

Alaska 2005



**Institute of Social and Economic Research
University of Alaska Anchorage**

Kids Count Alaska

.....2005

Data Book

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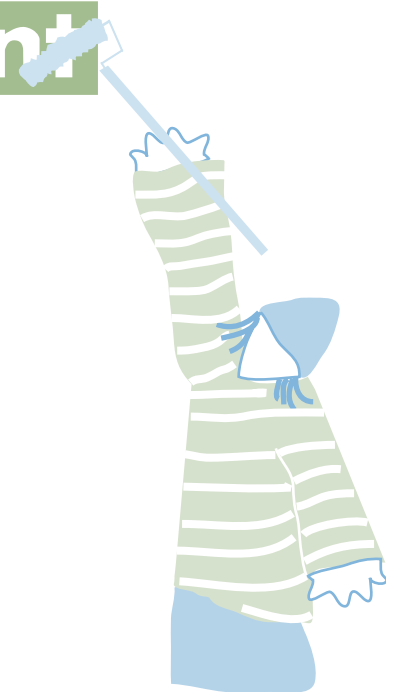
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Acknowledgments

We thank many people for their help with this book, but our special thanks go to the foster families who shared their time and their stories with us. Those stories appear on the divider pages for each section and on the final page of the book.

FOSTER FAMILIES

The Doughty Family
The Hohenthanner Family
The McCarr Family
The Norton Family
The Perkins Family
The Rookala Family
The Teeluk Family

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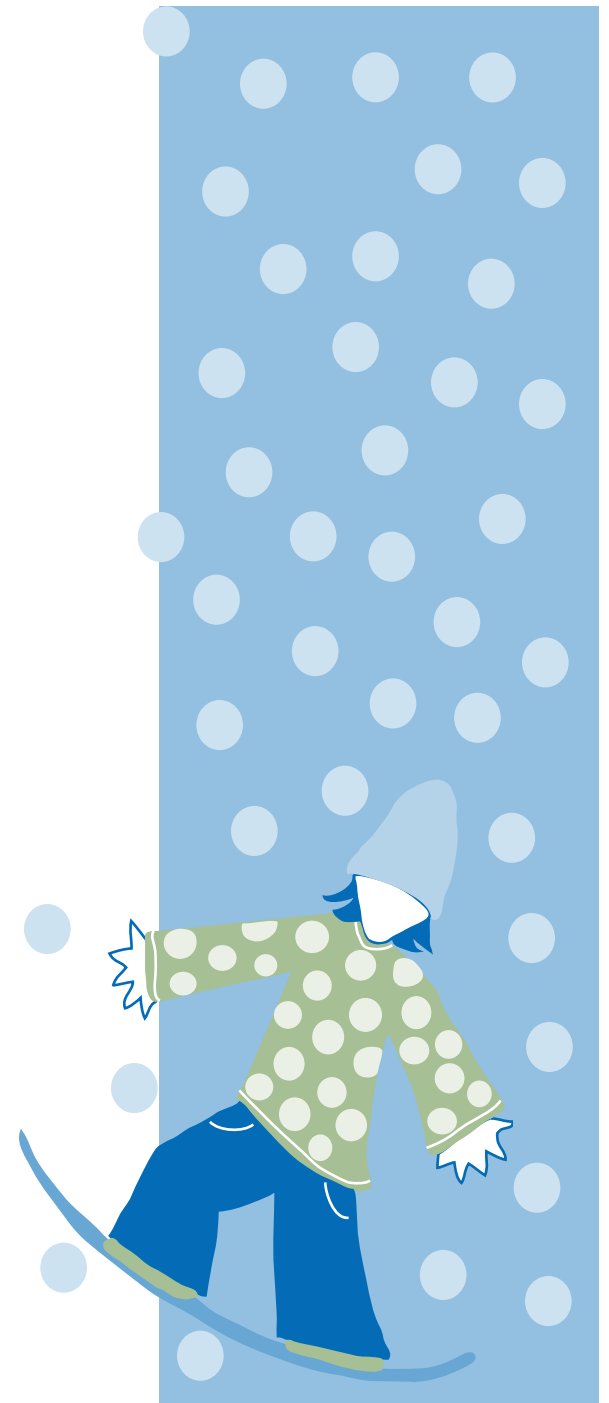
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Introduction

ABOUT THIS YEAR'S BOOK

Every year the Kids Count Alaska Data Book tries to provide a good picture of how the children of Alaska are doing. But we also like to tell readers more about life in Alaska, to put the indicators of children's well-being in context.

This year we show a snapshot of Alaska children in foster care. These are mostly children the state Office of Children's Services (OCS) has taken, either temporarily or permanently, out of their parents' homes—because the children were judged to be in "immediate" danger or their parents couldn't be located. In some cases, parents voluntarily put their children into foster care, and in rare cases parents abandon children.

OCS reports that it removes children from their own homes only as a last resort, and that it attempts to reunite families when possible. Almost all children in foster care have been hurt or neglected by their parents—or hurt by other adults their parents should have protected them from. Parents whose children go into foster care often drink to excess or use drugs. Many children in foster care were born with developmental or other problems, because their mothers drank or used drugs while they were pregnant. Fetal alcohol spectrum disorder (FASD) is very common among Alaska children in foster care.

There are several types of foster care. Most children taken out of their homes are placed with foster families. Those families sometimes include relatives of the foster children, but often they don't. The pie charts show that as of January 2007, 70% of the nearly 2,100 children in foster care were with foster families, either with or without relatives.

Another 14% were on "trial home visits." These are children who have been in foster care and returned to their families; during the first six months after they return, OCS considers them to be on trial home visits.

Families with and without children of their own can become foster families; couples or single people can be foster parents. Some families also adopt children who come to them through the foster care system. About 1% of children in foster care at the start of 2007 were living with families in the process of adopting them.

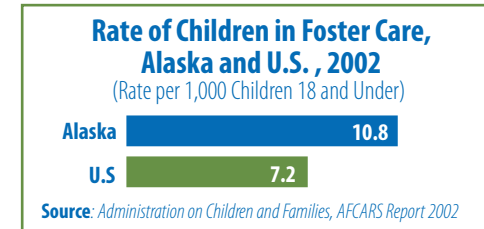
Other children and teenagers who had been removed from their homes were living in various kinds of facilities, including those for children who have severe disabilities or need psychiatric care.

WHO ARE ALASKA'S FOSTER CHILDREN?

The number of children in foster care varies throughout the year, as some children are returned to their parents' custody and others come into the foster care system. Some are adopted and others age out of the system.

The pie charts below show that at the start of 2007, more than a third of the children in foster care were age 5 or younger, and about half were between the ages of 6 and 15. The remaining 15% were older teenagers—16 to 19.

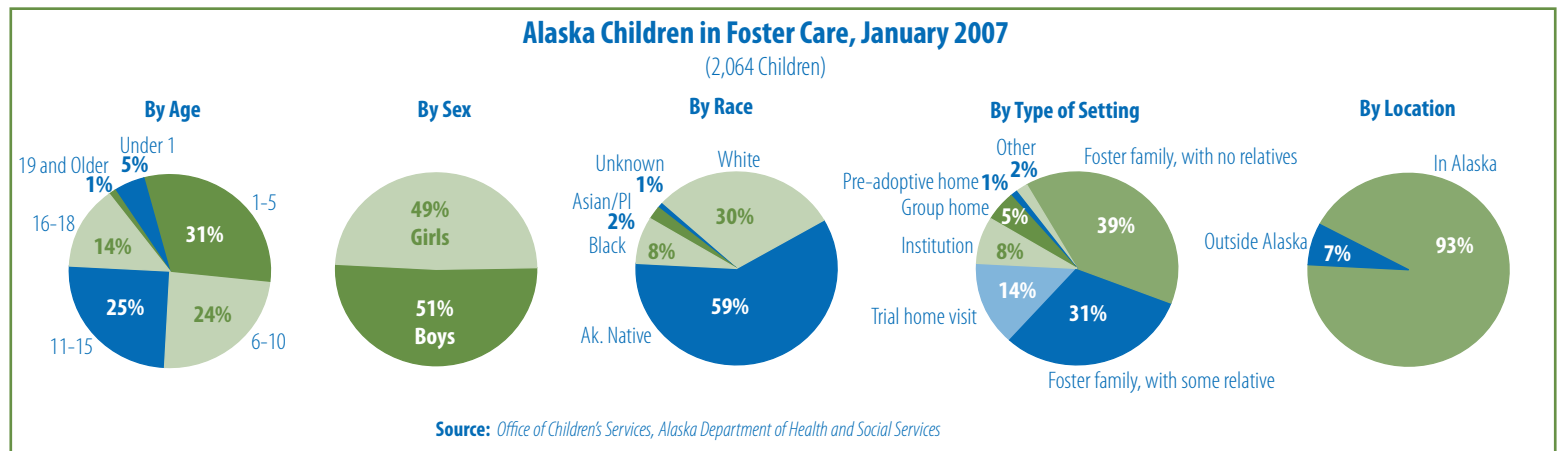
Children in foster care in early 2007 were almost evenly split between boys and girls, although there were a few more boys than girls. Close to 60% were Alaska Native and another 30% were White. About 10% were from other minorities.

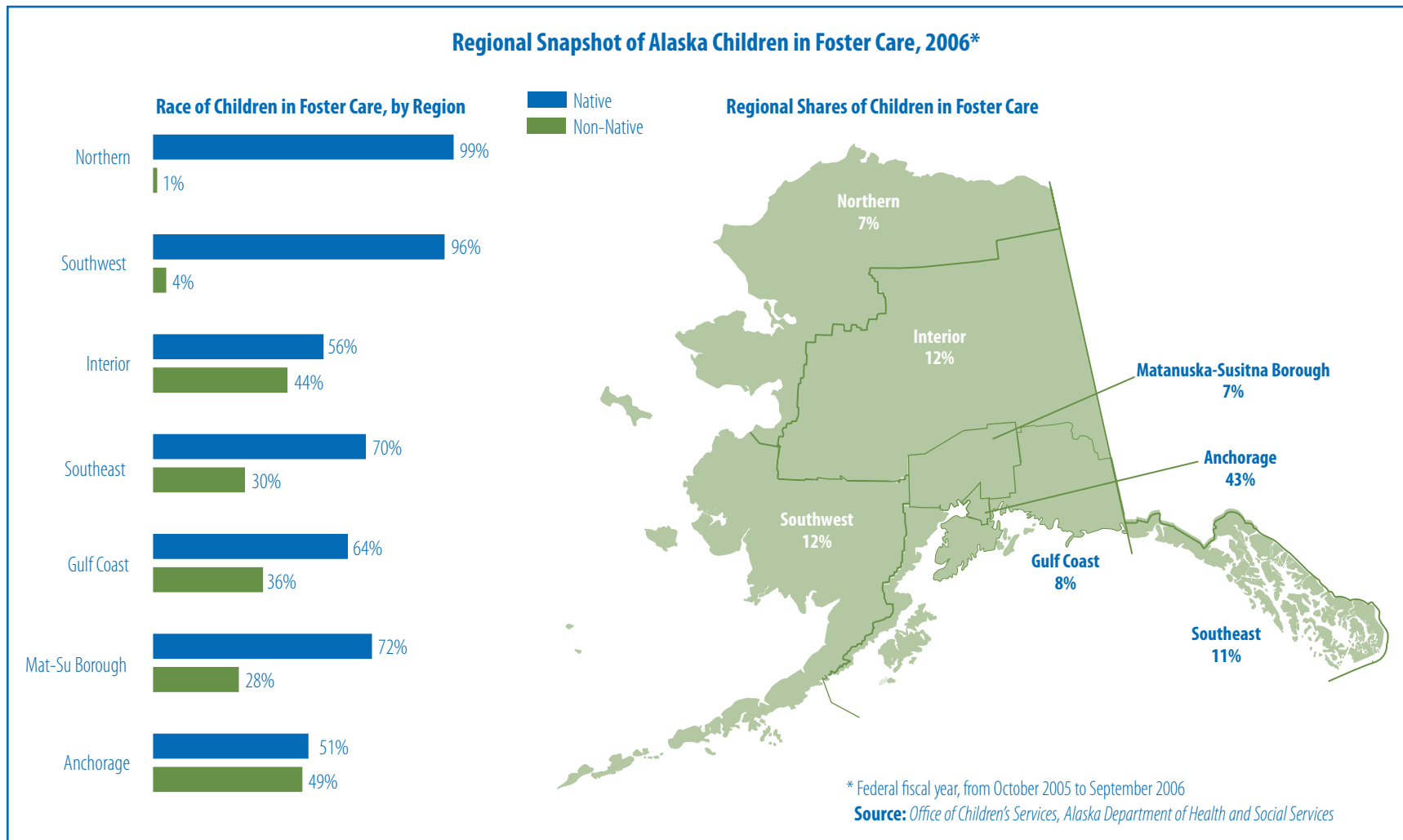


At the start of 2007, about 7% of the Alaska children in foster care were living outside Alaska—many in institutions for children needing mental-health or other services, some with relatives.¹

The map on the facing page shows that on average in 2006 about half the children in foster care in Alaska were in Anchorage and the adjoining Mat-Su Borough. The Interior and Southwest regions each had 12%; 11% were in the Southeast; 8% in the Gulf Coast; and 7% in the North.

The bar charts to the left of the map show children in foster care by race in each region in 2006. In the Northern and Southwest regions (where the residents are mostly Alaska Native), almost all the children in foster care were Native. But Native children also made up more than half the children in foster care in other regions too—from 51% in Anchorage to 70% in the Southeast region and Mat-Su Borough.





WHO ARE FOSTER FAMILIES?

Adults taking in foster children must be licensed by the state, which among other things requires applicants to pass criminal background checks and to agree to have their homes inspected to insure they meet state safety standards and provide adequate space for foster children. Foster parents are paid to cover the costs of taking care of children.²

In Alaska and elsewhere, there are sometimes reports about foster families that have also abused or neglected the children they promised to protect. We have no statistics about how often that happens.

But the Alaska Center for Resource Families told us about a number of outstanding foster families—families who have helped and become part of the lives of dozens of children over the years. OCS contracts with the center to train and provide information to foster families.³

Several families generously shared their stories with us. You'll find those stories on section divider pages throughout this book and also on the final page. We thought it was appropriate to close this year's book with stories about these families.

They all told us that the difficulties of being foster parents can be considerable, but that the rewards were much greater. Several families we talked with had adopted one or more of the children who came to them through foster care. They also told us they wished more Alaska families would open their homes to foster children, most of whom have faced a lot of hardships in their young lives.⁴

Introduction (continued)

WHAT IS KIDS COUNT ALASKA?

Kids Count Alaska is part of a nationwide program, sponsored by the Annie E. Casey Foundation, to collect and publicize information about children's health, safety, and economic status. We pull together information from many sources and present it all in one place. We hope this book gives Alaskans a broad picture of how the state's children are doing and provides parents, policymakers, and others interested in the welfare of children with information they need to improve life for children and families. Our goals are:

- Broadly distributing information about the status of Alaska's children
- Creating an informed public, motivated to help children
- Comparing the status of children in Alaska with children nationwide, and presenting additional Alaska indicators (including regional breakdowns) when possible

WHO ARE ALASKA'S CHILDREN?

Nearly 205,000 children ages 18 or younger live in Alaska. That's almost a third of Alaska's current population of about 658,000. Boys outnumber girls by close to 6%.

More than half the children in the state live either in Anchorage or the adjacent Mat-Su Borough (as the map on the facing page shows). The other half of Alaska's children are far less concentrated, with 5% in the Northern Region, 7% in the Southwest, 15% in the Interior, 11% along the Gulf Coast, and 9% in Southeast. White children are in the majority statewide and in most regions, but in the Northern and Southwest regions most children are Alaska Native.

Over the past 15 years, Alaska's children as a group have gotten older, more racially diverse, and more international. The total number of children in Alaska increased about 11% between 1990 and 2004, but the number of children ages 9 and younger dropped 8% and the number ages 10 to 18 rose 40%.

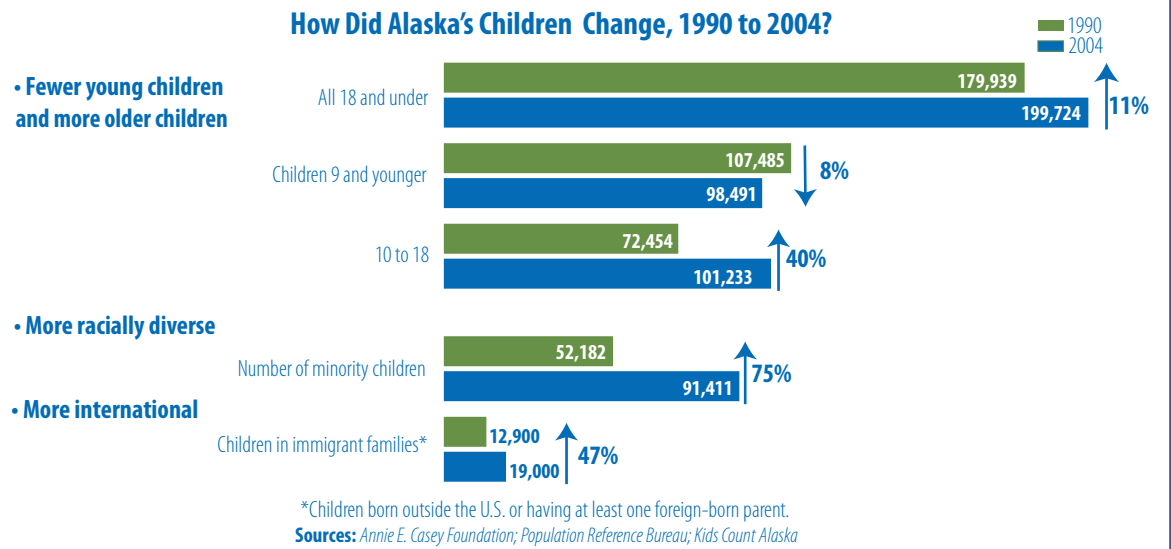
During the same period, the number of children from minorities—the largest minority being Alaska Native—increased 75%, while the number from immigrant families was up nearly half.

Alaska's Children by Age and Sex, 1990 and 2004

	1990				2004			
	Total	Male	Female	Total	Male	Female		
Total Alaska Population	550,043	289,868	260,175	657,755	338,120	319,635		
Children By Age	Number	Percent		Number	Percent			
Under 1	11,963	6.6%	6,109	5,854	10,457	5.1%	5,349	5,108
1-4	44,014	24.5%	22,616	21,398	42,216	20.6%	21,890	20,326
5-9	51,508	28.6%	26,543	24,965	51,040	24.9%	26,105	24,935
10-14	42,939	23.9%	22,333	20,606	56,939	27.8%	29,058	27,881
15	7,652	4.3%	4,021	3,631	11,375	5.6%	5,858	5,517
16	7,341	4.1%	3,786	3,555	11,239	5.5%	5,783	5,456
17	7,453	4.1%	3,887	3,556	10,887	5.3%	5,636	5,251
18	7,069	3.9%	3,834	3,235	10,619	5.2%	5,527	5,092
Total 18 and under	179,939	100.0%	93,129	86,810	204,772	100.0%	105,206	99,566

Source: Alaska Department of Labor and Workforce Development 2004 Age, Race, and Sex Estimates

How Did Alaska's Children Change, 1990 to 2004?



Boroughs and Census Areas, by Region

Municipality of Anchorage

Matanuska-Susitna Borough

Gulf Coast Region

Kenai Peninsula Borough
Kodiak Island Borough
Valdez-Cordova Census Area

Interior Region

Denali Borough
Fairbanks North Star Borough
Southeast Fairbanks Census Area
Yukon-Koyukuk Census Area

Northern Region

Nome Census Area
North Slope Borough
Northwest Arctic Borough

Southeast Region

Haines Borough
City and Borough of Juneau
Ketchikan Gateway Borough
Prince of Wales/Outer Ketchikan Census Area
City and Borough of Sitka
Skagway-Hoonah-Angoon Census Area
Wrangell-Petersburg Census Area
Yakutat Borough

Southwest Region

Aleutians East Borough
Aleutians West Census Area
Bethel Census Area
Bristol Bay Borough
Dillingham Census Area
Lake and Peninsula Borough
Wade Hampton Census Area

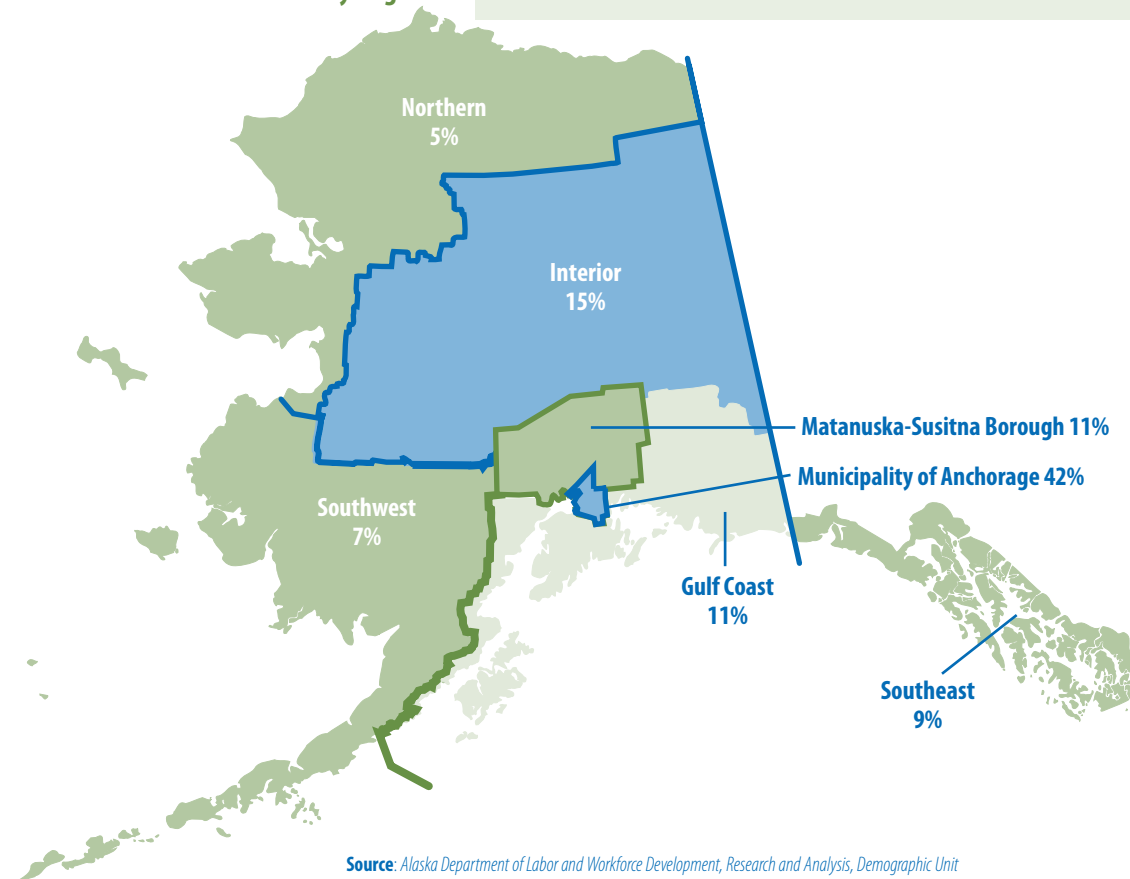
Racial Composition of Children (19 and Under), by Region, 2004

Region	White	Alaska Native ^a	Black	Asian/Pacific Isl.
Anchorage	72.0%	11.6%	7.5%	8.8%
Mat-Su	86.7%	9.8%	1.4%	2.1%
Gulf Coast	79.0%	13.8%	1.1%	6.1%
Interior	74.7%	16.3%	6.0%	3.2%
Northern	11.6%	85.3%	0.5%	2.7%
Southeast	68.2%	24.6%	1.2%	6.0%
Southwest	12.1%	85.4%	0.5%	1.9%
Alaska	67.2%	22.5%	4.5%	5.9%

^aAlso includes American Indians, who make up 0.5% of Alaska's population.

Source: Alaska Department of Labor and Workforce Development, Research and Analysis, Demographic Unit.

Percent Distribution of Alaska Children by Region



Source: Alaska Department of Labor and Workforce Development, Research and Analysis, Demographic Unit

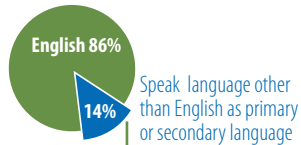
Introduction (continued)

Other signs of the growing minority and international character of Alaska's children are the changing minority share of school children and the array of languages spoken by students in Anchorage's schools.

Between 1988 and 2005, children from minorities increased from less than a third of Alaska's school children to nearly half. And while most of Anchorage's school children speak English as their primary language, nearly one in seven speaks a different language—the most common being Spanish, Tagalog, Samoan, and Hmong.

Languages Spoken by Anchorage School District Students, 2006

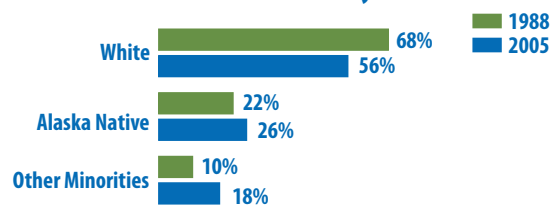
Total students: 49,589



1. Spanish	1,838
2. Tagalog (Philippines)	949
3. Samoan (Pacific Island)	819
4. Hmong (Southeast Asia)	765
5. Korean	369
6. Lao (Laos)	315
7. Yupik	290
8. Russian	161
9. Mien (Thailand)	157
10. Inupiaq	90
All other languages	971
Total	6,724

Source: Anchorage School District

Alaska K-12 Students by Race



Source: Alaska Department of Education and Early Development

CONTINUING DEVELOPMENT OF ACS SAMPLE

As we discussed in last year's data book, the national KIDS COUNT program is now using the U. S. Census Bureau's American Community Survey to calculate the indicators that are based on information from a sample of the population. Those indicators are the percentage of children living in poverty; the percentage of children in single-parent families; the percentage of children with no parent working full-time; the percentage of teenagers who are high-school dropouts; and the percentage of teenagers who are not in school and not working.

Formerly KIDS COUNT used the Census Bureau's Current Population Survey to calculate those indicators, but the American Community Survey promises to provide more timely information and to better represent places with smaller populations.

The American Community Survey started in 2000, but in the first years its Alaska sample size wasn't complete. The sample is now complete, but the Census Bureau is still working to make the sample representative of the many small communities across Alaska. So while the survey sample has become more representative in recent years, we think it will improve more in the coming years.

ALASKA/U.S. COMPARISONS

The table on the facing page compares conditions among Alaska children with the U.S. averages for the major Kids Count indicators, in 2000 and in either 2003 or 2004. (For some indicators, the most recent data is for 2003.) Comparing changes in Alaska and nationwide in the past several years we can see:

Since 2000, the share of babies born at low weight (under 5.5 pounds) increased in both Alaska and the country as a whole.

- The teen birth rate has continued to decline in recent years, in both Alaska and the U.S. as a whole.
- The share of children living in single-parent families stayed about the same in Alaska and nationwide in the early 2000s.
- The percentage of teenagers not in school and not working has increased sharply in Alaska since 2000 but held steady nationwide.

Looking at how Alaska compared with the U.S. averages in 2004, we see:

- Alaska ranked among the best in the country for its lower share of babies born at low weight; for its lower share of children living in poverty; and for its lower teen dropout-rate.
- Alaska ranked near the U.S. average in infant mortality rate, teen birth rate, and percentage of children in single-parent families.
- Alaska ranked among the worst in the nation for its higher percentages of teenagers neither in school nor working; its higher share of children living in families with no parent working full-time; and its higher rates of deaths among children and teenagers.

INTERPRETING THE INDICATORS

Every year we remind readers that Alaska has a relatively small number of children—and even smaller numbers when they're divided by region, by race, and by sex. That means rates for a number of indicators are based on small numbers that can be up one year and down the next. We try to compensate for that, whenever possible, by using averages over several years for our regional indicators.

Also, keep in mind our earlier discussion about the sample for the American Community Survey in Alaska—the U.S. Census Bureau is still working to make that sample more representative of Alaskans living in the state's many small remote communities.

HIGHLIGHTS

Every year at the end of this Introduction section we highlight a few of the topics discussed in later sections of the book. This year, on pages 10 through 12, we talk about two issues currently on the minds of Alaskans: the number of serious and fatal accidents among children and teenagers driving or riding on off-road vehicles; and the need to strengthen Alaska's education system.



