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**Social Indicators
Survey Center**



*New York City Social Indicators 1997
A Tale of Many Cities*

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PART I: INTRODUCTION

How does one take the measure of New York City? Even casual visitors can see and feel and sense that it is different from other places. Its buildings are bigger, its pace quicker, its streets noisier, and its sidewalks more crowded than those of other communities. It often overwhelms tourists from Europe and Asia, who are typically told that it is the least American of cities and that they must travel far from New York City if they are to understand and know the United States... In this case, the stereotype is correct: New York City is different.¹

So begins Columbia University historian Kenneth Jackson in his introduction to *The Encyclopedia of New York City*. We are not so bold as to attempt to get “the” measure of this rich and diverse city. But with this inaugural report from the *New York City Social Indicators Survey*, we hope to provide “a” measure by using Social Indicators to construct a social thermometer with which to take the temperature of the city’s varied residents.

Social Indicators measure individual and family well-being. Historically, they have been used not only to describe well-being, but to monitor changes over time and evaluate the impact of policy changes. The *New York City Social Indicators Survey* builds on this tradition to measure and track the well-being of the city and its residents. We have constructed indicators of well-being using individual and family level data collected through telephone interviews with adults from a random sample of households in the city. The Indicators measure how individuals and families are faring in the key domains of human, financial, and social assets; economic and social living conditions; adequacy of institutional supports; and satisfaction with the city and its services.

This approach has several advantages. The Indicators measure several domains of well-being, thereby drawing a broad, composite picture. Because they are based on household data, the Indicators generate a detailed portrait of well-being at the individual and family level. Because they are based on a sample of the entire population, the Indicators allow comparisons between different sub-populations and groups.

We hope that the *New York City Social Indicators Survey* will be useful to the residents and decision makers of the city – and of interest to future historians who look back at the “social temperature” of the city at the close of the 20th century.

The temperature of the city is never static, of course. It changes with fluctuations in the economy, new government policies, and changes in the population. In order to track these changes, we will use this same methodology to take the temperature of the city several times over the coming years. This will allow us to monitor changes in the well-being of New Yorkers over time as well as to judge the impact of changing economic, public policy and social conditions.

In this inaugural report, we use the first round of the *New York City Social Indicators Survey* to describe the well-being of all New Yorkers in 1997 and to compare their well-

being to that of other American residents. The story becomes a “tale of many cities” as we compare the well-being of different groups living side by side in the same city.

The Backdrop: A Period of Growing Inequality

Charles Dickens begins his classic, *A Tale of Two Cities*, by observing that “*It was the best of times, it was the worst of times...*” Though Dickens was describing Paris and London during the American and French Revolutions, the description is also quite apt for New York City at the close of the century.

There is no question that, for many New Yorkers, these are the best of times. The financial industry has flourished in the last five years, along with the rest of the New York City economy that derives its strength from Wall Street. The tourist industry is once again thriving. Theatre and restaurant businesses are booming. At long last, even unemployment is beginning to decline, and crime has plummeted. And, truly the icing on the cake, the New York Yankees are reigning as World Champions. In short, New York City is, at the moment, a splendid place to live and a great place to visit.

Still, for many New Yorkers, these are the worst of times. Alongside those with high incomes and great wealth live others – more than one in four – who are poor. In this city, as in the rest of the country, the rich have gotten richer and the poor have gotten poorer. During the past two decades, the average real incomes of the lowest-income families with children fell more than 20 percent nationwide while the incomes of high-income families increased by nearly 30 percent. It is not only the very poor who have fallen behind, however. The real incomes of the bottom three-fifths of families with children in the U.S. are lower now than they were in the mid-1980s.²

The United States of America has more economic inequality than virtually all other Western industrialized nations,³ and among American cities, New York City appears to be the most unequal.⁴ Great inequality is not a new phenomenon for the country or the city. The dramatic pulling apart of rich and poor is new, however. In the early 1970’s, incomes increased for both rich and poor Americans; from 1940 to World War II, the poor actually gained more than the rich. The story has been very different in the last 20 years. As the rich have gotten richer, economic and social policy changes have left the poor further and further behind. And among all U.S. cities, New York stands out as experiencing the greatest rise in inequality during this period.

Should New Yorkers be concerned about the persistent and growing income inequality in the city? *The answer depends in part upon the extent to which income inequality translates into equally large inequalities in well-being. The extent to which those at the bottom suffer serious compromises in economic security, health and basic living conditions should be of concern to all New Yorkers, no matter which side of the story—the best or worst of times – they experience.*

The Setting: The Most Diverse City in the United States

As social workers, the authors of this report are charged professionally with paying disproportionate attention to the needs and conditions of the poor. Indeed, in view of the increases in income inequality during the last quarter of the century, it would be professionally remiss not to recognize and address issues of poverty and inequality.

It would also be professionally remiss to address *only* these issues. As our subtitle suggests, New York City is more than just a tale of two cities, rich and poor. New York is the most densely populated and most diverse city in the United States. Within the few square miles of the city's physical geography we find the myriad subpopulations that make up the social geography of the country as a whole: five boroughs with distinct histories, economic and residential patterns; a mix of racial, ethnic, and cultural groups; the highest proportion of immigrants and former immigrants of any city in the U.S.; and a diversity of family and household forms ranging from young single professionals to families with children to the elderly. Within and between these groups are multiple, sometimes overlapping, sometimes insular stories. The first-year data upon which this report is based cannot tell the full story of any of these groups because, by their very nature, stories emerge over time. What these data can and do provide is a first look at the well-being of some of the many different groups in the city.

The Structure of This Report

We begin by describing the distribution of well-being for all New Yorkers across multiple domains. Our analysis uses the full distribution of the Social Indicators to compare New York to the U.S., and then to draw comparisons across the five boroughs of the city and across race, ethnicity and immigration status.

The second section of the report focuses on compromises in well-being for particularly vulnerable groups of New Yorkers. By design, the Social Indicators describe well-being as a continuum. At the high end, quality of life is virtually unlimited: from robust health and a sense of safety on the streets to luxurious housing, advanced education, gratifying and lucrative economic activities, and access to the most advanced medical care. At the low end, in contrast, the range is quite limited. On critical dimensions of well-being we can identify a threshold below which health, safety or psychological well-being are likely to be compromised. There is good evidence, for example, of the risk to well-being posed by crime, food insufficiency, substandard and unstable housing, inadequate education and medical care. We measure compromises on these dimensions by recoding the basic Social Indicators into Indicators of Distress. The Distress Indicators are then used to compare risk across New Yorkers who differ by income, age and family type.

The New York Social Indicators

The *New York City Social Indicators Survey* captures aspects of how New Yorkers are faring in the present and the assets or "capital" they have acquired for the future. Our choice of indicators reflects theoretical knowledge about which factors are most predic

FIGURE 1

INDIVIDUAL AND FAMILY ASSETS

Human Assets

- Adult health & disability
- Adult educational achievement
- Child health & disability
- Children's school progress
- Children's behavioral adjustment

Financial Assets

- Net worth (family)
- Home ownership

Social Assets

- Access to capital in emergency

LIVING CONDITIONS

Economic Conditions

- Income relative to poverty
- Difficulty paying utility bills
- Hunger due to lack of money

Social Conditions

- Housing quality & crowding
- Freedom from crime
- Perception of neighborhood safety
- Perception of neighborhood quality

INSTITUTIONAL SUPPORTS

Health Care

- Health insurance coverage
- Rating of health plan

Education

- Parents' rating of safety of child's school
- Parents' rating of educational quality of child's school
- Formal care for preschool children

SATISFACTION WITH CITY AND ITS SERVICES

- New York City as a place to live
- New York City getting better or worse
- Police protection
- Public schools

tive of short- and longer-term well-being, along with practical considerations relating to our use of telephone surveys to collect data. Following is a brief discussion of the measures used as Social Indicators and Distress Indicators (Figure 1). A full description of their measurement is included in Appendix A.

***Individual and Family Assets* are the human, financial and social resources that individuals accumulate starting in childhood. They are a critical component of well-being because they constitute not only the wealth of the present but also “capital” for the future.**

◆ Human Assets

Health and education are important components of quality of life in the short term and key ingredients in social and financial well-being over the life course. We measure the health of adults and children using self-reported health status and the presence of activity limiting conditions or disabilities. We measure adults’ educational achievement in years of school completed and children’s achievement in terms of grade level appropriateness. In addition, we ask parents to rate their children’s emotional adjustment using a brief, age-adjusted scale of behavior problems.

The Distress Indicators for human assets are the thresholds below which physical or economic well-being are likely to be compromised: families in which adults or children suffer from poor health or disabilities; in which any adult lacks a high school education; in which children are one or more grades behind in school or in special education; or in which children “often” demonstrate two or more adjustment problems

◆ Financial Assets

Financial Assets are equally important factors in both short- and longer-term well-being. The most important and obvious measure is net worth, which counts all forms of wealth (including home equity) minus outstanding credit card debt. Home equity receives particular attention as the most common source of wealth for most households. The Distress Indicator for financial assets is the lack of any assets at the family level – families reporting zero assets or credit card debt greater than assets.

◆ Social Assets

Social assets are the resources available through kith, kin and community networks. Short term loans from family and friends provide one indicator of the richness of these resources. Short-term or emergency financial assistance can help families weather unexpected economic crises. It can also facilitate strategic investments for the future by providing, for example, school tuition or start-up money for a small business. We measure social assets in terms of families’ ability to borrow cash from family or friends in an emergency. Our Distress Indicator is the inability to borrow even \$100 from social networks.

Assets are excellent measures of future potential. But New Yorkers live in the present. Living Conditions describe the immediate life circumstances of families and their members.

◆ Economic Conditions

Income relative to family size is the most widely agreed upon measure of economic well-being in the short run. The official U.S. poverty threshold provides a common metric by comparing a family's cash income to an inflation-adjusted minimum income based on family size. When these data were collected, a family with two adults and two children with income at or below \$16,036 was deemed poor. Families with incomes between the poverty level but no higher than twice the poverty level are often referred to as "near poor." For this report we consider those with incomes between 200 and 400 percent of poverty to be "middle class" and those with incomes above 400 percent of poverty to be "affluent."

Although income poverty is a widely used indicator of economic well-being, it does not reflect differences in standard of living that result from non-cash income (such as in-kind assistance from government or family) or variations in financial burdens at the family level (such as housing or child care costs). The Social Indicators capture severe compromises in families' net resources using two measures of acute economic hardship: difficulty paying utility bills and experiences of hunger. Experience of either form of hardship is also coded as an Indicator of Distress.

◆ Social Conditions

Safety is fundamental to a good quality of life, and we include an objective measure, experience of crime (robbery or burglary) in the prior year, along with a subjective measure of the perceived safety of the immediate neighborhood. We measure living conditions along several dimensions. The metric for housing quality is housing that is free from major structural problems (such as holes in walls and windows) or chronic breakdowns in heating and plumbing. We use a standard measure of residential crowding by considering the rooms per person in the household. Subjective perceptions of neighborhood quality are also rated.

The Distress Indicators are serious compromises in these living conditions: substandard housing (with serious structural or chronic utility problems), overcrowded housing (with more than 1 person per room), living in a neighborhood rated very to somewhat unsafe and only fair to poor in quality, and experience of personal or property crime.

Individuals and their families are never entirely self-sufficient. All rely on some forms of external support to assure their well-being. The availability and quality of Institutional Supports such as school and health care are particularly important factors in security and well-being.

◆ Health Care

Health insurance is one of the most critical forms of external support for families. We measure security from the risk of unexpected large medical bills in terms of insurance coverage for family members and satisfaction with health plan among the insured. Our Distress Indicator measures whether adults or children in the family currently lack health insurance.

◆ Education

Basic education is a necessary support for all children. There is growing consensus that educationally-oriented preschool is also a critical support to prepare younger children for school success. For families with children of school age (6 to 17), we measure the quality of the child's school based on parents' rating of its safety and educational quality. For families with younger children (3 to 5 years), we consider whether the child has access to any formal out-of-home care, in a preschool, early education program or day care. Our Indicators of Distress capture compromises in school quality (schools considered unsafe or to be providing a poor education) and lack of any formal care in the prior month for children between 3 and 5 years of age.

Satisfaction with the City and its Services provide a global measure of how New Yorkers experience their city.

Respondents' rating of New York as a place to live, together with responses about whether the city is getting better or worse, give the broadest reading of how New Yorkers evaluate the city and its institutions. We also measure satisfaction with specific public services, including the city's public schools and police protection.

