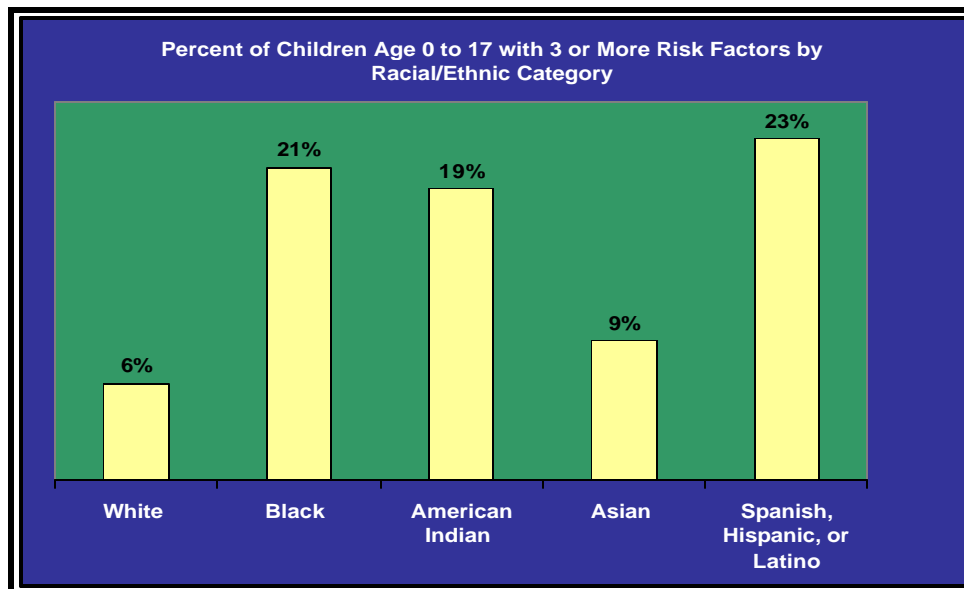


One in Ten Washington Children Experience Multiple Risks That Threaten Their Well-Being

In 2003, 35 percent of children in Washington lived in homes where no adult had year-round, full-time employment. Parental unemployment has been linked to increases in child abuse and neglect and decreases in parental warmth toward and involvement with their children. Compounded with other risks, this will heighten the probability that children will suffer social, medical, and academic setbacks.

In a recent analysis of risks to child and family well-being, Washington Kids Count (WKC) found that one-tenth of Washington children (145,000) experienced three or more risks, which may be enough to boost the danger of adverse outcomes. For African American, Native American, and Hispanic children, the stakes were even higher, with one in five children experiencing three or more risks.



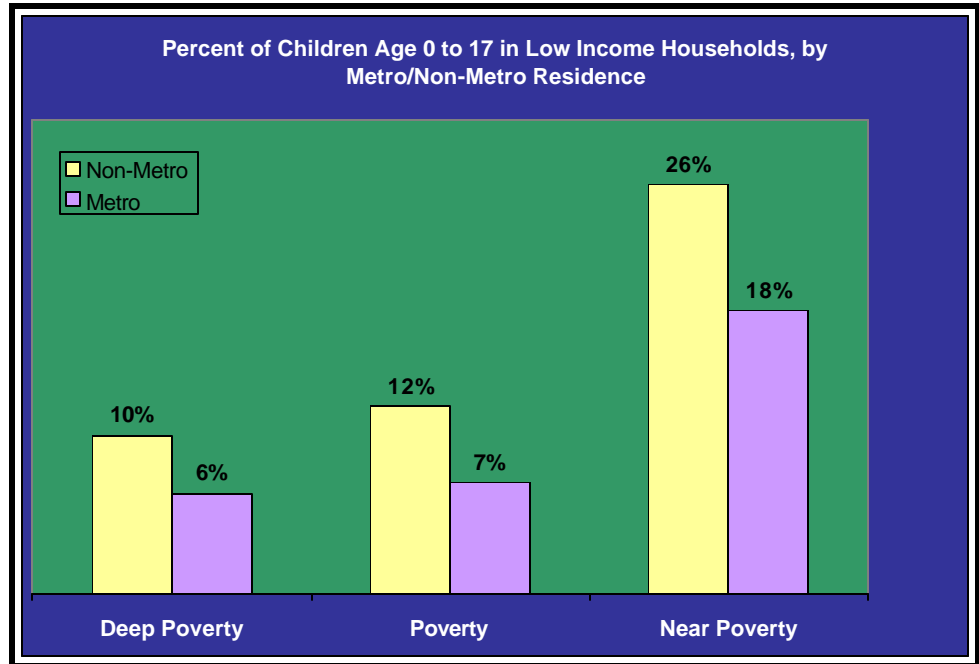
To obtain an adequate level of detail on risk factors and on the geographic distribution of those risks in Washington State, WKC analyzed two databases from the 2000 Census. The first analyses examined six key risk factors. In isolation, no single risk factor dooms a child to illness or failure; collectively, however, they can significantly impede a child's progress toward a healthy and successful future.

