

EVERY KID COUNTS

in the District of Columbia

9th ANNUAL FACT BOOK 2002



The D.C. KIDS COUNT Collaborative for Children and Families is a unique alliance of public and private organizations using research to support advocacy for change in human, social, and economic policies and practices of government, the private sector, individuals, families, neighborhoods, and communities. Its mission is to advocate for the interests and well-being of children and families and to ensure their healthy development and future in the District of Columbia. An organizing goal of the Collaborative is to build a strong and serious child and family support movement in the Nation's Capital.

Since the formation in 1990 of the Collaborative's predecessor organization, the Coalition for Children and Families, over 80 individuals and organizations representing a broad and diverse group of advocates, service providers, government policy makers, universities, fraternal and volunteer organizations, and local citizens have been a part of the group.

The Collaborative supports a comprehensive approach to community building, but focuses its research and advocacy efforts on economic security, family attachment and community support, health, safety and personal security, and education.

D.C. KIDS COUNT Collaborative consists of:

D.C. Children's Trust Fund for the Prevention of Child Abuse

Overall fiscal and management responsibility

Data collection, analysis and evaluation

Production of publications

Partner Agencies*

Child and Family Services Agency

Children's National Medical Center

Council of Latino Agencies

DC Action for Children

DC Campaign to Prevent Teen Pregnancy

DC Children and Youth Investment Trust Corporation

D.C. Mayor's Office of Asian & Pacific Islander Affairs

D.C. Public Library

DC VOICE

George Washington University

Prevent Child Abuse of Metropolitan Washington

The Urban Institute, D.C. Data Warehouse

For more information about our partner agencies, please visit www.dckidscount.org.

*The views and opinions expressed in this report do not necessarily reflect the official position of the partner agencies, their boards, or their funders.

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We appreciate your comments!

Every KID COUNTS in the District of Columbia: 9th Annual Fact Book 2002 Survey

Please help us provide a high quality Fact Book that meets your needs for information on the status of children in the District of Columbia. Complete the following User Survey and mail or fax it back to us at: D.C. CHILDREN'S TRUST FUND, 2021 L Street, NW, Suite 205, Washington, DC 20036; 202-624-0396 (fax), 202-624-5555 (phone).

1. Which of the following best describes your line of work?

- Education
- Research
- Private Business
- Elected Official
- Non-Profit Organization
- Government Agency
- Media
- Other
- Health Care

2. Which of the following best describes your job duties?

- Administrator
- Service Provider
- Marketing/Public Relations
- Elected Official
- Researcher/Analyst
- Reporter
- Educator/Trainer
- Other

3. How are you planning to use the 2002 Fact Book?

(check all that apply)

- Research
- Program Development
- Advocacy
- Policy/Planning Development
- Grant Writing
- Articles/Public Education
- Needs Assessment/Resource Allocation
- General Information
- Other

4. How often do you plan to use the 2002 Fact Book?

- Daily
- Occasionally
- Weekly
- Once
- Monthly

5. Please rate the usefulness of the following aspects of the 2002 Fact Book on a scale from 1 to 5.

(1=Excellent, 2=Very Good, 3=Good, 4=Fair, 5=Poor)

Format of the 2002 Fact Book

1 2 3 4 5

Selected Indicators

1 2 3 4 5

Ward Charts

1 2 3 4 5

Neighborhood Charts/Maps

1 2 3 4 5

Data Definitions and Sources

1 2 3 4 5

6. What topics or information would you like to see included in future Fact Books?

(Please be as specific as possible.)

Thank you for your valuable feedback!

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9th ANNUAL FACT BOOK 2002



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D.C. CHILDREN'S TRUST FUND

A Resource for Strengthening Families and Protecting Children

CFC # 7068

Dear Colleague:

We are pleased to provide the *9th Annual Every KID COUNTS in the District of Columbia Fact Book, 2002*. The Fact Book is the leading comprehensive data source for indicators of child well being in the District, providing up-to-date accurate information by ward and region in the areas of general population trends, economic security, family attachment and community support, homeless children and families, child health, safety and personal security, and education. The *Every KID COUNTS in the District of Columbia Fact Book* continues to reflect the input of an expanded number of partners and contributors. Many thanks to our new and on-going partners and contributors for their hard and diligent work to get the issue published.

This year, due to our new partnership with the Urban Institute's D.C. Data Warehouse, we have been able to expand the information we report in the Fact Book to include selected indicators and maps by neighborhood cluster. Data from the greater Washington D.C. region, including the Maryland and Virginia suburbs as well as the City of Baltimore, has been added to address how the District is faring on child well-being indicators in comparison to neighboring jurisdictions. We are most grateful to the D.C. Office of Early Childhood Development for helping us to include childcare data for the first time.

Readers are reminded that, due to significantly more local resources, the data contained in this Fact Book is more comprehensive than the data presented in the 2002 National KIDS COUNT Data Book, which was released in May by the Annie E. Casey Foundation. Improvements in some of the indicators of child well being that were not captured in the national book are in this book. We urge you to examine the data and recommendations, and use them to support and guide your efforts to improve conditions for children and families in the District of Columbia.

The D.C. KIDS COUNT Collaborative continues to strive to include relevant and expanded data in each year's Fact Book to meet the data needs of a wider and more inclusive audience of service providers, policy makers, scholars, and D.C. residents. We ask that you share with us ways in which you use or have used the Fact Book to enhance your work on behalf of children and families by completing and returning the enclosed survey (see page 1). Your feedback will greatly assist us in our efforts to provide you with a high quality fact book year after year which meets your needs for information on the status of D.C.'s children. To submit additional comments, to order more copies of the Fact Book, or to inquire about joining the D.C. KIDS COUNT Collaborative, please contact Ms. Sonali Patel, Director of Public Policy, at (202) 624-5555 or spatel@dcctf.org.

You may also visit D.C. KIDS COUNT on the Internet at www.dckidscount.org. The entire contents of the Fact Book as well as other KIDS COUNT related information are available on our website.

Publication of this book was made possible through a generous grant from the Annie E. Casey Foundation and Community Based Family Resource and Support funds, which are awarded by the Office of Child Abuse and Neglect. We thank them for their ongoing support of this effort.

Sincerely,

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PURPOSE OF THE FACT BOOK

This fact book is the ninth annual report produced by the D.C. KIDS COUNT Collaborative on the lives of children and their families in the District. The purpose of the annual fact book is to provide data about the well being of children in the District of Columbia and to place statistics within a meaningful context. Ten of the indicators reported herein were selected by the Annie E. Casey Foundation and the Center for the Study of Social Policy to mirror those reported in the National KIDS COUNT Data book that Casey produces annually. D.C. KIDS COUNT has continued to expand the original list to include additional indicators that are relevant to the District of Columbia. We have included new indicators, which we hope you will find useful. We encourage suggestions for additions from our readers, which we will try to fill if the needed data are available.

The publication provides a broad perspective of the status of children and youth in the District. We seek to inform and educate our readers about the issues affecting children and their families in the District. We encourage community residents, policy makers, professionals, and others who work with and on behalf of children and families to create conditions that foster the optimal health and development of our children.

As usual, we stress the importance of family and community in the lives of our children. We at D.C. KIDS COUNT believe that an approach based on systems theory is needed to affect real change in the District. Accordingly, children, families, communities, and government institutions are viewed as an interconnected whole. Thus, when family support systems are dysfunctional in one area, the entire system may be impacted. In devising solutions to the problems facing children in the District, the interactions and relationships among and between the components of the system must be understood and the systemic impact of any changes considered.

We urge community leaders to use this report, in conjunction with previous reports, for formulating strategic plans and enacting policies that support children and families in the District. We also hope that the fact book will serve as a catalyst for service providers, business leaders, local government, funders, and community members to continue efforts to collectively address the issues presented in this report so that, ultimately, all families in this great city can function optimally.



I.

INTRODUCTION

This is the ninth edition of the KIDS COUNT Annual Fact Book for the District of Columbia. As before, it brings together in one place a wide variety of indicators of the well-being of the District's children and their families.

The Fact Book begins with a "Report Card" which provides a comprehensive yet easy to understand view of how the District stands relative to last year on most of our indices of children's well-being. For each one, the "Report Card" shows whether it has changed for the better, become worse, or remained the same.

Immediately following the Report Card, are the Recommendations and Strategies developed by the D.C. Kids Count Collaborative based on the data in the Fact Book.

The Executive Summary which digests the major points for quick perusal by those who do not have time to read the full report in detail follows the Recommendations and Strategies.

So that readers can view the indices in the context of the environment in which they occur, we begin the main body of the report with an overview of the changing population and economic situation of the District. This section is titled (A) The District's Population and Economy. The section is based on data from the U.S. Census Bureau and the D.C. Department of Employment Services.

Our indices of children's well-being are organized into seven more sections presenting data for the District as a whole. They are: (B) Economic Security; (C) Family Attachment and

Community Support; (D) Homeless Children and Families; (E) Child Health; (F) Safety and Personal Security; (G) Education, and (H) Youth Risk Behavior. Three additional sections provide information on selected indicators for (I) the eight D.C. wards, (J) the 39 D.C. neighborhood clusters, and (K) the District as compared to the Maryland and Virginia suburbs as well as to the City of Baltimore.

As always, we provide charts throughout the report that show, for almost all indicators, not only how the District compares with last year, or with some other single previous year — but the numbers for all years in the previous ten, and sometimes more. In this way, readers can see for themselves whether this year fits into the overall trend, and whether a clear trend exists.

With each of these charts, we also include a concise textual analysis of the current year's status and previous trend of that indicator. The actual figures are shown in the charts so that readers who wish may easily make their own analysis.

In compiling them, we have used data from a variety of reliable sources. They include the D.C. Department of Health, State Center for Health Statistics Administration, the D.C. Administration for HIV/AIDS, the D.C. Bureau of STD Control, the D.C. Income Maintenance Administration, the District of Columbia Courts, the D.C. Office of Early Childhood Development, the Community Partnership for the Prevention of Homelessness, Parents United for the D.C. Public Schools, the U. S. Bureau of the Census, and



the U.S. Centers for Disease Control and Prevention.

For the first year, we are able to include two new sections in the fact book:

- ◆ First, through a new partnership with the Urban Institute's D.C. Data Warehouse, neighborhood level data have been provided on selected indicators in convenient map form, to enable readers to see how the situations of children in their own neighborhoods compare with others in the city.

- ◆ Second, we present data on selected indicators of child well-being for the Virginia and Maryland suburbs as well as for the City of Baltimore, in order to provide a means for comparing how well the District's children are faring relative to those in other parts of this region and to a nearby city of similar population size and composition.

For the third time, we present a digest of the findings from the latest biennial Youth Risk Behavior Survey for the District of Columbia — this time for 2001. We also compare the 2001 data for the District with the results from the survey of the nation as a whole taken in the same year, and with those for the District in 1999.

We are able to report data on the number of D.C. children in subsidized child care for the first time this year. For the second year in a row, we include statistics on domestic violence — in which children are not always the direct victims, but are often harmed nonetheless.



The figures we report here will not always match those shown for the District of Columbia in the national KIDS COUNT Data Book, published by the Annie E. Casey Foundation. In addition to the District of Columbia, Casey provides funding to all 50 states and the U.S. Virgin Islands to help them prepare their own KIDS COUNT reports in order to provide more depth and detail than is possible in a national-level report.

In our case, it also enables us to provide more recent data. We present, herewith, the data for the latest year for which reliable figures were available when it was prepared - 2000, 2001 and in some cases 2002. We also report on many more indicators than does the national data book.

Sometimes our data will disagree slightly with the items for the same year in the national report. That is because the primary source of our data is the District of Columbia government. The national book employs data supplied by federal agencies. The two sources sometimes use slightly different methods for collecting and compiling the data. Neither is necessarily better than the other.

The District's Report Card for 2002

The District's Report Card, inaugurated in 2000, is meant only to provide a quick snapshot of the changes shown by this year's indicators, rather than a complete summary of the situation. Before reaching any conclusions based upon it, the reader is advised to consult the full text.

The Report Card not only shows whether each of the indicators has changed for the better, for the worse, or has remained the same, but also the most recent year for which we have data on that indicator. We have continued to include a column that shows the direction of the change in an indicator, whether it has increased, decreased, or remained the same.

On some indicators, like scores on the SAT, an increase will generally be a change for the better. In other cases, such as juvenile crimes, it will be a change for the worse. On a few, such as cases filed for paternity, an increase will usually indicate a worsening situation, with more fathers refusing to meet their parental responsibility. But under some circumstances, it might mean that more mothers are asserting their rights.

The District of Columbia's "Report Card" for 2002

Changes Since Last Year's Report on Indices of Children's Well-Being

Indicator (Year of Latest Data in Parentheses)	Increased (+), Decreased (-), or Same (=)	Changed for the Better	Changed for the Worse	No Change
The District's Population and Economy				
Population (2001)	=**			X**
Poverty Rate (2000)	+		X	
Employed Residents(2000)	-		X	
Unemployment Rate (2002)	+		X	
Family Attachment and Community Support				
Percent of Births to Single Mothers (2000)	-	X		
Percent of Births to Teenage Mothers (2000)	-	X		
Cases Filed for Paternity (2001)*	-	X		
Cases Filed for Child Support (2001)*	-	X		
Homeless Children and Families (2001)				
	+		X	
Child Health				
Percent of Mothers with Adequate Prenatal Care (2000)	+	X		
Infant Mortality Rate (2000)	-	X		
Percent of Low Birthweight Infants (2000)	-	X		
New AIDS Cases Diagnosed in Children and Teens (2001):				
Ages 0-12	+**		X**	
Ages 13-19	-	X		
Sexually Transmitted Diseases in Persons Under 20 (2001):				
Chlamydia	+		X	
Gonorrhea	=			X
Syphilis	-	X		
Immunization Rates (2001)	+**	X**		
Safety and Personal Security				
Deaths to Children and Teens (2000)	-	X		
Violent Deaths to Teens(2000)	-	X		
Teens Killed by Homicide and Legal Intervention (2000)	-	X		
Cases Brought Against Parents in Superior Court (2001):				
For Child Abuse	+		X	
For Child Neglect	-	X		
Juvenile Cases Referred to Superior Court (2001):				
For All Causes	-	X		
For Alleged Acts Against Public Order	-	X		
For Alleged Offenses Against Persons	-**	X**		
For Alleged Property Crimes	+		X	
Education				
Combined Math/Verbal Scores on SAT (2002)	+**	X**		
Stanford 9 Tests in Reading (2002)				
First Grade	+	X		
Sixth Grade	=**			X**
Eleventh Grade	+**	X**		
Stanford 9 Tests in Mathematics (2002)				
First Grade	+**	X**		
Sixth Grade	-**		X**	
Eleventh Grade	-**		X**	
Graduation Rate (2002)	+**	X**		

* See text for caveats

** Changed by only one person or one case, or by no more than one point or one percent

Tracking the Recommendations from the 2001 D.C. KIDS COUNT Fact Book

	Achieved since 2001	Underway	Not Achieved since 2001	Unknown
<i>Family Attachment and Community Support:</i>				
Provide respite care for the general population. Parents who are admitted into the hospital or other short-term treatment facility are particularly in need of these services.			X	
Provide free and/or affordable child care.		X		
Expand the number of parent mutual support groups.		X		
Expand the number and types of youth services, especially out-of-school time programs, rites of passage programs, tutorial programs and mentoring programs.		X		
Provide more programs to encourage the involvement of fathers as well as increasing support services for those fathers who are already involved.		X		
Provide services for families in a variety of languages.				X
Use alternate outreach strategies (i.e. provide information in beauty parlors, liquor stores, night clubs, etc.) to engage more community members in programs.				X
<i>Homeless Children and Families</i>				
Build more affordable housing for low and middle income residents.				X
Increase housing options, including section 8 housing and transitional housing.				X
Provide better linkages between job training and real employment opportunities.		X		
Provide free and/or affordable mental health and health care services.		X		
Provide enhanced educational opportunities, especially literacy services.				X
<i>Child Health</i>				
Targeted prenatal care services must be provided for vulnerable mothers, including women who abuse substances, teens, women with HIV/AIDS and single mothers.		X		
Enhanced promotion of existing prenatal care programs is needed. Support programs such as early intervention home visitation programs and health education in schools are needed.		X		
Focus should be placed on increasing the number of DC mothers who receive "adequate" prenatal care --- "intermediate" prenatal care is not sufficient.	X			
The Women's, Infants, and Children (WIC) supplementary food program must be expanded to provide food for more families that are in need.				X
Provide more public education on STDs, particularly Chlamydia.				X
Provide more HIV/AIDS education.				X
Promote abstinence before marriage.		X		
Make information on birth control methods readily accessible to youth.		X		
Increase educational efforts and outreach to parents/general public on the importance of immunizations.	X			
Conduct more aggressive outreach activities and become involved in promoting existing activities such as the "It's Wise to Immunize" campaign by the Children's National Medical Center.				X

Tracking the Recommendations from the 2001 D.C. KIDS COUNT Fact Book

	Achieved since 2001	Underway	Not Achieved since 2001	Unknown
<i>Safety and Personal Security</i>				
Expand non-violent conflict resolution education for youth.		X		
Continue campaigns to reduce the availability of guns, especially to youth.				X
Provide education for youth on how to respond to bullying.				X
Develop partnerships with youth to help them teach their peer how to combat violence.		X		
Increase treatment services for adults.				X
Establish treatment centers and/or services for adolescents.			X	
Provide residential services for children of addicted parents while they are in treatment to prevent having to place the children in foster care.			X	
Support universal parenting education.		X		
Provide education on the District's child abuse/neglect laws as well as positive parenting.		X		
Provide more funding to support the Children's Advocacy Center.	X			
Appropriate agencies should develop an Inter-Agency Memorandum of Understanding (MOU) to enhance the response to child physical abuse and neglect which is similar to the MOU currently in existence for responding to sexual abuse				X
Further clarify and codify current DC child abuse and neglect laws.		X		
Develop strategies and procedures for addressing the intersection between domestic violence and child abuse/neglect		X		
Expand family conferencing to address/resolve cases of abuse/neglect.		X		
Research the frequency and types of neglect, and develop strategies to address each type.				X
Introduce/teach infant massage to parents.		X		
Provide post-adoption services and supports to families.				X
Expand the emergency assessment capabilities of the Healthy Families/Thriving Communities Collaboratives.				X
Increase awareness of programs that support children and families affected by abuse/neglect.			X	
<i>Education</i>				
Complete and release a comparison study on the achievement of children in regular public schools with those in public charter schools.				X
Increase the number of tutorial centers.		X		
Increase mentoring and tutorial services for high school youth.		X		
Enhance training of teachers and other school personnel.				X
Provide more accessible mental health services, particularly in the public schools.		X		

*This is the first year that D.C. KIDS COUNT has begun to track the progress on the recommendations from the Fact Book. If any of our readers have comments or information on the status of any of these recommendations, please contact us at dckidscount@dccf.org or (202) 624-5555.

II.

The 9th Annual Every KID COUNTS in the District of Columbia Fact Book 2002 RECOMMENDATIONS AND STRATEGIES

The D.C. KIDS COUNT

Collaborative has made an effort to couple this year's recommendations and strategies more closely to the sections reported in the Fact Book. We have also cast a wider net for input with the partners from the expanded D.C. KIDS COUNT Collaborative, in order to provide more tangible and specific recommendations. We strongly believe that concerted efforts on behalf of all segments of the community can make these recommendations a reality for the betterment of the lives of the District's children and families.

The Collaborative recommends that the following two strategies be incorporated in all services offered:

- ◆ Use expanded outreach strategies (i.e. provide information at beauty parlors, barber shops, liquor stores, night clubs, faith based organizations, etc.) to engage more community members in programs;
- ◆ All services provided should be culturally competent and linguistically accessible.

I. Family Attachment and Community Support

A. More supportive services for communities and families, especially for single heads of household, are needed:

- ◆ Provide respite care for the general population. Single heads of household and parents who are admitted into the hospital or other short-term treatment facilities are particularly in need of these services;

- ◆ Provide free and/or affordable child care during non-traditional hours as well as traditional hours to accommodate caretakers who work various shifts;
- ◆ Provide child care for younger children (particularly 6 weeks to 24 months);
- ◆ Expand the number and types of youth services, especially out-of-school time programs, rites of passage programs, tutorial programs and mentoring programs during non-traditional hours as well as traditional hours to accommodate caretakers who work various shifts;
- ◆ Expand the number of parent mutual support groups;
- ◆ Provide more programs to encourage the involvement of fathers and increase support services for those fathers who are already involved.

II. Homeless Children and Families

A. More supportive services for the homeless population are needed:

- ◆ Provide better linkages between job training and real employment opportunities;



- ◆ Provide free and/or affordable mental health and health care services;
- ◆ Provide enhanced educational opportunities, especially literacy services;
- ◆ Increase the number of shelters and transitional housing for families;
- ◆ Implement "second chance" homes for teen parents on the brink of homelessness;
- ◆ Increase services that offer families information on creative mortgage and financing strategies;

B. More housing resources are needed:

- ◆ Increase the supply of affordable housing for low and middle income residents to include more section 8 housing;

III. Child Health

A. More supportive prenatal care and pregnancy services are needed:

- ◆ Targeted prenatal care must be provided for vulnerable mothers, including women who abuse substances, teens, women with HIV/AIDS, and single mothers;
- ◆ Enhanced promotion of existing prenatal care programs is needed, such as early intervention home visitation programs and health education in schools;
- ◆ The Women's, Infants, and Children (WIC) supplementary food program must be expanded to provide food for more families that are in need;

- ◆ Make more and accurate information on birth control methods readily accessible to youth;
- ◆ Increase support for research-based teen pregnancy prevention programs founded in youth development strategies for both primary and subsequent teen pregnancies.

B. More Sexually Transmitted Disease (STD) prevention programs are needed:

- ◆ Provide more public education on STDs, particularly Chlamydia;
- ◆ Provide more HIV/AIDS education;
- ◆ Provide life skills training to prevent risky behaviors;
- ◆ Promote abstinence programs.

C. The number of children who are immunized needs to be increased.

- ◆ Continue educational efforts and outreach to parents/general public on the importance of immunizations.

IV. Safety and Personal Security

A. Efforts to combat violence should be continued and expanded:

- ◆ Expand non-violent conflict resolution education;



- ◆ Continue campaigns to reduce the availability of guns, especially to youth;

- ◆ Develop partnerships with youth to help them teach their peer how to combat violence (i.e. bullying).

B. Substance abuse prevention and treatment services must be enhanced:

- ◆ Increase treatment services for adults;
- ◆ Establish treatment centers and/or services for adolescents;
- ◆ Provide residential services for children of addicted parents while their parents are in treatment to prevent having to place them in foster care.

C. Efforts to prevent and/or reduce child abuse and neglect must be expanded:

- ◆ Support universal parenting education which is culturally competent;
- ◆ Continue to provide education on the District's child abuse/neglect laws as well as positive parenting;
- ◆ Continue to clarify and codify current DC child abuse and neglect laws;
- ◆ Develop strategies and procedures for addressing the intersection between domestic violence and child abuse/neglect;
- ◆ Expand family conferencing to address/resolve cases of abuse/neglect;
- ◆ Research the frequency and types of neglect, and develop strategies to address each type;
- ◆ Introduce/teach infant massage to parents;
- ◆ Provide post-adoption services and supports to families;

- ◆ Expand the emergency response capabilities of the Healthy Families/Thriving Communities Collaboratives;

- ◆ Increase awareness of programs that support children and families affected by abuse/neglect.

- ◆ Cross train child maltreatment and domestic violence service providers and policy makers;

- ◆ Begin to address the continuum of family violence by establishing a family violence coordinating council;

- ◆ Provide more effective services for batterers to end intimate partner abuse (i.e.re-education center for batterers)

- ◆ Develop and/or revise interagency agreements (MOUs) and protocols for serving families;

- ◆ Develop family assessments.

V. Education

A. Educational achievement levels of students must be improved:

- ◆ Complete and release a comparison study on the achievement of children in regular public schools with those in public charter schools;
- ◆ Continue to increase the number of tutorial centers for all age groups as well as mentoring and tutorial services for high school youth;
- ◆ Increase the quality of teaching through professional development and provision of quality resources;
- ◆ Continue to provide more accessible mental health services, particularly in the public schools;
- ◆ Expand outreach to parents to support student achievement.

III.

EXECUTIVE SUMMARY

The District's Population and Economy

- ◆ The District of Columbia's population, which had been declining for a half century, may finally be stabilizing. The latest Census Bureau estimate, for 2001, shows it as 571,822 — down by only 237 persons since the 2000 Census. At the 2000 count, the District had 114,992 children.
- ◆ Births to D.C. residents increased in 2000 by 153, reversing a decline that had been going on since 1991.
- ◆ Despite a decline of nearly 35,000 people during the 1990s by official Census Bureau figures, the Census count of occupied housing units in the District decreased by fewer than 700. The main cause of the population decrease was a shift away from families and toward more singles and childless couples.
- ◆ While 56 percent of the District's adults are Black, Black kids are 75 percent of children. Whites are nearly 35 percent of the city's adults, but slightly less than 15 percent of its children.
- ◆ The number of wage and salary jobs in the District has long exceeded the number of residents. Jobs had declined sharply in number between 1991 and 1998, dropping by 72,700 or nearly 11 percent. In 1999 and 2000, however, they rebounded to gain just under 37,000 in two years.
- ◆ Since 2000, job growth has continued — but at a much slower pace. 1,500 more jobs were added between 2000 and June of 2002. As of that month, the total was 651,800.
- ◆ The increase in jobs has not benefited District residents, who have

been losing out to suburbanites in the city's job market. The number of D.C. residents who were employed dropped by over 70,000 between 1990 and 1997 — a 23 percent decrease, greater than the decline in jobs during the same period.

- ◆ In the two years from 1997 to 1999, the downward trend reversed briefly, and resident employment increased by 27,200. But then from 1999 through June of 2002, while the number of jobs in the city increased by another 24,500, the number of employed D.C. residents dropped by 6,100.
- ◆ The District's unemployment rate, after dropping in 2000 to 5.8 percent, its lowest level in over a decade, had risen to 6.9 percent by June 2002.

Economic Security

- ◆ Poverty data from the 2000 Census, which became available just recently, show that more than one District resident in five is in poverty - 20.2 percent. This is a higher proportion than shown in any previous Census. Despite the considerable

drop in the District's total population since 1990, the poverty population has grown by more than 13,200.

- ◆ The federal poverty levels are stringent — many experts believe excessively so. The poverty threshold for a single parent with one child at the time of the Census was only \$11,483.
- ◆ Poverty strikes harder at children than at other age groups. The poverty rate for all D.C. children under 18 is 31.7 percent. For youngsters under five, it is 33.0 percent. Child poverty rates in many other major cities are quite similar, with most ranging between 30 and 35 percent and some even higher.
- ◆ Poverty among single-mother families with children is 37.3 percent — higher than in any other family type. For married couples, the rate is 8.1 percent. Of all Black families who are in poverty, more than two-thirds are headed by single mothers.
- ◆ Black and Hispanic children are more likely to be in poverty than any other racial or ethnic group. Poverty is the lot of 37.6 percent of Black and 25.6 percent of Hispanic children.

- ◆ In June of 2002, the number of children who received TANF (welfare) benefits from the D.C. Government was up slightly over the same month of 2001. It was the first increase in that number since the passage of welfare reform in 1996. Together with the rapidly increasing unemployment rate and an escalating number of homeless families, this is another indicator that points to a worsening local economy.



- ◆ The number of children receiving food stamps has decreased slightly in 2002. According to the U.S. Department of Agriculture, the District of Columbia achieved 100 percent food stamp participation in 1999. It was the only state where participation was significantly higher in that year than in 1994.
- ◆ The number of District children receiving Medicaid has been increasing, and the growth has been accelerating as a result of an outreach campaign by the District to enroll everyone who is eligible.
- ◆ The District has received six bonus awards to date for high performance in reducing out-of-wedlock births and moving needy people from welfare to work. No other jurisdiction has received as many. These awards total \$91.1 million.

Family Attachment and Community Support

- ◆ Only one-third of the District's children now live with both parents in those parents' own households. A much larger 40 percent live with a single mother, and five percent with a single father. Nearly one-fifth live with grandparents or other relatives.
- ◆ The kinds of families they live in affect these children's chances of escaping poverty. Of all D.C. households living below the poverty line in 2000, 63 percent were headed by single mothers and nearly six percent by single fathers. Married-couple families with children related to them (including grandchildren) were only 10 percent of poor families.
- ◆ In 2000, the percent of all births that were to single mothers fell for the fourth straight year to reach 60 percent, the lowest level since 1987.
- ◆ Births to mothers still in their teens also fell for a fourth straight year to reach 14.2 percent, a level not seen since at least 1982.

- ◆ The number of cases alleging paternity filed with the District Courts fell abruptly from 1,658 to 998. New child support cases also fell from 746 to 637, fewer than in any year since 1989.
- ◆ The District's handling of paternity and child support cases has fallen under a cloud. A single mother has proved that a paternity test performed by a contractor to the D.C. Government was false. The false result had caused the Court to reject her claim to child support. She had waited nearly two and a half years before she received a hearing.
- ◆ The federal government has warned the District it could lose millions of dollars because it has failed on three child support indicators and could not demonstrate that its data were reliable. In 2000, the District made collections in only 12 percent of its 128,000 child support cases. The national average is 42 percent.

- ◆ Subsidized child care, an important support for working poor parents, had been growing rapidly, but is now being cut back due to budget constraints.

Homeless Children and Families

- ◆ The number of homeless families applying for shelter to the Community Partnership for the Prevention of Homelessness grew to 2,278 in 2001, a 78.5 percent increase over 2000 and a 137 percent increase over 1999.



Child Health

The birth and death statistics, prenatal care, and birthweight indicators in this report date to 2000. They are collected through an interstate program, and the timing of their availability is not under the control of the D.C. Department of Health. Other health indicators - those dealing with AIDS, sexually transmitted diseases, and immunizations - are for 2001, as are most indicators in areas other than health.

