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Texas Kids Count Partners
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Gulf Coast Community Services Association
Migrant Education Program, Region I Education Service Center
Methodist Health Care Ministries of South Texas
Neighborhood Centers, Inc.
David and Kristen Ridgway
Texas Juvenile Probation Commission
Texas Workforce Commission; Child Care/Work and Family Clearinghouse
United Ways of Texas

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About Texas Kids Count...

Texas Kids Count is a project of the Center for Public Policy Priorities with the University of Texas Center for Social Work Research as a research partner. The project is part of a nationwide effort to highlight the well-being of children in every state. As part of this ongoing effort to build a better understanding of the conditions facing all children in Texas, Texas Kids Count is building a comprehensive database of indicators of child well-being. The University of Texas is the repository of the database. The data are used to produce annual fact books and other analyses of the status of children in Texas.

Texas Kids Count has produced the following Fact books:

- The State of Texas Children (1994)

In addition to the Fact books, the Texas Kids Count Project produces special reports. Special reports include:

- Child Violent Death (1995)
- Hispanic Children in Texas (1995)
- African American Children in Texas (1997)

Measuring Up: The State of Texas Education
- Overview of Texas Education (1998)
- School Finance (1998)
- Student Assessment and Performance (1998)
- The Debate Over Dropouts: How Many are There? (1999)
- Early Childhood Education (1999)
- Parental Involvement in Education (1999)

For more information, please contact Pam Hormuth at (512) 320-0222 or hormuth@cppp.org

Texas Kids Count data and reports are also available through the Internet.

Please visit our web site: www.ccpp.org

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**SECTION III: STATE AND COUNTY FACT SHEETS**
**SECTION IV: COUNTY RATES AND RANKINGS**

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*Texas Kids Count*  The State of Texas Children: 2000
Foreword

The State of Texas Children: 2000 is part of a series produced by the Texas Kids Count project to report on the status of children and their families in Texas. Texas Kids Count reports are tools used by policymakers, service providers, and advocates to support positive programs and policies for children. Texas Kids Count is unique because it provides detailed profiles about the status of children for every county in the state. This information is used in planning for services and programs at the local level as well as the state level. Texas Kids Count is recognized by planners and policymakers across Texas as the best source of statistics on the well-being of children.

This Fact Book assesses indicators of child well-being. In most cases, 1998 information was the most recent available at the time this report was prepared. Statistics are presented about various education, health, economic, and social factors in an attempt to provide valuable information about the status of children in every county in the state. By tracking changes in benchmarks of child well-being over time, this Fact Book reveals trends that help us understand the ways our children’s lives are improving, but also gives insight into areas that need change. This report tracks changes over time in the following indicators:

- Percent of Low Birthweight Babies
- Infant Mortality Rate
- Percent of all Births to Single Teens
- Teen Violent Death Rate
- Percent of Mothers Receiving Little or No Prenatal Care
- Percent of Children in Poverty
- Child Death Rate
- Juvenile Violent Crime Arrest Rate
- Unemployment Rates
- Population Estimates

In addition to these indicators of child well-being, this Fact Book contains information about children using vital services provided to help children and families. These include:

- Children Enrolled in Medicaid
- Children in Families Receiving Food Stamps
- Children in Families Receiving TANF
- Children in State Subsidized Child Care
- Children in Public Pre-Kindergarten
- Confirmed Cases of Child Abuse
- Children in Foster Care

By reporting information for each county, this report provides those who work for children a better picture of the conditions faced by children in different regions of the state as well as what services they may be receiving. Also included in this report is the state’s ranking compared to other states in the nation and the District of Columbia (upper right hand corner of the key indicator pages). At the end of the report, each county is ranked among the 254 counties in the state (Appendix A). Rankings are based on 1998 data, and a ranking of 1 indicates that a county is the best in the state for that indicator. There are a number of illustrative line graphs in this report with columns for Texas rates over time. The grey area represents the national rates. The Texas rates are for the years noted while the national rates are from the Annie E. Casey Kids Count Data Book 1999. The national rates are based on three-year averages, while the Texas rates are for single years. The national rates were only available through 1996, while the Texas rates are given through 1998.

The following sections will look in more detail at each of the indicators of child well-being presented in this report. This overview is followed by a Key to County Fact Sheets, which gives information about how to read the state and county data profiles. Then, the section entitled Understanding the Data will provide more information about how the data were collected and how to interpret them. This is followed by definitions of the indicators and the sources of data (page 26). A table with the federal poverty guidelines is provided (page 28), followed by the Indicator Maps. Each indicator is plotted on a color map to show differences in the various regions of the state. These maps can be compared to the maps in previous Texas Kids Count Fact Books to determine how regions have changed over time. The
state and county profiles follow the maps, starting with the Texas page and followed by the county pages in alphabetical order.
Executive Summary

Texas Kids Count 2000 takes a close look at important changes in child well-being during the 1990s in an attempt to understand where we have been and where we are going in the next millennium. By analyzing key indicators of child well-being over time — economic security, health, education, and safety — this report paints a picture of how our children are doing and what needs to be done to improve their chances of growing up healthy and hopeful. Texas Kids Count’s ongoing research shows that Texas has improved in many of the indicators studied, yet in many areas we are still not ensuring the health and safety of our children.

Child Population Increase
Demographers project the Texas child population will grow 47 percent in the next 30 years. Texas will have more than 8.5 million children in 2030. Children are projected to become a smaller portion of the population — down from 28.6% in 1996 to 25.3% in 2030. However, any discussion of children’s issues in Texas takes place in the context of this large and growing child population, and has huge implications for our state.

Economic Status
The general economy is improving in Texas, but there has not been a significant decline in child poverty rates. The most recent county-level child poverty statistics available (1995) reveal that for the state as a whole, one in four children live in poverty. In addition, in 60 counties, at least one out of every three children lives in poverty and in 8 counties, more than half of all the children are living in poverty. In Starr County, along the Texas-Mexico border, 60 percent of all kids are poor. Out of the 254 counties in our state, 171 counties saw increases in poverty among children between 1993 and 1995, only 75 counties improved, and 8 stayed the same.

Services for Families
While some families are doing very well, many Texas families face circumstances that are too difficult to overcome on their own. Unfortunately, despite high poverty and need, many of those families who need assistance in Texas are not getting the help they need and are often entitled to. A good economy is part of the cause for caseload declines in public services. However, confusing eligibility and enrollment procedures and burdensome administrative requirements appear to be contributing to dramatic declines in many social services such as Medicaid, Food Stamps, and cash assistance (Temporary Assistance for Needy Families or TANF).

- Between 1994 and 1998, Texas children receiving Food Stamps dropped almost 1.3 million children in 1994 to only 912,995 in 1998. From 1996 to 1999, the percentage of poor children receiving Food Stamps dropped from 80 percent to 60 percent.
- In spite of the fact that Texas has the second highest rate of uninsured children, we lost 192,675 children from the Medicaid rolls between 1996 and 1998, a 15 percent decline. In 1998, there were 1.1 million children enrolled in the Medicaid program (18.5% of all Texas children).
- The TANF program provides cash assistance to low-income families. However, many families who need this assistance are not receiving it. Texas has seen a 47 percent decline in its TANF caseload between 1994 and 1998, a decline that is not fully explained by an improvement in the poverty rate. In 1994, 556,485 children (9.8%) lived in families receiving TANF. By 1998, the number of children receiving TANF had dropped to 313,132 (5.2%).
- More women are entering the workforce and placing their children in the care of others. Many cannot afford quality care on their own and must rely on subsidies. In 1998, 85,865 children received state subsidized child care in Texas — up substantially from 56,462 in 1994. While the rate of subsidized child care is increasing, waiting lists persist and many who need child care assistance are still not receiving it.
- In 1997-98, almost 122,000 children in Texas participated in public pre-kindergarten programs (18% of all 3 to 4-year-olds — up from 16.3% in 1993-4). Another 20,218 were in public early education programs (geared mostly toward migrant children).