In 2000, about 1.5 million children age 0 to 17 lived in Washington State. Looking at the individual risks, WKC learned that:

- One-third of children 0 to 17 years old (512,000) *lived in low-income households.*
- One in five (339,000) Washington children had *no parent with full-time, year-round employment.*

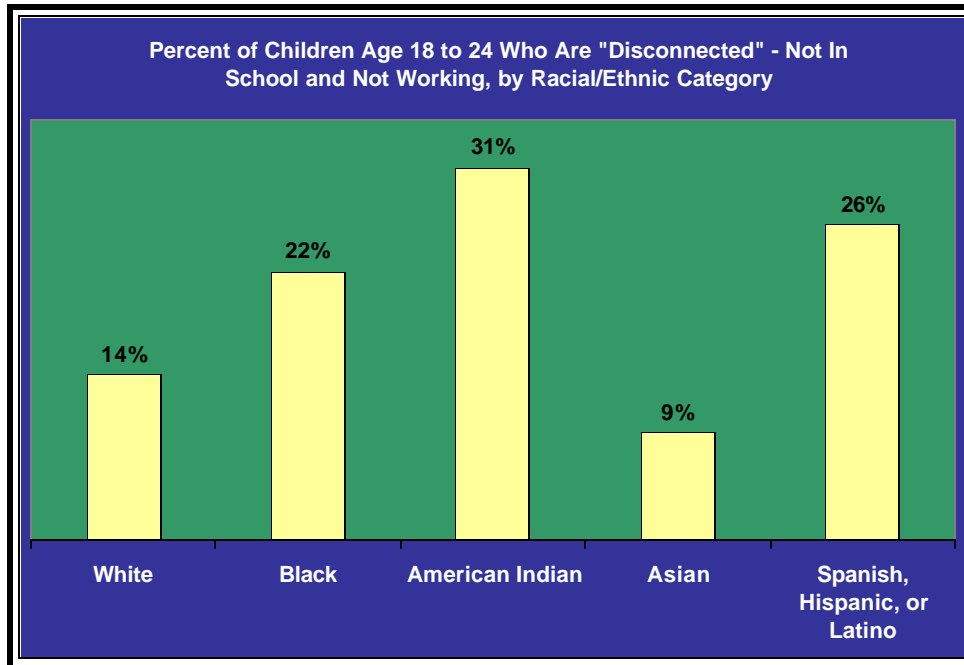
- For one in 16 children (91,000), *all parents had a disability affecting employment.*
- Twenty-nine percent of children (423,000) *lived in homes where neither parent or only one parent resided.*
- One in nine (146,000) children had a *mother with no high school degree.*
- Two percent of children (24,333) age 5 to 17 were *not fluent in English.*

Poverty is one of the most powerful predictors of future difficulties, including illness, academic failure, early pregnancy, and criminal behavior. Poverty rates in Washington varied by race/ethnicity, from a high of 64 percent of Hispanic children in low-income households to a low of 27 percent of white children in low-income households. Poverty rates also varied as a function of residence in urban or non-urban settings.



Parents with stable employment are better able to insulate their children from difficulties that threaten their future success. From 2000 to 2003, the percentage of children living in families in which no parent had full-time, year-round employment jumped from 20 percent to 35 percent, presumably reflecting the lingering effects of the turn-of-the century economic recession.

The recession may also have affected the extent to which young adults are “disconnected” – neither attending school nor employed, as 14 percent of youth age 18-21 (46,000) and 18 percent of youth age 22-24 (42,000) were disconnected during late adolescence/early adulthood, a crucial period for acquiring the skills and education for building a prosperous and healthy future. As shown below, the percentage of disconnected youth varies considerably by racial/ethnic group, from a low of 9 percent among Asian youth to a high of 31 percent among American Indians.