- ◆ The 1999 data we published last year showed deterioration on three related indicators that had been improving — adequacy of prenatal care, infant mortality, and low birth weights. This year all three have recovered, and are now at more favorable levels than two years before. Hopefully the improvement will continue when the 2001 data arrive, but the deterioration in the economy since 2000 is not a good portent.
- ◆ The percent of mothers receiving adequate prenatal care rose in 2000 to 65.1, from 59.0 in 1999 and 60.7 in 1998.
- ◆ The infant mortality rate dropped to 11.9 percent, from 15.0 in 2000 and 12.5 in 1998.
- ◆ The percent of infants born at low birthweights, below 5 1/2 pounds, decreased in 2000 to 11.9, from 13.3 in 1999 and 13.1 in 1998.
- ◆ New AIDS cases diagnosed in children 12 and under have diminished in number rapidly since 1997. Fewer than five cases were reported in 1999 and a total of five in 2000 and 2001 combined. (Privacy restrictions prevent disclosure of numbers under five in any year.)
- ◆ AIDS infections in teens 13 through 17 have also diminished, with a total of eight cases reported in 1999 through 2001.
- ◆ These improvements have resulted from widespread use of the drug AZT



among infected pregnant women, and administration of HAART (Highly Active Anti-Retroviral Therapy) to children already infected.

- ◆ The total number of cases of the three most common sexually transmitted diseases (STDs) among persons under 20 increased in 2001 after declining for three straight years. The increase was small, from 2,082 in 2000 to 2,107 in 2001. It was entirely due to a rise in cases of chlamydia, which now accounts for 63 percent of all cases in D.C. The second most common STD, gonorrhea, held steady, while syphilis declined.
- ◆ Immunization rates against common diseases have fallen below the 1999 level in 2000 and 2001, both in the nation and in the District. The D.C. rates are below the nation's, but this is true for a number of other large cities as well.

Safety and Personal Security

- ◆ Deaths to children and teens under 20 dropped to 158 in 2000 from 194 in 1999. That year had shown a small increase, but the 2000 number has restored the previous declining trend. The largest number, as in previous years, occurred to infants under one year — 91 deaths. The second largest was in the 15-to-19 age group — 40.
- ◆ Violent deaths to teens continued to decline in 2000 for the seventh straight year, dropping to 37 from 44

in 1999. Of these deaths, 31 were murders and six were accidents. There are usually a few suicides in this age group, but none occurred in 2000.

- ◆ The number of child abuse cases filed with the D.C. Courts increased sharply in 2001, rising to 268 from 156 in 2000. Still, the 2001 level remains well below that of the late 1980s and early 1990s, and the overall trend has been downward. Nonetheless, this indicator of family dysfunction bears watching in the present shaky economy.
- ◆ Child neglect cases have declined for the past four years. Still, at 1,222 in 2001, the number remains much higher than in the early 1990s.
- ◆ Petitions to the D.C. Superior Court for civil orders of protection against domestic violence increased in both 2000 and 2001, but the number granted remained virtually unchanged in 2000 and actually decreased in 2001, when 56 percent were dismissed.
- ◆ Juvenile cases referred to the Superior Court declined in 2001, to 2,390 from 2,495 in 2000. The overall trend has been downward for more than a decade and has accelerated since 1995.
- ◆ “Public Order” offenses of which youths are accused, principally involving drugs and weapons, declined to 795 cases in 2001 from 940 in 2000. They have dropped to second place among youth crimes, with 33 percent of the total.
- ◆ Property crime cases have increased in number to 803 cases in 2001, from 766 in 2000. They are now the most common kind of case brought against juveniles, with 34 percent of the total. Most common are auto thefts, accounting for 64 percent.
- ◆ Juveniles were accused of 675 crimes against persons in 2001, down by one case since 2000. These offenses include assaults, homicides, kidnappings, and robberies. The number has

diminished by about half since 1994, but has tended to change by three-year steps - with the number remaining nearly constant for three years, then dropping suddenly, then repeating the process again. 2001 is the third year of the latest step.

Education

- ◆ The D.C. Public Schools serve a student body that is gradually becoming more multicultural. Between 1990 and 2001, Hispanic students increased their share from five to nine percent. Asian and other racial groups doubled their share from one to two percent. Whites' percentage increased from four to five, while Blacks' decreased from 90 to 84.
- ◆ During the same period, the number of language minority students rose from 6,769 (8.4 percent) to 8,215 (12.0 percent). Students with limited English capability increased from 3,732 (4.6 percent) to 5,281 (7.7 percent).
- ◆ Nearly three-fourths of students in the public schools are eligible for free and reduced-price lunches.
- ◆ The number of special education students has increased by 72 percent since 1990, and now stands at 10,833 — more than one D.C. student in six. Of these students, 22 percent are being educated in special schools to which the school system pays tuition.
- ◆ The combined math and verbal score of D.C.P.S. students on the SAT rose by one point in 2002 to 799. In 2001 it had dropped by 24 points, from 822 to 798. The one-point gain was due entirely to an equal rise in the verbal component; the math score held steady. The national average in both 2001 and 2002 was 1020.
- ◆ In 2002, the overall reading performance scores of D.C. students on the Stanford 9 Achievement Tests rose slightly in nine of the 11 grades in

which the tests are given. Over the longer period from 1998 to 2002, scores improved in all grades. Most of the improvements were modest, however — only one or two points — and they were more common in the elementary than in the higher grades.

- ◆ In mathematics, students improved in 2002 in seven grades — two fewer than in reading. However, since 1998 improvement in math has been greater, with two grades registering gains of seven points or more, another five gaining by at least four points, and three more grades gaining by three points. Once more, the gains were somewhat greater in the earlier grades.

- ◆ As of 2002, D.C.P.S. no longer provides data on performance levels — only overall scores relative to the nation. A review of the 2001 data, however, shows that the percentage reading at the “basic” level or better (at least partial mastery of the subject) exceeded the nation in four grades, and came within one percentage point or less in two more.

- ◆ However, the District’s standing vs. the nation with regard to reading performance at grade level or above was much less satisfactory. Here only D.C.P.S. students in first grade exceeded the national norm. Their performance in all higher grades fell below the nation’s, and the differences were particularly stark in 7th grade and above.

- ◆ In math the District’s kids did much better, however. They exceeded the national norms, or came within one percentage point of them, in six of the 11 grades — including 11th grade. Even where their performance did not equal the nation’s, the disparities were not nearly so great in math as in reading.

- ◆ Total enrollments in the District’s publicly supported schools (both the traditional schools and the new charter schools) fell between 1992 and 1997 by 3,826. In 1998, the charter schools’ first year, D.C.P.S. enroll-

ments fell by 5,222, more than in the entire five previous years. The charters enrolled 3,594 students that year, but the combined total still fell by 1,628.

- ◆ In 1999 and 2000, while the D.C.P.S. continued to lose students, the charters’ gains more than made up for it, so the combined total grew. In 2001, both the charters’ gains and the traditional system’s losses were smaller. The result was a net decline of 112 in the combined total, bringing it to 78,694. Essentially, the combined enrollment has leveled out, at least for the moment, at somewhat under 79,000. That is a bit less than 1,600 students more than at the 1997 low of 77,111.

- ◆ In the D.C. Public Schools, enrollments in kindergarten and pre-kindergarten have continued declines that began in the mid-1990s. The kindergarten enrollment in school year 2001-2002 was 5,203, down by 154, while pre-kindergarten decreased by 188 to 3,026. Pre-school remained essentially stable at 1,079, a gain of four.

- ◆ The graduation rate in D.C.P.S. increased fractionally in 2002, rising to an even 55 percent in 2002 from 54.7 percent in 2001 and 54.0 percent in 2000.

Youth Risk Behavior

- ◆ Every two years since 1998, D.C. Kids Count has published the results of the Youth Risk Behavior Survey for the District of Columbia. This year we present the results of the latest survey, conducted in 2001. We also compare the D.C. responses to those for the whole nation in the same year, and for the District itself in 1999.

- ◆ The survey questions focus particularly on kinds of behavior that could lead to illness, injury, or death — actions such as physical violence, carrying weapons, substance abuse and smoking, sexual intercourse (including



forced sex and unprotected sex), attempted suicide, and driving after drinking.

- ◆ The D.C. youth surveyed in 2001, students in grades 9 to 12, reported higher incidences of most risky behaviors than in the nation as a whole, but they were generally on a par with, and sometimes less risk-laden, than those in other big cities. Yet they still revealed much for parents and others to worry about.

- ◆ Fewer D.C. youngsters reported substance abuse than those nationally. However, nearly twice as many reported they had felt too unsafe to go to school within the past month. More than one-third had been in a physical fight in the past year, and one-fifth had carried a weapon.

- ◆ More than six in ten said they had had sex already, and one-fourth had had four or more sexual partners. Nearly three-fourths said a condom had been used on the last occasion, higher than the 58 percent nationally but still leaving one in four at risk of pregnancy or disease.

- ◆ Comparison of the 2001 responses from D.C. with those in the 1999 survey shows some changes, mostly in a positive direction. Most were not dramatic, however. Somewhat fewer reported smoking or substance abuse. Fewer also said they had had sexual intercourse, but the percent taking precautions had decreased slightly.

IV.

SELECTED INDICATORS OF CHILD WELL-BEING IN THE DISTRICT OF COLUMBIA

This year many more of our indicators are positive than in our last Fact Book. But we are not ready to call in the cheerleaders just yet. Most of the data we were able to obtain for this report date back at least to 2001. Many, including most of the vital statistics and health indicators, are from 2000. At that time, the full impact of the dot.com collapse had not yet been felt, and 9/11 had not even been imagined. Even in the annual data for 2001, the full effects of 9/11 were still not evident.

The few indicators that are current as of 2002 are worrisome. The District's economy – and for that matter, the economy of the U.S. as a whole – is clearly in trouble. Hopeful forecasts of a quick recovery have repeatedly been dashed.

As this edition was being prepared, a terrifying wave of sniper attacks had made many residents of the Washington area fearful of leaving their homes. Two suspects had been apprehended, and the area was returning to normal. But how much harm this had done to local businesses, and how much it might further damage the tourism that has long been a bulwark of the District's economy, remains to be seen.

The 2000 Census showed 114,992 children in D.C. This report examines the situations of these children and the conditions under which they are growing up, based on the latest statistics available from both federal and local sources.

A. THE DISTRICT'S POPULATION AND ECONOMY

1. **According to the Census Bureau's latest estimate, the District's population, which decreased sharply from 1990 to 2000, continued to decline in 2001 — but by very little.**

(Fig. 1)

The District's population, which fell rapidly throughout the 1990s, may finally be stabilizing. The 2000 Census counted the District's population as 572,059 as of April 1 of that year. The most recent Census Bureau estimate, which is for July 1, 2001, is 571,822. That is a decrease of only 237 persons in over a year's time.

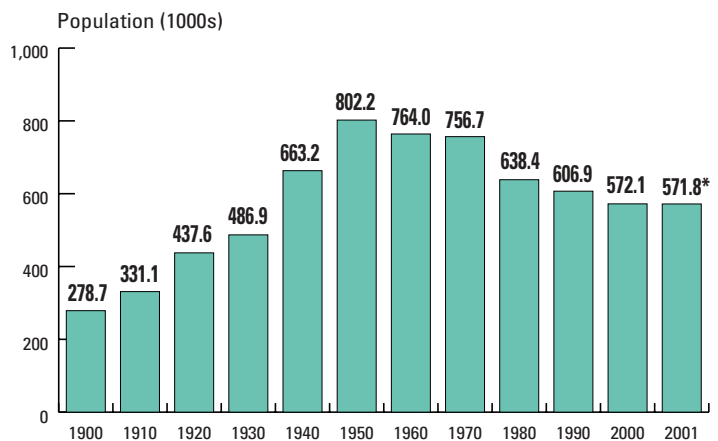
Owing to a serious undercount in the 1990 Census, we will never know exactly how many people the District

lost in the 1990s. The official count of 606,900 indicates that it was about 34,800. However, the Census Bureau estimates that the official figure was low by more than 21,400. That would make the loss for the decade over 56,000 persons.

We have reviewed other federal statistics, and they suggest that the decline may have been even greater than the Bureau thinks. Regardless, since the District's population peaked in 1950 at over 802,000 the overall loss has totaled at least 230,000, or 29 percent. The latest year's decrease of 237 is only about one-thousandth of that.

If the recent trend continues, the Census Bureau's estimate for 2002 may show that the District's population has stabilized or perhaps even begun to increase. If this actually does occur, it will be the first time in a half century that the Nation's Capital has not been losing people.

Figure 1 POPULATION TREND IN THE DISTRICT OF COLUMBIA 1900 - 2001



Source: U.S. Census Bureau
* Estimated

2. Births to District residents, which had been declining since 1991, increased slightly in 2000. (Fig. 2)

In 2000, there were 7,666 registered births to D.C. residents. In 1999 there had been 7,513. That was an increase of 153. While hardly earth-shaking, this is a reversal of a downward trend that had persisted since 1991. The decline had been slowing, especially since 1997.

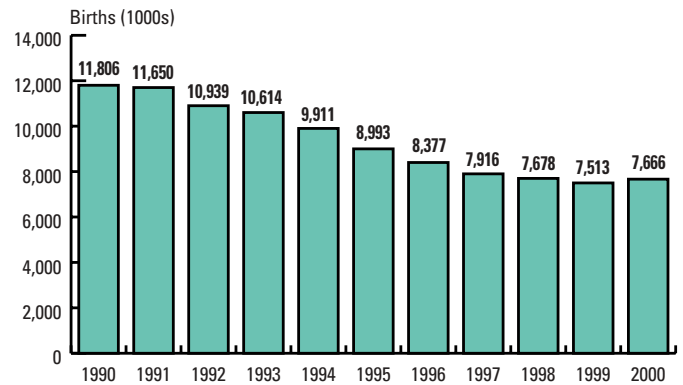
In last year's D.C. Kids Count report we had cautiously prognosticated: "soon — perhaps next year or the one after that — the birth numbers may level out or even begin to turn upward." And we noted that such a change "could herald a turnaround in the District's population."

The latest data suggest that the first of these forecasts has already been realized and the second could be close to happening. But whether a population turnaround will actually occur, and if so whether it will be maintained over the longer run, will depend upon how favorable an environment the District is able to provide for families and children.

Other statistics help explain why this is important. As we've seen, the Census Bureau's official counts of the population in 1990 and 2000 (as opposed to its estimates, which are not official) indicate that the federal city lost nearly 35,000 people between 1990 and 2000. Yet the Bureau's official counts of households — housing units with people in them — show a loss of fewer than 700 for the same period.

How could this difference have occurred? Households have become smaller and less likely to contain families. The number of D. C. homes occupied by families decreased by over 9,400 during the 1990s. The number occupied by only a single member increased by nearly 6,000. At the same time, the number containing two or more unrelated persons grew by

Figure 2 **BIRTHS TO D.C. RESIDENTS 1990 - 2000**



Source: D.C. Department of Health, State Center for Health Statistics Administration

about 2,900. It was a shift toward more singles and childless couples, rather than the much smaller drop in the number of occupied homes and apartments, that was chiefly responsible for the District's declining population.

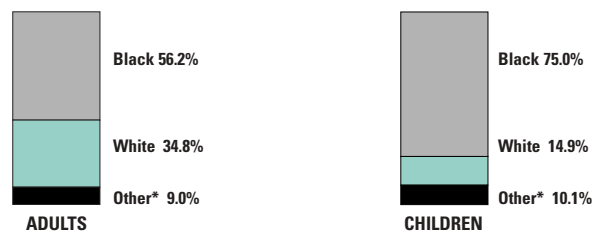
3. While 56 percent of the District's adult population is now Black, Black kids are three-fourths of its child population.

Hispanic kids also make up a larger percentage of kids than of adults. (Fig. 3)

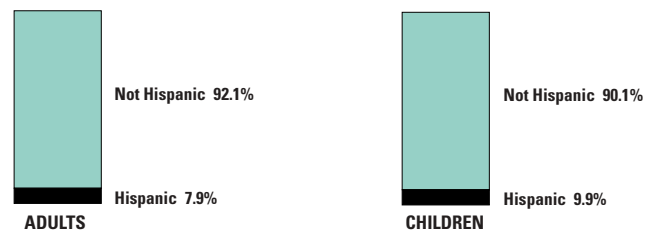
Figure 3 tells the story. Black children are exactly 75 percent of all D.C. children, according to the 2000 Census. For Hispanics, who may be of any race, their share among the District's children is 9.9 percent, while for adults, it is 7.9 percent.

Figure 3 **RACIAL AND ETHNIC MAKEUP OF ADULT AND CHILD POPULATIONS District of Columbia, 2000**

RACIAL ORIGIN

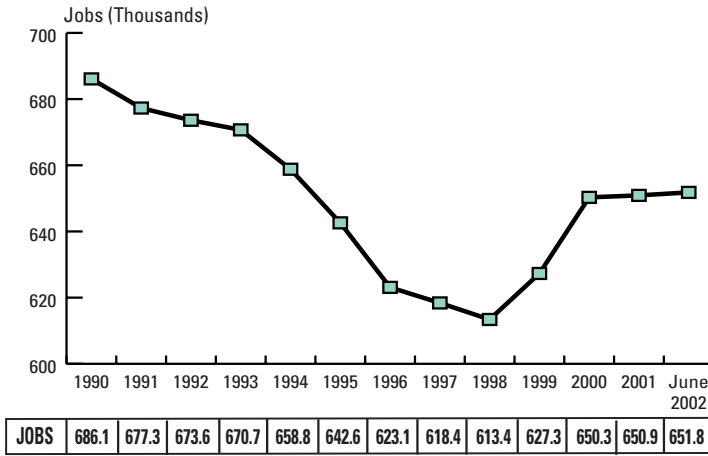


HISPANIC ETHNICITY



Source: Census 2000
*Other races include Native Americans, Asians, Pacific Islanders, and unspecified racial origins. They also include persons who indicate that they are members of more than one race.

**Figure 4 NUMBER OF JOBS (Wage and Salary Employment)
District of Columbia, 1990 - 2001 (Annual Averages) and June 2002**



Source: D.C. Dept. of Employment Services, Labor Market Information & Research

For all racial groups other than Black or white, (including, among others, Native Americans, Asians, Pacific Islanders, and persons of mixed race), their combined share among children is 10.1 percent, and among adults, 9.0 percent.

Only in the case of whites does the percentage of the racial or ethnic group among adults exceed that among children. Whites make up nearly 35 percent of the adult population but slightly less than 15 percent of the children.

In a very real sense, therefore, the statistics that we present in this report that deal with the status of the District's children primarily reflect the situation of the great majority of these children who are not white.

4. The total number of jobs in the District has increased slightly since 2000, but not nearly as fast as in the late 1990s. (Fig. 4)

The District's municipal budget has historically been heavily dependent on the number of jobs it provides. Even though it is prohibited from taxing the incomes of the many who work in the city but live outside its borders, it can tax the buildings that house their workplaces and the meals and other

things they buy while they are there.

For many years the District has had more jobs than people, and this remains true by the latest statistics. In 2000, with an official population of 572,059 by the Census, the District had 650,300 jobs as estimated by the D.C. Department of Employment Services. (This figure is defined by the Department as all wage and salary employment, and both the 1999 and 2000 numbers have been revised

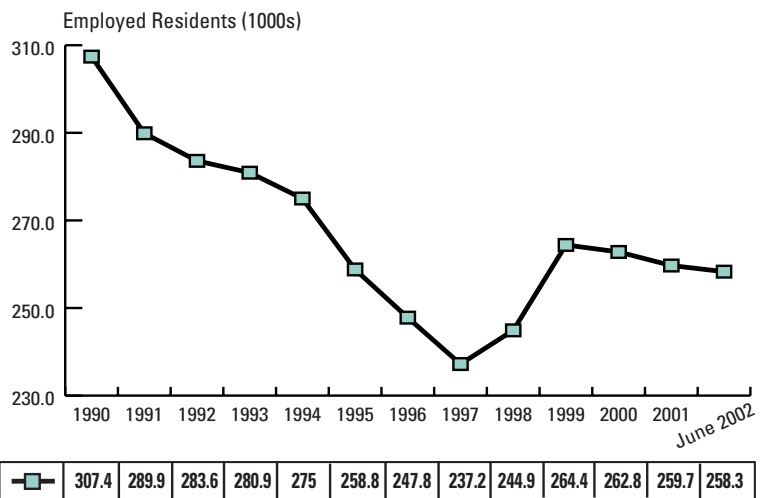
upward from those we reported last year.)

The annual average increased further to 650,900 in 2001, and by June of 2002 the monthly total had risen a bit further to 651,800. That is much slower growth than the District had registered between 1998 and 2000. In that two-year period, the Employment Services Department's figures show that the total number of jobs increased from 613,400 to 650,300 or by just under 37,000. That is three percent per year.

Since 2000, the District of Columbia has added only 1,500 more jobs — but this increase has been accomplished in the face of a much more difficult economic picture. The recent trend is in sharp contrast to the situation between 1990 and 1997, when the city lost jobs every year. The total dropped by 67,700 or nearly 10 percent.

5. The number of D. C. residents who are employed, which was already well under half the number of jobs in the city, has declined steadily since 1999. (Fig. 5)

**Figure 5 NUMBER OF EMPLOYED RESIDENTS
District of Columbia, 1990 - 2001 (Annual Averages) and June 2002**



Source: D.C. Dept. of Employment Services, Labor Market Information & Research

Unfortunately, the increase in jobs has gone to people living outside the District. In fact, District residents have steadily been losing ground in their city's own job market. In 1999, when 264,400 D.C. residents were employed, their number was only 42 percent of all wage and salary jobs located in the city. That was down from 45 percent in 1990.

Residents' declining percent of total employment had occurred despite the fact that the number of employed residents had increased by 27,000 or 11 percent between 1997 and 1999. But then between 1999 and 2000, while jobs in the city increased by another 23,000, the number of employed residents actually declined by 1,600.

Jobs in the city increased again in 2001, albeit by only 600 — but the loss in employed residents nearly doubled to 3,100. By June of 2002, the total supply of jobs in the District had eked out another gain of 900, but the number of D.C. residents holding jobs had declined still further by 1,400.

As a result, in June 2002 the ratio of employed residents to jobs in D.C. had dropped to less than 40 percent.

6. The District's unemployment rate has climbed rapidly since 2000. (Fig. 6)

From an average rate of 5.8 percent in 2000, the lowest in more than a decade, unemployment among District residents climbed to an average of 6.5 percent in 2001, and to 6.9 percent in June of 2002. At that level it is fractionally higher than it was in 1990. It is still well below the more than eight percent it had reached in six years of the ensuing decade, or the 7.8 and 7.9 percent it had seen in two more. But if the rate of unemployment continues increasing at this pace, it will not be too long before levels like those return.

B. ECONOMIC SECURITY

1. New data from the 2000 Census show that more than one District resident in five is in poverty. (Fig. 7)

The 2000 Census results on poverty, which became available only a few weeks before this report was prepared, showed 20.2 percent of all D.C. resi-

dents to be living below the poverty line in 1999 - 109,500 persons, or just over one in five. This is higher than 1990's 16.9 percent by 3.3 percentage points, or nearly one-fifth. It is a substantially larger share than shown by any previous Census since 1970, when poverty was first measured by the Census Bureau.

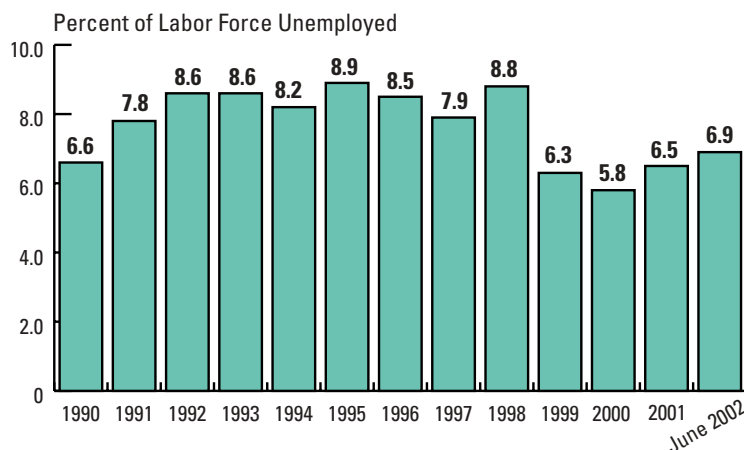
In last year's report, we had cited the results of a special Census survey, the Census 2000 Supplementary Survey, also taken in 2000. This data source — which was based on a sample but was expected to parallel the Census quite closely — had given a considerably lower poverty figure, 17.7 percent. That was higher than 1990 by a mere 8/10ths of a percentage point.

Despite the considerable drop in the District's population since 1990, the number of persons living in poverty by federal criteria has increased by more than 13,200, or 14 percent.

The Census Bureau's poverty levels or "thresholds" are updated annually in accord with the increase in the federal cost of living index. Still, they are regarded by many experts as based on outdated concepts and far too strin-

Figure 6

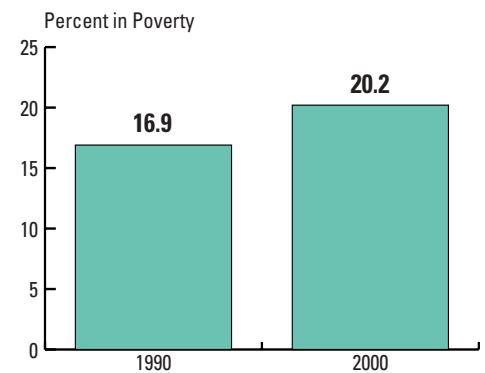
UNEMPLOYMENT RATE
(Percent of Labor Force)
District of Columbia, 1990 - June 2001 (Annual Averages) and June 2002



Source: D.C. Dept. of Employment Services, Labor Market Information and Research

Figure 7

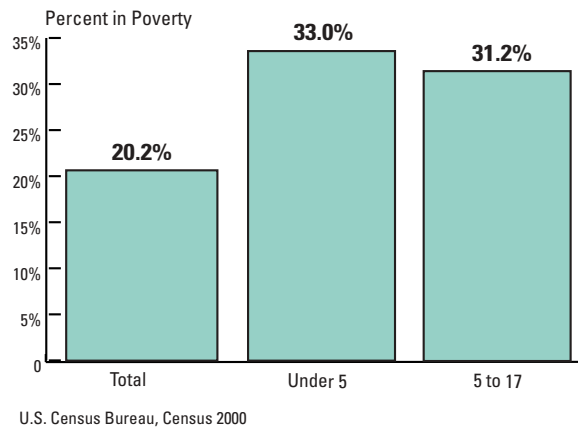
POVERTY RATE IN 1990 AND 2000
TOTAL POPULATION, DISTRICT OF COLUMBIA



U.S. Census Bureau, 1990 Census and Census 2000

Figure 8

**POVERTY RATE FOR TOTAL POPULATION,
CHILDREN UNDER 5, AND 5 TO 17
District of Columbia, 2000**



gent. Furthermore, they are not adjusted for the variations in living costs among different types of areas.

Cities both large and small, as well as rural areas, are all treated by the poverty measure as if they had the same cost levels, which they clearly do not. Housing costs, in particular, vary greatly. The District is one of the highest housing-cost cities in the U.S.

The poverty threshold for a single parent with one child under 18 was only \$11,483 in 1999, the year to which the 2000 Census results apply. Some but not all government programs provide benefits to people with incomes above that bare minimum level.

2. Poverty in the District strikes far harder at children than at adults, and hardest of all at the youngest. (Fig. 8)

While 20.2 percent of all persons residing in the District are in poverty, 31.7 percent of all its children under 18 live below the poverty line. The rate is highest of all - 33.0 percent - for youngsters under five. It is not much lower, 31.2 percent, among those between five and 17 years.

3. The District is not alone among large cities in having many of its children in poverty.

A high and rising poverty level among children under 18 is by no means limited to the District. The child poverty rates shown by the 2000 Census are strikingly similar for some other cities we have looked at. Among nearby cities, the rate is 31.0 percent in Baltimore, 33.4 percent in Richmond, 30.7 percent in Wilmington, and 31.6 percent in Philadelphia. Across the country in Los Angeles, it is 30.2 percent. In some large cities the rate is even higher — Detroit's is 34.8 percent, and Hartford, Connecticut's is 41.3 percent. In the New York City borough of the Bronx, 41.7 percent of children are in poverty. In Brooklyn the rate is 34.2 percent, and in Manhattan it is 32.1 percent.

4. Poverty among D. C. children who live with single mothers is higher than for those in any other type of family.

More than 32,600 families, 29 percent of all families in the District, were categorized by the 2000 Census as "Female householder, no husband present — with related children under

18 years." The poverty rate among these single-mother families was 37.3 percent. For families where children lived with single fathers, the rate was 20.3 percent. In married-couple families, 8.1 percent were in poverty.

5. Black and Hispanic children are more likely to be in poverty than any other major racial or ethnic group

Among all Black children living in the District, 37.6 percent are in poverty by federal standards. Among Hispanic children, who may be of any race, 25.6 percent are below the poverty line. For Asian children the poverty rate is 23.6 percent. Among white non-Hispanic children in D.C., by contrast, 3.7 percent are officially poor.

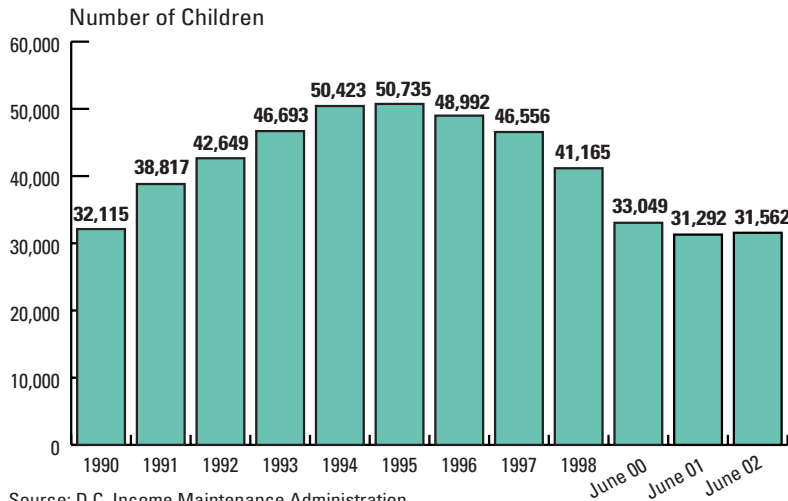
The fact that the poverty rate for Black children is nearly identical to that for children of single mothers is neither an error nor a coincidence. More than two-thirds of all D.C. Black families who are in poverty, 67.5 percent, are headed by single mothers with children. Married-couple families with children make up a smaller share of Black families in poverty - 6.8 percent — than of poverty families from all racial groups - 10.2 percent.

