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ABSTRACT

This Kids Count report details statewide trends in the well-being of Vermont's children. The statistical portrait is based on 30 indicators of well-being: (1) population; (2) racial and ethnic diversity; (3) median family income; (4) working mothers; (5) single-parent families; (6) child poverty; (7) children receiving ANFC; (8) children receiving food stamps; (9) children eligible for food programs; (10) new families at risk; (11) poverty; (12) high school dropouts; (13) teens not working or in school; (14) educational attainment of adults; (15) prenatal care; (16) low birth weight babies; (17) infant mortality; (18) births to teens; (19) child deaths; (20) teen violent deaths; (21) child abuse and neglect; (22) domestic violence; (23) children in custody; (24) communities and youth; (25) index of schools; (26) sexual activity; (27) alcohol use; (28) tobacco use; (29) fighting; and (30) suicide plans. The report's first five chapters divide the data into the areas of: economic security; education; health; child protection; and a youth risk behavior survey. The report's final chapter provides county-by-county data including population, children and youth in custody, child abuse and neglect, child and youth health indicators, and economic indicator data. A major finding noted in the report is that poverty remains a critical children's issue in Vermont. (SD)

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# The State children



*Kids Count  
in Vermont*

CO

*The Vermont  
Children's Forum*

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**A report of Vermont KIDS COUNT,  
a project of The Vermont Children's Forum,  
funded by The Annie E. Casey Foundation.**

Vermont KIDS COUNT is a collaborative effort with Vermont's Agency of Human Services and Department of Education.

Additional copies of *The State of our Children: Kids Count in Vermont* are available for \$12 each from:  
Vermont KIDS COUNT, Vermont Children's Forum,  
P.O. Box 261, Montpelier, VT 05601  
802-229-6377.

*This book is dedicated to my late husband, David Goldberg, VCF's past Director.  
In memory of his deep concern, commitment, and hope for all children and youth.*

Carlen Finn  
Director of Research and Planning

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*The State of Our Children: Kids Count in Vermont,*  
The 1995-1996 Vermont KIDS COUNT Data Book,  
Vermont Children's Forum, December 1996.

## Erratum

*The State of Our Children; Kids Count in Vermont 1995-1996 Data Book*

\*\*\*\*\*

Note last paragraph on Page 15.

The fourth sentence from the bottom should read:

On average, *nearly two-thirds* of ANFC recipients are children.



# The State of Our Children

1995-1996  
Data Book



*Kids Count  
in Vermont*

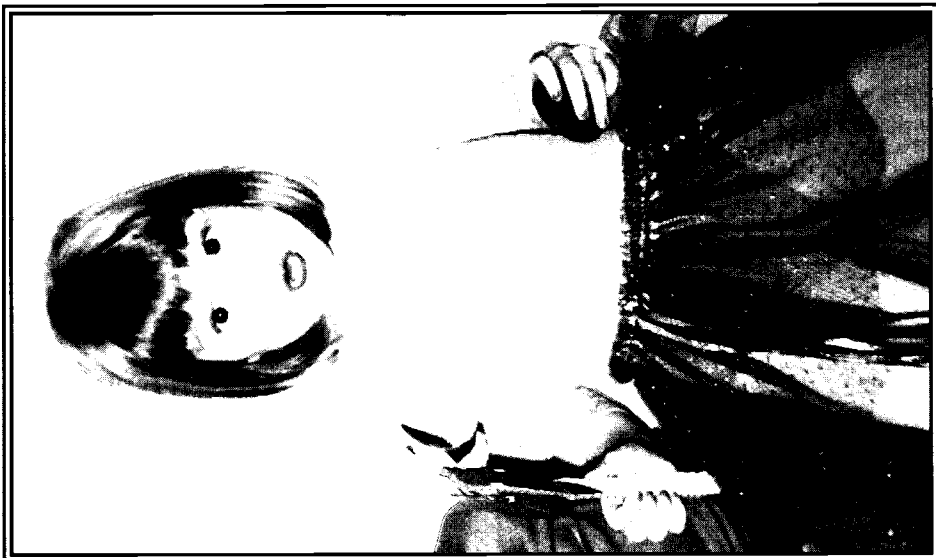


*Prepared by  
The Vermont  
Children's Forum*



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*Introduction*



# Introduction

## About Vermont KIDS COUNT

Vermont KIDS COUNT is an ongoing project of the Vermont Children's Forum to collect and analyze state data on child welfare. This is the third annual Vermont Kids Count Data Book, which examines child well-being data on the state, county and school district levels. It is funded by the Annie E. Casey Foundation, the nation's largest funding institution committed to support for disadvantaged children.

Vermont KIDS COUNT is a unique collaborative effort, involving the Vermont Agency of Human Services and the Vermont Department of Education. In addition, volunteer committees have guided the selection of the indicators and the design and distribution of the data book. KIDS COUNT volunteers include representatives of private, nonprofit, government and educational agencies, as well as business people and individuals.

## Goals of Vermont KIDS COUNT

The goals of Vermont KIDS COUNT include the creation of a KIDS COUNT database; publication of this annual report of social, economic, health and educational data; development of special reports and fact sheets, and regional workshops to increase public awareness of issues affecting child well-being; and participation in the Vermont Children's Forum's Annual Vermont Children's Campaign, which produces the *Children's Campaign Agenda*.

Local and state analysis is critical to identifying the well-being of Vermont's children and families, which may be overshadowed by national studies that rank the status of Vermont's children high compared with other states. *The State of Our Children* offers a more in-depth look at the needs of Vermont's children and families, through data reported on local and state levels.

## Kids and Vermont KIDS COUNT

Part of KIDS COUNT outreach includes working with children to get their perspectives and hear their voices. Thus, art work, photography and words throughout this book are theirs.

## Vermont KIDS COUNT: Future Plans

Future plans for KIDS COUNT include ongoing assistance, with statewide community outreach and planning, through the Vermont Children's Forum's Vermont Children's Campaign and by updating and adding to the KIDS COUNT Indicators database. Future plans also involve publication of special reports on children and youth in crisis, children and youth with disabilities, and other issues, as well as producing, for the 1997 Kids Count Data Book, a report featuring health issues. Comments about this report and suggestions for future data books are welcome.

### My New Best Friend

*I made a new best friend today,  
One that to me she will not betray.  
She's full of wonder and will not leave,  
Therefore my friendship she will receive.  
And when I'm down and feel quite upset,  
She's always there to give me care and respect.  
And when I reached out,  
To pull her a bit nearer,  
I realized my new best friend  
Was nothing but a mirror.*



## Introduction to the Indicators

Throughout this book, the term “indicators” describes data that help identify child and family well-being. KIDS COUNT does not conduct surveys or gather direct data. All indicators are collected from existing data from a number of sources, including the U.S. Bureau of the Census and Vermont state agencies.

KIDS COUNT facts are collected on a county or school district level.

## Understanding Kids Count Information

### Averaging Numbers

For the 1995-1996 Data Book, KIDS COUNT reviewed the trends of indicators during the 1980s and early 1990s. For many indicators, several years of data were averaged or aggregated (combined) to provide more reliable figures for data that may fluctuate greatly from year to year. Numbers for some of the indicators may refer to aggregation of data for a three-year period.



*To: Daddy  
Because: I love you*

Numbers that were averaged across years have been rounded off, while most rates have been carried out to one decimal place. Readers can refer to the tables or the Appendix for specific information, such as the years used for averaging and our methodology.

### Combining County Data

Small populations in some areas of the state provide us with two challenges. First is the issue of reliability. The number of children classified within some of our indicator categories is often too small to provide reliable information. Second is the issue of confidentiality. Providing information that shows a very small number of children with certain characteristics, can lead to their actual identification at the local level. Because Essex and Grand Isle have very small populations, Vermont KIDS COUNT has combined data from these counties with data from adjoining counties. State agency reports often combine Essex with Orleans and Grand Isle with Franklin for these same reasons, and we will follow their convention in this data book.

### A Caution About Drawing Conclusions

The key in the evaluation of statistics is to examine everything in context. The data challenges stereotypes, pushing us to look beyond the surface for the less obvious reasons for the numbers. Individual indicators, like the rest of life's concerns, don't exist in a vacuum and can't be reduced to a set of best and worst counties.

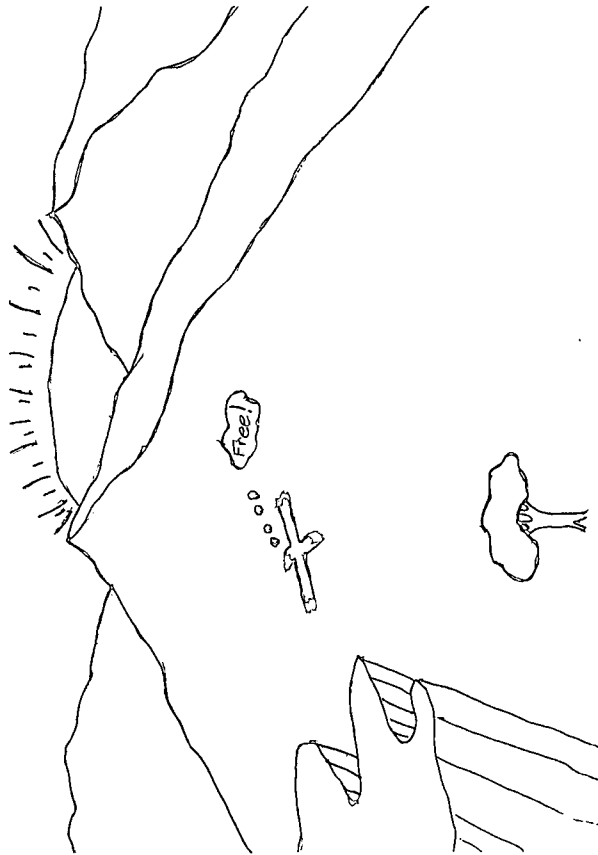
Where county level data are presented, readers can see whether rates are “high” or “low,” relative to the state rate, or in comparison with other county rates. However, while regional rates do provide a useful “snapshot” of conditions for a particular time-period, their reliability for inferring stable differences between one region and another is uncertain. For this report, the significance of any such differences was not subjected to statistical testing.



## Foreword

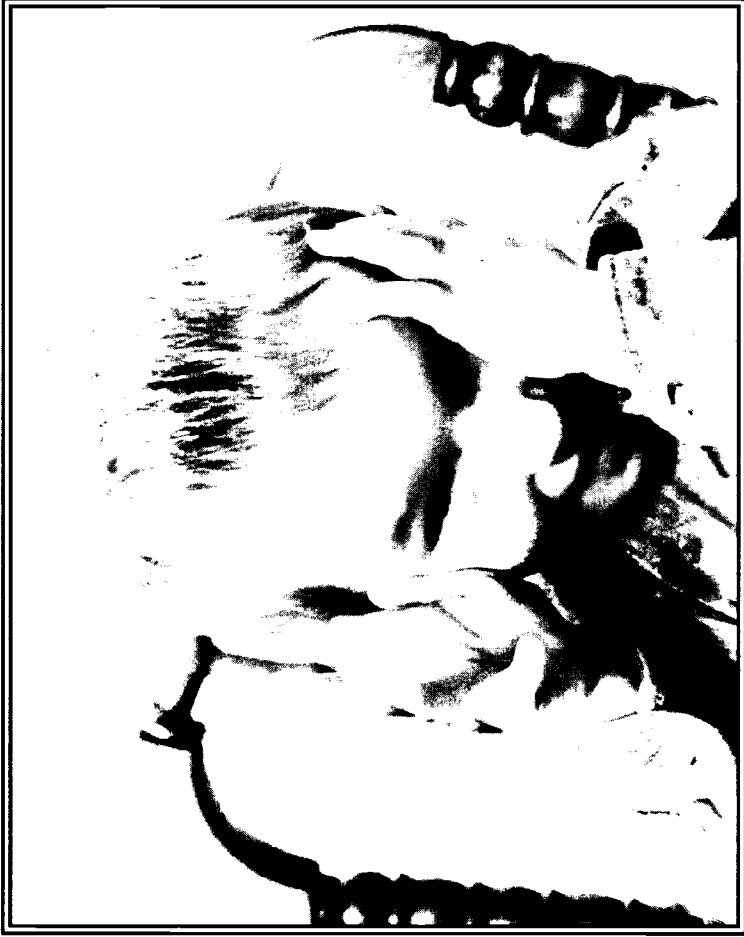
**The State of Our Children, Kids Count in Vermont 1995-1996 Data Book**, is the third annual fact book on the health and welfare of Vermont children and teens. This edition of the Data Book updates state-, county-, and school-level indicators of child and youth well-being, and includes relevant census data. Also, five new measures of teen well-being, from the 1995 Vermont Youth Risk Behavior Survey (YRBS), have been added to this year's edition. The Data Book is divided into four sections: 1) The Overview and Findings, which includes data and narrative by areas of concern: Economic Well-Being, Health, Child Protection, and Education; 2) indicators from the Vermont YRBS; 3) County-by-County pages which present snapshots of data by county and brief summaries of county partnerships; and 4) the Appendix, which encompasses data methodology, sources and acknowledgements.

Young people's voices are a part of Kids Count. Interspersed throughout the data book are the prose, poetry and drawings of Vermont children and youth, answering the question: How has someone made a difference in your life?



We can all make a difference in children's lives. The Vermont Children's Forum (VCF) is Vermont's only statewide, nonpartisan, nonprofit, research, education and advocacy organization that focuses on the full spectrum of child and family issues. Its mission is to promote public policy that enhances the lives of children in Vermont. Toward this end, VCF's Advocacy and KIDS Count Projects produce the *Children's Campaign Agenda* and the KIDS COUNT Data Book, respectively. Developed by VCF and an advisory board and directed by community members' concerns and recommendations, the *Agenda* guides VCF's advocacy efforts and serves as a community action resource. *The State of Our Children, Kids Count in Vermont*, is a source book on child and teen well-being. Both documents are useful tools for concerned community members, service providers and policymakers, alike. We urge you to incorporate VCF's data and research and the *Agenda's* vision and strategies in your work on behalf of children and youth. Together we can help advance Vermont, community and individual efforts to enhance the lives of all our children and youth.

The thing that made a difference in my life was a small little helpless bird that I couldn't leave there on the ground. I cleaned it up and brought it to the vet and they put a bandage on his wing. After a few weeks the bird's wing healed and I let him go in the wild. Now I like taking care of the environment so my kids can enjoy the animals and the wild life.