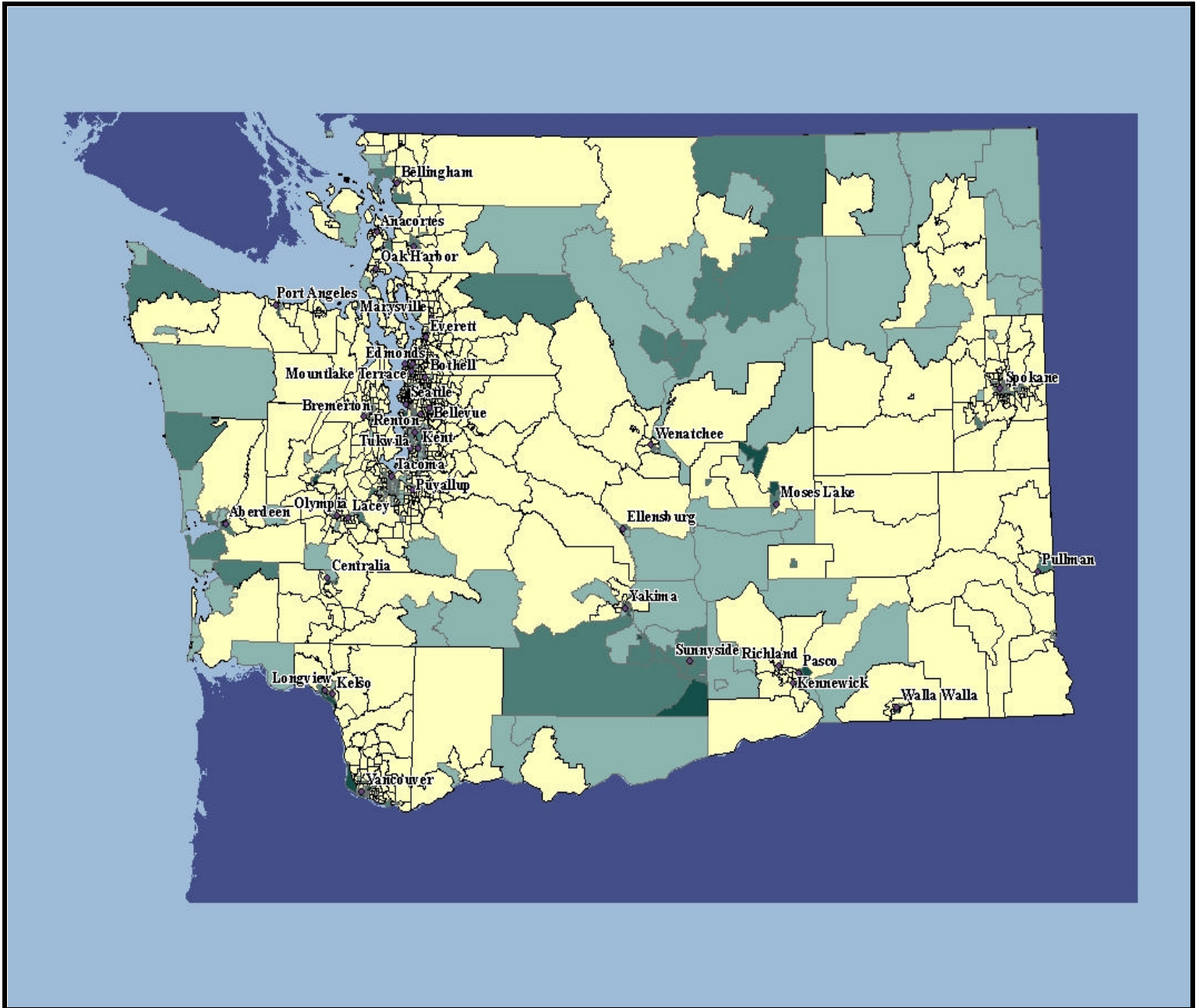


To identify areas throughout Washington State with the highest proportions of children at risk, WKC used Geographical Information System (GIS) technology to create “risk maps” of the state. Washington has 1,318 Census Tracts with between 2,500 and 8,000 residents. Within each tract, economic status and living conditions are fairly comparable. For risk mapping, WKC used four of the original six risk factors:

- Living in a household below poverty
- No parent(s) in the labor force
- Living in a single-parent household
- Child with limited English proficiency

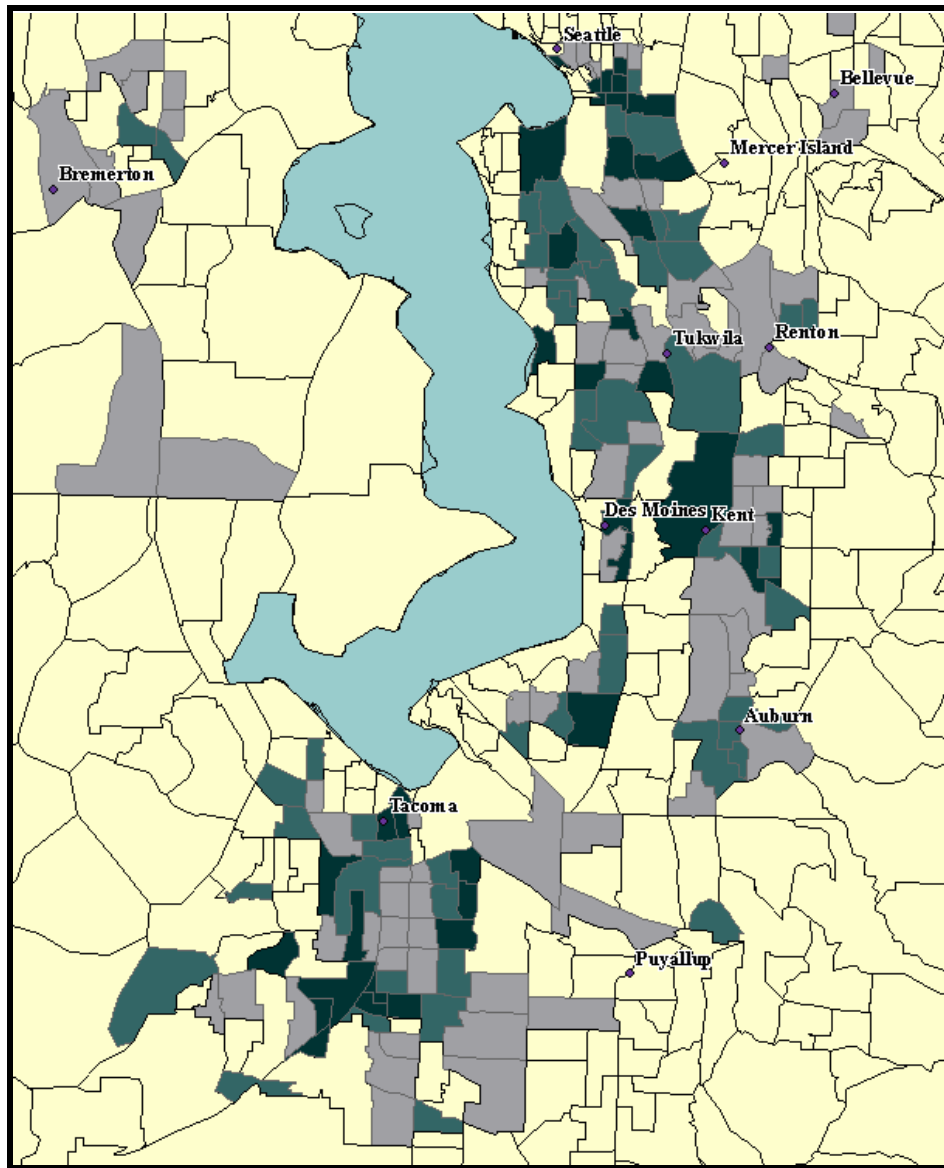
The advantage of mapping at the Census Tract level is the ability within a community to pinpoint the neighborhoods with high concentrations of risk – the ‘hot spots’ on which to focus intervention and assistance efforts – as well as other high-risk areas that could become hot spots in the near future. In western Washington, the areas of highest risk fell along the I-5 corridor. Across the rest of the state, high-risk areas were distributed among urban and rural locales. In the map below, the darkest areas depict Census Tracts with the greatest concentrations of risk. Sparsely populated parts of the state have physically large Census Tracts because a small number of people are spread out over a considerable geographic area, while densely populated urban areas have many small Census Tracts.