6. The number of children in the District who received financial assistance from the D.C. Government in June of 2002 was up slightly over the same month of 2001. This is the first time the number has increased since passage of welfare reform in 1996. (Fig. 9)

What was once known as welfare is now called TANF (Temporary Assistance to Needy Families). It signifies a new approach under which needy persons who are able to work may receive benefits only for a maximum of five years during their lifetimes. The emphasis is on moving

Figure 9

CHILDREN RECEIVING TANF* (WELFARE) ASSISTANCE Washington, D.C., 1990 - June 2002



Source: D.C. Income Maintenance Administration
* Temporary Assistance to Needy Families

such people from welfare to work as soon as possible.

TANF benefits are much lower than the poverty thresholds. A single mother with two children receives only \$379 a month or \$4,548 a year. As a result, when such a family is removed from the rolls because the parent now holds a minimum-wage job, its income is much higher than before.

If the parent does not try to find work, then the payment to the parent is cut off, but the children's benefits continue. (In common with only 12 states, the District does not terminate benefits to the children when the responsible adults fail to comply with work requirements.)

The District has also implemented special outreach programs to help those families who face serious barriers to employment - such as physical and mental handicaps, substance abuse problems, and low literacy.

In fiscal year 1995, the last year before the Welfare Reform Act was passed, an

average of 50,735 D.C. children received Welfare assistance per month. That number decreased every year thereafter until in June of 2001 it was down to 31,292 — a 38 percent drop.

By June of 2002, however, the number had risen slightly, and now stood at 31,562. Some persons who had left the rolls before exhausting their benefits may now be returning. Others who had never before been on welfare may be losing their jobs and being forced to apply.

This is the first time since the Welfare Reform law was enacted that there has been an economic downturn affecting the District. The shaky national economy, the falling stock market, and the after-effects of 9/11 have all been felt here. Many hourly-wage workers have been laid off, and many of these are not eligible for unemployment insurance.

Other indicators reported in this year's Fact Book, like a rapidly increasing unemployment rate and an escalating number of homeless families, indicate that the local situation is fast becoming worse.

The District Government has responded proactively. It has used the flexibility provided in the federal welfare law to continue providing some assistance to families that have reached the five-year limit but still have not been able to become self-sufficient. And local funds support families whose earners are temporarily incapacitated.

The city has also begun implementing new programs to assist long-term recipients who are approaching the time limit — approaches such as intensive job services, subsidized transitional jobs, and adult basic education grants.

Bonus awards from the federal government for high performance have helped support the District's program initiatives on behalf of poor families and children. The U. S. Department of Health and Human Services awards two types of bonuses to jurisdictions among the 50 states and the District of Columbia that are especially successful in (1) reducing out-of-wedlock births, and (2) moving needy people from welfare to work.

Of seven bonus awards announced to date, the District is the only jurisdiction to receive as many as six. The latest, \$19.8 million for reducing out-of-wedlock births in Fiscal 2002, brings the total so far to \$91.1 million.

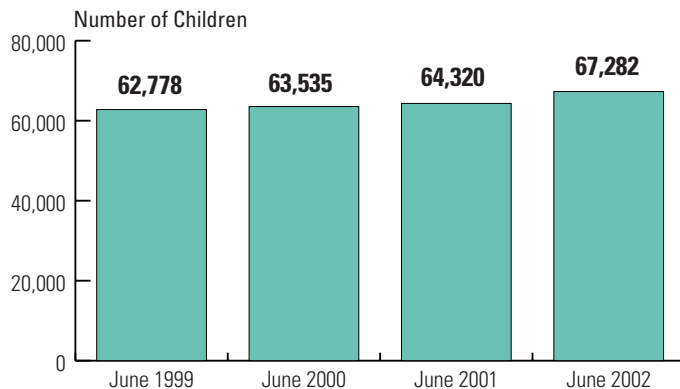
Despite these successes, the District faces worrisome uncertainties as the economy, both locally and nationally, continues to falter.

7. The number of children receiving food stamps has decreased slightly since June of 2001.

As of June 2001, the number of children receiving food stamps was 35,902. A year later, in June of 2002, child food stamp recipients numbered 35,412 — lower by a relatively small 490, or a bit over one percent, than the year before.

Figure 10

CHILDREN RECEIVING MEDICAID
Washington, D.C. — June of 1999, 2000, 2001 and 2002



Source: D.C. Income Maintenance Administration

In a recently released study, the U. S. Department of Agriculture announced that the District had achieved 100 percent food stamp participation in 1999, and was the only state where participation was significantly higher in that year than in 1994.

8. The number of District children receiving Medicaid has increased since 1999, and in 2002 the growth has accelerated.
(Fig. 10)

In June of 1999, 62,778 children under 18 residing in D.C. received Medicaid assistance. By June of 2000, the number of children on Medicaid had grown to 63,535, or by about 1.2 percent.

The June 2001 number was 64,320, again up by 1.2 percent. The rate of increase accelerated thereafter. By June of 2002, the number of child recipients was 67,282 - 4.6 percent greater than in 2001.

The overall increase during this four-year period has been 7.2 percent. Access to Medicaid, once available only to the very poorest, has now been extended to persons living in households whose incomes are under 200 percent of the poverty line. This

includes many of the working poor who previously could not afford proper medical care.

The widening of access to Medicaid benefits was made possible by an act of Congress passed in 1997. Beginning shortly after its passage, the D.C. Income Maintenance Administration has conducted an aggressive outreach campaign to encourage participation in the Medicaid program by all who are eligible. Many methods are being used in an effort to reach everyone who can benefit.

For children, especially, this is of critical importance. Proper medical care given now can prevent serious health problems later. In an October 2002 report, the D.C. Primary Care Association states that "DC has found and enrolled an impressive number of children in Medicaid."

C. FAMILY ATTACHMENT AND COMMUNITY SUPPORT

1. Only one-third of the District's children now live with both parents in those parents' own households.

Of the 114,992 children under 18 counted by the 2000 Census, only 33 percent — 37,532 — lived in married-couple families. A much larger 40 percent — 45,455 — lived with a single mother.

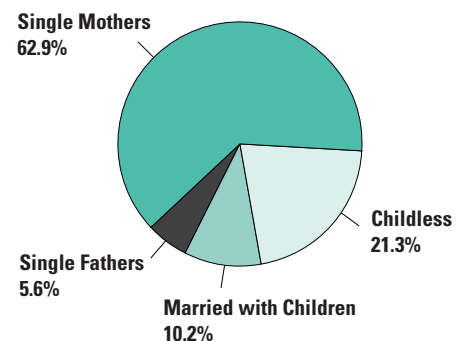
The third largest number, nearly 15 percent or 16,723 kids, resided in households headed by grandparents, while almost five percent or 5,374 lived with other relatives such as aunts or cousins. Thus, nearly one D.C. child in five was being raised in a home headed by a relative who was not that child's parent. Another five percent, 5,912, lived with single fathers.

2. The type of family a child lives in affects that child's chances of escaping poverty. *(Fig. 11)*

Which kind of family they live in has profound effects upon D.C. kids' chances of escaping the impediments poverty so often creates to their efforts to make a good life for themselves.

Figure 11

FAMILIES IN POVERTY BY TYPE
District of Columbia, 2000



Source: 2000 Census

Of all D.C. households who were in poverty at the 2000 Census, 63 percent were headed by single mothers. Another nearly six percent were headed by single fathers.

Married-couple families with children who were related to them (including grandchildren, nieces and nephews) accounted for only 10 percent of poor households. Since grandparents and other relatives are providing homes for nearly 20 percent of the District's children, it is clear that they are keeping a large share of these kids out of poverty.

The remaining one-fifth of poor families were childless.

3. **The percentage of all births that were to single mothers fell for the fourth straight year in 2000 to reach 60 percent. It has now fallen below its level in 1988, before its rapid escalation to nearly three-fourths in 1993.** (Fig. 12)

In 1993, 73 percent of the District's babies were born to single mothers. The drop of 13 percentage points since then stalled only once, in 1996, and then resumed the very next year. Still, even if the recent rate of decline can be maintained, it will take years more before over half of all D.C. children are born into married-couple families.

4. **Also for the fourth year in a row, births to mothers still in their teens have fallen, reaching a new low level of 14.2 percent.** (Fig. 13)

In 1989, 18.1 percent of all births were to mothers under 20. The percentage dropped steadily until 1992, reaching 16.2, then rose sharply to 17.1 percent. Two more years of decline followed, but were interrupted in 1996 with another sudden increase to 16.8 percent. Once more the decline resumed the next year, and by 2000 births to teens were fewer by nearly four percentage points than in 1989.

5. **In 2001, the number of cases alleging paternity filed with the D.C. Courts fell abruptly from 1,658 to 998.** (Fig. 14)

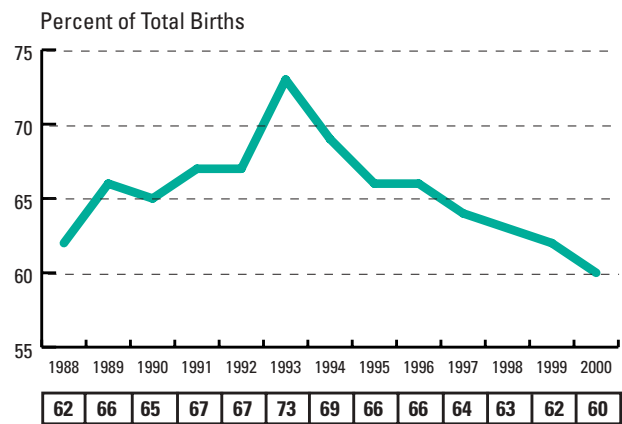
Although the number of paternity cases has often fluctuated wildly from year to year in the past, this is the first time in more than a decade that the number has dropped below 1,000. Despite the fluctuations, the general trend has been downward since 1992, when the number was 2,795. In only one year since, 1994, has it been above 2,000.

6. **The District's handling of paternity and child support cases has fallen under a cloud.**

As this year's Fact Book was being prepared, The Washington Post reported that Karen A. Kelsey, a single mother, has produced evidence proving that a paternity test — performed by a contractor hired by the District — was false. The false test had caused the Court to reject her claim to child support. Experts believe that the genetic testing method used in these cases is highly reliable; only human impropriety and/or mismanagement can cause

Figure 12

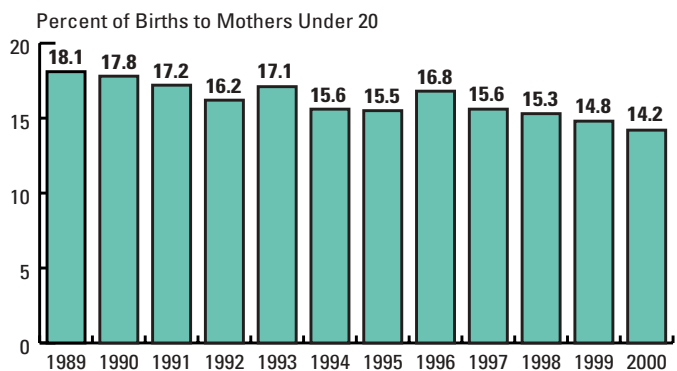
PERCENTAGE OF BIRTHS TO SINGLE MOTHERS
District of Columbia, 1988 - 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

Figure 13

PERCENT OF BIRTHS TO TEENAGE MOTHERS
District of Columbia, 1989 - 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

an erroneous result. An investigation is underway, and could bring criminal charges.

At the same time, the Post has revealed that the federal government has warned the District it could lose millions of dollars because its Child Support Enforcement Division has failed on three child support performance indicators, and could not demonstrate that its data were reliable. In 2000, the District made collections in only 12 percent of its 128,000 child support cases. The national average is 42 percent.

Especially due to the problems that have arisen with the District's paternity and child support enforcement procedures, single mothers are most likely not receiving the financial support they could be. The more financial support that single mothers can get, the more that will positively impact the child poverty in the District, which is so heavily concentrated in single-mother households.

7. Child support cases declined again for the seventh consecutive year in 2001, reaching 637.
(Fig. 15)

Support cases filed with the Court now stand at only one-fourth of the peak number of 2,562 reached in 1994. On this measure, as on every other indicator of family attachment and community support for which we have annual measurements, the peak was reached between 1992 and 1994, and there has been substantial downward movement since.

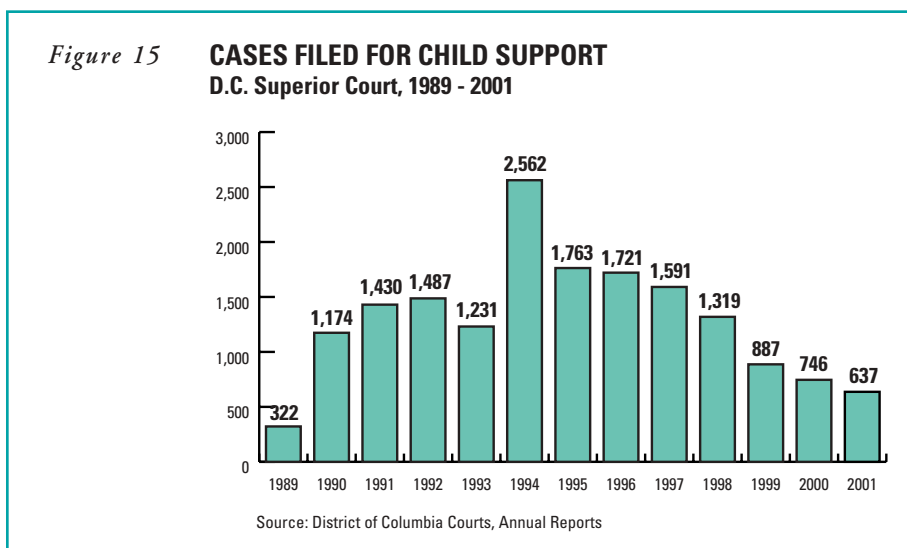
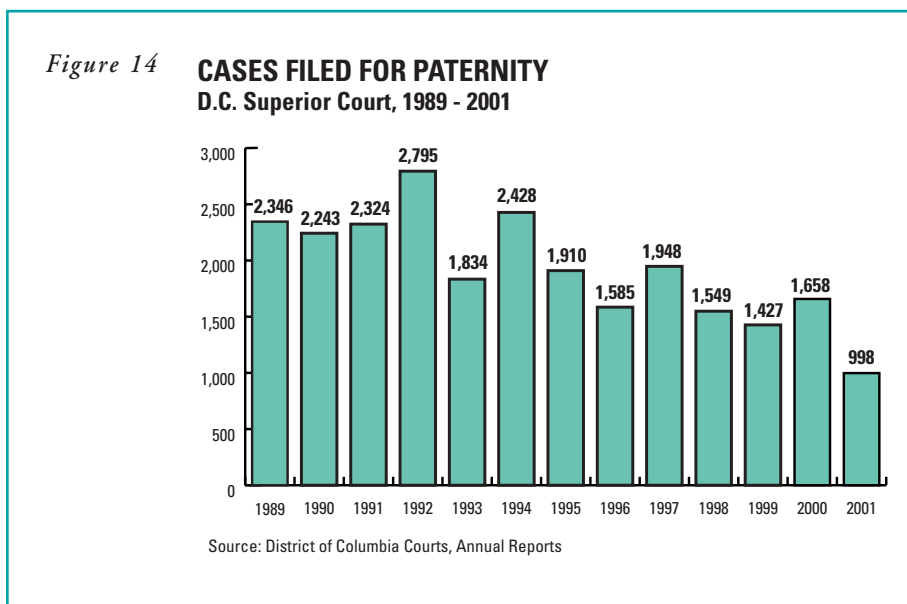
Part of the reason could be that out-of-wedlock births have declined. But perhaps many single parents have concluded that it is not worth the effort to seek the help of the Court.

Ms. Kelsey had waited nearly two and a half years from the time she applied for support before she received a hearing. After being told her claim was unfounded, she then had to pay \$141 for a second test that proved her correct.

In 2001, 13,061 paternity and child support cases were either pending from the previous year, had been newly filed, or were reinstated or reactivated. During the year, only 4,564 of these cases were disposed of — barely more than one in three. Most of the remaining claimants will have to wait at least a year more to be heard. Their children will wait as well.

8. Subsidized child care, an important support for working poor mothers and their children, had been growing rapidly. It is now being cut back due to budget constraints. (Table 1)

As of August 2002, the District of Columbia's Office of Early Childhood Development (OECD) reports that nearly 20,000 children were being served by subsidized child care programs. Nearly half of these children were being cared for in the network of community-based center and home programs with subsidies from OECD and the rest in the After Care for All Program operated by the D.C. Public Schools and funded by OECD.



These programs help assure parents who are employed that their children will be well taken care of while they are at work outside the home, or attend training. For many parents, they are the reason they are able to work.

Financial support for subsidized child care comes from TANF funds and from a federal Child Care Block Grant program. One-third of total funding is by local matching funds.

In Fiscal Year 2002, children have been cared for in 235 child development centers, 140 family child care homes, and 130 school sites. The program also supports 33 relative providers and seven in-home providers.

In Fiscal Year 1999, these programs served 13,337 children. By 2001, the number had increased by 78 percent to reach 23,801. This year, with budget constraints, it has been cut back to 19,921 as of August 2002.

D. HOMELESS CHILDREN AND FAMILIES

1. The number of homeless families applying for shelter in the District continues to mount. It has more than doubled since 1999. (Fig. 16)

The number of families applying for emergency shelter at central intake for families increased from 1,276 in 2000 to 2,278 in 2001, a 78.5% increase from 2000 and a 137% increase from 1999. This is the second consecutive year since 1996 that showed an increase in the demand for emergency shelter for families and is the highest number of applicants since 1996. These applicant families included 4,949 children.

Among the children whose families applied for shelter in 2001, 57 percent were five years of age or younger, an increase from 55.3% in 2000. A total of 789 families, including

Table 1
Subsidized Child Care Programs, District of Columbia, 1999-2002

Program Area/Fiscal Year	1999*	2000	2001	2002**
DCPS After Care for All:				
# children served	6,000	7,000	12,350	10,000
# school sites	39	56	100	130
OECD:				
# children served	7,337	7,653	11,451	9,921
# family child care homes	101	112	124	140
# child development centers	200	216	222	235
# in-home providers	20	15	14	7
# relative providers	41	34	31	33
Total # children served	13,337	14,653	23,801	19,921

* DCPS figures are for January - September 1999 only.

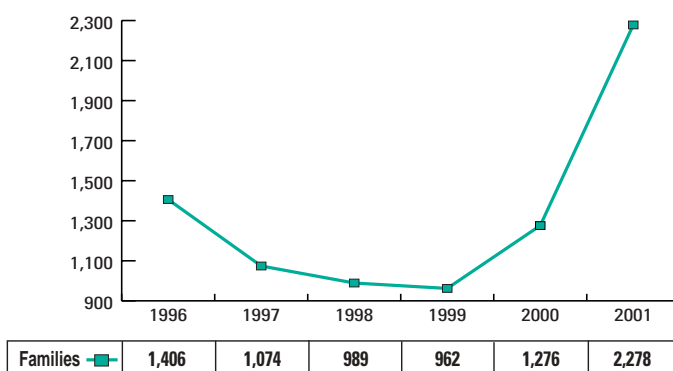
All other program area figures are for entire fiscal year.

** figures for FY 2002 are through August 2002.

Source: D.C. Department of Human Services, Office of Early Childhood Development

Figure 16

HOMELESS FAMILIES APPLYING FOR SHELTER AT CENTRAL INTAKE District of Columbia, 1996-2001



Source: The Community Partnership for Prevention of Homelessness

2,557 people, were served in emergency shelter apartments or by alternative services accessed through central intake. An additional 69 families (201 people) were served in the two emergency programs that serve victims of domestic violence in 2001.

The above statistics represent only a portion of the services and housing programs available through the public homeless continuum of care adminis-

tered by the Community Partnership for the Prevention of Homelessness. Overall, the continuum, which includes homelessness prevention, day care, job training, emergency shelter, transitional housing and permanent supportive housing programs served 1,816 families including 5,766 persons. Housing programs alone served 1,133 families including 3,578 persons.

E. CHILD HEALTH

As has been the case throughout the history of D.C. Kids Count, the latest data available to us for most indicators of children's health are now two years old — dating to 2000. A few items — those dealing with AIDS, sexually transmitted diseases, and immunizations — are for 2001.

The vital statistics and most other health data are collected through an interstate program coordinated by the U.S. National Center for Health Statistics (NCHS). Since the data deal with events that occur to D.C. residents wherever they may be at the time, they must be assembled by NCHS from state health departments throughout the entire country. The timing of their availability to us is not within the control of the D.C. Department of Health, which can provide them to D.C. Kids Count only after it receives them from NCHS.

The data we published last year, which were for 1999, showed disturbing reversals in the year-to-year trends for three major indicators — the percent of mothers receiving adequate prenatal care, infant mortality, and low birth weights. All had been improving, but had slipped back in 1999. These trend shifts appeared to us to be related, inasmuch as adequate prenatal care is vital to infant health.

Fortunately, vigorous efforts by those concerned with the health of the District's children appear to have caused all three to reverse again in 2000, resuming their former improving trend.

The latest year's data show that not only had these trends shifted back in 2000, but all three measures had returned to more favorable levels than they had been at two years before. The 1999 reversal now seems an anomaly. Hopefully next year's numbers will confirm this impression and show still further improvement.

1. The percentage of D.C. mothers who received adequate prenatal care increased sharply in 2000, rising from 59.0 in 1999 to 65.1 in a single year. (Fig. 17)

This change not only reversed a considerably smaller decline in this indicator between 1998 and 1999 (when it had decreased from 60.7 percent to 59.0 percent). It also restored the level to very nearly the previous rapid rate of improvement. The percentage whose prenatal care was adequate had risen substantially every year from 1993, when it was only 44.8, through 1998, when it was 60.7. The latest rise — more than six percentage points in a single year — was nearly twice the average annual gain during the intervening period.

Adequacy of prenatal care is measured by the Institute of Medicine criteria using a somewhat complex method that takes into account both the length of the pregnancy and the total number of prenatal visits.

Generally, prenatal care is considered adequate if (1) the mother began receiving it in the first three months, and (2) had at least nine visits if the pregnancy lasted the full nine months,

or proportionally fewer if gestation was shorter. Full details of the method will be found in Section V, "A Word About the Data."

For mothers at the other end of the care scale, those who received inadequate care or no care at all, the percentage continued to drop in all three years from 1998 to 2000. It was 17.3 percent in 1998 and 16.6 percent in 1999. It then dropped sharply to 12.3 percent in 2000.

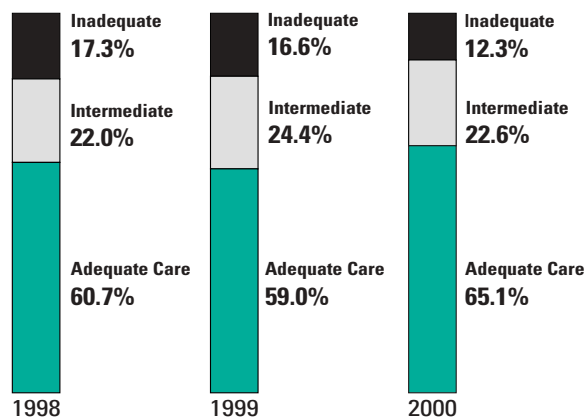
The deterioration in the percentage for whom prenatal care was judged adequate that occurred in 1999 had been due to a rise in the percent of mothers whose care was defined as "intermediate" — neither fully adequate nor seriously inadequate. That percentage dropped in 2000 also, but not quite to its 1998 level.

2. The District's infant mortality rate, which had broken a four-year decline in 1999 with a sharp rise from 12.5 deaths per 1,000 live births to 15.0, also resumed its former downward trend. (Fig. 18)

The infant mortality rate had been improving rapidly, though irregularly,

Figure 17

ADEQUACY OF PRENATAL CARE FOR D.C. MOTHERS (PERCENT OF MOTHERS) 1998, 1999 and 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

throughout most of the first half of the 1990s. But that trend had suddenly reversed in 1994, raising the rate from 16.7 per 1,000 births to 18.2.

The downward movement had then resumed the very next year, however, and had continued downward for another four years before abruptly shifting course again in 1999.

This reversal also lasted only a single year. In 2000 infant mortality began dropping again, this time from 15.0 to 11.9. While this was a new low, the overall year-to-year rate of improvement, which had already been decelerating, continued to slow.

3. The percent of infants born too small, with weights under 5 1/2 pounds, had also broken an improving downward trend in 1999. But the deterioration was smaller than for the other indicators, and this reversal also proved temporary. It was followed in 2000 by the largest decrease since 1989. (Fig. 19)

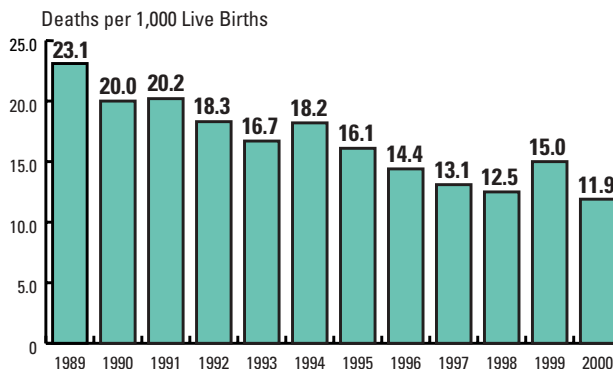
The percentage of low birthweight babies has tended to fluctuate both upward and downward more often than the two previous indicators. However, as the chart shows, the year-to-year changes have been relatively slight. In the nine years from 1989 through 1998, the total decline was only 3.0 percentage points.

In contrast, by 1998 the adequacy of prenatal care had improved by 15.9 percentage points over only five years, and the infant mortality rate had been nearly cut in half with a nine-year decline of 10.6 deaths per thousand.

Thus, the drop of 1.4 percentage points, from 13.3 to 11.9, that took place in the single year of 2000 was nearly half as great as had previously been achieved over a nine-year period. As with prenatal care and infant deaths, it essentially wiped out the increase of the year before.

Figure 18

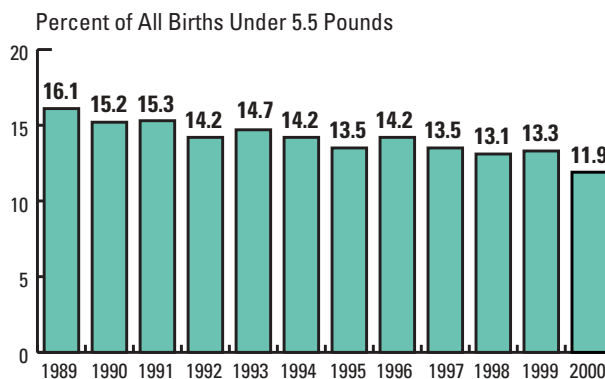
**INFANT MORTALITY RATE (UNDER ONE YEAR)
District of Columbia, 1989 - 2000**



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

Figure 19

**PERCENT OF LOW BIRTHWEIGHT INFANTS
District of Columbia, 1989 - 2000**



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

We can only hope that the improvements in these three indicators will not be interrupted again — but the deterioration in the District's economy that has occurred since the year 2000 data in this report were gathered poses a real and present threat to continued progress in these respects.

4. New AIDS cases diagnosed in children 12 and under have been diminishing in number rapidly since 1997. (Fig. 20)

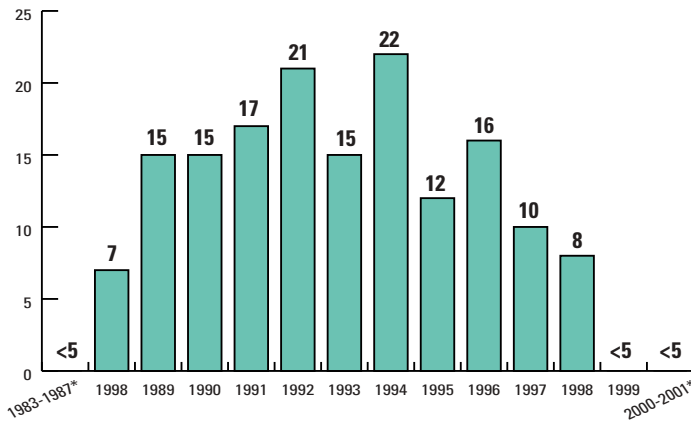
The D.C. Administration for HIV/AIDS has furnished their data to us this year in a new format. For the first time, we are able to show the

change in new cases diagnosed over time since they first appeared in the early 1980s.

Previously we had received these statistics only in a cumulative form showing the total number ever diagnosed. They were available only at two-year intervals, and no information was included on previous years.

The new format is a great improvement in many respects. To prevent any chance of revealing the identity of individual children, however, exact numbers of cases are not reported for individual years in which there were fewer than five new cases. Some of

Figure 20 AIDS CASES DIAGNOSED BY YEAR AMONG CHILDREN 12 AND UNDER District of Columbia, 1983 - 2001



Source: D.C. Department of Health, Administration for HIV-AIDS
 *Numbers not shown for years with fewer than 5. 11 cases reported in 1983-1987, 5 in 1989-2001.

these years have been combined in the charts.

The number of additional AIDS cases among children under 13 peaked in 1994 at 22, then dropped to 12 in 1995, and rebounded in 1996 to 16. Since then the number has declined each year. Fewer than five new cases were reported diagnosed in 1999, and again in the years 2000 and 2001 combined.

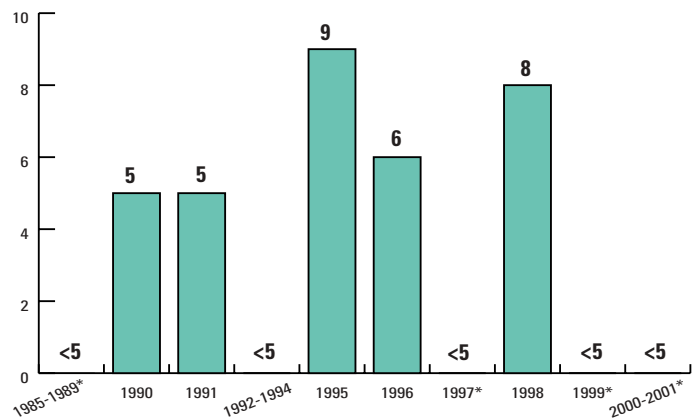
More than 95 percent of AIDS infections in young children have been transmitted from the mother either before or at the time of birth. In 1994, a study showed that by administering the drug AZT to pregnant women with AIDS, HIV transmission to their babies could be cut by about two-thirds. Since then the number of cases in the under-12 age group has declined rapidly.

The total number of AIDS cases ever diagnosed in D.C. children 12 and under now equals 174. Of these children, 92 are still living while 82 have died.

5. AIDS cases diagnosed in children from 13 through 17 years have also been declining since 1998. (Fig. 21)

The number of new AIDS cases diagnosed in children aged 13 to 17 peaked in 1995 at nine. The total dropped to six in 1996 and to fewer than five in 1997, but then rebounded to eight in 1998.