**Health**

A child’s health is a good predictor of well-being and success in school. By tracking Texas’ progress in health benchmarks, we can measure progress toward the goal of achieving healthy children, children who are ready for school, children who succeed in school, and strong families.

- In 1998, 2,180 babies died before their first birthday, down from 2,290 deaths in 1994. While the infant mortality rate among African American babies is twice as high as Hispanic babies, the rate of improvement in African American infant mortality is also much greater.
- While child death rates are declining for children ages 1-14, more than a third of child deaths in 1998 were caused by preventable accidents. One in four child deaths were caused by motor vehicle accidents (255 deaths) and 25 children between 10 and 14 years committed suicide.
- More mothers are receiving prenatal care, thus improving their baby’s chances of thriving. However, of the 342,199 live births that occurred in 1998, 17,671 births were to women who received little or no prenatal care (5.2%).
- In spite of increased prenatal care, more babies were born with low birthweight. In 1994, 22,531 Texas babies (7 per 100 live births) were born with low birthweight. By 1998, the number had grown to 25,425 Texas babies. The rate has increased steadily since the late 1980s and current statistics show that 7.4 percent of all babies born in 1998 had low birthweight.
- Overall, the teen violent death rate is down in Texas. However, the teen violent death rate is improving for African American children (25% better between 1992 and 1998) and ‘Other’ race children (37% better), but is getting worse for Anglo (11% worse) and Hispanic children (16% worse). In 1998, 943 teens died by accident, suicide, or homicide in Texas.
- While the rate of births to teens under 18 years declined slightly, the rate of births to single teens increased. There were 21,752 births to teens 17 years and younger in 1998.
- The rate of births to single teens (13 to 19 years) is improving for African American children (5% better between 1994 and 1998) and ‘Other’ race children (8% better) but is getting worse for Anglo (11% worse) and Hispanic children (8% worse). Eleven out of 100 births to Texas women are to single teens between 13 and 19 years old.

**Child Protection and Safety**

There is no social indicator more indicative of the well-being of a community than the safety of its children. The prevention of harmful actions — both toward children and by children — is created by providing a stable, supportive environment. Recent legislation to increase funding for child protective services recognizes the importance of child safety. However, Texas must do much more to protect its children from the most devastating outcomes caused by violence.

- In 1998, nearly 8 out of 100 children (7.8%) were confirmed victims of child abuse or neglect (44,465 Texas children). While the incidence of confirmed child abuse decreased 43 percent between 1994 and 1997, the rate began to worsen in 1997 and increased 30 percent in one year between 1997 and 1998.
- Texas also saw a 71 percent increase in child abuse related deaths between 1997 and 1998. In 1998, 176 children in Texas died from confirmed abuse or neglect, up from 103 just one year earlier. In 1999, the number of child abuse related deaths dropped to 135.
- Investigations are not keeping pace with the large number of reports of child abuse and neglect. The rate of investigations of abuse and neglect is only about half the rate of reports of abuse received.
- The number of children in foster care in Texas has increased from 16,843 in 1994 to 17,573 in 1998. The portion of all children who are in foster care has remained the same at about 3 per 1000 children.
- While the teen violent crime arrest rate increased dramatically between 1985 and 1994, there were fewer arrests in 1996 than in 1994. In Texas, there were 6,338 arrests of juveniles between ages 10 and 17 for violent crimes in 1998 (down from 9,552 arrests in 1994).

Even though Texas has seen improvement in some areas, there is still a need for continued attention to the challenges faced by children, particularly low-income children and their families. Texas still ranks
among the worst in the nation on many indicators of child well-being. Many families face circumstances they cannot handle on their own, but too many families do not have access to services they need. Until we can improve the lives of all children, all Texans will continue to pay a high price in quality of life, cost of services, and lost potential.
Overview

Texas Kids Count 2000 takes a close look at important changes in child well-being during the 1990s in an attempt to understand where we have been and where we are going in the next millennium. By analyzing key indicators of child well-being over time — economic security, health, education, and safety — this report paints a picture of how our children are doing and what needs to be done to improve their chances of growing up healthy and hopeful.

This overview focuses on child poverty and includes a discussion of the services that are designed to help protect and assist children and families including: Medicaid, Temporary Assistance for Needy Families (TANF), Food Stamps, child care subsidies, and foster care. In the following pages, each of the Texas Kids Count indicators of child well-being — Low Birthweight Babies, Infant Mortality, Prenatal Care, Teen Births, Child Death, Teen Violent Death, Teen Violent Crime Arrests, and Child Abuse — are discussed.

Child Population is Growing Rapidly

In 1995, Texas replaced New York as the second most populous state, after California. Texas ranks second in the nation for the size of its child population (5.7 million children or 29 percent of the population). Demographers project the child population will grow 47 percent in the next 30 years and Texas will have more than 8.5 million children in 2030. Children are projected to become a smaller portion of the total population — down from 28.6% in 1996 to 25.3% in 2030.


<table>
<thead>
<tr>
<th></th>
<th>1994</th>
<th>1998</th>
<th>Percent Increase</th>
</tr>
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<tbody>
<tr>
<td>Anglo</td>
<td>2,622,768</td>
<td>2,715,262</td>
<td>3.4%</td>
</tr>
<tr>
<td>African American</td>
<td>695,590</td>
<td>718,485</td>
<td>3.2%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>1,864,995</td>
<td>2,111,960</td>
<td>11.7%</td>
</tr>
<tr>
<td>Other</td>
<td>124,856</td>
<td>146,515</td>
<td>14.8%</td>
</tr>
<tr>
<td>Total</td>
<td>5,308,209</td>
<td>5,692,222</td>
<td>6.7%</td>
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Source: Texas State Data Center, Texas A&M University.

Any discussion of children's issues must address the large population of children, which has huge implications for our state.

Child Poverty

Texas is experiencing an unprecedented economic boom with historically low unemployment rates. Texas ranks about average (25th in the nation) on per capita personal income, but Texas ranks 46th on children living in poverty. Only four states and the District of Columbia had higher poverty rates than Texas in 1996, the most recent year for which county-level data are available (New Mexico, Louisiana, Mississippi, West Virginia, and the District of Columbia).

Things have been looking very rosy for many Texans in recent years, but many low-income families continue to struggle to meet the basic needs of their families. While our personal income went up 15 percent between 1994 and 1998, the child poverty rate improved only slightly and is still among the highest in the nation. A shocking 1.47 million Texas children still live below the federal poverty line.
In some regions of the state, child poverty is pervasive. The most recent county-level child poverty statistics available (1995) reveal that in Texas, one in four children lived in poverty. In addition, in 60 counties, at least one out of every three children lives in poverty and in 8 counties, more than half of all the children are poor. In Starr County, along the Texas-Mexico border, 60 percent of all kids are poor. Many of these children grow up in conditions that rival those in less-developed countries. In all, out of the 254 counties in our state, 171 counties saw increases in poverty among children between 1993 and 1995, only 75 counties improved, and 8 stayed the same.

