

2004 WEST VIRGINIA KIDS COUNT DATA BOOK

Ready for school?

Family
play
Read to me



♥ Mom
Support
community

PROFILES OF CHILD WELL-BEING



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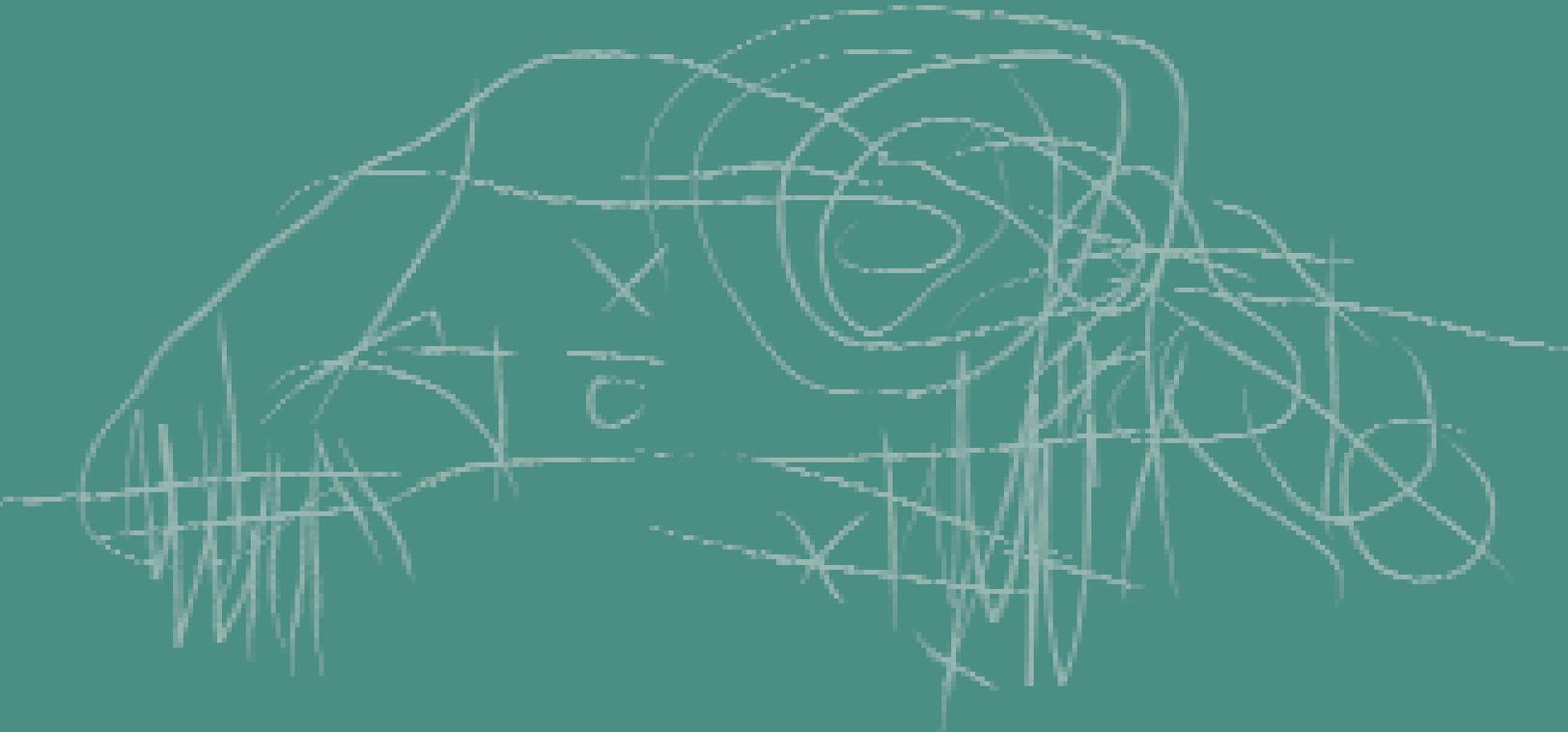
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Our Mission

The West Virginia KIDS COUNT Fund works to improve the lives of West Virginia's at-risk children by:

- collecting information about their status;
- identifying and supporting programs that work; and
- advocating for public policies that promote early education.

The constituencies of KIDS COUNT are the business and faith communities, the media and government.



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Thanks to our sponsors' generosity, KIDS COUNT is able to collect and share important information about the status of West Virginia's at-risk children and make a significant contribution to the effort to improve their opportunities.

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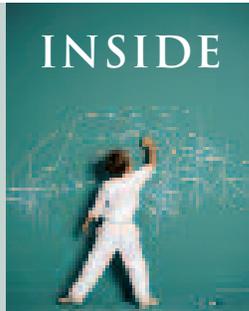
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Thank You for Your Interest in West Virginia's Children

We hope you can rely on KIDS COUNT for all the information you need about West Virginia's children. We also hope you find our data reliable, unbiased and easy to understand and that you use it to inform others and influence public policies or programs on behalf of children. If you are a business leader, we hope this book will help you sharpen your focus on children and family issues, both in your external activities as well as your internal policies. And we encourage you to call on us to help you identify, analyze and develop strategies to expand the number of early childhood programs in your area. With your support, KIDS COUNT's membership continues to grow, creating a strong and wonderfully diverse group of advocates.



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2004 WEST VIRGINIA KIDS COUNT DATA BOOK



Thanks for Your Help!

The production and dissemination of this *Data Book* would not be possible without the support of many wonderful people and organizations. West Virginia KIDS COUNT Fund is particularly grateful to the Annie E. Casey Foundation, the creator and funder of the KIDS COUNT initiative in all 50 states and the District of Columbia.

Our deep appreciation goes to our data providers: Tom Light with the Office of Epidemiology and Health Promotion at West Virginia Department of Health and Human Resources; Mike Cox and Kara Brewer with the West Virginia Department of Education; Craig Richards with the Office of Audit Research and Analysis, West Virginia Department of Health and Human Resources; Judy Curry, Christine Harold and Bill Huebner with the Bureau for Children and Families, West Virginia Department of Health and Human Resources; Mary Kay Harrison and Sheri Flora with the Office of Child Nutrition, West Virginia Department of Education; Dr. Stephen Haas, West Virginia Division of Criminal Justice Services; Cathy Jones, Early Childhood/Even Start, West Virginia Department of Education; and Samuel Crosby and Jeff Neccuzi with the Bureau for Public Health, Division of

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A very special thanks to Scott Miller and Jamie Forsythe of the West Virginia Medical Institute who, while aggregating KIDS COUNT data, also taught us how to do it ourselves.

KIDS COUNT is indebted to the enthusiastic and faithful service of its Research and Marketing committees. These committees guide the staff's work to select the *Data Book* theme, collect data and distribute the *Data Book* to the people who can make a difference



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for children. The names of each committee member are located on page 31 of this report.

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West Virginia KIDS COUNT could not do its work without the financial support of the Annie E. Casey Foundation and the West Virginia businesses and nonprofit organizations that underwrite the cost of producing the *Data Book*. Special thanks are extended to the West Virginia KIDS COUNT *Data Book* sponsors. The names of these sponsors are located on page 2.

West Virginia KIDS COUNT is grateful for the leadership and ever-ready assistance of the national KIDS COUNT staff: Bill O'Hare, Don Crary, Cory Anderson and Laura Beavers.



And, finally, thanks to all the West Virginians who make kids count.

Margie Hale
Executive Director
West Virginia KIDS COUNT Fund

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Foreword

In 1989, the Annie E. Casey Foundation launched the KIDS COUNT initiative. The nationwide project was based on the belief that the more the public and policymakers know about the status and needs of children, the greater the likelihood those needs will be addressed. The West Virginia KIDS COUNT project was first funded in 1991 and is one of

readiness. These school readiness measures tell us whether families and children are strong, early childhood programs are good and communities and neighborhoods are healthy. Our goal in presenting these indicators is to stimulate public discussion and assist in the development of public policies that will ensure every West Virginia child enters school ready to learn and succeed.

THIS YEAR, FOR THE FIRST TIME, THE COUNTY PROFILES OF CHANGES IN THE 12 INDICATORS WILL BE AVAILABLE ON-LINE ONLY AT WWW.WVKIDSCOUNTFUND.ORG.

50 similar projects throughout the United States. The *2004 WV KIDS COUNT Data Book* is the 12th annual profile of the conditions of West Virginia's children.

To compile this *Data Book*, KIDS COUNT amasses the best available data to measure the well-being of children in West Virginia. The *2004 WV KIDS COUNT Data Book* measures 12 indicators of child well-being and 12 background facts. This year's book focuses on the changes in those indicators and background facts at the statewide level and contains some county-by-county data analysis. This year, for the first time, the county profiles of changes in the 12 indicators will be available on-line only at www.wvkidscountfund.org. Supplementary tables for all indicators and background facts are available in a companion publication from KIDS COUNT.

The *WV KIDS COUNT Data Book* is used as a tool to select issues for focus and action. Last year's *Data Book* brought new attention to the importance of early literacy and understanding the foundation children ages birth to three must have to be good readers.

