

The Status of **WOMEN** and **GIRLS** *in New Hampshire*



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The New Hampshire
WOMEN'S POLICY
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Women's Fund
of New Hampshire

Women and Girls in New Hampshire 2011

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The Women's Fund of New Hampshire fuels positive change in our communities by supporting the most innovative and promising solutions to the issues facing women and girls today. We know that when women and girls prosper, entire communities succeed. Our mission is to encourage philanthropy among women and girls, improve the lives of women and girls through social change grantmaking and educate the community about the potential of women and girls. Contact us at 603-226-3355 or www.wfnh.org, Two Delta Drive, Concord, NH 03301.

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EXECUTIVE SUMMARY

In March of 2011 the White House Council on Women and Girls released a statistical snapshot of the status of women in the United States showing significant progress over the last 20 years across five domains: demographic and family changes, education, employment, health, and crime and violence. While there has been significant progress across the country on all five measures, the report identified a number of areas where improvement is possible. For example, while labor force participation and education levels for women have increased significantly, these trends have not resulted in a similarly significant reduction in the wage gap between men and women.

This study examines the well-being of New Hampshire's women and girls through a similar set of lenses: economic security, health, education, and safety and violence. It provides a framework and methodology for tracking progress, or the lack thereof, over time in the status of New Hampshire women. This study can be used to guide future public policy decisions and philanthropic choices, and more generally inform debates on where the state and local communities need to focus public and private sector resources.

The process of developing this report began with identifying characteristics which were important for state policy makers to measure and understand. Similar reports in other states were used as a guide to the themes and likely data indicators. These themes and the indicators included within the themes are:

- **Economic Security.** This theme describes various characteristics of the economic status of women, including earnings, labor force participation, wages relative to men, and poverty rates.
- **Health.** This theme explores the health and well-being of women through a review of smoking rates, obesity levels, mental health, and early use of prenatal care.
- **Education.** This theme describes various characteristics of education status through a review of women's

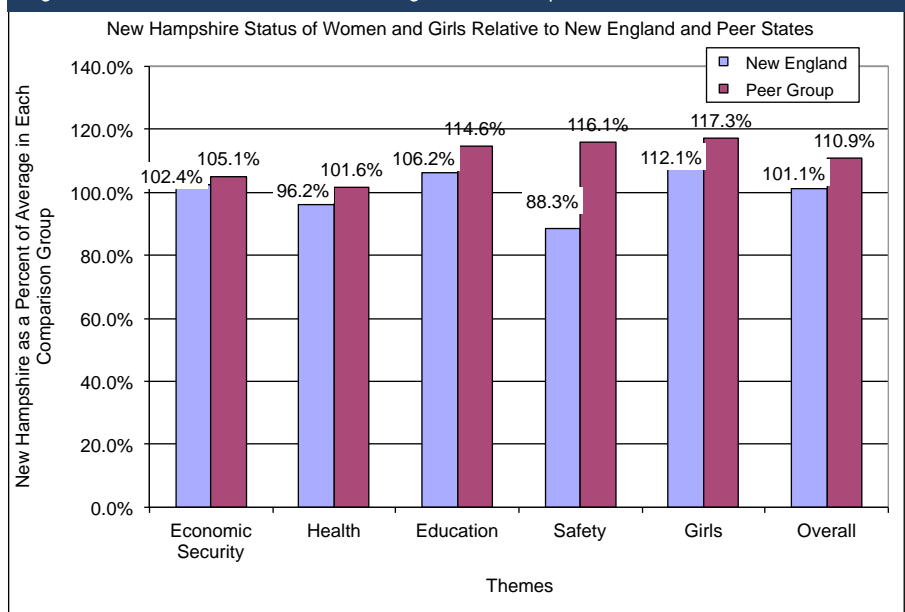
educational attainment, educational test scores, and drop-out rates.

- **Safety and Violence.** This theme provides a preliminary and unfortunately incomplete analysis of crime, physical safety and violence against women through a review of nursing home deficiencies and rates of rape.
- **Girls.** This theme describes the levels in teen birth rates, STD rates for girls, and reports of drug, alcohol and tobacco use for girls.

Data on these statistical indicators were collected, and five separate indices of well-being were developed to compare New Hampshire to other states. The two sets of comparison states are the other New England states and New Hampshire's socio-demographic peers, which include Alaska, Minnesota, Nevada, Utah, Washington, and Wyoming.

Figure 1 shows the New Hampshire score within each of the themes as a percentage of both the New England states and New Hampshire's socio-demographic peers. When indices are below 100 percent, New Hampshire compares poorly relative to other states; when indices are above 100 percent, New Hampshire compares favorably. For example, in the Health theme,

Figure 1: A Dashboard for the Well-Being of New Hampshire's Women and Girls



Note: When indices are below 100%, NH compares poorly relative to other states; when indices are above 100%, NH compares favorably.

New Hampshire rates 1.6 percent better than its peer group, but 3.8 percent worse than New England states on average.

For most indices New Hampshire compares favorably to both peer and New England states. For example, New Hampshire rates 15 percent higher than its peer states, and 6 percent higher than the other New England states, in the education theme as measured by test scores, educational attainment and high school drop out rates.

However, even amid this good news, girls' proficiency in mathematics remains below that of boys. In addition, New Hampshire scored well within the theme of economic security relative to both peer and the other New England states. Yet within this overall favorable performance, a significant wage gap and low rates of female business ownership persist.

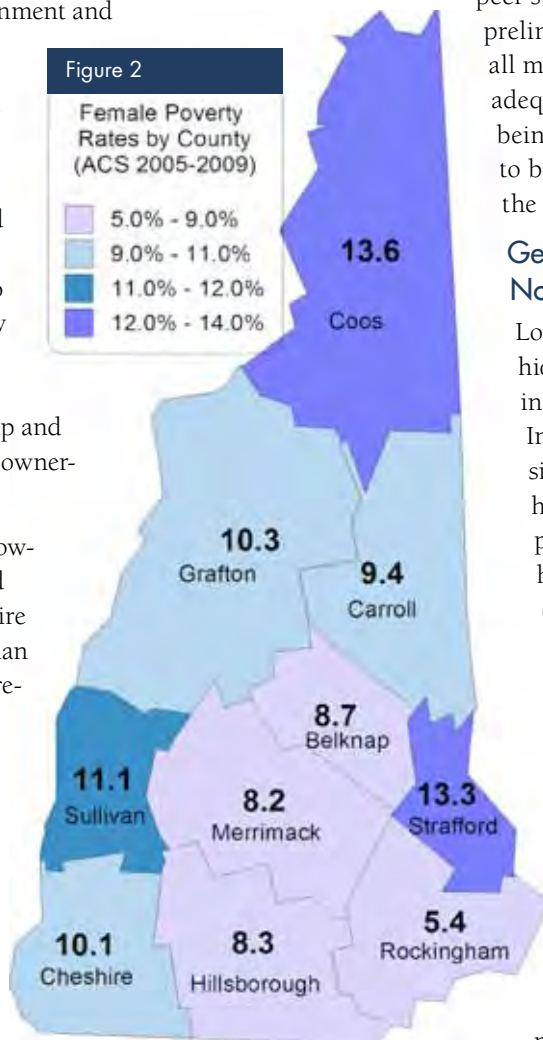
In two areas in particular, however, New Hampshire scored less favorably. New Hampshire scores were slightly better than peer states on health measurements, but the state does worse than other New England states. These results were driven by relatively high rates of obesity, heart disease, cancer, and poor mental health. The second relates to safety and violence. New Hampshire compared favorably to its peer states, but poorly compared to New England states. These results, however, should be interpreted with caution. Despite the importance of safety to women's lives, there are fewer reliable statistical indicators for this theme than any other. According to the two indicators available — rates of serious nursing home deficiencies and forcible rape — New Hampshire measures significantly worse than other New England states but better than its peer states. More data in comparable format need to be collected on this topic to make it meaningful.

The study also includes a very preliminary assessment of the well-being of New Hampshire girls. For this assessment, education indicators were combined with several measures of behavior — drug, alcohol, and tobacco use; teen birth rate; and rates of sexually transmitted disease (STD rate). Although the index of girls' well-being indicates that New Hampshire rates better than other New England states as well as its peer states, this should be taken as a very preliminary result. For a reliable overall measure of the well-being of girls, adequate data on safety, economic well-being and other health indicators needs to be collected — this task was beyond the scope of this report.

Geographic Variation: Not 'One' NH

Looking at these data at the state level hides significant geographic variation in the welfare of women and girls. In the health theme, data point to significant geographic disparities in health outcomes, with the northern part of the state facing the greatest health challenges. With respect to economic security, the southeastern part of New Hampshire has relatively low levels of poverty, but pockets of poverty can be found in the north, central and southwestern parts of the state. Data at the sub-state level, however, were not consistently available.

While much of the data is not consistently available at the sub-state town level, it is useful to think about poverty as a proxy measure of geographic variation in the indicators above, as income is correlated with many of the indicators used in this analysis. In most communities in New Hampshire, town and city level data on poverty rates are too imprecise to be used as a tool to understand variation in poverty. Point estimates at the county level confirm the findings from our analyses within themes. Poverty tends to be higher the further west and north one travels in New Hampshire, with Coos County having the highest poverty rates in the state. However, Strafford County is also remarkable with the second highest point estimate for poverty rates.



MEASURING THE WELL-BEING OF WOMEN AND GIRLS

New Hampshire has slightly more than 1.3 million people, and slightly more than half of them are female. Similar to the nation generally, 14.4 percent of the state's population of women are over the age of 65. Slightly less than 25 percent of women are under the age of 18 (See Table 1). The starting point for developing measures of well-being for NH women and girls was a review of the national data landscape and other state-based analyses.

The White House Council on Women and Girls recently released a statistical snapshot of the status of women in the United States across five domains: demographic and family changes, education, employment, health, and crime and violence (US Department of Commerce, 2011). That analysis assessed point in time estimates and reviewed changes where such data was available for more than 40 indicators.

The benchmark against which the report measured the status of women was their standing relative to men and in some cases, women's progress longitudinally.

The major finding was that across a whole set of important measures American women have made significant progress with some important caveats. With respect to education, women are now more likely than men to have a college or a master's degree, though increased education and labor force participation have not translated into wage and income equity. In 2009, at all levels of education, the study found that women earned only 75 percent of what men earned for comparable activities.

Another finding was that women are more likely to face insecurity across a series of the domains. In part because of lower earnings and in part because unmarried and divorced women often have responsibility for children, women are more likely to face income insecurity, as measured by the poverty rate. Because women live longer, they are more likely to experience health challenges, including arthritis, obesity and mobility impairments.

Benchmarks

In any analysis assessing the status of women and girls, the

choice of comparison is critically important. The White House Council on Women and Girls most often used men as the benchmark. State-based analyses in other parts of the country compare the experience of women and girls to the national average and to neighboring states. A unique feature of this report's methodology is that it uses two sets of comparison states: the other New England states and a set of peer states that are socio-demographically similar to New Hampshire.

The primary comparison points for this analysis were the New England states and six peer states. However, this analysis uses other comparison points where the data is available or the trends or analysis warrant inclusion. For example, wherever possible, this analysis uses sub-state data to show how women and girls in New Hampshire fare in different parts of the state. The analysis also notes longitudinal trends of interest and any areas where women's rankings differ from men's rankings in a particularly significant way.

Comparison States

The New England states were used as the first comparison group for two reasons. First, both policymakers and the general public are likely to compare a state's attainment on any measure to its neighbors. New England's distinctive identity is unique among regions of the country, so we compare New Hampshire to other New England states even though not all of the New England states can be strictly considered neighbors. Second, New England states tend to be similar along a number of dimensions, not all of which may be readily identifiable. For example, New England states have some of the oldest average age populations among U.S. states and some of the highest labor force participation rates (Flynn, Gittell, and Sedgley 1999). Thus, comparing New Hampshire to other New England states compares "like to like."