*Constitution and Judiciary*



# Overview

**Poverty is a critical children's issue.** The 1994 KIDS COUNT Data Book focused on childhood poverty, outlining its associated poor outcomes for our children. This information bears repeating, not only because of the long-term and devastating effects of poverty on our children and communities, but because of the unprecedented attacks on basic safety net programs for low income children and families in 1996. The passage of the *Personal Responsibility and Work Opportunity Reconciliation Act*, known as "Welfare Reform," in 1996, fundamentally changed the federal commitment to providing income support and basic needs assistance to all families in need. In Vermont, this federal law will affect: Supplemental Security Income for children with disabilities; housing programs; child care programs; child support; and nutrition programs, such as the Child Care Food Program, the Summer Food Service program and start-up funding for the School Breakfast Program. Thus, not only does Vermont continue to face unparalleled numbers of children living in poverty, but also dramatic reductions in federal programs that are designed to assist low income and impoverished families with children.

**The number of poor children has risen dramatically in Vermont.** Our poverty rate for children is higher than for any other age group, as is the case nationally. In some Vermont counties, the child poverty rate is higher than the national child poverty rate of 21.2 percent. **Child poverty is the most critical measure of overall child well-being.** From the health of infants and children, to school success and early childbearing, poverty plays a critical role in nearly every measure of child well-being in the data book. As you read through the data in each section of this report, ask the question - how does poverty affect this measure of child well-being?

**A healthy start in life and the ongoing health of children is compromised by poverty.** Poverty or very low income is one of a number of social risk factors that negatively influences birth weight. Poor children are more likely to experience poor health, including the effects of hunger and undernutrition, chronic conditions such as asthma, and developmental delays. Poor kids are at higher risk of serious injury and death. Too early childbearing is more likely to occur among poor teenaged girls -- the age group least likely to receive early prenatal care, and more apt to raise their young children in poverty.

**Young people in Vermont face increasing challenges.** Youth are facing pressures to use alcohol and drugs, smoke cigarettes, and have sex at earlier ages. Cigarette smoking, alcohol use and sexual activity have all increased among Vermont teens, and particularly among younger adolescents. Young people need family, school, community and government supports to help them avoid risky behaviors and to learn how to develop healthy, positive lives.

**Vermont is a state that has historically dedicated resources to improving the lives of children.** The statistics in this Data Book really tell two stories: First, for most children, Vermont is a wonderful place in which to grow. Yet there are also children and teens whose well-being is undermined by such problems as poverty, health concerns, abuse or neglect, educational failure, and early childbearing.

*We believe all families must have adequate food, clothing, shelter, love, respect, access to quality mental and physical health care and child care, protection from injury or harm, and opportunities to grow and develop. In addition, children and youth must have safe, supportive places to learn and play; positive caring parents and other adult role models that promote self-esteem; and access to quality education. We believe that the responsibility of assuring that these needs are met is shared among Vermont's families, communities, business and government.*

This vision statement is from the *Children's Campaign Agenda*, VCF's legislative advocacy guide and a community action resource. It outlines what all kids need to support them as they grow, regardless of their economic condition or family situation. Together with community partnership summaries and the insightful voices of kids found in the Kids Count Data Book, the *Children's Campaign Agenda* highlights some of the ways we can work, individually, as communities, and as a state, to ensure Vermont becomes a place where all kids thrive.

*The test of our progress is not whether we add to the abundance of those who have much. It is whether we provide enough to those who have little.*

Franklin Delano Roosevelt



# Findings

## Economic Well-Being

### Child and Youth Population

Children and youth make up a little more than a quarter of the population in Vermont. In this report, children are defined as residents 17 years old and younger. The ethnic and racial diversity of Vermont's child and youth population increased more than 40 percent since 1980, yet in terms of total population, the proportion of minority children rose only slightly, from 1.8 percent to 2.6 percent.

Child Poverty and Child Population tables reveal two important trends. First, while the child population figures declined by nearly 12 percent between 1980 and 1994, both the number and rate of children living in poverty has increased in the 1990s.



Table 1

### Child and Youth Population Number and percentage of total population

County	1980 <sup>1</sup>		1990 <sup>1</sup>		1994 <sup>1</sup>		Percent change in rate
	Number	Rate	Number	Rate	Number	Rate	
Addison	8616	29.3	8601	26.1	8652	24.9	-14.9
Bennington	9330	28.0	8993	25.1	8985	24.8	-11.2
Caledonia	7585	29.4	7680	27.6	7745	27.1	-7.8
Chittenden	31,792	27.5	30,816	23.4	32,264	23.2	-15.5
Essex/Orleans	9267	31.1	8532	28.0	8432	26.8	-13.9
Franklin/Grand Isle	12,638	32.1	13,191	29.1	13,517	28.2	-12.1
Lamoille	4830	28.8	5072	25.7	5275	25.0	-13.1
Orange	6845	30.1	7242	27.7	7369	27.7	-7.9
Rutland	15,825	27.1	14,993	24.1	15,098	24.2	-10.9
Washington	14,642	27.9	13,940	25.4	14,001	24.9	-10.8
Windham	10,055	27.2	10,630	25.6	10,680	25.2	-7.3
Windsor	13,893	27.2	13,393	24.8	13,544	25.1	-7.8
Vermont	145,318	28.4	143,083	25.4	145,562	25.1	-11.7

<sup>1</sup>Single year Rate = number of children and youth under 18 per 100 of the total population



Table 2

## Racial and Ethnic Diversity of Vermont Children

*Ages 0-17 Population*

County	1980 White	1990 White	1980 African American	1990 African American	1980 Hispanic	1990 Hispanic	1980 American Indian, Eskimo or Aleut	1990 American Indian, Eskimo or Aleut	1980 Asian or Pacific Islander	1990 Asian or Pacific Islander	1980 Other race	1990 Other race	1980 Total	1990 Total
Addison	8,564	8,479	9	30	49	50	7	35	17	50	19	7	8,616	8,601
Bennington	9,239	8,872	21	39	52	71	13	15	34	57	23	10	9,330	8,993
Caledonia	7,549	7,585	11	27	38	27	2	33	10	25	13	10	7,585	7,680
Chittenden	31,236	29,982	159	262	250	317	44	65	224	408	129	99	31,792	30,816
Essex/Orleans	9,215	8,441	0	25	37	63	7	15	11	34	34	17	9,267	8,532
Franklin/G.I.	12,375	12,874	19	29	37	49	191	219	16	51	37	18	12,638	13,191
Lamoille	4,793	5,015	7	12	30	22	7	17	6	21	17	7	4,830	5,072
Orange	6,788	7,149	18	23	40	31	5	21	21	31	13	18	6,845	7,242
Rutland	15,696	14,818	23	56	98	96	12	17	41	65	53	37	15,825	14,993
Washington	14,518	13,713	24	83	219	174	12	34	45	86	43	24	14,642	13,940
Windham	9,951	10,434	24	60	77	114	12	23	20	83	48	30	10,055	10,630
Windsor	13,751	13,135	44	44	57	89	26	48	41	127	31	39	13,893	13,393
Vermont	143,675	140,497	359	690	984	1,103	338	542	486	1,038	460	316	145,318	143,083

Thanks  
to my  
friend



When I moved to Vermont, I didn't have anyone to play with. My friend invited me over. He introduced me to other people. I have always wanted to make new friends. Now I have a lot of friends to play with.

## Family Data

Family data are important in evaluating the changing economic status of Vermont's families. Most single-parent families are headed by women, and as other data indicate, by the 1990s, the vast majority of mothers in both single- and two-parent families were working in the paid labor force.

## Median Family Income

Median income represents the dollar amount above which half of Vermont's families earn more, and below which half earn less. Median family income increased by 18.2 percent in ten years. However, during the same period, Vermonters experienced a 65.8 percent increase in the cost of living. Thus, the average value of family income decreased overall by 47.6 percent during this period.

According to the Vermont Agency of Human Services, median income for Vermonters declined in constant dollars (1995 dollars) between 1989 and 1995. In 1989, the median income was \$36,051 (in 1995 dollars) compared to Vermont's 1995 median household income of \$34,468 (in 1995 dollars).<sup>1</sup>

*\* Average of three years: 1989 is the average of 1987, 1988, and 1989 figures; 1995 is the average of 1993, 1994 and 1995 figures.*

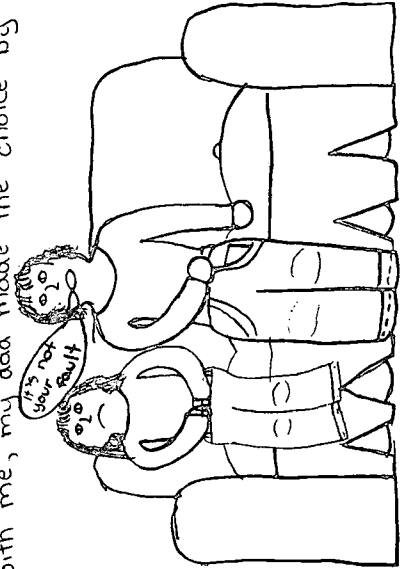
A person who made a difference in my life is my mom. See, my mom and dad got seperated when I was about six or seven. I used to think that it was my fault or that my dad went away because he didn't love me and the rest of my family anymore and he wanted a new family to love. I thought I wasn't important enough to be his daughter.

Then one day my mom and I sat down and had a talk. She told me that it wasn't my fault and I was a very special and loveable little girl. She told me that my dad left because he wasn't ready to stick with one family and that was because of him, not me.

Table 3

Median Family Income Constant 1989 dollars			
County	1979†	1989†	Percent change in income
Addison	28,297	34,561	22.1
Bennington	28,868	33,513	16.1
Caledonia	26,074	29,877	14.6
Chittenden	35,830	43,972	22.7
Essex/Orleans	24,508	26,283	7.2
Franklin/G.I.	27,562	32,951	19.6
Lamoille	26,960	31,772	17.8
Orange	24,846	31,066	25.0
Rutland	29,193	32,743	12.2
Washington	29,080	35,396	21.7
Windham	28,259	32,593	15.3
Windsor	30,435	34,691	14.0
Vermont	29,421	34,780	18.2
†Single year			

Now I'm thirteen and I know that it had nothing to do with me, my dad made the choice by himself.



## Working Mothers

Since 1980, a major societal change has occurred at the work place and home. In every county of Vermont, the majority of children now have mothers who work. In 1980, 48.1 percent of all mothers whose youngest children were under age six were in the paid labor force. In 1990, two-thirds of these mothers had jobs in the paid labor force, exceeding national figures.

The percentage of working mothers whose youngest children are age six to seventeen is even higher. 82.2 percent of these mothers work outside the home.

Table 4

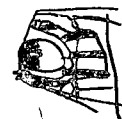
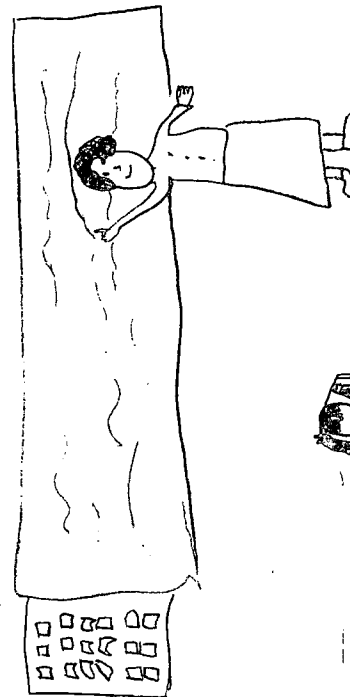
County	1980†		1990†		Percent change in numbers
	Number	Percent	Number	Percent	
Addison	828	48.1	1,358	67.5	64.0
Bennington	1,013	54.0	1,455	65.7	43.6
Caledonia	766	46.3	1,008	59.2	31.6
Chittenden	3,290	49.9	5,322	66.0	61.8
Essex/Orleans	850	44.1	1,066	62.0	40.1
Franklin/G.I.	1,026	37.9	1,893	62.1	63.9
Lamoille	590	54.3	785	65.6	33.1
Orange	678	46.2	1,164	67.6	71.7
Rutland	1,569	48.4	2,411	63.6	53.7
Washington	1,462	51.6	2,218	70.1	51.7
Windham	1,064	47.8	1,594	66.5	49.8
Windsor	1,333	48.3	2,299	72.0	72.5
Vermont	14,469	48.1	22,573	66.0	56.0
'Single year					

Table 5

## Women in the Labor Force with Youngest Child Ages 6-17

County	1980†		1990†		Percent change in numbers
	Number	Percent	Number	Percent	
Addison	1,396	62.7	1,851	82.0	32.6
Bennington	1,895	75.6	1,936	83.6	2.2
Caledonia	1,259	66.4	1,759	82.6	39.7
Chittenden	5,800	65.5	6,883	82.7	18.7
Essex/Orleans	1,414	60.8	1,874	79.3	30.4
Franklin/G.I.	1,865	61.4	2,626	77.3	24.9
Lamoille	800	68.7	1,083	82.2	35.4
Orange	1,168	69.4	1,574	83.3	34.8
Rutland	3,041	69.1	3,351	81.5	10.2
Washington	3,010	72.6	3,433	84.2	14.1
Windham	1,929	71.2	2,340	82.1	21.3
Windsor	2,669	68.5	3,149	84.9	18.0
Vermont	26,246	67.6	31,859	82.2	21.4
'Single year					

Mrs B, she helps if you are stuck and teaches you simply about hard things so I understand.







### Data Reveals That Vermont Children's Economic Well-Being is Declining.

Tables seven through eleven provide data on the economic well-being of Vermont children. The column with + 's or - 's indicates whether the economic condition of children has improved or worsened during the time period reflected by the percent change in rate. It does not measure access to a program. For example, data in table 10 show an increase in the rate of children eligible for free and reduced-price lunches from 1989-1994. As an economic indicator, this illustrates a worsening of children's economic well-being, represented by the minus sign.

*In 1993, child poverty in the United States climbed to its highest level in 30 years. Child poverty also rose steadily in Vermont during the 1990s, reaching a high of 16.1 percent in 1993, as well.*

### Child Poverty

In 1994, both Vermont and the nation experienced a modest decline in child poverty, yet the overall Vermont rate had increased by 22 percent since 1989. In a state with a population of 145,562 children, nearly 23,000 are classified as poor, and many more families and their children hover near the poverty level. This is illustrated by: 1) the growing rate of children eligible for free and reduced-price lunches, and 2) the 47.5 percent increase in the rate of children receiving Food Stamp Benefits since 1990.