The special focus of this year's book is the readiness of young children to enter school. In addition to the 12 indicators we always track, we have gathered data on a number of additional indicators related to school

Making KIDS COUNT in West Virginia is a responsibility we all share. To learn more about how you can help improve the lives of West Virginia's youngest and most vulnerable children, call 1-888-KIDSCOUNT (1-888-543-7268).



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Ready for School?

Family and Community Support Make the Difference

“Wake up! It’s time to get ready for school.”

Many of us still recall the simple but life-changing message that greeted us on our very first day of school. We still feel the cold shock of getting up so early and the giddy excitement about a big new chapter in our young lives. There were, after all, ABCs to write, numbers to add, books to read, and history lessons to learn...not to mention songs to sing, love notes to write and macaroni sculptures to build.

But what does it *really* mean to “get ready for school?” School readiness is much more than crawling out of bed that first day, putting on our best new outfit and climbing on the big yellow bus. Getting ready for school is a process that begins before we are even born and continues every day until we walk into a classroom for the very first time.

The research clearly shows that school readiness has its roots in earliest childhood as children’s hearts, souls and minds are nurtured through loving relationships, opportunities to explore and discover and communities that provide enriching experiences. In such environments, children are given the tools they need to learn, succeed and, some day, give back to their communities. It used to be a common notion that children learned to read, write and add when they started school. We now know that the foundation for learning begins at birth, taking root in environments rich in language, love and support.

Far too many West Virginia children wake up on that first day of school poorly prepared for the big challenges that lie ahead. When a young child is hungry, unhealthy or neglected; when she is born into poverty, lives in the wrong neighborhood or doesn’t attend a good day care center; when her mother doesn’t get good prenatal care or her father doesn’t have

regular employment, there is a very good chance she will not be ready for that first day of school. She will start school a step or two behind and never reach her full potential as a student or productive adult.

To help this child and the thousands like her who may not be prepared for that first day of school, we must first understand what it really means to be “ready for school.” School readiness, in its broadest terms, is defined as the preparedness of young children to enter school and the preparedness of public schools to greet them. But another important part of the definition is the availability of family and community supports that help children start school ready to learn and succeed.

In this report, KIDS COUNT has chosen to focus on the child, family and community factors of school readiness. There are two reasons for this emphasis. First, we have readily available, widely accepted indicators for the family and community factors of school readiness. Second, these factors can be greatly influenced by changes in public policy. We recognize that ready schools also are important to a child’s ability to learn and succeed. But there is insufficient available data, about which educators agree, to measure a school’s readiness to teach young children. For those reasons, we have chosen not to include the readiness of schools as part of our analysis.

GETTING READY FOR
SCHOOL IS A PROCESS
THAT BEGINS BEFORE WE
ARE EVEN BORN AND
CONTINUES EVERY DAY
UNTIL WE WALK INTO A
CLASSROOM FOR THE
VERY FIRST TIME.

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In the following pages, KIDS COUNT examines three domains of school readiness (families and children, early education programs and neighborhoods) by highlighting a series of indicators for each domain. These indicators were selected with the help of health care, education, family and community experts using the following criteria:

- *Has the indicator been related to school success in early childhood research?*
- *Do reliable, available data exist for the indicator that can be tracked over time?*
- *Does the indicator influence child development, and can it be improved through changes in public policy?*

The West Virginia
KIDS COUNT Fund
is committed to
helping young
children get
ready for school.
Through our
Building Blocks



of Literacy project, we are supporting families, childcare providers, businesses and communities in their efforts to lay the foundation for children to enter school ready to read and succeed. Through our 2004 *Data Book* and its special emphasis on school readiness indicators, KIDS COUNT is giving policymakers and advocates the definitive information they need to make much needed changes in public policy. It is our hope that these efforts will pave the way for a state in which every child wakes up on that first day *truly* ready for school.

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ARE WEST VIRGINIA'S KIDS READY FOR SCHOOL?



DOMAIN 1: FAMILIES AND CHILDREN

Low Birth-Weight Babies

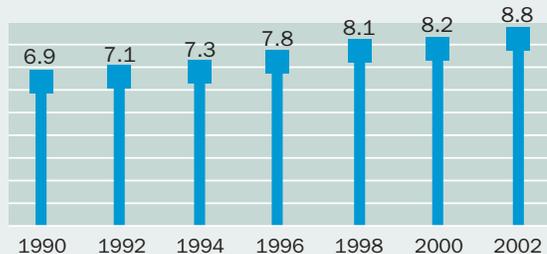
Indicator: **The percent of low birth-weight babies**

What Does It Mean? The percent of low birth-weight babies is the share of live births weighing less than 2,500 grams (5.5 pounds).

Why is it Important? Low birth-weight babies have a high probability of experiencing developmental problems. The risk of dying during the first year of life for low birth-weight babies is nearly 25 times that for babies of normal birth weight. As early as kindergarten and first grade, low birth-weight children show heightened risk for problems in school.

Where Do We Stand Now? 8.8 percent of all births are babies with low birth weight.

The percent of low birth-weight babies: 1990-2002



Sources: West Virginia Department of Health and Human Resources, Office of Epidemiology. *Early Child Development in Social Context*. The Commonwealth Fund, 2004.

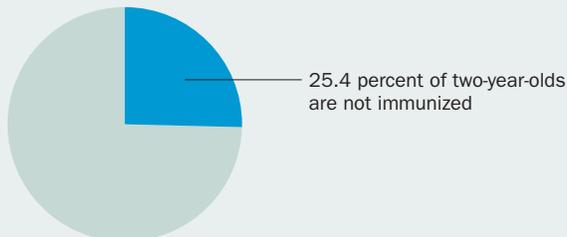
Up-To-Date Immunizations

Indicator: **The percent of two-year-olds who are not immunized**

What Does It Mean? This indicator represents the percent of two-year-olds who have received the entire 4:3:1:3:3 series of vaccinations recommended by the Advisory Committee on Immunization Practices (ACIP).

Why Is It Important? Immunization is a key indicator of health access and is a cost-effective measure against vaccine-preventable diseases. Diseases that are less prevalent as a result of immunization still exist, making it vital to continue to protect children from them. Childhood immunization is the only defense against many childhood diseases, such as chicken pox, polio and measles.

Where Do We Stand Now? 25.4 percent of West Virginia's two-year-olds have not received the recommended vaccinations.



Sources: National Immunization Survey, Center for Disease Control, 2003. <http://www.nisabt.org/about.htm>
Early Child Development in Social Context. The Commonwealth Fund, 2004.

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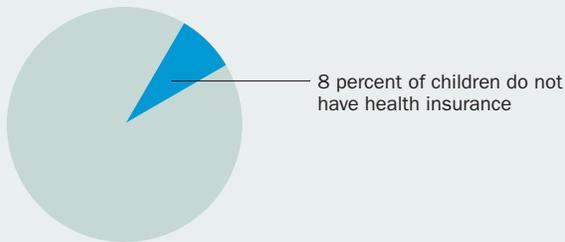
Health Insurance

Indicator: **The percent of children without health insurance**

What Does It Mean? This indicator represents the percent of children without health insurance, either private insurance through employers or other means or public insurance like the Children's Health Insurance Program (CHIP) and Medicaid.

Why Is It Important? Children not covered by health insurance are less likely than those who are covered to have a regular source of health care. They are more likely to receive late or no care for health problems and are at greater risk for hospitalization. Therefore, lack of health insurance can affect a child's school attendance and ability to participate in school activities. If children's health problems are not treated, it can negatively affect their cognitive, emotional, behavioral and physical development.

Where Do We Stand Now? 8.0 percent of West Virginia's children under age 18 do not have health insurance.



Sources: U.S. Census Bureau, Current Population Survey, average of files from 2002 through 2004. *Early Child Development in Social Context*. The Commonwealth Fund. 2004.

Child Poverty

Indicator: **The percent of children under age five in poverty**

What Does It Mean? The percent of children in poverty is the share of children under age 5 who live in families with incomes below the U.S. poverty threshold, as defined by the U.S. Census Bureau. In 2002, the poverty threshold for a family of two adults and two children was \$18,244.

Why Is It Important? The percent of children in poverty is perhaps the most widely used indicator of child well-being. This is partly due to poverty being closely linked to a number of undesirable outcomes in areas such as health, education, emotional welfare and delinquency. Children in lower socioeconomic status families enter kindergarten with lower math and reading scores than other children, and their progress on math and reading between kindergarten entry and the end of first grade is less than for other children.

Where Do We Stand Now? 29.0 percent of West Virginia's children under age 5 live in poverty.

The percent of children under age 5 in poverty: 1989-2002



Sources: Small Area Income & Poverty Estimates, U.S. Census Bureau, <http://www.census.gov/cgi-bin/saie/saie.cgi> 2004 KIDS COUNT DATA BOOK. Annie E. Casey Foundation.