Table 1: New Hampshire's Demographic Landscape

	New Hampshire	United States
Total Population	1,315,419	301,481,533
Number of Women, All Ages, 2009	666,534	152,925,887
Women as a % of total population, 2009	50.7%	50.7%
Sex Ratio (women to men), 2009	102.7%	103.0%
Sex Ratio (women to men), 1990	104.1%	105.1%
Proportion of Women Aged 65 and Older, 2009	14.4%	14.4%
Proportion of Women Under 18, 2009	24.8%	26.7%

Source: Data from 2005-2009 American Community Survey 5 Year Estimate 2005-2009
Data from 1990 Census

The second group of comparison states was chosen without regard to geography. This set of states, which will be referred to as peer states, was developed by the New Hampshire Center for Public Policy Studies to provide comparative analysis for many different topics, not just this analysis of the status of women and girls. Peer states were chosen on the basis of their similarity to New Hampshire on nine separate socio-demographic factors: personal income per capita, population density per square mile of land, percent of the population that is white alone, percent of the adult population with a bachelor's degree or higher, median household income, average SAT scores, percent of the population age 65 and over, health spending per person, and state business climate.

Once the nine socio-demographic factors were selected, a "Z-score" methodology was used to determine which states are statistically most like New Hampshire (see Appendix 1 for details). The peer states determined to be most like New Hampshire are Alaska, Minnesota, Nevada, Utah, Washington, and Wyoming. Some states that are not very much like New Hampshire under this methodology are Mississippi, New Jersey, South Carolina and West Virginia.

ECONOMIC SECURITY

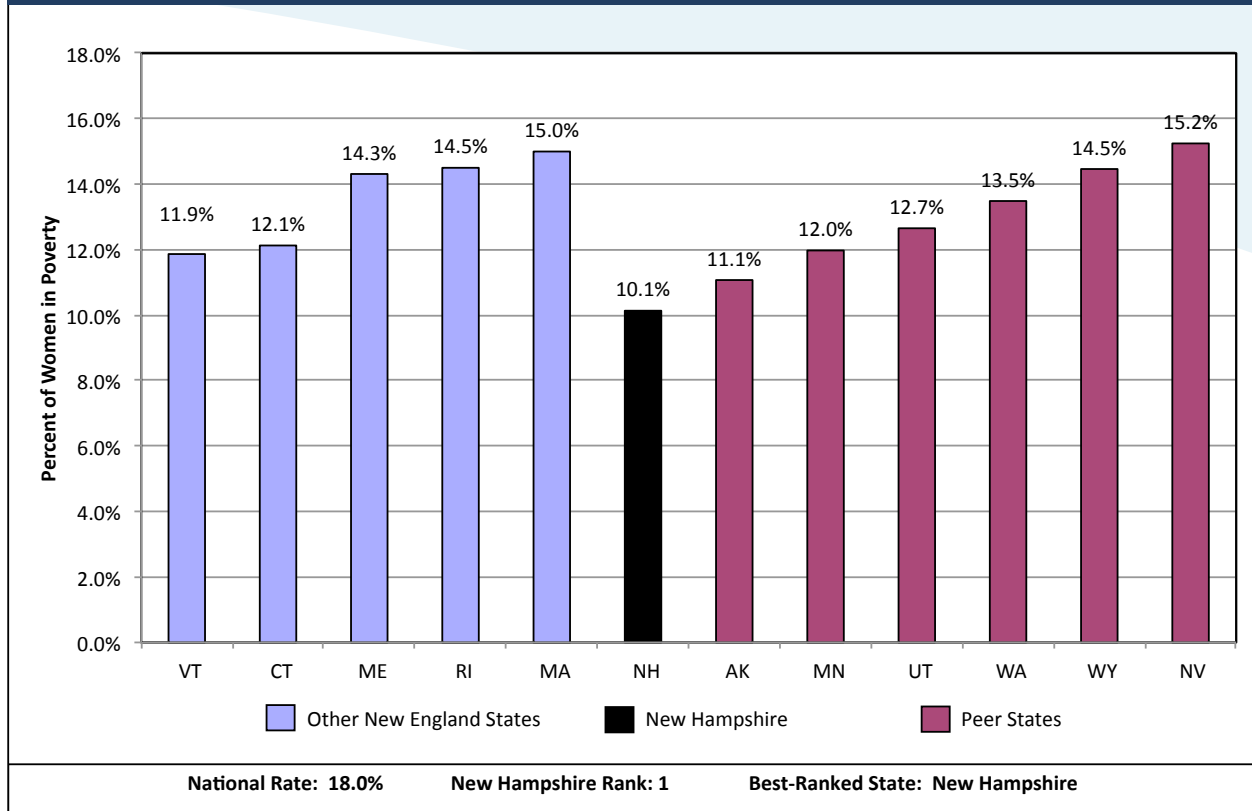
Health and well-being is highly correlated with income, which makes economic security a critical theme in determining the well-being of women. The severe recession that began in December 2007 has deeply affected both women and men, and its effects are ongoing. But according to Federal Reserve Chairman Ben Bernanke, the economic recovery appears to be strengthening, and there is increasing evidence that it has become self-sustaining (Bernanke 2011). Fortunately, New Hampshire has been regaining jobs more rapidly than the rest of New England and the nation. As of November 2010, New Hampshire had recovered about half the jobs it lost during the Great Recession, and was poised to regain the rest by the beginning of 2012 (Delay 2011, New England Economic Partnership 2010, 165).

This recession has been unusual in that the unemployment rate for men has consistently exceeded that for women, both for the U.S. and for New Hampshire. It had the harshest impact on the construction and manufacturing sectors, which employ a disproportionate number of men, and the least impact on the health and education sectors, which employ a disproportionate number of women (Nielsen and Jonsten 2010).



Note: When indices are below 100%, NH compares poorly relative to other states; when indices are above 100%, NH compares favorably.

Figure 4: Female Poverty Rate (2007 - 2008)



Source: State Health Facts, 2008a

References: State Health Facts, 2008a. Adult Poverty Rate by Gender, states. Henry J. Kaiser Family Foundation.

The growing economic role of women and the increasing prevalence of dual earner couples have helped cushion the blow of the recession for many families. In 2007, only 24 percent of families were structured as “traditional” families with married men serving as the sole provider, compared with 46 percent in 1970 (Smith 2008). While married women contributed 45 percent of total family earnings in 2008, they contributed 47 percent in 2009 (Smith 2010, 1).

Figure 3 on page 4 shows how New Hampshire compared to New England and peer states across the 5 indicators chosen to measure economic security: women’s earnings, the wage gap, labor force participation, the prevalence of women owned businesses, and the poverty rate. As a reminder, when indices are below 100 percent, New Hampshire compares poorly relative to other states; when indices are above 100 percent, New Hampshire compares favorably. Across all economic security indicators, New Hampshire fares slightly better than the New England and peer state comparison groups. However, as discussed below, there exists significant variation in how New Hampshire fares based

on the indicator, and there is significant geographic variation in the state as to how women fare.

Positive Indicators: Low Poverty Rate and High Labor Force Participation Rate

The percent of women in poverty in New Hampshire is lower than in any of its peer states and the lowest in New England. Whereas 11 to 15 percent of women in the peer states and in the other New England states are poor, a smaller proportion of New Hampshire’s women, 10 percent, are poor (Figure 4).

To some degree, this good rating arises because New Hampshire’s demographic makeup is less diverse than many other states. Another factor contributing to New Hampshire’s low poverty rate comes from the way the poverty rate is calculated. Despite the fact that the cost of living varies across the U.S., the poverty threshold is the same across the continental U.S. If poverty thresholds were adjusted for living costs, the poverty rate in New Hampshire, where living costs are above the U.S. average, would likely be higher.

Table 2: Women's Business Ownership (2007)

State	Percent of businesses women owned
States	
Massachusetts	29.8%
Connecticut	28.1%
Rhode Island	27.3%
Vermont	26.0%
New Hampshire	25.8%
Maine	25.6%
New Hampshire and Peer States	
Washington	28.6%
Nevada	28.6%
Minnesota	26.8%
Alaska	25.9%
New Hampshire	25.8%
Wyoming	25.5%
Utah	24.9%
National Rate:	28.7%
New Hampshire Rank:	38
Best-Ranked State:	Maryland

¹Women-owned firms are non-farm businesses for which women own at least 51 percent of company stock or equity and includes proprietorships, partnerships and all types of corporations. The U.S. Census conducts a survey of business owners every five years.

Source: U.S. Census, 2007 Survey of Business Owners

Another indicator with an encouraging ranking is the high rate of labor force participation in New Hampshire. The labor force participation rate is the ratio of people in the labor force (all those either employed or unemployed) to the working age population (persons over 16 years old not in an institution). Although women make important contributions outside the labor force, whether caring for children or the elderly or in the volunteer sector, labor force participation gives women an important measure of economic security. In 2009, 65.5 percent of women were in the labor force in New Hampshire. Among New Hampshire's peer states only Minnesota and Alaska had higher rates of labor force participation, and among the New England states, only Vermont had a higher rate (Table A-1). Note that all tables with the "A" designation appear in the Appendix. Over the last three decades, female labor force participation has increased tremendously in New Hampshire as it has in the rest of the United States. In 1976, female labor force participation in New Hampshire barely exceeded 50 percent (Nielsen and Jonsten 2010, 24).

Concerns: Lower Rates of Women Business Ownership and High Wage Gap

There are two measures of economic security where New Hampshire fared less well compared to the comparison states. New Hampshire ranks nearly at the bottom among both peer states and neighboring states in terms of the percentage of businesses that are women owned (Table 2). Whereas nearly 30 percent of Massachusetts businesses are owned by women, less than 26 percent of New Hampshire businesses are owned by women. Only Maine, Utah and Wyoming fare worse than New Hampshire under this measure among the comparison states.

In addition, New Hampshire compares relatively poorly to both the New England and peer group states in its wage gap. The wage gap is measured by dividing women's median annual earnings by men's, and expressing the ratio as a percent. New Hampshire women earn 72 percent of what men earn, ranking New Hampshire fifth among the peer states and last among the New England states. In comparison, Vermont women who work full time earn on average 82 percent of what men earn (Table A-2).

The wage gap arises because of a wide range of factors, not all of which are clearly understood. Some of the wage gap persists due to traditional barriers to women's

economic advancement or discrimination; some of the gap may be attributed to women moving in and out of the workforce due to child rearing or caregiving responsibilities. To the extent women are part of high-income families, the wage gap is less of a measure of personal economic security and more a reflection of inequity and lost economic potential. *Table A-3* shows a comparison of women's earnings. Median annual earnings for women working full time in New Hampshire rank squarely in the middle of the distribution for both the peer states and the New England states.