The immediate and long term consequences of growing up poor are devastating for our children and communities. These children are more likely to be hungry and undernourished, live in substandard housing, fall behind in school or drop out of high school, commit delinquent acts, become teen mothers, and experience higher rates of illness and death. At the same time, federal funding cuts of basic safety net services for children — the first line of defense against poverty — has seriously eroded

Table 7

County	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate		
	Addison	1019	11.7	1230		
Bennington	1467	16.3	1607	17.9	10.5	-
Caledonia	1329	17.3	1556	20.1	16.2	-
Chittenden	2926	9.4	3705	11.8	25.2	-
Essex/Orleans	1633	19.0	1891	22.2	16.8	-
Franklin/Grand Isle	1847	13.9	2180	16.2	16.3	-
Lamoille	796	15.5	1002	19.3	24.2	-
Orange	1013	14.0	1296	17.7	25.9	-
Rutland	1966	13.0	2525	16.9	30.1	-
Washington	1675	11.9	2104	15.0	26.3	-
Windham	1513	14.2	1802	16.9	18.8	-
Windsor	1607	12.0	2075	15.4	28.3	-
Vermont	18,793	13.0	22,973	15.9	22.0	-

<sup>1</sup> Average of 1989-1991(1990)

<sup>2</sup> Average of 1992-1994 (1993)

Rate = Number of children living in poverty per 100 children under 18

\*Compares change in rates between 1990 and 1993.

major child welfare programs, thus undermining Vermont's supports to poor children and youth. In addition, Vermont's early childhood prevention and early intervention programs are at risk for funding cuts or elimination. *Adolescent prevention and early intervention services have already experienced either significant cuts to funding or program elimination.*

***Child poverty rates in the U.S. are two-to-nine times as high as those in other major industrialized nations.***

**Aid to Needy Families with Children (ANFC)**  
*is a children's economic support program.*  
*Approximately two-thirds of all ANFC recipients*  
*in Vermont are children.*

**Aid to Needy Families with Children**

Aid to Needy Families with Children (ANFC), is Vermont's income support program for families with children. ANFC monthly benefits are based on family size and income. In 1994, the full benefit for a family of three was \$635, which met 55% of the need standard — a standard similar to the poverty guideline — set by the Vermont Department of Social Welfare. Both state and federal dollars fund the ANFC program. Individual states are given some flexibility in calculating what standard is used to determine need, and what percent of need will be met by ANFC benefits.

Consistent with the increase seen in the child poverty data, the number and rate of children receiving ANFC benefits has increased by nearly 32 percent between 1990 and 1994 (see table 8). The average monthly ANFC benefit, in 1994, was \$545, and about 27,000 Vermonters were eligible to receive ANFC assistance. On average, nearly one-third of ANFC recipients are children. Yet in 1996, despite the fact that these children and their families were already living below the poverty threshold, the Vermont Legislature cut ANFC benefits by three percent.

*There is only one person who I know helped to form my life since birth. She special person is my grandfather. He always helped care for me, understood all my good and bad days. My grandfather helped me with my homework, took me fishing, attended all my games and was a great help when I had a school project to complete. My grandfather died suddenly a few months ago and I miss him more than I can ever explain to anyone.*

Table 8

**ANFC Benefits**  
*Children under 18 receiving Aid to Needy Families with Children*

County	1990 <sup>1</sup>		1994 <sup>1</sup>		Percent change in rate	Improved (+) Worsened (-) <sup>2</sup>
	Number	Rate	Number	Rate		
Addison	593	6.9	827	9.6	38.5	-
Bennington	1068	11.8	1230	13.7	16.0	-
Caledonia	905	11.8	1153	14.9	26.2	-
Chittenden	2661	8.6	3724	11.5	34.2	-
Essex/Orleans	1137	13.3	1358	16.1	21.1	-
Franklin/Grand Isle	1434	10.8	1728	12.8	18.4	-
Lamoille	451	8.9	621	11.8	32.3	-
Orange	607	8.4	868	11.8	40.2	-
Rutland	1559	10.4	2248	14.9	43.2	-
Washington	1255	9.0	1740	12.4	38.1	-
Windham	1188	11.1	1487	13.9	25.4	-
Windsor	1142	8.5	1830	13.5	59.0	-
Vermont	14,110	9.8	18,814	12.9	31.9	-

<sup>1</sup>Single Year Rate = number of children receiving benefits per 100 children under 18  
<sup>2</sup>Compares change in rates between 1990 and 1994.

**Less than 3 percent of Vermont's State Budget is spent on ANFC Benefits.**



## Food Stamp Benefits

Despite the modest decrease in the numbers of children receiving Food Stamp Benefits\*\* in 1994, overall, the rate of children receiving benefits has increased nearly 48 percent in four years. In Vermont, almost 43 percent of Food Stamp recipients are children.

The amount of children who are hungry or at risk for hunger in Vermont is alarming. Food Stamp data provide another snapshot of the number of children living near or below poverty in Vermont. And along with school lunch data, the numbers also serve as a reminder of a serious outcome of poverty - childhood hunger. The Washington D.C.- based Food Research and Action Center estimates that 21,000 Vermont children under 12 are hungry or at risk of hunger. According to the Vermont Office of Economic Opportunity, an average of 7,918 Vermont children were fed by Emergency food shelves per month in 1995 and nearly half of the estimated two million meals being provided annually at emergency food sites are going to children.

\*\* Households with gross incomes below 130 percent of poverty and net incomes below 100 percent of poverty, are eligible to receive Food Stamp benefits. Food Stamps are funded completely by federal dollars; the state funds a portion of the program's administrative costs.

**Food Stamps are the principal source of nutrition assistance for low income families.**

Table 9

## Food Stamp Benefits Children under 18 receiving Food Stamp Benefits

County	1990'		1994'		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate		
Addison	812	9.4	1342	15.5	65.0	-
Bennington	1284	14.2	1662	18.5	30.3	-
Caledonia	1197	15.5	1724	22.3	43.6	-
Chittenden	2748	8.9	4292	13.3	49.5	-
Essex/Orleans	1586	18.6	2270	26.9	44.7	-
Franklin/Grand Isle	1811	13.7	2603	19.3	40.6	-
Lamoille	625	12.3	967	18.3	49.0	-
Orange	815	11.2	1366	18.5	65.5	-
Rutland	1871	12.4	3009	19.9	60.7	-
Washington	1542	11.0	2285	16.3	48.4	-
Windham	1441	13.5	1924	18.0	33.4	-
Windsor	1376	10.3	2327	17.2	66.8	-
Vermont	17,232	12.0	25,771	17.7	47.5	-

\*Single Year Rate = number of children receiving Food Stamp Benefits per 100 children. \*Compares change in rates between 1990 and 1994.

There is one teacher that helped me with all my subjects. She encouraged me and made me feel good about what I wrote and what I thought. For this, I will always admire her for giving me the self-confidence I have now, and I will always have that.

## School Lunch Program

The school lunch program is a national child anti-hunger program, which provides food at no- or low-cost to low-income children who are at risk for hunger and poor nutrition. Research has shown that low-income children rely on school lunches for one-third to one-half of their nutritional intake. This national program is open to all public and nonprofit private schools and residential child care facilities. KIDS COUNT provides only public school data. In the 1995-1996 school year, over 5,000 students did not have access to school lunches, because 40 Vermont schools still did not offer the program. Local costs for school meals are minimal, about five cents per meal to augment the federal contribution.

Table 10 shows the dramatic increase in the number and rate of children eligible for the school lunch program between 1989 and 1995. This is another indicator of the increasing numbers of Vermont families experiencing economic stresses in the 1990s. During the 1994-1995 school year, 21 percent of school age children enrolled in schools with the school lunch program were eligible to receive them for no cost. To be eligible for the school lunch program, a student's household income must meet specific guidelines. For no-cost lunches, a student's household income must be below 130 percent of the poverty threshold, and for low-cost lunches, income must be between 130 and 185 percent of poverty.

***Inadequate nutrition is a major cause of impaired cognitive development, and is associated with increased educational failure among impoverished children.<sup>3</sup>***

Table 10

County	1989 <sup>1</sup>		1994 <sup>1</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate		
Addison	637	14.5	1165	25.5	75.9	-
Bennington	862	16.3	1177	23.5	44.2	-
Caledonia	1124	27.5	1942	35.3	28.4	-
Chittenden	2340	12.2	4046	19.1	56.6	-
Essex/Orleans	1719	34.4	2525	43.4	26.2	-
Franklin/Grand Isle	1957	21.7	2792	29.8	37.3	-
Lamoille	670	19.9	1090	29.3	47.2	-
Orange	1021	22.6	1606	31.7	40.3	-
Rutland	1636	18.1	2662	27.0	49.2	-
Washington	1610	17.4	2104	22.4	28.7	-
Windham	831	23.5	1465	26.0	10.6	-
Windsor	1432	16.7	2131	23.1	38.3	-
Vermont	15,839	18.6	24,707	26.2	40.9	-

<sup>1</sup> Single year

<sup>1</sup> Average of 1993-1995 (1994)  
Rate = Number of students approved for school lunches per 100 enrolled students

\*Compares change in rates between 1989 and 1994.

My teachers Mrs. J. McC and M.C  
have changed my life because  
there giving an education.

Before 3  
+ 3  
= 6  
After teachers \* 3  
= 9

## New Families at Risk

Similar to trends of rising rates of single teen moms and child poverty in Vermont, the rate of New Families At Risk has risen by over 16 percent between 1982 and 1994. **First births to teen mothers who have not completed high school defines New Families at Risk. Individually, each of the three elements — teen childbearing, single motherhood, no high school diploma — increases the likelihood of living in poverty.** Combined, these factors identify the single largest group at risk of long-term poverty.

A single teen mother faces significant barriers to moving out of poverty. She is at high risk for dropping out of high school. Without a high school diploma, her earnings are more likely to be substantially lower than a graduate's. Single teen parents face a future of chronic unemployment and underemployment, with teen mothers more likely to receive welfare benefits for long periods of time. At the same time, single teen mothers often do not receive adequate financial assistance from the fathers of their children.

**Children of teen mothers are also at substantial risk for poor outcomes.** A child born to a single teen mother who has dropped out of school is 10 times as likely to be poor as a child born to a mother with none of these characteristics.<sup>4</sup> Children of teens are at high risk for health and developmental problems, abuse and neglect, academic failure and behavior problems, dropping out of school, and becoming teen mothers. Research points to four underlying factors that predict early childbearing in the U.S.: poverty; early school failure; early behavior problems including substance abuse and participating in delinquent activities; and serious family problems.

Table 11

## New Families at Risk

*First births to single teens who have not completed high school*

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
Addison	11	5.5	13	6.4	13	7.3	32.7	-
Bennington	16	7.5	20	9.5	15	9.1	21.3	-
Caledonia	13	8.6	15	10.6	9	7.2	-16.3	+
Chittenden	45	5.2	45	5.3	46	5.7	9.6	-
Essex/Orleans	12	6.7	16	10.5	16	10.3	53.7	-
Franklin/Grand Isle	27	9.2	21	7.3	33	11.3	22.8	-
Lamoille	9	6.8	10	8.4	10	8.3	22.1	-
Orange	9	6.0	9	6.2	12	9.0	50.0	-
Rutland	29	7.9	16	4.9	21	7.9	0.0	same
Washington	25	7.1	17	5.7	14	5.2	-26.8	+
Windham	17	6.6	19	7.9	23	10.8	63.6	-
Windsor	22	6.6	20	7.1	17	7.8	18.2	-
Vermont	236	6.7	222	6.8	230	7.8	16.4	-

1. Average 1982-1984 (1983) 2. Average 1987-1989 (1988) 3. Average 1992-1994 (1993)

Rate = number of first births to single teens who have not completed high school per 100 first births.

\*Compares change in rates between 1983 and 1993.

**85 percent of all single teen births occur to poor or near-poor teens (teens whose families have incomes below 200 percent of poverty).<sup>5</sup>**

### Footnotes

1. Vermont Agency of Human Services, Planning Division. *The Social Health Status of Vermonters, 1996.* Vermont, 1996.
2. Governor's Commission on Women. *Poverty and Labor Force Statistics for Women, Preliminary Findings.* Montpelier, VT, 1993.
3. Tufts University, School of Nutrition, Center on Hunger Poverty and Nutrition Policy. *Statement on the Link Between Nutrition and Cognitive Development in Children.* MA 1994.
4. Annie E. Casey Foundation, *State Profiles of Child Well-Being, KIDS COUNT Data Book 1996,* Baltimore, MD 1996.
5. Alan Guttmacher Institute. *Sex and American's Teenagers.* New York, 1994.

## Defining Poverty

Poverty is generally understood to mean that a family's income is not enough to cover basic living costs and needs.

In 1964, the federal poverty guideline was introduced. The guideline was based on a 1950s survey that found that families spent approximately one-third of their income on food. The poverty threshold was first determined by multiplying three times the cost of the Department of Agriculture's economy food plan. The poverty line also accounts for family size and composition and is adjusted for cost of living increases each year.

In 1994, the federal poverty line was \$11,940 for a family of three (one adult, two children) and was \$15,029 for a family of four (two adults and two children). In Vermont, the overall poverty rate was 9.4\* percent and the child poverty rate was 15.9.\*

\* Based on the average of three years 1992-1994.

*I don't know what the people look like who made a difference in my life the way the ones who have made a difference in my life are world.*

Income Guidelines in 1996 Based on a Family of Four Monthly Income	
Poverty Level .....	\$1,300
130% of Poverty .....	\$1,642
185% of Poverty .....	\$2,336

Maximum ANFC Benefits in 1996 Family of Four Monthly Income	
ANFC .....	\$ 696
<small>(does not reflect 3% cut enacted by the VT Legislature in 1996)</small>	
Food Stamps .....	\$ 302
Fuel Assistance .....	\$ 22*
Lifeline (Telephone service assistance) .....	\$ 9
<b>Total .....</b>	<b>\$1,029**</b>

*\* 1996 changes to the heating fuel assistance program have impacted Vermont families receiving ANFC Benefits. There is no longer a monthly fuel assistance benefit; instead, benefits are paid twice a year, one portion in the fall and the other early winter. Not all ANFC recipients are eligible for the full amount of heating fuel assistance. For example, families renting housing with heat included will receive only a small amount of assistance (\$5 - \$20 for FY 97) despite, on average, paying higher monthly rents. At present, it is estimated that an average annual benefit will be \$350 for qualifying families.*

**\*\*Total of benefits = 79 percent of poverty threshold**



## Education

### High School Dropouts

Vermont's dropout rate, for any given school year\*, has remained stable over the decade. Between 1984 and 1994, the overall dropout rate increased modestly, from 4.1 percent to 4.6 percent. In 1994, individual school dropout rates ranged from a high of 8.9 at Milton High School, to lows of less than 1 percent at Twinfield, Blue Mountain and Craftsbury High Schools.

The potential economic and social consequences of dropping out of school are extremely alarming. Compared with high school graduates, dropouts are three times as likely to be unemployed, and when employed, more likely to earn lower wages. On average, high school dropouts, over their lifetime, will earn less than half of a college graduate's likely earnings. High school dropouts are at a much higher risk for falling into poverty than those who have graduated. According to the national 1996 KIDS COUNT Data Book, between 1991 and 1992,

My sister Stephanie because she been through a lot of stuff and she knows that life isn't easy. Stephanie makes me prepare for the world in streets ways. Steph tells me to stay out of trouble. She show me what to do and what not to do.