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DOMAIN 2: EARLY CHILDHOOD EDUCATION PROGRAMS

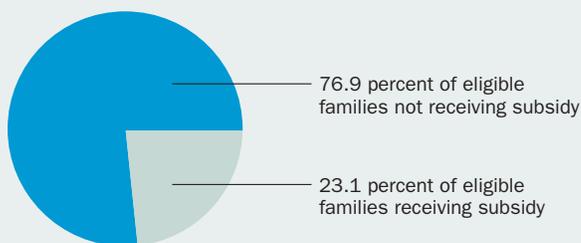
Access To Child Care Subsidies

Indicator: **The percent of eligible families not receiving childcare subsidies**

What Does It Mean? The West Virginia Department of Health and Human Resources provides assistance with childcare costs for low-income, working families based on family size and income.

Why Is It Important? Childcare subsidies make the difference between working and not working for many low-income families. The cost of childcare is beyond the reach of poor families; this assistance makes childcare and work a reality.

Where Do We Stand Now? During the fiscal year 2003-2004, an average of 76.9 percent of eligible West Virginia families did not receive childcare subsidies. The number of families who benefit from childcare subsidies has grown from 7,724 in 2000 to 9,397 in 2003.



Source: Division of Early Care and Education, Bureau for Children and Families, WV-DHHR.
Judy Curry, Division of Early Care and Education, Bureau for Children and Families, WV-DHHR

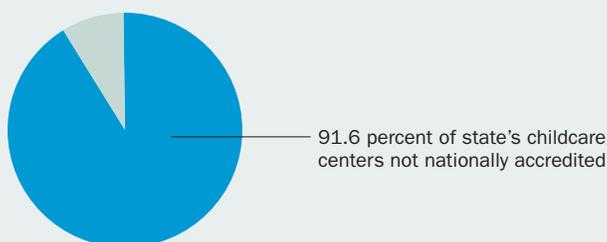
Accredited Childcare

Indicator: **The percent of licensed childcare centers that are not accredited**

What Does It Mean? Accreditation is directly linked to the quality of childcare. Being accredited means, among other things, there is sufficient staff to provide the attention children need, and the staff is educated about the needs of children and how to care for them.

Why Is It Important? Accreditation is the gold standard of quality. When a childcare center meets the standards of accreditation, we can be sure the children are receiving the very best care available, and they will have a greater likelihood of succeeding in school and life.

Where Do We Stand Now? 91.6% of the state's childcare centers are not nationally accredited (only 40 of 478 licensed childcare centers in West Virginia are accredited), and 92.1 percent of the childcare centers nationwide are not accredited.



Sources: Early Care and Education Division of the Bureau for Children and Families. WV-DHHR. NAEYC Accredited Programs, October 2004. See <http://www.naeyc.org/accreditation/search/state.asp?state=WV>. There are 40 accredited childcare centers in West Virginia and 9,273 accredited centers in the nation. National Child Care Information Center. Number of Childcare Programs. February 2004. There are 117,053 regulated childcare centers in the nation. This number does not include childcare centers that are not required to be regulated, such as public schools and some nursery schools.

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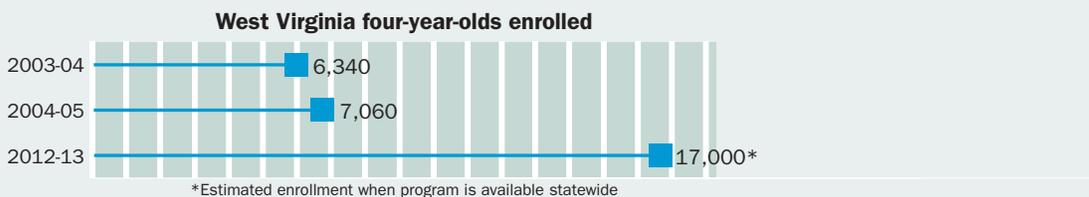
Pre-kindergarten

Indicator: **The percent of children not enrolled in Pre-kindergarten**

What Does It Mean? This figure represents the percent of four-year-olds not enrolled in West Virginia's Pre-kindergarten program.

Why Is It Important? West Virginians want their young children to have access to high quality early education programs. Quality early childhood education programs pay big dividends in the reduction of future costs of crime and remedial education and significantly increase the likelihood that children will succeed in school and life.

Where Do We Stand Now? 6,340 four-year-olds were enrolled in Pre-kindergarten programs in the state during fiscal year 2003-2004. Therefore, 68.5 percent of all West Virginia four-year-olds are not enrolled in Pre-kindergarten, while 83.9 percent of the nation's four-year-olds are not enrolled.



Source: Early Childhood/Even Start Office, West Virginia Department of Education.
Population Reference Bureau, Estimates of the July 1, 2003 population. U.S. Census Bureau.
Data for four-year-old enrollment only is not available before the 2003-2004 school year.
National Institute for Early Education Research. The State of Preschool. 2004 State Preschool Yearbook, p. 24.

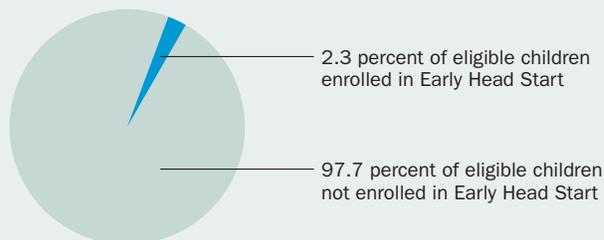
Early Head Start

Indicator: **The percent of eligible children not enrolled in Early Head Start**

What Does It Mean? Early Head Start was launched in 1995 by the U.S. Department of Health and Human Services. It is designed to serve low-income pregnant women and families with infants and toddlers up to age three. Early Head Start programs can be either home-based, center-based or a combination of the two.

Why Is It Important? Early Head Start addresses the crisis facing many families with infants and toddlers: the lack of prenatal care, parent isolation, substandard childcare, poverty and inadequate health care. The program seeks to enrich the relationships children have in their earliest years through quality early education both in and out of the home by providing nutrition education, family support, and health and mental health services.

Where Do We Stand Now? Only 394 children, birth to age three, are enrolled in Early Head Start. Therefore, 97.7% of the 16,847 eligible children in West Virginia are not enrolled in the program. Only five of the 23 Head Start grantees in West Virginia have an Early Head Start grant.



Sources: Office of Head Start State Collaboration, Commissioner's Office, Bureau for Children and Families, WV-DHHR. 2004.
Administration for Children & Families, Early Head Start Information and Publications Center.
http://www.headstartinfo.org/infocenter/ehs_tkit3.htm
U. S. Census Bureau, Census 2000. Summary File 2.
Administration for Children & Families, Head Start Bureau, Head Start Program Fact Sheet, April 2004.
<http://www2.acf.dhhs.gov/programs/hsb/research/2004.htm>

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DOMAIN 3: NEIGHBORHOODS

High Poverty

Indicator: **The percent of children who live in neighborhoods with a high poverty rate**

What Does It Mean? This indicator is the share of children under age 18 who live in census tracts where more than 18.6 percent of all persons live in families with annual incomes below the U.S. poverty threshold. The threshold of 18.6 percent represents 1.5 times the national poverty rate of 12.4 percent reported in the 2000 Census.

Why Is It Important? Many low-income families, especially those living in high-poverty communities, pay far too much for life's necessities: food, shelter, transportation, credit and financial services. This makes it even harder for parents to translate their low incomes into the economic security they and their kids need.

Where Do We Stand Now? 39 percent of our children live in neighborhoods with a high poverty rate.



Sources: *State Profiles of Child Well-Being. KIDS COUNT Data Book. 2003.* The Annie E. Casey Foundation
Child Poverty In Rural America, Population Reference Bureau, March 2004.

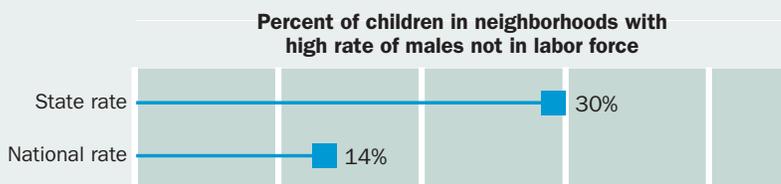
Males Not In Labor Force

Indicator: **The percent of children who live in neighborhoods with a high rate of males not in the labor force**

What Does It Mean? This indicator is the share of children under age 18 who live in census tracts where more than 38.1 percent of males ages 16 to 64 have no ties to the work force. The threshold of 38.1 percent represents 1.5 times the national level of labor-force detachments for working-age men, which the 2000 Census reported to be 25.4 percent.

Why Is It Important? When parents have secure employment, with earnings sufficient to meet their families' basic needs, children benefit in many ways. Their odds of having good nutrition; decent, stable housing; and adequate health care increase significantly. Unemployment is a source of stress associated with depression, anxiety and illness. By easing parental depression and alleviating stress, employment can improve family functioning and create a more positive home setting for children.

Where Do We Stand Now? 30 percent of our children live in neighborhoods with a high rate of males not in the labor force.



Sources: *KIDS COUNT Data Book. 2003.* The Annie E. Casey Foundation.
KIDS COUNT Indicator Brief. Increasing the Percentage of Children with Working Parents. The Annie E. Casey Foundation, July 2003.