Alaska and U.S. Comparison, 2000 and 2004

	Alaska		U.S.		Alaska Rank
	2000	2003/2004*	2000	2003/2004*	2003/2004
Alaska Among the Best					
Low-weight births (Percent)	5.6%	6.0%	7.6%	7.9%	1
Teen dropouts (Percent ages 16-19)	8%	5%	11%	8%	7
Children living in poverty (Percent of children in families below federal poverty line)	13%	11%	17%	18%	3
Alaska Near U.S. Average					
Infant mortality rate (Deaths per 1,000 births)	6.8	7.0	6.9	6.9	28
Teen birth rate (Births per 100,000 girls 15-19)	49	39	48	42	24
Single-parent families (Percent of children in single-parent families)	30%	30%	31%	31%	25
Alaska Among the Worst					
Child death rate (Deaths per 100,000 children 1-14)	32	38	22	21	50
Teen death rate (Deaths per 100,000 ages 15-19)	142	105	67	66	50
Idle teens (Percent not working or going to school)	8%	12%	9%	9%	46
Underemployed parents (Percent of children in families with no parent working full-time)	49%	40%	32%	33%	49

*Some data available for 2004, some only for 2003.

Source: Annie E. Casey Foundation, Kids Count Data Book 2006

Highlights

ACCIDENTS WITH OFF-ROAD VEHICLES

Alaska is huge, and roads cover only about 10% of its 375 million acres. Off-road vehicles (both all-terrain vehicles and snowmachines) give Alaskans access to hunting, fishing, and recreation, and in remote areas they're also used for basic transportation. Children as well as adults commonly drive them.

But accidents with off-road vehicles are among the top causes of injuries among young Alaskans. From 1998 to 2002, nearly 500 accidents with off-road vehicles were serious enough to put children and teenagers in the hospital. Such accidents were the leading cause of serious injuries in much of northern, southwestern, and interior Alaska. Close to a dozen children and teenagers died in off-road vehicle crashes in the last half of the 1990s.⁵

In early 2007, the death of a 7-year-old boy who died when he crashed the snowmachine he was driving got widespread press coverage and re-kindled a long-standing debate in Alaska over whether and how the state should try to make children and teenagers safer on off-road vehicles.⁶

State law exempts drivers of snowmachines and ATVs from the general requirement that anyone operating a motor vehicle on public property have a driver's license.⁷ Nor are young drivers required to wear helmets.⁸

Some Alaskans argue that any state rules for young drivers would be hard to enforce, especially in remote areas, and that parents should be responsible for keeping their children safe. Others say safety measures for children using off-road vehicles would be similar to existing safety laws for children and teenagers in cars or on motorcycles.⁹

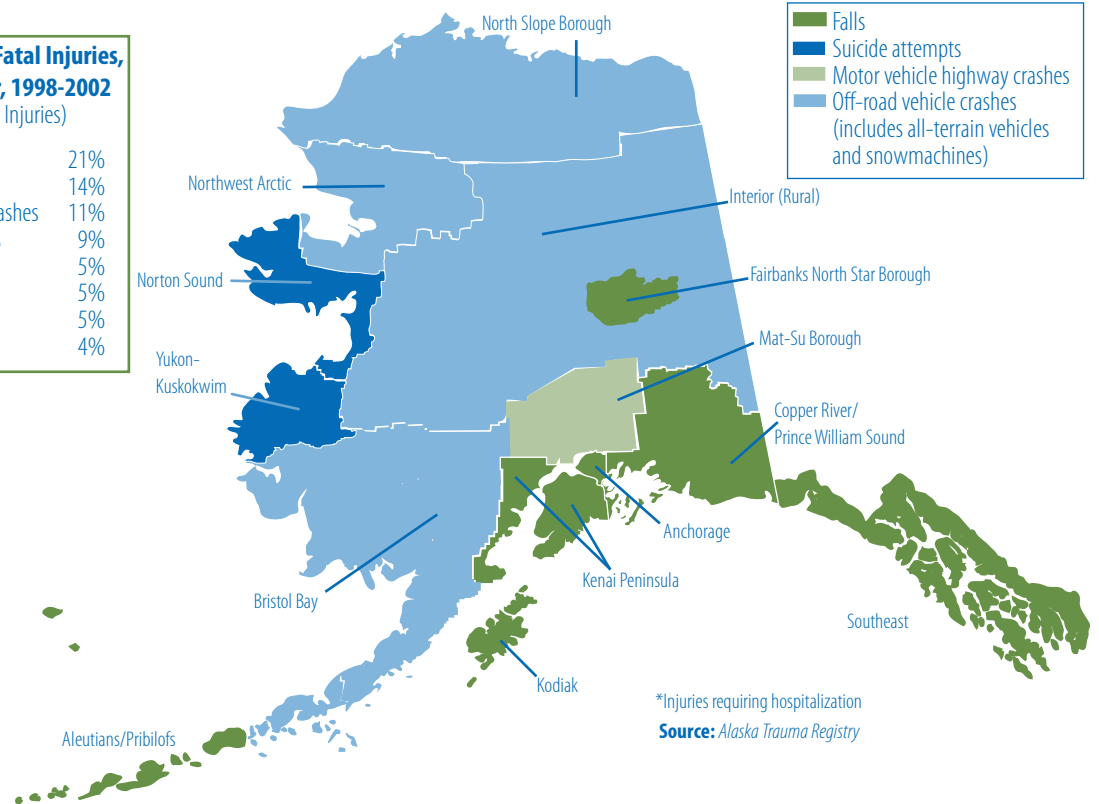
Whatever the state decides to do, one thing parents and other adults can do for children now is to make sure they wear helmets. Helmets can't prevent all injuries, but they can prevent many—especially traumatic brain injuries.¹⁰

How many young drivers wear helmets? In a 2001 study, researchers observed hundreds of children and teenagers driving or riding on off-road vehicles in a number of urban and rural places. They found that the percentage wearing helmets while driving or riding on snowmachines

Leading Causes of Non-Fatal Injuries, Alaskans 19 and Under, 1998-2002 (Percent of Total 5,682 Injuries)

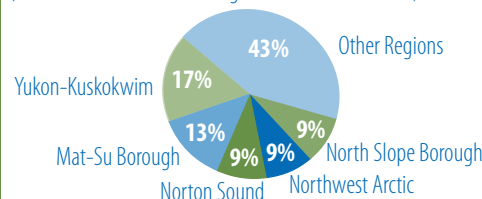
1. Falls	21%
2. Suicide attempts	14%
3. Motor vehicle highway crashes	11%
4. Off-road vehicle accidents	9%
5. Assaults	5%
6. Bicycle accidents	5%
7. Sports injuries	5%
8. Poisons	4%

Leading Causes of Non-Fatal Injuries,* Alaskans 19 and Under, by Region of Residence, 1998-2002



Where Do Serious Injuries From Off-Road Vehicle Crashes Occur?

(Total of 494 Accidents Among Alaskans 19 and Under, 1998-2002)

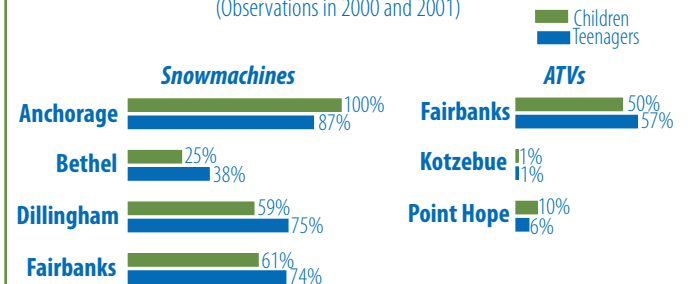


Source: Alaska Trauma Registry

varied from about 25% to 35% in Bethel to nearly 100% in Anchorage. Helmet use on ATVs was lower, ranging from almost zero in Kotzebue to about 50% in Fairbanks.¹¹

Helmet Use Among Teenagers and Children Riding Off-Road Vehicles, Selected Alaska Communities*

(Observations in 2000 and 2001)



*We do not show findings in communities where there were fewer than 20 observations.

Source: Alaska Helmet Observational Surveys, May 2000 to May 2001, Alaska Injury Prevention Center

STRENGTHENING EDUCATION IN ALASKA

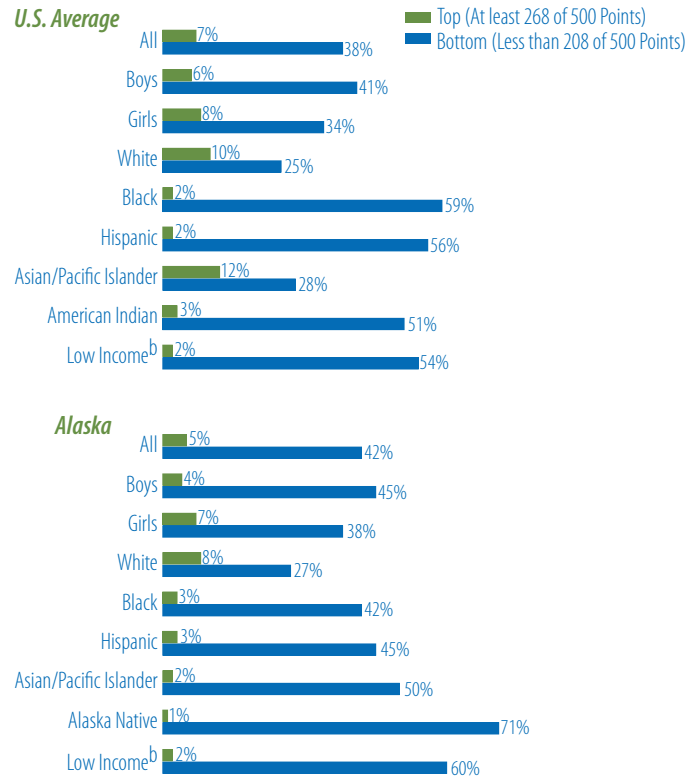
Alaska's education system has grown and improved enormously since Alaska became a state in 1959. Still, that system faces big challenges—as the figures on this page and the next show—and public and private groups are looking for ways to strengthen it.

- International comparisons have found that American school children can't do math and science as well as children in a number of other countries. For example, the 2003 Trends in Mathematics and Science Study ranked American fourth-graders 12th among 25 participating countries in math and 6th in science.
- Many students nationwide and in Alaska can't pass basic reading, writing, and math tests—and there is evidence that children in Alaska are falling below U.S. averages. For instance, in the 2005 National Assessment of Educational Progress, only 5% of Alaska's fourth-graders scored at the "advanced" level in reading, compared with 7% nationwide—and 42% of Alaska's fourth graders scored "below basic," compared with 38% nationwide.
- High-school graduation rates in Alaska are also below the U.S. average. Just 68% of Alaska's high-school seniors graduated in the 2002–2003 school year, compared with 74% across the U.S.
- Low test scores and low graduation rates are especially big problems among Alaska Natives and other minorities and students from families with low incomes.
- Many Alaska children are entering kindergarten without the skills educators think they need to succeed in school (see figure, page 12).
- Alaska's high schools also have fewer courses in career and technical education (CTE) than they did in the 1990s (see figure, page 12). That worries educators who believe enrollment in CTE courses helps keep high-risk students from dropping out. It also concerns leaders in construction and other industries,

who say that Alaska needs more skilled workers to take the place of those who will soon retire and to take advantage of future job opportunities.

What are Alaskans doing to deal with these problems? A special task force is investigating how expanding public preschool in Alaska could help students do better later on. A consortium of business and labor organizations, school districts, and others are working to link high-school and post-secondary CTE programs and help students get degrees or other credentials.

Percentage of 4th Graders Scoring at Top and Bottom of NAEP Reading Test, 2005^a



^aNational Assessment of Educational Progress

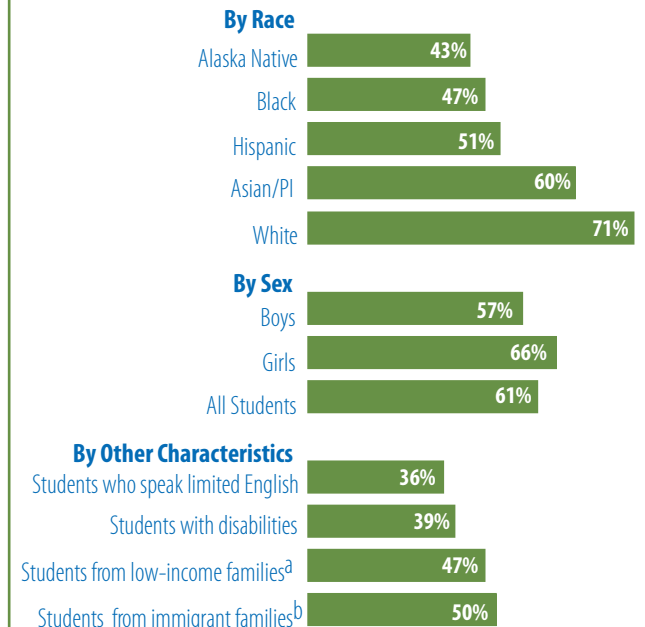
^bEligible for free or reduced-price school lunch

Source: National Assessment of Educational Progress

Rank of U.S. Fourth Graders, Trends in Mathematics and Science Study, 2003

Science Test	Math Test
1. Singapore	1. Singapore
3. Japan	9. Russia
6. U.S.	12. U.S.
14. Italy	21. Norway
25. Morocco	25. Tunisia

Graduation Rates Among Groups of Alaska Students, 2005

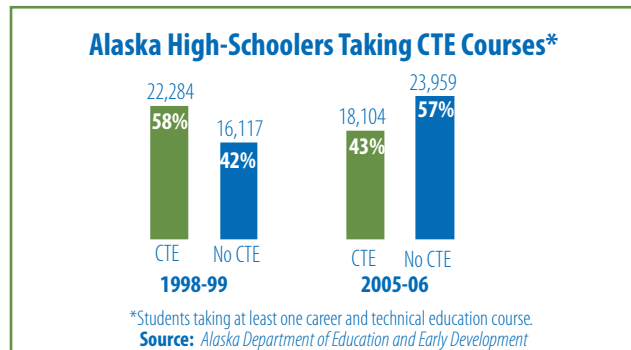
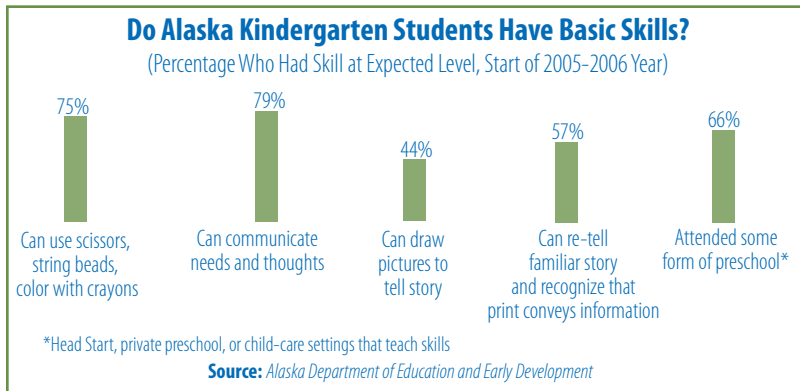


^a "Low-income" as measured by eligibility for free or reduced-price lunch

^b "Immigrant" families are those with at least one foreign-born parent

Source: Alaska Department of Education and Early Development

Highlights (continued)



ENDNOTES FOR INTRODUCTION

1. For a recent story of one child in foster care outside Alaska, see “A Sister’s Love, The State’s Call,” by Lisa Demer, in *Anchorage Daily News*, February 4, 2007, page A-1.
2. See the Web site of the Office of Children’s Services, in the Alaska Department of Health and Social Services, for requirements for licensed foster families and other information: www.hss.state.ak.us/ocs.
3. See www.acrf.org.
4. See note 2.
5. Alaska Trauma Registry: www.hss.state.ak.us/dph/ipems/injury_prevention/trauma.htm
6. See, for example, “Danger Awaits Unwary,” by Megan Holland, *Anchorage Daily News*, January 29, 2007.
7. Alaska Statutes 28.15.021. This exemption was enacted in 2002.
8. In 2001 the Alaska Legislature considered but didn’t pass a bill that would have required those 16 and under to wear helmets while driving or riding on snowmachines and all-terrain vehicles—Senate Bill 13, “Helmet Use on Off-Road Vehicles,” introduced January 8, 2001.
9. Motorcycle drivers under age 18 and all motorcycle passengers are required to wear helmets; children in cars or trucks must be either in car seats or wearing seatbelts, depending on their age and weight.
10. See, for example, two reports of the Alaska Trauma Registry, *Serious and Fatal Child and Adolescent Injuries in Alaska, 1994–1998*, and *Traumatic Brain Injuries in Alaska, 1996–1998*. See also *Kids Count Alaska Data Book 2001*, page 50, when we last reported on injuries to children from off-road vehicle accidents.
11. *Alaska Helmet Observational Surveys, May 2000 to May 2001*. Prepared by Ron Perkins, Alaska Injury Prevention Center, for the Alaska Division of Public Health, Section of Community Health and Emergency Medical Services.
12. For more information about these efforts, see “The Case for Strengthening Education in Alaska,” *Understanding Alaska Policy Brief*, Institute of Social and Economic Research, University of Alaska Anchorage, November 2006. Available at: www.iser.uaa.alaska.edu.

پاپا



Bobby and Marilyn McCarr, Dillingham



Bobby and Marilyn McCarr live in Dillingham and have been foster parents for nearly 20 years. Marilyn works for the state's Women, Infants, and Children (WIC) nutrition program. Bobby is a substitute school teacher and self-described "Mr. Mom" to their children when Marilyn's job takes her to nearby villages.

They have two biological children and four adopted children, and when we talked with them in the summer of 2006, two foster children. Their biological children are now in their 30s. Three of their adopted children are siblings who came to them through the foster-care system as very young children but who are now young adults. The fourth adopted child is 12 and is from their village; they adopted him from his mother. Their two foster children are 6 and a year old.

Here, in their own words, is some of what the McCarrs told us about being foster parents.

Why did you become foster parents?

It started when the *Tundra Times* did a story about children who were neglected and abused. We read the story and it broke our hearts. That was around 1986. One of our friends is a social worker, and she asked us if we wanted to apply to take some foster children. We decided we would give it a try. We have fostered 17 children since we began.

What was it like in the beginning?

At first it was a little scary. Some of the children had FAS (fetal alcohol syndrome). We didn't know about FAS and it was very difficult to know what to do. Since that time we have had training.

What are some of the difficulties?

People in the community and the school system not knowing what FAS is or how to deal with it. The teachers sometimes want to make things easier for the kids, like not expecting so much of them, but that is not the answer. It is difficult for the kids to get tested for FAS. Sometimes it is a year before they can get tested. The kids are hurting and sometimes it seems like few people see this.

When I think back through the years, we have gotten some kids who had fallen through the cracks in that they didn't get what they needed in time. Most of [the former foster children] are grown now, but they still have contact with us. It is hard for us to see some of them make bad choices, but we have to let them go and make their own life.

What are some of the benefits?

Knowing that the children have somebody to love and care for them and they don't have to be afraid of what's coming next. Knowing that you have made a difference in a child's life, that is the big thing. We still have [former] foster children calling us and telling us that they love us. We feel honored when that happens.

What would you like people to know about being foster parents?

Make sure this is something you really want to do, because there are a lot of sacrifices and sometimes you have to put your needs on hold. It needs to be a family thing or it will be very difficult.

Also, you're going to get hurt. When you see children leave it hurts. The agency may call and say the children will be leaving in a day or two and that is very hard. But we would encourage foster parents to risk the hurt so the children know there is a safe place to go.

Do you think you'll take more foster children in the future?

Our older children feel we are getting a bit old to take on babies. Maybe there is a little bit of truth in that. But when they call us, it is hard to say no.

It hurts to see children with FAS struggle through life. They are like sponges that have holes in them and can only absorb so much. They become frustrated, discouraged, and angry because they aren't understood. Then they are labeled as troubled children. Testing for FAS takes too long. They should make that the top priority. This is vital because the children can't receive any services until they are tested.

Marilyn McCarr



Prenatal Care in Alaska

DEFINITION

To show levels of prenatal care in Alaska, we use the same measurement as the Alaska Bureau of Vital Statistics—the Adequacy of Prenatal Care Utilization (APNCU) index.

The APNCU index is a relatively new measure that takes into account the month the mother first began getting prenatal care, the number of prenatal visits recommended by the American College of Obstetricians and Gynecologists, and the gestational age of the baby at birth. Based on these factors, it categorizes prenatal care:

Intensive care (sometimes called Adequate plus): Prenatal care that begins in the 1st or 2nd month of pregnancy and includes 110% or more of recommended visits.

Adequate care: Prenatal care begun in the 3rd or 4th month and including 80% to 109% of recommended visits.

Intermediate care: Prenatal care begun in the 5th or 6th month and including 50% to 79% of recommended visits.

Inadequate care: No prenatal care, or prenatal care begun in the 7th month or later, and including fewer than half the recommended visits.

The figures from this data book are not comparable with those in earlier books, because we (and the Bureau of Vital Statistics) previously used a measurement called the Kessner index. The bureau now believes the APNCU index is a stronger measure. Results of a national study, published in the *Journal of the American Medical Association*, showed that the Kessner index and another commonly used older measure weren't sensitive enough to detect changes in levels of prenatal care.¹

Those older indexes made it appear that women's use of prenatal care in the U.S. was unchanged throughout the 1980s and increased just slightly in the 1990s. But applying the APNCU index to nationwide birth data from 1981 through 1995, researchers found "a steadily increasing trend toward more prenatal care use" during that period, especially for "intensive use"—that is, among women who get more prenatal care than doctors consider adequate.²

SIGNIFICANCE

The importance of prenatal care lies in what it can prevent. Early recognition of health problems can, in many instances, lead to interventions to help both the mother and her baby. Early visits can warn pregnant women about the dangers of smoking, drinking alcohol, and using drugs. Learning about and taking folic acid can help prevent spina bifida and other neural tube defects. Screening women for gestational diabetes and HIV—as well as monitoring weight gain, nutrition, exercise, and blood pressure—are all preventive measures to help lower the risks for mothers and babies.

ALASKA BIRTHS

About 50,000 babies were born in Alaska from 2000 through 2004—fewer than in the mid-1990s, even though Alaska's population increased more than 10% in the past decade. That decline in the number of babies born partly reflects the aging of the Alaska population, especially the White population.

Nearly 90% of Alaska babies are born to mothers age 20 or older, and most of the rest are born to mothers at least 18. Just over 3% of babies born in recent years had mothers 17 or younger—down from 4% in the mid-1990s. That small but real drop is partly the result of declining birth rates among Alaska teenagers, as we discuss later.

About 64% of Alaska babies are born to White mothers and 36% to mothers of other races, especially Alaska Natives. The share of babies born to minority mothers is up from 32% a decade ago—reflecting both the aging of the White population and the growing number of Alaskans who are from minorities.

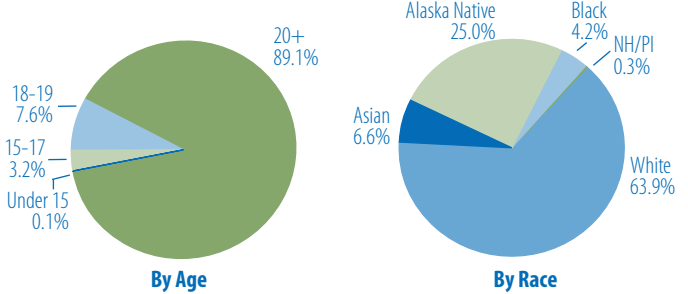
ALASKA AND U.S. PRENATAL CARE

Again in 2004 women in Alaska were less likely than their counterparts nationwide to get care in the first trimester of pregnancy and more likely to receive late or no prenatal care.

Nearly 84% of pregnant women nationwide but only 81% of pregnant women in Alaska received prenatal care in their first trimesters. And while 3.6% of pregnant women nationwide received late or no prenatal care, that share in Alaska was 4.5%.

Births in Alaska,* 2000-2004, by Age and Race of Mother

(Total Births: 50,350)



*Excludes small numbers of births to mothers whose race or age is unknown

Source: Alaska Bureau of Vital Statistics

Percentage of Mothers Receiving Late or No Prenatal Care, 2004

U.S. 3.6% Alaska 4.5%

Percentage of Mothers Receiving Care During First Trimester, 2004

U.S. 83.9% Alaska 80.7%

Source: National Vital Statistics Report, Vol. 55 No. 1, September 29, 2006

We can't explain those differences, but it's certainly true that getting access to adequate prenatal care is more difficult for women who live in the remote areas of Alaska.

Prenatal Care in Alaska (continued)

CARE BY AGE, REGION, AND RACE

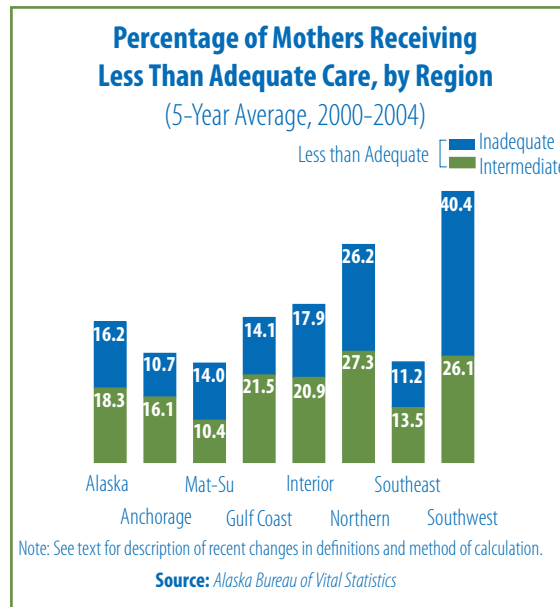
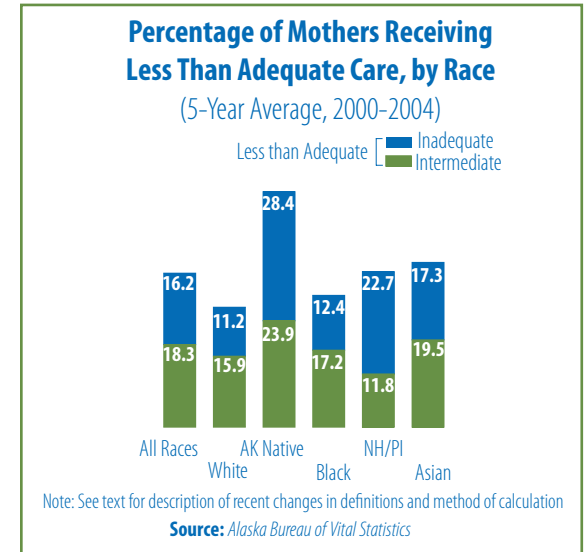
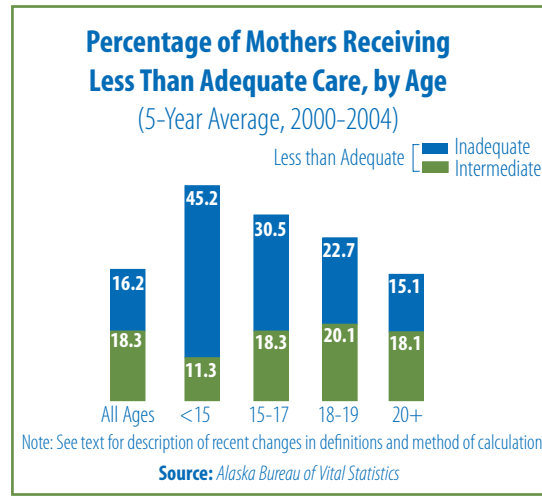
The adjacent bar graphs show percentages in recent years of pregnant women in Alaska who received less than adequate prenatal care (as measured by the APNCU index), by age, race, and region where they lived.

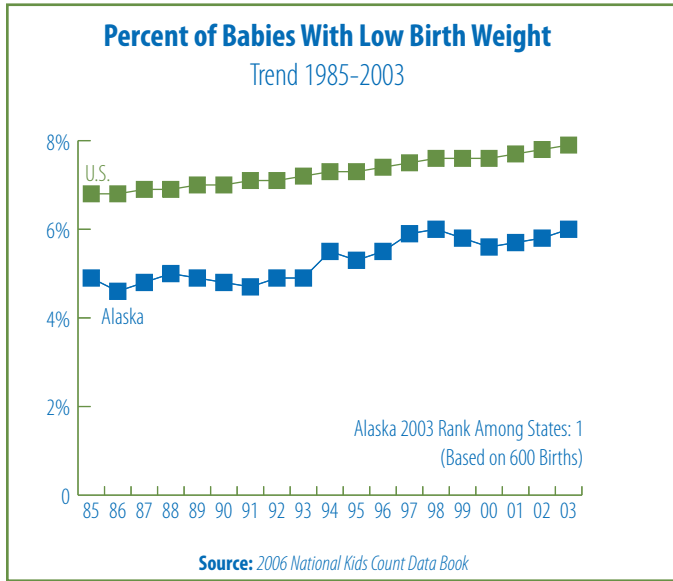
“Less than adequate” care is divided into “inadequate” and “intermediate” care, as defined on the previous page. Both categories include women who get less than the recommended amount of prenatal care. But it is women in the “inadequate” category (the top part of the stacked bars) who fall very far short of recommended care. That category also includes those who get no prenatal care at all.

Nearly 35% of pregnant women of all ages got less than adequate prenatal care in recent years—but clearly the youngest mothers get the least care. More than 45% of those 15 or younger got inadequate care in the period from 2000 to 2004, and another 11% got just intermediate care—so altogether 56% of the youngest mothers failed to get the recommended care.

