America's Children: Key National Indicators of Well-Being 2005











Federal Interagency Forum on Child and Family Statistics



he Federal Interagency Forum on Child and Family Statistics was founded in 1994. Executive Order No. 13045 formally established it in April 1997 to foster coordination and collaboration in the collection and reporting of Federal data on children and families. Forum agencies as of Spring 2005 are listed below.

Department of Agriculture

Food and Nutrition Service http://www.fns.usda.gov

Department of Commerce

U.S. Census Bureau http://www.census.gov

Department of Defense

Defense Manpower Data Center http://mfrc.calib.com

Department of Education

Institute of Education Sciences National Center for Education Statistics http://nces.ed.gov

Department of Health and Human Services

Administration for Children and Families http://www.acf.hhs.gov

Agency for Healthcare Research and Quality http://www.ahrq.gov

Maternal and Child Health Bureau http://www.mchb.hrsa.gov

National Center for Health Statistics http://www.cdc.gov/nchs

National Institute of Child Health and Human Development http://www.nichd.nih.gov

Office of the Assistant Secretary for Planning and Evaluation http://aspe.hhs.gov/_/index.cfm

Department of Housing and Urban Development

Office of Policy Development and Research http://www.huduser.org

Department of Justice

Bureau of Justice Statistics http://www.ojp.usdoj.gov/bjs

National Institute of Justice http://www.ojp.usdoj.gov/nij

Office of Juvenile Justice and Delinquency Prevention http://www.ojp.usdoj.gov/ojjdp

Department of Labor

Bureau of Labor Statistics http://www.bls.gov

Women's Bureau http://www.dol.gov/wb

Department of Transportation

National Highway Traffic Safety Administration http://www.nhtsa.dot.gov

Environmental Protection Agency

Office of Environmental Information http://www.epa.gov

National Science Foundation

Division of Science Resources Statistics http://www.nsf.gov/statistics

Office of Management and Budget

Office of Information and Regulatory Affairs http://www.whitehouse.gov/omb/inforeg

Recommended citation: Federal Interagency Forum on Child and Family Statistics. *America's Children: Key National Indicators of Well-Being, 2005.* Federal Interagency Forum on Child and Family Statistics, Washington, DC: U.S. Government Printing Office.

This report was printed by the U.S. Government Printing Office in cooperation with the National Center for Health Statistics, July 2005.

Single copies are available through the Health Resources and Services Administration Information Center while supplies last: P.O. Box 2910, Merrifield, VA 22116; Toll-Free Lines: 1-888-Ask-HRSA, TTY: 1-877-4TY-HRSA; Fax: 703-821-2098; E-mail: ask@hrsa.gov. The report is also available on the World Wide Web at http://childstats.gov.

Table of Contents

Foreword	iii
Acknowledgments	iv
About This Report	<i></i>
Highlights	vi
Summary List of Indicators	x
Part I: Population and Family Characteristics	I
Child Population	3
Children as a Proportion of the Population	4
Racial and Ethnic Composition	5
Children of at Least One Foreign-Born Parent	6
Difficulty Speaking English	7
Family Structure and Children's Living Arrangements	
Births to Unmarried Women	10
Child Care	12
Children's Environments	14
Data Needed	16
Part II: Indicators of Children's Well-Being	17
Economic Security Indicators	17
Child Poverty and Family Income	18
Secure Parental Employment	20
Housing Problems	21
Food Security and Diet Quality	22
Access to Health Care	24
Indicators Needed	26
Health Indicators	27
General Health Status	28
Activity Limitation	29
Overweight	30
Childhood Immunization	31
Low Birthweight	32
Infant Mortality	33
Child Mortality	34
Adolescent Mortality	36
Adolescent Births	38
Indicators Needed	39

Behavior and Social Environment Indicators	41
Regular Cigarette Smoking	43
Alcohol Use	44
Illicit Drug Use	45
Youth Victims and Perpetrators of Serious Violent Crimes	46
Indicators Needed	48
Education Indicators	49
Family Reading to Young Children	50
Early Childhood Care and Education	51
Mathematics and Reading Achievement	52
High School Academic Coursetaking	54
High School Completion	55
Youth Neither Enrolled in School Nor Working	56
Higher Education	57
Indicator Needed	58
Special Features	59
Asthma	60
Lead in the Blood of Children	61
Parental Reports of Emotional and Behavioral Difficulties	62
Special Section	63
Family Structure and Children's Well-Being	65
Family Structure and Infant Well-Being	66
Family Structure and Adolescent Well-Being	68
Notes to Indicators	73
Appendices	83
Appendix A: Detailed Tables	
Appendix B: Data Source Descriptions	173

Foreword

n 1994, the Office of Management and Budget joined with six other Federal agencies to create the Interagency Forum on Child and Family Statistics. Formally established in April 1997 through Executive Order No. 13045, the Forum was called upon to develop priorities for collecting enhanced data on children and youth, improve the reporting and dissemination of information on the status of children to the policy community and the general public, and produce more complete data on children at the State and local levels. The Forum, which now has participants from 20 Federal agencies as well as partners in private research organizations, fosters coordination, collaboration, and integration of Federal efforts to collect and report data on conditions and trends for children and families.

America's Children: Key National Indicators of Well-Being, 2005 is a compendium of indicators—drawn from the most reliable official statistics—illustrative of both the promises and the difficulties confronting our Nation's young people. The report presents 25 key indicators on important aspects of children's lives. These indicators are easy to understand by broad audiences, objectively based on substantial research connecting them to reliable data on child well-being, balanced so that no single area of children's lives dominates the report, measured regularly so that they can be updated to show trends over time, and representative of large segments of the population rather than one particular group.

As has been the case in previous volumes, this report includes a Population and Family Characteristics section that provides key contextual measures, followed by sections that present key indicators in four domains-Economic Security, Health, Behavior and Social Environment, and Education. This year's report reflects several significant improvements. First, the Forum staff has focused on improvements in consistency of layout and format across measures in the report. Second, a few data sources for particular indicators have been changed to provide more regularly updated data than in the past. And third, there are three special features and a special section. Two of the special features—percentage of children with asthma and percentage of children with specified blood lead levels—update previous special features that were published several years ago. The third special feature is parental reports of children's

emotional and behavioral difficulties. This indicator seeks to address a data gap—mental health of children—noted in previous volumes of *America's Children*. Last, this report includes a special section on family structure that highlights this important dimension in the well-being of children.

Each volume of *America's Children* highlights critical data gaps and challenges Federal statistical agencies to do better. Forum agencies are meeting that challenge by working to provide more comprehensive and consistent information on the condition and progress of our Nation's children. Since the last full report (*America's Children: Key National Indicators of Well-Being, 2003*), Forum agencies have continued efforts to strengthen some indicators and to close critical data gaps, particularly in areas such as family structure and the mental health of children.

The value of the America's Children reports and the extraordinary cooperation they represent reflect the Forum's innovative, determined spirit to advance our understanding of where our children are today and what may be needed to bring them a better tomorrow. The Forum agencies should be congratulated once again this year for joining together to address their common goals: developing a truly comprehensive set of indicators on the well-being of America's children and ensuring that this information is readily accessible in both content and format. Their accomplishments reflect the dedication of the Forum agency staff members who coordinate the assessment of data needs, evaluate strategies to make data presentations more consistent, and work together to produce important publications and provide these products on the Forum's website: http://childstats.gov. Last but not least, none of this work would be possible without the continued cooperation of millions of American citizens who willingly provide the data that are summarized and analyzed by staff in the Federal agencies. We invite you to suggest ways in which we can enhance this annual portrait of the Nation's most valuable resource: its children. I applaud the Forum's collaborative efforts in producing this report and hope that our compendium will continue to be useful in your work.

Katherine K. Wallman

Chief Statistician
Office of Management and Budget

Acknowledgments

his report reflects the commitment of the members of the Interagency Forum on Child and Family Statistics. The report was written by the staff of the Interagency Forum on Child and Family Statistics, including: Shara Godiwalla, Staff Director of the Children's Forum; Susan Schechter, Office of Management and Budget; Tavia Simmons, U.S. Census Bureau; Susan Lukacs, National Center for Health Statistics; Patrick Rooney, National Center for Education Statistics; Daniel Axelrad and Belinda Hawkins, Environmental Protection Agency; Barry Steffen, Department of Housing and Urban Development; Caroline Harlow, Bureau of Justice Statistics; Jessica Campbell, National Institute on Drug Abuse; Naomi Goldstein, Administration for Children and Families; Tracy Von Ins, Food and Nutrition Service; Teri Morisi, Bureau of Labor Statistics; and Larry Wilkinson, Centers for Disease Control and Prevention.

Members of the Mental Health Work Group who worked with the Forum staff and consultants to develop the special feature on children's emotional and behavioral difficulties were Karen Bourdon and Eve Mościcki, National Institute of Mental Health; Ronald Manderscheid, Center for Mental Health Services; Catherine Lesesne, National Center on Birth Defects and Developmental Disabilities; and Gloria Simpson, National Center for Health Statistics.

In addition to the report authors, active members of the Reporting Committee that guided development of the report included Linda Gordon, U.S. Citizenship and Immigration Services; Robert Kominski, U.S. Census Bureau; Laura Chadwick and Martha Moorehouse, Office of the Assistant Secretary for Planning and Evaluation, Health and Human Services; John Kiely, National Center for Health Statistics; Zahid Khawaja, National Highway Traffic Safety Administration; Jeff Evans and Lynne Casper, National Institute of Child Health and Human Development; Catherine Vladutiu, Maternal and Child Health Bureau; Richard Bavier, Office of Management and Budget; and Carrie Mulford, National Institute of Justice.

Other staff members of the Forum agencies provided data, developed indicators, or wrote parts of the report. They include Kelly Holder, Rose Kreider, Linda Mayberry, Julia Johnson, and Bernadette Proctor, U.S. Census Bureau; Ken Robertson, Rowena Johnson, and Khary Cook, Bureau of Labor Statistics: Peter Basiotis, Mark Lino, and Andrea Carlson, Center for Nutrition Policy and Promotion; Seth Chamberlain, Administration for Children and Families; Chris Chapman, National Center for Education Statistics; Manon Boudrealt, Robin Cohen, Cathy Duran, Donna Hoyert, T.J. Mathews, Cynthia Ogden, Patricia Pastor, and Stephanie Ventura, National Center for Health Statistics; Mark Nord, Economic Research Service; Devon Payne-Sturges, Tracey Woodruff, Alison Freeman, and Lee Tooly, U.S. Environmental Protection Agency.

Valuable contributions to the report were made by Jennifer Madans, National Center for Health Statistics. In addition, Daniel Princiotta, Nana Kwakye, and Heather Block of the Education Statistics Services Institute assisted Forum staff in producing the report.

About This Report

he Federal Interagency Forum on Child and Family Statistics' primary mission is to enhance and improve consistency in data collection on children and families. Also,

the Forum aims to improve the reporting and dissemination of information on the status of children and families. *America's Children: Key National Indicators of Well-Being, 2005* provides the Nation with a summary of national indicators of child well-being and monitors changes in these indicators over time. In addition to providing data in an easy-to-use, non-technical format, the purpose of the report is to stimulate discussions among policymakers and the public, exchanges between data providers and policy communities, and improvements in Federal data on children and families.

Structure of the Report

America's Children: Key National Indicators of Well-Being, 2005 presents a selected set of key indicators of continuing interest that measure critical aspects of children's lives and are collected rigorously and regularly by Federal agencies. The Forum chose these indicators through careful examination of available data. In determining this list of key indicators, the Forum sought input from the Federal policy-making community, foundations, academic researchers, and State and local children's service providers. These indicators were chosen because they are:

- Easy to understand by broad audiences;
- Objectively based on substantial research connecting them to child well-being and using reliable data;
- *Balanced*, so that no single area of children's lives dominates the report;
- Measured regularly, so that they can be updated and show trends over time; and
- *Representative* of large segments of the population, rather than one particular group.

America's Children: Key National Indicators of Well-Being 2005 is designed to complement other, more technical or comprehensive reports produced by some of the Forum agencies. The report is divided into two parts. The first part of the report, *Population and Family Characteristics*, presents data that illustrate the changes during the past few decades in nine measures depicting the context of children's lives. These background measures provide basic information about children in the United States and the social and demographic changes occurring in the child population. The second part of the report, Indicators of Children's Well-Being, contains data on four key areas of child well-being: economic security, health, behavior and social environment, and education. Appendix A, Detailed Tables, presents tabulated data for each measure and additional detail not discussed in the

main body of the report. Appendix B, Data Source Descriptions, describes the sources and surveys used to generate the background measures and the indicators.

The report also presents special features and a special section. These offer an opportunity to present additional measures that either are not available with sufficient frequency to be considered as regular key indicators, are new regular measures that the Forum believes merit special attention when first introduced in the *America's Children* report, or provide more detailed information about a particular indicator or topic.

Changes Since the 2003 Report

America's Children: Key National Indicators of Well-Being, 2005 is similar to the 2003 report both in format and content. Most of the indicators presented in 2003 have been updated with more recent data. The Forum has also worked to improve the report in a number of important ways. Specifically, changes reflect improvements in the availability of data for certain key indicators, clarification of a concept being measured, or substantive expansion of the indicator. For example, data sources were updated for the difficulty speaking English, environmental tobacco smoke, and mathematics and reading achievement measures, while new air quality standards were applied to the air quality measure. In addition, presentation of information in the report demonstrates greater consistency and standardization wherever possible.

Data on Race and Ethnicity

Most indicators in the 2005 America's Children report include data tabulated by race and ethnicity. In 1997, the Office of Management and Budget (OMB) issued revised standards for data on race and ethnicity (http://www.whitehouse.gov/omb/fedreg/ 1997standards.html). Agencies were given a transition period to implement these revised standards, with all changes to take place by January 2003. Several important changes were included in this revision. First, the standards stated that when practical and feasible, respondents should be given the opportunity to selfreport their race and ethnicity. Second, the standards stated that a two-question format is the preferred approach for collecting data on race and ethnicity and that when a two-question format is used, collecting data on Hispanic origin should come first, followed by a question on race. Third, the racial categories were expanded from four racial groups (American Indian or Alaskan Native, Asian, Black, and White) to five racial groups (American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, and White). And fourth, the standards stated that survey respondents should be given the opportunity to select one or more of the five

racial groups. These last two changes—expansion of the racial categories and the introduction of multiple race categories—have a direct impact on many of the indicators presented in this report, particularly with respect to trend analyses.

The data collection systems used in this report implemented the revised standards at different times. As a result, a consistent set of racial and ethnic groups cannot be used for all indicators even for the most current data years. Some indicators may still be reporting data using the "old" race categories, while many others are reporting recent data using the revised categories. It should also be noted that the use of the revised standards to collect racial and ethnic data does not assure that sample sizes will be sufficient to report data for all categories. As has always been the case, some indicators will have more detailed data on race and ethnicity than others. In addition, even if the revised standards have been implemented and sample sizes permit reporting, the same nomenclature is not used uniformly to distinguish between single race and multiple race groups. Users can consult footnotes at the end of the tables that describe how data were collected. Users are strongly encouraged to review the technical documentation associated with each data source to obtain information on how and when the 1997 standards were implemented and what impact this has had on the collection and reporting of data from that source. The Forum will continue to focus on improving the consistency of information across indicators and over time.

Additional Data Needed

America's Children: Key National Indicators of Well-Being, 2005 identifies critical gaps in the data available on children and youth. It challenges the Nation as a whole—and the Federal statistical agencies in particular—to improve the monitoring of important areas of children's lives. It also challenges Federal agencies to improve the timeliness with which information on children is made available to policymakers and the public. At the end of Part I: Population and Family Characteristics and at the end of

each section in *Part II: Indicators of Children's Well-Being*, the report presents a description of child well-being data and measures in need of development. The lists include many important aspects of children's lives for which regular indicators are lacking or are in development, such as children's homelessness, long-term poverty, abuse and neglect, disability, and early development. Mental health is a data need that has been partially met as a Special Feature in this report. In some of these areas, the Forum is exploring ways to collect new measures and improve existing ones. In others, Forum agencies have successfully fielded surveys incorporating some new measures, but they are not yet available on a regular basis for monitoring purposes.

For Further Information

There are several good places to obtain additional information on each of the indicators found in this report. First, for many of the indicators, Appendix A, Detailed Tables, contains additional detail not discussed in the main body of the report. For example, some tables show breakouts by gender, race and Hispanic origin, or another category. Second, Appendix B, Data Source Descriptions, contains information and descriptions of the sources and surveys used to generate the indicators, as well as information on how to contact the agency responsible for collecting the data or administering the relevant survey. Third, numerous publications of the Federal statistical agencies provide additional detail on each of the key indicators included in this report, as well as on scores of other indicators. Two such reports include The Condition of Education, published annually by the National Center for Education Statistics and Health, United States, published annually by the National Center for Health Statistics. Often these compendia contain additional details not reported in America's Children. Finally, the Forum's website, http://childstats.gov, contains data tables with additional years of data, when available, and links to Forum agency publications that often provide more detail about the indicators in this report.

Highlights

 \boldsymbol{A}

merica's Children: Key National Indicators of Well-Being, 2005 is a biennial report to the Nation on the condition of children in America. Nine contextual measures

describe the changing population, family, and environmental context in which children are living, and 25 indicators depict the well-being of children in the areas of economic security, health, behavior and social environment, and education. This year's report has special features on children with asthma, children with specified blood lead levels, and parental reports of children's emotional and behavioral difficulties. In addition, the report includes a special section on family structure and the well-being of children. Highlights from each section of the report follow.

Part I: Population and Family Characteristics

- In 2003, there were 73 million children ages 0–17 in the United States, or 25 percent of the population, down from a peak of 36 percent at the end of the baby boom (1964). Children are projected to compose 24 percent of the total population in 2020.
- The racial and ethnic diversity of America's children continues to increase over time. In 2003, 60 percent of U.S. children were White-alone, non-Hispanic, 16 percent were Black-alone, and 4 percent were Asian-alone.¹ The proportion of Hispanic children has increased faster than that of any other racial and ethnic group, growing from 9 percent of the child population in 1980 to 19 percent in 2003.
- In 2004, 68 percent of children ages 0–17 lived with two married parents, down from 77 percent in 1980. After decreasing from 1980 to 1994, the percentage has remained stable at about 68–69 percent from 1994 to 2004.
- Between 1980 and 1994, the rate of childbearing by unmarried women rose sharply for women of all ages. For all age groups combined, this trend ended in 1994. Birth rates for unmarried teenagers have dropped considerably since 1994, while increases in rates for women in their twenties and older have slowed. In 2003, the overall birth rate was 45 births per 1,000 unmarried women ages 15–44.
- In 2003, 62 percent of children ages 0–17 lived in counties in which one or more of the Primary National Ambient Air Quality Standards were exceeded, an improvement from 69 percent in 1999.

■ Children's exposure to secondhand smoke, as indicated by blood cotinine levels, dropped between 1988–1994 and 1999–2002. Overall, 59 percent of children ages 4–11 had cotinine in their blood in 1999–2002, down from 88 percent in 1988–1994. In 2003, 11 percent of children ages 0–6 lived in homes where someone smoked regularly.

Part II: Indicators of Children's Well-Being

Economic Security Indicators

- In 2003, 18 percent of all children ages 0–17 lived in poverty, whereas among children living in families, the poverty rate was 17 percent.
- The official poverty rate of children living in families below the poverty threshold has fluctuated since the early 1980s: it reached a high of 22 percent in 1993 and decreased to a low of 16 percent in 2000.
- In 2003, 89 percent of children had health insurance coverage at some point during the year. While government insurance coverage has continued its upward trend since 1999, the proportion of children covered by private health insurance has dropped since 2000, reversing the upward trend from 1994–1999.

Health Indicators

- The proportion of children ages 6–18 who were overweight increased from 6 percent in 1976–1980 to 16 percent in 1999–2002. Racial, ethnic, and gender disparities exist, such that in 1999–2002, Black-alone, non-Hispanic girls and Mexican American boys were at particularly high risk of being overweight (23 percent and 27 percent, respectively).¹
- While still near its record low, the infant mortality rate increased in 2002 for the first time in decades. The rate was 7.0 deaths per 1,000 live births, up from a rate of 6.8 in 2001. A special analysis showed that most of the increase was due to an increase in the number of infants weighing less than 750 grams, or about 1 lb. 10 oz. Racial and ethnic disparities persist, with the Black, non-Hispanic infant mortality rate consistently higher than that of other racial or ethnic groups.
- Child mortality dropped by approximately half between 1980 and 2002 among children ages 1–4 (from 64 to 31 deaths per 100,000 children) and among children ages 5–14 (from 31 to 17 deaths per 100,000 children).

- Deaths from firearm injuries among adolescents declined between 1995 and 2002, particularly among Black and Hispanic males. For example, from 1995 to 2002, the firearm homicide rate declined from 101 to 48 deaths per 100,000 Black males and from 47 to 22 deaths per 100,000 Hispanic males.
- The birth rate for adolescents continued to decline in 2003 to 22 births per 1,000 females ages 15–17, representing the lowest rate ever recorded. The decrease in adolescent births is apparent for all racial and ethnic groups and is notable among Black adolescents. The birth rate among Black, non-Hispanic females ages 15–17 dropped by more than half between 1991 and 2003 (from 86 to 39 births per 1,000), completely reversing the increase from 1986 to 1991.

Behavior and Social Environment Indicators

- Following several years of gradual decreases, the rate of daily smoking remained stable between 2003 and 2004; in 2004, 4 percent of 8th-graders, 8 percent of 10th-graders, and 16 percent of 12th-graders reported smoking cigarettes daily in the previous 30 days.
- The percentage of students who reported having five or more drinks in a row in the past 2 weeks was stable from 2003 to 2004 at 11 percent among 8th-graders, 22 percent among 10th-graders, and 29 percent among 12th-graders.
- Between 2003 and 2004, illicit drug use (in the past 30 days) significantly declined from 10 percent to 8 percent among 8th-graders.
- Serious violent crime involving juvenile victims and offenders went up between 2002 and 2003. In 2003, 18 per 1,000 juveniles were victims of serious violent crimes—that is, homicide, rape, aggravated assault, and robbery—and 15 per 1,000 juveniles were reported by victims to have committed such crimes. These rates increased from those in 2002, when 10 per 1,000 youth were victims of serious crimes and 11 per 1,000 juveniles were identified as offenders. However, rates still generally declined from their peaks in 1993 of 44 victims per 1,000 youth and 52 offending youth per 1,000 juveniles.

Education Indicators

■ The average mathematics scale score of 4th- and 8th-graders was higher in 2003 than in all previous National Assessment of Educational Progress assessments since the series began in 1990. In reading, the 2003 4th-grade scale score was not measurably different from the scale score in 1992, the first year of the reading assessment series. The

- 8th-grade reading scale score declined 1 point from 2002 to 2003, but the 2003 scale score was higher than in 1992.
- The proportion of Black-alone, non-Hispanic youth who were neither in school nor working was 10 percent in 2004, down from 12 percent in 2003. More Black-alone, non-Hispanic youth moved from the category "not enrolled in school and not working" into the category of "enrolled in school and not working" in 2004 (not shown in table ED6.A).¹
- White-alone, non-Hispanic persons ages 25–29 in 2003 were more likely to have earned at least a bachelor's degree (32 percent) than their Blackalone, non-Hispanic (18 percent) and Hispanic (12 percent) peers. The percentage of Black-alone, non-Hispanic persons with at least a bachelor's degree increased from 12 percent in 1980, and the percentage of Hispanic persons with at least a bachelor's degree increased from 8 percent in 1980.1

Special Features

- In 2003, about 13 percent of children had been diagnosed with asthma at some time in their lives, about 9 percent of children were reported to currently have asthma, and about 6 percent of children had one or more asthma attacks in the previous year. From 1997–2003, the trends for these three asthma indicators have remained fairly stable; however, between 1980 and 1995, childhood asthma, as measured using different indicators, more than doubled.
- In 1999–2002, less than 2 percent of children ages 1–5 had blood lead levels greater than 10 micrograms per deciliter (μg/dL). The median concentration of lead in the blood of children ages 1–5 dropped from 14 μg/dL in 1976–1980 to about 2 μg/dL in 2001–2002, a decline of 89 percent.
- In 2003, 5 percent of children ages 4–17 were reported by a parent to have definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people. Sixty-five percent of the parents of these children reported contacting a mental health professional or general doctor and/or that the child received special education for these difficulties.

Special Section

■ In 2002, 7 percent of births to married mothers were low birthweight, compared with 10 percent of births to unmarried mothers. In that same year, the infant mortality rate for infants born to married mothers was 5 per 1,000 live births, compared with 10 per 1,000 live births for infants born to unmarried mothers.

- Pooled data from 1996 and 2001 show that 97 percent of adolescents ages 15–17 who lived with their married, biological parents were enrolled in school, compared with 94 percent of adolescents who lived with a single parent, and 80 percent of adolescents who lived with neither parent.
- According to pooled data from 1996 and 2001, 86 percent of adolescents ages 15–17 who lived with their married, biological parents, were reported to be in excellent or very good health, compared with 80 percent of adolescents who lived with a married stepparent, 76 percent of those who lived with a single parent, and 67 percent of those who lived with neither parent.
- Pooled data from 1996 and 2001 show that 2 percent of all females ages 15–17 who lived with their married biological parents became unmarried mothers by age 17–19, compared with 9 percent of those who lived with a single parent, and 27 percent of those who did not live with either parent.

Endnotes begin on page 73.

Summary List of Selected Measures and Indicators of Child Well-Being

Indicator Name	Description of Measure or Indicator	Previous Year of Data Value (Year)	New Data Value (Year)	Change Between Years
Population and Family Charac	cteristics			
Child population	Number (in millions) of children ages 0–17 in the United States	72.8 (2002)	73.0 (2003)	•
Children as a proportion of the population	Children ages 0–17 as a percentage of the U.S. population	25 (2002)	25 (2003)	NS
Racial and ethnic composition	Percentage of children ages 0–17 by race and ethnic group White-alone ¹ Black-alone ¹ Asian-alone ¹ All other races	77 (2002) 16 (2002) 4 (2002) 4 (2002)	77 (2003) 16 (2003) 4 (2003) 4 (2003)	NS NS NS
	Hispanic (of any race) White-alone, non-Hispanic ¹	18 (2002) 60 (2002)	19 (2003) 60 (2003)	▲ NS
Children of at least one foreign-born parent	Percentage of children ages 0–17 living with at least one foreign-born parent	19.6 (2002)	20.3 (2004)	•
Difficulty speaking English	Percentage of children ages 5–17 who speak a language other than English at home	19 (2002)	19 (2003)	NS
	Percentage of children ages 5–17 who speak a language other than English at home and who have difficulty speaking English	5 (2002)	5 (2003)	NS
Family structure and children's living arrangements	Percentage of children ages 0–17 with two married parents	68 (2003)	68 (2004)	NS
Births to unmarried women	Percentage of all births that are to unmarried women	34 (2002)	35 (2003)	•
Child care	Percentage of children, ages 0–6, not yet in kindergarten, who received some form of nonparental child care on a regular basis	60 (1995)	61 (2001)	NS
	Percentage of children ages 0–4, with employed mothers, whose primary child care arrangement is with a relative	48 (1999)	46 (2002)	NS
Children's environments	Percentage of children ages 0–17 living in counties in which one or more of the Primary National Ambient Air Quality Standards was exceeded	64 (2002)	62 (2003)	NS
Economic Security				
Child poverty and family income	Percentage of all children ages 0–17 living in poverty	17 (2002)	18 (2003)	A
Secure parental employment	Percentage of children ages 0–17 living with at least one parent employed year round, full time	78 (2002)	77 (2003)	NS
Housing problems	Percentage of households with children ages 0–17 that report housing problems	36 (2001)	37 (2003)	NS
Food security and diet quality	Percentage of children ages 0–17 in households classified by USDA as "food insecure with child hunger"	0.8 (2002)	0.6 (2003)	•
	Percentage of children ages 2–6 with a good diet	20 (1994–1996)	20 (1999–2000)	NS

Legend: NS = No statistically significant change \blacktriangle = Statistically significant increase \blacktriangledown = Statistically significant decrease

Summary List of Selected Measures and Indicators of Child Well-Being

Indicator Name	Description of Measure or Indicator	Previous Year of Data Value (Year)	New Data Value (Year)	Change Between Years
Economic Security (cont.)				
Access to health care	Percentage of children ages 0–17 covered by health insurance	88 (2002)	89 (2003)	NS
	Percentage of children ages 0–17 with no usual source of health care	6 (2002)	5 (2003)	NS
Health				
General health status	Percentage of children ages 0–17 in very good or excellent health	83 (2002)	83 (2003)	NS
Activity limitation	Percentage of children ages 5–17 with activity limitation resulting from one or more chronic health conditions	9 (2002)	8 (2003)	NS
Overweight	Percentage of children ages 6–18 who are overweight	11 (1988–1994)	16 (1999–2002)	•
Childhood immunization	Percentage of children ages 19–35 months with the 4:3:1:3 combined series of vaccinations	78 (2002)	81 (2003)	•
Low birthweight	Percentage of infants weighing less than 5 lb. 8 oz. at birth	7.8 (2002)	7.9 (2003)	•
Infant mortality	Deaths before the first birthday per 1,000 live births	6.8 (2001)	7.0 (2002)	•
Child mortality	Deaths per 100,000 children ages 1-4	33 (2001)	31 (2002)	•
	Deaths per 100,000 children ages 5–14	17 (2001)	17 (2002)	NS
Adolescent mortality	Deaths per 100,000 adolescents ages 15–19	67 (2001)	68 (2002)	NS
Adolescent births	Births per 1,000 females ages 15–17	23 (2002)	22 (2003)	•
Behavior and Social Environm	nent			
Regular cigarette smoking	Percentage of students who reported smoking daily in the previous 30 days 8th-graders 10th-graders 12th-graders	5 (2003) 9 (2003) 16 (2003)	4 (2004) 8 (2004) 16 (2004)	NS NS NS
Alcohol use	Percentage of students who reported having five or more alcoholic beverages in a row in the past 2 weeks 8th-graders 10th-graders 12th-graders	12 (2003) 22 (2003) 28 (2003)	11 (2004) 22 (2004) 29 (2004)	NS NS NS
Illicit drug use	Percentage of students who have used illicit drugs in the previous 30 days 8th-graders 10th-graders 12th-graders	10 (2003) 20 (2003) 24 (2003)	8 (2004) 18 (2004) 23 (2004)	V NS NS
Youth victims and perpetrators of serious violent crimes	Youth victims of serious violent crimes per 1,000 youth ages 12–17	10 (2002)	18 (2003)	•
	Youth offenders of serious violent crimes per 1,000 youth ages 12–17	11 (2002)	15 (2003)	A

Legend: NS = No statistically significant change ▲ = Statistically significant increase ▼ = Statistically significant decrease

Summary List of Selected Measures and Indicators of Child Well-Being

Indicator Name	Description of Measure or Indicator	Previous Year of Data Value (Year)	New Data Value (Year)	Change Between Years
Education				
Family reading to young children	Percentage of children ages 3–5 who were read to every day in the last week by a family member	54 (1999)	58 (2001)	•
Early childhood care and education	Percentage of children ages 3–5 who are enrolled in center-based early childhood care and education programs	60 (1999)	56 (2001)	•
Mathematics and reading achievement	Average mathematics scale score of 4th-graders 8th-graders 12th-graders	226 (2000) 273 (2000) 302 (1996)	235 (2003) 278 (2003) 300 (2000)	A NS
	Average reading scale score of 4th-graders 8th-graders 12th-graders	219 (2002) 264 (2002) 290 (1998)	218 (2003) 263 (2003) 287 (2002)	NS ▼
High school academic coursetaking	Percentage of high school graduates who completed high-level coursework in Mathematics Science English Foreign language	41 (1998) 62 (1998) 29 (1998) 30 (1998)	45 (2000) 63 (2000) 34 (2000) 30 (2000)	NS NS A NS
High school completion	Percentage of young adults ages 18–24 who have completed high school	87 (2002)	87 (2003)	NS
Youth neither enrolled in school nor working	Percentage of youth ages 16–19 who are neither enrolled in school nor working	8 (2003)	8 (2004)	NS
Higher education	Percentage of adults ages 25–29 who have completed a bachelor's or more advanced degree	28 (2003)	28 (2004)	NS

Endnotes begin on page 73.

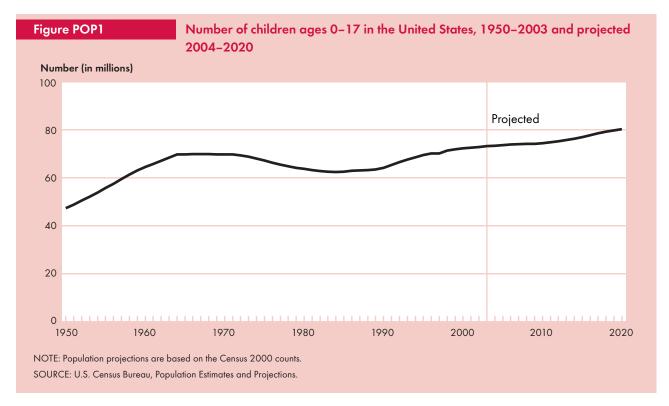
PART I

Population and Family Characteristics

art I: Population and Family Characteristics presents data that illustrate the changes in the population and family contexts in which America's children are being raised. Nine key measures present data on trends in the size and composition of the child population, the composition of their families, and the environment in which they live. The background measures provide an important context for understanding the key indicators of well-being presented in Part II.

Child Population

he number of children determines the demand for schools, health care, and other services and facilities that serve children and their families.

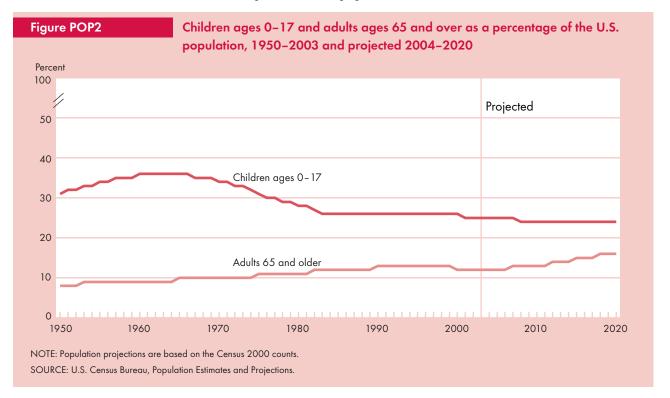


- In 2003, there were 73 million children in the United States, 700,000 more than in 2000. This number is projected to increase to 80 million in 2020.
- The number of children ages 0–17 has grown during the last half-century, increasing from 47 million in 1950 to 73 million in 2003.
- During the "baby boom," the number of children increased from 47 million in 1950 to 70 million in 1964.
- During the 1970s and early 1980s, the number of children declined from 70 million in 1970 to 63 million in 1984.
- Beginning in the mid-1980s, the rate of growth in the number of children increased, although not as rapidly as during the baby boom. The number of children increased from 63 million in 1985 to 73 million in 2003.
- In 2003, there were approximately equal numbers of children—between 23 and 25 million—in each of these age groups: 0–5, 6–11, and 12–17 years of age.

Bullets contain references to data that can be found in Table POP1 on page 89.

Children as a Proportion of the Population

hough children represent a smaller percentage of the population today than in 1960, they are nevertheless a stable and substantial portion of the population.

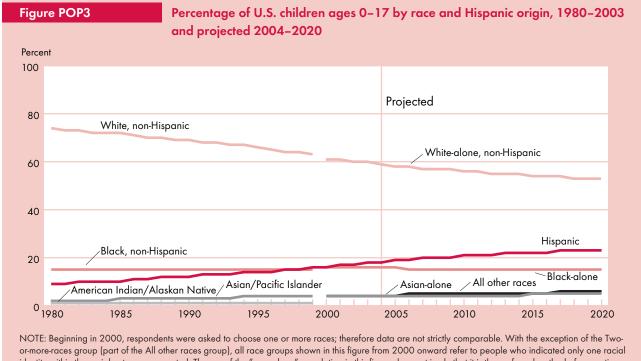


- Since the mid-1960s, children have been decreasing as a proportion of the total U.S. population. In 2003, children made up 25 percent of the population, down from a peak of 36 percent at the end of the "baby boom" (1964).
- Children are projected to remain a fairly stable percentage of the total population. They are projected to compose 24 percent of the population in 2020.
- In contrast, senior citizens (adults ages 65 and older) have increased as a percentage of the total population since 1950, from 8 to 12 percent in 2003. By 2020, they are projected to make up 16 percent of the population.
- Together, children and senior citizens make up the "dependent population" (people who, because of their age, are less likely to be employed than others). In 1950, children made up 79 percent of the dependent population; by 2003, they made up 67 percent. This percentage is expected to decrease to 60 percent in 2020.

Bullets contain references to data that can be found in Table POP2 on page 90.

Racial and Ethnic Composition

acial and ethnic diversity has grown dramatically in the United States in the last three decades. This increased diversity appeared first among children and later in the older population. This diversity is projected to increase even more in the decades to come.



identity within the racial category presented. The use of the "race-alone" population in this figure does not imply that it is the preferred method of presenting or analyzing data. Persons of Hispanic origin may be of any race.

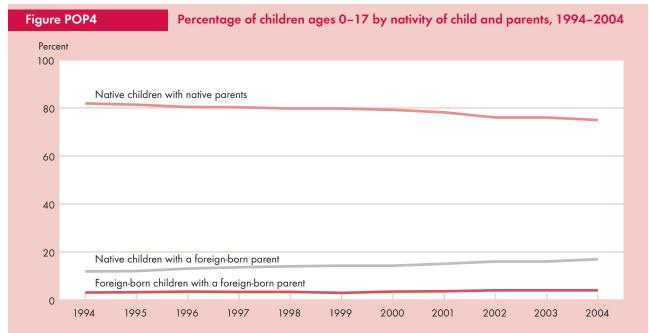
SOURCE: U.S. Census Bureau, Population Estimates and Projections.

- In 2003, 60 percent of U.S. children were Whitealone, non-Hispanic, 19 percent were Hispanic, 16 percent were Black-alone, 4 percent were Asianalone, and 4 percent were all other races.1
- The percentage of children who are Hispanic has increased faster than that of any other racial or ethnic group, growing from 9 percent of the child population in 1980 to 19 percent in 2003. By 2020, it is projected that nearly 1 in 5 children in the United States will be of Hispanic origin.

Bullets contain references to data that can be found in Table POP3 on page 91. Endnotes begin on page 73.

Children of at Least One Foreign-Born Parent

he foreign-born population of the United States has grown since 1970.² This increase in the past generation has largely been from Latin America and Asia, and represents an increase in the diversity of language and cultural backgrounds of children growing up in the United States.³ As a result of language and cultural barriers confronting children and their parents, children with foreign-born parents may need additional resources both at school and at home.⁴



NOTE: Includes all children ages 0-17 except children in group quarters. Children living in households with no parents present are not shown in this figure, but are included in the bases for the percentages. Native parents means that all of the parents that the child lives with are native born, while foreign-born means that one or both of the child's parents are foreign-born. Anyone with U.S. citizenship at birth is considered native, which includes people born in the United States or in U.S. outlying areas, and people born abroad with at least one American parent.

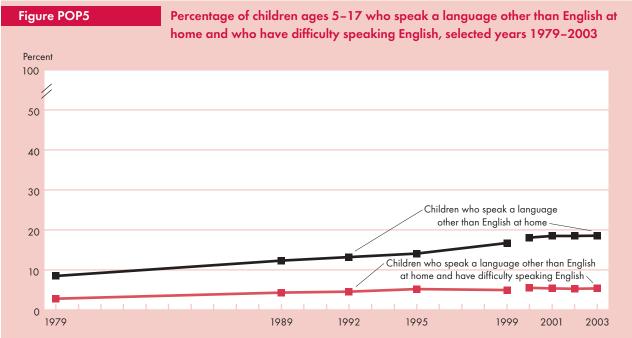
SOURCE: U.S. Census Bureau. Current Population Survey, Annual Social and Economic Supplements.

- In 2004, 17 percent of children were native children with at least one foreign-born parent, and 4 percent were foreign-born children with at least one foreign-born parent. Overall, the percentage of all children living in the U.S. with at least one parent who was foreign born rose from 15 percent in 1994 to 20 percent in 2004.
- In 2004, 42 percent of foreign-born children with at least one foreign-born parent had a parent with less than a high school degree, compared with 34 percent of native children with at least one foreign-born parent and 10 percent of native children with native parents.
- In 2004, foreign-born children with foreign-born parents were more likely than native children with foreign-born parents to live below the poverty level, 30 and 21 percent, respectively.
- Regardless of their own nativity status, children with at least one foreign-born parent more often lived in a household with two parents present. In 2004, 81 percent of children with at least one foreign-born parent lived with two parents, compared with 68 percent of children with native parents.

Bullets contain references to data that can be found in Table POP4 on pages 92–94. Endnotes begin on page 73.

Difficulty Speaking English

hildren who speak languages other than English at home and who also have difficulty speaking English may face greater challenges progressing in school and in the labor market. Once it is determined that a student speaks another language, school officials must, by law, evaluate the child's English ability to determine whether the student needs services (such as special instruction to improve his or her English) and provide these services if needed.



NOTE: Numbers from the 1995 and 1999 Current Population Survey (CPS) may reflect changes in the survey because of newly instituted computer-assisted interviewing techniques and/or because of the change in the population controls to the 1990 Census-based estimates, with adjustments. A break is shown in the lines between 1999 and 2000 because data from 1979 to 1999 comes from the CPS, while beginning in 2000 the data comes from the American Community Survey (ACS). The questions were the same on the CPS and ACS questionnaires.

SOURCE: U.S. Census Bureau, October (1992, 1995, and 1999) and November (1979 and 1989) Current Population Survey, and 2000–2003 American Community Survey.

- In 2003, 19 percent of school-age children spoke a language other than English at home and 5 percent of school-age children had difficulty speaking English.
- In 2003, the percentage of school-age children who spoke a language other than English at home varied by region of the country, from a low of 10 percent in the Midwest to a high of 31 percent in the West.
- In 2003, the percentage of school-age children who had difficulty with English also varied by region, from a low of 3 percent in the Midwest to a high of 9 percent in the West.
- In 2003, 64 percent of school-age Asian-alone children and 68 percent of school-age Hispanic children spoke a language other than English at home, compared with 5 percent of both White-alone, non-Hispanic children and Black-alone, non-Hispanic children of school age.¹

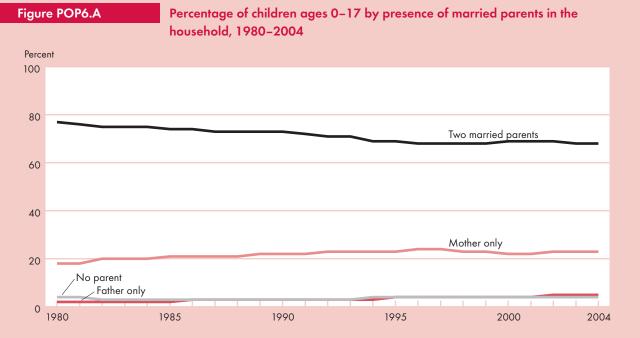
- In 2003, 18 percent of school-age Asian-alone children and 21 percent of school-age Hispanic children had difficulty with English, compared with about 1 percent of both White-alone, non-Hispanic children and Black-alone, non-Hispanic children of school age.¹
- About 5 percent of school-age children spoke a language other than English at home and lived in linguistically isolated households in 2003.6

Bullets contain references to data that can be found in Table POP5 on pages 95–98. Endnotes begin on page 73.

Family Structure and Children's Living Arrangements

 \mathbf{T}

he number of parents a child lives with is associated with the economic, parental, and community resources available to children and their well-being.



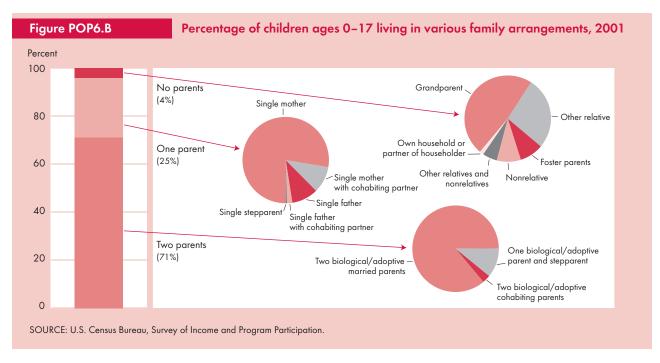
NOTE: The category "two married parents" includes children who live with a biological, step, or adoptive parent who is married with his or her spouse present. If a second parent is present and not married to the first parent, then the child is identified as living with a single parent. The majority of children who live with neither parent are living with grandparents or other relatives. Some live with foster parents or other nonrelatives.

SOURCE: U.S. Census Bureau. Current Population Survey, Annual Social and Economic Supplements.

- In 2004, 68 percent of children ages 0–17 lived with two married parents, down from 77 percent in 1980. After decreasing from 1980 to 1994, the percentage has remained stable at about 68–69 percent from 1994 to 2004.
- In 2004, nearly one quarter (23 percent) of children lived with only their mothers, 5 percent lived with only their fathers, and 4 percent lived with neither of their parents.^{7,8}
- In 2004, 77 percent of White-alone, non-Hispanic children lived with two married parents, compared with 65 percent of Hispanic children and 35 percent of Black-alone children.¹
- The proportion of Hispanic children living with two married parents decreased from 75 percent in 1980 to 65 percent in 2004.
- The proportion of all children living with a single father increased from 2 percent in 1980 to 5 percent in 2004.

For a measure of detailed living arrangements of children, see POP6.B.

while most children spend the majority of their childhood living with two parents, some children have other living arrangements. Information about the presence of parents and other adults in the family, such as the parent's unmarried partner, grandparents, and other relatives, is important for understanding children's social, economic, and developmental well-being.



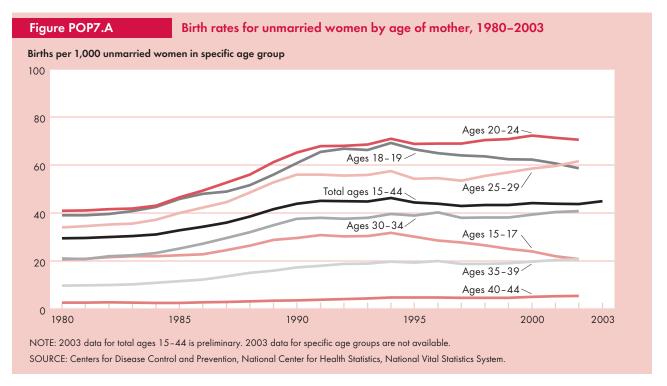
- POP6.B provides more detailed data about children's living arrangements and uses a different data source than POP6.A, so the percentages are different. Data from the Survey of Income and Program Participation allow identification of two coresident parents for each child, as well as the type of relationship between parent and child—biological, step, or adoptive. In 2001, there were about 73 million children ages 0–17. Seventy-one percent of them lived with two parents, 25 percent lived with one parent, and about 4 percent lived in households without parents.
- Among children living with two parents, 90 percent lived with both biological or adoptive parents and 10 percent lived with a biological or adoptive parent and a stepparent. About 83 percent of children living with at least one stepparent lived with their biological mother and stepfather.
- About 4 percent of children who lived with both biological or adoptive parents had parents who were not married.

- The majority of children living with one parent lived with their single mother. Some single parents had cohabiting partners. Eighteen percent of children living with single biological or adoptive fathers and 11 percent of children living with single biological or adoptive mothers also lived with their parent's cohabiting partner. Overall, 4.3 million children (6 percent) lived with a parent or parents who were cohabiting.
- Among the 2.9 million children (4 percent) not living with either parent in 2001, about half (48 percent or 1.4 million) lived with grandparents, 33 percent lived with other relatives, and 17 percent lived with nonrelatives. Of children in nonrelatives' homes, about half (51 percent or 260,000) lived with foster parents.
- Older children were less likely to live with two parents—65 percent of children ages 15–17, compared with 70 percent of children ages 6–14 and 75 percent of those ages 0–5. Among children living with two parents, older children were more likely than younger children to live with a stepparent and less likely to live with cohabiting parents.

Bullets contain references to data that can be found in Tables POP6.A and POP6.B on pages 99–103. Endnotes begin on page 73.

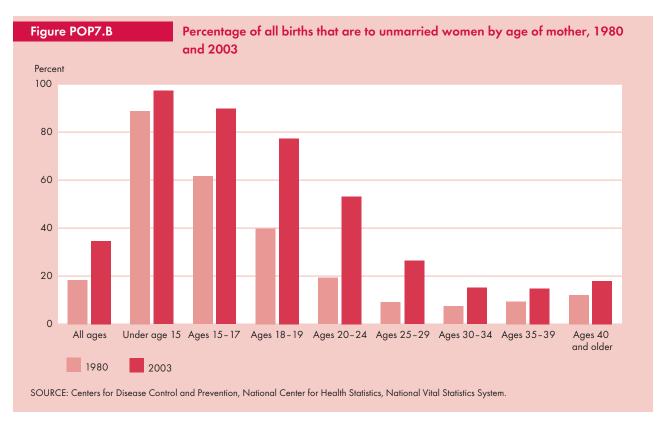
Births to Unmarried Women

Increases in births to unmarried women are among the many changes in American society that have affected family structure and the economic security of children. Children of unmarried mothers are at higher risk of having adverse birth outcomes, such as low birthweight and infant mortality, and are more likely to live in poverty than children of married mothers. 10-14



- There were 45 births for every 1,000 unmarried women ages 15–44 in 2003.¹⁵
- Between 1980 and 1994, the birth rate for unmarried women ages 15–44 increased from 29 to 46 per 1,000. Between 1995 and 2003, the rate has fluctuated little, ranging from 43 to 45 per 1,000.^{13,15,16}
- Between 1994 and 2002, birth rates for unmarried women by age declined for women under age 20, and increased somewhat for women in age groups 20–24 through 40–44 years. ^{13,15,16} Specifically, the rates for younger teens ages 15–17 fell more than one-third from 32 to 21 per 1,000. Rates in 2002 remained highest for women ages 20–24 at 71 per 1,000, although the rate for these women has declined slightly since 2000. ^{11,16}
- There was a long-term rise between 1960 and 1994 in the nonmarital birth rate, which is linked to a number of factors. ¹³ The proportion of women of childbearing age who were unmarried increased (from 29 percent in 1960 to 46 percent in 1994). Concurrently, there was an increase in nonmarital
- cohabitation.¹⁷ The likelihood that an unmarried woman would marry before the child was born declined steeply from the early 1960s, to the early 1980s, and continued to fall, although more modestly, through the early 1990s.¹⁸ At the same time, childbearing within marriage declined: births to married women declined from 4 million in 1960 to 2.7 million in 1994, and the birth rate for married women fell from 157 per 1,000 in 1960 to 83 per 1,000 in 1994.^{11–13,16}
- The birth rate for unmarried women has changed comparatively little since 1994. The proportion of women in the childbearing ages who were unmarried continued to rise, reaching 51 percent in 2003. Nonmarital cohabitation, however, remained relatively unchanged; about 27 percent of unmarried women ages 25–29 were in cohabiting relationships in 2002.¹¹ Measures of childbearing by marital status stabilized in the mid-1990s, and then increased slowly, as the nonmarital birth rate steadied during this period.¹¹¹.¹³

hildren are at greater risk for adverse consequences when born to a single mother because the social, emotional, and financial resources available to the family may be more limited. The proportion of births to unmarried women is useful for understanding the extent to which children born in a given year may be affected by any disadvantage—social, financial, or health—associated with being born outside of marriage. The percentage of births to unmarried women is a function of several factors, including birth rates for married and unmarried women and the number of unmarried women. Significant changes occurred in all these measures since 1980. 12,13,21



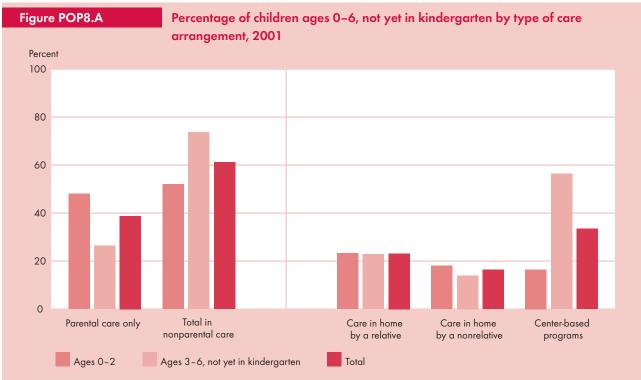
- In 2003, 35 percent of all births were to unmarried women.
- The percentage of all births to unmarried women rose sharply from 18 percent in 1980 to 33 percent in 1994.¹³ From 1994 to 2003, it increased slowly to 35 percent.^{11,13,15}
- Between 1980 and 2003, the proportion of births to unmarried women rose sharply for women in all age groups. Among teenagers, the proportion was high throughout the period and continued to rise, from 62 to 90 percent for ages 15–17 and from 40 to 77 percent for ages 18–19. The proportion more than doubled for births to women in their twenties, rising from 19 to 53 percent for ages 20–24 and from 9 to 26 percent for ages 25–29. The proportion of births to unmarried women in their thirties increased from 8 to 15 percent.^{11,13}
- One-third of all births, including 4 in 10 first births, were to unmarried women in 2002. Nearly two-thirds of women under age 25 having their first child were not married.²²

- The increases in the proportion of births to unmarried women, especially during the 1980s, were linked to sharp increases in the birth rates for unmarried women in all age groups during this period, concurrent with declines in birth rates for married women. In addition, the number of unmarried women increased by about one-fourth, as more and more women from the baby boom generation postponed marriage. 13,21
- During the late 1990s, the pace of increase in the proportion slowed. The comparative stability is linked to a renewed rise in birth rates for married women. 11,13

Bullets contain references to data that can be found in Tables POP7.A and POP7.B on page 104. Endnotes begin on page

Child Care

ome children spend time with a child care provider other than their parents. This measure presents two aspects of early childhood child care usage: overall use of different provider types regardless of parents' work status (POP8.A) and a historical trend of the primary child care provider used by employed mothers for their young children (POP8.B).²³

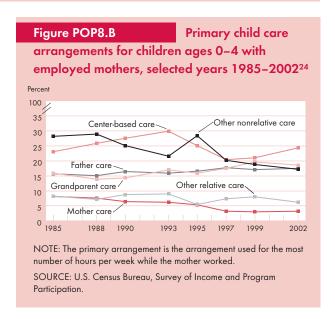


NOTE: Some children participate in more than one type of arrangement, so the sum of all arrangement types exceeds the total percentage in nonparental care. Center-based programs include day care centers, prekindergartens, nursery schools, Head Start programs, and other early childhood education programs. Relative and nonrelative care can take place in either the child's own home or another home.

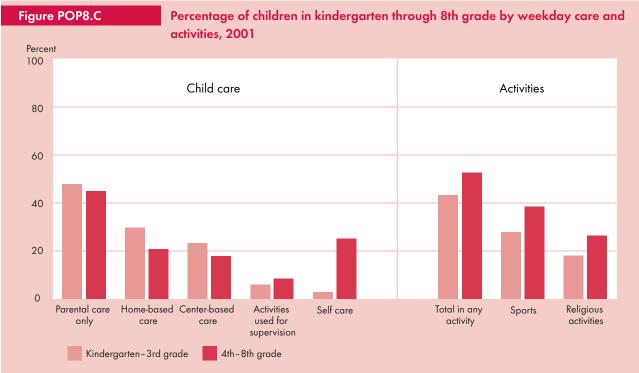
SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Surveys Program (NHES).

Figure POP8.A

- In 2001, 61 percent of children ages 0–6 (not yet in kindergarten) received some form of child care on a regular basis from persons other than their parents. This translates to approximately 12 million children and is about the same proportion of children in child care as in 1995.
- Patterns of child care vary by the poverty status of the family of the child. In 2001, children in families with incomes at least twice the poverty level were more likely than their peers to be in nonparental care (67 percent in nonparental care versus 55 percent of those in families with income below the poverty level and 54 percent of children in families with income between the poverty level and 200 percent of the poverty level). In addition, children in families with incomes at least twice the poverty level were more likely than their peers to be in home care by a nonrelative or in center-based programs, including nursery schools and other early childhood education programs.



chool-age children may spend their weekday, nonschool time in child care arrangements but also may engage in a variety of enrichment activities such as sports, arts, clubs, academic activities, community service, and religious activities. Some children also spend time caring for themselves without adult supervision. This measure presents the most recent data available on how grade-school-age children spend their out-of-school time.



NOTE: Some children participate in more than one type of care arrangement or activity. For self care, parents reported that their child is responsible for himself/herself before or after school on a regular basis. Parents reported on organized before or after-school activities that are undertaken by their child on a regular basis. For a full listing of activities, see Table POP8.C. Estimates differ from those reported previously because an additional category, "activities used for supervision," has been included.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Surveys Program (NHES).

Figure POP8.B

- In 2002, 46 percent of children ages 0–4 with employed mothers were primarily cared for by a relative: their father, grandparent, sibling, other relative, or mother while she worked. This is not statistically different from the percentages in 1997 and 1999. Twenty-four percent spent the most amount of time in a center-based arrangement (day care, nursery school, preschool, or Head Start). Seventeen percent were primarily cared for by a nonrelative in a home-based environment, such as a family day care provider, nanny, babysitter, or au pair.
- Among children in families in poverty, 16 percent were in center-based care as their primary arrangement, while 10 percent were with other relatives. Comparatively, a larger percentage of children in families at or above the poverty line were in center-based care (25 percent), and a smaller percentage were cared for by other relatives (6 percent).

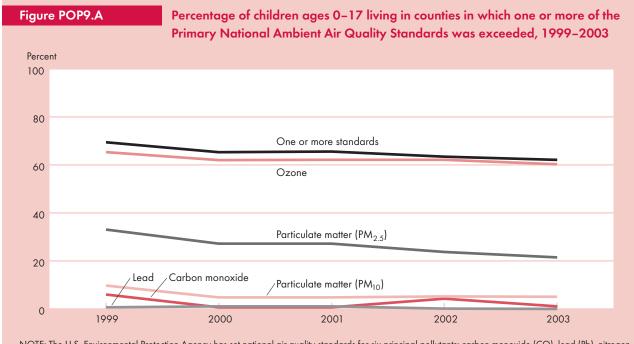
Figure POP8.C

- About half of children in kindergarten through 3rd grade (52 percent) and those in grades 4 through 8 (55 percent) received some nonparental child care in 2001.
- Parents reported that older children were more likely to care for themselves before or after school than younger children. Three percent of children in kindergarten through 3rd grade and 25 percent of children in 4th through 8th grade cared for themselves regularly either before or after school.
- Children in the higher grades were more likely to engage in some kind of organized before- or after-school activity than were children in the lower grades. Children from families in poverty were less likely than those in families at or above poverty to participate in activities. Children in kindergarten through 8th grade were more likely to participate in sports than in any other activity.

Bullets contain references to data that can be found in Tables POP8.A–POP8.C on pages 105–111. Endnotes begin on page 73.

Children's Environments

Children need a clean, safe place in which they can grow and play. Children may be more vulnerable to environmental contaminants because of their increased potential for exposure to pollutants, since they eat, drink, and breathe more per body weight than adults. In addition, environmental contaminants in air, food, drinking water, and other sources are associated with a number of different ailments, and these contaminants may disproportionately affect children because they are still developing. One important measure of children's environmental health is the percentage of children living in areas in which the Primary National Ambient Air Quality Standards are exceeded. These standards, which were established by the Clean Air Act, are designed to establish limits to protect public health, including the health of susceptible populations such as children and individuals with asthma. Ozone, particulate matter, sulfur dioxide, and nitrogen dioxide are air pollutants associated with increased asthma episodes and other respiratory illnesses.^{25–28} Lead can affect development of the central nervous system in young children,²⁹ and exposure to carbon monoxide can reduce the capacity of the blood to carry oxygen.³⁰ Objective 8–01 of the Healthy People 2010 initiative aims to reduce the proportion of people exposed to air that exceeds the levels of health-based standards for harmful air pollutants.

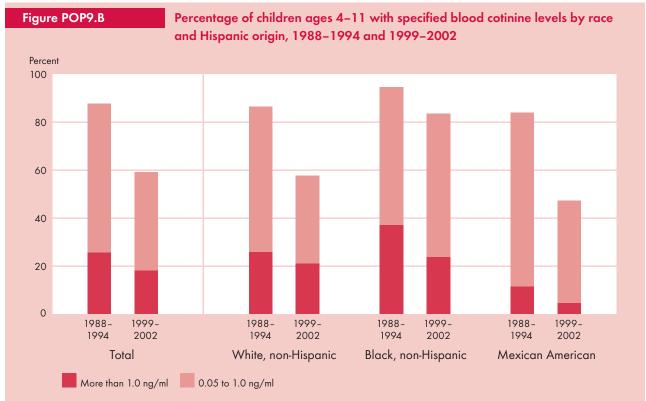


NOTE: The U.S. Environmental Protection Agency has set national air quality standards for six principal pollutants: carbon monoxide (CO), lead (Pb), nitrogen dioxide (NO₂), ozone (O₃), particulate matter (PM₁₀ and PM_{2.5}), and sulfur dioxide (SO₂).³¹ Nitrogen dioxide and sulfur dioxide are not included in the graph because essentially all areas meet the Primary National Ambient Air Quality Standards for these pollutants.³²

SOURCE: U.S. Environmental Protection Agency, Office of Air and Radiation, Air Quality System.

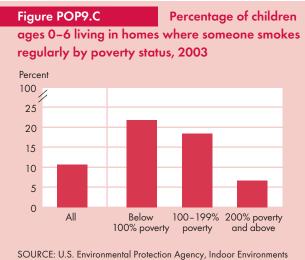
- In 2003, 62 percent of children lived in counties in which one or more of the Primary National Ambient Air Quality Standards were exceeded, an improvement from 69 percent in 1999.
- The Primary National Ambient Air Quality standard for ozone is exceeded most often. Ozone, as well as particulate matter, can cause respiratory problems and aggravate respiratory diseases, such as asthma, in children. ^{25,27,28} These problems can lead to increased emergency room visits and hospitalizations. ^{33–36}
- In 2003, approximately 21 percent of children lived in counties that exceeded the annual PM_{2.5} standard, an improvement from 33 percent in 1999. The term "particulate matter" (PM) includes both solid particles and liquid droplets found in air.²⁸ Airborne particles measuring less than 10 micrometers in diameter (PM₁₀) pose a health concern because they can be inhaled into and accumulate in the respiratory system. Particles less than 2.5 micrometers in diameter (PM_{2.5}) are referred to as "fine" particles and are believed to pose the largest health risks because they can lodge deeply in the lungs.

hildren who are exposed to environmental tobacco smoke, also known as secondhand smoke, have an increased probability of experiencing a number of adverse health effects, including infections of the lower respiratory tract, bronchitis, pneumonia, fluid in the middle ear, and sudden infant death syndrome (SIDS). ^{37–39} Secondhand smoke can also play a role in the development and exacerbation of asthma. ^{40–45} Cotinine, a breakdown product of nicotine, is a marker for recent (previous 1–2 days) exposure to secondhand smoke. Objective 27–9 of the Healthy People 2010 initiative aims to reduce the proportion of children who are regularly exposed to tobacco smoke at home.



NOTE: Cotinine is detectable at or above 0.05 nanograms per milliliter (ng/mL). Cotinine levels are reported for nonsmoking children only. The average (geometric mean) blood cotinine level in children living in homes where someone smokes is 1.0 ng/mL.⁴⁶

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey.



SOURCE: U.S. Environmental Protection Agency, Indoor Environments Division, National Survey on Environmental Management of Asthma and Children's Exposure to Environmental Tobacco Smoke.

- The percentage of children ages 4–11 with detectable blood cotinine levels decreased between 1988–1994 (88 percent) and 1999–2002 (59 percent). In 1999–2002, 18 percent had blood cotinine levels more than 1.0 ng/mL, down from 26 percent in 1988–1994.
- In 1999–2002, 84 percent of Black, non-Hispanic children ages 4–11 had cotinine in their blood, compared with 58 percent of White, non-Hispanic and 47 percent of Mexican American children.
- In 2003, the percentage of children ages 0–6 living in homes where someone smoked regularly was 11 percent.⁴⁷ Children living below the poverty level were more likely than their peers to be living in homes where someone smoked.

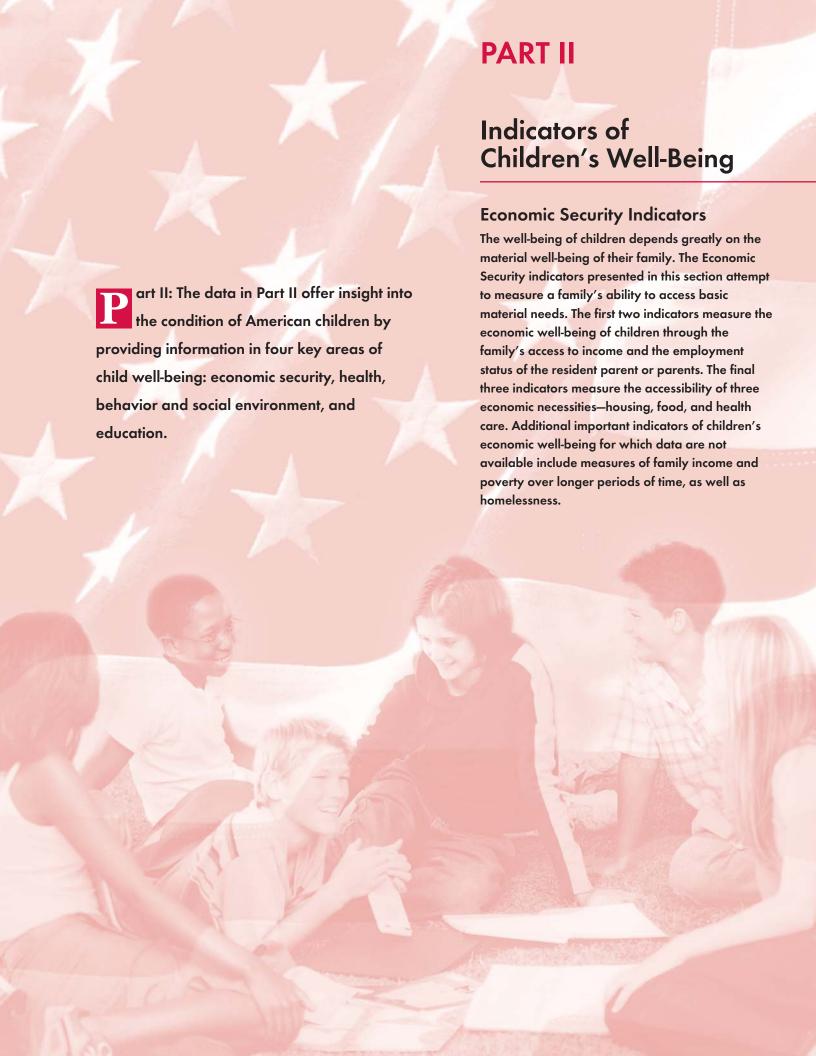
Bullets contain references to data that can be found in Tables POP9.A–POP9.C on pages 112–114. Endnotes begin on page 73.