With so many children living in poverty, any discussion of their well-being must address, as a core issue, the inevitable consequences of living in poverty and near-poverty conditions. For example, many poor children lack access to adequate health care. It is estimated that one in four children in Texas do not have health insurance. One in four Texas children (25.4%) were uninsured in 1998, second only to Arizona (26.3%). Texas also ranks 48th in the nation for children without proper immunizations.

Poverty in childhood has long-lasting negative consequences for cognitive and social development and academic outcomes. Children growing up in families that are poor or near poor are more likely to:

- have no health insurance,
- lack full immunization,
- have health problems,
- go to school hungry and unprepared to learn,
- attend schools with inadequate resources and poor performance, and
- live in unsafe neighborhoods.

Teens living at or near poverty are more likely to:

- drop out of school,
- receive inadequate training to enter today’s more technical workplace,
- become teen parents,
- be unemployed or underemployed, and
- become the victims and/or perpetrators of criminal activities.

There are other effects of growing up in poverty that are more long-lasting and less visible. New research shows that children in poor Texas families are three times more likely to have significant behavioral and emotional problems. They are also three times as likely to have parents who report that they are often aggravated and twice as likely to report symptoms of poor mental health. Many families need support from the community to deal with the enormous stress caused by the challenges of poverty.

### Working but Poor

Parental employment does not necessarily protect children from poverty. In fact, the majority of poor families with children (80.8%) in Texas have one or more working family members. Even with at least one parent working full-time, many families in Texas are not able to make enough money to live above the poverty line. Despite popular myths to the contrary, research shows that most poor Texas families...
with children (72.2%) get a majority of their income from work rather than welfare. More Texas working poor families (52.4%) are headed by a married couple than in the nation as a whole.\textsuperscript{16}

The number of working poor families with children in Texas more than doubled from 198,000 in the late 1970s to 423,000 in the mid 1990s. In the mid 1990s, nearly a million children lived in working poor families in Texas.\textsuperscript{17} More than a third (37.1\%) of these families have a full-time year-round worker (compared to 25.8\% for the nation as a whole).\textsuperscript{18}

<table>
<thead>
<tr>
<th>Percent Poor Families with a Worker</th>
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<tr>
<td><strong>Texas</strong></td>
</tr>
<tr>
<td>U.S.</td>
</tr>
<tr>
<td>California</td>
</tr>
<tr>
<td>Florida</td>
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<tr>
<td>Pennsylvania</td>
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<td>New York</td>
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**The majority of poor families with children in Texas have one or more working family members.**

**Children living near poverty**

Research on working families with incomes just above the poverty line shows an increasing number of families in Texas who are working but near poor.\textsuperscript{19} In Texas, there are 663,000 families with children that are living just above the poverty line.\textsuperscript{20} That is, the income for a family of 3 is between $13,650 and $27,300 (or between 100\% and 200\% of poverty, measured in 1998 dollars). In Texas, practically all near-poor families with children have at least one working parent (97\%).\textsuperscript{21} Almost half a million near-poor Texas families with children — 70.8\% of the families in Texas with incomes between 100 percent and 200 percent of the poverty line, had a full-time, year-round working family member.\textsuperscript{22} More than one third (36\%) of children whose family income is below 200 percent of poverty are uninsured.\textsuperscript{23} Children living near the poverty line face many of the same risks that those in poverty face.

**Family structure is a leading predictor for child poverty.**

Single-parent households are more likely to live in poverty. In 1996, almost half the children living in female-headed families lived in poverty (48.7\%).\textsuperscript{24} Gender-based wage and employment sector differences are, to a great extent, responsible for the differences in the earning potential of female-headed versus male-headed households.\textsuperscript{25} Texas experienced a steady increase over the last decade in the rate of families with children headed by a single parent (from 18 percent in 1985 to 26 percent in 1996).
Helping Hands for Children

While some families are doing very well, many Texas families face circumstances that are too difficult to overcome on their own. They need help in making sure their kids have enough to eat and are safe both in school and at home. Parents sometimes lack important supports such as child care and health care. Unfortunately, many of those families who need assistance in Texas are not getting the help they need. This section describes benefits such as Food Stamps, Medicaid, Temporary Assistance for Needy Families (TANF), and child care subsidies, which are vital supplements to many families' incomes. An analysis of child protection and early childhood education programs follows.

Food Stamps

A recently released U.S. Department of Agriculture report on food insecurity in the United States found that 5 percent of all Texas households are suffering from hunger. An estimated 352,000 children under age 12 (one in ten) are hungry and approximately 1.1 million children are at risk of becoming hungry (one third of all Texas children). The federal Food Stamp Program is designed to help prevent hunger by providing nutrition assistance to all low-income people. A family is eligible if their gross income is at or below 130 percent of the federal poverty level or about $18,048 for a family of three.

From 1994 to 1999, participation by children in the Food Stamp program fell by 38 percent. Texas children receiving Food Stamps went from almost 1.3 million children in 1994 to only 912,995 in 1998. In 1999, the number of children receiving Food Stamps fell to 789,787. From 1996 to 1999, the percentage of poor children receiving Food Stamps dropped from 80 percent to 60 percent. The decline in Food Stamp participation cannot be fully accounted for by a decline in eligible families. The Texas Department of Human Services estimates that it serves only 30 percent of the eligible Food Stamp population. Declining rolls are as much a result of confusing eligibility requirements and excessive administrative requirements as they are proof of a booming economy or successful welfare reform initiatives.

Meanwhile food banks, food pantries, and soup kitchens are seeing an increasing number of families with children, many of whom are working but poor. Texas must take several steps to reverse these alarming trends in Food Stamp enrollment. First, the state should ensure that clients applying for Food Stamps or TANF understand the different rights and responsibilities associated with each benefit. Steps must also be taken to ensure that clients leaving the TANF program understand they may still be eligible for Food Stamps and Medicaid. Finally, Texas must ease administrative requirements to receive Food Stamps to make sure the program remains accessible to needy families.

Medicaid

Many Texas children need health care but are not receiving it because their families do not have health insurance and cannot afford medical care. Texas has the second highest percentage of uninsured children in the nation, with one out of four children without health insurance. Medicaid is a health insurance program, primarily for the poor, and is jointly funded by the state and federal governments. In spite of so many children without health insurance, we lost 192,675 children from the Medicaid rolls between 1996 and 1998, a 15 percent decline.

Confusing eligibility and enrollment procedures and burdensome administrative requirements have contributed to a dramatic drop in Medicaid enrollment.

Percent of Texas Children Enrolled in Medicaid, 1994-1998

<table>
<thead>
<tr>
<th>Year</th>
<th>Enrollment</th>
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<tbody>
<tr>
<td>1994</td>
<td>21.8%</td>
</tr>
<tr>
<td>1997</td>
<td>20.2%</td>
</tr>
<tr>
<td>1998</td>
<td>18.5%</td>
</tr>
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In 1998, there were 1.1 million children enrolled in the Medicaid program (18.5% of all Texas children). Since welfare reform became law in 1996, Texas has seen a significant drop in Medicaid enrollment. Traditionally, cash assistance has been linked administratively to Medicaid benefits. When families lost their welfare benefits, many of them stopped receiving Medicaid as well, despite federal requirements that state welfare reform programs not interfere with families' Medicaid benefits.