5.4 percent of high school dropouts became poor, compared to only 2.0 percent of those with at least a high school diploma (page 14).

There are several, often interrelated social and health factors that put children at risk for falling behind in school, or failing and dropping out of school. These include poverty, mother's educational level, and disability (developmental, learning or emotional disabilities of a child).

**Poor children are much more likely to fall behind in school, have below-average academic skills, and drop out.**

\*According to the Vermont Department of Education, the dropout rate is closer to 18 percent when each class (from grade 9 through grade 12) is tracked over a four-year period.

That day I brought home a straight A report card. If it hadn't been for my dad I probably would have already dropped out of school. My dad is always on my case to make me better. He made me afraid to do bad. Ya, right now I hate it but in the longrun I know that without him I won't be a somebody.





Table 12

## Dropouts per High School

Location of High School	Name of High School	1984 (1982-1985)		1994 (1992-1995)		Location of High School	Name of High School	1984 (1982-1985)		1994 (1992-1995)	
		Number	Percent	Number	Percent			Number	Percent	Number	Percent
Arlington Barre	Arlington Memorial H.S. Spaulding High School	6	3.8	9	5.0	Manchester	Burr & Burton Seminary	3	2.1	16	4.6
Barton	Spaulding UHSD #41	62	5.5	41	4.5	Marshfield	Twinfield UHSD #33	6	3.5	1	0.6
Bennington	Lake Region UHSD #24 Mt. Anthony UHSD #14	17	4.3	17	3.9	Middlebury	Middlebury UHSD #3	27	3.6	37	5.2
Bethel	Whitcomb H.S.	4	2.9	6	4.3	Milton	Milton H.S.	21	3.3	48	8.9
Bradford	Oxbow UHSD #30	6	1.9	15	3.9	Montpelier	Montpelier H.S.	20	4.1	12	2.8
Brandon	Otter Valley UHSD #8	25	5.6	17	3.6	Morrisville	Peoples Academy	16	5.3	13	3.9
Bratteboro	Battleboro UHSD #6	46	4.3	75	7.9	Newport	North Country UHSD #22	60	5.6	73	7.0
Bristol	Mt. Abraham UHSD #28	28	5.7	26	5.2	Northfield	Northfield H.S.	5	1.7	4	1.3
Burlington	Burlington H.S.	88	7.0	84	8.1	Poultney	Poultney H.S.	9	4.2	10	5.0
Cabot	Cabot H.S.	3	4.0	1	1.0	Proctor	Proctor H.S.	8	3.9	3	2.7
Canaan	Canaan Memorial H.S.	3	3.1	5	5.1	Randolph	Randolph UHSD #2	13	3.3	10	2.6
Chelsea	Chelsea H.S.	2	1.7	5	3.2	Richford	Richford H.S.	9	5.2	8	3.7
Chester	Green Mountain UHSD #35	15	4.7	16	5.4	Rochester	Rochester H.S.	6	7.4	5	6.8
Clarendon	Mill River UHSD #40	15	2.7	16	3.1	Rockingham	Bellows Falls UHSD #27	33	6.5	34	8.1
Colchester	Colchester H.S.	39	4.0	21	3.0	Royalton	South Royalton H.S.	6	4.2	4	2.2
Concord	Concord H.S.	6	6.6	5	6.3	Rutland	Rutland Jr./Sr. H.S.	50	5.5	18	2.1
Craftsbury	Craftsbury Academy	2	2.9	1	0.7	St. Albans	Bellows Free Academy	13	4.4	59	5.9
Danville	Danville H.S.	0	0.2	5	3.4	St. Johnsbury	St. Johnsbury Academy	1	0.5	16	1.8
Duxbury	Harwood UHSD #19	25	4.7	12	2.6	South Burlington	South Burlington H.S.	22	2.7	36	4.5
East Montpelier	UHSD #32	31	5.8	25	4.1	Springfield	Springfield H.S.	32	4.3	31	5.4
Enosburg Falls	Enosburg Falls H.S.	8	2.9	10	2.9	Stowe	Stowe H.S.	3	2.1	5	2.9
Essex Junction	Essex Junction H.S.	23	1.6	31	2.6	Swanton	Missisquoi Valley UHSD #7	26	4.1	56	7.3
Fair Haven	Fair Haven UHSD #16	11	2.1	22	4.4	Thetford	Thetford Academy	2	3.4	6	3.3
Fairfax	Bellows Free Academy	6	2.2	6	2.0	Townshend	Leland & Gray UHSD #34	6	2.6	9	3.9
Hardwick	Hazen UHSD #26	17	6.3	11	4.1	Vergennes	Vergennes UHSD #5	8	1.7	4	1.2
Hartford	Hartford H.S.	28	4.6	45	6.4	Wells River	Blue Mountain UHSD #21	5	3.1	1	0.6
Hinesburg	Champlain Valley UHSD #15	16	1.7	25	2.9	West Rutland	West Rutland H.S.	1	0.8	3	2.7
Hyde Park	Lamoille UHSD #18	38	8.0	31	6.2	Whitingham	Whitingham H.S.	3	3.0	4	4.9
Jericho	Mt. Mansfield UHSD #17	17	2.2	14	2.0	Williamstown	Williamstown H.S.	12	5.1	10	5.7
Ludlow	Black River UHSD #39	9	4.8	5	3.0	Wilmington	Wilmington H.S.	1	1.2	2	1.8
Lyndon Center	Lyndon Institute	5	2.6	23	4.3	Windsor	Windsor H.S.	10	3.3	9	3.6
						Winooski	Winooski H.S.	13	5.1	17	8.7
						Woodstock	Woodstock UHSD #4	7	1.8	10	2.2
<b>Vermont</b>		<b>1135</b>		<b>4.1</b>		<b>1282</b>		<b>4.6</b>			

## Teens Not Attending School and Not Working

Young people included in this indicator are between the ages of 16-19 who are not working, not in enrolled in school (full or part-time), and not in the Armed Forces. Compared to high school graduates and youth who maintain employment after graduation, teens not working or attending school are at higher risk for chronic unemployment and/or low wages. Without work experience, it is more difficult to find and keep employment.

Table 13

County	1980		1990		Percent change in rate
	Number	Percent	Number	Percent	
Addison	144	5.1	178	6.9	35.3
Bennington	101	4.1	117	5.9	43.9
Caledonia	166	8.1	52	3.0	-63.0
Chittenden	461	3.8	216	2.2	-42.1
Essex/Orleans	156	7.5	114	4.0	-46.7
Franklin/G.I.	222	8.0	104	4.2	-47.5
Lamoille	86	6.4	58	4.2	-34.4
Orange	88	5.0	79	5.1	2.0
Rutland	287	6.1	146	3.9	-36.1
Washington	184	4.6	125	4.1	-10.9
Windham	257	10.9	82	4.1	-62.4
Windsor	196	5.8	127	5.2	-10.3
Vermont	2348	5.6	1,398	4.0	-28.6

## Educational Attainment of Adults

The number of adults 25 or older who have completed high school sometimes influences educational patterns and goals of the next generation. In particular, there is a strong correlation between a mother's high school completion and that of her children. While the rate for this indicator improved by more than 13 percent by 1990, almost one in five Vermont adults had not finished high school or received a GED (General Equivalency Diploma), which is similar to Department of Education estimates of a dropout rate of almost one in five students. (See note on page 20)

Table 14

County	1980		1990		Percent change in rate
	Number	Percent	Number	Percent	
Addison	11,149	70.4	16,287	82.0	16.5
Bennington	13,637	68.2	18,251	77.8	14.1
Caledonia	10,280	68.3	13,520	77.4	13.3
Chittenden	47,775	78.3	68,841	86.7	10.7
Essex/Orleans	10,286	59.3	13,686	70.1	18.2
Franklin/G.I.	13,504	60.1	21,279	75.3	25.3
Lamoille	6,861	72.0	9,855	80.2	11.4
Orange	9,110	69.1	13,318	80.4	16.4
Rutland	24,502	70.0	32,196	79.4	13.4
Washington	22,575	72.8	28,951	81.3	11.7
Windham	16,445	72.0	22,451	81.7	13.5
Windsor	23,418	73.6	29,973	81.3	10.5
Vermont	209,542	71.0	288,608	80.8	13.8

## Educational Attainment of Adults

*Adults 25 years or older who have completed high school or GED*



Health

**Tables 15-17**

Three fundamental and interrelated measures of children's early health status are infant mortality, low birth weight and early prenatal care. Early and comprehensive prenatal care can help to decrease the number of low birth weight babies — infants more likely to die before their first birthday — thus reducing the potential for infant deaths. Between 1982 and 1994, all three indicators show improvement in their respective rates.

### Early Prenatal Care

Early prenatal care is comprehensive, ongoing care for pregnant women beginning in the first three months (first trimester) of pregnancy. Effective care insures access to: early medical and social/behavioral risk assessment; early intervention, educational and medical services; and ongoing monitoring and care of maternal and fetal health.

Early and comprehensive prenatal care increases the likelihood of giving birth to a healthy baby, and therefore may reduce the number of low birth weight infants. The number and rate of pregnant women receiving early prenatal care has improved in nearly every county in Vermont. The overall rate improved by almost 4 percent between 1982 and 1994. However, teenagers are the least likely to begin early prenatal care. In 1994, less than 71 percent of pregnant teens received prenatal care in the first trimester, compared with 87.5 percent of women 20 or older.

**Healthy Vermonters Goals 2000\*\* calls for 90 percent of all pregnant women to begin prenatal care in the first trimester.**

**Table 15**

### Early Prenatal Care Pregnant women receiving prenatal care in the first trimester

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-) <sup>4</sup>
	Number	Rate	Number	Rate	Number	Rate		
Addison	396	83.0	376	79.8	372	84.1	1.3	+
Bennington	429	80.6	407	78.5	341	82.4	2.2	+
Caledonia	309	80.9	300	78.0	286	85.2	5.3	+
Chittenden	1583	88.5	1581	85.0	1628	86.3	-2.5	-
Essex/Orleans	326	74.0	304	77.4	311	83.2	12.4	+
Franklin/Grand Isle	554	79.5	517	75.7	593	84.3	6.0	+
Lamoille	233	78.5	227	81.3	235	84.9	8.2	+
Orange	315	85.4	272	79.7	282	86.2	0.9	+
Rutland	649	78.7	644	79.3	626	84.4	7.2	+
Washington	652	83.6	627	83.3	602	89.3	6.8	+
Windham	465	77.4	427	74.2	413	82.8	7.0	+
Windsor	608	82.8	537	78.6	517	85.9	3.7	+
Vermont	6519	82.3	6219	80.2	6206	85.3	3.6	+

<sup>1</sup> Average 1982-1984 (1983)    <sup>2</sup> Average 1987-1989 (1988)    <sup>3</sup> Average 1992-1994 (1993)  
 Rate = number of women receiving early prenatal care per 100 pregnant women.  
 \*Compares change in rates between 1983 and 1993.

\*\*The Healthy Vermonters 2000 Goals project helped establish health and well-being targets to be met by the year 2000. Goals are intended to help promote health and reduce risk behaviors.

My Mom Sandy. She helps me.  
 Talks to me, loves me, sees  
 most of all, she has me.



## Low Birth Weight Infants

Newborns weighing less than 5.5 pounds (2500 grams) at birth are considered low birth weight. Birth weight is an important measure of a baby's health, and low weight is a major contributing cause of infant illness and death. In 1994, nearly 54 percent of Vermont infants who died before their first birthdays were low birth weight. Low birth weight infants are at higher risk for developmental delays, chronic health problems and long term disability.

Between 1982 and 1994, the low birth weight rate has remained relatively stable, declining less than 4 percent. Comparisons between 1987 and 1994 show an actual increase in the low birth weight rate, from 5.3 to 5.8 percent.

According to a Vermont Department of Health (VDH) study, despite the improved rate of pregnant women receiving prenatal care, the low birth weight rate has not changed substantially since 1980. *An Analysis of Low Birth Weight in Vermont*, examines Vermont births between 1992 and 1994, reviewing risk factors correlated to low birth weight. It considers both medical conditions and social/behavioral factors. Its conclusion: two critical predictors of low birth weight are smoking during pregnancy, and late entry into prenatal care.

**Approximately 35 percent of medical care dollars nationally spent on infants (about \$4 billion) are for costs resulting from low birth weight.<sup>1</sup>**

Table 16

## Low Birth Weight Babies

*Babies born weighing less than 5 1/2 pounds*

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
Addison	27	5.6	25	5.1	24	5.3	-5.4	+
Bennington	34	6.4	21	3.9	26	5.8	-9.4	+
Caledonia	22	5.7	23	5.9	22	6.5	14.0	-
Chittenden	106	5.9	101	5.0	106	5.5	-6.8	+
Essex/Orleans	25	5.6	25	6.2	27	6.9	23.2	-
Franklin/Grand Isle	40	5.8	45	6.2	47	6.4	10.3	-
Lamoille	21	7.0	18	6.2	13	4.5	-35.7	+
Orange	18	4.9	24	6.4	19	5.5	12.2	-
Rutland	61	7.4	46	5.4	45	5.9	-20.3	+
Washington	49	6.2	39	5.0	40	5.9	-4.8	+
Windham	30	5.0	34	5.7	28	5.4	8.0	-
Windsor	42	5.7	31	4.1	38	6.1	7.0	-
Vermont	476	6.0	434	5.3	434	5.8	-3.3	+

<sup>1</sup> Average 1982-1984 (1983)    <sup>2</sup> Average 1987-1989 (1988)    <sup>3</sup> Average 1992-1994 (1993)

Rate = number of low birth weight babies per 100 births.

\*Compares change in rates between 1983 and 1993.

To meet the Healthy Vermonter's 2000 goal of reducing the incidence of underweight babies to 5 percent of all births or below, the study determined that there must be additional efforts. These focus on: further increasing the rate of women beginning care in the first trimester; early identification of women with medical risk factors, appropriate treatment for these women and women with multiple births; and significantly reducing or eliminating maternal tobacco use during pregnancy.

## Infant Mortality Rate

The infant mortality rate is a vital indicator of the overall health and welfare of a nation. A recent study by the Centers for Disease Control and Prevention (CDC) found that infants born to poor women had a 60 percent higher death rate than babies born to non-poor women. Inadequate nutrition, substandard living conditions, no or late prenatal care, low birth weight, and premature birth all increase the risk of infant mortality.

In Vermont, the infant mortality rate declined by 21.3 percent between 1982 and 1994. For the average of the three years 1992-1994, Vermont's infant mortality rate met the Healthy Vermonters 2000 Goal of 7 or fewer infant deaths per 1000 births.