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THE BOTTOM LINE

What we can do to create better opportunities for our youngest children

West Virginians may disagree about political candidates, sports rivalries or where to get the best hot dog with chili and slaw, but there is one thing we all agree on: every child in West Virginia should wake up on that first day of school with the skills and supports she needs to succeed. West Virginians know that if our state is to prosper, our children must prosper. We know that the state's opportunities for economic growth are directly linked to the quality of the opportunities we provide for young children. We know that access to good early education is something every child should have regardless of his family's income. Simply put, we know that when it comes to our children, an ounce of prevention is worth a pound of cure.

But the truth is West Virginia's future is at serious risk because early education is not being given the priority it deserves. All of us will pay a big economic price for this shortsightedness. On six of nine measures in our school readiness profile with comparable national rates, West Virginia lags behind the nation. Although we have made some progress in reducing poverty for our youngest children, our rate continues to be among the highest in America. These perpetual high rates of poverty and joblessness are serious concerns, particularly because these factors are so closely associated with school success. The bottom line is this: if our children do not thrive, our economy will suffer and the dangerous cycle of poverty will continue.

The good news is there is a great deal we can do right now to increase opportunities for our youngest children and improve our state's long-term economic outlook. When West Virginians work together for this shared value, there is nothing we cannot accomplish for our children. Detailed below are a number of common-sense policies that will help ensure all our children enter school ready to learn and succeed.

How we can make families, children and communities stronger

1. Increase immunizations and access to health care.

Improving access to health care is one solution to securing higher levels of childhood immunizations; however, the disparity between rates of child health coverage and rates of immunizations demonstrates a problem with access to immunizations. Experts believe we must do a better job of creating awareness of immunizations because many parents do not know these diseases first hand. They also believe we must do a better job of documenting immunizations and providing updated immunization records to parents. Finally, immunization providers should make immunization reminders and recall notices to parents a high priority.



The percent of two-year-olds who are not immunized

State Percent	National Percent
25.4	20.6

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West Virginians want every child in this state to have access to health insurance and good health care. When kids are sick and don't get treated, their ability to thrive and succeed is put at serious risk.

Two important areas have been identified for improvement:

- Provide health insurance to all children by expanding the successful Children's Health Insurance Program (CHIP).
- Hire registered nurses to work in early childhood Resource and Referral agencies to serve as consultants to early education programs.

2. Reduce the number of low birth-weight babies.

The high rate of low birth-weight births is a persistent medical and social problem. Experts believe that such a complicated problem demands a broad strategy focusing on promoting research on the causes of low birth weight; expanding access to health care; focusing intensively on smoking prevention and cessation; and ensuring that pregnant women get adequate nutrition.

3. Decrease child poverty.

Because socioeconomic status is so predictive of school success, it is important to find ways to reduce poverty. West Virginia has made progress in reducing the number of children who live in poverty, but the state still has one of the highest rates in the nation. One of the primary causes of poverty is the lack of growth in wages. Reducing poverty is a matter of increasing wages and increasing income through tax policies. The federal Earned Income Tax Credit (EITC) now lifts more children out of poverty than any other government program. Some 4.9 million people, including 2.7 million children, were removed from poverty in 2002 as a result of the federal EITC. West Virginia should consider enacting a state Earned Income Tax Credit, as 18 other states have already done. Despite a challenging fiscal environment characterized by spending cuts, increased taxes or both, most states have protected or even expanded their EITC programs. To learn more about poverty and its solutions, see our *Report on Child Poverty in West Virginia* on the KIDS COUNT website.

4. Increase childcare subsidies, accredited childcare centers and Early Head Start programs

Improving access to childcare subsidies and Early Head Start requires greater public investment at both the federal and state levels. This investment will require a partnership of parents and grandparents, community leaders from all sectors, employers, labor unions and local, state and national governments. Through a unified, broad-based effort, we can build the national and state support necessary to assure that high-quality early education programs are available to all families, regardless of their incomes.

You can get involved in this effort on the national level through the Family Initiative, a project of Legal Momentum. Their action kit is available through www.familyinitiative.org. You can get involved at the state level by joining **Invest Wisely: Hearts and Minds**, an awareness

The percent of children without health insurance (under age 18)

State Percent	National Percent
8.0	12.0

The percent of low birth-weight babies

State Percent	National Percent
8.8	7.7

The percent of children under age five in poverty

State Percent	National Percent
29.0	19.0

The percent of eligible children not enrolled in Early Head Start

State Percent	National Percent
97.7	96.0

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campaign of the Partners Implementing an Early Care and Education System (PIECES) Council of West Virginia. For more information about *Invest Wisely*, call 1-888-KIDS COUNT or go to www.wvkidscountfund.org.

5. Adequately fund early education and West Virginia Pre-kindergarten

Good early care and education programs help mitigate the effects of childhood poverty. West Virginia is working to make Pre-kindergarten available for all parents who want it for their children. West Virginians want their children to have access to the best early education possible. Therefore, during the 2005 legislative session, KIDS COUNT will work with other child advocacy groups to promote:

- Increased investment in the state's Pre-kindergarten program; and
- Continuation of the annual expansion of Pre-kindergarten so parents who want their children in the program have access by 2012.

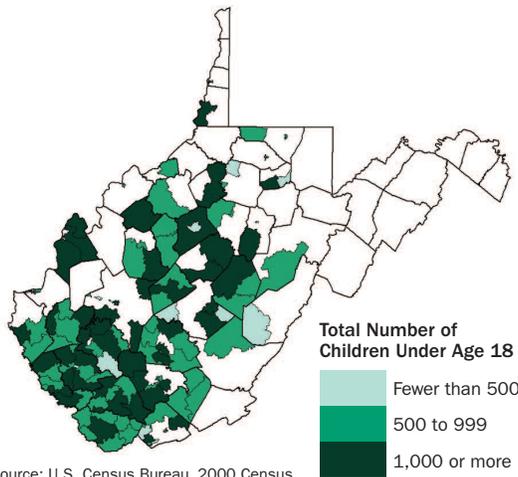
6. Decrease the number of neighborhoods with high child poverty and males not in labor force.

Too many families, especially those living in high-poverty communities, end up paying far too much for many of life's necessities: food, shelter, transportation, credit and financial services. Reducing these costs is another strategy to reduce poverty. Some solutions include encouraging quality retailers to locate in low-income communities; providing financial education, access to basic financial services and opportunities to build credit; and promoting regulatory reforms that protect low-income consumers. These solutions and places where they are being carried out are detailed in the 2003 *KIDS COUNT DATA BOOK* published by The Annie E. Casey Foundation. For a full copy of the report, go to www.aecf.org.

7. Focus improvement efforts directly on the neighborhoods in greatest need.

West Virginia, Children in Neighborhoods with High Male Unemployment

At least 38.1 percent of males ages 16-64 unemployed or not in labor force



Source: U.S. Census Bureau, 2000 Census

The percent of licensed childcare centers that are not accredited



The percent of eligible four-year-olds who do not attend Pre-kindergarten



The percent of children who live in neighborhoods with a high poverty rate

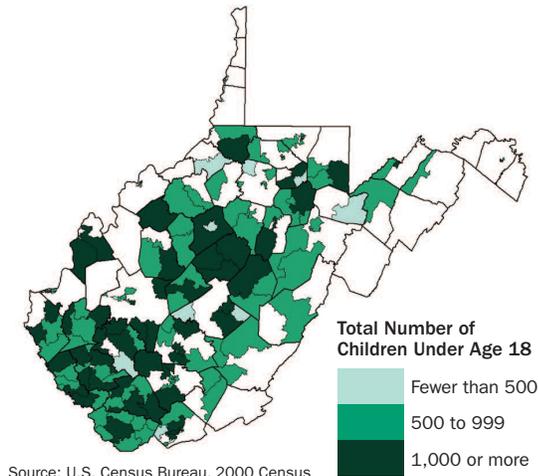


The percent of children who live in neighborhoods with a high rate of males not in the labor force



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West Virginia, Children in High Poverty Neighborhoods
At least 18.6 percent of all persons in poverty



Where to learn more about practices that improve school readiness

The Promising Practices Network (PPN) website (<http://www.promising-practices.net>) highlights programs and practices that credible research indicates are effective in improving outcomes for children, youth and families. The site is organized in three major categories of information: Proven and Promising Programs, Research in Brief and Strengthening Service Delivery. A distinguishing characteristic of this website is its division between programs that have been proven to accomplish certain objectives and those that are promising. For example, the Smart Start program is considered a promising program in increasing the percentage of children 0 through 5 who exhibit age-appropriate mental and physical development, while the Early Head Start program is designated as a proven program. For a detailed explanation of the difference between the “proven” and “promising” programs designation, go to <http://www.promisingpractices.net/orientation2.asp>.

Sources: Indicators of Early School Success and Child Well Being. *Cross Currents, Child Trends Data Bank*, Issue 3, October 2004.

Center on Budget and Policy Priorities, A Hand Up, How State Earned Income Tax Credits Help Working Families Escape Poverty in 2004, May 14, 2004. <http://www.cbpp.org/5-14-04sfp.htm>

TaxCreditResources.Org
http://www.taxcreditresources.org/area_assistance.cfm?pageID=12&MainPage=yes

KIDS COUNT Indicator Brief, Preventing Low Birth Weight. Produced by Dr. Rima Shore. The Annie E. Casey Foundation. July 2003.