Looking at prenatal care by region, it’s clear that in the remote Northern and Southwest regions of the state—where medical services are more limited—pregnant women get less care. Nearly 54% in the Northern region and 67% in the Southwest region got less than adequate care in recent years. By contrast, in the Southeast, Mat-Su, and Anchorage regions—where medical care is more easily accessible—about one-quarter of pregnant women received less than adequate care.

Examining prenatal care by the race of the mother, roughly the same percentages of Black and White mothers—about 28%—got less than adequate care in the past few years. Percentages among Asian and Pacific Island mothers were higher, at about 35%. Slightly over 50% of Alaska Native mothers got less than adequate care, but that higher share is partly explained by the fact that Alaska Natives make up most of the population in the remote Southwest and Northern regions.





DEFINITION

Babies with low birth weight are those born weighing less than 5.5 pounds (2,500 grams), and babies with very low birth weight weigh less than 3.3 pounds (1,500 grams). The regional data for this indicator reflect the mother’s place of residence, not the baby’s place of birth.

SIGNIFICANCE

Infants born with low or very low birth weight are typically premature, born at less than 37 weeks gestation. Numbers of such births have been increasing nationwide, and in 2004 babies weighing less than 5.5 pounds accounted for more than 8% of births in the U.S. — the highest share since 1970.³

Birth weight is a predictor of mortality and morbidity. Premature birth or low birth weight has been the second leading cause of infant death in the U.S. in recent years (see figure, page 19).

Infants born weighing less than 3 pounds are almost 100 times more likely to die in their first year than those born at normal weight.⁴ Those who do survive have higher than average risks of cerebral palsy, delayed mental development, impaired vision or hearing, and gastrointestinal disease.⁵

Improvements in medical care and technology largely explain why more very small babies are surviving. But these advances carry costs, as do the special services many of these children require as they get older. And analysts have pointed out that as the number of low-birth-weight babies grows, the costs of their care are getting more attention in the national debate over rising health-care costs.⁶

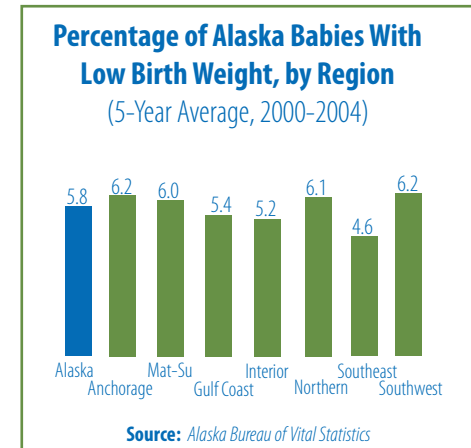
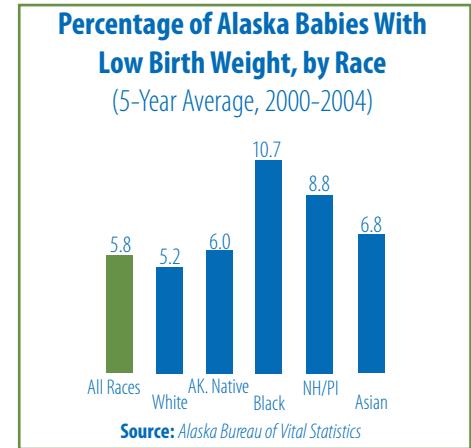
DATA

Again in 2003, Alaska had the lowest rate in the nation of babies with low birth weight—6%. As the trend graph shows, there has been a slow increase in the number of low-birth-weight babies in the past 20 years, in both Alaska and the country as a whole. But Alaska’s rate has consistently been about 2 percentage points lower than the U.S. average.

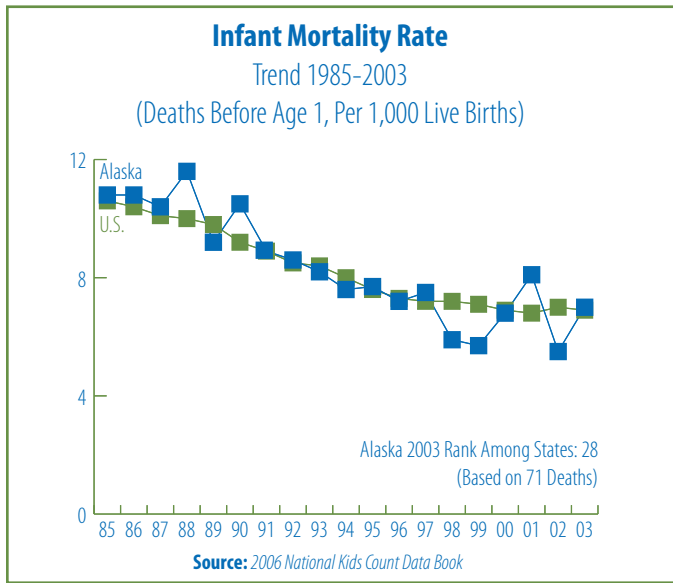
The bar graphs to the right break out the percentage of low-birth-weight babies in Alaska by the mother’s race and region of residence. Small babies made up 5.8% of babies born in Alaska from 2000–2004—the same as it had been from 1998–2002.

The share of small babies by race also changed little in the most recent period. Among White babies it remained at 5.2%; among Alaska Native babies it increased from 5.9% to 6.0%; and among Black infants it declined from 10.9% to 10.7%. There were bigger declines in the percentage of low-birth-weight babies born to Native Hawaiian or Pacific Island mothers—from 10.5% to 8.8%—and to Asian mothers—from 7.3% to 6.8%. However, keep in mind that the numbers of babies born to Pacific Island, Black, and Asian mothers are relatively small, even based on 5-year averages.

The percentages of small babies don’t vary as much by region as they do by race. The Southeast region had the lowest in the state—4.6%—from 2000 to 2004. The Southwest and Anchorage regions had the highest rates, at 6.2%.



Infant Mortality



DEFINITION

The infant mortality rate is the number of deaths among infants under one year, per 1,000 live births. Infant deaths are recorded by where the mother lived, not where the infant died.

SIGNIFICANCE

Infant mortality is used worldwide as a measure of the adequacy of living conditions for infants; high mortality rates show infants lack the food, health care, sanitation, and housing they need. Some infants also die because they're neglected.

Alaska's infant mortality rates are far lower than they were 40 years ago, but in the late 1980s they were still above the U.S. average. So in 1991 the state government established the Maternal-Infant Mortality Review program to look at infant deaths. The review committee—made up of doctors, nurses, other medical professionals, and representatives of state agencies—reviewed virtually all infant deaths in Alaska for the next decade, from 1992 through 2001.

The committee members looked at a wide range of information about each infant, to more accurately identify causes of death than is possible through analyzing death certificates alone. The committee was

also able to determine ways some deaths could have been prevented. In summer 2006, the state published the results.

ALASKA MATERNAL-INFANT MORTALITY REVIEW⁷

During the review period, from 1992 through 2001, Alaska's overall infant mortality rate was 7.3 deaths per 1,000 births, very close to the national average.

But the death rate among Alaska Native infants for that period was 11.4—less than half what it was in the 1970s, but still nearly double the rate among non-Natives. Analysts don't know why the rate of death among Native infants remains higher, but the review panel plans a follow-up study specifically of infant deaths among Alaska Natives.⁸

The rate of deaths among Alaska infants declined for much of the review period but increased slightly at the end. The trend in Alaska was similar to that in the U.S. as a whole.

But why the rate increased differed in Alaska and nationwide. Nationally, the increase was largely due to deaths among infants up to 27 days old (neonatal). In Alaska it was among infants ages 28 to 364 days (post-neonatal).

The review panel also found that within Alaska the pattern was different among Natives and non-Natives. "Among Alaska Natives, the post-neonatal rate was higher than the neonatal mortality rate, while the opposite was true for non-Natives."

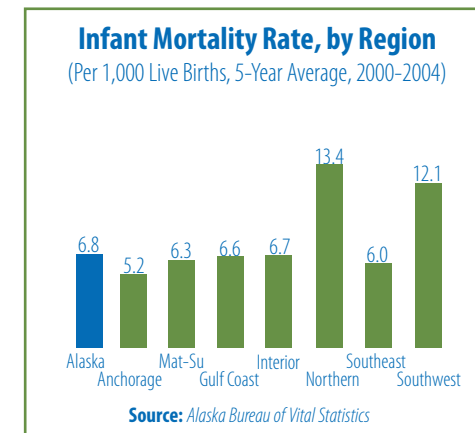
And the causes of death generally differ between younger and older infants. For example, the review panel found that "88% of deaths related to pre-term birth occurred during the neonatal period, while 89% of SIDS/asphyxia deaths occurred during the post-neonatal period."

Not all infant deaths could be prevented, but many could. Maternal drug use puts infants at risk of being born prematurely or at low weight, of having birth defects, of being abused, of having perinatal disorders, and of dying from SIDS (Sudden Infant Death Syndrome). Smoking while pregnant creates similar health risks, as well as the risk of spontaneous abortion.

The review panel found that the infant mortality rate among babies of women who smoked cigarettes or drank alcohol while pregnant was 12.7 per 1,000 births. The rate for mothers who did neither was 5.8. The panel cautions that these data are self-reported—on birth certificates—and so must be interpreted carefully.

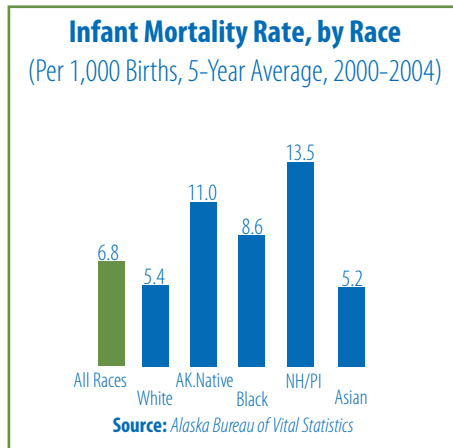
The panel made a number of recommendations to reduce infant mortality in Alaska:

- Make women of childbearing age aware that prenatal drug and tobacco use are risk factors for infant mortality.
- Educate everyone who cares for infants about the risk factors for SIDS. Infants should not be put to sleep face down; should not share the bed with a parent who uses alcohol, drugs, or cigarettes; and should not be put to sleep on sofas, water beds, or any surface other than standard mattresses.
- As early as possible, identify women likely to give birth prematurely, and rapidly refer infants who are born prematurely to an appropriate special-care facility.
- Develop programs specifically for Alaska Natives to reduce the risk factors for infant mortality.





Infant Mortality (continued)

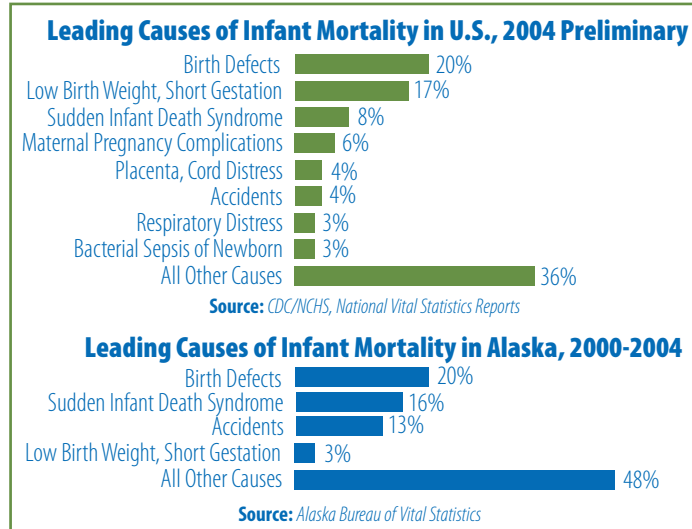


DATA

The trend graph on page 18 makes it appear that Alaska's infant mortality rate really jumped in 2003. In 2002 Alaska was ranked seventh in the nation for its level of infant mortality—better than all except six other states—and dropped to 28th in 2003. But Alaska has a small number of infants, so a relatively small change in the number of deaths can make a big difference in the mortality rate. In 2002, 55 infants died and in 2003 there were 71 deaths. To mitigate the effects of such year-to-year fluctuations, we average numbers over several years for our region and race indicators.

Infant mortality varies considerably among regions of the state, with the rates highest in the two most remote regions. The rates in the Northern and Southwestern regions were about twice as high as those elsewhere from 2000–2004. The rates in four of the seven regions increased during the most recent period, from their levels in the 1998–2002 period. The largest increase was in the Northern region (from 9.3 to 13.4 deaths per 1,000 births), and the largest drop was in the Southeast (from 6.9 to 6.0 per 1,000 births).

Infant mortality rates increased among all races except Asians during 2000–2004, compared with rates in 1998–2002. Rates were lowest among Asian infants (5.2 deaths per 1,000) and White infants (5.4 per 1,000). For Alaska Native infants the rate was 11.0 deaths per 1,000 births, up from 10.3 in the 1998–2002 period. The largest increase in the mortality rate was among Black infants, rising from



6.5 deaths per 1,000 births during 1998–2002 to 8.6. Mortality was highest (13.5) among Pacific Island infants, up from 11.6.

However, keep in mind that the number of births among Pacific Island people are small—from 2000 to 2004 there were 148 births to Pacific Islanders and, thankfully, only 2 deaths. Number of births among Asian and Black Alaskans are also small as well. We can have more confidence in the rates for Alaska Natives, Whites, and the total for all races.

CAUSES OF INFANT DEATH

The figure above shows the leading causes of infant mortality in the entire U.S. in 2004 and in Alaska for the period from 2000 through 2004. The numbers are based on data compiled from death certificates.

Birth defects were the leading cause of death among infants in both Alaska and the country as a whole in recent years, accounting for 20% of deaths. After that, however, the causes begin to differ. The second highest cause of death nationwide was low birth weight and short gestation in neonatal infants (up to 27 days old). In Alaska, SIDS and accidents, generally among post-neonatal infants (28–364 days), were the next highest causes.

Recent research, published in late 2006, argues that premature birth plays an even bigger role than previously thought in infant

deaths. Similar to Alaska's infant-maternal review panel, a study by the federal Centers for Disease Control and Prevention looked closely at the causes of infant deaths nationwide in 2002. That study linked birth and death certificates, which gave researchers much more information—including infants' gestational age.

The study determined that 34% of infant deaths nationwide in 2002 were due to premature birth. They concluded that medical technology is near the limit of what it can do to keep premature infants alive—and that efforts now need to focus on helping mothers carry babies to full term.⁹

A second way of looking at causes of infant mortality is rates of death for specific causes, as shown in the table below. This table is from the Alaska Maternal-Infant Mortality Review report; it shows rates of infant death from specific causes during the period 1992 to 2001.

Calculating rates of death from specific causes can help pinpoint how to reduce deaths from preventable causes. Some deaths from almost all these causes are preventable—particularly deaths from neglect or abuse and from inadequate medical care.

Alaska Infant Mortality Rates, by Causes,
(Per 1,000 Births, Average 1992–2001)

	Total	Alaska Native	Non-Native
Summary			
All infant mortality	7.3	11.4	6.0
Neonatal mortality	3.7	4.9	3.3
Post-neonatal mortality	3.6	6.5	2.7
Cause-specific rates			
SIDS or asphyxia	2.1	4.0	1.5
Pre-term birth	2.1	3.0	1.8
Congenital anomalies	1.9	2.7	1.6
Infections	1.1	1.8	0.8
Perinatal issues	0.7	0.8	0.7
Neglect or abuse	0.5	0.8	0.4
Sub-optimal medical care	0.4	0.5	0.3

Source: Alaska Division of Public Health, Findings of the Alaska Maternal-Infant Mortality Review, 1992–2001, June 2006

Endnotes for Infancy

1. Michael Kogan, Joyce Martin, Greg Alexander, Milton Kotelchuck, Stephanie Ventura, and Fredric Frigoletto, "The Changing Pattern of Prenatal Care Utilization in the United States, 1981-1995, Using Different Prenatal Care Indices," in *Journal of the American Medical Association*, Volume 279 (20), May 27, 1998, pages 1623-1628.
2. See note 1.
3. Donna Hoyert, T.J. Matthews, Fay Menacker, Donna Strobino, and Bernard Guyer, "Annual Summary of Vital Statistics, 2004," in *Pediatrics*, Volume 117 (1), January 2006, pages 168-183.
4. See note 3.
5. National Institute of Child Health and Human Development, National Institutes of Health, *Infant Mortality and Morbidity—Reasons for Hope*. Downloaded from the institute's public Web site, December 2006: www.nichd.nih.gov/news/resources/advances/2007/infant.cfm
6. The Future of Children, Volume 5, Number 1, Spring 1995, "The Direct Cost of Low Birth Weight," in *Low Birth Weight*. Downloaded December 2006: www.futureofchildren.org/pubs-info2825/pubs-info_show.htm?doc_id=79872
7. Except as noted, information in this section is from Margaret Blabey and Bradford Gessner, Alaska Division of Public Health, "Findings of the Alaska Maternal-Infant Mortality Review, 1992-2001," in *State of Alaska Epidemiology Bulletin*, June 2006. Available online: www.epi.hss.state.ak.us/bulletins
8. Reported in *Anchorage Daily News*, "Rates fall, but Native infant deaths remain high," by Alex deMarban, Thursday, July 20, 2006, page A-1.
9. William Callaghan, Marian MacDorman, Sonja Rasmussen, Cheng Qin, and Eve Lackritz, "The Contribution of Pre-term Birth to Infant Mortality Rates in the United States," in *Pediatrics*, Volume 118, Number 4, October 2006, pages 1566-1573.



Mary and Ernie Norton, Kotzebue



Mary Norton currently works at home taking care of her family and sometimes giving music lessons. But she is also an elementary and middle-school teacher and substitute teaches. Ernie Norton is a manager for Kotzebue's village corporation, and in early 2006 he was also acting president.

The Nortons have three biological children—Kiana, 7, Margy, 10, and Charles, 15—as well as an 8-year old adopted son, Justin, and a 3-year-old foster son, Nixon. In early 2006, when we talked with Mary Norton, the Nortons were in the process of adopting Nixon. Here, in her own words, is some of what she told us about being a foster parent.

Why did you become foster parents?

Our adopted son is also our grand-nephew, and when he was a year and a half there were problems in his family. [OCS] asked us if we wanted to take him in, and we began the certification process to become foster parents. He came to live with us for a short time, then went back to live with his mom. But that did not work out, and he came to live with us permanently. We formally adopted him in 2001.

My husband's granddaughter also came to live with us when she was 16. She stayed for several years and graduated from high school here. Now she's married, has two children, and lives next door.

The idea of foster parenting has always been a comfortable one for me, because my own parents took in foster children when I was young. I also have a brother and a sister who were adopted. And my

husband, Ernie, gets angry when he hears of children who are living with parents with alcohol problems, and he feels good about helping those kids out.

How did your life change with foster children?

Adding a child, any child, makes life busier and more chaotic. You have to take more time and make more effort. It keeps me busy. I guess we are normal in that sometimes the kids fight like cats and dogs and other times are more compassionate and understanding.

Social workers have told us that Nixon may have risk factors for FAS in his background. We have learned about FAS and know what symptoms to look for. But at this time there hasn't been a formal assessment of Nixon, and nothing specific has been identified.

Nixon came to us when he was 13 months old. He had been through a lot of health problems—meningitis, immune deficiency problems—and he was very scrawny. He also has hearing problems, which may have been caused by the meningitis. He wears two hearing aids and attends classes for speech training and signing.

His health is much better since he came to live with us, but I don't know whether that's because of the change in environment or because he just outgrew his frailty.

Being hearing impaired, he uses his other senses more. He is very observant and learned how to open safety-locked doors when he was 18 months. He is so good at it that we all joke that when he gets older he will get a job testing home-security systems.

What have been some of the difficulties?

When Margy was three and Kiana was two months, we moved to a new house and Justin joined us for the first time. All those changes were a bit overwhelming for Margy. Our oldest, Charles, was eight at that time and had some resentment. Suddenly he had not just one little sister but two more babies to take Mom and Dad's attention, along with a new housing situation. But I remember having the same reactions to siblings and foster children in my home when I was growing up. It just seems normal.

There were also some difficulties for me. When Justin came to us, no one looked at me as his mother—only a care giver. For a long time he was more comfortable calling me "Auntie Mary." It was confusing for our little daughter, who also started calling me Auntie Mary. Eventually Justin decided to call me "Mom." He still sometimes calls his birth mother "Mom," too, but in a different way. Time made it all work out.

What are the benefits of being a foster parent?

The real benefits tend to be intangible—like the satisfaction you get from reaching out and caring for others. You might have more time and more money if you weren't a foster parent, but helping the child is the greatest reward.

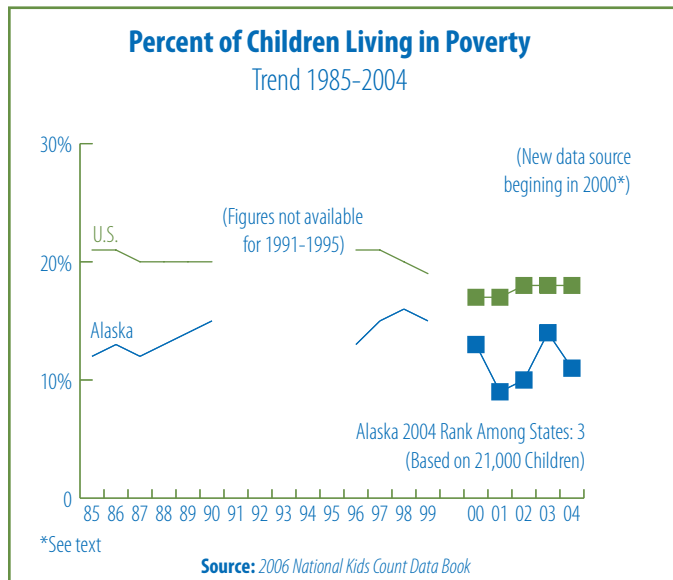
Don't worry about becoming too attached to children who may leave you—the more loving people in a child's life the better their chances for success. And even if they leave you can support them from a distance. I agree with the motto "you are fostering a future." Whatever you can do will have a positive effect on the world. Being a teacher is good training, because you have to learn to let kids go.

Do you think you might take more foster children in the future?

For the time being we are maxed out, but in the future you don't know. We will wait and see what comes up. You can only do so much, and do it well, before there are diminishing returns.

Don't worry about becoming too attached to children who may leave you—the more loving people in a child's life, the better their chances for success.

Mary Norton



DEFINITION

The trend graph shows poverty among children in Alaska and the U.S. under the federal poverty threshold. The U.S. Office of Management and Budget sets that threshold, and in 2004 it was about \$18,850 for a family of four. Remember two points about the figures in this graph. (1) They are not adjusted for differences in living costs across the U.S. So in Alaska—especially rural Alaska—and other places with higher living costs, they may underestimate poverty. (2) Figures before and after 2000 are not directly comparable. All are based on the poverty threshold, but in 2005 the Casey Foundation began using a new source—the American Community Survey—to measure how many children fall under that threshold and recalculated figures back to 2000.

The concept of a federal poverty level was developed in the 1960s as a way of estimating how much income families needed to buy food, housing, and other essentials. For years now there has been considerable discussion about how well this measure reflects actual poverty. Family spending patterns have changed, and different components of family budgets have seen different rates of price inflation.

Research suggests that to meet their basic needs, families now need about twice the income of the federal poverty level—so many

measures now include families with incomes up to 200% of the federal poverty level.¹ Also, some graphs in this section use different measures of poverty.

SIGNIFICANCE

Children are more likely than adults to be poor, and poverty is most widespread among children under age five (as the adjacent figure shows). More than 20% of the youngest Americans face poverty during those vital early years when the majority of brain development occurs. They aren't likely to get what they need to help them become healthy, productive citizens.

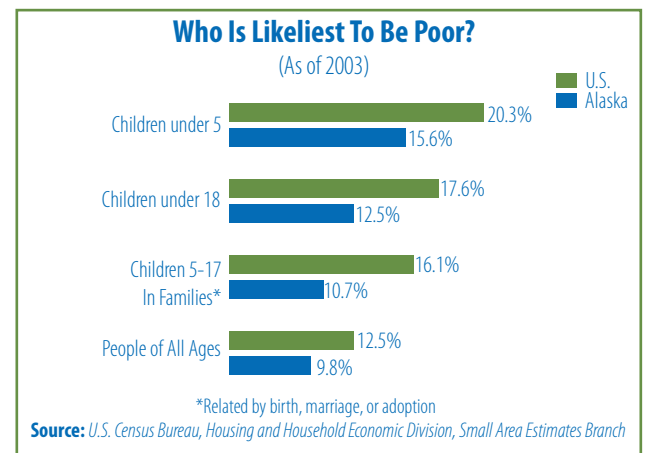
What small children need is straightforward: adequate, nutritious food; safe housing and neighborhoods; protection from abuse and neglect; access to medical care; and parents who care for and teach them and don't abuse alcohol or drugs.

The National Center for Children in Poverty has described what lacking those essentials can cost children. Malnourished children score lower on tests and are more likely to have delayed motor skills, to grow more slowly, and to be socially withdrawn. Exposure to toxins, such as lead, can cause brain damage or stunt brain growth. Children who are abused are more likely to be depressed, unable to form healthy connections with other people, and violent in later life.²

DATA

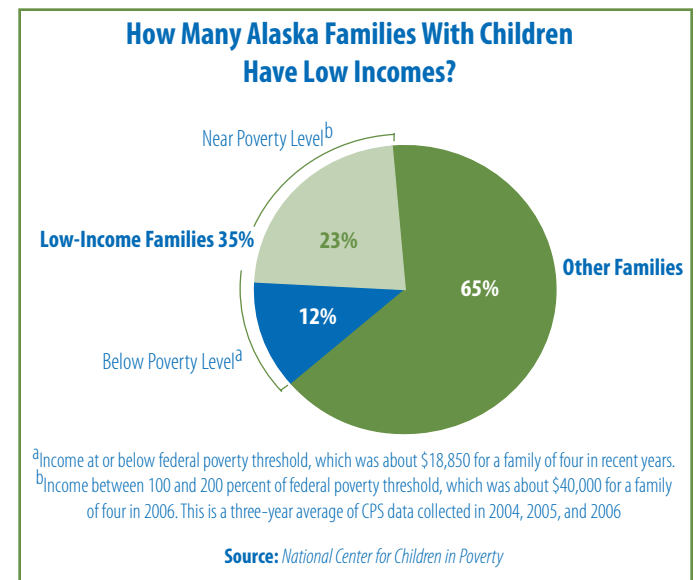
The trend graph shows that the share of poor children in Alaska dropped from 14% in 2003 to 11% in 2004, while in the U.S. as a whole it remained at 18%. One explanation for the roller-coaster look in the line for poverty in Alaska is the relatively small number of children, which makes figures subject to sharp year-to-year changes. But another reason is that the American Community Survey—which was established in 2000—is still adjusting its Alaska sample to represent all communities. That means the sample may not yet accurately reflect the entire Alaska population.

Data from a different study, the U.S. Census Bureau's Small Area Income and Poverty Estimates, break out poverty among children by age and family status (see bar graph above). That study estimates 15.6% of Alaska children under age 5 were poor in 2003, compared with more than 20% nationwide. Among all



children under 18, an estimated 12.5% in Alaska were poor, compared with 17.6% across the country.

The pie chart below, using data from the National Center for Children in Poverty, shows that in recent years 35% of families in Alaska were low-income. The center defines "low-income families" as including both those with incomes below the federal poverty level and those with incomes between 100% and 200% of the poverty level.