The Texas Health and Human Services Commission estimates that in 1998 there were 547,208 uninsured Texas children in families with below-poverty incomes, who were therefore potentially eligible for Medicaid but not receiving it. There is an urgent need to reform the Texas Medicaid system in order to simplify eligibility and enrollment procedures, to reduce confusion about eligibility requirements, and to simplify burdensome administrative requirements. These needed reforms, if put into place, will help ensure that low-income children receive needed health care.

**Temporary Assistance for Needy Families (TANF)**

The Temporary Assistance for Needy Families (TANF) program provides cash assistance to very poor families in Texas. The maximum benefit for a mother and two children (the typical case) is $201 per month. As with other states, Texas has experienced a dramatic decline in its TANF caseload in recent years. Between 1994 and 1998 the rate of children on TANF declined 47 percent. Children make up nearly four-fifths of all TANF recipients and their numbers declined from 556,485 in 1994 to 313,132 in 1998. While Texas' recent economic boom has made it easier for some families earn enough to forgo TANF assistance, the declines can not be fully explained by an improvement in the poverty rate, which only improved slightly over the same period.

More troubling is the probability that families who are still eligible are not receiving assistance due to confusion over changing policies and increased efforts to divert applicants from seeking assistance. In 1994, 34 of every 100 poor children in Texas received TANF assistance. By 1998 this number had dropped to 25 of every 100. The chart below compares the decline in child poverty to the declines in the percentage of children receiving TANF assistance.

**Percent Children in Poverty vs. Percent Receiving TANF in Texas 1992-1998**

While Texas child poverty rates have remained high, the number of people receiving TANF assistance has fallen.
Early Childhood Education

The earliest years of a child’s life are key to predicting ultimate success in school and life. Recent research findings pointing to the importance of the first three years in brain development have serious implications for education. These early learning experiences are crucial determining factors for emotional and intellectual development and will ultimately affect how well a child will perform in school.

A longitudinal study done by the University of North Carolina focuses on the effects of educational intervention in the lives of preschool-aged children from low-income families. Children from low-income families received full-time, high-quality educational intervention in a childcare setting from infancy through age 5. Children's progress was monitored over time with follow-up studies conducted at ages 12, 15, and 21. Children who participated in the early intervention program had higher cognitive test scores from the toddler years to age 21. Academic achievement in both reading and math was higher from the primary grades through young adulthood.

The kids who received the early education intervention were more likely to attend a four-year college and were older, on average, when their first child was born. Interestingly, the mothers whose children participated in the program achieved higher educational and employment status than mothers whose children were not in the program. These results were especially pronounced for teen mothers.

Because of the growing number of children being cared for out of the home and the importance of early childhood education, this section focuses on subsidized child care and pre-kindergarten programs as important early developmental supports.

For a more complete discussion of early childhood education, please see the Texas Kids Count report entitled Early Childhood Education, which is part of the series Measuring Up: The State of Texas Education.

State Subsidized Child Care

The number of children with working parents is growing. Nationwide, the proportion of children under 6 years with employed mothers was 7 percent in 1940, 43 percent in 1980, and 51 percent in 1990. The labor force participation rate for women between the ages of 25 and 54 (who have traditionally been the primary caregivers of young children) is projected to rise to 83 percent by the year 2005. This means that a growing number of children, even very young children, will be cared for by people other than their parents.

More women are entering the workforce and placing their children in the care of others. Many cannot afford quality care on their own and must rely on subsidies. In 1998, 85,865 children received state subsidized child care in Texas, up substantially from 56,462 in 1994. While the rate of subsidized child care is increasing, waiting lists persist and many who need child care assistance are still not receiving it.

More than half of children under age 5 in Texas with working moms are either cared for in child care centers (35%), family day homes (11%), or by nannies or babysitters (6%), according to the National Survey of American Families. In the advent of welfare reform, more mothers are entering the workforce and need quality care for their children while they work.

With so many children in child care, Texas should ensure that child care providers of all types (centers, family day homes, babysitters, parents, and relatives) are informed about quality care issues. Since so many children are spending many hours in child care centers and family day homes, quality assurances as well as higher pay for child care providers are essential.
Public Pre-Kindergarten
Public pre-kindergarten programs are available in public schools to children who are unable to speak and understand English, are disadvantaged, or homeless. Pre-kindergarten education can help reduce school failures for at-risk children, reduce the incidence of grade retention, increase intellectual performance of students, and result in fewer placements in special education. A school district may offer pre-kindergarten classes if the district identifies 15 or more eligible children who are at least three years of age.

In 1997-98, almost 122,000 children in Texas participated in public pre-kindergarten programs (18% of all 3- to 4 year-olds — up from 16.3% in 1993-94). Another 20,218 were in early public education programs (geared mostly toward migrant children). Head Start, a program that provides comprehensive services beginning in the pre-school years to low-income children, served an estimated 58,608 children in 1998. There are still many children who do not have access to early education, but would benefit from programs that help them enter school ready to learn. Universal early education would help ensure that all children enter school ready to learn.

Foster Care
The Texas Department of Protective and Regulatory Services (TDPRS) is responsible for investigating reports of child abuse or neglect and for determining if a child should be removed from the home and placed in substitute care. When children enter substitute care, they can either be placed with relatives, in foster homes, or in residential child care facilities until it is safe to return home.

Children who enter the foster care system are at “high risk for educational failure, unemployment, emotional disturbances, and other negative outcomes.” These children have been emotionally traumatized by abusive or neglectful families, and the trauma is often exacerbated when the child must be separated from the family and placed in foster care. Studies have shown that children in foster care are even less likely than other low-income youth to complete high school or hold jobs.

Texas ranks 46th among the states in the rate of children placed in foster care. Only four states report removing fewer children from their homes. While no one wants to take children from their home, sometimes it has to be done for their safety. However many of these children have faced traumatic experiences and the challenge for state policymakers is to ensure that those out-of-home placements provide the best supports necessary to help children succeed in life.

The number of children in foster care in Texas has increased from 16,843 in 1994 to 17,573 in 1998. The portion of all children who are in foster care has remained the same at about 3 per 1000 children. The rate of children in foster care will presumably increase in 1999 because the number of children who are removed from the home due to abuse and neglect has increased from 6,917 children in 1998 to 8,650 children in 1999. Increases in children in foster care are related to increased staffing in the agency charged with protecting children (see the section on Child Abuse and Neglect on page 22).

Texas Kids Count Indicators of Child Well-being
In the following pages, each of the Texas Kids Count indicators of child well-being — Low Birthweight Babies, Infant Mortality, Prenatal Care, Teen Births, Child Death, Teen Violent Death, Teen Violent Crime Arrests, and Child Abuse — are discussed. These indicators are important benchmarks of child well-being. By tracking Texas' progress in these benchmarks, we can measure progress toward the goal of achieving healthy children, children who are ready for school, children
who succeed in school, and strong families. These benchmarks are used as tools for planning, informing, accountability, and advocacy on behalf of children and families.