Variation within New Hampshire

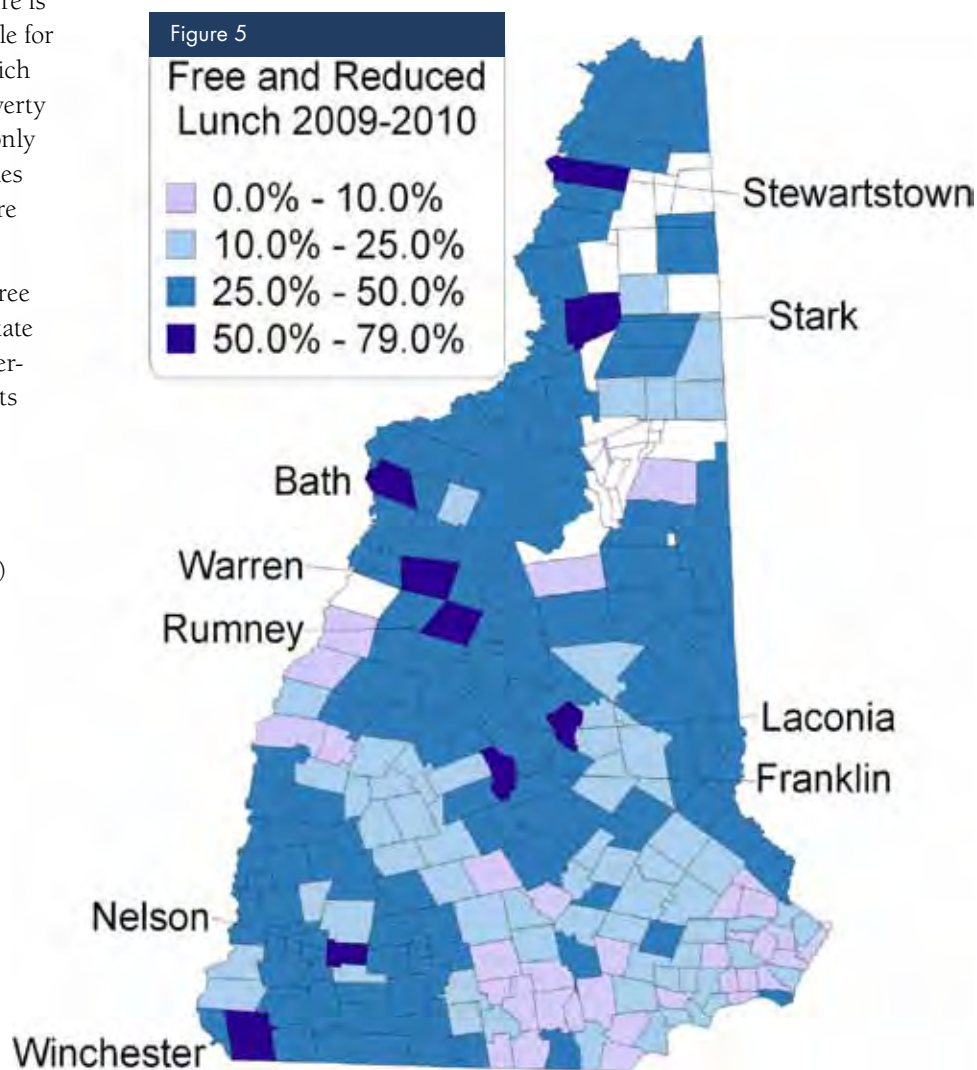
Although it is not possible to obtain precise statistics on poverty rates for women by town, a closely related measure is the percentage of students eligible for free or reduced lunch (FRL), which is widely used as a proxy for poverty rates in federal programs since only children from low income families are eligible, and since the data are available by school district.

Not surprisingly, eligibility for free and reduced lunch within the state varies enormously. While on average, nearly one-fourth of students are FRL eligible, rates range from 63 percent in Winchester (Cheshire County) to 0 percent for New Castle and South Hampton (Rockingham County) and Waterville Valley (Grafton County). In general, the districts with the lowest percentage of students eligible for free or reduced lunch are in the southeastern part of the state. Districts with more than 50 percent of students eligible are Stewartstown and Stark in the north; Bath, Franklin, Laconia, Rumney, and Warren in central New Hampshire, and Nelson and Winchester in southwestern New Hampshire (*Figure 5*). Such dramatic differences highlight the

importance of improving data collection at the sub-state level and analyzing sub-state statistics whenever possible, particularly for measures on which the state as a whole ranks favorably.

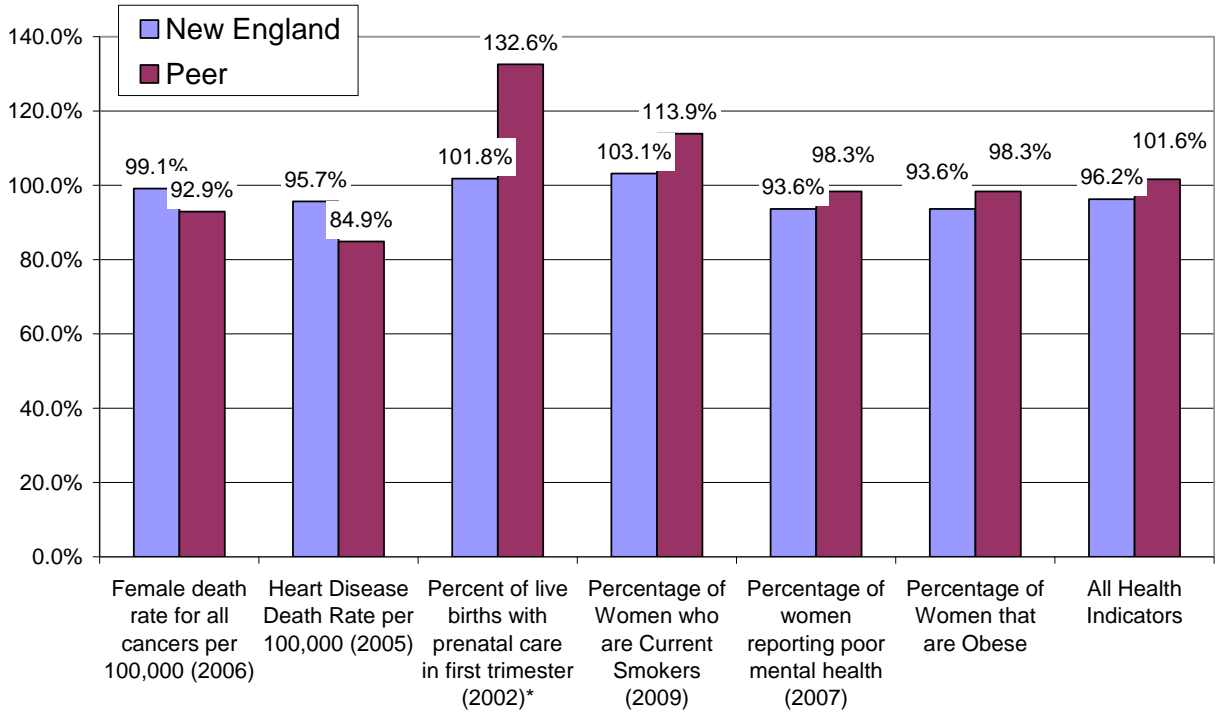
HEALTH

Most analyses of the status of women include a variety of indicators of health status – such as health insurance coverage, access to medical services, and general health indicators – as these contribute to individual and family economic stability. Health problems can create major obstacles to a woman's ability to work and remain employed as well as diminish her ability to share family responsibilities and enjoy a decent quality of life.



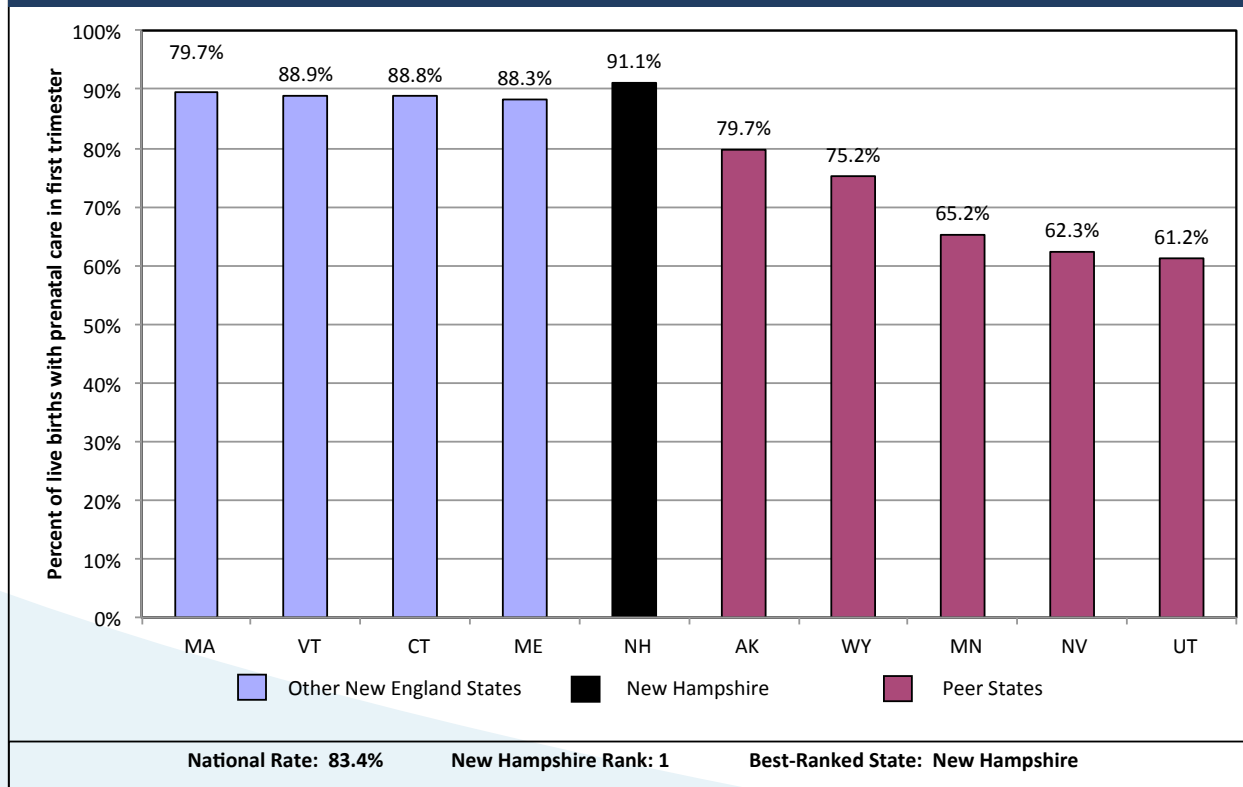
Source: New Hampshire Department of Education, 2010
 References: New Hampshire Department of Education. 2010.
 Free/Reduced Lunch Eligibility by District, 2009-2010. January.

Figure 6: Health / NH Scores Relative to Comparison Groups



Note: When indices are below 100%, NH compares poorly relative to other states; when indices are above 100%, NH compares favorably.

Figure 7: Women Beginning Prenatal Care in First Trimester (2002)



Source: CDC/NCHS, 2008 | References: CDC/NCHS, 2008. National Vital Statistics System, Birth File.

While New Hampshire's health care system is of high quality, it is also of high cost (Norton and Delay, 2009), and will potentially be fundamentally altered by the March 2010 passage of the federal Patient Protection and Affordable Care Act. However, recent efforts in Congress to repeal or delay implementation, and recent contradictory rulings that the law's mandate for individuals to purchase health insurance is unconstitutional put a cloud of uncertainty over the implementation of that federal law (Sack 2010).

It is in this context that we look at health as a *theme*.

Figure 6 shows how New Hampshire compared to New England and peer states across the six indicators chosen to measure health: cancer rates, rates of heart disease, use of prenatal care, smoking rates, mental health status and obesity. Taken together, these indicators suggest that New Hampshire is faring slightly less well than the New England comparison group, and slightly better than the peer group. Variation among indicators and within New Hampshire is described below.

Positive Indicators: Prenatal Care and Low Smoking Rates

Prenatal care, defined as any medical care a woman receives during her pregnancy, is important both for the health of the baby and the mother. Infants born to mothers who have not received prenatal care are more likely to have a low birth weight and are more likely to experience a wide range of health problems at birth (Williams and Sorokina 2007). As Figure 7 shows, access to prenatal care in New Hampshire is good. Ninety-one percent of women in New Hampshire receive prenatal care beginning the first trimester of pregnancy, which exceeds the rate for all New England states by a few percentage points, and exceeds the rate for New Hampshire's peer states by at least 11 percentage points.

