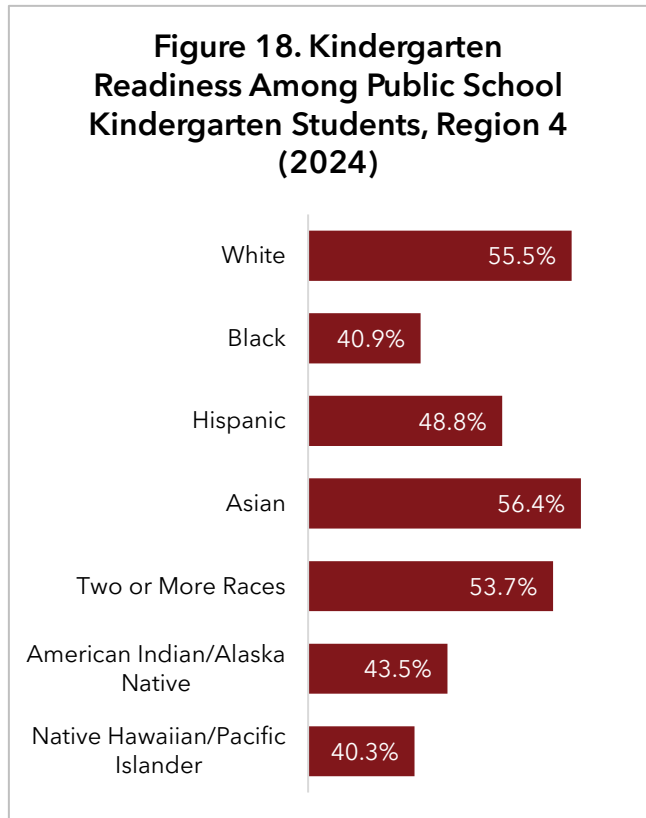
relatively steady access from 2017–2019 (Harris County ranging 25.3–28.1 seats per 100; Texas 29.2–31.2), both Harris County and Texas saw a temporary surge in 2020 (37.3 and 42.4, respectively) due to ARPA dollars.^{lxi} Since then, access has steadily eroded: by 2023, availability dropped to 14.9 seats per 100 in Harris County and 17.0 in Texas—meaning roughly 1 in 6 eligible children statewide, and even fewer in Harris County, could be served by the subsidy system. While 2024 shows a modest rebound (18.9 in Harris County; 21.5 in Texas), the community is still far below pre-2020 levels.

For families, these numbers translate into longer waitlists, unstable work schedules, and higher risk of job loss when care falls through.^{lxii} For employers and the broader economy, it means reduced workforce participation and productivity.^{lxiii} This trend underscores the need for community stakeholders to advocate for expanded subsidy funding, stronger provider capacity, and policies that stabilize the child care workforce, so that parents who are working can reliably access safe, affordable care.^{lxiv}

Kindergarten Readiness

ESC Region 4 is used as a reference to represent the greater Houston area. ESC Region 4 represents the greater Houston area and includes school districts across Harris County and six surrounding counties, providing a regional view of student outcomes in and around Houston.

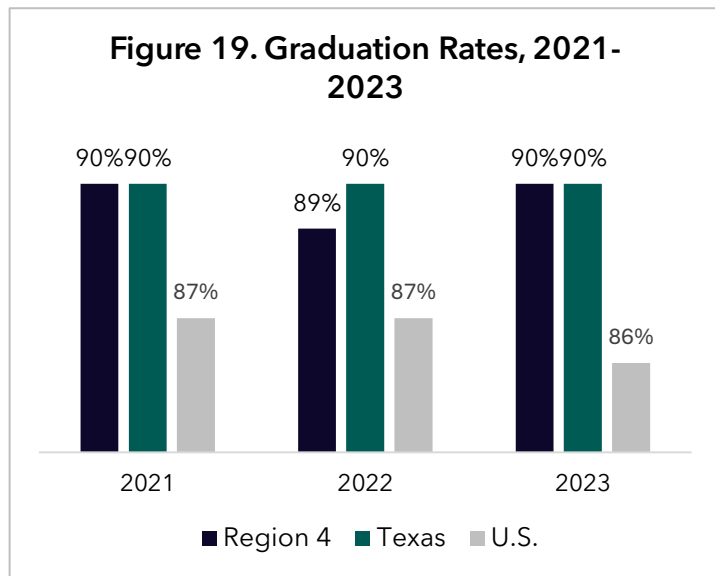
High-quality early education plays a central role in preparing children for kindergarten, setting the foundation for language development, early literacy, social-emotional and executive functioning skills, and the capacity to engage in classroom learning. In ESC Region 4, kindergarten readiness rates vary widely across racial and ethnic groups, highlighting how uneven access to early learning opportunities can shape children’s starting points. Among children entering kindergarten in the Greater Houston region, 55.5% of White students and 56.4% of Asian students demonstrate kindergarten readiness, compared with 48.8% of Hispanic students, and 40.9% of Black students (Fig. 18).^{lxv} Readiness levels are even lower among smaller student populations, including 43.5% of American Indian/Alaska Native



children, and 40.3% of Native Hawaiian/Pacific Islander children. These gaps illustrate how early learning experiences, such as access to high quality child care, pre-k, and family support programs, can influence a child’s ability to begin school with the skills needed to succeed.

K-12 Education

High school graduation remains a strong point for students in the Houston region. Graduation rates in Region 4 have stayed high over the past several years and are consistently aligned with state performance (Fig. 19).^{lxvi} These rates reflect the efforts of districts, educators, and community programs that have worked to keep students on track through academic supports, credit-recovery options, and college- and career-readiness initiatives. For many students, these systems play a major role in pushing them toward completion even when they face barriers such as unstable housing, family economic stress, or limited access to mental-health resources.