Percent of Low Birthweight Babies | 1996 National Ranking
--- | ---

In 1994, 22,531 Texas babies (7 per 100 live births) were born with low birthweight. By 1998, the number had grown to 25,425 Texas babies. The rate has increased steadily since the late 1980s, and current statistics show that 7.4 percent of all babies born in 1998 had low birthweight. Babies born weighing less than 2,500 grams (5 pounds, 9 ounces) are more than twice as likely to suffer severe developmental delay or congenital anomalies. They are also at greater risk of cerebral palsy, autism, mental retardation, and vision and hearing impairments. Low birthweight children tend to perform worse on assessments of language abilities, memory, attention, fine and gross motor coordination, perceptual-motor skills, and nonverbal reasoning and problem solving.

There are several factors that can lead to low birthweight babies including: inadequate prenatal care, mother's smoking and other substance abuse, nutritional deficits, and environmental influences. One possible explanation for the increase in low birthweight babies is the use of fertility drugs, which has become more common in recent years and which can increase the likelihood of multiple births. A common effect of multiple births is an increased chance of low birthweight.

Between 1985 and 1998, Texas experienced an overall increase in the rate of low birthweight babies. The increase in the rate of low birthweight babies is twice as much for African American babies (19% increase between 1992 and 1998) as for Hispanic babies (9.8% increase). The rate of increase for low birthweight Anglo babies is 15.5 percent. However, in spite of the fact that the overall rate for Texas increased, many counties (82 counties) experienced an improvement (decrease) in the rate of low birthweight babies between 1997 and 1998.

<table>
<thead>
<tr>
<th>Percent of Low Birthweight Babies</th>
<th>Selected County Rates</th>
</tr>
</thead>
</table>
Even though more mothers are receiving prenatal care, the rate of babies born with low birthweight is steadily increasing. One explanation is an increase in multiple births.
Prenatal care refers to the health care and education women receive during pregnancy, labor, and delivery. Mothers who do not receive adequate prenatal care during their pregnancies are at increased risk of having problems during their pregnancies, and their babies are more likely to have serious health problems. For instance, the probability of infant death increases by at least 10 percent when prenatal care is not received until the third trimester. The costs of preventing these potentially serious health problems for babies through quality prenatal care is much lower than the costs associated with treating these health problems once they occur.

Prenatal care is not only a valuable source of health care and information about pregnancy and parenting for new parents, it can also serve as a link to other valuable social services. Studies have indicated that women who receive prenatal care are more likely to seek preventive care for their infants, including immunizations.

A higher percentage of women received early prenatal care in 1998 than in 1994. In 1998, most women in Texas report starting prenatal care during the first trimester of pregnancy (79.3%, up from 75.5% in 1994). However, of the 342,199 live births that occurred in 1998, 17,671 births were to women who received little or no prenatal care (5.2%).

The rate of women receiving little or no prenatal care is improving most for African American (50% between 1992 and 1998) and the ‘Other’ race children (46%); however, all ethnic groups experienced similar levels of improvement during this period.

Selected County Rates

<table>
<thead>
<tr>
<th>County</th>
<th>1998 Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bexar</td>
<td>2.6%</td>
</tr>
<tr>
<td>Harris</td>
<td>3.6%</td>
</tr>
<tr>
<td>Travis</td>
<td>4.2%</td>
</tr>
<tr>
<td>Dallas</td>
<td>4.2%</td>
</tr>
<tr>
<td>Texas</td>
<td>5.2%</td>
</tr>
<tr>
<td>Tarrant</td>
<td>6.2%</td>
</tr>
<tr>
<td>El Paso</td>
<td>12.2%</td>
</tr>
</tbody>
</table>

More mothers are receiving prenatal care, thus improving their babies’ chances of prospering.
Infant Mortality Rate

Infant mortality is closely associated with factors such as poverty, inadequate prenatal care, and early and frequent childbearing. Adequate nutrition and good medical care are associated with decreases in infant mortality. Infant death rates are also positively affected by advances in neonatal technology and improved public education.

While the infant mortality rate in Texas declined steadily between 1985 and 1996, we have begun to see a small increase since 1996. This increase could be related to the increasing number of low birthweight babies and, while not yet a significant increase, should be carefully monitored.

In 1998, 2,180 babies died before their first birthday, down from 2,290 deaths in 1994. In 1998, the infant mortality rate was 6.4 per 1,000 live births for all Texas infants. The rate of infant death is twice as high among African American babies (11.6 per 1,000 births) as it is for Anglo (5.6) or Hispanic babies (5.9).

The infant mortality rate is improving most for Anglo children (20% better between 1992 and 1998) and African American children (18% better) and less improvement is found for Hispanic children (11% better).

Between 1985 and 1998, 141 Texas counties showed improvements in infant mortality rates. While infant mortality rates show a positive trend at the state level, a closer look at individual counties reveals that 66 Texas counties had worse infant mortality rates in 1998 than in 1985.

<table>
<thead>
<tr>
<th>County</th>
<th>1998 Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travis</td>
<td>5.5</td>
</tr>
<tr>
<td>El Paso</td>
<td>6.0</td>
</tr>
<tr>
<td>Harris</td>
<td>6.2</td>
</tr>
<tr>
<td>Dallas</td>
<td>6.3</td>
</tr>
<tr>
<td>Texas</td>
<td>6.4</td>
</tr>
<tr>
<td>Bexar</td>
<td>6.7</td>
</tr>
<tr>
<td>Tarrant</td>
<td>7.0</td>
</tr>
</tbody>
</table>
Texas has seen a consistent improvement (decrease) in the rate of deaths for children ages 1-14 years (from 36.9 in 1985 to 24.1 in 1998). There were 1,073 child deaths in 1998, of which more than one-third were caused by preventable accidents. One in four child deaths were caused by motor vehicle accidents (255 deaths). Other leading causes of death for this age group were malignant neoplasms or tumors (115 deaths), and homicide (63 deaths). There were also 25 suicides in the 10-to-14-year age range.

The child death rate is improving most for Hispanic children (28% better between 1992 and 1998) and 'Other' race children (44% better) and less so for African American children (12% better). Between 1985 and 1998, the child death rates improved in 121 Texas counties, but worsened or stayed the same in 133 counties. In 1998, more than 41 percent of all counties had worse child death rates than the state as a whole (106 counties).

Much more should be done to identify children who are at risk of hurting themselves or others. By providing services to children with mental health problems early, we can prevent these tragic deaths.

### Selected County Rates

<table>
<thead>
<tr>
<th>County</th>
<th>1998 Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tarrant</td>
<td>18.3</td>
</tr>
<tr>
<td>Bexar</td>
<td>18.4</td>
</tr>
<tr>
<td>Harris</td>
<td>21.1</td>
</tr>
<tr>
<td>El Paso</td>
<td>21.7</td>
</tr>
<tr>
<td>Dallas</td>
<td>22.1</td>
</tr>
<tr>
<td>Texas</td>
<td>24.1</td>
</tr>
<tr>
<td>Travis</td>
<td>25.3</td>
</tr>
</tbody>
</table>

### Leading Causes of Death, Ages 1-14

<table>
<thead>
<tr>
<th></th>
<th>1994</th>
<th>1998</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Boys</td>
<td>Girls</td>
</tr>
<tr>
<td>Accidents</td>
<td>307</td>
<td>165</td>
</tr>
<tr>
<td>Malignant</td>
<td>89</td>
<td>66</td>
</tr>
<tr>
<td>Neoplasms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homicide</td>
<td>51</td>
<td>38</td>
</tr>
<tr>
<td>Congenital</td>
<td>37</td>
<td>33</td>
</tr>
<tr>
<td>Anomalies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Suicides</td>
<td>26</td>
<td>8</td>
</tr>
<tr>
<td>Diseases of the Heart</td>
<td>23</td>
<td>28</td>
</tr>
</tbody>
</table>


While child death rates are declining for children ages 1-14, more than a third of child deaths in 1998 were caused by preventable accidents.
Between 1985 and 1997, Texas experienced a consistent improvement in the rate of violent deaths (by accident, homicide, and suicide) among teens, ages 15 to 19. However, the rate of teens dying violently increased 18 percent between 1997 and 1998 (from 66.4 per 100,000 teens to 78.2). Between 1994 and 1998, the number of accidents increased for this age group (from 515 to 610). However, both homicides and suicides decreased (see table of Deaths by Selected Causes below).