Almost 64 percent of infant deaths in 1994 occurred during the neonatal period (before an infant reaches 28 days old). The most common causes of infant deaths were congenital anomalies (largely non-preventable birth defects), complications due to prematurity, and Sudden Infant Death Syndrome (SIDS).

***Among industrialized countries, the United States ranks 18th in Infant Mortality.<sup>2</sup>***

Table 17

## Infant Mortality

*Deaths of babies less than one year of age*

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
Addison	4	9.0	5	10.0	3	7.3	-18.9	+
Bennington	6	11.2	4	6.9	3	7.6	-32.1	+
Caledonia	3	8.7	3	8.4	4	11.6	33.3	-
Chittenden	15	8.2	12	6.1	12	6.1	-25.6	+
Essex/Orleans	4	8.2	2	5.7	2	5.1	-37.8	+
Franklin/Grand Isle	6	9.0	5	7.2	4	5.0	-44.4	+
Lamoille	3	11.1	2	5.6	1	2.3	-79.3	+
Orange	2	5.4	4	11.5	1	2.0	-63.0	+
Rutland	7	8.4	7	7.8	5	6.1	-27.4	+
Washington	9	11.5	3	4.3	8	11.1	-3.5	+
Windham	5	7.7	6	10.5	4	7.7	0.0	same
Windsor	7	9.5	5	7.1	7	11.4	20.0	-
Vermont	71	8.9	60	7.2	53	7.0	-21.3	+

<sup>1</sup> Average of 1982-1984 (1983)

<sup>2</sup> Average of 1987-1989 (1988)

<sup>3</sup> Average of 1992-1994 (1993)

Rate = number of infant deaths per 1,000 births.

\*Compares change in rates between 1983 and 1993.

## Births to Teens

While the rate of births to all teens continues to decrease nationally and in Vermont, there is a disturbing trend of rising births to single teens, particularly younger teens. There has been a dramatic change in the percent of births to single teens in the past 34 years. Nationally, in 1960, 15 percent of teen births were to single teens, compared with 70 percent in 1992. In Vermont, the percentage of births to single teens, compared to all teen births, rose from 52 percent in 1982 to 82 percent in 1994.

**More low birth weight infants were born to teens than other mothers in Vermont in 1994: 8.1 percent compared to 6.1 percent.**

Table 18

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
Addison	21	4.3	25	4.9	28	6.1	41.9	-
Bennington	35	6.5	43	8.2	32	7.2	10.8	-
Caledonia	25	6.6	31	7.9	26	7.5	13.6	-
Chittenden	88	4.9	91	4.6	100	5.1	4.1	-
Essex/Orleans	23	5.1	30	7.4	37	9.5	86.3	-
Franklin/Grand Isle	46	6.6	45	6.1	59	8.2	24.2	-
Lamoille	18	6.0	19	6.3	18	6.3	5.0	-
Orange	15	3.9	19	5.2	25	7.4	89.7	-
Rutland	50	6.0	40	4.7	54	7.1	18.3	-
Washington	46	5.8	39	5.0	36	5.2	-10.3	+
Windham	34	5.6	42	7.0	43	8.2	46.4	-
Windsor	44	6.0	35	4.7	42	6.9	15.0	-
Vermont	444	5.6	461	5.6	500	7.0	25.0	-

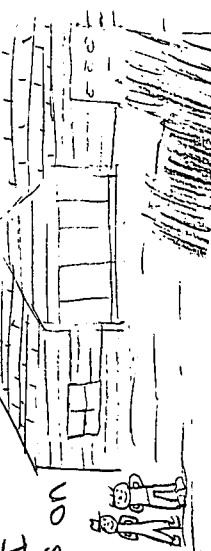
<sup>1</sup> Average 1982-1984 (1983)    <sup>2</sup> Average 1987-1989 (1988)    <sup>3</sup> Average 1992-1994 (1993)

Rate = number of births to single teens per 100 births to all women.

\*Compares change in rates between 1983 and 1993.

I guess the person who influenced my life the most would be my grandfather because he told me different stories, jokes, and lessons. My grandfather has always been kind and thoughtful to others. One day he was coming home from work and found a man. The man had no job or money not even a place to live. So my grandfather took him in and got him back on his feet. No matter

what, my grandfather could always support his family even if he had to work five jobs which he did. My grandfather raised a family of four but one day his oldest had died in my grandfather's arms. That's why I choose to do this on my grandfather.



There are many negative outcomes associated with teen childbearing. Teen families are more likely to be poor and remain poor (see New Families At Risk on pg. 18). Pregnant teens are less likely to seek early prenatal care and more likely to have low birth weight babies. Children of teen mothers also do not fare as well as children whose mothers delay childbearing. They will more likely fall behind in school, experience academic failure and drop out of school. Offspring of teen mothers are also more apt to become teen parents and continue the devastating cycle of poverty.

My father has made a big difference in my life. He is always made time for me. My dad and I are best friends. My father is a car dealer and buys cars, and he's always shows me how to do what he's doing. He lets me buy cars, help decide what cars to buy, and he lets me load the cars on the flatbed all by myself. Many people say that's a guy thing. My dad has showed me that I can do what ever I want. He's always wants me to try new things no matter what it is. I'm not really a Tomboy but I love to be with dad. I try to make him happy, and stay happy at the same time. My brother always told me that he was better than me, and he could do more than me because he was a boy, but I showed him that I was just as good as him, with the help of my father. There have been many people who have made a difference in my life, but he has made the biggest difference.

Table 19

## Births to Teens

### Births to women under 20

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-) <sup>4</sup>
	Number	Rate	Number	Rate	Number	Rate		
Addison	44	9.0	36	7.3	34	7.5	-16.7	+
Bennington	64	11.9	61	11.6	44	10.1	-15.1	+
Caledonia	53	13.7	45	11.5	35	10.1	-26.3	+
Chittenden	149	8.3	133	6.6	123	6.3	-24.1	+
Essex/Orleans	55	12.3	49	11.9	48	12.4	0.8	-
Franklin/Grand Isle	82	11.7	75	10.2	79	10.9	-6.8	+
Lamoille	34	11.4	30	10.0	28	9.6	-15.8	+
Orange	39	10.4	32	8.5	34	10.1	-2.9	+
Rutland	93	11.3	67	7.9	67	8.8	-22.1	+
Washington	91	11.6	62	7.9	46	6.7	-42.2	+
Windham	62	10.2	58	9.6	51	9.8	-3.9	+
Windsor	78	10.5	50	6.7	54	8.7	-17.1	+
Vermont	843	10.6	699	8.5	606	8.5	-19.8	+

<sup>1</sup> Average 1982-1984 (1983)

<sup>2</sup> Average 1987-1989 (1988)

<sup>3</sup> Average 1992-1994 (1993)

Rate = number of teen births per 100 births to all women.

<sup>4</sup> Compares change in rates between 1983 and 1993.

## Child Deaths (Ages 1-14)

The rate of Vermont child deaths for all causes declined by nearly 19 percent between 1982 and 1994. The most common causes of death are disease and unintentional injuries. Between 1992 and 1994, motor vehicle accidents were the most frequent cause of unintentional injury deaths, followed by fire.

Recommendations from a Vermont report on child safety to reduce child injury deaths include:

- 1) increasing, to 100 percent, the use of safety restraints in cars by children and teens, and
- 2) decreasing substance-impaired driving by all ages.

To reduce fire deaths of children to zero, the report also proposes expanding the use of working smoke detectors and fire safety products, and increasing awareness and use of home safety measures.

**Low income children and youth are approximately three times as likely to die during childhood as their non-poor peers.<sup>3</sup>**

Table 20

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
	Addison	1	20.4	1	20.1	2		
Bennington	3	47.6	1	14.1	1	9.4	-80.3	+
Caledonia	1	23.3	2	33.9	2	27.4	17.6	-
Chittenden	4	16.9	6	25.0	3	13.3	-21.3	+
Essex/Orleans	4	63.2	3	39.4	2	29.8	-52.8	+
Franklin/Grand Isle	5	51.2	2	19.7	4	34.6	-32.4	+
Lamoille	1	35.6	1	25.4	3	64.9	82.3	-
Orange	2	31.6	3	47.7	3	45.9	45.3	-
Rutland	4	31.3	4	37.0	2	14.0	-55.3	+
Washington	3	30.6	3	27.3	2	18.0	-41.2	+
Windham	2	21.5	2	28.2	3	39.2	82.3	-
Windsor	4	41.9	3	25.3	4	40.4	-3.6	+
Vermont	35	32.3	31	27.8	30	26.2	-18.9	+

<sup>1</sup> Average of 1982-1984 (1983)    <sup>2</sup> Average of 1987-1989 (1988)    <sup>3</sup> Average of 1992-1994 (1993)  
 Rate= Deaths of children per 100,000 children ages 1-14.  
 \*Compares change in rates between 1983 and 1993.

*A person who made a difference in my life would have to be my mother Josephine R.*

*When I first met R. he was not so strong mentally and physically. When he started to work at something he would quit it until he saw how I was never like that, I always did my work when I was ready to do it. He has taught me that "if you get your work done early, then you will have the rest of the day." The thing that R. always said after I had done something really hard was, "Builds Stamina." Thank You R.*



## Teen Violent Deaths (Ages 15-19)

Nationally, the teen violent death rate was 69 per 100,000 teens aged 15-19 in 1993, and while accidental deaths declined, homicides nearly doubled. In comparison, between 1982 and 1994, Vermont's rate declined by 13.6 percent to about 54 deaths per 100,000 teens.

Violent deaths are categorized as either unintentional or intentional by the Vermont Child Fatality Review Committee (VCFRC). In Vermont, motor vehicle accidents continue to be the leading cause of all deaths among teens 15-19 years old. Between 1992 and 1994, 78 percent of all unintentional deaths of teens were due to motor vehicle accidents. According to a report of the VCFRC, alcohol use, high speed and youthful risk-taking behavior were significant factors in motor vehicle accident deaths. The report recommends continued efforts to provide widespread public education about alcohol use, passenger safety restraint use, and high speed risks during motor vehicle operation.

Of ongoing concern is the suicide rate among Vermont teens. A 1988 report on youth suicide in Vermont documented increasing national and state rates of teen suicide during the 1970s and early 1980s. A more recent review of Vermont Vital Statistics indicates that the Vermont rate, while somewhat higher than the national rate, has not risen significantly since the previous increase. Yet, suicide is second only to accidents as the cause of deaths among Vermont teens. Firearms were used in 80 percent of suicides between 1992 and 1994. In addition to the recommendations for prevention of teen suicide in the 1988 report,\*\* the VCFRC proposes private

Table 21

County	1983 <sup>1</sup>		1988 <sup>2</sup>		1993 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)**
	Number	Rate	Number	Rate	Number	Rate		
Addison	3	92.0	2	76.9	1	51.1	-44.5	+
Bennington	1	35.0	2	91.4	1	59.6	70.3	-
Caledonia	1	56.2	1	29.9	1	33.7	-40.0	+
Chittenden	6	47.7	3	27.7	4	40.6	-14.9	+
Essex/Orleans	2	93.0	3	149.1	2	116.4	25.2	-
Franklin/Grand Isle	3	86.4	2	71.6	2	64.7	-25.1	+
Lamoille	2	102.9	2	104.9	0	0.0	-100.0	+
Orange	1	48.4	2	83.8	1	73.3	51.4	-
Rutland	2	38.1	3	64.1	3	86.3	125.5	-
Washington	2	50.5	3	66.5	2	47.9	-5.1	+
Windham	1	45.8	2	87.6	1	42.1	-8.1	+
Windsor	5	120.2	3	79.9	1	45.5	-62.1	+
Vermont	30	62.4	28	65.0	20	53.9	-13.6	+

<sup>1</sup> Average of 1982-1984 (1983)    <sup>2</sup> Average of 1987-1989 (1988)    <sup>3</sup> Average of 1992-1994 (1993)  
 Rate = Violent deaths of teens per 100,000 teens ages 15-19.  
 \*\*Compares change in rates between 1983 and 1993.

and public sector leadership in the development of constraints on promotion of media violence and easy access to firearms, both of which have solid scientific evidence relating to teenage violence and suicide.

\*\* A new report on teen suicide in Vermont will be released in early 1997. Lieutenant Governor's Task Force on Youth Suicide Prevention in Vermont, May 1988.

### Footnotes

1. Center for the Future of Children, The David and Lucille Packard Foundation. *The Future of Children*, Vol. 5, No. 1. CA, Spring, 1995
2. Children's Defense Fund. *The State of America's Children*. Washington D.C., 1995.
3. Sherman, Arloc. *Wasting America's Future*. Beacon Press, MA 1994.

## Child Abuse and Neglect

A fundamental threat to children's safety and welfare is the violence they experience through abuse and neglect. Vermont law defines an abused and neglected child as "a child whose physical health, psychological growth and development or welfare is harmed or is at substantial risk of harm by the acts or omissions of his or her parent or other person responsible for the child's welfare."<sup>1</sup> The U.S. Department of Health and Human Services (HHS) categorizes child maltreatment into four types: physical abuse, neglect, sexual abuse and mental injury (also referred to as emotional maltreatment or psychological abuse).

Vermont's overall rate of substantiated (confirmed) victims of abuse and neglect dropped by 27 percent between 1984 and 1995 (see table 22). In 1993, 1994, and 1995, all categories of abuse and neglect experienced a decline. *The overall rate refers to the combination of all categories — physical and sexual abuse and neglect. The decrease in the overall rate does not mean that each category of abuse or neglect has decreased. However, beginning in 1993, each category rate declined.*

In general, this steady decline, particularly in physical abuse, can be credited to Vermont's successful prevention and early intervention programs — services which help prevent abuse and neglect and provide ongoing support services to at-risk children and families. Yet, at the same time, some mandated reporters and social service professionals are concerned that the criteria have been raised for a finding of abuse that would require an investigation. In addition, it has been reported that there are no uniform statewide criteria used by SRS district offices to determine whether or not a report of abuse warrants investigation. This is especially true with regard to reports of emotional abuse.

Thus, the failure to establish such uniform criteria statewide may result in an artificially low number of substantiated victims.

The National Committee to Prevent Child Abuse estimates that over one million U.S. children were confirmed victims of abuse and neglect in 1994. Many experts believe that the official data on confirmed child victims represent only a small percentage of the actual numbers. The 1996 National Incidence Study (NIS)<sup>2</sup> conducted by the U.S. Department of HHS supports this view. According to the NIS, the estimated number of abused and neglected children in the U.S. rose from 1.4 million to 2.8 million between 1986 and 1994.