Another positive finding regarding the health of New Hampshire women is the relatively low smoking rate and its downward trend over time. The percentage of women who smoke in New Hampshire is lower than in any New England state except Massachusetts, and lower than in any peer state except Washington and Utah (Table A-5). There has also been a significant downward trend in the smoking rate: the percentage of New Hampshire women who smoke declined from 19 percent in 1995 to 14 percent in 2009. Given that smoking leads to heart disease and cancer, the relatively low and declining smoking rate bodes well for the future health of New

Hampshire women. One caveat and reason for concern, however, is that the youngest cohort of women (those between 18 and 29 years old) has the highest percentage of women who smoke (Antal and Jenkins 2010, 13).

Concerns: Obesity, Mental Health, Heart Disease and Cancer

New Hampshire women do not fare as well on several other health measures. Recent public health initiatives have devoted a lot of attention to the obesity epidemic across the United States. The percentage of New Hampshire women who are either overweight or obese has increased from 38 percent in 1995 to 52 percent in 2008. In 2009, 26 percent of New Hampshire women were obese. The only comparison state whose female obesity rate was more than a half percentage point worse was Washington at nearly 27 percent (Table A-6).

The percentage of New Hampshire women reporting poor mental health is also high relative to our comparison states. In 2007, 41 percent of New Hampshire women reported having poor mental health between one and 30 days in the past 30 days (Table 3). This is a worse rating than any other New England state and worse than all peer states other than Nevada and Utah.

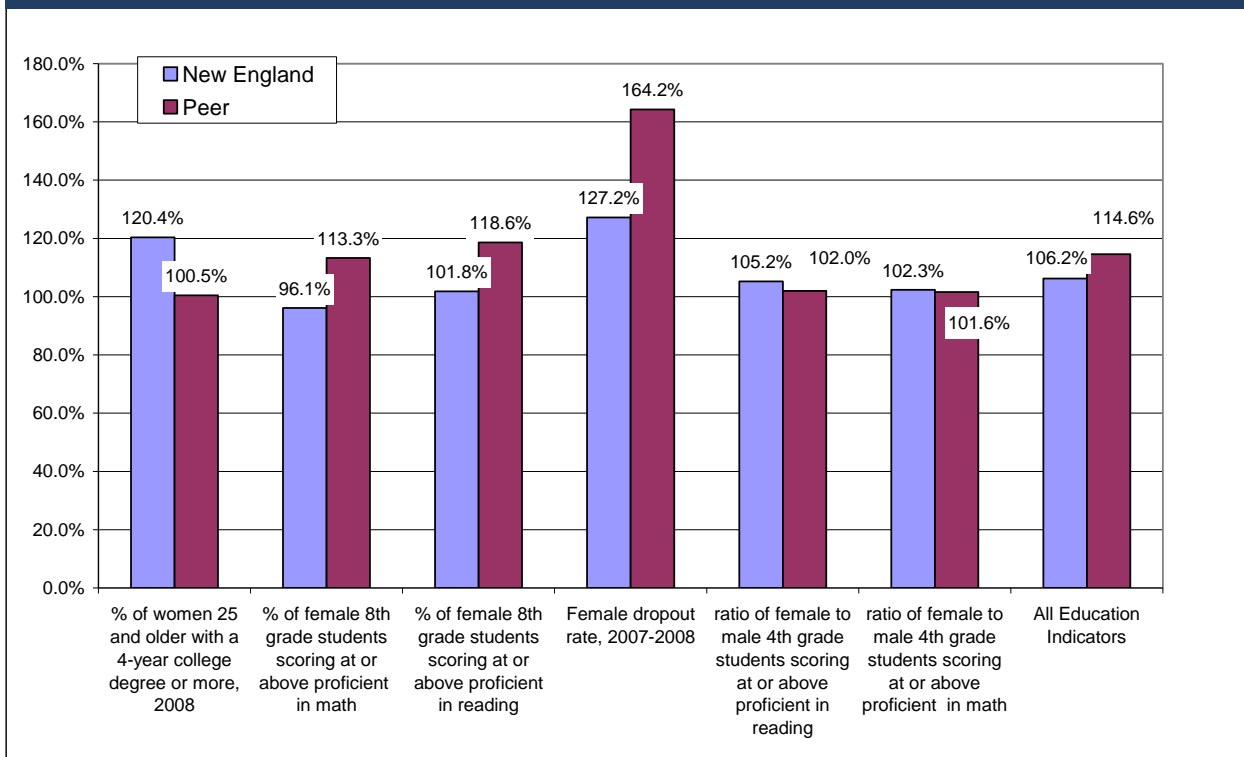
Table 3: Percent of Women with Poor Mental Health (2007)

State	Reporting Poor Mental
New Hampshire and Other New England States	
Massachusetts	37.6%
Connecticut	38.0%
Maine	38.4%
Vermont	39.3%
Rhode Island	39.5%
New Hampshire	40.9%
New Hampshire and Peer States	
Minnesota	34.3%
Wyoming	39.5%
Alaska	39.7%
Washington	40.7%
New Hampshire	40.9%
Nevada	45.1%
Utah	45.9%
National Rate:	37.8%
New Hampshire Rank:	45
Best-Ranked State:	Louisiana

¹Poor mental health is defined to include stress, depression and emotional problems.

Source: Behavioral Risk Factor Surveillance System, 2007

Figure 8: Education / Select NH Scores Relative to Comparison Groups



Note: When indices are below 100%, NH compares poorly relative to other states; when indices are above 100%, NH compares favorably.

Cancer and heart disease are the two largest causes of death for New Hampshire women. The female death rate from heart disease in New Hampshire is second worst among both peer and neighboring states (Table A-7). The female death rate from all cancers in New Hampshire is also second worst among both peer and neighboring states (Table A-8).

Variation within New Hampshire

Data on sub-state variation within New Hampshire are not available for most of the health measures discussed in this section. For those indicators that are available, the measures suggest that there are larger problems in the more rural—particularly northern—parts of the state.

Obesity rates in New Hampshire’s Health Service Areas range from 12 percent to 38 percent, with the highest obesity rates in the northern and western parts of the state and on the Massachusetts border (Stracuzzi and Ward 2010, 6). County Health Ratings 2010 ranked the health of counties across the country on 28 indicators and outcomes, including access to healthy foods, percentage of uninsured, and other measures. This study

found that among New Hampshire counties, Grafton ranked healthiest and Coos the least healthy (Tracy 2010). Data on cancer deaths and heart disease rates per 100,000 females are available by county. The counties with the worst heart disease rates were Merrimack and Sullivan (Table A-9), while those with the worst cancer rates were Belknap and Strafford (Table A-10).

EDUCATION

Important structural changes in the economy form the backdrop for the education policy environment. First, our national economy is increasingly integrated into the global economy, so graduates of our high schools and colleges compete with graduates around the world. Second, technology, in particular our connection to the Internet, is changing the way we communicate, socialize, work and learn. Because use of the Internet allows access to an incredible amount of knowledge without regard to bounds of space or time, it has the potential for radically changing the nature of our education system (Wagner 2008, Rosen 2010).

Education has been high on the policy agenda for both federal and state governments for many years. There

has been considerable focus on accountability, reflected in the No Child Left Behind Act passed under the administration of President George W. Bush, and much pressure to raise the achievement levels of American children, reflected in President Barack Obama's Race to the Top Initiative. The role of federal funding and regulation has increased, and many states have come together to work towards more common curriculum, under the Common Core State Standards Initiative.

State level education policy has been characterized by dramatic shifts as well. School funding lawsuits have substantially increased the state's role in funding local education costs. The state has enacted policy initiatives requiring public kindergarten and increasing the drop-out age from 16 to 18 as well.

Figure 8 shows how New Hampshire compared to New England and peer states across the six indicators chosen to measure the education theme: percentage of women 25 and older with a four-year degree, proficiency levels in 8th grade math and reading, the female to male ratio of test scores in math for 4th graders and female drop out rates. Of all the themes, New Hampshire fares best

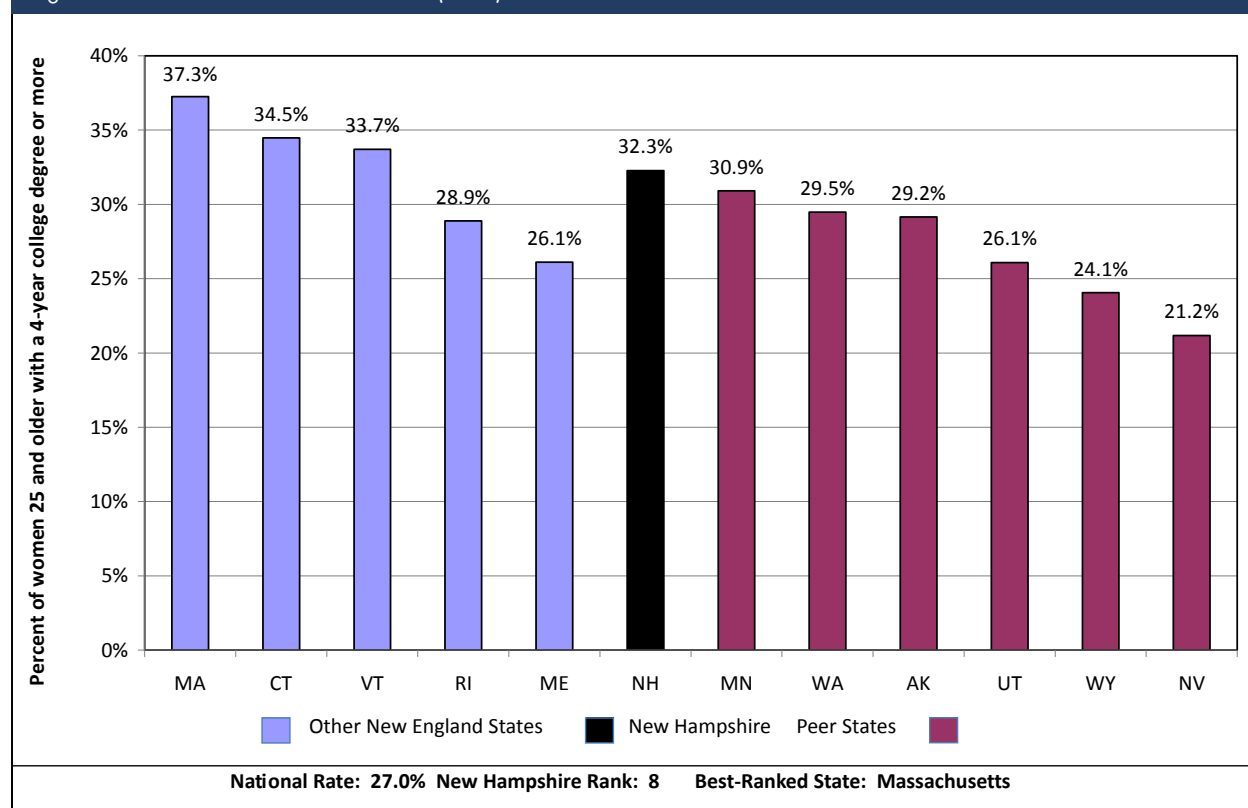
on education. On only one measure -- percentage of female 8th grade students scoring at or above proficient in math -- did New Hampshire fall below the New England and peer comparison states.

Positive Indicators: Educational Attainment, Test Results and Low Dropout Rate

Thirty-two percent of New Hampshire women 25 and older have at least a four-year college degree. This exceeds the percentage for every peer state and is right in the middle of the New England states, a region in which educational attainment has traditionally been higher than the U.S. average (Figure 9).