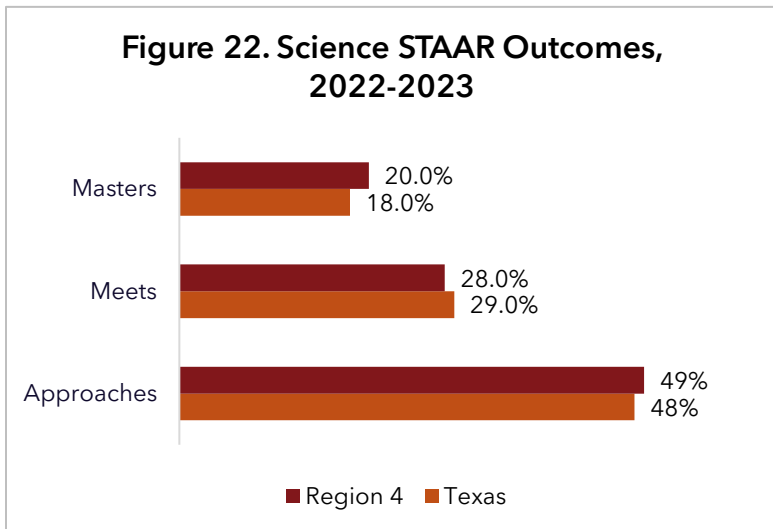
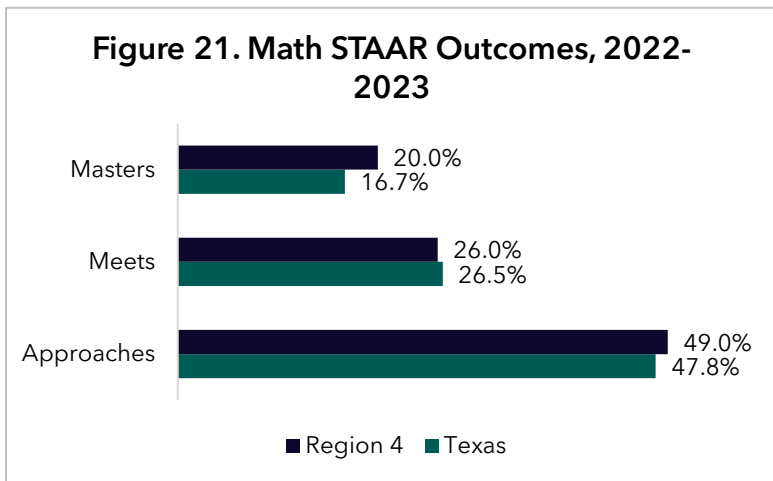
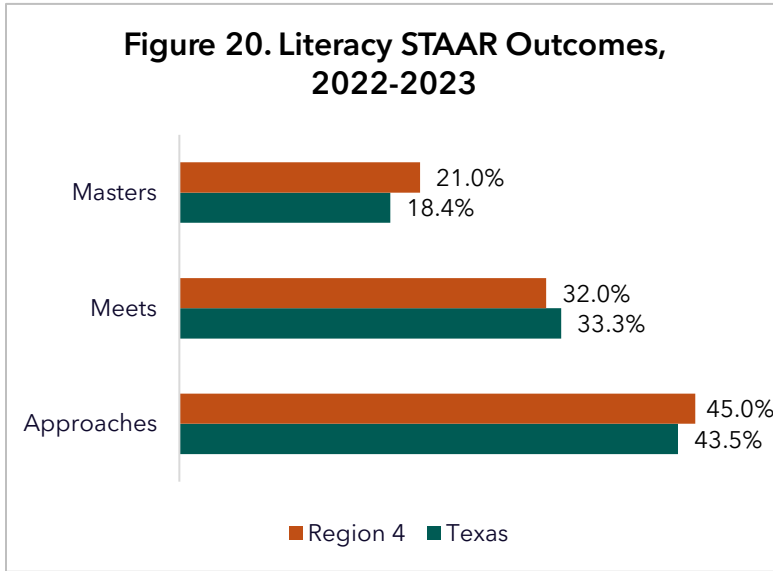


Did you know?

The STAAR exam is a statewide online assessment in math, reading/language arts, science, and social studies for grades 3-8 and high school.

Academic Performance

STAAR testing measures student performance across Texas. Student results are divided into four categories: Masters Grade Level, Meets Grade Level, Approaches Grade Level, and Did Not Meet Grade Level. Students who score in the “Approaches” category are considered to have passed. The STAAR 100-point scale uses percentiles to compare a student’s performance with others who took the same test. For literacy, mastery corresponds to the 70th-80th percentiles, meeting grade standards aligns with about the 50th percentile, and approaching grade standards falls between the 10th-20th percentiles. Students in Region 4 (Houston) perform slightly above the state average in all three categories – approaching, meeting, and mastering literacy standards (Fig. 20).^{lxvii}



Math performance follows a similar trend. Using the same percentile-based scale, Region 4 students also outperform the state average in math. Houston-area students score marginally higher in approaching, meeting standards compared to statewide averages. Students in the Houston area are excelling at a higher rate than the statewide average, with 20% demonstrating success compared to 16.7% across the state. (Fig. 21).^{lxviii}

Science performance offers another view of how well students in Region 4 are progressing in core academic areas. On the science STAAR assessment, students in the Houston region score slightly above the state average at both the “Meets” and “Approaches”, with higher rates at the “Masters” levels (Fig. 22). These levels reflect students’ ability to understand key scientific concepts, apply knowledge across settings, and analyze information—skills that grow in importance as students move into higher grades and approach pathways in health, technology, engineering, and related fields. Stronger performance in science is often associated with access to well-equipped labs, consistent instructional staffing, and opportunities for hands-on learning.^{lxix}