## Child Protection

Table 22

County	1985 <sup>1</sup>		1989 <sup>2</sup>		1994 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
	Addison	68	80	62	72	42		
Bennington	93	103	78	86	67	74	-28.2	+
Caledonia	92	122	78	102	64	81	-33.6	+
Chittenden	291	94	306	99	236	74	-21.3	+
Essex/Orleans	117	133	81	94	59	71	-46.6	+
Franklin/Grand Isle	100	78	180	137	148	108	38.5	-
Lamoille	38	77	33	65	22	41	-46.8	+
Orange	87	124	70	97	54	73	-41.1	+
Rutland	144	94	127	84	107	71	-24.5	+
Washington	192	135	170	122	148	106	-21.5	+
Windham	179	174	156	147	103	97	-44.3	+
Windsor	190	141	182	135	126	93	-34.0	+
Vermont	1,593	111	1,522	106	1,178	81	-27.0	+

<sup>1</sup> Average of 1984-1986 (1985)

<sup>2</sup> Average of 1988-1990 (1989)

<sup>3</sup> Average of 1993-1995 (1994)

Rate = number of victims per 10,000 children under 18.

\*Compares change in rates between 1985 and 1994.

### Physical Abuse

Inflicting physical injury on a child by beating, kicking, biting, burning, punching, and any other means that causes physical harm, broadly defines child physical abuse. The Vermont rate of substantiated victims of physical abuse dropped by over 35 percent between 1984 and 1995, bucking the national trend of rising numbers and rates (Table 23). The rate has declined steadily since 1986, and did not increase in the late eighties and early nineties, as did the rates for neglect and sexual abuse.

According to a Vermont Department of Social and Rehabilitation Services Report, over 90 percent of physical abuse in 1995 was committed by a child's relative: parent (72%), parent's boyfriend/girlfriend (14%), or step-parent (8%).

A person who has made a difference in my life helped me get through I would never get through. He has helped me understand who I am and what I work. He makes sure I do my schoolwork. IS I didn't have him I don't know what I would do. I don't think I could live without him. One example of something he helped me go through was when my mother remarried some pretty man. They treated me bad. He helped me get my nights and helped me head going through. I see him in my life forever.

Table 23

## Child Physical Abuse

*Substantiated victims of physical abuse*

County	1985 <sup>1</sup>		1989 <sup>2</sup>		1994 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
Addison	22	26	20	24	9	10	-61.5	+
Bennington	23	25	16	17	23	26	4.0	-
Caledonia	25	33	19	25	16	21	-36.4	+
Chittenden	93	30	86	28	70	22	-26.7	+
Essex/Orleans	31	36	25	29	10	12	-66.7	+
Franklin/Grand Isle	32	25	53	41	37	27	8.0	-
Lamoille	9	19	11	22	7	13	-31.6	+
Orange	28	40	23	32	19	26	-35.0	+
Rutland	30	20	29	19	30	20	0.0	same
Washington	67	47	51	36	34	24	-48.9	+
Windham	56	55	59	56	27	25	-54.5	+
Windsor	70	52	67	50	35	26	-50.0	+
Vermont	485	34	459	32	318	22	-35.3	+

1. Average of 1984-1986 (1985)

2. Average of 1988-1990 (1989)

3. Average of 1993-1995 (1994)

Rate = number of victims per 10,000 children under 18.

\*Compares change in rates between 1985 and 1994.





Table 24

## Child Sexual Abuse

*Substantiated victims of sexual abuse*

County	1985 <sup>1</sup>		1989 <sup>2</sup>		1994 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
Addison	25	29	30	35	28	32	10.3	-
Bennington	47	52	40	44	31	34	-34.6	+
Caledonia	34	45	41	53	32	40	-11.1	+
Chittenden	99	32	142	46	103	32	0.0	same
Essex/Orleans	45	52	43	50	40	47	-9.6	+
Franklin/Grand Isle	35	28	90	68	77	56	100.0	-
Lamoille	18	37	18	37	12	22	-40.5	+
Orange	36	51	38	53	24	33	-35.3	+
Rutland	63	41	69	46	56	38	-7.3	+
Washington	76	53	86	61	81	58	9.4	-
Windham	59	58	56	53	44	41	-29.3	+
Windsor	51	38	80	60	56	42	10.5	-
Vermont	589	41	731	51	583	40	-2.4	+

<sup>1</sup> Average of 1984-1986 (1985)      <sup>2</sup> Average of 1988-1990 (1989)      <sup>3</sup> Average of 1993-1995 (1994)

Rate = number of victims per 10,000 children under 18.

\*Compares change in rates between 1985 and 1994.

## Sexual Abuse

Sexual abuse includes, but is not limited to, subjecting a child to: incest, rape, intercourse, fondling of a child's genitals, molestation, sexual exploitation, and prostitution by a parent or person responsible for the care of the child. Vermont statute broadens the definition to include any act or acts of child sexual molestation or exploitation by any person.

Table 24 illustrates a 2.4 percent decline in the number and rate of substantiated victims of sexual abuse between 1984 and 1995. Prior to the decline in the sexual abuse rates between 1993 and 1995, single year comparisons show an 85 percent increase between 1984 and the 1992, the year when the sexual abuse rate reached an all-time high.

In 1995, more than 90 percent of sexual abuse perpetrators were known to their victims.

## Friends

*My Friends make a difference in my life. Whenever I am hurt they comfort me. They make me laugh a lot, we always have fun together. My family are my Friends too. Without Friends life wouldnt be worth living.*

## Neglect

The failure of a parent or other person responsible for the child's welfare to meet a child's basic needs characterizes neglect. Under Vermont statute, basic needs include the proper amount of food, shelter, clothing, or health care. Also, the child neglect category encompasses abandonment and emotional maltreatment. Emotional maltreatment is defined as a pattern of malicious behavior that results in impaired psychological growth and development.<sup>3</sup>

Data in table 25 show a nearly 30 percent decline in the neglect rate between 1984 and 1995. In 1991, the neglect rate first began to show improvement, dropping to its lowest rate since 1984. Neglect rates have continued to lessen through 1995.

In 1995, over 90 percent of all substantiated neglect was committed by a child's parent.

### Overall child abuse and neglect

The immediate and long-term effects of child abuse, neglect and family violence are devastating. Children and youth can experience life-long emotional, cognitive, behavioral and physical difficulties. In addition, the longer that children are exposed to family violence or abuse without intervention, the greater potential for serious negative consequences for the children's and youth's development. Prevention, early intervention, treatment and care are critical services. They help reduce future incidents and the effects of abuse and neglect, protect children, and stop intergenerational cycles of abuse. It is also important to keep in mind that the rates do not

Table 25

## Child Neglect Substantiated victims of neglect

County	1985 <sup>1</sup>		1989 <sup>2</sup>		1994 <sup>3</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate	Number	Rate		
Addison	23	27	17	19	10	12	-55.6	+
Bennington	25	28	24	27	14	16	-42.9	+
Caledonia	33	44	25	32	20	25	-43.2	+
Chittenden	84	27	99	32	74	23	-14.8	+
Essex/Orleans	54	61	26	30	12	15	-75.4	+
Franklin/Grand Isle	31	25	53	40	40	30	20.0	-
Lamoille	10	20	8	17	3	6	-70.0	+
Orange	17	24	17	24	17	23	-4.2	+
Rutland	56	37	38	25	26	17	-54.1	+
Washington	48	34	64	45	47	34	0.0	same
Windham	73	72	73	69	37	35	-51.4	+
Windsor	36	26	49	36	47	35	34.6	-
Vermont	490	34	492	34	349	24	-29.4	+

<sup>1</sup> Average of 1984-1986 (1985)    <sup>2</sup> Average of 1988-1990 (1989)    <sup>3</sup> Average of 1993-1995 (1994)

Rate = number of victims per 10,000 children under 18.

\*Compares change in rates between 1985 and 1994.

reflect the total numbers of children in Vermont who are abused and neglected. The data does not include unreported or unsubstantiated victims. The national data provided by the NIS suggests a much higher incidence of child abuse and neglect than indicated by official numbers.

## Domestic Violence

Domestic violence is a pattern of assaultive behaviors, including physical, sexual and psychological attacks, as well as economic coercion, that adults or adolescents use against their intimate partners (women are the victims in 95 percent of cases). In 1993 alone, it is estimated that 4 million women were abused by their husbands or boyfriends. Data from the National Woman Abuse Prevention Project suggest that 50 percent of all women will be in an abusive relationship at some time in their lives. In many of these families, there are also children who witness the abuse. According to a 1994 article on domestic abuse, almost 100 percent of children in violent homes hear or see abuse.

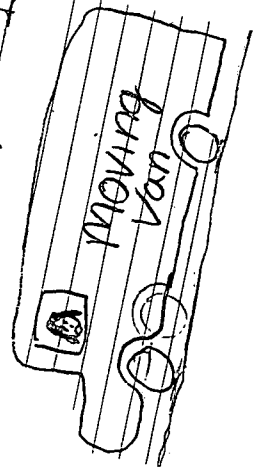
Domestic violence emotionally traumatizes children, often exposing them to horrifying parental abuse and increasing their risk of being abused. A growing body of literature finds that the psychological impact on children who witness repeated and chronic abuse is just as severe as if they had actually been victims themselves. In addition, children in homes where domestic violence occurs are at much higher risk for being abused. According to one report, children of battered women are neglected and physically abused at a rate 15 times higher than children in non-violent homes.<sup>4</sup>

When my dad, I was learning how  
to ride a bike, I kept stumbling and  
falling and my dad said "you can  
do anything you want as long  
as you put your mind to it. And  
My father really made a difference  
in my life by saying this. He  
showed me he cared about me.

Historically, Vermont's child protection system has not consistently addressed emotional abuse of children and specifically, the long term psychological impacts on children who witness domestic violence. Protection of children in such homes is complicated by the devastating impact of the abuse on the battered parent. Increasing cooperation among child protection, domestic violence and criminal justice systems is necessary to begin to more effectively manage this complex issue. It may help foster a better understanding of the needs of abused parents, as well as children in violent homes. According to a report from the National Research Council, integrated, coordinated community-based programs must replace fragmented responses to domestic violence, to insure better protection and services for the whole family.

In FY 1995, over 8,100 children were served by domestic violence programs around Vermont, receiving a variety of services, from playgroups, transportation, to shelter.

My mother has made a big  
change in my life by telling  
me that unless something  
tragic happens we WILL NOT  
move. All my life we have moved  
I have never stayed in one  
school for the whole year and  
I am hoping this year I can



## Children in Custody

Tables 26-28 provide data on the average daily numbers and rates of children in the custody of Vermont's Department of Social and Rehabilitation Services (SRS). Children and youths enter custody as either Children in Need of Supervision (children classified as either abused and neglected, or deemed unmanageable)\*\* or as delinquents\*\*\*. Between 1989 and 1994, the number and rate of children and youth in custody rose dramatically, reaching an all-time high in 1993. In fact, all counties in all categories experienced increases. The greatest number of children in custody are those categorized as abused and neglected, followed by unmanageable youth and delinquents.

SRS programs serving youth and families face enormous challenges. They are seeing unprecedented growth in the numbers of children and youths in custody; the increasing severity of abuse experienced by these children, and the need for more long term support for children, their families and foster care providers; and the lack of additional funding and staff to address the growing caseloads and critical needs. According to the Vermont Agency of Human Services 1994 report, *Family Preservation Initiative*, the workload for social workers was 33 percent above capacity.

**\*\*Unmanageables are youth without or beyond the control of parents or guardians.**

**\*\*\* Not all delinquent youths are in custody. Generally, youths are in custody due to numerous delinquent acts or crimes which would constitute serious offenses.**

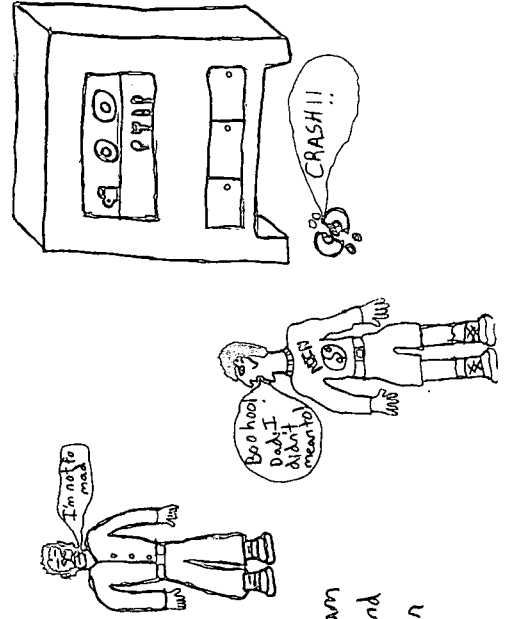
When I do something wrong my parents don't scream at me. They tell me what I did. Calm me down and then they tell me what I should have done when it happened.

Table 26

## Abused and Neglected Children in Custody

County	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate		
Addison	47	54	80	93	72.6	-
Bennington	52	58	88	99	70.5	-
Caledonia	83	107	124	160	49.4	-
Chittenden	117	38	308	98	161.3	-
Essex/Orleans	76	88	115	135	53.1	-
Franklin/Grand Isle	143	108	212	157	44.9	-
Lamoille	30	58	47	91	55.4	-
Orange	34	47	50	68	44.7	-
Rutland	91	60	113	75	24.8	-
Washington	99	70	156	112	58.5	-
Windham	46	43	81	76	75.6	-
Windsor	79	59	139	103	76.2	-
Vermont	897	62	1,513	105	68.4	-

<sup>1</sup> Average of 1989-1991 (1990)      <sup>2</sup> Average of 1992-1994 (1993)  
 Rate = Average number of children in custody per 10,000 children under 18.  
 \*Compares change in rates between 1990 and 1993.



Two significant legislative actions took place in 1996 which will impact services to delinquent and unmanageable youths.

1) As of July 1, 1996, teens aged 16 and 17 can no longer enter custody as unmanageables. Instead, youth and their families can seek community-based services or some may enter custody under the classification of abuse and neglect. Also, families with youths of any age deemed unmanageable, are required to first use community-based services before petitioning for custody. Yet, at the same time in 1996, federal funds for community-based services to adolescents were cut by 33 percent, even though the number of youths served by Vermont's runaway and homeless youth programs increased by 42 percent between 1992 and 1995.