Figure 21 AIDS CASES DIAGNOSED BY YEAR AMONG CHILDREN 13 THROUGH 17 District of Columbia, 1985 - 2001



Source: D.C. Department of Health, Administration for HIV-AIDS
 *Numbers not shown for years with fewer than 5. 13 cases reported in 1985-1989, 8 in 1999-2001.

In the three years since then, the numbers have declined continuously. Fewer than five new cases were reported in 1999, and in 2000 and 2001 combined. Again, exact numbers for these years, and for those prior to 1990, from 1992 to 1994, and in 1997, have been suppressed to protect the privacy of the children.

In the case of these older children, two factors have contributed to the decline in AIDS infections: the widespread use of AZT among infected pregnant women, and administration of HAART (Highly Active Anti-Retroviral Therapy) to children already infected.

It would be premature to conclude that the AIDS epidemic in children and teens is nearing an end, but these data are definitely encouraging. However, as long as adults continue to engage in unsafe sexual behavior, the risk will continue that more children will get the disease.

Of a total of 58 children in the 13-17 age group diagnosed with the disease to date, 42 are still living while 16 have died.

6. The total number of cases of the three most common sexually transmitted diseases among persons under 20 increased in 2001 after declining for three straight years. (Fig. 22-23)

The three diseases that are most often transmitted through sexual contact are chlamydia, gonorrhea, and syphilis. Most people have heard of the last two, but chlamydia still is hardly a household word. Yet it has been spreading faster than either of the other two, and now is the most common sexually transmitted illness both nationally and in the District of Columbia. It is also the leading cause of sterility among women.

The total number of cases of the three diseases combined among persons aged 19 and under increased slightly in 2001, rising to 2,107 from 2,082 the year before. The growth was due solely to chlamydia, where the increase was from 1,297 to 1,331. Gonorrhea cases remained exactly constant at 758 cases in each year, while syphilis cases declined in number from 27 to 18.

Persons under 20 now suffer 40 percent of all diagnosed cases of chlamydia, 26 percent of gonorrhea infections, and just under four percent of cases of syphilis. About one child or teen in 65 was diagnosed with one of them in the past year.

7. Immunization rates have fallen somewhat below the 1999 level in both 2000 and 2001, in both the District and the nation. (Fig. 24)

Each year the federal Centers for Disease Control and Prevention survey the rates of immunization for major childhood diseases among two-year-old children (defined as those between 19 and 35 months old). The survey covers all states and the District of Columbia, and also produces results for a number of large cities.

Figure 22

CASES OF CHLAMYDIA, GONORRHEA AND SYPHILIS DIAGNOSED IN PERSONS UNDER AGE 20

District of Columbia, 1997 - 2001

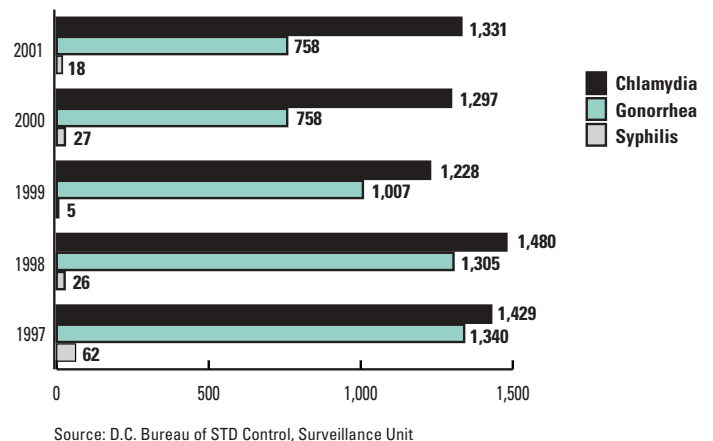
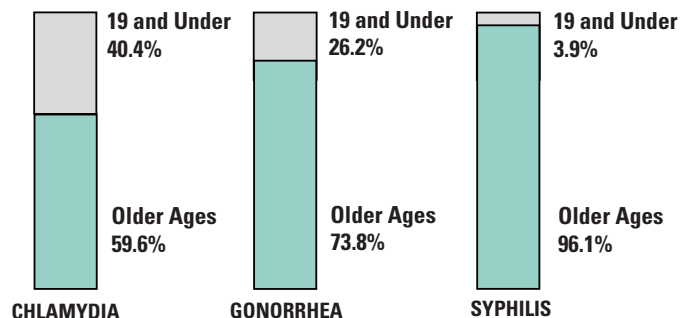


Figure 23

PERCENT OF DIAGNOSED CASES OF CHLAMYDIA, GONORRHEA, AND SYPHILIS BY AGE GROUP

District of Columbia, 2000



Vaccinations are offered free of charge to all children. One combined vaccine protects against Diphtheria, Tetanus, and Pertussis (whooping cough) and is commonly called “DTP.” A series of three or four vaccinations is generally given. Another, given in a single dose, protects against Measles, Mumps, and Rubella (German measles).

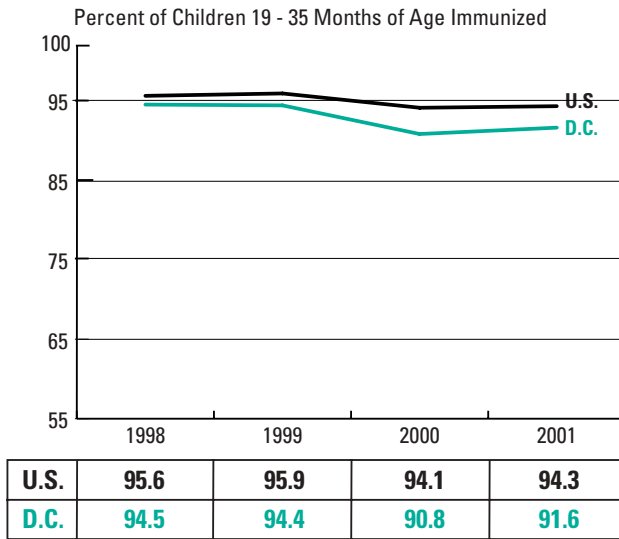
Other vaccines protect against single diseases such as Polio (three immunizations); Haemophilus Influenza Type b or “Hib,” (three); Hepatitis B (three), and Varicella or chickenpox (one).

The vaccination rate for DTP (three or more doses) is generally the highest for any disease or combination of diseases. The national vaccination coverage for DTP fell between 1999 and 2000 from 95.9 percent to 94.1 percent. It then recovered a bit in 2001, but only to 94.3 percent.

Coverage rates for other major diseases generally fell also. Most states and major cities followed suit. The District of Columbia’s rate for DTP was only somewhat over one percentage point lower than the nation’s in 1998 and 1999. But it fell to 3.3 points below at 90.8 percent in 2000.

Figure 24

VACCINATION COVERAGE - 3 OR MORE SHOTS FOR DIPHTHERIA, TETANUS, PERTUSSIS
United States and District of Columbia, 1998 - 2001*



Source: U.S. National Immunization Survey
 * Data based on sample. 95% confidence limits in 2001 were U.S.: +/- 0.5; D.C.: +/- 3.9

Then when the national rate rose by 0.2 percentage point to 94.3 percent in 2002, the D.C. rate rose by 0.8 points to 91.6 percent, somewhat narrowing the difference. (The survey data are based on a sample and thus are subject to sampling error. So the numbers, particularly for individual states and the District, are approximate.)

While the District is often treated as a state for federal statistical purposes, it is really a major central city with a large poverty population.

Considered on this basis, its DTP vaccination coverage rate is more properly compared to that of other large cities, such as Baltimore (90.7 percent in 2001), Detroit (88.3 percent), Philadelphia (92.7 percent), or Houston (88.5 percent).

F. SAFETY AND PERSONAL SECURITY

- 1. Deaths to children and teens in the District totaled 158 in 2000. This was a considerably lower number than in 1999, when there were 194.** (Fig. 25-26)

The 1999 total of child and teen deaths, 194, broke a rapid downward trend that had reduced the number of

fatalities to persons under 20 from 282 in 1995 to 185 in 1998, or by 34 percent in only three years. The latest figure has not only wiped out that one-year increase, but also restored the downward trend — albeit not at quite as fast a pace as before.

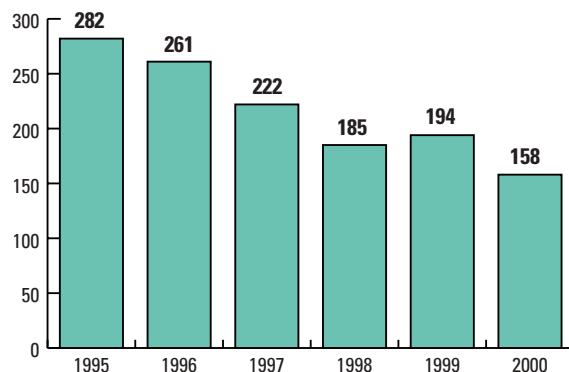
The largest number of child deaths continues to occur in the first year of age. There were 91 deaths to infants under one year in 2000, 58 percent of the total. This figure, however, was down from 113 in 1999 — a drop of 22 deaths or nearly one-fifth in a single year, the largest for any age group.

This improvement almost certainly was due to the increase in the percent of mothers receiving adequate prenatal care in 2000. In 1999, a decline in adequacy of care had been accompanied by a sudden one-year increase in infant deaths. Often these early fatalities occur to children who were born at abnormally low weights under 5 1/2 pounds.

The second largest numerical decline in deaths, and the largest of all relative to the previous total, occurred to teens from 15 to 19. They decreased in number from 53 in 1999 to 40 in 2000. This 13-death drop amounted to nearly one-fourth of the previous year's number. Happily, this change reversed a one-year increase in teen

Figure 25

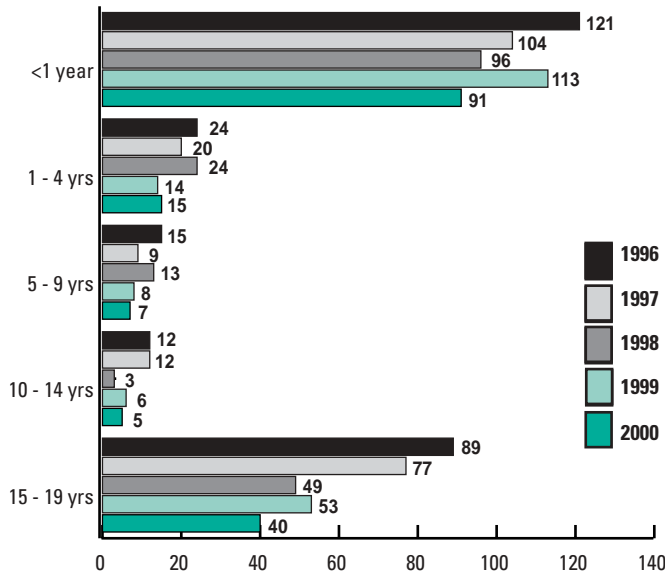
DEATHS TO CHILDREN AND TEENS UNDER 20
District of Columbia, 1995 - 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

Figure 26

CHILD AND TEEN DEATHS BY AGE
District of Columbia, 1996, 1997, 1998, 1999 and 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

deaths that had occurred the year before and had been a cause for concern.

In the one-to-four-year age group there were 15 deaths, an increase of one from 1999. Among children from five to nine, deaths decreased by one, from eight to seven. The same was true for the 10 to 14 age group, for whom the number dropped from six to five.

2. Violent deaths to teens ages 15-19 decreased again in 2000, extending a declining trend that began in 1994 for a seventh year. (Fig. 27)

There were 37 deaths to teens in the 15-19 age group through violent causes. This was a decrease of seven violent deaths from 44 in 1999. That figure, in turn, had been down by only two from 1998, when it was 46. In 2000, these were either homicides or accidents; there were no suicides by youths in this age bracket.

When last year's report was produced, it appeared that the rate of decline might be leveling out or perhaps even beginning to reverse direction. Happily, the latest figure has alleviated that concern, at least temporarily. However, the rate of decline remains slower than in most recent years.

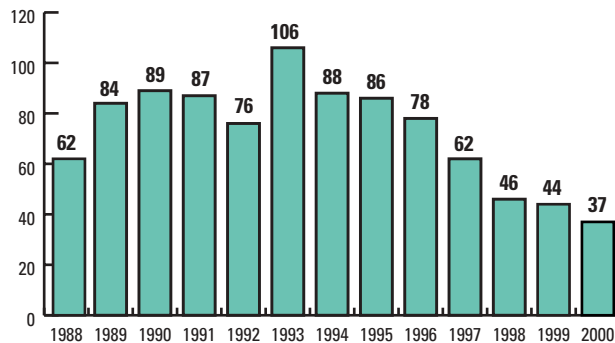
3. Teen murders decreased in 2000, canceling a one-year reversal of a prior downward trend. (Fig. 28-29)

The number of D.C. youngsters age 15 to 19 who died through homicides or assaults in 2000 totaled 31. That was eight fewer murders of teens in this age group than had occurred in 1999. Nonetheless, the year 2000 number was only two less than in 1998. The reason is that there had been a sharp increase in 1999 to 39 murders, from 33 the year before.

While the downward trend that began in 1996 has been restored, the rate of

Figure 27

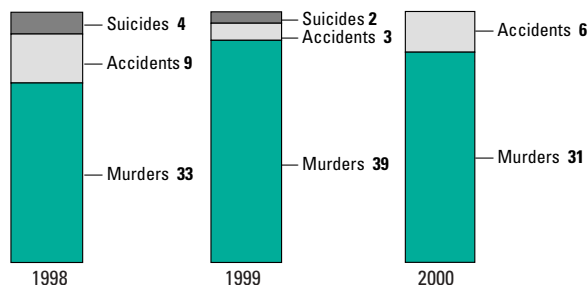
VIOLENT DEATHS TO TEENS AGES 15 TO 19
District of Columbia, 1988 - 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

Figure 28

CAUSES OF VIOLENT DEATHS TO TEENS 15 TO 19 YEARS OLD
District of Columbia, 1998, 1999 and 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration

decline has slowed. And the number of teens murdered each year remains more than double that in 1987, when there were 15.

Six persons in the 15-19 age group died through accidents in 2000, three more than the year before. No suicides were reported in 2000.

Note: The annual statistics on legal indicators of child well-being that follow are generated locally by the District of Columbia Courts rather than being filtered through a national network, as are most vital and health statistics. Hence the latest figures are for 2001, a year later than those presented in the first part of this section.

4. The number of child abuse cases increased sharply in 2001, after declining for the previous two years. However, wide year-to-year fluctuations in this indicator of child well-being have occurred in the past. Since 1993, there appears to be no trend, either up or down. (Fig. 30)

Between 2000 and 2001, the number of cases alleging child abuse filed with the courts jumped from 156 to 268, a 72 percent increase. Nonetheless, such cases remain far less frequent than in the late 1980s and early 1990s, as the chart shows.

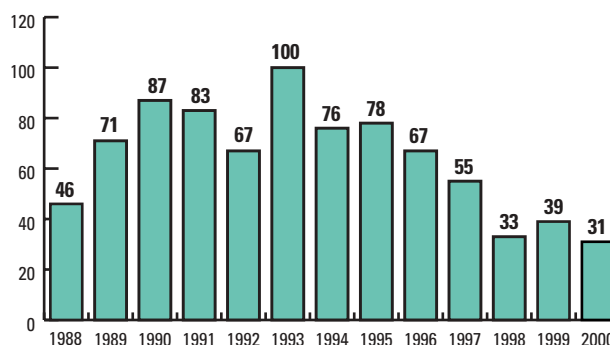
The year 2000 had marked the lowest number in the past decade, and even the 2001 rate was lower than in seven of the previous 12 years. The number of cases is now barely more than half that of 1990. For this reason, and because abuse cases do fluctuate quite widely, the rise in 2001 should not be viewed as necessarily marking a new trend, but this indicator bears close watching in the present economy.

5. Child neglect cases have declined for the past four years, but at a slow and irregular pace. This

Figure 29

DEATHS TO TEENS AGES 15 TO 19 BY HOMICIDE / ASSAULT*

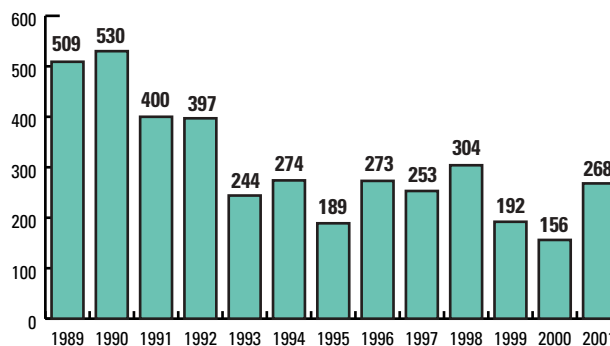
District of Columbia, 1988 - 2000



Source: D.C. Dept. of Health, State Center for Health Statistics Administration
 * As of 1999, the new federal cause of death classification system separates legal intervention from homicide/assault. Previously they were combined.

Figure 30

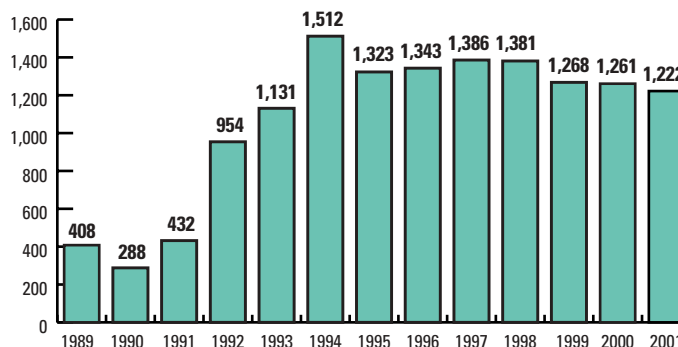
CASES FILED FOR CHILD ABUSE
 D.C. Superior Court, 1989 - 2001



Source: District of Columbia Courts, Annual Reports

Figure 31

CASES FILED FOR CHILD NEGLECT
 D.C. Superior Court, 1989 - 2001



Source: District of Columbia Courts, Annual Reports

indicator now stands much higher than when the 1990s began. (Fig. 31)

In 1990, 288 cases alleging neglect were filed with the D.C. Courts. In 2001, there were 1,222 — more than four times as many. Furthermore, since 1995, the year-to-year changes, either up or down, have usually been relatively small. The one exception was in 1999, when they declined by 113. This year's level is lower than 2000's, but by only 39 cases.

- 6. **Infants under one year of age were much more likely to be victims of neglect than children of older ages in 2001, as shown by cases referred to the D.C. Courts. Cases alleging abuse, while also more likely to involve infants, were more evenly distributed over the age scale.** (Fig. 32)

The data available from the Courts combine children one year old and older into age groups — 1-3 years, 4-6, and so on. The accompanying chart shows the distribution of abuse and neglect cases by these age groups. Table 2 shows how abuse and neglect cases differ in number on a per-single-year-of age basis.

- 7. **Petitions filed with the D.C. Superior Court for civil orders of protection against domestic violence increased in both 2000 and 2001. However, the number granted was virtually unchanged in 2000 and has decreased in the latest year.** (Fig. 33)

In 2001, 4,111 petitions were filed with the Court asking protection against domestic violence. This was an increase of 396 or nearly 11 percent from the 3,715 filed in 2000. That year had also seen an increase, amounting to 234 petitions or nearly seven percent, from the number in 1999.

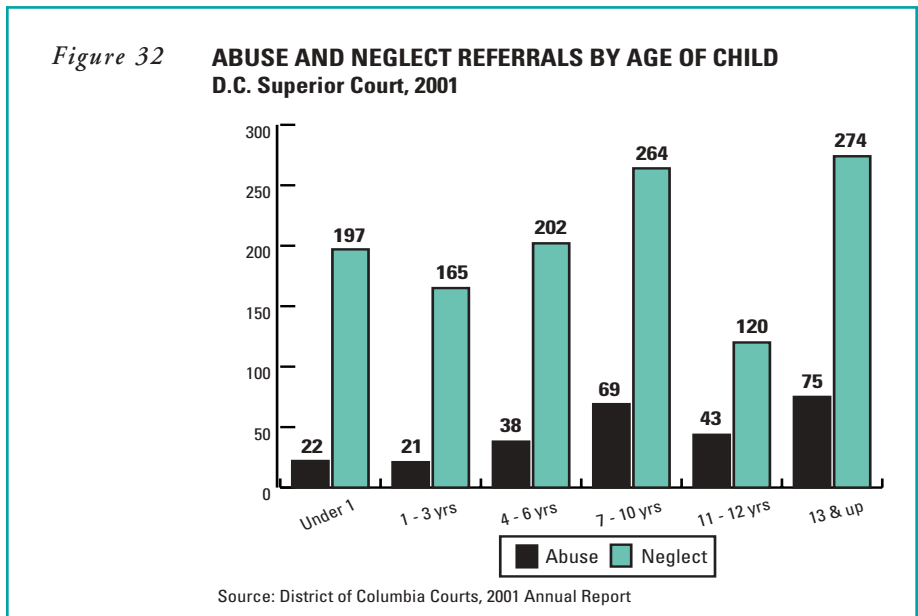


Table 2 Number of Abuse and Neglect Cases Filed with D.C. Courts By Age Category and per Year of Age, 2001

Age of Child	ABUSE CASES		NEGLECT CASES	
	Total Cases	Per Single Year of Age	Total Cases	Per Year of Age
Under 1 Year	22	22	197	197
1-3 Years	21	7	165	55
4-6 Years	38	13	202	67
7-10 Years	69	17	264	66
11-12 Years	43	22	120	60
13-17 Years	75	13	274	46

Source: District of Columbia Courts, 2001 Annual Report

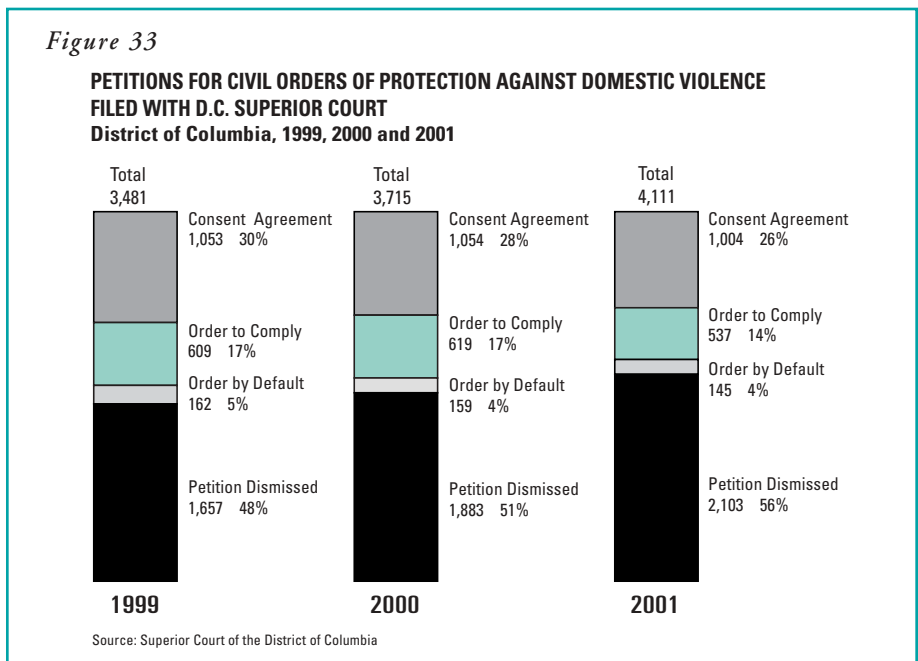
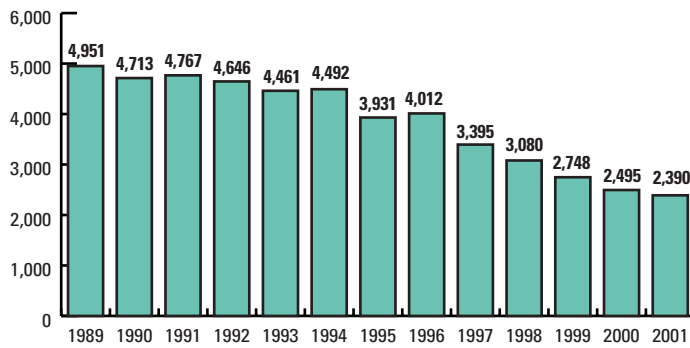


Figure 34 JUVENILE CASES REFERRED TO D.C. SUPERIOR COURT FOR ALL CAUSES, 1989 - 2001



Source: District of Columbia Courts, Annual Reports

However, the number of consent agreements remained virtually constant between 1999 and 2000, varying by only one. Orders to comply and orders by default both changed by only single-digit amounts between those years. However, the number of petitions dismissed increased by 226, and the percentage of petitions dismissed grew from 48 to 51.

In 2001, as the total number of petitions continued to grow, the number of consent agreements achieved dropped by 50. Orders to comply dropped from 619 to 537, and the percent that they made up of all actions decreased from 17 to 14. Orders by default also decreased slightly, from 159 to 145, but their

share of the whole changed only fractionally, remaining at four percent.

The number of petitions dismissed rose from 1,883 to 2,103, and grew from 51 percent to 56 percent of the whole. Hence, only 44 percent of all petitions to the Court now achieve a favorable outcome. According to a Court source, most dismissals occur because the petitioners fail to follow through with the legal process.

Domestic violence contributes to homelessness. As noted in Section D of this edition, the Community Partnership for the Prevention of Homelessness reports that two emergency programs for victims of domestic violence served 69 families with 201 members in 2001.

8. Juvenile cases referred to the D.C. Superior Court continued to decline in number in 2001. This is the fifth consecutive decrease; but the overall trend has been downward for more than a decade, and has accelerated since 1995. (Fig. 34)

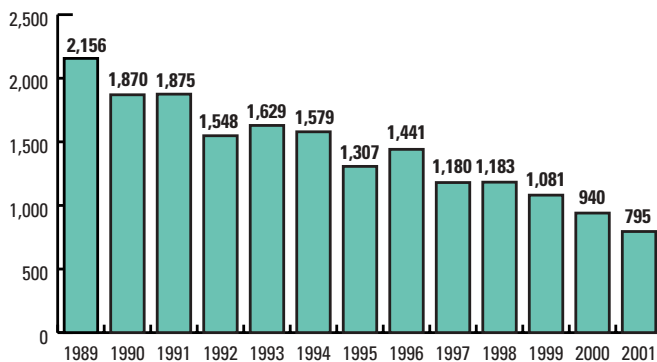
At 2,390 new cases in 2001, the juvenile caseload is now less than half as large as it was as recently as 1989. Until 1994 the number vacillated within a fairly narrow range in most years. Yet it nonetheless declined overall by 459 or nine percent.

Then there was a sudden sharp drop of 561 cases, over 12 percent, in the single year of 1995. A small one-year reversal in 1996 was followed by an even larger drop of 617 cases in 1997. Every year since has seen a further decline, but the downward trend has been slowing. Still, from 1996 to 2001, juvenile cases of all types combined have dropped by 40 percent.

9. “Acts Against Public Order” have historically been the most common crimes of which juveniles in the District have been accused. Throughout most of the past decade, their total number has been decreasing while their share of all youth crimes has grown. In 2000 both the total number and their percentage of the total decreased. This year, for the first time, their number has fallen below 800 and they are now in second place with 33 percent of the total. (Fig. 35)

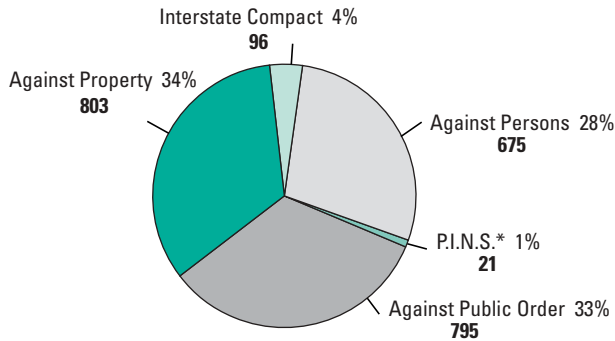
“Acts Against Public Order” constitute a miscellaneous group of offenses, the most common of which involve drugs and weapons. A total of 795 cases alleging public order crimes were brought against D.C. youth in 2001. This was the first time in well over a decade that their number has dropped below 800. It has decreased by 63 percent since 1989, and by 45 percent

Figure 35 JUVENILE CASES REFERRED TO D.C. SUPERIOR COURT FOR ACTS AGAINST PUBLIC ORDER, 1989 - 2001



Source: District of Columbia Courts, Annual Reports

**Figure 36 JUVENILE NEW REFERRALS BY TYPE OF ACT
D.C. Superior Court, 2001**



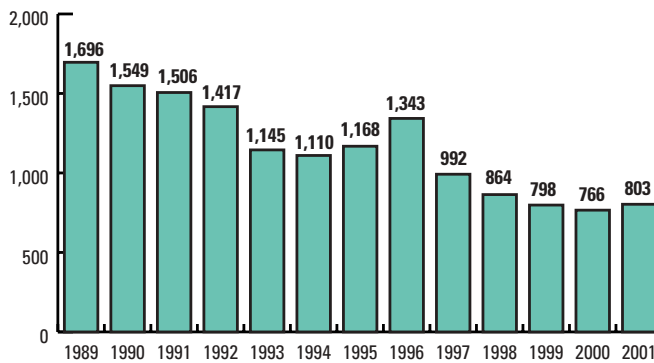
Source: District of Columbia Courts, 2001 Annual Report
*Persons in Need of Supervision

since 1996 alone. The pace of the decline has accelerated over the past three years.

Narcotics charges — either sales or possession — are the most common of the public order offenses, with 58 percent of the total in 2001. Weapons charges make up another 17 percent.