Data Needed

Population and Family Characteristics

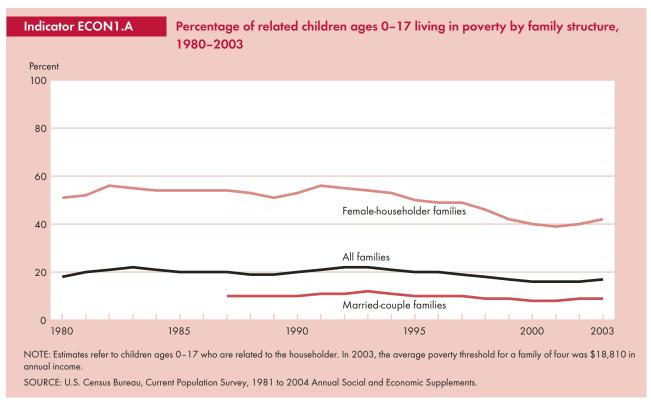
Current data collection systems at the national level do not provide extensive detailed information on children's families, their caregivers, or their environment. Certain topical databases provide some of this information, but data need to be collected across domains of child well-being regularly enough to discern trends in where, how, and with whom children spend their time. More data are also needed on:

- Family interactions. Increasing the detail of information collected about family structure and improving the measurement of cohabitation and family dynamics were among the key suggestions for improvement emerging from two recent Counting Couples Workshops, sponsored by the Forum. More information on the workshops is available online at http://www.childstats.gov.
- Time use. Currently, some Federal surveys collect information on the amount of time children spend on certain activities, such as watching television, and on participation rates in specific activities or care arrangements, but no regular Federal data source examines time spent on the whole spectrum of children's activities. The Bureau of Labor Statistics has initiated a continuous time use survey that will cover time invested in the care of children, as well as time spent in other labor market and non-labor market activities. The survey will also include responses from youth ages 15 and over. Inclusion of time use questions in other surveys is of continued interest to Forum agencies.
- Children's environments. Further data are needed to monitor the environment of children and their potential exposure to environmental contaminants. In particular, data are needed to more thoroughly describe children's potential exposure to common, hazardous, and indoor air pollutants; drinking and surface water contaminants; and food and soil contaminants.



Child Poverty and Family Income

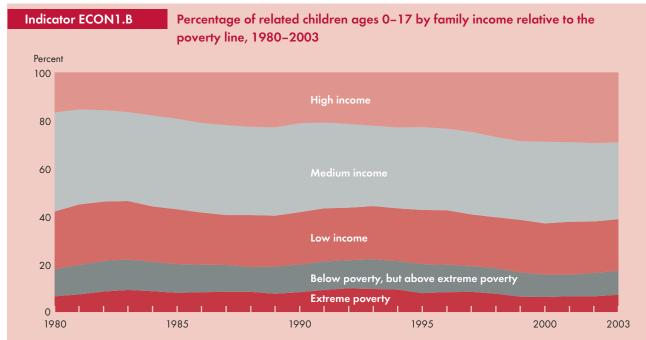
hildren in low-income families fare less well than children in more affluent families on many of the indicators presented in this report. Compared with children living in families above the poverty line, children living below the poverty line are more likely to have difficulty in school,⁴⁸ to become teen parents,⁴⁹ and, as adults, to earn less and be unemployed more frequently.⁴⁸ This indicator is the official poverty measure for the United States, which is based on OMB Statistical Policy Directive 14. In response to the National Academy of Science's recommendations, the U.S. Census Bureau is researching alternative poverty measures.⁵⁰



- The percentage of children living in families with incomes below their poverty threshold was 17 percent in 2003, up from 16 percent in 2002. The official poverty rate for children has fluctuated since the early 1980s: it reached a high of 22 percent in 1993 and decreased to 16 percent in 2000.⁵¹
- The poverty rate for children living in female-householder families (no spouse present) also fluctuated between 1980 and 1993, then declined more between 1993 and 2000 than the rate for all children in families. In 1993, 54 percent of children living in female-householder families were living in poverty; by 2003, this proportion had decreased to 42 percent. The percentage of Black-alone children living in female-householder families in poverty wavered around 66 percent until 1993, and has since declined to 50 percent in 2003.¹
- Children ages 0–5 were more likely to be living in families with incomes below the poverty line than children ages 6–17. In 2003, 20 percent of children ages 0–5 lived in poverty, compared with 16 percent of older children.

- Children in married-couple families were much less likely to be living in poverty than children living only with their mothers. In 2003, 9 percent of children in married-couple families were living in poverty, compared with 42 percent in female-householder families.
- This contrast by family structure differs among racial and Hispanic groups. For example, in 2003, 11 percent of Black-alone children in married-couple families lived in poverty, compared with 50 percent of Black-alone children in female-householder families.¹ Twenty-one percent of Hispanic children in married-couple families lived in poverty, compared with 51 percent in female-householder families.
- In 2003, 18 percent of all children ages 0–17 lived in poverty, up from 17 percent in 2002. The poverty rate was higher for Black-alone and Hispanic children than for White-alone, non-Hispanic children. In 2003, 10 percent of White-alone, non-Hispanic children lived in poverty, compared with 34 percent of Black-alone children and 30 percent of Hispanic children.¹

he full distribution of the income of children's families provides a broader picture of children's economic situations. The gap between affluent and poor children is an important measure for understanding the relative deprivation experience of poor children.



NOTE: Estimates refer to children ages 0-17 who are related to the householder. The income classes are derived from the ratio of the family's income to the family's poverty threshold. Extreme poverty is less than 50 percent of the poverty threshold (i.e., \$9,405 for a family of four in 2003). Below poverty, but above extreme poverty is 50-99 percent of the poverty threshold (i.e., from \$9,405 through \$18,809 for a family of four in 2003). Low income is 100-199 percent of the poverty threshold (i.e., from \$18,810 through \$37,619 for a family of four in 2003). Medium income is 200-399 percent of the poverty threshold (i.e., from \$37,620 through \$75,239 for a family of four in 2003). High income is 400 percent of the poverty threshold or more (i.e., \$75,240 or more for a family of four in 2003).

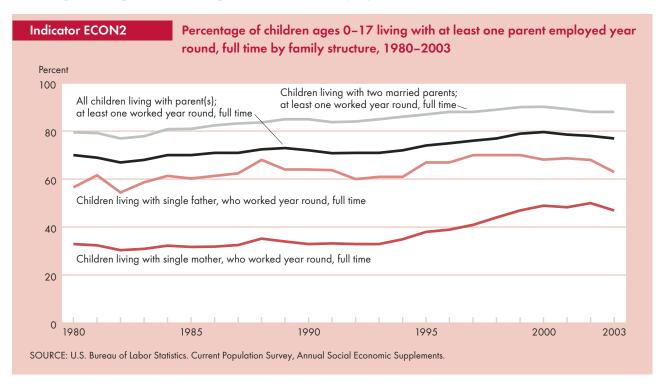
SOURCE: U.S. Census Bureau, Current Population Survey, 1981 to 2004 Annual Social and Economic Supplements.

- In 2003, more children lived in families with medium income (32 percent) than in families in other income groups. Smaller percentages of children lived in families with low income and with high income (22 and 29 percent, respectively).
- The percentage of children living in families with medium income fell from 41 percent in 1980 to 32 percent in 2003, while the percentage of children living in families with high income rose from 17 to 29 percent.
- The percentage of children living in families experiencing extreme poverty was 7 percent in 1980. This percentage rose to 10 percent in 1992 and decreased to 7 percent in 2003. Concurrently, three times as many children lived in families with very high incomes⁵³ in 2003 as in 1980 (13 and 4 percent, respectively).

Bullets contain references to data that can be found in Tables ECON1.A and ECON1.B on pages 115–120. Endnotes begin on page 73.

Secure Parental Employment

ecure parental employment reduces the incidence of poverty and its attendant risks to children. Since most parents who obtain health insurance for themselves and their children do so through their employers, a secure job can also be a key variable in determining whether children have access to health care. Secure parental employment may also enhance children's psychological well-being and improve family functioning by reducing stress and other negative effects that unemployment and underemployment can have on parents.^{54,55} One measure of secure parental employment is the percentage of children whose resident parent or parents were employed full time during a given year.

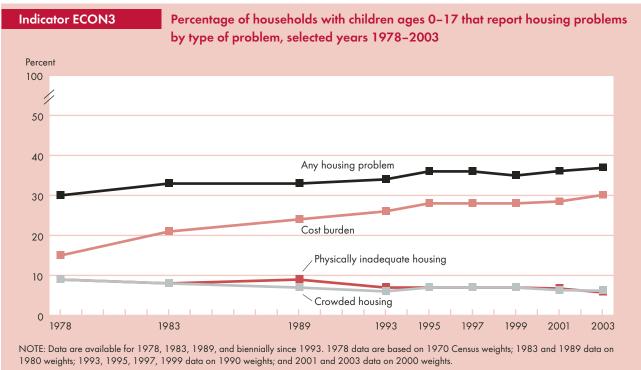


- The percentage of children who had at least one parent working year round, full time fell slightly in 2003 to 77 percent. This was slightly below its peak of 80 percent in 2000, but about the same as in 1998. Despite the decline, this proportion still remained quite high in its historical context; in the early 1990s, the proportion was 72 percent.
- In 2003, 88 percent of children living in married two-parent families had at least one parent who worked year round, full time. In contrast, 63 percent of children living with a single father and 47 percent of children living with a single mother had a parent who worked year round, full time.
- Children living in poverty were much less likely to have a parent working year round, full time than children living at or above the poverty line (30 percent and 86 percent, respectively, in 2003). For children living with two married parents, 52 percent of children living below the poverty line had at least one parent working year round, full time, compared with 91 percent of children living at or above the poverty line.
- Black, non-Hispanic children and Hispanic children were less likely than White, non-Hispanic children to have a parent working year round, full time. About 71 percent of Hispanic children and 61 percent of Black, non-Hispanic children lived in families with secure parental employment in 2003, compared with 82 percent of White, non-Hispanic children.
- In 2003, 29 percent of children in married twoparent families had both parents working year round, full time, up from 17 percent in 1980 but down slightly from the peak of 33 percent in 2000.

Bullets contain references to data that can be found in Table ECON2 on pages 121–122. Endnotes begin on page 73.

Housing Problems

nadequate, crowded, or costly housing can pose serious problems to children's physical, psychological, or material well-being.⁵⁶ The percentage of households with children that report that they are living in physically inadequate,⁵⁷ crowded, and/or costly housing provides an estimate of the percentage of children whose well-being may be affected by their family's housing.



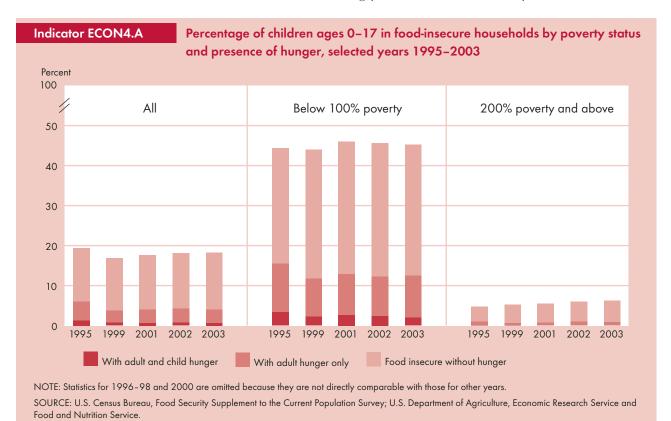
SOURCE: U.S. Census Bureau and the U.S. Department of Housing and Urban Development, American Housing Survey. Tabulated by the U.S. Department of Housing and Urban Development.

- In 2003, 37 percent of U.S. households (both owners and renters) with children had one or more of three housing problems: physically inadequate housing, crowded housing, or cost burden resulting from housing that costs more than 30 percent of household income.⁵⁸
- The share of U.S. households with children that reported any housing problems rose from 30 percent in 1978 to 36 percent in 1995 and has remained stable since.
- Inadequate housing, defined as housing with severe or moderate physical problems, has become slightly less common. In 2003, 6 percent of households with children had inadequate housing, compared with 9 percent in 1978.
- Crowded housing, defined as housing in which there is more than one person per room, has also declined slightly among households with children, from 9 percent in 1978 to 6 percent in 2003.
- Improvements in housing conditions, however, have been accompanied by rising housing costs. Between 1978 and 2003, the incidence of cost burdens among households with children doubled from 15 percent to 30 percent. The proportion with severe cost burdens, paying more than half of their income for housing, rose from 6 to 11 percent over the same period, although it has remained stable since 1993.
- Households that receive no rental assistance and have severe cost burdens or physical problems are defined as having severe housing problems.⁵⁹ The percentage of households with children facing severe housing problems was unchanged at 11 percent in 2003, and has been stable since 1993.
- Severe housing problems are especially prevalent among very-low-income renters. 60 In 2003, 29 percent of very-low-income renter households with children reported severe housing problems, with severe cost burden as the major problem. This incidence reflects a decrease from the 33 percent with severe housing problems in 1993.

Bullets contain references to data that can be found in Table ECON3 on page 123. Endnotes begin on page 73.

Food Security and Diet Quality

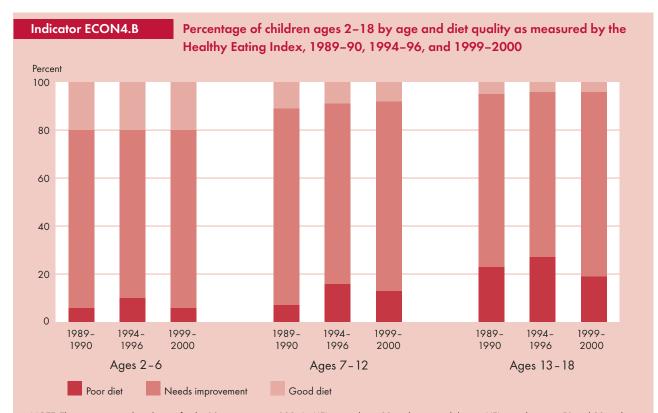
family's ability to provide for their children's nutritional needs is linked to the family's food security—that is, to its access at all times to enough food for an active, healthy life.⁶¹ Households are classified as food insecure based on reports of difficulty obtaining enough food, reduced diet quality, and anxiety about their food supply. These households are also more likely to report increased use of emergency food sources and other coping behaviors, and some of them report reduced food intake and hunger.⁶² In most of these households, children's eating patterns are disrupted to some extent, and in about 1 out of 4 food-insecure households, parents report reducing children's food intake at times because the household cannot afford enough food. However, children—especially younger children—in U.S. households are usually protected from hunger even if adults are hungry because they lack sufficient resources for food. Only in the most severely food-insecure households are both children and adults hungry due to the food insecurity in the household.⁶³



- About 13 million children (18 percent) lived in households that were classified as food insecure at times in 2003. However, only a small proportion of the households reported hunger among the children. In 2003, of the 18 percent of children who lived in food-insecure households, 14 percent lived in households classified as food insecure without hunger, 4 percent lived in households with hunger among adults only, and 0.6 percent lived in households with hunger among both adults and children
- The percentage of children living in food-insecure households declined from 19 percent in 1995 to 17 percent in 1999, then increased to just over 18 percent in 2002 and 2003. The percentage of children living in households classified as food insecure with hunger among children declined

- from 1.3 percent in 1995 to 0.7 percent in 1999 and has remained in the range of 0.6 to 0.8 percent since then.
- The proportions of children living in food-insecure households were substantially above the national average (18 percent) for those living in poverty (45 percent), Black-alone, non-Hispanics (31 percent) and Hispanics (31 percent), those whose parents or guardians lacked a high school diploma (38 percent), and those living with a single mother (34 percent).¹

he diet quality of children and adolescents is of concern because poor eating patterns established in childhood usually transfer to adulthood. Such patterns are major factors in the increasing rate of child obesity over the past decades and are contributing factors to certain diseases. The Healthy Eating Index (HEI) is a summary measure of diet quality. The HEI consists of 10 components, each representing different aspects of a healthful diet. Components 1 through 5 measure the degree to which a person's diet conforms to the U.S. Department of Agriculture's Food Guide Pyramid serving recommendations for the five major food groups: grains, vegetables, fruits, milk, and meat/meat alternatives. Components 6 and 7 measure fat and saturated fat consumption. Components 8 and 9 measure cholesterol intake and sodium intake, and component 10 measures the degree of variety in a person's diet. Scores for each component are given equal weight and added to calculate an overall HEI score. This overall HEI score is then used to determine diet quality based on a scale established by nutrition experts.⁶⁴



NOTE: The maximum combined score for the 10 components is 100. An HEI score above 80 implies a good diet, an HEI score between 51 and 80 implies a diet that needs improvement, and an HEI score less than 51 implies a poor diet. Data for three time periods are not necessarily comparable because of methodological differences in data collection.

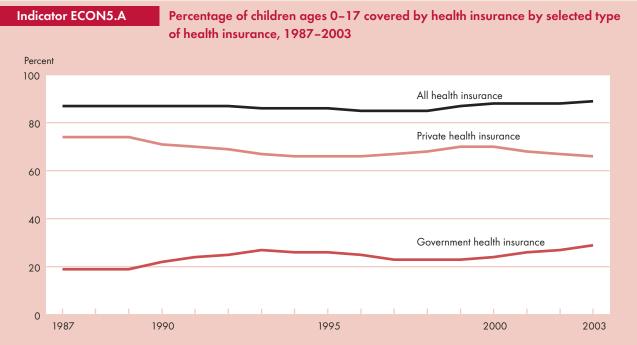
SOURCE: U.S. Department of Agriculture, Center for Nutrition Policy and Promotion (1989-90 and 1994-96), Continuing Survey of Food Intake of Individuals, and 1999-2000 National Health and Nutrition Examination Survey (1999-2000).

- In 1999–2000, as in previous years, most children had a diet that was poor or needed improvement, as indicated by their HEI score.
- As children get older, their diet quality declines. In 1999–2000, among children ages 2–6, 20 percent had a good diet, 74 percent had a diet needing improvement, and 6 percent had a poor diet. For those ages 7–12, 8 percent had a good diet, 79 percent had a diet needing improvement, and 13 percent had a poor diet. For children ages 13–18, 4 percent had a good diet, 77 percent had a diet needing improvement, and 19 percent had a poor diet.
- The lower quality diets of older children are linked to declines in their fruit and sodium scores.
- Children in families below poverty are less likely than higher income children to have a diet rated as good. In 1999–2000, for children ages 2–6, 17 percent of those in poverty had a good diet, compared with 22 percent of those living at or above the poverty line.

Bullets contain references to data that can be found in Tables ECON4.A–ECON4.D on pages 124–129. Endnotes begin on page 73.

Access to Health Care

hildren with health insurance (government or private) are more likely than children without insurance to have a regular and accessible source of health care. The percentage of children who have health insurance coverage for at least part of the year is one measure of the extent to which families can obtain preventive care or health care for a sick or injured child.

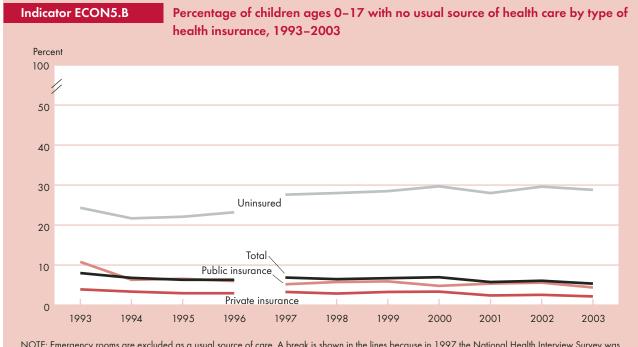


NOTE: Government health insurance for children consists primarily of Medicaid, but also includes Medicare, SCHIP (the State Children's Health Insurance Programs), and CHAMPUS/Tricare, the health benefit program for members of the armed forces and their dependents. Estimates beginning in 1999 include follow-up questions to verify health insurance status. Estimates for 1999 through 2003 are not directly comparable with earlier years, before the verification questions were added. Children are considered to be covered by health insurance if they had government or private coverage any time during the year.

SOURCE: U.S. Census Bureau, unpublished tables based on analyses from the Current Population Survey, 1988 to 2004 Annual Social and Economic Supplements.

- In 2003, 89 percent of children had health insurance coverage at some point during the year. Between 85 and 89 percent of children have had health insurance in each year since 1987.
- The number of children who had no health insurance at any time during 2003 was 8.4 million (11 percent of all children), which was similar to 2002.
- The proportion of children covered by private health insurance decreased from 74 percent in 1987 to 66 percent in 1994, increased to 70 percent in 1999, and dropped to 66 percent in 2003. During the same time period, the proportion of children covered by government health insurance grew from 19 percent in 1987 to 27 percent in 1993. Government health insurance decreased until 1999 and then began to climb again to 29 percent in 2003. 65
- Hispanic children are less likely to have health insurance than either White-alone, non-Hispanic or Black-alone children. In 2003, 79 percent of Hispanic children were covered by health insurance, compared with 93 percent of White-alone, non-Hispanic children and 86 percent of Black-alone children.¹
- The proportion of children covered by any health insurance is about the same across age groups. The type of insurance, however, varies by the age of the child: government-provided insurance is more prevalent among younger children, while private health insurance is more common among older children.

he health of children depends at least partially on their access to health services. Health care for children includes physical examinations, preventive care, health education, observations, screening, immunizations, and sick care. Having a usual source of care—a particular person or place a child goes for sick and preventive care—facilitates the timely and appropriate use of pediatric services. Emergency rooms are excluded here as a usual source of care because their focus on emergency care generally excludes the other elements of health care.



NOTE: Emergency rooms are excluded as a usual source of care. A break is shown in the lines because in 1997 the National Health Interview Survey was redesigned. Data for 1997-2003 are not strictly comparable with earlier data.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

- In 2003, 5 percent of children had no usual source of health care, which is the lowest percentage recorded since 1993.
- Uninsured children are much more likely to have no usual source of care than are children who have health insurance. Children who were uninsured were 13 times as likely as those with private insurance to have no usual source of care in 2003.
- There are differences in the percentage of children having no usual source of care by type of health insurance coverage. In 2003, children with public insurance, such as Medicaid, were more likely to have no usual source of care than were children with private insurance (4 percent and 2 percent, respectively).
- In 2003, 11 percent of children in families with incomes below the poverty threshold had no usual source of health care.
- Older children are slightly more likely than younger children to lack a usual source of health care. In 2003, 6 percent of children ages 5–17 had no usual source of care, compared with 3 percent of children ages 0–4.

Bullets contain references to data that can be found in Tables ECON5.A and ECON5.B on pages 130–132. Endnotes begin on page 73.

Indicators Needed

Economic Security

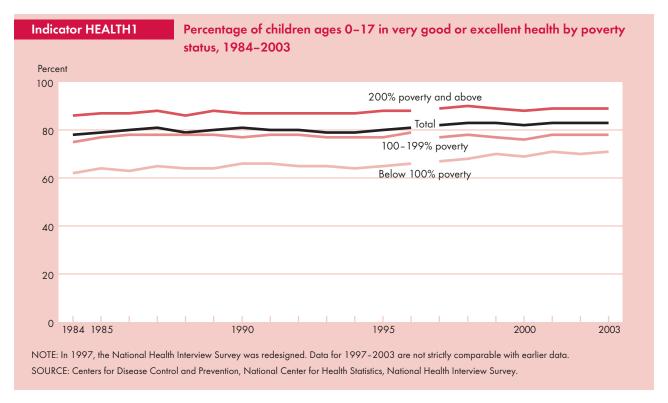
Economic security is multifaceted, and several measures are needed to adequately represent its various aspects. While this year's report continues to provide some information on economic and food security, additional indicators are needed on:

- Economic well-being. Economic well-being over time needs to be anchored in an average standard of living context. Multiple measures of family income or consumption, some of which might incorporate estimates of various family assets, could produce more reliable estimates of changes in children's economic well-being over time.
- Long-term poverty among families with children. Although Federal data are available on child poverty and alternative measures are being developed (see Indicators ECON1.A and ECON1.B, Child Poverty and Family Income, and the discussion of alternative poverty rates on page 120), the surveys that collect these data do not capture information on long-term poverty. Long-term poverty among children can be estimated from existing longitudinal surveys, but changes to current surveys would be needed to provide estimates on a regular basis. Since long-term poverty can have serious negative consequences for children's well-being, regularly collected and reported data are needed to produce regular estimates.
- Homelessness. At present, there are no regularly collected data on the number of homeless children in the United States, although there have been occasional studies aimed at estimating this number.

Indicators of Children's Well-Being **Health Indicators** The World Health Organization defines health as "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity." This section presents information on several important measures of child health. Data depicted include indicators of general health and chronic disease, a measure of birth outcomes (low birthweight), mortality rates, overweight, immunization rates, and rates of births to adolescents. Important measures for which data are not available include child abuse and neglect, and disability.

General Health Status

he health of children and youth is fundamental to their well-being and development. Parental reports of their children's health provide one indication of the overall health status of the Nation's children. This indicator measures the percentage of children whose parents report them to be in very good or excellent health.

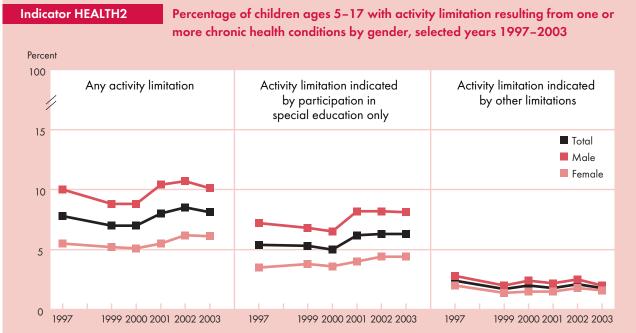


- In 2003, about 83 percent of children were reported by their parents to be in very good or excellent health.
- Children ages 0–4 are slightly more likely to be in very good or excellent health than are children ages 5–17 (86 and 82 percent, respectively).
- Child health varies by family income. Children living in families with incomes below the Federal poverty level are less likely than children in higher income families to be in very good or excellent health. In 2003, about 71 percent of children in poor and 78 percent in near-poor families (those with family incomes less than 100 percent and 100–199 percent of the poverty level, respectively) were in very good or excellent health, compared with 89 percent of children in non-poor families (those with family incomes of 200 percent or more of the poverty level).
- Each year, children at or above the poverty level were more likely to be in very good or excellent health than were children whose families were below the poverty level. However, the health gap between children below and those at or above the poverty level decreased between 1984 and 2003. From 1984 to 2003, the percentage of children in very good or excellent health increased from 62 to 71 percent among poor children and increased from 75 to 78 percent among near-poor children and 86 to 89 percent among non-poor children.
- White-alone, non-Hispanic children were more likely than Black-alone, non-Hispanic and Hispanic children to be in very good or excellent health. In 2003, 88 percent of White-alone, non-Hispanic children were reported to be in very good or excellent health, compared with 75 percent of Black-alone, non-Hispanic children and 74 percent of Hispanic children.¹

Bullets contain references to data that can be found in Table HEALTH1 on page 133. See indicator ECON1.A and ECON1.B on pages 18 and 19 for a description of child poverty. Endnotes begin on page 73.

Activity Limitation

ctivity limitation refers to a person's inability, due to a chronic physical, mental, emotional, or behavioral condition, to participate fully in age-appropriate activities. Age-appropriate activities for children ages 5–17 consist of a child's ability to participate in school and to perform other activities including self-care and walking. Activity limitation is a broad measure of health and functioning affected by a variety of chronic health conditions. The causes of activity limitation most often reported by parents of children ages 5–17 include learning disabilities, speech problems, and other mental, emotional, and behavioral problems.⁷⁰



NOTE: Children are identified as having activity limitation by asking parents (1) whether children receive special education services and (2) whether they are limited in their ability to walk, care for themselves, or participate in other activities. "Activity limitation indicated by participation in special education" only includes children identified solely by their use of special education services. "Activity limitation indicated by all other limitations" includes limitations in self-care, walking, or other activities; children in this category may also receive special education services.

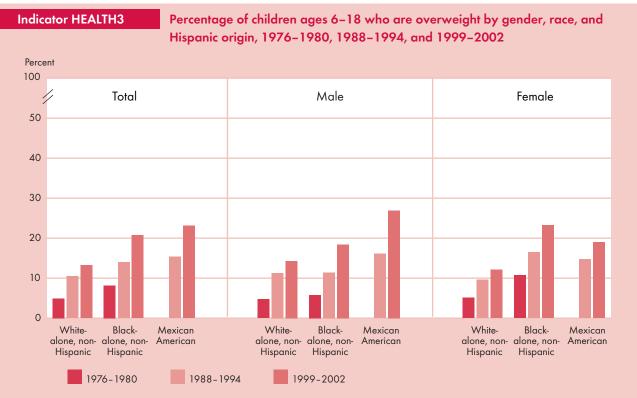
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

- In 2003, approximately 8 percent of children ages 5–17 were reported by parents to have activity limitations due to chronic conditions. Six percent were identified as having activity limitation solely by their participation in special education. Two percent had limitations in their ability to walk, care for themselves, or participate in other activities.
- Activity limitations, particularly those identified only by participation in special education, were reported more often for male children than for female children. The reasons for this gender difference are unclear.
- In 2003, 10 percent of children in poor and nearpoor families (those with family incomes less than 100 percent and 100–199 percent of the poverty level, respectively) had activity limitations, compared with 7 percent of children in non-poor families (those with family incomes of 200 percent or more of the poverty level). Among children of different races and ethnic origins, Hispanic children were less likely than White-alone, non-Hispanic and Black-alone, non-Hispanic children to have a parental report of activity limitation.¹

Bullets contain references to data that can be found in Table HEALTH2 on page 134. Endnotes begin on page 73.

Overweight

verweight adolescents often become overweight adults, with an increased risk for a wide variety of poor health outcomes, including diabetes, stroke, heart disease, arthritis, and certain cancers. The immediate consequences of overweight in childhood are often psychosocial but also include cardiovascular risk factors such as high blood pressure, high cholesterol, and the precursors to diabetes. The prevalence of overweight among U.S. children changed relatively little from the early 1960s through 1980; however, since 1980 it has sharply increased. Recent national estimates indicate that just over 60 percent of children participate in vigorous physical activity and less than a quarter eat the recommended five or more servings of fruits and vegetables per day. In addition to individual factors such as these, social, economic, and environmental forces (e.g., advances in technology and trends in eating out) may contribute to the increasing prevalence of overweight.



NOTE: Data for Mexican American children are not available from 1976-1980 due to small sample sizes. Oversampling of Mexican Americans provided estimates for 1988-1994 and 1999-2002. Overweight is defined as body mass index (BMI) at or above the 95th percentile of the 2000 Centers for Disease Control and Prevention BMI-for-age growth charts. BMI is calculated as weight in kilograms divided by the square of height in meters.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey.

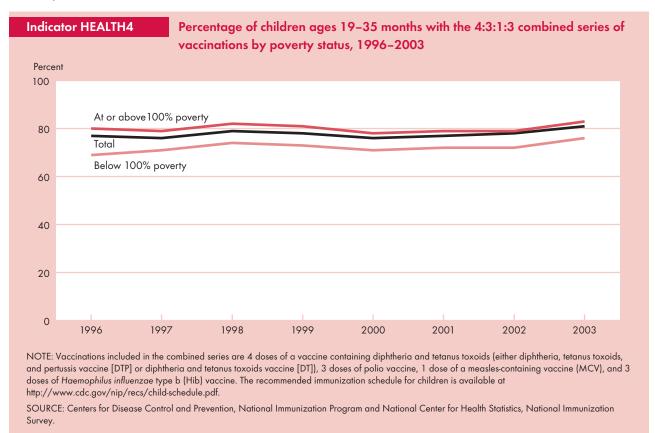
- Since the 1980s, there has been a steady increase in the proportion of children who are overweight. In 1976–1980, only 6 percent of children ages 6–18 were overweight. By 1988–1994, this proportion had risen to 11 percent, and it continued to climb to 16 percent by 1999–2002.
- Data from 1999–2002 indicate that substantial racial and ethnic disparities exist such that larger percentages of Black-alone, non-Hispanic, and Mexican American children are overweight, compared with White-alone, non-Hispanic children.¹
- Black-alone, non-Hispanic female children and Mexican American male children are at particularly

- high risk of being overweight. In 1999–2002, 23 percent of Black-alone, non-Hispanic female children and 27 percent of Mexican American male children were overweight.¹
- Among adolescent males ages 12–18, virtually no differences existed between ethnic groups in 1988–1994. By 1999–2002, there were large ethnic differences: 15 percent of White-alone, non-Hispanic, 20 percent of Black-alone, non-Hispanic, and 27 percent of Mexican American males were overweight.¹

Bullets contain references to data that can be found in Table HEALTH3 on page 135. Endnotes begin on page 73.

Childhood Immunization

R ates of childhood immunization are one measure of the extent to which children are protected from serious vaccine-preventable illnesses. The combined immunization series (often referred to as the 4:3:1:3 combined series) rate measures the extent to which children have received the recommended doses of four key vaccinations.

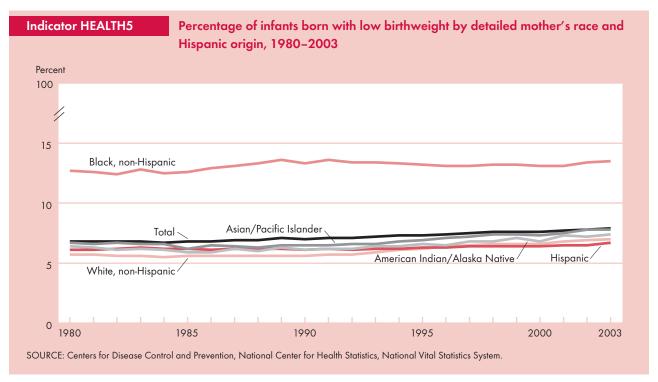


- In 2003, 81 percent of children ages 19–35 months had received the recommended combined series of vaccines (often referred to as the 4:3:1:3 combined series).
- Children with family incomes below the poverty level had lower rates of coverage with the combined series than children with family incomes at or above the poverty line—76 percent of children below poverty compared with 83 percent of higherincome children.
- Rates of coverage with the combined series of vaccines (4:3:1:3) were higher among White, non-Hispanic children than among Black, non-Hispanic or Hispanic children. Eighty-four percent of White, non-Hispanic children ages 19–35 months received these immunizations, compared with 75 percent of Black, non-Hispanic children and 79 percent of Hispanic children.
- For children overall, children living at or above the poverty level, and children living below the poverty level, coverage with the combined series remained relatively stable between 1999 and 2003; the gap in coverage between children living at or above and living below the poverty level remained relatively stable, as well.

Bullets contain references to data that can be found in Table HEALTH4 on pages 136–137.

Low Birthweight

ow-birthweight infants (infants born weighing less than 2,500 grams, or 5 lb. 8 oz.) are at higher risk of death or long-term illness and disability than are infants of normal birthweight. Fe-78 Low birthweight results from an infant's being born preterm (before 37 weeks' gestation) or from being small for his or her gestational age.



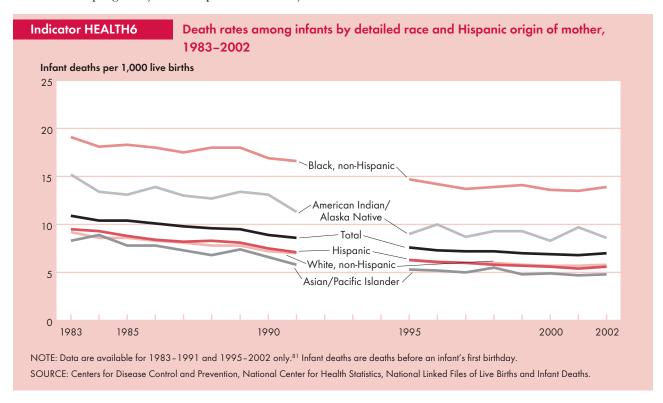
- The percentage of infants born with low birthweight was 7.9 in 2003, up from 7.7 percent in 2001 and 7.8 percent in 2002, and has increased slowly but steadily since 1984 (6.7 percent). The percentage for 2003 was the highest since 1972.^{11,15}
- The percentage of low birthweight for Black, non-Hispanic infants is significantly higher than that of any other racial or ethnic group. From 1990 to 2003, the percentage of low birthweight among Black, non-Hispanic infants varied between 13.6 and 13.1 percent. Infants of other racial and ethnic groups also experienced increases between 1990 and 2003: among White, non-Hispanic infants the rate rose from 5.6 to 7.0, among Hispanic infants it rose from 6.1 to 6.7, among Asians/Pacific Islanders it rose from 6.5 to 7.8, and among American Indians/Alaska Natives it rose from 6.1 to 7.4.
- The percentage of low birthweight varies widely within Hispanic and Asian/Pacific Islander subgroups. Data for 2002 indicate that among Hispanic women, those of Mexican origin had the lowest percentage of low-birthweight infants (6.2 percent) and Puerto Ricans had the highest (9.7 percent). Among Asian/Pacific Islander subgroups, the percentage of low birthweight infants was lowest among women of Chinese origin (5.5 percent) and highest among women of Filipino origin (8.6 percent).

- About 1.4 percent of infants were born with very low birthweight (less than 1,500 grams, or 3 lb. 4 oz.) in each year from 1996 to 2003, up from 1.3 percent in each year from 1989 to 1995 and 1.2 percent in each year from 1981 to 1988.
- One reason for the recent increase in low birthweight is that the number of twin, triplet, and higher-order multiple births has increased. 11,15,77,78 Multiple births are much more likely than singletons to be of low birthweight; 55 percent of twins and 94 percent of triplets, compared with 6 percent of singletons, were of low birthweight in 2002. However, even among singletons, low birthweight has increased. 11
- Changes in the obstetric management of pregnancy with increases in induction and cesarean delivery, a concomitant increase in preterm births, and an increase in the use of assisted reproductive technologies (ART) may have played a role in the low birthweight increase.⁷⁹

Bullets contain references to data that can be found in Table HEALTH5 on page 138. Endnotes begin on page 73.

Infant Mortality

Infant mortality is defined as the death of an infant before his or her first birthday. Infant mortality is related to the underlying health of the mother, public health practices, socioeconomic conditions, and availability and use of appropriate health care for infants and pregnant women.⁸⁰ In the United States, about two-thirds of infant deaths occur in the first month after birth and are due mostly to health problems of the infant or the pregnancy, such as preterm delivery or birth defects.

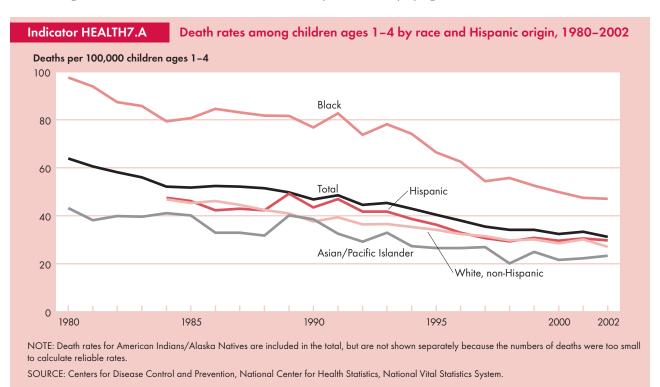


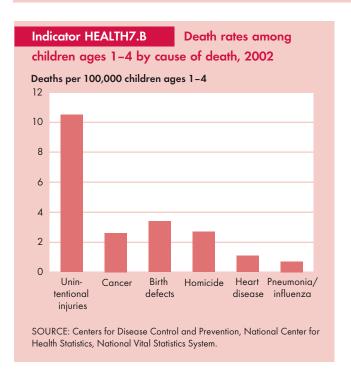
- The 2002 infant mortality rate for the United States was 7.0 deaths per 1,000 live births, an increase from the 2001 rate of 6.8. A special analysis showed that most of the increase was due to an increase in the number of infants weighing less than 750 grams, or about 1 lb. 10 oz., at birth.⁷⁹
- Substantial racial and ethnic disparities continue. Black, non-Hispanic and American Indian/Alaska Native infants have consistently had a higher infant mortality rate than that of other racial or ethnic groups. For example, in 2002, the Black, non-Hispanic infant mortality rate was 13.9 infant deaths per 1,000 live births and the American Indian/Alaska Native rate was 8.6, both significantly higher than the rates among White, non-Hispanic (5.8), Hispanic (5.6), and Asian/Pacific Islander (4.8) infants.
- Infant mortality rates also vary within racial and ethnic populations. For example, among Hispanics in the United States, the infant mortality rate for 2002 ranged from 3.7 for infants of Cuban origin to a high of 8.2 for Puerto Rican infants. Among Asians/Pacific Islanders, infant mortality rates ranged from 3.0 for infants of Chinese origin to 9.6 for Hawaiian infants.

Bullets contain references to data that can be found in Table HEALTH6 on page 139. Endnotes begin on page 73.

Child Mortality

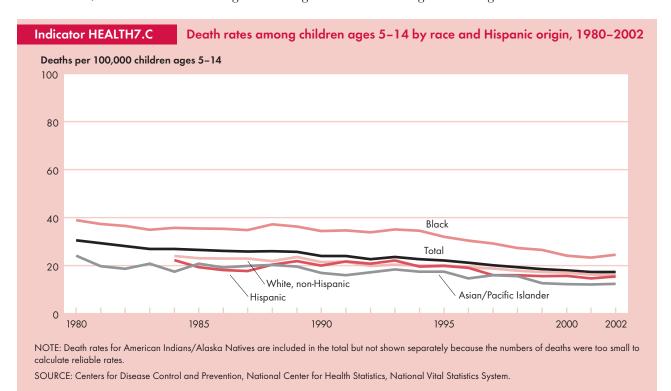
hild death rates are the most severe measure of ill health in children. These rates have generally declined over the past two decades. Deaths to children ages 1–4 are calculated separately from those for children ages 5–14 because causes and death rates vary substantially by age.

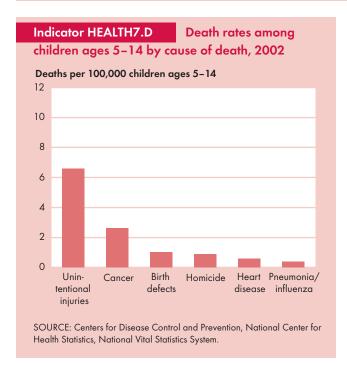




- In 2002, the death rate for children ages 1–4 was 31 per 100,000 children.
- Between 1980 and 2002, the death rate declined by more than half for children ages 1–4.
- Among children ages 1–4, Black children had the highest death rate in 2002, at 47 per 100,000 children. Asian/Pacific Islander children had the lowest death rate, at 23 per 100,000.
- Among children ages 1–4, unintentional injuries (accidents) were the leading cause of death at 11 per 100,000, followed by birth defects, homicide, and cancer at 3 per 100,000 children each.
- Motor vehicle traffic crashes are the most common type of fatal injury among children. Use of child restraint systems, including safety seats and booster seats, can greatly reduce the number and severity of injuries to child occupants of motor vehicles. In 2002, 40 percent of child occupants ages 1–4 who died in crashes were unrestrained.⁸²

eath rates for children ages 5–14 are lower than those for children under age 5. The leading cause of death for children ages 5–14 remains unintentional injuries, but some other causes of death, such as birth defects, are less common among children ages 5–14 than among children ages 1–4.



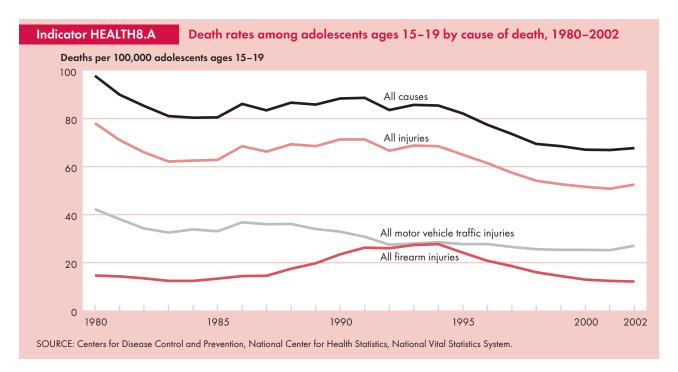


- The death rate in 2002 for children ages 5–14 was 17 per 100,000 children.
- Between 1980 and 2002, the death rate for children ages 5–14 declined by approximately 45 percent, from 31 to 17 deaths per 100,000.
- Similar to mortality patterns for children under the age of 5, among children ages 5–14, Black children had the highest death rate in 2002 at 25 deaths per 100,000, and Asians/Pacific Islanders had the lowest death rate at 12 per 100,000.
- Among children ages 5–14, unintentional injuries (accidents) were the leading cause of death at 7 per 100,000, followed by cancer (3 per 100,000), birth defects, and homicides (1 per 100,000 each).
- The majority of unintentional injury deaths among children ages 5–14 result from motor vehicle traffic crashes. In 2002, 45 percent of children ages 5–9 and 54 percent of children ages 10–14 who died as occupants in motor vehicle crashes were not wearing a seatbelt or other restraint.⁸²

Bullets contain references to data that can be found in Tables HEALTH7.A and HEALTH7.B on pages 140–141. Endnotes begin on page 73.

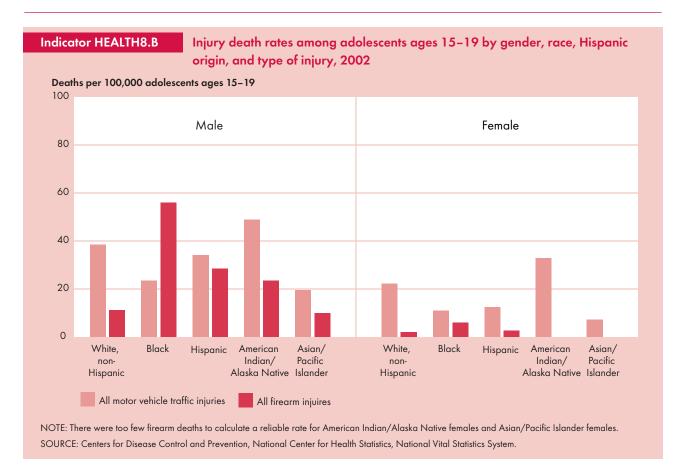
Adolescent Mortality

ompared with younger children, adolescents ages 15–19 have much higher mortality rates. Adolescents are much more likely to die from injuries sustained from motor vehicle traffic accidents or firearms.⁸³ This difference illustrates the importance of looking separately at mortality rates and causes of death among teenagers ages 15–19.



- In 2002, the death rate for adolescents ages 15–19 was 68 deaths per 100,000 youth ages 15–19. Overall, the rate has declined substantially since 1980, despite a period of increase between 1986 and 1991. Injury, which includes homicide, suicide, and unintentional injuries (accidents), continues to account for more than 3 of 4 deaths among adolescents.⁸⁴
- Injuries from motor vehicles and firearms are the leading mechanisms of injury death among adolescents. In 2002, motor vehicle traffic-related injuries accounted for 27 of the 68 deaths per 100,000 youth ages 15–19 (40 percent), while firearm injuries accounted for 12 of the 68 deaths per 100,000 youth ages 15–19 (18 percent).
- Motor vehicle injuries were the leading mechanisms of injury death among adolescents for each year between 1980 and 2002, but the motor vehicle death rate declined by more than one-third during the time period.
- In 1980, motor vehicle traffic-related deaths among adolescents ages 15–19 occurred almost three times as often as deaths from firearm injuries (intentional and unintentional). By 2002, the rate of motor vehicle traffic-related deaths was more than double that of deaths from firearm injuries.

- Motor vehicle traffic-related and firearm-related death rates have followed different trends since 1980. From 1980 to 1985, both rates declined; in the following years, however, the motor vehicle traffic death rate continued to decline modestly while the firearm death rate increased markedly. During the years 1992 to 1994, the two rates differed only slightly. However, since 1994, the firearm death rate has decreased by more than half, while the motor vehicle death rate has decreased only slightly.
- Most of the increase in firearm injury deaths between 1983 and 1993 resulted from an increase in homicides. The firearm homicide rate among youth ages 15–19 more than tripled from 5 to 18 per 100,000 between 1983 and 1993. At the same time, the firearm suicide rate rose from 5 to 7 per 100,000. From 1995 to 2002, the firearm homicide rate and the firearm suicide rate each declined by about 50 percent.
- After unintentional injuries, additional leading causes of death for adolescents include cancer, heart disease, and birth defects.⁸⁴

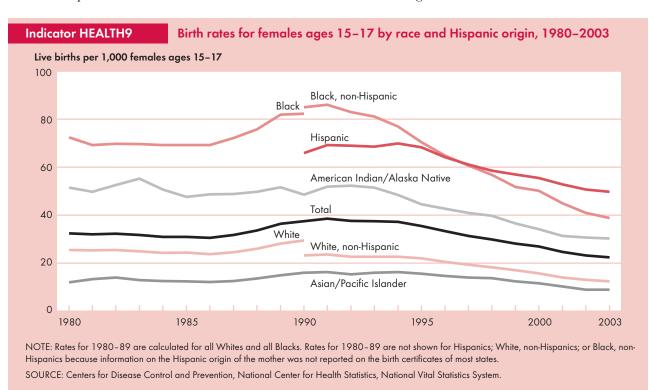


- Motor vehicle and firearm injury deaths are both more common among male than among female adolescents. In 2002, the motor vehicle traffic death rate for males was nearly twice the rate for females, and the firearm death rate among males was eight times that for females.⁸³
- Among adolescents in 2002, motor vehicle injuries were the most common cause of death among all females, as well as among White, non-Hispanic, Hispanic, American Indian/Alaska Native, and Asian/Pacific Islander males. Firearm injuries were the most common cause of death among Black males. Black males were more than twice as likely to die from a firearm injury as from a motor vehicle traffic injury.
- Deaths from firearm suicides were more common than deaths from firearm homicides among White, non-Hispanic adolescent males, while the reverse was found for Black and Hispanic adolescent males.
- Deaths from firearm injuries among adolescents declined between 1995 and 2002, particularly among Black and Hispanic males. From 1995 to 2002, the firearm homicide rates for Black and Hispanic males declined substantially, from 101 to 48 per 100,000 for Black males, and from 47 to 22 per 100,000 for Hispanic males.

Bullets contain references to data that can be found in Table HEALTH8 on pages 142–143. Endnotes begin on page 73.

Adolescent Births

earing a child during adolescence is often associated with long-term difficulties for the mother and her child. These consequences are often attributable to poverty and the other adverse socioeconomic circumstances that frequently accompany early childbearing. Socioeconomic circumstances that frequently accompany early childbearing. Compared with babies born to older mothers, babies born to adolescent mothers, particularly young adolescent mothers, are at higher risk of low birthweight and infant mortality. 11,14,76 They are more likely to grow up in homes that offer lower levels of emotional support and cognitive stimulation, and they are less likely to earn high school diplomas. For the mothers, giving birth during adolescence is associated with limited educational attainment, which in turn can reduce future employment prospects and earnings potential. The birth rate of adolescents under age 18 is a measure of particular interest because the mothers are still of school age.



- In 2003, the adolescent birth rate was 22 per 1,000 young women ages 15–17. There were 134,617 births to these young women in 2003. The 2003 rate was a record low for the Nation.^{11,15,16}
- The birth rate among adolescents ages 15–17 declined more than two-fifths, from 39 to 22 births per 1,000, between 1991 and 2003. This decline follows a one-fourth increase between 1986 and 1991.
- There were substantial racial and ethnic disparities in birth rates among adolescents ages 15–17. In 2003, the birth rate per 1,000 females for this age group was 9 for Asians/Pacific Islanders, 12 for White, non-Hispanics, 30 for American Indians/Alaska Natives, 39 for Black, non-Hispanics, and 50 for Hispanics.¹⁵
- The birth rate for Black, non-Hispanic females ages 15–17 dropped by more than half between 1991 and 2003, completely reversing the increase between 1986 and 1991. The birth rate for White, non-Hispanic teenagers declined by nearly half during 1991–2003. 11,15

- The birth rate for Hispanics in this age group declined more modestly in the 1990s; the rate fell by more than one-fourth between 1991 and 2003. 15,16
- In 2003, 90 percent of births to females ages 15–17 were to unmarried mothers, compared with 62 percent in 1980 (See POP7.B).
- The birth rates for first and second births for ages 15–17 declined by more than one-third and one-half, respectively, between 1991 and 2002.
- The pregnancy rate (the sum of births, abortions, and fetal losses per 1,000 females) declined by one-third for adolescents ages 15–17 during 1990–2000, reaching a record low of 54 per 1,000 in 2000. Rates for births, abortions, and fetal losses declined for these young adolescents in the 1990s through 2000. ^{16,87,88}

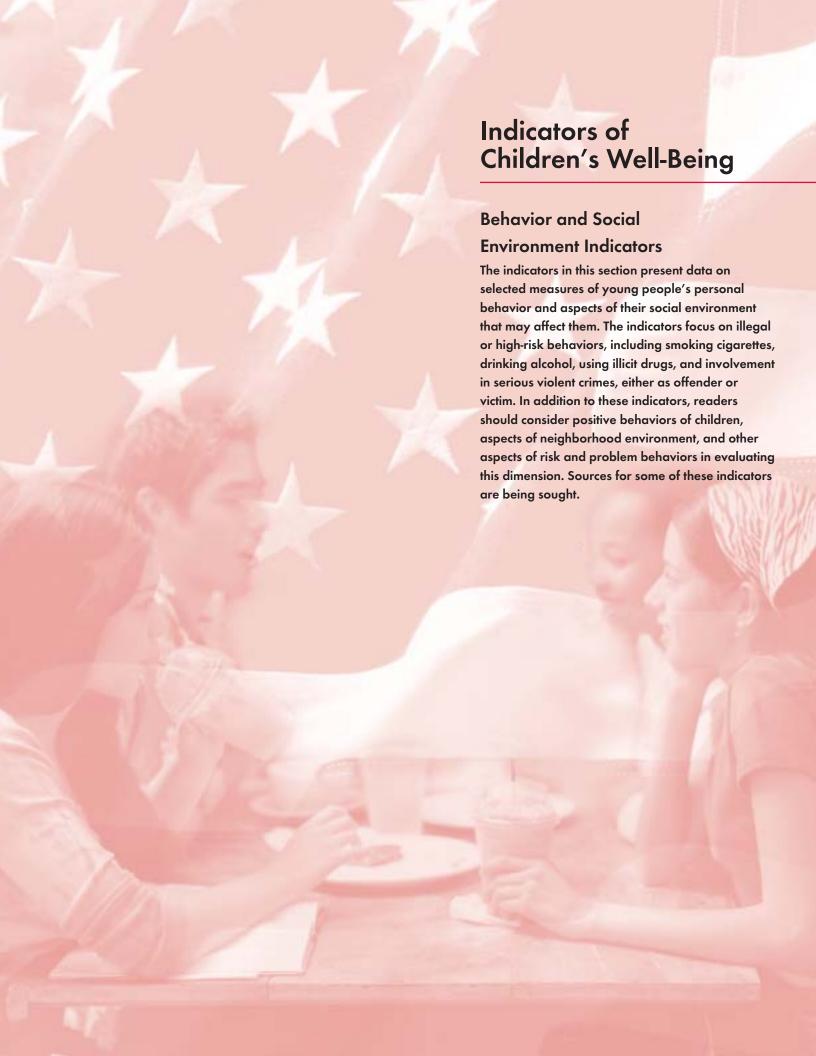
Bullets contain references to data that can be found in Table HEALTH9 on pages 144–145. and Table POP7.B on page 104. Endnotes begin on page 73.

Indicators Needed

Health

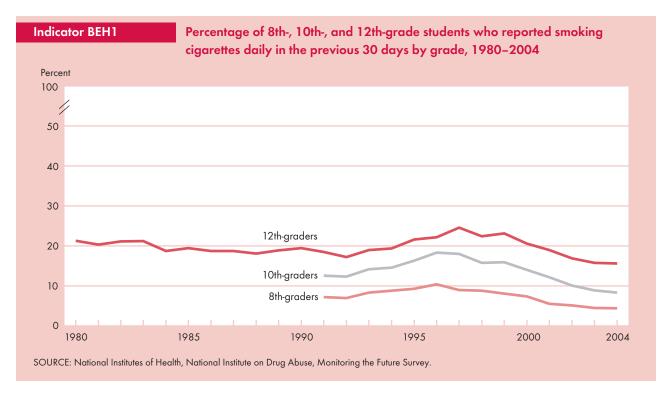
National indicators in several key dimensions of health are not yet available because of difficulty in definitions and measurement, particularly using survey research. The following health-related areas have been identified as priorities for indicator development by the Federal Interagency Forum on Child and Family Statistics:

- Disability. The Forum is very interested in developing an improved measure of functioning that can be derived from regularly collected data. Such a measure is often referred to as a disability measure. The difficulties inherent in developing such a measure relate to the fact that disability is a complicated, multidimensional concept. Many definitions of disability are currently in use by policy-makers and researchers, but there is little agreement regarding which aspects of functioning should be included or how they should be measured.
- Mental health. The need for an indicator of children's mental health has been recognized by the Forum since 1997. The 1999 U.S. Surgeon General's report on mental health, and, more recently, the report of the President's New Freedom Commission on Mental Health, drew national attention to mental health as an essential condition for children's development and wellbeing. For the first time, the 2005 America's Children presents a Special Feature on one aspect of children's mental health—children's emotional and behavioral difficulties as reported by their parent. This feature was developed through collaboration among experts from the National Institute of Mental Health, the Center for Mental Health Services in the Substance Abuse and Mental Health Services Administration, the National Center for Health Statistics, the National Center for Birth Defects and Developmental Disabilities, and an international panel of experts.
- Child abuse and neglect. Also needed are regular, reliable estimates of the incidence of child abuse and neglect that are based on sample surveys rather than administrative records. One estimate of child abuse and neglect was presented as a special feature in America's Children, 1997. Since administrative data are based on cases reported to authorities, it is likely that these data underestimate the magnitude of the problem. Estimates based on sample survey data could potentially provide more accurate information; however, a number of issues still persist, including how to effectively elicit this sensitive information, how to identify the appropriate respondent for the questions, and whether there is a legal obligation for the surveyor to report abuse or neglect.



Regular Cigarette Smoking

moking has serious long-term consequences, including the risk of smoking-related diseases and the risk of premature death, as well as causing increased health care costs associated with treating the illnesses. Many adults who are currently addicted to tobacco began smoking as adolescents, and it is estimated that more than 5 million of today's underage smokers will die of tobacco-related illnesses. These consequences underscore the importance of studying patterns of smoking among adolescents.

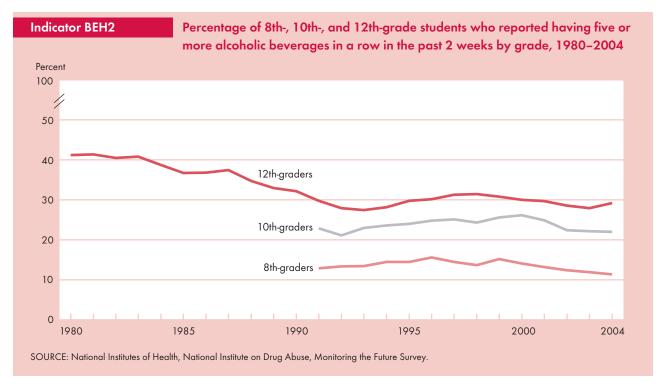


- Following several years of gradual decreases, the rate of daily smoking in the previous month remained stable between 2003 and 2004; in 2004, 4 percent of 8th-graders, 8 percent of 10th-graders, and 16 percent of 12th-graders reported smoking cigarettes daily in the previous 30 days.
- Males and females were similar in their rates of daily smoking. In 2004, among both groups, 4 percent of 8th-graders, 8 percent of 10th-graders, and 15 percent of 12th-graders reported daily smoking in the previous 30 days.
- Rates of smoking differ substantially between racial and ethnic groups. White students have the highest rate of smoking, followed by Hispanic students and then Black students. Among high school seniors in 2004, 18 percent of White students reported daily smoking, compared with 8 percent of Hispanic students and 5 percent of Black students.

Bullets contain references to data that can be found in Table BEH1 on page 146. Endnotes begin on page 73.

Alcohol Use

lcohol is the most commonly used psychoactive substance during adolescence. Its use is associated with motor vehicle accidents, injuries, and deaths; with problems in school and in the workplace; and with fighting, crime, and other serious consequences. ¹³⁴ Early onset of heavy drinking, defined here as five or more alcoholic beverages in a row or during a single occasion in the previous 2 weeks, may be especially problematic, potentially increasing the likelihood of negative outcomes.

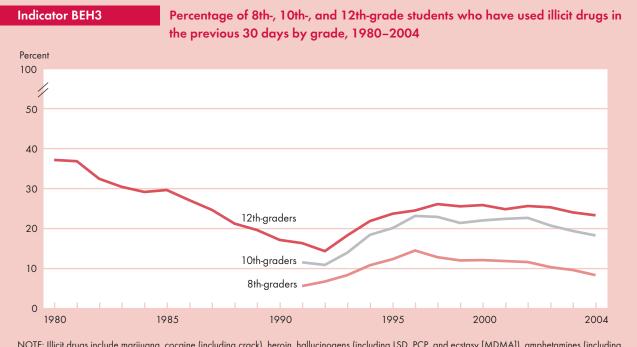


- Alcohol use was stable in 2004 at 11 percent among 8th-graders, 22 percent among 10th-graders, and 29 percent among 12th-graders.
- Long-term trends for high school seniors indicate a peak in 1981, when 41 percent reported heavy drinking. Over the next 12 years, the percentage of high school seniors reporting heavy drinking declined gradually to a low of 28 percent in 1993. Since 1993, the prevalence of this behavior has held fairly steady.
- Among 12th-graders, males were more likely to drink heavily than were females. In 2004, 34 percent of 12th-grade males reported heavy drinking, compared with 24 percent of 12th-grade females.
- Among 10th-graders, a gender difference in heavy drinking was found in earlier years (e.g., 29 percent for males versus 21 percent for females in 2001), but a sharp decline in drinking among males brought the rates closer in 2004 (24 percent for males versus 20 percent for females). However, the differences in drinking behaviors of males and females continues to be more pronounced among older adolescents.

Bullets contain references to data that can be found in Table BEH2 on page 147.

Illicit Drug Use

rug use by adolescents can have immediate as well as long-term health and social consequences. Cocaine use is linked with health problems that range from eating disorders to disability to death from heart attacks and strokes.⁹¹ Marijuana use poses both health and cognitive risks, particularly for damage to pulmonary functions as a result of chronic use.^{92,93} Hallucinogens can affect brain chemistry and result in problems with learning new information and memory.⁹⁴ As is the case with alcohol use and smoking, illicit drug use is a risk-taking behavior that has potentially serious negative consequences.



NOTE: Illicit drugs include marijuana, cocaine (including crack), heroin, hallucinogens (including LSD, PCP, and ecstasy [MDMA]), amphetamines (including methamphetamine), and nonmedical use of psychotherapeutics.

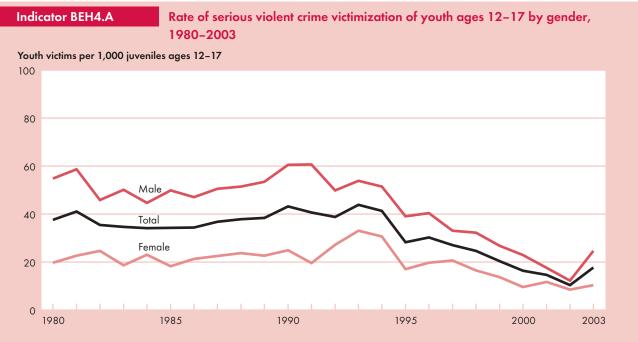
SOURCE: National Institutes of Health, National Institute on Drug Abuse, Monitoring the Future Survey.

- Between 2003 and 2004, illicit drug use in the past 30 days significantly declined from 10 percent to 8 percent among 8th-graders. Twenty-three percent of 12th-graders and 18 percent of 10th-graders reported past 30-day illicit drug use in 2004, statistically unchanged from the previous year.
- Twelve-year trends for 8th- and 10th-graders show that past-30-day illicit drug use increased from the early to mid-1990s, peaking in 1996 at 15 percent and 23 percent in the respective grades. Illicit drug use by 8th- and 10th graders then declined gradually from 1996 to 2003, and decreased further among 8th-graders in 2004.
- Longer term trends for high school seniors show that past-30-day illicit drug use declined from 37 percent in 1980 to 14 percent in 1992. The rate then rose sharply, reaching 26 percent in 1997, and has remained around that level, with a slight decrease to 24 percent in 2003 and 23 percent in 2004.
- Among 12th-graders, more males than females report illicit drug use (26 percent compared with 20 percent, respectively, in 2004). For younger students, gender differences are less dramatic but are in the same direction among 10th-graders. Between 2003 and 2004, past-30-day illicit drug use by males declined from 10 to 8 percent among 8th-graders and from 21 to 20 percent among 10th-graders; illicit drug use by females in these grades remained stable over this period.
- White and Hispanic students generally have higher illicit drug use rates than do Black students. Among 12th-graders in 2004, for example, 26 percent of Whites and 20 percent of Hispanics reported past-30-day illicit drug use, compared with 17 percent of Blacks.

Bullets contain references to data that can be found in Table BEH3 on page 148. Endnotes begin on page 73.

Youth Victims and Perpetrators of Serious Violent Crimes

iolence affects the quality of life of young people who experience, witness, or feel threatened by it. In addition to the direct physical harm suffered by young victims of serious violence, such violence can adversely affect victims' mental health and development and increase the likelihood that they themselves will commit acts of serious violence. Youth ages 12–17 were more than twice as likely as adults to be victims of serious violent crimes.

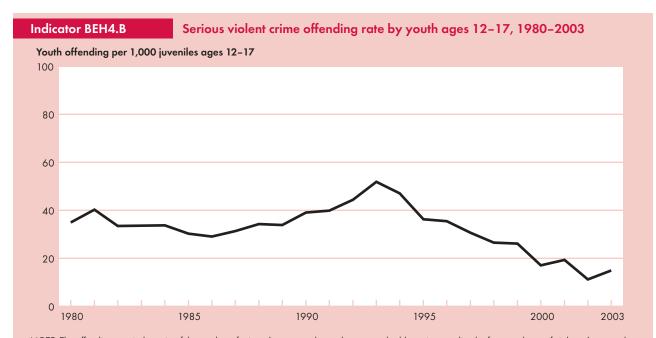


NOTE: Serious violent crimes include aggravated assault, rape, robbery (stealing by force or threat of violence), and homicide. Because of changes, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology.

SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey. Federal Bureau of Investigation, Uniform Crime Reporting Program, Supplementary Homicide Reports.

- In 2003, the rate at which youth were victims of serious violent crimes was 18 crimes per 1,000 juveniles ages 12–17, totaling about 446,000 such crimes.
- Serious violent crime involving juvenile victims went up between 2002 and 2003, from 10 per 1,000 youth in 2002 to 18 per 1,000 in 2003. However, rates still generally declined from their peak in 1993 of 44 victims per 1,000 young people. From 1993 to 2003, the rate of serious violent crime against youth decreased by 60 percent.
- Males are more than twice as likely as females to be victims of serious violent crimes. In 2003, the serious violent crime victimization rate was 25 per 1,000 male youth, compared with 10 per 1,000 female youth.
- In 2003, Black youth were somewhat more likely than White youth to be victims of a serious violent crime and three times as likely as youth of other races to be victims of serious violence. White and Black youth had higher rates in 2003 than in 2002, while the serious violent victimization rates were similar for youth of other races.
- Older teens (ages 15–17) were more likely to be victims of a serious violent crime than younger teens (ages 12–14) in 2003. Both age groups had higher rates in 2003 compared to 2002.

he level of youth violence in society can be viewed as an indicator of youths' ability to control their behavior, as well as the adequacy of socializing agents such as families, peers, schools, and religious institutions to supervise or channel youth behavior to acceptable norms. One measure of the serious violent crime committed by juveniles is the extent to which at least one juvenile offender is reported by the victim to be involved in a crime.



NOTE: The offending rate is the ratio of the number of crimes (aggravated assault, rape, and robbery, i.e., stealing by force or threat of violence) reported to the National Crime Victimization Survey that involved at least one offender perceived by the victim to be 12 through 17 years of age, plus the number of homicides reported to the police that involved at least one juvenile offender, to the number of juveniles in the population. Because of changes made in the victimization survey, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology.

SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey. Federal Bureau of Investigation, Uniform Crime Reporting Program, Supplementary Homicide Reports.

- According to reports by victims, in 2003 the serious violent crime offending rate was 15 crimes per 1,000 juveniles ages 12–17, totaling 375,000 such crimes involving juveniles. While this is higher than the rate in 2002, it is a 71 percent drop from the 1993 peak.
- Reports by victims indicate that between 1980 and 1989, the serious violent juvenile crime offending rate fluctuated between 29 and 40 per 1,000 juveniles, and then began to increase to a high of 52 per 1,000 juveniles in 1993. Since then, the rate has, in general, trended downward with a rate of 15 per 1,000 juveniles in 2003.
- Since 1980 serious violent crime involving juveniles has ranged from 19 percent of all serious violent victimizations in 1982 to 26 percent in 1993, the peak year for youth violence. In 2003, 21 percent of all such victimizations reportedly involved a juvenile offender.
- In more than half (57 percent) of all serious violent juvenile crimes reported by victims in 2003, more than one offender was involved in the incident. Because insufficient detail exists to determine the ages of each individual offender when a crime is committed by more than one offender, the number of additional juvenile offenders cannot be determined. Therefore, this rate of serious violent crime offending does not represent the number of juvenile offenders in the population, but rather the rate of crimes involving a juvenile.

Bullets contain references to data that can be found in Tables BEH4.A and BEH4.B on pages 149–150. Endnotes begin on page 73.

Indicators Needed

Behavior and Social Environment

A broader set of indicators than those presented in this section is needed to adequately monitor the social environment and behaviors of youth. Other behavior and social environment measures are needed on:

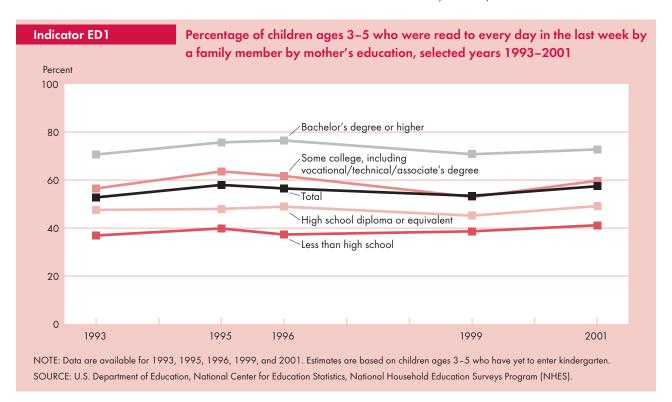
- *Indicators of positive behaviors.* The participation of youth in positive activities and the formation of close attachments to family, school, and community have been linked to positive outcomes in research studies. However, additional research needs to be conducted to strengthen our understanding of positive activities and the aspects of those activities that protect youth from risk. To that end, the Forum co-sponsored the Indicators of Positive Development conference to conceptualize, define, and measure positive youth development. The child care background measure shows participation rates in extracurricular activities such as organized sports, clubs, arts, religious activities, and other school or community activities. In addition, the youth participation in volunteer activities measure was presented as a special feature in the America's Children, 2000 report.
- Youth violence. The indicator of serious violent crime offending by youth does not provide critical information on the experiences of youth in the criminal justice system, including the characteristics of youthful offenders and the number and characteristics of youth arrestees and detainees, those prosecuted in juvenile and adult courts, and those incarcerated in the Nation's juvenile facilities, jails, and prisons. Additional work is needed to produce a more comprehensive and useful picture of the number, experiences, and characteristics of youth within the criminal justice system.

Indicators of Children's Well-Being **Education Indicators** The education of children shapes their own personal development and life chances, as well as the economic and social progress of our Nation. This section presents key indicators of how well children are learning and progressing from early childhood through postsecondary school. Two indicators related to early childhood development are presented: family reading to young children and participation in early childhood care and education. Both measures are placeholders for a direct recurring assessment of what preschoolers know and can do, which is not yet available. Scores on national assessments of mathematics and reading for elementary, middle, and high school students are presented, followed by an indicator on advanced coursetaking. Completion rates for high school and college indicate the extent to which

students have attained a basic education and are prepared for higher levels of education or the workforce. By contrast, the indicator on youth neither enrolled in school nor working tracks the extent to which youth are at risk of limiting their future prospects at a critical stage of their lives.

Family Reading to Young Children

eading to young children promotes language acquisition and correlates with literacy development and, later on, with achievement in reading comprehension and overall success in school. 98 The percentage of young children read to daily by a family member is one indicator of how well young children are being prepared for school. Mother's education is related to whether children are read to by a family member.



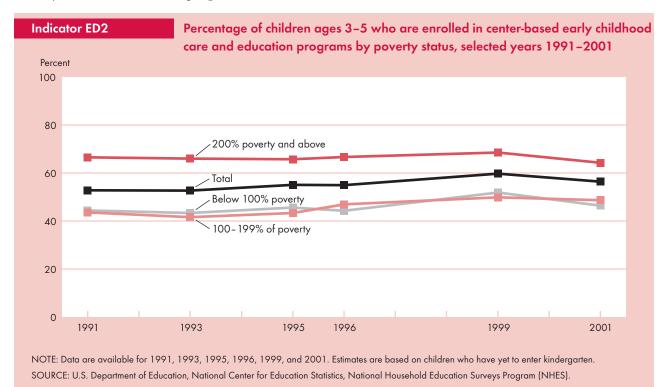
- In 2001, 58 percent of children ages 3–5 who were not yet in kindergarten were read to daily by a family member. This rate is higher than the rate in 1993 (53 percent). Between 1993 and 2001, the percentage has fluctuated between 53 and 58 percent.
- In 2001, 73 percent of children whose mothers had at least a bachelor's degree were read to every day. In comparison, daily reading occurred for 60 percent of children whose mothers had some postsecondary education, 49 percent of children whose mothers had completed high school but had no further education, and 41 percent of children whose mothers had less than a high school diploma.
- White, non-Hispanic children were more likely to be read to every day than either Black, non-Hispanic or Hispanic children. Sixty-four percent of White, non-Hispanic children, 47 percent of Black, non-Hispanic children, and 42 percent of Hispanic children were read to every day by a family member.

- Children in families with incomes 200 percent or greater than the poverty level were more likely to be read to daily by a family member (64 percent) than children in families with incomes below the poverty level (48 percent) or those in families with incomes at or above the poverty level but less than 200 percent of the poverty level (52 percent) in 2001.
- Children living with two parents were more likely to be read to every day than were children living with one parent. Sixty-one percent of children in two-parent households were read to every day in 2001, compared with 47 percent of children living with one parent.
- Children in the Northeast (62 percent) and West (59 percent) were more likely than their peers in the South (53 percent) to have been read to daily by a family member in 2001.

Bullets contain references to data that can be found in Table ED1 on page 151. Endnotes begin on page 73.

Early Childhood Care and Education

ike family reading, participation in an early childhood education program can provide preschoolers with skills and enrichment that can increase their chances of success in school. Studies have demonstrated that participation in high-quality early childhood education programs has short-term positive effects on IQ and achievement and long-term positive effects on low-income minority children's school completion. ⁹⁹ Until an ongoing direct measure of preschoolers' cognitive, behavioral, and social skills is available for this monitoring report, this indirect indicator monitors the percentage of children who are exposed to a variety of early childhood education programs.

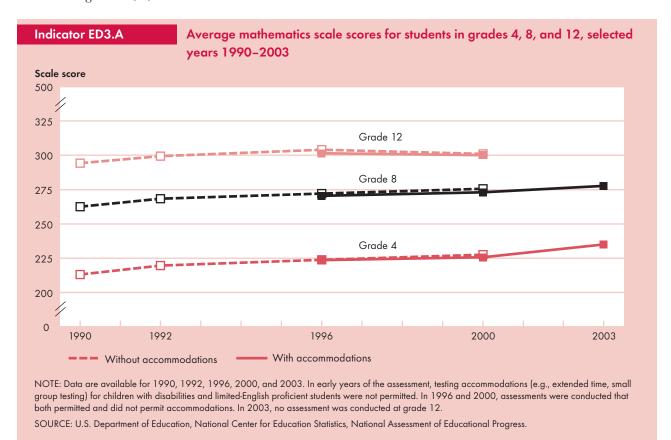


- In 2001, 56 percent of children ages 3–5 who had not yet entered kindergarten attended center-based early childhood care and education programs. These programs include day care centers, nursery schools, preschool programs, Head Start programs, and prekindergarten programs.
- Between 1991 and 2001, the percentage of children of this age attending early childhood programs fluctuated between 53 and 60 percent.
- Children living in poverty were less likely to attend these programs than were those living in families at or above 200 percent of poverty in 2001 (46 versus 64 percent).
- Children with more highly educated mothers are more likely to attend an early childhood program than their peers whose mothers have less education. Seventy percent of children whose mothers had at least a bachelor's degree attended such programs in 2001, compared with 38 percent whose mothers had less than a high school education.
- White, non-Hispanic and Black, non-Hispanic children are more likely than Hispanic children to attend an early childhood program. In 2001, 59 percent of White, non-Hispanic and 63 percent of Black, non-Hispanic children ages 3–5 attended such programs, compared with 40 percent of Hispanic children.
- Children with employed mothers are more likely to participate in early childhood care and education programs than children of mothers looking for work or not in the labor force.

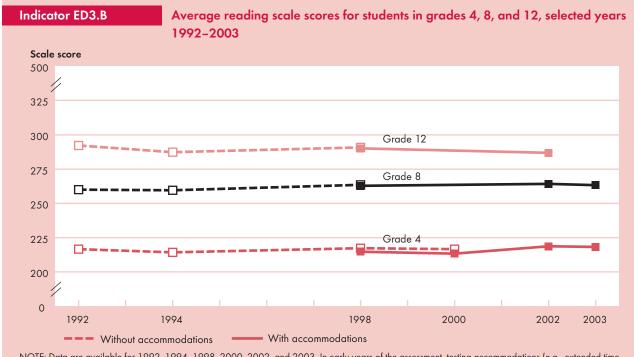
Bullets contain references to data that can be found in Table ED2 on page 152. Endnotes begin on page 73.

Mathematics and Reading Achievement

he extent and content of students' knowledge, as well as their ability to think, learn, and communicate, affect their ability to succeed in the labor market as adults. On average, students with higher test scores will earn more and will be unemployed less often than students with lower test scores. Mathematics and reading achievement test scores are important measures of students' skills in these subject areas, as well as good indicators of overall achievement in school. To assess progress in mathematics and reading, the National Assessment of Educational Progress measures national trends in the academic performance of students in grades 4, 8, and 12.



- At grades 4 and 8, average mathematics scores were higher in 2003 than in all previous assessments. At grade 12, the average score in 2000 was lower than in 1996 but remained higher than the score in 1990.
- In 2003, 32 percent of 4th-graders and 29 percent of 8th-graders were at or above the *Proficient* level, indicating solid academic achievement. The percentages of 4th- and 8th-graders at or above *Basic* (indicating partial mastery of prerequisite knowledge and skills) and *Proficient* and at *Advanced* (indicating superior performance) in mathematics in 2003 were higher than in all previous assessments.¹⁰¹
- At grades 4 and 8 in 2003 and at grade 12 in 2000, White, non-Hispanic students achieved higher mathematics scores than their Black, non-Hispanic and Hispanic peers and Hispanic students had higher average scores than Black, non-Hispanic students. At grade 4, the gap between the White, non-Hispanic and Black, non-Hispanic students decreased from 1990 to 2003. The gap between White, non-Hispanic and Black, non-Hispanic students at grades 8 and 12 and the gap between White, non-Hispanic and Hispanic students at all three grades did not change between 1990 and the most recent year of data (2003 for grades 4 and 8 and 2000 for grade 12).



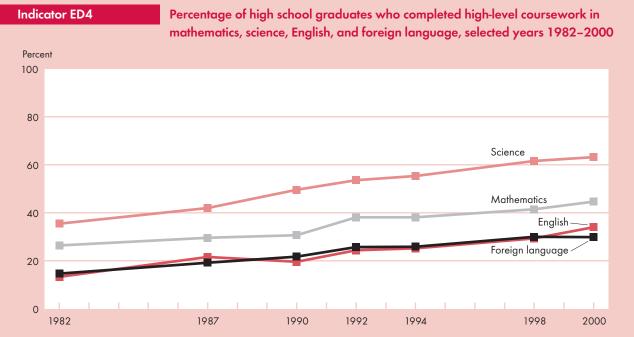
- NOTE: Data are available for 1992, 1994, 1998, 2000, 2002, and 2003. In early years of the assessment, testing accommodations (e.g., extended time, small group testing) for children with disabilities and limited-English proficient students were not permitted. In 1998 and 2000, assessments were conducted that both permitted and did not permit accommodations. Since 2003, all assessments have permitted accommodations. In 2003, no assessment was conducted at grade 12.
- SOURCE: U.S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress.
- At grade 4, there was no significant difference in average reading score from 1992 to 2003. At grade 8, there was a 1-point decline between 2002 and 2003, but the 2003 score was higher than in 1992. The average score at grade 12 was lower in 2002 than in 1992 or 1998.
- In 2003, 32 percent of 4th-graders were at or above the *Proficient* achievement level, indicating solid academic achievement, a higher percentage than in 1992. At grade 8, 32 percent of students were at or above *Proficient*, a higher percentage than in 1992. At grade 12, 36 percent were at or above *Proficient* in 2002, a lower percentage than in 1992. ¹⁰¹
- In reading, White, non-Hispanic students had higher reading scores in 2003 than their Black, non-Hispanic and Hispanic peers at grades 4 and 8 in 2003 and at grade 12 in 2002. There were no changes in the gaps between White, non-Hispanic students and their Black, non-Hispanic or Hispanic peers from 1992 to 2003 at grades 4 and 8 and from 1992 to 2002 at grade 12.

- Females had higher reading scores than males at grades 4 and 8 in 2003 and at grade 12 in 2002; in mathematics, males outperformed females at grades 4 and 8 in 2003 and at grade 12 in 2000.
- In both mathematics and reading, parents' education level was associated with higher achievement scores.¹⁰²

Bullets contain references to data that can be found in Tables ED3.A–ED3.C on pages 153–155. Endnotes begin on page 73.

High School Academic Coursetaking

Since A Nation at Risk was published in 1983, school reforms have emphasized increasing the number of academic courses students take in high school. Research has shown a strong relationship between the level of difficulty of courses students take and their performance on assessments. For both college-bound and non-college-bound students, assessment scores increased more for students taking advanced courses than for students who did not take advanced courses. Studies have also shown that students who take advanced coursework, such as calculus, in high school are more likely to enroll in college and succeed beyond college.



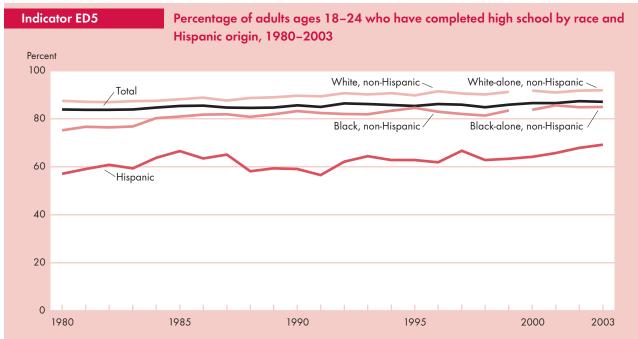
NOTE: Data are available for 1982, 1987, 1990, 1992, 1994, 1998, and 2000. High-level coursework includes the following: mathematics: courses above Algebra II; science: chemistry, physics, or advanced biology; English: more courses at the honors level than at the low academic or regular level; and foreign language: a third-year, fourth-year, or advanced placement course. For a detailed listing of courses, see Tables ED4.A, ED4.B, ED4.C, and ED4.D. SOURCE: U.S. Department of Education, National Center for Education Statistics, High School and Beyond Survey, National Education Longitudinal Study of 1988, and National Assessment of Educational Progress Transcript Study.

- Forty-five percent of high school graduates in 2000 had taken at least one advanced mathematics course (defined as a course above Algebra II), an increase from 26 percent of high school graduates in 1982. In addition, the percentage of graduates in 2000 taking a nonacademic or low-level academic course as their most advanced course was 7 percent, compared with 24 percent for graduates in 1982.
- In science, more than half (63 percent) of all high school graduates in 2000 had taken physics, chemistry, or advanced biology, more than the percentage of graduates in 1982 who had taken these courses (35 percent). In addition, the percentage of students who had taken a physical science course lower than biology, chemistry, and physics as their most advanced course dropped from 27 percent in 1982 to 9 percent in 2000.
- Thirty-four percent of all high school graduates in 2000 took honors-level English courses, an increase from 13 percent of graduates in 1982. There was no measurable difference between the percentage of graduates in 1982 and 2000 taking low academic level courses (10 and 11 percent, respectively).
- More high school students are taking foreign language courses. Thirty percent of high school graduates in 2000 had taken a third- or fourth-year or advanced placement course, compared with 15 percent of graduates in 1982. Seventeen percent of high school graduates in 2000 did not take any foreign language course, compared with 46 percent of graduates in 1982.

Bullets contain references to data that can be found in Tables ED4.A–ED4.D on pages 156–158. Endnotes begin on page 73.

High School Completion

high school diploma or its equivalent represents acquisition of the basic reading, writing, and mathematics skills a person needs to function in modern society. The percentage of young adults ages 18–24 with a high school diploma or an equivalent credential is a measure of the extent to which young adults have completed a basic prerequisite for many entry-level jobs and for higher education.



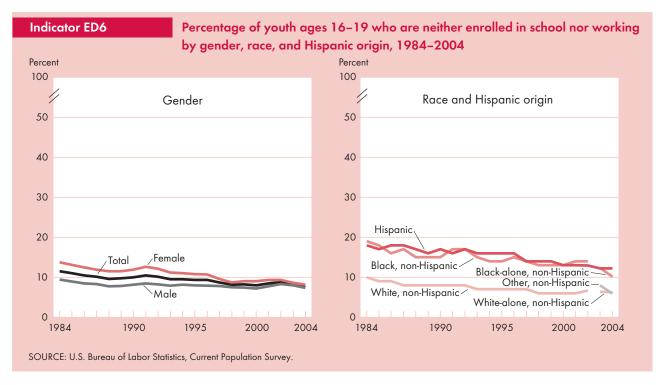
NOTE: Percentages are based only on those not currently enrolled in high school or below. Prior to 1992, this indicator was measured as completing 4 or more years of high school rather than the actual attainment of a high school diploma or equivalent. From 1980 to 1999, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. From 2000 to 2003, the revised 1997 OMB standards were used. Persons could select one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data from 2000 onward are not directly comparable with data from earlier years. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting. SOURCE: U.S. Census Bureau, Current Population Survey, October Supplement. Tabulated by the U.S. Department of Education, National Center for Education Statistics.

- In 2003, 87 percent of young adults ages 18–24 had completed high school with a diploma or an alternative credential such as a General Education Development (GED) certificate. The high school completion rate has increased slightly since 1980, when it was 84 percent.
- The rate at which Black, non-Hispanic youth completed high school increased between 1980 and 1990, from 75 percent to 83 percent. It has fluctuated since then, and was at 85 percent in 2003. Among White, non-Hispanics, the high school completion rate increased from 88 percent in 1980 to 92 percent in 2003.
- Hispanic youth have had a consistently lower high school completion rate than White, non-Hispanic and Black, non-Hispanic youth. The high school completion rate for Hispanic youth has increased from 57 percent in 1980 to 69 percent in 2003.
- Most young adults complete high school by earning a regular high school diploma. Others complete high school by earning an alternative credential, such as a GED. Between 1990 and 1999, the diploma rate declined by 4 percentage points, decreasing from 81 percent to 77 percent. In comparison, the alternative credential rate increased by 4 percentage points, from 5 to 9 percent. ¹⁰⁵

Bullets contain references to data that can be found in Table ED5 on page 159. Endnotes begin on page 73.

Youth Neither Enrolled in School Nor Working

he transition from adolescence to adulthood is a critical period in each individual's life. Youth ages 16–19 who are neither in school nor working are detached from both of the core activities that usually occupy teenagers during this period. Detachment from school or the workforce, particularly if it lasts for several years, puts youth at increased risk of having lower earnings and a less stable employment history than their peers who stayed in school and/or secured jobs. ¹⁰⁶ The percentage of youth who are not enrolled in school and not working is one measure of the proportion of young people who are at risk of limiting their future prospects.

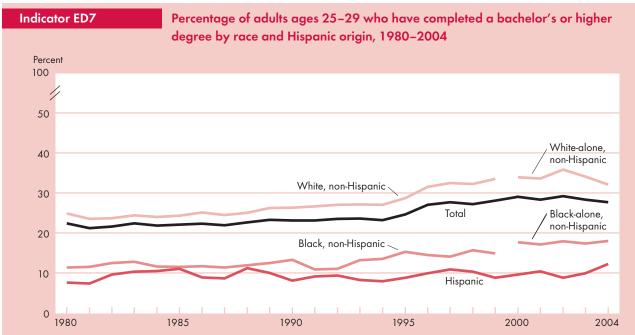


- In an average week during the 2004 school year, about 8 percent of youth ages 16–19 were neither enrolled in school nor working.
- The proportion of youth neither enrolled nor working has been on a downward trend, and most of the decline in this proportion has occurred among young females. In 1991, 13 percent of young females were neither in school nor working; by 2004, this proportion had decreased to 8 percent. Nevertheless, young females continue to be slightly more detached from these activities than young males.
- Black-alone, non-Hispanic youth and Hispanic youth are considerably more likely to be detached from these activities than White-alone, non-Hispanic youth or Other, non-Hispanic youth. In 2004, 12 percent of Hispanic youth and 10 percent of Black-alone, non-Hispanic youth were neither in school nor working, compared with 6 percent of White-alone, non-Hispanic youth and 6 percent of Other, non-Hispanic youth.¹
- The proportion of Black-alone, non-Hispanic youth who were neither in school nor working was 10 percent in 2004, down from 12 percent in 2003. More Black-alone, non-Hispanic youth moved from the category "not enrolled in school and not working" into the category of "enrolled in school and not working" in 2004 (not shown in table ED6.A).¹
- Older youth, ages 18–19, are more than three times as likely to be detached from these activities as youth ages 16–17. In 2004, 13 percent of youth ages 18–19 were neither enrolled in school nor working compared with 3 percent of youth ages 16–17.
- The percentage of youth who are both enrolled and employed was 25 percent in 2004, about the same as in the previous year. This proportion is down from 31 percent in 1999.

Bullets contain references to data that can be found in Tables ED6.A and ED6.B on pages 160–161. Endnotes begin on page 73.

Higher Education

igher education, especially completion of a bachelor's or a more advanced degree, generally enhances a person's employment prospects and increases his or her earning potential.¹⁰⁷ The percentage of young adults who have completed a bachelor's degree or higher is one measure of the percentage of young people who have successfully applied for and persisted through a program of higher education.



NOTE: From 1980 to 1999, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. From 2000 to 2003, the revised 1997 OMB standards were used. Persons could select one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data from 2000 onward are not directly comparable with data from earlier years. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

SOURCE: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplement. Tabulated by the U.S. Department of Education, National Center for Education Statistics.

- In 2004, 28 percent of adults ages 25–29 had earned a bachelor's or higher degree.
- This percentage increased between 1980 and 2004 from 23 to 28 percent; since 1996, the percentage has fluctuated between 27 and 29 percent.
- White-alone, non-Hispanic persons ages 25–29 were more likely than both Black-alone, non-Hispanics and Hispanics in the same age group to have earned at least a bachelor's degree. In 2004, 32 percent of White-alone, non-Hispanics, 18 percent of Black-alone, non-Hispanics, and 12 percent of Hispanics in this age group had earned a bachelor's degree or higher.¹
- The percentage of Hispanic adults ages 25–29 in 2004 who had earned at least a bachelor's degree (12 percent) was higher than the percentage in either 1980 (8 percent) or 2003 (10 percent).

- The percentage of Black-alone, non-Hispanic persons ages 25–29 who had earned at least a bachelor's degree increased from 12 percent in 1980 to 18 percent in 2004.¹
- Females were more likely than males to have earned a bachelor's degree or higher in 2004 (30 versus 26 percent, respectively). They were also more likely than males to have earned an associate's degree without subsequently earning a bachelor's degree.
- In 2004, 8 percent of adults ages 25–29 had earned an associate's degree but had not subsequently earned a bachelor's degree.

Bullets contain references to data that can be found in Table ED7 on page 162. Endnotes begin on page 73.

Indicator Needed

Education

Regular, periodic data collections are needed to collect information on young children's cognitive, social, and emotional development.

■ Early childhood development. Although this report offers indicators of young children's exposure to reading and early childhood education, a regular source of data is needed to monitor specific social, intellectual, and emotional skills of preschoolers over time. One assessment of kindergartners' skills and knowledge was presented as a special feature in *America's Children*, 2000.

Indicators of Children's Well-Being

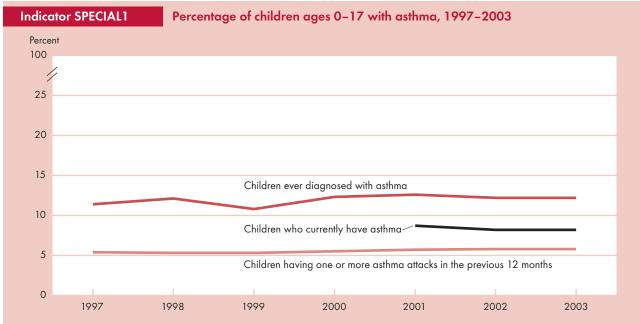
Special Features

pecial features provide an opportunity to present important information in addition to the key national indicators in this report.

This year's special features report on children with asthma, children wih specified blood lead levels, and parental reports of children's emotional and behavioral difficulties.

Asthma

sthma is a disease of the lungs that can cause wheezing, difficulty in breathing, and chest pain. It is one of the most common chronic diseases among children and is costly in both health and monetary terms. Asthma varies greatly in severity. Some children who have been diagnosed with asthma may not experience any serious respiratory effects. Other children may have mild symptoms or may respond well to management of their asthma, typically through the use of medication. Some children with asthma may suffer serious attacks that greatly limit their activities resulting in visits to emergency rooms or hospitals, or in rare cases, cause death. Environmental factors such as air pollution and secondhand tobacco smoke, log along with infections, exercise and allergens, can trigger asthma attacks in children who have the disease. Objective 24–2a of the Healthy People 2010 initiative aims to reduce hospitalizations for asthma for children under age 5 years.



NOTE: Children are identified as having asthma by asking parents "Has a doctor or other health professional EVER told you that your child has asthma?" If the parent answers YES to this question, they are then asked (1) "Does your child still have asthma?" and (2) "During the past twelve months, has your child had an episode of asthma or an asthma attack?" The question "Does your child still have asthma?" was introduced in 2001.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

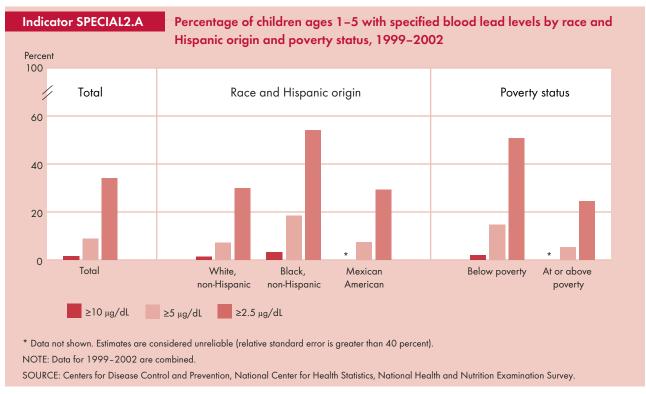
- In 2003, about 13 percent of children had been diagnosed with asthma at some time in their lives, though some of those children may no longer have asthma.
- About 9 percent of children were reported to currently have asthma in 2003. These include children with active asthma symptoms and those whose asthma is well-controlled.
- Approximately 6 percent of all children had one or more asthma attacks in the previous 12 months. These children have ongoing asthma symptoms that could put them at risk for poorer health outcomes, including hospitalizations and death. About two-thirds of children who currently have asthma have on-going asthma symptoms.
- In 2003, about 13 percent of Black-alone, non-Hispanic children were reported to currently have asthma, compared to 8 percent of White-alone, non-Hispanic and 7 percent of Hispanic children.¹

- Disparities exist within the Hispanic population such that 21 percent of Puerto Rican children were reported to currently have asthma, compared with 5 percent of Mexican children.
- From 1997–2003 the trends for these three asthma indicators remained fairly stable. Between 1980 and 1995, childhood asthma, as measured by the question, "During the past twelve months, did anyone in the family have asthma?" more than doubled (from about 4 percent in 1980 to approximately 8 percent in 1995). Methods for measurement of childhood asthma changed in 1997, so earlier data cannot be compared to data from 1997–2003.

Bullets contain references to data that can be found in Tables SPECIAL1.A and SPECIAL1.B on page 163. Endnotes begin on page 73.

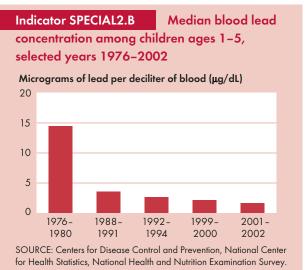
Lead in the Blood of Children

ead is a major environmental health hazard for young children. Childhood exposure to lead contributes to learning problems such as reduced intelligence and cognitive development.^{111–113} Studies have shown that childhood exposure to lead contributes to hyperactivity and distractibility,^{114–116} increases the likelihood of having a reading disability and lower vocabulary,¹¹⁷ and increases the risk for antisocial and delinquent behavior.¹¹⁸ A blood lead level of 10 micrograms per deciliter (μg/dL) or greater is considered elevated,^{119,120} but adverse health effects have been shown to occur at lower concentrations.^{112,113,121,122} Lead exposures have declined since the 1970s, due largely to the removal of lead from gasoline and fewer homes with lead-based paint.^{121,123} Dust contaminated by lead paint in older homes and lead in soil remain as potential sources of exposure.^{119,124–126} Children ages 1–5 years are particularly vulnerable because of frequent hand-to-mouth behavior. Objective 8–11 of the Healthy People 2010 initiative aims to eliminate elevated blood lead levels in children.



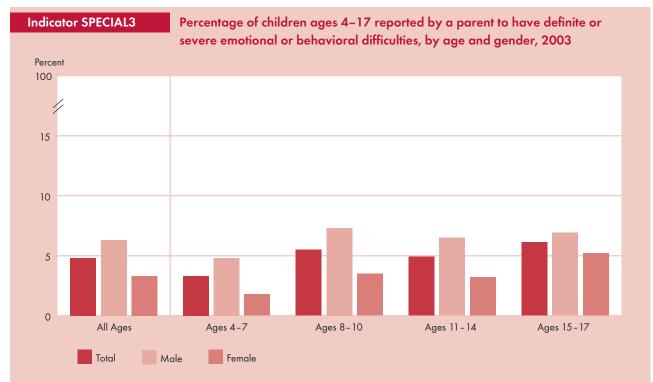
- In 1999–2002, about 2 percent of children ages 1–5 had elevated blood lead levels [greater than or equal to 10 micrograms per deciliter (μg/dL)]. This is a substantial decline from the approximately 88 percent of children in 1976–1980 with blood lead levels at or above 10 μg/dL.
- About 19 percent of Black, non-Hispanic children, 7 percent of White, non-Hispanic children, and 7 percent of Mexican American children had blood lead levels at or above 5 μg/dL in 1999–2002.
- Children in homes with incomes below poverty generally had greater blood lead levels than children in homes above poverty.
- The median blood lead concentration for children ages 1–5 dropped from about 14 micrograms per deciliter (μg/dL) in 1976–1980 to about 2 μg/dL in 2001–2002, a relative decline of 89 percent.

Bullets contain references to data that can be found in Tables SPECIAL 2.A and SPECIAL 2.B on page 164. Endnotes begin on page 73.



Parental Reports of Emotional and Behavioral Difficulties

ood emotional and behavioral health enhances a child's sense of well-being, leads to satisfying social relationships at home and with peers, and leads to achievement of full academic potential.¹²⁷ Children with emotional and behavioral difficulties may have problems managing their emotions, focusing on tasks, and/or controlling their behavior. These difficulties, which may persist throughout a child's development and can lead to lifelong disability, ^{127,128} are usually first noticed by parents. Parents' reports are crucial to alerting doctors about their child's emotional and behavioral difficulties and to obtaining mental health services. ¹²⁹



NOTE: Children with definite or severe emotional or behavioral difficulties are defined as those whose parent responded "yes, definite" or "yes, severe" to the following question on the Strengths and Difficulties Questionnaire (SDQ): 130 "Overall, do you think that (child) has any difficulties in one or more of the following areas: emotions, concentration, behavior, or being able to get along with other people?" Response choices were: (1) no; (2) yes, minor difficulties; (3) yes, definite difficulties; (4) yes, severe difficulties.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

- In 2003, 5 percent of children ages 4–17 were reported by a parent to have definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people.
- The percentage of children with definite or severe emotional or behavioral difficulties differed by age and gender. The overall percentage for males was 6 percent; it ranged from a low of 5 percent among ages 4–7 to a high of 7 percent among ages 8–10 and 15–17. The overall percentage for females was 3 percent; it ranged from a low of 2 percent among ages 4–7 to a high of 5 percent among ages 15–17.
- Eight percent of children living below the poverty level had definite or severe difficulties, compared with 6 percent of children in near-poor families (those with family incomes 100–199 percent of the poverty level) and 5 percent of children in non-poor families (those with family incomes 200 percent or more of the poverty level).¹³¹
- Four percent of children in families with two parents, 7 percent of children in mother-only families, and 4 percent in father-only families were reported to have definite or severe emotional or behavioral difficulties. Nine percent of children not living with either parent were reported to have definite or severe difficulties. This group includes children cared for by other relatives such as a grandparent.
- Sixty-five percent of parents who reported their child had definite or severe emotional or behavioral difficulties also reported contacting a mental health professional or general doctor and/or that the child received special education for these difficulties. Nine percent of parents reported that they wanted mental health care for their child, but could not afford it.

Bullets contain references to data that can be found in Tables SPECIAL 3.A and SPECIAL 3.B on pages 165–166. Endnotes begin on page 73.

Indicators of Children's Well-Being

Special Section

Structure and Children's Well-Being. It provides family structure breakouts for five indicators selected from the Population and Family Characteristics, Health, and Education sections of America's Children.

Family Structure and Children's Well-Being

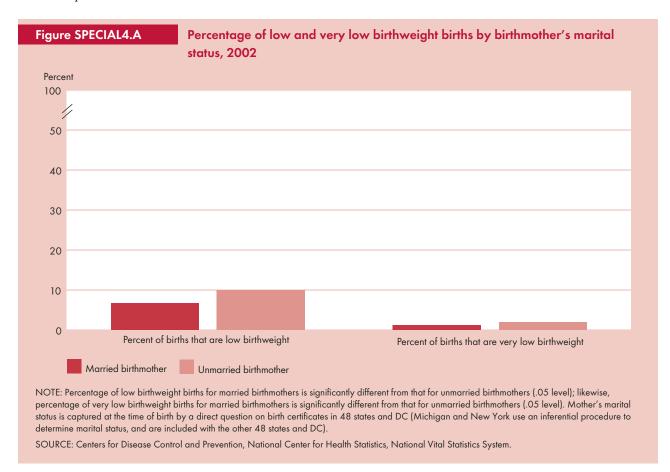
hildren are born into and grow up in a variety of family structures. Research using a range of data sets and analytic approaches consistently shows that children's well-being is associated with family structure, usually defined as the number, type, and marital status of parents or guardians. Research shows that a wide range of other factors also contribute to child outcomes, and that most children have positive outcomes in a number of different family structures. *America's Children* includes family structure as both an indicator (POP6.A and POP6.B) and as a breakout for several economic and education indicators (e.g., ECON1.A, ECON.2, ED.1, and ED.2). This special section further illustrates the associations between family structure and child well-being. Future volumes of *America's Children* will include breakouts by family structure for additional indicators, as well. These efforts carry on the Forum's work to improve measures of family structure across the Federal statistical system.

Analyzing data by family structure is a complex task for many reasons. First, classifying family types is difficult. Most current surveys do not collect detailed data on the relationships of all household members to one another. Second, most surveys do not collect historical data on changes in family structure over time. Third, the Federal statistical system does not have a standard in place that consistently characterizes family structure. Fourth, family structure has strong statistical associations with other factors related to child well-being, such as race, ethnicity, and socio-economic status. It is often difficult to disentangle the individual effects of each factor. Fifth, while family structure may affect child well-being, the characteristics of children may in turn affect family structure. Thus, group differences do not predict individual outcomes. Thus, the relationships between family structure and children's well-being are complex, and not all associations represent causal effects.

This special section presents five examples of indicators broken out by family structure. The two infant well-being indicators—low birthweight and infant mortality—use the measures and data sources currently reflected in HEALTH5 and HEALTH6, and are presented by birthmother's marital status. This is the one measure of family structure available in data provided by the National Vital Statistics System. The three adolescent indicators—school enrollment, health, and unmarried teen motherhood—utilize the same data source used in indicators POP6.B and POP8.B (the Survey of Income and Program Participation, or SIPP). The data presented show that associations between family structure and these child outcomes generally persist within groups defined by race and ethnicity, mother's age, and family income.

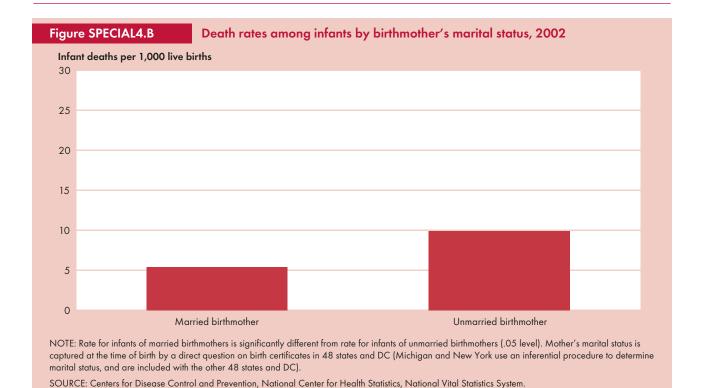
Family Structure and Infant Well-Being

In 2002, 66 percent of all births were to married mothers, and 34 percent were to unmarried mothers. Figures SPECIAL4.A and SPECIAL4.B show differences in rates of low birthweight and infant mortality between infants born to married and unmarried mothers. Birthweight is one of the most important predictors of an infant's survival chances. In 2002, low birthweight babies (8 percent of all babies) made up two-thirds of all infant deaths. Low birthweight births are defined as infants less than 2,500 grams, or 5 lb. 8 oz., and very low birthweight births are defined as infants less than 1,500 grams, or 3 lb. 4 oz. Infant mortality rate is defined as deaths before first birthday in a calendar year divided by 1,000 live births during the same period.



Low and very low birthweight births

- In 2002, 7 percent of births to married mothers were low birthweight, compared with 10 percent of births to unmarried mothers. In the same year, 1 percent of births to married mothers were very low birthweight, compared with 2 percent of births to unmarried mothers.
- Babies born to unmarried mothers are more likely to be low birthweight than those born to married mothers, both overall and for each racial and ethnic group. In 2002, 6 percent of infants born to married White, non-Hispanic birthmothers were low birthweight, compared to 9 percent of infants born to unmarried birthmothers in the same group. The pattern of low-birthweight rates for
- Black, non-Hispanic mothers was similar, with unmarried mothers having higher rates: 12 percent for married mothers, and 14 percent for unmarried mothers. Similarly, the low-birthweight rate for married Hispanic mothers was 6 percent, and for unmarried Hispanic mothers, it was 7 percent.
- Across all age groups, married birthmothers have a lower rate of low birthweight births than unmarried birthmothers. For example, in 2002, 7 percent of infants born to married birthmothers ages 20–24 were low birthweight, compared with 9 percent of infants born to unmarried birthmothers ages 20–24.



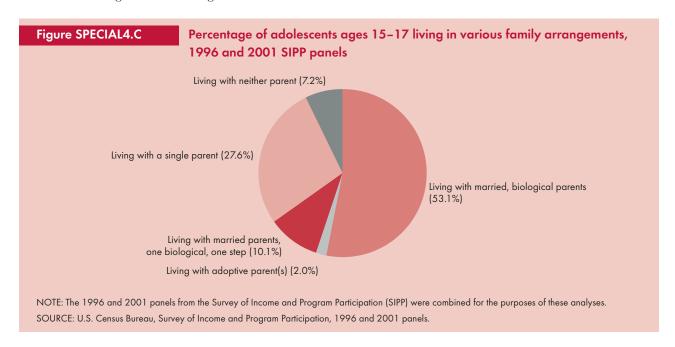
Infant mortality

- In 2002, the mortality rate for infants born to married mothers was 5 deaths per 1,000 live births, compared with 10 per 1,000 live births for infants born to unmarried mothers.
- The infant mortality rate is higher for unmarried birthmothers, both overall and for each racial and ethnic group. In 2002, the infant mortality rate was 5 deaths per 1,000 live births for White, non-Hispanic married birthmothers and 9 deaths per 1,000 live births for unmarried birthmothers of that group. The corresponding rates for Black, non-Hispanic birthmothers were 12 and 15; for Hispanic birthmothers, the rates were 5 and 6.
- Across all age groups, infant mortality rates are lower for married birthmothers than for unmarried birthmothers. For example, in 2002, the infant mortality rate was 6 deaths per 1,000 live births among married birthmothers ages 20–24, and 10 deaths per 1,000 live births among unmarried birthmothers of this age group.

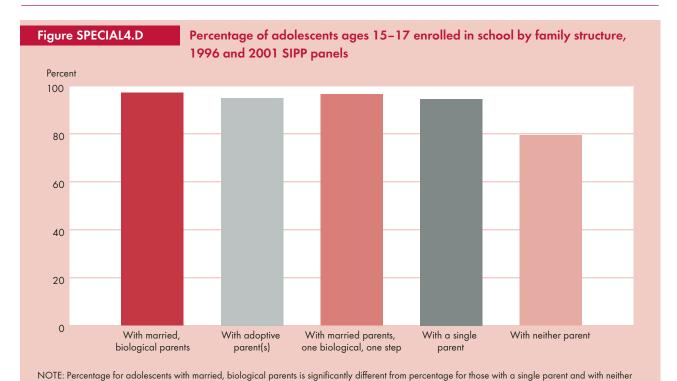
Bullets contain references to data that can be found in Tables SPECIAL4.A and SPECIAL4.B on pages 167–168. Endnotes begin on page 73.

Family Structure and Adolescent Well-Being

dolescents ages 15–17 live in many different family arrangements. The Survey of Income and Program Participation (SIPP), a longitudinal survey with national panels introduced every 3 to 4 years, provides a unique opportunity to examine detailed family structures. The following analyses illustrate that most adolescents in all family structures were enrolled in school and were reported to be in excellent or very good health, and that most adolescent girls in all family structures did not become unmarried teen birthmothers. Note that, in the following figures, the "single parent" group includes children living with a single biological parent and a cohabiter (whether a biological parent or not), a single biological parent and one or more adult relatives, or a single biological parent without other adults. The "neither parent" group includes children living with relatives, as well as those living alone or with nonrelatives. The bullets below and on the following pages describe significant differences between adolescents living with married, biological parents and adolescents living in other arrangements. The survey of Income and Program Participation of the survey of Income and Program Participation of the survey of Income and Program Participation of Income and Participation of Income and Participation of Income and Participation of Income and Program Participation of Income and Program Participation of Income and



■ Combined data from the 1996 and 2001 SIPP panels indicate that 53 percent of adolescents ages 15–17 were living with two married, biological parents, 2 percent with adoptive parent(s), 10 percent with two married parents (one biological and one step), 28 percent with a single parent, and 7 percent with neither parent.

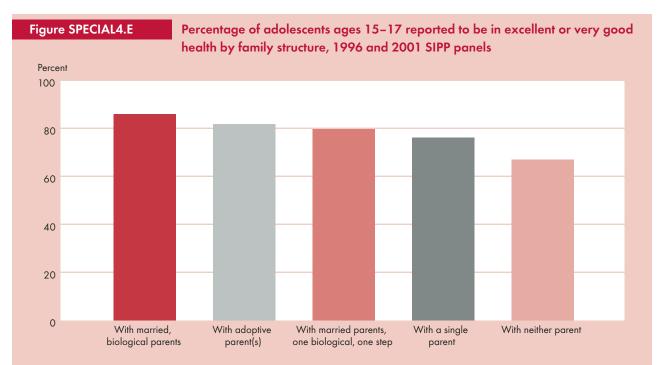


parent (.05 level). Percentage for adolescents with married, biological parents is not significantly different from percentage for those with adoptive parent(s) or a stepparent. The 1996 and 2001 panels from the Survey of Income and Program Participation (SIPP) were combined for the purposes of these analyses. SOURCE: U.S. Census Bureau, Survey of Income and Program Participation, 1996 and 2001 panels.

Adolescent school enrollment

- Combined data from the 1996 and 2001 SIPP panels show that 95 percent of adolescents ages 15–17 were enrolled in school. For those adolescents ages 15–17 living with their married, biological parents, 97 percent were enrolled in school, compared with 94 percent of those living with a single parent, and 79 percent of those not living with either parent.
- Overall, 97 percent of adolescents ages 15–17 whose family's income was more than twice the poverty line were enrolled in school. Among adolescents whose family's income was more than twice the poverty line, 98 percent of those living with their married biological parents were enrolled in school, compared with 96 percent of those living with a single parent, and 82 percent of those not living with either parent.¹³⁹

Bullets contain references to data that can be found in Tables SPECIAL4.C and SPECIAL4.D on pages 169–170. Endnotes begin on page 73.

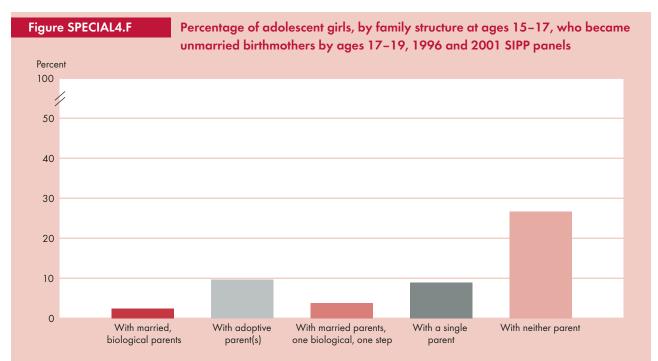


NOTE: Percentage for adolescents with married, biological parents is significantly different from percentage for those with a stepparent, with a single parent, and with neither parent (.05 level). Percentage for adolescents with married, biological parents is not significantly different from percentage for those with adoptive parent(s). The 1996 and 2001 panels from the Survey of Income and Program Participation (SIPP) were combined for the purposes of these analyses.

SOURCE: U.S. Census Bureau, Survey of Income and Program Participation, 1996 and 2001 panels.

Adolescent health reports

- Combined data from the 1996 and 2001 Survey of Income and Program Participation (SIPP) panels show that 81 percent of adolescents ages 15–17 were reported to be in excellent or very good health. Eighty-six percent of adolescents ages 15–17 who lived with their biological married parents were reported to be in excellent or very good health, compared with 80 percent of those living with two married parents (one biological and one step), 76 percent of those living with a single parent, and 67 percent of those not living with either parent.
- Overall, 84 percent of adolescents ages 15–17 whose family's income was more than twice the poverty line were reported to be in excellent or very good health. Among adolescents ages 15–17 whose family's income was more than twice the poverty line, the report of excellent or very good health status remained highest for those that lived with their married, biological parents (87 percent). In contrast, 81 percent of adolescents living with two married parents (one biological and one step), 79 percent of those living with a single parent, and 69 percent of those not living with either parent were reported to enjoy excellent or very good health.



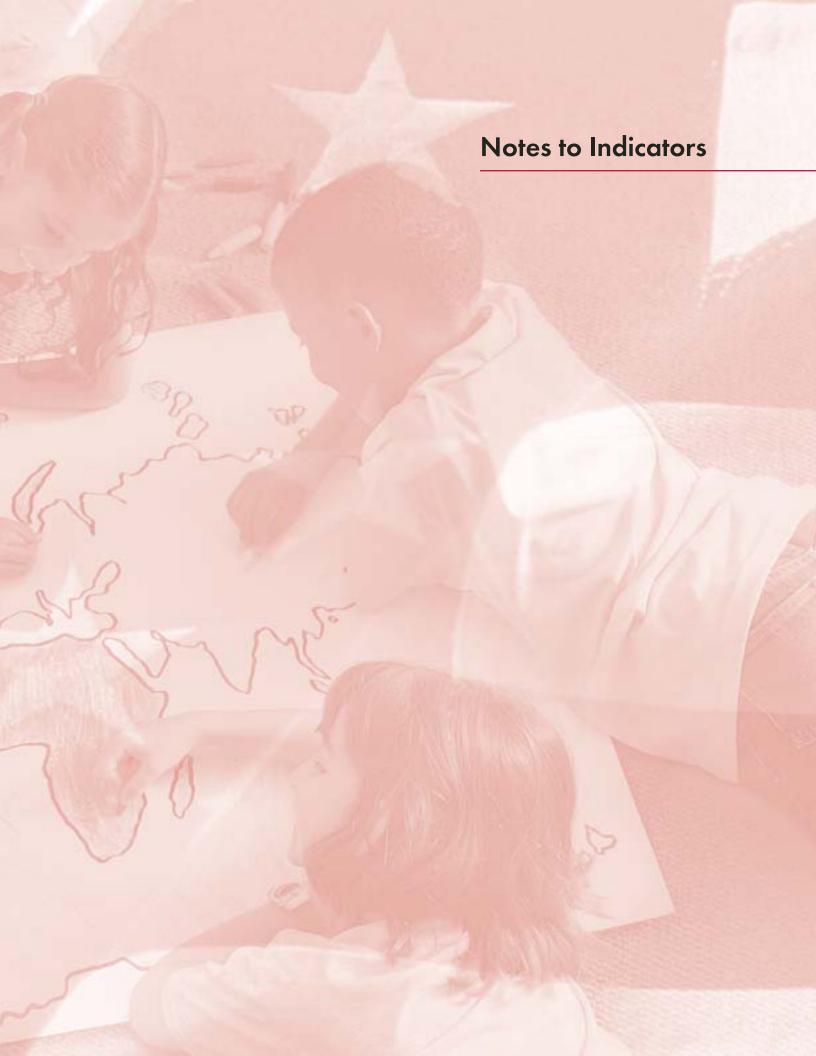
NOTE: Percentage for adolescents with married, biological parents is significantly different from percentage for those with a single parent and with neither parent (.05 level). Percentage for adolescents with married, biological parents is not significantly different from percentage for those with adoptive parent(s) or a stepparent. Family structure was measured in 1996 and 2001, at ages 15–17; data on unmarried motherhood was collected over the two succeeding years. The 1996 and 2001 panels from the Survey of Income and Program Participation (SIPP) were combined for the purposes of these analyses.

SOURCE: U.S. Census Bureau, Survey of Income and Program Participation, 1996 and 2001 panels.

Unmarried teen birthmothers

- Combined data from the 1996 and 2001 SIPP panels show that 6 percent of all girls ages 15–17 became unmarried mothers by ages 17–19. Among girls ages 15–17 who lived with their biological married parents at the start of the survey, 2 percent became unmarried mothers by ages 17–19, compared with 9 percent of those who lived with a single parent, and 27 percent of those who did not live with either parent.
- Overall, 3 percent of girls ages 15–17 whose family's income was more than twice the poverty line became unmarried mothers by ages 17–19. The rate was 2 percent among girls living with married, biological parents, 7 percent among girls living with a single parent, and 22 percent among girls not living with either parent.
- Differences in unmarried teen motherhood by family structure persist for each racial and ethnic group. Among White, non-Hispanic girls ages 15–17 who lived with both married, biological parents, 2 percent became unmarried mothers by ages 17–19, compared with 5 percent of those who lived with a single parent, and 23 percent of those who did not live with either parent. Among Black, non-Hispanic girls ages 15-17 who lived with both biological married parents, 6 percent became unmarried mothers by ages 17–19, compared with 13 percent of those who lived with a single parent, and 25 percent of those who did not live with either parent. Among Hispanic girls ages 15-17 who lived with both biological married parents, 5 percent became unmarried mothers by ages 17–19, compared with 18 percent of those who lived with a single parent, and 42 percent of those who did not live with either parent.

Bullets contain references to data that can be found in Tables SPECIAL4.E and SPECIAL4.F on pages 171–172. Endnotes begin on page 73.



Notes to Indicators

- ¹ In this report, people who responded to the question on race by indicating only one race are referred to as the "race-alone" population. For example, those who indicated their race as only "White" and no other race are referred to as "White-alone."
- ² Schmidley, A. D. (2001). *Profile of the Foreign-Born Population of the United States: 2000*, Current Population Reports. P23–206, U.S. Government Printing Office, Washington, DC: U.S. Census Bureau, available at http://www.census.gov/prod/2002pubs/p23-206.pdf. For more information on the nativity of the population since 1850 (based on decennial censuses), see Gibson, C.J., and Lennon, E. (1999). *Historical Census Statistics on the Foreign-Born Population of the United States: 1850–1990*, Population Division Working Paper No. 29. Washington, DC: U.S. Census Bureau, available at http://www.census.gov/population/www/documentation/twps0029/twps0029.html. Additionally, data on the nativity of the population have been available from the Current Population Survey since 1994.
- ³ Larsen, L.J. (2004). *The Foreign-Born Population in the United States: March 2000*, Current Population Reports. P20–551. Washington, DC: U.S. Census Bureau, available at http://www.census.gov/prod/2004pubs/p20-551.pdf
- ⁴ Shields, M.K., and Behrman, R.E. (2004). Children of Immigrant Families: Analysis and Recommendations. *The Future of Children*, 14(2), 4–16.
- ⁵ Adult respondents were asked if the children in the household spoke a language other than English at home and how well they could speak English. Categories used for reporting how well children could speak English were "Very well," "Not well," and "Not at all." All those who were reported to speak English less than "Very well" were considered to have difficulty speaking English based on an evaluation of the English-speaking ability of sample children in the 1980s.
- ⁶ A linguistically isolated household is one in which no person age 14 or over speaks English at least "Very well." That is, no person age 14 or over speaks only English at home, or speaks another language at home and speaks English "Very well."
- ⁷ The majority of children who live with neither parent are living with grandparents or other relatives. Some live with foster parents or other nonrelatives.
- ⁸ The category "two married parents" includes children who live with a biological, step, or adoptive parent who is married with his or her spouse present. If a second parent is present and not married to the first parent, then the child is identified as living with a single parent.
- ⁹ National Center for Health Statistics. (1995). *Report to Congress on out-of-wedlock childbearing*. Hyattsville, MD: National Center for Health Statistics.
- ¹⁰ McLanahan, S. (1995). The consequences of nonmarital childbearing for women, children, and society. In National Center for Health Statistics, *Report to Congress on out-of-wedlock childbearing*. Hyattsville, MD: National Center for Health Statistics.
- ¹¹ Martin, J.A., Hamilton, B.E., Sutton, P.D., Ventura, S.J., Menacker, F., and Munson, M.L. (2003). Births: Final data for 2002. *National Vital Statistics Reports*, *52*(10). Hyattsville, MD: National Center for Health Statistics.
- ¹² Ventura, S.J., (1995). Births to unmarried mothers: United States, 1980–92. *Vital and Health Statistics*, *53*(Series 21). Hyattsville, MD: National Center for Health Statistics.
- ¹³ Ventura, S.J., and Bachrach, C.A. (2000). Nonmarital childbearing in the United States, 1940–99. *National Vital Statistics Reports*, 48(16). Hyattsville, MD: National Center for Health Statistics.
- ¹⁴ Mathews, T.J., Menaker, F., and MacDorman, M.M. (2004). Infant mortality statistics from the 2002 Period Linked Birth/Infant Death Data Set. *National Vital Statistics Reports*, *53*(10). Hyattsville, MD: National Center for Health Statistics.

- ¹⁵ Hamilton, B.E., Martin, J.A., and Sutton, P.D. (2004). Births: Preliminary data for 2003. *National Vital Statistics Reports*, *53*(9). Hyattsville, MD: National Center for Health Statistics.
- ¹⁶ Hamilton, B.E., Sutton, P.D., and Ventura, S.J. (2003). Revised birth and fertility rates for the 1990s: United States, and new rates for Hispanic populations, 2000 and 2001. *National Vital Statistics Reports*, *51*(12). Hyattsville, MD: National Center for Health Statistics.
- ¹⁷ Bumpass, L.L., and Lu, H.H. (2000). Trends in cohabitation and implications for children's family contexts in the United States. *Population Studies*, *54*, 29–41.
- ¹⁸ Bachu, A. (1999). Trends in premarital childbearing: 1930 to 1994. *Current Population Reports*, P23–197. Washington, DC: U.S. Census Bureau.
- ¹⁹ Chandra, A., Martinez, G.M., Mosher, W.D., Abma, J.C., and Jones, J. (2005, forthcoming). Fertility, family planning, and reproductive health of U.S. women: Data from the 2002 National Survey of Family Growth. *Vital and Health Statistics*, Series 23, Number 25. Hyattsville, MD: National Center for Health Statistics.
- ²⁰ The birth rate for unmarried women is the number of births per 1,000 unmarried women in a given age group, for example, 20–24 years. The percentage of all births that are to unmarried women is the number of births occurring to unmarried women, divided by the total number of births. The percentage of all births that are to unmarried women is affected by the birth rate for married women, the birth rate for unmarried women (who account for nearly one-third of all births), and the proportion of women of childbearing age who are unmarried. The percentage of births to unmarried women increased very slightly in recent years, because increases in the birth rate for unmarried women were offset by increases in births for married women.
- ²¹ U.S. Census Bureau. (various years). Marital status and living arrangements (annual reports) and, beginning 1999, America's families and living arrangements. *Current Population Reports*, Series P–20. Beginning in 1995, reports are available on the U.S. Census Bureau website at http://www.census.gov/population/www/socdemo/ms-la.html and since 1999, at: http://www.census.gov/population/www/socdemo/hh-fam.html
- ²² National Center for Health Statistics. National Vital Statistics System. (2002). Unpublished tabulations.
- ²³ To provide a comprehensive picture of the child care arrangements parents use to care for their preschoolers, this indicator draws on the strengths of two different Federal data sets—the National Household Education Surveys Program (NHES) and the Survey of Income and Program Participation (SIPP). Using NHES (POP8.A) data, the percentage of children in each type of arrangement is shown, to provide total usage rates. Because some children are cared for by more than one type of provider, the numerator is the number of children in the particular arrangement and the denominator is all children. Using SIPP (POP8.B) data, the historical trend of the primary child care provider is shown because there is an interest in the care arrangement that is used by employed mothers for the greatest number of hours each week. In this case, the numerator is the number of children of employed mothers who spend the greatest number of hours in the particular arrangement each week and the denominator is all children of employed mothers.
- ²⁴ Center-based care includes day care centers, nursery schools, preschools and Head Start programs. Home-based care or other nonrelative care includes family day care providers, babysitters, nannies, friends, neighbors, and other nonrelatives providing care in either the child's or provider's home. Other relatives include siblings and other relatives. Mother care includes care by the mother while she worked. To see trends in individual child care arrangement types refer to Smith, K. (2002). Who's minding the kids? Child care arrangements: Spring 1997. *Current Population Reports*, P70–86. U.S. Census Bureau, Washington, DC.
- ²⁵ U.S. Environmental Protection Agency. (1994). Supplement to the Second Addendum (1986) to Air Quality Criteria for Particulate Matter and Sulfur Oxides (1982): Assessment of new findings on sulfur dioxide acute exposure health effects in asthmatic individuals (EPA/600/FP–93/002). Research Triangle Park, NC: U.S. Environmental Protection Agency.

- ²⁶ U.S. Environmental Protection Agency. (1995). *Review of the National Ambient Air Quality Standards for Nitrogen Oxides: Assessment of scientific and technical information* (EPA–452/R–95–005). Research Triangle Park, NC: U.S. Environmental Protection Agency.
- ²⁷ U.S. Environmental Protection Agency. (1996). *Air quality criteria for ozone and related photochemical oxidants* (EPA/600/P–93/004aF). Research Triangle Park, NC: U.S. Environmental Protection Agency.
- ²⁸ U.S. Environmental Protection Agency. (2004). *Air quality criteria for particulate matter* (EPA/600/P–99/002aF, EPA/600/P–99/002bF). Research Triangle Park, NC: U.S. Environmental Protection Agency.
- ²⁹ U.S. Environmental Protection Agency. (1986). *Air quality criteria for lead: Volume III* (EPA–600/8–83/028cF). Research Triangle Park, NC: U.S. Environmental Protection Agency.
- ³⁰ U.S. Environmental Protection Agency. (2000). *Air quality criteria for carbon monoxide* (EPA 600/P-99/001F). Research Triangle Park, NC: U.S. Environmental Protection Agency.
- 31 Figure POP9.A now reflects new standards for PM $_{2.5}$ and ozone being implemented by the U.S. Environmental Protection Agency. These standards were put into place in 1997 to better protect public health, including children's health.
- ³² This measure does not differentiate between counties in which the Primary National Ambient Air Quality Standards are exceeded frequently or by a large margin and counties in which the standards are exceeded only rarely or by a small margin. It must also be noted that this analysis differs from the analysis utilized by the U.S. Environmental Protection Agency for the designation of "nonattainment areas" for regulatory compliance purposes.
- ³³ Burnett R.T., Cakmak, S., Brook, J.R., and Krewski, D. (1997). The role of particulate size and chemistry in the association between summertime ambient air pollution and hospitalization for cardiorespiratory diseases. *Environmental Health Perspectives*, 105(6), 614–620.
- ³⁴ Burnett, R.T., Smith-Doiron, M., Stieb, D., Cakmak, S., and Brook, J.R. (1999). Effects of particulate and gaseous air pollution on cardiorespiratory hospitalizations. *Archives of Environmental Health*, *54*(2), 130–139.
- ³⁵ Gwynn, R.C., Burnett, R.T., and Thurston, G.D. (2000). A time-series analysis of acidic particulate matter and daily mortality and morbidity in the Buffalo, New York, region. *Environmental Health Perspectives*, 108(2), 125–133.
- ³⁶ Thurston, G., Kazuhiko, I., Hayes, C., Bates, D., and Lippmann, M. (1994). Respiratory hospital admissions and summertime haze air pollution in Toronto, Ontario; Consideration of the role of acidic aerosols. *Journal of Exposure Analysis and Environmental Epidemiology*, *2*, 429–450.
- ³⁷ Benninger, M.S. (1999). The impact of cigarette smoking and environmental tobacco smoke on nasal and sinus disease: A review of the literature. *American Journal of Rhinology*, *13*(6), 435–438.
- ³⁸ Dybing, E., and Sanner, T. (1999). Passive smoking, sudden infant death syndrome (SIDS) and childhood infections. *Human and Experimental Toxicology*, 18(4), 202–205.
- ³⁹ U.S. Environmental Protection Agency. (1992). *Respiratory health effects of passive smoking: Lung cancer and other disorders.* Washington, DC: EPA Office of Research and Development. Available at http://cfpub.epa.gov/ncea/cfm/ets/etsindex.cfm
- ⁴⁰ Mannino, D.M., Moorman, J.E., Kingsley, B., Rose, D., and Repace, J. (2001). Health effects related to environmental tobacco smoke exposure in children in the United States: Data from the Third National Health and Nutrition Examination Survey. *Archives of Pediatrics and Adolescent Medicine*, 155(1), 36–41.
- ⁴¹ Lanphear, B.P., Aligne, C.A., Auinger, P., Weitzman, M., and Byrd, R.S. (2001). Residential exposures associated with asthma in U.S. children. *Pediatrics*, 107(3), 505–511.