2004 *KIDS COUNT DATA BOOK*. The Annie E. Casey Foundation.

National Association for the Education of Young Children (NAEYC). <http://www.naeyc.org/accreditation>

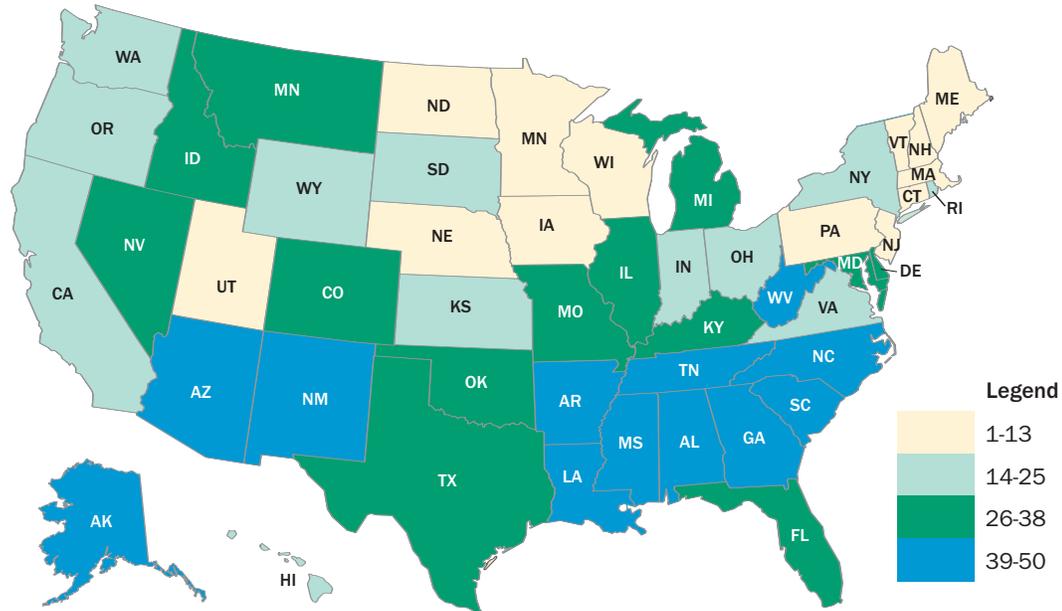
Jeff Neccuzzi, Program Manager, WV Bureau for Public Health, Immunization Program. 2004.

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• John and Deborah Caperton •

THE REST OF THE STORY



Overall State Ranks: 2004

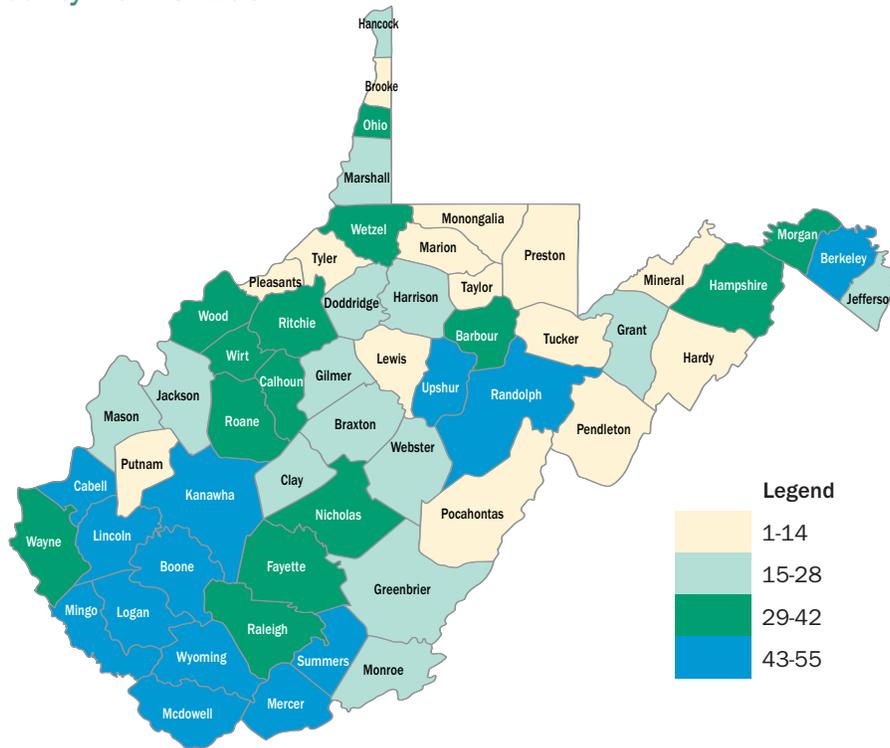


Rank	State	Rank	State	Rank	State
1	Minnesota	18	South Dakota	35	Delaware
2	New Hampshire	19	Rhode Island	36	Texas
3	New Jersey	20	Hawaii	37	Kentucky
4	Iowa	21	Oregon	38	Oklahoma
5	Utah	22	Kansas	39	Alaska
6	Vermont	23	Ohio	40	Georgia
7	Connecticut	24	Wyoming	41	North Carolina
8	North Dakota	25	New York	42	West Virginia
9	Massachusetts	26	Michigan	43	Tennessee
10	Nebraska	27	Maryland	44	Arkansas
11	Wisconsin	28	Colorado	45	Arizona
12	Maine	29	Idaho	46	South Carolina
13	Pennsylvania	30	Montana	47	Alabama
14	Virginia	31	Illinois	48	New Mexico
15	California	32	Nevada	49	Louisiana
16	Washington	33	Missouri	50	Mississippi
17	Indiana	34	Florida	NR	District of Columbia

A state's Overall Rank is determined by the sum of a state's standing on each of 10 measures of the condition of children arranged in sequential order from highest/best (1) to lowest/worst (50). The measures are as follows: percent low birth-weight babies; infant mortality rate; child birth rate; percent of teens who are high school dropouts; percent of teens not attending school and not working; percent of children living in families where no parent has full-time, year-round employment; percent of children in poverty; and percent of families with children headed by a single parent.

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• Catholic Diocese of Wheeling-Charleston •

Overall County Ranks: 2004



Rank	County	Rank	County	Rank	County
1	Pendleton	20	Webster	39	Wood
2	Monongalia	21	Grant	40	Morgan
3	Marion	21	Monroe	41	Calhoun
4	Putnam	23	Doddridge	41	Ritchie
5	Pleasants	24	Marshall	41	Upshur
6	Tyler	25	Gilmer	44	Wyoming
7	Brooke	26	Clay	45	Mercer
8	Tucker	27	Mason	46	Cabell
9	Taylor	28	Harrison	47	Berkeley
10	Pocahontas	29	Fayette	48	Kanawha
11	Hardy	30	Ohio	49	Randolph
12	Mineral	31	Nicholas	50	Logan
13	Preston	32	Wayne	51	Mingo
14	Lewis	33	Roane	52	Boone
15	Jackson	34	Wirt	53	Lincoln
16	Hancock	35	Wetzel	53	McDowell
16	Jefferson	36	Raleigh	55	Summers
18	Greenbrier	37	Barbour		
19	Braxton	38	Hampshire		

A county's overall rank is determined by the sum of a county's standing on 11 of the 12 core measures of the condition of children arranged in sequential order from highest/best (1) to lowest/worst (50). The measures are as follows: percent low birth-weight babies; infant mortality rate; child death rate; percent of eligible children served by Head Start; percent children approved for free and reduced-price meals; teen birth rate; percent births to unmarried teens; percent high school dropouts; juvenile delinquency case rate; teen violent death rate; and percent births to mothers with less than a 12th grade education.