New Hampshire, Rhode Island and Vermont have together developed a test known as the New England Common Assessment Program (NECAP). Maine has recently joined this consortium, which tests students in third and eighth grades in math and reading, and in 11th grade in math, reading and writing. For all subjects and grades except 11th grade math, a majority of New Hampshire female students achieve proficiency or higher in these tests. Furthermore, New Hampshire scores

Figure 9: Women's Educational Attainment (2008)



Source: U.S. Department of Education, 2009 | References: U.S. Department of Education. 2009. Table 285. Bachelor's degrees conferred by degree-granting institutions, by race/ethnicity and sex of student: Selected Years. National Center for Education Statistics. June

Table 4: NAEP Assessment Test Scores

State	Percent of female 4th grade students scoring at or above proficient in math	Rank	Percent of female 4th grade students scoring at or above proficient in reading	Rank	Percent of female 8th grade students scoring at or above proficient in math	Rank	Percent of female 8th grade students scoring at or above proficient in reading	Rank	Ratio of female to male proficiency - 8th grade math	Rank	Ratio of female to male proficiency - 8th grade reading	Rank	Ratio of female to male proficiency - 4th grade math	Rank	Ratio of female to male proficiency - 4th grade reading	Rank
New Hampshire and Neighbor States																
New Hampshire	53.8	2	46.1	3	41.5	3	47.4	4	0.92	4	1.50	1	1.25	3	0.94	1
Connecticut	43.5	4	46.7	2	40.6	4	48.4	2	1.04	1	1.31	5	1.22	4	0.89	4
Maine	42.4	5	40.3	5	32.3	5	41.4	5	0.85	6	1.49	2	1.31	1	0.89	4
Massachusetts	55.0	1	49.8	1	49.9	1	48.5	2	0.93	2	1.30	6	1.12	6	0.94	1
Rhode Island	36.0	6	40.1	6	26.2	6	32.4	6	0.89	5	1.41	4	1.29	2	0.85	6
Vermont	48.7	3	44.6	4	41.9	2	48.4	1	0.93	2	1.44	3	1.16	5	0.93	3
New Hampshire and Peer States																
New Hampshire	53.8	1	46.1	1	41.5	2	47.4	1	0.92	2	1.50	3	1.25	3	0.94	2
Alaska	35.8	6	30.7	6	33.3	4	33.1	6	0.99	1	1.55	2	1.29	1	0.90	5
Minnesota	51.4	2	40.7	2	44.8	1	44.7	2	0.92	2	1.38	6	1.20	5	0.92	4
Nevada	29.8	7	25.7	7	23.6	7	28.4	7	0.91	5	1.73	1	1.15	7	0.87	7
Utah	40.2	4	33.5	5	33.3	4	39.1	4	0.9	6	1.45	4	1.18	6	0.95	1
Washington	41.8	3	37.7	3	37.6	3	42.0	3	0.92	2	1.41	5	1.29	1	0.94	2
Wyoming	37.9	5	35.9	4	31.2	6	39.0	5	0.82	7	1.30	7	1.21	4	0.88	6
National Rate:	37%		35%		35%		31%									
NH Rank:	2		3		4-5		2-6									
Best Ranked State:	Massachusetts		Massachusetts		Massachusetts		Massachusetts									

Source: National Assessment of Educational Progress, National Center for Education Statistics, 2009

first among the NECAP states in four of the seven tests, and only earns third rank (but not by much) in 11th grade writing (*Table A-11*).

The National Assessment of Educational Progress (NAEP) is not given in all New Hampshire schools, so it cannot be used to compare achievement among the state's school districts, but it allows policy makers to compare one state to another. NAEP test results given in math and reading in fourth and eighth grades are summarized in *Table 4*. Among its peer states, New Hampshire ranks the highest in all categories except eighth grade math in which it scores second, after Minnesota. Among neighboring states, New Hampshire females place squarely in the middle. Massachusetts is the New England state in which female test scores are the highest. This is a particularly impressive achievement, given that the percentage of poor, special education, and

limited English proficiency students in Massachusetts is higher than in New Hampshire (Kenyon 2007).

Finally, New Hampshire's high school dropout rate is low relative to both peer and neighboring states (*Table A-12*). Aggressive efforts to reduce the high school dropout rate in recent years have led to significant progress for many of the state's high schools (New Hampshire Department of Education 2009). Indeed, a recent report on high school dropout rates found that New Hampshire and Vermont were the only states without a "dropout factory" school, meaning a school in which senior class enrollment is 60 percent or less of its freshman class enrollment (Buckland 2010, B1).

Variation within New Hampshire

Consistent with our other themes, educational status of women and girls varies greatly within the state both in terms of test scores and dropout rates.

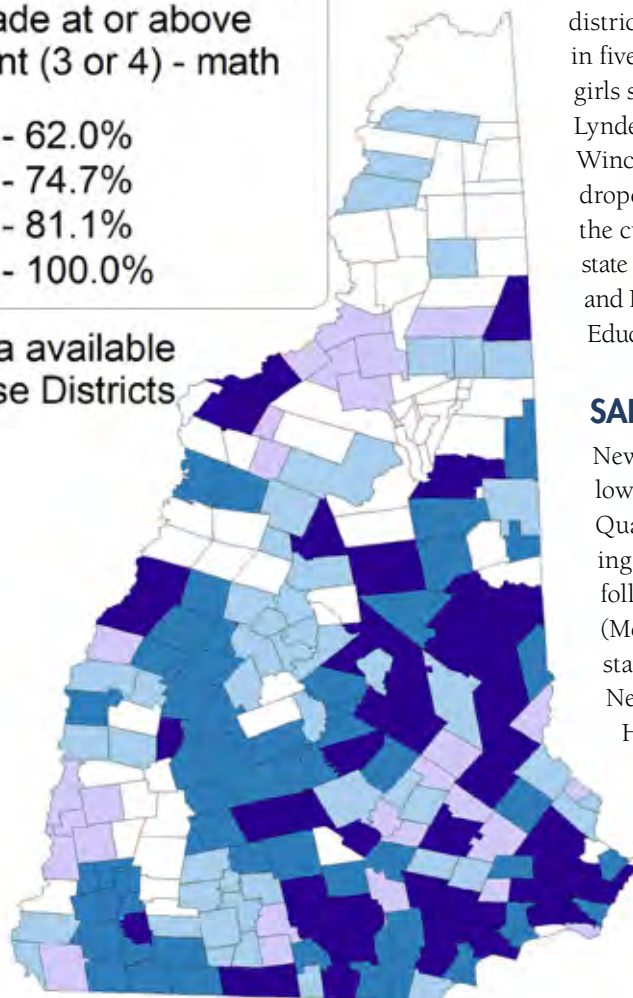
Figure 10 shows NECAP scores for third grade students. Although a majority of girls in each district score proficient or above in reading, in five districts 50 percent or fewer of the girls score proficient in math: Allenstown, Lyndeborough, Nottingham, Pittsfield, and Winchester. With respect to high school dropout rates, four high schools had twice the cumulative four-year dropout rate of the state average: Colebrook, Newport, Pittsburg, and Raymond (New Hampshire Department of Education 2010).

Figure 10

Percent of Female Students 3rd grade at or above Proficient (3 or 4) - math

- 45.5% - 62.0%
- 63.6% - 74.7%
- 75.0% - 81.1%
- 81.1% - 100.0%

No data available
for these Districts



SAFETY AND VIOLENCE

New Hampshire is known for having a low crime rate, and in 2010 Congressional Quarterly rated New Hampshire as having the lowest crime rate in the nation, followed by Vermont and North Dakota (Morgan, Morgan and Boba 2010). The states with the highest crime rates were Nevada, New Mexico, and Louisiana.

However, the Congressional Quarterly's crime ratings have received criticism. One should be aware that the rankings are based only on reported crime, and reporting rates vary among states (Bialik 2010).

The University of New Hampshire Survey Center conducted a phone survey in 2006 to obtain a broad picture of the extent of violence against women in the state (New Hampshire Coalition Against Domestic and Sexual Violence, 2007). It found that over their lifetimes, one in four New Hampshire women had been sexually assaulted, at least one in three had been the victim of physical assault by an intimate partner, and a majority of New Hampshire women had experienced sexual or physical assault. The survey questions were based on questions from the Centers for Disease Control and the National Institute of Justice, allowing the authors to state that the rates of violence against women in New Hampshire were either comparable to or higher than the rates of violence found in a national survey.

Unfortunately, in this analysis, we were limited to two data indicators that allowed comparisons of New Hampshire to other states: rates for forcible rape and rates of serious nursing home deficiencies, which are of import due to the fact that such deficiencies can be life threatening, and over two thirds of nursing home residents are women. Data quality issues for each of these indicators are discussed below.

In 2007, the reported rape crime rate was lower in New Hampshire than in any peer state, but higher than Connecticut, Rhode Island, and Vermont (Table 5). An important problem with this indicator is that nationwide only about 40 percent of rapes and sexual assaults are reported to the police (U.S. Department of Justice 2009, 6) and many New Hampshire police departments do not report data to the state, so the state cannot make complete reports to the U.S. Department of Justice (Norton and Merrow 2006, 10).

Our second indicator focuses on seniors in nursing homes, a predominantly female and particularly vulnerable population. For those reasons, the percent of nursing facilities with serious deficiencies is of interest. Serious deficiencies include severe bedsores, malnutrition, overuse of medications, and abuse and do present serious threats to patients. This statistic is a better indicator than the percentage of nursing homes with any deficiencies, as some deficiencies are not critical and do not present life and safety issues. However, we also note that a recent General Accountability Office study found that state nursing home inspectors miss a significant fraction of deficiencies (Pear 2008).

Table 5: Forcible Rape (2008)

State	Rate of forcible rape per 100,000 inhabitants
New Hampshire and Other New England States	
Connecticut	19.3
Vermont	20.4
Rhode Island	26.4
Massachusetts	26.7
Maine	28.5
New Hampshire	29.7
New Hampshire and Peer States	
New Hampshire	29.7
Utah	32.6
Wyoming	33.8
Minnesota	34.6*
Washington	40.1
Nevada	42.4
Alaska	64.3
New Hampshire Rank:	22
Best-Ranked State:	New Jersey

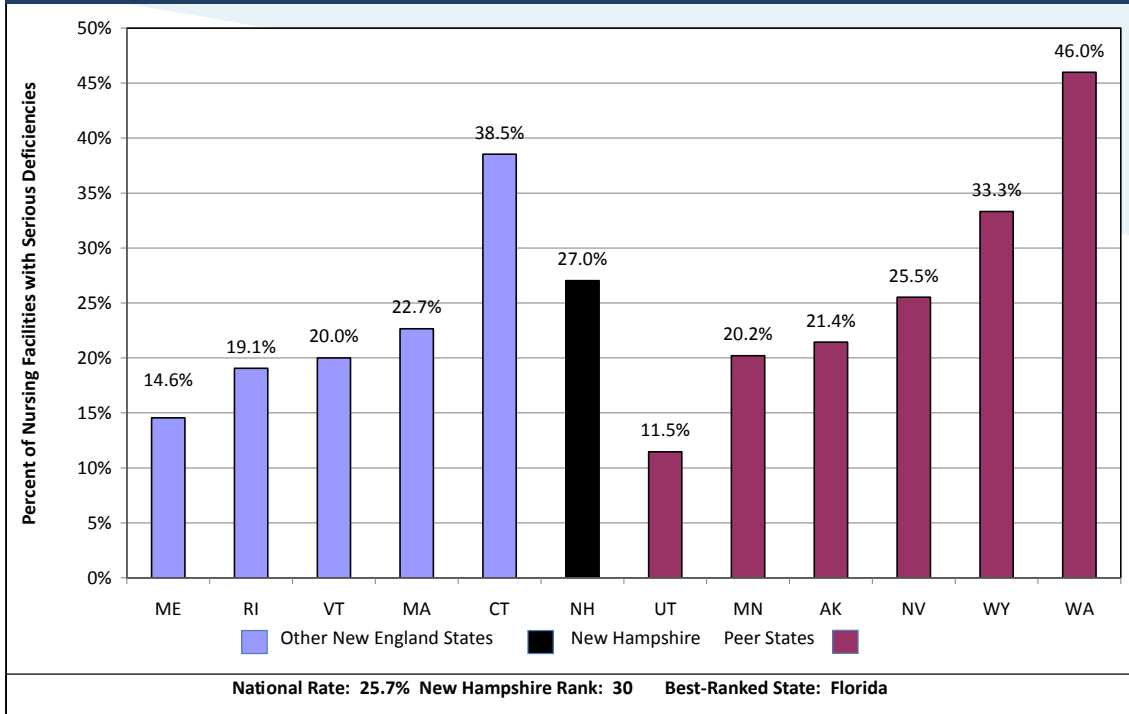
* Estimate

¹ *Rape by Force is rape committed against a person's will and does not include cases of criminal but "nonforcible sexual intercourse" such as statutory rape or incest.*

Source: FBI, 2008

As Figure 11 on page 15 shows, the rate of serious nursing home deficiencies in New Hampshire was higher than any New England state other than Connecticut, and higher than any peer state except Wyoming and Washington. A recent article summarizing data available at Medicare.gov, the federal web site that rates nursing home quality, provides corroboration for New Hampshire's ranking. One-quarter of New Hampshire nursing homes were rated below three stars on a five-star scale (Wickham 2010). It should be acknowledged that only a segment of elderly women live in nursing homes; and for the many that continue to live at home or in assisted-living facilities and there are no readily available statistics on their network of care.