Children Living in Poverty (continued)

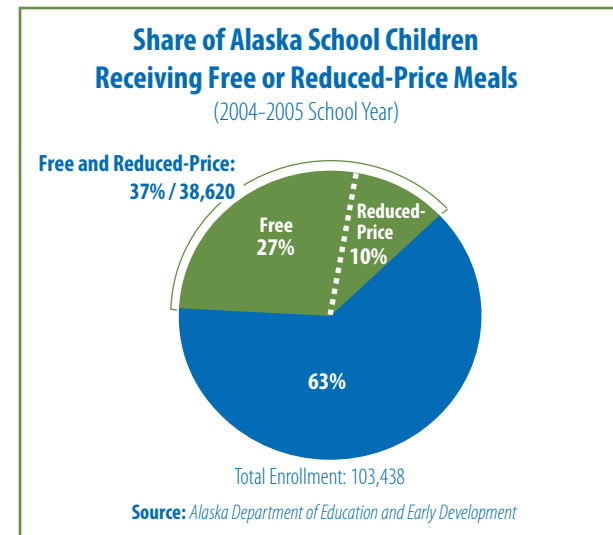
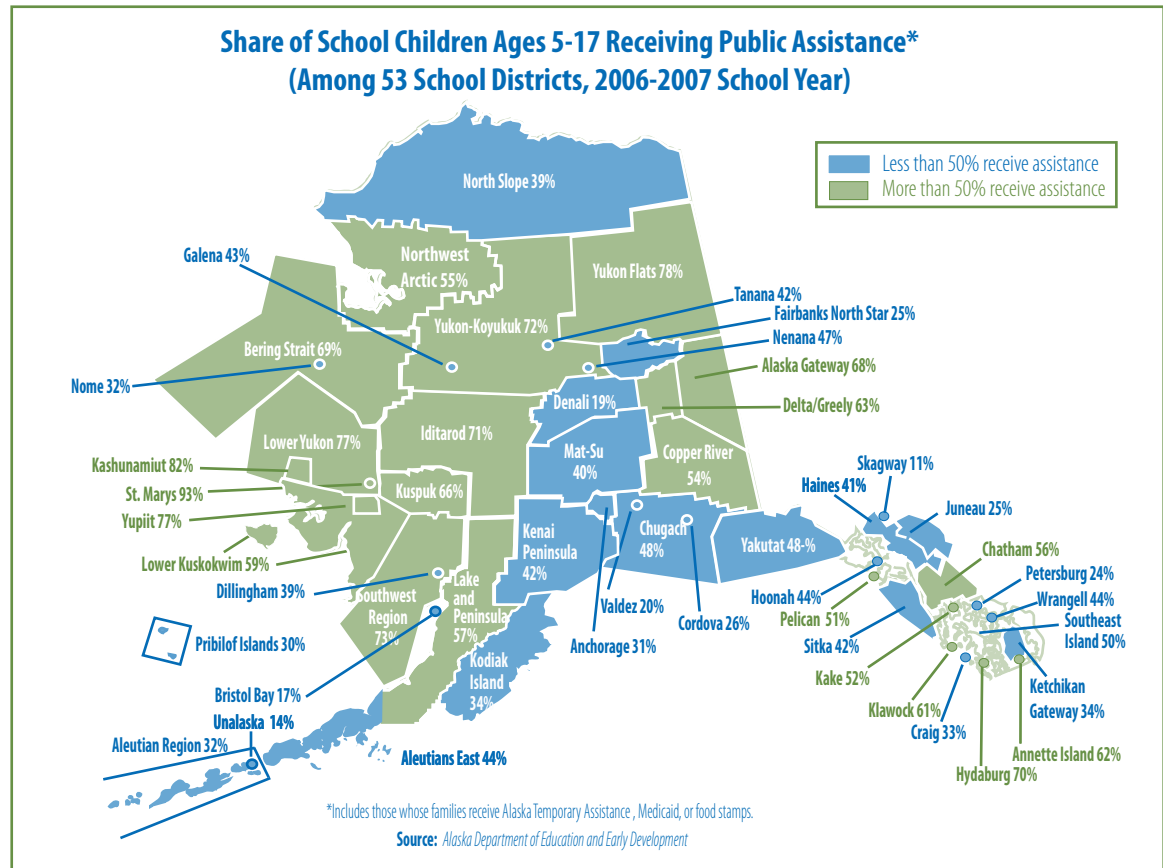


Another measure of poverty among families is receiving some form of public assistance. The map documents the widespread poverty in remote areas of Alaska. In areas shown in green, more than half of all school children come from families receiving public assistance—including the Alaska Temporary Assistance Program, Medicaid, or food stamps. Those areas include virtually all the remote places in western and interior Alaska, as well as some in Southcentral and Southeast Alaska.

Yet another measure is children qualifying for free or reduced-price meals at school. The National School Lunch Program was established under President Harry Truman in the early 1950s. It provides low-cost or free lunches, and in some schools breakfast and snacks as well.

Eligibility for the program is determined by the federal poverty guidelines—but unlike many other programs, the guidelines are adjusted for Alaska's higher cost of living. Children in families with incomes below 130% of the adjusted guidelines are eligible for free meals, and those in families with incomes between 130% and 185% of the guidelines are eligible for reduced-price meals.

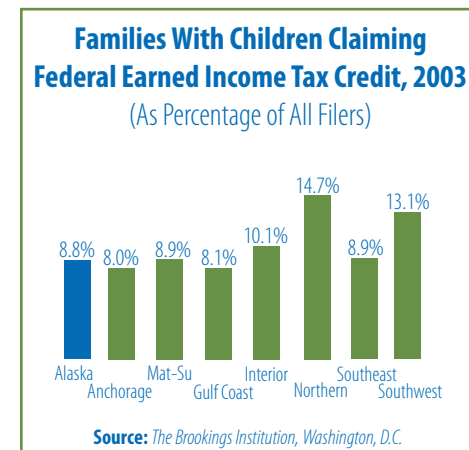
Children from Alaska families of four with annual incomes up to \$43,605 were eligible for free or reduced price meals in the 2004-2005 year. In that year, 38,620 school children, or 37%, received free or reduced-price meals. The lowest percentages were in the Unalaska (12%),



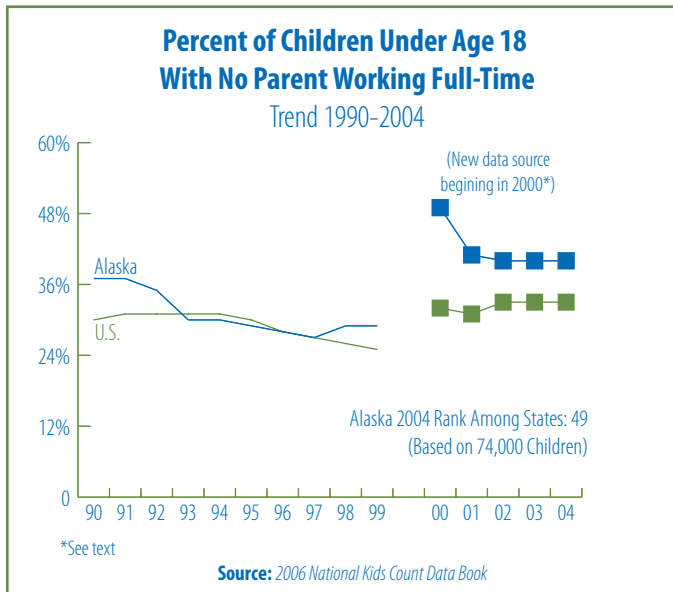
Juneau (15%), and Valdez (18%) districts. The highest were in the Southwest Region (86%), Yupiit (81%), and Bering Strait (80%) districts.³

Our final measure of poverty is the percentage of families with children claiming the Earned Income Tax Credit, which reduces federal income taxes for low-income families. Claimants must earn money during the tax year, but if their incomes are low enough, they can apply for a credit to offset part of their tax bill. The qualifying income varies by household size. In 2003, a married couple with two children could qualify if their annual income was below about \$34,700.

Nearly 9% of Alaska families claimed the credit in 2003. The share was highest in the Northern region (14.7%) and lowest in Anchorage (8%). The share claiming the credit increased in most regions between 2002 and 2003, but declined from 16% to 13% in the Southwest.



Children With No Parent Working Full-Time



DEFINITION

This indicator reports the percentage of children living in families where no parent has year-round, full-time employment. The most recent years of this indicator are based on the American Community Survey, which is designed to provide more timely information than the previous source, the Current Population Survey. For children in single-parent families, having no parent working full-time means the resident parent worked less than 35 hours a week in the 50 weeks before the survey. For married couples, the indicator means that neither parent worked at least 35 hours a week in the 50 weeks before the survey.

SIGNIFICANCE

Families where no parent works full-time are much more likely to have low incomes, and children in those families have to live with the many stresses of financial uncertainty—to be hungry or not get adequate nutrition; to be homeless or not have a safe, warm place to live; to lack the health care they need when they need it.

Children living with both parents are far more likely to have at least one parent working full-time than are children being raised by single parents, and White children are more likely to have a parent working full-time than are Hispanic or Black children.⁴

Parents who don't work full-time are unlikely to have health insurance through their jobs—or if it is offered, they probably can't afford the premiums on part-time salaries. We know (see the Health Care indicator) that about half the children in Alaska have health-care coverage through their parents' jobs.

Parents working part-time are more likely to have jobs in the service sector, where there are fewer opportunities for full-time work. Many parents who work part-time and have low incomes report they want full-time work but can't find it. In a recent survey, 57% of those who worked full-time for only part of the year said they did so only because they couldn't get year-round employment. And among those who worked part-time throughout the year, 33% said they wanted but couldn't get full-time work.⁵

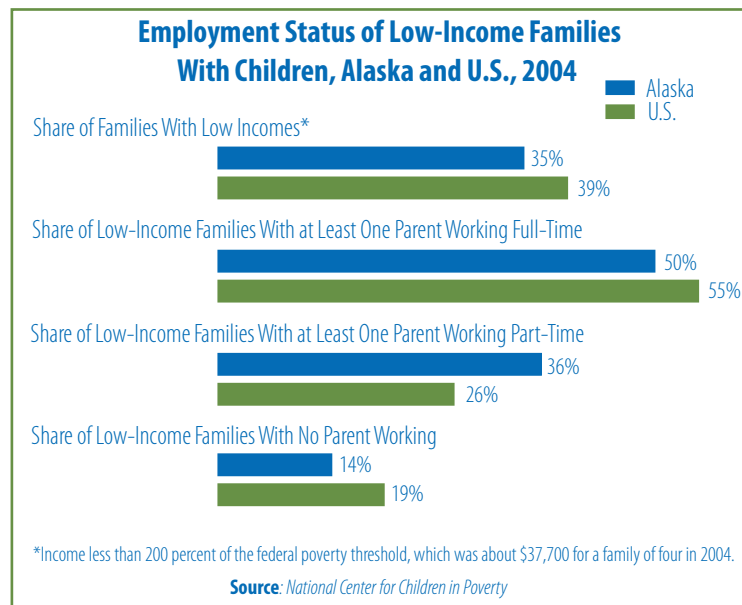
DATA

The trend graph shows a stable trend over the past several years in both Alaska and the nation. In the U.S. as a whole, the percentage of children reported as having no parent working full-time has remained constant at 33% since 2002.

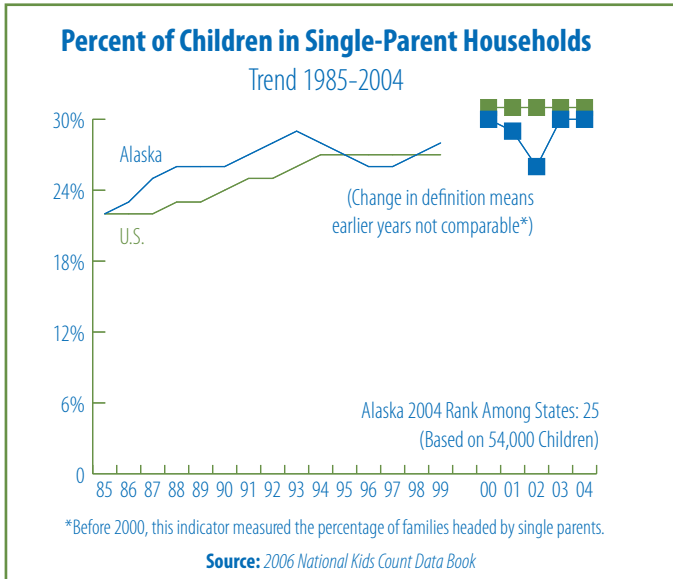
In Alaska, the share of children with no parent working full-time, year-round was 41% in 2001 and 2002 and 40% in 2003 and 2004. That's a big drop since 2000, when the share was almost 50%. However, it's unlikely that the percentage has really changed that dramatically in the past few years. Rather, the most recent figures probably reflect improvements in the American Community Survey, as it has increased the size and geographic coverage of its Alaska sample.

Having a parent working full-time is more likely to give children financial security, it's no guarantee. The bar chart below shows the 2004 employment status of low-income families with children in the U.S. as a whole and in Alaska.

Among low-income families, 55% nationwide and 50% in Alaska have at least one parent employed full-time, year round. In about 26% of low-income families around the country, parents work part-time, and in 19% no parents work. In Alaska, 36% of low-income families are headed by parents who work part-time, and in 14% neither parent works.



Children in Single-Parent Households



DEFINITION

This indicator now measures the percentage of children living in single-parent families. Previously it measured the percentage of single-parent families—so the figures before and after 2000 are not comparable. The recent figures are based on sample data from the American Community Survey; the previous data source was the Current Population Survey.

SIGNIFICANCE

A 2002 report produced by Child Trends used a variety of data sources to develop a picture of parents and their children.⁶

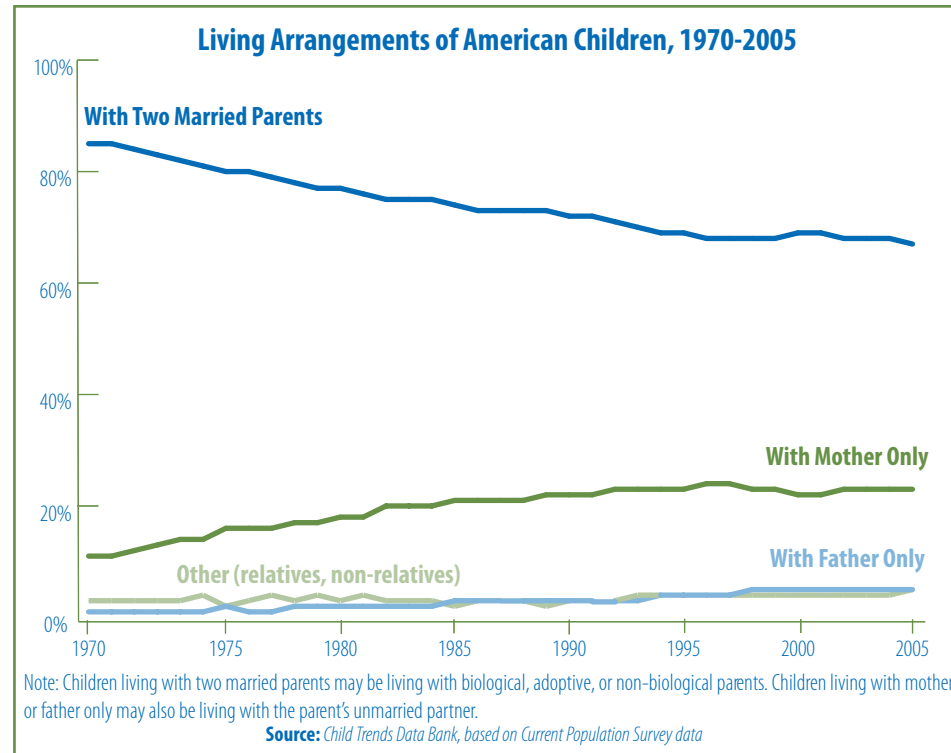
- *Children living with single parents spend less time with their parents.* Children (age 12 and under) who live with two parents average 2 hours and 21 minutes a day with their mothers and 1 hour and 46 minutes with their fathers. By comparison, children in single-parent families spend about 1 hour and 15 minutes a day with their mothers and less than 30 minutes with their fathers. Single parents working to support their families have less time to spend with their children in general. Also, most children who live with one parent live with their mothers—which typically means they see less of their fathers.

- *Most children who live apart from one parent still have some contact with their non-resident parent.* Research conducted in 1997 found that 60% of children from single-parent households had contact with their non-resident fathers and 78% had contact with non-resident mothers. These children saw their non-resident fathers an average of 69 days a year and their non-resident mothers 86 days.
- *More unmarried Americans are raising children.* In 2001, 28% of mothers living with their children (in either single-parent or two-parent households) and 12% of fathers living with their children had never been married.

DATA

The trend graph to the left shows that the percentage of children in Alaska and the U.S. living in single-parent families has been fairly constant over the past five years. From 2000 to 2004, the share of children nationwide living in single-parent families was about 31%. In Alaska, that share has been 30% for three of the past five years, including the last two.

The line graph showing living arrangements of all American children takes a longer view. Since 1970 the proportion of children living with both parents has declined and the share of single-parent families has increased—especially families headed by single mothers, but there has also been a gradual increase in the number headed by fathers.

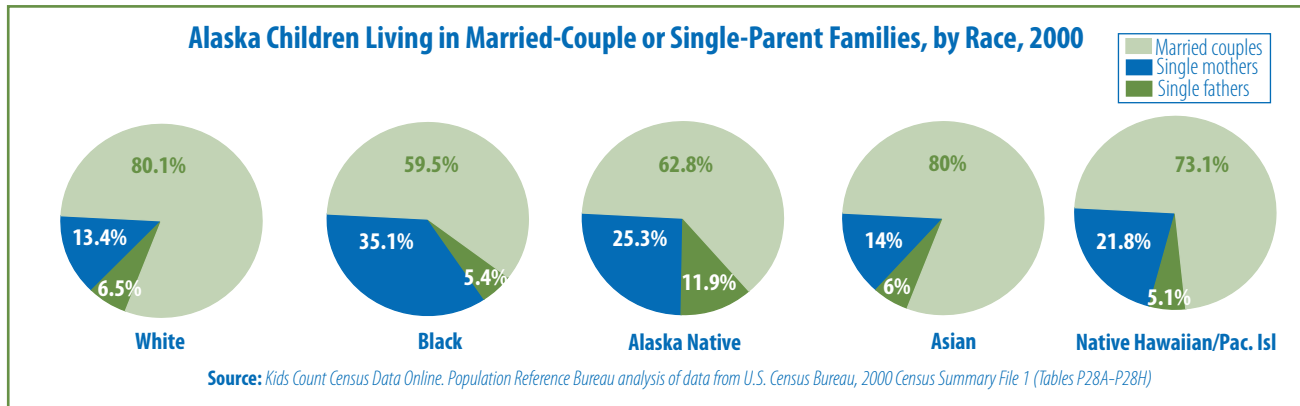


Children in Single-Parent Households (continued)

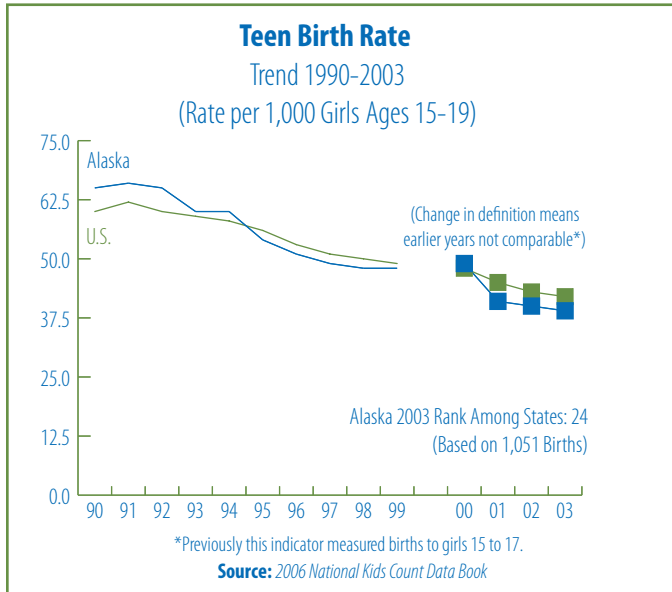
Children in single-parent families are much more likely to live with their mothers than their fathers—although, as the graph with living arrangements shows, the proportion living with single fathers has increased somewhat.

The pie charts below show shares of children, by race, growing up in married-couple or single-parent families in Alaska. The share of children living with both parents varies from 80% among Asian and White children to about 60% among Black and Alaska Native children.

More than a third of Black children and about one-quarter of Alaska Native and Pacific Island children in Alaska live with single mothers. Among most races, around 6% of children live with single fathers. But among Alaska Native children, that share is double: nearly 12%.



Births To Teens



DEFINITION

The trend graph above shows the teen birth rate—that is, the number of births to girls ages 15 to 19, divided by the total number ages 15 to 19. Before 2000, this indicator measured births to teens ages 15 to 17, so the rates before and after 2000 aren't comparable.

SIGNIFICANCE

When teenagers have babies, there are long-term consequences for both mothers and babies. Teenage mothers are less likely to graduate from high school, which has life-long economic implications. They are more likely to be poor, because they don't have the education to get better-paying jobs—so they are then more likely to rely on public assistance. Also, children born to teenage mothers are more likely to be born prematurely, to die in infancy, to live in poverty, to do poorly in school, and to become teenage parents themselves.⁷

And looking at the teen birth rate in any single year provides only one part of the picture. The total number of teenagers who are mothers at any given time is known as the teen motherhood rate. So, for example, 415,000 teenage girls had babies in the U.S. in 2003. If we add together the teenagers who had babies in 2003 and those who already had babies, there were 772,000 teenage mothers in the U.S. that year.

The good news is, motherhood among American teenagers is at an all-time low. That's true in all 50 states and for all races. In 2003, Alaska was ranked 23rd in the nation, with 67 teenage mothers per 1,000 girls ages 15 to 19. (That includes girls who had babies in 2003 and those who already had babies.) The lowest rate in the nation was in New Hampshire, with 34 teenage mothers per 1,000, and the highest was in Mississippi, with 121 teen mothers per 1,000 girls. The national rate was 78.⁸

Researchers are examining reasons for the decline. Recent studies have found that increased use of contraceptives accounted for almost all the decline among older teenagers (18 and 19), but that nearly one quarter of the decline among younger teenagers (15 to 17) occurred because they delayed having sex.⁹

DATA

The trend graph shows the steady decline, beginning in the mid-1990s, in births to teenagers nationwide and in Alaska. (Keep in mind, however, that before 2000 this indicator measured just births to girls 15 to 17.) The drop between 2000 and 2003 in Alaska was from 49 to 39 births per 1,000 girls 15 to 19, and in the U.S. as a whole from 48 to 42.

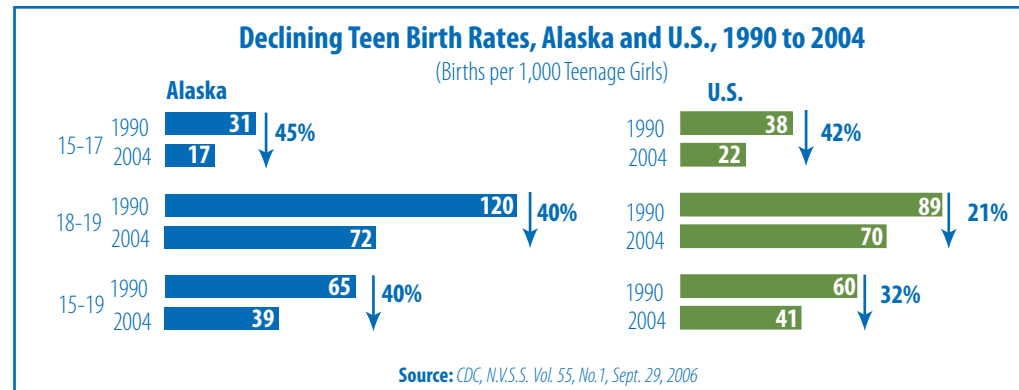
Still, despite these declines, remember that about one in ten of all babies born in Alaska in recent years were born to teenagers (as we reported in the Infancy section)—and in 2003 about 18% of the teenagers who had babies already had other children.¹⁰

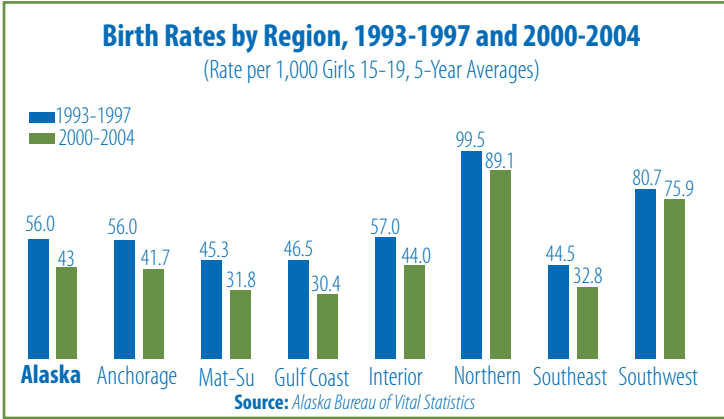
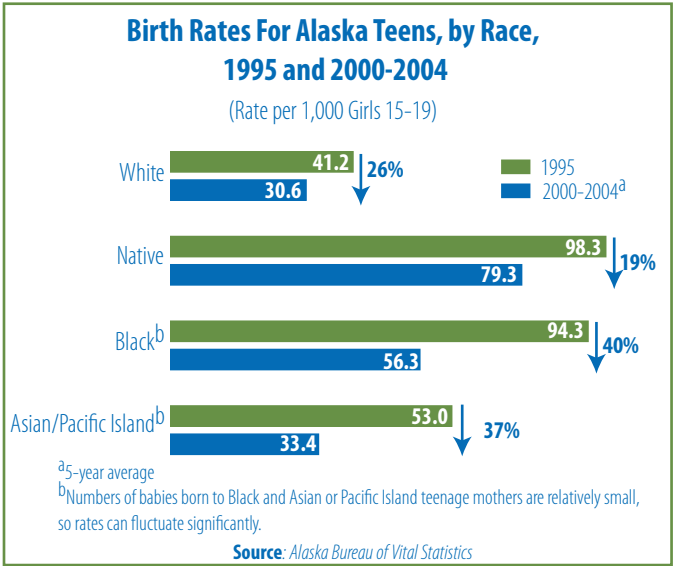
The bar chart below shows the decline in birth rates since 1990 among younger and older teenagers in Alaska and nationwide. Alaska saw the biggest declines. The birth rate among Alaska girls 15 to 17 dropped 45% between 1990 and 2004, compared with 42% nationwide. Among girls 18 and 19, Alaska's rate dropped 40%, compared with a national decline of 21%.

RATES BY RACE

The graph on the facing page shows declining birth rates among Alaska girls of all races in the past decade. The largest declines were among Black teenagers (40%) and Asian and Pacific Island teenagers (37%). Since there are relatively few Black and Asian and Pacific Island teenagers in Alaska, these numbers can fluctuate sharply from year to year. To help smooth those fluctuations, the most recent figures are averages for the period 2000-2004.

Teen birth rates have also been dropping in the various regions of Alaska, and the rates from 2000-2004 were lower in all regions than they had been in the mid-1990s. But as the figure on the facing page shows, there remain big differences in rates among regions.

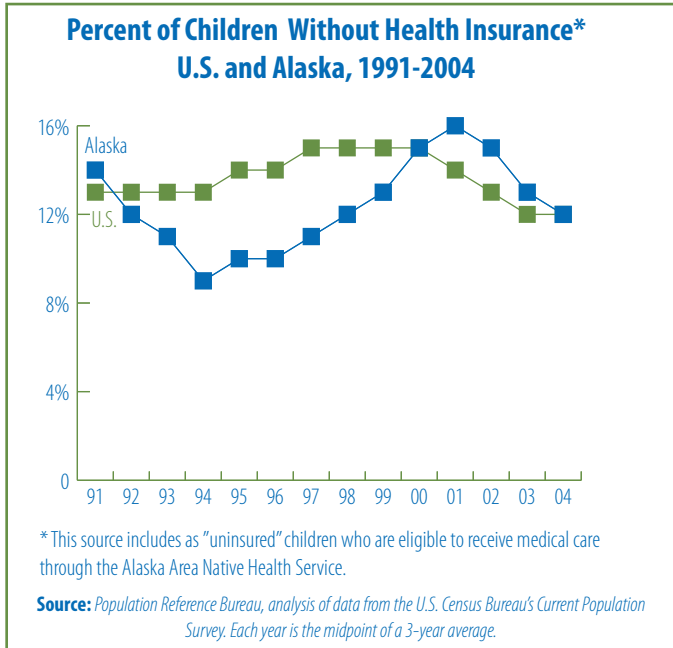




RATES BY REGION

From 2000 to 2004 the statewide teen birth rate was 43 per 1,000 girls ages 15 to 19. The lowest rates were in the Mat-Su (31.8), Gulf Coast (30.4), and Southeast (32.8) regions. Anchorage’s rate was also slightly below the state average, at 41.7. The highest rates were in the Northern (89.1) and Southwest (75.9) regions.

Comparing the most recent figures with those from the period 1993-1997, we see that the state average dropped from 56 to 43 births per 1,000 teenage girls, for a decline of about 23%. In most regions the declines were between 25% and 30%. But in the regions where rates have historically been the highest, the declines were much smaller—6% in the Southwest region and 10% in the Northern region.



DEFINITION

This indicator uses the best available sources to estimate the types of health-care coverage Alaska children have and how many have no coverage. Research currently underway in Alaska may add to what we can report about uninsured children in next year's data book.¹¹

The line graph shows the most commonly published figures on percentages of children without health insurance, from the U.S. Census Bureau's Current Population Survey (CPS). They include only children who lacked health insurance for the entire year. But the American Academy of Pediatrics has pointed out that these CPS figures may underestimate the share of children without health-care coverage nationwide. Children who have coverage either through Medicaid or through their parents' employers for any part of the year—as little as a month—are counted as being insured.¹²

Another problem with CPS numbers is that they count as "uninsured" Alaska Native and American Indian children who have access to health care through the Indian Health Service (IHS). This is not technically "insurance." It is eligibility to receive health care services at federal Indian Health Service hospitals and clinics.