10. Property crimes are now the most common type of offense of which D.C. youth are accused. With 803 cases in 2001, this is the only major category that has shown an increase. As a result it has now become the most common with 34 percent of the total. (Fig. 36-37)

Figure 37 JUVENILE CASES REFERRED TO D.C. SUPERIOR COURT FOR ACTS AGAINST PROPERTY, 1989 - 2001

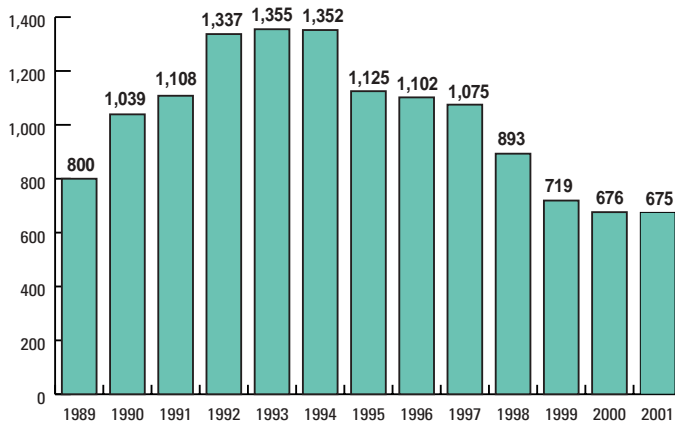


Source: District of Columbia Courts, Annual Reports

“Acts Against Property” include burglary or attempted burglary, larceny, vandalism, property theft, and “unauthorized use of auto.” By far the most common of these are auto thefts, which accounted for 64 percent of the total in 2001.

Like public order crimes, property crimes have decreased greatly in the past decade. There are now fewer than half as many as in 1989. In 1999 and 2000 their number dropped below 800 and reached a new low of 766 in 2000. But in 2001 they rebounded to 803, which brought them just narrowly ahead of public order crimes. Essentially, however, their number appears to have become fairly stable, with little change over the past three years.

Figure 38 JUVENILE CASES REFERRED TO D.C. SUPERIOR COURT FOR OFFENSES AGAINST PERSONS, 1989 - 2001



Source: District of Columbia Courts, Annual Reports

11. The number of alleged offenses by juveniles against persons has remained almost exactly constant in 2000 and 2001. (Fig. 38)

District youths were charged with a total of 675 “Acts Against Persons” in 2001. That number is one less than the 676 alleged in 2000. Person crimes include assaults, homicides, kidnappings, and robberies. The trend of such cases over time has been

quite different from that of either public order or property crimes. Both of these others have declined in number, although somewhat irregularly, since the beginning of the past decade.

Crimes against persons, on the other hand, rose sharply at the beginning of the period, then peaked in 1992 through 1994, and began declining thereafter. Since that time, their number has tended to change only slightly for three successive years, forming a sort of plateau. Then it has dropped suddenly and sharply, and then gone on to establish another plateau for three more years before dropping once again.

Trend formations that look like these are rare in any kind of statistics describing human behavior. We know of no explanation for them. The first such three-year plateau lasted from 1992 through 1994 and the second from 1995 through 1997. It appears that the 1998-2001 period could be a third. Will the numbers then decline once more? Next year's statistics will tell the story.

G. EDUCATION

1. The D.C. Public Schools serve a student body that is gradually becoming more multicultural. (Fig. 39)

Between 1990 and 2001, the racial/ethnic composition of the D.C. Public Schools became somewhat more diverse, although not dramatically so. In percentage terms, Black students, who were 90 percent of those enrolled in 1990, had decreased to 84 percent by 2001.

Children of school age (5-17 years) who were identified as "Black alone" in the 2000 Census were only 77 percent of all children that age, but many others were classified in the Census results as of "Two or More Races" (four percent) or of "Some Other Race Alone" (seven percent). It is probable that a number of these children were also recorded on the school rolls as Black, making up the percentage difference.

The shares of other racial and ethnic groups grew somewhat, between 1990 and 2000. Hispanics, who had been

five percent in 1990, had increased their share to nine percent by 2001. Asian and other racial groups had doubled their share from one to two percent. Whites' percent of the total had increased from four to five.

The total D.C. Public School enrollment had decreased from 80,694 in 1990 to 68,449 in 2001. In numerical terms that was a drop of 12,245 students or 15 percent. Blacks, who were the overwhelming majority of the student body in both years, saw their enrollment drop even more. It shrank from 72,474 to 57,751 — a loss of over 14,700 students, or 20 percent of Black students' 1990 total.

Two other groups gained numerically, however. Hispanic enrollments grew from 4,199 to 6,427, a gain of 2,338 or slightly over half. Asian and other students increased from 898 to 1,153 — up by 255, or 28 percent. The number of white students remained almost exactly constant. It decreased by only five, from 3,123 in 1990 to 3,118 in 2001. However, since the total enrollment was declining, their percentage share of that total increased from four to five.

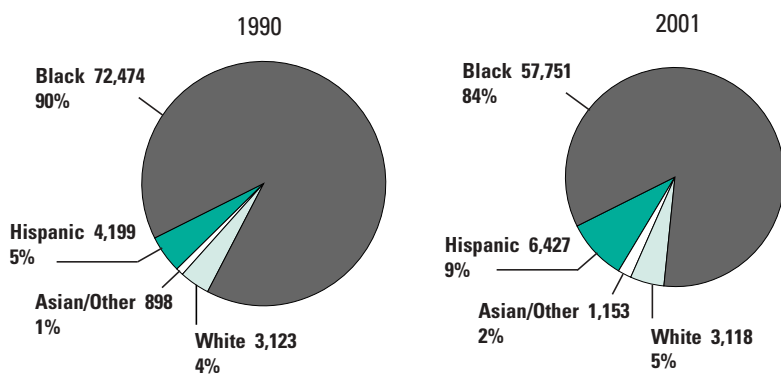
The number of language minority students rose from 6,769 (8.4 percent of the total) in 1990 to 8,215 (12.0 percent) in 2001. During that period the number of students with limited or no English capability increased from 3,732 (4.6 percent) to 5,281 (7.7 percent).

2. Nearly three-fourths of students in the public schools are now eligible for free and reduced price lunches. The percentage has grown from just over half in the 1990-91 school year. (Fig. 40)

In school year 1990-91, 51 percent of D.C.P.S. students were eligible by the low incomes of their parents to receive school lunches either free or at a reduced price. That percentage had

Figure 39

RACIAL/ETHNIC COMPOSITION OF STUDENT BODY D.C. Public Schools, 1990 and 2001



Source: Data Prepared by Mary Levy for Parents United for D.C. Public Schools
Note: Relative sizes of pies are proportional to total enrollment in each year

increased to 72 in 1996-97. It then dropped back somewhat over the next three years, reaching 63 percent in 1999-2000. But the percentage who were eligible rebounded sharply to a new high of 73 in 2000-2001. It remained at the same level in 2001-2002.

Probably the recent shifts in the trend reflect the District's changing economy to some degree — first, the decline in the level of unemployment in the late 1990s, followed by a rebound as the new millennium began. In part, the recent increase is also due to an effort to encourage more students to file for eligibility.

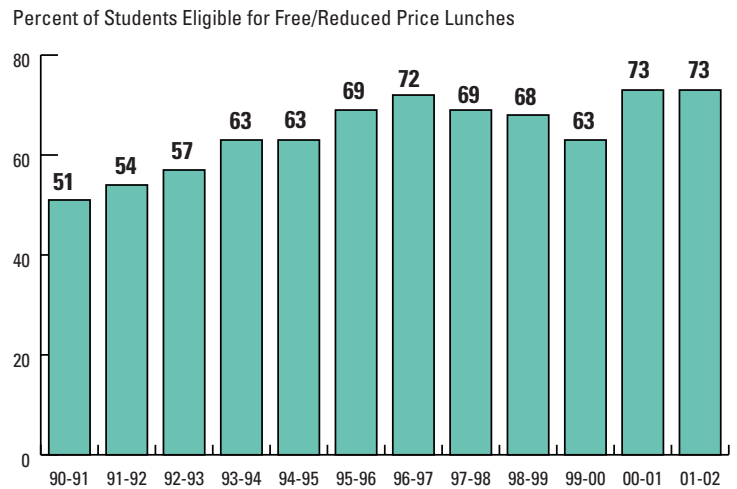
Overall, the figures reveal how many of the city's public school students, and the schools that try to teach them, must overcome obstacles placed in their way by poverty and near-poverty and the difficult living conditions that go with them.

3. The number of special education students served by the Schools has increased by 72 percent since 1990.

In 1990, 6,290 special education students were served by the D.C. Public Schools. By 2001, while the total enrollment of the schools was decreasing, the special education enrollment had increased to 10,833 or by 72 percent. These students now make up more than one D.C.P.S. student in six. Of all special education students, 22 percent are being educated in special schools to which the school system pays tuition.

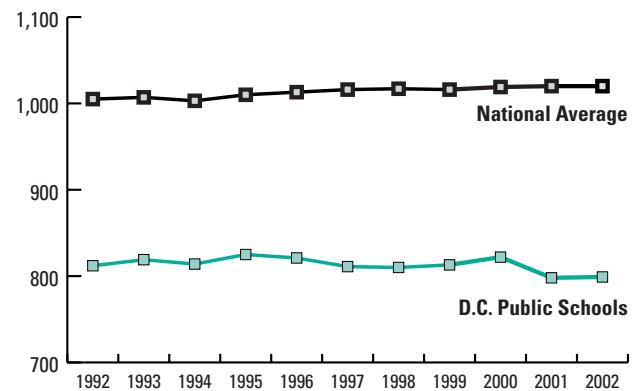
4. The combined math and verbal scores of D.C.P.S. students on the SAT rose in 2002 by one point — reversing a sharp decline in 2001, but leaving them still far below the national average. (Fig. 41-42)

Figure 40 FREE AND REDUCED PRICE LUNCHES IN D.C. PUBLIC SCHOOLS SCHOOL YEARS 1990-91 to 2001-02



Source: Data Prepared by Mary Levy for Parents United for D.C. Public Schools

Figure 41 COMBINED MATH/VERBAL SCORES ON SAT D.C. Public Schools vs. National Average, 1992 - 2002



D.C.P.S.	812	819	814	825	821	811	810	813	822	798	799
Nat'l Avg	1,005	1,007	1,003	1,010	1,013	1,016	1,017	1,016	1,019	1,020	1,020

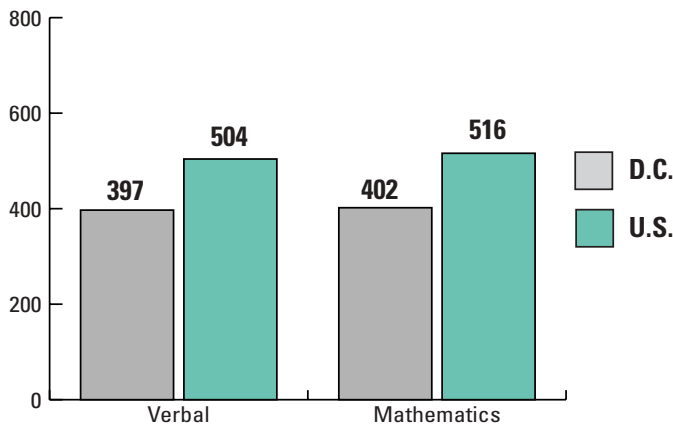
Source: Data Prepared by Mary Levy for Parents United for the D.C. Public Schools

The District's combined score on the SAT reached its lowest point of the past decade at 798 in 2001 — the first time it had dropped below 800 since 1992. Throughout that period the level had sometimes risen and sometimes fallen, but until 2000 its lowest point had been 810. (A change in the College Board's scoring procedures rendered scores prior to 1992 not comparable.)

The high point of the decade was in 1995, at 825. The second highest came in 2000, when it was 822. That was followed in 2001 by a 24-point drop. This year's rise to 799 only begins to repair the damage. But substantial rises have occurred before, and may again. There was one of 11 points in 1995 and another of nine points in 2000.

Figure 42

DIFFERENCES IN SAT VERBAL AND MATH SCORES BETWEEN THE DISTRICT AND THE NATION IN 2002



Source: Prepared by Mary Levy for Parents United for the D.C. Public Schools

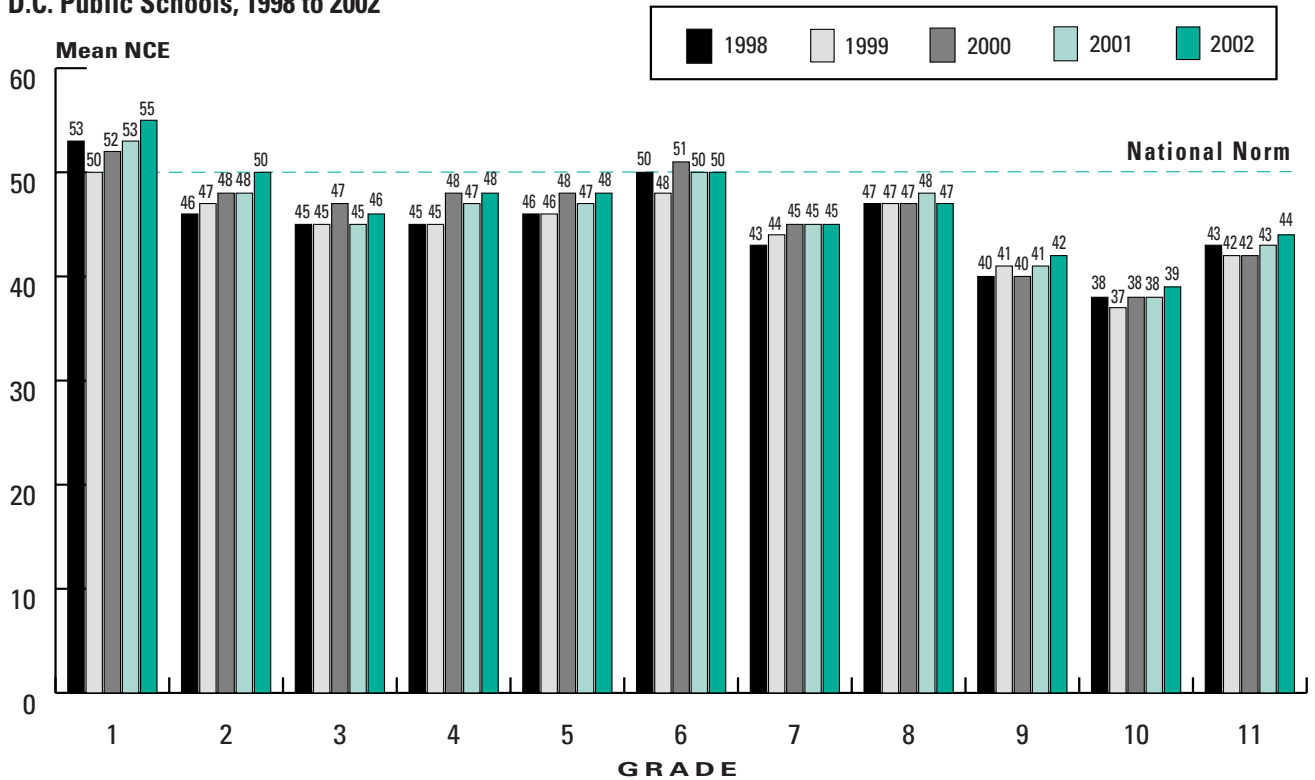
The national average held steady from 2001 to 2002 at 1,020. The District's level is 221 points lower. The one-point increase in the District's combined score in 2002 was due to an equal rise in the verbal component, from 396 to 397. The math component held steady at 402 in both years.

5. Reading performance levels of D.C.P.S. students on the Stanford 9 Achievement Test in Reading rose slightly in 2002 in nine of the 11 grades in which the tests are given. (Fig. 43)

Performance scores on the Stanford 9 tests are now reported by the D.C. Public Schools in terms of Mean NCEs (Normal Curve Equivalents). Previously the Schools reported the percentages of students performing

Figure 43

READING PERFORMANCE LEVELS BY GRADE STANFORD 9 ACHIEVEMENT TESTS D.C. Public Schools, 1998 to 2002



Source: Data Prepared by Mary Levy for Parents United for D.C. Public Schools
 Note: Numbers have been rounded for ease in reading.

at four different levels, from “below basic” (little or no mastery for the grade level) to “advanced” (superior performance, beyond grade level).

The new system makes the overall performance of students simpler to report and easier to grasp, but no longer makes it possible to distinguish among levels of performance. The national norm for all grades is 50.

The figures show the scores rounded to the nearest whole percent, and smaller differences are not clearly displayed. The text points out such differences, whether or not they are clear from these figures. Mean NCEs in reading were a bit higher in 2002 than in 2001 in all grades except seventh and eighth. In those two grades they were lower. All elementary grades and grades 9 through 11 showed at least slight improvement. Only in the first three

grades, however, did the scores increase by as much as one point.

Over the longer period from 1998 to 2002, however, substantial progress is more clearly apparent. In every one of the 11 grades, reading scores have improved overall during that time. In three grades — first, second and fourth — they have increased by more than two points. In grades 3, 5, 7 and 9, the improvement is greater than one point. In general, however, more progress is evident in the elementary grades than in middle or high school.

6. On the Stanford 9 Achievement Test in Mathematics, D.C.P.S. students have shown a bit less progress than in reading over the past year, but more since 1998. Here too, improvement has been most apparent in the earlier grades. (Fig. 44)

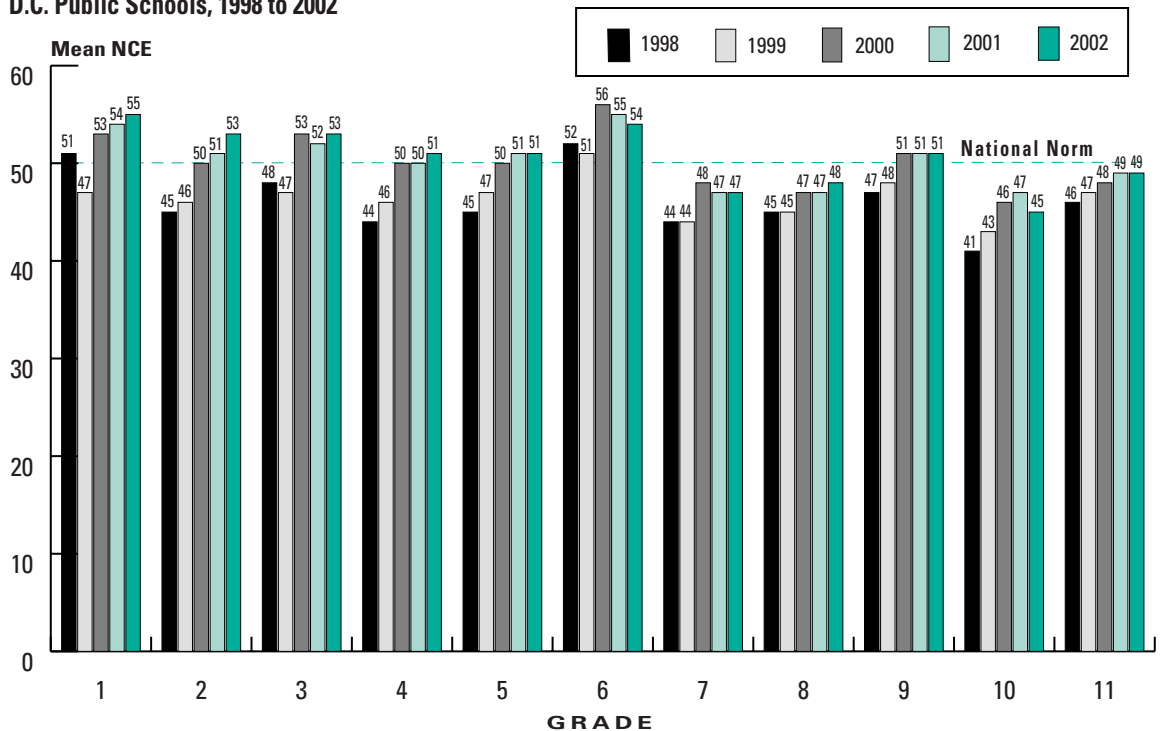
In math, scores improved between 2001 and 2002 in seven of the 11 grades, two less than in reading. However, there were three grades where the scores rose by one point or more. They were elementary grades 1, 2 and 4.

Between 1998 and 2002, as with reading, math scores improved across all 11 grades. The percentage point increases were greater in math. In two grades, 2nd and 4th, it was seven points or more. In 5th grade it was more than five. In four more grades, 1st, 3rd, 9th and 10th, it was four or more. In another three, 7th, 8th, and 11th, it was three or more. Only in grade 6 was the increase less than three percentage points — 2.7 to be exact.

Yet here again, as in reading, the greatest increases were in the elementary grades.

Figure 44

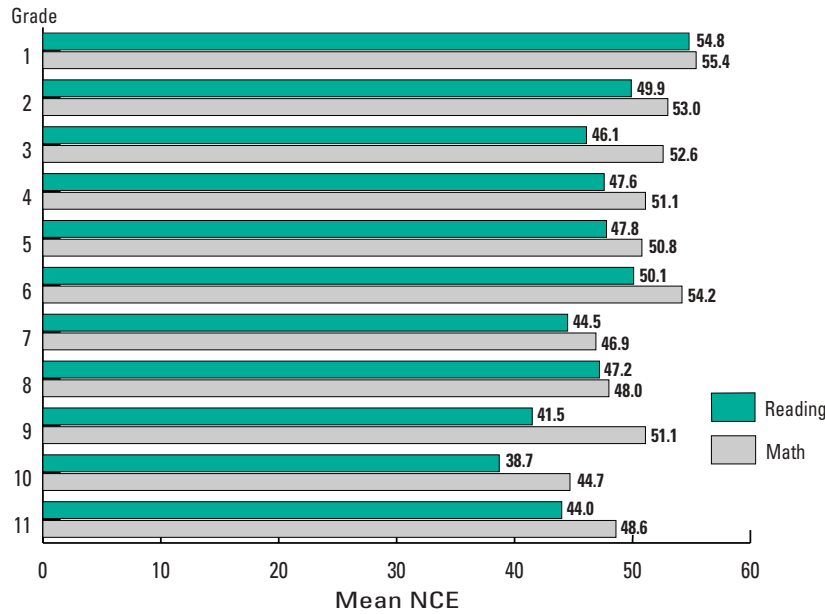
**MATH PERFORMANCE LEVELS BY GRADE
STANFORD 9 ACHIEVEMENT TESTS
D.C. Public Schools, 1998 to 2002**



Source: Data Prepared by Mary Levy for Parents United for D.C. Public Schools
Note: Numbers have been rounded for ease in reading.

Figure 45

**READING VS. MATHEMATICS PERFORMANCE BY GRADE
STANFORD 9 ACHIEVEMENT TESTS
D.C. Public Schools, 2002**



Source: Data Prepared by Mary Levy for Parents United for D.C., Public Schools

7. In every single grade, D.C. students perform better in math than in reading. Furthermore, the gap between math and reading scores widens in the higher grades. (Fig. 45)

Figure 45 shows that in first grade and all higher grades, the District's math score exceeds that for reading. In first and eighth, the difference is less than one full percentage point. In all other grades, the percentage point gap between math and reading is wider.

These differences become especially apparent in the higher grades, standing out particularly in 9th grade. The reasons are not apparent from the data, but finding out why they exist might be helpful in the school system's efforts to improve students' performance generally.

8. In 2001, the percent of D.C. students reading and performing math at the "Basic" level or better exceeded that of the nation in four of the 11 grades, and came within one point or less of the national norm on two more. (Fig. 46-47)

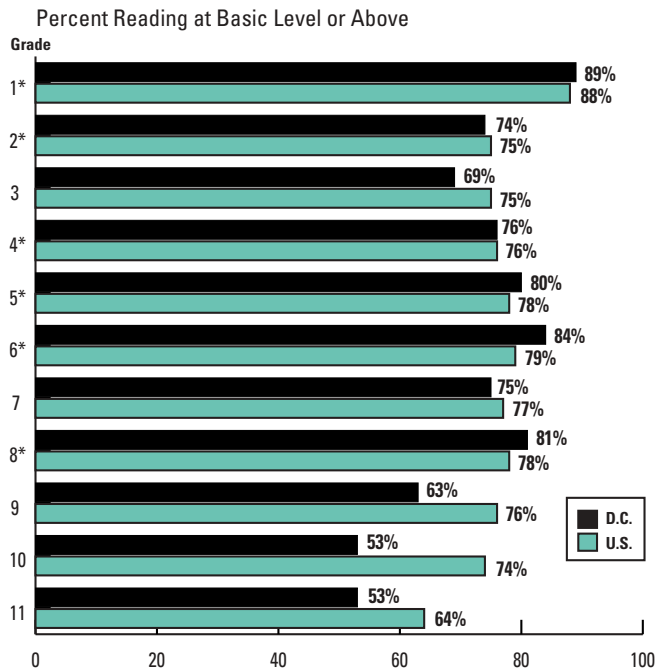
As of 2002, we no longer have access to the data that showed student achievement by performance levels. But we are re-running some of last year's charts here to help explore some questions we think may be important.

Achievement at the "Basic" proficiency level or above represents at least partial mastery of the skills necessary for grade-level performance. In the text of last year's report, we noted that students' reading performance at that level or above in 2001 actually exceeded national norms in four of the 11 grades — 1st, 5th, 6th, and 8th. We did not point out, however, that they equaled or came within one percentage point of the national reading scores in two more grades, 2nd and 4th.

In math, D.C. students' scores exceeded those for the nation as a whole in

Figure 46

**D.C. STUDENTS' PERFORMANCE VS. NATIONAL NORMS
STANFORD 9 ACHIEVEMENT TESTS IN READING
D.C. Public Schools, Spring 2001**



*Indicates grade in which D.C.P.S. exceeds national norm, or equals it within +/- 1%
Source: Division of Educational Accountability, D.C. Public Schools

four grades, 3rd, 4th, 5th and 6th. Moreover, in 1st grade D.C.P.S. children equaled the national norm, while in 2nd they came within one point of it.

We have added asterisks next to the grade numbers in figures 46 and 47 to make these points still clearer. These figures also show something else: with two exceptions (eighth grade in reading and 11th grade in math), the District's public school kids equaled or outdid the national norms only in the elementary grades.

9. In reading, the percentage of D.C. students performing at or above grade level in 2001 exceeded the national norm in first grade. In all grades above first, however, performance in D.C.P.S. fell well below that of the nation. (Fig. 48)

In first grade, 47 percent of D.C. public school kids scored "Proficient" (at grade level) or "Advanced" (above grade level) in reading in 2001. The national norm was 41 percent, a full six points lower.

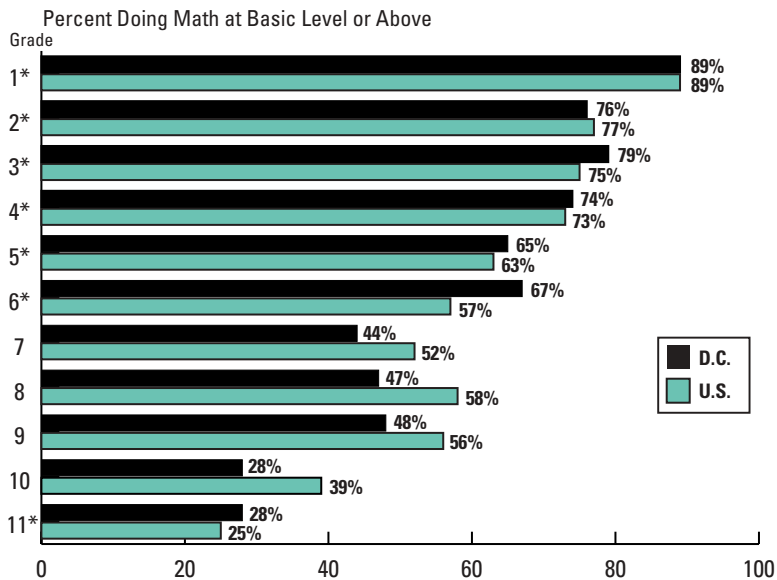
But beginning with second grade and in all higher grades, the District's performance fell below the nation's. Again, the differences became particularly stark in 7th grade and above. In both 9th and 10th grades, the percentage of D.C. students who read at or above grade level was less than half that of school children nationally.

10. The percent of D.C.P.S. children scoring at or above grade level in math in 2001 exceeded the national norms or came within one percentage point of them in six of the eleven grades. In other grades they fell below the nation, but the differences were not nearly so great as in reading. (Fig. 49)

The percentages of students nationally who performed math at Proficient" or "Advanced" levels in 2001 were generally below those for

Figure 47

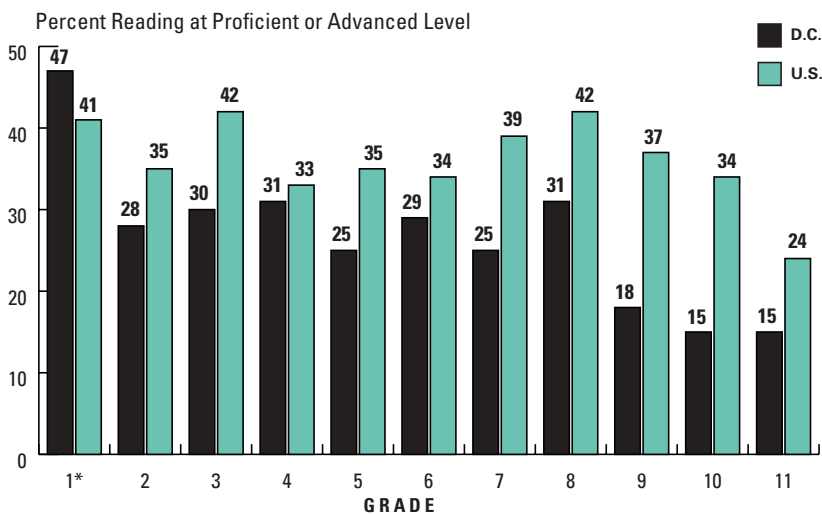
**D.C. STUDENTS' PERFORMANCE VS. NATIONAL NORMS
STANFORD 9 ACHIEVEMENT TESTS IN MATHEMATICS
D.C. Public Schools, Spring 2001**



* Indicates grade in which D.C.P.S. exceeds national norm, or equals it within +/- 1%
Source: Division of Educational Accountability, D.C. Public Schools

Figure 48

**PERCENT SCORING PROFICIENT OR ADVANCED IN D.C. vs. U.S.
STANFORD 9 ACHIEVEMENT TESTS IN READING
D.C. Public Schools, Spring 2001**



* Indicates grade in which D.C.P.S. exceeds national norm, or equals it within +/- 1%
Source: Prepared by Mary Levy for Parents United for D.C. Public Schools

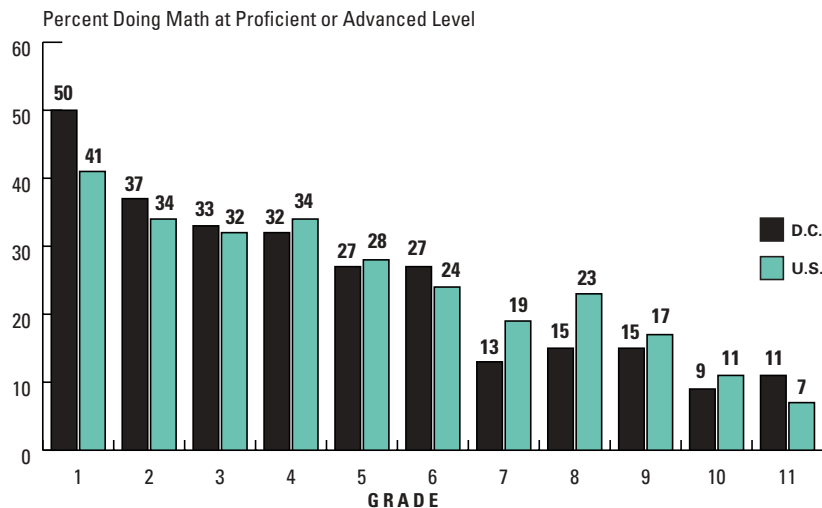
reading — and particularly in the higher grades. In this subject, D.C.P.S. students actually outdid school children nationally in 1st through 3rd grades, and again in 6th and 11th. They came within one percentage point of the nation in 5th grade.