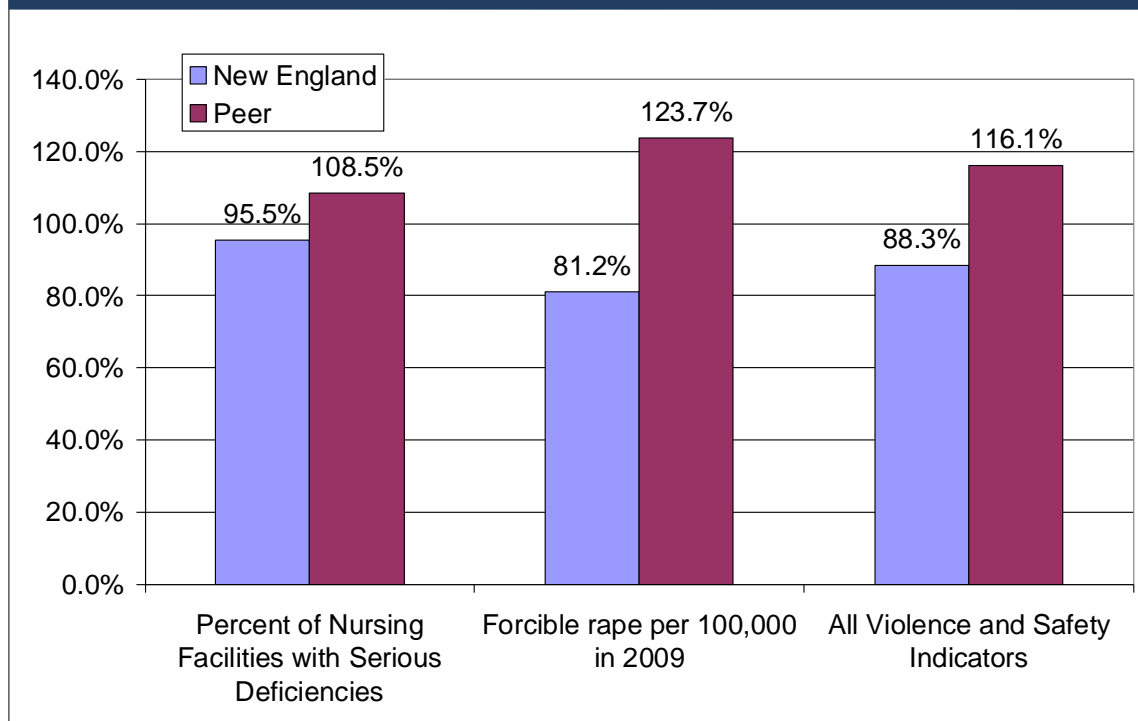
Figure 11: Nursng Home Deficiencies (2008)



Source: State Health Facts, 2008b

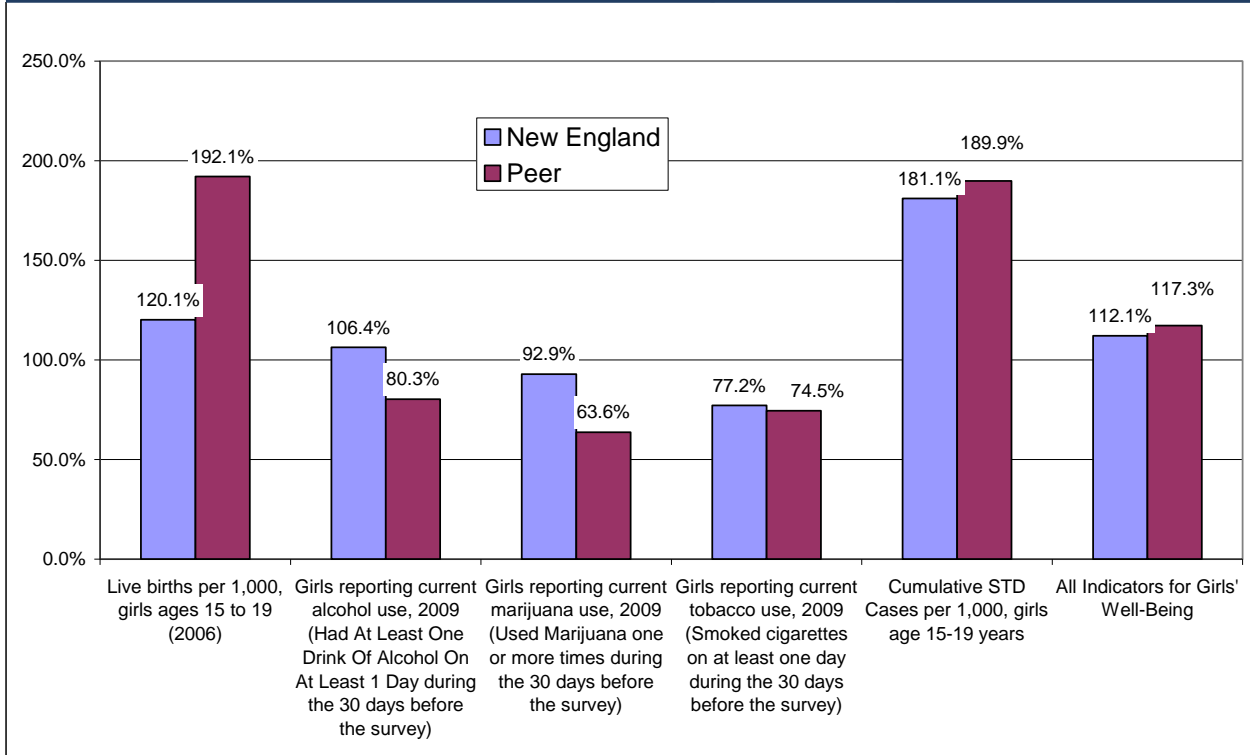
References: State Health Facts, 2008b. Percent of Nursing Homes with Deficiencies. Henry J. Kaiser Family Foundation.

Figure 12: Violence & Safety / NH Scores Relative to Comparison Groups



Note: When indices are below 100%, NH compares poorly relative to other states; when indices are above 100%, NH compares favorably.

Figure 13: Indicators of Girls Well-Being / NH Scores Relative to Comparison Groups



Note: When indices are below 100%, NH compares poorly relative to other states; when indices are above 100%, NH compares favorably.

GIRLS

Children are more likely to be poor than any other age group, so the impact of the recession is of particular concern. In 2007, New Hampshire's child poverty rate was 9 percent; and in 2009 that rate had risen to 11 percent. Moreover, a recent survey found that over 1,000 New Hampshire teens and young adults are homeless (Wauchope 2010). Youth homelessness is linked to alcohol and drug use, mental health problems, child abuse and neglect, and low school achievement.

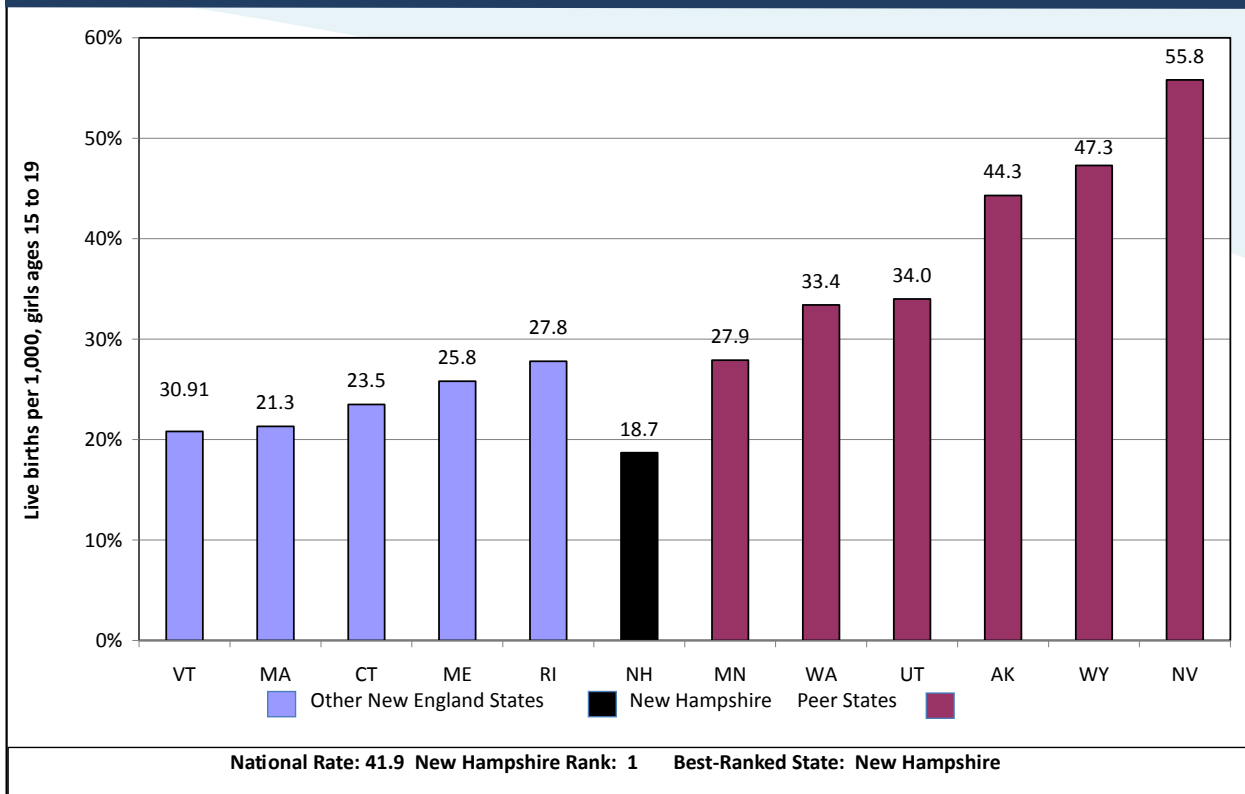
Figure 13 shows how New Hampshire compared to New England and Peer states across the 5 indicators chosen to measure the status of girls in New Hampshire: births to teenagers, alcohol, tobacco, and marijuana use among girls, and sexually transmitted diseases. As shown taken together, these indicators suggest that New Hampshire is faring well relative to the New England and peer groups. However, this relatively positive average of the indicators conceals the fact that New Hampshire girls smoke tobacco and marijuana at significantly higher rates than their counterparts in New England and the peer states.