The New York City Social Indicators Survey

The data upon which this report is based were collected during the summer of 1997 using a telephone survey of a random sample of 1000 New York City households and a supplementary sample of 500 families with children. The sample was designed to represent all English- and Spanish-speaking New Yorkers. The unit for data collection and analysis is the "family." All descriptive statistics are weighted to represent the population of families in the city. Our definition of family differs from that used in some other data, including the Census. *We define a family as the survey respondent and his or her spouse or domestic partner and any resident children under 18 for whom they are responsible as parents, stepparents or guardians.*

Some specific differences from other data sources should be noted. First, we consider respondents to be partnered whether or not they are legally married to their domestic partners. *Estimates from the New York City Social Indicators Survey may therefore show higher rates of two-adult and two-parent families than estimates based on other definitions and data sources.* Second, we count all individuals in our survey as part of a fam-

ily. Individuals without partners or resident children are treated as a “family of one” even if they are sharing a residence with other non-nuclear family members (such as adult children) or non-related adults (such as roommates). This definition differs from that used in many statistics based on Census data, such as the poverty rate, which are based on households that count all adults and children related by blood or marriage who share a residence. For extended families sharing a residence, the *New York City Social Indicators Survey* definition does not assume shared resources. *Our unit of analysis will therefore count fewer resources and may produce higher estimates of financial hardship for these families.* Finally, the respondent for the survey is always a randomly selected adult in the family unless there are resident children, in which case we select the primary caregiver for those children. *Our adult respondents are therefore more likely to be female than those in other data sources.*

The survey sample and response rates are described in Appendix B. We have used statistical methods to correct for potential sampling biases. We have corrected for the underrepresentation of households that do not have regular phone service by giving extra weight to those who have intermittent services. Other biases, including disproportionate participation by more highly educated respondents, have been corrected by post-stratification weighting using Census data. These weighting procedures are described more fully in Appendices C and D. Some limitations in the representativeness of the sample could not be overcome. Most notable is the exclusion of individuals who could not be interviewed in English or Spanish. Of all households within the random sampling frames who were determined to be eligible for the survey, nearly half (48-49 percent) refused to participate. Although this may cause some unmeasured biases in the final sample, once the data are correctly weighted, the sample very closely approximates Census data for the city on major demographic and economic characteristics.

PART II: THE CITY AND ITS RESIDENTS

We begin the story by considering New York as a physical place. The use of Social Indicators allows us to “take the temperature” of the city as a whole and to compare New York to the rest of the nation. We also look *within* the boundaries of the city by comparing the well-being of New Yorkers across the five boroughs.

Human Assets

There is both good news and bad news about two of the most fundamental human assets of New Yorkers: health and education (Table 1). The news about health is good. More than three fourths of adults report either good or excellent health. Even more encouraging is the finding that over 90 percent report their children’s health to be good to excellent. Comparable data from nationally representative surveys suggest that New Yorkers are about as healthy as Americans are on the whole.⁵

With respect to education there is less cause for cheer — and in fact, cause for worry. The good news is that the majority of New York children are at or above the grade level for their age. Although children seem to be doing pretty well in school on average, the fact that as many as 16 percent are falling behind or in special education is a cause for concern. Even more worrisome is the fact that school achievement declines steadily with age. While 88 percent of New York children under 10 are at grade level, only 79 percent of those between 15 and 18 are doing as well. The large number of New York children who are falling behind as they approach graduation is consistent with indicators of educational achievement among adults in the city. The proportion of New York adults with college or post-graduate degrees is about the same as the national average of 22 percent.⁶ But almost one third of the New York City adults in our survey had only a high school education and about the same proportion had not completed high school – a rate much higher than the national dropout rate of 19 percent.⁷

There are also notable differences across boroughs in human assets, particularly those of adults. At the top of the distribution, over 80 percent of adults in Manhattan are in good to excellent health and over half of adult respondents in Manhattan and Staten Island have some post-secondary education. In the Bronx, by way of contrast, only two-thirds of adults are in good health and 47 percent have less than a high school education.

Given the crucial contribution of education to economic success, evidence of poor outcomes for so many of the city’s residents is disturbing. New York City is notable for the quality of its elite educational institutions – from exclusive preschools to highly competitive public high schools, private preparatory schools, and universities. But the majority of the city’s residents rely not on these elite institutions but on the vast system of public schools. *The New York City Social Indicators Survey raises alarm about the number of adults in*

TABLE 1						
	Bronx	Brooklyn	Manhattan	Queens	Staten Island	All NYC
(unweighted n)	n=240	n=483	n=192	n=375	n=83	n=1373
(% weighted)	18%	36%	19%	23%	5%	100%
Adult's health is...						
Excellent	22%	28%	41%	27%	50%	30%
Good	46%	47%	41%	51%	42%	46%
Fair	18%	24%	13%	19%	4%	19%
Poor	14%	2%	5%	3%	3%	5%
Adult has condition that...						
No limiting condition	80%	78%	84%	83%	92%	81%
Limits work	16%	10%	7%	10%	5%	10%
Prevents work	4%	13%	8%	7%	3%	9%
Adult's highest education is...						
College degree or more	12%	13%	44%	23%	25%	21%
Some post high school	16%	18%	12%	25%	28%	19%
Only high school/GED	25%	35%	20%	38%	28%	31%
Less than high school	47%	35%	25%	14%	19%	30%
Child's health is...^a						
Excellent	65%	58%	63%	65%	83%	63%
Good	29%	35%	29%	29%	14%	30%
Fair	6%	6%	7%	5%	2%	5%
Poor	1%	2%	0%	1%	1%	1%
Child had disability that limits...^a						
No limiting condition	96%	94%	92%	96%	97%	95%
Activities a little	2%	5%	7%	5%	1%	4%
Activities a lot	5%	6%	5%	3%	1%	5%
Child is...^a						
At or above grade level	81%	84%	81%	85%	84%	84%
Below grade level	19%	16%	19%	15%	16%	16%
Parent reports child has...^a						
No behavior problems	51%	38%	32%	46%	40%	42%
At least one problem	22%	33%	35%	29%	23%	29%
Two or more problems	28%	30%	33%	25%	38%	29%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						
^a <i>Group differences not statistically significant at 95% confidence level.</i>						

the city who lack even basic education and the number of New York's children who are falling behind. This must raise questions about the adequacy of public institutions that educate the city's children and serve adults in need of basic and remedial education.

Financial Assets

Due to small sample sizes and measurement difficulties, our data on financial assets must be interpreted cautiously. Even the most sophisticated surveys of wealth tend to understate the true value of financial assets, and the simple measures used in this survey are likely to undercount wealth even more. Respondents who refuse to answer sensitive questions about their family finances exacerbate the problem. Comparisons between boroughs may be particularly unreliable due to small sample sizes.

Keeping in mind the limitations, our Social Indicators begin to paint a portrait of inequality in the city (Table 2). The U.S. is notable among rich countries for the extent of inequality in the distribution of wealth.⁸ In New York City, the most unequal of American cities, the Social Indicators reveal the expected story: extremes of good news and bad news.

In terms of the good news, it is notable that 16 percent New York families report a net worth, including home equity and other forms of wealth, of more than \$100,000. Many New York families are clearly doing very well. This good news is tempered, however, by the fact that comparable data for the U.S. as a whole indicate that as many as 30 percent of all families have assets in excess of \$100,000.⁹ The worst news about the financial well-being of New Yorkers is the very large proportion of families who have zero or negative net worth. Forty four percent of families report no assets. One-half of these families have no net worth and the other half owe more than they own. This proportion is much higher than the 12 percent of all U.S. families that report no or negative wealth,¹⁰ suggesting that on average, New York families lag well behind the rest of the country in their accumulation of assets.

Differences in asset accumulation are also pronounced across the boroughs of New York. Nearly one-third of Staten Island residents have assets in excess of \$100,000; in the Bronx, in contrast, only 8 percent of residents have this level of wealth and over one-half report no or negative net worth.¹¹

One important factor in the gap between New York and the rest of the country is much lower rates of home ownership in the city. Home equity is the most common form of wealth for U.S. families, but nearly three-quarters of New Yorkers do not own their homes. This is more than twice the national average of 35 percent.¹² Across boroughs, large differences in the rate of home ownership parallel and partially explain differences in asset accumulation. Nearly half of families in Staten Island and Queens are home owners; fewer than one-quarter of those in the Bronx and only 11 percent of those in Manhattan own their home.

In comparison to the U.S. as a whole, a much smaller proportion of families in New York

TABLE 2 - FINANCIAL ASSETS: NEW YORK CITY AND THE BOROUGHES

	Bronx	Brooklyn	Manhattan	Queens	Staten Island	All NYC
(unweighted n)	n=240	n=483	n=192	n=375	n=83	n=1373
(% weighted)	18%	36%	19%	23%	5%	100%
Family's total assets are...						
\$100,001 or more	8%	11%	11%	30%	31%	16%
\$5,001 to \$100,000	30%	19%	21%	20%	18%	21%
\$1 to \$5,000	9%	25%	13%	22%	7%	19%
\$0 or negative	53%	45%	55%	28%	44%	44%
Family...						
Owns home	23%	19%	11%	46%	47%	26%
Rents home	70%	71%	86%	47%	44%	67%
Is just "staying there"	7%	10%	3%	7%	10%	8%

TABLE 3 - SOCIAL ASSETS: NEW YORK CITY AND THE BOROUGHES

	Bronx	Brooklyn	Manhattan	Queens	Staten Island	All NYC
(unweighted n)	n=240	n=483	n=192	n=375	n=83	n=1373
(% weighted)	18	36	20	22	4	100
Family could borrow from a relative or friend...						
At least \$10,000	10%	16%	32%	22%	22%	20%
\$1,000 but not \$10,000	32%	34%	24%	29%	47%	31%
\$100 but not \$1,000	32%	36%	27%	36%	27%	33%
Not even \$100	26%	14%	17%	14%	5%	16%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						

own their homes and have accumulated any assets in excess of their debts. Should we be concerned about the large proportion of New Yorkers with no assets? We may consider wealth, home ownership and access to capital as luxuries. If so, the fact that they are beyond the reach of most New York families may be of little concern to the city as a whole. *On the other hand, financial assets are not only a source of economic security, but also a fuel for economic creativity, and a source of social stability. Vast disparities in asset accumulation, and the lack of any assets in so many New York City families, may be a source of concern to us all.*

Social Assets

Access to capital from family and from friends is a form of social asset. In small amounts, loans from family or friends may be a critical form of support when families face a financial crisis or need to make a routine transition such as a residential move. In larger amounts, such loans can provide opportunities for starting small businesses and other forms of investment.

About half of New York families believe they have access to at least a small financial cushion of at least \$1,000 (Table 3). Twenty percent have access to \$10,000 or more. In sharp contrast, as many as 16 percent of families do not believe they could borrow even \$100 in an emergency. Differences across boroughs are pronounced. In the Bronx, 26 percent of families could not borrow even \$100 and a scant 10 percent have access to as much as \$10,000. In Manhattan, few families report that they could not raise \$100, while almost one-third have access to \$10,000 or more.

Economic Conditions

Given the growth of income inequality, some observers have described New York City as “hollow in the middle.”¹³ Our indicators of human, financial and social assets suggest the city may be better described as “bloated at the bottom” by the large number of families who lack basic education and who have failed to accumulate any financial wealth. Indicators of current economic well-being tell a very similar story (Table 4).

At the top of the income distribution, 5 percent of New Yorkers live in families with incomes greater than 10 times the Federal poverty level – the same proportion that is observed in the nation as a whole.¹⁴ But the 29 percent of New York families with incomes that fall below the Federal poverty threshold is nearly twice the 15 percent of U.S. families who fall below the threshold *when we apply the same definition of family resources* to Census data. In comparison to conventional Census Bureau estimates that count all household income, the *New York City Social Indicators Survey* measures family income by counting only the resources of nuclear family members (respondent, spouse/partner and dependent children); this overestimates poverty by approximately 4 percentage points. Nevertheless, *the evidence that New York City is “bloated at the bottom” is unambiguous.*

TABLE 4 - ECONOMIC CONDITIONS: NEW YORK CITY AND THE BOROUGHES						
	Bronx	Brooklyn	Manhattan	Queens	Staten Island	All NYC
(unweighted n)	n=240	n=483	n=192	n=375	n=83	n=1373
(% weighted)	18%	36%	19%	23%	5%	100%
Family income relative to poverty line...						
More than 10 times poverty	3%	1%	13%	5%	1%	5%
Between 4 and 10 times poverty	15%	17%	26%	27%	43%	22%
Between 2 and 4 times poverty	25%	27%	21%	22%	26%	24%
Between 1 and 2 times poverty	21%	25%	15%	20%	2%	20%
At or below poverty	37%	30%	25%	27%	29%	29%
Due to (lack of) money, utility bills were...						
Always paid on time	72%	82%	88%	84%	89%	82%
Sometimes late	26%	17%	11%	15%	11%	17%
Shut off	3%	1%	2%	1%	1%	1%
Due to (lack of) money, family members...						
Never hungry	89%	95%	93%	95%	98%	94%
Sometimes went hungry	11%	5%	7%	5%	2%	7%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						

This “bloating at the bottom” is highly concentrated in certain parts of the city. In Manhattan, poverty rates are close to the national average and the proportion of families with very high incomes is nearly three times the national average. The enormous income of some of its residents is part of what makes Manhattan such an exciting place to live and to visit. This extraordinary concentration of very high incomes supports the cultural activities – museums, theatres, operas, ballets, restaurants and athletic teams – for which the city is justly famous. At the opposite extreme, 37 percent of families in the Bronx have incomes at or below poverty and only 18 percent might be considered economically secure with incomes at least 4 times the poverty threshold.