- ⁴² Gergen, P.J., Fowler, J.A., Maurer, K.R., Davis, W.W., and Overpeck, M.D. (1998). The burden of environmental tobacco smoke exposure on the respiratory health of children 2 months through 5 years of age in the United States: Third National Health and Nutrition Examination Survey, 1988 to 1994. *Pediatrics 101*(2), E8.
- ⁴³ National Academy of Sciences. (2000). *Clearing the air: Asthma and indoor air exposures.* Washington, DC: National Academy Press. Available at http://books.nap.edu/catalog/9610.html
- ⁴⁴ Lindfors, A., Hage-Hamsten, M.V., Rietz, H., Wickman, M., and Nordvall, S.L. (1999). Influence of interaction of environmental risk factors and sensitization in young asthmatic children. *Journal of Allergy and Clinical Immunology* 104, 755–762.
- ⁴⁵ Wahlgren, D.R., Hovell, M.F., Meltzer, E.O., and Meltzer, S.B. (2000). Involuntary smoking and asthma. *Current Opinions in Pulmonary Medicine* 6, 31–36.
- ⁴⁶ Mannino, D.M., Caraballo, R., Benowitz, N., and Repace, J. (2001). Predictors of cotinine levels in U.S. children: Data from the Third National Health and Nutrition Examination Survey. *CHEST*, *120*, 718–724.
- ⁴⁷ Regular smoking is defined as smoking by a resident that occurs 4 or more days per week.
- ⁴⁸ Duncan, G., and Brooks-Gunn, J. (Eds.). (1997). Consequences of growing up poor. New York, NY: Russell Sage Press.
- ⁴⁹ An, C., Haveman, R., and Wolfe, B. (1993). Teen out-of-wedlock births and welfare receipt: The role of childhood events and economic circumstances. *Review of Economics and Statistics*, 75(2), 195–208.
- ⁵⁰ To learn more about the U.S. Census Bureau's experimental measures, see Short, K. (2001). Experimental Poverty Measures: 1999. *Current Population Reports*, P60-216. Washington, DC: U.S. Census Bureau.
- ⁵¹ From 1999 onward, the poverty rate estimates for children could not be distinguished statistically from the previous low of 16 percent in 1979.
- ⁵² These income categories are similar to those used in the Economic Report of the President (1998). A similar approach is found in Hernandez, D.J. (1993). *America's children: Resources from family, government, and the economy.* New York, NY: Russell Sage Foundation for the National Committee for Research on the 1990 Census, except that Hernandez uses the relationship to median income to define his categories. For either method, the medium and high income categories are at similar levels of median family income.
- ⁵³ "Very high income" is 600 percent of the poverty threshold or more.
- ⁵⁴ Mayer, S.E. (1997). Income, employment and the support of children. In Hauser, R.M., Brown, B.V., and Prosser, W. (Eds.), *Indicators of children's well-being*. New York, NY: Russell Sage Press.
- ⁵⁵ Smith, J.R., Brooks-Gunn, J., and Jackson, A.P. (1997). Parental employment and children. In Hauser, R.M., Brown, B.V., and Prosser, W. (Eds.), *Indicators of children's well-being*. New York, NY: Russell Sage Press.
- ⁵⁶ Kaufman, T. (1996). *Housing America's future: Children at risk*. Washington, DC: National Low Income Housing Coalition.
- ⁵⁷ The definition includes households lacking complete plumbing for exclusive use, having unvented room heaters as the primary heating equipment, and having multiple upkeep problems such as water leakage, open cracks or holes, broken plaster, or signs of rats.
- ⁵⁸ Paying 30 percent or more of income for housing may leave insufficient resources for other basic needs. National Academy of Sciences. (1995). *Measuring poverty: A new approach*. Washington, DC: National Academy Press.

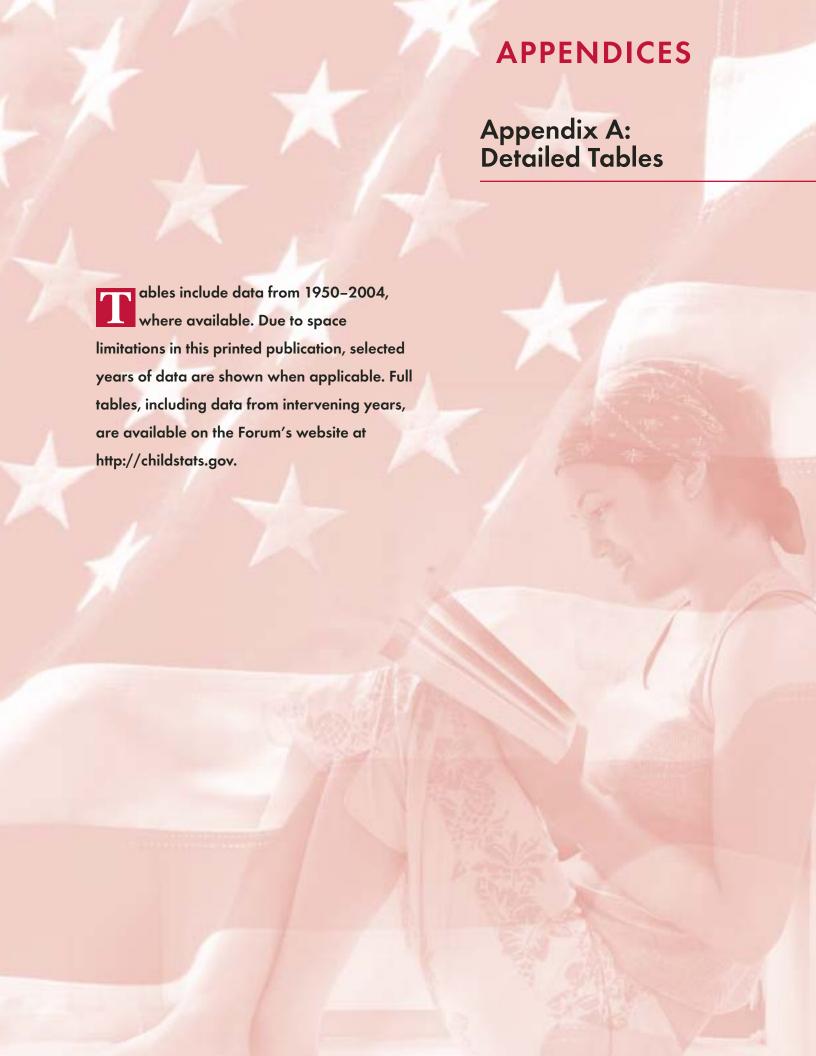
- ⁵⁹ Income-eligible families who report either severe housing cost burdens or severe physical problems with their housing and do not receive rental assistance are considered by the U.S. Department of Housing and Urban Development to have "priority" housing problems. Because of questionnaire changes, 1997 and 1999 data on assisted families, priority problems, and severe physical problems are not comparable to earlier data.
- ⁶⁰ "Very-low-income renters" are renter households with incomes at or below half the median family income, adjusted for household size, in their geographic area.
- ⁶¹ Life Sciences Research Office and American Institute of Nutrition. (1990). *Core indicators of nutritional state for difficult to sample populations.* Bethesda, MD: Life Sciences Research Office and American Institute of Nutrition.
- ⁶² Hunger refers to the uneasy or painful sensation caused by a lack of food—specifically, to involuntary lack of food because of inadequate money and other resources.
- ⁶³ Nord, M. (2002). Food Insecurity in Households with Children. Food Assistance Research Brief, Food Assistance and Nutrition Research Report FANRR34–13. Washington, DC: United States Department of Agriculture, Economic Research Service.
- ⁶⁴ For additional results and more details on the Healthy Eating Index and how it is computed, see Basiotis, P.P., Carlson, A., Gerrior, S.A., Juan, W.Y., and Lino, M. (2002). *The Healthy Eating Index: 1999–2000* (CNPP–12). Center for Nutrition Policy and Promotion. Washington, DC: U.S. Department of Agriculture. Available at http://www.cnpp.usda.gov/cnpp/Pubs/HEI/HEI99-00report.pdf
- ⁶⁵ The percentages of children covered by government and private insurance do not add up to the percentage of all children covered by health insurance because some children have both government and private insurance.
- ⁶⁶ Green, M. (Ed.). (1994). *Bright futures: Guidelines for health supervision of infants, children, and adolescents.* Arlington, VA: National Center for Education in Maternal and Child Health.
- ⁶⁷ Simpson, G., Bloom, B., Cohen, R.A., and Parsons, P.E. (1997). Access to health care. Part 1: Children. *Vital and Health Statistics*, 10(Series 196). Hyattsville, MD: National Center for Health Statistics.
- ⁶⁸ Bartman, B.A., Moy, E., and D'Angelo, L.J. (1997). Access to ambulatory care for adolescents: The role of a usual source of care. *Journal of Health Care for the Poor and Underserved*, *8*, 214–226.
- ⁶⁹ Folton, G.L. (1995). Critical issues in urban emergency medical services for children. *Pediatrics*, 96(2), 174–179.
- ⁷⁰ National Center for Health Statistics, *Health, United States, 2004 Chartbook on Trends in the Health of Americans.* Limitation of Activity: Children. Page 85.
- ⁷¹ Serdula, M.K., Ivery, D., Coates, R.J., Freedman, D.S., Williamson, D.F., and Byers, T. (1993). Do obese children become obese adults? A review of the literature. *Preventive Medicine*, 22, 167–177.
- ⁷² Pi-Sunyer, F.X. (1991). Health complications of obesity. *American Journal of Clinical Nutrition*, *53*, 15955–16035.
- ⁷³ Dietz, W.H. (1998). Health consequences of obesity in youth: Childhood predictors of adult disease. *Pediatrics*, 105, 518–525.
- ⁷⁴ Ogden, C.L., Flegal, K.M., Carroll, M.D., and Johnson, C.L. (2002). Prevalence and trends in overweight among U.S. children and adolescents, 1999–2000. *Journal of the American Medical Association*, 288(14), 1728–1732.
- ⁷⁵ Grunbaum, J.A., Kann, L., Kinchen, S.A., Ross, J.G., Hawkins, J., Lowry, R., Harris W.A., McManus, T., Chyen, D., and Collins, J. (2004). Youth Risk Behavior Surveillance—United States, 2003. *Morbidity and Mortality Weekly Report*, 2004: 53(SS02), 1–100.

- ⁷⁶ Kiely, J.L., Brett, K.M., Yu, S., and Rowley, D.L. (1994). Low birthweight and intrauterine growth retardation. In Wilcox, L.S., and Marks, J.S., (Eds.), *From data to action: CDC's public health surveillance for women, infants, and children* (pp. 185–202). Atlanta, GA: Centers for Disease Control and Prevention.
- ⁷⁷ Martin, J.A., and Park, M.M. (1999). Trends in twin and triplet births: 1980–97. *National Vital Statistics Reports*, 47(24). Hyattsville, MD: National Center for Health Statistics.
- ⁷⁸ Luke, B., and Martin, J.A. (2004). The rise in multiple births in the United States: Who, what, where and why. *Clinical Obstetrics and Gynecology*, 47(1), 118–133.
- ⁷⁹ MacDorman, M.F., Martin, J.A., Mathews, T.J., Hoyert, D.L., and Ventura, S.J. (2005). Explaining the 2001–02 Infant Mortality Increase: Data from the Linked Birth/Infant Death Data Set. *National Vital Statistics Reports*, *53*(12). Hyattsville, Maryland: National Center for Health Statistics.
- ⁸⁰ Kleinman, J.C., and Kiely, J.L. (1991). Infant mortality. *Healthy People 2000 Statistical Notes*, 1(2). Hyattsville, MD: National Center for Health Statistics.
- ⁸¹ No linked file was produced for data years 1992 through 1994, as a transition was made from cohort data to period data. For period linked files, the numerator consists of all infant deaths occurring in the period that have been linked to their corresponding birth certificates, whether the birth occurred in that year or the previous year. National Center for Health Statistics. (1997). Public use data file documentation: Linked birth/infant death data set—1995 period data. Hyattsville, MD: National Center for Health Statistics. Prager, K. (1994). Infant mortality by birthweight and other characteristics: United States, 1985 birth cohort. *Vital and Health Statistics, 20*(24). Hyattsville, MD: National Center for Health Statistics. MacDorman, M.F. and Atkinson, J.O. (1998). Infant mortality statistics from the linked birth/infant death data set—1995 period data. *Monthly Vital Statistics Report, 46*(6, Supplement 2). Hyattsville, MD: National Center for Health Statistics.
- 82 Estimates from the Fatality Analysis Reporting System, National Highway Traffic Safety Administration.
- ⁸³ Miniño, A.M., Anderson, R.N., Fingerhut, L.A., Warner, M., and Boudrealt, M.A. (2005). Deaths: Injuries, 2002. *National Vital Statistics Reports*, *53*. Hyattsville, MD: National Center for Health Statistics.
- ⁸⁴ Anderson, R.N., and Smith, B.L. (2005). Deaths: Leading causes for 2002. *National Vital Statistics Reports*, *53*. Hyattsville, MD: National Center for Health Statistics.
- ⁸⁵ Klerman, L.V. (1993). Adolescent pregnancy and parenting: Controversies of the past and lessons for the future. *Journal of Adolescent Health*, *14*, 553–561.
- ⁸⁶ Maynard, R.A. (Ed.) (1997). *Kids having kids: Economic costs and social consequences of teen pregnancy*. Washington, DC: The Urban Institute Press.
- ⁸⁷ Ventura, S.J., Mosher, W.D., Curtin, S.C., Abma, J.C., and Henshaw, S. (2000). Trends in pregnancies and pregnancy rates by outcome: Estimates for the United States, 1976–98. *Vital and Health Statistics*, *21*(56). Hyattsville, MD: National Center for Health Statistics.
- ⁸⁸ Ventura, S.J., Abma, J.C., Mosher, W.D., and Henshaw, S. (2004). Estimated pregnancy rates for the United States, 1990–2000: An Update. *National Vital Statistics Reports*, *52*(23). Hyattsville, MD: National Center for Health Statistics.
- ⁸⁹ Kessler, D.A., Witt, A.M., Barnett, P.S., et al. (1996). The Food and Drug Administration's regulation of tobacco products. *New England Journal of Medicine*, *335*(13), 988–994.
- ⁹⁰ Centers for Disease Control and Prevention. (1996). Projected smoking-related deaths among youth—United States. *Morbidity and Mortality Weekly Report*, 45(44), 971–974.
- ⁹¹ Blanken, A.J. (1993). Measuring use of alcohol and other drugs among adolescents. *Public Health Reports*, 108(Supplement 1).

- ⁹² National Institute on Drug Abuse. (1995). *Marijuana: Facts parents need to know* (NCADI Publication No. PHD712). Washington, DC: U.S. Department of Health and Human Services.
- ⁹³ Pope Jr., H.G. and Yurgelun-Todd, D. (1996). The residual cognitive effects of heavy marijuana use in college students. *Journal of the American Medical Association*, 275(7), 521–527.
- ⁹⁴ U.S. Public Health Service. (1993). Measuring the health behavior of adolescents: The Youth Risk Behavior Surveillance System and recent reports on high-risk adolescents. *Public Health Reports*, 108(Supplement 1), 1–96.
- 95 Finkelhor, D., and Dziuba-Leatherman, J. (1994). Victimization of children. American Psychologist, 49(3), 173–183.
- ⁹⁶ Lauritsen, J.L., Laub, J.H., and Sampson, R. J. (1992). Conventional and delinquent activities: Implications for the prevention of violent victimization among adolescents. *Violence and Victims*, 7(2), 91–108.
- ⁹⁷ Snyder, H.N., and Sickmund, M. (1999). *Juvenile offenders and victims: 1999 national report* (Publication No. NCJ 178257, p. 26). Washington, DC: Office of Juvenile Justice and Delinquency Prevention.
- ⁹⁸ Wells, C.G. (1985). Preschool literacy-related activities and success in school. In Olson, D., Torrance, N., and Hildyard, A. (Eds.), *Literacy, language, and learning: The nature and consequences of literacy* (pp. 229–255). Cambridge, England: Cambridge University Press.
- ⁹⁹ Barnett, S.W. (1992). Benefits of compensatory preschool education. *Journal of Human Resources*, 27, 279–312.
- ¹⁰⁰ Decker, P.T., Rice, J.K., Moore, M.T., and Rollefson, M. (1997). *Education and the economy: An indicators report.* Washington, DC: National Center for Education Statistics.
- ¹⁰¹ The achievement levels define what students should know and be able to do at each grade. They are set by the National Assessment Governing Board (NAGB) and have undergone several evaluations but remain developmental in nature and continue to be used on a trial basis. Until the Commissioner of the National Center for Education Statistics determines that the levels are reasonable, valid, and informative to the public, they should be interpreted and used with caution. For more information, see http://nces.ed.gov/nationsreportcard/.
- ¹⁰² Data on parents' level of education are not reliable for 4th-graders.
- ¹⁰³ Chen, X., Tuma, J., Daniel, B., and Scott, L. (Forthcoming). *Trends in high school academic coursetaking: Mathematics, science, English, and foreign language course completion.* Washington, DC: National Center for Education Statistics.
- ¹⁰⁴ Horn, L., Nunez, A.M., and Bobbitt, L. (2000). *Mapping the road to college: First-generation students' math track, planning strategies, and context for support.* Washington, DC: National Center for Education Statistics.
- ¹⁰⁵ Some of these changes may be related to changes in the survey and collection procedures in 1994.
- ¹⁰⁶ Brown, B. (1996). *Who are America's disconnected youth?* Report prepared for the American Enterprise Institute. Washington, DC: Child Trends, Inc.
- ¹⁰⁷ American Council on Education. (1994). *Higher education today: Facts in brief.* Washington, DC: American Council on Education, Division of Policy Analysis and Research.
- ¹⁰⁸ National Academy of Sciences. (2000). *Clearing the air: Asthma and indoor air exposures*. Washington, DC: National Academy Press. Available at http://books.nap.edu/catalog/9610.html
- ¹⁰⁹ Gern J.E. (2004). Viral respiratory infection and the link to asthma. *Pediatric Infectious Disease Journal*, 23(1 Suppl), S78–86.

- ¹¹⁰ Lemanske, R.F. Jr., and Busse, W.W. (2003). Asthma. *Journal of Allergy and Clinical Immunology*, 111(2 Suppl), S502–519.
- ¹¹¹ Bellinger, D., Leviton, A., and Waternaux, C. (1987). Longitudinal analyses of prenatal and postnatal lead exposure and early cognitive development. *New England Journal of Medicine*, *316*(17), 1037–1043.
- ¹¹² McMichael, A.J., Baghurst, P.A., Wigg, N.R., Vimpani, G.V., Robertson, E.F., and Roberts, R.J. (1988). Port Pirie Cohort Study: Environmental exposure to lead and children's abilities at the age of four years. *New England Journal of Medicine*, 319(8), 468–475.
- ¹¹³ Lanphear, B.P., Dietrich, K., Auinger, P., and Cox, C. (2000). Cognitive deficits associated with blood lead concentrations <10 micrograms/dL in U.S. children and adolescents. *Public Health Reports*, *115*(6), 521–529.
- ¹¹⁴ Calderon, J., Navarro, M.E., Jimenez-Capdeville, M.E., Santos-Diaz, M.A., Golden, A., Rodriguez-Leyva, I., Borja-Aburto, V., and Diaz-Barriga, F. (2001). Exposure to arsenic and lead and neuropsychological development in Mexican children. *Environmental Research*, 85(2), 69–76.
- ¹¹⁵ Mendelsohn, A.L., Dreyer, B.P., Fierman, A.H., Rosen, C.M., Legano, L.A., Kruger, H.A., Lim, S.W., and Courtlandt, C.D. (1998). Low-level lead exposure and behavior in early childhood. *Pediatrics* 101(3), E10.
- ¹¹⁶ Minder, B., Das-Smaal, E.A., Brand, E.F., and Orlebeke, J.F. (1994). Exposure to lead and specific attentional problems in schoolchildren. *Journal of Learning Disabilities*, 27(6), 393–399.
- ¹¹⁷ Needleman, H.L., Schell, A., Bellinger, D.C., Leviton, A., and Allred, E.N. (1990). The long term effects of exposure to low doses of lead in childhood, an 11-year follow-up report. *New England Journal of Medicine, 322*(2), 83–88.
- ¹¹⁸ Needleman, H.L., Riess, J.A., Tobin, M.J., Biesecker, G.E., and Greenhouse, J.B. (1996). Bone lead levels and delinquent behavior. *Journal of the American Medical Association*, 275(5), 363–369.
- ¹¹⁹ Centers for Disease Control and Prevention. (1997). *Screening Young Children for Lead Poisoning: Guidance for State and Local Public Health Officials*. Atlanta, GA. Available at http://www.cdc.gov/nceh/lead/guide/guide/97.htm
- ¹²⁰ Centers for Disease Control and Prevention. (2002). *Managing Elevated Blood Lead Levels Among Young Children:* Recommendations from the Advisory Committee on Childhood Lead Poisoning Prevention. Atlanta, GA. Available at http://www.cdc.gov/nceh/lead/CaseManagement/caseManage_main.htm
- ¹²¹ Silbergeld, E.K. (1997). Preventing lead poisoning in children. Annual Review of Public Health, 18, 187–210.
- ¹²² Canfield, R.L., Henderson, C.R. Jr., Cory-Slechta, D.A., Cox, C., Jusko, T.A., and Lanphear, B.P. (2003). Intellectual impairment in children with blood lead concentrations below 10 microg per deciliter. *New England Journal of Medicine*, *348*(16), 1517–1526.
- ¹²³ Jacobs, D.E., Clickner, R.P., Zhou, J.Y., Viet, S.M., Marker, D.A., Rogers, J.W., Zeldin, D.C., Broene, P., and Friedman, W. (2002). The prevalence of lead-based paint hazards in U.S. housing. *Environmental Health Perspectives*, *110*(10), A599–606.
- 124 Mielke, H., and Reagan, P. (1998). Soil is an important pathway of human lead exposure. *Environmental Health Perspectives*, $106 ({\rm Suppl.~1}),\,217-229.$
- ¹²⁵ Mielke, H.W. (1999). Lead in the inner cities. American Scientist, 87, 62–73.
- ¹²⁶ President's Task Force on Environmental Health Risks and Safety Risks to Children. (2000). *Eliminating Childhood Lead Poisoning: A Federal Strategy Targeting Lead Paint Hazards*. Available at http://www.hud.gov/offices/lead/reports/fedstrategy2000.pdf

- ¹²⁷ U.S. Department of Health and Human Services. (1999). *Mental Health: A Report of the Surgeon General.* Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health, Available at http://www.surgeongeneral.gov/library/mentalhealth/home.html
- ¹²⁸ New Freedom Commission on Mental Health. (2003). *Achieving the Promise: Transforming Mental Health Care in America. Final Report.* DHHS Pub. No. SMA-03-3832. Rockville, MD.
- ¹²⁹ Dulcan, M.K., Costello, E.J., Costello, A.J., Edelbrock, C., Brent, D., and Janiszewski, B.S. (1990). The pediatrician as gatekeeper to mental health care for children: Do parents' concerns open the gate? *Journal of the American Academy of Child and Adolescent Psychiatry*, 29, 453–458.
- ¹³⁰ Goodman, R. (1999). The extended version of the Strengths and Difficulties Questionnaire as a guide to child psychiatric caseness and consequent burden. *Journal of Child Psychology and Psychiatry*, 40, 791–799.
- ¹³¹ Poverty level is based on family income and reflects family size and composition. It is adjusted each year using the annual average Consumer Price Index level. For more detail, see U.S. Census Bureau, Series P–60, no. 219. Near-poor children are children living in families with incomes 100–199 percent of the poverty threshold. Non-poor children are children living in families with incomes 200 percent of the poverty level or greater.
- 132 See the following: (1) Amato, P.R., and Booth, A. (1997). A Generation at Risk: Growing Up in an Era of Family Upheaval. Cambridge, Massachusetts: Harvard University Press. (2) Cherlin, A.J., Kiernan, K.E., and Chase-Lansdale, P.L. (1995). Parental Divorce in Childhood and Demographic Outcomes in Young Adulthood. Demography, 32(3), 299–318. (3) Ginther, D.A., and Pollak, R.A. (2004). Family Structure and Children's Educational Outcomes: Blended Families, Stylized Facts, and Descriptive Regressions. Demography, 41(4), 671–695. (4) McLanahan, S. (2004). Diverging Destinies: How Children are Faring Under the Second Economic Transition. Demography, 41(4), 607–627. (5) McLanahan, S. and Sandefur, G. (1994). Growing Up with a Single Parent: What Hurts, What Helps. Cambridge, MA: Harvard University Press. (6) Sigle-Ruston, W., and McLanahan, S. (2004). Father Absence and Child Wellbeing: A Critical Review. In D. Moynihan, L. Rainwater, and T. Smeeding (Eds.), The Future of the Family (pp. 116–155). New York: Russell Sage Foundation. (7) Waite, L.J., and Gallagher, M. (2000). The Case for Marriage: Why Married People Are Happier, Healthier, and Better Off Financially. New York: Doubleday. (8) Waite, L.J. (1995). Does Marriage Matter? Demography, 32(4), 483–507. (9) Wu, L.L., and Martinson, B.C. (1993). Family Structure and the Risk of Premarital Birth. American Sociological Review, 58(2), 210–232.
- ¹³³ For discussion on this topic, see p. 25 of Ribar, D.C. (2003). What do social scientists know about the benefits of marriage? A review of quantitative methodologies. Retrieved on December 6, 2004, from http://home.gwu.edu/~dcr7/marriage_meth_4.pdf
- ¹³⁴ National Institute of Alcohol Abuse and Alcoholism. (1997). *Ninth special report to the U.S. congress on alcohol and health, from the Secretary of Health and Human Services, June 1997* (NIH Publication No. 97-4017). Bethesda, MD: National Institutes of Health.
- ¹³⁵ Data for economic breakouts were not available.
- ¹³⁶ MacDorman, M.F., Martin, J.A., Mathews, T.J., Hoyert, D.L., and Ventura, S.J. (2005). Explaining the 2001–02 Infant Mortality Increase: Data from the Linked Birth/Infant Death Data Set. *National Vital Statistics Reports*, *53*(12). Hyattsville, Maryland: National Center for Health Statistics.
- ¹³⁷ This category is similar to that used by other statistical agencies. Cohabiting biological parents, for adolescents ages 15–17, were not included as a separate group due to small sample size.
- 138 p < .05.
- ¹³⁹ Sample sizes preclude further breakouts by income.



Detailed Tables

Table POP1 Child population: Number of children ages 0–17 in the United States by age, selected years 1950–2003 and projected 2004–2020
Table POP2 Children as a proportion of the population: Persons in selected age groups as a percentage of the total U.S. population, and children ages 0–17 as a percentage of the dependent population, selected years 1950–2003 and projected 2004–2020
Table POP3 Racial and ethnic composition: Percentage of U.S. children ages 0–17 by race and Hispanic origin, selected years 1980–2003 and projected 2004–202091
Table POP4 Children of at least one foreign-born parent: Percentage of children ages 0–17 by nativity of child and parents by parent's education, poverty status, and other characteristics, selected years 1994–200499
Table POP5 Language spoken at home and difficulty speaking English: Number of children ages 5–17 who speak a language other than English at home by language spoken and ability to speak English, and the percentages of those speaking a language other than English at home and those with difficulty speaking English, by selected characteristics, selected years 1979–2003
Table POP6.A Family structure and children's living arrangements: Percentage of children ages 0–17 by presence of married parents in household, race, and Hispanic origin, selected years 1980–200499
Table POP6.B Family structure and children's living arrangements: Detailed living arrangements of children by gender, race, Hispanic origin, age, parent's education and poverty status, 2001 Detailed living arrangements of children by gender, race, Hispanic origin, age, parent's education and poverty status, 2001
Table POP7.A Births to unmarried women: Birth rates for unmarried women by age of mother, selected years 1980–2003 104
Table POP7.B Births to unmarried women: Percentage of all births that are to unmarried women by age of mother, selected years 1980–2003 104
Table POP8.A Child care: Percentage of children ages 0–6, not yet in kindergarten by type of care arrangement and child and family characteristics, 1995 and 2001
Table POP8.B Child care: Primary child care arrangements for children ages 0–4 with employed mothers by selected characteristics, selected years 1985–2002 10%
Table POP8.C Child care and activities: Percentage of children in kindergarten through 8th grade by weekday care and before- and after-school activities by grade level, poverty status, race, and Hispanic origin, 2001
Table POP9.A Children's environments: Percentage of children ages 0–17 living in counties in which one or more of the Primary National Ambient Air Quality Standards was exceeded, 1999–2003112
Table POP9.8 Blood cotinine levels: Percentage of children ages 4–17 with specified blood cotinine levels by age, race and Hispanic origin, 1988–1994 and 1999–2002
Table POP9.C Exposure to environmental tobacco smoke: Percentage of children ages 0–6 living in homes where someone smokes regularly by race, Hispanic origin, and poverty status, 2003
Table ECON1.A Child poverty: Percentage of all children and related children ages 0–17 living below selected poverty levels by selected characteristics, selected years 1980–2003 115
Table ECON1.B Income distribution: Percentage of related children ages 0–17 by family income relative to the poverty line, selected years 1980–2003
Table ECON2 Secure parental employment: Percentage of children ages 0–17 living with at least one parent employed year round, full time by family structure, race, Hispanic origin, poverty status, and age, selected years 1980–2003
Table ECON3 Housing problems: Percentage of households with children ages 0–17 that report housing problems by household type and type of problem, selected years 1978–2003

Table ECON4.A Food security: Percentage of children ages 0–17 in food-insecure households by presence of hunger and selected characteristics, selected years 1995–2003
Table ECON4.BDiet quality: Percentage of children ages 2–18 by age and diet quality as measured by the HealthyEating Index, 1989–90, 1994–96, and 1999–2000127
Table ECON4.C Diet quality: Percentage of children ages 2–18 by age, poverty status, and diet quality as measured by the Healthy Eating Index, 1989–90, 1994–96, and 1999–2000 1994–90, and 1999–2000
Table ECON4.DHealthy Eating Index: Overall and component mean scores and percentages for children ages 2–18,1989–90, 1994–96, and 1999–20001994–96,
Table ECON5.A Access to health care: Percentage of children ages 0–17 covered by health insurance by selected characteristics, selected years 1987–2003 130
Gable ECON5.B Usual source of health care: Percentage of children ages 0–17 with no usual source of health care by age, type of health insurance, and poverty status, 1993–2003 132
Table HEALTH1 General health status: Percentage of children ages 0–17 in very good or excellent health by age, poverty status, race and Hispanic origin, selected years 1984–2003 133
Table HEALTH2 Activity limitation: Percentage of children ages 5–17 with activity limitation resulting from one or more chronic health conditions by gender, poverty status, race and Hispanic origin, selected years 1997–2003134
Table HEALTH3Overweight: Percentage of children ages 6–18 who are overweight by gender, race, and Hispanicorigin, 1976–1980, 1988–1994, and 1999–2002
Table HEALTH4 Childhood immunization: Percentage of children ages 19–35 months vaccinated for selected diseases by poverty status, race, and Hispanic origin, selected years 1996–2003 136
Table HEALTH5 Low birthweight: Percentage of infants born of low birthweight by detailed mother's race and Hispanic origin, 1980–2003
Table HEALTH6 Infant mortality: Death rates among infants by detailed race and Hispanic origin of mother, selected years, 1983–2002 139
Table HEALTH7.A Child mortality: Death rates among children ages 1–4 by gender, race, Hispanic origin, and cause of death, 1980–2002
Table HEALTH7.B Child mortality: Death rates among children ages 5–14 by gender, race, Hispanic origin, and cause of death, 1980–2002
Table HEALTH8 Adolescent mortality: Death rates among adolescents ages 15–19 by gender, race, Hispanic origin, and cause of death, 1980–2002
Table HEALTH9 Adolescent births: Birth rates by mother's age, race, and Hispanic origin, selected years 1980–2003144
Table BEH1 Regular cigarette smoking: Percentage of 8th-, 10th-, and 12th-grade students who reported smoking cigarettes daily in the previous 30 days by grade, gender, race, and Hispanic origin, selected years 1980–2004146
Table BEH2 Alcohol use: Percentage of 8th-, 10th-, and 12th-grade students who reported having five or more drinks in a row in the past 2 weeks by grade, gender, race, and Hispanic origin, 1980–2004 1980–2004
Table BEH3 Illicit drug use: Percentage of 8th-, 10th-, and 12th-grade students who have used illicit drugs in the previous 30 days by grade, gender, race, and Hispanic origin, selected years 1980–2004
Table BEH4.A Youth victims of serious violent crimes: Rate and number of victimizations for youth ages 12–17 by age, race, and gender, selected years 1980–2003 149
Table BEH4.B Serious violent juvenile crime rate: Rate and number of serious crimes by youth ages 12–17, selected years 1980–2003 150

Table ED1 Family reading: Percentage of children ages 3–5 who were read to every day in the last week by a family member by child and family characteristics, selected years 1993–2001 151
Table ED2 Early childhood care and education: Percentage of children ages 3–5 who are enrolled in center-based early childhood care and education programs by child and family characteristics, selected years 1991–2001
Table ED3.A Mathematics achievement: Average scale scores of 4th-, 8th-, and 12th-graders by grade and child and family characteristics, selected years 1990–2003
Table ED3.B Reading achievement: Average scale scores of 4th-, 8th-, and 12th-graders by grade and child and family characteristics, selected years 1992–2003
Table ED3.C Percentage of students within each reading and mathematics achievement level range by grade, selected years 1990–2003 155
Table ED4.A High school academic coursetaking: Percentage distribution of high school graduates by the highest level of mathematics courses taken, selected years 1982–2000
Table ED4.B High school academic coursetaking: Percentage distribution of high school graduates by the highest level of science courses taken, selected years 1982–2000 157
Table ED4.C High school academic coursetaking: Percentage distribution of high school graduates by the level of English courses taken, selected years 1982–2000 158
Table ED4.D High school academic coursetaking: Percentage distribution of high school graduates by the highest level of foreign language courses taken, selected years 1982–2000 158
Table ED5 High school completion: Percentage of adults ages 18–24 who have completed high school by race, Hispanic origin, and method of completion, selected years 1980–2003 159
Table ED6.A Youth neither enrolled in school nor working: Percentage of youth ages 16–19 who are neither enrolled in school nor working by age, gender, race, and Hispanic origin, selected years 1984–2004
Table ED6.B Youth enrolled in school and working: Percentage of youth ages 16–19 who are enrolled in school and working by age, gender, race, and Hispanic origin, selected years 1984–2004
Table ED7 Higher education: Percentage of adults ages 25–29 attaining associate's and bachelor's degrees or higher by highest degree attained, gender, race, and Hispanic origin, selected years 1980–2004
Table SPECIAL1.A Asthma: Percentage of children ages 0–17 with asthma, selected years 1980–2003
Table SPECIAL1.B Asthma: Percentage of children with current asthma by age, poverty status, race, Hispanic origin, and area of residence, 2001–2003 163
Table SPECIAL2.A Blood lead levels: Percentage of children ages 1–5 with specified blood lead levels by race and Hispanic origin and by poverty status, 1999–2002 164
Table SPECIAL2.B Blood lead levels: Median blood lead concentration among children ages 1–5, selected years 1976–2002 164
Table SPECIAL3.A Emotional and behavioral difficulties: Percentage of children ages 4–17 reported by a parent to have definite or severe, minor, or no difficulties with emotions, concentration, behavior, or getting along with other people, by selected characteristics, 2003 165
Table SPECIAL3.B Emotional and behavioral difficulties: Percentage of children ages 4–17 with service contact by type of service and parent-reported level of difficulty with emotions, concentration, behavior, or getting along with other people, 2003
Table SPECIAL4.A Low birthweight: Percentage of low and very low birthweight births by mother's marital status, race, Hispanic origin, and age, 2002167
Table SPECIAL4.B Infant mortality: Infant mortality by birthmother's marital status, race, Hispanic origin, and age, 2002 168

Table SPECIAL4.C Family structure and adolescents' living arrangements: Percentage of adolescents ages 15–17 by family structure, 1996 and 2001 SIPP panels	169
Table SPECIAL4.D Adolescents enrolled in school: Percentage of adolescents ages 15–17 enrolled in school by family structure, family income, race, and Hispanic origin, 1996 and 2001 SIPP panels	170
Table SPECIAL4.E General adolescent health status: Percentage of adolescents ages 15–17 reported to be in excellent or very good health by family structure, 1996 and 2001 SIPP panels	171
Table SPECIAL4.F Births to unmarried adolescent girls: Percentage of adolescent girls, by family structure at ages 15–17, who became unmarried birthmothers by ages 17–19, 1996 and 2001 SIPP panels	172

Child population: Number of children ages 0–17 in the United States by age, selected years 1950–2003 and projected 2004–2020

Number (in millions)

						E	stimate	d						Proje	ected
	1950	1960	1970	1980	1990	1995	1997	1998	1999	2000	2001	2002	2003	2010	2020
All children	47.3	64.5	69.8	63.7	64.2	69.5	70.1	71.4	71.9	72.3	72.6	72.8	73.0	74.4	80.3
Age															
Ages 0-5	19.1	24.3	20.9	19.6	22.5	23.7	23.3	23.2	23.1	23.2	23.3	23.4	23.6	25.6	27.5
Ages 6-11	15.3	21.8	24.6	20.8	21.6	23.0	24.0	24.5	24.8	25.0	24.9	24.6	24.3	24.4	26.9
Ages 12-17	12.9	18.4	24.3	23.3	20.1	22.7	23.5	23.8	24.0	24.2	24.5	24.8	25.1	24.4	26.0

NOTE: Population projections are based on the Census 2000 counts.

SOURCE: U.S. Census Bureau, *Current Population Reports*, Estimates of the population of the United States by single years of age, color, and sex: 1900 to 1959 (Series P–25, No. 311); Estimates of the population of the United States, by age, sex, and race: April 1, 1960, to July 1, 1973 (Series P–25, No. 519); Preliminary estimates of the population of the United States by age, sex, and race: 1970 to 1981 (Series P–25, No. 917); and unpublished vintage 1999 estimates tables for 1980–1990, intercensal estimates for 1991–2000, and vintage 2001 estimates. The data for 2000 to 2003 are based on the population estimates released for July 1, 2004. The data for 2004 and beyond are derived from the interim national population projections released in March 2004.

Children as a proportion of the population: Persons in selected age groups as a percentage of the total U.S. population, and children ages 0–17 as a percentage of the dependent population, selected years 1950–2003 and projected 2004–2020

						E:	stimate	d						Proje	ected
Age	1950	1960	1970	1980	1990	1995	1997	1998	1999	2000	2001	2002	2003	2010	2020
Percentage of total	ıl popul	ation													
Ages 0-17	31	36	34	28	26	26	26	26	26	26	25	25	25	24	24
Ages 18-64	61	55	56	61	62	61	61	62	62	62	62	62	63	63	60
Ages 65 and older	8	9	10	11	13	13	13	13	13	12	12	12	12	13	16
Children ages 0-1	7 as a	percen	tage o	f the d	epend	ent po	pulatio	ona							
Ages 0-17	79	79	78	71	67	67	67	67	67	67	67	67	67	65	60

^a The dependent population includes all persons ages 17 and under, and 65 and over.

NOTE: Population projections are based on the Census 2000 counts.

SOURCE: U.S. Census Bureau, *Current Population Reports*, Estimates of the population of the United States by single years of age, color, and sex: 1900 to 1959 (Series P–25, No. 311); Estimates of the population of the United States, by age, sex, and race: April 1, 1960, to July 1, 1973 (Series P–25, No. 519); Preliminary estimates of the population of the United States by age, sex, and race: 1970 to 1981 (Series P–25, No. 917); and unpublished vintage 1999 estimates tables for 1980–1990, intercensal estimates for 1991–2000, and vintage 2001 estimates. The data for 2000 to 2003 are based on the population estimates released for July 1, 2004. The data for 2004 and beyond are derived from the interim national population projections released in March 2004.

Racial and ethnic composition: Percentage of U.S. children ages 0–17 by race and Hispanic origin, selected years 1980–2003 and projected 2004–2020

						Estin	nated						Proje	ected
Race and Hispanic origina	1980	1985	1990	1995	1996	1997	1998	1999	2000	2001	2002	2003	2010	2020
White, non-Hispanic ^b	74	72	69	66	65	64	64	63	_	_	_	_	_	_
White-alone, non-Hispanic ^b	_	_	_	_	_	_	_	_	61	61	60	60	56	53
White-alone	_	_	_	_	_	_	_	_	77	77	77	77	76	74
Black, non-Hispanic ^b	15	15	15	15	15	15	15	15	_	_	_	_	_	_
Black-alone	_	_	_	_	_	_	_	_	16	16	16	16	15	15
Hispanic ^c	9	10	12	14	15	15	16	1 <i>7</i>	1 <i>7</i>	18	18	19	21	24
Asian/Pacific Islanderb	2	3	3	4	4	4	4	4	_	_	_	_	_	_
Asian-alone	_	_	_	_	_	_	_	_	4	4	4	4	4	5
American Indian/Alaskan Na	tive ^b 1	1	1	1	1	1	1	1	_	_	_	_	_	_
All other racesd	_	_	_	_	_	_	_	_	4	4	4	4	5	6

- Not available.

^a For race and Hispanic-origin data in this table: In 1980 and 1990, following the 1977 OMB standards for collecting and presenting data on race, the decennial census asked respondents to choose *one* race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Beginning in 2000, following the 1997 OMB standards for collecting and presenting data on race, the decennial census asked respondents to choose *one or more* races from the following: White, Black, Asian, American Indian or Alaska Native, and Native Hawaiian or Other Pacific Islander. In addition, a "Some other race" category was included with OMB approval. Those who chose more than one race were classified as "Two or more races." Except for the "All other races" category, all race groups discussed in this table from 2000 onward refer to people who indicated only one racial identity within the racial categories presented. (Those who were "Two or more races" were included in the "All other races" category, along with American Indians or Alaska Natives and Native Hawaiians or Other Pacific Islanders.) People who responded to the question on race by indicating *only one* race are referred to as the race-*alone* population. The use of the race-alone population in this table does not imply that it is the preferred method of presenting or analyzing data. Data from 2000 onward are not directly comparable with data from earlier years. Data on race and Hispanic origin are collected separately; Hispanics may be any race.

^b Excludes persons in this race group who are of Hispanic origin.

^c Persons of Hispanic origin may be of any race.

^d Includes American Indian, Eskimo and Aleut, Native Hawaiian and Other Pacific Islander, and all multiple race (two-or-more races). SOURCE: These data are available on the Census Bureau website via the Internet (www.census.gov) at the Population Estimates or Projections site. The data for 1980 to 1989 are intercensal estimates and incorporate the 1980 and 1990 censuses as benchmarks. The 1990 to 1999 data are also intercensal estimates and incorporate the 1990 and 2000 censuses as benchmarks. The data for 2000 to 2003 are based on the population estimates released for July 1, 2004. The data for 2004 and beyond are derived from the interim national population projections released in March 2004.

Children of at least one foreign-born parent: Percentage of children ages 0–17 by nativity of child and parents^a by parent's education, poverty status, and other characteristics, selected years 1994–2004^b

		1994			1996		1998			
	Native	Foreign-	born parent	Native	Foreign-	born parent	Native	Foreign-	born parent	
Characteristic	child and parents	Native child	Foreign- born child	child and parents	Native child	Foreign- born child	child and parents	Native child	Foreign- born child	
Number of children ages 0-17 living with one or both parents (in thousands)	56,338	8,176	2,160	56,369	9,157	2,449	56,237	9,883	2,298	
Percent of all children ^c	82	12	3	80	13	3	80	14	3	
Education of parent										
Less than high school High school graduate Some college or associate's degre Bachelor's degree or higher	14 35 ee 28 23	38 21 19 22	48 20 11 21	13 34 29 23	39 21 19 22	49 16 12 22	12 34 30 23	3 <i>7</i> 23 18 23	45 22 11 22	
Poverty status ^d										
Below poverty At or above poverty	20 80	28 72	41 59	18 82	27 73	39 61	1 <i>7</i> 83	25 75	39 61	
Area of residence										
Central city of MSA ^e Outside central city, in MSA ^e Outside metropolitan area	27 48 25	43 51 6	48 47 6	26 51 23	42 51 6	48 46 6	26 51 22	43 50 <i>7</i>	49 45 6	
Presence of parents										
Two married parents present ^f Living with mother only Living with father only	70 26 4	82 16 2	78 19 3	69 27 4	80 1 <i>7</i> 3	80 17 2	69 26 5	82 15 3	78 20 3	
Presence of adults other than	parents									
Other relatives only Nonrelatives only Both relatives and nonrelatives No other relatives or nonrelatives	17 5 1 78	25 5 1 68	36 5 3 56	17 6 1 76	24 3 1 72	34 3 2 61	17 6 1 77	26 4 1 68	29 4 2 65	

Table POP4 (cont.)

Children of at least one foreign-born parent: Percentage of children ages 0–17 by nativity of child and parents^a by parent's education, poverty status, and other characteristics, selected years 1994–2004^b

		2000			2002			2004	
	Native	Foreign-l	oorn parent	Native	Foreign-	born parent	Native		oorn parent
	child and			child and			child and		Foreign-
Characteristic	parents	child	born child	parents	child	born child	parents	child	born child
Number of children ages 0-17 living with one or both parents (in thousands)	56,340	10 211	2,465	55 261	11,518	2,654	55.048	12,174	2,708
Percent of all children ^c	79	14	3	76	16	4	75	17	4
Gender of child									
Male	51	52	53	51	51	52	51	52	50
Female	49	49	47	49	49	48	49	48	50
Age of child									
Under 1 year	6	6	1	6	7	1	5	7	1
Ages 1-2	11	13	4	11	14	3	11	14	3
Ages 3 - 5	16	21	9	16	19	10	16	18	10
Ages 6-8	17	18	14	17	17	14	16	17	14
Ages 9-11	18	16	21	18	17	20	17	17	20
Ages 12-14	17	14	25	18	14	25	18	15	25
Ages 15-17	16	12	27	17	11	28	17	12	28
Race and Hispanic origin of	child ^g								
White	81	75	69	80	72	70	_	_	_
White-alone	_	_	_	_	_	_	79	72	71
White, non-Hispanic	_	_	_	73	21	1 <i>7</i>	_	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	71	20	19
White-alone or in combination									
with one or more races	_	_	_	_	_	_	81	75	72
Black	17	7	9	17	9	9	_	_	_
Black-alone	_	_	_	_	_	_	17	9	8
Black-alone or in combination									
with one or more races	_	_	_	-	_	_	18	10	9
Asian	1	18	22	1	1 <i>7</i>	20	_	_	_
Asian-alone	_	_	_	_	_	_	1	15	18
Asian-alone or in combination							_		
with one or more races	-	-	-	_	_	-	1	17	18
Hispanic ^h	7	54	54	8	55	55	9	54	55
All remaining single races and all race combinations							4	5	3
	_					_	4	J	J
Education of parent									
Less than high school	11	36	43	10	36	41	10	34	42
High school graduate	33	23	23	32	23	21	31	24	21
Some college or associate's degr	ee 31	18	12	31	18	12	32	1 <i>7</i>	13
Bachelor's degree or higher	26	23	22	27	23	27	28	25	24
Poverty status ^d									
Below 100% poverty	15	20	30	14	20	27	15	21	30
At or above poverty	85	80	70	86	80	73	85	79	70
100-199% poverty	20	29	31	20	29	33	19	28	33
200% poverty and above	65	51	39	66	51	40	65	51	37

Table POP4 (cont.)

Children of at least one foreign-born parent: Percentage of children ages 0–17 by nativity of child and parents^a by parent's education, poverty status, and other characteristics, selected years 1994–2004^b

		2000			2002		2004			
	Native	Foreign-	born parent	Native	Foreign-	born parent	Native	Foreign-	born parent	
Characteristic	child and parents	Native child	Foreign- born child	child and parents		Foreign- born child	child and parents		Foreign- born child	
Area of residence										
Central city of MSA° Outside central city, in MSA° Outside metropolitan area	25 53 22	42 52 6	48 46 5	26 54 21	41 52 7	42 51 7	- - -	- - -	- - -	
Presence of parents										
Two married parents present ^f Living with mother only Living with father only	70 25 5	82 15 3	81 15 4	69 26 5	81 16 3	81 16 4	68 27 5	81 16 4	81 16 3	
Presence of adults other than	n parents									
Other relatives only Nonrelatives only Both relatives and nonrelatives No other relatives or nonrelatives	16 6 1 76	26 4 1 68	37 5 2 56	17 6 1 77	26 5 2 68	31 5 3 61	17 6 1 76	26 5 1 68	31 4 2 64	

Not available.

SOURCE: U.S. Census Bureau. Current Population Survey, Annual Social and Economic Supplements.

^a Native parents means that all of the parents that the child lives with are native-born, while foreign-born means that at least one of the child's parents is foreign-born. Anyone with U.S. citizenship at birth is considered native, which includes persons born in the United States and in U.S. outlying areas, and persons born abroad with at least one American parent.

^b Beginning with March 2001, data are from the Expanded Current Population Survey Sample and use population controls based on Census 2000.

^c The percent of all children is of all children ages 0–17, including those living with no parents and excluding children in group quarters.

^d The poverty status groups are derived from the ratio of the family's income to the family's poverty threshold. Below 100 percent of poverty refers to children living below the poverty line, 100–199 percent of poverty refers to children living in low-income households, and 200 percent of poverty and above refers to children living in medium- and high-income households. See ECON1.B for the income levels.

^e An MSA is a Metropolitan Statistical Area. The U.S. Office of Management and Budget (OMB) defines metropolitan areas (MAs) according to published standards that are applied to Census Bureau data. The 1990 standards provide that each newly qualifying MSA must include at least: (1) one city with 50,000 or more inhabitants, or (2) a Census Bureau-defined urbanized area (of at least 50,000 inhabitants) and a total metropolitan population of at least 100,000 (75,000 in New England). MSA information is discontinued for 2003 and later due to discontinuity in the metro definitions in the Current Population Survey.

^fThe category "two married parents present" includes children who live with a biological, step, or adoptive parent who is married with his or her spouse present. If a second parent is present and not married to the first parent, then the child is identified as living with a single parent.

For race and Hispanic-origin data in this table: From 1994 to 2002, following the 1977 OMB standards for collecting and presenting data on race, the Current Population Survey (CPS) asked respondents to choose *one* race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Beginning in 2003, following the 1997 OMB standards for collecting and presenting data on race, the CPS asked respondents to choose *one* or more races from the following: White, Black, Asian, American Indian or Alaska Native, and Native Hawaiian or Other Pacific Islander. People who responded to the question on race by indicating *only one* race are referred to as the race-*alone* population. People who reported more than one of the five races are referred to as the race *in combination* population. Data from 2004 onward are not directly comparable with data from earlier years. Data on race and Hispanic origin are collected separately; Hispanics may be any race.

^h Persons of Hispanic origin may be of any race.

Language spoken at home and difficulty speaking English: Number of children ages 5–17 who speak a language other than English at home by language spoken and ability to speak English, and the percentages of those speaking a language other than English at home and those with difficulty speaking English,^a by selected characteristics, selected years 1979–2003

Number (in millions) 3.8 5.2 6.3 6.7 8.8 9.5 9.8 9.9 9.9			Current	Populatio	on Survey	,	American Community Survey					
Number (in millions) 3.8 5.2 6.3 6.7 8.8 9.5 9.8 9.8 9.9 Language spokenc (in millions) Spanish 2.5 3.6 4.3 5.0 6.3 6.5 6.8 6.9 7.0 Other Indo-European 0.6 0.7 0.5 0.5 0.4 1.5 1.5 1.5 1.5 1.4 Asian and Pacific Island languages 0.2 0.6 1.0 0.5 1.2 1.1 1.2 1.1 1.1 Other languages 0.5 0.3 0.5 0.6 0.9 0.3 0.3 0.3 0.3 0.3 Ability to speak English (in millions) Very well 2.6 3.4 4.1 4.2 6.2 6.6 6.9 7.0 7.0 Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty statusd In poverty 28.4 28.9 29.1 28.4 Not in poverty 16.1 16.5 16.4 16.7 Nativity statuse Native child and parents 5.0 5.1 4.8 4.7 Foreign-born parent 72.0 71.7 71.0 71.0 Native child 66.9 66.4 65.7 66.2		1979	1989	1992	1995⁵	1999 ^b	2000	2001	2002	2003		
Language spokenc (in millions) Spanish 2.5 3.6 4.3 5.0 6.3 6.5 6.8 6.9 7.0 Other Indo-European 0.6 0.7 0.5 0.5 0.4 1.5 1.5 1.5 1.4 Asian and Pacific Island languages 0.2 0.6 1.0 0.5 1.2 1.1 1.2 1.1 1.1 Other languages 0.5 0.3 0.5 0.6 0.9 0.3 0.3 0.3 0.3 Ability to speak English (in millions) Very well 2.6 3.4 4.1 4.2 6.2 6.6 6.9 7.0 7.0 Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty statusd In poverty 28.4 28.9 29.1 28.4 Not in poverty 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	Children who speak another langu	uage at ho	me									
Spanish 2.5 3.6 4.3 5.0 6.3 6.5 6.8 6.9 7.0 Other Indo-European 0.6 0.7 0.5 0.5 0.4 1.5 1.5 1.5 1.4 Asian and Pacific Island languages 0.2 0.6 1.0 0.5 1.2 1.1 1.2 1.1 1.1 Other languages 0.5 0.3 0.5 0.6 0.9 0.3 0.3 0.3 0.3 Ability to speak English (in millions) Very well 2.6 3.4 4.1 4.2 6.2 6.6 6.9 7.0 7.0 Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 1.6.7 18.1 18.5 18.5 18.6 Poverty status	Number (in millions)	3.8	5.2	6.3	6.7	8.8	9.5	9.8	9.8	9.9		
Other Indo-European 0.6 0.7 0.5 0.5 0.4 1.5 1.5 1.5 1.4 Asian and Pacific Island languages 0.2 0.6 1.0 0.5 1.2 1.1 1.2 1.1 1.1 Other languages 0.5 0.3 0.5 0.6 0.9 0.3 0.3 0.3 Ability to speak English (in millions) Very well 2.6 3.4 4.1 4.2 6.2 6.6 6.9 7.0 7.0 Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 Poverty status ^d In poverty - - - - - - 2.4 28.9 29.1 28.4 Not in pover	Language spoken ^c (in millions)											
Asian and Pacific Island languages 0.2 0.6 1.0 0.5 1.2 1.1 1.2 1.1 1.1 Other languages 0.5 0.3 0.5 0.6 0.9 0.3 0.3 0.3 0.3 0.3 0.3 0.3 0.3 0.3 0.3	Spanish	2.5	3.6	4.3	5.0	6.3	6.5	6.8	6.9	7.0		
Other languages 0.5 0.3 0.5 0.6 0.9 0.3 0.3 0.3 0.3 Ability to speak English (in millions) Very well 2.6 3.4 4.1 4.2 6.2 6.6 6.9 7.0 7.0 Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty status ^d In poverty - - - - - 28.4 28.9 29.1 28.4 Not in poverty - - - - - - - 16.1 16.5 16.4 16.7 Nativety status ^e Native child - - -			0.7									
Ability to speak English (in millions) Very well 2.6 3.4 4.1 4.2 6.2 6.6 6.9 7.0 7.0 Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty status ^d In poverty 28.4 28.9 29.1 28.4 Not in poverty Not in poverty Native child and parents 5.0 5.1 4.8 4.7 Foreign-born parent Native child 72.0 71.7 71.0 71.0 Native child 66.9 66.4 65.7 66.2	Asian and Pacific Island languages	0.2								1.1		
Very well 2.6 3.4 4.1 4.2 6.2 6.6 6.9 7.0 7.0 Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty status ^d In poverty - - - - - - 28.4 28.9 29.1 28.4 Not in poverty - - - - - - 16.1 16.5 16.4 16.7 Nativity status ^e Native child and parents - - - - - 5.0 5.1 4.8 4.7	Other languages	0.5	0.3	0.5	0.6	0.9	0.3	0.3	0.3	0.3		
Well 0.8 1.1 1.4 1.5 1.7 1.8 1.7 1.7 1.9 Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty status ^d In poverty - - - - - 28.4 28.9 29.1 28.4 Not in poverty - - - - - 16.1 16.5 16.4 16.7 Nativity status ^e Native child and parents - - - - - 5.0 5.1 4.8 4.7 Foreign-born parent - - - - - - 72.0 71.7 71.0 71.0 Na	Ability to speak English (in millions)											
Not well 0.4 0.6 0.6 0.7 0.8 0.9 0.9 0.9 0.9 Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty status ^d In poverty - - - - - - 28.4 28.9 29.1 28.4 Not in poverty - - - - - 16.1 16.5 16.4 16.7 Nativity status ^e Native child and parents - - - - - 5.0 5.1 4.8 4.7 Foreign-born parent - - - - - - 72.0 71.7 71.0 71.0 Native child - - - - - - 66.9 66.4 65.7 66.	Very well	2.6	3.4	4.1	4.2	6.2	6.6	6.9	7.0	7.0		
Not at all 0.1 0.1 0.1 0.1 0.1 0.1 0.2 0.2 0.2 0.2 0.2 Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty status ^d Poverty status ^d In poverty - - - - - 28.4 28.9 29.1 28.4 Not in poverty - - - - - 16.1 16.5 16.4 16.7 Nativity status ^e Native child and parents - - - - - 5.0 5.1 4.8 4.7 Foreign-born parent - - - - - 72.0 71.7 71.0 71.0 Native child - - - - - - 66.9 66.4 65.7 66.2	Well	0.8	1.1	1.4	1.5	1.7	1.8	1.7	1.7	1.9		
Percentage of school-age children 8.5 12.3 13.2 14.1 16.7 18.1 18.5 18.5 18.6 Poverty status ^d In poverty	Not well	0.4	0.6	0.6	0.7	0.8	0.9	0.9	0.9	0.9		
Poverty status ^d In poverty - - - - - - 28.4 28.9 29.1 28.4 Not in poverty - - - - - 16.1 16.5 16.4 16.7 Nativity status ^e Native child and parents - - - - - 5.0 5.1 4.8 4.7 Foreign-born parent - - - - - 72.0 71.7 71.0 71.0 Native child - - - - - 66.9 66.4 65.7 66.2	Not at all	0.1	0.1	0.1	0.1	0.1	0.2	0.2	0.2	0.2		
In poverty	Percentage of school-age children	8.5	12.3	13.2	14.1	16.7	18.1	18.5	18.5	18.6		
Not in poverty — — — — — — — — — 16.1 16.5 16.4 16.7 Nativity statuse Native child and parents — — — — — — — — — 5.0 5.1 4.8 4.7 Foreign-born parent — — — — — — — 72.0 71.7 71.0 71.0 Native child — — — — — — 66.9 66.4 65.7 66.2	Poverty status ^d											
Nativity statuse Native child and parents 5.0 5.1 4.8 4.7 Foreign-born parent 72.0 71.7 71.0 71.0 Native child 66.9 66.4 65.7 66.2	In poverty	_	_	_	_	_	28.4	28.9	29.1	28.4		
Native child and parents - - - - - - 5.0 5.1 4.8 4.7 Foreign-born parent - - - - - 72.0 71.7 71.0 71.0 Native child - - - - 66.9 66.4 65.7 66.2	Not in poverty	_	_	_	_	_	16.1	16.5	16.4	16.7		
Foreign-born parent 72.0 71.7 71.0 71.0 Native child 66.9 66.4 65.7 66.2	Nativity statuse											
Foreign-born parent 72.0 71.7 71.0 71.0 Native child 66.9 66.4 65.7 66.2	Native child and parents	_	_	_	_	_	5.0	5.1	4.8	4.7		
	·	_	_	_	_	_	72.0	71.7	71.0	71.0		
	Native child	_	_	_	_	_	66.9	66.4	65.7	66.2		
Foreign-born child 87.9 88.7 88.6 87.5	Foreign-born child	_	_	_	_	_	87.9	88.7	88.6	87.5		
Family type	Family type											
Two married parents 18.5 19.0 19.1 19.5		_	_	_	_	_	18.5	19.0	19.1	19.5		
Mother only – – – 15.8 16.5 16.5 16.2	Mother only	_	_	_	_	_	15.8	16.5	16.5	16.2		
Father only 19.3 18.7 17.6 18.1	Father only	_	_	_	_	_	19.3	18.7	17.6	18.1		
No parent 20.1 19.9 20.1 18.3	No parent	_	_	_	_	_	20.1	19.9	20.1	18.3		
Education of parent	Education of parent ^f											
Less than high school graduate 47.4 48.1 51.0 53.5		_	_	_	_	_	47.4	48.1	51.0	53.5		
High school graduate 15.5 16.6 17.2 18.0		_	_	_	_	_	15.5	16.6	17.2	18.0		
Some college 12.4 12.8 12.4 12.6		_	_	_	_	_	12.4	12.8	12.4	12.6		
Bachelor's degree or higher 12.9 12.8 12.6 12.6		_	_	_	_	_	12.9	12.8	12.6	12.6		

Table POP5 (cont.)

Language spoken at home and difficulty speaking English: Number of children ages 5–17 who speak a language other than English at home by language spoken and ability to speak English, and the percentages of those speaking a language other than English at home and those with difficulty speaking English,^a by selected characteristics, selected years 1979–2003

		Current	Populatio	on Survey	,	American Community Survey				
	1979	1989	1992	1995 ^b	1999 ^b	2000	2001	2002	2003	
Children who speak another langua	ge at ho	me (cont	.)							
Race and Hispanic origing										
White	8.7	12.0	12.6	13.3	16.4	_	_	_	_	
White-alone	_	_	_	_	_	14.4	14.4	14.1	14.5	
White, non-Hispanic	3.2	3.3	3.3	3.6	3.9	_	_	_	_	
White-alone, non-Hispanic	_	_	_	_	_	5.7	5.7	5.6	5.1	
Black	1.9	3.1	4.3	4.2	5.8	_	_	_	_	
Black-alone	_	_	_	_	_	5.1	5.1	5.1	5.8	
Black, non-Hispanic	1.3	2.3	3.7	3.0	4.5	_	_	_	_	
Black-alone, non-Hispanic	_	_	_	_	_	4.4	4.5	4.5	5.0	
American Indian and Alaskan Native	_	16.6	13.6	1 <i>7</i> .8	20.4	_	_	_	_	
American Indian and Alaska Native-alon	e –	_	_	_	_	20.5	24.2	22.3	20.7	
Asian and Pacific Islander ^h	_	62.2	65.2	60.2	60.4	_	_	_	_	
Asian-alone	_	_	_	_	_	67.1	66.6	64.4	63.5	
Native Hawaiian and										
Other Pacific Islander-alone	_	_	_	_	_	29.8	36.9	31.5	26.0	
Other	44.5	43.6	51.7	64.0	_	_	_	_	_	
Some other race alone	_	_	_	_	_	75.4	72.6	73.6	73.0	
Two or more races	_	_	_	_	_	17.6	17.5	16.8	14.8	
Hispanic or Latino ⁱ	<i>7</i> 5.1	69.4	71.5	73.8	70.9	68.6	68.7	67.8	67.6	
Region										
Northeast	10.5	12.8	14.9	15.2	17.7	19.1	18.7	18.4	19.0	
Midwest	3.7	4.7	5.3	5.9	7.5	9.5	9.9	10.0	9.9	
South	6.8	10.6	10.5	11.7	14.3	14.6	15.1	15.4	15.7	
West	17.0	23.6	25.3	26.4	28.8	31.0	31.1	31.3	31.0	
Living in linguistically isolated household ^k										
Number (in millions)	_	_	_	_	_	2.4	2.6	2.6	2.8	
Percentage of school-age children	-	-	_	_	_	4.6	4.9	4.9	5.3	

Table POP5 (cont.)

Language spoken at home and difficulty speaking English: Number of children ages 5–17 who speak a language other than English at home by language spoken and ability to speak English, and the percentages of those speaking a language other than English at home and those with difficulty speaking English, by selected characteristics, selected years 1979–2003

		Current l	Populatio	n Survey	American Community Survey						
	1979	1989	1992	1995 ^b	1999 ^b	2000	2001	2002	2003		
Children who speak another language at home and have difficulty speaking English											
Number (in millions)	1.3	1.8	2.2	2.4	2.6	2.9	2.8	2.8	2.9		
Percentage of school-age children	2.8	4.3	4.6	5.2	5.0	5.5	5.4	5.3	5.4		
Language spoken ^c											
Spanish	2.1	3.1	3.3	4.3	4.3	4.0	3.9	3.8	4.1		
Other Indo-European	0.2	0.4	0.2	0.2	0.2	0.6	0.6	0.6	0.6		
Asian and Pacific Island languages	0.1	0.6	0.8	0.4	0.6	0.7	0.7	0.6	0.6		
Other languages	0.4	0.2	0.3	0.3	0.5	0.1	0.1	0.1	0.1		
Poverty status ^d											
In poverty	_	_	_	_	_	11.3	11.1	10.4	10.8		
Not in poverty	_	_	_	_	_	4.3	4.3	4.2	4.4		
Nativity statuse											
Native child and parents	_	_	_	_	_	1.3	1.2	1.0	1.1		
Foreign-born parent	_	_	_	_	_	21.8	21.6	20.8	21.2		
Native child	_	_	_	_	_	17.2	16.7	16.1	16.5		
Foreign-born child	_	_	_	_	_	36.0	36.7	36.3	3 <i>7</i> .1		
Family type											
Two married parents	_	_	_	_	_	5.4	5.5	5.4	5.6		
Mother only	_	_	_	_	_	4.3	4.2	4.1	4.4		
Father only	_	_	_	_	_	6.8	6.4	6.4	6.0		
No parent	_	_	_	_	_	8.6	7.5	7.5	6.9		
Education of parent ^f											
Less than high school graduate	_	_	_	_	_	17.8	17.0	18.2	20.3		
High school graduate	_	_	_	_	_	4.4	4.6	4.5	5.1		
Some college	_	_	_	_	_	3.0	3.1	2.9	2.8		
Bachelor's degree or higher	_	_	_	_	_	2.8	2.9	2.7	2.8		
Race and Hispanic origing	0.0	4.0	4.0	4.0	5.0						
White	2.8	4.2	4.3	4.9	5.2	_	4.0	-	- 4.2		
White-alone White, non-Hispanic	0.5	0.7	0.6	0.7	_ 1.0	4.4	4.2	3.8	4.3		
White-alone, non-Hispanic	0.5	0.7	-	0.7	-	1.3	1.4	1.3	1.4		
Black	0.5	0.7	1.5	1.5	1.3	-	-	-	-		
Black-alone	-	-	_	_	_	1.4	1.2	1.3	1.6		
Black, non-Hispanic	0.3	0.5	1.2	0.9	1.0	_	_	_	_		
Black-alone, non-Hispanic	_	_	_	_	_	1.2	1.0	1.2	1.3		
American Indian and Alaskan Native	_	4.5	1.4	3.8	8.2	_	_	_	_		
American Indian and Alaska Native-alone	-	_	_	_	_	4.6	4.4	4.4	3.8		
Asian and Pacific Islanderh	_	24.5	25.0	19.4	13.9	-	_	_	_		
Asian-alone	_	_	_	_	_	19.8	20.5	18. <i>7</i>	17.5		
Native Hawaiian and											
Other Pacific Islander-alone	_	_	_	_	_	10.3	8.4	6.3	6.2		
Other	19.5	9.0	18.1	27.1	_	- 0.4.7	-	-	-		
Some other race alone	_	_	_	_	_	24.7	22.1	23.8	22.0		
Two or more races	- 29.7	26.7	27.0	30.0	22.4	4.2	3.9	3.9	3.2		
Hispanic or Latino ⁱ	28.7	26.7	27.9	30.9	23.4	22.8	21.3	20.5	20.9		

Table POP5 (cont.)