Gold Ribbon Schools

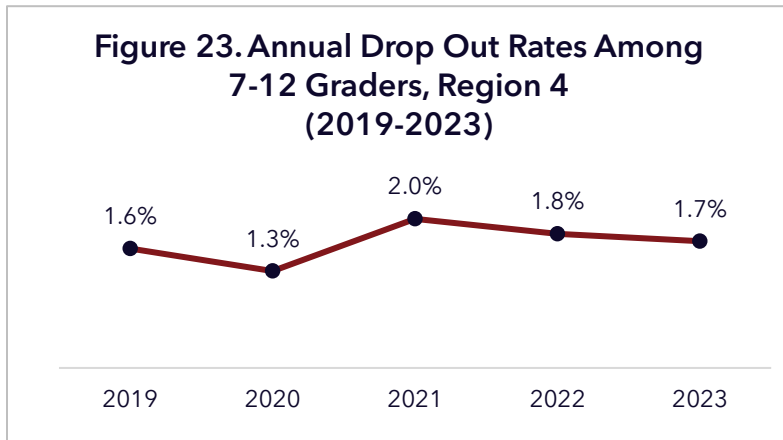
CHILDREN AT RISK’s Texas School Rankings include a Gold Ribbon Schools distinction,^{lxx} which recognizes schools serving student populations that are at least 75% economically disadvantaged and still earn an A or B rating. Gold Ribbon Schools are especially meaningful for the community because they highlight campuses that are successfully supporting students who face greater economic challenges. By recognizing schools where at least 75% of students are economically disadvantaged yet still achieve strong academic outcomes, the distinction underscores that high performance is possible regardless of socioeconomic status.

For families and community members, Gold Ribbon Schools demonstrate where effective teaching, leadership, and support systems are helping students thrive. They also provide examples of best practices that can be replicated across other campuses, helping drive improvement across the region. Ultimately, these schools reinforce a positive message for the community, showing that with the right resources and strategies, all students can succeed and achieve at high levels.

For the 2024-2025 school year, the share of Gold Ribbon Schools increased, with 23% of eligible schools receiving the distinction, up from 20% last year. In the Houston area, 726 of 1,486 schools (49%) met the eligibility threshold—higher than the statewide rate of 41%. Despite serving a larger share of economically disadvantaged students, 168 Houston-area schools (23%) earned Gold Ribbon status, exceeding the statewide rate of 19%.

School Drop Out

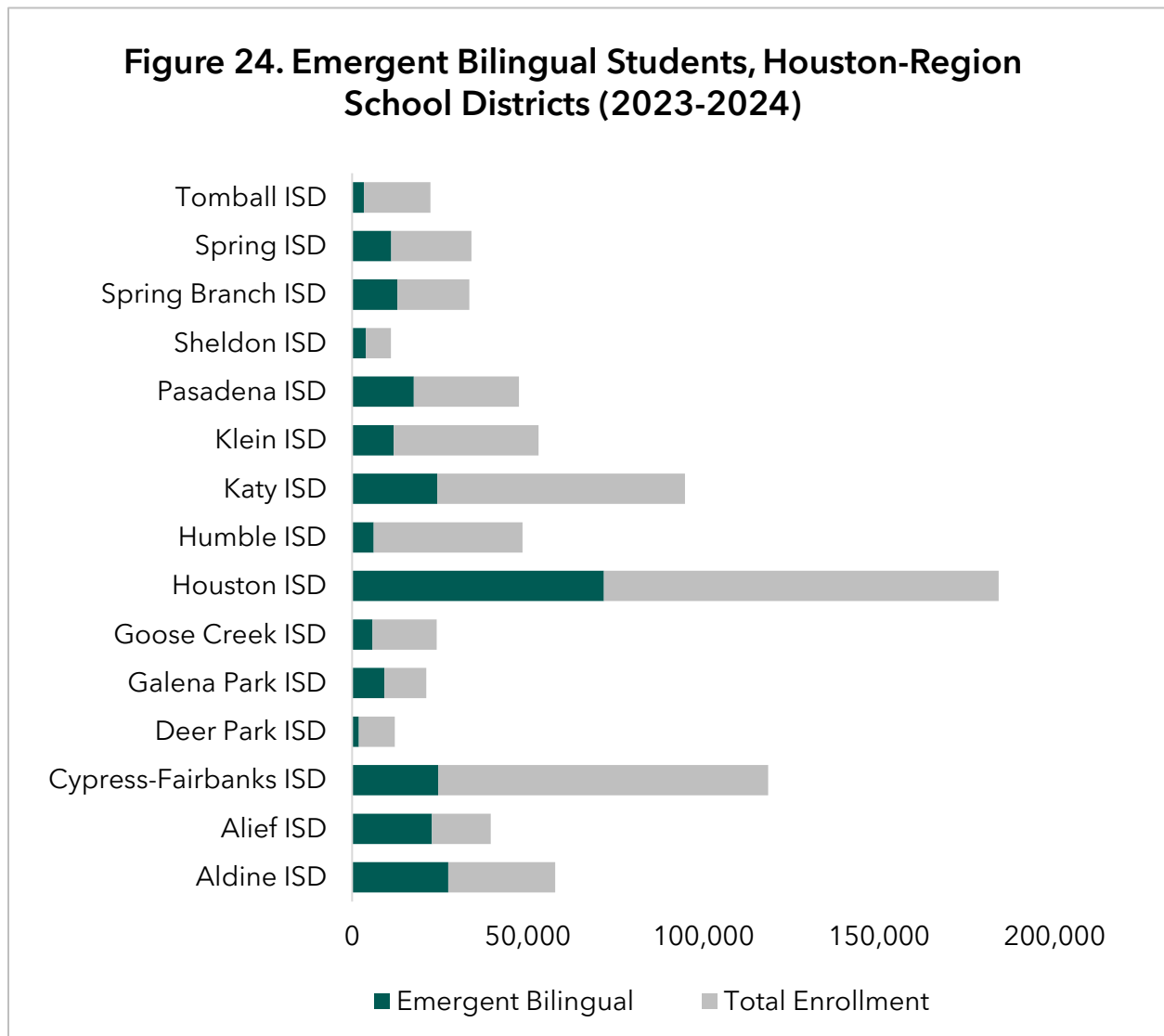
Leaving high school before graduation has long-term effects on a young person’s economic stability and well-being.^{lxxi} Students who do not complete high school face lower earning potential, higher unemployment, and greater challenges related to health and financial security.^{lxxii} Many rely more heavily on public assistance and are at increased risk of becoming involved in the criminal justice system.^{lxxiii} Dropout rates climbed during the 2020-2021 school year as the COVID-19 pandemic disrupted learning and placed new pressures on students but



has since been on a decreasing slope (Fig 23).^{lxxiv} Communities In Schools found that among students they interviewed who had dropped out, most said they lost motivation to continue school, while others described mental health struggles or caregiving duties that pulled them away from their education.^{lxxv}