Rates of income poverty correspond closely to compromises in living conditions. The rate of income-related hunger is twice as high in the city as in the nation.¹⁵ Extreme hardship is even greater in some parts of the city: more than one out of 10 families in the Bronx reported that family members sometimes go hungry, closer to three times the nationwide average. *That any family should go hungry in the richest country in the world, in the midst of the strongest economic recovery in recent history, must be regarded as a source of deep concern.*

Social Conditions

Given its scarcity, it is not surprising that housing inadequacies are even more acute than hunger in the city (Table 5). Housing problems are also considerably more common in New York City than in the U.S. as a whole. The good news is that the large majority of New York families live in housing that is not considered substandard nor overcrowded. But 16 percent of New York City families do live in substandard housing.¹⁶ Twelve percent of families also live in dwellings that have fewer than one room per household member. This is four times the national average.¹⁷

Physical security is one of the distinguishing features of a civil society and a powerful indicator of the quality of life. That crime rates have dropped substantially in New York City in recent years is certainly good news.¹⁸ Our Social Indicators reveal that 11 percent of New York City families were victims of a robbery or burglary in the prior year, only slightly higher than the national average of 9 percent.¹⁹ Whether that is good or bad news is unclear. By international standards the U.S. continues to have very high crime rates. On the other hand, 30 percent of adults interviewed for the *New York City Social Indicators Survey* report that they feel very safe walking in their neighborhood at night and another 43 percent consider themselves at least somewhat safe. This is encouraging news about the city. And it provides further evidence that the experience of New Yorkers may not be dramatically different from that of Americans more generally: in response to a similar question in a 1997 Gallup poll, 61 percent of U.S. residents indicated that they were not afraid to walk near their homes at night.²⁰

The majority of New Yorkers also consider their neighborhood a pretty good or very good place to live. But it clearly depends on where in the city they live. When asked to rate their neighborhood on a scale from 1 to 10 as a place to live, about one-half of U.S. residents give their neighborhood a 9 or 10.²¹ This is the same proportion of those in Staten Island who rate their neighborhood as very good. It is a much higher proportion,

in contrast, than the 22 percent of Bronx residents, or the 26 percent of Brooklyn residents, who rate their neighborhoods as highly.

TABLE 5 - SOCIAL CONDITIONS: NEW YORK CITY AND THE BOROUGHS

	Bronx	Brooklyn	Manhattan	Queens	Staten Island	All NYC
(unweighted n)	n=240	n=483	n=192	n=375	n=83	n=1373
(% weighted)	18%	36%	19%	23%	5%	100%
Family's housing is...						
Not substandard	76%	86%	80%	88%	98%	84%
Substandard	24%	14%	20%	13%	2%	16%
Rooms per person in family housing...						
2.2 or more	29%	37%	24%	39%	27%	33%
Between 1 and 2.2	60%	48%	68%	49%	73%	55%
Less than 1	11%	16%	8%	12%	0%	12%
Adult rates neighborhood as...						
Very good	22%	26%	34%	32%	48%	29%
Pretty good	26%	38%	34%	43%	23%	36%
Only fair	35%	31%	22%	20%	7%	27%
Poor	18%	5%	11%	4%	21%	9%
Walking in neighborhood at night adult feels...						
Very safe	24%	22%	40%	37%	31%	30%
Somewhat safe	40%	48%	44%	39%	32%	43%
Somewhat unsafe	11%	16%	9%	19%	15%	14%
Very unsafe	25%	14%	8%	5%	23%	13%
In the prior year family members were...^a						
Not crime victims	88%	91%	88%	89%	94%	89%
Robbed or burglarized	13%	9%	13%	11%	6%	11%

Unless otherwise noted, group differences are statistically significant at 95% confidence level

^a *Group differences not statistically significant at 95% confidence level*

Institutional Supports

The well-being of New Yorkers depends not only on their economic resources but also on the security and quality of a variety of external supports (Table 6). Some of these supports – such as health insurance – are provided by both government and market institutions. Others – such as schools – are provided through an even more diverse combination of public, community and religious institutions. While New Yorkers describe themselves as generally satisfied with many of these institutions, there appear to be serious problems of access and quality in some areas.

Health insurance coverage is one of the most important external supports for families and, for New Yorkers, one of the most problematic. Just over two-thirds of New York families were fully insured for the whole year through either private health plans or government programs such as Medicaid and Medicare. In nearly one-quarter of families, some or all of the family members lacked insurance when contacted. In another nine percent, at least one family member had gone without insurance at some point in the prior year. These numbers are considerably higher than the 14 to 15 percent of U.S. residents that are uninsured at a point in time, and the additional six to seven percent of adults who lack insurance for at least one month out of the year.²² The problem of no or unstable insurance is also highly concentrated in some New York communities: one-quarter of families in the Bronx, Brooklyn and Queens are uninsured, in contrast to 14 percent of those in Manhattan and only four percent of those in Staten Island.

On the other hand, the problem of obtaining health insurance appears to be much more acute for New Yorkers than the quality of the coverage they obtain. Among those who have some kind of health insurance coverage, about half describe themselves as very satisfied with their plan and another one-third are at least somewhat satisfied. New York parents are even more positive about the school their child attends. About two-thirds of parents agree that their child's school is safe and providing a good education; another one-quarter somewhat agree.

The proportion of parents who have confidence in their child's school varies by as much as 10 percentage points across the boroughs. Differences in children's access to early educational experiences are even more dramatic. City-wide, about one-third of families with a 3 to 5 year old child reported some use of preschool, early education or day care programs in the prior month. But in the most advantaged boroughs of Manhattan and Staten Island, nearly one-half to two-thirds of children had some formal child care experience in the prior year, while in the Bronx, over three-quarters did not.

Satisfaction with the City and Its Services

Most New Yorkers describe themselves as pretty well satisfied with life in the city (Table 7). Nearly two thirds rate the city as a pretty or very good place to live. The majority also rate police protection and public schools this highly. Satisfaction is lowest however, with the city's schools.

TABLE 6 - INSTITUTIONAL SUPPORTS: NEW YORK CITY AND THE BOROUGHES

	Bronx	Brooklyn	Manhattan	Queens	Staten Island	All NYC
(unweighted n)	n=260	n=483	n=192	n=375	n=83	n=1373
(% weighted)	18%	36%	19%	23%	5%	100%
Family members...						
All insured all year	68%	67%	74%	66%	66%	68%
Uninsured part of the year	4%	8%	13%	7%	30%	9%
Uninsured now	28%	25%	14%	27%	4%	23%
Among adults with health plan...						
Very satisfied	62%	49%	37%	51%	51%	49%
Somewhat satisfied	29%	36%	44%	38%	32%	37%
Somewhat dissatisfied	7%	7%	14%	9%	15%	9%
Very dissatisfied	3%	8%	5%	2%	3%	5%
Parent considers child's school safe^a						
Agrees	61%	60%	68%	74%	63%	64%
Somewhat agrees	24%	26%	20%	20%	17%	23%
Somewhat disagrees	10%	6%	6%	4%	14%	7%
Disagrees	5%	9%	7%	3%	6%	6%
Parent thinks child is getting a good education...^a						
Agrees	63%	60%	65%	70%	57%	63%
Somewhat agrees	28%	25%	13%	19%	32%	23%
Somewhat disagrees	5%	5%	8%	4%	1%	5%
Disagrees	4%	11%	15%	7%	11%	9%
Pre-school aged child (3-5 years) in pre-school or daycare						
Yes	20%	39%	64%	23%	45%	34%
No	80%	61%	36%	77%	56%	66%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						
^a <i>Group differences not statistically significant at 95% confidence level</i>						

TABLE 7 - SATISFACTION WITH THE CITY AND ITS SERVICES: NEW YORK CITY AND THE BOROUGHES

	Bronx	Brooklyn	Manhattan	Queens	Staten Island	All NYC
(unweighted n)	n=240	n=483	n=192	n=375	n=83	n=1373
(% weighted)	18%	36%	19%	23%	5%	100%
Adult rates New York city as a place to live...						
Very good	14%	13%	24%	17%	9%	16%
Pretty good	40%	46%	49%	42%	62%	45%
Only fair	36%	33%	24%	32%	24%	31%
Poor	10%	8%	4%	9%	4%	8%
Adult thinks that in the last few years New York has ...						
Become a better place	38%	32%	43%	32%	33%	35%
Remained about the same	38%	32%	41%	35%	35%	35%
Gotten worse	23%	37%	16%	33%	31%	30%
Adult rates police protection...						
Very good	20%	24%	19%	26%	26%	23%
Pretty good	32%	30%	53%	44%	57%	39%
Only fair	27%	30%	16%	23%	16%	25%
Poor	22%	15%	12%	7%	1%	13%
Adult rates public schools...						
Very good	21%	19%	15%	20%	20%	19%
Pretty good	19%	44%	31%	30%	42%	34%
Only fair	40%	27%	31%	34%	17%	31%
Poor	20%	11%	23%	15%	21%	16%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						

Variation in satisfaction across boroughs is smaller but roughly parallel to variation in families' economic and living conditions. Once again, Manhattan and the Bronx exemplify the best and worst news about the city. Almost three-quarters of Manhattan's residents rate the city from pretty good to very good as a place to live; barely half of Bronx residents are so positive. Differences across the boroughs are most substantial in rating police protection. Eighty-three percent of the residents of Staten Island, and 72 percent of those in Manhattan, rate their police protection from pretty good to very good. In Brooklyn and the Bronx, barely half the residents say the same. *The magnitude of these differences is striking and raises provocative questions about equity in city services across the boroughs and neighborhoods of New York.*

PART III: NOT A MELTING POT

Taking the “average” temperature of New York tells us that the city is different from the rest of the country. On average, its residents are poorer in income and assets, less well educated, less likely to be homeowners, more likely to be living in overcrowded housing, less likely to have health insurance and less positive, overall, about their neighborhoods. But New York is *not* a city of averages; it is a city of diversity and extremes.

The richness of the racial, ethnic, national, religious, and linguistic diversity of New York City residents is vividly captured and celebrated by Nathan Glazer and Daniel Patrick Moynihan in their classic 1963 study, *Beyond The Melting Pot*:

*In 1660 William Kieft, the Dutch Governor of New Netherland(s), remarked to the French Jesuit Isaac Jogues that there were eighteen languages spoken at or Near Fort Amsterdam at the tip of Manhattan Island. There still are: not necessarily the same languages, but at least as many; nor has the number ever declined in the intervening three centuries. This is an essential fact of New York: a merchant metropolis with an extraordinarily heterogeneous population.*²³

Because this report is based on data from only the first year of the Social Indicators Survey, our sample size is too small to describe the experiences of each of the many racial, ethnic, linguistic, cultural and other groups in the city.

We can only begin to draw a portrait of some of the largest groups. Even these conclusions must remain cautious, however, until future waves of the Survey provide more observations for each group.

Forty six percent of the families in our survey are headed by an adult who describes him or herself as White and not of Hispanic origin (Table 8). Half are equally divided between those headed by Black non-Hispanic adults and Hispanic adults. Another 10 percent are headed by an adult who identifies him or herself as of another or mixed background. We compare three groups — White, Black and Hispanic; other groups are too small for separate analysis.

Racial and ethnic diversity masks another important way in which New Yorkers differ. Over one-third of families in the city are headed by an adult born outside the U.S.²⁴ The proportion of immigrants is highest among Hispanic families, lowest among those headed by a White or Black adult.

The myth of America as a melting pot has been pervasive. But like *Beyond the Melting Pot*, the *New York City Social Indicators Survey* documents a different reality: that in terms of assets, living conditions, and experience with the city’s institutions, the diverse groups of New York City do not melt together but remain far apart.

Table 8: The Diversity of New York

	White, non-Hispanic	Black, non-Hispanic	Hispanic	<i>All</i>
<i>New York Families who are...</i>				
Immigrant	8%	11%	16%	35%
Non Immigrant	38%	18%	10%	66%
<i>All</i>	46%	29%	26%	100%

An additional 10% of New York families are headed by adult of other or mixed race/ethnicity

Human Assets

New York adults report health problems at about the same rate as other U.S. residents. (Table 9) One exception is notable: over half of immigrant Hispanic adults report poor to fair health.²⁵

Differences in education are much greater across groups. In terms of higher education, one-third of White adults, immigrant and U.S.-born, have at least a college degree while 8 percent or fewer of Black and Hispanic adults are this well-educated. This distribution is mirrored in terms of educational failure. Between one-quarter and one-third of Black adults are high school dropouts, nearly twice the proportion of White adults. Educational problems are most acute among Hispanic New Yorkers. Among those born in the U.S., just over half have a high school degree; among immigrants, including those from Puerto Rico, high school graduation is the exception rather than the rule.

Like adults, the health of New York City's children is generally good and similar to that of the rest of the country. Across all racial and ethnic groups, however, the health of immigrant children appears to be worse than that of children whose parents were born in the U.S. In terms of education and behavior problems, the story is reversed: according to their parents, U.S.-born Black and Hispanic children are about twice as likely as White children to be falling behind in school and are 10 to 20 percentage points more likely to have one or more behavior problems. The brightest news concerns the performance of the children of immigrant New Yorkers: in terms of school achievement and behavioral adjustment they are doing as well as — and often much better than — the children of parents born in the U.S.