Language spoken at home and difficulty speaking English: Number of children ages 5–17 who speak a language other than English at home by language spoken and ability to speak English, and the percentages of those speaking a language other than English at home and those with difficulty speaking English,^a by selected characteristics, selected years 1979–2003

		Current	Population	on Survey	American Community Survey						
	1979	1989	1992	1995⁵	1999 ^b	2000	2001	2002	2003		
Children who speak another language at home and have difficulty speaking English (cont.)											
Region											
Northeast	2.9	4.5	4.8	5.0	4.4	5.0	5.1	5.0	5.5		
Midwest	1.1	1.2	1.5	2.3	2.0	2.8	2.9	3.0	3.2		
South	2.2	3.8	3.3	3.4	3.6	4.4	4.1	4.3	4.7		
West	6.5	8.6	9.8	11.4	10.5	10.0	9.7	9.0	8.7		

⁻ Not available.

NOTE: All nonresponses to the CPS language questions are excluded from the tabulations, except in 1999. In 1999, imputations were instituted for nonresponse on the language items.

SOURCE: U.S. Census Bureau, October (1992, 1995, and 1999) and November (1979 and 1989) Current Population Surveys, and 2000–2003 American Community Survey.

^a Respondents were asked if the children in the household spoke a language other than English at home and how well they could speak English. Categories used for reporting were "Very well," "Well," "Not well," and "Not at all." All those reported to speak English less than "Very well" were considered to have difficulty speaking English based on an evaluation of the English-speaking ability of a sample of the children in the 1980s.

^b Numbers from the Current Population Survey (CPS) in 1995 and after may reflect changes in the survey because of newly instituted computer-assisted interviewing techniques and/or because of the change in the population controls to the 1990 Census-based estimates, with adjustments.

^c In the 1979 CPS questionnaire, the language spoken at home variable had 10 specific categories: Chinese, Filipino, French, German, Greek, Italian, Polish, Portuguese, Spanish, and Other. In the 1989 CPS questionnaire, the language spoken at home variable had 34 specific categories. In the 1992 to 1999 CPS questionnaires, the language spoken at home variable had 4 categories: Spanish, Asian, Other European, and Other. In the American Community Survey (ACS), respondents are asked the question, and their response is recorded in an open-ended format.

^d Limited to the population for whom poverty status is determined.

^e Native parents means that all of the parents that the child lives with are native-born, while foreign-born means that at least one of the child's parents is foreign-born. Anyone with U.S. citizenship at birth is considered native, which includes persons born in the United States and in U.S. outlying areas, and persons born abroad with at least one American parent.

^f Highest level of educational attainment is shown for either parent.

For race and Hispanic-origin data in this table: From 1979 to 1999, following the 1977 OMB standards for collecting and presenting data on race, the CPS asked respondents to choose *one* race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Beginning in 2000, following the 1997 OMB standards for collecting and presenting data on race, the ACS asked respondents to choose one or more races from the following: White, Black, Asian, American Indian or Alaska Native, and Native Hawaiian or Other Pacific Islander. In addition, a "Some other race" category was included with OMB approval. Those who chose more than one race were classified as "Two or more races." Except for those who were "Two or more races," all race groups discussed in this table from 2000 onward refer to people who indicated only one racial identity within the racial categories presented. People who responded to the question on race by indicating *only one* race are referred to as the race-*alone* population. The use of the race-alone population in this table does not imply that it is the preferred method of presenting or analyzing data. Data from 2000 onward are not directly comparable with data from earlier years. Data on race and Hispanic origin are collected separately; Hispanics may be any race.

h In 2000, the "Asian or Pacific Islander" category was separated into two categories, "Asian" and "Native Hawaiian or Other Pacific Islander." Because of this change, race data from 2000 to the present are not directly comparable with data from earlier years.

ⁱ Persons of Hispanic origin may be of any race.

³ The Northeast region includes the states of Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont. The Midwest region includes the states of Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin. The South region includes the states of Alabama, Arkansas, Delaware, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia, and the District of Columbia (a state equivalent). The West region includes the states of Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

^k A linguistically isolated household is one in which no person age 14 or over speaks English at least "Very well." That is, no person age 14 or over speaks only English at home, or speaks another language at home and speaks English "Very well."

Table POP6.A

Family structure and children's living arrangements: Percentage of children ages 0–17 by presence of married parents in household, race,^a and Hispanic origin, selected years 1980–2004

Race, ^a Hispanic origin, and family type	1980	1985	1990	1995	1996	1997	1998	1999	2000	2001ь	2002b	2003b	2004 ^b
Total													
Two married parents ^c Mother only ^d Father only ^d No parent	77 18 2 4	74 21 2 3	73 22 3 3	69 23 4 4	68 24 4 4	68 24 4 4	68 23 4 4	68 23 4 4	69 22 4 4	69 22 4 4	69 23 5 4	68 23 5 4	68 23 5 4
White, non-Hispanic													
Two married parents ^c Mother only ^d Father only ^d No parent	- - -	- - -	81 15 3 2	78 16 3 3	77 16 4 3	77 17 4 3	76 16 5 3	77 16 4 3	77 16 4 3	78 16 4 2	77 16 4 3	- - -	- - -
White-alone, non-His	panic												
Two married parents ^c Mother only ^d Father only ^d No parent	- - -	- - -	- - -	- - -	- - -	- - -	- - -	- - -	- - -	- - -	- - -	77 16 4 3	77 16 4 3
Black													
Two married parents ^c Mother only ^d Father only ^d No parent	42 44 2 12	39 51 3 7	38 51 4 8	33 52 4 11	33 53 4 9	35 52 5 8	36 51 4 9	35 52 4 10	38 49 4 9	38 48 5 10	38 48 5 8	- - - -	- - -
Black-alone													
Two married parents ^c Mother only ^d Father only ^d No parent	- - -	- - -	- - -	- - -	- - -	- - -	- - - -	- - - -	- - - -	- - - -	- - - -	36 51 5 9	35 50 6 9

Table POP6.A (cont.)

Family structure and children's living arrangements: Percentage of children ages 0–17 by presence of married parents in household, race,^a and Hispanic origin, selected years 1980–2004

Race, ^a Hispanic origin, and family type	1980	1985	1990	1995	1996	1997	1998	1999	2000	2001ь	2002b	2003b	2004b
Hispanice													
Two married parents ^c	75	68	67	63	62	64	64	63	65	65	65	65	65
Mother only ^d	20	27	27	28	29	27	27	27	25	25	25	25	25
Father only ^d	2	2	3	4	4	4	4	5	4	5	5	6	5
No parent	3	3	3	4	5	5	5	5	5	6	5	5	5

⁻ Not available.

NOTE: Family structure refers to the presence of biological, adoptive, and stepparents in the child's household. Thus, a child with a biological mother and stepfather living in the household is said to have two married parents.

Two married parents family:

In the CPS, children live in a two-parent family if they are living with a parent who is married with his or her spouse present. This is not an indicator of the biological relationship between the child and the parents. The parent who is identified could be a biological, step, or adoptive parent. If a second parent is present and not married to the first parent, then the child is identified as living with a single parent.

Single parent family:

A "single" parent is defined as a parent who is not currently living with a spouse. Single parents may be married and not living with their spouse; they may be divorced, widowed, or never married. As with the identification of two married parents described above, if a second parent is present and not married to the first, then the child is identified as living with a single parent.

SOURCE: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplements. U.S. Census Bureau, Families and Living Arrangements reports and detailed tables (from 1994) are available on the U.S. Census Bureau website at http://www.census.gov/population/www/socdemo/hh-fam.html.

^a For race and Hispanic-origin data in this table: From 1980 to 2002, following the 1977 OMB standards for collecting and presenting data on race, the Current Population Survey (CPS) asked respondents to choose *one* race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Beginning in 2003, following the 1997 OMB standards for collecting and presenting data on race, the CPS asked respondents to choose *one or more* races from the following: White, Black, Asian, American Indian or Alaska Native, and Native Hawaiian or Other Pacific Islander. All race groups discussed in this table from 2003 onward refer to people who indicated only one racial identity within the racial categories presented. People who responded to the question on race by indicating *only one* race are referred to as the race-*alone* population. The use of the race-alone population in this table does not imply that it is the preferred method of presenting or analyzing data. Data from 2003 onward are not directly comparable with data from earlier years. Data on race and Hispanic origin are collected separately; Hispanics may be any race.

b Beginning with March 2001, data are from the expanded CPS sample and use population controls based on Census 2000.

^c Excludes families where parents are not living as a married couple.

d Because of data limitations, includes some families where both parents are present in the household but living as unmarried partners.

^e Persons of Hispanic origin may be of any race.

Table POP6.B

Family structure and children's living arrangements: Detailed living arrangements of children by gender, race, Hispanic origin, age, parent's education and poverty status, 2001

		Two parents ^a							
		Two biolog	gical/adoptive	•	al/adoptive ad stepparent				
Characteristic	Total	Married	Cohabiting	Married	Cohabiting				
Total (in thousands)	72,501	44,369	1,839	4,613	287				
Percent									
Gender									
Male	51.1	51.4	47.1	51.3	43.6				
Female	48.9	48.6	52.9	48.7	56.1				
Race and Hispanic origin ^b									
White	<i>7</i> 8.1	85.7	70.2	83.4	69.3				
White, non-Hispanic	62.2	69.9	44.2	69.6	48.8				
Black	16.2	8.0	21.4	13.5	29.6				
Black, non-Hispanic	15.3	7.4	19.0	12.8	24.7				
American Indian and Alaskan Native	1.5	1.1	5.5	1.4	1.0				
Asian or Pacific Islander	4.1	5.2	2.9	1.7	*				
Other race, non-Hispanic	5.1	5.9	7.7	2.3	1.0				
Hispanic (of any race)	17.4	16.8	29.1	15.4	25.8				
Age									
Ages 0-5	32.1	35.4	62.9	9.9	19.2				
Ages 6-14	51.2	50.1	32.5	63.5	61.7				
Ages 15-17	16.7	14.6	4.6	26.7	19.2				
Father's education									
Father not present	26.5	_	_	_	_				
Less than high school	11.1	14.1	36.3	14.1	1 <i>7</i> .1				
High school diploma or equivalent	21.3	27.3	35.7	36.8	53.3				
Some college	19.2	25.5	21.2	32.7	20.9				
Bachelor's degree or more	22.0	33.1	6.8	16.4	9.1				
Mother's education									
Mother not present	7.0	_	_	_	_				
Less than high school	15.0	13.3	35.0	14.4	33.4				
High school diploma or equivalent	27.4	27.0	30.6	35.4	45.6				
Some college	29.1	30.0	28.3	36.2	18.5				
Bachelor's degree or more	21.5	29.7	6.1	14.0	2.4				
Poverty									
Below 100% poverty	17.6	10.1	28.3	10.1	22.0				
100-199% poverty	22.8	19.4	33.8	23.8	34.5				
200% poverty and above	57.4	69.8	26.6	65.6	39.0				
Income not reported	2.2	0.8	11.3	0.5	4.5				

Table POP6.B (cont.)

Family structure and children's living arrangements: Detailed living arrangements of children by gender, race, Hispanic origin, age, parent's education and poverty status, 2001

	One parent							
	Biological/adop		Biological/adop	tive father				
Characteristic	Not cohabiting	Cohabiting	Not cohabiting	Cohabiting				
Total (in thousands)	14,548	1,749	1,790	385				
Percent								
Gender								
Male	50.8	47.3	57.3	53.8				
Female	49.2	52.7	42.7	46.2				
Race and Hispanic origin ^b								
White	59.0	76.5	77.8	75.8				
White, non-Hispanic	42.6	61.6	67.0	65.2				
Black	36.5	17.5	17.9	19.0				
Black, non-Hispanic	34.6	16.6	16.9	16.1				
American Indian and Alaskan Native	1.8	4.1	3.0	2.1				
Asian or Pacific Islander	2.7	1.9	1.3	2.9				
Other race, non-Hispanic	4.0	4.3	4.1	2.9				
Hispanic (of any race)	18.9	1 <i>7</i> .3	12.0	15.6				
Age								
Ages 0-5	30.3	23.1	17.2	26.5				
Ages 6-14	51.8	57.4	59.0	50.1				
Ages 15-17	17.9	19.5	23.8	23.4				
Father's education								
Father not present	100.0	100.0	_	_				
Less than high school	_	_	17.4	21.6				
High school diploma or equivalent	_	_	35.4	41.0				
Some college	_	_	30.1	27.5				
Bachelor's degree or more	_	_	17.2	9.9				
Mother's education								
Mother not present	_	_	100.0	100.0				
Less than high school	21.8	23.9	_	_				
High school diploma or equivalent	32.9	41.6	_	_				
Some college	34.3	30.5	_	-				
Bachelor's degree or more	11.1	4.0	_	-				
Poverty								
Below 100% poverty	36.7	36.6	13.9	28.6				
100-199% poverty	29.9	31.2	27.7	25.5				
200% poverty and above	31.5	25.7	56.0	43.6				
Income not reported	2.0	6.5	2.5	2.3				

Table POP6.B (cont.)

Family structure and children's living arrangements: Detailed living arrangements of children by gender, race, Hispanic origin, age, parent's education and poverty status, 2001

			No parents		
Characteristic	Grandparent	Other relatives only — no grandparent	Nonrelative only – not foster	Foster parent(s)	All other ^c
Total (in thousands)	1,407	798	247	260	204
Percent					
Gender					
Male	51.3	46.6	53.0	54.6	38.2
Female	48.7	53.5	46.6	45.8	62.3
Race and Hispanic origin ^b					
White	51.6	52.0	83.8	58.5	80.9
White, non-Hispanic	37.7	32.6	70.4	48.1	48.0
Black	43.9	44.4	13.4	30.0	14.2
Black, non-Hispanic	43.5	43.7	12.1	26.9	12.7
American Indian and Alaskan Nativ		0.9	1.2	6.2	3.9
Asian or Pacific Islander	1.4	2.8	1.6	5.4	1.5
Other race, non-Hispanic	3.7	2.8	2.4	7.7	4.9
Hispanic (of any race)	15.1	21.2	14.6	16.9	34.3
Age					
Ages 0-5	28.3	15.9	14.2	36.5	11.3
Ages 6-14	51.6	49.2	40.5	44.6	37.3
Ages 15-17	20.1	35.0	44.9	18.8	51.5
Father's education					
Father not present	100.0	100.0	100.0	100.0	100.0
Less than high school	_	_	_	_	_
High school diploma or equivalent	_	_	_	_	_
Some college	_	_	_	_	_
Bachelor's degree or more		_		_	
Mother's education					
Mother not present	100.0	100.0	100.0	100.0	100.0
Less than high school	_	_	_	_	_
High school diploma or equivalent	_	_	_	_	_
Some college Bachelor's degree or more	_	_	_	_	_
-		_		_	_
Poverty	05.5	00.0	17.0	7.7	07.0
Below 100% poverty	35.5	33.3	17.0	7.7	37.3
100 - 199% poverty	25.3	27.3 38.6	2.8		19.1 16.7
200% poverty and above Income not reported	36.8 2.3	0.9	0.8 78.9	1.5 91.2	27.0
income noi reponed	2.3	0.9	/ 0.9	71.2	27.0

[—] Not available.

NOTE: "Householder" is a person who owns or rents the dwelling unit. The partner of the householder is the person reported as the "unmarried partner" of the householder. "Cohabiting" means the parent is cohabiting with an unmarried partner. Relatives are anyone who is reported as related to the householder by blood, marriage, or adoption.

SOURCE: U.S. Census Bureau, Survey of Income and Program Participation (SIPP), 2001 Panel, Wave 2.

^{*} Represents or rounds to zero.

^a The category "two parents" includes 4 children not shown who live with 2 stepparents.

^b In 2001, following the 1977 OMB standards for collecting and presenting data on race, the SIPP asked respondents to choose one race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Data on race and Hispanic origin are collected separately; Hispanics may be any race.

^c The category "All other" includes children who live with other relatives and nonrelatives (no grandparents) and children who maintain their own household, or are the spouse or partner of the householder.

Table POP7.A

Births to unmarried women: Birth rates for unmarried women by age of mother, selected years 1980–2003

(Live births to unmarried women per 1,000 in specified age group)

Age of mother Total, ages 15-44	1980 29.4	1985 32.8	1990 43.8	1995 44.3	1998 43.3	1999 43.3	2000 44.1	2001 43.8	2002 43.7	2003 44.9
Age										
Ages 15-17	20.6	22.4	29.6	30.1	26.5	25.0	23.9	22.0	20.8	_
Ages 18-19	39.0	45.9	60.7	66.5	63.6	62.3	62.2	60.6	58.6	_
Ages 20-24	40.9	46.5	65.1	68.7	70.4	70.8	72.2	71.3	70.5	_
Ages 25-29	34.0	39.9	56.0	54.3	55.4	56.9	58.5	59.5	61.5	_
Ages 30-34	21.1	25.2	37.6	38.9	38.1	38.1	39.3	40.4	40.8	_
Ages 35-39	9.7	11.6	17.3	19.3	18.7	19.0	19.7	20.4	20.8	_
Ages 40-44	2.6	2.5	3.6	4.7	4.6	4.6	5.0	5.3	5.4	_

Not available.

NOTE: 2003 data for the total, ages 15–44, is preliminary. 2003 data for specific age groups are not available. Births to unmarried women were somewhat underreported in Michigan and Texas during the years 1989–93; data since 1994 have been reported on a complete basis. Ventura, S.J. and Bachrach, C.A. (2000). Nonmarital childbearing in the United States, 1940–99. *National Vital Statistics Reports* 48(16). Hyattsville, MD: National Center for Health Statistics.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System. Hamilton, B.E., Martin, J.A., and Sutton, P.D. (2004). Births: Preliminary data for 2003. *National Vital Statistics Reports,* 53(9). Hyattsville, MD: National Center for Health Statistics. Martin, J.A., Hamilton, B.E., Sutton, P.D., Ventura, S.J., Menacker, F., and Munson, M.L. (2003). Births: Final data for 2002. *National Vital Statistics Reports,* 52(10). Hyattsville, MD: National Center for Health Statistics. Hamilton, B.E., Sutton, P.D., and Ventura, S.J. (2003). Revised birth and fertility rates for the 1990s: United States, and new rates for Hispanic populations, 2000 and 2001. *National Vital Statistics Reports,* 51(12). Hyattsville, MD: National Center for Health Statistics. Ventura, S.J. and Bachrach, C.A. (2000). Nonmarital childbearing in the United States, 1940–99. *National Vital Statistics Reports,* 48(16). Hyattsville, MD: National Center for Health Statistics.

Table POP7.B Births to unmarried women: Percentage of all births that are to unmarried women by age of mother, selected years 1980-2003 Age of mother 1980 1985 1990 1995 1998 1999 2000 2001 2002 2003 All ages 18.4 22.0 28.0 32.8 33.0 33.2 33.5 34.0 34.6 32.2 Age Under age 15 97.1 88.7 91.8 91.6 93.5 96.6 96.5 96.5 96.3 97.0 Ages 15-17 61.5 70.9 77.7 83.7 87.5 87.7 87.7 87.8 88.5 89.7 Ages 18-19 39.8 50.7 61.3 69.8 73.6 74.0 74.3 74.6 75.8 77.3 26.3 Ages 20-24 19.3 36.9 47.7 48.5 49.5 50.4 51.6 53.2 44.7 21.5 Ages 25-29 9.0 12.7 18.0 22.5 22.9 23.5 24.4 25.3 26.4 Ages 30-34 7.4 9.7 13.3 14.7 14.0 14.0 14.0 143 14.6 15.1 Ages 35-39 9.4 11.2 13.9 15.7 14.4 14.4 14.3 14.4 14.5 14.8 Ages 40 and older 12.1 14.0 17.0 18.1 16.7 16.5 16.8 17.1 17.3 17.9

NOTE: Data for 2003 are preliminary.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System. Ventura, S.J. (1995). Births to unmarried mothers: United States, 1980–92. Vital and Health Statistics, Series, 21(53). Hyattsville, MD: National Center for Health Statistics. Ventura, S.J. and Bachrach, C.A. (2000). Nonmarital childbearing in the United States, 1940–99. National Vital Statistics Reports, 48(16). Martin, J.A., Hamilton, B.E., Ventura, S.J., Menacker, F., and Park, M.M. (2002). Births: Final data for 2000. National Vital Statistics Reports, 50(5). Hyattsville, MD: National Center for Health Statistics. Martin, J.A., Hamilton, B.E., Ventura, S.J., Menacker, F., Park, M.M., and Sutton, P.D. (2002). Births: Final data for 2001. National Vital Statistics. Martin, J.A., Hamilton, B.E., Sutton, P.D., Ventura, S.J., Menacker, F., and Munson, M.L. (2003). Births: Final data for 2002. National Vital Statistics. Martin, J.A., Hamilton, B.E., Martin, J.A., and Sutton, P.D. (2004) Births: Preliminary data for 2003. National Vital Statistics Reports, 53(9). Hyattsville, MD: National Center for Health Statistics.

Table POP8.A

Child care: Percentage of children ages 0–6, not yet in kindergarten by type of care arrangement and child and family characteristics, 1995 and 2001

			Type of nonparental care arrangement							
	Parent	al care	Total in			Care in	a homeª		Center-based	
	or	nly	nonpare	ntal careb	_By a r	elative	By a no	nrelative	prog	_j ram ^c
Characteristic	1995	2001	1995	2001	1995	2001	1995	2001	1995	2001
Total	39.9	38.8	60.1	61.2	21.1	23.1	18.0	16.3	30.5	33.4
Age										
Ages 0-2	50.5	48.0	49.5	52.0	22.5	23.3	18.9	18.0	11.9	16.5
Ages 3-6, not yet in kindergarten	25.9	26.3	74.1	73.7	19.4	22.7	16.9	14.0	55.0	56.3
Race and Hispanic origin ^d										
White, non-Hispanic	38.3	38.4	61.7	61.6	17.9	20.3	21.3	18.7	32.9	35.1
Black, non-Hispanic	34.2	26.1	65.8	73.9	31.4	34.6	11.6	12.9	33.0	40.2
Hispanic ^e	53.7	52.0	46.3	48.0	23.4	22.9	11.8	11.8	17.0	20.7
Other, non-Hispanic	41.7	34.8	58.3	65.2	25.2	23.3	12.5	14.8	28.1	3 <i>7</i> .1
Poverty status										
Below 100% poverty	50.4	45.3	49.6	54.7	23.2	27.4	10.0	10.6	23.5	26.9
100-199% poverty	47.7	46.3	52.3	53.7	23.0	22.5	13.3	12.6	23.7	27.8
200% poverty and above	29.9	32.7	70.1	67.3	19.1	21.4	25.1	20.5	37.9	38.7
Family type										
Two parents ^f	42.0	42.7	58.0	57.3	17.2	19.0	19.2	16.2	29.9	32.3
Two parents, married	_	42.2	_	57.8	_	18.4	_	16.6	_	33.1
Two parents, unmarried	_	47.3	_	52.7	_	24.4	_	12.4	_	25.0
One parent	33.0	26.5	67.0	73.5	33.3	36.6	15.2	17.3	32.4	36.1
No parents	45.3	17.9	54.8	82.1	17.4	38.5	10.8	9.2	30.5	47.9
Mother's highest level of educ	cationg									
Less than high school	61.7	55.5	38.3	44.5	19.8	21.7	6.6	8.3	15.7	20.8
High school diploma or equivalent	43.7	42.3	56.3	57.7	23.4	26.2	15.0	13.3	26.0	28.1
Some college, including vocational										
technical/associate's degree	34.1	36.7	65.9	63.3	23.6	25.3	19.3	15.4	33.5	35.3
Bachelor's degree or higher	27.7	31.3	72.3	68.7	15.2	16.9	28.4	23.6	42.7	42.1
Mother's employment status ^g										
35 hours or more per week	11.9	14.8	88.1	85.2	33.4	34.0	31.7	26.2	38.9	42.1
Less than 35 hours per week	24.9	29.0	<i>7</i> 5.1	71.0	30.1	31.6	25.6	19.9	35.0	35.6
Looking for work	57.6	57.3	42.4	42.7	16.3	16.7	3.7	9.6	24.7	24.5
Not in the labor force	67.7	67.6	32.3	32.4	7.2	7.0	5.5	4.8	22.0	24.1

Table POP8.A (cont.)

Child care: Percentage of children ages 0–6, not yet in kindergarten by type of care arrangement and child and family characteristics, 1995 and 2001

			Type of nonparental care arrangement								
	Parente	al care	Total	al in		Care in a homea		Center	-based		
	on	ly	nonparental careb		By a re	elative	By a nonrelative		program ^c		
Characteristic	1995	2001	1995	2001	1995	2001	1995	2001	1995	2001	
Region ^h											
Northeast	43.3	35.8	56.7	64.2	21.1	27.0	15.1	15.9	30.4	35.5	
South	34.3	37.0	65.7	63.0	24.3	22.9	16.0	14.1	35.2	36.4	
Midwest	37.7	37.0	62.3	63.0	20.4	22.0	23.4	21.1	29.5	33.8	
West	47.7	45.5	52.3	54.5	17.2	21.4	1 <i>7</i> .8	14.9	24.7	27.1	

Not available.

NOTE: Some children participate in more than one type of arrangement, so the sum of all arrangement types exceeds the total percentage in nonparental care. Center-based programs include day care centers, prekindergartens, nursery schools, Head Start programs, and other early childhood education programs. Relative and nonrelative care can take place in either the child's own home or another home.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Surveys Program (NHES).

^a Relative and nonrelative care can take place in either the child's own home or another home.

^b Some children participate in more than one type of nonparental care arrangement. Thus, details do not sum to the total percentage of children in nonparental care.

^c Center-based programs include day care centers, prekindergartens, nursery schools, Head Start programs, and other early childhood education programs.

^d The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately but are combined for reporting.

e Persons of Hispanic origin may be of any race.

^f Refers to adults' relationship to child and does not indicate marital status.

g Children without a mother in the home are excluded from estimates of mother's highest level of education and mother's employment status.

h Regions: Northeast includes Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont. Midwest includes Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin. South includes Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia. West includes Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

Table POP8.B

Child care: Primary child care arrangements for children ages 0–4 with employed mothers by selected characteristics, selected years 1985–2002

Type of child care (during mother's work hours) Percent	1985	1988	1990	1991	1993	1995	1997	1999	2002
Total									
Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d	8.1 15.7 15.9 8.2 23.1 28.2 0.8	7.6 15.1 13.9 7.2 25.8 28.9 1.6	6.4 16.5 14.3 8.8 27.5 25.1 1.3	8.7 20.0 15.8 7.7 23.1 23.3 1.6	6.2 15.9 17.0 9.0 29.9 21.6 1.1	5.4 16.6 15.9 5.5 25.1 28.4 2.9	3.2 17.7 17.5 7.4 20.4 20.2 13.7	3.0 17.1 19.7 8.0 21.0 18.8 12.4	3.2 17.5 18.6 6.2 24.3 17.2 13.0
Poverty status									
Below poverty Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d Other ^e	- - - - - -	11.3 15.0 19.4 11.3 21.6 21.1 0.8	- - - - - -	9.5 26.7 16.3 11.4 21.1 15.1 2.7	8.1 16.2 20.0 15.8 21.0 18.8 1.2	4.5 20.1 22.4 7.0 25.8 16.5 3.5	3.9 18.7 20.7 12.3 14.9 14.7	2.9 14.5 23.8 13.5 18.3 18.0 8.8	4.1 19.9 19.7 10.0 15.9 12.6 17.6
At or above poverty Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d Other ^e	- - - - - -	7.3 15.1 13.4 6.8 27.8 29.6 1.6	- - - - -	8.5 19.4 15.6 7.3 25.1 24.2 1.5	5.9 16.0 16.0 8.0 32.3 21.8 1.1	5.5 16.4 15.1 5.3 24.8 29.9 2.8	3.1 17.7 17.2 6.8 21.2 20.9 12.9	2.9 17.6 19.3 7.3 21.1 19.4 12.2	3.1 17.3 18.7 5.7 25.1 18.4 11.7
Region									
Northeast Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d Other ^e	- - - - - -	- - - - - -	- - - - - -	- - - - - -	- - - - - -	5.3 22.4 12.9 8.0 24.4 23.9 3.0	2.7 19.0 19.2 9.9 15.9 19.9	2.3 21.5 18.7 7.3 18.4 17.9	2.9 21.4 18.8 4.4 24.5 14.7
South									
Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d	- - - - -	- - - - -	- - - - -	- - - - -	- - - - -	4.3 9.3 17.1 5.3 30.7 30.0 3.1	3.0 13.9 18.1 5.7 27.7 18.2 13.4	3.3 12.9 21.8 7.6 26.8 18.1 9.3	2.1 13.4 20.9 7.8 28.0 15.9 11.8
Midwest									
Mother care ^a Father care ^a Grandparent care Other relative care ^b	- - -	- - -	- - -	- - -	- - -	6.3 19.1 15.4 5.0	3.3 22.2 15.6 8.0	2.0 20.3 16.3 6.6	3.5 21.6 15.9 3.6
Center-based care ^c Other nonrelative care ^d Other ^e	_ _ _	- - -	- - -	- - -	- - -	21.1 30.9 2.0	16.8 22.2 11. <i>7</i>	19.9 24.0 10.9	20.7 22.6 11.9

Table POP8.B (cont.)

Child care: Primary child care arrangements for children ages 0–4 with employed mothers by selected characteristics, selected years 1985–2002

Type of child care (during mother's work hours) Percent	1985	1988	1990	1991	1993	1995	1997	1999	2002
Region (cont.)									
West									
Mother carea	_	_	_	_	_	5.6	3.8	3.9	4.9
Father care ^a	_	_	_	_	_	18.5	17.9	17.0	17.8
Grandparent care	_	_	_	_	_	17.5	17.9	21.4	18.3
Other relative care ^b	_	_	_	_	_	4.1	7.6	10.5	8.1
Center-based care ^c	_	_	_	_	_	23.1	17.4	15.5	19.9
Other nonrelative cared	_	_	_	_	_	27.2	20.7	16.7	17.1
Other®	_	_	_	_	_	3.8	14.6	14.8	14.0
Race and Hispanic origin of mother									
White									
Mother care	-	_	_	_	_	5.8	3.7	3.2	3.5
Father care ^a	_	_	_	_	_	1 <i>7</i> .8	18.7	18.1	18.4
Grandparent care	_	_	_	_	_	15.5	16.5	17.7	17.9
Other relative care ^b	_	_	_	_	_	4.5	6.5	7.6	4.9 23.2
Center-based care ^c Other nonrelative care ^d	_	_	_	_	_	24.3 29.0	19.8 21.2	20.1	23.2 18.4
Other ^e	_	_	_	_	_	29.0	13.6	20.9 12.1	13.5
	_	_	_	_	_	2.9	13.0	12.1	13.3
Black						0.1	0.7	1.0	1.0
Mother carea	_	_	_	_	_	2.1	0.7	1.8	1.2
Father carea	_	_	_	_	_	8.8	11.9	12.9	13.5
Grandparent care Other relative care ^b	_	_	_	_	_	16.0 9.9	23.7 13.2	25.1	21.6 12.6
Center-based care ^c	_	_	_	_	_	32.5	25.8	10.6 27.0	27.4
Other nonrelative cared	_	_	_	_	_	28.3	14.3	13.1	14.3
Other ^e	_	_	_	_	_	2.3	10.2	9.4	9.2
Other race						2.0			7.2
Mother carea			_		_	6.1	2.0	3.4	4.5
Father care ^a			_		_	18.8	21.2	16.1	18.5
Grandparent care	_	_	_	_	_	21.9	20.2	39.4	22.2
Other relative care ^b	_	_	_	_	_	7.6	6.1	6.9	6.2
Center-based care ^c	_	_	_	_	_	1 <i>7</i> .5	14.9	11.8	23.6
Other nonrelative cared	_	_	_	_	_	23.3	19.6	8.5	14.3
Other ^e	_	_	_	_	_	4.7	16.0	13.5	10.6
Hispanic (of any race)									
Mother care ^a	_	_	_	_	_	3.6	1.3	2.6	2.7
Father care ^a	_	_	_	_	_	19.0	17.5	18.6	15.1
Grandparent care	_	_	_	_	_	17.0	23.2	21.9	23.9
Other relative care ^b	_	_	_	_	_	8.7	12.6	14.0	12.0
Center-based care ^c	_	_	_	_	_	20.8	12.4	10.9	19.8
Other nonrelative cared	_	_	_	_	_	25.0	21.7	18.2	13.9
Other ^e	_	_	_	_	_	5.8	11.4	13.6	12.6
White, non-Hispanic									
Mother carea	_	_	_	_	_	6.1	4.0	3.2	3.7
Father care ^a	_	_	_	_	_	17.6	18.9	18.1	19.1
Grandparent care	_	_	_	_	_	15.4	15.3	17.0	16.5
Other relative care ^b	_	_	_	_	_	4.0	5.7	6.2	3.6
Center-based care ^c	_	_	_	_	_	24.8	21.0	22.2	24.3
Other nonrelative cared	_	_	_	_	_	29.4	21.1	21.3	19.6
Other ^e	_	_	_	_	_	2.7	13.9	12.0	13.3

Table POP8.B (cont.)

Child care: Primary child care arrangements for children ages 0–4 with employed mothers by selected characteristics, selected years 1985–2002

Type of child care (during mother's work hours) Percent	1985	1988	1990	1991	1993	1995	1997	1999	2002
Race and Hispanic origin of mothe	r ^f (cont.)								
Black, non-Hispanic Mother care ^a Father care ^a Grandparent care Other relative care ^b	- - -	- - -	- - -	- - - -	- - - -	2.2 8.9 15.7 10.1	0.8 11.7 23.9 13.0	1.9 12.4 24.4 10.9	1.2 13.2 22.9 12.0
Center-based care ^c Other nonrelative care ^d Other ^e	- - -	- - -	- - -	- - -	- - -	33.2 27.9 1.9	26.4 13.9 10.3	27.5 13.5 9.3	27.0 13.7 9.9
Educational attainment of mother									
Less than high school Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d Other ^e	- - - - -	- - - - -	- - - - -	- - - - -	- - - - -	6.3 18.2 21.2 10.8 16.9 20.8 4.8	3.6 17.5 18.4 15.2 12.7 17.3 15.2	1.7 14.4 23.4 20.7 16.3 13.5 9.9	4.1 19.2 15.5 12.0 17.5 17.4 14.2
High school diploma or equivalent Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d Other ^e	- - - - -	- - - - -	- - - - -	- - - - -	- - - - -	5.6 16.6 20.5 5.4 25.7 23.2 2.6	2.1 19.0 20.3 7.8 18.1 19.0 13.6	3.5 20.3 23.5 7.9 18.8 14.2 11.7	2.5 19.7 23.2 6.0 20.0 14.5 13.9
Some college, including vocational/ technical/an associate degree Mother carea Father carea Grandparent care Other relative careb Center-based carea Other nonrelative cared	- - - - -	- - - - -	- - - - -	- - - - -	- - - - -	4.9 18.4 14.2 5.8 25.6 27.7 3.1	3.5 19.3 18.5 7.1 22.1 16.6 12.8	1.9 16.7 20.1 7.4 18.6 21.1 14.1	3.2 19.3 20.8 7.5 23.2 15.3 10.6
Bachelor's degree or higher Mother care ^a Father care ^a Grandparent care Other relative care ^b Center-based care ^c Other nonrelative care ^d Other ^e	- - - - - -	- - - - -	- - - - -	- - - - -	- - - - -	5.2 14.4 11.4 3.4 26.0 36.9 2.3	3.7 14.9 13.5 5.0 23.5 26.6 12.6	4.0 15.7 14.4 4.0 27.5 24.4 9.9	3.5 13.7 13.9 3.4 29.9 22.6 13.0

Table POP8.B (cont.)

Child care: Primary child care arrangements for children ages 0–4 with employed mothers by selected characteristics, selected years 1985–2002

Type of child care (during mother's work hours) Percent	1985	1988	1990	1991	1993	1995	1997	1999	2002
Family structure									
Two married parents									
Mother care ^a	_	_	_	_	_	6.2	3.7	3.4	3.5
Father care ^a	_	_	_	_	_	18.7	20.6	19.9	20.6
Grandparent care	_	_	_	_	_	14.4	14.7	16.4	17.3
Other relative care ^b	_	_	_	_	_	4.8	6.0	6.4	4.7
Center-based care ^c	_	_	_	_	_	23.0	19.6	20.7	22.7
Other nonrelative cared	_	_	_	_	_	29.4	20.9	19.7	17.2
Other ^e	-	_	_	_	_	3.1	14.4	13.4	13.8
Mother only									
Mother care ^a	_	_	_	_	_	2.8	1.5	1.9	2.5
Father care ^a	_	_	_	_	_	10.4	9.1	10.1	9.8
Grandparent care	_	_	_	_	_	20.5	26.6	29.1	22.7
Other relative care ^b	_	_	_	_	_	7.2	12.3	12.2	10.2
Center-based care ^c	_	_	_	_	_	30.3	23.1	21.5	27.0
Other nonrelative cared	_	_	_	_	_	26.1	1 <i>7.7</i>	17.6	18.4
Other ^e	_	_	_	_	_	2.4	9.5	7.4	9.2

Not available.

NOTE: Employed mothers are those with wage and salary employment or other employment arrangements including contingent work and self-employment. Data for years 1995 to 2002 were proportionately redistributed to account for tied responses for the primary arrangement so they total to 100 percent and are comparable to earlier years.

SOURCE: U.S. Census Bureau, Survey of Income and Program Participation.

^a Mother and father care includes care while the mother worked.

^b Other relatives include siblings and other relatives.

^c Center-based care includes day care centers, nursery schools, preschools, and Head Start programs.

^d Other nonrelative care includes family day care providers, in-home babysitters, and other nonrelatives providing care in either the child's or provider's home.

^e Other for 1985–1993 includes children in kindergarten/grade school, in a school-based activity, or in self care. In 1995, it also includes children with no regular arrangement. Beginning in 1997, other includes children in kindergarten/grade school, self-care, and with no regular arrangement, but does not include school-based activities as they were deleted as categorical choices for preschoolers.

^f For race and Hispanic-origin data in this table: From 1995 to 2002, following the 1977 OMB standards for collecting and presenting data on race, the Survey of Income and Program Participation (SIPP) asked respondents to choose one race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Data on race and Hispanic origin are collected separately; Hispanics may be any race.

Table POP8.C

Child care and activities: Percentage of children in kindergarten through 8th grade by weekday care and before- and after-school activities by grade level, poverty status, race, and Hispanic origin, 2001

	Poverty status Race and Hispanic origina					a		
Grade level,		Below	-	200%				
care arrangement,		100%	100-199%	poverty	White,	Black,		Other,
and activity	Total	poverty	poverty	and above	non-Hispanic	non-Hispanic	Hispanic	non-Hispanic
Kindergarten through	3rd grad	de						
Care arrangements								
Parental care only	47.8	49.9	48.0	46.7	51.0	32.7	51.0	43.3
Nonparental care ^b	52.2	50.1	52.0	53.3	49.0	67.3	49.0	56.7
Home-based care ^c	29.6	27.7	36.3	27.2	27.9	39.0	29.9	22.8
Center-based care	23.3	23.3	15.4	27.2	21.1	32.2	21.0	30.6
Activities used for								
supervision	6.0	5.1	6.9	6.0	5.3	8.8	4.1	11.4
Self care	2.8	4.2	3.8	1.8	1.8	6.7	3.0	3.7
Activities								
Any activity ^b	43.2	18.9	33.0	58.5	53.8	26.7	22.6	35.8
Artsd	14.7	5.8	9.6	21.1	17.4	12.3	6.6	17.4
Sports	27.7	7.0	16.3	42.1	36.6	10.8	13.5	21.3
Clubs	2.6	1.6	1.8	3.4	3.1	1.5	2.4	0.9
Academic activities ^e	4.0	1.4	3.5	5.3	4.4	3.9	2.7	3.7
Community services	3.7	0.8	1.8	5.9	5.0	2.2	1.6	1.0
Religious activities	17.9	8.6	15.8	23.0	21.4	13.8	10.5	13.7
Scouts	13.1	4.1	9.4	18.7	18.0	5.9	4.3	6.2
4th through 8th grade	•							
Care arrangements								
Parental care only	44.9	41.4	46.0	45.7	49.0	30.8	43.9	44.5
Nonparental careb	55.1	58.6	54.0	54.3	51.0	69.2	56.1	55.5
Home-based care ^c	20.8	24.3	21.1	19.4	18.9	28.0	22.6	16.2
Center-based care	1 <i>7</i> .8	22.1	18.2	16.0	13.6	28.5	22.3	20.3
Activities used for								
supervision	8.5	3.3	7.4	9.1	7.9	10.6	7.2	12.4
Self care	25.0	24.6	25.5	25.0	23.8	31.9	22.1	25.5
Activities								
Any activity ^b	52.6	28.1	44.1	65.3	62.3	34.7	33.1	50.4
Arts ^d	22.2	8.4	16.0	30.0	26.6	15.4	10.7	24.4
Sports	38.5	15.7	30.9	50.2	46.8	23.6	22.0	35.0
Clubs	7.4	3.3	6.2	9.4	9.1	3.5	4.5	<i>7</i> .1
Academic activitiese	9.1	6.9	7.4	10.6	8.9	11.1	6.2	12.2
Community services	11.2	4.3	8.9	14.7	13.3	6.6	6.5	13.9
Religious activities	26.4	13.6	21.0	33.4	31.8	17.0	15.9	22.1
Scouts	9.4	3.0	7.9	12.4	12.7	3.5	3.2	6.4

^a The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately but are combined for reporting. Persons of Hispanic origin may be of any race.

NOTE: Estimates differ from those reported previously because an additional category ("activities used for supervision") has been included.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Surveys Program (NHES).

^b Children may have multiple nonparental child care arrangements, as well as be involved in more than one activity; thus, the total of the four kinds of nonparental arrangements may not sum to the category "Nonparental care;" likewise, the seven activities listed may not sum to the category "Any activity." Activities include organized programs a child participates in outside of school hours that are not part of a before- or after-school program.

^c Home-based care includes care that takes place in a relative's or nonrelative's private home.

^d Arts include activities such as music, dance, and painting.

^e Academic activities include activities such as tutoring or math lab.

Table POP9.A

Children's environments: Percentage of children ages 0–17 living in counties in which one or more of the Primary National Ambient Air Quality Standards was exceeded, 1999–2003

	1999	2000	2001	2002	2003
One or more standards	69.45	65.38	65.57	63.46	62.08
Pollutant					
Ozone	65.39	61.97	62.18	62.15	60.29
Carbon monoxide	5.99	0.74	0.74	4.26	1.07
Particulate matter (PM ₁₀)	9.65	4.76	4.83	5.23	5.10
Particulate matter (PM _{2.5})	33.06	27.24	27.21	23.83	21.47
Lead	0.73	1.06	1.08	0.08	0.01
Nitrogen dioxide	0.00	0.00	0.00	0.00	0.00
Sulfur dioxide	0.48	0.06	0.06	0.06	0.11

NOTE: Percentages are based on the number of children living in counties where a primary national ambient air quality standard was exceeded, divided by the total population of children. This analysis differs from the analysis utilized by the U.S. Environmental Protection Agency for the designation of "nonattainment areas" for regulatory compliance purposes. For more information on the air quality standards that are used in calculating these percentages, please see the following report: U.S. Environmental Protection Agency. (2003). America's Children and the Environment: Measures of Contaminants, Body Burdens, and Illnesses. Available at: http://www.epa.gov/envirohealth/children/. The standards can also be found at http://www.epa.gov/air/criteria.html. SOURCE: U.S. Environmental Protection Agency, Office of Air and Radiation, Air Quality System.

Table POP9.B

Blood cotinine levels: Percentage of children ages 4–17 with specified blood cotinine levels by age, race and Hispanic origin, 1988–1994 and 1999–2002

Characteristic	1988-1994	1999-2002	
Ages 4-17			
Total Any detectable cotinine Blood cotinine more than 1.0 ng/mL	87.4 23.7	57.5 16.5	
White, non-Hispanic Any detectable cotinine Blood cotinine more than 1.0 ng/mL	86.7 24.2	54.6 19.1	
Black, non-Hispanic Any detectable cotinine Blood cotinine more than 1.0 ng/mL	94.5 36.6	81.8 22.4	
Mexican American Any detectable cotinine Blood cotinine more than 1.0 ng/mL	83.5 10. <i>7</i>	46.5 5.2	
Ages 4-11			
Total Any detectable cotinine Blood cotinine more than 1.0 ng/mL	87.7 25.7	59.0 18.1	
White, non-Hispanic Any detectable cotinine Blood cotinine more than 1.0 ng/mL	86.4 25.9	<i>57.7</i> 21.1	
Black, non-Hispanic Any detectable cotinine Blood cotinine more than 1.0 ng/mL	94.5 37.2	83.5 23.9	
Mexican American Any detectable cotinine Blood cotinine more than 1.0 ng/mL	83.8 11.4	47.2 4.6	
Ages 12-17			
Total Any detectable cotinine Blood cotinine more than 1.0 ng/mL	87.0 21.1	55.4 14.5	
White, non-Hispanic Any detectable cotinine Blood cotinine more than 1.0 ng/mL	87.0 21.7	50.5 16.3	
Black, non-Hispanic Any detectable cotinine Blood cotinine more than 1.0 ng/mL	94.4 35.9	79.6 20.5	
Mexican American Any detectable cotinine Blood cotinine more than 1.0 ng/mL	83.0 9.7	45.4 6.0	

^a From 1988–2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately but are combined for reporting. Estimates are not shown for American Indian or Alaskan Native, Asian, or Native Hawaiian or Pacific Islander race due to the small sample size for each of these groups.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey.

NOTE: "Any detectable cotinine" indicates blood cotinine levels at or above 0.05 nanograms per milliliter (ng/mL), the detectable level of cotinine in blood. Cotinine levels are reported for nonsmoking children only.

Table POP9.C

Exposure to environmental tobacco smoke: Percentage of children ages 0–6 living in homes where someone smokes regularly by race, Hispanic origin, and poverty status, 2003

Characteristic	Percentage
All	
Total	10.6
Race and Hispanic origina	
White, non-Hispanic Black, non-Hispanic Hispanic ^b Other, non-Hispanic	11.1 14.2 3.8 12.3
Household poverty status	
Below 100% poverty 100-199% poverty 200% poverty and above	21.8 18.4 6.7

^a The revised 1997 OMB standards were used to classify persons into one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander. Data on race and Hispanic origin were collected separately, but are combined for reporting.

SOURCE: U.S. Environmental Protection Agency, Indoor Environments Division, National Survey on Environmental Management of Asthma and Children's Exposure to Environmental Tobacco Smoke.

 $^{^{\}rm b}$ Persons of Hispanic origin may be of any race.

Table ECON1.A

Characteristic	1980	1985	1990	1993	1995	1997	1998	1999	2000	2001	2002	2003
Below 100% poverty												
All children ^b Gender	18	21	21	23	21	20	19	1 <i>7</i>	16	16	17	18
Male Female	_	_	21 21	23 23	20 21	20 20	18 19	1 <i>7</i> 1 <i>7</i>	16 16	16 16	1 <i>7</i> 1 <i>7</i>	18 18
Age												
Ages 0-5 Ages 6-17	_	_	24 19	26 21	24 19	22 19	21 18	19 16	18 15	18 15	19 16	20 16
Race and Hispanic origin ^c White, non-Hispanic White-alone, non-Hispanic	12	13	12	14	11	11	11	9	9	10	- 9	_ 10
Black	42	44	45	46	42	37	37	33	31	30	- -	-
Black-alone Hispanic ^d	33	- 40	_ 38	- 41	_ 40	- 37	_ 34	30	_ 28	_ 28	32 29	34 30
Region Northeast Midwest South	- - -	- - -	18 19 24	21 20 25	19 17 24	20 15 22	19 15 20	16 14 19	15 13 18	15 13 19	15 13 19	15 15 20
West	_	_	20	23	22	22	21	18	17	16	17	18
Related children ^a Children in all families, total Related children ages 0-5 Related children ages 6-17	18 20 1 <i>7</i>	20 23 19	20 23 18	22 26 20	20 24 18	19 22 18	18 21 1 <i>7</i>	1 <i>7</i> 18 16	16 18 15	16 18 15	16 19 15	1 <i>7</i> 20 16
White, non-Hispanic	11	12	12	13	11	11	10	9	9	9	_	_
White-alone, non-Hispanic Black Black-alone	- 42	_ 43	_ 44	- 46	- 42	- 37	- 36	33	- 31	30	9 - 32	9 - 34
Hispanic ^d	33	- 40	38	- 40	39	36	34	30	_ 28	_ 27	28	34 29
Children in married-couple families, total Related children ages 0-5	- -	- -	10 12	12 13	10 11	10 11	9	9	8 9	8 9	9	9
Related children ages 6-17 White, non-Hispanic	_	_	10 7	11	9	9 5	9 5	8 5	8 5	<i>7</i> 5	8	8
White-alone, non-Hispanic	_	_	_	- -	_	_	_	_	_	_	_ 5	_ 5
Black	_	_	18	18	13	13	12	11	9	10	_	_
Black-alone Hispanic ^d	_	_	_ 27	30	_ 28	_ 26	23	22	_ 21	20	12 21	11 21
Children in female-householder families, no husband present, total Related children ages 0-5 Related children ages 6-17	51 65 46	54 66 48	53 66 47	54 64 49	50 62 45	49 59 45	46 55 42	42 51 39	40 50 36	39 49 35	40 49 36	42 53 37
White, non-Hispanic	_	_	40	39	34	37	33	29	28	29	_	_
White-alone, non-Hispanic Black Black-alone	- 65	- 67	- 65	- 66	62	_ 55	_ 55	- 52	- 49	- 47	29 - 48	31 - 50
Hispanic ^d	65	72	68	66	66	63	60	52	50	49	48	51

Characteristic	1980	1985	1990	1993	1995	1997	1998	1999	2000	2001	2002	2003
Below 50% poverty												
All children ^b Gender	_	-	9	10	9	9	8	7	7	7	7	8
Male Female	_ _	_ _	9 9	10 10	8 9	9 9	8 8	7 7	7 7	7 7	7 7	8 8
Age Ages 0-5 Ages 6-17	_	_ _	11	12 9	11 7	10	10 7	8 7	8	8 <i>7</i>	8	10 7
Race and Hispanic origin ^c White, non-Hispanic	_	_	5	6	4	5	4	4	4	4	_	_
White-alone, non-Hispanic Black	_ _	_	_ 23	_ 26	_ 21	_ 20	_ 18	_ 15	_ 15	- 16	4	4
Black-alone Hispanic ^d	_	_	14	15	- 16	- 16	14	11	10	11	15 11	18 11
Region Northeast Midwest South	- - -	- - -	8 9 11	10 9 12	9 7 10	10 6 10	8 6 9	8 6 7	6 6 8	7 6 8	6 6 8	7 7 9
West	_	_	6	8	8	9	8	6	6	6	6	8
Related children ^a Children in all families, total Related children ages 0-5 Related children ages 6-17	7 - -	8 -	8 10 <i>7</i>	10 12 8	8 10 <i>7</i>	8 10 8	8 9 7	6 8 6	6 8 6	7 8 6	7 8 6	7 10 6
White, non-Hispanic White-alone, non-Hispanic	_	- -	4	5	3 –	4	4	3	3	3	_ 3	_ 4
Black Black-alone Hispanic ^d	1 <i>7</i> - -	22 - -	22 - 14	26 - 14	20 - 16	20 - 16	1 <i>7</i> - 13	15 - 11	15 - 9	16 - 10	- 15 11	- 1 <i>7</i> 11
Children in married-couple families, total Related children ages 0-5 Related children ages 6-17	_ _ _	- - -	3 3 2	3 4 3	3 3 3	3 3 3	3 3 2	2 2 2	2 2 2	2 3 2	2 3 2	2 3 2
White, non-Hispanic White-alone, non-Hispanic	- -	- -	2	2	1 -	1 -	2	1 –	2	2	_ 2	_ 1
Black Black-alone Hispanic ^d	- - -	- - -	4 - 7	7 - 7	3 - 9	5 - 7	3 - 5	3 - 5	3 - 4	3 - 5	- 3 5	- 4 5
Children in female-householder families, no husband present, total Related children ages 0-5 Related children ages 6-17	- - -	- - -	28 37 23	29 36 25	24 34 19	26 34 22	23 31 19	20 27 17	19 28 15	20 28 17	20 28 16	22 31 17
White, non-Hispanic White-alone, non-Hispanic Black	_ _ _	_ _ _	19 - 37	19 - 40	13 - 32	1 <i>7</i> - 31	15 - 29	13 - 25	12 - 24	13 - 27	_ 12 _	_ 15 _
Black-alone Hispanic ^d	- -	- -	32	30	33	- 36	32	_ 27	_ 25	_ 26	25 26	27 25

Characteristic	1980	1985	1990	1993	1995	1997	1998	1999	2000	2001	2002	2003
Below 150% poverty												
All children ^b	_	_	31	34	32	31	30	28	27	28	28	29
Gender												
Male	_	_	31	34	32	30	29	28	27	27	28	29
Female	_	_	32	34	33	31	30	29	27	28	28	29
Age												
Ages 0-5	_	_	35	38	36	34	32	31	29	30	31	32
Ages 6-17	_	_	30	32	31	29	28	28	25	26	27	27
Race and Hispanic origin ^c												
White, non-Hispanic	_	_	21	22	20	20	18	18	16	1 <i>7</i>	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	1 <i>7</i>	18
Black	_	_	58	61	57	52	52	48	46	46	_	_
Black-alone	_	_		_	_		_				48	49
Hispanic ^d	_	_	56	60	59	56	53	50	47	47	47	48
Region			0.7	00	00	0.0	0.0	0.7	0.0	0.5	0.5	0.5
Northeast Midwest	_	_	27 29	29 30	29 27	28 24	28 25	26 23	23 22	25 23	25 23	25 25
South	_	_	36	39	36	34	32	31	30	31	31	32
West	_		31	35	35	34	33	31	29	28	30	30
Related children ^a	_	_	31	33	33	54	33	51	2.7	20	30	30
Children in all families, total	29	32	31	33	32	30	29	28	26	27	27	28
Related children ages 0-5		3 <i>Z</i>	34	38	35	33	32	30	29	30	31	31
Related children ages 6-17	_	_	29	31	30	28	27	27	25	25	26	27
_												27
White, non-Hispanic	_	_	21	22	19	19	18	17	16	17	- 1 <i>7</i>	1 <i>7</i>
White-alone, non-Hispanic Black	- 57	- 59	- 57	- 61	- 56	- 51	- 52	- 48	- 45	- 46	-	-
Black-alone	_	J,	_	_	50	_	J2 _	40	45	40	48	48
Hispanic ^d	_	_	55	60	59	56	52	49	47	46	47	48
Children in married-couple families, total	_	_	20	22	20	19	18	1 <i>7</i>	16	17	18	18
Related children ages 0-5	_		22	25	21	21	20	19	18	19	20	20
Related children ages 6-17	_	_	19	20	19	17	17	17	15	16	16	17
-			15			12		11				
White, non-Hispanic White-alone, non-Hispanic	_	_	-	15	13	12	11	- 11	10	11	11	11
Black	_		32	35	26	24	26	21	21	21		- ' '
Black-alone	_	_	-	_	_	_	_	_	_	_	25	22
Hispanic ^d	_	_	47	51	50	47	43	41	39	39	40	41
Children in female-householder families,												
no husband present, total	_	_	67	68	65	64	62	60	57	57	57	58
Related children ages 0-5	_	_	77	77	75	74	71	68	67	66	65	68
Related children ages 6-17	_	_	62	63	60	60	58	56	53	54	53	54
White, non-Hispanic	_	_	54	53	49	52	48	45	44	46	_	_
White-alone, non-Hispanic	_	_	_	_	- -	_	-	45	_	40	45	46
Black	_	_	77	80	76	72	72	71	66	66	-	_
Black-alone	_	_		_	_	_	_	_	_	_	65	67
Hispanic ^d	_	_	80	81	82	78	76	71	70	66	66	68
•												

Characteristic	1980	1985	1990	1993	1995	1997	1998	1999	2000	2001	2002	2003
Below 200% poverty												
All children ^b Gender	-	-	42	45	43	41	40	39	38	38	38	39
Male Female	_	-	43 42	45 45	43 44	41 42	40 41	39 38	38 38	38 38	38 38	38 40
Age												
Ages 0-5 Ages 6-17	_	_	46 41	50 43	47 42	45 40	43 39	42 38	41 36	42 37	42 37	42 38
Race and Hispanic origin ^c White, non-Hispanic	_	_	32	33	31	30	28	27	26	27	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	26	26
Black	_	_	68	72	68	64	64	61	59	57	_	_
Black-alone Hispanic ^d	_	_	- 70	- 73	- 73	- 69	- 67	- 64	63	- 62	60 62	61 63
Region												
Northeast	_	_	36	39	38	38	37	35	33	34	34	34
Midwest	_	_	40	41	37	36	34	33	31	33	33	34
South West	_	_	48 43	50 46	48 46	46 44	43 44	42 42	42 41	42 40	42 40	44 41
Related children ^a			40	40	40	44	44	42	41	40	40	41
Children in all families, total	_	_	42	44	43	41	40	38	37	38	38	39
Related children ages 0-5	_	_	45	49	46	45	43	41	41	41	41	42
Related children ages 6-17	_	_	40	42	41	39	38	37	35	36	36	3 <i>7</i>
White, non-Hispanic	_	_	31	32	30	29	27	26	25	26	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	1 <i>7</i>	26
Black	_	_	68	72	68	64	64	60	59	57	_	_
Black-alone Hispanic ^d	_	_	- 69	- 72	- 73	- 69	- 66	64	- 62	- 61	48 47	61 62
Children in married-couple families, total	_		31	33	31	29	28	27	26	27	27	27
Related children ages 0-5	_	_	34	36	33	33	31	29	29	30	30	30
Related children ages 6-17	_	_	30	31	30	27	27	26	25	25	25	26
White, non-Hispanic	_	_	25	25	23	21	20	19	18	19	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	19	19
Black	_	_	45	50	39	38	39	35	36	33	_	_
Black-alone	_	_	_	_	_	_	_	_	_	_	36	36
Hispanic ^d	_	_	62	65	66	63	59	58	55	54	56	56

Child poverty: Percentage of all children and related children ages 0–17 living below selected poverty levels by selected characteristics, selected years 1980–2003

Characteristic	1980	1985	1990	1993	1995	1997	1998	1999	2000	2001	2002	2003
Below 200% poverty (cont.)												
Children in female-householder families,												
no husband present, total	_	_	77	78	76	<i>7</i> 5	73	72	69	70	69	70
Related children ages 0-5	_	_	85	86	84	83	80	80	78	79	76	78
Related children ages 6-17	_	_	73	74	72	72	70	68	66	66	66	67
White, non-Hispanic	_	_	67	66	61	64	61	59	56	59	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	58	59
Black	_	_	86	88	87	83	82	82	79	77	_	_
Black-alone	_	_	_	_	_	_	_	_	_	_	76	78
Hispanic ^d	_	_	89	89	88	86	84	82	82	80	79	80

⁻ Not available.

NOTE: Data for 1999, 2000, and 2001 use Census 2000 population controls. Data for 2000 onward are from the expanded Current Population Survey sample. The poverty level is based on money income and does not include noncash benefits, such as food stamps. Poverty thresholds reflect family size and composition and are adjusted each year using the annual average Consumer Price Index level. The average poverty threshold for a family of four was \$18,810 in 2003. The levels shown here are derived from the ratio of the family's income to the family's poverty threshold. For more detail, see U.S. Census Bureau, Series P–60, no. 219.

SOURCE: U.S. Census Bureau, Current Population Survey, 1981 to 2004 Annual Social and Economic Supplements.

^a A related child is a person ages 0–17 who is related to the householder by birth, marriage, or adoption, but is not the householder or the householder's spouse.

^b Includes children not related to the householder.

^c For race and Hispanic-origin data in this table: From 1980 to 2002, following the 1977 OMB standards for collecting and presenting data on race, the Current Population Survey (CPS) asked respondents to choose *one* race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Beginning in 2003, following the 1997 OMB standards for collecting and presenting data on race, the CPS asked respondents to choose *one* or more races from the following: White, Black, Asian, American Indian or Alaska Native, and Native Hawaiian or Other Pacific Islander. All race groups discussed in this table from 2002 onward refer to people who indicated only one racial identity within the racial categories presented. People who responded to the question on race by indicating *only one* race are referred to as the race-*alone* population. The use of the race-alone population in this table does not imply that it is the preferred method of presenting or analyzing data. Data from 2002 onward are not directly comparable with data from earlier years. Data on race and Hispanic origin are collected separately; Hispanics may be any race

^d Persons of Hispanic origin may be of any race.

Table ECON1.B

Income distribution: Percentage of related children ages 0–17 by family income relative to the poverty line, selected years 1980–2003

Poverty level	1980	1985	1990	1992	1995	1997	1998	1999	2000	2001	2002	2003
Extreme poverty	6.6	8.1	8.3	9.9	7.9	8.5	7.6	6.5	6.3	6.6	6.6	7.3
Below poverty, but above												
extreme poverty	11.3	12.0	11.6	11. <i>7</i>	12.2	10.8	10.7	10.1	9.4	9.1	9.7	9.9
Low income	24.0	22.8	21.8	22.0	22.5	21.4	21.2	21.9	21.3	21.9	21.5	21.5
Medium income	41.4	37.7	37.0	34.9	34.5	34.4	33.5	32.8	34.0	33.2	32.7	32.0
High income	16.8	19.4	21.3	21.5	22.8	25.0	27.0	28.7	29.0	29.2	29.6	29.4
Very high income	4.3	6.1	7.4	7.3	8.9	10.1	11.2	12.3	12.6	12.9	12.9	13.1

NOTE: Data for 1999, 2000, and 2001 use Census 2000 population controls. Data for 2000 onward are from the expanded Current Population Survey sample. Estimates refer to children who are related to the householder and who are ages 0–17. The income classes are derived from the ratio of the family's income to the family's poverty threshold. Extreme poverty is less than 50 percent of the poverty threshold (i.e., \$9,405 for a family of four in 2003). Poverty is between 50 and 99 percent of the poverty threshold (i.e., between \$9,405 and \$18,809 for a family of four in 2003). Low income is between 100 and 199 percent of the poverty threshold (i.e., between \$18,810 and \$37,619 for a family of four 2003). Medium income is between 200 and 399 percent of the poverty threshold (i.e., between \$37,620 and \$75,239 for a family of four in 2003). High income is 400 percent of the poverty threshold or more (i.e., \$75,240 or more for a family of four in 2003). Very high income is 600 percent of the poverty threshold and over (i.e., \$112,860 or more for a family of four in 2003). [These income categories are similar to those used in the Economic report for the President (1998). A similar approach is found in Hernandez, Donald J. (1993), America's children: Resources from family, government, and the economy. New York: Russell Sage Foundation for the National Committee for Research on the 1980 census, except that Hernandez uses the relationship to median income to define his categories. The medium- and high-income categories are similar for either method.]

SOURCE: U.S. Census Bureau, Current Population Survey, 1981 to 2004 Annual Social and Economic Supplements.

The Measurement of Poverty

The measurement of poverty used in this report is the official poverty measure used by the U.S. Census Bureau. A child is living below poverty if the child lives in a family with before-tax cash income below a defined level of need, called the poverty line. The official poverty line in use today was devised in the early 1960s based on the minimum cost of what was considered to be a nutritionally adequate diet. As originally defined, the poverty index signified the inability of families to afford the basic necessities of living, based on the budget and spending patterns of those Americans with an average standard of living. Since then, the poverty line has been updated annually for inflation using the Consumer Price Index for all urban consumers. The poverty line depends on the size of the family and the number of children in the family.

A 1995 report by the National Research Council¹ recommended changing the definition of both the poverty thresholds and the resources that are used to measure poverty. Its recommendations included the following:

Defining income: On the one hand, the definition of family income should be expanded to include other important resources of purchasing power, such as the earned income tax credit, food stamps, and housing subsidies. On the other hand, some necessary expenditures that reduce a family's resources available for basic consumption needs should be subtracted from income, such as taxes, necessary child care and other work-related expenditures, child support payments, and out-of-pocket medical expenditures.

Setting a threshold: Poverty thresholds should be adjusted to provide a more accurate measure of family income requirements. First, the consumption bundle used to derive thresholds should be based on food, clothing, shelter, and utilities, not food consumption alone. Second, thresholds should reflect regional variations in housing costs. Third, thresholds should be adjusted for family size in a more consistent way than is currently done. Finally, thresholds should be updated to reflect changes in expenditure patterns over time.

Recent U.S. Census Bureau reports² used key elements of the National Research Council proposal to estimate alternative poverty rates from 1990 to 1997. These estimates produced increases in child poverty from 1990 to 1993 similar to, and decreases in poverty from 1993 to 1997 somewhat larger than, those under the official measure. These changes reflect the fact that the new measure more completely accounts for in-kind transfers, such as food stamps and housing benefits, and for work-related expenditures. As a result, the new measure tends to decrease the relative poverty rate of children who are more likely to live in families that receive in-kind transfers, and to increase the relative poverty rate of children living with employed low-income persons with higher work-related expenses.

¹ Citro, C.F. and Michael, R.T. (Eds.). (1995). Measuring poverty: A new approach. Washington, DC: National Academy Press.

² U.S. Census Bureau. (1999). Experimental poverty measures: 1990–1997. *Current Population Reports*, Series P-60-205; and Short, K. (2001). Experimental Poverty Measures: 1999. *Current Population Reports*, Series P-60-216. Washington, DC: U.S. Census Bureau.