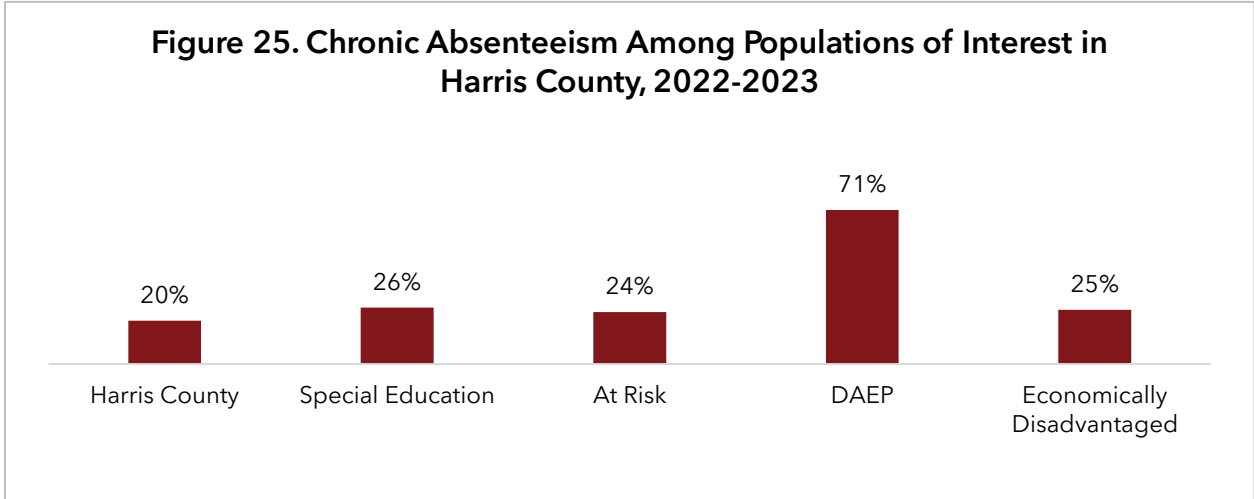
Emergent Bilingual Students

The number of emergent bilingual students shapes the instructional and staffing needs of Houston-area districts. Many districts serve large populations of students who are learning English in addition to developing grade-level academic skills (Fig. 24). These students benefit from specialized instruction, bilingual or dual-language programming, and educators trained in language development. Districts with substantial emergent bilingual enrollment often need additional certified bilingual teachers, dedicated language-support staff, and culturally responsive curriculum materials.^{lxxvi} This also increases the importance of family engagement practices that bridge language barriers, such as translation services and multilingual communication channels. For districts and community partners alike, understanding where emergent bilingual students are most concentrated helps guide decisions about staffing, program expansion, and supports that help students access the full curriculum while they build English proficiency.

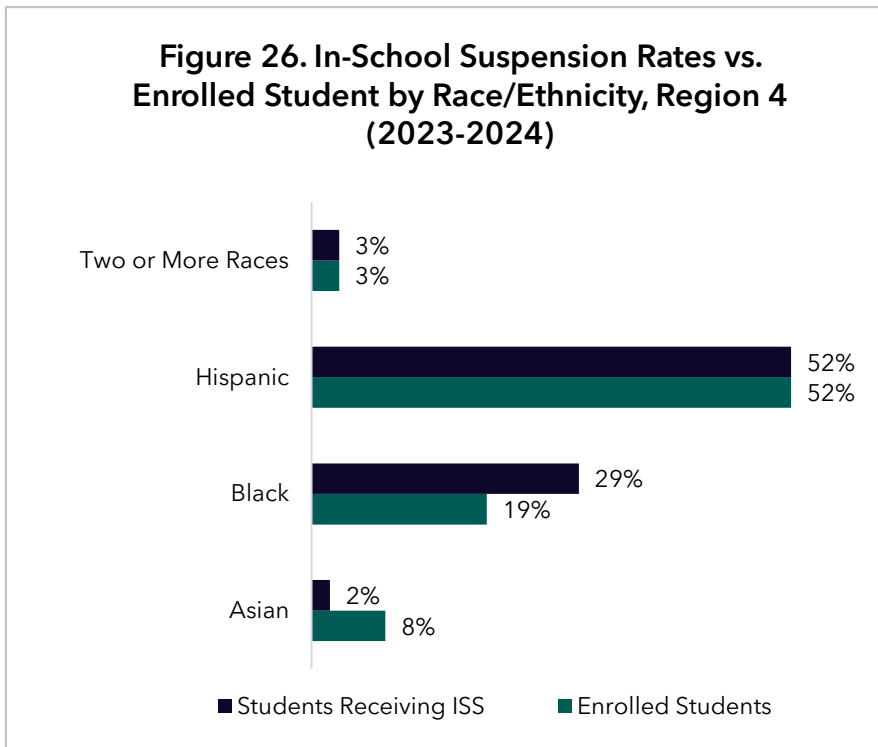


Chronic Absenteeism

Chronic absenteeism remains a significant barrier to learning and long-term academic success. It is commonly defined as missing at least 10 percent of the school year for any reason, and students who are chronically absent often struggle to stay connected to their school



community and classroom routines. Research shows that persistent absenteeism in the early grades has lasting consequences; young children who miss large portions of school between preschool and second grade are far less likely to read on grade level by third grade.^{lxxvii} Local data reflects these concerns. In the 2022-2023 school year, 20% of students in Harris County were chronically absent. Rates were even higher among groups that face additional