Their 11th grade margin over the U.S. was especially impressive. While only eleven percent of D.C.P.S. students garnered math scores at or above grade level in 11th, this compared to a mere seven percent of kids in the nation as a whole.

11. Total enrollments in the District's publicly supported schools (both the traditional D.C. Public Schools and the new public charter schools) fell at an accelerating rate from 1993 through 1998, rose in 1999 and 2000, then essentially leveled off in 2001. (Fig. 50)

Figure 49

PERCENT SCORING PROFICIENT OR ADVANCED IN D.C. vs. U.S. STANFORD 9 ACHIEVEMENT TESTS IN MATHEMATICS D.C. Public Schools, Spring 2001



* Indicates grade in which D.C.P.S. exceeds national norm, or equals it within +/- 1%
Source: Prepared by Mary Levy for Parents United for D.C. Public Schools

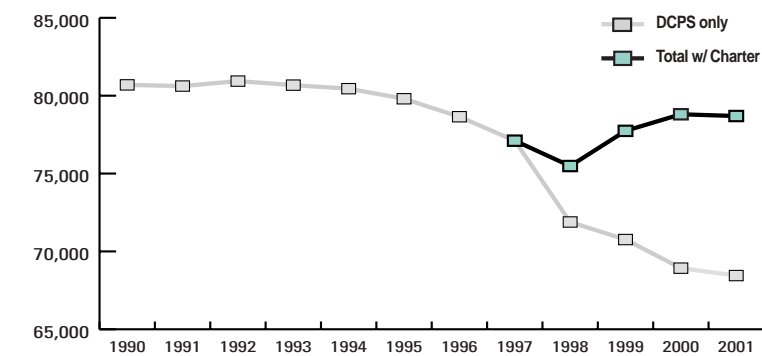
Between 1992 and 1997, official enrollments in the D.C. Public Schools fell from 80,937 to 77,111, or by 3,826 students. In the charter schools' first year, 1998, D.C.P.S. enrollments fell by 5,222 to reach 71,889 — a greater drop than in all the previous five years together.

The new charter schools enrolled 3,594 students in 1998, but the combined total nonetheless declined by 1,628. In 1999 the charter schools' enrollments nearly doubled, reaching 6,980. Although enrollments in D.C.P.S. continued to decline, the combined total rose to 77,742, higher by 631 than in 1997.

In 2000, charter school enrollments again skyrocketed to 9,881, nearly tripling the first year's number. The D.C.P.S. enrollment fell once again, but the combined total rose to 78,806, a bit above the 1996 level. In 2001, the charter schools' enrollment again rose, but this time by only 314 students. The D.C.P.S. number fell by a slightly greater 476, resulting in a net decline of 112 students in the combined total. Essentially, then, the combined enrollment has leveled out, at least for the moment, at somewhat under 79,000.

Figure 50

TREND IN OFFICIAL ENROLLMENTS FOR D.C. PUBLIC SCHOOLS ONLY AND FOR PUBLIC SCHOOLS AND PUBLIC CHARTER SCHOOLS COMBINED District of Columbia, 1990 - 2001



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
Total w/ Charter									75,483	77,742	78,806	78,694
DCPS only	80,694	80,618	80,937	80,678	80,450	79,802	78,648	77,111	71,889	70,762	68,925	68,449
Charter									3,594	6,980	9,881	10,195

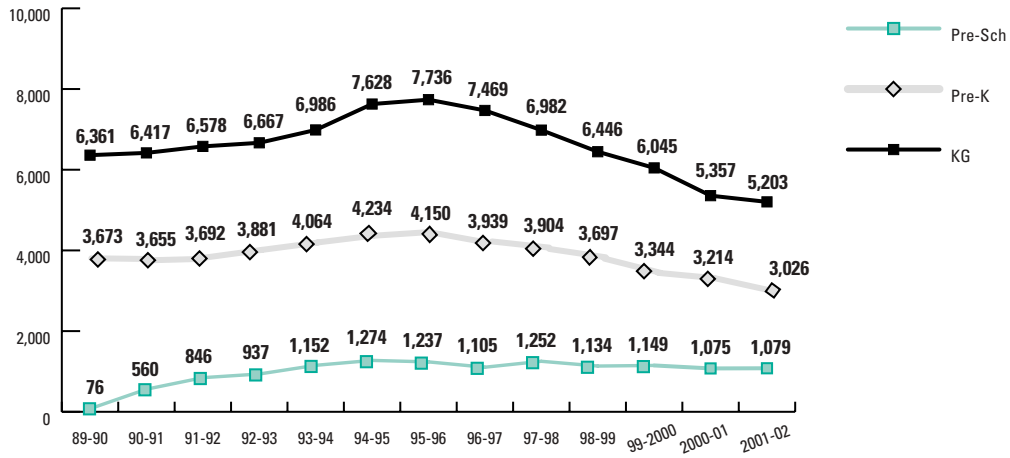
Source: D.C. Public Schools and Public School Charter Board

12. Enrollments in the D.C. Public Schools' Kindergarten and Pre-Kindergarten classes continued to decline in school year 2001-2002. Pre-School enrollments increased very slightly from the previous year. (Fig. 51)

Kindergarten enrollments in the D.C. Public Schools decreased from 5,357

Figure 51

**ENROLLMENT IN KINDERGARTEN, PRE-KINDERGARTEN, AND PRE-SCHOOL CLASSES
D.C. Public Schools, 1989-90 to 2001-02 School Year**



Source: Prepared by Mary Levy for Parents United for the D.C. Public Schools

in the 2000-2001 school year to 5,203 in 2001-2002, or by 2.8 percent. Enrollments in this grade began declining in school year 1996-1997, and have done so every year since. The previous year's decrease of 688 kindergartners was sharper than those earlier. But the latest year's loss of 154 is the smallest since the decline began. From the peak, the number is down by 2,533 or about one-third.

Pre-Kindergarten also continued a decreasing trend that started in

school year 1995-1996. This year's number, 3,026, is a loss of 188 youngsters or 5.8 percent from 2000-2001. It is larger than last year's decrease of 130, but fairly close to the yearly average since the decline began. The number of pre-kindergartners is now down by 1,208 or 29 percent from the peak.

Pre-Schoolers, with an enrollment of 1,079 in 2001-2002, have essentially held their own with an increase of four. This year's number is down by

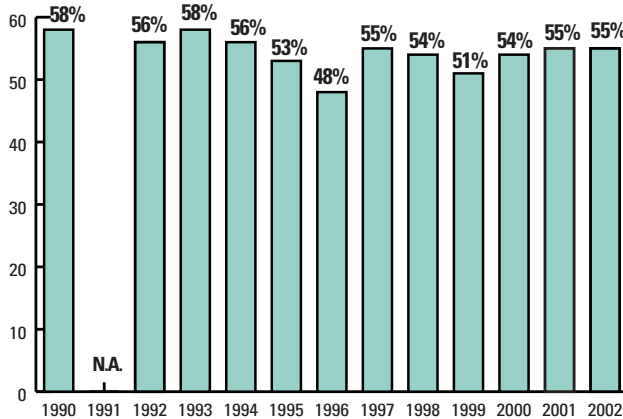
195 from the peak enrollment of 1,274 in 1994-1995.

The enrollment declines that began in pre-kindergarten in 1995-96 and in kindergarten in 1996-97, appear to reflect the decline in births that began in 1991. If the birth increase that began in 2000 continues, then we can expect to see enrollments in these grades begin to rise again around the middle of the current decade.

13. The graduation rate for D.C.P.S. students increased fractionally in 2002. (Fig. 52)

Figure 52

**GRADUATION RATE FOR CLASSES OF 1990 to 2002
D.C. Public Schools**



Source: Prepared by Mary Levy for Parents United for the D.C. Public Schools
* Data unavailable for 1991

The graduation rate for D.C. Public Schools, as reported by Parents United for the D.C. Public Schools, rose to an even 55 percent in 2002 from 54.7 percent in 2001 and 54.0 percent in 2000. On Figure 52, the 2001 number has been rounded to 55 percent.

At its present level, the rate is as high as it has been since 1994, when it was 56 percent. Since 1990 it has generally varied over a fairly narrow range between roughly 53 and 58 percent. The lowest it has gone is 48 percent (in 1996) and the highest is 59 percent (in 1993).

Parents United produces the graduation rate by first calculating the percent of attrition from 9th or 10th grade enrollments to the number of graduates, then subtracting that

H. YOUTH RISK BEHAVIOR

In this year's report we present data for the District of Columbia and the nation from the 2001 Youth Risk Behavior Surveillance, conducted under the auspices of the federal Centers for Disease Control and Prevention (CDC). We also compare the results for the District in 1999 and 2001.

Many of the problems confronting the District's kids are the result of their vulnerability to factors beyond their control. We do not expect children and teens to exercise the kind of judgment and self-control we ask of adults. Nonetheless, when they are unable to avoid negative influences and engage in risky behavior, the consequences can be unfortunate for them and sometimes for the entire community.

The data presented here may come as a shock to many readers. The 2001 Youth Risk Behavior Surveillance was a nationwide effort combining a national school-based survey conducted by CDC with 34 state surveys and 18 local surveys conducted by educational and health agencies. One of the local surveys was in the District.

The subjects were students in grades 9 to 12. The 2001 surveillance, results of which are summarized in Table 3, took place during the period from February to December, 2001. The procedures used were designed to protect students' privacy, and allowed for anonymous and voluntary participation.

The questions focused particularly on types of behaviors that could lead to illness, injury or death. They included physical violence, carrying weapons,

substance abuse, tobacco use, sexual intercourse (including forced sex and unprotected sex), attempted suicide, failure to wear seat belts or helmets when driving or cycling, and driving after drinking.

Overall, the D.C. students reported higher incidences of most of these risky behaviors than their counterparts in the nation as a whole. The D.C. responses were generally on a par with, and sometimes less risk-laden than, those of other big cities. Interestingly, fewer D.C. students reported most kinds of substance abuse than those nationally.

Nonetheless, the D.C. responses revealed much for parents and others concerned with these youngsters' well-being to worry about. More than one in three had been in a physical fight within the last 12 months. One in five had carried a weapon.

One D.C. student in eight had felt too unsafe to go to school in the past 30 days. This was nearly twice the share nationally.

One student in six had experienced sexual intercourse for the first time before age 13, and more than six in ten had had sex at some time in their lives. One in eight reported being forced to have sex. One in four had had four or more sexual partners.

Nearly three-fourths of District youngsters said a condom had been used on the last occasion. This was considerably higher than the national percentage of 58, but it still left one chance in four of being exposed to the risk of pregnancy or disease.

Well over half of D.C. youths had tried cigarettes, alcohol, or both. Over one-third had tried marijuana. One in four had been offered, sold or given an illegal drug.

In Table 3, we also compare results from the 2001 surveillance for the



District with those for 1999. The differences are not dramatic, but they do indicate some changes during that period.

Youths responding in 2001 reported somewhat less substance abuse and cigarette smoking than in 1999, although almost identical percentages of those who smoke said that they had bought their own cigarettes at stores or gas stations. Smoking and substance abuse on school property was reported to be less frequent, yet drug transactions at school were as common as before.

Fewer felt too unsafe to go to school in 2001 than in 1999, but about the same percentages said that they had been involved in a physical fight over the past year and had carried weapons in the past month.

In 2001 fewer reported having had sexual intercourse, either at any time in their lives or recently. Fewer also said they had had four or more sex partners, or that they had either been pregnant or had impregnated someone else. However, somewhat smaller percentages reported using condoms or

Table 3

Youth Risk Behavior

Percent Reporting Behavior:

	In the District in 1999	In the District in 2001	In the Nation in 2001
Violence While on School Property			
<i>During the 12 months prior to the survey:</i>			
Were threatened with or injured by a weapon	13.4%	11.4%	8.9%
Engaged in a physical fight	18.2%	14.0%	12.5%
<i>During the 30 days prior to the survey:</i>			
Carried a weapon	8.9%	9.3%	6.4%
Felt too unsafe to go to school	19.4%	12.0%	6.6%
Other Violence			
<i>During the 12 months prior to the survey:</i>			
Were in a physical fight	36.9%	37.4%	33.2%
Were injured in a fight	6.8%	5.8%	4.0%
Seriously considered suicide	13.5%	16.0%	19.0%
Attempted suicide	6.9%	10.3%	8.8%
<i>During the 30 days prior to the survey:</i>			
Carried a weapon	20.8%	20.3%	17.4%
Carried a gun	6.7%	5.7%	5.7%
<i>At some time in their lives:</i>			
Were forced to have sexual intercourse	10.9%	12.6%	7.7%
Vehicular Safety			
Rarely or never wore seat belts when someone else was driving	10.4%	14.1%	14.1%
<i>During the 12 months prior to the survey:</i>			
Rarely or never wore a helmet when on a motorcycle	5.7%	34.4%	37.2%
Rarely or never wore a helmet when on a bicycle	86.9%	85.5%	84.7%
<i>During the 30 days prior to the survey:</i>			
Rode with a driver who had been drinking alcohol	31.4%	32.2%	30.7%
Drove after drinking alcohol	7.6%	6.2%	13.3%
Substance Use and Abuse			
<i>At some time in their lives:</i>			
Had tried cigarettes	62.9%	56.7%	63.9%
Had drunk alcohol	66.5%	58.9%	78.2%
Had tried marijuana	45.1%	36.5%	42.4%
Had tried cocaine	2.8%	6.0%	9.4%
Had sniffed glue or other inhalant	6.1%	9.0%	14.7%
<i>Before age 13:</i>			
Smoked a whole cigarette	18.0%	15.3%	22.1%
Drank more than a few sips of alcohol	27.9%	25.6%	29.1%
Tried marijuana	12.3%	10.5%	10.2%
<i>During the 30 days prior to the survey:</i>			
Smoked cigarettes	19.9%	13.1%	28.5%
Purchased own cigarettes at a store or gas station (percent of those who smoked in the past 30 days)	34.9%	32.5%	19.1%
Drank alcohol	36.7%	28.3%	47.1%
Had at least five drinks on one or more occasions	14.9%	10.6%	29.9%
Used marijuana	---	20.2%	23.9%
<i>On school property:</i>			
Smoked cigarettes in past 30 days	10.6%	5.7%	9.9%
Drank alcohol in past 30 days	6.1%	3.7%	4.9%
Used marijuana in past 30 days	9.6%	6.0%	5.4%
Were offered, sold or given an illegal drug	24.6%	25.4%	28.5%
Sexual Behavior			
Had sexual intercourse at some time in their lives	64.8%	61.6%	45.6%
Had four or more sexual partners in lifetime	29.5%	23.8%	14.2%
First had sex before age 13	20.3%	16.6%	6.6%
Had sex during 3 months prior to survey	47.8%	41.1%	33.4%
Condom used on last occasion	74.2%	72.9%	57.9%
Birth control pill used before last occasion	9.0%	8.2%	18.2%
Had been pregnant or gotten someone else pregnant	13.7%	9.7%	4.7%
Were taught about HIV/AIDS in school	88.9%	91.0%	89.0%

Source: Youth Risk Behavior Surveillance - United States, 2001 and 1999. In: Centers for Disease Control and Prevention, MMWR Surveillance Summaries, June 28, 2002; 51 (SS04); 1-64; and CDC Surveillance Summaries, June 9, 2000, MMWR 2000; 49 (No. SS-5).

I. SELECTED INDICATORS BY WARD

In this section, we compare the District's eight wards with the city as a whole and with other wards on various measures of child well-being. The indicators shown here are among the few for which we could obtain usable data at the ward level.

There are two tables plus a map. The map shows the locations of each of the eight wards. The larger of the two tables presents statistics on each indicator - both numbers of children affected and rates, usually in terms of percentages - for the city as a whole and for each ward.

Comparing the Wards...

The larger table of the two is a bit complicated. The first three rows are general demographic indicators (estimated population, children under 18, and live births). The rest are indicators of children's health and well-being and of those receiving public assistance.

To compare the health indicator data, please note the following. The second of these, Births to Teen Mothers (Under 20), has three rows showing:

- ◆ First, the total number of births to teens under age 20 (1,086 in the entire city, of which 139 were in Ward 1);
- ◆ Second, the percentage of all live births in the city or ward that were to teens (14.2 percent of live births in the city were to teens, as were 11.8 percent of those in Ward 1); and
- ◆ Third, the percent of all teen births in the city or ward that occurred in that location (100 percent of them occurred in the city as a whole, of course, and 12.8 percent of them occurred in Ward 1).

How the Wards Rank...

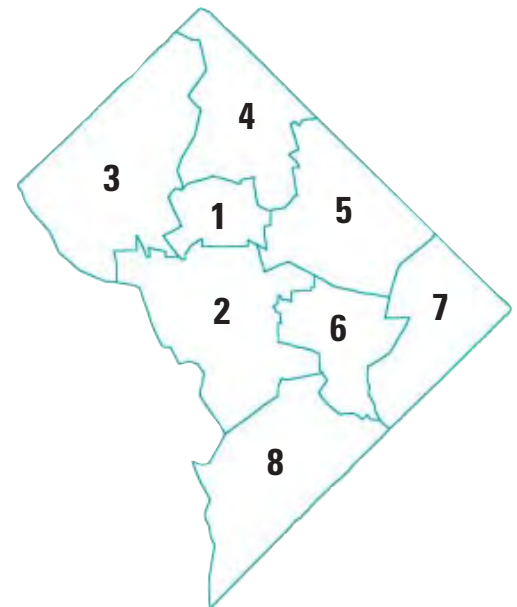
This smaller table shows how each ward ranks among the eight on most of the same indicators. In all but one case, the larger the number, the higher the rank.

For example, the ward with the smallest number of births to teens receives a rank of 1 or best. The ward with the largest number ranks 8th or worst.

The sole exception to this rule is the percent of births with which there was adequate prenatal care. In this case, the higher the percentage, the better the situation and the lower the rank. Ward 3, where 81.9 percent of newborns received adequate prenatal care, ranks 1st. Ward 8, where only 53.4 percent of babies born were adequately cared for before birth, ranks 8th.

If two wards are tied, each receives the same rank, which is halfway between the ranks the two would have received if there had not been a tie. For example, Wards 1 and 7 are tied for fourth place on deaths to children and youth. As a result, both receive a rank of 4.5.

LOCATIONS OF WARDS IN THE DISTRICT OF COLUMBIA



The bottom row of the table shows the combined rank of each ward on all the indicators shown. Ward 8 receives a combined rank of eight, reflecting the fact that it ranks eighth on all of the 11 indicators. Wards 5 and 6 rank 6th and 5th respectively on the combined indicators because most of their indicators are in the middle range.

HOW THE WARDS RANK ON INDICATORS OF CHILD WELL-BEING AND RECIPIENCY OF PUBLIC ASSISTANCE

District of Columbia, 2000, 2001 and June 2002

Indicator	Wards							
	1	2	3	4	5	6	7	8
Births to Single Mothers	6	2	1	3	5	4	7	8
Births to Teens (Under Age 20)	5	2	1	3	6	4	7	8
Percent of Births with Adequate Prenatal Care	2.5	5	1	2.5	4	6	7	8
Low Birthweight Babies (Under 5.5 Pounds)	6	2.5	1	2.5	5	4	7	8
Infant Deaths (Under 1 Year)	4	3	1	2	5	7	6	8
Deaths to Children and Youth (1-19 Years)	4.5	2	1	3	6	7	4.5	8
Deaths to Teens (15-19 Years)	3	2	1	6.5	6.5	5	4	8
Children Receiving TANF*	3	4	1	2	5	6	7	8
Children Receiving Food Stamps	3	4	1	2	5	6	7	8
Children Receiving Medicaid	5	6	1	2	4	3	7	8
Children in Subsidized Child Care	4	2	1	5	6	3	7	8
Combined Rank	4	3	1	2	6	5	7	8

* Temporary Assistance to Needy Families

Sources:

Health and Mortality Indicators – D.C. Department of Health, State Center for Health Statistics
 Welfare Indicators – TANF, Food Stamps & Medicaid: D.C. Income Maintenance Administration;
 Child Care – D.C. Office of Early Childhood Development

COMPARING THE WARDS ON INDICATORS OF CHILD HEALTH, MORTALITY AND WELFARE

Indicator	District of Columbia	Ward 1	Ward 2	Ward 3	Ward 4	Ward 5	Ward 6	Ward 7	Ward 8
Demographic Factors									
Total Population, 2000	572,059	80,014	82,845	79,566	71,393	66,548	65,457	64,704	61,532
% of Total	100.0%	14.0%	14.5%	13.9%	12.5%	11.6%	11.4%	11.3%	10.8%
Children Under 18, 2000	114,992	13,565	8,807	10,276	14,685	14,517	12,494	18,058	22,590
% of Pop. That is Under 18	20.1%	17.0%	10.6%	12.9%	20.6%	21.8%	19.1%	27.9%	36.7%
% of City's Child Population	100.0%	11.8%	7.7%	8.9%	12.8%	12.6%	10.9%	15.7%	19.6%
Babies Born Alive, 2000	7,666	1,175	788	834	938	860	846	921	1,297
% of Live Births in City	100.0%	15.3%	10.3%	10.9%	12.2%	11.2%	11.0%	12.0%	16.9%
Health and Mortality Indicators (2000)									
Births to Single Mothers	4,623	648	410	54	529	635	553	767	1,025
% of Live Births	60.3%	55.1%	52.0%	6.5%	56.4%	73.8%	65.4%	83.3%	79.0%
% of Births to Singles in City	100.0%	14.0%	8.9%	1.2%	11.4%	13.7%	12.0%	16.6%	22.2%
Births to Teen Mothers (Under 20)	1,086	139	99	6	115	155	138	184	250
% of Live Births	14.2%	11.8%	12.6%	0.7%	12.3%	18.0%	16.3%	20.0%	19.3%
% of Teen Births in City	100.0%	12.8%	9.1%	0.6%	10.6%	14.3%	12.7%	16.9%	23.0%
Percent of Births with Adequate Prenatal Care	65.1%	70.0%	63.9%	81.9%	70.0%	64.5%	63.5%	59.1%	53.4%
Low Birthweight Babies (Under 5.5 Pounds)	913	121	91	65	91	114	106	124	201
% of All Live Births	11.9%	10.3%	11.5%	7.8%	9.7%	13.3%	12.5%	13.5%	15.5%
% of Low Birthweights in City	100.0%	13.3%	10.0%	7.1%	10.0%	12.5%	11.6%	13.6%	22.0%
Infant Deaths (Under 1 Year)	91	11	6	1	5	12	17	16	23
Rate (per 1,000 Live Births)	11.9	9.4	7.6	1.2	5.3	14.0	20.1	17.4	17.7
% of Infant Deaths in City	100.0%	12.1%	6.6%	1.1%	5.5%	13.2%	18.7%	17.6%	25.3%
Deaths to Children and Youth (1-19 Years)	67	8	4	1	7	10	11	8	18
% of Child Deaths in City	100.0%	11.9%	6.0%	1.5%	10.4%	14.9%	16.4%	11.9%	26.9%
Deaths to Teens (15-19 Years)	40	3	2	0	7	7	6	5	10
% of Teen Deaths in City	100.0%	7.5%	5.0%	0.0%	17.5%	17.5%	15.0%	12.5%	25.0%
Teen Murders (15-19 Years)	12	0	0	0	2	2	2	2	4
% of Teen Murders in City	100.0%	0.0%	0.0%	0.0%	16.7%	16.7%	16.7%	16.7%	33.3%
Welfare Indicators (June 2002)									
Children Receiving TANF*	31,783	2,737	2,891	24	2,336	3,970	4,300	6,507	9,018
% of Child Recipients in City	100.0%	8.6%	9.1%	0.1%	7.3%	12.5%	13.5%	20.5%	28.4%
Children Receiving Food Stamps	36,851	3,347	3,524	31	2,385	4,362	5,002	7,781	10,419
% of Child Recipients in City	100.0%	9.1%	9.6%	0.1%	6.5%	11.8%	13.6%	21.1%	28.3%
Children Receiving Medicaid	71,958	8,118	11,266	339	6,627	7,949	7,741	12,014	15,897
% of Child Recipients in City	100.0%	11.3%	15.7%	0.5%	9.2%	11.0%	10.8%	16.7%	22.1%
Children in Subsidized Child Care	11,451	1,404	1,047	217	1,416	1,581	1,172	1,854	2,691
% of Recipients in City (FY 2001)	100.0%	12.3%	9.1%	1.9%	12.4%	13.8%	10.2%	16.2%	23.5%

*Temporary Assistance to Needy Families

Sources: Total Population and Children Under 18 - 2000 Census, ward-level data from D.C. Office of Planning/State Data Center
 Live Births and Health and Mortality Indicators - D.C. Department of Health, State Center for Health Statistics
 Welfare Indicators - TANF, Food Stamps & Medicaid: D.C. Income Maintenance Administration; Child Care - D.C. Office of Early Childhood Development

J. Selected Indicators of Child Well-Being at the D.C. Neighborhood Level

In this section, we present maps and data tables on selected indicators of child well-being for the first time at the neighborhood level, thanks to a new partnership with the Urban Institute's D.C. Data Warehouse.

The neighborhood level data reported here are based on 39 neighborhood clusters into which the District has been divided by the D.C. Office of Planning, with input from citizens. The Mayor's office has developed and released 39 Strategic Neighborhood Action Plans (SNAPs) based on these cluster designations.

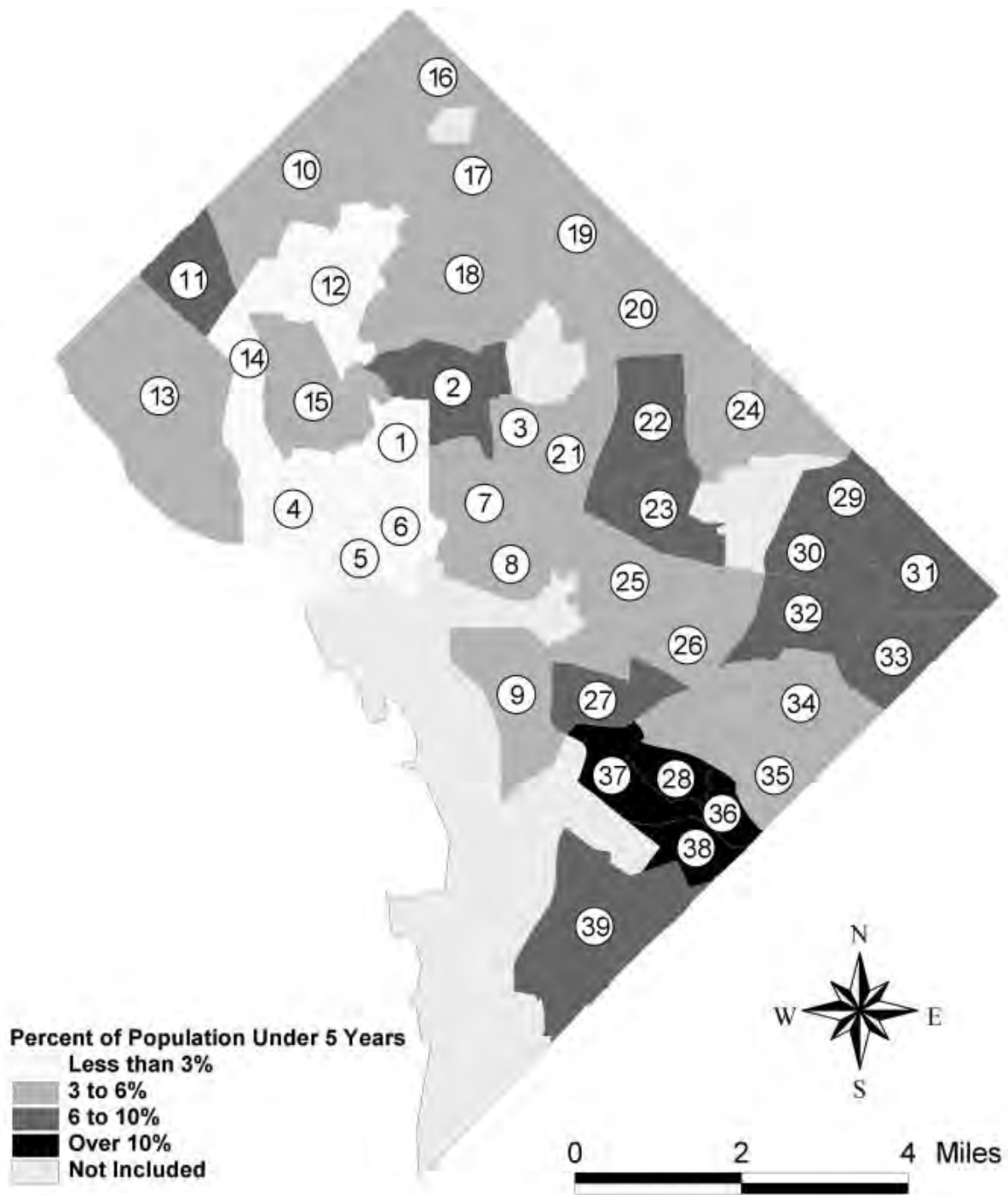
The cluster-level data in this section provide an opportunity for members of the community to review the data on the situation of children in their own neighborhoods, and possibly to provide feedback on what actions they believe should be included in future SNAPs.

Each cluster is identified with a number on the maps. These cluster numbers can be used in connection with the table accompanying each map. The table shows the ward in which the cluster is located, the cluster number, and the names of the individual neighborhoods contained in each cluster. (Cluster boundaries sometimes overlap ward boundaries, and in such cases the ward containing the largest part of the cluster is given as its location.)