Financial and Social Assets

Disparities in the financial and social assets of families are consistent across groups (Table 10). White families are faring better than those headed by Black or Hispanic adults; across all racial and ethnic groups, those with adults born in the U.S. are generally doing better than those who are immigrants. Disparities are also large. Families headed by U.S.- born White adults are twice as likely as those headed by Black or Hispanic adults to be homeowners; they are three to 10 times more likely to have net worth over \$100,000; they are two to six times more likely to be able to

TABLE 9 - HUMAN ASSETS: RACE, ETHNICITY AND IMMIGRATION STATUS

	White Non Immigrant	White Immigrant	Black Non Immigrant	Black Immigrant	Hispanic Non Immigrant	Hispanic Immigrant
(unweighted n)	n=323	n=96	n=261	n=184	n=161	n=211
(% weighted)	38%	8%	18%	11%	10%	16%
Adult's health is...						
Excellent	34%	34%	25%	41%	26%	16%
Good	45%	45%	59%	41%	61%	32%
Fair	15%	15%	10%	16%	12%	44%
Poor	6%	7%	6%	1%	1%	9%
Adult has condition that...						
No limiting condition	79%	79%	86%	85%	88%	67%
Limits work	12%	15%	6%	13%	8%	11%
Prevents work	9%	7%	8%	2%	4%	21%
Adult's highest education is...						
College degree or more	33%	37%	8%	8%	8%	4%
Some post high school	18%	23%	27%	17%	22%	9%
Only high school/GED	33%	32%	41%	38%	27%	18%
Less than high school	17%	7%	25%	38%	44%	70%
Child's health is...^a						
Excellent	73%	64%	65%	59%	68%	45%
Good	23%	29%	32%	31%	29%	41%
Fair	1%	7%	2%	9%	2%	14%
Poor	3%	0%	1%	1%	1%	0%
Child had disability that limits...^a						
No limiting condition	91%	88%	93%	95%	91%	86%
Activities a little	4%	5%	3%	4%	5%	3%
Activities a lot	5%	7%	4%	1%	4%	11%
Child is...^a						
At or above grade level	88%	90%	74%	88%	74%	82%
Below grade level	12%	10%	26%	12%	27%	18%
Parent reports child has...						
No behavior problems	49%	41%	29%	41%	30%	56%
At least one problem	25%	36%	30%	29%	40%	25%
Two or more problems	26%	22%	41%	30%	31%	19%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						
^a <i>Group differences not statistically significant at 95% confidence level</i>						

**TABLE 10 - FINANCIAL AND SOCIAL ASSETS: RACE,
ETHNICITY AND IMMIGRATION STATUS**

	White Non Immigrant	White Immigrant	Black Non Immigrant	Black Immigrant	Hispanic Non Immigrant	Hispanic Immigrant
(unweighted n)	n=323	n=96	n=261	n=184	n=161	n=211
(% weighted)	38%	8%	18%	11%	10%	16%
Family's total assets are...						
\$100,001 or more	30%	20%	10%	3%	4%	5%
\$5,001 to \$100,000	22%	19%	30%	29%	16%	6%
\$1 to \$5,000	21%	2%	20%	30%	22%	10%
\$0 or negative	27%	59%	40%	39%	58%	79%
Family....						
Owens home	41%	29%	15%	11%	23%	7%
Rents home	52%	59%	78%	75%	73%	85%
Is just "staying there"	7%	12%	8%	14%	4%	8%
Family could borrow from a relative or friend...						
At least \$10,000	35%	18%	11%	12%	11%	6%
\$1,000 but not \$10,000	31%	23%	37%	43%	25%	19%
\$100 but not \$1,000	25%	44%	41%	31%	40%	38%
Not even \$100	9%	15%	12%	14%	24%	37%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						

borrow large amounts from family or friends. Across all three groups, immigrants have accumulated less in the way of financial and social assets than non-immigrant families. This gap is particularly stark for immigrant Hispanic families, over three-quarters of whom have zero or negative assets. And while few Hispanic families are wealthy, nearly one-quarter of non-immigrant Hispanic families are homeowners – more than three times the proportion of those who are immigrants.

Economic and Social Conditions

Poverty and associated compromises in living conditions are disproportionately concentrated among, but not limited to, immigrants and people of color in the city (Table 11). Non-immigrant White families are the most economically secure, with poverty rates close to the average for the U.S. as a whole. Poverty rates are at least double this across other groups in the city. Once again, immigrant Hispanic families are the most disadvantaged group, with an astonishing 48 percent rate of poverty.

Group differences are less dramatic on concrete measures of living conditions (Table 12). Perhaps most encouraging of all, experiences of personal and property crime were reported about equally by New Yorkers of various racial, ethnic and immigrant backgrounds.

Some differences are worth noting. Housing problems appear to be concentrated in two groups in the city — immigrant Black and Hispanic families — as many as one-quarter of whom live in substandard or overcrowded conditions. Perceptions of neighborhood safety and quality also differ substantially across groups. The two groups who rate their neighborhood most poorly – U.S.-born Black and immigrant Hispanic families – are also the most likely to consider their neighborhoods unsafe.

Institutional Supports and Satisfaction

Not surprisingly, given their numerous advantages, White respondents are more likely to rate New York City as a very good place to live than are those who are Black or Hispanic. What is surprising, in view of their relative disadvantage, is that Hispanic New Yorkers, particularly immigrants, appear to be faring better on some measures than those who are Black.

The adequacy of institutional supports varies with race/ethnicity and immigration status and with the type of support considered (Table 13). The gap in health insurance coverage is quite dramatic between the groups with the highest and lowest rates: while over three-quarters of all White, non-immigrant families have insurance for all family members, barely one-third of Black immigrant families are fully insured. Other groups fall in between, but none approach the drastic rate of noncoverage that we observe among Black immigrant families. Indeed, even immigrant Hispanic families, who are disadvantaged in so many other respects, have health insurance coverage at about twice the rate of Black immigrant families.

Parents' confidence in their children's school, on the other hand, is markedly higher among Hispanic families who are immigrants than among nearly all other groups, and higher among Black families who are immigrants than among those headed by adults who were born in the U.S.

TABLE 11 - ECONOMIC CONDITIONS: RACE, ETHNICITY AND IMMIGRATION STATUS						
	White Non Immigrant	White Immigrant	Black Non Immigrant	Black Immigrant	Hispanic Non Immigrant	Hispanic Immigrant
(unweighted n)	n=323	n=96	n=261	n=184	n=161	n=211
(% weighted)	38%	8%	18%	11%	10%	16%
Family income relative to poverty line...						
More than 400% poverty	45%	42%	14%	12%	16%	10%
Between 200% & 400%	27%	21%	27%	30%	27%	11%
Between 100% & 200%	14%	7%	26%	22%	21%	31%
At or below poverty	14%	30%	33%	36%	37%	48%
Due to (lack of) money, utility bills were...						
Always paid on time	90%	94%	78%	69%	80%	75%
Sometimes late	10%	7%	20%	30%	18%	22%
Shut off	1%	0%	2%	1%	2%	3%
Due to (lack of) money, family members...^a						
Never hungry	95%	88%	91%	95%	96%	92%
Sometimes went hungry	6%	12%	9%	5%	4%	8%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						
^a <i>Group differences not statistically significant at 95% confidence level</i>						

TABLE 12 - SOCIAL CONDITIONS: RACE, ETHNICITY AND IMMIGRATION STATUS						
	White Non Immigrant	White Immigrant	Black Non Immigrant	Black Immigrant	Hispanic Non Immigrant	Hispanic Immigrant
(unweighted n)	n=323	n=96	n=261	n=184	n=161	n=211
(% weighted)	38%	8%	18%	11%	10%	16%
Family's housing is...						
Not substandard	92%	92%	80%	76%	87%	73%
Substandard	9%	8%	20%	24%	13%	28%
Rooms per person in family housing...						
2.2 or more	54%	31%	24%	22%	24%	17%
Between 1 and 2.2	44%	59%	63%	58%	59%	61%
Less than 1	2%	9%	13%	20%	17%	22%
Adult rates neighborhood as...						
Very good	44%	39%	8%	33%	15%	20%
Pretty good	35%	41%	41%	34%	46%	22%
Only fair	16%	17%	36%	30%	34%	45%
Poor	5%	3%	15%	4%	6%	13%
Walking in neighborhood at night adult feels...						
Very safe	39%	27%	19%	25%	43%	17%
Somewhat safe	38%	60%	46%	46%	40%	43%
Somewhat unsafe	11%	9%	16%	24%	10%	19%
Very unsafe	12%	4%	19%	5%	7%	22%
In the prior year family members were...^a						
Not crime victims	91%	89%	86%	90%	89%	90%
Robbed or burglarized	9%	12%	14%	10%	11%	10%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						
^a <i>Group differences not statistically significant at 95% confidence level.</i>						

**TABLE 13 - ADEQUACY OF EXTERNAL SUPPORTS: RACE,
ETHNICITY AND IMMIGRATION STATUS**

	White Non Immigrant	White Immigrant	Black Non Immigrant	Black Immigrant	Hispanic Non Immigrant	Hispanic Immigrant
(unweighted n)	n=323	n=96	n=261	n=184	n=161	n=211
(% weighted)	38%	8%	18%	11%	10%	16%
Family members...						
All insured all year	77%	73%	72%	35%	67%	71%
Uninsured part of the year	9%	4%	6%	22%	7%	5%
Uninsured now	14%	24%	22%	43%	27%	24%
Among adults with health plan...						
Very satisfied	50%	47%	44%	44%	51%	54%
Somewhat satisfied	33%	40%	40%	31%	41%	41%
Somewhat dissatisfied	9%	13%	9%	23%	7%	3%
Very dissatisfied	9%	1%	7%	2%	1%	2%
Parent considers child's school safe						
Agrees	78%	65%	47%	56%	47%	74%
Somewhat agrees	14%	31%	38%	26%	36%	9%
Somewhat disagrees	5%	3%	5%	9%	13%	9%
Disagrees	3%	1%	10%	9%	5%	8%
Parent thinks child is getting a good education...^a						
Agrees	68%	78%	46%	55%	57%	77%
Somewhat agrees	24%	16%	27%	34%	25%	14%
Somewhat disagrees	3%	1%	7%	5%	7%	5%
Disagrees	5%	5%	21%	6%	11%	5%
Pre-school aged child (3-5 years) in preschool or daycare						
Yes	56%	34%	31%	42%	35%	14%
No	44%	66%	69%	46%	65%	86%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						
^a <i>Group differences not statistically significant at 95% confidence level</i>						

Variation in respondents' overall satisfaction with New York City as a place to live is smaller but roughly parallel to variation in assets and living conditions. (Table 14). Beliefs about how the city has changed in recent years tell a different story.

Despite extensive objective disadvantage, nearly half of all immigrant Hispanic respondents, and 40 percent of Black immigrants, think that the city has become a better place to live in recent years, making them among the most sanguine of New Yorkers. U.S.-born Black respondents, only 16 percent of whom see the city as improving, are by far the most pessimistic.

Differences in perceptions of the city may reflect differences in respondents' expectations and bases for comparison. This seems particularly likely in the case of immigrants, many of whom have left conditions of greater deprivation and more constrained opportunities.

Differences may also reflect varied experiences with city services and institutions. Differences in the rating of police protection across race and ethnic groups are particularly dramatic. Nearly three-quarters of White New Yorkers, native born and immigrant, consider their police protection to be pretty to very good. At the opposite extreme, only 40 percent of U.S.-born Black and 50 percent of immigrant Black respondents rate police protection as highly.

Conclusion

Taken together, these data help explain why New York, on "average," is so different from the rest of the country. New York is not one city but many cities; not one story but many stories. This first round of data suggests some of these stories. One story is that of large differences by race and ethnicity. *On virtually every measure, White New Yorkers are more advantaged, have a better quality of life, and rate the city and its institutions more highly, than those who are Black or Hispanic.* In addition to disparities across race/ethnic groups, however, other data tell a story of disparities *within* groups – particularly between immigrants and those born in the U.S. *On most measures of well-being, immigrant families lag behind their U.S.-born counterparts. This is most striking in the case of immigrant Hispanic families, who are the most disadvantaged on nearly all measures of well-being.* There are at least two important exceptions to this, however, and these suggest the outline of a third story of the city. Despite evidence of serious compromises in the assets and living conditions of many immigrant families, the most encouraging story may be that of their children: *on measures of education and behavioral adjustment, children of immigrants are doing about as well or better than any child in the city.* Other encouraging news is provided by subjective measures of satisfaction. Hispanic immigrants, despite numerous disadvantages, emerge as the most positive of all New Yorkers in their assessments of how the city is changing and in their confidence in the quality of their children's schools.

**TABLE 14 - SATISFACTION WITH THE CITY AND ITS SERVICES:
RACE, ETHNICITY AND IMMIGRATION STATUS**

	White Non Immigrant	White Immigrant	Black Non Immigrant	Black Immigrant	Hispanic Non Immigrant	Hispanic Immigrant
(unweighted n)	n=323	n=96	n=261	n=184	n=161	n=211
(% weighted)	38%	8%	18%	11%	10%	16%
Adult rates New York City as a place to live...						
Very good	22%	15%	10%	13%	5%	14%
Pretty good	48%	35%	44%	50%	47%	40%
Only fair	23%	48%	33%	34%	44%	38%
Poor	7%	3%	13%	3%	5%	8%
Adult thinks that in the last few years New York City has ...						
Become a better place	40%	42%	16%	40%	31%	45%
Remained about the same	34%	29%	34%	37%	32%	37%
Gotten worse	26%	29%	50%	24%	38%	19%
Adult rates police protection...						
Very good	31%	28%	10%	15%	11%	19%
Pretty good	43%	43%	30%	35%	40%	43%
Only fair	14%	19%	34%	36%	43%	27%
Poor	12%	9%	26%	13%	6%	11%
Adult rates public schools...						
Very good	22%	21%	12%	27%	22%	14%
Pretty good	37%	23%	30%	29%	46%	33%
Only fair	25%	34%	38%	33%	25%	40%
Poor	16%	22%	20%	10%	7%	13%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>						

PART IV: THE MOST VULNERABLE NEW YORKERS

At the high end of the Social Indicators, the quality of life for New Yorkers may be nearly limitless. At the low end, the limits are very real. If individuals or families fall below a minimum threshold on critical Social Indicators, their health, safety or psychological well-being may be compromised.