In 114 Texas counties, teen violent death rates increased between 1985 and 1998. However, more than half of all counties (140) had the same or experienced decreases in the teen violent death rates. In 1998, 150 counties had teen violent death rates that were worse than the state as a whole.

Overall, the teen violent death rate is down in Texas. However, the teen violent death rate is improving for African American children (25% better between 1992 and 1998) and 'Other' race children (37% better), but is getting worse for Anglo (11% worse) and Hispanic children (16% worse).

The teen violent death rate has declined consistently since 1985. Between 1994 and 1998, the number of accidents increased for this age group. However, both homicides and suicides decreased.
Texas has begun to see declines in the numbers of births to teens. There were 21,752 births to teens under the age of 17 years in 1998. Twenty-one children under age 13 had babies in Texas during the same year. The teen birth rate for all girls in Texas aged 17 and under has improved since 1994 (from 6.9 percent in 1994 to 6.4 percent in 1998).

Poverty is one predictor of teen births, and early childbearing creates serious risks for both mother and child. The risk of an infant dying in the first year of life is greater for the children of teen mothers. Children of teen mothers exhibit more behavioral problems such as hyperactivity and poor impulse control. Adolescent mothers often do not have the parenting skills necessary to raise a small child, particularly if that child has health or behavioral problems. Teen mothers are more likely to abuse their children than older parents.

The table below gives the number of births to teens under age 18 as well as the number and percent of those births that are to unmarried teens. There was a 7 percent increase in the percent of births to single teens in the under-18 age group between 1994 and 1998.
Percent Births to Single Teens (13-19 years)

In 1994, one in ten births was to a single teen between ages 13 and 19 (33,371 births). By 1998, Texas single teens between 13 and 19 had 37,711 babies (11% of all births). The rate of births to single teens is improving for African American children (5% better between 1994 and 1998) and ‘Other’ race teens (8% better) but is increasing for Anglo (11% worse) and Hispanic children (8% worse).

<table>
<thead>
<tr>
<th>County</th>
<th>1998 Percent Births to Single Teens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travis</td>
<td>9.5%</td>
</tr>
<tr>
<td>Harris</td>
<td>10.1%</td>
</tr>
<tr>
<td>Tarrant</td>
<td>10.2%</td>
</tr>
<tr>
<td>Bexar</td>
<td>10.9%</td>
</tr>
<tr>
<td>Texas</td>
<td>11.0%</td>
</tr>
<tr>
<td>Dallas</td>
<td>12.3%</td>
</tr>
<tr>
<td>El Paso</td>
<td>13.2%</td>
</tr>
</tbody>
</table>

While overall, births to teens are declining in Texas, the percent of all births that are to teens who are unmarried is increasing.

In the 13 to 19 year old age group, 16 percent of all teens had babies in 1998. Because this group includes 18 and 19 year olds, the percent of teens having babies is considerably higher. The risks to babies born to these young mothers is still greater than those experienced by older mothers.

<table>
<thead>
<tr>
<th>County</th>
<th>1998 Percent for all 13-19 yr olds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travis</td>
<td>13.1%</td>
</tr>
<tr>
<td>Tarrant</td>
<td>13.5%</td>
</tr>
<tr>
<td>Harris</td>
<td>14.1%</td>
</tr>
<tr>
<td>Dallas</td>
<td>15.4%</td>
</tr>
<tr>
<td>Texas</td>
<td>16.1%</td>
</tr>
<tr>
<td>El Paso</td>
<td>16.7%</td>
</tr>
<tr>
<td>Bexar</td>
<td>16.8%</td>
</tr>
</tbody>
</table>
The rate of juvenile violent crime arrests almost tripled between 1985 and 1994, with Texas' rates paralleling those at the national level. However, since 1994, the arrest rate has begun to decline. For this study, violent crimes included murder, manslaughter, rape, robbery, and aggravated assault. In Texas, 6,338 juveniles between 10 and 17 were arrested for violent crimes in 1998 (down from 9,552 arrests in 1994). In addition, children under age 10 were arrested for 1 murder, 3 forcible rapes, 1 robbery, and 31 aggravated assaults.

The number of juveniles arrested for violent crimes went up between 1985 and 1994. However, since 1994, the arrest rates have begun to decline.

In addition to those juveniles arrested for serious violent crimes, many more were referred to the Texas Juvenile Probation Commission for a variety of criminal activities. Children who end up in the juvenile justice system have often been the victims of abuse. Of the 84,854 juveniles referred to juvenile probation departments in 1994, 14,496 were reported to have exhibited symptoms of sexual abuse, 15,874 had been physically abused, and 37,391 showed signs of emotional abuse. More should be done to identify and serve young people who have experienced these traumatizing abuses.

### Selected County Rates

<table>
<thead>
<tr>
<th>County</th>
<th>1998 Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bexar</td>
<td>83.8</td>
</tr>
<tr>
<td>Harris</td>
<td>225.9</td>
</tr>
<tr>
<td>Texas</td>
<td>265.3</td>
</tr>
<tr>
<td>Travis</td>
<td>344.5</td>
</tr>
<tr>
<td>Tarrant</td>
<td>363.1</td>
</tr>
<tr>
<td>Dallas</td>
<td>373.9</td>
</tr>
<tr>
<td>El Paso</td>
<td>503.9</td>
</tr>
</tbody>
</table>

### Violent Crime Arrests, 10-17 yr. olds

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Murder</td>
<td>178</td>
<td>445</td>
<td>237</td>
<td>105</td>
</tr>
<tr>
<td>Manslaughter</td>
<td>12</td>
<td>23</td>
<td>13</td>
<td>15</td>
</tr>
<tr>
<td>Rape</td>
<td>258</td>
<td>409</td>
<td>482</td>
<td>451</td>
</tr>
<tr>
<td>Robbery</td>
<td>1,289</td>
<td>3,414</td>
<td>2,514</td>
<td>1,850</td>
</tr>
<tr>
<td>Aggravated Assault</td>
<td>1,808</td>
<td>5,261</td>
<td>4,577</td>
<td>3,917</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>3,545</strong></td>
<td><strong>9,552</strong></td>
<td><strong>7,823</strong></td>
<td><strong>6,338</strong></td>
</tr>
</tbody>
</table>

Source: Texas Department of Public Safety
In 1998, 7.8 per 1,000 children were confirmed victims of child abuse or neglect (44,465 Texas children). While the incidence of confirmed child abuse decreased 43 percent between 1994 and 1997, the rate began to worsen in 1997 and increased 30 percent in one year between 1997 and 1998. Texas also saw a 71 percent increase in child abuse related deaths during the same year between 1997 and 1998. In 1998, 176 children in Texas died from confirmed abuse or neglect, up from 103 just one year earlier. In 1999, the number of child abuse related deaths dropped to 135 deaths.