Data on the specific indicator displayed on the map are also shown on the table with more precision. For example, the map entitled "Percent of Persons Under 18 Years Below Poverty" shows the clusters classified by three levels of child poverty: Low (<10%), Moderate (10-30%) and High (>30%). The map indicates that Neighborhood Cluster 1 has a moderate poverty level. The table shows that Cluster 1 includes the Kalorama Heights, Adams-Morgan, and Lanier Heights neighborhoods. Furthermore, it indicates that it has 405 children in poverty, and that they are 26 percent of all children in that cluster.

With these clearly marked and shaded maps, along with the detailed data charts accompanying each, readers will be able to identify where in the city specific problems exist, and determine what level of each problem exists in their own neighborhoods. Equipped with this information, we hope that they will be in a position to act and advocate more effectively for the well-being of the District's children.

Percent of Population Under 5 Years of Age

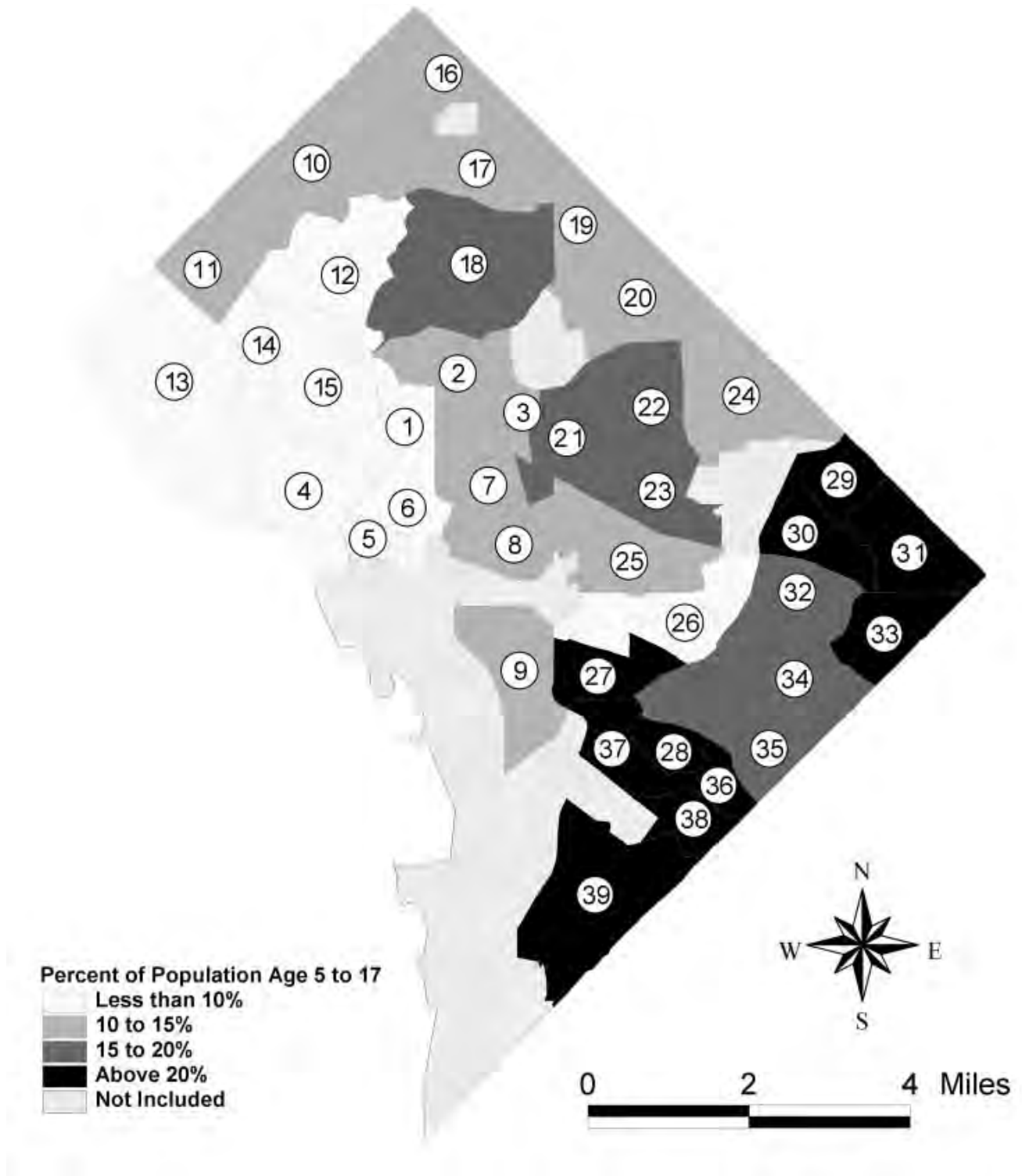


Maps created by the Urban Institute, D.C. Data Warehouse.

Ward Cluster	Neighborhood Number	Neighborhood Cluster Name	Cluster Population	Population Under 5	Percent of Population Under 5
1	1	Kalorama Heights, Adams Morgan, Lanier Heights	18183	548	3%
1	2	Mt. Pleasant, Columbia Heights, Pleasant Plains, Park View	46779	3224	7%
1	3	Howard University, Cardozo/Shaw, Le Droit Park	10128	373	4%
2	4	Burleith, Hillandale, Georgetown	18697	547	3%
2	5	West End, Foggy Bottom, GWU	10307	42	0%
2	6	Dupont Circle, Connecticut Ave/K St.	18420	278	2%
2	7	Logan Circle, Shaw	20865	993	5%
2	8	Downtown, Penn Quarters, Chinatown, Mount Vernon Square, North Capitol St.	8491	512	6%
6	9	Southwest Employment area, Southwest Waterfront, Buzzard Point, Ft. McNair	11851	514	4%
4	10	Chevy Chase, Barnaby Woods, Hawthorne, Forest Heights	17152	975	6%
3	11	Friendship Heights, Tenleytown, American University Park	6062	475	8%
3	12	North Cleveland Park, Van Ness, Forest Hills	14897	420	3%
3	13	Foxhall Crescent, Foxhall Village, Georgetown Reservoir, Palisades, Spring Valley, Wesley Heights	18708	756	4%
3	14	Cathedral Heights, McClean Gardens, Glover Park, Massachusetts Ave. Heights	11186	271	2%
3	15	Cleveland Park, Mass. Ave. Heights, Woodley Park, Woodland-Normanstone Terrace	12306	395	3%
4	16	North Portal Estates, Colonial Village, Shepherd Park	4030	151	4%
4	17	Brightwood, Manor Park, Takoma	18441	1024	6%
4	18	Brightwood Park, Crestwood, Petworth, 16th St. Heights	39235	2326	6%
4	19	Fort Totten, Lamond Riggs, Pleasant Hill, Queens Chapel	12328	498	4%
5	20	North Michigan Park, Michigan Park, University Heights	9317	427	5%
2	1	Edgewood, Stronghold, Bloomingdale, Eckington, Truxton Circle	18429	1106	6%
5	22	Brookland, Langdon, Brentwood	8906	584	7%
5	23	Arboretum, Ivy City, Trinidad, Carver Langston	13999	1026	7%
5	24	Woodridge, Fort Lincoln, South Central, Gateway	11256	455	4%
6	25	Near Northeast, Stanton Park, Kingman Park	27376	1380	5%
6	26	Capitol Hill, Lincoln Park, Capitol East	18479	644	3%
6	27	Near Southeast, Arthur Capper, Carrollsburg, Navy Yard	4643	403	9%
8	28	Historic Anacostia	4873	526	11%
7	29	Kenilworth, Eastland Gardens	2343	193	8%
7	30	Mayfair, Central Northeast	6198	499	8%
7	31	Deanwood, Burrville, NE Boundary, Lincoln Heights, Grant Park	14113	938	7%
7	32	River Terrace, Benning, Greenway, Fort Dupont	12533	956	8%
7	33	Capitol View, Marshall Heights, Benning Heights, Benning Ridge	14997	1283	9%
7	34	Twining, Penn Bridge, Fairlawn, Randle Highlands, Ft. Davis Park, Ft. Dupont Park	15567	877	6%
7	35	Hillcrest, Fairfax Village, Naylor Gardens	8019	462	6%
8	36	Woodland, Garfield Heights, Knox Hill/Buena Vista	6387	657	10%
8	37	Barry Farm, Hillsdale, Sheridan, Fort Stanton	8596	980	11%
8	38	Skyland, Douglass, Shipley Terrace	9066	1060	12%
8	39	Congress Heights, Bellevue, Washington Highlands	30588	2920	10%

Source: U.S. Census Bureau, Census 2000

Percent of Population Age 5 to 17

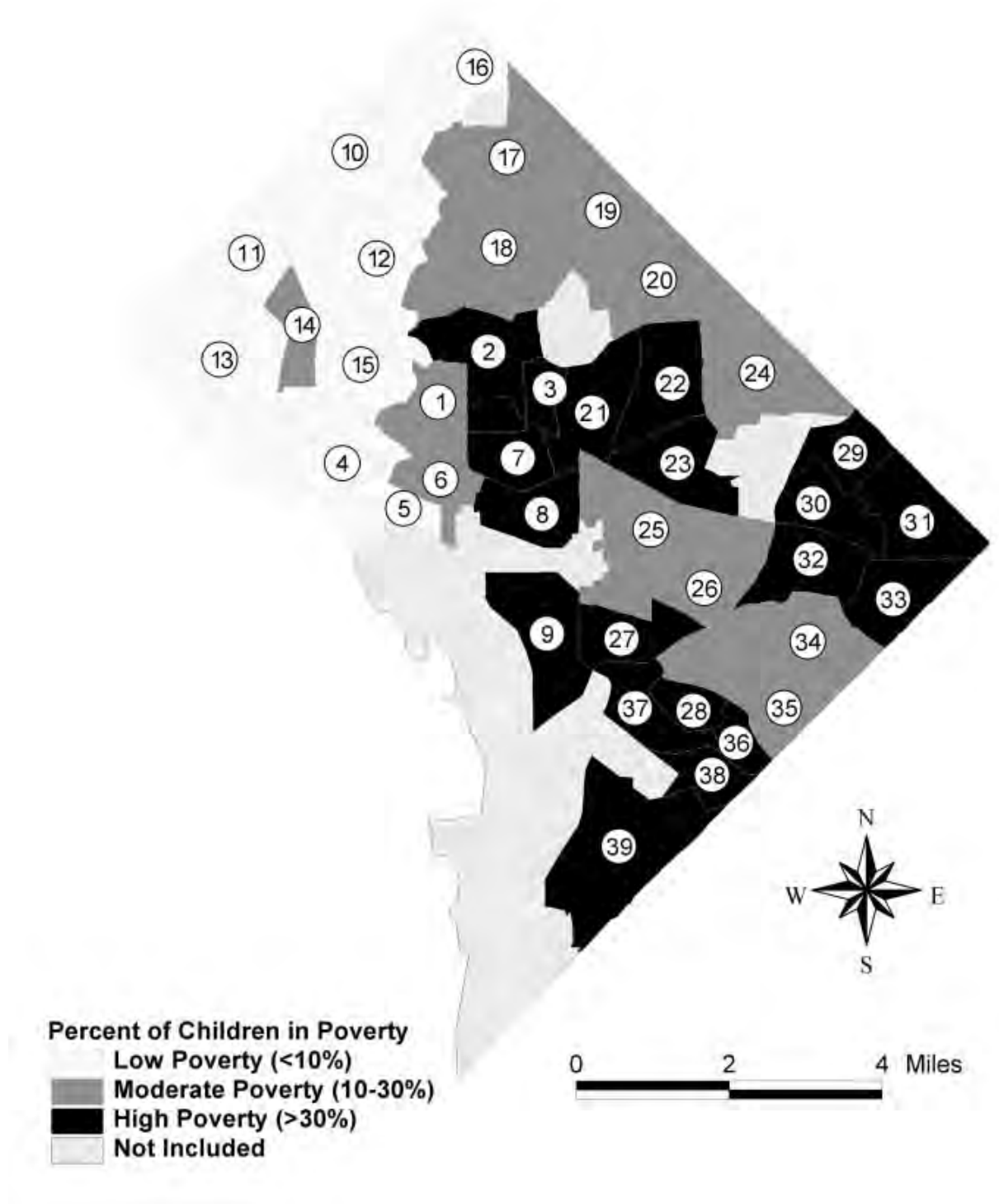


Maps created by the Urban Institute, D.C. Data Warehouse.

Ward	Neighborhood Cluster Number	Neighborhood Cluster Name	Cluster Population	Population Age 5-17	Percent of Population Age 5 to 17
1	1	Kalorama Heights, Adams Morgan, Lanier Heights	18183	1118	6%
1	2	Mt. Pleasant, Columbia Heights, Pleasant Plains, Park View	46779	6969	15%
1	3	Howard University, Cardozo/Shaw, Le Droit Park	10128	1090	11%
2	4	Burleith, Hillandale, Georgetown	18697	749	4%
2	5	West End, Foggy Bottom, GWU	10307	70	1%
2	6	Dupont Circle, Connecticut Ave/K St.	18420	399	2%
2	7	Logan Circle, Shaw	20865	2406	12%
2	8	Downtown, Penn Quarters, Chinatown, Mount Vernon Square, North Capitol St.	8491	1249	15%
6	9	Southwest Employment area, Southwest Waterfront, Buzzard Point, Ft. McNair	11851	1347	11%
4	10	Chevy Chase, Barnaby Woods, Hawthorne, Forest Heights	17152	2314	13%
3	11	Friendship Heights, Tenleytown, American University Park	6062	767	13%
3	12	North Cleveland Park, Van Ness, Forest Hills	14897	971	7%
3	13	Foxhall Crescent, Foxhall Village, Georgetown Reservoir, Palisades, Spring Valley, Wesley Heights	18708	1718	9%
3	14	Cathedral Heights, McClean Gardens, Glover Park, Massachusetts Ave. Heights	11186	443	4%
3	15	Cleveland Park, Mass. Ave. Heights, Woodley Park, Woodland-Normanstone Terrace	12306	908	7%
4	16	North Portal Estates, Colonial Village, Shepherd Park	4030	571	14%
4	17	Brightwood, Manor Park, Takoma	18441	2614	14%
4	18	Brightwood Park, Crestwood, Petworth, 16th St. Heights	39235	6460	16%
4	19	Fort Totten, Lamond Riggs, Pleasant Hill, Queens Chapel	12328	1399	11%
5	20	North Michigan Park, Michigan Park, University Heights	9317	1310	14%
5	21	Edgewood, Stronghold, Bloomingdale, Eckington, Truxton Circle	18429	3297	18%
5	22	Brookland, Langdon, Brentwood	8906	1620	18%
5	23	Arboretum, Ivy City, Trinidad, Carver Langston	13999	2560	18%
5	24	Woodridge, Fort Lincoln, South Central, Gateway	11256	1626	14%
6	25	Near Northeast, Stanton Park, Kingman Park	27376	3614	13%
6	26	Capitol Hill, Lincoln Park, Capitol East	18479	1320	7%
6	27	Near Southeast, Arthur Capper, Carrollsburg, Navy Yard	4643	1147	25%
8	28	Historic Anacostia	4873	1251	26%
7	29	Kenilworth, Eastland Gardens	2343	721	31%
7	30	Mayfair, Central Northeast	6198	1372	22%
7	31	Deanwood, Burrville, NE Boundary, Lincoln Heights, Grant Park	14113	3157	22%
7	32	River Terrace, Benning, Greenway, Fort Dupont	12533	2484	20%
7	33	Capitol View, Marshall Heights, Benning Heights, Benning Ridge	14997	3452	23%
7	34	Twining, Penn Bridge, Fairlawn, Randle Highlands, Ft. Davis Park, Ft. Dupont Park	15567	2582	17%
7	35	Hillcrest, Fairfax Village, Naylor Gardens	8019	1254	16%
8	36	Woodland, Garfield Heights, Knox Hill/Buena Vista	6387	1686	26%
8	37	Barry Farm, Hillsdale, Sheridan, Fort Stanton	8596	2695	31%
8	38	Skyland, Douglass, Shipley Terrace	9066	2699	30%
8	39	Congress Heights, Bellevue, Washington Highlands	30588	7652	25%

Source: U.S. Census Bureau, Census 2000

Percent of Persons Under 18 Years Below Poverty

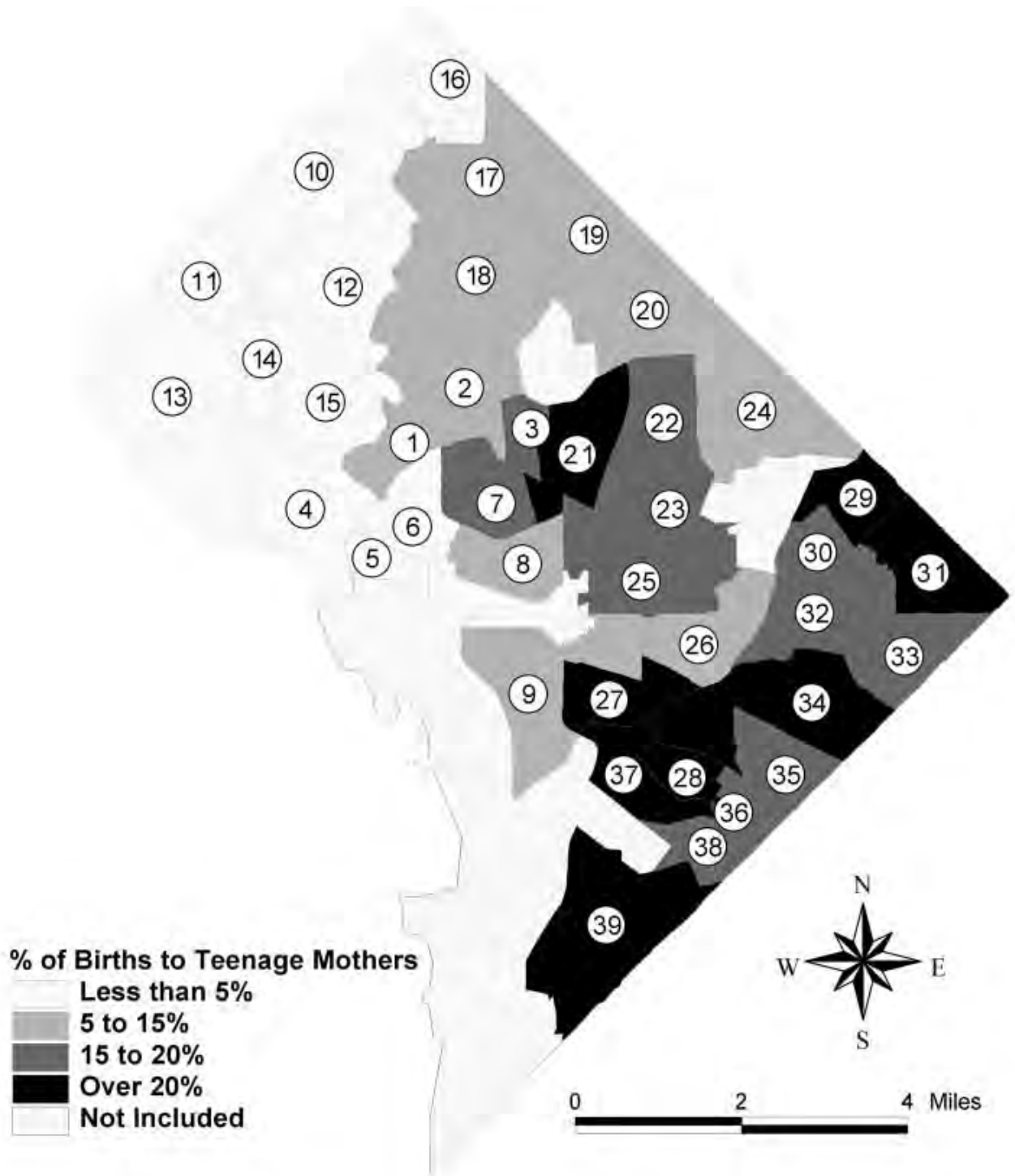


Maps created by the Urban Institute, D.C. Data Warehouse.

Ward	Neighborhood Cluster Number	Neighborhood Cluster Name	Number of Persons Under 18 Years Below Poverty	Percent of Persons Under 18 Years Below Poverty
1	1	Kalorama Heights, Adams Morgan, Lanier Heights	405	26%
1	2	Mt. Pleasant, Columbia Heights, Pleasant Plains, Park View	3,407	35%
1	3	Howard University, Cardozo/Shaw, Le Droit Park	603	43%
2	4	Burleith, Hillandale, Georgetown	78	7%
2	5	West End, Foggy Bottom, GWU	5	6%
2	6	Dupont Circle, Connecticut Ave/K St.	114	17%
2	7	Logan Circle, Shaw	1,054	32%
2	8	Downtown, Penn Quarters, Chinatown, Mount Vernon Square, North Capitol St.	646	37%
6	9	Southwest Employment area, Southwest Waterfront, Buzzard Point, Ft. McNair	749	42%
4	10	Chevy Chase, Barnaby Woods, Hawthorne, Forest Heights	25	1%
3	11	Friendship Heights, Tenleytown, American University Park	17	1%
3	12	North Cleveland Park, Van Ness, Forest Hills	56	4%
3	13	Foxhall Crescent, Foxhall Village, Georgetown Reservoir, Palisades, Spring Valley, Wesley Heights	59	3%
3	14	Cathedral Heights, McClean Gardens, Glover Park, Massachusetts Ave. Heights	71	10%
3	15	Cleveland Park, Mass. Ave. Heights, Woodley Park, Woodland-Normanstone Terrace	6	1%
4	16	North Portal Estates, Colonial Village, Shepherd Park	47	7%
4	17	Brightwood, Manor Park, Takoma	580	17%
4	18	Brightwood Park, Crestwood, Petworth, 16th St. Heights	1,725	20%
4	19	Fort Totten, Lamond Riggs, Pleasant Hill, Queens Chapel	164	10%
5	20	North Michigan Park, Michigan Park, University Heights	189	11%
5	21	Edgewood, Stronghold, Bloomingdale, Eckington, Truxton Circle	1,340	31%
5	22	Brookland, Langdon, Brentwood	710	33%
5	23	Arboretum, Ivy City, Trinidad, Carver Langston	1,560	45%
5	24	Woodridge, Fort Lincoln, South Central, Gateway	271	13%
6	25	Near Northeast, Stanton Park, Kingman Park	1,367	29%
6	26	Capitol Hill, Lincoln Park, Capitol East	380	21%
6	27	Near Southeast, Arthur Capper, Carrollsburg, Navy Yard	1,038	67%
8	28	Historic Anacostia	871	50%
7	29	Kenilworth, Eastland Gardens	400	43%
7	30	Mayfair, Central Northeast	648	35%
7	31	Deanwood, Burrville, NE Boundary, Lincoln Heights, Grant Park	1,604	40%
7	32	River Terrace, Benning, Greenway, Fort Dupont	1,206	36%
7	33	Capitol View, Marshall Heights, Benning Heights, Benning Ridge	2,267	48%
7	34	Twining, Penn Bridge, Fairlawn, Randle Highlands, Ft. Davis Park, Ft. Dupont Park	672	20%
7	35	Hillcrest, Fairfax Village, Naylor Gardens	449	27%
8	36	Woodland, Garfield Heights, Knox Hill/Buena Vista	1,397	61%
8	37	Barry Farm, Hillside, Sheridan, Fort Stanton	2,142	59%
8	38	Skyland, Douglass, Shipley Terrace	2,077	56%
8	39	Congress Heights, Bellevue, Washington Highlands	4,814	46%

Source: U.S. Census Bureau, Census 2000

Percent of Births to Mothers 19 Years Old or Younger

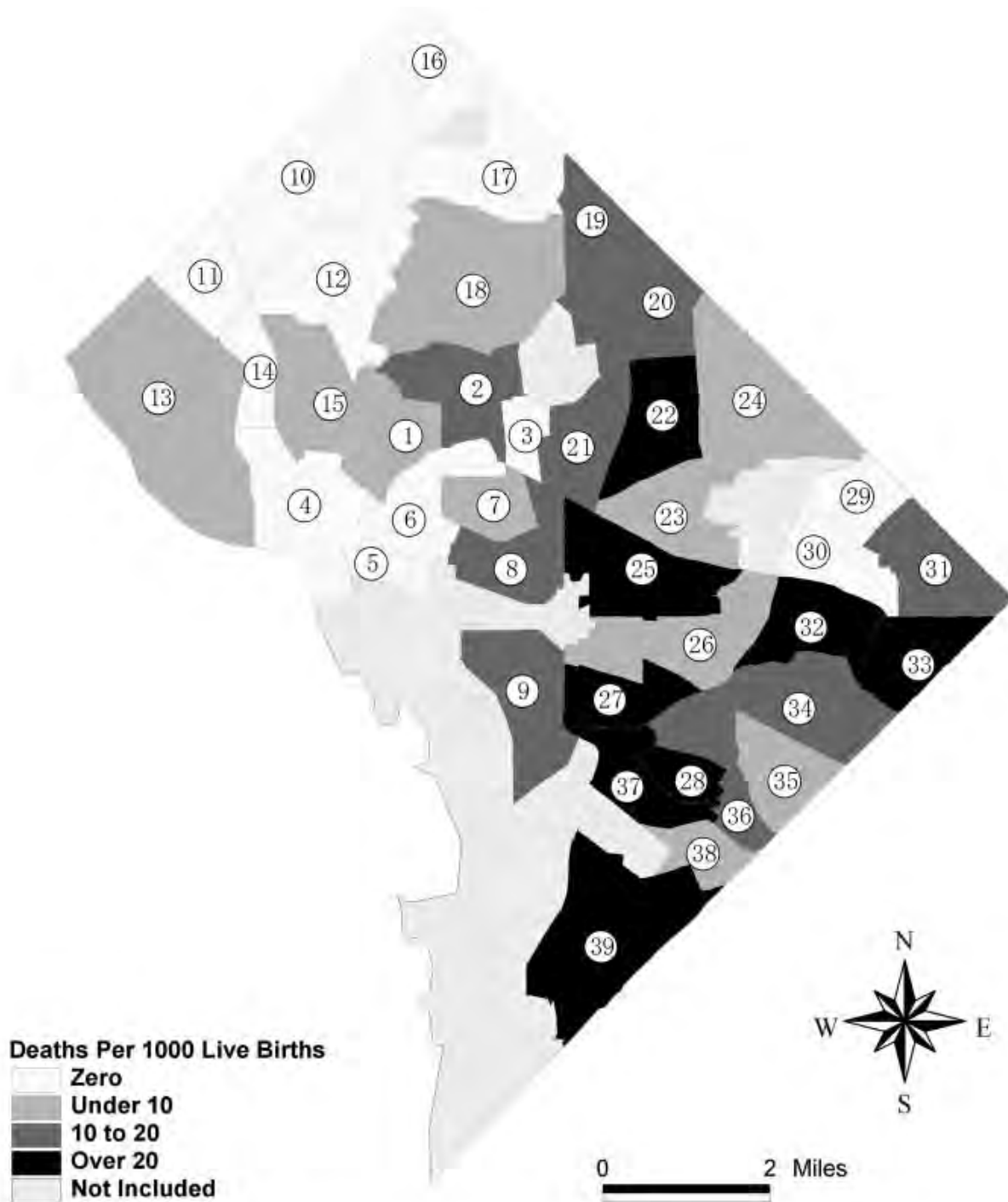


Maps created by the Urban Institute, D.C. Data Warehouse.