In assessing the well-being of the most vulnerable New Yorkers, these thresholds serve as Indicators of Distress. They highlight the proportion of New Yorkers who are at risk for concrete hardship in the short- and longer term. Differences across groups show how well different New Yorkers are doing and who appears to be most at-risk. Perhaps most importantly, the magnitude of differences between groups – measured here in terms of odds ratios²⁶ – provides a metric with which we can assess, in the most concrete terms, the consequences of growing inequality in the city.

How deep is the distress of the poor?

Over one-quarter of all New York households have incomes at or below the Federal poverty threshold. It is among these families that we would expect distress to be concentrated and cumulative.

In terms of human assets, the poor and near-poor of New York are struggling indeed (Table 15). The respondent in one-third or more of these families reports fair to poor health; one-quarter also report a work limiting disability. The gap between rich and poor is vast: the odds that a poor adult is in poor health are over eight times those of an affluent adult; his or her odds of being disabled are more than 10 times greater. Educational disadvantage is also highly concentrated. In half of poor and near-poor families, one or both adults lack the equivalent of a high school education.

It is difficult to sort out the causal sequence linking adults' human assets and poverty. Poor health and education may be a consequence of income poverty and restricted opportunity; they are also an important contributing factor to low earnings and poverty. In the case of children, however, the significance of compromises in human assets is much more straightforward. It cannot be argued that children's poor health or education cause their income poverty. Compromises in children's human assets are much more clearly a consequence of poverty and, perhaps more importantly, a predictor of economic difficulties in the future.

On the whole, children in poor New York families are much healthier than adults. Children are also much less likely to be disabled than adults. It is good news that as many as 85 to 90 percent of poor children are in good health and free from activity limiting problems. This suggests that children in poor families may not have paid as great a price as adults in terms of their health status. Whether this bodes equally well for the future depends on how well these children fare as they age. Here the news is not so reassuring.

TABLE 15 – DISTRESS INDICATORS BY INCOME RELATIVE TO POVERTY

	Poor	Near Poor	Middle Class	Affluent	Odds Ratio Poor v. Affluent
(unweighted n)	287	220	406	435	
(% weighted)	30%	20%	24%	27%	
Respondent in fair to poor health	35%	43%	11%	6%	8.0
Respondent disabled	28%	22%	10%	4%	10.2
Any adults without high school	51%	51%	13%	6%	15.4
Child in fair to poor health ^a	8%	8%	5%	5%	1.6
Child disabled ^a	13%	9%	6%	6%	2.3
Child not at or above grade level	33%	10%	7%	7%	6.6
Child has behavior problem(s) ^a	38%	26%	25%	22%	2.1
Zero or negative assets	69%	44%	35%	25%	6.7
Could not borrow \$100	33%	11%	8%	4%	10.9
Hunger in prior year	11%	4%	N.A.	N.A.	N.A.
Late utility payments in prior year	25%	24%	N.A.	N.A.	N.A.
Overcrowded housing	23%	12%	6%	4%	6.5
Substandard housing	27%	14%	N.A.	N.A.	N.A.
Family members victim of crime ^a	11%	8%	12%	8%	1.3
.... Property (break in)	4%	2%	7%	7%	0.5
.... Personal (robbery)	7%	7%	6%	2%	4.3
Feel unsafe in neighborhood	36%	40%	21%	13%	3.8
Rate neighborhood fair to poor	49%	38%	31%	16%	5.1
Adult(s) lack health insurance	26%	23%	19%	18%	1.6
Child(ren) lack health insurance	20%	30%	11%	6%	4.0
Parent rates child's school poorly	22%	24%	16%	12%	2.1
Pre-school child not in formal care	81%	53%	57%	51%	4.3
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>					
<i>^a Group differences not statistically significant at 95% confidence level</i>					

The prevalence of childhood physical health, mental health and learning problems is generally seen to increase with children's age. The jump is particularly sharp during the school years, when children are identified for special services within the school system. National data show, for example, that two percent of children under three have identified disabilities and the proportion rises steadily with age until it reaches six percent of school-aged children and nine percent of adolescents.²⁷ A similar pattern is evident in the New York data (Table 16). Among all children, the proportion with some form of health problem or disability increases substantially from early childhood to adolescence. This increase would be expected, as health and learning problems are manifested and diagnosed throughout childhood.

What should not be expected is that as the prevalence of childhood difficulties grows, so too does the gap between the advantaged and disadvantaged. Translated into the language of odds, among children under six, the odds that a poor child is disabled or in bad health are about the same as those of an affluent child; among older children, the odds of disability and health problems are nearly two to three times greater among poor children.

Poor children's school performance and behavioral adjustment are also far behind those of their more affluent peers (Table 15). On the whole, children in New York are doing pretty well. Problems are highly concentrated, however among children in the poorest families. In comparison to affluent children, the odds that a poor child is behind at least one grade are over six times greater; the odds that he or she has adjustment problems are two times greater. Like health, school and behavior problems are worse among older children, and the difference between the advantaged and disadvantaged children is wider. By age 17, the odds of being behind a grade are over six times greater for poor children than for affluent children and the odds of behavioral problems are over three times greater.

These data show that poor adults and children in New York are lagging far behind their richer counterparts in terms of human assets. We should not be surprised to find that poor families are also far behind in the accumulation of any financial assets. Over two-thirds of poor New York families report no or negative assets. Families at the bottom of the economic ladder are also poor in terms of access to resources that might help them weather a financial crisis or routine transition, such as a move or the start of a new job. One-third of the poorest families do not have access to even \$100 in emergency funds. This is a sobering reminder of how disadvantage accumulates: poor families are disadvantaged not only in their own resources but also in their ability to get, or give financial help to kith and kin.

Table 16. Child Outcomes by Poverty Status and Age

	Poor	Affluent	Odds Ratio
Child disabled			
...age 0 to 5	3%	3%	1.0
...age 6 to 17	20%	9%	2.6
Child in fair to poor health			
...age 0 to 5	5%	5%	1.0
...age 6 to 14	10%	5%	1.7

Financial insufficiency translates into a number of compromises in the economic and living conditions of the poorest New Yorkers. Food insufficiency is highly concentrated among the poor, affecting 11 percent of families. One quarter of the poor have faced difficulty with utility payments. About one in four poor New York families is also living in overcrowded housing and 27 percent live in housing that had serious structural, plumbing or heating problems.

Income is less predictive of crime victimization. The *New York City Social Indicators Survey* suggests that the much-heralded drop in the crime rate has benefited most New Yorkers. While the poor are somewhat more likely than the rich to have been crime victims in the prior year, their overall odds of victimization are not much greater than those of other families.

Differences are evident, however, in the type of victimization. Poor families are only about half as likely as rich families to have been subject to property crime in the form of having their homes broken into. Their odds of having been the victim of a robbery, in contrast, are 4 times greater. Given these differences, it is not surprising that one third of the poorest New Yorkers feel their neighborhoods are unsafe and one half rated their neighborhoods negatively.

We would hope that public services and supports would offset these income-related forms of inequality. The evidence for this is not reassuring. In fact, the poorest families are often the most disadvantaged in the adequacy of institutional supports as well.

This is most notable in children's health insurance. Children in 20 percent of the poorest families are without health insurance — with four times the odds of going uninsured as those in the most affluent families. It is not the poorest families, however, but the near poor families who fare the worst in this dimension, with a full 30 percent unable to insure their children. This suggests that recent expansions in public health programs may now be reaching many of the poorest poor of New York. The problem remains most acute for those at the margin of self-sufficiency, who often fall between the cracks of public programs and employment-based insurance.

Poorer families also do much worse than their affluent counterparts in terms of educational resources for their children. Parents in 22 percent of the poorest families rate their children's school as unsafe and/or providing poor education, in comparison to only 12 percent of those in the most affluent families; children in over 80 percent of the poorest families are not in formal child care, in contrast to 50 percent of their counterparts in affluent families.

Who is in distress?

It is clear, and not surprising, that the poorest New Yorkers are the most disadvantaged in terms of assets, living conditions and the quality of their external supports. This does not yet tell us who the most vulnerable New Yorkers are. To understand the stories of the most vulnerable residents of the city we need to compare groups not simply in terms of resources but in terms of need – as reflected in family structure and age.

The balance between resources and demands varies for most families across the life cycle. Families' incomes typically rise between early and middle adulthood as individuals age, accumulate human capital, and increase the wages they can command in the labor market. The earning profile is curvilinear rather than linear however, because other forms of human capital associated with market compensation decline with age and retirement.

All else equal, we would expect families with older adults to enjoy the highest level of well-being and show the fewest signs of compromise or distress. All else is not equal over the life course, however. Most notably, the bearing and rearing of children affects families' net resources and well-being. Children reduce families' economic resources directly, by increasing expenditures. The care of children also reduces resources indirectly, by limiting adults' availability for employment or by increasing the cost of employment. This is particularly true for women. While men's hours of work and wages typically rise when they have children, many women loosen their labor market attachments when their children are young, paying a substantial "child penalty" in the form of lower wages and hours of work. The impact of children on adults' economic fortunes is considerably more complicated, of course, because childbearing is not independent of parents' characteristics. Women with lower education and worse economic opportunities have children at a younger age than more advantaged adults. They may have less to lose in the short-term by withdrawing from the labor market early to have children. But by doing so, they also perpetuate a cycle of disadvantage, forgoing the early investments in human capital that could raise their earning capacity in the longer term.

Given these differences, we would expect that in addition to income, a family's point in the life cycle would predict its risk of falling below the minimum thresholds established by our Distress Indicators. New York is generally a young city, with 85 percent of families headed by adults under the age of 65 (Table 17). About one-third of New York families care for children under 18. Families at different points of the life cycle do fare very differently in some expected - and some unanticipated - directions.

Table 17: Family Structures in New York

	Young Adults (18-29)	Working Age Adults (30-64)	Older Adults (65+)	<i>All</i>
<i>New York Families who...</i>				
Have children	8%	25%	0%	33%
Do not have children	19%	33%	15%	67%
<i>All</i>	27%	58%	15%	100%

Differences across the life cycle

In terms of human assets, health and disability have the expected relationship with age: younger New Yorkers, with or without children, are more likely than older adults to be free from poor health and disabilities (Table 18). The story about educational disadvantage is considerably more complex. Among households without dependent children, those headed by younger adults are the best educated. Nearly all of the childless young adults are high school graduates. Among childless households, it is the oldest adults — those aged 65 and older — for whom educational disadvantage is greatest. The pattern is completely different among families with children. Educational disadvantage is pervasive among all parents, and younger parents are more disadvantaged than those who are older.

Indicators of financial well-being and economic distress reveal an equally complex pattern. When we look at measures of assets and per capita family income (relative to poverty) by age, we see the expected patterns. In general, income poverty is concentrated among the families headed by the youngest adults.²⁸ Adults over the age of 64 are the most likely to have accumulated home equity or other financial assets.

These age-related differences are overshadowed, however, by differences between families with and without children. Over half of young families with children are poor compared to 35 percent of young adults without children. Even when adults reach their peak earning years, between 30 and 64, families with children continue to have rates of income poverty that are 10 percentage points higher than those of families without children. Families with children are also very limited in terms of back-up financial resources: over half have no or negative financial assets; 14 to 17 percent have no one they can count on for even a small amount of cash.

With limited income and assets, families with children emerge as the most distressed New Yorkers. They are the most likely of all New Yorkers to experience food insufficiency and problems paying their utility bills. They are the most likely to be living in overcrowded and substandard housing. They are among the most likely to rate their neighborhood as only fair to poor. It is notable that while over one-third of childless

TABLE 18 - DISTRESS INDICATORS BY LIFE CYCLE

	With children in home		Without children in home		
	Young Adults 18-29	Working Age Adults 30-64	Young Adults 18-29	Working Age Adults 30-64	Older Adults 65+
(unweighted n)	234	851	94	145	42
(% weighted)	7.6	24.6	19.3	33.4	15.1
Respondent in fair to poor health	11%	20%	17%	29%	33%
Respondent disabled	10%	14%	8%	21%	40%
Any adults without high school	46%	36%	13%	28%	49%
Zero or negative assets	52%	50%	41%	45%	27%
Could not borrow \$100	14%	17%	9%	17%	22%
Family poor	54%	31%	35%	21%	26%
Hunger in prior year	5%	10%	3%	7%	4%
Late with utility payments	20%	28%	15%	17%	6%
Overcrowded housing	29%	22%	13%	4%	3%
Substandard housing	26%	17%	13%	15%	15%
Family members victim of crime ^a	12%	12%	9%	12%	8%
Feel unsafe in neighborhood	36%	29%	16%	26%	41%
Rate neighborhood fair to poor	52%	38%	27%	31%	42%
Adult(s) lack health insurance	27%	24%	40%	21%	3%
<i>Unless otherwise noted, group differences are statistically significant at 95% confidence level</i>					
^a <i>Group differences not statistically significant at 95% confidence level</i>					

families headed by young adults (which would include young single adults) are also “income poor,” they are less likely than families with children to report the concrete manifestations of poverty: hunger, late utility payments, substandard and overcrowded housing, or neighborhoods considered unsafe or bad.