Table ECON2

Secure parental employment: Percentage of children ages 0–17 living with at least one parent employed year round, full time^a by family structure, race, Hispanic origin, poverty status, and age, selected years 1980–2003

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002	2003
All children living with par	rent(s)b									
Total	70	70	72	74	77	79	80	79	78	77
Race and Hispanic origin ^c										
White, non-Hispanic	75	77	79	81	84	84	85	84	83	82
Black, non-Hispanic	50	48	50	54	58	64	66	65	64	61
Hispanic ^d	59	55	60	61	68	71	72	73	73	71
Poverty status										
Below poverty	21	20	22	25	31	31	34	32	33	30
At or above poverty	81	82	85	86	87	88	88	87	87	86
Age										
Ages 0-5	67	67	68	69	74	76	76	76	75	73
Ages 6-17	72	72	74	76	79	80	81	80	79	79
Children living in families	maintained	l by two į	parents							
Total	80	81	85	87	89	90	90	89	88	88
Race and Hispanic origin										
White, non-Hispanic	81	83	86	89	91	91	92	91	90	90
Black, non-Hispanic	73	76	84	85	86	88	90	89	84	85
Hispanic	71	70	74	77	82	83	85	84	82	82
Poverty status										
Below poverty	38	3 <i>7</i>	44	46	56	52	58	54	54	52
At or above poverty	84	87	89	91	92	93	93	92	91	91
Age										
Ages 0-5	76	79	83	86	88	89	89	88	85	86
Ages 6-17	81	82	85	87	89	90	91	90	89	88
With both parents working										
year round, full time	1 <i>7</i>	20	25	28	31	32	33	32	30	29
Children living in families	maintained	by single	e mother:	S ^e						
Total	33	32	33	38	44	47	49	48	50	47
Race and Hispanic origin										
White, non-Hispanic	39	39	40	46	52	52	53	52	52	52
Black, non-Hispanic	28	25	27	33	39	46	49	48	49	44
Hispanic ^c	22	22	24	27	36	39	38	42	45	43
Poverty status										
Below poverty	7	7	9	14	1 <i>7</i>	18	20	19	19	17
At or above poverty	59	59	60	61	66	66	67	67	69	69
Age										
Ages 0-5	20	20	21	24	31	35	36	38	40	34
Ages 6-17	38	37	40	45	50	52	55	53	54	53
-										

Table ECON2 (cont.)

Secure parental employment: Percentage of children ages 0–17 living with at least one parent employed year round, full time^a by family structure, race, Hispanic origin, poverty status, and age, selected years 1980–2003

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002	2003
Children living in families m	aintained	by single	e fathers							
Total	57	60	64	67	70	70	69	69	68	63
Race and Hispanic origin ^c										
White, non-Hispanic	61	62	68	72	72	76	74	<i>7</i> 1	70	66
Black, non-Hispanic	41	59	53	64	66	51	52	58	64	54
Hispanic ^d	53	53	59	58	69	65	68	72	70	63
Poverty status										
Below poverty	15	23	21	24	34	28	21	29	34	27
At or above poverty	68	69	74	79	79	79	79	78	77	73
Age										
Ages 0-5	48	57	58	54	65	66	65	67	65	56
Ages 6-17	59	62	67	74	72	71	70	70	70	65

^a Year round, full-time employment is defined as usually working full time (35 hours or more per week) for 50 to 52 weeks.

Ì	^b Total children living with										
	parent(s) (in thousands)	60,683	61,264	63,351	68,090	68,814	69,118	69,126	69,514	70,075	70,089
	Total living with relatives but no	ot									
	with parent(s) (in thousands)	1,954	1,379	1,455	2,160	2,159	2,187	2,212	2,092	2,226	2,380

^c The 1977 OMB standards for data on race and ethnicity were used to classify persons into racial groups.

SOURCE: U.S. Census Bureau, Current Population Survey, 1981 to 2004 Annual Social and Economic Supplements.

^d Persons of Hispanic origin may be of any race.

 $^{^{\}rm e}$ Includes some families where both parents are present in the household, but living as unmarried partners.

Table ECON3

Housing problems: Percentage of households with children ages 0–17 that reported housing problems by type of problem, selected years 1978–2003°

Household type	1978	1983	1989	1993	1995	1997	1999	2001	2003
All households with children									
Number of households (in millions)	32.3	33.6	35.4	35.4	37.2	37.0	37.5	38.6	38.4
Percent with									
Any problems	30	33	33	34	36	36	35	36.1	36.9
Inadequate housing ^b	9	8	9	7	7	7	7	6.7	5.8
Crowded housing	9	8	7	6	7	7	7	6.3	6.2
Cost burden greater than 30 percent	15	21	24	26	28	28	28	28.5	30.1
Cost burden greater than 50 percent	6	11	9	11	12	12	11	11.2	11.5
Severe problems	8	12	10	11	12	11	11	11.1	11.3
Very-low-income renter households v	vith childı	ren ^c							
Number of households (in millions)	4.2	5.1	5.9	6.6	6.5	6.4	6.2	6.0	6.4
Percent with									
Any problems	79	83	77	75	77	82	80	79.4	77.5
Inadequate housing ^b	18	18	18	14	13	16	15	15.4	12.8
Crowded housing	22	18	17	14	17	17	17	15.4	14.5
Cost burden greater than 30 percent	59	68	67	67	69	73	70	69.5	70.4
Cost burden greater than 50 percent	31	38	36	38	38	41	37	37.7	36.2
Severe problems	33	42	31	33	31	32	29	30.2	29
Rental assistance	23	23	33	33	33	31	31	30.3	28.1

^a Because of questionnaire changes, data since 1997 on families with rental assistance, priority problems, and severe physical problems are not directly comparable with earlier data. See Office of Policy Development and Research, U.S. Department of Housing and Urban Development. (2003). *Trends in worst case needs for housing, 1978–1999: A report to Congress on worst case housing needs—Plus update on worst case needs in 2001.* Washington, DC: U.S. Department of Housing and Urban Development.

NOTE: Data are available for 1978, 1983, 1989, and biennially since 1993. 1978 data are based on 1970 Census weights; 1983 and 1989 data on 1980 weights; 1993, 1995, 1997, and 1999 data on 1990 weights; and 2001 and 2003 data on 2000 weights. Moderate or severe physical problems: See definition in Appendix A of the American Housing Survey summary volume, American Housing Survey for the United States in 1999, Current Housing Reports, H150/99, U.S. Census Bureau, 2000. Cost burden: Expenditures on housing and utilities are greater than 30 percent of reported income. Rental assistance: Renters are either in a public housing project or have a subsidy (i.e., pay a lower rent because a Federal, State, or local government program pays part of the cost of construction, mortgage, or operating expenses). Severe problems: For households not reporting housing assistance, cost burden is greater than 50 percent of income or severe physical problems are present.

SOURCE: U.S. Census Bureau and the U.S. Department of Housing and Urban Development, American Housing Survey. Tabulated by U.S. Department of Housing and Urban Development.

^b Inadequate housing refers to housing with "moderate or severe physical problems." The most common problems meeting the definition are lacking complete plumbing for exclusive use, having unvented room heaters as the primary heating equipment, and multiple upkeep problems such as water leakage, open cracks or holes, broken plaster, or signs of rats.

^c Very-low-income households are those with incomes at or below one-half the median income in a geographic area.

Table ECON4.A

Food security: Percentage of children ages 0–17 in food-insecure households by presence of hunger and selected characteristics, selected years 1995–2003

Characteristic	1995°	1999	2001	2002	2003
All children					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	19.4 6.1 4.8 1.3	16.9 3.8 3.1 0.7	17.6 4.1 3.5 0.6	18.1 4.3 3.5 0.8	18.2 4.1 3.5 0.6
Below 100% poverty					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	44.4 15.6 12.2 3.4	44.0 11.8 9.6 2.2	45.9 12.9 10.3 2.6	45.6 12.3 9.9 2.4	45.2 12.5 10.5 2.0
100-199% poverty					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	25.4 7.2 5.8 1.4	23.4 4.9 4.0 0.9	27.1 5.6 4.8 0.8	28.4 6.3 5.1 1.2	29.6 6.3 5.4 0.9
200% poverty and above					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	4.8 1.1 0.9 0.2	5.2 0.6 0.4 0.2	5.5 0.9 0.8 0.1	6.0 1.1 1.0 0.1	6.2 0.9 0.8 0.1
White-alone, non-Hispanic ^b					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	14.0 4.1 3.3 0.8	11.0 2.3 1.9 0.4	11.9 2.7 2.5 0.2	12.6 3.0 2.6 0.4	12.0 2.9 2.7 0.2
Black-alone, non-Hispanic ^b					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	30.6 11.1 8.8 2.3	28.6 6.2 5.2 1.0	29.6 6.9 5.5 1.4	29.4 6.8 5.5 1.3	30.8 6.6 5.6 1.0
Hispanic ^b					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	33.9 10.5 7.9 2.6	29.2 7.1 5.8 1.3	28.6 6.6 5.3 1.3	29.2 6.7 5.1 1.6	30.8 6.8 5.2 1.6
Other, non-Hispanic ^b					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	17.7 5.6 4.5 1.1	18.4 4.8 2.9 1.9	17.3 4.4 3.3 1.1	16.0 4.5 2.7 1.8	14.5 3.2 2.9 0.3
Northeast					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	16.8 4.8 4.0 0.8	13.9 3.2 2.9 0.3	13.2 2.6 1.8 0.8	15.2 4.0 3.3 0.7	15.9 3.7 3.2 0.5

Food security: Percentage of children ages 0–17 in food-insecure households by presence of hunger and selected characteristics, selected years 1995–2003

Characteristic	1995□	1999	2001	2002	2003
Midwest					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	16.2 4.6 3.8 0.8	14.2 2.5 1.9 0.6	14.0 3.3 2.8 0.5	15.8 3.8 3.5 0.3	16.5 3.5 3.2 0.3
South					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child West	20.5 6.8 5.5 1.3	17.9 3.5 2.8 0.7	19.9 4.5 3.9 0.6	20.2 4.5 3.6 0.9	19.3 4.4 4.3 0.7
In food-insecure households	23.2	20.3	20.9	19.5	19.8
Food insecure noisenoids Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	7.6 5.5 2.1	5.9 4.7 1.2	5.4 4.7 0.7	4.6 3.5 1.1	4.5 3.9 0.6
Parent or guardian with highest education	less than high s	chool			
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	41.8 13.4 10.4 3.0	40.5 9.6 7.6 2.0	37.6 10.2 9.1 1.1	41.4 9.8 8.0 1.8	37.7 10.1 8.7 1.4
Parent or guardian with highest education	high school				
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	24.9 7.7 6.5 1.2	24.2 5.5 4.8 0.7	25.9 5.6 4.5 1.1	25.1 6.0 4.8 1.2	26.7 5.8 5.0 0.8
Parent or guardian with highest education	some college, ii	ncluding vocati	onal/technical/	an associate's c	legree
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	18.9 6.1 4.6 1.5	15.6 3.5 2.6 0.9	17.5 4.2 3.7 0.5	18.8 4.6 3.8 0.8	19.2 4.4 3.7 0.7
Parent or guardian with highest education	bachelor's deg	ree or higher			
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	5.1 1.3 0.9 0.4	4.4 0.7 0.5 0.2	5.3 1.0 0.8 0.2	5.6 1.1 0.9 0.2	6.1 1.1 1.0 0.1
Married-couple household					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	13.3 3.5 2.7 0.8	11.5 2.0 1.6 0.4	12.6 2.4 1.1 0.3	12.0 2.4 2.0 0.4	12.3 2.1 1.9 0.2
Female-headed household, no spouse					
In food-insecure households Food insecure with hunger, any member Food insecure with hunger, adult only Food insecure with hunger, adult and child	38.6 13.9 11.1 2.8	33.4 9.1 7.5 1.6	33.5 9.2 7.5 1.7	35.5 9.6 7.8 1.8	34.5 9.8 8.0 1.8

Food security: Percentage of children ages 0–17 in food-insecure households by presence of hunger and selected characteristics, selected years 1995–2003

Characteristic	1995∘	1999	2001	2002	2003
Male-headed household, no spouse					
In food-insecure households	21.0	18.8	1 <i>7</i> .1	23.0	24.3
Food insecure with hunger, any member	6.1	4.7	4.2	6.1	5.4
Food insecure with hunger, adult only	5.0	3.9	3.3	5.0	4.7
Food insecure with hunger, adult and child	1.1	0.8	0.9	1.1	0.7

^a Statistics for 1995 are not precisely comparable with those for more recent years, due to a change in the method of screening Current Population Survey (CPS) sample households into the food security questions. However, the effect on 1995 statistics (a slight downward bias) is perceptible only for the broadest category of household food insecurity identified, "In food-insecure households." Statistics for 1996, 1997, 1998, and 2000 are omitted because they are not directly comparable with those for the other years.

NOTE: The food security measure (ECON4.A) is based on data collected annually in the Food Security Supplement to the Current Population Survey (CPS). The most severe level reported is based on the Children's Food Security Scale, while the less severe levels are based on the broader Household Food Security Scale. The three levels of severity reported are nested, in the sense that households experiencing more severe levels of insecurity are subsets of those households that experience less severe levels. The dividing lines, or designated thresholds, between the successive categories reflect a consensus judgment of an expert working group on food security measurement. For detailed explanations, see *Guide to Measuring Household Food Security*, Revised 2000, Alexandria, VA: Food and Nutrition Service (2000); *Measuring Children's Food Security in U.S. households*, 1995–99, Washington, DC: Economic Research Service (2002); and *Household food security in the United States*, 2003, Food Assistance and Nutrition Research Report No. 42, Washington, DC: Economic Research Service (2003).

SOURCE: United States Department of Agriculture, Food and Nutrition Service and Economic Research Service (ERS). Tabulated by ERS

^b Race and Hispanic ethnicity are those of the household reference person. From 1995 to 2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following three racial groups: White, Black, or Other (which included American Indian or Alaskan Native, Asian, and Native Hawaiian or Pacific Islander). Beginning in 2003, the revised 1997 OMB standards were used. Persons could select one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander. For reporting purposes, these are collapsed to White-alone, Black-alone, and all other. Statistics for 2003 are not directly comparable with statistics for earlier years, although examination of the size and food security prevalence rates of the multiple-race categories suggests that effects of the reclassification on food security prevalence statistics were small. In addition, note that data on race and Hispanic origin are collected separately but are combined for reporting.

Table ECON4.B Diet quality: Percentage of children ages 2–18 by age and diet quality as measured by the Healthy Eating Index, 1989–90, 1994–96, and 1999–2000

Characteristic	Ages 2-6	Ages 7-12	Ages 13-18
1989-90			
Good diet Needs improvement Poor diet	20 74 6	11 82 <i>7</i>	5 72 23
1994-96			
Good diet Needs improvement Poor diet	20 70 10	9 75 16	5 69 27
1999-2000			
Good diet Needs improvement Poor diet	20 74 6	8 79 13	4 77 19

NOTE: A Healthy Eating Index (HEI) score above 80 implies a good diet, an HEI score between 51 and 80 implies a diet that needs improvement, and an HEI score less than 51 implies a poor diet. See Table ECON4.D for a description of the HEI and average scores by age. Data for the three time periods are not necessarily comparable because of methodological differences in data collection. SOURCE: U.S. Department of Agriculture, 1989–90 and 1994–96 Continuing Survey of Food Intakes by Individuals; and Centers for Disease Control and Prevention, 1999–2000 National Health and Nutrition Examination Survey.

Table ECON4.C

Diet quality: Percentage of children ages 2–18 by age, poverty status, and diet quality as measured by the Healthy Eating Index, 1989–90, 1994–96, and 1999–2000

Characteristic	Ages 2-6	Ages 7-12	Ages 13-18
1989-90			
At or below poverty			
Good diet	9	11	3
Needs improvement	74	75	72
Poor diet	17	15	25
Above poverty			
Good diet	23	11	5
Needs improvement	74	83	72
Poor diet	3	5	23
1994-96			
At or below poverty			
Good diet	16	7	3
Needs improvement	72	74	66
Poor diet	12	19	31
Above poverty			
Good diet	22	10	5
Needs improvement	69	75	69
Poor diet	9	15	26
1999-2000			
At or below poverty			
Good diet	17	7	3
Needs improvement	78	75	78
Poor diet	5	18	19
Above poverty			
Good diet	22	8	4
Needs improvement	72	81	76
Poor diet	6	11	20

NOTE: A Healthy Eating Index (HEI) score above 80 implies a good diet, an HEI score between 51 and 80 implies a diet that needs improvement, and an HEI score less than 51 implies a poor diet. See Table ECON4.D for a description of the HEI and average scores by age. Data for the three time periods are not necessarily comparable because of methodological differences in data collection. SOURCE: U.S. Department of Agriculture, 1989–90 and 1994–96 Continuing Survey of Food Intakes by Individuals; and Centers for Disease Control and Prevention, 1999–2000 National Health and Nutrition Examination Survey.

Table ECON4.D

Healthy Eating Index: Overall and component mean scores and percentages for children ages 2–18, 1989–90, 1994–96, and 1999–2000

		1989-9	0	1994-96			1999-2000		
		Ages			Ages			Ages	
Component	2-6	7-12	13-18	2-6	7-12	13-18	2-6	7-12	13-18
HEI score									
Overall	70.2	66.6	59.2	69.4	64.6	59.9	70.3	64.1	61.0
1. Grains	7.6	7.0	6.3	7.7	7.5	6.9	8.0	7.5	6.8
2. Vegetables	5.2	5.0	5.6	5.3	5.2	5.9	5.6	4.8	5.3
3. Fruits	6.2	4.6	3.1	6.0	4.1	3.2	5.8	3.7	3.1
4. Milk	8.6	8.3	6.7	7.3	<i>7</i> .1	5.3	7.3	6.9	7.5
5. Meat	6.6	7.0	7.1	5.7	5.7	6.3	5.4	5.5	6.0
6. Total fat	6.7	6.9	6.1	7.3	7.1	7.0	7.3	7.2	7.1
7. Saturated fat	3.7	4.2	4.0	5.5	5.7	6.2	5.8	6.2	6.2
8. Cholesterol	9.4	8.7	8.1	9.0	8.6	7.6	9.0	8.6	8.1
9. Sodium	9.1	7.3	5.8	8.4	6.6	5.6	8.0	6.4	5.7
10. Variety	7.2	7.7	6.5	7.3	7.1	6.0	8.1	7.5	7.2
Percentage of children meeting	the dieto	ry recor	nmendatio	ns for each	compor	nent			
1. Grains	25.6	11.3	15.2	37.4	27.8	24.9	41.4	35.4	27.5
2. Vegetables	7.0	7.7	11.9	21.8	20.5	28.6	29.1	18.2	22.3
3. Fruits	33.0	11.0	6.5	39. <i>7</i>	16.0	11.8	35.9	12.9	12.9
4. Milk	59.6	50.4	28.4	43.5	40.2	20.4	42.5	37.2	25.9
5. Meat	14.1	20.0	25.3	19.4	17.3	27.7	16.7	17.9	24.1
6. Total fat	17.9	16.8	11.6	38.6	33.9	37.0	38.7	36.5	37.8
7. Saturated fat	9.9	5.9	9.0	27.8	28.0	3 <i>7</i> .1	34.0	34.8	34.1
8. Cholesterol	8 <i>7</i> .1	<i>7</i> 5.9	70.2	82.9	78.6	68.6	83.3	79.3	73.9
9. Sodium	59.8	26.3	23.4	57.3	31.0	28.6	51.5	30.0	31.1
10. Variety	30.3	39.5	25.6	42.3	39.2	30.1	57.3	49.3	45.0

NOTE: The Healthy Eating Index (HEI) examines the diet of all Americans. The Index consists of 10 components, each representing different aspects of a healthful diet. Components 1 to 5 measure the degree to which a person's diet conforms to the U.S. Department of Agriculture's Food Guide Pyramid serving recommendations for the five major food groups: grains (bread, cereal, rice, and pasta), vegetables, fruits, milk (milk, yogurt, and cheese), and meat/meat alternatives (meat, poultry, fish, dry beans, eggs, and nuts). Component 6 measures total fat consumption as a percentage of total food energy (calorie) intake. Component 7 measures saturated fat consumption as a percentage of total food energy intake. Components 8 and 9 measure total cholesterol intake and total sodium intake, respectively. Component 10 measures the degree of variety in a person's diet. Each component of the Index has a maximum score of 10 and a minimum score of 0. Intermediate scores are computed proportionately. High component scores indicate intakes close to recommended ranges or amounts. The maximum combined score for the 10 components is 100. An HEI score above 80 implies a good diet, an HEI score between 51 and 80 implies a diet that needs improvement, and an HEI score less than 51 implies a poor diet. Data for the three time periods are not necessarily comparable because of methodological differences in data collection.

SOURCE: U.S. Department of Agriculture, 1989–90 and 1994–96 Center for Nutrition Policy and Promotion, Continuing Survey of Food Intakes by Individuals; and Centers for Disease Control and Prevention, 1999–2000 National Health and Nutrition Examination Survey.

Table ECON5.A

Access to health care: Percentage of children ages 0–17 covered by health insurance^a by selected characteristics, selected years 1987–2003

Characteristic	1987	1990	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
All health insurance													
Total	87	87	86	86	86	85	85	85	87	88	88	88	89
Gender													
Male	87	87	87	86	86	85	85	85	87	88	88	88	89
Female	87	87	86	86	86	85	85	85	87	88	88	89	89
Age Ages 0-5	88	89	88	86	87	86	86	84	87	89	89	89	90
Ages 6-11	87	87	87	87	87	85	86	85	88	88	89	89	89
Ages 12-17	86	85	83	85	86	84	83	84	87	87	87	87	87
Race and Hispanic origin ^b													
White, non-Hispanic	90	90	89	89	90	89	89	89	92	93	93	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	_	92	93
Black	83	85	84	83	85	81	81	80	84	86	86	_	_
Black-alone	- 72	- 72	- 74	- 72	- 73	71	- 71	- 70	- 74	- 75	- 76	86 <i>77</i>	86 79
Hispanic ^c	12	12	/4	12	/3	/ 1	/ 1	70	/4	/3	70	//	79
Region Northeast	92	92	90	88	89	88	88	89	92	92	92	91	91
Midwest	92	91	91	91	91	91	90	89	91	92	92	92	92
South	82	83	83	83	83	82	82	82	84	86	86	86	86
West	85	84	84	83	84	83	83	82	84	86	86	87	88
Private health insurance													
Total	74	<i>7</i> 1	67	66	66	66	67	68	70	70	68	67	66
Gender													
Male	73	<i>7</i> 1	68	66	66	67	67	68	70	70	69	67	66
Female	74	71	67	65	66	66	67	67	70	70	68	68	66
Age	70								, ,	, ,			
Ages 0-5 Ages 6-11	72 74	68 73	63 70	60 67	60 67	62 67	63 68	64 68	66 70	66 70	64 69	63 68	62 66
Ages 12-17	75 75	73 73	69	70	71	70	69	70	73	73	72	71	69
Race and Hispanic origin ^b	, 5	, 0	07	, 0	, ,	, 0	07	, 0	, 0	, 0	, _	, ,	0,
White, non-Hispanic	83	81	78	77	78	78	78	79	81	81	80	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	_	79	78
Black	49	49	46	43	44	45	48	47	52	53	52	_	_
Black-alone	_	_	_	_	_	_	_	_	_	_	_	50	47
Hispanic ^c	48	45	42	38	38	40	42	43	46	45	44	43	42
Region													
Northeast	79	77	71 72	70	<i>7</i> 1	69	69	70 75	73	74	72	71 71	<i>7</i> 1
Midwest South	<i>7</i> 9 68	76 66	73 63	74 62	<i>74</i> 61	<i>75</i> 61	76 62	75 64	77 66	78 66	77 64	76 63	<i>74</i> 61
West	71	68	65	60	61	62	63	63	65	65	64	65	62
, , 551	, ,				0 1	02					0.4		V-2

Access to health care: Percentage of children ages 0–17 covered by health insurance by selected characteristics, selected years 1987–2003

Characteristic	1987	1990	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
Government health insur	anced												
Total	19	22	27	26	26	25	23	23	23	24	26	27	29
Gender													
Male	19	22	27	26	26	25	23	22	24	25	26	27	29
Female	19	22	27	27	27	25	24	23	23	24	26	27	29
Age													
Ages 0-5	22	28	35	33	33	31	29	27	27	29	31	32	34
Ages 6-11	19	20	25	25	26	25	23	23	23	25	26	27	29
Ages 12-17	16	18	20	20	21	19	19	19	19	20	20	22	24
Race and Hispanic origin ^b													
White, non-Hispanic	12	15	19	18	18	18	1 <i>7</i>	16	16	17	19	_	_
White-alone, non-Hispanic	_	_	_	_	_	_	_	_	_	_	_	18	21
Black	42	45	50	48	49	45	40	42	40	42	42	_	_
Black-alone	_	_	_	_	_	_	_	_	_	_	_	44	47
Hispanic ^c	28	32	41	38	39	35	34	31	33	35	3 <i>7</i>	40	42
Region													
Northeast	18	21	25	23	23	24	23	24	24	24	25	25	26
Midwest	18	20	24	24	23	21	19	19	20	19	21	22	25
South	20	23	29	29	28	27	25	24	24	26	29	30	32
West	20	23	28	29	30	27	25	24	25	27	27	28	31

⁻ Not available.

SOURCE: U.S. Census Bureau, unpublished tables based on analyses from the Current Population Survey, 1988 to 2004 Annual Social and Economic Supplements.

^a Children are considered to be covered by health insurance if they had government or private coverage at any time during the year. Some children are covered by both types of insurance; hence, the sum of government and private is greater than the total.

^b For race and Hispanic-origin data in this table: From 1987 to 2002, following the 1977 OMB standards for collecting and presenting data on race, the Current Population Survey (CPS) asked respondents to choose *one* race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. The Census Bureau also offered an "Other" category. Beginning in 2003, following the 1997 OMB standards for collecting and presenting data on race, the CPS asked respondents to choose *one or more* races from the following: White, Black, Asian, American Indian or Alaska Native, or Native Hawaiian or Other Pacific Islander. All race groups discussed in this table from 2002 onward refer to people who indicated only one racial identity within the racial categories presented. People who responded to the question on race by indicating *only one* race are referred to as the race-*alone* population. The use of the race-alone population in this table does not imply that it is the preferred method of presenting or analyzing data. Data from 2002 onward are not directly comparable with data from earlier years. Data on race and Hispanic origin are collected separately; Hispanics may be any race.

^c Persons of Hispanic origin may be of any race.

^d Government health insurance for children consists mostly of Medicaid, but also includes Medicare, the State Children's Health Insurance Programs (SCHIP), and the Civilian Health and Medical Care Program of the Uniformed Services (CHAMPUS/Tricare). NOTE: Estimates beginning in 1999 include follow-up questions to verify health insurance status and use the Census 2000-based weights. Estimates for 1999 through 2003 are not directly comparable with estimates for earlier years, before the verification questions were

Table ECON5.B

Usual source of health care: Percentage of children ages 0–17 with no usual source of health care^a by age, type of health insurance, and poverty status, 1993–2003

Characteristic	1993	1994	1995	1996	1997 ^b	1998 ^b	1999 ^b	2000b	2001ь	2002ь	2003ь
Ages 0-17											
Total	8.0	6.8	6.3	6.3	6.9	6.5	6.7	7.0	5.8	6.1	5.4
Type of insurance Private insurance ^c Public insurance ^{c,d} No insurance	3.9 10.8 24.3	3.4 6.3 21.7	3.0 6.6 22.1	3.0 6.0 23.2	3.3 5.2 27.6	2.9 5.8 28.0	3.3 5.9 28.5	3.4 4.8 29.7	2.4 5.4 28.0	2.6 5.6 29.6	2.2 4.4 28.8
Poverty status Below poverty At or above poverty	15.2 5.5	11.0 5.4	10.4 4.9	10.0 5.0	12.8 5.4	11.6 5.2	13.3 5.1	12.1 5.8	11. <i>7</i> 4.0	11.2 4.8	11.0 3.9
Ages 0-4											
Total	5.2	4.4	4.2	4.2	4.2	4.0	4.2	4.5	4.0	4.2	3.2
Type of insurance Private insurance ^c Public insurance ^{c,d} No insurance	1.8 7.3 18.6	1.7 4.1 16.1	1.3 5.0 17.2	1.5 4.0 18.7	2.0 3.7 16.6	1.5 3.4 20.5	1.9 4.0 20.5	2.2 3.2 18.8	1.3 4.6 23.1	1.3 3.0 26.1	1.2 2.9 22.7
Poverty status Below poverty At or above poverty	10.8 3.1	6.8 3.5	7.4 3.0	6.0 3.4	7.2 3.0	6.9 3.1	8.6 3.5	8.4 4.1	8.7 2.6	8.3 2.8	5.9 2.4
Ages 5-17											
Total	9.2	7.9	<i>7</i> .1	7.2	8.0	7.4	7.7	7.9	6.4	6.8	6.2
Type of insurance Private insurance ^c Public insurance ^{c,d} No insurance	4.7 13.3 26.2	4.0 7.8 23.7	3.6 7.8 23.8	3.5 7.4 24.6	3.8 6.2 31.2	3.4 7.3 30.4	3.8 6.9 31.0	3.8 5.7 33.5	2.8 5.7 29.4	3.0 7.0 30.8	2.5 5.2 30.2
Poverty status Below poverty At or above poverty	17.6 6.4	13.0 6.2	11.8 5.7	11.9 5.5	15.4 6.3	13.8 5.9	15.3 5.7	13.6 6.4	13.0 4.5	12.4 5.6	13.3 4.5

^a Excludes emergency rooms as a usual source of health care.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

^b In 1997, the National Health Interview Survey was redesigned. Data for 1997–2003 are not strictly comparable with earlier data.

^c Children with both public and private insurance coverage are placed in the private insurance category.

^d As defined here, public health insurance for children consists mostly of Medicaid or other public assistance programs, including State plans. Beginning in 1999, the public health insurance category also includes the State Children's Health Insurance Program (SCHIP). It does not include children with only Medicare or the Civilian Health and Medical Care Program of the Uniformed Services (CHAMP-VA/Tricare).

Table HEALTH1

General health status: Percentage of children ages 0–17 in very good or excellent health by age, poverty status, race and Hispanic origin, selected years 1984–2003

Characteristic	1984	1985	1990	1995	1997°	1998°	1999∘	2000□	2001°	2002°	2003°
Ages 0-17											
Total	78	79	81	80	82	83	83	82	83	83	83
Poverty status ^b											
Below 100% poverty	62	64	66	65	67	68	70	69	<i>7</i> 1	70	71
100-199% poverty	75	77	77	77	77	78	77	76	78	78	78
200% poverty and above	86	87	87	88	89	90	89	88	89	89	89
Race and Hispanic origin ^c											
White-alone, non-Hispanic	82	84	85	85	87	88	87	86	87	87	88
Black-alone, non-Hispanic	65	66	69	<i>7</i> 1	72	73	74	73	74	75	75
Hispanic ^d	66	68	75	69	73	74	77	75	77	75	74
Ages 0-4											
Total	79	80	81	81	84	85	85	85	85	86	86
Poverty status ^b											
Below 100% poverty	66	69	70	67	72	72	73	73	73	74	75
100-199% poverty	78	79	78	78	82	81	81	79	80	81	83
200% poverty and above	87	87	88	89	91	91	91	91	91	92	92
Race and Hispanic origin ^c											
White-alone, non-Hispanic	83	86	85	86	89	90	89	89	89	90	91
Black-alone, non-Hispanic	66	67	72	72	77	76	78	76	78	79	80
Hispanic ^d	70	69	75	70	75	77	78	77	80	79	77
Ages 5-17											
Total	77	78	80	80	81	82	82	81	82	82	82
Poverty status ^b											
Below 100% poverty	60	62	64	64	65	67	68	67	70	69	69
100-199% poverty	74	76	77	77	76	76	76	75	77	76	76
200% poverty and above	86	86	87	87	89	90	88	87	88	88	88
Race and Hispanic origin ^c											
White-alone, non-Hispanic	82	83	84	85	86	87	86	85	87	86	87
Black-alone, non-Hispanic	65	66	67	70	71	72	73	72	72	73	74
Hispanic ^d	65	67	75	69	72	73	76	74	76	74	72

^a In 1997, the National Health Interview Survey was redesigned. Data for 1997–2003 are not strictly comparable with earlier data.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

^b Starting with *America's Children: Key National Indicators of Well-Being, 2005*, a new methodology for imputing family income was used for data years 1997 and beyond. Therefore, estimates by poverty for 1997–2001 may differ from those in previous editions. Missing family income data were imputed for 21–25 percent of children ages 0–17 in 1997–1998 and 28–30 percent in 1999–2003. Missing family income for data years 1990–1996 was imputed using a different methodology and for earlier years was not imputed.

^c From 1984 to 1996, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. For data from 1997 to 2003, the revised 1997 OMB standards were used. Persons could select one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data from 1997 onward are not directly comparable with data from earlier years. Estimates for single-race categories prior to 1997 included persons who reported one race or, if they reported more than one race, identified one race as best representing their race. In addition, note that data on race and Hispanic origin are collected separately but are combined for reporting.

^d Persons of Hispanic origin may be of any race.

Table HEALTH2

Activity limitation: Percentage of children ages 5–17 with activity limitation resulting from one or more chronic health conditions by gender, poverty status, race and Hispanic origin, selected years 1997–2003

	1997	1999	2000	2001	2002	2003
Ages 5-17						
Total	7.8	7.0	7.0	8.0	8.5	8.1
Special education only ^b	5.4	5.3	5.0	6.2	6.3	6.3
Other limitations ^c	2.4	1.7	2.0	1.8	2.1	1.8
Gender Male Special education only ^b Other limitations ^c	10.0 7.2 2.8	8.8 6.8 2.0	8.8 6.5 2.4	10.4 8.2 2.2	10.7 8.2 2.5	10.1 8.1 2.0
Female	5.5	5.2	5.1	5.5	6.2	6.0
Special education only ^b	3.5	3.8	3.6	4.0	4.4	4.4
Other limitations ^c	2.0	1.4	1.5	1.5	1.8	1.6
Poverty status ^d Below 100% poverty Special education only ^b Other limitations ^c	10.6	9.8	9.9	10.8	11.6	10.0
	7.2	7.0	7.2	8.3	8.1	7.5
	3.4	2.8	2.7	2.5	3.5	2.5
100–199% poverty	9.3	8.4	8.0	8.9	10.5	10.1
Special education only ^b	7.0	6.5	5.6	6.7	7.9	7.4
Other limitations ^c	2.3	1.9	2.4	2.2	2.6	2.7
200% poverty and above	6.3	5.8	5.8	6.9	6.9	6.9
Special education only ^b	4.2	4.4	4.3	5.4	5.3	5.5
Other limitations ^c	2.2	1.3	1.6	1.5	1.6	1.3
Race or Hispanic origin ^e White-alone, non-Hispanic Special education only ^b Other limitations ^c	8.3 5.8 2.5	7.5 5.7 1.8	7.5 5.4 2.1	8.5 6.5 2.0	8.8 6.6 2.2	8.6 6.8 1.8
Black-alone, non-Hispanic	8.2	7.0	7.5	9.0	10.2	8.3
Special education only ^b	5.3	4.9	5.6	7.0	7.8	6.5
Other limitations ^c	2.9	2.1	1.9	1.9	2.5	1.8
Hispanic	5.9	5. <i>7</i>	5.3	5.6	6.7	6.6
Special education only ^b	4.0	4.5	3.7	4.3	5.0	4.8
Other limitations ^c	1.9	1.2	1.6	1.2	1.7	1.8

^a Chronic health conditions are conditions that once acquired are not cured or have a duration of three months or more.

NOTE: The prevalence of activity limitation among children ages 5–17 is based on household responses in the National Health Interview Survey family core questionnaire. The child was considered to have an activity limitation if the parent gave a positive response to any of the following questions about the child: (1) "Does (child's name) receive Special Education Services?" (2) "Because of a physical, mental, or emotional problem, does (child's name) need the help of other persons with personal care needs, such as eating, bathing, dressing, or getting around inside the home?" (3) "Because of a health problem does (child's name) have difficulty walking without using any special equipment?" (4) "Is (child's name) limited in any way because of difficulty remembering or because of periods of confusion?" (5) "Is (child's name) limited in any activities because of physical, mental, or emotional problems?"

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

^b Special education, as mandated by federal legislation known as the Individuals with Disabilities Education Act (IDEA), is designed to meet the individual needs of the child, and may take place in a regular classroom setting, a separate classroom, a special school, a private school, at home, or at a hospital. To qualify for special education services, a child must have a condition covered by the IDEA which adversely affects educational performance.

^c Other limitations include limitations in children's ability to walk, care for themselves, or perform any other activities.

d Starting with *America's Children: Key National Indicators of Well-Being*, 2005, a new methodology for imputing family income was used for data years 1997 and beyond. Missing family income data were imputed for 22–31 percent of children ages 5–17 in 1997–2003. Therefore, estimates by poverty for 1997–2001 may differ from those in previous editions.

^e The revised 1997 OMB standards for race were used for the 1997–2003 race-specific estimates. A person's race is described by one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data on race and Hispanic origin are collected separately but are combined for reporting. Persons of Hispanic origin may be of any race. Estimates are not shown for American Indian or Alaska Native, Asian, or Native Hawaiian or Other Pacific Islander race due to the small sample size for each of these groups.

Table HEALTH3

Overweight: Percentage of children ages 6–18 who are overweight by gender, race, and Hispanic origin, 1976–1980, 1988–1994, and 1999–2002

	Total			Male			Female		
	1976-	1988-	1999-	1976-	1988-	1999-	1976-	1988-	1999-
	1980	1994	2002	1980	1994	2002	1980	1994	2002
Ages 6-18									
Totalo	5.7	11.2	16.0	5.5	11.8	17.2	5.8	10.6	14.8
Race and Hispanic origin ^b									
White-alone, non-Hispanic	4.9	10.5	13.2	4.7	11.3	14.3	5.1	9.6	12.1
Black-alone, non-Hispanic	8.2	14.0	20.7	5.8c	11.5	18.4	10.7	16.5	23.2
Mexican American	_	15.4	23.1	_	16.1	26.9	_	14.7	19.0
Ages 6-11									
Totala	6.1	11.3	15.8	6.2	11.6	16.9	6.0	11.0	14.7
Race and Hispanic origin ^b									
White-alone, non-Hispanic	5.6	10.2	13.5	6.1	10.7	14.0	5.2	9.8	13.1
Black-alone, non-Hispanic	9.0	14.6	19.8	6.8c	12.3	17.0	11.2	17.0	22.8
Mexican American	_	16.4	21.8	_	17.5	26.5	_	15.3	1 <i>7</i> .1
Ages 12-18									
Totala	4.7	11.1	16.2	3.7	12.0	1 <i>7</i> .5	5.7	10.2	14.8
Race and Hispanic origin ^b									
White-alone, non-Hispanic	4.3	10.8	12.9	3.6	12.0	14.7	5.0	9.5	11.1
Black-alone, non-Hispanic	7.5	13.3	21.8	*	10.7	19.9	10.3	16.0	23.7
Mexican American	_	14.2	24.6	_	14.4	27.3	_	14.0	21.5

⁻ Not available

NOTE: Overweight is defined as body mass index (BMI) at or above the 95th percentile of the 2000 Centers for Disease Control and Prevention BMI-for-age growth charts (http://www.cdc.gov/growthcharts). BMI is calculated as weight in kilograms divided by the square of height in meters.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey.

^{*} Estimates are considered unreliable (relative standard error greater than 40 percent)

^a Totals include data for racial/ethnic groups not shown separately.

^b From 1976 to 1994, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. For data from 1999 to 2002, the revised 1997 OMB standards were used. Persons could select one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data from 1999 onward are not directly comparable with data from earlier years. Estimates for single-race categories for 1976–1980 and 1988–1994 included persons who reported one race or, if they reported more than one race, identified one race as best representing their race. In addition, note that data on race and Hispanic origin are collected separately but are combined for reporting. Estimates are not shown separately for American Indian or Alaska Native, Asian, or Native Hawaiian or Other Pacific Islander race due to the small sample size for each of these groups.

^c Estimates are unstable because they are based on a small number of persons (relative standard error greater than 30 percent).

Table HEALTH4

Childhood immunization: Percentage of children ages 19–35 months vaccinated for selected diseases by poverty status, race, and Hispanic origin, selected years 1996–2003

	Total						Belo	w pov	erty			At or a	bove p	overty	/
Characteristic	1996	1998	2000	2002	2003	1996	1998	2000	2002	2003	1996	1998	2000	2002	2003
Total															
Combined series (4:3:1:3)b	76	79	76	78	81	69	74	71	72	76	80	82	78	79	83
Combined series (4:3:1) ^c	78	81	78	79	82	72	76	72	73	77	81	83	79	80	84
DTP (4 doses or more) ^d	81	84	82	82	85	74	80	76	75	80	84	86	84	84	87
Polio (3 doses or more)	91	91	90	90	92	88	90	87	88	89	92	92	90	91	93
Measles-containing (MCV)e	91	92	91	92	93	87	90	89	90	92	92	93	91	92	93
Hib (3 doses or more) ^f	91	93	93	93	94	87	91	90	90	91	93	95	95	94	95
Hepatitis B (3 doses or more)	82	87	90	90	92	78	85	87	88	91	83	88	91	90	93
Varicella ^h	12	43	68	81	85	5	41	64	79	84	15	44	69	81	85
White, non-Hispanic															
Combined series (4:3:1:3)b	79	82	79	80	84	68	77	73	72	79	80	83	80	81	85
Combined series (4:3:1) ^c	80	83	80	81	85	70	79	74	73	80	82	84	81	82	86
DTP (4 doses or more) ^d	83	87	84	84	88	72	82	78	75	82	85	88	85	86	88
Polio (3 doses or more)	92	92	91	91	93	88	91	88	88	91	93	93	91	92	93
Measles-containing (MCV)e	91	93	92	93	94	85	90	88	91	90	93	94	92	93	94
Hib (3 doses or more) ^f	93	95	95	94	95	87	92	92	88	91	94	96	95	95	96
Hepatitis B (3 doses or more)	82	88	91	91	93	76	87	88	86	91	83	88	92	92	94
Varicella ^h	15	42	66	79	84	6	38	58	75	80	16	43	68	80	85
Black, non-Hispanic															
Combined series (4:3:1:3) ^b	74	73	71	71	75	69	72	69	68	70	79	74	72	72	79
Combined series (4:3:1) ^c	77	74	72	72	77	73	74	70	69	72	81	76	73	73	80
DTP (4 doses or more) ^d	79	77	76	76	80	74	77	75	74	75	83	79	78	77	84
Polio (3 doses or more)	90	88	87	87	89	87	88	85	87	86	93	87	87	87	91
Measles-containing (MCV)°	90	89	88	90	92	88	89	88	90	91	91	90	87	90	93
Hib (3 doses or more) ^f	89	90	93	92	93	86	90	92	88	90	93	90	93	94	95
Hepatitis B (3 doses or more)	82	84	89	88	92	78	86	89	89	92	85	83	90	88	92
Varicella ^h	9	42	67	83	85	-	40	60	80	84	13	44	72	84	86

Table HEALTH4 (cont.)

Childhood immunization: Percentage of children ages 19–35 months vaccinated for selected diseases by poverty status, race, and Hispanic origin, selected years 1996–2003

			Total				Belo	w pov	erty		A	t or ab	ove p	overty	
Characteristic	1996	1998	2000	2002	2003	1996	1998	2000	2002 2	2003	1996	1998 2	2000 2	2002 2	2003
Hispanic ⁱ															
Combined series (4:3:1:3) ^b	71	75	73	76	79	68	73	70	75	78	73	79	74	76	81
Combined series (4:3:1) ^c	74	77	75	77	79	71	76	73	76	79	75	80	75	77	81
DTP (4 doses or more)d	77	81	79	79	82	74	79	76	78	81	78	83	80	80	84
Polio (3 doses or more)	89	89	88	90	90	88	90	88	89	89	90	90	87	91	92
Measles-containing (MCV)e	88	91	90	91	93	87	90	90	91	93	89	92	90	89	93
Hib (3 doses or more) ^f	89	92	91	92	93	87	92	88	93	92	90	94	93	92	95
Hepatitis B (3 doses or more)	9 81	86	88	90	91	80	83	87	89	91	81	88	90	89	93
Varicella ^h	8	47	70	82	86	6	44	70	82	88	11	49	70	81	85

⁻ Not available.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics and National Immunization Program, National Immunization Survey.

^a From 1996 to 2000, the 1977 OMB Standards for Data on Race and Ethnicity were used. From 2002 onward, the 1997 OMB Standards for Data on Race and Ethnicity were used.

^b The 4:3:1:3 combined series consists of 4 (or more) doses of diphtheria and tetanus toxoids and pertussis vaccine (DTP), 3 (or more) doses of polio vaccine, 1 (or more) dose of a measles-containing vaccine (MCV), and 3 (or more) doses of *Haemophilus influenzae* type b (Hib) vaccine.

^c The 4:3:1 combined series consists of 4 (or more) doses of diphtheria and tetanus toxoids and pertussis vaccine (DTP), 3 (or more) doses of polio vaccine, and 1 (or more) dose of a measles-containing vaccine (MCV).

^d Diphtheria and tetanus toxoids and pertussis vaccine (four or more doses of any diphtheria and tetanus toxoids and pertussis vaccines including diphtheria and tetanus toxoids, and any acellular pertussis vaccine [DTP/DTaP/DT]).

^e Immunization providers were asked about measles-containing vaccine, including MMR (measles-mumps-rubella) vaccines.

^f Haemophilus influenzae type b (Hib) vaccine (three or more doses).

g The percentage of children ages 19–35 months who received 3 (or more) doses of hepatitis B vaccine was low in 1994, because universal infant vaccination with a 3-dose series was not recommended until November 1991.

^h Recommended in July 1996. Administered on or after the first birthday, unadjusted for history of varicella illness (chicken pox). (One or more doses of varicella at or after child's first birthday, unadjusted for history of varicella illness).

¹ Persons of Hispanic origin may be of any race.

Table HEALTH5

Low birthweight: Percentage of infants born of low birthweight by detailed mother's race and Hispanic origin, selected years 1980–2003

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002	2003°
Low birthweight (less than 2,	500 grai	ms or 5 ll	o. 8 oz.)							
Total	6.8	6.8	7.0	7.3	7.6	7.6	7.6	7.7	7.8	7.9
Race and Hispanic origin ^b										
White, non-Hispanic	5.7	5.6	5.6	6.2	6.6	6.6	6.6	6.8	6.9	7.0
Black, non-Hispanic	12.7	12.6	13.3	13.2	13.2	13.2	13.1	13.1	13.4	13.5
Hispanic ^c	6.1	6.2	6.1	6.3	6.4	6.4	6.4	6.5	6.5	6.7
Mexican American	5.6	5.8	5.5	5.8	6.0	5.9	6.0	6.1	6.2	_
Puerto Rican	9.0	8.7	9.0	9.4	9.7	9.3	9.3	9.3	9.7	_
Cuban	5.6	6.0	5.7	6.5	6.5	6.8	6.5	6.5	6.5	_
Central and South American	5.8	5.7	5.8	6.2	6.5	6.4	6.3	6.5	6.5	_
Other and unknown Hispanic	7.0	6.8	6.9	7.5	7.6	7.6	7.8	8.0	7.9	_
Asian/Pacific Islander	6.7	6.2	6.5	6.9	7.4	7.4	7.3	7.5	7.8	7.8
Chinese	5.2	5.0	4.7	5.3	5.3	5.2	5.1	5.3	5.5	_
Japanese	6.6	6.2	6.2	7.3	7.5	7.9	7.1	7.3	7.6	_
Filipino	7.4	6.9	7.3	7.8	8.2	8.3	8.5	8.7	8.6	_
Hawaiian	7.2	6.5	7.2	6.8	7.2	7.7	6.8	7.9	8.1	_
Other Asian/Pacific Islander	6.8	6.2	6.6	7.1	7.8	7.8	7.7	7.8	8.2	_
American Indian/Alaska Native	6.4	5.9	6.1	6.6	6.8	<i>7</i> .1	6.8	7.3	7.2	7.4
Very low birthweight (less the	an 1,500	grams o	or 3 lb. 4	oz.)						
Total	1.15	1.21	1.27	1.35	1.45	1.45	1.43	1.44	1.46	1.44
Race and Hispanic origin ^b										
White, non-Hispanic	0.86	0.90	0.93	1.04	1.15	1.15	1.14	1.17	1.17	1.18
Black, non-Hispanic	2.46	2.66	2.93	2.98	3.11	3.18	3.10	3.08	3.15	3.10
Hispanic ^c	0.98	1.01	1.03	1.11	1.15	1.14	1.14	1.14	1.17	1.15
Mexican American	0.92	0.97	0.92	1.01	1.02	1.04	1.03	1.05	1.06	_
Puerto Rican	1.29	1.30	1.62	1.79	1.86	1.86	1.93	1.85	1.96	_
Cuban	1.02	1.18	1.20	1.19	1.33	1.49	1.21	1.27	1.15	_
Central and South American	0.99	1.01	1.05	1.13	1.23	1.15	1.20	1.19	1.20	_
Other and unknown Hispanic	1.01	0.96	1.09	1.28	1.38	1.32	1.42	1.27	1.44	_
Asian/Pacific Islander	0.92	0.85	0.87	0.91	1.10	1.08	1.05	1.03	1.12	1.09
Chinese	0.66	0.57	0.51	0.67	0.75	0.68	0.77	0.69	0.74	_
Japanese	0.94	0.84	0.73	0.87	0.84	0.86	0.75	0.71	0.97	_
Filipino	0.99	0.86	1.05	1.13	1.35	1.41	1.38	1.23	1.31	_
Hawaiian	1.05	1.03	0.97	0.94	1.53	1.41	1.39	1.50	1.55	_
Other Asian/Pacific Islander	0.96	0.91	0.92	0.91	1.12	1.09	1.04	1.06	1.17	_
American Indian/Alaska Native	0.92	1.01	1.01	1.10	1.24	1.26	1.16	1.26	1.28	1.29

[—] Not available.

NOTE: Excludes live births with unknown birthweight. Low-birthweight infants weigh less than 2,500 grams at birth or 5 lb. 8 oz. Verylow-birthweight infants weigh less than 1,500 grams or 3 lb. 4 oz. Trend data for births to Hispanic and to White and Black, non-Hispanic women are affected by expansion of the reporting area in which an item on Hispanic origin is included on the birth certificate as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and maternal and infant health characteristics. The number of States in the reporting area increased from 22 in 1980 to 23 and the District of Columbia (DC) in 1983–87, 30 and DC in 1988, 47 and DC in 1989, 48 and DC in 1990, 49 and DC in 1991–92, and all 50 States and DC from 1993 forward. Trend data for births to Asian/Pacific Islander and Hispanic women are also affected by immigration.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System. Martin, J.A., Hamilton, B.E., Sutton, P.D., Ventura, S.J., Menacker, F., and Munson, M.L. (2003). Births: Final data for 2002. *National Vital Statistics Reports*, 52(10). Hyattsville, MD: National Center for Health Statistics. Hamilton, B.E., Martin, J.A., and Sutton, P.D. (2004) Births: Preliminary data for 2003. *National Vital Statistics Reports*, 53(9). Hyattsville, MD: National Center for Health Statistics.

^a Data for 2003 are preliminary.

^b The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. California, Hawaii, Ohio (for December only), Pennsylvania, Utah, and Washington reported multiple race data in 2003, following the revised 1997 OMB standards. The multiple-race data for these states were bridged to the single-race categories of the 1977 OMB standards for comparability with other states. In addition, note that data on race and Hispanic origin are collected and reported separately.

^c Persons of Hispanic origin may be of any race.

Table HEALTH6

Infant mortality: Death rates among infants by detailed race and Hispanic origin of mother, selected years 1983–2002

(Infant deaths per 1,000 live births)

Characteristic	1983	1984	1985	1990	1991	1995∘	1996ª	1997ª	1998°	1999°	2000°	2001ª	2002□
Total	10.9	10.4	10.4	8.9	8.6	7.6	7.3	7.2	7.2	7.0	6.9	6.8	7.0
Race and Hispanic origin ^b													
White, non-Hispanic	9.2	8.6	8.6	7.2	7.0	6.3	6.0	6.0	6.0	5.8	5.7	5.7	5.8
Black, non-Hispanic	19.1	18.1	18.3	16.9	16.6	14.7	14.2	13.7	13.9	14.1	13.6	13.5	13.9
Hispanic ^{c,d}	9.5	9.3	8.8	7.5	7.1	6.3	6.1	6.0	5.8	5.7	5.6	5.4	5.6
Mexican American	9.1	8.9	8.5	7.2	6.9	6.0	5.8	5.8	5.6	5.5	5.4	5.2	5.4
Puerto Rican	12.9	12.9	11.2	9.9	9.7	8.9	8.6	7.9	7.8	8.3	8.2	8.5	8.2
Cuban	7.5	8.1	8.5	7.2	5.2	5.3	5.1	5.5	3.6	4.7	4.5	4.2	3.7
Central and South American	8.5	8.3	8.0	6.8	5.9	5.5	5.0	5.5	5.3	4.7	4.6	5.0	5.1
Other and unknown Hispanic	10.6	9.5	9.5	8.0	8.2	7.4	7.7	6.2	6.5	7.2	6.9	6.0	7.1
Asian/Pacific Islander	8.3	8.9	7.8	6.6	5.8	5.3	5.2	5.0	5.5	4.8	4.9	4.7	4.8
Chinese	9.5	7.2	5.8	4.3	4.6	3.8	3.2	3.1	4.0	2.9	3.5	3.2	3.0
Japanese	*	6.4	6.0	5.5	4.2	5.3	4.2	5.3	3.5	3.4	4.6	4.0	4.9
Filipino	8.4	8.5	7.7	6.0	5.1	5.6	5.8	5.8	6.2	5.8	5.7	5.5	5.7
Hawaiian	11.2	12.9	9.9	8.0	7.6	6.6	5.6	9.0	10.0	7.1	9.1	7.3	9.6
Other Asian/Pacific Islander	8.1	9.4	8.5	7.4	6.3	5.5	5.7	5.0	5.7	5.1	4.8	4.8	4.7
American Indian/Alaska Native	15.2	13.4	13.1	13.1	11.3	9.0	10.0	8.7	9.3	9.3	8.3	9.7	8.6

^{*} Number too small to calculate a reliable rate.

NOTE: Rates for race groups from the National Linked Files of Live Births and Infant Deaths vary slightly from those obtained via unlinked infant death records using the National Vital Statistics System because the race reported on the death certificate sometimes does not match the race on the infant's birth certificate. Rates obtained from linked data (where race is obtained from the birth, rather than the death, certificate) are considered more reliable, but linked data are not available before 1983 and are also not available for 1992–94.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Linked Files of Live Births and Infant Deaths.

 $^{^{}a}$ Beginning with data for 1995, rates are on a period basis. Earlier rates are on a cohort basis. Data for 1995–2002 are weighted to account for unmatched records.

^b The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected and reported separately.

^c Persons of Hispanic origin may be of any race.

^d Trend data for Hispanic women are affected by expansion of the reporting area in which an item on Hispanic origin is included on the birth certificate, as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and maternal and infant health characteristics. The number of States in the reporting area increased from 22 in 1980 to 23 and the District of Columbia (DC) in 1983–87, 30 and DC in 1988, 47 and DC in 1989, 48 and DC in 1990, 49 and DC in 1991, and all 50 States and DC from 1993 forward.

Table HEALTH7.A

Child mortality: Death rates among children ages 1–4 by gender, race, Hispanic origin, and cause of death, selected years 1980–2002

(Deaths per 100,000 children ages 1-4)

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002
Ages 1-4									
Totala	63.9	51.8	46.8	40.4	34.1	34.2	32.4	33.3	31.2
Gender									
Male	72.6	58.5	52.4	44.5	37.1	37.9	35.9	37.0	35.2
Female	54.7	44.8	41.0	36.0	31.0	30.3	28.7	29.5	27.0
Race and Hispanic origin ^b									
White	57.9	46.6	41.1	35.2	30.2	30.8	29.2	30.7	28.1
White, non-Hispanic ^c	_	45.3	37.6	34.2	29.8	30.1	28.5	30.1	27.1
Black	97.6	80.7	76.8	66.4	55.8	52.6	49.9	47.5	47.1
Hispanic ^{c,d}	_	46.1	43.5	36.3	29.4	30.9	29.6	30.6	29.8
Asian/Pacific Islander	43.2	40.1	38.6	26.5	20.1	24.9	21.6	22.3	23.4
Leading causes of deathe									
Unintentional injuries	25.9	20.2	17.3	14.4	12.6	13.0	11.9	11.2	10.5
Cancer	4.5	3.8	3.5	3.1	2.4	2.7	2.7	2.7	2.6
Birth defects	8.0	5.9	6.1	4.4	3.7	3.6	3.2	3.6	3.4
Homicide	2.5	2.5	2.6	2.9	2.6	2.5	2.3	2.7	2.7
Heart disease	2.6	2.2	1.9	1.6	1.4	1.2	1.2	1.5	1.1
Pneumonia/influenza	2.1	1.6	1.2	1.0	0.9	0.8	0.7	0.7	0.7
Injury-related deaths by cause ^e									
All injuries (intentional and unintentional)	28.9	23.0	19.9	17.3	15.3	15.1	14.5	14.2	13.6
Motor vehicle traffic related	7.4	5.9	5.3	4.4	4.1	3.7	3.7	3.6	3.4
Drowning	5.7	4.4	3.9	3.5	3.4	3.3	3.3	3.1	3.2
Fire and burns	6.1	4.8	4.0	3.1	1.9	2.2	2.1	1.7	1.6
Firearms	0.7	0.7	0.6	0.6	0.5	0.4	0.3	0.5	0.4
Suffocation	1.9	1.4	1.3	1.3	1.2	1.2	1.2	1.1	1.1
Pedestrian (non-traffic) ^f	1.5	1.1	0.9	0.7	0.7	0.7	0.6	0.5	0.5
Fall	0.9	0.6	0.6	0.3	0.3	0.4	0.2	0.2	0.3

[—] Not available.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

^a Total includes American Indians/Alaskan Natives.

^b From 1980 to 2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following three racial groups: White, Black, or Asian or Pacific Islander. Death rates for American Indian or Alaskan Natives are not shown separately, because the numbers of deaths were too small for the calculation of reliable rates and American Indians are underreported on the death certificate. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

^c Trend data for Hispanics and White, non-Hispanics are affected by expansion of the reporting area in which an item on Hispanic origin is included on the death certificate, as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and health characteristics. Tabulations are restricted to a subset of the States that include the item on the death certificate and that meet a minimal quality standard. The quality of reporting has improved substantially over time, so that the minimal quality standard was relaxed in 1992 for those areas reporting Hispanic origin on at least 80 percent of records. The number of States in the reporting area increased from 15 in 1984 to 17 and the District of Columbia (DC) in 1985; 18 and DC in 1986–87; 26 and DC in 1988; 44 and DC in 1989; 45, New York State (excluding New York City), and DC in 1990; 47, New York State (excluding New York City), and DC in 1991; 48 and DC in 1992; and 49 and DC in 1993–96. Complete reporting began in 1997. The population data in 1990 and 1991 do not exclude New York City.

d Persons of Hispanic origin may be of any race.

^e Cause-of-death information for 1980–98 is classified according to the Ninth Revision of the International Classification of Diseases. Cause-of-death information for 1999–2002 is classified according to the Tenth Revision of the International Classification of Diseases.

f Includes deaths occurring on private property. Pedestrian deaths on public roads are included in the motor vehicle traffic-related category.

Table HEALTH7.B

Child mortality: Death rates among children ages 5–14 by gender, race, Hispanic origin, and cause of death, selected years 1980–2002

(Deaths per 100,000 children ages 5-14)

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002
Ages 5-14									
Totala	30.6	26.5	24.0	22.2	19.3	18.6	18.0	1 <i>7</i> .3	17.4
Gender									
Male	36.7	31.8	28.5	26.4	22.7	21.5	20.9	19.8	20.0
Female	24.2	21.0	19.3	17.9	15.8	15.6	15.0	14.6	14.7
Race and Hispanic origin ^b									
White	29.1	25.0	22.3	20.5	17.8	17.2	17.0	16.2	16.1
White, non-Hispanic ^c	_	23.1	21.5	20.1	17.9	17.3	1 <i>7</i> .1	16.3	16.0
Black	39.0	35.5	34.4	32.0	27.4	26.5	24.2	23.3	24.5
Hispanic ^{c,d}	_	19.3	20.0	19.9	16.0	15.6	15.7	14.7	15.5
Asian/Pacific Islander	24.2	20.8	16.9	17.5	15.6	12.7	12.3	12.2	12.4
Leading causes of deathe									
Unintentional injuries	15.0	12.6	10.4	9.2	8.1	7.6	7.3	6.9	6.6
Cancer	4.3	3.5	3.1	2.7	2.5	2.5	2.5	2.5	2.6
Birth defects	1.6	1.4	1.5	1.2	0.9	1.0	1.0	0.9	1.0
Homicide	1.2	1.2	1.3	1.5	1.1	1.1	0.9	0.8	0.9
Heart disease	0.9	1.0	0.9	0.8	0.8	0.7	0.7	0.7	0.6
Pneumonia/influenza	0.6	0.4	0.4	0.3	0.3	0.2	0.2	0.2	0.4
Injury-related deaths by cause ^e									
All injuries (intentional and unintentional)	16.7	14.7	12.7	11.5	10.1	9.4	9.1	8.5	8.3
Motor vehicle traffic related	7.5	6.6	5.6	5.1	4.4	4.1	4.0	3.8	3.6
Drowning	2.5	1.8	1.5	1.2	1.1	0.9	0.9	0.8	0.8
Fire and burns	1.5	1.4	1.0	0.9	0.8	0.7	0.7	0.7	0.7
Firearms	1.6	1.8	1.9	1.9	1.3	1.0	0.9	0.8	0.9
Suffocation	0.9	0.9	0.8	0.8	0.9	0.8	0.8	0.8	0.8
Pedestrian (non-traffic) ^f	0.2	0.1	0.1	0.1	0.1	0.2	0.2	0.2	0.1
Fall	0.3	0.2	0.1	0.2	0.1	0.1	0.1	0.2	0.1

[—] Not available.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

^a Total includes American Indians/Alaskan Natives.

^b From 1980 to 2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following three racial groups: White, Black, or Asian or Pacific Islander. Death rates for American Indian or Alaskan Natives are not shown separately, because the numbers of deaths were too small for the calculation of reliable rates and American Indians are underreported on the death certificate. In addition, note that data on race and Hispanic origin are collected separately but are combined for reporting.

^c Trend data for Hispanics and White, non-Hispanics are affected by expansion of the reporting area in which an item on Hispanic origin is included on the death certificate, as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and health characteristics. Tabulations are restricted to a subset of the States that include the item on the death certificate and that meet a minimal quality standard. The quality of reporting has improved substantially over time, so that the minimal quality standard was relaxed in 1992 for those areas reporting Hispanic origin on at least 80 percent of records. The number of States in the reporting area increased from 15 in 1984 to 17 and the District of Columbia (DC) in 1985; 18 and DC in 1986–87; 26 and DC in 1988; 44 and DC in 1989; 45, New York State (excluding New York City), and DC in 1990; 47, New York State (excluding New York City), and DC in 1991; 48 and DC in 1992; and 49 and DC in 1993–96. Complete reporting began in 1997. The population data in 1990 and 1991 do not exclude New York City.

^d Persons of Hispanic origin may be of any race.

^e Cause-of-death information for 1980–98 is classified according to the Ninth Revision of the International Classification of Diseases. Cause-of-death information for 1999–2002 is classified according to the Tenth Revision of the International Classification of Diseases.

^f Includes deaths occurring on private property. Pedestrian deaths on public roads are included in the motor vehicle traffic-related category.

Table HEALTH8

Adolescent mortality: Death rates among adolescents ages 15–19 by gender, race, a Hispanic origin, and cause of death, b selected years 1980–2002

(Deaths per 100,000 adolescents ages 15-19)

Characteristic	1980	1985	1990	1995	1996	1997	1998	1999	2000	2001	2002
Total, all races											
All causes Injuries Motor vehicle traffic All firearm Firearm homicide Firearm suicide	97.9 78.1 42.3 14.7 7.0 5.4	80.5 62.8 33.1 13.3 5.7 6.0	88.4 71.4 33.0 23.5 14.0 7.5	82.1 65.0 27.8 24.1 15.3 6.9	77.5 61.5 27.8 20.9 13.1 6.1	73.6 57.5 26.5 18.5 11.5 5.9	69.5 54.2 25.6 16.0 9.6 5.5	68.6 52.7 25.3 14.4 8.5 4.9	67.1 51.6 25.3 12.9 7.7 4.4	66.9 50.9 25.2 12.4 7.5 4.1	67.8 52.6 27.1 12.1 7.7 3.6
Male											
White, non-Hispanic All causes Injuries Motor vehicle traffic All firearm Firearm homicide	- - - -	105.1 86.2 47.6 17.0 3.7	105.7 87.5 46.9 20.4 3.9	94.9 76.4 38.0 19.7 4.4	91.2 74.3 39.0 16.7 3.6	90.8 72.8 37.3 16.6 4.3	88.1 71.1 36.8 15.4 3.4	87.1 69.2 35.9 14.2 3.0	86.1 69.4 36.7 12.3 2.5	86.1 69.4 35.8 12.3 2.6	87.6 71.0 38.5 11.2 2.8
Firearm suicide Black	_	10.5	13.3	12.5	10.9	10.6	10.5	9.7	8.6	8.6	7.2
All causes Injuries Motor vehicle traffic All firearm Firearm homicide Firearm suicide	134.5 105.3 24.3 46.7 38.4 3.4	125.5 96.7 21.9 46.5 36.6 5.4	199.9 174.1 28.6 119.8 105.2 8.8	200.1 169.4 28.6 118.9 101.4 10.5	183.2 156.0 27.7 107.7 91.7 9.1	162.5 137.5 28.4 89.6 77.2 8.3	147.7 121.2 25.2 74.6 63.7 7.5	137.7 110.8 24.1 67.1 56.3 7.0	130.1 103.0 22.5 61.5 51.7 6.9	130.4 102.8 25.3 60.5 52.8 5.0	121.7 96.2 23.4 56.0 48.4 4.3
Hispanic ^c	0.4	5.4	0.0	10.5	7.1	0.0	7.5	7.0	0.7	3.0	4.0
All causes Injuries Motor vehicle traffic All firearm Firearm homicide Firearm suicide	- - - -	121.3 103.7 42.8 31.2 20.9 6.7	131.4 115.9 40.7 51.7 39.7 8.6	124.9 109.5 29.0 60.1 47.1 9.1	111.8 95.8 29.0 48.3 38.1 6.7	98.4 83.2 25.5 41.4 30.5 7.8	90.1 76.6 24.8 33.8 25.8 5.5	87.8 73.6 26.0 29.5 22.9 5.0	90.5 75.9 29.4 27.9 21.9 4.6	92.0 72.9 30.4 25.5 20.4 3.5	97.0 81.5 33.9 28.5 22.3 4.9
American Indian/Alaskan Nat		0.7	0.0	7.1	0.7	7.0	5.5	3.0	4.0	3.5	4.9
All causes Injuries Motor vehicle traffic All firearm Firearm homicide Firearm suicide	248.3 222.7 107.9 40.6 *	167.5 148.4 66.3 29.2	183.7 157.2 63.3 29.6	147.8 133.5 52.9 43.9 19.7	139.8 123.8 45.5 39.6 *	144.5 129.3 58.3 35.1 *	116.0 106.2 42.9 35.4 *	128.8 118.0 46.8 30.2 *	122.2 108.5 47.4 22.0	125.7 108.8 48.7 23.7 *	119.1 103.0 48.8 23.4 *
Asian/Pacific Islander All causes	69.1	57.8	73.1	65.2	61.2	52.8	51.1	50.2	51.0	52.1	50.5
Injuries Motor vehicle traffic All firearm Firearm homicide Firearm suicide	53.5 25.5 *	47.4 21.0 9.2 *	62.3 24.1 22.2 12.6 8.3	51.9 14.4 26.9 18.6 6.1	52.0 20.2 18.1 12.9	39.8 11.7 17.4 13.4	39.1 13.4 13.2 9.7	37.8 12.9 10.9 7.5	39.1 14.7 8.8 5.7	40.6 18.6 7.3 *	40.5 19.4 9.9 7.1

Table HEALTH8 (cont.)