Areas with High Concentrations of At-Risk Youth in Washington

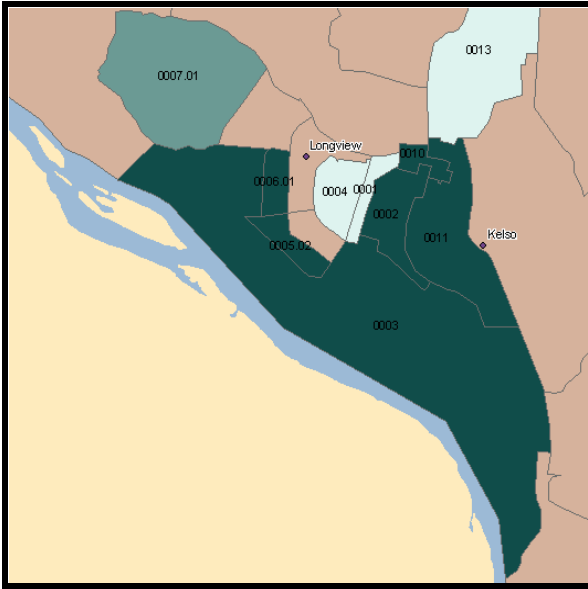


High Concentrations of At-Risk Youth in Western WA: I-5 Corridor

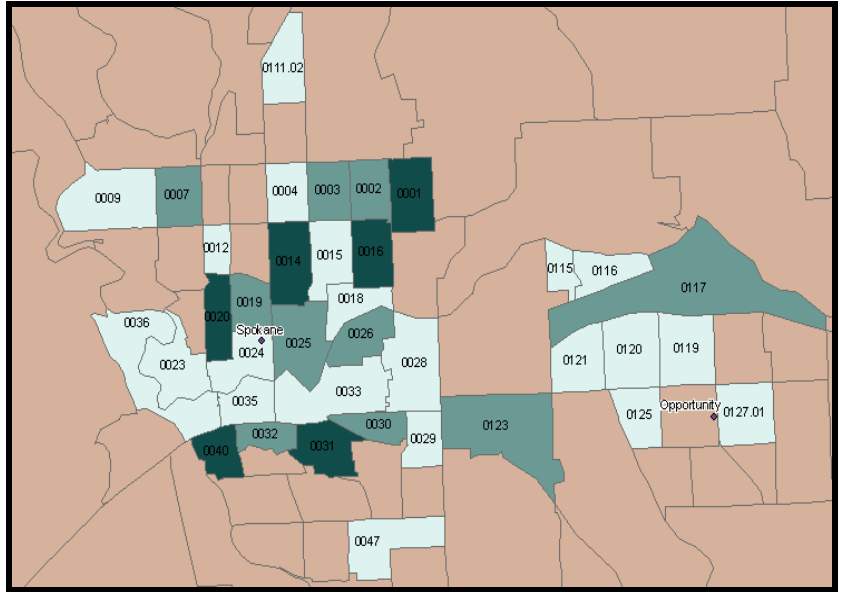
While the state map shows the general distribution of high-risk areas, detailed maps are potentially more useful for agencies and philanthropic organizations trying to decide how to allocate their resources.



In the detail maps below, the Census Tracts without numbers are those with the lowest concentrations of children with multiple risks. Among the numbered Census Tracts, darker areas depict greater concentrations of risk. Patterns of risk concentration vary considerably in different parts of the state. Longview/Kelso and Spokane were chosen to illustrate this variability. The map of the Longview/Kelso area in southwestern Washington (below) shows six contiguous but fairly low-density Census Tracts that have relatively high concentrations of children with multiple risks. In Spokane (below), however, the high-risk Census Tracts are densely populated and scattered among neighborhoods of moderate-, high-, and highest-risk Census Tracts.



Longview/Kelso



Spokane

Using GIS technology to map areas where risks for children are concentrated is a tool with great potential for policy. This tool enables philanthropists, funders, and policy makers to pinpoint geographic locales that have relatively high levels of need. The next step is to go into these higher-risk areas to identify the services and resources that can most effectively mitigate risks to children. Then delivery of appropriate services and resources can be targeted to locales where they will do the most good.

*Human Services Policy Center, Evans School of Public Affairs
 University of Washington
 1107 NE 45th Street, Suite 205
 Seattle, WA 98105-4631
 (206) 685-3135*

www.hspsc.org

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