Extreme levels of disadvantage among families with children are troubling in the present. They bode ill for the future as well. Many young childless adults of New York are also poor. But these young adults are likely to have fewer demands on their resources and may have more alternatives – such as extended family – on which to rely. These New Yorkers are also rich with human capital, from good health to the highest levels of education in the city. For many, their financial constraints will be temporary. The outlook is far less sanguine for young adults with children, who are desperately poor in both financial and human assets. They are not only the poorest but also, with the exception of the elderly, the most poorly educated adults in the city.

Disadvantage is unevenly distributed across the life cycle in yet another way. Families receive only part of their support from market activities. All families also rely, to a greater or lesser extent, on community and government for assistance that comes in the form of income transfers, tax and in-kind benefits. We might expect this assistance to be greatest during the years when demands on family resources are greatest: i.e., when younger adults, who are at the lowest point in their earning capacity, assume the greatest financial burdens in caring for children. In fact U.S. social policies have been heavily weighted toward the other end of the life cycle, in the form of social and health insurance for retired workers. The result is most striking in health insurance coverage. The New Yorkers that suffer the most disadvantage in terms of insurance coverage are young, childless adults, over one-third of whom are uninsured. These are the individuals who may be least likely to have employment-based insurance, or to be eligible for government programs. Young families with children, less strongly attached to employment and more dependent on government assistance, fare poorly as well. Older adults represent the opposite case. Only a tiny fraction (three percent) of these families go without health insurance - a striking testimony to the effectiveness of the federal Medicare program.

Single Parent Families

In comparison to other New York families, we see that the one-third who care for children under 18 are disadvantaged in almost every respect. They are less well educated, live in worse neighborhoods, and are more likely to be poor and to suffer concrete hardship and compromises in their quality of life.

All families with children are not equal, however. As a substantial body of research demonstrates, disadvantage is much more common in families headed by a single mother. Single parent families, overwhelmingly headed by women, often have no fewer demands on their financial and time resources. But they typically have far fewer resources with which to meet these demands. They have, at most, one earner instead of two. When children are young, single mothers are often unable to work full time without incurring considerable financial costs. When mothers do work, labor market interruptions, occupa-

tional segregation, and wage discrimination combine to depress their wages below those of comparably educated men. And despite recent efforts to improve child support collections, the majority of custodial mothers still receive no child support from absent fathers.

The demographic make-up of New York helps explain why distress and disadvantage are higher in the city than elsewhere in the country. The rate of single parenthood in New York City is far greater than in the nation as a whole. One half of families with children are headed by a single parent, about twice the rate for the U.S.²⁹ As we would predict, among families with children, these are by far the most disadvantaged subset.

With the exception of good health, single parent families in New York have less of everything (Table 19). In 30 percent of two-parent families, at least one adult has not finished high school; in nearly half of single parent families, the parent is a high school dropout. Single parents are also more disadvantaged in terms of financial assets. Two thirds have no assets; nearly one-quarter do not have a friend or relative that they can turn to for an emergency \$100 loan.

It is not only parents but also children who suffer a loss of resources when families are headed by a single parent. The most obvious risk to the well-being of children in single parent families is the loss of income from a second parent. Along with lost income, children lose the attention and supervision of another parent. They may move more often and have weaker ties to neighborhood resources and social capital.

The Distress Indicators suggest that losses such as these matter for children's well-being. On many measures, New York children in single parent families are faring much worse than children who live with two parents. Although health and disability status does not differ significantly between children living with one and two parents, behavior problems are reported by nearly 40 percent of single parents in contrast to 19 percent of those in two-parent families. In their school achievement, the odds of being at least one grade behind or in special education are nearly three times greater for children of single parents.

The paucity of human and financial resources also matters for the immediate economic and social living conditions of families headed by a single parent. In comparison to two-parent families, the odds of poverty are more than five times greater for single parent families, their odds of hunger are nearly three times greater, and their odds of living in substandard housing are more than twice as great. The compromises extend to their safety and neighborhoods as well: the odds of crime victimization and living in a neighborhood considered fair to poor are more than twice as high for single parent families.

Although single parents are the most disadvantaged in terms of supports flowing from the market, there is encouraging evidence that they are not lagging behind two parent families in the adequacy of at least one form of support. Children in one- and two-parent families are equally likely to have health insurance. Adults in one-parent families are less likely to be uninsured than those in

TABLE 19 - DISTRESS INDICATORS BY FAMILY COMPOSITION

	Single Parent	Two Parent	Odds Ratio Single v. Two parent
(unweighted n)	404	688	
(% weighted by weight2)	49.6%	50.4%	
Respondent in fair to poor health ^a	20%	16%	1.3
Respondent disabled ^a	16%	11%	1.6
Any adults have less than high school	48%	30%	2.2
Child in fair to poor health ^a	8%	5%	1.9
Child disabled ^a	11%	7%	1.8
Child not at or above grade level	23%	10%	2.8
Child has behavior problem(s)	39%	19%	2.7
Zero or negative assets	67%	31%	4.5
Could not borrow \$100	22%	11%	2.3
Family poor	56%	19%	5.5
Hunger in prior year	13%	5%	2.9
Family late with utility payments	34%	19%	2.3
Overcrowded housing	21%	26%	0.8
Substandard housing	25%	12%	2.5
Family members victim of crime	16%	7%	2.6
Feel unsafe in neighborhood	35%	27%	1.5
Rate neighborhood fair to poor	53%	31%	2.7
Adult(s) lack health insurance ^a	21%	28%	0.7
Child(ren) lack health insurance ^a	17%	16%	1.1
Parent rates child's school poorly	25%	14%	2.0
Child (3-5) not in formal care	74%	60%	1.6

Unless otherwise noted, group differences are statistically significant at 95% confidence level

^a *Group differences not statistically significant at 95% confidence level*

two parent families. On the other hand, single parents are less satisfied with their children's schools and they are less likely to have used formal care for their preschool children. This suggests that government health programs that have been targeted on poor children, including Medicaid and Child Health Plus, may be closing some of the enormous gap that would otherwise exist if families were forced to rely only on market based support.

Conclusion

More than any other U.S. city, New York is a city in which contrasts co-exist: the rich live alongside the poor; the youngest and the oldest residents share the same streets; native-born citizens mingle with immigrants from nearly every country of the world. However it is a city of great, and perhaps growing, inequality in terms of financial, human and social assets.

Whether this inequality matters – whether it is or should be a shared concern for all New Yorkers – depends in part on its concrete manifestations. It is not a surprise that the poorest New Yorkers are worse off in their economic and social living conditions. It may not be surprising that the poorest New Yorkers are also worse off in terms of their health and educational attainment. Evidence of inequality in socially-controlled external supports and services – from schools and health insurance to police protection – is more surprising and less defensible. But even if we are no longer surprised by the existence of inequality and hardship, *we should continue to be amazed by the magnitude of difference between rich and poor New Yorkers. And we should not lose sight of the concentration of disadvantage among those families with the most to lose: young parents and their children.*

Appendix A: The Social Indicators

Marcia Meyers, Ph.D.

The survey questions used to construct the Social Indicators are based on standardized questions that have been used in a variety of nationally representative surveys, including the Current Population Survey (U.S. Census Bureau); the General Social Survey (National Opinion Research Center); the Panel Study on Income Dynamics (University of Michigan); and the American Housing Survey (U.S. Census Bureau).

Adult Health

The adult respondent was asked to rate his or her own health status using a standard self-assessment question: *Compared to most people your age, how would you rate your health these days? Is it [excellent] [good] [only fair] or [poor]?*

Adult Disability

The adult respondent was first asked whether he or she had an activity limiting condition using a standard self-assessment question: *Do you have a chronic health problem – physical, emotional or mental – that limits the amount or kind of work you can do at a job? If the answer was yes, the respondent was asked a follow-up question about severity: Does this condition [prevent you from working at a job at all] or [does it only limit the kind or amount of work you can do at a job]?*

Adult Educational Achievement

The adult respondent was asked to report his or her highest year of school or college completed with follow-up probes for degree attainment (high school graduation, GED, associates degree, bachelors degree and any graduate degrees). The respondent was asked the same questions about his or her resident spouse or domestic partner.

Child Health

The adult respondent was asked to rate the health of the focal child using a standard health assessment question: *Compared to other children, how would you rate your child's health these days? [excellent] [pretty good] [only fair] or [poor]?*

Child Disability

The adult respondent was asked a series of age-adjusted questions about any activity limiting condition for the focal child. For all focal children under school-age, the respondent was asked: *Does your (---) year old child have a physical, learning or mental condition that keeps (him/her) from doing the usual kind of things that most children (his/her) age do? If the child was attending school, the respondent was asked, Does your (---) year old child have a physical, learning, or mental health condition that limits (his/her) ability to do regular school work? And Does*

your child have any condition that limits (his/her) ability to do usual childhood activities such as play or engage in games or sports? For all age groups, if the respondent answered “yes” to questions about limitations in “usual activities,” they were asked a follow-up question about severity: *Would you say this condition limits (his/her) ability [a lot] [some] [only a little] or [not at all]?* For parents of school-aged children who answered “yes” to the question about school work, the follow up question about severity was: *Is your child receiving any special education services or classes?*

Children’s School Progress

In all families in which the focal child was of school age, the adult respondent was asked: *Is your child at the regular grade level for (his/her) age?* If not, a follow-up question asked: *Is that because (he/she) was held back or skipped a year or more?* All children who were reported to be “held back” or in special education (see above) were coded as not at grade level.

Children’s Behavioral Adjustment

The adult respondent was asked a series of age-adjusted questions about the behavioral adjustment of the focal child, adapted from the Child Behavior Checklist. Question order was randomly rotated to avoid question order bias. For children under the age of three, the items were: *When (my spouse/partner or) I leave my child alone, (he/she) becomes upset; During an average day, my child is fussy and irritable; (My spouse/partner or) I have trouble soothing or calming my child when (he/she) is upset.* For children age three and above, the items were: *My child has trouble getting along with other children; (He/she) has difficulty concentrating and cannot pay attention for long; (He/she) is unhappy, sad or depressed.* Response categories for each question were: *[often true] [sometimes true] or [rarely if ever true].* The focal child was coded as having a behavioral adjustment problem if the respondent indicated that the condition was “often” true.

Net Worth

The family’s net worth was calculated using the responses to three questions. All respondents who indicated that they owned their house, apartment or condo were asked *whether there was a mortgage, home equity loan, or similar loan on the dwelling; if yes, how much was owed; and what they thought the current value of the (dwelling type) would be, considering: how much would it currently sell for if it were on the market?* Home equity was calculated as the difference between the current value and the outstanding mortgage. Additional assets were measured by asking: *If you cashed in all of your (and your spouse/partner’s) checking and savings accounts, and any stocks and bonds, IRAs, retirement/pension accounts, business and any other real estate you own but NOT including your home, about how much do you think that would be?* Outstanding credit card debt was measured by asking: *How much would you say you (and your spouse/partner) owe altogether on your credit cards (including charge cards, department store, gas and bank credit cards)?* The net worth of the family was calculated as home equity plus other assets minus outstanding credit card debt.

Home Ownership

The adult respondent was asked what type of dwelling they lived in and whether they owned, rented or were just staying there.

Access to Capital

The adult respondent was asked: *Suppose you needed to borrow \$1,000. Would you be able to borrow \$1,000 from a relative or friend of yours?* If the answer was “no”, they were asked a follow-up question about borrowing \$100; if “yes”, a follow-up question was asked about borrowing \$10,000.

Income Relative to Poverty

Family income was calculated by adding up income from all sources for the respondent and his or her resident spouse or domestic partner (and, as appropriate, resident children under age 18). For each category of income, the respondent was first asked if he/she received any income and, if yes, the exact dollar amount. (Respondents who could not provide an exact amount were given a series of ranges.) The respondent was asked separately about each of the following categories for the last year: *earnings from all jobs and any self-employment BEFORE deductions and taxes were taken out (but including tips, bonuses, overtime pay and commission); unemployment compensation, veteran’s benefits, or worker’s compensation; social security, disability, old age insurance, or survivor’s insurance; pensions or annuities; income from bank accounts, money markets, certificates of deposit, dividends from stocks or mutual funds; income from rental property; public assistance, welfare or emergency help from the welfare office; Food Stamps; child support or alimony; financial assistance or cash gifts from parents, other relatives or friends; cash assistance from community or charitable or religious groups; Supplemental Security Income.* Family income relative to poverty was calculated by comparing total income to the federal poverty threshold by family size for 1996.

Difficulty Paying Utility Bills

Income-related difficulty paying utility bills was assessed by asking the adult respondent: *During the last 12 months, was there ever a time when (you/your and your spouse/partner) ever missed a payment or were late with the gas or electric bill because you didn’t have enough money?* and *During the last 12 months, was there ever a time when your place had no telephone service at all?*

Hunger Due to Lack of Money

Income-related hunger was assessed using two questions. All respondents with resident children under 18 were asked: *In the past 12 months, was there a time when your (child/ren) went hungry because there wasn’t enough money to buy food?* And all adult respondents were asked *Was there ever a time when (you/your or your spouse/partner) went hungry in the past 12 months because there wasn’t enough money for food?*

Housing Quality

The adult respondent was asked whether the place where they lived had either of two forms of substandard quality: *Large holes in the floor or walls, exposed electrical wiring, broken windows, or water leaking in from the outside;* or if *In the last twelve months, there were more than three times when the toilet or heating was not working?* A “yes” answer to either question was coded as indicating substandard housing.