Adolescent mortality: Death rates among adolescents ages 15–19 by gender, race,^a Hispanic origin and cause of death,^b selected years 1980–2002

(Deaths per 100,000 adolescents ages 15-19)

Characteristic	1980	1985	1990	1995	1996	1997	1998	1999	2000	2001	2002
Female											
White, non-Hispanic											
All causes	_	46.4	44.2	43.6	42.4	43.8	42.1	42.4	41.0	39.6	42.0
Injuries	_	33.7	32.3	31.8	30.9	31.8	30.5	30.3	29.3	27.7	30.5
Motor vehicle traffic	_	22.5	22.6	22.5	21.9	22.5	22.1	21.6	20.8	19.4	22.2
All firearm	_	3.8	3.9	3.6	3.4	3.3	2.8	2.3	2.2	2.2	1.9
Firearm homicide	_	1.1	1.3	1.7	1.3	1.3	1.0	0.9	0.9	0.9	1.0
Firearm suicide	_	2.2	2.2	1.7	1.9	1.9	1.6	1.3	1.2	1.2	0.9
Black											
All causes	50.3	44.6	54.4	55.1	52.3	47.8	42.3	45.2	43.7	40.8	41.0
Injuries	25.5	22.9	30.8	31.9	30.1	26.2	22.4	24.9	22.5	20.7	22.1
Motor vehicle traffic	6.6	7.5	9.7	10.5	12.0	10.1	8.3	11.0	10.0	10.4	10.9
All firearm	7.5	6.1	12.1	13.9	11.5	9.0	7.8	8.2	5.7	4.5	6.0
Firearm homicide	6.2	5.0	10.4	12.1	9.7	7.3	6.6	7.0	4.9	3.9	5.4
Firearm suicide	*	*	*	1.6	*	1.5	*	*	*	*	*
Hispanic ^c											
All causes	_	33.6	35.2	35.3	32.7	31.0	30.4	30.5	28.7	31.1	30.8
Injuries	_	20.7	22.7	23.0	20.5	19.8	20.3	19.6	18.4	19.2	19.5
Motor vehicle traffic	_	10.7	10.4	12.1	10.4	11.6	11.4	10.9	10.7	12.5	12.3
All firearm	_	4.5	6.8	5.7	3.9	4.3	4.0	3.6	2.7	2.9	2.6
Firearm homicide	_	*	4.9	4.5	2.2	3.0	2.6	2.6	2.0	2.1	2.0
Firearm suicide	_	*	*	*	*	*	*	*	*	*	*
American Indian/Alaskan No	ıtive										
All causes	77.4	69.9	73.1	56.3	52.9	48.4	41.8	49.9	52.8	61.7	62.1
Injuries	64.3	56.8	61.1	43.2	40.6	35.0	34.7	37.8	44.9	47.5	48.9
Motor vehicle traffic	41.7	29.6	34.9	27.2	21.2	20.9	20.5	21.2	26.8	29.1	32.8
All firearm	*	*	*	*	*	*	*	*	*	*	*
Firearm homicide	*	*	*	*	*	*	*	*	*	*	*
Firearm suicide	*	*	*	*	*	*	*	*	*	*	*
Asian/Pacific Islander											
All causes	26.7	32.1	25.8	28.1	26.0	27.5	24.5	25.2	20.6	23.3	23.1
Injuries	16.7	19.3	18.2	19.4	17.5	17.6	15.7	15.5	11.9	13.8	13.9
Motor vehicle traffic	*	*	10.9	12.5	8.0	11.9	9.3	8.7	5.5	<i>7</i> .1	7.1
All firearm	*	*	*	*	*	*	*	*	*	*	*
Firearm homicide	*	*	*	*	*	*	*	*	*	*	*
Firearm suicide	*	*	*	*	*	*	*	*	*	*	*

[—] Not available.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

^{*} Number too small to calculate a reliable rate.

^a From 1980 to 2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following three racial groups: White, Black, or Asian or Pacific Islander. Death rates for American Indian or Alaskan Natives are not shown separately, because the numbers of deaths were too small for the calculation of reliable rates and American Indians are underreported on the death certificate. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

^b Cause-of-death information for 1980–98 is classified according to the Ninth Revision of the International Classification of Diseases. Cause-of-death information for 1999–2002 is classified according to the Tenth Revision of the International Classification of Diseases.

^c Persons of Hispanic origin may be of any race.

Table HEALTH9

Adolescent births: Birth rates by mother's age, race, $^{\alpha}$ and Hispanic origin, selected years 1980–2003

(Live births per 1,000 females in specified age group)

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002	2003
All races										
Ages 10-14 Ages 15-17 Ages 18-19 Ages 15-19	1.1 32.5 82.1 53.0	1.2 31.0 79.6 51.0	1.4 37.5 88.6 59.9	1.3 35.5 87.7 56.0	1.0 29.9 80.9 50.3	0.9 28.2 79.1 48.8	0.9 26.9 78.1 47.7	0.8 24.7 76.1 45.3	0.7 23.2 72.8 43.0	0.6 22.4 70.8 41.7
White, total										
Ages 10-14 Ages 15-17 Ages 18-19 Ages 15-19	0.6 25.5 73.2 45.4	0.6 24.4 70.4 43.3	0.7 29.5 78.0 50.8	0.8 29.6 80.2 49.5	0.6 25.6 74.1 44.9	0.6 24.4 73.0 44.0	0.6 23.3 72.3 43.2	0.5 21.4 70.8 41.2	0.5 20.5 68.0 39.4	0.5 19.8 66.3 38.3
White, non-Hispanic										
Ages 10-14 Ages 15-17 Ages 18-19 Ages 15-19	0.4 22.4 67.7 41.2	- - -	0.5 23.2 66.6 42.5	0.4 22.0 66.2 39.3	0.3 18.3 60.9 35.3	0.3 17.1 59.4 34.1	0.3 15.8 57.5 32.6	0.3 14.0 54.8 30.3	0.2 13.1 51.9 28.5	0.2 12.4 50.1 27.5
Black, total										
Ages 10-14 Ages 15-17 Ages 18-19 Ages 15-19	4.3 72.5 135.1 97.8	4.5 69.3 132.4 95.4	4.9 82.3 152.9 112.8	4.1 68.5 135.0 94.4	2.8 55.4 124.8 83.5	2.5 50.5 120.6 79.1	2.3 49.0 118.8 77.4	2.0 43.9 114.0 71.8	1.8 40.0 107.6 66.6	1.6 38.2 103.6 63.7
Black, non-Hispanic										
Ages 10-14 Ages 15-17 Ages 18-19 Ages 15-19	4.6 77.2 146.5 105.1	- - -	5.0 84.9 157.5 116.2	4.2 70.4 139.2 97.2	2.9 56.8 128.2 85.7	2.6 51.7 123.9 81.0	2.4 50.1 121.9 79.2	2.1 44.9 116.7 73.5	1.9 41.0 110.3 68.3	1.6 38.8 105.3 64.8
Hispanic ^b										
Ages 10-14 Ages 15-17 Ages 18-19 Ages 15-19	1.7 52.1 126.9 82.2	- - -	2.4 65.9 147.7 100.3	2.6 68.3 145.4 99.3	1.9 58.5 131.5 87.9	1.9 56.9 129.5 86.8	1.7 55.5 132.6 87.3	1.6 52.8 135.5 86.4	1.4 50.7 133.0 83.4	1.3 49.7 131.9 82.2
American Indian/Alaska N	Native									
Ages 10-14 Ages 15-17 Ages 18-19 Ages 15-19	1.9 51.5 129.5 82.2	1.7 47.7 124.1 79.2	1.6 48.5 129.3 81.1	1.6 44.6 122.2 72.9	1.5 39.7 106.9 64.7	1.4 36.5 98.0 59.9	1.1 34.1 97.1 58.3	1.0 31.4 94.8 56.3	0.9 30.7 89.2 53.8	1.0 30.3 86.5 52.6

Table HEALTH9 (cont.)

Adolescent births: Birth rates by mother's age, race, and Hispanic origin, selected years 1980–2003

(Live births per 1,000 females in specified age group)

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002	2003
Asian/Pacific Islander										
Ages 10-14	0.3	0.4	0.7	0.7	0.5	0.4	0.3	0.2	0.3	0.2
Ages 15-17	12.0	12.5	16.0	15.6	13.8	12.4	11.6	10.3	9.0	8.9
Ages 18-19	46.2	40.8	40.2	40.1	34.5	33.9	32.6	32.8	31.5	30.1
Ages 15-19	26.2	23.8	26.4	25.5	22.2	21.4	20.5	19.8	18.3	17.6

- Not available.

NOTE: Data for 2003 are preliminary.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System. Hamilton, B.E., Sutton, P.D., and Ventura, S.J. (2003). Revised birth and fertility rates for the 1990s: United States, and new rates for Hispanic populations, 2000 and 2001. National Vital Statistics Reports, 51(12). Hyattsville, MD: National Center for Health Statistics. Martin, J.A., Hamilton, B.E., Sutton, P.D., Ventura, S.J., Menacker, F., and Munson, M.L. (2003). Births: Final data for 2002. National Vital Statistics Reports, 52(10). Hyattsville, MD: National Center for Health Statistics. Hamilton, B.E., Martin, J.A., and Sutton, P.D. (2004) Births: Preliminary data for 2003. National Vital Statistics Reports, 53(9). Hyattsville, MD: National Center for Health Statistics.

^a The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. California, Hawaii, Ohio (for December only), Pennsylvania, Utah, and Washington reported multiple race data in 2003, following the revised 1997 OMB standards. The multiple-race data for these states were bridged to the single-race categories of the 1977 OMB standards for comparability with other states. In addition, note that data on race and Hispanic origin are collected and reported separately.

^b Persons of Hispanic origin may be of any race. Trend data for Hispanic women are affected by expansion of the reporting area in which an item on Hispanic origin is included on the birth certificate, as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and maternal and infant health characteristics. The number of States in the reporting area increased from 22 in 1980 to 23 and the District of Columbia (DC) in 1983–87, 30 and DC in 1988, 47 and DC in 1989, 48 and DC in 1990, 49 and DC in 1991–92, and 50 and DC in 1993. Rates in 1981–88 were not calculated for Hispanics, Black, non-Hispanics, and White, non-Hispanics because estimates for these populations were not available. Recent declines in teenage birth rates parallel but outpace the reductions in birth rates for unmarried teenagers (POP7A). Birth rates for married teenagers fell sharply between 1990 and 2001, but relatively few teenagers are married.

Table BEH1

Regular cigarette smoking: Percentage of 8th-, 10th-, and 12th-grade students who reported smoking cigarettes daily in the previous 30 days by grade, gender, race, and Hispanic origin, selected years 1980–2004

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002	2003	2004
8th-graders											
Total	_	_	_	9.3	8.8	8.1	7.4	5.5	5.1	4.5	4.4
Gender Male Female	_ _	- -	- -	9.2 9.2	8.1 9.0	7.4 8.4	7.0 7.5	5.9 4.9	5.4 4.9	4.4 4.5	4.3 4.3
Race and Hispanic origin ^a White Black Hispanic ^b	- - -	- - -	- - -	10.5 2.8 9.2	10.4 3.8 8.4	9.7 3.8 8.5	9.0 3.2 7.1	7.5 2.8 5.0	6.0 2.8 4.4	5.3 2.9 3.7	4.7 2.7 3.5
10th-graders											
Total	_	_	_	16.3	15.8	15.9	14.0	12.2	10.1	8.9	8.3
Gender Male Female	_ _	_	_	16.3 16.1	1 <i>4.7</i> 16.8	15.6 15.9	13. <i>7</i> 14.1	12.4 11.9	9.4 10.8	8.6 9.0	8.2 8.2
Race and Hispanic origin ^a White Black Hispanic ^b	- - -	- - -	- - -	17.6 4.7 9.9	20.3 5.8 9.4	19.1 5.3 9.1	17.7 5.2 8.8	15.5 5.2 7.4	13.3 5.0 6.4	11.4 4.3 6.0	10.0 4.4 6.0
12th-graders											
Total	21.3	19.5	19.1	21.6	22.4	23.1	20.6	19.0	16.9	15.8	15.6
Gender Male Female	18.5 23.5	1 <i>7</i> .8 20.6	18.6 19.3	21.7 20.8	22. <i>7</i> 21.5	23.6 22.2	20.9 19.7	18.4 18.9	1 <i>7</i> .2 16.1	17.0 14.0	15.4 15.0
Race and Hispanic origin ^a White Black Hispanic ^b	23.9 17.4 12.8	20.4 9.9 11.8	21.8 5.8 10.9	23.9 6.1 11.6	28.3 7.4 13.6	26.9 7.7 14.0	25.7 8.0 15.7	23.8 7.5 12.0	21.8 6.4 9.2	19.5 5.4 8.0	18.3 5.2 8.2

⁻ Not available.

SOURCE: Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (2004). *Monitoring the Future national survey results on drug use, 1975–2004, Volume I: Secondary school students* (NIH Publication No. 04–5507) Tables D-65 and D-66. Bethesda, MD: National Institute on Drug Abuse. Data for 2004 are from a press release of December 21, 2004, and demographic disaggregations are from unpublished tabulations from Monitoring the Future, University of Michigan.

^a From 1977 to 2004, respondents who described themselves as White or Caucasian were reported as White. From 1977 to 1989, the Black subgroup included respondents who described themselves as Black or Afro-American; after 1990, the subgroup included those who described themselves as Black or African American. From 1977 to 1990, the Hispanic subgroup included those respondents who described themselves as Mexican American or Chicano, or Puerto Rican or other Latin American. After 1990, this group included those respondents who described themselves as Mexican American or Chicano, Cuban American, Puerto Rican American, or other Latin American. After 1994, the term Puerto Rican American was shortened to Puerto Rican. Racial and ethnic subgroup data from the Monitoring the Future Study are presented as 2-year averages; data for the specified year and the previous year have been combined in order to increase sample size and thus provide more stable estimates.

^b Persons of Hispanic origin may be of any race.

Table BEH2

Alcohol use: Percentage of 8th-, 10th-, and 12th-grade students who reported having five or more alcoholic beverages in a row in the past 2 weeks by grade, gender, race, and Hispanic origin, selected years 1980–2004

Characteristic	1980	1985	1990	1995	1998	1999	2000	2001	2002	2003	2004
8th-graders											
Total	_	-	_	14.5	13.7	15.2	14.1	13.2	12.4	11.9	11.4
Gender Male Female	_ _	- -	-	15.1 13.9	14.4 12.7	16.4 13.9	14.4 13.6	13.7 12.4	12.5 12.1	12.2 11.6	10.8 11.8
Race and Hispanic origin ^a White Black Hispanic ^b	- - -	- - -	- - -	13.9 10.8 22.0	14.1 9.0 20.4	14.3 9.9 20.9	14.9 10.0 19.1	13.8 9.0 17.6	12.7 9.4 17.8	11.8 10.4 16.6	11.3 9.8 16.1
10th-graders											
Total	_	_	_	24.0	24.3	25.6	26.2	24.9	22.4	22.2	22.0
Gender Male Female	_ _	-	-	26.3 21.5	26.7 22.2	29.7 21.8	29.8 22.5	28.6 21.4	23.8 21.0	23.2 21.2	23.8 20.2
Race and Hispanic origin ^a White Black Hispanic ^b	- - -	- - -	- - -	25.4 13.3 26.8	27.0 12.8 26.3	27.2 12.7 27.5	28.1 12.9 28.3	27.4 12.6 27.7	25.5 12.4 26.5	24.5 12.1 26.1	24.0 11.6 26.9
12th-graders											
Total	41.2	36.7	32.2	29.8	31.5	30.8	30.0	29.7	28.6	27.9	29.2
Gender Male Female	52.1 30.5	45.3 28.2	39.1 24.4	36.9 23.0	39.2 24.0	38.1 23.6	36.7 23.5	36.0 23.7	34.2 23.0	34.2 22.1	34.3 24.2
Race and Hispanic origin ^a White Black Hispanic ^b	44.3 17.7 33.1	41.5 15.7 31.7	36.6 14.4 25.6	32.3 14.9 26.6	36.4 12.3 28.1	35.7 12.3 29.3	34.6 11.5 31.0	34.5 11.8 28.4	33.7 11.5 26.4	32.4 10.8 25.9	32.5 11.4 26.0

⁻ Not available.

SOURCE: Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (2004). *Monitoring the Future national survey results on drug use, 1975–2004, Volume I: Secondary school students* (NIH Publication No. 03–5375). Bethesda, MD: National Institute on Drug Abuse Tables 2–2 and 5–3. Data for 2004 are from a press release of December 21, 2004, and demographic disaggregations are from unpublished tabulations from Monitoring the Future, University of Michigan.

^a From 1977 to 2004, respondents who described themselves as White or Caucasian were reported as White. From 1977 to 1989, the Black subgroup included respondents who described themselves as Black or Afro-American; after 1990, the subgroup included those who described themselves as Black or African American. From 1977 to 1990, the Hispanic subgroup included those respondents who described themselves as Mexican American or Chicano, or Puerto Rican or other Latin American. After 1990, this group included those respondents who described themselves as Mexican American or Chicano, Cuban American, Puerto Rican American, or other Latin American. After 1994, the term Puerto Rican American was shortened to Puerto Rican. Racial and ethnic subgroup data from the Monitoring the Future Study are typically presented as 2-year averages, in order to increase sample size and thus provide more stable estimates. The single-year estimates provided in the *America's Children* report are limited to the subgroups for which the sample size is adequate to provide stable estimates: White, Black, and Hispanic.

^b Persons of Hispanic origin may be of any race.

Table BEH3

Illicit drug use: Percentage of 8th-, 10th-, and 12th-grade students who have used illicit drugs in the previous 30 days by grade, gender, race, and Hispanic origin, selected years 1980–2004

Characteristic	1980□	1985	1990	1995	1998	1999	2000	2001	2002	2003	2004
8th-graders											
Total	_	-	_	12.4	12.1	12.2	11.9	11. <i>7</i>	10.4	9.7	8.4
Gender Male Female	_ _	_	_	12.7 11.9	11.9 11.9	12.6 11. <i>7</i>	12.0 11.3	13.2 9.9	11.2 9.5	10.2 8.9	7.8 8.8
Race and Hispanic origin ^b White Black Hispanic ^c	- - -	- - -	- - -	18.9 9.1 16.7	12.4 10.2 15.9	11.3 11.1 17.0	11.2 10.8 15.2	11.2 9.6 15.0	10.6 9.1 15.3	9.6 8.9 13.1	8.4 9.1 12.1
10th-graders											
Total	_	_	_	20.2	21.5	22.1	22.5	22.7	20.8	19.5	18.3
Gender Male Female	_	_ _	_	21.1 19.0	22.5 20.5	23.7 20.4	25.4 19.5	24.9 20.5	21. <i>7</i> 19.8	21.0 18.0	19.6 16.9
Race and Hispanic origin ^b White Black Hispanic ^c	- - -	- - -	_ _ _	19.7 15.5 20.6	23.1 16.4 24.2	22.6 15.8 23.8	23.0 17.0 23.7	23.4 17.6 23.3	22.9 16.2 21.4	21.2 16.0 20.0	19.3 17.5 20.0
12th-graders											
Total	37.2	29.7	1 <i>7</i> .2	23.8	25.6	25.9	24.9	25.7	25.4	24.1	23.4
Gender Male Female	39.6 34.3	32.1 26.7	18.9 15.2	26.8 20.4	29.1 21.6	28.6 22.7	27.5 22.1	28.4 22.6	28.5 21.8	27.3 20.6	26.1 20.3
Race and Hispanic origin ^b White Black Hispanic ^c	38.8 28.8 33.1	30.2 22.9 27.2	20.5 9.0 13.9	23.8 18.3 21.4	27.5 19.4 24.1	27.0 20.2 24.4	25.9 20.3 27.4	26.5 18.7 25.3	27.2 18.2 23.4	26.5 17.9 21.2	25.7 16.8 19.9

⁻ Not available.

NOTE: Illicit drugs include marijuana, cocaine (including crack), heroin, hallucinogens (including LSD, PCP, and ecstasy [MDMA]), amphetamines (including methamphetamine), and nonmedical use of psychotherapeutics.

SOURCE: Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (2004). *Monitoring the Future national survey results on drug use, 1975–2004 Volume I: Secondary school students* (NIH Publication No. 03–5375). Bethesda, MD: National Institute on Drug Abuse Tables 2–2 and 5–3. Data for 2004 are from a press release of December 21, 2004, and demographic disaggregations are from unpublished tabulations from Monitoring the Future, University of Michigan.

^a Beginning in 1982, the question about stimulant use (i.e., amphetamines) was revised to get respondents to exclude the inappropriate reporting of nonprescription stimulants. The prevalence rate dropped slightly as a result of this methodological change.

^b From 1977 to 2004, respondents who described themselves as White or Caucasian were reported as White. From 1977 to 1989, the Black subgroup included respondents who described themselves as Black or Afro-American; after 1990, the subgroup included those who described themselves as Black or African American. From 1977 to 1990, the Hispanic subgroup included those respondents who described themselves as Mexican American or Chicano, or Puerto Rican or other Latin American. After 1990, this group included those respondents who described themselves as Mexican American or Chicano, Cuban American, Puerto Rican American, or other Latin American. After 1994, the term Puerto Rican American was shortened to Puerto Rican. Racial and ethnic subgroup data from the Monitoring the Future Study are typically presented as 2-year averages, in order to increase sample size and thus provide more stable estimates. The single-year estimates provided in the *America's Children* report are limited to the subgroups for which the sample size is adequate to provide stable estimates: White, Black, and Hispanic.

^c Persons of Hispanic origin may be of any race.

Table BEH4.A

Youth victims of serious violent crimes: Rate and number of victimizations for youth ages 12–17 by age, race, and gender, selected years 1980–2003

Characteristic	1980	1985	1990	1995	1999	2000	2001	2002ь	2003
Rate per 1,000 youth	ages 12-12	7							
Age									
Ages 12-17	37.6	34.3	43.2	28.3	20.4	16.4	14.7	10.4	17.7
Ages 12-14	33.4	28.1	41.2	26.7	20.4	13.7	10.8	7.7	13.6
Ages 15-17	41.4	40.3	45.2	30.0	20.5	19.0	18.7	13.4	22.1
Race									
White	34.1	34.4	37.0	25.5	18.7	15.4	13.7	9.8	16.5
Black	60.2	35.2	77.0	44.5	32.0	23.6	21.4	15.0	25.4
Other	21.7	28.8	37.3	23.7	13.2	7.7	8.8	3.3	8.2
Gender									
Male	54.8	49.8	60.5	39.0	26.8	22.9	17.6	12.3	24.7
Female	19. <i>7</i>	18.2	24.9	17.0	13.7	9.6	11.7	8.5	10.4
Number of victimizati	ons of youtl	h ages 12-	-17						
Age									
Ages 12-17	877,104	742,815	866,272	633,301	477,682	394,107	358,296	260,697	446,444
Ages 12-14	364,437	295,972	412,125	303,287	237,031	166,212	131,568	99,196	176,960
Ages 15-17	512,667	446,843	454,147	330,014	240,651	227,895	226,728	161,501	269,484
Race									
White	658,539	606,739	593,596	451,830	344,896	293,860	263,318	192,304	322,553
Black	206,227	113,960	238,141	154,013	115,612	91,751	85,369	64,756	114,017
Other	12,292	22,111	34,523	27,445	17,165	8,483	9,598	3,630	9,872
Gender									
Male	651,976	550,860	623,509	447,695	322,259	281,709	218,825	157,607	318,136
Female	225,127	191,955	242,763	185,606	155,422	112,398	139,469	103,090	128,307

^a From 1980 to 2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following racial groups: White, Black, or Other. "Other" included American Indian or Alaskan Native, and Asian or Pacific Islander. Data from 2003 onward are collected under the 1997 OMB Standards and have been used to classify racial groups as White-alone, Black-alone, and Other. "Other" includes American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, and persons who identify as being of more than one race. Hence, data from 2003 forward are not directly comparable with earlier years.

NOTE: Serious violent crimes include aggravated assault, rape, robbery, and homicide. Aggravated assault is an attack with a weapon, regardless of whether or not an injury occurred, or an attack without a weapon when serious injury resulted. Robbery is stealing by force or threat of force. Because of changes made in the victimization survey, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology. Victimization rates were calculated using population estimates from the U.S. Census Bureau's Current Population Reports. Such population estimates normally differ somewhat from population estimates derived from the victimization survey data. The rates may therefore differ marginally from rates based upon the victimization survey-derived population estimates. Rates may also be revised to reflect final U.S. Census Bureau population estimates for 1990–2003.

SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey. Federal Bureau of Investigation, Uniform Crime Reporting Program, Supplementary Homicide Reports.

^b Revised. Original estimate was based on preliminary data.

Table BEH4.B

Serious violent juvenile crime rate: Rate and number of serious crimes by youth ages 12–17, selected years 1980–2003

Characteristic	1980	1985	1990	1995	1999	2000	2001	2002	2003
Rate per 1,000 youth age	s 12–17								
Total	34.9	30.2	39.1	36.3	26.1	1 <i>7</i> .1	19.3	11.2	14.9
Number of serious violent	crimes								
Total (in millions)	3.8	3.4	3.5	3.3	2.5	2.2	2.0	1.7	1.8
Number involving youth ages 12-17 (in thousands)	812	652	785	812	610	412	467	278	375
Percentage involving youth ages 12-17	21.3	19.4	22.4	24.7	24.1	19.0	23.2	16.5	20.5
Percentage of juvenile crimes involving multiple offenders	61.4	61.4	61.1	54.5	47.1	58.7	47.0	56.6	56.6

NOTE: This rate is the ratio of the number of crimes (aggravated assault, rape, and robbery [i.e., stealing by force or threat of violence]) reported to the National Crime Victimization Survey for which the age of the offenders was known, plus the number of homicides reported to police that involved at least one juvenile offender perceived by the victim (or by law enforcement in the case of homicide) to be 12–17 years of age, to the number of juveniles in the population. Because of changes made in the victimization survey, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology. Rates may also be revised to reflect final U.S. Census Bureau population estimates for 1990–2003.

SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey. Federal Bureau of Investigation, Uniform Crime Reporting Program, Supplementary Homicide Reports.

Table ED1

Family reading: Percentage of children ages 3–5° who were read to every day in the last week by a family member by child and family characteristics, selected years 1993–2001

Characteristic	1993	1995	1996	1999	2001
Total	52.8	58.0	56.5	53.5	57.5
Gender					
Male	51.3	57.0	55.6	52.3	54.5
Female	54.4	59.0	57.4	54.8	60.5
Race and Hispanic origin ^b					
White, non-Hispanic	59.1	54.4	64.3	61.3	64.2
Black, non-Hispanic	38.7	42.5	43.7	41.2	47.3
Hispanic ^c	37.3	38.3	39.1	33.0	41.8
Other, non-Hispanic	43.6	48.3	54.8	55.2	58.9
Poverty status					
Below 100% poverty	43.6	46.6	46.8	38.7	48.3
100-199% poverty	49.1	55.7	52.0	51.4	51.8
200% poverty and above	60.9	65.2	65.5	61.8	64.1
Family type					
Two parents ^d	55.3	61.2	60.7	57.8	60.7
Two parents, married	_	_	_	_	61.1
Two parents, unmarried	- 46.0	- 49.2	- 45.6	- 42.4	56.8 47.2
One parent No parents	45.9	51.6	47.9	50.6	52.8
·	43.7	31.0	٦,.,	30.0	32.0
Mother's highest level of education ^e	2.4.2		0= 4		45.0
Less than high school	36.9 47.7	39.9 48.0	37.4 49.0	38.7 45.2	41.2 49.2
High school diploma or equivalent Some college, including vocational/technical/	47.7	46.0	49.0	45.2	49.2
associate's degree	56.5	63.6	61.8	53.0	59.8
Bachelor's degree or higher	70.7	75.7	76.5	70.8	72.8
Mother's employment statuse					
Worked 35 hours or more per week	51.5	55.3	54.3	48.9	55.1
Worked less than 35 hours per week	55.9	63.1	58.7	55.6	62.6
Looking for work	43.7	46.3	53.0	46.5	53.8
Not in labor force	54.8	59.8	59.4	59.7	58.2
Region ^f					
Northeast	58.9	64.2	61.2	59.0	62.4
South	48.3	53.7	54.7	51.1	53.3
Midwest	54.1	61.0	56.6	57.3	58.0
West	52.8	54.8	54.0	47.5	58.6

[—] Not available.

^a Estimates are based on children who have yet to enter kindergarten.

^b The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

^c Persons of Hispanic origin may be of any race.

^d Refers to adults' relationship to child and does not indicate marital status.

^e Children without mothers in the home are not included in estimates dealing with mother's education or mother's employment status.

^f Regions: Northeast includes CT, MA, ME, NH, NJ, NY, PA, RI, and VT. Midwest includes IA, IL, IN, KS, MI, MN, MO, ND, NE, OH, SD, and WI. South includes AL, AR, DC, DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, and WV. West includes AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA, and WY.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Surveys Program (NHES).

Table ED2

Early childhood care and education: Percentage of children ages 3–5° who are enrolled in center-based early childhood care and education programs^b by child and family characteristics, selected years 1991–2001

Characteristic Total	1991 52.8	1993 52.7	1995 55.1	1996 55.0	1999 59.7	2001 56.4
Gender	32.0	32.7	33.1	33.0	37.7	30.4
Male Female	52.4 53.2	52.5 52.9	55.0 55.2	55.0 54.9	60.8 58.6	53.5 59.3
Race and Hispanic origin ^c						
White, non-Hispanic Black, non-Hispanic Hispanic ^d Other, non-Hispanic	54.0 58.2 38.9 53.2	53.5 57.3 42.8 51.2	56.9 59.5 37.4 56.7	57.1 64.7 39.4 44.7	60.0 73.2 44.2 66.1	59.1 63.1 39.9 61.8
Poverty status						
Below 100% poverty 100–199% poverty 200% poverty and above	44.4 43.6 66.6	43.3 41.6 66.1	45.6 43.3 65.8	44.3 47.0 66.7	51.9 49.9 68.5	46.4 48.7 64.3
Family type						
Two parentse Two parents, married Two parents, unmarried One parent No parents	- - - -	52.1 - - 54.3 52.7	54.9 - - 56.0 51.0	53.8 - - 57.9 58.7	58.8 - - 61.7 65.3	56.6 57.5 46.4 55.9 55.9
Mother's highest level of education ^f						
Less than high school High school diploma or equivalent Some college, including vocational/technical/ associate's degree Bachelor's degree or higher	31.4 45.9 60.2 71.9	33.1 43.2 60.3 73.4	34.8 47.6 56.8 74.5	37.3 49.0 57.8 73.0	40.3 51.7 62.9 73.9	38.0 47.4 61.8 69.9
Mother's employment statusf						
Worked 35 hours or more per week Worked less than 35 hours per week Looking for work Not in labor force	59.4 58.0 42.7 45.3	61.3 56.7 48.1 44.2	60.2 62.1 51.8 46.5	63.1 64.4 46.9 43.1	64.8 64.0 54.6 52.2	62.8 61.6 46.2 47.1
Region ^g						
Northeast South Midwest West	55.5 53.6 53.0 49.3	57.1 52.7 53.5 48.2	56.5 58.4 53.7 50.0	58.1 56.3 55.7 48.9	66.8 60.5 60.4 50.8	63.8 59.2 55.8 47.4

[—] Not available.

^a Estimates are based on children who have yet to enter kindergarten.

^b Center-based programs include day care centers, Head Start programs, preschool, nursery school, prekindergarten, and other early childhood programs.

^c The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

^d Persons of Hispanic origin may be of any race.

^e Refers to adults' relationship to child and does not indicate marital status.

f Children without mothers in the home are not included in estimates dealing with mother's education or mother's employment status.

g Regions: Northeast includes CT, MA, ME, NH, NJ, NY, PA, RI, and VT. Midwest includes IA, IL, IN, KS, MI, MN, MO, ND, NE, OH, SD, and WI. South includes AL, AR, DC, DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, and WV. West includes AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA, and WY.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Surveys Program (NHES).

Table ED3.A

Mathematics achievement: Average scale scores of 4th-, 8th-, and 12th-graders by grade and child and family characteristics, selected years 1990–2003

Characteristic	1990∘	1992□	1996∘	1996	2000□	2000	2003ь
4th-graders							
Total	213.1	219.7	223.9	223.5	227.6	225.6	234.9
Gender Male Female	213.5 212.5	220.9 218.5	225.6 222.2	223.7 223.3	228.9 226.3	226.8 224.3	236.4 233.4
Race and Hispanic origin ^c White, non-Hispanic Black, non-Hispanic Hispanic ^d	219.8 187.5 200.3	227.3 192.8 202.4	231.5 199.1 204.5	232.1 197.8 207.5	235.2 204.3 209.4	234.4 203.4 207.7	243.4 216.1 221.9
8th-graders							
Total	262.6	268.4	272.0	270.5	275.5	273.1	277.6
Gender Male Female	263.2 261.9	268.1 268.7	271.7 272.3	271.4 269.4	276.9 274.0	273.9 272.3	278.5 276.6
Race and Hispanic origin ^c White, non-Hispanic Black, non-Hispanic Hispanic ^d	269.6 236.8 245.9	276.8 237.0 249.0	281.2 242.2 251.4	280.7 239.8 251.1	284.8 245.7 252.7	283.9 244.1 252.8	287.7 252.2 259.0
Parents' education Less than high school High school diploma or equivalent Some college, including vocational/technical Bachelor's degree or higher	242.3 255.0 267.5 274.4	249.4 257.4 271.1 280.6	254.4 261.3 278.8 282.4	250.1 259.6 277.0 281.4	255.0 263.9 279.0 287.1	253.2 261.1 277.2 285.9	256.6 267.3 280.0 288.2
12th-graders							
Total	294.2	299.5	304.0	301.6	301.1	300.2	_
Gender Male Female	297.1 291.5	301.3 297.8	305.3 302.9	302.9 300.3	302.9 299.3	301.9 298.5	- -
Race and Hispanic origin ^c White, non-Hispanic Black, non-Hispanic Hispanic ^d	299.9 267.9 276.2	305.2 275.1 286.1	310.8 279.9 286.9	308.9 275.4 284.2	307.6 274.5 282.9	306.8 273.2 282.5	- - -
Parents' education Less than high school High school diploma or equivalent Some college, including vocational/technical Bachelor's degree or higher	272.0 282.8 296.8 305.5	278.5 287.9 298.5 310.7	281.9 294.0 302.4 313.9	280.0 290.4 301.6 313.0	278.5 287.9 299.6 312.8	277.8 287.0 299.0 312.1	- - -

[—] Not available.

NOTE: Parents' education is the highest educational attainment of either parent. Data on parents' education are not reliable for 4th-graders.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress.

^a Testing accommodations (e.g., extended time, small group testing) for children with disabilities and limited-English-proficient students were not permitted.

 $^{^{\}rm b}$ In 2003, the assessment was only conducted at grades 4 and 8.

^c The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

^d Persons of Hispanic origin may be of any race.

Table ED3.B

Reading achievement: Average scale scores of 4th-, 8th-, and 12th-graders by grade and child and family characteristics, selected years 1992–2003

Characteristic	1992ª	1994□	1998α	1998	2000°,b	2000ь	2002	2003ь
4th-graders								
Total	216.7	214.3	217.3	214.8	216.7	213.4	218.6	218.2
Gender Male Female	212.8 220.8	209.2 219.5	214.2 220.4	212.1 217.5	211.6 221.9	207.9 218.9	215.4 221.9	214.6 221.9
Race and Hispanic origin ^c White, non-Hispanic Black, non-Hispanic Hispanic ^d	224.3 192.0 196.8	223.5 185.3 188.4	225.9 193.3 195.0	224.7 192.9 192.6	225.5 191.2 196.6	224.3 190.2 189.5	228.6 198.8 200.9	228.6 197.9 200.5
8th-graders								
Total	260.0	259.6	263.6	262.9	_	_	264.3	263.3
Gender Male Female	253.7 266.5	252.4 266.9	257.1 270.3	256.0 270.0	_ _	_ _	259.6 269.1	258.0 268.6
Race and Hispanic origin ^c White, non-Hispanic Black, non-Hispanic Hispanic ^d	267.0 237.4 240.8	266.6 236.1 242.5	271.0 242.8 244.5	270.2 244.0 243.0	_ _ _	- - -	272.5 245.5 246.7	272.3 244.5 245.3
Parents' education Less than high school High school diploma or equivalent Some college, including vocational/ technical Bachelor's degree or higher	242.5 250.7 265.3 270.8	237.8 251.6 265.5 269.5	242.5 254.2 268.6 274.2	242.1 254.4 267.7 273.3	- -	- -	247.6 256.7 267.6 274.3	244.9 254.1 266.8 273.3
12th-graders	270.0	207.5	2/4.2	27 3.3		_	274.5	2/3.3
Total	292.1	287.3	290.8	290.2	_	_	286.9	_
Gender Male Female	286.9 297.1	280.4 294.2	282.6 298.4	282.0 298.0	_ _ _	_ _ _	278.6 294.9	- - -
Race and Hispanic origin ^c White, non-Hispanic Black, non-Hispanic Hispanic ^d	297.4 273.2 278.5	293.4 264.8 270.2	296.8 270.6 276.1	296.5 269.4 274.7	- - -	- - -	292.3 267.5 272.7	- - -
Parents' education Less than high school High school diploma or equivalent Some college, including vocational/	274.9 282.7	265.8 276.7	267.7 280.0	268.4 279.4	- -	- -	268.4 277.5	- -
technical Bachelor's degree or higher	293.8 301.4	289.0 298.0	291.8 301.0	291.2 300.3	_ _	_ _	288.8 296.1	_ _

⁻ Not available.

NOTE: Parents' education is the highest educational attainment of either parent. Data on parents' education are not reliable for 4th-graders.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress.

^a Testing accommodations (e.g., extended time, small group testing) for children with disabilities and limited-English-proficient students were not permitted.

^b In 2000, the assessment was only conducted at grade 4. In 2003, the assessment was only conducted at grades 4 and 8.

^c The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

^d Persons of Hispanic origin may be of any race.

Table ED3.C Percentage of students within each reading and mathematics achievement level range by grade, selected years 1990–2003

Subject, grade, and achievement level	1990∘	1992°	1994°	1996°	1996	1998°	1998	2000∘	2000	2002	2003
Mathematics											
4th-graders											
Below Basic	50.1	41.1	_	35.8	36.7	_	_	31.3	34.5	_	22.8
At or above Basic	49.9	58.9	_	64.2	63.3	_	_	68.7	65.5	_	77.2
At or above Proficient	12.7	17.9	_	21.3	20.8	_	_	26.0	23.8	_	32.5
At Advanced	1.2	1.7	_	2.3	2.2	_	_	2.6	2.5	_	3.9
8th-graders											
Below Basic	48.2	42.5	_	37.6	39.0	_	_	34.2	36.6	_	31.9
At or above Basic	51.8	57.5	_	62.4	61.0	_	_	65.8	63.4	_	68.1
At or above Proficient	15.3	20.9	_	23.8	23.3	_	_	27.3	25.7	_	28.8
At Advanced	2.0	3.1	_	3.8	3.7	_	_	5.0	4.7	_	5.4
12th-graders											
Below Basic	41.9	36.3	_	30.8	34.2	_	_	35.0	35.9	_	_
At or above Basic	58.1	63.7	_	69.2	65.8	_	_	65.0	64.1	_	_
At or above Proficient	11.9	14.7	_	16.3	16.0	_	_	16.8	16.5	_	_
At Advanced	1.4	1.6	_	1.9	2.0	_	_	2.3	2.4	_	_
Reading											
4th-graders											
Below Basic	_	37.9	39.5	_	_	37.6	40.4	37.4	40.5	36.1	36.6
At or above Basic	_	62.1	60.5	_	_	62.4	59.6	62.6	59.5	63.9	63.4
At or above Proficient	-	28.6	29.6	_	_	30.8	29.3	31.8	29.4	31.5	31.5
At Advanced	-	6.4	7.4	_	_	7.3	7.1	8.1	6.9	7.1	7.7
8th-graders											
Below Basic	_	30.5	30.4	_	_	25.9	26.6	_	_	24.5	26.2
At or above Basic	_	69.5	69.6	_	_	74.1	73.4	_	_	75.5	73.8
At or above Proficient	_	29.2	29.5	_	_	33.2	32.3	_	_	32.6	32.2
At Advanced	-	2.9	2.8	-	_	2.7	2.6	_	_	2.8	3.2
12th-graders											
Below Basic	_	20.3	25.5	_	_	23.0	23.7	_	_	26.3	_
At or above Basic	_	79.7	74.5	_	_	77.0	76.3	_	_	73.7	_
At or above Proficient	_	40.2	36.3	_	_	40.2	40.1	_	_	36.0	_
At Advanced	_	3.9	4.2	_	_	5.7	5.6	_	_	4.5	_

[—] Not available.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress.

 $^{^{\}mathrm{a}}$ Testing accommodations (e.g., extended time, small group testing) for children with disabilities and limited-English-proficient students were not permitted.

NOTE: Achievement levels define what students should know and be able to do at different levels of performance. The definitions of these levels are: *Basic*: partial mastery of prerequisite knowledge and skills; *Proficient*: solid academic performance for each grade assessed; *Advanced*: superior performance.

Table ED4.A

High school academic coursetaking: Percentage distribution of high school graduates by the highest level of mathematics courses taken, selected years 1982–2000

Characteristic	1982	1987	1990	1992	1994	1998	2000
Nonacademic or low academic							
Total	24.1	19.5	17.2	12.5	11.8	8.9	6.5
Middle academic							
Total	48.8	50.1	51.6	49.0	49.4	48.9	48.0
Level I Level II	30.6 18.2	27.0 23.1	25.4 26.2	22.7 26.4	22.5 26.9	21.2 27.7	18.6 29.4
Advanced academic							
Total	26.3	29.5	30.6	38.1	38.1	41.4	44.6
Level I	15.6	12.9	12.9	16.4	16.3	14.4	14.1
Level II Level III	4.8 5.9	9.0 7.6	10.4 7.2	10.9 10.7	11.6 10.2	15.2 11.8	18.0 12.5

NOTE: Totals do not add to 100 because a small percentage of students completed no mathematics or only basic or remedial-level mathematics courses.

Mathematics academic levels are:

Nonacademic: General Mathematics I or II; Basic Mathematics I, II, or III; consumer mathematics; technical or vocational mathematics; and mathematics review.

Low academic: Pre-algebra; Algebra I (taught over 2 years); and geometry (informal).

Middle academic I: Algebra I; plane geometry; plane and solid geometry; Unified Mathematics I and II; and pure mathematics.

Middle academic II: Algebra II and Unified Mathematics III.

Advanced academic I: Algebra III; algebra/trigonometry; algebra/analytical geometry; trigonometry; trigonometry; solid geometry; analytical geometry; linear algebra; probability; probability/statistics; statistics (other); and independent study.

Advanced academic II: Precalculus and introduction to analysis.

Advanced academic III: Advanced Placement calculus; calculus; and calculus/analytical geometry.

SOURCE: U.S. Department of Education, National Center for Education Statistics, High School and Beyond (1982); National Education Longitudinal Study of 1988 (1992); National Assessment of Educational Progress Transcript Study (1987, 1990, 1994, 1998, and 2000).

Table ED4.B

High school academic coursetaking: Percentage distribution of high school graduates by the highest level of science courses taken, selected years 1982–2000

Characteristic	1982	1987	1990	1992	1994	1998	2000
Low academic							
Total	27.2	15.8	12.8	9.7	10.0	9.3	8.7
Primary physical science Secondary physical science	12.2	6.7	4.2	2.8	1.9	3.0	2.8
and basic biology	15.0	9.1	8.7	6.9	8.2	6.3	5.9
Middle academic							
General biology	35.2	41.5	37.0	36.4	34.1	28.6	27.5
Advanced academic							
Total	35.4	41.9	49.5	53.5	55.3	61.5	63.1
Chemistry I or physics I	14.9	21.4	25.8	27.1	29.4	30.2	30.5
Chemistry I and physics I Chemistry II or physics II or	5.9	10.6	12.3	12.2	13.0	16.3	14.8
advanced biology	14.6	9.9	11.4	14.3	12.9	15.1	1 <i>7</i> .9

NOTE: Totals do not add to 100 because a small percentage of students completed no science or only basic or remedial-level science courses

Science academic levels are:

Primary physical science: Physical science; applied physical science; earth science; college preparatory earth science; and unified science. Secondary physical science and basic biology: Astronomy, geology; environmental science; oceanography; general physics; and basic biology I

General biology: General biology I; ecology; zoology; marine biology; human physiology; and general or honors biology II.

Chemistry I or physics I: Introductory chemistry; chemistry I; organic chemistry; physical chemistry; consumer chemistry; general physics; and physics I.

Chemistry I and physics I: 1 chemistry and 1 physics course from the list above.

Chemistry II or physics II or advanced biology: International Baccalaureate (IB) biology II; IB biology III; AP biology; field biology; genetics; biopsychology; biology seminar; biochemistry and biophysics; biochemistry; botany; cell and molecular biology; microbiology; anatomy; chemistry II; IB chemistry III; AP chemistry; physics II; IB physics; AP physics B; AP physics C: mechanics; AP physics C: electricity/magnetism; and physics II without calculus.

SOURCE: U.S. Department of Education, National Center for Education Statistics, High School and Beyond (1982); National Education Longitudinal Study of 1988 (1992); National Assessment of Educational Progress Transcript Study (1987, 1990, 1994, 1998, and 2000).

Table ED4.C

High school academic coursetaking: Percentage distribution of high school graduates by the level of English courses taken, selected years 1982–2000

Characteristic	1982	1987	1990	1992	1994	1998	2000
Low academic							
Total	10.0	22.1	19.6	18.0	17.6	13.7	10.7
Middle academic							
Total	76.7	55.6	60.2	57.3	56.5	56.1	54.7
Advanced academic							
Total	13.3	21.5	19.6	24.4	25.1	29.3	33.9
Less than 50 percent in honors	6.1	7.9	7.0	7.6	7.7	9.1	11.6
50-74 percent in honors	3.3	5.0	3.6	5.8	5.4	7.7	7.2
75 percent or more in honors	3.8	8.7	9.1	11.1	12.0	12.4	15.1

NOTE: Totals do not add up to 100 because a small percentage of students completed no English courses or only English as a second language (ESL) courses.

English academic levels are:

Low academic: The student has taken at least one low academic course, without having taken an honors-level course.

Middle academic: All completed English courses classified at grade level; no low academic level or honors courses.

Less than 50 percent in honors: The number of completed courses classified as honors level, when divided by the total number of completed low academic-, regular-, and honors-level courses, yields a percentage less than 50.

50–74 percent in honors: The number of completed courses classified as honors level, when divided by the total number of completed low academic-, regular-, and honors-level courses, yields a percentage from 50 through 74.

75 percent or more in honors: The number of completed courses classified as honors level, when divided by the total number of completed low academic-, regular-, and honors-level courses, yields a percentage from 75 through 100.

SOURCE: U.S. Department of Education, National Center for Education Statistics, High School and Beyond (1982); National Education Longitudinal Study of 1988 (1992); National Assessment of Educational Progress Transcript Study (1987, 1990, 1994, 1998, and 2000).

Table ED4.D

High school academic coursetaking: Percentage distribution of high school graduates by the highest level of foreign language courses taken, selected years 1982–2000

Characteristic	1982	1987	1990	1992	1994	1998	2000
No foreign language							
Total	45.6	33.3	26.9	22.5	22.3	19.4	17.4
Low academic							
Total	39.8	47.5	51.4	51.8	51.8	50.7	52.8
Year 1 or less Year 2	20.4 19.5	22.6 24.9	21.2 30.2	19.9 32.0	19.8 32.1	19.2 31.5	18.0 34.9
Advanced academic							
Total	14.6	19.2	21.7	25.7	25.9	30.0	29.8
Year 3	8.9	11.9	12.9	14.8	15.0	17.4	16.5
Year 4	4.5	5.4	5.6	7.7	7.8	8.6	7.8
Advanced placement	1.2	1.9	3.2	3.2	3.1	4.1	5.4

NOTE: Foreign language coursetaking based upon students taking classes in Spanish, French, Latin, and German.

SOURCE: U.S. Department of Education, National Center for Education Statistics, High School and Beyond (1982); National Longitudinal Study of 1988 (1992); National Assessment of Educational Progress Transcript Study (1987, 1990, 1994, 1998, and 2000).

Table ED5	High school completion: Percentage of adults ages 18–24° who have completed high school by race, Hispanic origin, and method of completion, selected years 1980–2003											
Characteristic	1980	1985	1990	1995 ^b	1996 ^b	1997 ^b	1998 ^b	1999 ^b	2000b	2001b	2002b	2003b
Total ^c												
Total completing high school ^d Method of completion ^e Diploma	83.9	85.4	85.6 80.6	85.3 77.5	86.2 76.5	85.9 76.7	84.8 74.7	85.9 76.8	86.5	86.5	87.3	87.1 –
Equivalent ^f	_	_	4.9	7.7	9.8	9.1	10.1	9.2	_	_	_	_
White, non-Hispanic ^g												
Total completing high school ^d Method of completion ^e	87.5	88.2	89.6	89.8	91.5	90.5	90.2	91.2	-	-	-	-
Diploma Equivalent ^f	_	_	85.0 5.0	83.0 <i>7</i> .0	81.0 11.0	81.0 9.0	80.0 10.0	82.0 9.0	_ _	_ _	_	_
White-alone, non-Hispanic ⁹												
Total completing high school ^d Method of completion ^e	-	-	-	-	-	-	-	-	91.8	91.0	91.8	91.9
Diploma Equivalent ^f	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _	_ _	_
Black, non-Hispanic ⁹												
Total completing high school ^d Method of completion ^e	75.2	81.0	83.2	84.5	83.0	82.0	81.4	83.5	-	-	-	_
Diploma Equivalent ^f	_	_	78.0 5.0	75.0 9.0	73.0 10.0	72.0 10.0	72.0 10.0	73.0 11.0	_	_	_	_
Black-alone, non-Hispanic ^g												
Total completing high school ^d Method of completion ^e	-	-	-	-	-	-	-	-	83.7	85.6	84.8	85.0
Diploma Equivalent ^f	-	_	_	_	_	_	-	_	_	-	-	-
Hispanich												
Total completing high school ^d Method of completion ^e	<i>57</i> .1	66.6	59.1	62.8	61.9	66.7	62.8	63.4	64.1	65.7	67.9	69.2
Diploma Equivalent ^f	_	_	55.0 4.0	54.0 9.0	55.0 7.0	59.0 8.0	52.0 11.0	55.0 9.0	_	_	_	_

⁻ Not available.

SOURCE: U.S. Census Bureau, Current Population Survey, October Supplement. Tabulated by the U.S. Department of Education, National Center for Education Statistics.

^a Excludes those enrolled in high school or below.

^b Data for 1994 and subsequent years are not strictly comparable with data for 1980–93, because of major revisions in the Current Population Survey questionnaire and data collection methodology, and because of the inclusion of 1990 Census-based population controls in the estimation process.

^c Not shown separately, but included in the total, are non-Hispanic Asians/Pacific Islanders and American Indians/Alaska Natives.

 $^{^{\}rm d}$ From 1980 to 1991, high school completion was measured as completing 4 years of high school rather than the actual attainment of a high school diploma or equivalent.

^e Method of high school completion is not reported for 2000 and subsequent years because of changes in General Education Development (GED) items in the October 2001 Current Population Survey (CPS) School Enrollment Supplement, making the 2001 data not comparable to previous years.

f Diploma equivalents include alternative credentials obtained by passing exams such as the General Education Development (GED) test.

g From 1980 to 1999, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. From 2000 to 2003, the revised 1997 OMB standards were used. Persons could select one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data from 2000 onward are not directly comparable with data from earlier years. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

^h Persons of Hispanic origin may be of any race.

Table ED6.A

Youth neither enrolled in school nor working: Percentage of youth ages 16–19 who are neither enrolled in school nor working by age, gender, race, and Hispanic origin, selected years 1984–2004

Characteristic	1984	1985	1990	1995∘	1996°	1997°	1998°	1999°	2000°	2001°	2002°	2003°	2004°
Ages 16-19													
Total	12	11	10	9	9	9	8	8	8	9	9	8	8
Gender	0	0	0	0	0	0	0	7	7	0	0	0	7
Male Female	9 14	9 13	8 12	8 11	8 11	8 10	8 9	7 9			8 9	8 9	7 8
Race and Hispanic origin ^b													
White, non-Hispanic	10	9	8	7	7	7	6	6		6	7	_	-
White-alone, non-Hispanic Black, non-Hispanic	- 19	- 18	- 15	- 14	- 15	- 14	- 13	13		- 14	- 14	6	6
Black-alone, non-Hispanic	_	_	_	_	_	_	_	_			_	12	10
Hispanic ^c	18	17	17	16	16	14	14	14			13	12	12
Other, non-Hispanic						_	_					8	6
Ages 16-17	_	_	_										
Total	5	5	5	4	4	4	4	4	4	4	4	3	3
Gender Male	4	5	4	4	4	4	4	4	3	4	4	3	3
Female	6	6	5	5	5	4	4	4			4	4	4
Race and Hispanic origin ^b													
White, non-Hispanic White-alone, non-Hispanic	5	5	4	3	3	3	3	3		3	3	_ 3	_ 3
Black, non-Hispanic	6	6	6	6	_ 5	6	5	5			5	_	_
Black-alone, non-Hispanic	_	_	-	_	-	-	-	_			-	4	4
Hispanic ^c Other, non-Hispanic	11	10	10	9	8	8	8	9	7	7	5	6	5 2
					_				_			3	2
Ages 18–19	1.0	17	1.5	1.5	1.5	1.4	1.0	1.0	10	1.0	1.4	14	1.0
Total Gender	18	17	15	15	15	14	13	13	12	13	14	14	13
Male	14	13	12	12	13	12	12	11	11	12	13	14	12
Female	21	20	18	17	17	15	13	14	13	15	15	14	13
Race and Hispanic origin ^b													
White, non-Hispanic White-alone, non-Hispanic	14	14	12	11	11	10	9	9		10	11	- 10	10
Black, non-Hispanic	32	30	23	24	25	23	21	21	21	22	24	-	-
Black-alone, non-Hispanic	-	_	_	_	_	_	_	_		_	_	23	18
Hispanic ^c Other, non-Hispanic	25	24	24	23	23	20	19	20	18	19	20	20 14	19 10
,													. 0

Not available.

NOTE: The information relates to the labor force and enrollment status of persons 16–19 years old in the civilian noninstitutionalized population during an "average" week of the school year. The percentages represent an average based on responses to the survey questions for the months that youth are usually in school (January through May and September through December). Results are based on uncomposited estimates and are not comparable to data from published tables.

SOURCE: U.S. Bureau of Labor Statistics, Current Population Survey.

^a Data for 1994 and subsequent years are not strictly comparable with data for prior years, because of major revisions in the Current Population Survey questionnaire and data collection methodology, and because of the inclusion of 1990 Census-based population controls in the estimation process.

^b Before 2003, the 1977 OMB Standards for data on race and ethnicity were used to classify persons into racial groups. Beginning in 2003, the revised 1997 OMB standards were used, and Current Population Survey (CPS) questions were modified to comply with these new standards. The major changes included that individuals were allowed to choose more than one race category, and individuals were asked whether they were of Hispanic ethnicity before being asked about their race. Data from 2003 onward categorized by race and ethnicity are not directly comparable with data from earlier years.

^c Persons of Hispanic origin may be of any race.

Table ED6.B

Youth enrolled in school and working: Percentage of youth ages 16–19 who are enrolled in school and working by age, gender, race, and Hispanic origin, selected years 1984–2004

Characteristic	1984	1985	1990	1995°	1996□	1997°	1998°	1999°	2000°	2001°	2002°	2003°	2004°
Ages 16-19													
Total	25	26	28	29	29	29	29	31	30	28	26	25	25
Gender Male Female	25 25	26 26	27 28	28 30	28 30	28 30	29 33	29 32	29 32	26 30	24 28	23 27	22 27
Race and Hispanic origin ^b White, non-Hispanic White-alone, non-Hispanic	29 -	30	33	35 -	35 -	35 -	36 -	36 -	36 -	34	31	_ 30	_ 30
Black, non-Hispanic Black-alone, non-Hispanic Hispanic ^c Other, non-Hispanic	10 - 18	12 - 15 -	15 - 17 -	16 - 16 -	15 - 17 -	16 - 17 -	19 - 18	17 - 18	19 - 19 -	16 - 20 -	15 - 17	- 14 15 21	- 14 16 21
Ages 16-17													21
Total	28	29	29	30	30	29	31	31	31	28	25	24	23
Gender Male Female	28 28	29 29	29 30	29 31	28 31	29 30	30 32	30 31	29 32	27 30	22 27	22 26	21 24
Race and Hispanic origin ^b White, non-Hispanic White-alone, non-Hispanic	33	34	36	37	37	36	38	37	37	34	30	_ 29	_ 28
Black, non-Hispanic Black-alone, non-Hispanic	10 - 18	12 - 15	15 - 17	16 -	16 - 15	15 - 15	1 <i>7</i> - 1 <i>7</i>	17 - 17	19 -	16 - 17	13 - 15	- 13	- 11
Hispanic ^c Other, non-Hispanic	-	-	-	14 -	-	-	-	-	18 -	-	-	14 16	13 18
Ages 18-19													
Total	23	23	26	28	28	28	30	30	30	28	28	27	27
Gender Male Female	23 23	23 23	25 26	27 30	28 29	27 30	27 33	28 32	28 31	26 30	25 30	24 30	24 30
Race and Hispanic origin ^b White, non-Hispanic White-alone, non-Hispanic Black, non-Hispanic Black-alone, non-Hispanic Hispanic ^c	26 - 11 - 17	26 - 12 - 15	30 - 15 - 16	33 - 17 - 19	34 - 15 - 18	33 - 16 - 19	35 - 21 - 19	36 - 18 - 19	35 - 18 - 20		33 - 16 - 19	- 32 - 16 17	- 32 - 17 20
Other, non-Hispanic	_	_	_	_	_	_	_	_	_	_	-	25	26

⁻ Not available.

NOTE: The information relates to the labor force and enrollment status of persons ages 16–19 in the civilian noninstitutionalized population during an "average" week of the school year. The figures represent an average based on responses to the survey questions for the months that youth are usually in school (January through May and September through December). Data for the groups of youth not shown here—those employed and not in school and those not employed and in school—are available on the website version of the report at http://childstats.gov.

SOURCE: U.S. Bureau of Labor Statistics, Current Population Survey.

^a Data for 1994 and subsequent years are not strictly comparable with data for prior years, because of major revisions in the Current Population Survey questionnaire and data collection methodology, and because of the inclusion of 1990 Census-based population controls in the estimation process.

^b Before 2003, the 1977 OMB Standards for data on race and ethnicity were used to classify persons into racial groups. Beginning in 2003, the revised 1997 OMB standards were used, and Current Population Survey (CPS) questions were modified to comply with these new standards. The major changes included that individuals were allowed to choose more than one race category, and individuals were asked whether they were of Hispanic ethnicity before being asked about their race. Data from 2003 onward categorized by race and ethnicity are not directly comparable with data from earlier years.

^c Persons of Hispanic origin may be of any race.

Table ED7

Higher education: Percentage of adults ages 25–29 attaining associate's and bachelor's degrees or higher by highest degree attained, gender, race, and Hispanic origin, selected years 1980–2004

Characteristic	1980	1985	1990	1995□	1998∘	1999°	2000°	2001°	2002°	2003°	2004□
Bachelor's degree or higher ^b											
Total	22.5	22.2	23.2	24.7	27.3	28.2	29.1	28.4	29.3	28.4	27.8
Gender Male Female	_ _	_ _	_ _	24.5 24.9	25.6 29.0	26.8 29.5	27.9 30.1	25.5 31.3	26.9 31.8	26.0 30.9	25.8 29.6
Race and Hispanic origin ^c White, non-Hispanic White-alone, non-Hispanic Black, non-Hispanic Black-alone, non-Hispanic Hispanic ^d Other, non-Hispanic	25.0 - 11.5 - 7.7	24.4 - 11.6 - 11.1	26.4 - 13.4 - 8.2 -	28.8 - 15.4 - 8.9 37.1	32.3 - 15.8 - 10.4 40.7	33.6 - 15.0 - 8.9 46.2	- 34.0 - 17.8 9.7 48.8	- 33.7 - 17.2 10.5 50.0	- 35.9 - 18.0 8.9 49.5	- 34.2 - 17.5 10.0 50.1	- 32.2 - 18.1 12.3 50.4
Associate's degree											
Total	_	_	_	8.3	8.6	8.8	8.7	8.6	8.2	8.3	8.4
Gender Male Female	_ _	_ _	_ _	7.6 9.1	8.1 9.1	8.5 9.1	7.3 10.0	7.4 9.9	7.5 9.0	7.4 9.2	7.3 9.4
Race and Hispanic origin ^c White, non-Hispanic White-alone, non-Hispanic Black, non-Hispanic Black-alone, non-Hispanic Hispanic ^d Other, non-Hispanic	- - - -	- - - -	- - - -	9.5 - 7.1 - 4.1 7.4	9.5 - 7.3 - 5.8 9.3	9.6 - 9.0 - 5.6 7.7	9.6 - 8.2 5.7 7.5	9.4 - 8.9 5.9 7.9	- 9.2 - 7.9 6.0 6.0	- 10.0 - 6.1 5.3 6.1	9.8 - 6.8 6.0 6.7

[—] Not available.

NOTE: Analyses of the 1993 Baccalaureate and Beyond Longitudinal study indicated that about 10 percent of all persons attaining a bachelor's degree in that year had previously earned an associate's degree. Source: National Center for Education Statistics.

SOURCE: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplement. Tabulated by the U.S. Department of Education, National Center for Education Statistics.

^a Data for 1994 and subsequent years are not strictly comparable with data for prior years, because of major revisions in the Current Population Survey questionnaire and data collection methodology, and because of the inclusion of 1990 census-based population controls in the estimation process.

^b From 1980 to 1991, this included respondents who had completed 4 or more years of college. After 1991, this included respondents who reported having a bachelor's or higher degree.

^c From 1980 to 1999, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. From 2000 to 2003, the revised 1997 OMB standards were used. Persons could select one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data from 2000 onward are not directly comparable with data from earlier years. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting.

d Persons of Hispanic origin may be of any race.

Table SPECIAL1.A

Asthma: Percentage of children ages 0–17 with asthma, selected years 1980–2003

Characteristic	1980	1985	1990	1995	1996	1997□	1998°	1999∘	2000°	2001°	2002°	2003°
Asthma in past 12 months ^b	3.6	4.8	5.8	7.5	6.2	_	_	_	_	_	_	_
Ever diagnosed with asthma ^c	_	_	_	_	_	11.4	12.1	10.8	12.3	12.6	12.2	12.5
Current asthmad	_	_	_	_	_	_	_	_	_	8.7	8.2	8.5
Having at least one asthma attac	ke –	_	_	_	_	5.4	5.3	5.3	5.5	5.7	5.8	5.5

- Not available.
- ^a In 1997, the National Health Interview Survey was redesigned. Data for 1997–2003 are not strictly comparable to earlier data.
- ^b Children with asthma in the past 12 months.
- ^c Children ever diagnosed with asthma by doctor or other health care professional.
- ^d Children ever diagnosed with asthma who still have asthma.
- $^{\rm e}$ Children having had an episode of asthma or asthma attack in the past 12 months.

NOTE: From 1980–1996 children were identified as having asthma by asking parents "During the past twelve months did anyone in the family have asthma?" From 1997–2003, children are identified as having asthma by asking parents "Has a doctor or other health professional EVER told you that your child has asthma?" If the parent answered YES to this question they were then asked (1) "Does your child still have asthma?" and (2) "During the past twelve months, has your child had an episode of asthma or an asthma attack?" The question "Does your child still have asthma?" was introduced in 2001.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

Table SPECIAL1.B

Asthma: Percentage of children with current asthma° by age, poverty status, race, Hispanic origin, and area of residence, 2001–2003

Characteristic	2001	2002	2003
Age			
Ages 0-4 Ages 5-10 Ages 11-17	5.7 9.6 10.1	6.0 8.6 9.7	6.0 9.2 9.8
Poverty status			
Below 100% poverty 100–199% poverty 200% poverty and above	11.0 8.9 8.3	11.4 7.9 7.7	10.9 8.3 8.0
Race and Hispanic origin ^b			
White-alone, non-Hispanic Black-alone, non-Hispanic Hispanic Mexican Puerto Rican Other, non-Hispanic ^c American Indian/Alaska Native-alone Asian-alone	8.5 11.2 7.1 5.1 18.1 9.4 *	7.9 12.6 6.3 4.4 17.2 8.1 13.2 5.6	7.5 13.4 7.4 4.9 20.6 10.3 15.7
Area of Residenced			
Central city Non-central city	8.7 8.7	8.3 8.4	9.1 8.3

^{*} The relative standard error of the estimate is greater than 30 percent.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

^a Children ever diagnosed with asthma that still have asthma.

^b The revised 1997 OMB standards for race were used for the 2001–2003 race-specific estimates. A person's race is described by one or more of five racial groups: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. Data on race and Hispanic origin are collected separately, but are combined for reporting. Persons of Hispanic origin may be of any race.

^c Includes Non-Hispanic American Indian, Alaska Native, Asian, Native Hawaiian, and Other Pacific Islander. Excludes multiple race.

^d "Central city" is defined as the central city of a Metropolitan Statistical Area (MSA), while "Non-central city" is defined as an area in an MSA outside of the central city or in an area outside of an MSA. For more information on MSA's see: National Center for Health Statistics. *Health United States*, 2004 chartbook on trends in the health of Americans. Appendix II. 468.