***In general, it is agreed that the preventive strategies and programs aimed against child abuse would also prevent delinquency both indirectly, by preventing the abuse that leads to delinquency, and directly, by strengthening family and social supports for all individuals in the community.<sup>5</sup>***

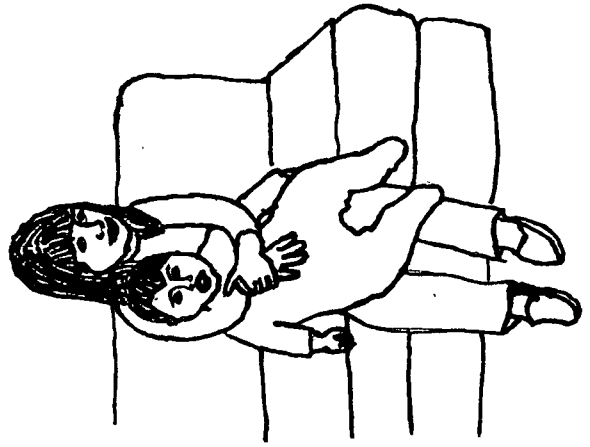


Table 27

## Unmanageable Youth in Custody

County	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)*
	Number	Rate	Number	Rate		
Addison	23	61	48	126	104.5	-
Bennington	16	44	41	104	137.7	-
Caledonia	17	48	27	73	51.3	-
Chittenden	95	75	281	214	185.9	-
Essex/Orleans	10	25	25	63	150.0	-
Franklin/Grand Isle	26	46	68	112	141.1	-
Lamoille	10	48	21	92	93.1	-
Orange	6	18	16	47	157.6	-
Rutland	56	87	76	123	41.3	-
Washington	21	35	37	58	62.3	-
Windham	16	37	39	84	125.5	-
Windsor	28	50	45	76	51.6	-
Vermont	324	53	724	113	112.6	-

<sup>1</sup> Average of 1989-1991(1990)

<sup>2</sup> Average of 1992-1994 (1993)

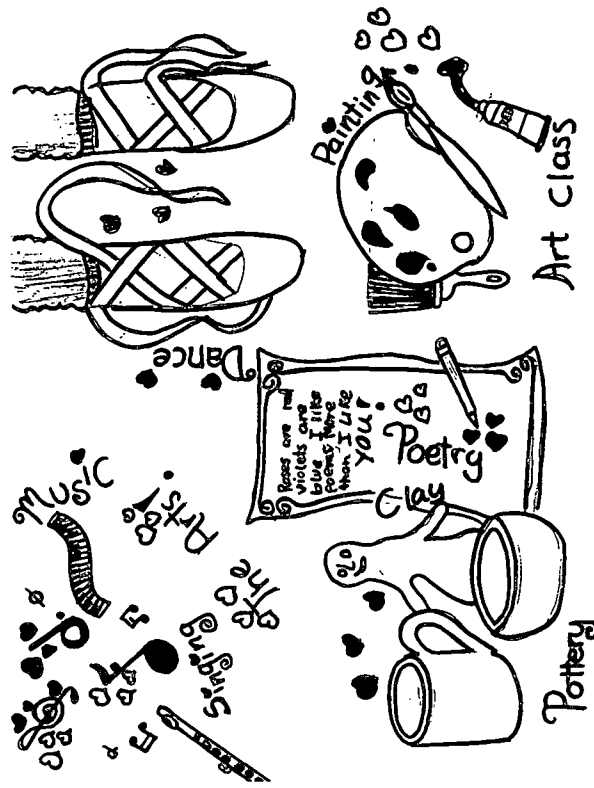
Rate = Average of youth in custody per 10,000 youth ages 10-17

\*Compares change in rates between 1990 and 1993.



2) as of July 1, 1996, Family (Juvenile) Courts in Vermont may no longer order SRS to retain custody of delinquents after they reach the age of 18. The elimination of the Juvenile Court's authority to retain jurisdiction and continued custody of delinquent youth between the ages of 18 and 21 has greatly eroded its ability to effectively mandate needed treatment for this population.\*\*

\*\* There is concern in the therapeutic community that, by eliminating jurisdiction of delinquents ages 18-21, a number of these troubled youths will not receive additional therapeutic intervention. As legal custodian, SRS is required to ensure access to medical and therapeutic treatments, but without this support it is less likely that youths will continue or be able to afford such treatment. Also, it is much less likely that youths charged with a crime in adult court will have their cases transferred to juvenile court, because they may not remain in custody past age 18.



## Delinquent Youth in Custody

Table 28

County	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)**
	Number	Rate	Number	Rate		
Addison	11	30	28	72	139.6	-
Bennington	20	55	32	80	46.6	-
Caledonia	6	19	15	42	123.6	-
Chittenden	57	45	110	84	88.0	-
Essex/Orleans	18	45	42	105	130.9	-
Franklin/Grand Isle	19	34	41	68	97.6	-
Lamoille	6	26	17	75	193.2	-
Orange	5	15	14	41	174.4	-
Rutland	39	61	52	83	36.4	-
Washington	25	41	53	83	100.1	-
Windham	23	53	39	84	60.1	-
Windsor	14	25	22	37	48.5	-
Vermont	243	40	465	73	82.0	-

<sup>1</sup> Average of 1989-1991(1990)

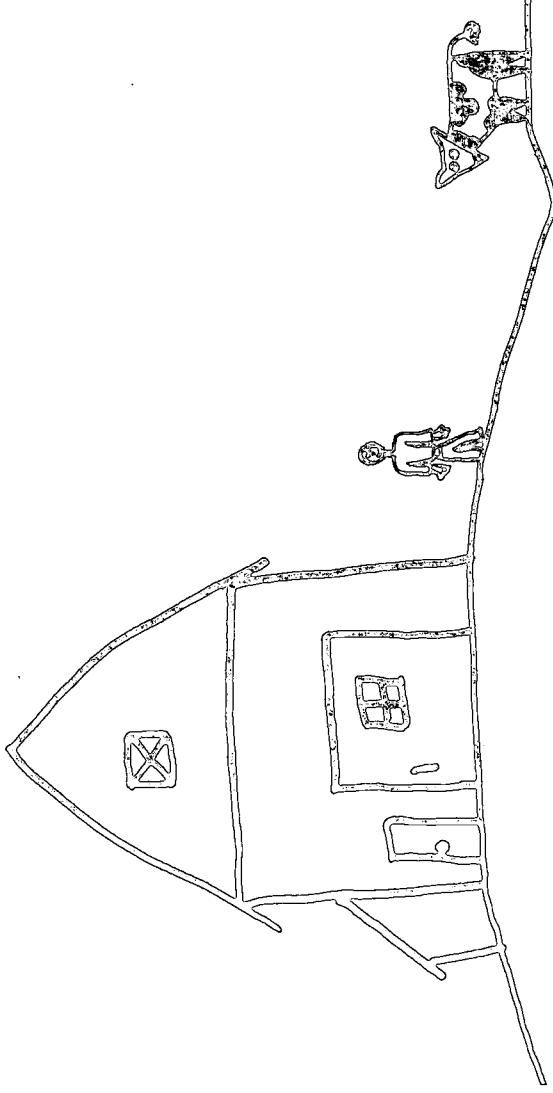
<sup>2</sup> Average of 1992-1994 (1993)

Rate = Average number of youth in custody per 10,000 youth ages 10-17

\*\*Compares change in rates between 1990 and 1993.

### Footnotes

1. Vermont Statutes Annotated, T.33 § 4913, 1993.
2. This survey is designed to estimate actual child abuse and neglect numbers based on information from official reports and community-based professionals who have contact with maltreated children in various settings.
3. Vermont Statutes Annotated, T.33 § 4913.—Amended 1991, No.141, § 1.
4. Jackson, Jana; *Intervention with Children Who Have Witnessed Domestic Violence*, Advocates for Children and Youth, Maryland, 1996
5. Gray, Ellen. *Child Abuse: Prelude to Delinquency?* National Committee for Prevention of Child Abuse. U.S. Department of Justice, 1986.



I was in second grade when my dad started a dairy farm.



*[Faint, illegible handwritten text, possibly bleed-through from the reverse side of the page.]*

# Communities and Youth

The following findings, from the Vermont Youth Risk Behavior Survey (YRBS), are indicators of adolescent well-being. They provide district-level data on specific teen behaviors, and illustrate the growing impact of teens' behavior choices on their immediate and long-term health and welfare. Both the YRBS data, like adolescent drinking, cigarette smoking and early sexual activity and other indicators included in this Data Book, such as poverty, the dropout rate, teen childbearing and youth in custody, underscore the serious problems Vermont's young people face. Reductions and elimination of funding for prevention and intervention services for adolescent programs further jeopardize necessary community supports for young people.

A 1993 Search Institute report suggests that broad-based community supports are essential for fostering positive growth in young people.

***“Rather than simply zooming in on single segments of society, it’s time to pull back to a wide-angle view and examine how whole communities have an impact on youth, both positively and negatively. Placing young people in a larger context helps shift the focus from trouble-making youth to failing communities—from blaming the victims to building supportive environments where young people can thrive.”***<sup>1</sup>

According to the book, *What Kids Need to Succeed*, all youth need a variety of “developmental assets” — essential internal and external strengths and supports — to help them develop healthy, productive, positive lives. The book proposes that, to help adolescents avoid the risky behaviors and serious problems illustrated in this report, they need a variety of these assets in their lives. Assets which can be provided in youths' own communities include: loving and watchful parents, other caring adults, supportive schools, healthy peers, opportunities for extracurricular activities, and participation in communities of faith, to name a few.

*At-risk teens should not become our “throw-away children,” as one teen advocate characterizes some of the government’s and public’s attitude toward troubled adolescents.* They, like all young people, need the ongoing commitment of government, business, schools, communities, and families to provide the critical supports all kids need to grow and thrive. As you read through the data that follow, ask the questions: What efforts does my community make on behalf of its young people? How can I help?

## Youth Risk Behavior Survey

This is the first edition of the Vermont KIDS COUNT Data Book to include data from the 1995 Vermont Youth Risk Behavior Survey. All Vermont high schools and middle schools were invited to participate in the 1995 YRBS. School staff administered the Survey to 21,297 eighth to twelfth grade students, in 79 schools from 44 supervisory unions.

Included in this report are five measures of youth well-being. The YRBS evaluates the prevalence of behaviors that contribute to the leading causes of mortality and disease among youth. The YRBS is a critical measure of the well-being of Vermont's youths. It helps to monitor trends, compare Vermont students with their peers nationally, and plan, evaluate and improve community programs that prevent health problems and promote healthy behaviors.

The following five tables include all of the participating supervisory unions or districts. (NA's indicate supervisory unions or districts that did not participate.) The data provided are: the total number surveyed; eighth, tenth and twelfth grade rates (based on the percent of respondents); total rate for the school district or supervisory union; and a statewide rate. The statewide rate is based on a representative sample of Vermont high schools and middle schools\*.

Healthy Vermonters Goals that apply to specific YRBS behaviors are included.

\*See *Youth Risk Behavior Survey in methodology section on page 82.*

### Index of Schools in Supervisory Unions or School Districts:

Union/District	School		
Addison Central SU	Middlebury Union High School Middlebury Union Jr. High School Bridport Central School	Orange North SU	Williamstown Senior High School Williamstown Middle School
Addison Northeast SU	Mt. Abraham Union High School	Orange Southwest SU	Randolph Union High School
Addison-Rutland SU	Fair Haven Union High School Benson Village School Fair Haven Graded School Castleton Village School	Orange-Windsor SU	South Royalton School Tunbridge Elementary School
Barre City SU	Spaulding High School Spaulding Graded School	Orleans-Essex North SU (includes Essex North SU)	No. Country Union High School Coventry Village School Lowell School Newport Town School Troy School Canaan School
Blue Mountain UHS #21	Blue Mountain Union High School	Orleans Southwest SU	Hazen Union High School
Burlington Public Schools	Burlington High School Edmunds Middle School Hunt Middle School	Rutland Central SU	Proctor Jr./Sr. High School West Rutland School
Chittenden Central SU	Essex Junction High School Albert D. Lawton Middle School	Rutland City SD	Rutland High School Rutland Town School Rutland Jr. High School
Chittenden South School	Champlain Valley Union High School (No 8th grade)	Rutland Northeast SU	Otter Valley Union High School
Colchester School District	Colchester High School Colchester Middle School	Rutland South SU	Mill River Union High School
Franklin Northeast SU	Richford High School	Rutland Southwest SU	Poultney High School
Franklin Northwest SU (includes Grand Isle SU)	Missisquoi Valley Union High School Alburl Community Educational Center	S. Burlington SD	South Burlington High School F.H. Tuttle Middle School Folsom Education & Community Center North Hero Elementary School
Hartford School District	Hartford High School Hartford Memorial Middle School	Southwest Vermont SU	Mt. Anthony High School Mt. Anthony Middle School
St. Albans Area (Franklin Central & Franklin West SU)	Bellows Free Academy - St. Albans Georgia Middle School St. Albans City Elementary School St. Albans Town Central School	Springfield SD	Springfield High School Riverside Middle School
Manchester Area (Bennington-Rutland & Windsor Southwest SU)	Burr & Burton Seminary Dorset Elementary School Manchester Elementary School Flood Brook Union School	Washington Central SU	U-32 Jr./Sr. High School
Lamoille North SU	Lamoille Union High School	Washington Northeast	Twinfield Union High School Cabot School
Lamoille South SU	Stowe Jr./Sr. High School People's Academy	Washington South SU	Northfield High School & Middle School
Montpelier School District	Montpelier High School Main Street Middle School	Windham Central SU	Leland & Gray Union High School Bellows Falls Union High School Bellows Falls Middle School
Orange East SU	Oxbow High School	Windham Northeast SU	Brattleboro Union High School (No 8th grade)
		Windham Southeast SU	Whitingham School
		Windham Southwest SU	Woodstock Union High School
		Windsor Central SU	Rochester Schools
		Windsor Northwest SU	Winooski High School & Middle School
		Winooski School District	

## Sexual Activity

According to the YRBS Statewide Report, early sexual activity is associated with unwanted pregnancy and sexually transmitted diseases (STD), and negative effects on social and psychological development. Table 29 provides data specifically on the rate of youth who have ever had sexual intercourse. Overall, 44 percent of students have had sexual intercourse. The incidence is greater for students in higher grades.

Additional information about sexual behavior from the statewide sample reveals that: 31 percent of the students used alcohol or drugs prior to sex, compared with 20 percent in 1993; 55 percent of students used condoms during their most recent sexual experience; and 17 percent of females were forced or pressured to have sex, compared with 7 percent of the males.

### Healthy Vermonters 2000 Goals:

- Increase percent of schools that offer education programs on sexually transmitted diseases to 100 percent.
- Increase percent of sexually active adolescents who use condoms to at least 75 percent.

My mom cares for me when I'm sick  
or she could be my counselor, she will listen to  
my problems and not make comments when I'm  
talking.