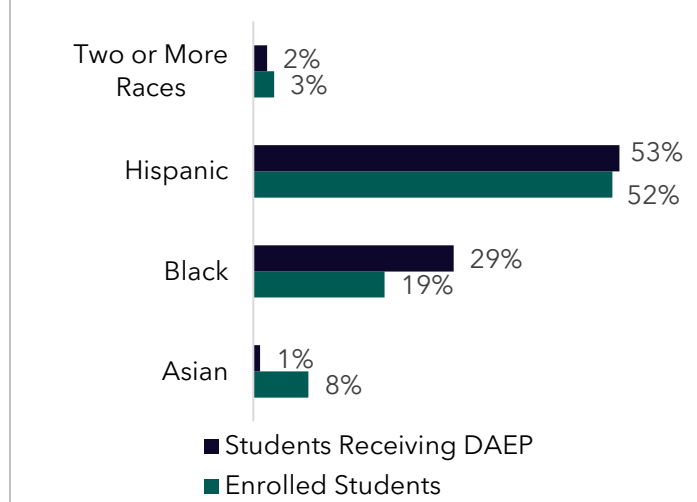


challenges, including students receiving special education services, students identified as at risk, economically disadvantaged students, and particularly those assigned to Disciplinary Alternative Education Programs (DAEP), where 71% of students were chronically absent (Fig. 26). These patterns illustrate how absenteeism intersects with other vulnerabilities, amplifying gaps in achievement and access to instructional support.

Student Accountability

Disciplinary practices in Houston-area schools fall unevenly across student groups, with Black students facing consequences at rates higher than their share of enrollment. Research shows that suspensions, expulsions, and alternative education placements weaken students’ connection to school and contribute to lower academic performance, higher dropout risk, and increased contact with the juvenile justice system.^{lxxviii} Texas-specific findings reinforce this pattern: repeated suspensions and DAEP placements are linked to grade retention and significantly lower graduation rates, and students who are disciplined frequently are far more likely to enter the justice system.^{lxxix}

Figure 27. DAEP Rates vs. Enrolled Student by Race/Ethnicity, Region 4 (2023-2024)



These consequences are felt most heavily by Hispanic and Black students, who receive a disproportionate share of disciplinary actions countywide (Fig. 27). The data from Region 4 reflects this imbalance, pointing to the need for campuses to examine how discipline is applied and strengthen supports that keep students engaged rather than removed from the classroom.



A PATH FORWARD

- **Expand Child Care Access:** Increase state and local investment in child care subsidies and raise reimbursement rates to incentivize more providers to accept subsidies and expand supply.
- **Target Child Care Deserts:** Target funding and incentives to high-need zip codes to expand the number of subsidized and high-quality (Texas Rising Star) child care seats.
- **Strengthen Early Learning:** Expand access to high-quality pre-K and early education programs, particularly for historically underserved racial and ethnic groups, to reduce readiness gaps.
- **Support Student Well-Being:** Increase school-based mental health services and wraparound supports to address barriers linked to absenteeism, dropout, and disengagement.
- **Reduce Chronic Absenteeism:** Fund evidence-based strategies such as family outreach, transportation support, and attendance monitoring systems to reduce chronic absenteeism.
- **Support Emergent Bilingual Students:** Invest in bilingual educators, dual-language programs, and multilingual family engagement strategies to support academic success.
- **Reform Discipline Practices:** Promote restorative justice approaches and reduce reliance on exclusionary discipline to keep students engaged and improve long-term outcomes.

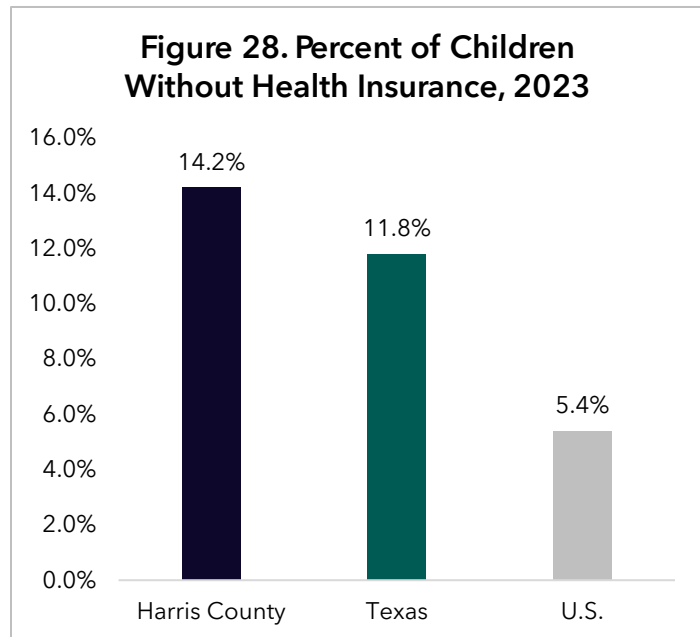
HEALTH

Health Care Coverage

Health insurance coverage remains a pressing issue for children in Harris County. Consistent coverage helps children receive preventive care, developmental screenings, mental health services, and timely treatment when illness or injury occurs.^{lxxx} Yet many families in Harris County still face gaps in coverage, limiting children's access to the care they need.

Harris County's child uninsured rate has remained higher than both the Texas and U.S. averages for several years (Fig. 28). While national rates for uninsured children have stayed around 5%,^{lxxxii}

Harris County has remained closer to 14%,^{lxxxiii} reflecting challenges in connecting children to available insurance options. Texas as a whole has one of the highest proportions of uninsured children in the country,^{lxxxiii} and Harris County mirrors that pattern on an even larger scale because of its population size, economic diversity, and the number of families navigating complex eligibility rules.^{lxxxiv}



Vaccinations

Routine childhood vaccination remains one of the most effective tools for protecting children from serious illnesses. Immunizations prevent disease during early childhood and provide long-term health benefits, reducing both medical complications and future healthcare costs.^{lxxxv} High vaccination rates also protect children who cannot be vaccinated, since many vaccine-preventable diseases require a community-level threshold, often above 90%, to prevent outbreaks.^{lxxxvi} In recent years, however, misinformation and declining confidence in vaccines have weakened childhood immunization rates across the country.^{lxxxvii}