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West Virginia Profile

Indicators	1990 Rate/%	2002 Rate/%	National Rate/%	Trend	
				Worse	Better
Percent low birth-weight babies	6.9%	8.8%	7.8%	28.5%	
Infant mortality rate	9.1	7.9	7.0		-12.9%
Child death rate (ages 1-14 per 100,000 children)	31.1	24.5	21.3		-21.1%
Percent of eligible children served by Head Start (ages 3-4)	42.9%	62.0%	NA		44.6%
Percent children approved for free and reduced-price school meals (K-12)	41.0%	51.5%	43.8%	25.7%	
Child abuse/neglect rate (per 1,000 children)	29.5	14.2	6.7		NM
Teen birth rate (ages 15-19 per 1,000 females)	56.5	44.3	42.7		-21.5%
Percent births to unmarried teens (ages 10-19)	9.5%	9.3%	8.6%		-2.7%
Percent high school dropouts	16.7%	16.2%	NA		-3.1%
Juvenile delinquency case rate	32.4	46.0	NA	41.8%	
Teen violent death rate (ages 15-19 per 100,000 teens)	77.2	67.5	50.0		-12.5%
Percent births to mothers with less than a 12th grade education	25.5%	19.0%	21.2		-25.5%

Background Facts

	1990	2003	% Change
Total population	1,793,477	1,810,357	0.9%
Education expenditures per pupil	\$7,400.24	\$7,690.98	3.9%
Percent all families with related children who receive cash assistance	14.5%	5.1%	-65.0%
Percent births with early prenatal care (2002)	73.5%	86.2%	17.3%
Unemployment rate	8.4	6.1	-27.4%
Total population under age 18	445,244	390,903	-12.2%
Percent population under age 18	24.8%	21.6%	-12.9%
Percent minority population	4.1%	5.0%	21.8%
Percent of children under 18 who are minority	4.5%	6.0%	-98.7%
Percent children in poverty (2002)	26.2%	24.3%	-7.3%
Median family income (1999 Dollars)	\$34,398	\$36,484	6.1%
Percent children in single-parent families (2000)	21.0%	24.7%	17.6%

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 • Charleston Area Medical Center •

A Quick Look at the Counties

Indicators	Best County	Worst County	Most Improved County	Least Improved County
Percent low birth-weight babies	Clay 4.3%	Hancock 14.6%	Tucker -47.0%	Ritchie 125.5%
Infant mortality rate	Webster 2.2	Lincoln 16.0	Tucker -87.2%	Ritchie 107.7%
Child death rate (ages 1-14 per 100,000 children)	Brooke 0.0	McDowell 58.5	Brooke -100.0%	Mineral 247.2%
Percent of eligible children served by Head Start (ages 3-4)	Hardy 239.4%	Tucker 17.9%	Lewis 177.4%	Morgan -61.1%
Percent children approved for free and reduced-price school meals (K-12)	Putnam 31.6%	McDowell 82.7%	Taylor -7.6%	Hancock 85.2%
Child abuse/neglect rate (per 1,000 children)	Morgan 3.6	Wyoming 46.2	NM*	NM*
Teen birth rate (ages 15-19 per 1,000 females)	Monongalia 17.4	McDowell 74.1	Tucker -64.7%	Wirt 19.6%
Percent births to unmarried teens (ages 10-19)	Pendleton 5.3%	McDowell 13.9%	Clay -42.2%	Wirt 80.8%
Percent high school dropouts	Tucker 2.8%	Berkeley 24.7%	Marion -60.0%	Wyoming 135.9%
Juvenile delinquency case rate	Clay and Tyler 0.0	Brooke 145.0	Clay and Tyler -100.0%	Morgan 1070.4%
Teen violent death rate (ages 15-19 per 100,000 teens)	Calhoun 0.0	Summers 210.3	Calhoun -100.0%	Summers 400.5%
Percent births to mothers with less than a 12 th grade education	Tucker 7.3%	McDowell 36.1%	Tucker -64.2%	Wirt 7.1%

*NM = not measurable

Indicators	# of counties that stayed the same or got better	# of counties that got worse
Percent low birth-weight babies	5	50
Infant mortality rate	30	25
Child death rate* (ages 1-14 per 100,000 children)	42	11
Percent of eligible children served by Head Start (ages 3-4)	48	7
Percent children approved for free and reduced-price school meals (K-12)	5	50
Teen birth rate (ages 15-19 per 1,000 females)	50	5
Percent births to unmarried teens (ages 10-19)	26	29
Percent high school dropouts	34	21
Juvenile delinquency case rate*	16	37
Teen violent death rate* (ages 15-19 per 100,000 teens)	32	22
Percent births to mothers with less than a 12 th grade education	53	2

*The total is not 55 because either the data was not available or not measurable for one or more counties for that indicator.

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• Kenna Seal •

Definitions

The notes below detail the way in which an indicator or background fact is constructed when KIDS COUNT calculates rates or percentages. Indicator or background fact clarification is provided for some, but not all, variables. Sources are the same for national, state and county data unless otherwise specified.

CHILD ABUSE/NEGLECT RATE **(per 1,000 children)**

Indicator:

The number of child abuse/neglect reports that are substantiated by Child Protective Services per 1,000 children under age 18.

How is it Constructed?

At the state and county level, this indicator is a rate per 1,000 children based on the state fiscal year 2003-2004. The rate is calculated as 1,000 times the number of reports that are substantiated divided by the total number of children under 18. The number of children under age 18 is based on data from 2000.

Indicator Clarification:

Differences in reporting procedures over the years prevent comparison of rates between counties and trends over time.

Data Sources:

(1990) Child Protective Services referrals accepted for investigation. WV Department of Health and Human Resources, Bureau for Children and Families, Office of Social Services.

(2003-04) State of WV Department of Health and Human Resources, Bureau for Children and Families.

(2002 National Data) National Child Abuse and Neglect Data System of the Children's Bureau, Administration for Children and Families, US DHHS. *Child Maltreatment 2002*.

CHILD DEATH RATE **(ages 1-14 per 100,000 children)**

Indicator:

The number of deaths due to all causes of children between the ages of 1-14 years, per 100,000 children.

How is it Constructed?

At a state and county level, this variable is a rate per 100,000 children based on a five-year average (1988, 1989, 1990, 1991, and 1992 for 1990; and 1998, 1999, 2000, 2001, and 2002 for 2002). The rate is calculated as 100,000 times the number of child deaths due to all causes divided by the total number of children ages 1-14. The national rate is calculated in the same manner but is not a five-year average.

Indicator Clarification:

Due to the small number of child deaths on the county level, a small change in the actual number from the period 1990 to 2001 may result in a large percentage change for trend data. The number of children 1-14 years old is based on 1990 (for 1990) and 2001 (for 2001) census data.

Data Sources:

State (1990, 2002) WV Department of Health and Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

National (2002) Deaths: Final Data for 2002. Monthly Vital Statistics Report; Vol 48 No 11, Hyattsville, Maryland: National Center for Health Statistics.

EDUCATIONAL EXPENDITURES PER PUPIL

Background Fact:

Current per pupil expenditures are based on second-month's net enrollment for public school programs Pre-kindergarten through 12th grade for the 2002-2003 school year.

How is it constructed?

For comparison purposes, educational expenditures for 1990-1991 were converted into 2003 dollars using the Consumer Price Index inflation calculator.

Data Sources:

(1990) WV Department of Education: Per Pupil Expenditure for Instructional Personnel, 1990-1991.

(2003) WV Department of Education: General Current Expense Fund. Expenditures on a per pupil basis (net enrollment) for the 2002-2003 school year.

INFANT MORTALITY RATE **(per 1,000 live births)**

Indicator:

The number of deaths of infants under one year of age per 1,000 live births.

How is it Constructed?

At a state and county level, this variable is a rate per 1,000 live births based on a five-year average (1988, 1989, 1990, 1991, and 1992 for 1990; and 1998, 1999, 2000, 2001, and 2002 for 2002). The rate is calculated as 1,000 times the number of infant deaths due to all causes divided by the number of total births. At the national level, the rate is calculated as 1,000 times the number of infant deaths in 2002 divided by the number of live births in 2002.

Indicator Clarification:

Due to the small number of deaths to infants under one year of age on the county level, a small change in the actual number from the period 1990 to 2002 may result in a large percentage change for trend data.

Data Sources:

(1990, 2002) WV Department of Health and Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

JUVENILE DELINQUENCY CASE RATE **(ages 10-21 per 1,000 youths)**

Indicator:

This is the number of delinquency cases reported per 1,000 youths ages 10-21. A case is defined by the Juvenile Justice Data Base as a written and signed petition or complaint charging the juvenile with one or more crimes or status offenses committed within a 24-hour period in one county.

How is it Constructed?

At the state and county level, this variable is a rate per 1,000 youths based on youths ages 10-19 in 1991-1992 for 1990 and youths ages 10-21 for 2002. The rate is calculated as 1,000 times the number of juvenile cases divided by the total number of youths ages 10-19 for 1990 and estimates of ages 10-21 for 2002.

Data Sources:

(1990) WV Supreme Court of Appeals,

Juvenile Justice Committee. Juvenile Delinquency in West Virginia, Annual Report, July 1, 1991 to June 30, 1992. Juvenile Justice Data Base, Table IV, Page 14.

(2002) WV Division of Criminal Justice Services, Criminal Justice Statistical Analysis Center.

MEDIAN FAMILY INCOME

Background Fact:

This is the median income of families (as opposed to households). It represents all families, both those with and without children. MFI is the dollar amount that divides the income distribution into two equal groups—half with income above the median and half with income below it.

How is it Constructed?

For comparison purposes, median family income data for 1990 was converted into 1999 dollars using the Consumer Price Index inflation calculator. The most current median family income data by county is from the 2000 Census. It uses 1999 data.

Data Sources:

(1990) U.S. Census Bureau. Census of Population and Housing, 1990: Summary Tape File 3C, (Table 107A).

State and Counties (2000) U.S. Census Bureau, Census 2000 Summary File 3, Table P77.

National (2000) U.S. Census Bureau, Census 2000, Population Reference Bureau, Analysis of Data from the U.S. Census Bureau, Current Population Survey (March 2002) Supplement, 2000-2001 Summary File 3, Table P77.