Eligibility for IHS services is an important form of health-care coverage, and counting IHS-covered children as uninsured is misleading—especially in Alaska, where Alaska Native children make up nearly one-quarter of all children. So the American Academy of Pediatrics adjusts the CPS figures to include IHS coverage as a form of government-provided coverage. The adjacent bar graph shows those adjusted figures.

SIGNIFICANCE

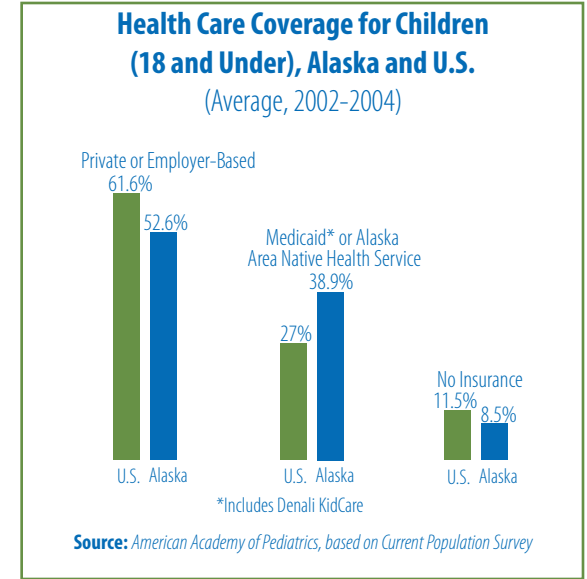
Having health insurance is not unlike the old folk saying, "an ounce of prevention is worth a pound of cure." Preventive care and access to health care early are essential for all children (and adults). But the high and rising cost of medical care makes it difficult or impossible for uninsured Americans to pay all their medical bills themselves, especially if they have major injuries or illnesses. Research has shown that people without health insurance are more likely to skip routine check-ups and to be in worse health; uninsured children are also more likely to have delays in development. And taxpayers bear extra costs for those who can't pay their medical bills—hospitals receive large public subsidies to offset their costs for uncompensated care.¹³

UNINSURED CHILDREN

The trend graph, with unadjusted CPS figures, shows the annual percentages of U.S. and Alaska children without health insurance for the period 1991 to 2004. These figures show a drop in the share of uninsured children in the most recent years, in both Alaska and the U.S. as a whole. The CPS found that 12% of children in Alaska and nationwide had no health insurance in 2004.

An important reason the share of uninsured children has declined is that in the 1990s Congress passed legislation allowing states to either establish new health insurance programs or expand their existing Medicaid programs, to provide coverage for children and pregnant women who had no insurance but whose family incomes were too high to qualify them for the traditional Medicaid program.

Alaska's Medicaid program was expanded in 1997, to create Denali KidCare. In its first years, the program covered children whose family



income was up to 200% of the federal poverty threshold. But in 2003 the state legislature reduced eligible income to 175% of the federal poverty threshold and froze the standard at the 2003 level.

Given inflation since 2003, Alaska families can now have incomes roughly 160% of the current poverty threshold to qualify for Denali KidCare. Peak enrollment was in 2003, at 22,934. Enrollment dropped by 5% in 2004 largely because of the lower eligibility threshold.¹⁴ A recent report prepared for Alaska's Covering Kids Coalition found that the income threshold for Alaska's Medicaid expansion program was the fourth lowest in the nation.¹⁵

ALASKA-U.S. DIFFERENCES

The bar graph above compares broad types of health-care coverage among children in Alaska and nationwide. The table on the facing page provides a more detailed breakdown of coverage, for people of all ages. We don't have that level of detail just for children—but the table still helps show differences in coverage in Alaska.

Figures from the American Academy of Pediatrics—in the bar graph above—are adjusted to reflect IHS coverage of Alaska Native children. This estimate of children without insurance is considerably lower than the unadjusted CPS figure—8.5% compared with 12%. Alaska's children are

Health-Care Coverage, Alaska and U.S., 2004

	Private Insurance	Medicaid	Medicare	Military	IHS only*	None
Alaska	63.5%	15.3%	7.3%	11.6%	4.2%	12.8%
U.S.	68.1%	12.9%	13.7%	3.7%	N/A	15.7%

*Estimated Note: Totals are more than 100% because some people have more than one coverage.

Source: Current population Survey, U.S. Bureau of the Census, adjusted to reflect health-care coverage through Indian Health Service

also much more likely to be covered by either Medicaid (including the Denali KidCare expansion) or the Indian Health Service than children nationwide—nearly 39% in Alaska, compared with 27% nationwide.

And Alaska children are considerably less likely to be covered by employer-based or other private insurance—just over half of children in Alaska are covered by private insurance, compared with nearly two-thirds of children nationwide.

There are also differences in types of coverage for Alaskans and other Americans—reflecting differences in the populations of Alaska and the U.S. as a whole.

Alaska is a strategic military location, and since World War II it has had a large military presence—which explains why nearly 12% of Alaska’s population has health-care coverage through the military, compared with less than 4% nationwide.

Alaska also has fewer people over 65—although the numbers of older Alaskans are growing rapidly—which explains why the share of Alaskans covered by Medicare is only about half the U.S. average.

Also, as we discussed earlier, a bigger share of Alaskans are also eligible for care through the Indian Health Service, because Alaska has the largest share of Native Americans in any state.

Alaska’s higher shares of military, IHS, and Medicaid coverage mean that a smaller share of Alaskans are covered by private insurance than is true nationwide—under 64%, compared with 68%. Also, as the bar graph at the top of the page shows, small businesses (with fewer than 50 employees) in Alaska are less likely to offer health insurance—and more than 40% of Alaska workers are employed by small businesses. Still, the majority of Alaskans are covered by private insurance.

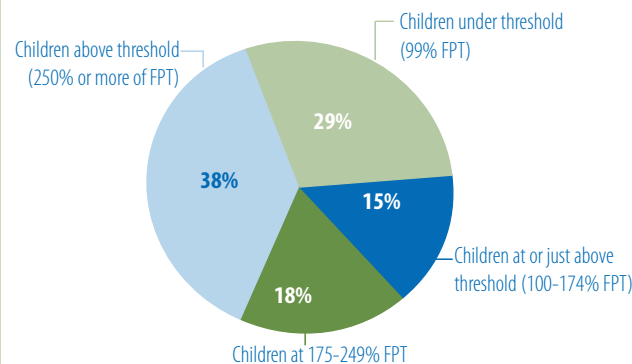
The overall share of Alaskans (adults and children) without any health-care coverage was estimated at just under 13% in 2004, compared with nearly 16% nationwide. Again, that difference is partly explained by the fact that such a large share of the state population—about 20% of all Alaskans and nearly 25% of children—are eligible for services through the Indian Health Service.

POVERTY AND HEALTH INSURANCE

Alaska had an estimated 21,000 children without health insurance in recent years. About 30% were age 5 or younger and the rest were between 6 and 18. The pie chart shows the Population Reference Bureau’s estimates of uninsured children by family income level, for the period 2004–2006.

Alaska Children Without Health Insurance, by Poverty Threshold*

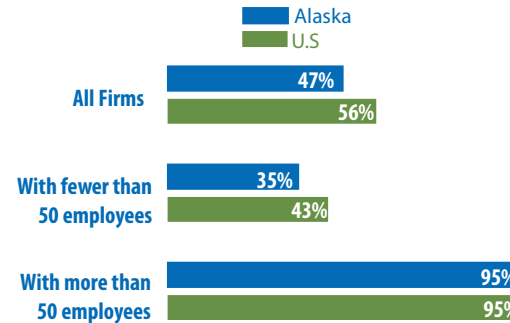
(Average 2004–2006)



*As measured by family income relative to the federal poverty threshold (FPT).

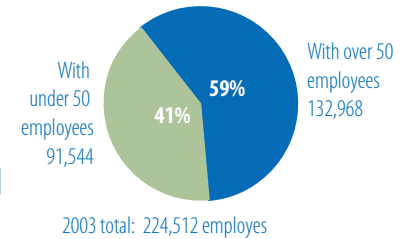
Source: Population Reference Bureau, analysis of data from the U.S. Census Bureau’s Current Population Survey. This is a three-year average of data collected on 2004, 2005, and 2006.

Private Firms Offering Health Insurance,* Alaska and U.S., 2003



* Not all workers at firms that offer insurance carry that insurance.

How Many Alaskans Work for Small Firms?



Source: Medical Expenditure Panel Survey, 2003

About 29% of uninsured children were in families with incomes below the federal poverty threshold—that’s up from 25% in the 2003–2005 period. Another 15% came from families with incomes between 100% and 174% of the poverty threshold. The rest—56%—had family incomes of at least 175% of the poverty level, and most of those (38%) had family incomes at least 250% of the poverty level.

More than 40% of the children without health insurance would be eligible for either traditional Medicaid or the Denali KidCare program. All those with family incomes below the poverty threshold, and most of those with family incomes up to 160% of the threshold, could qualify. At least some of these children are Alaska Native children eligible to receive care through the Indian Health Service—but others are not, and we don’t know why their parents haven’t enrolled them in Denali KidCare.

A majority of the children without health insurance have family incomes too high to be eligible for Denali KidCare. We don’t know all the reasons why parents of these children don’t have insurance—but given the high and rising cost of health-insurance premiums for individuals and businesses, many probably just can’t afford insurance.

Endnotes for Economic Well-Being



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6. *Charting Parenthood; A Statistical Portrait of Fathers and Mothers in America*. Child Trends, 2002.
7. Child Trends Data Bank, "Teen Births." Retrieved March 2006 from www.childtrendsdatabank.org.
8. Annie E. Casey Foundation, "Teen Motherhood at Record Low in United States." *Data Snapshot No. 2*, September 2006.
9. See, for example, *Science Daily*, "U.S. Teen Pregnancy Rates Decline as Result of Improved Contraception Use," December 4, 2006, reporting results of a study by Columbia University's Mailman School of Public Health; and *Science Daily*, "Teens Delaying Sexual Activity; Using Contraceptives More Effectively," December 17, 2004, reporting findings from the National Center for Health Statistics' National Survey of Family Growth.
10. Annie E. Casey Foundation, *The Right Start for America's Newborns*. Child Trends/KIDS COUNT Special Report. Retrieved July 2006. Available at www.accf.org/kidscount/sld/rs_state_rankings.pdf.
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12. American Academy of Pediatrics, *Children's Health Insurance Status and Medicaid/SCHIP Eligibility and Enrollment, 2004*. State Reports, September 2005.
13. Mark Foster and Scott Goldsmith, "Alaska's \$5 Billion Health Care Bill—Who's Paying?" *Understanding Alaska Research Summary No. 6*. Institute of Social and Economic Research, University of Alaska Anchorage, March 2006.
14. Data collected by Health Management Associates for the Kaiser Commission on Medicaid and the Uninsured. Data are as of December 2004 and were published in September 2005.
15. *The Uninsured, Federal Poverty Level, and Enrollment Facts*. Prepared for Alaska's Covering Kids Coalition, Summer 2006.



Shelly and Andrew Hohenthauer, Juneau



Shelly and Andrew Hohenthauer live in the state's capital city, Juneau. They have three biological children who are now young adults. As of mid-2006 they had three foster children, two of whom they were in the process of adopting, and they were expecting a fourth foster child to join them.

They have been foster parents for four years. Shelly takes care of the children full-time and also home-schools them. Andrew works for the state government. We talked with Shelly Hohenthauer, and here, in her own words, is some of what she told us about foster parenting.

Why did you become foster parents?

For years we wanted to do foster care. We always wanted a large family. Some people are just born to do things, and being a mom is the thing I do best. We sat down with our kids beforehand and asked them if they had any reservations about our becoming foster parents. They have stepped right up and taken the children under their wing and mentored them. It is incredible to see this.

How have your lives and the lives of the foster children changed?

Our family has always been very close, but doing foster care we have become even more tight knit. Our kids are basically grown, but they have embraced what we're doing and become an incredible support system for us.

I think the foster kids have a feeling of support and love. They have all come from severe neglect and physical and emotional abuse, but they have all come out of their shells and maintained a confidence and self-worth, even when they returned to their parents.

We have seen a couple of successful re-unifications with family. We have always wanted to give children a safe place to be, but we also wanted them to be part of a whole unit again. It is great to see that when it happens.

We are adopting two siblings who both have FAS (fetal alcohol syndrome). They are 8 and 11. They are both very small, but they are doing extremely well. They are both incredibly loving, especially considering the lives they've had. But we may have to limit the number of FAS children we take in the future. We want the children we have to be able to thrive.

What are some of the benefits?

It has just enriched our lives. Some things are heartbreaking, but the children are just so hungry for love and we do have love to give. It is very fulfilling to see them grow and develop. It takes you out of yourself. We feel like all the children give to us, and we are incredibly lucky to have them and experience them.

What would you like people to know about being foster parents?

The rewards are so great, compared with the difficulties. It is very difficult to love someone else's children and then have to let them go. Then you see these programs on TV that paint foster parents as the bad guys. We are not the bad guys. I wish there wasn't any need for foster care and that this was a perfect world. But it isn't. The system is not perfect, and the social workers are not perfect, but they are over-worked and under-appreciated. It is so much better than in the past, when many children who now go into foster care would have had to spend their childhood in orphanages.

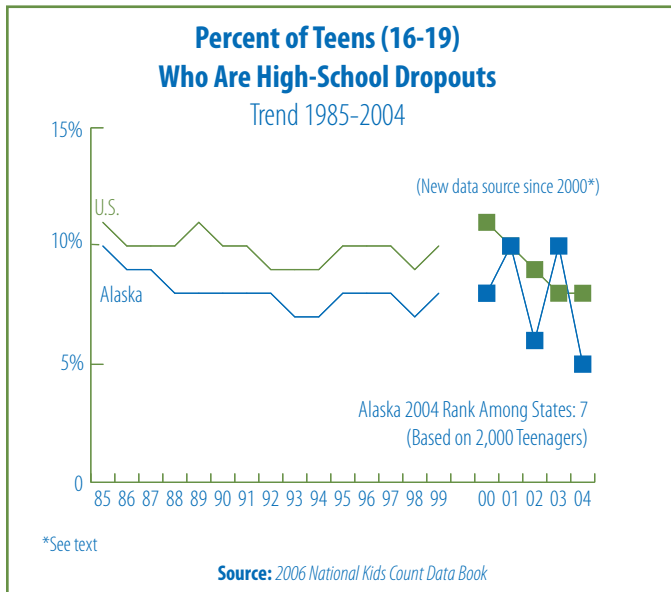
You do have to be sure you are ready to take on the problems and the issues you have to deal with, but your experience is what you make it. Don't go into foster care to change these kids or save them, because in the end they will change you in ways you don't expect.

Do you think you'll take more foster children in the future?

We will definitely continue to do foster care. But we are adopting two children with FAS, so we will have to be careful not to take in too many children with the same issues. We have to be mindful of what is in the best interests of the children. We don't want to dilute the quality of care we are able to give the children we already have.

You see these programs on TV that paint foster parents as the bad guys. We are not the bad guys. I wish there wasn't any need for foster care and that this was a perfect world. But it isn't.

Shelly Hohenthauer



various groups of students, taking into account the number of dropouts from a given graduating class in each year from grades 9 through 12.

SIGNIFICANCE

By whatever measure you use, failing to complete high school has become alarmingly common in the U.S. A 2006 report estimates that nearly a third of public high-school students nationwide fail to graduate with their classes each year. Dropping out of high school makes teenagers more likely to be unemployed, poor, and unhealthy when they're older. The high drop-out rate also takes a toll on American society, because many of those who could be productive workers instead depend much more on various public assistance and social service programs.¹

A high-school diploma doesn't guarantee economic well-being, but it at least indicates that students have the basic skills they need to get jobs or to move on to higher education or training.

The figure in the right-hand corner puts dollar amounts on the value of education. In Alaska in 2005, adults with high-school diplomas earned 40% more than dropouts. Those with at least some college (including career and technical education) earned 80% more; those with at least four years of college earned almost three times more.

State legislation is being proposed that would increase Alaska's mandatory school attendance age from 16 to 18. Supporters hope such a change would not only reduce drop-out rates but also curtail violence among teenagers who aren't in school and don't have jobs. But not everyone agrees that changing the law as a means of keeping teenagers in school would work. They point out the difficulties of enforcing such a law and say that schools, parents, and communities should instead find out more about why some teenagers drop out—and how they could be persuaded to stay in school.²

DROP-OUT MEASURES

The trend graph—based on sample data for those 16 to 19—shows that the percentage of high-school dropouts in Alaska has fluctuated sharply in recent years, while nationwide there has been a steady decrease. In 2004 Alaska's drop-out rate of 5% ranked 7th in

Median Earnings of Full-Time Alaska Workers, by Education Level, 2005

Less than high school	\$20,764
High school	\$29,070
1 to 3 years of college	\$37,375
Four or more years of college	\$59,178

Source: American Community Survey, IPUMS, Minnesota Population Center

the country. The U.S. average rate was 8%. Keep in mind these data are from the American Community Survey, which is still being developed in Alaska. Also, the relatively small size of the Alaska sample makes it more subject to sharp year-to-year changes.

The bar chart and the map on the next page, showing dropouts by race and by region in Alaska, are based on data from the Alaska Department of Education. The figures are for grades 7 through 12 during the 2004-2005 school year. In past data books we've reported on dropouts in just grades 9-12—but this year the only available data include grades 7 and 8. So drop-out numbers in this year's book are not comparable to those in previous books.

Also keep in mind that the Alaska Department of Education's numbers for dropouts are based on reports from school districts on the number of students who were enrolled in grades 7 through 12 in October 2004 and the number who dropped out sometime before the end of the school year. So this measure includes a wider age range and is based on students who had been in school. The figures in the trend graph, by contrast, are based on a sample of those ages 16-19.

A total of 62,733 students were enrolled in grades 7-12 during the 2004-2005 school year in Alaska. Of those, 3,791 (or 6%) dropped out.³ Looking at dropouts by race, we see that Asian/Pacific Island and White students were the only groups who dropped out at rates lower than their share of enrolled students. Alaska Native teenagers represented about one-quarter of students in grades 7-12 in the 2004-05 year, but made up one-third of those who dropped out. The share of dropouts among both Black and Hispanic students was about 50% higher than their shares of enrollment.

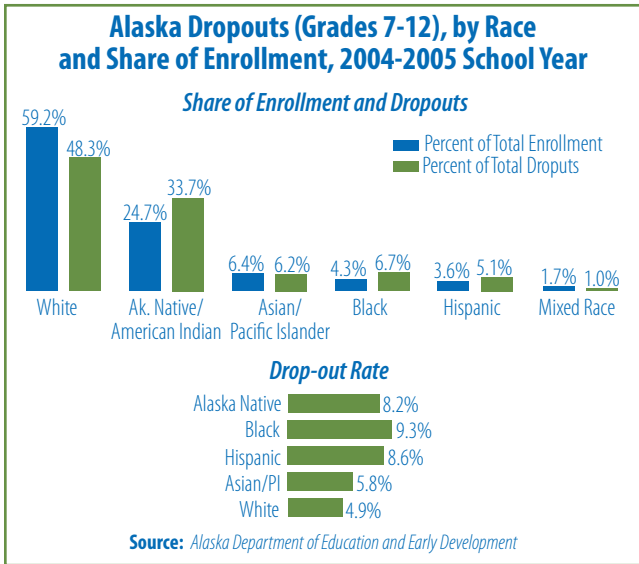
DEFINITIONS

Here we discuss two related indicators: the teen drop-out rate and the high-school graduation rate. The trend graph above is based on the definition of dropout in the national KIDS COUNT Data Book: the percentage of teenagers 16 through 19 who aren't enrolled in high school and haven't graduated. Those who have general equivalency diplomas (GEDs) are considered graduates and are not counted as dropouts. This measure is known as a "status" drop-out rate, and it is a consistent measure across states, based on data from the American Community Survey.

The Alaska Department of Education and Early Development uses a different definition of dropout: a student who was enrolled at some time during the school year but who didn't complete the year and didn't graduate or transfer to another public or private school, or to state- or district-approved education programs. Students who are out of school because they've been suspended or are ill are not considered dropouts.

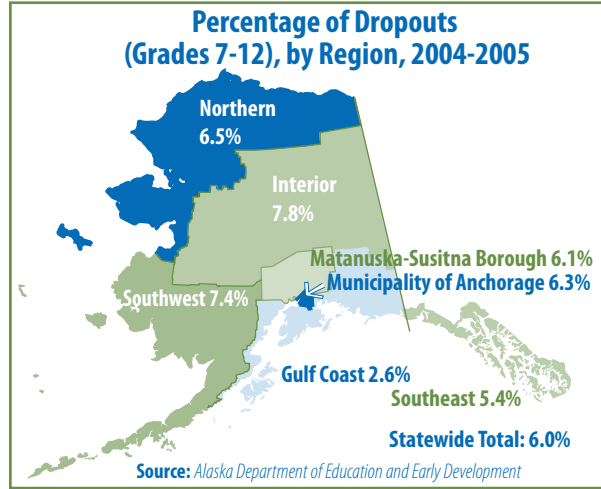
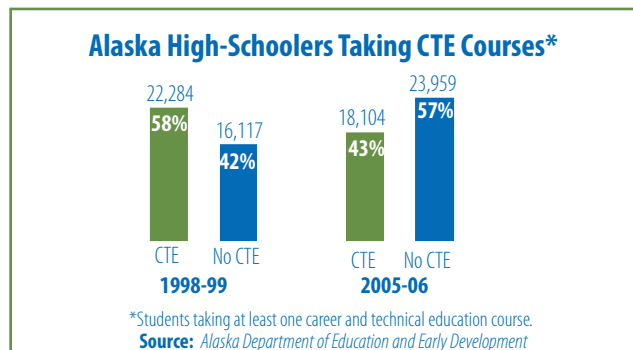
The National Center for Education Statistics publishes the "averaged freshman graduation rate" for each state and the entire U.S. It measures the percentage of freshmen in a given class who graduate four years later. The Alaska Department of Education and Early Development uses a somewhat different method to calculate graduation rates among

Teens Who Drop out (continued)



The map shows dropouts by region in 2004–2005. The statewide rate that year was 6%. The highest rates were in the Interior and the Southwest, at more than 7%, and the lowest along the Gulf Coast, at 2.6%. In most other regions, rates were close to the state average.

Schools are grappling with ways to keep students in school. A recent national study found that high-risk students were much less likely to drop out if they were enrolled in career and technical education (CTE) programs.⁴ But the number of Alaska high-school students taking CTE courses has declined in the past decade. School districts, technical centers, labor organizations, and others recently formed a consortium to expand and coordinate CTE in Alaska.⁵



HIGH-SCHOOL GRADUATION RATES

As we mentioned earlier, the National Center for Education Statistics (NCES) and the Alaska Department of Education measure high-school graduation rates differently. In last year's book we reported on a compact, which the governors of all 50 states have now signed, that sets a common definition for calculating high-school graduation. Some states are already using the compact definition; other states have set time lines to start using it. As of late 2006 Alaska had not yet determined when it will start using the compact definition.

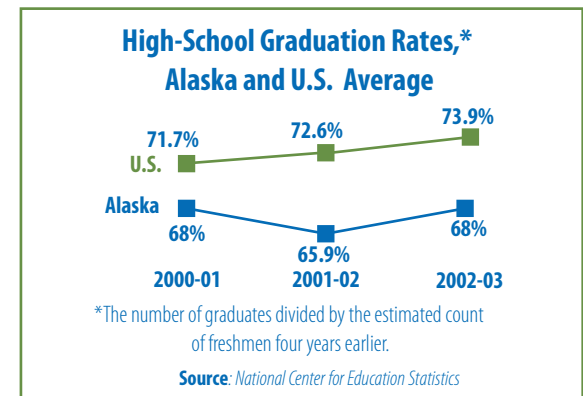
The line graph to the right compares graduation rates in Alaska and nationwide in recent years. These are figures from NCES—based on the number of students who graduate in a given class, compared with the number who entered as freshmen four years earlier. Among all U.S. public high-school students in the 2002–2003 school year, nearly 74% graduated, compared with 68% in Alaska. Fourteen states had graduation rates above 80% that year, and ten states under 70%.⁶

The large bar chart on the facing page shows graduation rates among Alaska high-school students in 2005, calculated by the Alaska Department of Education. Remember that these figures aren't directly comparable to the NCES figures, because the department uses a more complex method, adjusting for dropouts each year.⁷

Statewide, 6,905 (or 61%) of seniors graduated and received high-school diplomas during 2005. Another 184 (about 1.5%) received certificates of completion—meaning they met other requirements of graduation but didn't pass the High School Graduation Qualifying Exam. All students must pass that exam to receive diplomas. Those receiving certificates of completion are not counted as graduates in the data presented here.⁸

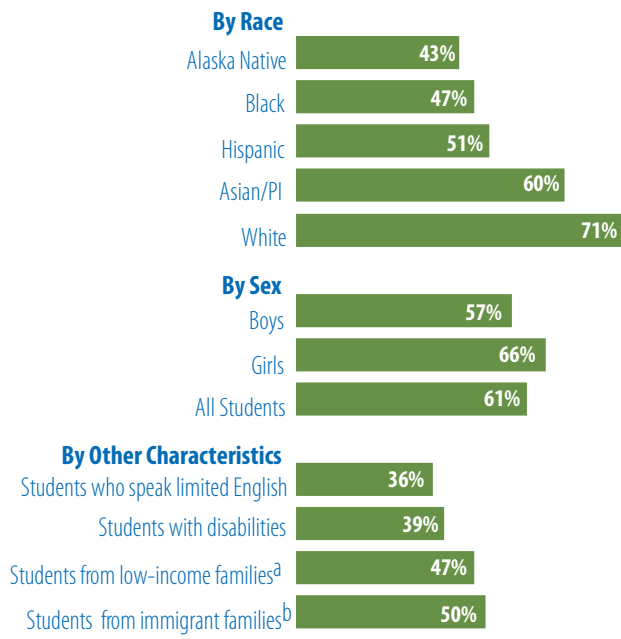
Breaking 2005 graduates into groups, we see that girls were more likely than boys to graduate from high school—66% compared with 57%. White students graduated at higher rates than students of other races—71%, compared with anywhere from 43% to 60% among other races. About half the seniors from low-income or immigrant families graduated, but only about a third of those who have disabilities or speak limited English graduated.

We also know that some of the students from minorities who make it all the way to their senior year are still less likely to graduate than White students. The smaller bar chart shows, for example, that at the start of the 2004–2005 year, Alaska Natives made up 21% of all seniors but only 18% of graduates in 2005. Hispanic students made up 3.5% of seniors but just 3% of graduates. Probably several things explain the difference between the number of starting seniors and the number of graduates—including the fact that some seniors drop out and some don't pass the graduation qualifying exam.



Teens Not in School and Not Working

Graduation Rates Among Groups of Alaska Students, 2005

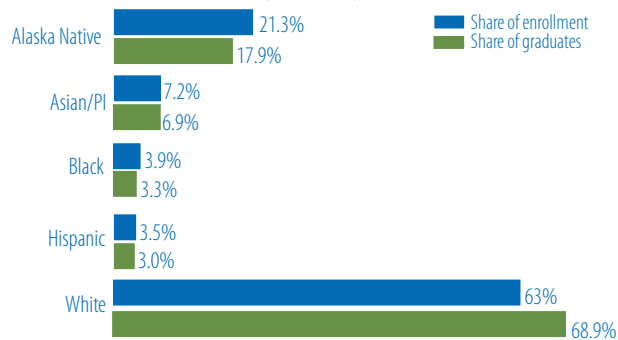


^a "Low-income" as measured by eligibility for free or reduced-price lunch
^b "Immigrant" families are those with at least one foreign-born parent

Source: Alaska Department of Education and Early Development

Share of Grade 12 Enrollment and of Graduates

(2004-2005)



Source: Alaska Department of Education and Early Development

DEFINITION

This indicator reports the percentage of teenagers, ages 16 through 19, who are not attending school, not in the military, and not working. The figures include both high-school drop-outs and those who have high-school diplomas or general equivalency diplomas (GEDs) but are not working.

Since 2000, the national KIDS COUNT program has used the American Community Survey to calculate this indicator—so data before 2000 are not directly comparable.

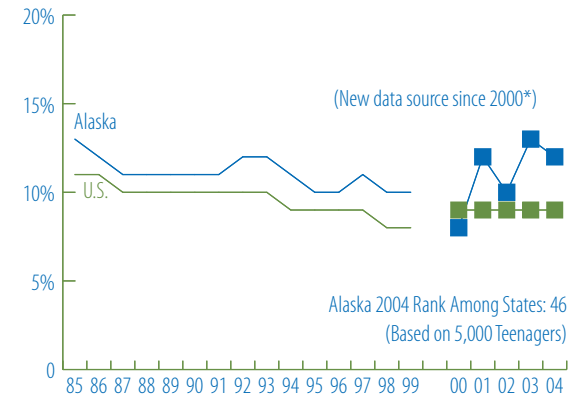
SIGNIFICANCE

Teenagers who are neither attending school nor working are sometimes labeled "disconnected," because they aren't learning skills that will help them become productive members of their communities. They aren't making the connections with adult and community networks they'll need to become successful adults themselves.