Schools play a central role in maintaining vaccination coverage. Although all states require certain vaccines for school entry, most, including Texas, allow nonmedical exemptions.^{lxxxviii} Nationally, kindergarten vaccination rates have slipped in recent years, falling below 93% in the 2023-24 school year compared to about 95% before the pandemic.^{lxxxix} Texas has experienced similar declines. For example, coverage for the measles, mumps, and rubella (MMR) vaccine decreased from 96.9% among kindergarteners in 2019-20 to 94.3% in 2023-24.^{xc}

Local immunization patterns show where additional outreach may be needed. In the 2022-23 school year, only one kindergarten vaccine in Harris County – Hepatitis B – met the 95% coverage benchmark.^{xcii} Other required vaccines fell below the level needed for strong community protection. Among 7th graders, coverage was stronger: Hepatitis A, Hepatitis B, Polio, and MMR all exceeded 95%. Statewide, Texas met recommended levels for all 7th-grade vaccines during the same period.

Mental Health

Many children are growing up with unmet mental health needs. According to the National Survey of Children’s Health, about one in four Texas children ages 3 to 17 had at least one mental, emotional, developmental, or behavioral condition between 2022 and 2023.^{xcii} Applied to a large county like Harris, this suggests tens of thousands of children are living with challenges such as anxiety, depression, attention difficulties, or developmental delays. Without timely support, these conditions can affect school attendance, academic performance, relationships with peers, and long-term health.^{xciii}

Schools are often the first place these needs are recognized, but staffing has not kept pace. The American School Counselor Association recommends no more than 250 students per school counselor, yet Texas averages 392 students per counselor, far higher than the recommended benchmark.^{xciv} Region 4, which includes the Houston area, has an even higher ratio of 485 students per counselor (Fig. 29).^{xcv} When caseloads reach this level, it becomes difficult to provide individual counseling, early intervention, and consistent follow-up, especially in schools that serve large numbers of students of color and students from low-income families.^{xcvi}

CHILDREN. YOUTH. MENTAL HEALTH.

The need is real in Harris County.

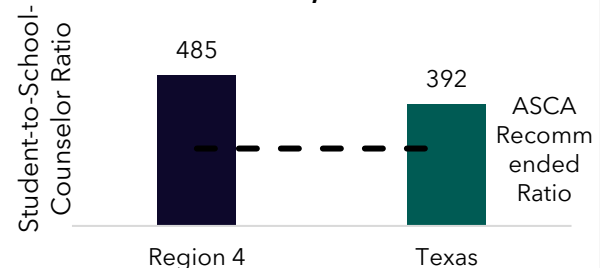


OF THOSE CHILDREN AND YOUTH...



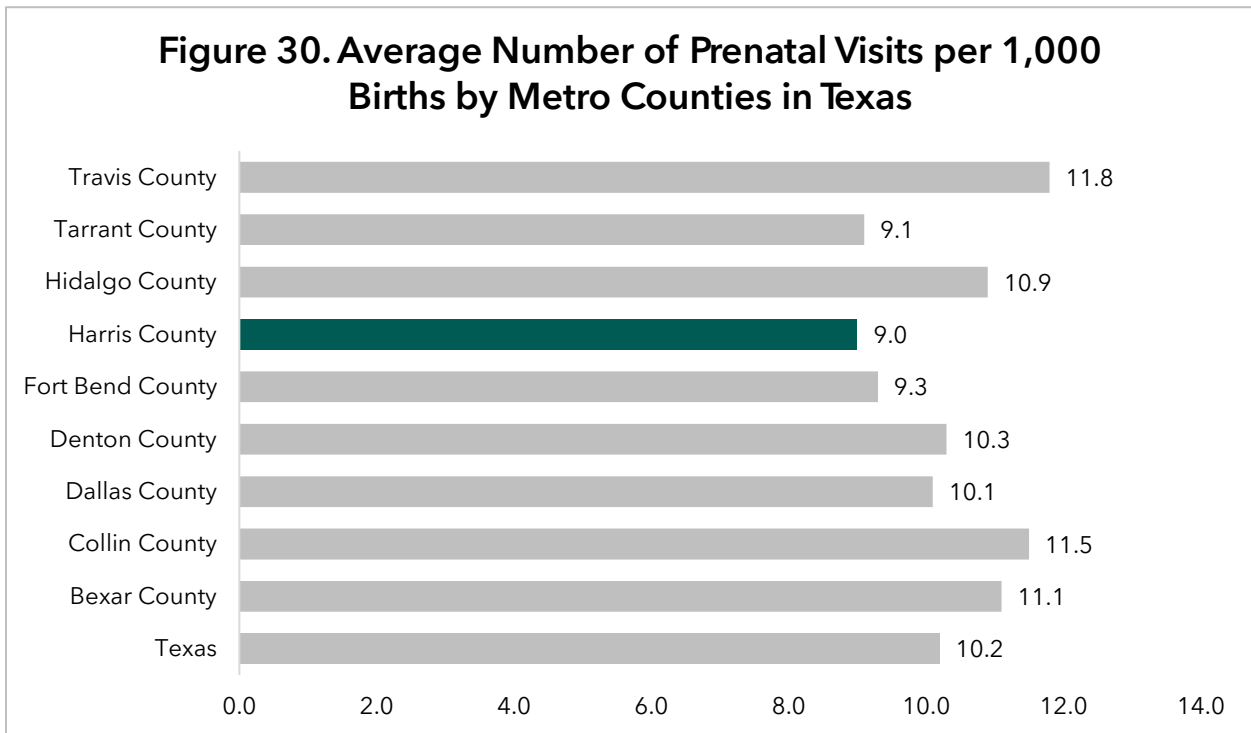
Every child deserves access to the mental health care and support they need to **thrive**—today and for their future.