PERCENT ALL FAMILIES WITH RELATED CHILDREN WHO RECEIVE CASH ASSISTANCE

Background Fact:

This is the percentage of families with related children who receive public assistance under the Temporary Aid to Needy Families (TANF) program. Eligibility for this program is income based.

How is it Constructed?

To arrive at the percentage, the total of TANF cases is divided by the number of families with related children under 18 years of age for 2000. Families with related children are comprised of

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• United Methodist Church •

married couples with related children, female heads with related children, and male heads with related children. At a state and county level, this background fact is a percentage based on a three-fiscal-year average (1988-1989, 1989-1990, and 1990-1991) for 1990 and one fiscal year 2002-2003 for 2003.

Background Fact Clarification:

The 1990 trend data is calculated using the percentage of families with related children who received public assistance under the Aid to Families with Dependent Children (AFDC) program. For SFY 2003, total TANF cases were used. Eligibility requirements for AFDC and TANF are different. The number of families with related children for 1990 comes from the 1990 Census; the number of families with related children under 18 is from the 2000 Census.

Data Sources:

(1990) WV Department of Health and Human Resources. Fiscal Year 1988-1989, 1989-1990, 1990-1991 for 1990; unpublished annual bulletin from Office of Audits, Research and Analysis. The source for families with related children for 1990 is from the U.S. Census Bureau, Population and Housing, Data Set: 1990 Summary Tape File 1 (STF 1) - 100 percent data.

(2003) WV Department of Health and Human Resources. TANF - Cases, Individuals, and Expenditures, Monthly Average for State Fiscal Year 2003.

PERCENT BIRTHS TO MOTHERS WITH LESS THAN A 12TH GRADE EDUCATION

Indicator:

The percentage of all births to mothers with less than a 12th grade education.

How is it Constructed?

At a state and county level, this indicator is based on a three-year average (1989, 1990 and 1991 for 1990; and 2000, 2001 and 2002 for 2002). The number of births to mothers with less than a 12th grade education is divided by the total number of births to women with known education. The national figure is calculated in the same way as state and county figures but is based on data from one year, 2002.

Data Sources:

(1990, 2002) WV Department of Health and

Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

PERCENT BIRTHS TO UNMARRIED TEENS (ages 10-19)

Indicator:

At a state and county level, this indicator is the percentage of all live births to unmarried girls ages 10-19. At a national level, the percentage represents live births that are to unmarried women under 20 years of age.

How is it Constructed?

At a state and county level, this indicator is based on a three-year average (1989, 1990 and 1991 for 1990; and 2000, 2001 and 2002 for 2002). The numerator is the number of births to unmarried teens ages 10-19; the denominator is the total number of births. National data is calculated by dividing the number of births to unmarried teens under age 20 by the total number of births. National data is based only on 2002 data.

Indicator Clarification:

Due to the small number of births to unmarried teens in some counties, a small change in the actual number from the period 1990 to 2002 may result in a large percentage change for trend data. The base population for this indicator is the births to all mothers, regardless of age.

Data Sources:

(1990, 2002) WV Department of Health and Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

PERCENT BIRTHS WITH EARLY PRENATAL CARE

Background Fact:

The percentage of live births that are to women who began prenatal care in the first three months of their pregnancy.

How is it Constructed?

At a state and county level, this indicator is a percentage, based on a three-year average (1989, 1990 and 1991 for 1990; and 2000, 2001 and 2002 for 2002). The numerator for the variable is the number of births with first trimester care; the denominator is all births with known prenatal care.

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• WV Conference of the United Methodist Church •

Background Fact Clarification:

Live births to women who did not report the month in which prenatal care was started were excluded from the computation. This background fact does not tell us anything about the quality, frequency or consistency of care that the mother received during this time.

Data Sources:

(1990, 2002) WV Department of Health and Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

PERCENT CHILDREN APPROVED FOR FREE OR REDUCED-PRICE SCHOOL MEALS (grades K-12)

Indicator:

The percent of all enrolled children in grades K-12 who applied and were approved for free or reduced-price school meals. This indicator is used as a measure of the percent of poor and near-poor children in West Virginia. Children whose parents' income is below 130% of poverty are eligible for free meals; reduced-price meals are available for children whose parents' income is between 130% and 185% of poverty.

How is it Constructed?

At a county and state level, this variable is a percentage based on 1991-1992 fiscal year data for 1990; and 2002-2003 fiscal year data for 2003. The numerator is the number of submitted and approved applications for free or reduced-price school meals in grades K-12; the denominator is the total student enrollment in grades K-12. The number of children who are eligible for free and reduced-price school meals is thought to be undercounted since not all eligible persons return the application form.

Data Sources:

(1990) WV Department of Education, Office of Child Nutrition, Percentage of Needy Students, October Fiscal Year 1991-1992.

(2003) WV Department of Education, Office of Child Nutrition, Percentage of Needy Students, State Fiscal Year 2002-2003.

(National) Mid-Atlantic Regional Office, Food and Nutrition Services, U.S. Department of Agriculture

PERCENT CHILDREN IN POVERTY

Background Fact:

The percentage of children in poverty is the share of children under age 18 who live in families with incomes below the U.S. poverty threshold as defined by the U.S. Census Bureau. In 2000, the poverty threshold for a family of two adults and two children was \$17,463.

How is it Constructed?

The percent children in poverty is the total number of children under age 18 who live in families with incomes at or below the poverty level divided by the total number of children under age 18.

Background Fact Clarification:

Since the *1999 Data Book*, we have used information from the Small Area Income and Poverty Estimates (SAIPE) series of the U.S. Census Bureau which provides state and county-level estimates of income and poverty.

Data Sources:

(1990) U.S. Census Bureau. Census of Population and Housing, 1990: Summary Tape File 3C, (Table P117): Prepared by the U.S. Census Bureau, Washington (WV University Office of Health Services Research), 1992.

(2000) For both state and county poverty estimates: U.S. Census Bureau, Small Area Income and Poverty Estimates program, data accessed online at <http://www.census.gov/cgi-bin/saibe/saibe.cgi> on 11/15/2004.

PERCENT CHILDREN IN SINGLE-PARENT FAMILIES

Background Fact:

This is the percentage of children under age 18 who live in families headed by a person without a spouse present in the home. Children are defined as all sons/daughters of householders who are under 18 years of age.

How is it Constructed?

To arrive at the percent children in single-parent families, the total number of children under age 18 in single-parent families was divided by the total number of children under age 18. Single parents are comprised of female-headed or male-headed families with no spouse present.

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• West Virginia Coal Association •

Data Sources:

(1990) U.S. Census Bureau. Census of Population and Housing, 1990: Summary Tape File 1C, (Table P21)/Prepared by the U.S. Census Bureau. Washington: The Bureau (WV University Office of Health Services Research), 1992.

(2000) Calculated from Census 2000 Summary File 1 (SF 1) 100-Percent Data P28.

PERCENT LOW BIRTH-WEIGHT BABIES**Indicator:**

The percentage of all live births is defined as babies who weigh under 2,500 grams (5.5 pounds) at birth.

How is it Constructed?

At a state and county level, this indicator is a percentage based on a three-year average (1989, 1990 and 1991 for 1990; and 2000, 2001 and 2002 for 2002). The numerator for this variable is the number of low birth-weight babies; the denominator is total births. National data is the number of low birth-weight babies in 2002 divided by the total births in 2002.

Data Sources:

(1990, 2002) WV Department of Health and Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

PERCENT MINORITY POPULATION**Background Fact:**

The percentage of the total population that is identified as minority.

How is it Constructed?

To arrive at percent minority population, the total minority population was divided by the total population. Numbers for this formula were based on 1990 and 2003 census data.

Data Sources:

(1990) U.S. Census Bureau. 1990-99 Annual Time Series of County Population Estimates by Age, Sex, and Race/Hispanic Origin, 1990: Prepared by the U.S. Census Bureau. Washington.

(2003) U.S. Census Bureau. Population Estimates Program, 2003. Prepared by the Population Reference Bureau.

PERCENT OF CHILDREN UNDER 18 WHO ARE MINORITY**Background Fact:**

The percentage of the population under age 18 who have been identified as minority.

Data Sources:

(1990) U.S. Census Bureau. Online data accessed at eire.census.gov/popest/data/states/files/STCH-icen1990.txt (accessed November 19, 2003).

(2003) U.S. Census Bureau. Population Estimates Program 2003. Prepared by the Population Reference Bureau.

PERCENT OF ELIGIBLE CHILDREN SERVED BY HEAD START (ages 3-4)**Indicator:**

The percentage of all eligible children 3-4 years old who are participating (in funded positions - unduplicated count) in Head Start.

How is it Constructed?

At the state and county levels, this variable is a percentage based on 2004 data. The numerator for this indicator is the number of funded positions for children ages 3-4; the denominator is the estimated number of children 3-4 years old in poverty from 1990 and 2001 population data.

Indicator Clarification:

This indicator is based on data from 2004. The reader will notice that in some counties, the percentage of children 3-4 years old funded by Head Start exceeds the percentage of children in poverty; this is because guidelines for the program allow up to 10% of those children enrolled in Head Start to exceed the income level.