Who is most at risk of becoming disconnected? Research suggests that most of those ages 14 to 17 who fail to make a successful transition to adulthood fall into one of four groups: those who drop out of high school; those who have spent time in the juvenile or criminal justice system; young, single teenage mothers; and those who have been in foster-care placement.⁹ Teenagers from minorities, teenagers living in rural communities, and teenagers from low-income families are also at greater risk of becoming disconnected.¹⁰ Without the skills that education and jobs provide, disconnected teenagers and young adults are at a significant disadvantage. They are more likely both to commit and to be victims of crime and more likely to live in communities unlikely to provide the resources they need.¹¹ Finally, their future chances for higher education and better-paying jobs dwindle, the longer they are out of school and unemployed.¹²

Teens (16-19) Not in School and Not Working

Trend 1985-2004



(New data source since 2000*)

Alaska 2004 Rank Among States: 46
(Based on 5,000 Teenagers)

*See text

Source: 2006 National Kids Count Data Book

DATA

Between 2000 and 2004, the percentage of Alaska teenagers not working and not in school increased by half—from 8% to 12%. Nationally, 9% of U.S. teens were neither enrolled in school nor working in 2004. Looked at another way, about 1 in 8 Alaskans ages 16 to 19 were not employed or attending school in 2004, compared with 1 in 11 teens across the U.S. Alaska ranked 46th among states on this indicator in 2004—not the worst, but close to the worst.

Data from other sources suggest that young adults in Alaska are also less likely to attend and complete college than their peers across the country. Figures from the 2004 American Community Survey show just 29% percent of young adults (ages 18-24) in Alaska were either enrolled in or had completed college—a rate significantly below the U.S. rate of 40%. Another recent report found that Alaska ranked lowest in the nation on the percentage of those ages 18 to 24 who were in some form of post-secondary education.¹³ One contributing factor is that it's very difficult for many teenagers living in Alaska's small, isolated rural communities to get education beyond high school, unless they can afford to move to larger places that offer post-secondary education.

School Achievement

DEFINITION

This indicator looks at two measures of student achievement: the National Assessment of Educational Progress and Alaska's High-School Graduation Qualifying Exam.

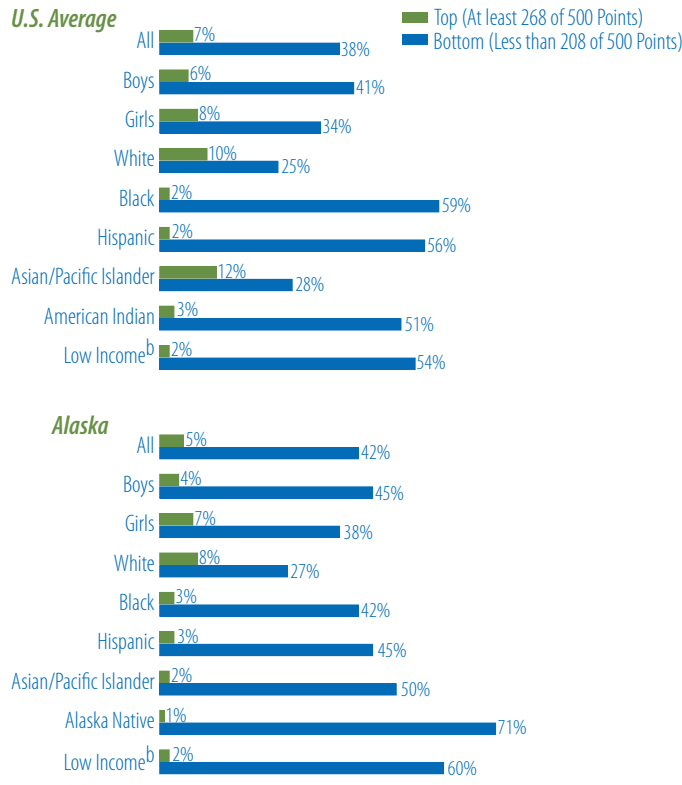
Since 2001, the federal "No Child Left Behind" law has required all states receiving Title I federal education funding to participate in the National Assessment of Educational Progress (NAEP), which measures reading and math skills among a sample of 4th and 8th graders every two years. NAEP allows states to (1) assess how their students are doing compared with students nationwide; (2) compare how various groups of students are doing; and (3) track state progress over time.

Alaska's High-School Graduation Qualifying Exam tests reading, writing, and math skills. Students have to pass the exam before they can receive high-school diplomas. They first take the test in 10th grade but can keep taking it until they pass; if they don't pass by graduation time, they receive "certificates of achievement" instead of diplomas.

SIGNIFICANCE

Alaska and the rest of the country need a productive workforce to keep our economy healthy—and responsible, informed citizens to keep our democracy strong. We won't have either without good education. But we know the education system faces serious problems. U.S. students can't do math or science as well as students in many other countries (see figure below), and the 2005 NAEP results show that Alaska's students are falling below U.S. averages. Many concerned Alaskans are now examining way to strengthen public education.¹⁴

Percentage of 4th Graders Scoring at Top and Bottom of NAEP Reading Test, 2005^a



^aNational Assessment of Educational Progress

^bEligible for free or reduced-price school lunch

Source: National Assessment of Educational Progress

Between 1988 and 2005, the share of students who were White dropped from 68% to 56%, and the share of Alaska Native and other minorities increased from 32% to 44%.

The percentage of children from low-income families has also increased, measured by the share of school children who can qualify for free or reduced-price lunches (see page 24). During the 2004–05 year, more than a third of Alaska's public school students qualified for either free or reduced-price lunches, up from about a quarter a few years earlier.

NAEP SCORES

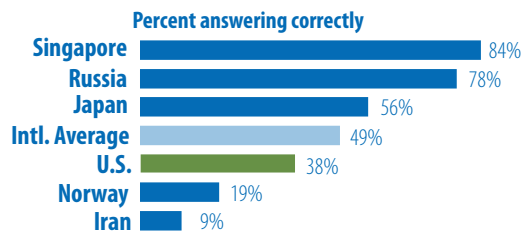
In both reading and math, NAEP calculates an "average scale score" that can range from 0 to 500 points. Based on those scale scores, students fall into four achievement levels: below basic, basic, proficient, and advanced.

Students who score less than 208 of 500 points are considered to have "below basic" skills, and those who score at least 268 points are considered to have "advanced" skills.

The most recent NAEP in Alaska was in 2005. The figure to the left shows the percentages of 4th graders—by race, sex, and income—in Alaska and nationwide who scored at the top ("advanced") and at the bottom ("below basic") in the reading test.

There are 600 balls in a box and 1/3 of the balls are red. How many red balls are in the box?

(Sample math question asked fourth graders in 25 countries*)



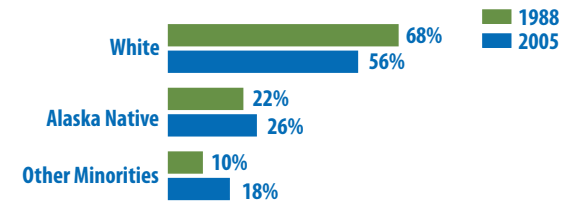
* Trends in International Mathematics and Science Study, 2003

BACKGROUND

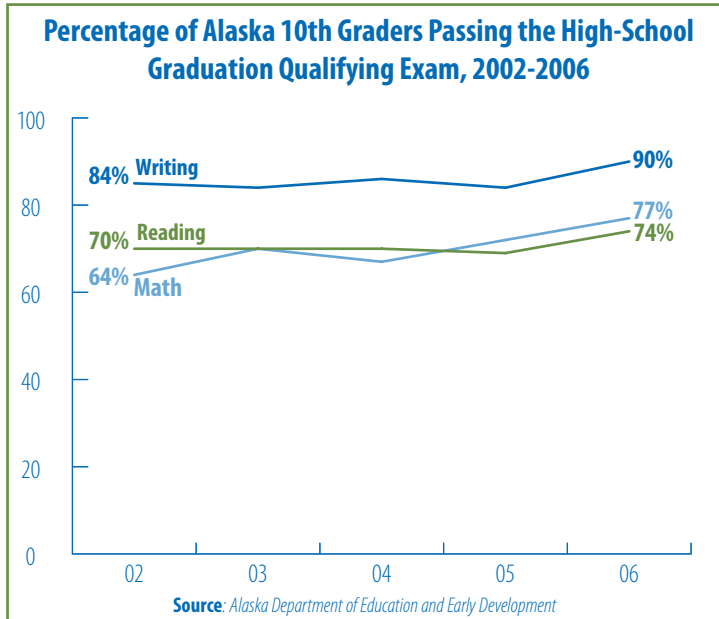
Alaska has more than 500 public schools in 53 districts. In the 2004–2005 school year, there were approximately 133,000 students enrolled in Alaska's public schools. During that year the school system spent an average of \$10,083 per pupil, from a combination of state, local, and federal funds.

The racial composition of Alaska's school students has shifted in the past 15 to 20 years, with the percentage of minority students growing and the share of White students declining.

Alaska K-12 Students by Race



Source: Alaska Department of Education and Early Development



Few students in Alaska or nationwide have advanced reading skills, and many don't have even basic skills. But in almost every breakdown Alaska had even fewer students scoring at the top and more scoring at the bottom. About 42% of Alaska's 4th graders don't have basic reading skills, compared with 38% nationwide. Only 5% of 4th graders in Alaska and 7% across the country have advanced skills.

Girls read better than boys, in Alaska and across the country, and children from minorities score lower than White students. More than half the students from families with low incomes read at less than basic levels, in Alaska and nationwide.

HIGH-SCHOOL GRADUATION QUALIFYING EXAM

The exam all Alaska students must now pass before getting high-school diplomas was first administered in 2000, but it was only in 2004 that it became a graduation requirement. From the beginning, significantly more students have passed the writing than the math and reading sections of the exam.

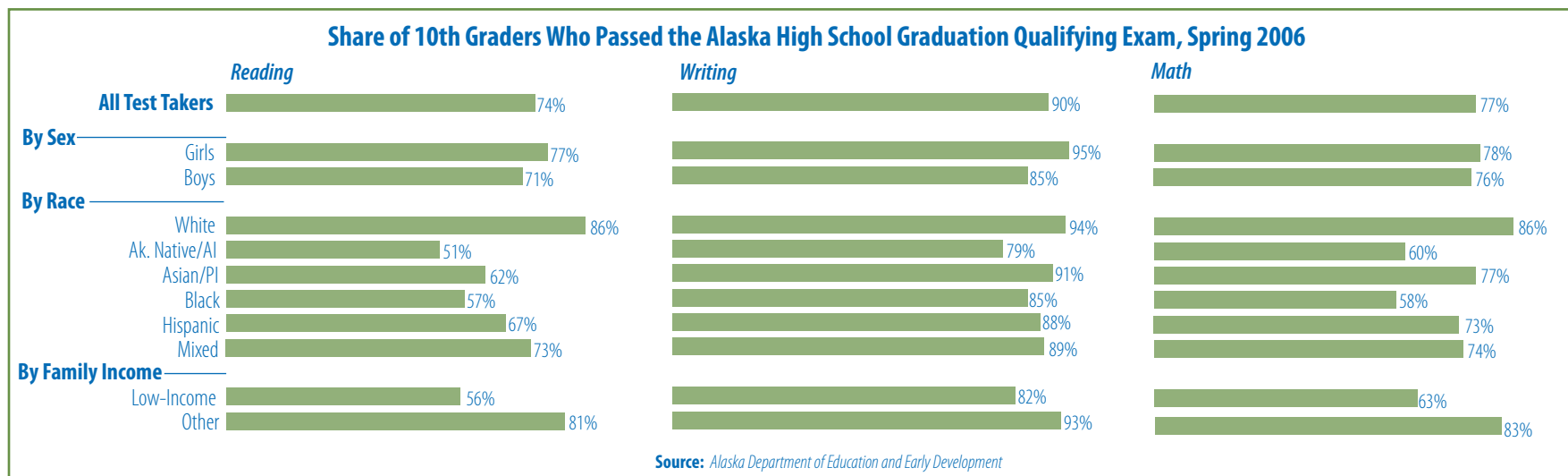
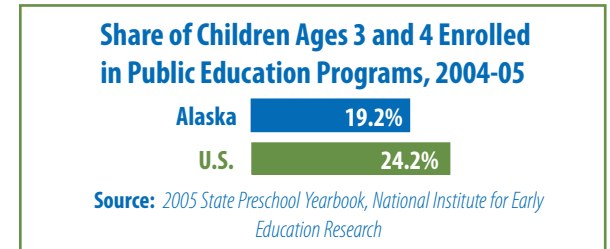
But the percentage of 10th graders passing all three sections of the exam was higher in 2006 than it had been in 2002, as the line graph to the left shows. The increase in the percentage of students passing the math section was the largest, moving from 64% in 2002 to 77% in 2006. Still, among Alaska's high-school sophomores, 10% failed writing, 23% failed math, and 26% failed reading.

The bar graph below shows more detail about the results of the Spring 2006 exam. Overall, 74% of 10th graders passed the reading section, 90% passed the writing section, and 77% the math section. Girls were more likely than boys to pass all three sections of the exam,

and White students were more likely than minorities to pass. Students of both sexes and all races were most likely to pass the writing section of the test, as were students from low-income families.

AN EARLY START

Many things influence whether students stay in school and graduate. But a number of people inside and outside the education system argue that children who attend preschool are more likely to stay in school through graduation. Alaska has public preschool programs for children from low-income families, through the Head Start program, and it has federally mandated special education preschool programs. But it has no state-funded public pre-school, and only about 19% of 3- and 4-year-olds in Alaska attend public preschool, compared with 24% nationally. Efforts are underway to expand preschool in Alaska.¹⁵



Endnotes for Education

1. John Bridgeland, John Dilulio, and Karen Burke Morison, *The Silent Epidemic: Perspectives of High School Dropouts*. A Report by Civic Enterprises in association with Peter D. Hart Research Associates for the Bill and Melinda Gates Foundation. March 2006.
2. Reported in "Boosting Drop-out Age to 18 on Table," by Megan Holland, *Anchorage Daily News*, December 17, 2006, page A-1.
3. *Report Card to the Public: 2004-2005 School Year*, State of Alaska, Department of Education and Early Development, page 64.
4. S. Plank, *Career and Technical Education in the Balance*. National Research Center for Career and Technical Education. 2001.
5. The Alaska Tech Prep Consortium. See: www.alaska.edu/techprep.
6. *Student Effort and Educational Progress: Elementary/Secondary Persistence and Progress*, U.S. Department of Education, National Center for Education Statistics, Common Core of Data.
7. The graduation rate is reported as a ratio, where the total number of graduates receiving a diploma before June 30th is divided by the sum of the number of graduates, plus the number of dropouts in grade nine three school years prior, plus the number of unduplicated dropouts in grade ten two school years prior, plus the number of unduplicated dropouts in grade eleven in the prior school year, plus the number of unduplicated dropouts in grade 12 during the current year, plus the number of grade 12 continuing students.
8. *Report Card to the Public* (see note 3), page 58.
9. M. Wald and T. Martinez, *Connected by 25: Improving the Life Chances of the Country's Most Vulnerable 14-24 Year Olds*. A William and Flora Hewlett Foundation Working Paper, 2003.
10. National League of Cities, Institute for Youth Education and Families, *Re-engaging Disconnected Youth, Issue #7*. Institute for Youth Education and Families. See: www.nlc.org.
11. Annie E. Casey Foundation, "Moving Youth from Risk to Opportunity." Essay, *KIDS COUNT Data Book*, 2004.
12. Rima Shore, "Reducing the Number of Disconnected Youth," *Kids Count Indicator Brief*, Annie E. Casey Foundation, 2003.
13. Editorial Projects in Education Research Center, *Quality Counts 2007*. Reported in *Anchorage Daily News*, January 9, 2007, page B-2, "Post-secondary school is out for Alaskans."
14. For a summary discussion of education issues and efforts underway to strengthen education, see Alexandra Hill, Lee Gorsuch, Mary Killorin, and Pam Cravez, *UA Policy Brief: The Case for Strengthening Education in Alaska*, in the Understanding Alaska publication series, Institute of Social and Economic Research, University of Alaska Anchorage. November 2006. Available at: www.iser.uaa.alaska.edu.
15. See note 14.



Aspen Perkins, Anchorage



Aspen Perkins is a single mother with a 3-year-old adopted daughter, and as of June 2006 she had five foster children, all teenage girls, and guardianship of one 17-year-old girl.

She formerly worked in the adolescent girls unit at Anchorage's North Star Hospital and at a residence center for teenage girls, but is currently caring for her children full-time. She has been a foster mother since 2001. In the past five years she has taken in 38 foster children.

Why did you become a foster parent?

It started informally when I was about 19, when I found out about a 13-year-old girl who had been in and out of foster care without a good result. She came to live with me off and on for the next several years. Later, when I was working in the adolescent girls unit at North Star hospital, I saw girls who were there for a long time because no one wanted to take in teenage girls.

I became a licensed foster care parent when I was 26 and I've had foster children ever since. After the background check, finger printing, and home check, [OCS] just called me one day and asked me to take two boys who were 4 and 6 and had attention deficit hyperactivity disorder (ADHD). I was excited, but not really prepared. Looking back, ADHD was easy to deal with, compared with the problems of kids who came later.

How have your life and the children's lives changed?

My life changed immediately when I began doing foster care. I had a lot of freedom before. Now my contact with adults is limited to friends or other foster parents, or judges at court hearings. I am a leader of a foster-parent support group and I have a potluck at my house once a month.

I think some of the biggest changes for the children are that they have structure in the house, there is food on the table, and I'm home every night. I get calls from my kids every day, when they're out or at school. Most of them have never really lived in a family where you spend time together and sit down to dinner every night.

Two of the girls I am fostering spent two or three years on the street before they came here. They were doing drugs, etc. Since coming here they do well in school, getting mostly Bs or better. They write school papers. One of those papers was about foster care. All the girls are going for their high-school diplomas instead of getting GEDs.

What are the benefits?

It has brought an incredible amount of love. Only two of my foster kids left my home because things didn't work out. Past kids still call me at 2 or 3 in the morning. It doesn't matter how rich you are, or what kind of car you drive, but how much difference you made in the life of a child.

What would you like people to know about being a foster parent?

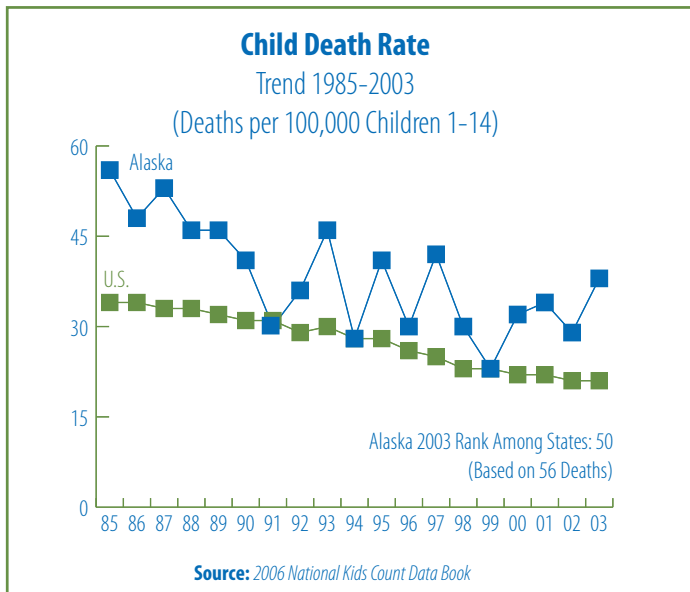
I would like them to know we're not all in it for the money. And we are not all like those occasional bad foster parents you hear about on the news.

Do you think you'll take more foster children in the future?

I don't see stopping any time soon, unless it became a problem for my daughter. Right now she loves all the older girls and waits for them to come home at night. A girl is coming to live with us soon who is pregnant. Sometimes you don't have time to think much about these things—you just do it.

My home is not a foster home. It is a home for family.

Aspen Perkins



DEFINITION

The child death rate is the number of deaths per 100,000 children ages 1-14, from all causes—including natural and violent. Regional data reflect the child’s place of residence, not place of death. The table breaking out deaths by cause includes children up to age 17.

SIGNIFICANCE

Nearly 12,000 U.S. children between the ages of 1 and 14 died in 2003; that’s an average of 33 children per day.¹ Most of these deaths were the result of accidental injuries, which are by far the leading cause of children’s deaths across the nation.² Many of these accidental deaths could be prevented.

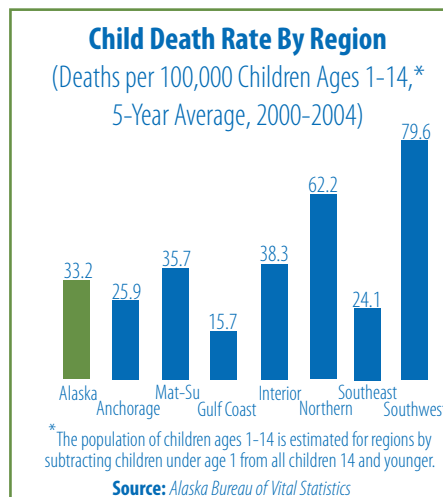
Nationwide, motor vehicle accidents are the largest cause of deaths from injuries among children ages 5 to 14. For the youngest children, ages 1 to 4, drowning is the most common cause of accidental death.³ Poor children and those living in rural areas are at increased risk of having fatal accidents, and the death rate among Alaska Native and American Indian children is higher than it is for any other racial or ethnic group.⁴ Boys of all ages are more likely to die as the result of accidents than girls, and boys are also far more likely to commit suicide or to be murdered.⁵

DATA

A total of 56 children died in Alaska in 2003. That’s a rate of 38 deaths per 100,000 children ages 1 through 14. Alaska’s child death rate in 2003 was the highest—the worst—in the nation. The U.S. average that year was 21 per 100,000 children.

As the adjacent trend graph shows, Alaska’s child death rate is lower than it was in the 1980s, but it can rise or fall sharply from year to year. That’s because Alaska has a relatively small number of children—about 150,000 between the ages of 1 and 14—so relatively small changes in the number of deaths in any given year can move the rate up or down considerably.

And if we look at the child death rate by region, the numbers get much smaller, especially in rural areas. So when we’re calculating regional rates—shown in the bar graph—we use averages for 5 years, to minimize the effects of year-to-year fluctuations.



How Do Alaska Children Die?

(Number of Deaths, by Age, 2000-2004)

	1-4	5-9	10-17	Total	Percent
Natural Causes	45	14	56	115	29.5%
Accidents	37	19	114	170	43.6%
Suicides	0	2	60	62	15.9%
Homicides	8	2	19	29	7.4%
Other	5	2	7	14	3.6%
Total	95	39	256	390	100%

Source: Alaska Bureau of Vital Statistics

The death rate among Alaska’s children averaged 33 per 100,000 between 2000 and 2004, but there were huge differences in rates among regions.

The lowest child death rate was in the Gulf Coast region—under 16 per 100,000 children—and the rates in the Southeast and the Anchorage regions were around 25. The highest rates were in the Northern and the Southwest regions. The child death rate in Southwest Alaska was 79.6 per 100,000 children in the period 2000-2004—nearly 2.5 times the rate for the state as a whole, and 5 times the rate in the Gulf Coast.

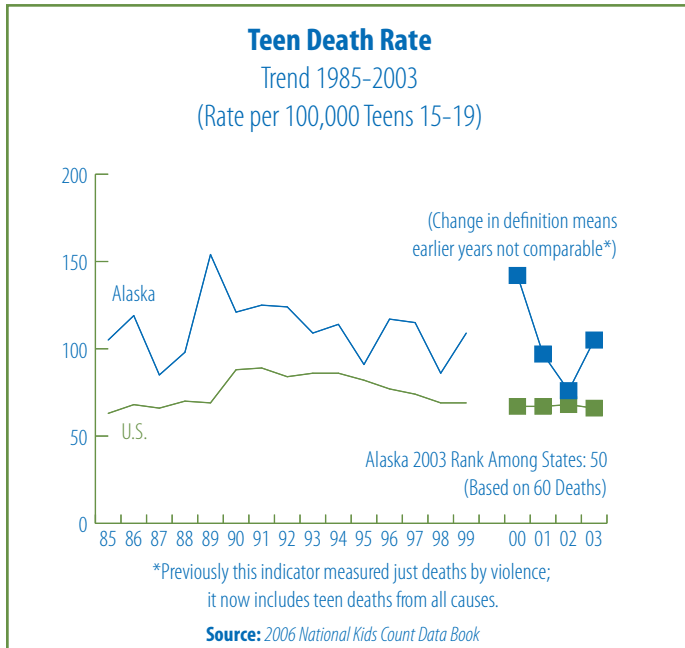
What is it that kills children in Alaska? The table above shows numbers of deaths among children, by age, from 2000 through 2004. Overall, natural causes were responsible for about 30% of the deaths among children ages 1 to 17. The other 70% were from accidents, suicides, and homicides—but the causes of death are quite different among younger and older children.

Among the youngest children, ages 1 to 4, natural causes accounted for nearly half the deaths, and accidents were responsible for most of the rest. But nearly one in ten deaths among very young children were homicides.

Accidents were responsible for half the deaths among children ages 5 to 9 and another third were from natural causes. But 5% of deaths among these young children were suicides and 5% homicides.

Among 10-17 year olds, nearly 25% of all deaths were suicides and another 7% homicides. The Teen Death Rate indicator talks more about the very high rates of suicide in some areas of Alaska.

Teen Death Rate



DEFINITION

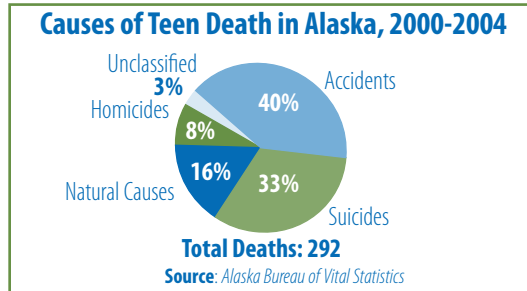
The overall teen death rate is the number of deaths (from both natural and violent causes) per 100,000 teens ages 15 to 19. The teen violent death rate is based on deaths from suicides, accidents, and homicides.

SIGNIFICANCE

Accidental injury is the leading cause of death among American teenagers, followed by homicide and suicide.⁶ In 2003, an average of 37 American teenagers died every day—and nearly all those deaths could have been prevented.⁷ Motor vehicle crashes cause two out of five deaths among teenagers nationwide, and the rate of death from these crashes is twice as high among teenage boys as girls.⁸

Violence also injures or kills many teenagers. The total costs of this violence are estimated to be over \$158 billion per year.⁹ Nearly 5,600 young people ages 10 to 24 were murdered in 2003. Every year almost 5,000 Americans ages 15 to 24 take their own lives.¹⁰ The suicide rate for teenagers and young adults in the U.S. is nearly three times higher now than it was in 1960—and suicide is the third leading cause of death among adolescents.¹¹

In Alaska, as the pie chart shows, the biggest single cause of death among Alaska's teenagers from 2000 to 2004 was accidents (40%), followed by suicides (33%), natural causes (16%), and homicides (8%). In a few cases, investigators are uncertain about how to classify deaths, so the remaining 3% of deaths among teenagers were not included in these categories.



U.S.-ALASKA COMPARISON

In 2003, 60 teenagers died in Alaska, giving the state a teen death rate of 105 per 100,000 teens 15 to 19—the highest in the nation and 60% above the U.S. average of 66 per 100,000 teens. But as we discussed in the Child Death Rate indicator, the relatively small number of teenagers in Alaska—about 45,000 ages 15 through 18—means that a small change in the number of deaths in a year can change the rate sharply (as the trend graph makes clear).

REGIONAL DEATH RATES

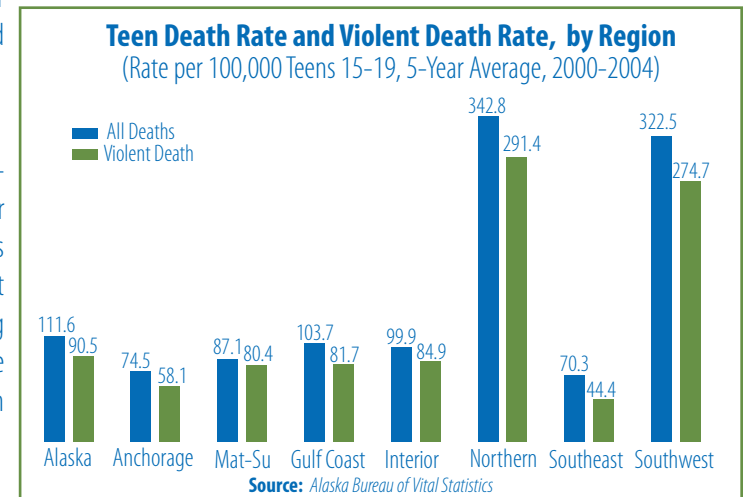
When looking at regional death rates, we try to minimize the effects of small numbers by calculating 5-year averages. The bar chart shows both total teen death rates (from all causes) and death rates specifically from violent causes. Violent deaths account for most deaths among teenagers in all regions—but the rates of violent death are three or more times higher in the Southwest and Northern regions than in other parts of the state.