Table 6: Reports of Drug Use for Girls (2009)

State	Percent of girls who used marijuana one or more times during the 30 days before the survey
New Hampshire and Peer States	
Utah	8.0%
Wyoming	14.6%
Nevada	16.7%
Alaska	19.0%
New Hampshire	22.9%
Minnesota	N/A
Washington	N/A
New Hampshire and Other New England States	
Connecticut	18.2%
Maine	18.8%
Vermont	21.8%
Rhode Island	22.7%
Massachusetts	22.8%
New Hampshire	22.9%
National Rate:	17.9%
New Hampshire Rank:	40 (of 43 states reporting)
Best-Ranked State:	Utah

Source: High School Youth Risk Behavior Survey, 2009

Figure 14: Teen Birth Rate (2006)



Source: National Vital Statistics Reports, Volume 57, Number 7 January 7, 2009

Positive Indicators: Low Teen Birth Rate, Low STD Rate

The section on education already highlighted some positive findings regarding New Hampshire girls: test scores are good relative to peer and neighboring states, and high school dropout rates are low. As *Figure 14* shows, the teen birth rate in New Hampshire is very low compared to its peer states, falling more than 10 percentage points below the rate for the lowest-ranked peer state. The teen birth rate in New Hampshire is also lower than any other New England state.

Other states have found a positive correlation between teen birth rate and high school dropout rate, so it is not surprising that both teen birth rates and high school dropout rates in New Hampshire are low. In a related measure, the cumulative STD (sexually transmitted disease) rate for girls 15 to 19 years of age is low in New Hampshire. The rate is lower than any other New England state and lower than all peer states other than Utah (*Table A-15*). New Hampshire girls place in the middle of the New England states and not too different from the other peer states, with respect to the rate of alcohol use. (*Table A-16*).

Concerns: Drug and Tobacco Use

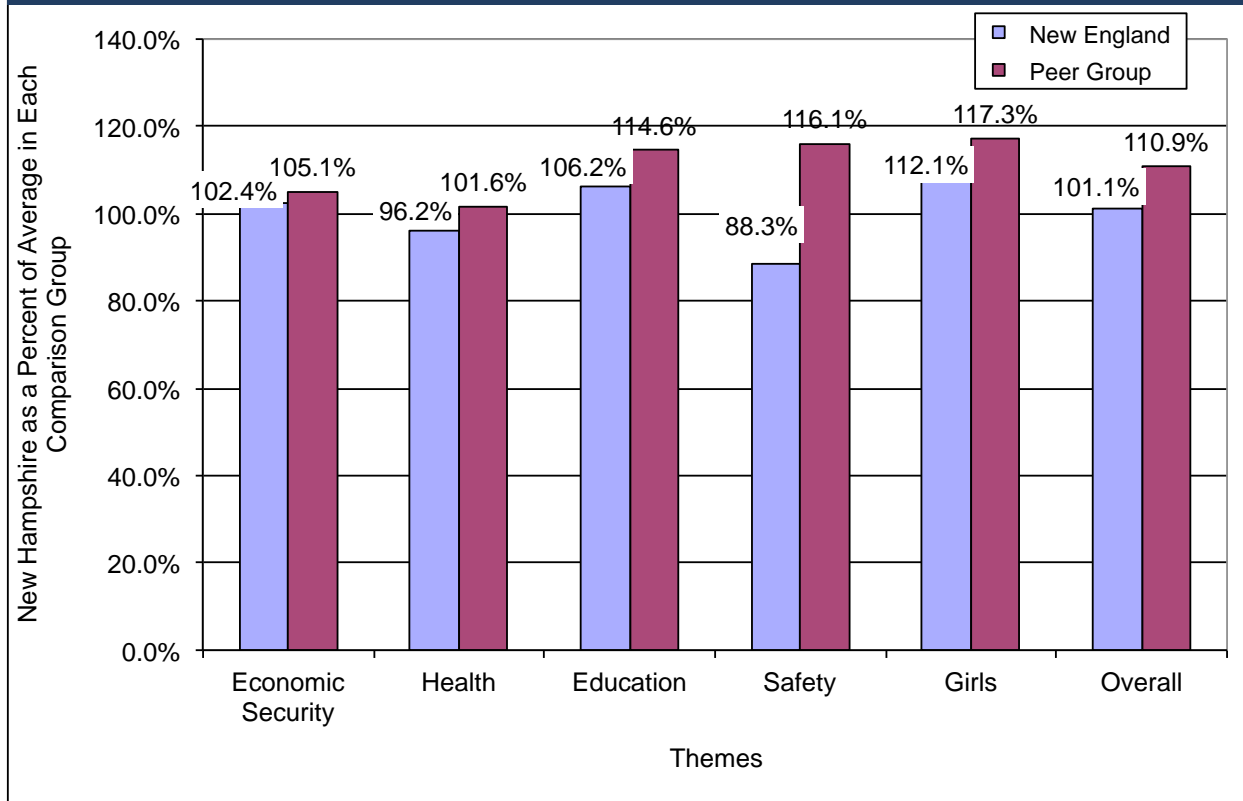
Not all the news regarding New Hampshire girls is positive. Twenty-three percent of New Hampshire girls report using marijuana one or more times during the past thirty days, a rate that is higher than all New England states (although only marginally higher than Massachusetts and Rhode Island) and higher than all peer states (noting that statistics are not available for Minnesota and Washington) (*Table 6*) Tobacco use is also high. New Hampshire girls reported that they smoked cigarettes at a rate higher than any other New England state and at a higher rate than any peer state other than Wyoming (*Table A-17*).

One health concern that has received considerable media attention recently is child obesity. Rates of obesity for New Hampshire girls were not comparable with other states, but warrant further analysis..

Variation within New Hampshire

One indicator for which data are readily available on the variation within New Hampshire is the teen birth rate, which does vary significantly by county. The coun-

Figure 15: NH Status of Women & Girls Relative to New England & Peer States



Note: When indices are below 100%, NH compares poorly relative to other states; when indices are above 100%, NH compares favorably.

ties with the highest teen birth rates in 2008 were Sullivan and Coos; the counties with the lowest teen birth rates were Grafton and Rockingham (Annie E. Casey 2010).

Data also suggest geographic variation in child obesity rates across the state. For examples, a 2008-09 survey of third grade students in New Hampshire indicates 26.5 percent of girls in Rockingham County were obese compared to 43.1 percent of third grade girls in the region including Belknap and Merrimack counties. Rates of obesity among third grade girls in 2008-09 were generally higher in northern New Hampshire and lower in the southern regions of the state (New Hampshire Department of Health And Human Services 2010, 33).

LOOKING FORWARD

Overall, the well-being of women and girls in New Hampshire is good relative to other New England states and to other states with similar socio-demographic characteristics (See *Figure 15*). Across all the indicators New Hampshire ranks slightly higher than the New England states and scores almost 10 percentage points

better than its socio-demographic peers. New Hampshire women fare less well on healthcare and safety measures relative to the other New England states. Moreover, while New Hampshire may fare well generally within each theme there are a few indicators that suggest opportunities for improvement. These areas are discussed below:

Economic Security

New Hampshire maintains the lowest poverty level relative to the rest of the country. One issue of concern for both women and men is the existence of pockets of poverty within a very low poverty state. We have included data on the poverty rate at the county level rather than the town level given the imprecision of census estimates at the town level. However, policy makers should be encouraged to review and analyze variation in economic security at the city, town and even census tract level as well. In an environment of scarce public policy resources, it is important to target the resources at those with the highest need and potentially the greatest return on investment. Given that poverty is often a proxy for other issues, the state needs to have a firmer

understanding of sub-state variation in poverty levels.

Two areas for further thought and public policy analysis are the rate of female business ownership and the wage gap. Unfortunately, solutions to these issues are not obvious and both have been present for a number of years (Caiazza, Shaw and Werschkul 2004). Each may be impacted by the caregiving responsibilities women fulfill within families. Nonetheless, policy options that would provide greater support for women's economic achievement include expansion of elder care opportunities, the provision of more full day public kindergarten and quality and affordable child care programs. In addition, small business development programs could strengthen training and technical assistance for women-owned firms.

Women's participation in government and civic life in New Hampshire is remarkable as its own measure. As *Table A-4* shows, New Hampshire is unique in the extent to which women play leadership roles in the state legislature.

Health

The health theme provides some reasons for optimism but also highlights a few areas needing improvement. The relatively high rates of cancer death, heart disease, mental health problems and obesity all raise concerns. Given the challenging fiscal environment, the most sensible policy responses may involve public health efforts to prevent disease and efforts to coordinate care among the various government and nonprofit agencies and health care providers. Efforts at screening health conditions could be improved. For example, recent data show nearly one-fourth of New Hampshire women in the relevant age ranges had never had a sigmoidoscopy or colonoscopy, the recommended diagnostic procedures to prevent death from colon cancer (Antal and Jenkins 2010, 14). In terms of disease prevention, recent statistics report a significant proportion of New Hampshire women have not exercised in the last 30 days, a statistic very relevant to the percentage of New Hampshire women who are overweight or obese (Antal

and Jenkins 2010).

Education

Women and girls are doing well in education in New Hampshire, and New Hampshire's K-12 public education system compares well to its peer and neighbor states. However, New Hampshire's education system will be increasingly judged with respect to how it prepares its graduates to compete in the global economy, something we did not measure. Despite the large increase in state aid to schools in response to years of school funding lawsuits, educational outcomes among school districts still differ markedly. Another concern is whether the current fiscal crisis will lead to significant cuts in state aid to education. In the aftermath of the 2001 recession a majority of states reduced their real financial commitments to local aid to education and the 2007-2009 recession was much more severe (Dye and Reschovsky 2008, 90).

Safety

As noted, of all the themes addressed in this report, the data are weakest in the area of safety and violence. The dearth of statistically meaningful data on this topic suggests the need for a careful assessment of the future information needs of policy makers in this arena. For example, there is at least one readily available opportunity for providing guidance to policymakers interested in the issues of safety and violence as they relate to women. The 2006 violence against women survey could be replicated, with special care taken to produce results that allow policymakers to compare New Hampshire to other states. Alternatively, New Hampshire could add future questions on safety and violence to one of the many state-based health surveys that New Hampshire has participated in to various degrees since 1987 (New Hampshire Department of Health and Human Services 2008).

APPENDIX AND REFERENCES

Appendix 1

Identifying Peer States for an Index of Well-being for Women and Girls in New Hampshire

We identified comparison states for New Hampshire based on nine separate socio-demographic factors. We compared New Hampshire to other states based on each state's personal income per capita, population density per square mile of land, percent of the population that are white alone, educational attainment (percent of adult population with a bachelor's degree or better), median household income (in 2007 inflation-adjusted dollars), combined SAT scores, percent of the population age 65 and over, health spending per person, and state business climate index.

The comparison of New Hampshire with other states was accomplished using a "Z-score" or standard score method. An overall index for each state was constructed by first converting the state numerical values for each of the key indicators into standard scores. Standardization was necessary because the distributions of the measures are often quite different from one another. By standardizing the socio-demographic variables, as described below, we can ensure that each measure is given equal weight in the index.

For each variable, standard scores were derived by subtracting the mean state value from the state estimate and dividing that amount by the standard deviation for that distribution of state estimates, as shown in the following formula. In the formula x represents the state socio-demographic indicator, the Greek letter Mu represents the mean across the 50 state values, and the Greek letter Sigma represents the standard deviation:

For each variable where a higher state value is worse (like health spending per person), the Z score is multiplied by -1. We then summed those standard scores across the states to create a total standard score for each of the 50 states. Finally, we ranked the states on the basis of their total standard score in sequential order from highest/best to lowest/worst.

After this ranking, Alaska, Minnesota, Nevada, Utah, Washington and Wyoming were determined to be comparison or peer states.

$$z = \frac{x - \mu}{\sigma}$$

Appendix 2

State	Female Labor Force Participation
New Hampshire and Other New England States	
Vermont	68.8%
New Hampshire	65.5%
Connecticut	63.9%
Rhode Island	62.6%
Massachusetts	61.9%
Maine	60.6%
New Hampshire and Peer States	
Minnesota	67.4%
Alaska	65.6%
New Hampshire	65.5%
Wyoming	64.2%
Washington	62.9%
Nevada	60.4%
Utah	60.4%
National Rate:	59.2%
New Hampshire Rank:	10
Best-Ranked State:	Vermont

¹The labor force participation rate is the ratio of people in the labor force (all those either employed or unemployed) to the working age population (persons over 16 years old not in an institution).