Data Sources:

(1990) Department of Health and Human Services, Region III. Administration for Children and Families, Office for Community Programs, Philadelphia, Pennsylvania.

(2004) Office of Head Start State Collaboration, Commissioner's Office, Bureau for Children and Families, WV Department of Health and Human Resources.

PERCENT OF HIGH SCHOOL DROPOUTS

Indicator:

The percentage of students in grades 7-12 who leave a public school before graduation without transferring to another school.

How is it Constructed?

At a state and county level, this indicator is based on a three-year average of school years 1989-1990, 1990-1991 and 1991-1992 for 1990; and 2000-2001, 2001-2002 and 2002-2003 for 2003. This percent is based on the number of 7th through 12th grade dropouts divided by the number of 7th through 12th grade dropouts plus the number of 12th grade graduates.

Data Sources:

(1990, 2003) WV Department of Education.

PERCENT POPULATION UNDER AGE 18

Background Fact:

The percentage of the total population under age 18.

How is it Constructed?

To arrive at the percent population under 18, the population under 18 was divided by the total population. Numbers for this formula were based on 1990 census data for 1990 and 2003 census data.

Data Sources:

(1990) U.S. Census Bureau. 1990-1999 Annual Time Series of County Population Estimates by Age, Sex, and Race/Hispanic Origin, 1990: Prepared by the U.S. Census Bureau. Washington.

(2003) U.S. Census Bureau. Population Estimates Program for 2003. Prepared by the Population Reference Bureau.

TEEN BIRTH RATE

(ages 15-19 per 1,000 females)

Indicator:

The number of live births to teens ages 15-19 per 1,000 females ages 15-19.

How is it Constructed?

At a state and county level, this indicator is a rate per 1,000 females ages 15-19 based on an average of 1989, 1990 and 1991 data for 1990; and 2000, 2001 and 2002 for 2002. The rate is calculated as 1,000 times the number of teen births to females ages 15-19 divided by the total

number of females ages 15-19. National data is calculated in the same manner except that it is based on 2001 data and not on a three-year average.

Indicator Clarification: The base population for this indicator is the total number of females ages 15-19 in 1990 and 2000.

Data Sources:

(1990, 2002) WV Department of Health and Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

TEEN VIOLENT DEATH RATE

(ages 15-19 per 100,000 teens)

Indicator:

The number of deaths from homicides, suicides and unintentional injuries to teens ages 15-19 per 100,000 teens.

How is it Constructed?

At a state and county level, this indicator is a five-year count (1988, 1989, 1990, 1991 and 1992 for 1990; and 1998, 1999, 2000, 2001 and 2002 for 2002). The teen violent death rate is a composite of the number of deaths for injury mortality from homicide, suicide and unintentional injuries. The rate is calculated as 100,000 times the number of teen violent deaths divided by the total number of youths ages 15-19. The national rate is calculated in the same manner, but it is based only on 2001 data and not on an average.

Indicator Clarification:

Like the infant mortality and child death rates, this rate does not tell us anything about the quality of life for those teens surviving life-threatening injuries. Due to the small number of teen deaths on the county level, a small change in the actual number from the period 1990 to 2002 may result in a large percentage change for trend data. The number of youths between 15-19 years old is based on 1990 and 2000 census data.

Data Sources:

(1990, 2002) WV Department of Health and Human Resources, Bureau of Public Health, Office of Epidemiology and Health Promotion, Health Statistics Center.

(National 2001) *2004 KIDS COUNT DATA BOOK*, Casey Foundation (from Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, special tabulation accessed online at <http://webapp.cdc.gov/sasweb/ncipc/mortrate.html>)

TOTAL POPULATION

Background Fact:

The total population as reported by the U.S. Census Bureau.

Data Sources:

(1990) U.S. Census Bureau. County Population Estimates and Demographic Components of Change: 1990-2000. Washington.

(2003) U.S. Census Bureau, Population Estimates Programs, 2003 Population Estimates, Detailed Tables.

TOTAL POPULATION UNDER AGE 18

Background Fact:

The total population under age 18 as reported by the U.S. Census Bureau.

Data Sources:

(1990) U.S. Census Bureau. 1990-2000 County Estimates by Age, Sex, and Race/Hispanic Origin, 1990: Prepared by the U.S. Census Bureau. Washington.

(2003) U.S. Census Bureau. Population Estimates Program for 2003. Prepared by the Population Reference Bureau.

UNEMPLOYMENT RATE

Background Fact:

The number of people who are actively looking for work but are unemployed as a percentage of the civilian labor force.

Data Sources:

(1990) WV Bureau of Employment Programs (www.state.wv.us/bep/).

(2003) WV Bureau of Employment Programs. <http://www.wvbep.org/scripts/bep/lmi/entydata.cfm>

Notes

Most of the indicators and background facts are expressed as percentages or rates. Indicators and background facts presented as actual numbers include: total population, education expenditures per pupil, total population under age 18 and median family income.

Trend data is based on the change between 1990 and 2002. In some cases, including percent low birth-weight babies, teen birth rate, percent births to unmarried teens and percent births to mothers with less than a 12th grade education, the 1990 value is the average of 1989, 1990 and 1991, and the 2002 value is the average of 2000, 2001 and 2002. For indicators such as child death, infant mortality, and teen violent death, the 1990 value is the average of 1988, 1989, 1990, 1991 and 1992, and the 2002 value is the average of 1997, 1998, 2000, 2001 and 2002. The 1990 percent of high school dropouts is the average of three years: 1989-1990, 1990-1991 and 1991-1992; the 2003 percent of high school dropouts is the average of 2000-2001, 2001-2002 and 2002-2003 school years. Child abuse/neglect data are based on the State Fiscal Year 2003-2004. Head Start data are from 2004 and Cash Assistance data are from 2003; and the percent children approved for free and reduced-price school meals data are from the 2002-2003 school year.

A composite county rank is derived by averaging the indicator ranks. This is done in order to give each indicator equal weight. The average ranks are sorted from 1 (best) to 55 (worst).

All indicators, except the child abuse/neglect rate, are used to calculate the county composite rankings. All rate/percents and percent changes are rounded to the nearest tenth of a percent.

More detailed information about the individual indicators, percent changes and rankings can be found in the supplemental tables published as a separate document by KIDS COUNT. For a copy of these tables, call **1-888-KIDSCOUNT** or e-mail staff@wvkidscountfund.org.

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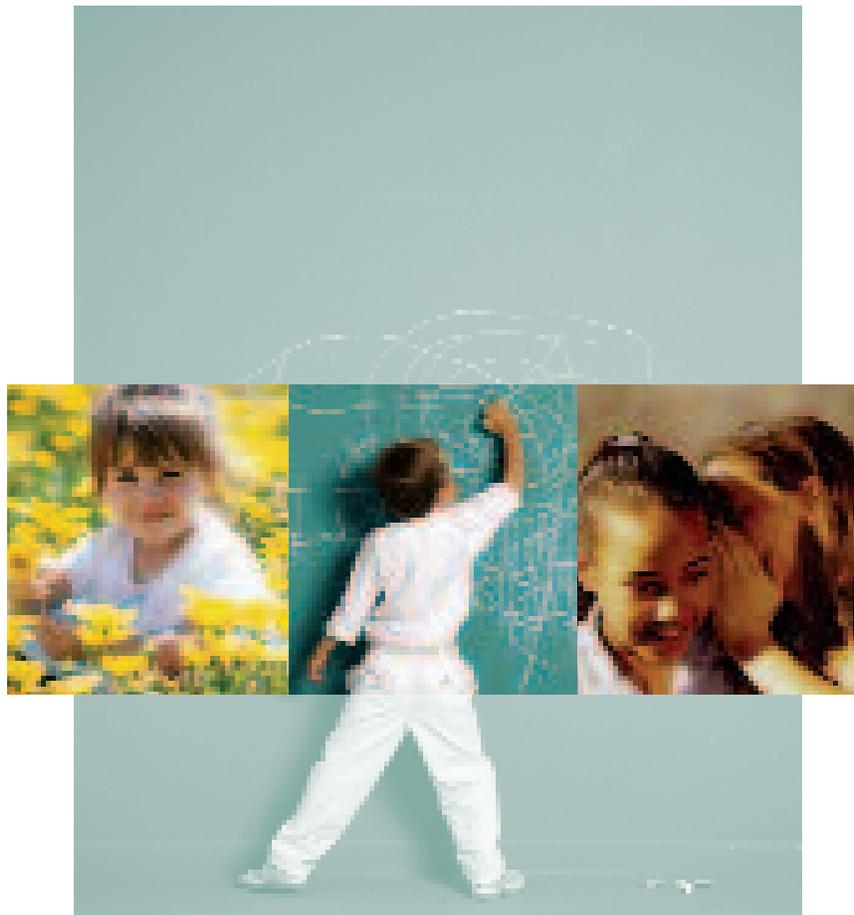
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CASA for Kids
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National Association of Social Workers WV Chapter
National Council of Jewish Women WV Section
NCWVCAA Head Start
Region VIII Adolescent Health Task Force
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West Virginia Chamber of Commerce
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WV Healthy Kids and Families Coalition
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