The statewide average for teen violent deaths from 2000 to 2004 was about 91 per 100,000 teenagers. At the extremes, the violent death rate in Southeast Alaska from 2000 to 2004 was 44.4 per 100,000 teenagers; in the Northern region, the rate was 291 per 100,000.

The table on the facing page breaks overall violent death rates into rates for accidents, suicides, and homicides in areas of Alaska. Because of the small numbers involved in calculating these rates, we can only show the Anchorage and the Interior regions separately and group the remainder of the state (including rural areas where rates of teen violent deaths are high).

Accidental injuries and suicides account for most violent deaths among teenagers in all regions, but the regional rates vary sharply. Rates of suicide and accidental death are much higher outside Anchorage and the Interior (which includes Fairbanks, the next largest city after Anchorage). But rates of homicide are higher in Anchorage and the Interior than elsewhere in the state.

In Anchorage, the rate of teen deaths from suicide (15.5 per 100,000) is half the rate from accidents (31.9). In the Interior, the suicide rate (30 per 100,000) is 30% lower than the accident rate. But in the rest of the state, the suicide rate (57.5 per 100,000) is actually higher than the accident rate (56.6).



Teen Death Rates, By Manner and Region

(Rate per 100,000 Teens 15-19, 5-Year Average, 2000-2004)

Region	Accident	Homicide	Suicide	Natural
Anchorage	31.0	10.6	15.5	15.5
Interior	42.5	12.5	30.0	15.0
Remainder of State	56.6	6.8	57.5	19.4
Alaska	44.7	9.2	36.7	17.6

Sources: Alaska Bureau of Vital Statistics

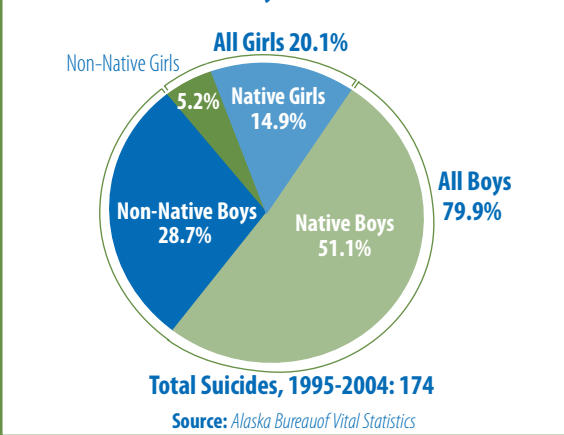
SUICIDE AMONG TEENAGERS

Suicide among teenagers in Alaska is an enormous problem, but the rate of suicide varies dramatically across regions, among Natives and non-Natives, and between boys and girls.

The bar graph below shows suicide rates by region for the past decade. (With a decade's worth of data, we are able to show rates for all regions.) Rates since 1995 are staggeringly high in the remote Northern and Southwest: almost 209 per 100,000 in the Northern region and 134 in the Southwest. The statewide rate, by contrast, is 36 per 100,000—and rates in the Anchorage, Gulf Coast, and Southeast regions are less than half the state average.

The pie chart shows that boys commit 8 in 10 teen suicides in Alaska, but it is Alaska Native boys who are most likely to kill themselves. Native boys alone accounted for 51% of all teen suicides in the state between 1995 and 2004. That was nearly twice the share of non-Native

Teen (15-19) Suicides by Sex and Race, 1995-2004



boys (29%), 3.5 times the share of Native girls (15%) and 10 times the share of non-Native girls (5%).

The bar chart below shows that Alaska Natives 19 and under are far more likely to die not only from suicide but also from accidents and homicides than are White young people. From 1981 through 2000, Alaska Native young people died from accidents at more than twice the rate of White young people; from suicides at more than four times the rate; and from homicides at about 2.5 times the rate.

PREVENTING SUICIDE

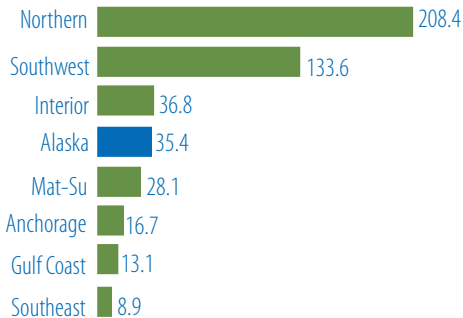
The Alaska Injury Prevention Center recently reported that 45% of the 32 teenagers who committed suicide between September 2003 and October 2004 tested positive for drug or alcohol use at the time they died, and that 61% of the suicides involved the use of firearms.¹²

Young adults and teenagers are the Alaskans most likely to commit suicide, so in 2005 the Statewide Suicide Prevention Council made developing a Youth Advisory Committee a priority to “combat the secrecy of youth depression and suicide.”¹³

Experts say it's critical for parents and educators to know the warning signs of adolescent depression and teen suicide—and to take such warnings seriously. Four out of five adolescents who attempt suicide have given some warning. Those include threatening to commit suicide; being obsessed with death; referring to death in writings or artwork; displaying dramatic shifts in personality or appearance; behaving in irrational or strange ways; having a deep sense of guilt or shame; changing eating or sleeping patterns; having severe problems in school; and giving away possessions.¹⁴

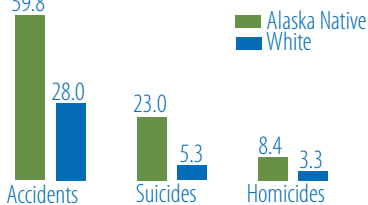
Alaska Teen Suicide Rate By Region

(Rate per 100,000 Teens 15-19, 1995-2004)



Injury Death Rates, Alaska Native and White Alaskans 19 and Under, 1981-2000

(Rate per 100,000)



Source: Alaska Division of Public Health, Alaska Injury Facts, May 2003

Child Abuse and Neglect

DEFINITION AND SIGNIFICANCE

Child abuse or neglect exists when parents or other adult guardians physically or mentally hurt children in their care, or fail to protect them from such harm.

The Child Welfare Information Gateway reports that nearly 1,500 children nationwide were killed by abuse in 2004, and about 870,000 more were injured. Nationwide, the rate of abuse and neglect was close to 12 per 1,000 children.

More than half the victims were neglected; close to 20% were physically hurt, and 10% were sexually abused. The rest suffered some form of emotional or mental abuse. Women (mostly mothers of the victims) are more likely than men to neglect or abuse children. Most of the children who die of abuse are infants or toddlers, and most are killed by their parents.¹⁵

OCS INVESTIGATIVE PROCEDURES

In Alaska, the Office of Children's Services (OCS) in the Alaska Department of Health and Social Services receives and investigates reports of suspected child abuse and neglect. A "protective services" report documents suspected child abuse or neglect. Such reports may contain one or more allegations of abuse or neglect involving one or more children.

Anyone who believes a child has been harmed can file a report with OCS, which then screens the reports to evaluate whether they should be investigated—based on the information in the report and the degree of potential risk to a child. Reports are either "screened in" and assigned for investigation or "screened out" and not investigated.

There are some changes in this year's data on child abuse. First, OCS recently adopted a new system for recording information, so we aren't able to report data averaged over several years, as we have previously. Also, in earlier years, the data we reported from OCS contained only the most serious allegation of harm per child per report. But a single child may be the subject of one or more allegations of the same

or different types of harm. Some of this year's figures include all allegations.

The adjacent charts show the number of protective services reports OCS received in 2005 and the outcome of completed investigations.¹⁶ OCS received 9,758 reports of suspected child abuse or neglect. It assigned 6,174 (63.3%) for investigation and screened out 3,584 (36.7%). OCS says there are various reasons why not all reports are assigned for investigation. For example, some reports contain insufficient information for investigation; some incidents reported to OCS are on subjects other than suspected child abuse or neglect.

The 6,174 reports OCS assigned for investigation in 2005 involved 11,702 children and included 20,702 separate allegations of abuse or neglect. More than half these allegations (55.9%) were suspected neglect, followed by suspected mental injury (18.9%), physical abuse (16.3%), and sexual abuse (8.9%).¹⁷

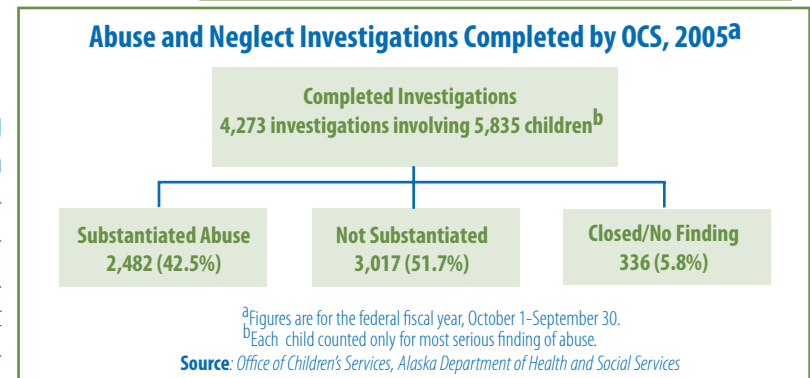
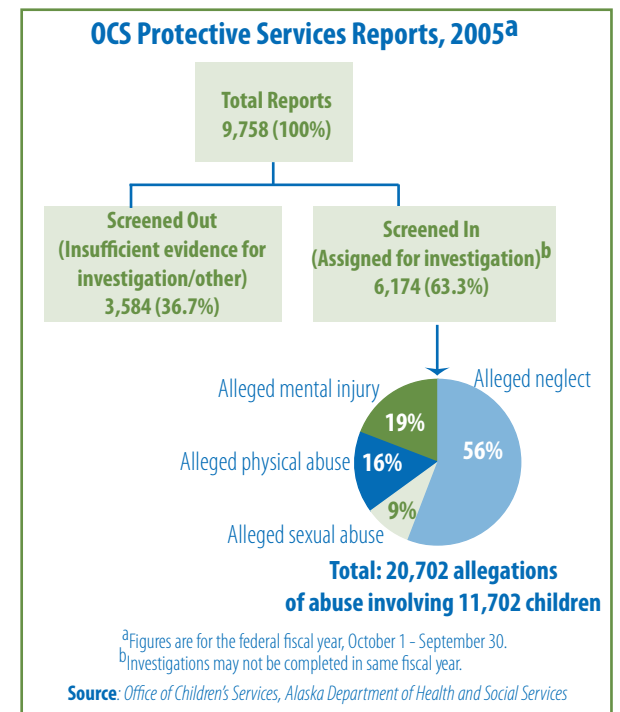
Investigations assigned in any given year may or may not be completed in the same year. So the number of reports assigned for investigation in a given year does not match the number completed that year.

FINDINGS OF INVESTIGATIONS

OCS completed 4,273 investigations involving 5,835 children in 2005. These figures count each child only once—in the category of the most serious finding. But one investigation may cover allegations from more than one protective services report. OCS found evidence substantiating abuse or neglect for 2,482 children (42.5%), but not for 3,017 others (51.7%). Approximately 6% of the cases were closed without findings.

ABUSE BY TYPE AND RACE

In 2005, more than 16 of every 1,000 Alaska children were abused by adults. That is significantly higher than the U.S. average rate of about 12 per 1,000 in 2004. Neglect is the most common form of substantiated abuse, followed by mental injury (which OCS



defines as an emotional, psychological, or intellectual injury that impairs children's ability to function). Sexual abuse is the least common.

The pie chart shows the racial composition of Alaska's children. About 63% are White, 25% Alaska Native, and 12% of other races. The table shows numbers of abused children, by race and by type of abuse. Notice that children can be either of a single race or more than one race. OCS includes almost all children of more than one race in

Child Abuse and Neglect (continued)

the category "Two or More Races." The exception is that children who are entirely Alaska Native or Alaska Native and some other race are all in the category "Alaska Native."

About half the victims of abuse or neglect in 2005 were Alaska Native, and more than a third were White. The remaining 12% or so were children of other races or more than one race.

Comparing the percentages of all Alaska children by race with the victims of abuse by race, we can see that Alaska Native children represent a disproportionately large share of the victims of abuse. They make up 25% of all children but 50% of abuse victims.

Victims of Substantiated Abuse, by Race and Type of Harm 2005^a
(Children Under Age 18)

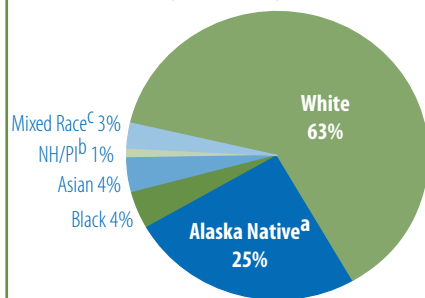
	Mental Injury	Neglect	Physical Abuse	Sexual Abuse	Total	Percent
Alaska Native ^b	417	960	192	70	1,639	52%
Asian only	7	11	7	0	25	1%
Black/African American only	41	95	28	2	166	5%
Hawaiian/Pacific Islander only	9	16	11	2	38	1%
White only	302	541	208	61	1,112	35%
More than one race	0	18	2	1	21	1%
Unable to determine	44	57	23	12	136	5%
Total	820	1,698	471	148	3,137	100%

^aEach victim is counted once per type of harm substantiated.

^bIncludes children who are either Alaska Native alone or Native and some other race.

Source: Office of Children's Services, Alaska Department of Health and Social Services.

Racial Composition of Alaska Children
(18 and Under)



^aIncludes Native alone and Native with some other race

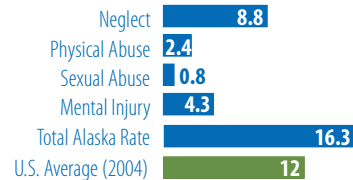
^bNative Hawaiian/Pacific Islander

^cExcept children of Native and some other race, who are included in "Alaska Native."

Source: 2000 U.S. Census, adjusted by Alaska Department of Labor and Workforce Development

Rates of Substantiated Harm, by Type, 2005

Rate per 1,000 Children under 18



Sources: Office of Children's Services, Alaska Department of Health and Social Services; Child Maltreatment 2004

Child Injuries

DEFINITION

This indicator presents data on serious injuries and injury-related deaths among Alaska children ages 19 and under. Injuries classified as “serious” are those that require hospitalization, and they include both intentional injuries—suicide attempts and assaults—and accidental injuries. The injury death rate is the number of children ages 0-19 per 100,000 in the state who have died as a result of intentional or accidental injury. Hospitalizations and deaths resulting from illnesses and other natural causes are not included.

SIGNIFICANCE

Every year, one in four American children under age 14 requires medical attention for a serious injury—that’s 39,000 children a day and more than 14 million children a year. The National Safe Kids Campaign estimates that the average medical bill for serious injuries is \$650—but that every dollar spent on a child safety seat or bicycle helmet potentially saves the country more than \$30 in direct medical or other costs to society.¹⁹

The good news is that the death rate due to accidental injury in children under the age of 15 decreased 45% between 1987 and 2002.²⁰ There are still, however, significant racial differences in injury-related deaths among U.S. children. Alaska Native and American Indian children and adolescents have the highest rates of injury-related mortality in the nation.²¹ In fact, 75% of all deaths among American Indian and Alaska Native children and teenagers in the U.S. are due to injuries.²²

REGIONAL DIFFERENCES

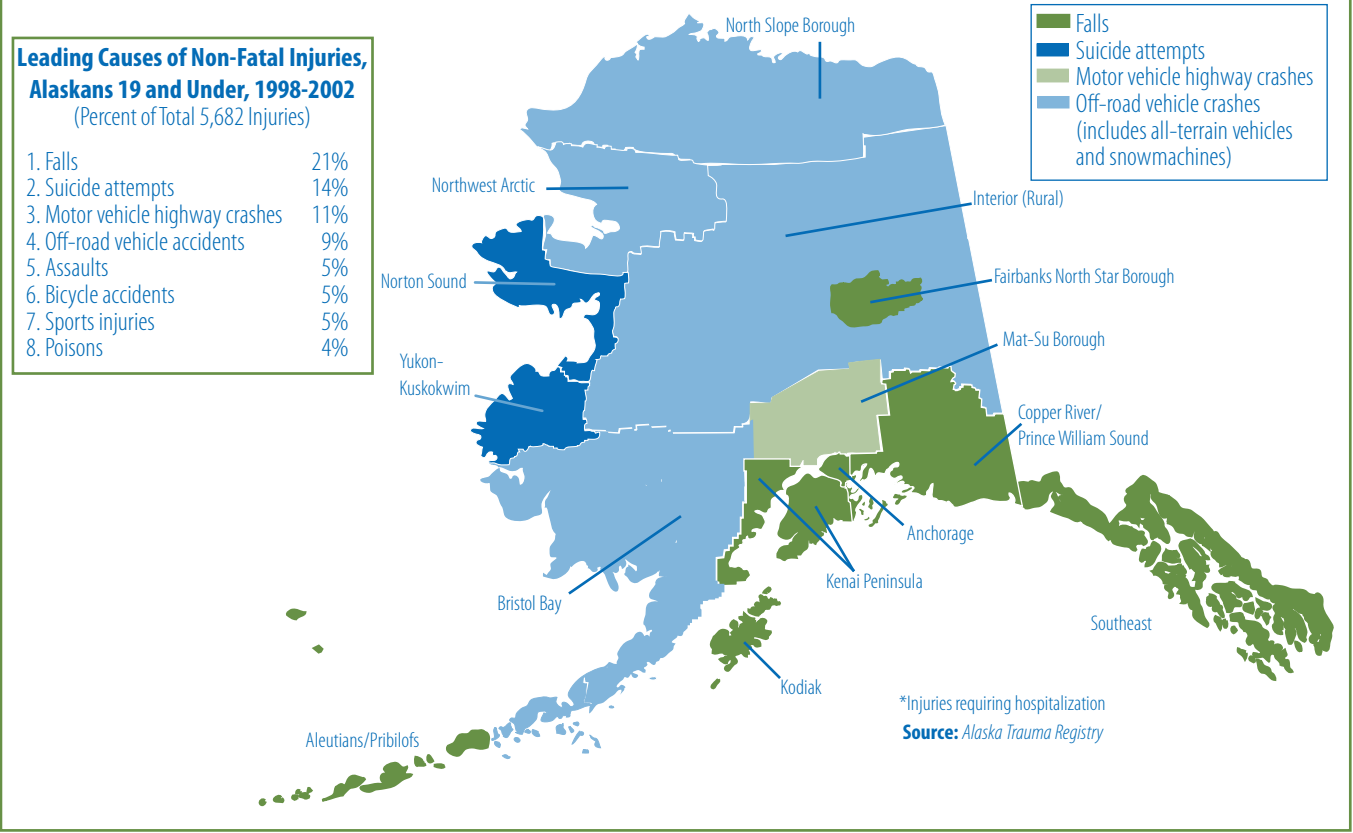
Between 1998 and 2002, 5,682 Alaska children 19 and younger were hospitalized for serious but non-fatal injuries—an average of 1,136 per year. The leading cause of these injuries was falls (21%), followed by suicide attempts (14%) and motor vehicle accidents (11%). But as the map shows, leading causes of injury vary among regions of Alaska.

In the Norton Sound and Yukon-Kuskokwim regions of western Alaska, the most common cause of serious injury is suicide attempts.

Leading Causes of Non-Fatal Injuries, Alaskans 19 and Under, 1998-2002
(Percent of Total 5,682 Injuries)

1. Falls	21%
2. Suicide attempts	14%
3. Motor vehicle highway crashes	11%
4. Off-road vehicle accidents	9%
5. Assaults	5%
6. Bicycle accidents	5%
7. Sports injuries	5%
8. Poisons	4%

Leading Causes of Non-Fatal Injuries,* Alaskans 19 and Under, by Region of Residence, 1998-2002



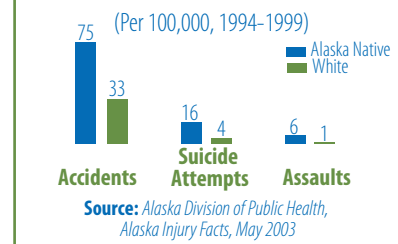
In the Mat-Su region, children are most likely to be injured in motor vehicle crashes. In the North Slope Borough, the Northwest Arctic, the rural Interior, and Bristol Bay, accidents with off-road vehicles (both all-terrain vehicles and snowmachines) are the leading cause of serious injury to children. In the remainder of the state, children are most likely to be seriously injured in falls.

DIFFERENCES BY RACE

There are also significant racial disparities in rates of serious injury—from both intentional and accidental injury. In the late 1990s (the most recent comprehensive figures available) hospitalization rates for unintentional injury were 2.3 times higher for Alaska Native than

White children and adolescents, and rates of injury from attempted suicide and assault were four times higher.²³

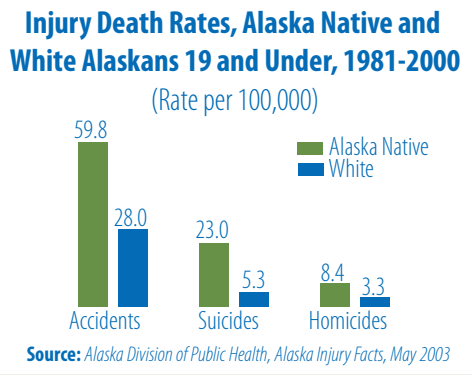
Hospitalization Rates for Injuries, Alaska Native and White Alaskans, 19 and Under
(Per 100,000, 1994-1999)



INJURY DEATH RATES

The Alaska Bureau of Vital Statistics reports that from 2002 to 2004, accidental injury was the leading cause of death for children ages 5 and over, and the third highest cause of mortality in children younger than 4.²⁴

The injury death rate among Alaska Natives 19 and younger has also historically been much higher than for non-Natives. From 1981 through 2000, the rate of accidental death among Alaska Natives 19 and under was more than double the rate among non-Natives. Native young people were four times more likely to commit suicide and nearly three times more likely to be murdered.²⁵



Endnotes for Children in Danger

1. Annie E. Casey Foundation, *2006 KIDS COUNT Data Book*, page 36.
2. National Safe Kids Campaign, *Childhood Injury Fact Sheet*, 2004; and *Home Injury Fact Sheet*, 2004. Washington D.C.
3. *Childhood Injury Fact Sheet*; see note 2.
4. See note 1.
5. Centers for Disease Control and Prevention Fact Book: *Different People, Different Injuries*. Retrieved June 2006: www.cdc.gov/ncipc/fact_book/07_Different.htm.
6. Child Trends Data Bank, *Teen Homicide, Suicide, and Firearm Death*. Retrieved July 2006: www.childtrendsdatbank.org/70ViolentDeath.cfm
7. Annie E. Casey Foundation, *2006 KIDS COUNT Data Book*, page 38.
8. National Center for Injury Prevention and Control, *Teen Drivers Fact Sheet*. Retrieved June 2006: www.cdc.gov/ncipc.factsheets/teenmvh.htm.
9. National Center for Injury Prevention and Control, *Youth Violence Fact Sheet*. Retrieved June 2006: www.cdc.gov/ncipc.factsheets/yvfacts.htm.
10. Same as note 9; also, National Mental Health Association MHIC Fact Sheet, *Suicide: Teen Suicide*. Retrieved June 8, 2006: www.nmha.org/infoctr/factsheets/82.cfm.
11. See note 6.
12. The Alaska Injury Prevention Center is continuing to do “follow-back” research on suicides in Alaska from September 2003 to September 2006; the center hopes to find common patterns and other information that can be used to help prevent suicides.
13. Statewide Suicide Prevention Council, Annual Report to the Legislature, 2005. Retrieved June 8, 2006 from: www.hss.state.ak.us/suicideprevention.
14. See note 6.
15. Child Welfare Information Gateway, *Child Maltreatment 2004: Summary of Key Findings*, April 2006. Available online at: childwelfare.gov/pubs/factsheets/canstats.cfm.
16. These figures are for the federal fiscal year, which is from October 1 through September 30.
17. The 20,702 allegations of harm in 2005 is a total that may include allegations of harm to the same child in several categories of abuse or more than one allegation in the same category. OCS also keeps data that count each child only once in any single category but may count the same child in another category. When each of the 11,702 children who were the subject of one or more allegations of abuse are counted only once in each category, the number of total allegations in 2005 is 14,670. Approximately half these allegations were suspected neglect, about 20% suspected mental injury, 20% suspected physical abuse, and 10% were suspected sexual abuse.
18. Data Sources: AK DHSS, Office of Children’s Services. Report 253 and AFCARS foster care and NCANDS extracts for FFY’05.
19. National SAFE KIDS Campaign, *Childhood Injury Fact Sheet*. Washington, D.C., 2004.
20. Safe Kids Worldwide, *Trends in accidental injury-related deaths among children*. Retrieved June 27, 2006: www.usasafekids.org.
21. American Academy of Pediatrics, “The Prevention of Unintentional Injury Among American Indian and Alaska Native Children: A Subject Review,” in *Pediatrics*, Vol. 104, No. 6, December 1999, pages 1397-1399.
22. Centers for Disease Control and Prevention, *Morbidity and Mortality Weekly Report*, August 1, 2003, Volume 52, No. 30, pages 697-701.
23. Alaska Division of Public Health, *Alaska Injury Facts No. 2, “Children’s Injury Disparities in Alaska,”* May 2003.
24. Alaska Bureau of Vital Statistics, *Annual Report 2004*; see also the bureau’s Web site: www.hss.state.ak.us/dph/bvs.
25. See note 23.

Juvenile
Justice



Marti Rookala, Barrow



Marti Rookala teaches school in Barrow, at the northern tip of Alaska. She moved there years ago, after reading about Barrow and learning there was an opening for a teacher. She says now, "It was a good choice for me." She has an 8-year-old adopted daughter, Maia, who came to her through the foster-care system when she was 15 months old.

We talked with her in early 2006, and here, in her own words, is some of what she told us about being a foster parent.

Why did you become a foster parent?

I decided a long time ago that I wanted to be a foster parent. I had taken care of a niece long-term while I was in college, and I've also worked in the area of child development. I had no grand illusions, but I felt I could provide a safe, stable home.

It all happened very quickly. I had barely got the words out of my mouth when [Office of Children's Services] called and asked me to foster a child. I filled out the paperwork and they did a background check and a house inspection—and within a few weeks I had Maia.

How did life change when you became a foster parent?

My life became totally child-centered. I was okay with that, but there were days when I was exhausted, being a foster parent and a teacher. When you are a foster parent there are a lot of extra things you have to do—for instance, you have to document everything that happens.

My daughter was exposed to drugs and alcohol during her prenatal period and she has FASD (fetal alcohol syndrome disorder), which covers a myriad of things. In the beginning she had no control and would snap with temper. Now those episodes are fewer and farther between. She still gets upset by loud noises like fire alarms, fireworks, and jets at the airport.

When she was two she was diagnosed with ADHD (attention-deficit hyperactivity disorder) and the doctors wanted to put her on medication. But I didn't agree with all the evaluation. She does move around a lot and has a shorter attention span, but these things are improving with time. She is not on any medication, but there will probably be things she has to deal with for the rest of her life.

How did you decide to adopt your daughter?

Maia called me Mommy from the beginning. I told her to call me "Marti," but she would laugh and say Momma. I tell her now that somehow she knew from the beginning.

At first [OCS] told me it was just a temporary placement. But when Maia was two and a half her parents voluntarily relinquished their parental rights. Initially I didn't intend to adopt, because I didn't really want to be a single parent. But I fell in love. The adoption was completed when Maia was three. It was an open adoption with the state, but it also had to be approved by the traditional Native council in Barrow. Maia's birth mother is Alaska Native.

Living here it is easy to integrate Maia into the Inupiat culture. Maia still sees her birth mother, and she sees both her maternal and paternal grandparents and other relatives. She knows a lot of people love her.

What are some of the benefits of being a foster parent?

I tell Maia all the time that she is the best thing that ever happened to me. I can't imagine life without her.

What would you like people to know about being a foster parent?

It is not always easy dealing with the agencies, the birth parents, and the children themselves. But being part of something bigger than myself brings joy and focus to my life.

I would also tell people to be sure to find some respite care, because they will need it—even just an afternoon. It gives you the opportunity to pull back and get some perspective. Also, it is so important to have the support of people who are going through the same thing. I get together with other foster parents in the area. I don't know what I would do without that support system.

It is not always easy dealing with the agencies, the birth parents, and the children themselves. But being part of something bigger than myself brings joy and focus to my life.

Marti Rookala

BACKGROUND

This Juvenile Justice section first describes juvenile crime in Alaska and then talks about a program that may help reduce juvenile crime—Alaska’s youth court program. In future data books we’ll look at other promising approaches to reducing juvenile crime.

In youth courts (also called teen courts), teen-age volunteers take all or most of the courtroom roles and hand down sentences for teenagers who have committed non-violent crimes.

Nationwide, youth courts now handle about 10% of all first-time arrests of juveniles. As we’ll discuss later, a number of Alaska communities have youth courts, and in 2005 those courts handled an estimated 11% of all delinquency referrals in the state.