Figure 29. Student-School Counselor Ratio, 2023-2024



Maternal Health

Access to consistent prenatal care plays a major role in supporting healthy pregnancies. Early and regular prenatal visits help identify conditions that may cause complications, monitor fetal development, and connect families to needed supports.^{xcvii} National data from the U.S. Department of Health and Human Services show that women who do not receive prenatal care are three times more likely to deliver low-birth-weight infants and face a higher risk of infant loss.^{xcviii} Yet too many mothers still lack access to timely care. The March of Dimes reports that 22% of pregnant women in Texas receive inadequate prenatal care, compared with 15.7% nationwide.^{xcix} Among the large metro counties in Texas, Harris County has the lowest average number of prenatal visits (9 per pregnancy), far below counties like Travis and Collin, where averages exceed 11.5 visits (Fig. 30).^c



Stable health coverage is a critical part of ensuring mothers can receive this care. Nearly half of Texas women of childbearing age with low incomes lack health insurance—more than double the national average.^{ci} Gaps in coverage can leave mothers without care before they become pregnant, delay prenatal visits, and limit postpartum follow-up.^{cii} Research consistently shows that when low-income women gain continuous coverage before, during, and after pregnancy, rates of maternal and infant mortality fall, birth outcomes improve, and mothers are more likely to receive preventive care, chronic disease management, and mental health support.^{ciii}

Maternal health outcomes also reflect longstanding inequities that place some groups of women at far greater risk. Across the United States, and in Texas, Black women experience significantly higher rates of severe maternal morbidity and pregnancy-related death than

White women, regardless of income or education.^{civ} Studies from the CDC and the Texas Maternal Mortality and Morbidity Review Committee show that factors such as structural racism, unequal access to high-quality care, implicit bias in medical settings, and higher rates of chronic conditions contribute to these disparities.^{cv} Hispanic and Indigenous women also face elevated risks, including higher rates of delayed prenatal care and preventable complications. These patterns highlight the uneven burden of maternal health challenges across different racial and ethnic groups and provide important context for understanding the broader conditions that affect family and child well-being in Texas.

A PATH FORWARD

- **Reduce Coverage Gaps for Low-Income and Immigrant Families:** Invest in community-based enrollment assistance, language access, and policies that ensure children can access coverage regardless of parental immigration status.
- **Strengthen Childhood Vaccination Efforts:** Increase funding for public health outreach, school-based vaccination programs, and evidence-based campaigns to counter misinformation and improve immunization rates.
- **Expand School-Based Mental Health Services:** Increase funding to hire more school counselors, social workers, and psychologists to meet recommended student-to-staff ratios and provide early intervention.
- **Integrate Mental Health Supports Across Systems:** Strengthen coordination between schools, healthcare providers, and community organizations to ensure children receive continuous and comprehensive mental health care.
- **Improve Access to Prenatal and Maternal Care:** Expand continuous Medicaid coverage for mothers before, during, and after pregnancy, and increase access to early prenatal care—particularly in underserved communities.
- **Strengthen the Maternal and Child Health Workforce:** Expand the use of doulas, midwives, and community health workers to improve care access, patient trust, and health outcomes.



SAFETY & OPPORTUNITY

Opportunity Youth

Opportunity Youth – young people aged 16-24 years old who are neither in school nor working – represent a critical warning sign for Harris County’s future. When youth disconnect from education and employment, they face higher risks of long-term unemployment, low wages, poor health, and involvement with the justice system, while local employers lose potential talent.^{cvi,cvii} National research shows that Black, Hispanic/Latino, and Native youth are more likely to be disconnected than their White peers, reflecting long-standing inequities in schools, neighborhoods, and access to jobs and transportation.^{cviii} In Harris County, these same patterns appear in the share of Opportunity Youth by race and ethnicity. For community organizations, this means that efforts to re-engage young people—through paid internships, apprenticeships, flexible high school and GED programs, mental health supports, and youth-centered workforce initiatives—must be tailored to the communities where disconnection is most common, especially communities of color and neighborhoods with concentrated poverty.^{cix}

The 89th Texas Legislature passed several bills to better support Opportunity Youth, particularly in workforce development. Senate Bill 1143 (Blanco/Talarico) strengthens strategic planning and transparency by requiring Local Workforce Development Boards to include Opportunity Youth related goals, objectives, and metrics in their strategic plan and report out on Opportunity Youth related funds, programs, and activities. This legislation will provide the groundwork to iterate on successful programs. Other bills like Senate Bill 365 (Eckhardt et al./Howard et al.)-reducing academic fresh start from scores earned 10 years ago to five years ago, House Bill 120 (Bell et al./Schwertner)-strengthening college and career readiness in Texas high schools, and House Bill 2081 (Bucy et al./ Menéndez) –establishing the Building Better Futures program for students with intellectual or developmental disabilities, also help students and young adults overcome barriers to complete education and enter the workforce.