Table SPECIAL2.A

Blood lead levels: Percentage of children ages 1–5 with specified blood lead levels by race and Hispanic origin and by poverty status, 1999–2002

Characteristic	≥10 μ g/dL	≥5 μ g/dL	≥2.5 μ g/dL
Total ^a	1.6	8. <i>7</i>	34.0
Race and Hispanic origin ^b	1.0	0.7	34.0
White, non-Hispanic	1.3°	7.2	29.8
Black, non-Hispanic	3.1	18.5	54.0
Mexican American	*	7.4	29.1
Poverty status			
Below poverty	2.0°	14.6	50.8
At or above poverty	*	5.3	24.5

^{*} Estimates are considered unreliable (relative standard error is greater than 40 percent).

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey.

Table SPECIAL2.B

Blood lead levels: Median blood lead concentration among children ages 1-5, selected years 1976-2002

Median blood lead concentration (µg/dL)

Characteristic Total	1976-1980	1988-1991 3.5	1992-1994 2.6	1999-2000 2.1	2001–2002 1.6
Race and Hispanic origina					
White, non-Hispanic	13.2	3.1	2.2	2.0	1.4
Black, non-Hispanic	19.7	5.2	4.3	2.8	2.3
Mexican American	_	3.8	3.1	2.0	1.6

⁻ Not available.

NOTE: A blood lead level of $10~\mu g/dL$ or greater is considered elevated, but adverse health effects have been shown to occur at lower concentrations.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey.

^a Totals include data for racial/ethnic groups not shown separately.

^b From 1976–2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. Data on race and Hispanic origin are collected separately, but are combined for reporting. Estimates are not shown separately for American Indian or Alaskan Native, Asian, or Native Hawaiian or Other Pacific Islander race due to the small sample size for each of these groups.

 $^{^{}c}$ Estimates are unstable because they are based on a small number of persons (relative standard error is greater than 30 percent). NOTE: Data for 1999–2002 are combined. A blood lead level of $10 \mu g/dL$ or greater is considered elevated, but adverse health effects have been shown to occur at lower concentrations.

¹ Centers for Disease Control and Prevention. (2002). Managing elevated blood lead levels among young children: Recommendations from the Advisory Committee on Childhood Lead Poisoning Prevention. Atlanta, GA. Available at http://www.cdc.gov/nceh/lead/CaseManagement/caseManage_main.htm

² Canfield, R.L., Henderson, C.R. Jr., Cory-Slechta, D.A., Cox, C., Jusko, T.A., and Lanphear, B.P. (2003). Intellectual impairment in children with blood lead concentrations below 10 microg per deciliter. *New England Journal of Medicine*, *348*(16), 1517–1526.

^a From 1976–2002, the 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. In addition, note that data on race and Hispanic origin are collected separately, but are combined for reporting. Estimates are not shown separately for American Indian or Alaskan Native, Asian, or Native Hawaiian or Other Pacific Islander race due to the small sample size for each of these groups.

¹ Centers for Disease Control and Prevention. (2002). Managing elevated blood lead levels among young children: Recommendations from the Advisory Committee on Childhood Lead Poisoning Prevention. Atlanta, GA. Available at http://www.cdc.gov/nceh/lead/CaseManagement/caseManage_main.htm

² Canfield, R.L., Henderson, C.R. Jr., Cory-Slechta, D.A., Cox, C., Jusko, T.A., and Lanphear, B.P. (2003). Intellectual impairment in children with blood lead concentrations below 10 microg per deciliter. *New England Journal of Medicine*, 348(16), 1517–1526.

Table SPECIAL3.A

Emotional and behavioral difficulties: Percentage of children ages 4–17 reported by a parent to have definite or severe, minor, or no difficulties with emotions, concentration, behavior, or getting along with other people, by selected characteristics, 2003

Characteristic	Definite/severe difficulties	Minor difficulties	No difficulties
Age and gender			
Total ages 4-17 Ages 4-7 Ages 8-10 Ages 11-14 Ages 15-17	4.8	15.4	79.8
	3.3	13.8	82.8
	5.5	15.5	79.0
	4.9	16.0	79.1
	6.1	16.4	77.5
Male ages 4-17	6.3	17.3	76.4
Ages 4-7	4.8	15.8	79.4
Ages 8-10	7.3	17.8	74.8
Ages 11-14	6.5	18.1	75.4
Ages 15-17	6.9	17.4	75.7
Female ages 4-17	3.3	13.4	83.3
Ages 4-7	1.8	11.9	86.3
Ages 8-10	3.5	12.9	83.5
Ages 11-14	3.2	13.8	83.0
Ages 15-17	5.2	15.3	79.4
Poverty status ^a			
Below 100% poverty	7.8	18.6	73.6
100–199% poverty	6.1	19.0	74.9
200% poverty and above	4.6	15.0	80.3
Race and Hispanic origin ^b			
White-alone, non-Hispanic	5.2	1 <i>5.7</i>	79.1
Black-alone, non-Hispanic	5.5	1 <i>7</i> .0	77.5
Hispanic ^c	3.7	1 <i>4</i> .0	82.3
Other, non-Hispanic and multiple race	1.8	10.6	87.5
Family structured			
Two parents Mother only Father only No parents	4.0	14.1	81.9
	7.0	19.0	73.9
	3.6	12.8	83.6
	8.8	22.1	69.1

^a Poverty level is based on family income and reflects family size and composition. It is adjusted each year using the annual average Consumer Price Index level. For more detail, see U.S. Census Bureau, Series P–60, no. 219.

NOTE: Children with emotional and behavioral difficulties are defined as those whose parent responded "yes, definite" or "yes, severe" to the following question on the Strengths and Difficulties Questionnaire (SDQ): 1 "Overall, do you think that (child) has any difficulties in one or more of the following areas: emotions, concentration, behavior, or being able to get along with other people?" Response choices were: (1) no; (2) yes, minor difficulties; (3) yes, definite difficulties; and (4) yes, severe difficulties.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, 2003 National Health Interview Survey.

^b The revised 1997 OMB standards for race were used for the 2003 race-specific estimates. A person's race is described by one or more of five racial groups: White, Black or African American, American Indian or Alaskan Native, Asian, and Native Hawaiian or Other Pacific Islander. Data on race and Hispanic origin are collected separately, but are combined for reporting. Estimates are not shown separately for American Indian or Alaska Native, Asian, or Native Hawaiian or Other Pacific Islander race due to the small sample size for each of these groups.

^c Persons of Hispanic origin may be of any race.

^d "Two parents" includes two married or unmarried parents. The terms "mother" and "father" can include biological, adoptive, step, and foster relationships. "No parents" can include children cared for by other relatives or a legal guardian.

¹ Goodman, R. (1999). The extended version of the Strengths and Difficulties Questionnaire as a guide to child psychiatric caseness and consequent burden. *Journal of Child Psychology and Psychiatry*, 40, 791–799.

Table SPECIAL3.B

Emotional and behavioral difficulties: Percentage of children ages 4–17 with service contact^a by type of service and parent-reported level of difficulty with emotions, concentration, behavior, or getting along with other people, 2003

Characteristic	Any service contact ^b	Mental health professional ^c	General doctor ^d	Special education	Needed but could not afford care ^e
Level of difficulty					
Definite/severe	64.8	44.5	39.1	22.6	9.3
Minor difficulties	21.7	15.9	10.0	4.6	1.6
No difficulties	3.6	2.5	1.1	0.4	0.3

^a Data on services refer to service contact for an emotional or behavioral problem during the past 12 months, or currently receiving special education services for an emotional or behavioral problem.

NOTE: Children with emotional and behavioral difficulties are defined as those whose parent responded, "Yes, definite" or "Yes, severe" to the following question on the Strengths and Difficulties Questionnaire (SDQ): "Overall, do you think that (child) has any difficulties in any of the following areas: emotions, concentration, behavior, or being able to get along with other people?" Response choices were: (1) no; (2) yes, minor difficulties; (3) yes, definite difficulties; and (4) yes, severe difficulties.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, 2003 National Health Interview Survey.

^b For an emotional or behavioral problem, "Any service contact" includes contact with a mental health professional or a general doctor, or receipt of special education services. A child may have had contact with more than one type of service.

^c A mental health professional was defined as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker.

^d A general doctor was defined as a doctor who treats a variety of illnesses, such as a doctor in general practice, pediatrics, family medicine, or internal medicine.

^e "Needed but could not afford care" refers to parent reports that the child needed mental health care or counseling, but they could not afford it.

¹ Goodman, R. (1999). The extended version of the Strengths and Difficulties Questionnaire as a guide to child psychiatric caseness and consequent burden. *Journal of Child Psychology and Psychiatry*, 40, 791–799.

Table SPECIAL4.A

Low birthweight: Percentage of low and very low birthweight births by mother's marital status, race, Hispanic origin, and age, 2002

Total percentage distribution	Percentage distribution within groups	Percentage of births that are low birthweight	Percentage of births that are very low birthweight
100.0	100.0	7.8	1.5
66.0	66.0	6.7	1.2
34.0	34.0	9.9	2.0
57.1	100.0	6.9	1.2
44.0	77.0	6.4	1.1
13.2	23.0	8.7	1.5
14.4	100.0	13.4	3.2
4.5	31.6	11.6	2.9
9.8	68.4	14.2	3.2
21.8	100.0	6.5	1.2
12.3	56.5	6.0	1.1
9.5	43.5	7.3	1.3
10.8	100.0	9.6	1.8
2.1	20.0	7.5	1.3
8.6	80.0	10.2	2.0
25.4	100.0	7.9	1.4
12.3	48.4	6.5	1.1
13.1	51.6	9.2	1.7
26.4	100.0	6.9	1.3
19.7	74.7	6.1	1.1
6.7	25.3	9.2	1.9
23.7	100.0	7.2	1.4
20.2	85.4	6.6	1.2
3.5	14.6	11.0	2.4
11.3	100.0	8.6	1.6
9.6	85.5	7.8	1.5
1.6	14.5	13.1	2.7
2.5	100.0	11.0	2.2
2.1	82.7	10.1	2.0
0.4	17.3	15.2	3.0
	100.0 66.0 34.0 57.1 44.0 13.2 14.4 4.5 9.8 21.8 12.3 9.5 10.8 2.1 8.6 25.4 12.3 13.1 26.4 19.7 6.7 23.7 20.2 3.5 11.3 9.6 1.6 2.5 2.1	Total percentage distribution within groups distribution within groups 100.0 100.0 66.0 34.0 34.0 34.0 57.1 100.0 44.0 77.0 13.2 23.0 14.4 100.0 4.5 31.6 9.8 68.4 21.8 100.0 12.3 56.5 9.5 43.5 10.8 100.0 2.1 20.0 8.6 80.0 25.4 100.0 12.3 48.4 13.1 51.6 26.4 100.0 19.7 74.7 6.7 25.3 23.7 100.0 20.2 85.4 3.5 14.6 11.3 100.0 9.6 85.5 1.6 14.5 2.5 100.0 2.1 82.7	Total percentage distribution distribution within groups births that are low birthweight 100.0 100.0 7.8 66.0 66.0 6.7 34.0 34.0 9.9 57.1 100.0 6.9 44.0 77.0 6.4 13.2 23.0 8.7 14.4 100.0 13.4 4.5 31.6 11.6 9.8 68.4 14.2 21.8 100.0 6.5 12.3 56.5 6.0 9.5 43.5 7.3 10.8 100.0 9.6 2.1 20.0 7.5 8.6 80.0 10.2 25.4 100.0 7.9 12.3 48.4 6.5 13.1 51.6 9.2 26.4 100.0 6.9 19.7 74.7 6.1 6.7 25.3 9.2 23.7 100.0 7.2 20.2

Total births (in thousands): 4,021

NOTE: In all cases, married birthmothers are significantly different from unmarried birthmothers. Marital status is the mother's marital status at the time she gave birth, and is not necessarily an indication of the biological paternity of the child. Birthweight data excludes live births with unknown birthweight. Low-birthweight infants weigh less than 2,500 grams at birth, about 5 lb. 8 oz. Very-low-birthweight infants weigh less than 1,500 grams, about 3 lb. 4 oz. Mother's marital status is captured at the time of birth by a direct question on birth certificates in 48 states and DC (Michigan and New York use an inferential procedure to determine marital status, and are included with the other 48 states and DC).

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System, Final Data for 2002.

^a The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. California, Hawaii, Ohio (for December only), Pennsylvania, Utah, and Washington reported multiple-race data in 2003, following the revised 1997 OMB standards. The multiple-race data for these states were bridged to the single-race categories of the 1977 OMB standards for comparability with other states. In addition, note that data on race and Hispanic origin are collected and reported separately.

Table SPECIAL4.B

Infant mortality: Infant mortality by birthmother's marital status, race, Hispanic origin, and age, 2002

(Infant deaths per 1,000 live births)

Characteristic	Total percentage distribution	Percentage distribution within groups	Infant deaths per 1,000 live births
All birthmothers			
Total	100.0	100.0	7.0
Married birthmother	66.0	66.0	5.4
Unmarried birthmother	34.0	34.0	9.9
White, non-Hispanic birthmothers			
Total	<i>57</i> .1	100.0	5.8
Married birthmother	44.0	77.0	4.9
Unmarried birthmother	13.2	23.0	8.8
Black, non-Hispanic birthmothers ^a			
Total	1 <i>4.4</i>	100.0	13.9
Married birthmother	4.5	31.6	11.8
Unmarried birthmother	9.8	68.4	14.8
Hispanic birthmothers ^a			
Total	21.8	100.0	5.6
Married birthmother	12.3	56.5	5.0
Unmarried birthmother	9.5	43.5	6.4
All birthmothers—by age			
Under age 20	10.8	100.0	10.4
Married birthmother	2.1	20.0	8.4
Unmarried birthmother	8.6	80.0	10.9
Ages 20-24 Married birthmother Unmarried birthmother	25.4	100.0	7.8
	12.3	48.4	6.0
	13.1	51.6	9.6
Ages 25-29 Married birthmother Unmarried birthmother	26.4	100.0	6.0
	19.7	74.7	5.0
	6.7	25.3	9.0
Ages 30-34 Married birthmother Unmarried birthmother	23.7	100.0	5.6
	20.2	85.4	4.9
	3.5	14.6	9.8
Ages 35-39	11.3	100.0	6.5
Married birthmother	9.6	85.5	5.7
Unmarried birthmother	1.6	14.5	10.7
Ages 40-54	2.5	100.0	8.5
Married birthmother	2.1	82.7	7.6
Unmarried birthmother	0.4	17.3	12.6
Total births (in thousands): 4,021			

Total births (in thousands): 4,021

NOTE: In all cases, married birthmothers are significantly different from unmarried birthmothers. Marital status is the mother's marital status at the time she gave birth, and is not necessarily an indication of the biological paternity of the child. Mother's marital status is captured at the time of birth by a direct question on birth certificates in 48 states and DC (Michigan and New York use an inferential procedure to determine marital status, and are included with the other 48 states and DC).

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System, Final Data for 2002.

^a The 1977 OMB Standards for Data on Race and Ethnicity were used to classify persons into one of the following four racial groups: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. California, Hawaii, Ohio (for December only), Pennsylvania, Utah, and Washington reported multiple-race data in 2003, following the revised 1997 OMB standards. The multiple-race data for these states were bridged to the single-race categories of the 1977 OMB standards for comparability with other states. In addition, note that data on race and Hispanic origin are collected and reported separately.

Table SPECIAL4.C

Family structure and adolescents' living arrangements: Percentage of adolescents ages 15–17 by family structure, 1996 and 2001 SIPP panels

Characteristic Total percentage distribution

Total		
All adolescents ages 15-17	100.0	
With married, biological parents	53.1	
With adoptive parents	2.0	
With married parents, one biological, one step	10.1	
With a single parent	27.6	
With neither parent	7.2	
Total adolescents ages 15-17 (in thousands)a	11,731	

^a Average number of adolescents ages 15–17 at the start of the 1996 and 2001 panels.

NOTE: These data identify the living arrangements of adolescents at the time of the survey. The family living arrangement experience throughout the adolescent's first 15–17 years cannot be inferred from these data. (For example, a child living with a single parent at the time of the survey may have been living with two married biological parents up until the previous month. Similarly, it cannot be determined when an adolescent with adoptive parents was adopted.) The 1996 and 2001 panels from the Survey of Income and Program Participation (SIPP) were combined for purposes of these analyses.

SOURCE: U.S. Census Bureau, Survey of Income and Program Participation, 1996 and 2001 panels.

Table SPECIAL4.D

Adolescents enrolled in school: Percentage of adolescents ages 15–17 enrolled in school by family structure, family income, race, and Hispanic origin, 1996 and 2001 SIPP panels

Characteristic	Total percentage distribution	Percentage distribution within groups	Percentage of adolescents ages 15–17 enrolled in school		
All adolescents		3 - 4			
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	100.0 53.1 2.0 10.1 27.6 7.2	100.0 53.1 2.0 10.1 27.6 7.2	95.0 97.1 95.0 96.4 94.4° 79.4°		
Adolescents whose family's income is more than twice the poverty line					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	61.3 39.1 1.5 7.4 11.5 1.9	100.0 63.7 2.4 12.0 18.8 3.0	96.9 98.0 95.1 96.9 95.7° 81.9°		
White, non-Hispanic adolescents ^a					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	66.6 39.6 1.3 7.3 14.8 3.5	100.0 59.5 2.0 11.0 22.2 5.3	95.7 97.3 96.0 95.4° 94.9° 81.8°		
Black, non-Hispanic adolescents ^a					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	15.1 4.0 0.4 1.3 7.5 1.8	100.0 26.7 2.4 8.5 50.1 12.2	95.9 97.2 90.8 98.9 96.5 89.7°		
Hispanic adolescents ^a					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent Total adolescents ages 15-17 (in thousands):b 11,7	13.4 6.2 0.2 1.0 4.4 1.6	100.0 46.3 1.3 7.6 32.9 11.9	89.8 94.9 91.6 99.0° 90.3° 62.1°		

Total adolescents ages 15-17 (in thousands): b 11,731

NOTE: These data identify the living arrangements of adolescents at the time of the survey. The family living arrangement experience throughout the adolescent's first 15–17 years cannot be inferred from these data. (For example, a child living with a single parent at the time of the survey may have been living with two married biological parents up until the previous month. Similarly, it cannot be determined when an adolescent with adoptive parents was adopted.) The 1996 and 2001 panels from the SIPP were combined for purposes of these analyses.

SOURCE: U.S. Census Bureau, Survey of Income and Program Participation, 1996 and 2001 panels.

^a In the 1996 and 2001 panels, following the 1977 OMB standards for collecting and presenting data on race, the Survey of Income and Program Participation (SIPP) asked respondents to choose one race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. Data on race and Hispanic origin are collected separately; Hispanics may be of any race.

 $^{^{\}mathrm{b}}$ Average number of adolescents ages 15–17 at the start of the 1996 and 2001 panels.

^c Significantly different from adolescents with married, biological parents (.05 level).

Table SPECIAL4.E

General adolescent health status: Percentage of adolescents ages 15–17 reported to be in excellent or very good health by family structure, 1996 and 2001 SIPP panels

Characteristic	Total	Percentage	Percentage of adolescents		
	percentage	distribution	ages 15–17 reported to be in		
	distribution	within groups	very good or excellent health		
All adolescents					
All adolescents ages 15-17° With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	100.0	100.0	81.4		
	53.1	53.1	85.9		
	2.0	2.0	81.8		
	10.1	10.1	79.8°		
	27.6	27.6	76.2°		
	7.2	7.2	67.1°		
Adolescents whose family's income is more than twice the poverty line					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	61.3	100.0	83.5		
	39.1	63.7	86.7		
	1.5	2.4	82.6		
	7.4	12.0	81.1°		
	11.5	18.8	78.8°		
	1.9	3.0	69.1°		
White, non-Hispanic adolescents ^a					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	66.6	100.0	83.8		
	39.6	59.5	87.9		
	1.3	2.0	82.6		
	7.3	11.0	80.8°		
	14.8	22.2	78.3°		
	3.5	5.3	65.8°		
Black, non-Hispanic adolescents ^a					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	15.1	100.0	72.9		
	4.0	26.7	82.5		
	0.4	2.4	61.2		
	1.3	8.5	70.4°		
	7.5	50.1	69.9°		
	1.8	12.2	68.8°		
Hispanic adolescents ^a					
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	13.4	100.0	77.4		
	6.2	46.3	77.4		
	0.2	1.3	*		
	1.0	7.6	76.7		
	4.4	32.9	80.3		
	1.6	11.9	63.4°		
Total adolescents ages 15-17 (in thousands):b11,	731				

^{*} Number too small to calculate a reliable rate.

NOTE: These data identify the living arrangements of adolescents at the time of the survey. The family living arrangement experience throughout the adolescent's first 15–17 years cannot be inferred from these data. (For example, a child living with a single parent at the time of the survey may have been living with two married biological parents up until the previous month. Similarly, it cannot be determined when an adolescent with adoptive parents was adopted.) The 1996 and 2001 panels from the SIPP were combined for purposes of these analyses.

 $SOURCE: U.S.\ Census\ Bureau, Survey\ of\ Income\ and\ Program\ Participation,\ 1996\ and\ 2001\ panels.$

^a In the 1996 and 2001 panels, following the 1977 OMB standards for collecting and presenting data on race, the Survey of Income and Program Participation (SIPP) asked respondents to choose one race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. Data on race and Hispanic origin are collected separately; Hispanics may be of any race.

 $^{^{\}rm b}$ Average number of adolescents ages 15–17 at the start of the 1996 and 2001 panels.

^c Significantly different from adolescents with married, biological parents (.05 level).

Table SPECIAL4.F

Births to unmarried adolescent girls: Percentage of adolescent girls, by family structure at ages 15–17, who became unmarried birthmothers by ages 17–19, 1996 and 2001 SIPP panels

Percentage of adolescent girls,

Characteristic	Total percentage distribution	Percentage distribution within groups	by family structure at ages 15–17, who become unmarried birthmothers by ages 17–19
All adolescents			
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	100.0 52.9 2.0 9.7 28.3 7.0	100.0 52.9 2.0 9.7 28.3 7.0	5.8 2.4 9.7 3.9 8.9° 26.7°
Adolescents whose family's income is more	e than twice the p	overty line	
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	60.7 39.0 1.5 7.0 11.6 1.5	100.0 64.3 2.4 11.6 19.1 2.5	3.2 1.6 10.4 2.7 6.6° 21.5°
White, non-Hispanic adolescents ^a			
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	66.1 39.4 1.5 6.7 15.1 3.3	100.0 59.6 2.3 10.2 22.9 5.0	3.2 1.5 5.1 2.4 4.6° 23.1°
Black, non-Hispanic adolescents ^a			
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	15.5 4.1 0.3 1.4 7.7 2.0	100.0 26.2 2.0 9.1 49.7 13.1	12.9 6.2 51.4° 10.3 13.4° 25.3°
Hispanic adolescents ^a			
All adolescents ages 15-17 With married, biological parents With adoptive parents With married parents, one biological, one step With a single parent With neither parent	13.3 6.1 0.2 1.1 4.6 1.3	100.0 45.7 1.2 8.5 34.6 10.0	12.7 5.2 * 5.9 17.5° 41.5°

Total girls ages 15-17 (in thousands): 5,716

NOTE: These data identify the living arrangements of adolescents at the time of the survey. The family living arrangement experience throughout the adolescent's first 15–17 years cannot be inferred from these data. (For example, a child living with a single parent at the time of the survey may have been living with two married biological parents up until the previous month. Similarly, it cannot be determined when an adolescent with adoptive parents was adopted.) Family structure was measured in 1996 and 2001, at ages 15–17; data on unmarried motherhood was collected over the two succeeding years. The 1996 and 2001 panels from the SIPP were combined for purposes of these analyses.

SOURCE: U.S. Census Bureau, Survey of Income and Program Participation, 1996 and 2001 panels.

^{*} Number too small to calculate a reliable rate.

^a In the 1996 and 2001 panels, following the 1977 OMB standards for collecting and presenting data on race, the Survey of Income and Program Participation (SIPP) asked respondents to choose one race from the following: White, Black, American Indian or Alaskan Native, or Asian or Pacific Islander. Data on race and Hispanic origin are collected separately; Hispanics may be of any race.

^b Average number of adolescents ages 15–17 at the start of the 1996 and 2001 panels.

^c Significantly different from adolescent girls with married, biological parents (.05 level).



Data Source Descriptions

Air Quality System	175
American Community Survey	175
American Housing Survey	175
Continuing Survey of Food Intakes by Individuals	175
Current Population Survey	176
Decennial Census Data	177
High School and Beyond	178
Monitoring the Future	178
National Assessment of Educational Progress	178
National Assessment of Educational Progress High School Transcript Studies	179
National Crime Victimization Survey	179
National Education Longitudinal Study of 1988	180
National Health and Nutrition Examination Survey	180
National Health Interview Survey	181
National Household Education Survey	182
National Immunization Survey	182
National Linked File of Live Births and Infant Deaths	183
National Survey on Environmental Management of Asthma and Children's Exposure to Environmental Tobacco	183
National Vital Statistics System	183
Population Estimates	185
Population Projections	185
Survey of Income and Program Participation	185
Uniform Crime Reports	186

Data Source Descriptions

Air Quality System

The Air Quality System (AQS) contains ambient air pollution data collected by EPA, State, local, and tribal air pollution control agencies. Data on criteria pollutants consist of air quality measurements collected by sensitive equipment at thousands of monitoring stations located across all 50 states, plus the District of Columbia, Puerto Rico, and the U.S. Virgin Islands. Each monitor measures the concentration of a particular pollutant in the air. Monitoring data indicate the average pollutant concentration during a specified time interval, usually 1 hour or 24 hours. AQS also contains meteorological data, descriptive information about each monitoring station (including its geographic location and its operator), and data quality assurance/quality control information. The system is administered by the U.S. Environmental Protection Agency (EPA), Office of Air Quality Planning and Standards (OAQPS), Information Transfer and Program Integration Division (ITPID), located in Research Triangle Park, North Carolina.

Information on the AQS is available online at http://www.epa.gov/air/data/aqsdb.html.

Agency Contact: David Mintz U.S. Environment

U.S. Environmental Protection Agency Phone: (919) 541-5224

.

American Community Survey

The American Community Survey is an annual nationwide survey that will replace the decennial long form in future censuses. The objective of the American Community Survey is to provide data users with timely housing, social, and economic data updated every year that can be compared across states, communities, and population groups.

The American Community Survey has been implemented in three parts: (1) Demonstration period, 1996–1998, beginning at 4 sites; (2) Comparison site period, 1999–2004, comparing 31 sites continuously over this period as well as adding other counties to the survey in preparation for full implementation; and (3) Full implementation nationwide in 2005. (Sampling of group quarters will be added in 2006.)

Starting in January 2005, the Census Bureau is implementing the American Community Survey in every county of the United States with an annual sample of 3 million housing units. Once the survey is in full operation, American Community Survey data will be available every year for areas and population groups of 65,000 or more.

For small areas and population groups of 20,000 or less, it will take 5 years to accumulate a large enough sample to provide estimates with accuracy similar to the decennial census.

Each month, a systematic sample of addresses will be selected from the most current Master Address File (MAF). The sample will represent the entire United States. Data are collected by mail, and sample addresses that do not respond by mail may be contacted using the follow-up procedures CATI, CAPI, or both.

Information about the American Community Survey is available online at http://www.census.gov/acs/www/index.html.

Agency Contact: Tavia Simmons U.S. Census Bureau Phone: (301) 763-2416

American Housing Survey

This survey provides data necessary for evaluating progress toward "a decent home and a suitable living environment for every American family," affirmed in 1949 and 1968 legislation. The data come from a U.S. Census Bureau nationwide sample survey in oddnumbered years for national, regional, and metropolitan/nonmetropolitan data and from surveys in 47 metropolitan statistical areas over a multi-year cycle. These data detail the types, size, conditions, characteristics, costs and values, equipment, utilities, and dynamics of the housing inventory; describe the demographic, financial, and mobility characteristics of the occupants; and give some information on neighborhood conditions. In 1997, the survey was conducted using computer-assisted personal interviewing for the first time, and questions on rental assistance and physical problems were also changed. Therefore, data since 1997 on assisted families, priority problems, and severe physical problems are not comparable with earlier data.

Information about the American Housing Survey is available online at

http://www.census.gov/hhes/www/ahs.html.

Agency Contact: Barry Steffen

U.S. Department of Housing and Urban Development Phone: (202) 708-1537 (x5926)

Continuing Survey of Food Intakes by Individuals

The Continuing Survey of Food Intakes by Individuals (CSFII) is designed to measure what Americans eat and drink. Uses of the survey include monitoring the

nutritional adequacy of American diets, measuring the impact of food fortification on nutrient intakes, developing dietary guidance and related programs, estimating exposure of population groups to food contaminants, evaluating the nutritional impact of food assistance programs, and assessing the need for agricultural products. Individuals were asked to provide 3 consecutive days of dietary data. The 1994–96 CSFII also included individuals living in households and oversampling of the low-income population. In each of the 3 survey years, respondents were asked to provide, through in-person interviews, food intake data on 2 nonconsecutive days, with both days of intake collected by the 24-hour recall method. The 1998 sample of children ages 2–9 was designed as a supplement to the 1994-96 CSFII. Dietary recall methods were the same in both samples. Intake data were provided for 3,937 children ages 0-17 in 1989-91, and 4,011 children ages 2-9 in 1998.

For more information on the CSFII 1989–91, see Tippett, K.S., Mickle, S.J., Goldman, J.D., et al. (1995). Food and nutrient intakes by individuals in the United States, 1 day, 1989–91 (NFS Rep. No. 91–2). U.S. Department of Agriculture, Agricultural Research Service.

For more information on the CSFII 1994–96, see Tippett, K.S., and Cypel, Y.S. (Eds.). (1998). *Design and operation: The Continuing Survey of Food Intakes by Individuals and the Diet and Health Knowledge Survey, 1994–96* (NFS Rep. No. 96–1). U.S. Department of Agriculture, Agricultural Research Service.

Information about the CSFII is available online at http://www.barc.usda.gov/bhnrc/foodsurvey/home.htm.

Agency Contact: Alanna Moshfegh Agricultural Research Service U.S. Department of Agriculture Phone: (301) 734-8457

For information on the Healthy Eating Index: P. Peter Basiotis
Center for Nutrition Policy and Promotion
U.S. Department of Agriculture
Phone: (703) 305-7600

Current Population Survey

Core survey and supplements. The Current Population Survey (CPS) is a nationwide survey of about 60,000 households conducted monthly for the U.S. Bureau of Labor Statistics by the U.S. Census Bureau. It represents the civilian noninstitutionalized population nationally and for every State and the District of Columbia.

The CPS core survey is the primary source of information on the employment characteristics of the noninstitutionalized civilian population, ages 15 and older, including estimates of unemployment released every month by the Bureau of Labor Statistics.

In addition to the core survey, monthly CPS supplements provide additional demographic and social data. The Annual Social and Economic Supplement (ASEC)—formerly called the March Supplement—and the October school enrollment supplement provide information used to estimate the status and well-being of children. The ASEC and October supplement have been administered every year since 1947. Every year, the October supplement to the CPS asks questions on school enrollment by grade and other school characteristics about each member of the household ages 3 and older. In this report, data on poverty status, health insurance, and the highest level of school completed or degree attained are derived from the ASEC. The food security supplement, introduced in April 1995 and administered in December since 2001, is described in detail below.

The CPS sample is selected from a complete address list of geographically delineated primary sampling units based on census addresses updated using recent construction and other data. It is administered through field representatives, either in-person or by telephone using Computer Assisted Personal Interviewing (CAPI). Some CPS data is also collected through a centralized telephone operation (CATI). For more information regarding the CPS, its sampling structure, and estimation methodology, see *Current Population Survey Design and Methodology Technical Paper 63RV*, Bureau of Labor Statistics, March 2002, available at http://www.bls.census.gov/cps/tp/tp63.htm.

Effective with the release of July 2001 data, official labor force estimates from the CPS reflect the expansion of the monthly CPS sample from about 50,000 to about 60,000 eligible households. This expansion of the monthly CPS sample was one part of the Census Bureau's plan to meet the requirements of the State Children's Health Insurance Program (SCHIP) legislation. The SCHIP legislation requires the Census Bureau to improve state estimates of the number of children who live in low-income families and lack health insurance. These estimates are obtained from the Annual Social and Economic Supplement (ASEC) to the CPS. The ASEC reflects interviews based on a sample of about 100,000 households. The ASEC (formerly the March Supplement) now includes data from February, March, and April. In September 2000, the Census Bureau began expanding the monthly CPS sample in 31 states and the District of Columbia. States were

identified for sample supplementation based on the standard error of their March estimate of low-income children without health insurance.

Food security supplement. The food security supplement collects information on households' economic access to enough food, food spending, and use of Federal and community food assistance programs. The survey contains a systematic set of questions validated as measures of severity of food insecurity on both a 12month and a 30-day basis. Statistics presented in this report are based on 12-month data from the CPS food security supplements. The food security questions are based on material reported in prior research on hunger and food security and reflect the consensus of nearly 100 experts at the 1994 Food Security and Measurement Conference convened jointly by the National Center for Health Statistics and the Food and Nutrition Service of the U.S. Department of Agriculture. The supplement was developed, tested, and refined further by the conferees, members of a Federal interagency working group, and survey methods specialists for the U.S. Census Bureau's Center for Survey Methods Research. All households interviewed in the CPS in December are eligible for the supplement. Special supplement sample weights were computed to adjust for the demographic characteristics of supplement noninterviews.

Economic Research Service, Food Security Briefing Room: http://www.ers.usda.gov/briefing/foodsecurity/

Information about the CPS is available online at http://www.bls.census.gov/cps/cpsmain.htm.

Agency Contacts: For information on food security: Tracy Von Ins Food and Nutrition Service U.S. Department of Agriculture E-mail: Tracy.VonIns@fns.usda.gov

For information on family structure: Fertility and Family Statistics Branch U.S. Census Bureau Phone: (301) 763-2416

For information on secure parental employment, family income, and youth neither enrolled in school nor working:

Teri Morisi

Bureau of Labor Statistics Phone: (202) 691-6378

For information on poverty, family income, and access to health care:

HHES/Statistical Information Staff

U.S. Census Bureau Phone: (301) 763-3242 For information on higher education:

Tom Snyder

National Center for Education Statistics

Phone: (202) 502-7452 E-mail: Tom.Snyder@ed.gov

For information on difficulty speaking English:

Kelly Holder

U.S. Census Bureau Phone: (301) 763-2464

For information on high school completion:

Chris Chapman

National Center for Education Statistics

Phone: (202) 502-7414

E-mail: Chris.Chapman@ed.gov

For information on early childhood education:

Jerry West

National Center for Education Statistics

Phone: (202) 502-7335 E-mail: Jerry.West@ed.gov

Decennial Census Data

Every 10 years, beginning with the first census in 1790, the United States government conducts a census, or count, of the entire population as mandated by the U.S. Constitution. In 2000, as in several previous censuses, two forms were used—a short form and a long form. The short form was sent to every household; the long form, containing the 100 percent questions, plus the sample questions, was sent to approximately one in every six households.

The Census 2000 short form questionnaire included seven questions for each household: name, sex, age, relationship, Hispanic origin, race, and whether the housing unit was owned or rented. The long form asked more detailed information on subjects such as education, employment, income, ancestry, homeowner costs, units in a structure, number of rooms, plumbing facilities, etc. Decennial censuses not only count the population but also sample the socioeconomic status of the population, providing a tool for the government, educators, business owners, and others to get a snapshot of the state of the Nation. A more comprehensive description of Census 2000 is available at http://www.census.gov/mso/www/c2000basics.

While it is impossible to completely eliminate error from an operation as large and complex as the decennial census, the Census Bureau attempts to control the sources of such error during the data collection and processing operations. The primary sources of error and the programs instituted to control error in Census 2000 are described in detail in Summary File 1 Technical Documentation in Chapter 8, "Accuracy of the Data," located at http://www.census.gov/prod/cen2000/doc/sf1.pdf.

Agency Contacts:

For information on the indicators:

Tavia Simmons U.S. Census Bureau Phone: (301) 763-2416

For further information on the computation and use of standard errors:

Decennial Statistical Studies Division U.S. Census Bureau

Phone: (301) 763-4242

High School and Beyond

The High School and Beyond (HS&B) longitudinal survey was first administered in 1980 to a stratified, nationally representative sample of approximately 30,000 high school sophomores and 28,000 high school seniors from more than 1,000 high schools. Follow-up surveys were administered in 1982, 1984, 1986, and 1992. In-school waves (1980 and 1982) entailed the administration of a student questionnaire and a cognitive test battery. In the Base Year (1980), data were also collected from students' parents and school principals, while the teachers of sampled students were asked to complete a checklist on students' behavior and performance in class. As part of the First Follow-up, high school transcripts were collected for a probability subsample of nearly 18,500 members of the 1980 sophomore cohort. The sample design for the transcript study increased the representation of racial/ethnic minorities, private school students, dropouts, transfer students, early graduates, and students whose parents had previously completed a parent questionnaire. The mode of data collection for the out-of-school waves of the study was self-administered mail-back questionnaires in 1984 and 1986 and Computer Assisted Telephone Interviewing (CATI) in 1992. In addition, a postsecondary school transcript study was conducted for First and Second Follow-up senior cohort respondents and Third and Fourth Follow-up sophomore cohort respondents who reported attending postsecondary institutions in those waves of the study.

In this report, the analysis sample for the indicators that used HS&B high school transcript data consisted of all 1982 high school graduates with complete transcripts. Of the 15,941 students on the transcript file, 11,195 students were high school graduates with complete transcripts.

Information on the HS&B First Follow-up and the high school transcript study can be found in Jones, C., et al. (1983). *High School and Beyond, 1980 Sophomore Cohort, First Follow-up (1982), Data file user's manual.* Washington, DC: National Center for Education Statistics. Jones, C., et al. (1983). *High School and Beyond Transcript Survey*

(1982), Data file user's manual. Washington, DC: National Center for Education Statistics.

Information about HS&B is available online at http://nces.ed.gov/surveys/hsb/.

Agency Contact: Aurora D'Amico

National Center for Education Statistics

Phone: (202) 502-7334

E-mail: Aurora.D'Amico@ed.gov

Monitoring the Future

The Monitoring the Future (MTF) Study is a continuing series of surveys intended to assess the changing lifestyles, values, and preferences of American youth. Each year since 1975, high school seniors from a representative sample of public and private high schools have participated in this study. The 2004 survey is the 14th to include comparable samples of 8th- and 10th-graders in addition to seniors. The study is conducted by the University of Michigan's Institute for Social Research (ISR) under a grant from the National Institute on Drug Abuse. The survey design consists of a multi-stage random sample where the stages include selection of geographic areas, selection of one or more schools in each selected area, and selection of a sample of students within each school. Data are collected in the spring of each year using questionnaires administered in the classroom by representatives from ISR. The 2004 survey included 15,222 high school seniors from 128 schools, 16,839 10th-graders from 131 schools, and 17,413 8th-graders from 147 schools (a total of 49,474 students from 406 schools).

Information about MTF is available online at http://www.nida.nih.gov/DrugPages/MTF.html and http://monitoringthefuture.org/.

Agency Contact: Moira O'Brien National Institute on Drug Abuse Phone: (301) 443-6637

National Assessment of Educational Progress

The National Assessment of Educational Progress (NAEP) is mandated by Congress to monitor continuously the knowledge, skills, and performance of the Nation's children and youth. To measure trends in educational performance, NAEP has periodically assessed students in grades 4, 8, and 12 since 1990 in reading and mathematics, as well as in other subjects such as science, writing, and U.S. history. The assessments use the curriculum frameworks developed by the National Assessment Governing Board (NAGB)

and the latest advances in assessment methodology. The frameworks use standards developed within the field, using a consensus process involving educators, subject-matter experts, and other interested citizens.

The content and nature of the main NAEP evolves periodically to reflect changes in curriculum and instructional practices. NAEP includes students in public and nonpublic schools. A charter school could be sampled, since such schools are within the universe of public schools, but homeschoolers are not included. Before 2002, the NAEP national sample was an independently selected national sample. However, beginning in 2002, the NAEP national sample was obtained by aggregating the samples from each state. As a result, the size of the national sample increased in 2002, which means that smaller differences between estimates from different administrations and different types of students can now be found to be statistically significant than could be detected in assessment results reported before 2002.

Until 1996, NAEP assessments excluded certain subgroups of students identified as "special needs students," including students with disabilities and students with limited English proficiency. For the 1996 and 2000 mathematics assessments and the 1998 and 2000 reading assessments, NAEP included separate assessments with provisions for accommodating these students (e.g., extended time, small group testing, mathematics questions read aloud, and so on). For these years, results are reported for both the unaccommodated and accommodated assessments. After 2000, only a single accommodated assessment was administered.

NAEP has also conducted assessments in mathematics, reading, and science since the 1970s at ages 9, 13, and 17. These long-term assessments have not changed, providing a comparison over a long period of time, but they do not necessarily reflect current teaching standards or curricula.

Information about NAEP is available online at http://nces.ed.gov/nationsreportcard.

Agency Contact: Arnold Goldstein

National Center for Education Statistics

Phone: (202) 502-7344

E-mail: Arnold.Goldstein@ed.gov

National Assessment of Educational Progress High School Transcript Studies

Conducted in association with NAEP, the High School Transcript Study (HSTS) provides coursetaking and demographic information for a nationally representative, stratified sample of high school seniors. Sample sizes have ranged from approximately 21,000 to 25,000 students in approximately 300 schools. The HSTS provides the Department of Education and other education policymakers with information regarding current course offerings and coursetaking patterns in the Nation's secondary schools. In addition, it provides information on the relationship of student coursetaking patterns to achievement as measured by NAEP. Excluded students were those who did not graduate from high school, had not received a "regular" or "honors" diploma, or did not have complete transcript data. For all transcripts and samples, a course identification code number, based on the Classification of Secondary School Courses (CSSC), was assigned to each course taken by a student. Courses were further classified into subject (e.g., mathematics) and program (e.g., academic) areas using a 1998 revision of the CSSC [Bradby, D. and Hoachlander, E.G. (1999). 1998 Revision of the secondary school taxonomy. Washington, DC: National Center for Education Statistics]).

More information about the NAEP HSTS can be found in: U.S. Department of Education. National Center for Education Statistics. *The 1998 High School Transcript Study Tabulation: Comparative data on credits earned and demographics for 1998, 1994, 1990, 1987, and 1982 high school graduates,* (NCES 2001–498) by Stephen Roey, Nancy Caldwell, Keith Rust, Eyal Blumstein, Tom Krenzke, Stan Legum, Judy Kuhn, Mark Waksberg, and Jacqueline Haynes.

Information about the NAEP High School Transcript Study is available online at http://nces.ed.gov/nationsreportcard/hsts.

Agency Contact: Janis Brown

National Center for Education Statistics

Phone: (202) 502-7482 E-mail: Janis.Brown@ed.gov

National Crime Victimization Survey

The National Crime Victimization Survey (NCVS) is the Nation's primary source of information on criminal victimization. In earlier years, researchers obtained data from interviews with a nationally representative sample of roughly 49,000 households that included more than 100,000 persons ages 12 and older. In recent years, the sample size for the NCVS has been decreased. The sample for the most recent year, 2003, was 42,000 households and 75,000 persons ages 12 and older. All household members 12 and older in households chosen using a multistage stratified sample design are interviewed to obtain information on the frequency, characteristics, and consequences of criminal victimization in the United States.

The survey reports the likelihood of victimization by rape, sexual assault, robbery, assault, theft, household burglary, and motor vehicle theft for the population as a whole, as well as for segments of the population such as adolescents 12 or older and members of various racial and gender groups. Either in person or by telephone, victims are also asked whether they reported the incident to the police. In instances of personal violent crimes, they are asked about the characteristics of the perpetrator. The response rate for 2003 was 91.6 percent of eligible households and 86.3 percent of eligible individuals. The NCVS provides the largest national forum for victims to describe the impact of crime and their characteristics and those of violent offenders. It has been ongoing since 1973 and was redesigned in 1992.

Information about the NCVS is available online at http://www.ojp.usdoj.gov/bjs/cvict.htm#Programs.

Agency Contact: Michael Rand Bureau of Justice Statistics Phone: (202) 616-3494

National Education Longitudinal Study of 1988

The National Education Longitudinal Study of 1988 (NELS:88) is a longitudinal study of the 8th-grade class of 1988 sponsored by the National Center for Education Statistics (NCES). The Base Year survey was administered to about 24,000 8th-graders in more than 1,000 schools with an 8th-grade class. The First, Second, Third, and Fourth Follow-up surveys revisited the same sample of students in 1990, 1992, 1994, and 2000, when most of the 1988 8th-graders were in 10th grade, in 12th grade, and then 2 and 6 years out of high school. For each in-school follow-up, the student sample was "freshened" to obtain a representative cross-sectional sample of 10th graders (in 1990) and 12th graders (in 1992). In-school waves entailed the administration of a student questionnaire and a battery of cognitive tests in the subject areas of mathematics, English, science, and social studies/history. Students' teachers, principals, and parents were also surveyed. In addition, as part of the Second Follow-up, high school transcripts were collected for (1) all students attending a subset of Second Follow-up schools selected for the transcript study; (2) all dropouts and dropouts attending alternative programs who had attended high school for a minimum of one term; (3) all early graduates; and (4) sample members with disabilities that prevented them from completing a questionnaire and cognitive test battery in the Base Year, First Follow-up, and Second Follow-up. Transcripts were coded using

the Classification of Secondary School Courses as updated for the 1990 National Assessment of Educational Progress, High School Transcript Study. Students were subsequently surveyed in the Third and Fourth Follow-ups through Computer Assisted Telephone Interviewing (CATI).

In this report, the analysis sample for indicators that used NELS:88 transcript data consisted of all 1992 high school graduates with complete transcripts. Of the 17,285 students on the transcript file, 13,506 students were high school graduates with complete transcripts.

Information on the NELS:88 Second Follow-up Survey and the Transcript Study can be found in:

Ingels, S.J., Dowd, K.L., Baldridge, J.D., Stripe, J.L., Bartot, V.H., and Frankel, M.R. (1994). *National Education Longitudinal Study of 1988 Second Follow-up: Student component data file user's manual* (NCES 94-374). Washington, DC: National Center for Education Statistics.

Ingels, S.J., Dowd, K.L., Taylor, J.T., Bartot, V.H., Frankel, M.R., and Pulliam, P.A. (1995). *National Education Longitudinal Study of 1988 Second Follow-up: Transcript component data file user's manual.* Washington, DC: National Center for Education Statistics (NCES 95-377).

Information about NELS:88 is available online at http://nces.ed.gov/surveys/nels88/.

Agency Contact: Jeffrey Owings National Center for Education Statistics Phone: (202) 502-7423 E-mail: Jeffrey.Owings@ed.gov

National Health and Nutrition Examination Survey

The National Health and Nutrition Examination Survey (NHANES) is conducted by the National Center for Health Statistics of the Centers for Disease Control and Prevention. The survey is designed to assess the health and nutritional status of the noninstitutionalized civilian population through direct physical examinations and interviews, using a complex stratified, multistage, probability sampling design. Interviewers obtain information on personal and demographic characteristics, including age, household income, and race and ethnicity by self-reporting or as reported by an informant. The first survey, NHANES I, was conducted during the period 1971-1974; NHANES II covered the period 1976-1980; and NHANES III covered the period 1988-1994. Only NHANES III (in its first phase, conducted 1988-91), however, collected

data on serum cotinine levels. NHANES III provided cotinine data for children ages 4-17. Descriptions of the survey design, the methods used in estimation, and the general qualifications of the data are presented in:

Plan and operation of the Third National Health and Nutrition Examination Survey, 1988–94: Series 1: Programs and collection procedures, No. 32. Vital and Health Statistics, Hyattsville, MD: National Center for Health Statistics.

Starting in 1999, NHANES changed to a continuous survey visiting 15 U.S. locations per year and surveying and reporting for approximately 5,000 people annually. However, two or more years of data are necessary for adequate sample sizes for subgroup analyses.

NHANES 1999-2002 is a complex, multistage probability sample of the civilian noninstitutionalized population of the United States. Individuals of all ages were sampled. The NHANES 1999-2002 sample includes expanded samples of Mexican Americans, African Americans, adolescents 12 to 19 years, and adults 60 years and older. In 2000, the sample individual selection probabilities were modified to increase the number of sampled persons in low income, non-Hispanic White population domains. Additionally, screening and sampling rates were adjusted for women of childbearing age to increase the number of pregnant women included in the sample. Statistical weights were used to make the sample representative of the U.S. population. For more information on the NHANES data, see http://www.cdc.gov/nchs/data/nhanes/guidelines1.pdf.

NHANES data used to calculate the Healthy Eating Index. NHANES provides information on people's consumption of foods and nutrients, as well as extensive health-related data, and information about Americans' demographic and socioeconomic characteristics. NHANES data for 1999-2000—the most recent data available to compute this index were used to compute the Healthy Eating Index (HEI). Previous HEI reports were based on data from the Federal Government's Continuing Survey of Food Intakes by Individuals (CSFII).

The HEI was computed for all individuals 2 years and older, because dietary guidelines are applicable to people of these ages only. Pregnant women were excluded from this analysis because of their special dietary needs. The final analytical sample size was 8,070 people.

Information about NHANES is available online at http://www.cdc.gov/nchs/nhanes.htm.

Agency Contacts: For information on overweight: Cynthia Ogden National Center for Health Statistics

Phone: (301) 458-4405

For information on the Healthy Eating Index: Peter Basiotis

Center for Nutrition Policy and Promotion United States Department of Agriculture

Phone: (703) 305-7600

National Health Interview Survey

The National Health Interview Survey (NHIS) is a continuing nationwide sample survey of the noninstitutionalized civilian population in which data are collected during personal household interviews. Interviewers obtain information on personal and demographic characteristics, including race and ethnicity, by self-reporting or as reported by a member of the household. Investigators also collect data about illnesses, injuries, impairments, chronic conditions, activity limitation caused by chronic conditions, utilization of health services, and other health topics. Each year the survey is reviewed and special topics are added or deleted. For most health topics, the survey collects data over an entire year.

The NHIS sample includes an oversample of Black and Hispanic persons and is designed to allow the development of national estimates of health conditions, health service utilization, and health problems of the noninstitutionalized civilian population of the United States. The response rate for the ongoing part of the survey has been between 89 and 98 percent over the years. In 1997, the NHIS was redesigned; estimates beginning in 1997 are likely to vary slightly from those for previous years. Interviewers collected information for the basic questionnaire on 92,148 persons in 2003, including 12,249 children.

Descriptions of the survey design, the methods used in estimation, and the general qualifications of the data are presented in:

Massey, J.T., Moore, T.F., Parsons, V.L., and Tadros, W. (1989). Design and estimation for the National Health Interview Survey, 1985-1994. Vital and Health Statistics, 2(110). Hyattsville, MD: National Center for Health Statistics.

Botman, S.L., Moore, T.F., Moriarity, C.L., and Parsons, V.L. (2000). Design and estimation for the National Health Interview Survey, 1995–2004. Vital and Health Statistics, 2(130). Hyattsville, MD: National Center for Health Statistics.

Additional background and health data for children are available in Dey, A.N., Schiller, J.S., and Tai, D.A. (2004). Summary statistics for U.S. children: National Health Interview Survey, 2002. *Vital and Health Statistics*, 10(221). Hyattsville, MD: National Center for Health Statistics.

Information about NHIS is available online at http://www.cdc.gov/nchs/nhis.htm.

Agency Contact:

For information on activity limitations and general health status:

John Kiely

National Center for Health Statistics

Phone: (301) 458-4432

For information on usual source of health care:

Robin Cohen

National Center for Health Statistics

Phone: (301) 458-4152

For information on asthma: Lara Akinbami

National Center for Health Statistics

Phone: (301) 458-4306

National Household Education Survey

The National Household Education Surveys Program (NHES), conducted by the National Center for Education Statistics (NCES), collects detailed information about education issues through a household-based survey using telephone interviews. The sample for the NHES is drawn from the noninstitutionalized civilian population in households having a telephone in the 50 States and the District of Columbia. In each survey, between 44,000 and 60,000 households are screened to identify persons eligible for one of the topics. Generally, each collection covers two topical surveys, and researchers conduct between 2,500 and 25,000 interviews for each survey. The data are weighted to permit nationally representative estimates of the population of interest. In addition, the NHES design samples minorities at a higher rate than nonminorities to increase the reliability of estimates for these groups.

The 1991 NHES included a survey on early childhood program participation. Investigators screened approximately 60,000 households to identify a sample of about 14,000 children, ages 3–8. They interviewed parents in order to collect information about these children's educational activities and the role of the family in the children's learning. In 1993, NCES fielded a school readiness survey in which parents of approximately 11,000 children age 3 through second grade were asked about their children's experiences in early childhood programs, developmental level, school

adjustment and related problems, early primary school experiences, general health and nutrition status, home activities, and family characteristics, including family stability and economic risk factors. In 1995, NCES also fielded an early childhood program participation survey, similar to that of 1991. It entailed screening approximately 44,000 households and interviewing 14,000 parents of children from birth through 3rd grade. In 1996, NCES fielded a survey of parent and family involvement in education, interviewing nearly 21,000 parents of children from age 3 through 12th grade. About 8,000 youth in grades 6 through 12 were also interviewed about their community service and civic involvement. The 1999 NHES was designed to collect end-of-the-decade estimates of key indicators collected in previous NHES surveys and to collect data from children and their parents about plans for the child's education after high school. Interviews were conducted with 24,000 parents of children ranging from newborns through 12th-graders, approximately 8,000 students in grades 6 through 12 in the youth interview, and nearly 7,000 adults.

Three surveys were fielded as part of the 2001 NHES. The Early Childhood Program Participation survey was similar in content to the 1995 collection and collected data about the education of 7,000 prekindergarten children ranging in age from birth to 6. The Beforeand After-School Programs and Activities survey collected data about nonparental care arrangements and educational and noneducational activities in which children participate before and after school. Data were collected for approximately 10,000 kindergarteners through 8th-graders. The third survey fielded in 2001 was the Adult Education and Lifelong Learning survey, which gathered data about the formal and informal educational activities of 11,000 adults.

Information about the NHES is available online at http://nces.ed.gov/nhes.

Agency Contact: Chris Chapman

National Center for Education Statistics

Phone: (202) 502-7414

E-mail: Chris.Chapman@ed.gov

National Immunization Survey

The National Immunization Survey (NIS) is a continuing nationwide telephone sample survey of families with children ages 19 to 35 months. Estimates of vaccine-specific coverage are available for the Nation, the States, and 28 urban areas.

The NIS uses a two-stage sample design. First, a random-digit-dialing sample of telephone numbers is drawn. When households with age-eligible children

(19–35 months) are contacted, the interviewer collects information on the vaccinations received by all age eligible children. The interviewer also collects information on the vaccination providers. In the second phase, all vaccination providers are contacted by mail. Providers' responses are combined with information obtained from the households to render estimates of vaccination coverage levels more accurately. Final estimates are adjusted for noncoverage of households without telephones.

Information about the NIS is available online at http://www.cdc.gov/NIP/coverage.

Agency Contact: Larry Wilkinson

Centers for Disease Control and Prevention

Phone: (404) 639-6098

National Linked File of Live Births and Infant Deaths

The National Linked File of Live Births and Infant Deaths is a data file for research on infant mortality. Beginning with the 1995 data, this file is produced in two formats. The file is released first as a period data file and later as a cohort file. In the birth cohort format, it includes linked vital records for infants born in a given year who died in that calendar year or the next year, before their first birthday. In the period format, the numerator consists of all infant deaths occurring in one year, with deaths linked to the corresponding birth certificates from that year or the previous year. The linked file includes all the variables on the national natality file, as well as medical information reported for the same infant on the death record and the age of the infant at death. The use of linked files prevents discrepancies in the reporting of race between the birth and infant death certificates. Although discrepancies are rare for White and Black infants, they can be substantial for other races. National linked files are available starting with the birth cohort of 1983. No linked file was produced for the 1992 through 1994 data years. Match completeness for each of the birth cohort files is about 98 percent.

For more information, see:

Prager, K. (1994). Infant mortality by birthweight and other characteristics: United States, 1985 birth cohort. *Vital and Health Statistics*, 20(24). Hyattsville, MD: National Center for Health Statistics.

Mathews, T.J., Menacker F., and MacDorman, M.F. (2004). Infant mortality statistics from the 2002 period linked birth/infant death data set. *National Vital Statistics Reports*, *53*(10). Hyattsville, MD: National Center for Health Statistics.

Information about the National Linked File of Live Births and Infant Deaths is available online at http://www.cdc.gov/nchs/linked.htm.

Agency Contact:

For information on infant mortality:

T.J. Mathews

National Center for Health Statistics

Phone: (301) 458-4363

National Survey on Environmental Management of Asthma and Children's Exposure to Environmental Tobacco

In 2003, the U.S. Environmental Protection Agency's Office of Radiation and Indoor Air (ORIA) commissioned a commercial contractor, Abt Associates Incorporated, to conduct a survey on asthma and environmental tobacco smoke (ETS) issues. The survey was designed to assess knowledge regarding general and personal environmental asthma triggers; the extent to which individuals with asthma take measures to reduce exposure to indoor environmental asthma triggers; and the barriers to implementation, for adults with asthma or parents of children with asthma, which prevent improvement of the indoor environment. In addition, data were collected to provide information about children (under the age of 18), particularly those age 6 and under, exposed to environmental tobacco smoke in the home.

All interviews were conducted by telephone using a random digit dialing sampling methodology. A total of 14,685 households in the 50 States were contacted; of these, 2,504 interviews were conducted in households with children age 6 and under. To determine the exposure of children to ETS, a series of questions were administered in homes with children to determine whether residents and/or visitors smoked in the home, and if so, how often.

Information about environmental tobacco smoke issues is available online at www.epa.gov/iaq.

Agency Contact: Alison Freeman U.S. Environmental Protection Agency Phone: (202) 343-9455

National Vital Statistics System

Through the National Vital Statistics System, the National Center for Health Statistics (NCHS) collects and publishes data on births and deaths in the United States. NCHS obtains information on births and deaths from the registration offices of all States, New York City, and the District of Columbia.

Demographic information on birth certificates, such as race and ethnicity, is provided by the mother at the time of birth. Hospital records provide the base for information on birthweight, while funeral directors and family members provide demographic information on death certificates. Medical certification of cause of death is provided by a physician, medical examiner, or coroner.

Information on Hispanic origin. The number of States gathering information on births to parents of Hispanic origin has increased gradually since 1980-81, when 22 States included this information on birth certificates. By 1993, the Hispanic origin of the mother was reported on birth certificates in all 50 States and the District of Columbia. Similarly, mortality data by Hispanic origin of decedent have become more complete over time. In 1997, Hispanic origin was reported on death certificates in all 50 states and the District of Columbia.

Population denominators. The natality and mortality rates shown in this report for 1991-2003 have been revised, based on populations consistent with the census conducted on April 1, 2000. Prior to America's Children: Key National Indicators of Well-Being, 2003, rates were based on populations projected from the 1990 Census. The population estimates for 2000-2003 can be found on the Internet at:

http://www.cdc.gov/nchs/about/major/dvs/ popbridge/popbridge.htm. It was necessary to create population estimates for 2000-2003 that were consistent with the race categories used in the 1990 Census. The revised intercensal population estimates for 5-year age groups for 1991–99 can also be found on the Internet at:

http://www.cdc.gov/nchs/about/major/dvs/ popbridge/popbridge.htm.

Detailed information on the methodologies used to develop the revised populations, including the populations for birth rates for teenagers and birth rates for unmarried teenagers, is presented in several publications.

For more information about these methodologies, see:

Ventura, S.J., Hamilton, B.E., Sutton, P.D. (2003). Revised birth and fertility rates for the United States, 2000 and 2001. National Vital Statistics Reports, 51(4). Hyattsville, MD: National Center for Health Statistics.

Hamilton, B.E., Sutton, P.D., and Ventura, S.J. (2003). Revised birth and fertility rates for the 1990s: United States, and new rates for Hispanic populations, 2000 and 2001. National Vital Statistics Reports, 51(12) Hyattsville, MD: National Center for Health Statistics.

National Center for Health Statistics. (2002). Unpublished estimates of the April 1, 2000, United States population by age, sex, race, and Hispanic origin, prepared under a collaborative arrangement with the U.S. Census Bureau. Available at: http://www.cdc.gov/ nchs/about/major/dvs/popbridge/popbridge.htm

Ingram, D.D., Weed, J.A., Parker, J.D., Hamilton, B.E., Schenker, N., Arias, E., Madans, J. (2003). U.S. Census 2000 population with bridged race categories. National Center for Health Statistics. Vital Health Statistics, 2(135).

Anderson, R.N., Arias, E. (2003). The effect of revised populations on mortality statistics for the United States, 2000. National Vital Statistics Reports, 51(9) Hyattsville, MD: National Center for Health Statistics.

Preliminary data. NCHS continuously receives statistical records from the States' vital registration systems, providing preliminary data. Investigators weight individual records of births and deaths to independent counts of vital events registered in each State and reported to NCHS. These independent counts, aggregated for a 12-month period, serve as control totals and are the basis for the individual unit record weights in the preliminary file. For selected variables, unknown or not-stated values are imputed. The percentage not stated is generally 1 percent or less.

For more information on national natality and mortality data, see:

National Center for Health Statistics. (2001). Technical appendix. Vital Statistics of the United States, 1999, natality. Hyattsville, Maryland: National Center for Health Statistics. Available at: http://www.cdc.gov/nchs/data/techap99.pdf

National Center for Health Statistics. (2003). Technical appendix. Vital Statistics of the United States, 2002, natality. Hyattsville, Maryland: National Center for Health Statistics. Available at: http://www.cdc.gov/nchs/data/techap02.pdf

National Center for Health Statistics. (2004). Technical appendix. Vital Statistics of the United States, 1999, vol. II, mortality, part A. Hyattsville, Maryland: National Center for Health Statistics. Available at http://www.cdc.gov/nchs/data/statab/techap99.pdf

Information about the National Vital Statistics System is available online at http://www.cdc.gov/nchs/nvss.htm.

Agency Contacts:

For information on births to unmarried women, low birthweight, and adolescent births: Stephanie Ventura

National Center for Health Statistics

Phone: (301) 458-4547

For information on child mortality: Donna Hoyert

National Center for Health Statistics

Phone: (301) 458-4279

For more information on adolescent mortality: Manon Boudrealt

National Center for Health Statistics

Phone: (301) 458-4769

Population Estimates

Decennial Census data serve as benchmarks for deriving national population estimates, which are also based on data from the following agencies: births and deaths (National Center for Health Statistics); immigrants (Immigration and Naturalization Service); Armed Forces (U.S. Department of Defense); net movement between Puerto Rico and the U.S. mainland (Puerto Rico Planning Board); and federal employees abroad (Office of Personnel Management and U.S. Department of Defense). Similar data serve as the basis for State estimates, which are also derived from a variety of data series, including school statistics from State departments of education and parochial school systems.

Customarily, after the decennial population census, intercensal population estimates for the preceding decade are prepared to replace postcensal estimates for that decade.

Information about population estimates is available online at http://eire.census.gov/popest/estimates.php.

Agency Contact: Linda Mayberry U.S. Census Bureau Phone: (301) 763-6113

Population Projections

The population projections for the United States is provisional and takes into consideration the results of the 2000 Census. It is based on the 2000 Census, official postcensus estimates, as well as vital registration data from the National Center for Health Statistics. The assumptions are based on those used in 2000 with some adjustments for consistency with new information.

Assumptions are made about fertility, mortality, and international migration. The current assumptions are that:

■ Fertility will see little change over time, with levels for each racial/ethnic group converging to about 2.1 children per woman in the long run.

- Mortality will continue to improve, with life expectancy for each racial/ethnic group converging to about 90 years by 2100.
- Net international migration will fluctuate, with levels in 2100 becoming lower than those in 1999. In the long run, levels of in-migration for Hispanic and White populations will decrease, while Asian and African in-migration will increase.

For more information, go to http://www.census.gov/population/www/projections/natproj.html.

Agency Contact: Greg Spencer U.S. Census Bureau Phone: (301) 763-2428

Survey of Income and Program Participation

Core survey and topical modules. Implemented by the U.S. Census Bureau since 1984, the Survey of Income and Program Participation (SIPP) is a continuous series of national longitudinal panels, with a sample size ranging from approximately 14,000 to 36,700 interviewed households. The duration of each panel ranges from $2\frac{1}{2}$ years to 4 years, with household interviews every 4 months.

The SIPP collects detailed information on income, labor force participation, participation in government assistance programs, and general demographic characteristics to measure the effectiveness of existing government programs, estimate future costs and coverage of government programs, and provide statistics on the distribution of income in America. In addition, topical modules provide detailed information on a variety of subjects, including health insurance, child care, adult and child well-being, marital and fertility history, and education and training. The U.S. Census Bureau releases crosssectional, topical modules and longitudinal reports and data files. In 1996, the SIPP questionnaire was redesigned to include a new 4-year panel sample design and the computer-assisted personal interviewing method. The 2001 panel was a 3-year panel sample, and a new 2004 panel is currently in the field and is anticipated to cover a 4-year period.

Information about the SIPP is available online at http://www.sipp.census.gov/sipp.

Agency Contact: Judy Eargle U.S. Census Bureau Phone: (301) 763-5263

Uniform Crime Reports

The Federal Bureau of Investigation's (FBI's) Uniform Crime Reports (UCR) Program, which began in 1929, collects information on the following crimes reported to law enforcement authorities: homicide, forcible rape, robbery, aggravated assault, burglary, larcenytheft, motor vehicle theft, and arson. Arrests are reported for 21 additional crime categories. The UCR data are compiled from law enforcement reports or individual crime incident records transmitted directly to the FBI or to centralized State agencies that then report to the FBI. In 2003, law enforcement agencies active in the UCR Program represented approximately 291 million U.S. inhabitants—93 percent of the total population. The UCR Program provides counts of crimes reported to police for the Nation as a whole, as well as for regions, States, counties, cities, and towns.

In addition to collecting data on crime counts and trends, the FBI collects data on crimes cleared, persons arrested (age, gender, and race), law enforcement personnel, and the characteristics of homicides (including age, gender, and race of victims and offenders; victim-offender relationships; weapons used; and circumstances surrounding the homicides).

Information about the UCR is available online at http://www.fbi.gov/ucr/ucr.htm.

Agency Contact:
Uniform Crime Reports
Programs Support Section
Criminal Justice Information Services Division
Federal Bureau of Investigation
1000 Custer Hollow Road
Clarksburg, West Virginia 2630