Ward	Neighborhood Cluster Number	Neighborhood Cluster Name	Number of Births to Teen Mothers (Under 20)	Percent of Births to Teen Mothers (Under 20)
1	1	Kalorama Heights, Adams Morgan, Lanier Heights	16	9.5%
1	2	Mt. Pleasant, Columbia Heights, Pleasant Plains, Park View	100.18	11.7%
1	3	Howard University, Cardozo/Shaw, Le Droit Park	21.82	18.9%
2	4	Burleith, Hillandale, Georgetown	<5	0.7%
2	5	West End, Foggy Bottom, GWU	0	0.0%
2	6	Dupont Circle, Connecticut Ave/K St.	<5	3.1%
2	7	Logan Circle, Shaw	44	16.3%
2	8	Downtown, Penn Quarters, Chinatown, Mount Vernon Square, North Capitol St	13	12.6%
6	9	Southwest Employment area, Southwest Waterfront, Buzzard Point, Ft. McNair	16	12.0%
4	10	Chevy Chase, Barnaby Woods, Hawthorne, Forest Heights	0	0.0%
3	11	Friendship Heights, Tenleytown, American University Park	0	0.0%
3	12	North Cleveland Park, Van Ness, Forest Hills	0	0.0%
3	13	Foxhall Crescent, Foxhall Village, Georgetown Reservoir, Palisades, Spring Valley, Wesley Heights	<5	0.6%
3	14	Cathedral Heights, McClean Gardens, Glover Park, Massachusetts Ave. Heights	<5	3.4%
3	15	Cleveland Park, Mass. Ave. Heights, Woodley Park, Woodland-Normanstone Terrace	<5	1.0%
4	16	North Portal Estates, Colonial Village, Shepherd Park	<5	3.2%
4	17	Brightwood, Manor Park, Takoma	23	9.4%
4	18	Brightwood Park, Crestwood, Petworth, 16th St. Heights	78	13.6%
4	19	Fort Totten, Lamond Riggs, Pleasant Hill, Queens Chapel	15	14.3%
5	20	North Michigan Park, Michigan Park, University Heights	8	10.0%
5	21	Edgewood, Stronghold, Bloomingdale, Eckington, Truxton Circle	60	21.5%
5	22	Brookland, Langdon, Brentwood	28	20.0%
5	23	Arboretum, Ivy City, Trinidad, Carver Langston	42	18.9%
5	24	Woodridge, Fort Lincoln, South Central, Gateway	13	12.0%
6	25	Near Northeast, Stanton Park, Kingman Park	58	16.2%
6	26	Capitol Hill, Lincoln Park, Capitol East	12	7.6%
6	27	Near Southeast, Arthur Capper, Carrollsburg, Navy Yard	15	21.4%
8	28	Historic Anacostia	27	24.1%
7	29	Kenilworth, Eastland Gardens	14	37.8%
7	30	Mayfair, Central Northeast	18.29	18.4%
7	31	Deanwood, Burrville, NE Boundary, Lincoln Heights, Grant Park	55.71	25.0%
7	32	River Terrace, Benning, Greenway, Fort Dupont	35	16.8%
7	33	Capitol View, Marshall Heights, Benning Heights, Benning Ridge	42	17.6%
7	34	Twining, Penn Bridge, Fairlawn, Randle Highlands, Ft. Davis Park, Ft. Dupont Park	40	20.2%
7	35	Hillcrest, Fairfax Village, Naylor Gardens	18	18.0%
8	36	Woodland, Garfield Heights, Knox Hill/Buena Vista	24	17.5%
8	37	Barry Farm, Hillsdale, Sheridan, Fort Stanton	61	25.2%
8	38	Skyland, Douglass, Shipley Terrace	36	17.2%
8	39	Congress Heights, Bellevue, Washington Highlands	133	21.2%

D.C. Department of Health, State Center for Health Statistics Administration, 2000

Infant Mortality Rate (Per 1000 Live Births)

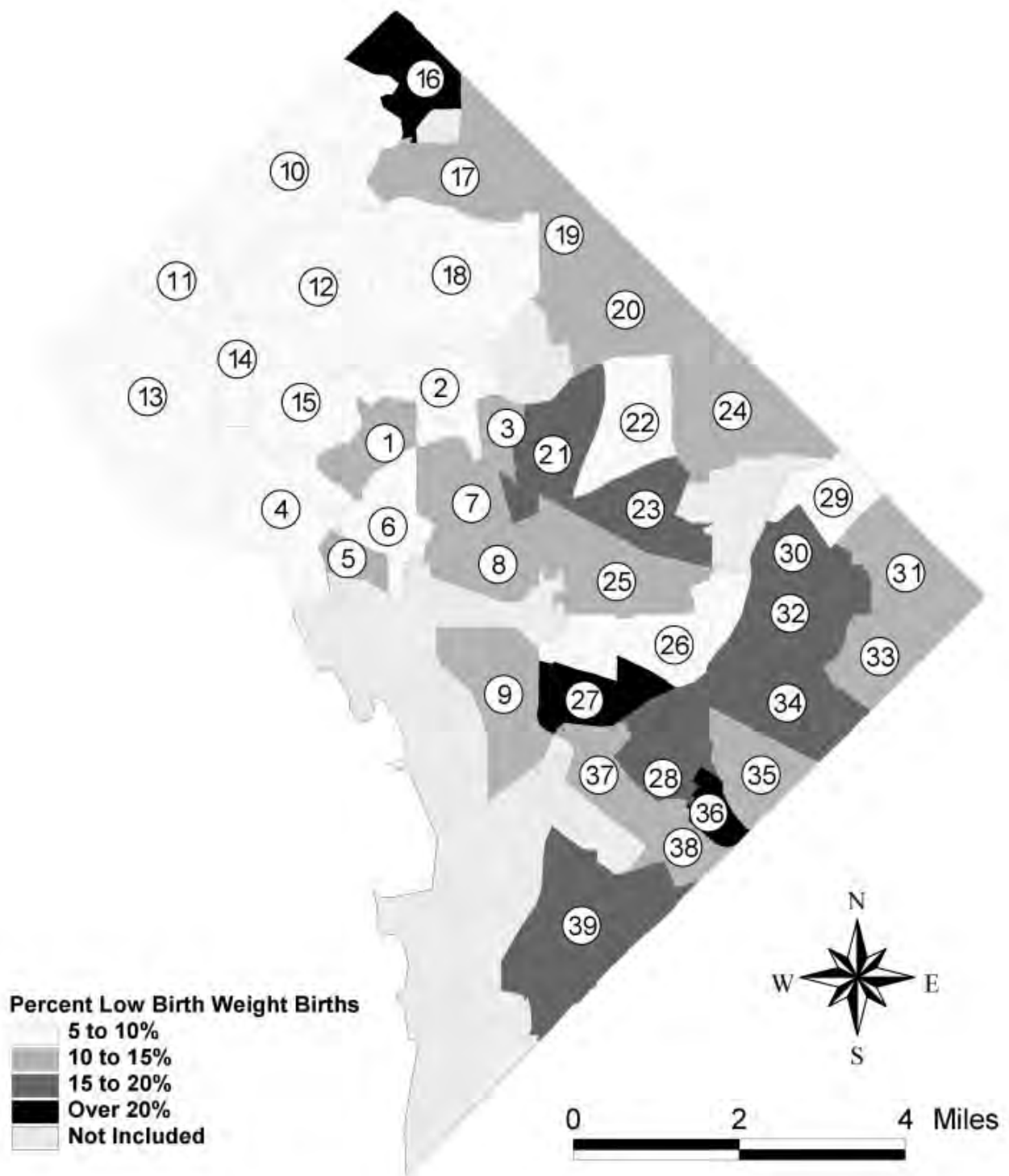


Maps created by the Urban Institute, D.C. Data Warehouse.

Ward	Neighborhood Cluster Number	Neighborhood Cluster Name	Infant Mortality Rate (per 1000)
1	1	Kalorama Heights, Adams Morgan, Lanier Heights	6
1	2	Mt. Pleasant, Columbia Heights, Pleasant Plains, Park View	12
1	3	Howard University, Cardozo/Shaw, Le Droit Park	0
2	4	Burleith, Hillandale, Georgetown	0
2	5	West End, Foggy Bottom, GWU	0
2	6	Dupont Circle, Connecticut Ave/K St.	0
2	7	Logan Circle, Shaw	7
2	8	Downtown, Penn Quarters, Chinatown, Mount Vernon Square, North Capitol St.	19
6	9	Southwest Employment area, Southwest Waterfront, Buzzard Point, Ft. McNair	15
4	10	Chevy Chase, Barnaby Woods, Hawthorne, Forest Heights	0
3	11	Friendship Heights, Tenleytown, American University Park	0
3	12	North Cleveland Park, Van Ness, Forest Hills	0
3	13	Foxhall Crescent, Foxhall Village, Georgetown Reservoir, Palisades, Spring Valley, Wesley Heights	6
3	14	Cathedral Heights, McClean Gardens, Glover Park, Massachusetts Ave. Heights	0
3	15	Cleveland Park, Mass. Ave. Heights, Woodley Park, Woodland-Normanstone Terrace	10
4	16	North Portal Estates, Colonial Village, Shepherd Park	0
4	17	Brightwood, Manor Park, Takoma	0
4	18	Brightwood Park, Crestwood, Petworth, 16th St. Heights	7
4	19	Fort Totten, Lamond Riggs, Pleasant Hill, Queens Chapel	19
5	20	North Michigan Park, Michigan Park, University Heights	13
5	21	Edgewood, Stronghold, Bloomingdale, Eckington, Truxton Circle	11
5	22	Brookland, Langdon, Brentwood	21
5	23	Arboretum, Ivy City, Trinidad, Carver Langston	5
5	24	Woodridge, Fort Lincoln, South Central, Gateway	9
6	25	Near Northeast, Stanton Park, Kingman Park	22
6	26	Capitol Hill, Lincoln Park, Capitol East	6
6	27	Near Southeast, Arthur Capper, Carrollsburg, Navy Yard	57
8	28	Historic Anacostia	27
7	29	Kenilworth, Eastland Gardens	0
7	30	Mayfair, Central Northeast	0
7	31	Deanwood, Burrville, NE Boundary, Lincoln Heights, Grant Park	13
7	32	River Terrace, Benning, Greenway, Fort Dupont	24
7	33	Capitol View, Marshall Heights, Benning Heights, Benning Ridge	21
7	34	Twining, Penn Bridge, Fairlawn, Randle Highlands, Ft. Davis Park, Ft. Dupont Park	15
7	35	Hillcrest, Fairfax Village, Naylor Gardens	10
8	36	Woodland, Garfield Heights, Knox Hill/Buena Vista	15
8	37	Barry Farm, Hillsdale, Sheridan, Fort Stanton	21
8	38	Skyland, Douglass, Shipley Terrace	10
8	39	Congress Heights, Bellevue, Washington Highlands	22

Source: D.C. Department of Health, State Center for Health Statistics Administration, 2000

Percent of of Low Birth Weight Births

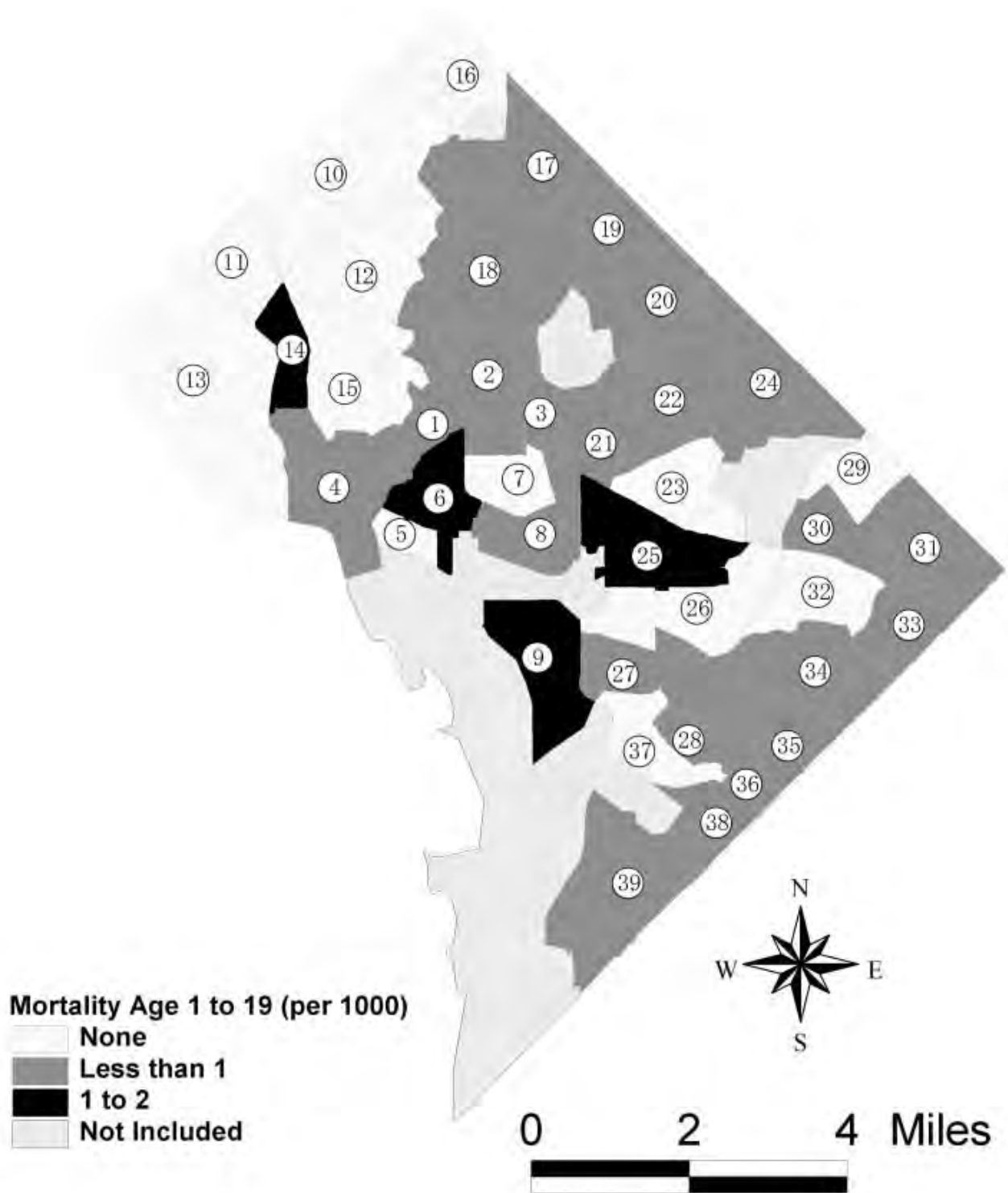


Maps created by the Urban Institute, D.C. Data Warehouse.

Ward	Neighborhood Cluster Number	Neighborhood Cluster Name	Total Number of Births to All Mothers	Number of Low Weight Births	Percent of Low Weight Births
1	1	Kalorama Heights, Adams Morgan, Lanier Heights	169	20	11.8%
1	2	Mt. Pleasant, Columbia Heights, Pleasant Plains, Park View	858.84	84.1	9.8%
1	3	Howard University, Cardozo/Shaw, Le Droit Park	115.16	14.9	12.9%
2	4	Burleith, Hillandale, Georgetown	153	10	6.5%
2	5	West End, Foggy Bottom, GWU	18	<5	11.1%
2	6	Dupont Circle, Connecticut Ave/K St.	98	8	8.2%
2	7	Logan Circle, Shaw	270	33	12.2%
2	8	Downtown, Penn Quarters, Chinatown, Mount Vernon Square, North Capitol St.	103	12	11.7%
6	9	Southwest Employment area, Southwest Waterfront, Buzzard Point, Ft. McNair	133	20	15.0%
4	10	Chevy Chase, Barnaby Woods, Hawthorne, Forest Heights	217	17	7.8%
3	11	Friendship Heights, Tenleytown, American University Park	90	6	6.7%
3	12	North Cleveland Park, Van Ness, Forest Hills	120.92	9	7.6%
3	13	Foxhall Crescent, Foxhall Village, Georgetown Reservoir, Palisades, Spring Valley, Wesley Heights	164	16	9.8%
3	14	Cathedral Heights, McClean Gardens, Glover Park, Massachusetts Ave. Heights	89	5	5.6%
3	15	Cleveland Park, Mass. Ave. Heights, Woodley Park, Woodland-Normanstone Terrace	98.08	6.75	6.9%
4	16	North Portal Estates, Colonial Village, Shepherd Park	31	10	32.3%
4	17	Brightwood, Manor Park, Takoma	244	29	11.9%
4	18	Brightwood Park, Crestwood, Petworth, 16th St. Heights	574	42	7.3%
4	19	Fort Totten, Lamond Riggs, Pleasant Hill, Queens Chapel	105	13	12.4%
5	20	North Michigan Park, Michigan Park, University Heights	80	9	11.3%
5	21	Edgewood, Stronghold, Bloomingdale, Eckington, Truxton Circle	279	43	15.4%
5	22	Brookland, Langdon, Brentwood	140	10	7.1%
5	23	Arboretum, Ivy City, Trinidad, Carver Langston	222	35	15.8%
5	24	Woodridge, Fort Lincoln, South Central, Gateway	108	11	10.2%
6	25	Near Northeast, Stanton Park, Kingman Park	358	36	10.1%
6	26	Capitol Hill, Lincoln Park, Capitol East	156.97	10	6.4%
6	27	Near Southeast, Arthur Capper, Carrollsburg, Navy Yard	70.03	15	21.4%
8	28	Historic Anacostia	112	18	16.1%
7	29	Kenilworth, Eastland Gardens	37	<5	8.1%
7	30	Mayfair, Central Northeast	99.28	15.55	15.7%
7	31	Deanwood, Burrville, NE Boundary, Lincoln Heights, Grant Park	222.72	23.45	10.5%
7	32	River Terrace, Benning, Greenway, Fort Dupont	208	32	15.4%
7	33	Capitol View, Marshall Heights, Benning Heights, Benning Ridge	238	31	13.0%
7	34	Twining, Penn Bridge, Fairlawn, Randle Highlands, Ft. Davis Park, Ft. Dupont Park	198	37	18.7%
7	35	Hillcrest, Fairfax Village, Naylor Gardens	100	11	11.0%
8	36	Woodland, Garfield Heights, Knox Hill/Buena Vista	137	30	21.9%
8	37	Barry Farm, Hillsdale, Sheridan, Fort Stanton	242	34	14.0%
8	38	Skyland, Douglass, Shipley Terrace	209	28	13.4%
8	39	Congress Heights, Bellevue, Washington Highlands	626	111	17.7%

Source: D.C. Department of Health, State Center for Health Statistics Administration, 2000

Deaths Age 1 to 19 (Per 1000)



Maps created by the Urban Institute, D.C. Data Warehouse.

Ward	Neighborhood Cluster Number	Neighborhood Cluster Name	Death Rate Age 1 to 19 (per 1000)
1	1	Kalorama Heights, Adams Morgan, Lanier Heights	0.6
1	2	Mt. Pleasant, Columbia Heights, Pleasant Plains, Park View	0.4
1	3	Howard University, Cardozo/Shaw, Le Droit Park	0.8
2	4	Burleith, Hillandale, Georgetown	0.3
2	5	West End, Foggy Bottom, GWU	0.0
2	6	Dupont Circle, Connecticut Ave/K St.	1.2
2	7	Logan Circle, Shaw	0.0
2	8	Downtown, Penn Quarters, Chinatown, Mount Vernon Square, North Capitol St.	0.5
6	9	Southwest Employment area, Southwest Waterfront, Buzzard Point, Ft. McNair	1.1
4	10	Chevy Chase, Barnaby Woods, Hawthorne, Forest Heights	0.0
3	11	Friendship Heights, Tenleytown, American University Park	0.0
3	12	North Cleveland Park, Van Ness, Forest Hills	0.0
3	13	Foxhall Crescent, Foxhall Village, Georgetown Reservoir, Palisades, Spring Valley, Wesley Heights	0.0
3	14	Cathedral Heights, McClean Gardens, Glover Park, Massachusetts Ave. Heights	1.3
3	15	Cleveland Park, Mass. Ave. Heights, Woodley Park, Woodland-Normanstone Terrace	0.0
4	16	North Portal Estates, Colonial Village, Shepherd Park	0.0
4	17	Brightwood, Manor Park, Takoma	0.5
4	18	Brightwood Park, Crestwood, Petworth, 16th St. Heights	0.5
4	19	Fort Totten, Lamond Riggs, Pleasant Hill, Queens Chapel	0.4
5	20	North Michigan Park, Michigan Park, University Heights	0.5
5	21	Edgewood, Stronghold, Bloomingdale, Eckington, Truxton Circle	0.6
5	22	Brookland, Langdon, Brentwood	0.9
5	23	Arboretum, Ivy City, Trinidad, Carver Langston	0.0
5	24	Woodridge, Fort Lincoln, South Central, Gateway	0.4
6	25	Near Northeast, Stanton Park, Kingman Park	1.4
6	26	Capitol Hill, Lincoln Park, Capitol East	0.0
6	27	Near Southeast, Arthur Capper, Carrollsburg, Navy Yard	0.6
8	28	Historic Anacostia	0.6
7	29	Kenilworth, Eastland Gardens	0.0
7	30	Mayfair, Central Northeast	0.5
7	31	Deanwood, Burrville, NE Boundary, Lincoln Heights, Grant Park	0.5
7	32	River Terrace, Benning, Greenway, Fort Dupont	0.0
7	33	Capitol View, Marshall Heights, Benning Heights, Benning Ridge	0.4
7	34	Twining, Penn Bridge, Fairlawn, Randle Highlands, Ft. Davis Park, Ft. Dupont Park	0.9
7	35	Hillcrest, Fairfax Village, Naylor Gardens	0.6
8	36	Woodland, Garfield Heights, Knox Hill/Buena Vista	0.8
8	37	Barry Farm, Hillsdale, Sheridan, Fort Stanton	0.0
8	38	Skyland, Douglass, Shipley Terrace	1.0
8	39	Congress Heights, Bellevue, Washington Highlands	0.9

Source: D.C. Department of Health, State Center for Health Statistics Administration, 2000

K.

Selected

Indicators

of Child

Well-Being

and Poverty

Status in the

District of

Columbia,

Its Maryland

and Virginia

Suburbs, and

Baltimore City

Over the nine years that this fact book has been produced here in the District of Columbia, readers have repeatedly asked how the District compares to its suburbs in terms of the well-being of its children.

This year, with new poverty figures available from the 2000 Census, D.C. KIDS COUNT presents here several of our key indicators, as well as poverty data, for the District and for the surrounding suburbs in Maryland and Virginia.

We have included the City of Baltimore also to enable readers to compare the statistics for D.C. with those for a nearby city whose population is quite similar in size and in other important respects.

The comparisons show that the District's children fare much worse than those of its suburbs on the key indicators of child well-being that we show here.

There are actually more than twice as many children living in poverty in the suburbs than there are in the District - 73,305 in the suburbs vs. 35,367 in D.C. However, these poor kids make up a much smaller share of all suburban children than of children in the District — 6.7 percent in the suburbs vs. 31.7 percent in the District. The concentration of poverty in the suburbs is only a bit over one-fifth as great as in the city.

It would seem reasonable to expect to find a roughly similar relationship between the D.C. and suburban percentages on indicators of child well-being. But this is not the case.

To cite just one example, low weight births are 7.6 percent of births in the suburbs, compared to 11.9 percent in the District. That's close to two-thirds as high as the rate in D.C. So despite their much smaller burden of poverty, the suburbs have not achieved nearly as great an advantage over the District on this important indicator of child well-being.

When D.C. is compared to Baltimore, the poverty levels in the two cities are nearly the same. And Baltimore's children fare no better on most of our key indicators — in some respects, even worse.

Table 6

**Poverty, Births to Single Mothers, Births to Teens, Low Weight Births, and Infant Mortality
In the District, its Maryland and Virginia Suburbs, and Baltimore City, 2000**

	Number of Children*	Children in Poverty Number	Percent	Percent of All Births to Single Mothers	Percent of All Births to Teens	Percent Low Weight Births of All Births	Infant Deaths per 1,000 Live Births
District of Columbia	111,535	35,367	31.7%	60.3%	14.2%	11.9%	11.9
Maryland Suburbs	546,954	39,936	7.3%	30.3%	7.3%	8.3%	6.7
Virginia Suburbs	554,493	33,369	6.0%	20.3%	5.5%	6.9%	4.7
Maryland & Virginia Suburbs	1,101,447	73,305	6.7%	25.0%	6.4%	7.6%	5.6
Baltimore City	157,227	48,806	31.0%	70.5%	22.1%	13.8%	11.7

Sources: U. S. Census Bureau, State Health Departments

* Number of children whose poverty status was determined by the Census Bureau

V.

A WORD ABOUT THE DATA

Data Definitions and Sources *(in alphabetical order)*

We attempt to define our indicators clearly and adequately in the text, and to indicate data sources in all tables and charts. However, in case some are not clear, the definitions and sources of a number of key indicators follow. Where we feel there are important limitations in the data, these are also stated.

Some of the indicators are stated as percentages. For those whose math is rusty, a percentage is calculated by dividing the number of occurrences of a particular need or problem by some other quantity to which it is related — often the number of possible occurrences. Then, in order to make the result a whole number rather than a decimal fraction, it is multiplied by 100. For example, to get the percentage of all births that are to unmarried mothers, we divide the number of births to unmarried mothers by the total number of births, then multiply the result by 100.

TANF(Welfare) Payments

How Defined: The average number of children covered by public assistance payments in a given time period (year or month). TANF stands for “Temporary Assistance to Needy Families.” Beginning in 1996 it replaced “Aid to Families with Dependent Children” (AFDC).

Source: D.C. Department of Human Services, Income Maintenance Administration.

Babies Born Without Adequate Prenatal Care

How Defined: The annual average number and/or percent of infants born to mothers who received no prenatal care or either inadequate or Intermediate care, based on the Institute of Medicine criteria, as shown in the adjoining table.

Source: D.C. Department of Health, State Center for Health Statistics Administration.

Limitation(s): These and all other vital statistics data are not available until the second year following their collection; i.e., the latest statistics in this year’s report are for 2000.

Births to Single Mothers

How Defined: The annual number and/or percent of births that occur to mothers who do not report themselves as married when registering for the birth.

Source: D.C. Department of Health, State Center for Health Statistics Administration.

Limitation(s): These and all other vital statistics data are not available until the second year following their collection; i.e., the latest data in this year’s report are for 2000.

INSTITUTE OF MEDICINE CRITERIA FOR ADEQUACY OF PRENATAL CARE

Category	If Gestation is (in Weeks):	And Number of Prenatal Visits is at Least:
Adequate	13 or Less	1
	14 to 17	2
	18 to 21	3
	22 to 25	4
	26 to 29	5
	30 to 31	6
	32 to 33	7
	34 to 35	8
	36 or More	9
Inadequate	And Number of Prenatal Visits is No More Than:	
	14 to 21	0
	22 to 29	1
	30 to 31	2
	32 to 33	3
	34 or More	4
Intermediate	All Combinations Other Than Above	

Births to Teenage Mothers

How Defined: The annual number and/or percent of births that are to women or girls between 15 and 19 years of age.

Source: D.C. Department of Health, State Center for Health Statistics Administration.

Limitation(s): Note that many of these young mothers, those aged 18 or 19, are legally adults. Vital statistics by age are normally reported for five-year age groups, e.g., 15-19. The national KIDS COUNT Data Books report these numbers in the same way.

These and all other vital statistics (such as deaths) are not available until the second year following their collection; i.e., the latest statistics in this year's report are for 2000.

Child Abuse and Neglect Cases

How Defined: The annual number of new cases filed with the D.C. Superior Court alleging child abuse or neglect.

Source: The Annual Reports of the District of Columbia Courts.

Limitation(s): These are cases alleging child abuse or neglect, not verified occurrences. The D.C. Government does keep track of verified instances of child abuse; the numbers are considerably smaller. However, there may be a variety of reasons why actual abuses might not be verified. Both measures probably understate the extent of the problem. Both can probably serve better as indicators of change in the magnitude of the problem rather than as exact measures of the magnitude itself. Court statistics are not available for wards or other sub-areas of the District.

Child Support Cases

How Defined: The annual number of new cases filed for child support in the District of Columbia.

Source: The Annual Reports of the District of Columbia Courts.

Limitation(s): Court statistics are not available for wards or other sub-areas of the District.

Graduation Rate:

How Defined: The percentage of the number of students enrolled in 10th grade who graduate three years later. Note that the graduates are not necessarily all the same children, but may include some who entered the D.C. schools after 10th grade.

Source: Parents United for the D.C. Public Schools. (The public schools data come originally from the D.C. Public Schools themselves, but are analyzed by Mary Levy for Parents United for the D.C. Public Schools. It is these data in analyzed form that D.C. Kids Count reports here.)

Homeless Children and Families

How Defined: Those children and families who do not have a permanent home in which they can live. They may be housed in shelters or in transitional housing, staying with family or friends, or may be totally without shelter.

Source: The Community Partnership for the Prevention of Homelessness.

Infant Mortality Rate

How Defined: The number of deaths to infants under 1 year per 1,000 live births. Note that this is not a percentage.

Source: D.C. Department of Health, State Center for Health Statistics Administration.

Limitation(s): These and all other vital statistics data are not available until the second year following their collection; i.e., the latest data in this year's report are for 2000.

Juvenile Cases

How Defined: The annual number of new cases filed against juveniles (under 18) in the D.C. Superior Court.

Source: The Annual Reports of the District of Columbia Courts.

Limitation(s): Court statistics are not available for wards or other sub-areas of the District.

Low Birth Weight Babies

How Defined: The annual number of babies born at weights under 5.5 pounds or 2,500 grams.

Source: D.C. Department of Health, State Center for Health Statistics Administration.

Limitation(s): These and all other vital statistics data are not available until the second year following their collection; i.e., the latest data in this year's report are for 2000.

Paternity Cases

How Defined: The number of new cases alleging paternity filed with the D.C. Superior Court.

Source: The Annual Reports of the District of Columbia Courts.

Limitation(s): Court statistics are not available for wards or other sub-areas of the District

Teen Violent Deaths

How Defined: The annual number of deaths from violent causes (accident, murder, or suicide) to persons aged 15 to 19.

Source: D.C. Department of Health, State Center for Health Statistics Administration.

Limitation(s): These and all other vital statistics data are not available until the second year following their collection (i.e., the latest data in this year's report are for 2000).

VI.

ACKNOWLEDGEMENTS

Congratulations are extended to advocates of the District's Children, including individuals, families, neighborhoods, organizations and communities who have advocated for children and who have made the publication of this annual Fact Book possible.

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Photos provided by:
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D.C. KIDS COUNT ON TOUR 2002 CONTEST

*“Why Every Kid Counts
in the District of Columbia.”*

The D.C. KIDS COUNT Collaborative sponsored an Art and Poetry Contest to highlight the extraordinary talents of students in Kindergarten through 8th grade in the D.C. Public School System. Three winners were chosen amongst the 15 poetry entries that were received this year. No artwork was submitted to us by the contest deadline. Contestant entries were judged on originality, creativity, and expression of theme. Awardees will receive prizes for their efforts. The 1st Place winner will receive a computer, the 2nd Place winner will receive a \$200 Savings Bond and the 3rd Place winner will receive a \$100 Savings Bond. Congratulations to our winners and many thanks are extended to all students who entered the contest.

**HURRAH to
All of Our Stars!**

1st Place

Marissa Montfort

10 years old, 4th grade

Lucy D. Slowe Elementary School, Teacher - Ms. Watson

Why Kids Count in DC

I'm not just a kid
I'm the future of the District of Columbia
I'm smooth
I'm smart
I'm great
I am a child of God
I am Moses' rod

I am anything I want to be
I am an angel with wings
I am a bird in the sky
I believe I can fly
I'm a spinner
I'm a winner
I'm a squeaky noise
I'm a room full of toys
I'm a dimple in a chin
I'm a fish's fin
I'm a king on a throne
I'm a doctor, lawyer, a teacher, a nurse

I am whatever I want to be
I am education from A to Z
I am a hero with a smile
I am a kid who survived the September 11 tragedy

I can be me
Free of drugs, free of crime
With a magnificent mind
I'm not just a kid
I'm the future of the District of Columbia



2nd Place

Paul J. Crosby
12 years old, 7th grade
MacFarland Middle School, Teacher - Mrs. Gordon

Why kids Count in D.C.

Why kids count in D.C.
Today is the day I'm here to say that I'm not just a kid.
I'm the future.
Some people don't believe in the future,
but I'm going to show them that I'm the future and that's the truth.
I'm going to get my certificate to be all that I can be,
And then off to college it's for me to be able to get my degree.
To help my community in D.C. or service other's who need,
until I can be able to get a job.
I think I could be able to write my own book,
I could be the world's greatest author,
the next Mayor, Fire Chief, Police Chief, CEO.
That sounds like me.
I love to enjoy the benefits provided to me in D.C.
and experience the richness of being a kid in Washington, D.C.
I am awaiting my future.
I'm not just a kid, I'm the future of D.C.
Can't you see, I'm not just a kid, I'm the future.
That's why kids count in D.C.

3rd Place

Cardearoe McCombs
8 years old, 3rd grade
Clark Elementary School, Teacher - Ms. Chait

I'm Not Just a Kid

I'm not just a kid
I'm life
I'm the future
I can be anything
No child should be left behind because of how
their parents treat them

I'm not just a kid
I'm human
I'm a person
A body no one can take advantage of

I'm not just a kid
I'm a future grown up
People should respect me
So I can grow up to respect others

I'm not just a kid
I'm life
I'm the future



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