Source: U.S. Census, Current Population Survey, 2009

State	Female-to-Male Earnings Ratio
New Hampshire and Other New England States	
Vermont	82.4%
Maine	79.7%
Massachusetts	78.2%
Connecticut	75.9%
Rhode Island	74.2%
New Hampshire	71.5%
New Hampshire and Peer States	
Nevada	76.9%
Minnesota	76.7%
Washington	74.0%
Alaska	73.5%
New Hampshire	71.5%
Utah	69.3%
Wyoming	64.3%
National Average:	77.9%
New Hampshire Rank:	45
Best-Ranked State:	California

¹ The wage gap is measured by dividing women's median annual earnings by men's, and expressing the ratio as a percent. Earnings include wages, salaries and self-employment income earned before payroll deductions by full-year, full-time workers ages 16 and over.

Source: U.S. Census, American Community Survey, 2008

Appendix 2 (cont'd.)

State	Women's median annual earnings for full-time, full-year workers
New Hampshire and Other New England States	
Connecticut	\$44,625
Massachusetts	\$43,452
New Hampshire	\$36,946
Rhode Island	\$36,536
Vermont	\$34,424
Maine	\$32,613
New Hampshire and Peer States	
Washington	\$37,932
Alaska	\$37,861
Minnesota	\$37,281
New Hampshire	\$36,946
Nevada	\$34,724
Wyoming	\$31,204
Utah	\$31,183
National Average:	\$35,471
New Hampshire Rank:	13
Best-Ranked State:	Connecticut

State	% of legislators who are women
New Hampshire and Other New England States	
New Hampshire	37.3%
Vermont	37.2%
Connecticut	31.6%
Maine	29.0%
Massachusetts	26.0%
Rhode Island	22.1%
New Hampshire and Peer States	
New Hampshire	37.3%
Minnesota	34.8%
Washington	32.7%
Nevada	31.7%
Utah	22.1%
Alaska	20.0%
Wyoming	17.8%
National Rate:	24.2%
New Hampshire Rank:	1
Best-Ranked State:	New Hampshire

Source: National Conference of State Legislatures, 2009

¹ Women's earnings include wages, salaries and self-employment income earned before payroll deductions by full-year, full-time workers ages 16 and over.

Source: U.S. Census, American Community Survey, 2008

Table A-5: percent of Women Smoking ¹ (2009)	
State	Percent of Women who are Current Smokers
New Hampshire and Other New England States	
Massachusetts	13.9%
New Hampshire	14.3%
Connecticut	14.7%
Vermont	14.9%
Rhode Island	14.9%
Maine	15.8%
New Hampshire and Peer States	
Utah	7.7%
Washington	13.8%
New Hampshire	14.3%
Minnesota	14.9%
Wyoming	19.6%
Alaska	20.4%
Nevada	21.3%
National Average:	17.1%
New Hampshire Rank:	10
Best-Ranked State:	Utah

Source: Behavioral Risk Factor Surveillance System, 2009

Table A-6: Percent of Women Obese ¹ (2009)	
State	Percent of Women Obese
New Hampshire and Other New England States	
Connecticut	21.0%
Massachusetts	21.8%
Vermont	23.3%
Rhode Island	24.9%
New Hampshire	26.3%
Maine	26.4%
New Hampshire and Peer States	
Utah	24.0%
Wyoming	25.3%
Minnesota	25.3%
Alaska	25.4%
New Hampshire	26.3%
Nevada	26.4%
Washington	26.9%
National Rate:	26.9%
New Hampshire Rank:	21
Best-Ranked State:	Colorado

¹ Obesity is defined as body mass index (BMI) between 30.0 and 99.8
 Source: Behavioral Risk Factor Surveillance System, 2009

Appendix 2 (cont'd.)

Table A-7: Female Heart Disease Mortality ¹ (2005)	
State	Female death rate for heart disease per 100,000
New Hampshire and Other New England States	
Massachusetts	303
Maine	314
Connecticut	315
Vermont	321
New Hampshire	329
Rhode Island	366
New Hampshire and Peer States	
Minnesota	229
Alaska	260
Utah	281
Washington	287
Wyoming	307
New Hampshire	329
Nevada	357
National Rate:	344
New Hampshire Rank:	29
Best-Ranked State:	Alaska

Source: National Center for Chronic Disease Prevention and Health Promotion, 2005

Table A-8: Female Cancer Mortality Rate ¹ (2006)	
State	Female death rate for all cancers per 100,000
New Hampshire and Other New England States	
Rhode Island	151.2
Connecticut	156.7
Massachusetts	158.0
Vermont	158.7
New Hampshire	159.2
Maine	162.9
New Hampshire and Peer States	
Utah	121.5
Wyoming	146.9
Minnesota	147.6
Washington	153.7
Nevada	157.1
New Hampshire	159.2
Alaska	165.6
National Rate:	153.7
New Hampshire Rank:	34
Best-Ranked State:	Utah

Source: National Cancer Institute, 2006

Table A-9: Female Heart Disease Death Rates per 100,000 Women, Aged 35 and Over

	1991-1995	1996-2000	2000-2006	Rank
Belknap	357	389	316	6
Carroll	349	402	314	8
Cheshire	358	391	323	4
Coos	344	410	314	8
Grafton	358	385	322	5
Merrimack	362	399	330	1
Hillsborough	349	370	308	10
Strafford	361	395	316	6
Sullivan	361	399	329	2
Rockingham	367	400	326	3
State Total	360	400	329	

Source: Division for Heart Disease and Stroke Prevention,
National Center for Chronic Disease Prevention and Health Promotion

Table A-10: Cancer Deaths per 100,000 Females, All Cancers

County	2-year average, 2006-2007	Rank
Belknap	144.1	3
Carroll	131.1	6
Cheshire	137.9	5
Coos	121.0	9
Grafton	123.1	8
Hillsborough	142.7	4
Merrimack	128.6	7
Rockingham	146.0	1
Strafford	145.7	2
Sullivan	114.5	10
State	137.3	

Source: NH Division of Vital Records Administration

Appendix 2 (cont'd.)

Table A-11: NECAP Assessment Test Scores, Female Proficiency (2009)

State	Percent of female 3 rd grade students scoring at or above proficient in math	Rank	Percent of female 3 rd grade students scoring at or above proficient in reading	Rank	Percent of female 8 th grade students scoring at or above proficient in math	Rank	Percent of female 8 th grade students scoring at or above proficient in reading	Rank	Percent of female 11 th grade students scoring at or above proficient in math	Rank	Percent of female 11 th grade students scoring at or above proficient in reading	Rank	Percent of female 11 th grade students scoring at or above proficient in writing	Rank
New Hampshire	77%	1	84%	1	65%	2	81%	1	32%	2	82%	1	59%	3
Maine	61%	4	76%	4	59%	4	76%	3	N/A		N/A		N/A	
Rhode Island	62%	3	77%	3	53%	3	76%	3	25%	3	80%	2	62%	1
Vermont	66%*	2	78%*	2	66%*	1	78%*	2	34%	1	79%	3	62%	1

Source: New England Common Assessment Program, 2009

Table A-12: Female High School Dropouts (2007-08)

State	% dropping out
New Hampshire and Other New England States	
Connecticut	2.0%
New Hampshire	2.5%
Massachusetts	3.0%
Maine	3.9%
Rhode Island	4.5%
Vermont	*
New Hampshire and Peer States	
New Hampshire	2.5%
Minnesota	2.5%
Utah	3.8%
Wyoming	4.3%
Nevada	4.9%
Washington	4.9%
Alaska	6.7%
National Rate:	4.4%
New Hampshire Rank:	16
Best-Ranked State:	New Jersey

* Reporting standards not met

Source: National Center for Education Statistics, 2010

Table A-13: NECAP Assessment Test Scores, Ratio of Females to Male Proficiency (2009)

State	Ratio female to male, 3rd grade at or above proficient (3 or 4) - math	Rank	Ratio female to male, 3rd grade at or above proficient (3 or 4) - reading	Rank	Ratio female to male, 8th grade at or above proficient (3 or 4) - math	Rank	Ratio female to male, 8th grade at or above proficient (3 or 4) - reading	Rank	Ratio female to male, 11th grade at or above proficient (3 or 4) - math	Rank	Ratio female to male, 11th grade at or above proficient (3 or 4) - reading	Rank	Ratio female to male, 11th grade at or above proficient (3 or 4) - writing	Rank
New Hampshire	1.01	3	1.08	4	0.98	3	1.14	4	0.91	2	1.26	2	1.4	3
Maine	0.97	4	1.1	3	1	2	1.23	1	N/A		N/A		N/A	
Rhode Island	1.02	1	1.15	2	0.96	4	1.15	3	0.83	3	1.21	3	1.62	1
Vermont	1.02*	1	1.16*	1	1.02*	1	1.16*	2	0.97	1	1.3	1	1.55	2

*Vermont scores are based on the overall percent of students in all grades 3-8 combined
 Source: New England Common Assessment Program, 2009

Table A-14: Women in Prison (Midyear 2008)

State	Women as percent of total prison population
New Hampshire and Other New England States	
Vermont	7.25%*
Rhode Island	7.28%*
Massachusetts	7.29%
New Hampshire	7.36%
Connecticut	7.48%*
Maine	7.48%
New Hampshire and Peer States	
Minnesota	6.68%
New Hampshire	7.36%
Nevada	7.55%
Washington	7.83%
Utah	9.32%
Wyoming	11.38%
Alaska	11.60%*
National Rate:	7.19%
New Hampshire Rank:	20
Best-Ranked State:	Michigan

* Alaska, Connecticut, Rhode Island and Vermont data include jail and prison population
 Source: Bureau of Justice Statistics, 2008

Appendix 2 (cont'd.)

State	Cumulative STD Cases per 1,000, girls age 15-19 years
NH and Other New England States	
New Hampshire	11.0
Vermont	12.1
Maine	12.4
Massachusetts	17.6
Rhode Island	24.8
Connecticut	30.0
New Hampshire and Peer States	
Utah	9.5
New Hampshire	11.0
Wyoming	16.8
Minnesota	18.4
Washington	22.4
Nevada	29.7
Alaska	37.8

Source: Centers for Disease Control and Prevention

State	Percent of girls who had at least one drink of alcohol on at least 1 day during the 30 days before the survey
New Hampshire and Other New England States	
Maine	32.8%
Rhode Island	35.6%
Vermont	39.0%
New Hampshire	39.4%
Connecticut	43.8%
Massachusetts	44.5%
New Hampshire and Peer States	
Utah	14.6%
Alaska	32.9%
Nevada	38.7%
New Hampshire	39.4%
Wyoming	40.4%
Minnesota	N/A
Washington	N/A
National Rate:	42.90%
New Hampshire Rank:	18 (of 43 states reporting)
Best-Ranked State:	Utah

Source: Centers for Disease Control, High School Youth Risk Behavior Survey, 2009

Table A-17: Report of Tobacco Use by Girls (2009)

State	Percent of girls who smoked cigarettes on at least one day during the 30 days before the survey
New Hampshire and Other New England States	
Rhode Island	13.2%
Massachusetts	13.9%
Connecticut	16.5%
Maine	16.5%
Vermont	17.4%
New Hampshire	20.0%
New Hampshire and Peer States	
Utah	6.5%
Nevada	15.3%
Alaska	17.1%
New Hampshire	20.0%
Wyoming	20.7%
Minnesota	N/A
Washington	N/A
National Rate:	19.1%
New Hampshire Rank:	34 (of 43 states reporting)
Best-Ranked State:	Utah

Source: Centers for Disease Control,
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