Housing Crowding

The adult respondent was asked first how many adults and children shared the dwelling and later, how many rooms were in the dwelling (not including bathrooms). Crowding was calculated by dividing the number of people by the number of rooms; “overcrowded” was defined as fewer than one room per person.

Freedom from Crime

The adult respondent was asked two questions about direct experience of crime: *In the past 12 months, did anyone break into, or somehow illegally get into your place?* and *In the past 12 months, did anyone take something directly from you, or someone living with you, by using force – such as in a stickup, mugging or threat?*

Perception of Neighborhood Safety

The adult respondent was asked: *How safe do you feel walking alone at night within a block or two of where you live? Do you feel [very safe] [somewhat safe] [somewhat unsafe] or [very unsafe]?*

Perception of Neighborhood Quality

The adult respondent was asked: *In general, how would you rate your neighborhood as a place to live? [Very good] [pretty good] [only fair] or [poor]?*

Health Insurance Coverage

The adult respondent was asked whether each member of the nuclear family (adults and children under 18): *have a health plan right now*, including private or government plans. If family members were currently insured, the respondent was asked: *Was there ever a time in the past 12 months when (individuals) did not have any health insurance?* Responses were coded separately for adults and children in the family.

Rating of Health Plan

All adult respondents who were currently insured were asked: *On the whole, how satisfied are you with your own personal health plan? Are you [very satisfied] [somewhat satisfied] [somewhat dissatisfied] or [very dissatisfied]?*

Rating of Safety of Child's School

In all families in which the focal child attended school, the adult respondent was asked: *Please tell me how strongly you agree or disagree with the following statement: My child's school is safe. Do you [agree] [somewhat agree] [somewhat disagree] or [strongly disagree]?*

Rating of Quality of Child's School

In all families in which the focal child attended school, the adult respondent was asked: *Please tell me how strongly you agree or disagree with the following statement: My child is getting a very good education. Do you [agree] [somewhat agree] [somewhat disagree] or [strongly disagree]?*

Formal Care for Preschool Children

In all families in which the focal child was under school age, the adult respondent was asked: *In the past month, did your child go to a day care program or a family day care home at least once a week? Please include Head Start, nursery schools, preschool, and pre-kindergarten programs but DO NOT include babysitting.*

New York City as a Place to Live

The adult respondent was asked: *How would you rate New York City as a place to live? Would you say [very good] [pretty good] [only fair] or [poor]?*

City Getting Better or Worse

The adult respondent was asked: *Look back over the last few years, would you say New York City has [become a better place], [gotten worse], or is it [about the same]?*

Police Protection and Public Schools

The adult respondent was asked a series of questions rating aspects of their neighborhood. Questions were randomly rotated to avoid question order effects. Questions included rating of *police protection* and *public schools*; response categories for each were *[very good] [pretty good] [only fair] or [poor]*.

Appendix B: Social Indicators Survey Methods

Marcia Meyers, Ph.D.

Lee Chung, M.A.

The New York City Social Indicator Survey (1997) was conducted using computer-assisted telephone interview (CATI) technology by the firm of Shulman, Ronca & Bucuvalas, Inc. Telephone interviews were conducted in English or Spanish with an adult respondent in 2250 households between July and November 1997. The eligible population for the sample was defined as the civilian, non-institutionalized population (including children) who were living in New York City and surrounding areas of the Standard Metropolitan Statistical Area (SMSA). The SMSA included households in the states of New York, New Jersey, and Connecticut.

Households were selected for interviews using Random Digit Dialing (RDD) techniques. A random sample of telephone numbers was first pre-screened for numbers that were non-working. As with all RDD surveys, this excluded households without telephone service at the time of sampling. Individuals who had recently moved when the sample was drawn may also be under-represented, because most RDD samples are list-assisted.

The sample was stratified by geography (New York City and surrounding communities) and by household composition (to over-sample families with children). This produced four samples: 500 randomly selected households in New York City; 1000 randomly selected households with children in New York city; 250 randomly selected households in the SMSA outside the city; and 500 randomly selected households with children in the SMSA outside the city. All households (with and without children) were eligible for participation in the “household” samples. To select households for the samples of “households with children,” an initial screening was conducted to determine if any children under the age of 18 lived in the household. Only those households with resident children were considered eligible.

The primary unit of analysis is the family, here composed of the respondent, a resident spouse or domestic partner, and any children for whom the respondent and/or partner were primary caregivers. Other adults or children in the residence, whether related or not, were treated as “other household members” for the purpose of data collection. Single individuals sharing a residence with other adults or children were treated as a “family of one” by this definition.

Respondent Selection

Two different selection procedures were employed to select a respondent and focal child in each sampled household. In the “household” samples, an individual was randomly selected among all persons 18 or older living in the household. If that individual was a primary caregiver for one or more children in the household (either a biological parent, a stepparent, the partner of the child’s parent, or a guardian), one of his or her children was randomly selected as the focal child for the interview. In the “households with children” samples, a focal child was randomly selected from among all children under 18 in the household. The primary caregiver for this child (as defined by the respondent) was selected as the respondent for the survey.

Response Rates

The two New York City samples are analyzed in this report. The sample quota for the “household” sample was 503; the quota for the “households with children” oversample was 1000. Of 1503 completed interviews, 112 were conducted in Spanish and 1391 in English. A full disposition of each sample is shown below (Tables B.1 and B.2). In the sample of all “households,” interviews were completed with 503 of 969 households determined to be eligible; in the sample of “households with children,” interviews were completed with 1000 of 1980 households determined to be eligible.

Table B.1 Disposition of Household Samples

Sample lines (telephone numbers)	2597			
Screened out (fax, business, non-working, other)		479		
Unknown eligible (no answer, other)		828		
Eligible numbers		1290		
Screened, ineligible household (language barrier, other)			321	
Screened, eligible household			969	
Eligible, refused				466
Eligible, complete				503

Table B.2 Disposition of Households with Children Samples

Sample lines (telephone numbers)	13350			
Screened out (fax, business, non-working, other)		2713		
Unknown eligible (no answer, other)		3355		
Eligible numbers		7282		
Screened, ineligible household (no children, language barrier, other)			5302	
Screened, eligible household with children			1980 ^a	
Eligible, refused				980 ^a
Eligible, complete				1000

^a The calculation of eligible households and refusals for the sample with children is complicated by the fact that the overwhelming majority of individuals who refused to be interviewed refused before we could ascertain if there were children in the household. Based on Census data we expect 32.7% of families in New York City to have children. Thus we count only 32.7% of the unknown refusals as being eligible. A second complication arises from the fact that the percentage of individuals who we reached on the phone and told us they had no children is greater than the expected 67.3% based on Census data. Thus we counted the excess cases as being refusals.

Appendix C: Weighting Methods

David E. Becker, B.A., B.A.
Andrew Gelman, Ph.D.

A ten-step weighting procedure based on inverse-probability weighting and poststratification was developed to correct the 1997 data collected by the New York City Social Indicators Survey (NYCSIS) for various sampling and nonsampling biases arising from the survey design and selection procedure. By poststratification we mean that our random sample of New York City families was classified into various demographic strata after selection. Weight adjustments were made to the stratified cases based on information from the sampling design about the probabilities of their selection, and evidence from the 1996 Current Population Survey (CPS) on strata proportions represented in the general New York City population. By applying this procedure, NYCSIS researchers were able to produce accurate estimates of social indicator demographics for the population of New York City.

In steps 1 and 2 of our procedure, sample cases were weighted at the family level by the inverse probability of their selection so as to adjust for selection bias due to family size and telephone availability. Specifically, in step 1, addressing differences in family and household composition, cases were stratified according to the individual and caregiver samples. Step 1 weights were calculated as the square root of the quotient of the number of adults or children in the household over the number of adults or children in the family. Square roots were used because inverse-probability weights for household size tend to overcorrect in telephone surveys (Gelman & Little, 1998). Here, family cases were weighted upward in proportion to the square rooted ratio of household size to family size. In step 2, addressing differences in telephone availability, cases with multiple phone lines were weighted downward by the inverse of the number of phone lines to correct for their higher probabilities of telephone selection. Conversely, cases with interrupted telephone service were weighted upward in direct proportion to the number of months during which they had no telephone service. This adjusted for their lower probability of telephone availability.

In step 3, weights were constructed relative to the city population to adjust for differences in selection probability resulting from variations in child caregiver status. The sample was stratified according to child caregiver status and weighted totals for families with and without children were calculated. Two ratios were obtained by setting the CPS New York City totals for families with and without children over their corresponding NYCSIS weighted totals. From these ratios, all family cases were weighted upward in accordance with 1996 CPS New York City child caregiver population proportions.

In constructing step 4 weights, our sample was stratified both by highest educational attainment per family and by the racial or ethnic identity of the families' survey respondents. NYCSIS weighted proportions for educational attainment by racial or ethnic representation were produced. Sixteen ratios were calculated by setting corresponding 1996 CPS New York City education by race or ethnicity proportions over our weighted NYCSIS proportions. From these ratio weights, our sample strata were adjusted for deviations in educational attainment and racial or ethnic composition relative to the underlying New York City population.

Step 5 involved the building of family composition weights, and our sample was stratified into categories based on family organization. Parallel to the method in step 4, NYCSIS weighted proportions for family composition were obtained. Six ratios were computed by setting corresponding 1996 CPS New York City family composition proportions over the weighted NYCSIS proportions. With these ratio weights, our sample strata were accurately stabilized for differences in family composition relative to the general New York City population.

Steps 6, 7, and 8 of the weighting procedure involved iterations back to weight steps 3, 4, and 5. With these iterations, weights adjusting for selection probability due to child caregiver status, weights adjusting for differences in educational attainment by race or ethnicity, and weights adjusting for family composition by poverty status were all streamlined and made to converge mathematically to one. With these iterations, our adjustments were fine-tuned in their approximation of the 1996 CPS New York City population benchmarks.

In step 9, final weights for all NYCSIS sample families were calculated as the products of the appropriate individual weights produced by steps 1 through 8. Lastly, with step 10, a weight was created to adjust the NYCSIS data to the aggregate population total for New York City from the 1996 New York City CPS.

Appendix D: Data Integrity, Imputation and Analysis Methods

Irwin Garfinkel, Ph.D.
Marcia Meyers, Ph.D.
Chien-Chung Huang, Ph.D.

Data Integrity

A number of steps were taken to assure the representativeness of the Social Indicators Survey sample and the integrity of the Social Indicators Survey data. One source of concern in all data collection is the possibility of nonresponse bias resulting from the nonparticipation of individuals who differ systematically from individuals who choose to participate. In order to gauge whether those who refused to participate in the survey differed from those who were successfully interviewed, we compared key demographic characteristics for two groups: those who cooperated initially, and those who initially refused to participate and were subsequently “converted” by experienced interviewers. Although these “refusal conversions” do not exactly represent nonparticipants, we would expect them to be more similar to the individuals we missed than to those who cooperated when first contacted.

As shown in Table D.1, on most demographic measures the “refusal conversions” did not differ significantly from initially cooperative cases. This increases our confidence in the representativeness of the sample of completed interviews. Refusal conversions did differ significantly in one important area: reporting of family income. Cases of refusal conversion were significantly less likely to report zero income and reported higher income, on average, than those who were initially cooperative. One possible explanation for this is differences in interviewer quality: the best interviewers are typically assigned to refusal conversions. It seems likely that these interviewers were able to obtain greater and more accurate information on the sensitive topic of family income.

Table D1: Comparison of Refusal Conversions with Initially Cooperative Cases				
	FAMILY MEASURES			
IS 1997	Non-Refused		Converted Refused	
	Unweight	Unweight	Unweight	Unweight
	N	%	N	%
Tenure (u24)				
Owner	847	42.8	41	46.6
Renter	1046	52.8	44	50.0
Staying There/Occ Rent Free/Other	86	4.3	3	3.4
T-test (p-value)	0.890			
Household Type (htype)				
Husband/wife households				
with children under 18	1102	55.9	57	64.8
no resident children	153	7.8	6	6.8
Female householder				
with children under 18	418	21.2	14	15.9
no resident children	142	7.2	4	4.5
Male householder				
with children under 18	47	2.4	3	3.4
no resident children	109	5.5	4	4.5
T-test (p-value)	0.815			
Receiving Public Assistance (welfare)				
Yes	188	9.5	9	10.2
T-test (p-value)	0.815			
Poverty Status (using family income 2)				
Below poverty	376	19.0	11	12.5
T-test (p-value)	0.128			
Family Income 2 (head+spouse+partner)				
Zero income	61	3.1	1	1.1
20th percentile		\$ 13,180		\$ 20,000
40th percentile		\$ 32,260		\$ 36,359
60th percentile		\$ 52,204		\$ 64,391
80th percentile		\$ 82,952		\$ 104,150
Mean		\$ 50,675		\$ 59,205
Median		\$ 42,196		\$ 44,900
T-test at mean (p-value)	0.064			

Table D1: Comparison of Refusal Conversions with Initially Cooperative Cases				
SIS 1997	INDIVIDUAL MEASURES			
	Non-Refused		Converted Refused	
	Unweight	Unweight	Unweight	Unweight
	N	%	N	%
Race (d217, d217a)				
White, Non Hispanic	883	45.3	38	43.7
Black, Non Hispanic	497	25.5	24	27.6
Hispanic	431	18.4	16	18.4
Asian	109	5.6	8	9.2
Other	31	1.6	1	1.1
T-test (p-value)	0.609			
Education				
1-12 years (no high school diploma)	150	7.6	4	4.5
12 years (high school grad, GED)	432	21.9	21	23.9
13-15 years "some college" including AA	624	31.6	26	29.5
16 years (collage graduate/BA) or more	766	38.8	37	42.0
T-test (p-value)	0.673			
Place of Birth (d222)				
USA	1293	65.7	56	64.4
T-test (p-value)	0.763			
Note: All individual measures are for respondents only, except education for higher education of respondent/householder and spouse.				