The graphic below shows that the rate of investigations is about half the rate of reports of abuse and neglect. In order to better protect children, a much larger portion of reports should be investigated.

Before the 1999 legislative session, Travis County District Judge Scott McCown submitted a petition to the legislature appealing for increased spending for child protection. As a result of his work and the support of many advocates for children, budget writers expanded child protective services by $68 million, which should enable the Texas Department of Protective and Regulatory Services to add 160 new caseworkers and drop the cases per worker from 24.5 in 1999 to 21.1 in 2000. An emergency spending bill also added 220 CPS staff. The increase in child protection staff should improve our ability to investigate more reports of abuse and neglect, thereby improving children's safety. With more investigations being performed, more children and families will be provided with services needed to prevent abuse and neglect. However, these services are expensive, and more funding appropriations may be necessary to do a better job.

Selected County Rates

<table>
<thead>
<tr>
<th>County</th>
<th>1998 Rate (per 1,000 children)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harris</td>
<td>6.3</td>
</tr>
<tr>
<td>Tarrant</td>
<td>6.7</td>
</tr>
<tr>
<td>El Paso</td>
<td>6.9</td>
</tr>
<tr>
<td>Texas</td>
<td>7.8</td>
</tr>
<tr>
<td>Dallas</td>
<td>7.9</td>
</tr>
<tr>
<td>Bexar</td>
<td>8.1</td>
</tr>
<tr>
<td>Travis</td>
<td>8.5</td>
</tr>
</tbody>
</table>
Conclusion

This report examines Texas' progress toward specific economic, social, and quality-of-life goals using benchmarks of child well-being. By tracking changes in benchmarks of child well-being over time, this Fact Book reveals trends that help us understand the ways our children's lives are improving, but also gives insight into areas that need change.

Texas state and local governments and advocacy groups use this benchmark information to track the well-being of children and families locally to guide planning and resource allocation. A results-based accountability system would be the first step in improving results for children and families. Communities should create strategies that focus on the prevention of the harmful consequences of poverty and poor health by improving family functioning and economic status. The ultimate goal is that no child lives in poverty, all children are healthy and start school ready to learn, and families provide a stable supportive environment for children.

An analysis of key indicators reveals that in many ways, the status of children has improved in Texas. Texas is still not doing enough to take care of its children. While Texas is improving in some areas, we still rank among the worst in the nation if several key areas including:

- Children without health insurance 49th
- Children without proper immunization 48th
- Teen Births 48th
- Child Poverty 46th

Texas also ranks among the worst in the amount of money it spends on programs and services for children and families. Texas ranks among the worst in the nation (rank=44) on state and local per capita expenditures overall. Preventive measures are the most cost-effective way to help children and families. Ironically, Texas ranks best in the nation (rank=1) on the percentage change in the number of prisoners between 1990 and 1998. If Texas had placed more emphasis on preventing bad outcomes for children, we might not have so many prisoners.

It costs more than $40,000 a year to incarcerate a juvenile, but it costs next to nothing to mentor one. Effective services for children who need them early in life will increase the likelihood that they are successful in school and work. Increased spending for programs that lead to school readiness, healthy children, and stable, nurturing families can prevent astronomical future costs for special education, health care, hospitalization, foster care, crime prevention, and prisons. While these programs are vitally important to the children they serve, they also bring lasting returns to Texas over the long run.

While the need for these helping services is great, many children who are eligible for them do not receive them. Even when families are eligible for benefits such as Medicaid, Food Stamps, TANF, and child care subsidies, they may not be aware that they can receive them or they may not be able to jump the required administrative hurdles to get them. Texas needs to do a better job at reaching out to families in need and helping them get the help they can and should receive.

Community members can play an important role in improving the lives of children. Here are some things individuals can do to improve the lives of children:

- Look around you and notice what problems exist in your own neighborhood.
- Raise children's issues in your place of worship.
- Communicate with public officials about the importance of these issues.
- Find out who is helping kids in your community and work with those existing networks.
- Ask the librarian to pull together a study session.
- Start a youth council to hear the opinions of young people.

Children deserve high levels of love and support from family members but also from the community. They should feel safe at home and at school. As we enter the new millennium, we should all work together as a community to improve the lives of all Texas children.
Key to County Fact Sheets

This table shows the number and percent of children by age and ethnic group.

The map of Texas has the location of the county in black.

The county and state poverty and unemployment rates are given here.

The bar chart shows the percent change between the first year for which data were available (in most cases 1994 and 1998 for each indicator). The bar goes to the left of center, the rate has declined. If the bar is to the right of center, the county rate has increased. Both increases and decreases can be interpreted as improvement, depending on the indicator.

Footnotes:
(1) Hispanic can be of any race.
(2) Unemployment rates are for January 1998.
(3) Percent change is calculated in most cases between 1994 and 1998.
(4) Years shown for Pre-Kindergarten are for school years 1993-94, 1996-97, and 1997-98.

These indicators report the county rates for 1994, 1997, and 1998 as well as the state rate for 1998. The rates are expressed as either percentages or rates.

These indicators report the county rates for 1994, 1997, and 1998 as well as the state rate for 1998. The rates are expressed as either percentages or rates.
Understanding the Data

The county pages of this fact book report data for 1994, 1997, and 1998. School data (Children in Public Pre-Kindergarten) reported are for the school years 1993-94, 1996-97, and 1997-98. At the top of each county page are the number and percent of children by age and ethnic group in 1998. The bar graph on the right side of the page shows the percent change between the first year and the last year of information reported. In most cases this was the percent change between 1994 and 1998.

'Percentage' versus 'Rate'

The indicators reported here are a mixture of ‘percentages’ and ‘rates.’ Percentages reflect the proportion of the children in a particular county that have a certain characteristic (per 100 children). For instance, the percent of children in poverty reflects the proportion of children in each county whose family income is below the federal poverty guidelines.

Those indicators that present ‘rates’ do so in relation to a constant denominator. In the case of the Infant Mortality Rate, the rates indicate the number of babies per 1,000 live births who died before their first birthday. Data from counties with small populations must be used with caution since small fluctuations in the data can cause large differences in the calculated rates.

State rankings

The state’s ranking compared to the other states in the nation and the District of Columbia (upper right hand corner of the page. Unless otherwise noted, the state rankings are from the Annie E. Casey Kids Count Data Book 1999.

County rankings

Appendix A provides ranking information for each county and region of the state. While these charts rank every county from highest to lowest on each indicator, caution must be used with this information. Texas has 254 counties with great variations in demographic characteristics. Data from counties with small populations must be used with caution since small fluctuations in the data can cause large differences in the calculated rates, which affect the rankings. Thus, the reader is asked to view the ranking charts with caution.