DEFINITION OF JUVENILE CRIME

The data for this indicator are from both federal and state sources. The state figures are delinquency referrals among Alaskans ages 10 to 17. When juveniles are arrested or have violated court orders, police agencies refer them to the Alaska Division of Juvenile Justice. These referrals are reasonable measures of juvenile crime, but keep in mind they’re not the same as proof of guilt.

The federal data are juvenile arrest statistics from the Federal Bureau of Investigation. Those federal figures allow us to compare trends in various kinds of juvenile crime in Alaska and nationwide.

The state and the federal figures show a consistent picture of juvenile crime—both show declines in recent years—but the two sources of data don’t entirely match.

SIGNIFICANCE OF JUVENILE CRIME

Juvenile crime nationwide was up sharply in the late 1980s and early 1990s and then began declining. In Alaska, juvenile crime has also been dropping for the past decade, as the figure at the top of the page shows. In the period from 2001 to 2005, an average of 51 per 1,000 Alaskans ages 10 to 17 committed crimes. That was down from 69 per 1,000 from 1993 through 1997. Total reports of juvenile crime—which include multiple crimes by the same person—have also fallen.

Experts aren’t sure why juvenile crime rose and then began falling, and in 1999 the National Center for Juvenile Justice issued a

report asserting that “No one has been able to predict juvenile violence trends accurately.”¹

But some analysts trace the nationwide increase in the late 1980s to the introduction of crack cocaine, the proliferation of guns, and the growth in gang membership. They believe the decline began when communities and police agencies developed better ways of dealing with gang violence and gun crime.²

Still, although juvenile crime is down from the highs of 15 years ago, author Richard Mendel has pointed out that “weak parental supervision, child abuse and neglect, school failure, substance abuse, neighborhood disorganization, youth gangs” and other factors that contribute to juvenile delinquency are still widespread. He believes that programs based on family and community involvement are in many cases much more effective than institutions in reducing juvenile crime.³

In Alaska, teenagers still commit more than a third of all property crimes—that is, all property crimes committed by adults and teenagers combined—and more than one in ten violent crimes. As the adjacent figure shows, Alaska’s teenagers in 2004 committed a larger share of all property crimes but a smaller share of all violent crimes than their counterparts nationwide.

DISPROPORTIONATE MINORITY CONTACT

A prominent issue across the country is what juvenile justice agencies call “disproportionate minority contact.” This means that at all stages of the juvenile justice system—from referrals to sentences to incarcerations—teenagers from minorities are over-represented, compared with their share of the total teenage population.

Studies have also shown that minority teenagers nationwide are more likely to be sent to detention facilities than are white teenagers charged with similar crimes.⁴ The federal Department of Justice is trying to reduce these disparities in juvenile justice.

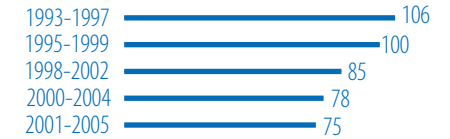
Among other things, the federal Juvenile Justice and Delinquency Prevention Act of 2002 requires states to assess their systems for dealing with juvenile crime and specifically to find ways of reducing disproportionate minority contact. States that don’t meet the requirements of the law can lose their federal juvenile justice grants, which are the main source of federal money for juvenile justice.⁵

Juvenile Crime in Alaska, 1993-1997 to 2001-2005 (Referral Rates per 1,000 Juveniles 10-17, 5-Year Averages)

Individual Juveniles Committing Crimes



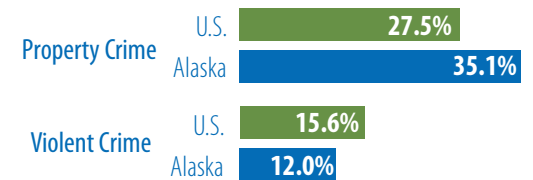
Total Reports of Juvenile Crime



Source: Alaska Department of Health and Social Services, Division of Juvenile Justice

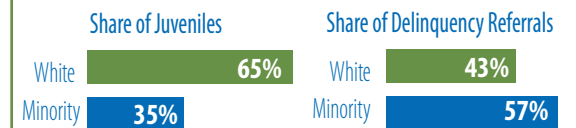
Percentages of Crime Juveniles Commit (2004)

(Combined Adult and Juvenile Crime)



Source: Federal Bureau of Investigation, Crime in the United States

Percentages of Alaska Juvenile Population (10-17) and of Delinquency Referrals, 2005



Sources: Alaska Department of Labor and Workforce Development, Research and Analysis Unit; Alaska Department of Health and Social Services, Division of Juvenile Justice

Like other states, Alaska also has over-representation of minorities in its juvenile justice system. In 2005, minorities made up 57% of those referred to the juvenile justice system, but only 35% of those ages 10 to 17.⁶ To find ways of reducing that over-representation, the Alaska Division of Juvenile Justice has designated Anchorage and Fairbanks as special pilot sites for closer study of disproportionate minority contact.

Juvenile Crime (continued)

**Juvenile (Ages 10-17) Delinquency Referrals^a by Region and Type of Crime
(Annual Average, Fiscal Years 2001-2005^b)**

Region	Crimes Against Persons		Crimes Against Property		Drug/Alcohol Laws		Other ^c		Total ^d	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Anchorage	459	17.3%	1365	51.5%	214	8.1%	613	23.1%	2651	100%
Mat-Su	96	17.4%	297	53.7%	62	11.3%	97	17.6%	553	100%
Gulf Coast	145	17.9%	387	47.8%	103	12.7%	174	21.5%	809	100%
Interior	170	22.0%	339	43.8%	114	14.7%	151	19.5%	774	100%
Northern	102	21.8%	247	52.8%	31	6.6%	87	18.6%	467	100%
Southeast	155	18.5%	384	45.8%	107	12.7%	192	22.9%	838	100%
Southwest	177	29.0%	316	51.7%	43	7.0%	75	12.3%	611	100%
Alaska	1305	19.5%	3339	49.8%	674	10.0%	1391	20.7%	6709	100%

^aThese are duplicate counts—meaning they include multiple referrals of the same juvenile; duplicated counts show the overall level of reported juvenile crime. Referrals include police reports and notices of probation violations. Juveniles charged with more than one type of crime in a single referral are included in only one category, with crimes against persons ranked first, property crimes second, drug and alcohol crimes third, and other crimes fourth.

^bThe state fiscal year is from July 1 through June 30.

^cIncludes probation violations, violations of public order and weapons laws, and miscellaneous other offenses.

^dAnnual average number of crimes.

Note: Percentages may total slightly more or less than 100 because of rounding.

Source: Alaska Department of Health and Social Services, Division of Juvenile Justice

It has also established an advisory committee to help with and monitor the division's efforts to reduce juvenile crime; expanded the alternatives to jail for minority teenagers who commit crimes; and increased referrals of minority teenagers to tribal and community courts.⁷

STATE CRIME DATA

Juvenile crime in Alaska has fallen steadily since the mid-1990s. Total reports of crime and the share of individual teenagers committing crimes both dropped more than 25% between 1993-1997 and 2001-2005, as shown in the figure on the previous page. Still, juveniles committed an average of more than 6,700 crimes annually in recent years.

Types of Juvenile Crime

The table above shows that crimes against property accounted for half of all juvenile crime statewide and in all regions. About 20% of juvenile crime statewide is against people, but that share varies from 29% in the Southwest to 17% in Anchorage.

Other kinds of crime—including violations of drug, alcohol, and weapons laws or violations of probations—account for the other 30% of juvenile crime.

Juveniles Committing Crimes, by Race

The tables on the facing page show—for the state and all its regions—the racial composition of Alaskans ages 10 to 19 and the racial composition of juveniles referred to the justice system.

Statewide, Asian and White teenagers are the least likely to be referred to the justice system—that is, they make up a larger share of the juvenile population than of referrals. That pattern also generally holds in most regions.

Asians make up nearly 4% of all Alaskans 10 to 19, but less than 3% of juveniles referred to the justice system. White teenagers account for about two-thirds of those 10 to 19, but only about half of referrals.

Alaska Native, Black, and Pacific Island teenagers are referred to the justice system at a higher rate than their share of the teenage population. Pacific Island teenagers make up less than 1% of Alaskans 10 to 19 but about 2% of referrals. Black teenagers make up less than 4% of those 10 to 19 but 6% of referrals. Alaska Natives make up about one-quarter of the teenage population but nearly a third of referrals.

Alaska Population, Ages 10-19, by Race and Region, 2003

Region	Alaska Native ^a	Black	White	NH/ Pacific Isl.	Asian	More Than Race
Anchorage	12.8%	6.5%	70.3%	1.5%	5.8%	3.2%
Mat-Su	12.4%	0.9%	84.4%	0.2%	0.7%	1.4%
Gulf Coast	15.6%	0.6%	77.5%	0.5%	4.3%	1.5%
Interior	19.5%	5.1%	71.1%	0.3%	1.7%	2.3%
Northern	89.8%	0.2%	7.9%	0.3%	1.1%	0.7%
Southeast	29.4%	0.6%	64.4%	0.3%	3.7%	1.7%
Southwest	87.2%	0.4%	10.2%	0.1%	1.2%	0.9%
Alaska	24.6%	3.6%	65.1%	0.8%	3.7%	2.2%

^a Includes all those who identified themselves in the 2000 U.S. census as Alaska Native or Alaska Native and some other race. Also includes American Indians, who make up 0.5% of Alaska's population.

^b Includes all those who identified themselves as being of more than one race, except those who are Alaska Native and some other race, who are included under "Alaska Native."

Source: Alaska Department of Labor and Workforce Development, Research and Analysis Unit

Total Juveniles (10-17) Referred To Juvenile Justice System, by Race and Region, Fiscal Years 2001 - 2005^a

Region	Alaska Native	Black	White	NH/ Pacific Isl.	Asian	More Than One Race	Other	Unknown
Anchorage	17.0%	11.7%	49.9%	4.5%	5.1%	8.2%	2.2%	1.4%
Mat-Su	8.0%	1.2%	84.0%	0.2%	0.5%	4.2%	0.4%	1.7%
Gulf Coast	12.0%	0.8%	73.7%	0.3%	3.7%	4.9%	0.7%	3.9%
Interior	30.8%	7.4%	57.1%	0.3%	0.3%	2.4%	0.4%	1.4%
Northern	89.0%	0.3%	2.3%	0.3%	0.2%	4.6%	0.1%	3.4%
Southeast	36.4%	1.3%	50.9%	1.0%	0.8%	5.4%	0.6%	3.6%
Southwest	91.2%	0.3%	5.0%	0.3%	0.1%	1.9%	0.2%	1.1%
Alaska	30.3%	6.0%	49.9%	2.1%	2.7%	5.7%	1.2%	2.1%

^aThis is an unduplicated count of all individual juveniles referred to Alaska's juvenile justice system from 2001 through 2005. Race is reported by the juvenile.

Source: Alaska Department of Health and Social Services, Division of Juvenile Justice

Juvenile Crime (continued)

FEDERAL CRIME DATA

The bar graphs on the left side of the adjacent figure compare arrest rates among those ages 10 to 17, in Alaska and nationwide, in 1994 and 2004. The pie on the right side details crime by type among Alaska teenagers in 2004.

These are federal data, and they don't directly compare with state data. The federal figures are for single years, while the state figures are averages over several years. The federal government also categorizes crime somewhat differently. For example, federal figures separate major property crimes from vandalism; the state has only a single category for all property crimes. Still, the two sources show a consistent picture of declining juvenile crime, nationwide and in Alaska.

In 1994, the total rate of juvenile crime was somewhat higher in Alaska than nationwide, because of the much higher rate of property crimes. By 2004, Alaska's overall rate was sharply below the national average—because the rate of property crime dropped by 60%.

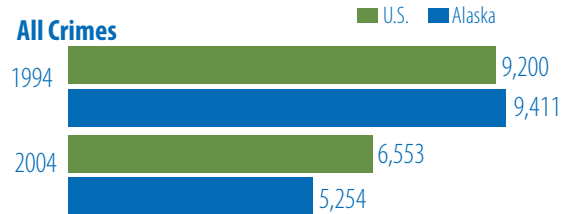
The figures show that the rate of major property crimes (like burglary and arson) dropped a lot in both Alaska and the U.S. as a whole in the past decade, but the decline in Alaska was larger.

The rate of violent crime by juveniles dropped nearly 50% in both Alaska and nationwide between 1994 and 2004. But the rate in Alaska has always been and remains below the national average—201 per 100,000 teenagers in Alaska, compared with the U.S. average of 271.

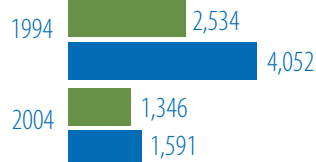
In one category juvenile crime increased in both Alaska and nationwide over the past decade: teenagers drinking and driving. And Alaska's rate is far above the national average. In Alaska, the rate of juveniles charged with driving under the influence of alcohol rose from

FBI Estimates of Juvenile Arrest Rate, U.S. and Alaska, 1994 and 2004

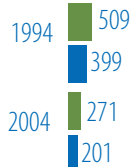
(Rate of Arrests Per 100,000 Juveniles 10-17*)



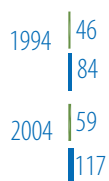
Major Property Crimes (Burglary, Theft, Arson)



Violent Crimes (Murder, Rape, Robbery, Aggravated Assault)

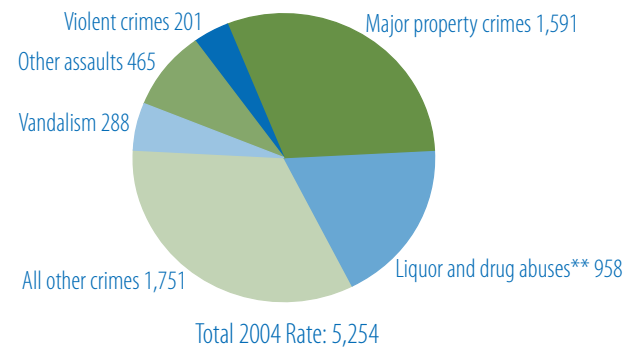


Driving Under the Influence



Breakdown of Alaska Juvenile Arrest Rate, 2004

(Rate of Arrests Per 100,000 Juveniles 10-17*)



*Includes multiple arrests of same juvenile.

**Includes driving under the influence of alcohol and violations of drug and alcohol laws.

Note: These federal figures on arrest rates differ somewhat from state juvenile referral reports and are for single years. We report state data in five-year averages; because the number of juveniles in Alaska is relatively small, figures are more subject to year-to-year variations. Crimes included in various categories also differ in state and federal figures.

Source: Office of Juvenile Justice and Delinquency Prevention, 2006. <http://ojjdp.ncjrs.org/ojstatabb/>

84 per 100,000 teenagers in 1994 to 117 by 2004. The U.S. average rose from 46 per 100,000 to 59.

The pie on the right side of the figure shows how much the various kinds of crime contributed to Alaska's total juvenile crime in 2004. The figures are based on the total number of crimes. That means they're higher than the rate of individual teenagers committing crimes, because some teenagers commit multiple crimes.

Overall, Alaska teenagers were arrested at the rate of 5,254 per 100,000 teenagers. Major property crimes were the most common, followed by abuses of drug and alcohol laws and assaults. Violent crimes accounted for about 4% of juvenile arrests, at a rate of 201 per 100,000.

Youth Courts

Youth courts—also called teen courts—have mushroomed around the country in the past decade, growing from an estimated 78 in 1994 to more than 1,100 in 2006.⁸ They are an alternative to standard juvenile justice systems and are staffed mainly by teenage volunteers trained and overseen by adults who are also mostly volunteers.

These courts offer teenagers who commit non-violent crimes a chance to be judged by other teenagers. Defendants in youth courts are almost entirely first-time offenders charged with vandalism, disorderly conduct, under-age drinking, or other widespread but relatively minor crimes.

As of early 2006, youth courts existed in all states except one (Connecticut), and 25 states had passed some laws dealing with youth courts. Courts in most states require defendants to admit they're guilty at the outset, and the youth courts then hear the facts and decide on sentences.⁹ (The biggest exception is Alaska, as we discuss below.)

Defendants are most often sentenced to do community service, write essays or apologies, make payments to victims, and attend classes. Going before youth courts is voluntary—and sentences of youth courts can't be enforced. But those who complete their sentences have their delinquency charges dismissed; those who don't have to go back to traditional juvenile justice systems.

Youth courts are paid for through a combination of state and local money, private donations, and federal funds from the Office of Juvenile Justice and Delinquency Prevention. The courts are most commonly operated by some branch of the traditional juvenile justice system (including courts, probation departments, and law-enforcement agencies); by private non-profit organizations; and by local governments or schools.

The American Youth Policy Forum estimates that on average youth courts nationwide deal with as many as 125,000 juveniles a year, or about 9% of the case load of traditional systems. Another 100,000 or so teenage volunteers take the parts of judges, attorneys, jurors, clerks, and other court officers.¹⁰

Why Have Youth Courts?

In 2005, youth court coordinators from around the country were asked to estimate how traditional government systems handle juvenile crime cases. As the figure shows, they estimated that about half of juvenile defendants go before criminal or family courts, while nearly 1 in 10 face no sanctions—because their offenses are minor and the courts are busy dealing with more serious cases.¹¹

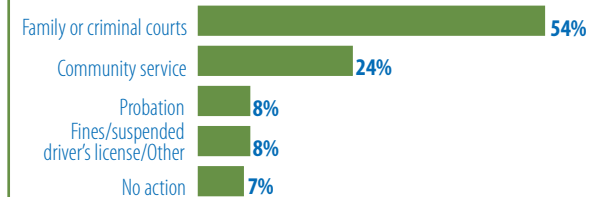
But advocates of youth courts say letting teenagers go unpunished for minor crimes gives them the wrong message and can lead to more crime. Specifically, these advocates cite several benefits of youth courts:

1. They make teenagers accountable for crimes that the overloaded traditional juvenile systems often don't give much attention to. The idea is that being held responsible from the beginning makes teenagers less likely to go on to more serious crimes.
2. They reduce the backlogs of traditional systems, are far less expensive, and settle cases much more quickly. The American Youth Policy Forum recently reported that the average cost per youth-court defendant nationwide was less than \$500 and that cases are typically heard within two to four weeks of the time a juvenile is charged.¹²
3. They offer families and communities more opportunities to deal with and help reduce juvenile crime.
4. They teach teenage volunteers about civic responsibilities and the legal system.

But some observers say it's hard to assess the actual effectiveness of youth courts—because many are so new and they haven't been studied much. In a 2002 article for *The Judges' Journal*, authors Jeffrey Butts and Janeen Buck of the Urban Institute wrote, "Youth referred to teen court are believed to have lower recidivism rates, an increased understanding of the law, and a greater respect for authority figures. Evidence for these claims is, however, largely anecdotal."¹³

And in a 2005 nationwide review of youth courts, the American Youth Policy Forum said, "As youth courts rely heavily on voluntary participation, keeping statistics is a secondary and generally difficult task to maintain."¹⁴

How Do Traditional Juvenile Justice Systems Handle Cases?*



*Assuming no youth courts. Estimates of 365 youth court coordinators nationwide.

Source: American Youth Policy Forum

Still, both the Urban Institute and the American Youth Policy Forum—and others—also say that youth courts are a promising way to reduce juvenile crime, and that more comprehensive research could demonstrate how well they actually work.

Youth Courts in Alaska

Alaska has among the most comprehensive laws governing youth courts, and the National Youth Court Center reports that Alaska is currently the only state that explicitly allows these courts to decide guilt or innocence as well as to issue sentences. (A few other states have less explicit language that may allow youth courts to decide guilt or innocence.)¹⁵

In 2006, the United Youth Courts of Alaska reported that at least 20 youth courts were operating in Alaska. Many but not all are members of the United Youth Courts, which is an umbrella organization providing various kinds of services to its members.¹⁶

The oldest and most prominent youth court in the state is the Anchorage Youth Court, established in 1989. In 2002 the Urban Institute recognized the Anchorage court as among the most successful in the country, with a low recidivism rate—at the time of the study, only 6% of those who had recently been sentenced in the Anchorage court committed additional crimes within the next 6 months.¹⁷

Youth Court (continued)

The Anchorage Youth Court reports that between 1996 and 2003 it adjudicated more than 3,000 cases, with an average time of 10 days between when a case was referred to the youth court and the time defendants appeared in court.¹⁸

Anchorage is also among the few youth courts nationwide that allow defendants to plead not guilty and go through a trial. Until recently, according to executive director Sharon Leon, the court had no written, fully developed trial program.¹⁹

But students and faculty from Northwestern University's School of Law worked with the Anchorage Youth Court to develop a trial manual. The Anchorage court expected to start using the manual by late 2006.²⁰

ENDNOTES FOR JUVENILE JUSTICE

1. *Juvenile Offenders and Victims: 1999 National Report*, National Center for Juvenile Justice, cited in Richard A. Mendel, *Less Hype, More Help: Reducing Juvenile Crime—What Works and What Doesn't*, American Youth Policy Forum, 2000.

2. See note 1, *Less Hype, More Help*, pages 32 and 33 and accompanying notes.

3. See note 1, *Less Hype, More Help*, especially Part III.

4. A number of such studies are cited in the 2005 Kids Count Ohio Data Book, including *Final Report of the Pennsylvania Supreme Court Committee on Racial and Gender Bias in the Justice System*, 2003, at National Institute of Corrections, www.cdfohio.org; Howard Snyder and Melissa Sickmund, *Juvenile Offenders and Victims: 2006 National Report*, Office of Juvenile Justice and Delinquency Prevention.

5. In fiscal year 2006, Alaska received about \$1.3 million in grants under the Juvenile Justice and Delinquency Prevention Act.

6. Alaska Division of Juvenile Justice, DMC FY05 Statewide Data (Reporting Period: July 2004 to June 2005). Available at www.hss.state.ak.us/DJJ.

7. For more details see the Division of Juvenile Justice's Web site (www.hss.state.ak.us/DJJ) and also *Report to the Governor and the Alaska Legislature*, submitted by the Alaska Juvenile Justice Advisory Committee, January 2006.

8. National Youth Court Database, as of October 2006. Accessed December 2006 at: www.youthcourt.net.

9. Michelle Howard, National Youth Court Center, *An Update on Teen Court Legislation*, April 2006. Available at: www.youthcourt.net.

10. Sarah Pearson and Sonia Jurich, American Youth Policy Forum, *Youth Court: A Community Solution for Embracing At-Risk Youth*. In partnership with National Youth Court Center; American Probation and Parole Association; Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, 2005.

11. See note 10.

12. See note 10.

13. Jeffrey Butts and Janeen Buck, "The Sudden Popularity of Teen Courts," in *The Judges' Journal*, Volume 41, No. 1, Winter 2002, published by the American Bar Association.

14. See note 10.

15. See note 9.

16. See www.alaskayouthcourt.org.

17. Jeffrey Butts, Janeen Buck, and Mark Coggeshall, *The Impact of Teen Courts on Young Offenders*, Urban Institute, April 2002.

18. See www.ayc.ak.org.

19. Personal communication with Sharon Leon.

20. See note 19.

Sally and Billy Teeluk, Kotlik



Sally and Billy Teeluk lived in Kotlik, in western Alaska, when we interviewed them in June 2006, but have since moved to Eek, in the Yukon-Kuskokwim Delta. Billy is a commercial fisherman and Sally is a school librarian. They have four biological children who are young adults and an adopted daughter who is 9. In the summer of 2006, they had two foster children ages 16 and 7. Their adopted daughter did not come to them through the foster-care system but through relatives.

For more than 20 years, at their own expense, the Teeluks took in children and adults who needed help. Only in the past few years have they been licensed foster parents. Here, in their own words, is some of what they told us about being foster parents.

Why did you become foster parents?

Billy Teeluk said: When I was a child my dad drank a lot and I took care of my brothers and sisters. Growing up I saw people who were afraid of people in their homes who were drinking. This was years and years ago, over 50 years, but since then I have always wanted to help people.

Sally Teeluk told us more: Our home was always open to people who ran away from their spouses or to children whose parents were drinking. They would stay a day, or two, or three, sometimes a week. We accepted all people, even strangers, and fed and cared for them.

Three years ago we got a call from [Office of Children's Services] saying they had an emergency situation with two children who needed a home. OCS did our background checks and finger printing,

and we got the children about three days after the phone call. They were brother and sister, ages 5 and 3. The boy is now 7 and still with us. His sister was with us for two years but OCS then sent her to Anchorage to be evaluated.

What was it like in the beginning?

The first children had FAS (fetal alcohol syndrome) problems and no one had explained this to us. I never drank during my pregnancies and my children were calm. I learned about FAS by going to training. I've been to five FAS training sessions in the past three years and that helped a whole lot. About 98% of the people in the village still don't realize the damage they can do if they drink while they're pregnant.

Also, there was a little bit of jealousy [among the biological children] in the beginning because of all the attention we had to give the foster children. But I explained the FAS training and then our kids pitched right in and helped.

What are some of the difficulties?

Sometimes I have worries. I still feel that way even after all the training I have had. It's very challenging. These kids [with FAS] never had a chance with their biological parents, and we try to teach them things they need to know. It takes them a while to learn because of the treatment they had in their homes, but we love them and they do learn.

What are some of the benefits?

Being better parents. Understanding FAS and children with FAS, because it is new to us. All the caring and the loving and the understanding has been a good thing. It feels good to help take care of these children and teach them.

We tell them stories about survival and teach them how to do things and take care of themselves. We go to church. We sing at home. We cook together. We all do subsistence together. We go whale hunting and seal hunting and bird hunting. We use spears to hunt the whales and seals. The kids watch us and they learn by watching.

What would you like people to know about being foster parents?

I wish there were more people who would help children with FAS and give them their time. There are children out there who really need the right loving and caring environment. I would like people to know that foster kids have feelings and desire to grow and be respected.

When I first went to school I was not allowed to talk in Yup'ik, and when we did the teachers would spank us and make us cry. They would put us in the office all day where we would have to stand holding books in our hands with our arms extended until we couldn't take it anymore and our arms fell down. The preacher would scold us whenever we made a mistake. The girls would cry, and we would all be frightened. Now I understand that not all people are like that. But I was afraid then —and some of these kids are afraid too of the things that happen to them. They need someone to help them and care for them.

Billy Teeluk

Kelly Doughty, North Pole



Kelly Doughty lives in North Pole, just outside Fairbanks, with her 5-year-old son, Talon. He came to her as a foster child when he was an infant, and she adopted him when he was 22 months old. Kelly is the grants administrator for C.A.R.E.S. Resource & Referral in Fairbanks, an organization that provides resources and training for parents, child-care providers, and others working with young children in Interior Alaska.

We talked with her in mid-2006, and here, in her own words, is some of what she told us about being a foster parent.

Why did you become a foster parent?

At age 40, after a long-term relationship ended, I found myself quickly and surprisingly single. But I wanted to be a mother, so I decided to try foster parenting. I attended a conference during national foster-parent month, and after that I put in my application. Within three or four months I had Talon.

How did your life and his change?

This is the only life Talon's ever had, since he came to me when he was about six weeks old. And I don't remember life without him. But to go from being 40 and single to having a baby with FAS (fetal alcohol syndrome), it was very quick. Talon is Alaska Native and I'm not. But by the time I adopted him [OCS] knew he could not go back to his village to be adopted, because he has to be where he can get the services he needs.

What are some of the difficulties?

Talon came to work with me at first. He only weighed six pounds, and I just essentially held him for a year. It was hard, because even when I touched him gently he didn't like it [because of sensory integration problems] and would arch his back. During the first year of his life he was sick all the time—a lot of respiratory problems and screaming fits. At over a year he weighed 10 pounds. At age 5 he's still a scrawny guy, only 35 pounds—but he's shot up into the 25th percentile for his age. And now he's a hugger and a kisser and is very warm with people.

He was in a special infant program until he was three and is now in a pre-school program through the school district. I wish the infant program went on past age three—it is very hard to put a three-year-old on a school bus every morning.

I also had another foster child—Talon's second cousin by birth—on and off for two years. She now lives with her birth mother, but I know that being with us made a difference in her life because she didn't have to move from family to family. Talon loved her from the beginning, and we still visit her. In a way, I still feel like I have two kids.

What are some of the benefits of being a foster parent?

Children. I have worked in the human service field for 25 years but I never had kids. Now I do. Everyone says Talon and I were made for each other.

What would you like other people to know about being a foster parent?

It is just as hard as they all say it is. But we all have more in ourselves than we think we do. We're just ordinary people who decide to do this. It is certainly the best thing I have ever done, and I can't imagine life without Talon.

He brings joy to everything and everyone. He brings joy to the cashier in the grocery store. He always says thank you and asks people how their day was. He is not perfect. He still has tantrums. But he's clever, funny, and smart. Think what he would have been like if he hadn't had FAS.

Do you think you'll take more foster children in the future?

Yes. Right now Talon needs to be an only child, but I'm keeping the option open. We have a lot of close family and friends, but he may want someone even closer.

He brings joy to everyone and everything. He is not perfect. He still has tantrums. But he's clever, funny, and smart. Think what he could have been like if he didn't have FAS.

Kelly Doughty