Data Imputation

Data imputation methods were used to estimate missing data on income items. Two forms of missing data were addressed: “unconditional missing” data occurred when a respondent refused to answer questions about whether they had any income from a specific source (such as earnings, welfare or investments) and “conditional missing” data occurred when the respondent indicated that he or she had income from a specific source but refused or did not know the amount.

The proportion of cases with conditional missing data was less than one percent on all but two income questions (interest income and cash gifts). For unconditional missing data we conservatively imputed a zero value. Conditional missing data was far more common, ranging from 20 percent on earnings to 36 percent on welfare income and 45 percent on interest income items. To avoid large amounts of missing data, we employed regression methods to estimate values for cases in which we had data on the receipt of income but not the amount. Using available data from other respondents, we first regressed the value of reported income from each source on basic demographic characteristics (race, gender, age, marital status, city/SMSA resident, and education interacted with race/ethnicity and gender). We then multiplied the coefficients by the demographic characteristics of the respondent for whom data were missing.

Final Analysis Sample

Only the 1503 cases drawn from the population of New York City households were used for analysis in this report. (Data from the larger SMSA sample will be reported in future publications.) Data problems forced the exclusion of a number of cases from the final analysis sample. Eighteen cases were excluded due to ambiguous information about household composition. An additional 109 cases were excluded due to evidence of serious deficiencies in the quality of data collected by specific interviewers. These interviewers were identified as those who obtained zero income in 10 percent or more of the cases interviewed (the comparison figure for the Census is 3.5 percent).

Survey Representativeness

As a final check on the representativeness of the sample for the SIS, after weighting the data and imputing missing values, the final analysis sample was compared on key demographic variables to Census data from the 1997 wave of the Current Population Survey. As shown in Table D.2, the weighted SIS data are very close to Census estimates on all demographic variables.

Table D2: Comparison of the New York City Social Indicators Survey and Current Population Survey (U.S. Census)

	FAMILY MEASURES			CPS 96 & 97
	SIS 1997			
	NYC			NYC
	Unweight	Unweighted	Weighted	Weighted
	N	%	%	%
Tenure (u24)				
Owner	445	30.1	25.6	26.9
Renter	965	65.2	66.6	72
Staying There/Occ Rent Free/Other	69	4.7	7.7	1.1
DK and refused	3			
Subtotal	1482	100	100	100
Household Type (htype)				
Husband/wife households				
with children under 18	737	50.0	16.5	16.5
no resident children	102	6.9	18.7	19.0
Female householder				
with children under 18	390	26.5	14.4	14.5
no resident children	111	7.5	29.9	29.9
Male householder				
with children under 18	42	2.9	1.5	1.7
no resident children	91	6.2	19.0	18.4
DK and refused	9			
Receiving Public Assistance (welfare)				
Yes	178	12.0	10.1	10.9
No	1304	88.0	89.9	89.1
DK and refused	1482	100.0	100	100

Table D2: Comparison of New York City Social Indicators Survey and Current Population Survey (U.S. Census)				
	INDIVIDUAL MEASURES			
		SIS 1997		CPS 96 & 97
	Unweighted	Unweighted	Weighted	Weighted
	N	%	%	%
Race (d217, d217a)				
White, Non Hispanic	448	30.7	42.4	42.3
Black, Non Hispanic	477	32.7	26.0	25.8
Hispanic	415	28.5	23.7	24.5
Asian	91	6.2	4.7	7.1
Other	27	1.9	3.2	0.2
Subtotal	1482	100.0	100.0	99.9
Education by Race (Hispanic and Other)				
1-11 years	138	9.4	27.0	28.6
12 years (high school grad, GED)	342	23.2	29.1	29.9
13-15 years "some college" including AA	487	33.1	20.4	17.7
16 years (collage graduate/BA) or more	504	34.3	23.5	23.8
Subtotal	1482	100.0	100.0	100.0
Place of Birth (d222)				
USA	836	56.4	62.7	60
Other country	633	43.6	37.3	40
DK, refused	13			
Subtotal	1482	100.0	100.0	100
Note: All individual measures are for respondents only, except education for higher education of respondent/householder and spouse.				

Income Adjustments

After weighting the sample to the population and adjusting through post-stratification on demographic variables, the final Social Indicators Survey (SIS) analysis sample continues to underestimate family income in comparisons to the Census. We believe this is due in large part to an unusual number of cases in the SIS data that reported zero income (4.9 percent) which are then inflated by our weighting procedures (which correct for the under-representation of low-income households). We assume that this is due to interviewer error and does not reflect the true prevalence of families with no income. To avoid misleading point estimates of poverty, we make one final adjustment to the SIS analysis sample when analyzing income relative to the poverty threshold: we randomly select 25 cases with zero income for exclusion, to match the proportion of zero income cases in the Social Indicators Survey to the proportion in Census data. Table D.3 compares income measures after this final adjustment is applied. (Note: this adjustment is applied only to analyses of poverty status.) Even with the adjustment, mean income reported in the Social Indicators Survey is below that of the CPS and the poverty rate is one percentage point higher. These income estimates should be interpreted very cautiously and should not be taken as evidence that poverty is higher than the rate reported by the Census.

Table D.3: Comparison of New York City Social Indicators Survey and Current Population Survey (U.S. Census)

	SIS 1997		CPS 96 & 97	
	NYC		NYC	
	Unweight	Weighted	Weighted	Weighted
	N	%	%	%
Poverty Status (using family income 2)				
Below poverty	351	34.2	29.5	28.4
Above poverty	1131	65.8	70.5	71.6
Subtotal	1482	100.0	100.0	100
Family Income 2 (head+spouse+partner)				
Zero income	72	9.6	3.6	3.7
20th percentile		\$ 4,000	\$ 5,960	\$ 7,010
40th percentile		\$ 12,000	\$ 13,200	\$ 15,002
60th percentile		\$ 27,757	\$ 29,050	\$ 28,000
80th percentile		\$ 47,500	\$ 47,909	\$ 50,137
Mean		\$ 29,085	\$ 30,821	\$ 35,546
Median		\$ 19,338	\$ 22,500	\$ 20,832

Endnotes

- ¹ Jackson, K. (1995) "Preface" to *The Encyclopedia of New York City*, Edited by Kenneth T. Jackson. New Haven: Yale University Press
- ² Larin, K. & McNichol, E. (1997). *Pulling Apart: A State by State Analysis of Income Trends*. Washington D.C.: Center on Budget and Policy Priorities. There is disagreement among analysts about the extent of the growth in inequality. Most agree that the gap between the rich and poor has grown substantially. But some believe that the decline in incomes of the bottom portion of the population is overstated because conventional statistics fail to count in-kind transfers (like Food Stamps, Medicaid, and public housing) and unreported, underground earnings, and because the consumer price index overstates the real increase in cost of living. See Jorgenson, D., Did We Lose the War on Poverty? *Journal of Economic Literature*, Volume 12, Winter 1998, pp. 79-96; Triest, R.K. Has Poverty Gotten Worse? *Journal of Economic Literature*, Volume 12, Winter 1998, pp. 97-114.
- ³ Smeeding, T. & Gottschalk, P. (forthcoming). Empirical Evidence on Income Inequality in Industrialized Countries. In Atkinson, A.B. & Bourguignon, F. (eds.), *Handbook of Income Distribution*. Elsevier-North Holland Publishers.
- ⁴ Larin, K. & McNichol, E. (1997). *Pulling Apart: A State by State Analysis of Income Trends*. Washington D.C.: Center on Budget and Policy Priorities.
- ⁵ Authors' tabulation from Bureau of the Census, *Current Population Survey 1996-1997*.
- ⁶ Authors' tabulation from Bureau of the Census, *Current Population Survey 1996-1997*.
- ⁷ Authors' tabulation from Bureau of the Census, *Current Population Survey 1996-1997*.
- ⁸ Smeeding, T. & Gottschalk, P. (forthcoming). Empirical Evidence on Income Inequality in Industrialized Countries. In Atkinson, A.B. & Bourguignon, F. (eds.), *Handbook of Income Distribution*. Elsevier-North Holland Publishers.
- ⁹ Authors' tabulations from *Current Population Survey (CPS) Asset Ownership of Household Report 1993*. Measures of assets in the CPS are more extensive than those of the Social Indicators Survey, so the magnitude of the difference between the U.S. and New York City may be exaggerated in these comparisons. The low levels of home ownership in New York City are consistent with the conclusion that a small proportion of New York families has assets above \$100,000.
- ¹⁰ Authors' tabulations from *Current Population Survey Asset Ownership of Household Report 1993*.
- ¹¹ Missing data and small sample sizes, particularly for families with great wealth, cast some doubt on the reliability of these borough-level comparisons. It is particularly surprising to note that Manhattan has the largest percentage of residents with no or negative net worth and a smaller percentage than any borough, other than the Bronx, of residents with assets of \$100,000 or more. While this first round of data suggests large differences across boroughs, we urge caution in interpreting these findings until data from future surveys allows analysts to measure differences with more confidence.
- ¹² *American Housing Survey 1995*, Table 2-1.
- ¹³ New York City Council (1997). *Hollow in the Middle: The Rise and Fall of New York City's Middle Class*. New York: Author.
- ¹⁴ Authors' tabulation from Bureau of the Census, *Current Population Survey 1996-1997*.
- ¹⁵ *USDA Nationwide Food Consumption Survey (NFCS): Decennial Survey, 1977-80; Supplemental Low-Income Survey 1987-88; USDA Continuing Survey of Food Intakes by Individuals (CSFII) 1985-86, 1989-91*. For U.S. households food insufficiency (measured as family members going hungry) remained steady between 2%-4% between 1977-1991.
- ¹⁶ *American Housing Survey 1995*. Nationwide, 7.5 percent of occupied homes have structural problems (holes in floor, open cracks in the interior, exposed wiring); 5 percent have inadequate heating; 1.5 percent lack some or all plumbing facilities.
- ¹⁷ *American Housing Survey (AHS) 1995*, Table 2-3. The AHS uses more than one person per room as a measure of overcrowding; the Social Indicators Survey measure is based on rooms per person.
- ¹⁸ New York State Division of Criminal Justice Services *Criminal Justice Indicators by Percent Change: New York City 1995-96*. New York experienced a 3 percent drop overall in reported crime, a 17 percent drop in burglaries, and a 16 percent drop in robberies during this period.
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¹⁹ Authors' tabulations from *1994 General Social Survey (GSS)*. The GSS asked if respondent was the victim of burglary or robbery; the Social Indicator Survey (SIS) asks whether the family was victimized. This may inflate the SIS figure relative to the national data.

²⁰ *The Gallup Poll Monthly*, Princeton, NJ: The Gallup Poll. No. 318, pp. 51, 52; No. 339, p. 20; No 371, p. 37.

²¹ Authors' tabulations from the *1994 General Social Survey*.

²² Current Population Reports, *Dynamics of Economic Well-being: Health Insurance, 1993-95* "Who Loses Coverage and for How Long?" According to 1994 Survey of Income and Program Participation (SIPP) data, 21 percent of adults lacked insurance for at least one month and 8 percent had no insurance for the 12-month period.

²³ Glazer, N. & Moynihan, D.P. (1963). *Beyond the Melting Pot*, Cambridge, Massachusetts: The MIT Press.

²⁴ Adults born in Puerto Rico are coded as immigrants for these analyses. Due to sample size limitations, analyses of immigrant status include only those adults who identified themselves as White, Black or Hispanic.

²⁵ The self-reported health status is about the same between White and Black adults. This result is surprising, and given what we know from other data about racial differences in mortality and health status, should not be considered reliable.

²⁶ Odds ratios compare the odds of having the condition (i.e. the Indicator of Distress) in the group with the risk condition (e.g. the poor) to the odds of having the condition in the group without the risk factor (e.g. the nonpoor). Because they compare the odds, rather than the prevalence, of the condition, they allow more meaningful comparisons across Indicators that vary in metrics and underlying prevalence rates.

²⁷ Aron, L., Loprest, P. & Steuerle, E. (1996). *Serving Children with Disabilities*. Washington, D.C.: The Urban Institute. Table 2.3.

²⁸ Poverty rates for the elderly will be *higher* in the SIS data than those calculated by the Census, because the SIS definition of the economic unit excludes resources from related but non-nuclear family members in the same residence.

²⁹ *Trends in the Well-Being of America's Children and Youth 1997*. Washington, DC: U.S. Department of Health and Human Services. Table *Living Arrangements of Children Under 18 Years old: 1996*.