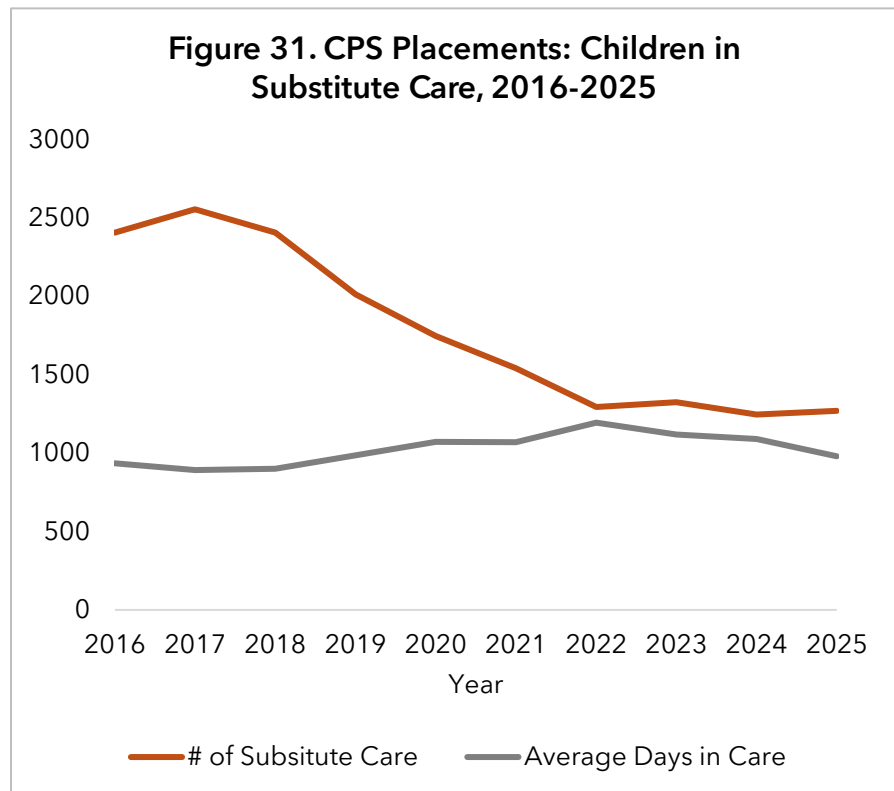
Human Trafficking

Human trafficking is a hidden but significant threat to children and families in Harris County. State and local agencies identify Houston as a major hub for both sex and labor trafficking, in part because of its size, international port, and network of highways that connect the region to the rest of Texas and the U.S.^{cx} Children and teens are especially vulnerable when they experience family violence, run away from home, lack stable housing, or live in households facing deep economic hardship.^{cxii} Systems involved children--those who have been through the juvenile justice or foster care system--are at a higher risk of human trafficking. In the 89th Legislative Session, HB 451 (Thompson et al./Paxton) was passed, requiring that all foster care and juvenile justice involved children are screened for risk of commercial sexual exploitation using the Child Sexual Exploitation Identification tool, or the “CSE-IT”. This allows proactive referral of supports for our most vulnerable children.

Trafficking occurs in many settings (e.g., hotels, restaurants, nail salons, domestic work, construction, agriculture, and online spaces), which makes it difficult to detect and measure.^{cxii} In response, Texas and Harris County have invested in task forces, specialized court programs, school-based training, and victim services that help professionals recognize warning signs and connect youth to safety and support. For community organizations, understanding which neighborhoods and groups face the greatest risk is key to directing outreach, prevention education, and survivor-centered services where they are needed most.

Foster Care

Foster care involvement is another sign of how many children in Harris County grow up facing serious instability. Youth enter foster care after experiences such as abuse, neglect, or chronic family crisis, and they often carry untreated physical and mental health needs into the system. State data show that tens of thousands of children in Texas are in the legal custody of the Department of Family and Protective Services each year,^{cxiii} including



several thousand in the Houston region alone.^{cxiv} Figure 31 shows that from 2016 to 2025, the number of children in substitute care declined, from 2,406 in 2016 (peaking at 2,555 in 2017) to 1,270 in 2025. But while fewer children entered or remained in substitute care overall, the time they spent there grew longer for much of the period. Average days in care rose from about 935 days in 2016 to a high of about 1,194 days in 2022—more than three years—before improving to 980 days in 2025. This trend matters: even as caseloads shrink, long stays can signal barriers to timely permanency, such as limited family support services, placement instability, or delays in reunification, guardianship, or adoption.^{cxv} The recent decline in average days is encouraging, but the data underscore the need to keep investing in prevention, family-based supports, and permanency-focused resources so children can safely achieve stable, lasting homes faster.

Older youth in care face particular risks as they approach adulthood.^{cxvi} Each year, roughly 200 young people in Harris County age out of foster care at 18 without a permanent family, making them more vulnerable to homelessness, unemployment, and exploitation.^{cxvii} National and Texas-specific research finds that former foster youth are less likely to finish high school or college and more likely to struggle with housing, work, and health after leaving care.^{cxviii,cxix} In response, local efforts such as the HAY Center's new campus in Houston now provide dedicated housing, case management, and life-skills support for youth transitioning out of care, reflecting a broader shift toward helping foster youth build stable adult lives rather than simply exiting the system at 18. \

CONCLUSION

Looking across the Greater Houston region, the data points to a reality shaped by both forward movement and persistent obstacles. Many families, educators, and community organizations are making meaningful efforts to support children's well-being, yet structural challenges—such as economic instability, uneven access to services, and entrenched inequities—continue to shape outcomes for too many.

Even so, there is reason for optimism. The determination of Houston's children and the dedication of those who serve them continue to create opportunities for progress. By closely examining these patterns, we can better align our efforts, strengthen collaboration, and respond with purpose to the needs we see.

As we conclude another year of examining the quality of life for Houston's children, it is clear that while many challenges remain familiar, our commitment to addressing them has not diminished. We remain focused on a future where every child and family has access to the essentials—stable housing, quality education, reliable health care, and the opportunity to succeed.

About CHILDREN AT RISK

Established in 1989, CHILDREN AT RISK is an organization dedicated to improving the quality of life of Texas children through strategic research, public policy analysis, innovation, community education, collaboration, and advocacy. We envision a world where children's needs are made a priority, and where children and their families have the resources needed to truly thrive. In order to bring this vision to fruition, CHILDREN AT RISK focuses its efforts on public education, child trafficking, and child health. We would like to extend a special recognition and thanks to the United Way of Greater Houston for generously funding this publication. We would also like to thank the members of our board, the CHILDREN AT RISK Institute, and community partners for providing us with research, data, wisdom, and feedback on the book.

Disclaimer

A majority of the information, data and statistics found in this edition of Growing Up in Houston: Assessing the Quality of Life of Our Children has been obtained from external sources. CHILDREN AT RISK has made every reasonable effort to verify the accuracy of all such information contained herein. Responsibility for actual content rests with the organization providing the information, and accordingly CHILDREN AT RISK makes no representations, guarantees or warranties as to the accuracy, completeness, or currency of such outside information. CHILDREN AT RISK disclaims any and all liability from claims or damages that may result from information, data or statistics provided by external sources and contained within this publication.



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