Caution to Small Counties

Several counties in Texas have very small child populations. Reporting percentages and rates becomes problematic for these counties. Small counties can see large changes in rates with only small changes in the actual numbers of children affected. For example: a county with 450 children ages 10-17 can have a violent crime arrest rate of 0 per 100,000 teens (if no teens were arrested). The following year the rate can jump to 216 per 100,000 teens if only one teen is arrested for a violent crime. Thus, caution is urged in interpreting changes if the county has a relatively small number of children.
**Indicator Definitions and Sources**

**Population Estimates:** Estimates of the population by age, sex, and ethnicity for July 1, 1998  
**Source:** The Texas State Data Center, The State Population Estimates and Projections Program, Texas A&M University System

**Percent Children (ages 0-17) in Poverty, 1995,** is the estimate of children ages 0-17 living below the poverty line in 1995. These estimates are now being revised every other year.  
**Source:** U.S. Census Bureau, Small Area Income and Poverty Estimates Program

**Percent Change Over Time Analysis** between the two comparison years was calculated by subtracting the newest year rate from the first year rate available, multiplying by 100 and then dividing by the first year rate. For example, if the Low Birthweight rate for a particular county was 6.3 in 1985 and 6.6 in 1994, the percent change was calculated:

\[(6.6 - 6.3) \times 100 / 6.3 = 4.8\%\]

If the rate in the first year was zero, no percent change was calculated. If the rate in both years was zero, no percent change was calculated.

**Percent Low Birthweight Babies** is the percentage of live births weighing under 2,500 grams (5.5 pounds). **Source:** Texas Department of Health, Bureau of Vital Statistics.

**Percent Mothers Receiving Little or No Prenatal Care** is the percentage of births where the mother began receiving prenatal care starting in the third trimester of pregnancy or not at all. **Source:** Texas Department of Health, Bureau of Vital Statistics.

**Infant Mortality Rate** (per 1,000 live births) is the number of deaths occurring to infants under 1 year of age per 1,000 live births. **Source:** Texas Department of Health, Bureau of Vital Statistics.

**Child Death Rate**, Ages 1-14 (per 100,000 children) is the number of deaths from all causes to children between the ages 1 and 14, per 100,000 children in this age range. **Source:** Texas Department of Health, Bureau of Vital Statistics.

**Percent of all Births to Teens** is the percentage of live births to mothers (15-17 years of age). **Source:** Texas Department of Health, Bureau of Vital Statistics

**Percent of all Births to Single Teens** is the percentage of live births to mothers (13-19 years of age) considered to be 'single' by the Texas Department of Health. In 1985, a mother was asked if she was married or not. If yes, then information about the fathers' was included on the birth certificate and the mother was considered 'married.' If the mother answered that she was not married, then the father's information was automatically excluded from the birth certificate and the mother was considered 'single.' In 1989, a looser interpretation of 'married' was adopted. Father's information was included if the father signed the birth certificate, signed a paternity statement, or was married to the mother. Under this interpretation, more birth certificates included the father's information and thus more mothers were considered 'married.' In Texas, between 1989 and 1994, if the father's information (name) is on the birth certificate, the parents were considered married. If the father's information is not on the birth certificate, they were not considered married. In 1994, a question was added to the birth certificate specifically asking for the marital status of the mother. An increase in the number of 'single' mothers is partially attributed to the fact that more accurate information about marital status is now being collected. **Source:** Texas Department of Health, Bureau of Vital Statistics
Juvenile Violent Crime Arrest Rate, Ages 10-17 (per 100,000 youths) is the number of arrests of persons between 10 and 17 years for violent offenses (murder, manslaughter, forcible rape, robbery, and aggravated assault).
Source: Texas Department of Public Safety.

Teen Violent Death Rate, Ages 15-19 (per 100,000 teens) is the number of deaths by homicide, suicide, and accidents to teens between the ages of 15 and 19, per 100,000 teens in this age group.

Unemployment Rates are annual unemployment rates using labor force data based on place of residence.
Source: Texas Workforce Commission.

Percent of Children in Foster Care is based on the annual number of children in foster care according to the annual Legislative Data book.
Source: Texas Department of Protective and Regulatory Services.

Confirmed Victims of Child Abuse data are from the Legislative Data Book produced by Texas Department of Protective and Regulatory Services, using population estimates from the Texas State Data Center to calculate the rates.
Source: Texas Department of Protective and Regulatory Services.

Children in Public Pre-Kindergarten. Source: Texas Education Agency.


Children Receiving TANF (Temporary Assistance to Needy Families) formerly AFDC (Aid to Families with Dependent Children). Source: Texas Department of Human Services.

Children in Families Receiving Food Stamps. Source: Texas Department of Human Services.

Children Enrolled in Medicaid. Source: Texas Department of Health. Note: Comparisons between years can be problematic because of changes in eligibility criteria.
Federal Poverty Guidelines

The federal poverty income guidelines are issued annually by the Department of Health and Human Services. Central to the guidelines is the “Thrifty food plan,” the least costly of four nutritionally adequate food plans designed by the Department of Agriculture. It was determined from the Department of Agriculture’s 1955 survey of food consumption that families spent approximately one-third of their income on food. Each year the “Thrifty food plan” is tripled to set the poverty level for families, based on the assumption that a family earning at least three times the Thrifty food plan should have sufficient income. There are critics who believe that the poverty guidelines are inadequate measures of poverty, because spending patterns have changed substantially since the 1950s and 1960s, when the guidelines were developed. However, these guidelines continue to be the ruler by which this country measures poverty among its citizens. The poverty guidelines are also the basis of eligibility determination for a number of public assistance programs that serve children and their families.

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<tr>
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<tr>
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Endnotes

1 The state rankings are from the Annie E. Casey Kids Count Data Book 1999, unless otherwise noted.
2 The same scales were used for these maps as those used in earlier Fact Books so comparisons could be made over time. As a result some maps (e.g. Children receiving TANF) have rate categories with no counties represented in 1998.
3 American Demographics, January 1996.
5 Data provided by the Texas State Data Center, Texas A&M University, February 2000.
7 Texas Kids Count uses 1995 poverty estimates from U.S. Census Bureau, Small Area Income and Poverty Estimates Program because it provides county-level statistics on poverty.
8 Texas Kids Count uses poverty estimates from U.S. Census Bureau, Small Area Income and Poverty Estimates Program because it provides county-level statistics on poverty. More recent state level poverty estimates are available through the Current Population Survey (CPS) of the Census Bureau. CPS estimates that 22 percent of Texas children are living in poverty.
9 Bureau of Economic Analysis, U.S. Department of Commerce.
10 U.S. Census Bureau, Table D96-00 Estimated Number and Percent People Under Age 18 in Poverty by State: US 1996.
15 Working but Poor. Center for Public Policy Priorities. 1999
16 Working but Poor. Center for Public Policy Priorities. 1999
17 Center on Budget and Policy Priorities. The Poverty Despite Work Handbook, April, 1999
20 Working but Poor. Center for Public Policy Priorities. 1999
21 Working but Poor. Center for Public Policy Priorities. 1999
31 Center for Public Policy Priorities analysis of THHSC Caseload data.
32 Request for Exclusive Provider Plans (EPP) Coverage for the CHIP, Appendix D, Estimated Number of Uninsured Texas Children.
35 The Carolina Abecedarian Project. The University of North Carolina at Chapel Hill. [link]
37 Ibid.
39 Texas Education Agency.

CQ’s State Fact Finder 2000; Rankings across America. Congressional Quarterly Press, 2000


All national rankings in the upper right hand corner of this report are from the Annie E. Casey Kids Count Databook 1999.


Texas Department of Health, Bureau of Vital Statistics.


U.S. Census Bureau, Small Area Income and Poverty Estimates Program, 1995