She is normal to me she is not perfect  
I don't want her to be because she's  
my mom and I love her

## Sexual Activity

*Percent of students who have ever had sexual intercourse, 1995 YRBS*

Table 29

Supervisory Union (SU) / School District (SD)	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate	Supervisory Union/School District	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate
Addison Central SU	686	19.9	30.2	68.8	37.1	Orange Southwest SU	416	23.2	34.9	45.0	31.4
Addison Northeast SU	474	20.2	36.8	67.7	37.8	Orange-Windsor SU	199	22.2	54.3	60.0	43.7
Addison Northwest SU	NA	NA	NA	NA	NA	Orleans Central SU	NA	NA	NA	NA	NA
Addison-Rutland SU	576	28.0	46.7	64.9	45.8	Orleans-Essex North SU	962	24.4	50.5	71.8	50.3
Arlington SU	NA	NA	NA	NA	NA	Orleans Southwest SU	266	37.3	47.4	74.2	51.4
Barre City SU	805	44.6	50.0	69.0	48.0	Rutland Central SU	238	32.1	45.0	78.8	44.9
Barre Town SD	NA	NA	NA	NA	NA	Rutland City SD	902	24.9	44.3	76.1	42.2
Blue Mountain UHS #21	172	31.0	43.8	64.1	48.4	Rutland Northeast SU	492	28.8	37.2	78.3	45.0
Burlington Public Schools	1007	30.2	42.4	70.7	45.6	Rutland South SU	562	33.3	39.7	66.1	46.6
Caledonia Central SU	NA	NA	NA	NA	NA	Rutland Southwest SU	203	18.5	56.1	64.5	45.3
Caledonia North SU	NA	NA	NA	NA	NA	Rutland Windsor SU	NA	NA	NA	NA	NA
Chittenden Central SU	1036	37.9	35.3	51.6	34.6	South Burlington SD	840	21.2	40.1	44.6	34.6
Chittenden East SU	NA	NA	NA	NA	NA	Southwest Vermont SU	1055	28.5	51.4	79.2	49.7
Chittenden South SD	687	NA	31.7	53.4	37.4	Springfield SD	567	14.4	53.1	64.7	43.7
Colchester SD	728	21.1	46.6	70.8	41.9	St. Albans Area	998	34.2	44.6	71.8	49.0
Dresden SD #22	NA	NA	NA	NA	NA	St. Johnsbury SD	NA	NA	NA	NA	NA
Essex-Caledonia SU	NA	NA	NA	NA	NA	Washington Central SU	608	13.6	32.5	56.4	36.3
Essex Town SD	NA	NA	NA	NA	NA	Washington Northeast SU	221	10.8	40.5	67.9	35.2
Franklin Northeast SU	208	42.9	59.5	75.8	56.8	Washington South SU	328	27.3	49.2	54.9	44.5
Franklin Northwest SU	660	50.0	44.8	69.0	50.7	Washington West SU	NA	NA	NA	NA	NA
Hartford School District	686	21.9	46.5	61.3	44.8	Windham Central SU	275	32.8	52.6	82.9	51.5
Lamoille North SU	446	37.1	45.9	73.1	46.4	Windham Northeast SU	446	29.1	58.4	70.7	49.1
Lamoille South SU	569	22.8	37.6	74.4	41.4	Windham Southeast SU	622	NA	41.8	75.5	49.8
Manchester Area	339	14.4	28.7	60.5	31.3	Windham Southwest SU	87	6.3	42.9	85.7	45.8
Milton SD	NA	NA	NA	NA	NA	Windsor Central SU	453	24.1	40.6	61.1	38.2
Montpelier SD	450	15.9	39.6	51.7	37.3	Windsor Northwest SU	70	27.3	46.7	60.0	42.6
Orange East SU	336	20.3	51.8	63.3	48.5	Windsor Southeast SU	NA	NA	NA	NA	NA
Orange North SU	189	23.4	48.9	74.1	44.3	Winooski SD	190	25.7	53.3	86.4	52.3
<b>Vermont</b>	<b>7165</b>	<b>25.0</b>	<b>46.0</b>	<b>67.0</b>	<b>44.0</b>						

## Alcohol Use

An alarming trend of increasing alcohol use is evident among Vermont eighth and tenth graders. 40 percent of eighth graders were drinking alcohol in 1995, compared to 29 percent two years earlier. Tenth graders' use increased by 16 percent (50 percent in 1993 and 58 percent in 1995). Overall, the percent of students who drank alcohol increased by 10 percent, from 48 percent in 1993, to 53 percent in 1995.

Studies reveal that alcohol is a major contributing factor in approximately one-half of all homicides, suicides, and motor vehicle crashes. Motor vehicle crashes are the leading cause of deaths among Vermont teens (see Teen Violent Death Rate information on page 29). Table 30 provides data on the percent of students who drank alcohol in the 30 days preceding the survey.

### Healthy Vermonters 2000 Goals:

- Reduce percent of youth, aged 12 to 17, who used alcohol in the past month to 12.6 percent or less.
- Reduce percent of high school seniors who engage in heavy drinking to 28 percent or less.

ALTHOUGH MY LIFE HAS BEEN MODIFIED SEVERAL  
 TIMES THE ONLY ONE THAT'S FRESH IN MIND. ~~IS~~  
~~BEING~~ I WAS INTO DRUGS & ALCOHOL & MY GRADES WERE  
 FAILING. ~~THE~~ ~~ONE~~ ~~PERSON~~ ~~HELPED~~ ~~ME~~ ~~BRING~~  
 UP ON ME & THAT PERSON HELPED ME BRING  
 UP MY GRADES & STOP DRUGS. THAT PERSON  
 IS THEREFOR THE ONE I LOVE EARLY & THAT'S  
 MY GIRLFRIEND. THANK YOU.

I think that my dad made  
 a difference in my life.  
 Our relationship is great.  
 It always brings me places, like  
 the baseball card shop, the movies,  
 mountain biking, we go swimming and  
 there are a tons more. Even  
 if he only has a couple minutes  
 to bring me somewhere, he will bring  
 me.  
 I think he does all of those things  
 because I love him and he loves  
 me.  
 I can always talk to him about  
 my problems, sports, school, girls etc.  
 The reason I can is because  
 he is so understanding.  
 When I was little I could always  
 have him look over matters.  
 That's how he made a difference  
 in my life.



Table 30

## Alcohol Use

*Percent of students who have consumed at least one alcoholic drink in the past 30 days, 1995 YRBS*

Supervisory Union (SU) / School District (SD)	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate	Supervisory Union/School District	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate
Addison Central SU	686	40.4	61.2	55.7	53.8	Orange Southwest SU	416	27.4	47.6	61.7	44.7
Addison Northeast SU	474	42.4	60.2	73.8	57.1	Orange-Windsor SU	199	34.8	61.8	45.7	42.1
Addison Northwest SU	NA	NA	NA	NA	NA	Orleans Central SU	NA	NA	NA	NA	NA
Addison-Rutland SU	576	45.1	56.6	67.6	57.9	Orleans-Essex North SU	962	44.4	61.2	69.2	61.6
Arlington SU	NA	NA	NA	NA	NA	Orleans Southwest SU	266	49.1	57.7	54.8	53.9
Barre City SU	805	40.6	46.7	54.7	47.4	Rutland Central SU	238	46.7	61.3	75.7	53.5
Barre Town SD	NA	NA	NA	NA	NA	Rutland City SD	902	28.0	58.2	71.1	51.1
Blue Mountain UHS #21	172	23.3	61.8	68.3	52.4	Rutland Northeast SU	492	42.1	57.6	74.6	55.7
Burlington Public Schools	1007	47.4	49.7	65.4	52.6	Rutland South SU	562	32.4	50.0	60.2	51.1
Caledonia Central SU	NA	NA	NA	NA	NA	Rutland Southwest SU	203	29.6	56.1	56.7	49.2
Caledonia North SU	NA	NA	NA	NA	NA	Rutland Windsor SU	NA	NA	NA	NA	NA
Chittenden Central SU	1036	41.3	49.2	63.9	50.4	South Burlington SD	840	40.4	61.6	52.9	48.8
Chittenden East SU	NA	NA	NA	NA	NA	Southwest Vermont SU	1055	47.6	57.0	63.4	55.9
Chittenden South SD	687	NA	56.0	66.9	56.3	Springfield SD	567	26.1	53.4	61.1	45.0
Colchester SD	728	45.2	55.5	62.7	53.6	St. Albans Area	998	36.5	67.4	71.5	59.2
Dresden SD #22	NA	NA	NA	NA	NA	St. Johnsbury SD	NA	NA	NA	NA	NA
Essex-Caledonia SU	NA	NA	NA	NA	NA	Washington Central SU	608	31.6	56.1	55.7	50.2
Essex Town SD	NA	NA	NA	NA	NA	Washington Northeast SU	221	24.6	52.5	51.9	39.2
Franklin Northeast SU	208	48.6	66.7	63.6	63.1	Washington South SU	328	51.8	56.7	57.7	54.9
Franklin Northwest SU	660	66.7	54.6	63.3	60.2	Washington West SU	NA	NA	NA	NA	NA
Hartford School District	686	25.2	56.0	56.0	49.0	Windham Central SU	275	39.7	59.3	74.4	53.6
Lamoille North SU	446	50.5	59.8	56.3	52.8	Windham Northeast SU	446	42.4	54.5	78.3	54.8
Lamoille South SU	569	48.0	63.9	65.9	57.9	Windham Southeast SU	622	NA	54.9	64.4	54.8
Manchester Area	339	44.1	49.1	61.0	48.2	Windham Southwest SU	87	17.6	71.4	66.7	56.6
Milton SD	NA	NA	NA	NA	NA	Windsor Central SU	453	33.9	44.9	66.0	45.4
Montpelier SD	450	34.4	52.1	52.5	45.7	Windsor Northwest SU	70	47.8	33.3	60.0	47.8
Orange East SU	336	35.3	58.5	54.3	51.4	Windsor Southeast SU	NA	NA	NA	NA	NA
Orange North SU	189	36.2	57.1	63.0	46.7	Winooski SD	190	46.2	76.1	76.2	65.9
<b>Vermont</b>	<b>7165</b>	<b>40.0</b>	<b>58.0</b>	<b>63.0</b>	<b>53.0</b>						

## Tobacco Use

Tobacco use is the single most preventable cause of death in the U.S. In addition, smoking is related to poor academic performance and the use of alcohol and other drugs. Over 1 million youth begin smoking each year. In Vermont, 38 percent of students smoked at least one cigarette in the past 30 days (Table 31). The YRBS Statewide Report indicates that between 1993 and 1995, smoking increased from 31 to 38 percent. This was especially true for eighth and tenth graders. Specifically, eighth grade smoking increased from 20 percent to 29 percent; and among tenth graders, smoking increased from 32 percent to 41 percent.

My sister had a friend a couple of years ago that had a different attitude towards life that I never encountered. Being around him helped me realize that nothing is as important as being myself and giving everyone a fair ~~judgment~~ judgment.

One day my dad came home and said he signed me up for soccer. I thought I'd hate it, but when I got there I had a lot of fun and I got more athletic. To make me feel comfortable my dad became Asst. Coach. My Dad made a difference in my life.

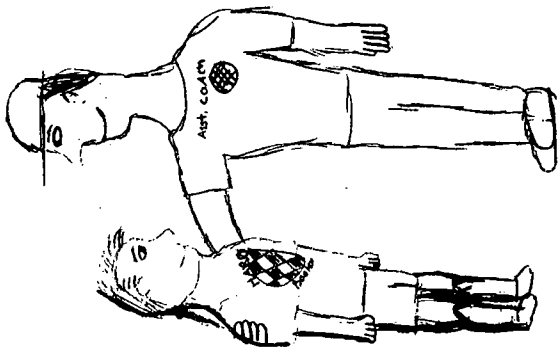




Table 31

## Tobacco Use

*Students who have smoked at least one cigarette in the past 30 days, 1995 YRBS*

Supervisory Union (SU) / School District (SD)	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate	Supervisory Union/School District	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate
Addison Central SU	686	20.6	48.1	38.5	34.2	Orange Southwest SU	416	19.0	32.5	31.1	28.8
Addison Northeast SU	474	31.9	38.5	67.8	43.8	Orange-Windsor SU	199	13.3	45.5	34.3	28.4
Addison Northwest SU	NA	NA	NA	NA	NA	Orleans Central SU	NA	NA	NA	NA	NA
Addison-Rutland SU	576	32.3	33.3	39.6	35.4	Orleans-Essex North SU	962	31.1	44.7	52.0	45.9
Arlington SU	NA	NA	NA	NA	NA	Orleans Southwest SU	266	35.6	30.5	34.4	33.7
Barre City SU	805	30.0	37.0	39.9	35.2	Rutland Central SU	238	44.8	48.4	45.9	39.6
Barre Town SD	NA	NA	NA	NA	NA	Rutland City SD	902	19.6	41.2	51.0	37.1
Blue Mountain UHS #21	172	19.4	36.4	52.5	37.2	Rutland Northeast SU	492	36.9	35.1	37.9	37.5
Burlington Public Schools	1007	40.5	43.7	45.0	43.9	Rutland South SU	562	26.5	46.7	54.6	43.0
Caledonia Central SU	NA	NA	NA	NA	NA	Rutland Southwest SU	203	13.2	43.6	25.8	26.1
Caledonia North SU	NA	NA	NA	NA	NA	Rutland Windsor SU	NA	NA	NA	NA	NA
Chittenden Central SU	1036	36.8	35.4	45.2	37.9	South Burlington SD	840	27.3	34.1	45.9	32.5
Chittenden East SU	NA	NA	NA	NA	NA	Southwest Vermont SU	1055	36.5	44.8	45.6	41.8
Chittenden South SD	687	NA	45.6	43.0	41.6	Springfield SD	567	23.5	43.0	46.6	35.4
Colchester SD	728	28.9	41.5	38.7	35.0	St. Albans Area	998	29.3	42.3	50.3	39.7
Dresden SD #22	NA	NA	NA	NA	NA	St. Johnsbury SD	NA	NA	NA	NA	NA
Essex-Caledonia SU	NA	NA	NA	NA	NA	Washington Central SU	608	36.0	41.2	38.7	42.5
Essex Town SD	NA	NA	NA	NA	NA	Washington Northeast SU	221	11.3	34.1	19.2	23.7
Franklin Northeast SU	208	30.3	37.2	38.2	41.0	Washington South SU	328	44.6	47.7	54.7	43.0
Franklin Northwest SU	660	68.4	35.5	45.0	42.3	Washington West SU	NA	NA	NA	NA	NA
Hartford School District	686	17.3	32.7	32.4	30.2	Windham Central SU	275	27.4	49.1	38.1	36.8
Lamoille North SU	446	37.6	42.7	32.3	37.8	Windham Northeast SU	446	35.0	33.0	51.6	40.0
Lamoille South SU	569	37.0	27.0	46.0	37.4	Windham Southeast SU	622	NA	38.7	39.4	38.9
Manchester Area	339	31.4	34.5	50.0	34.6	Windham Southwest SU	87	29.4	37.9	50.0	43.5
Milton SD	NA	NA	NA	NA	NA	Windsor Central SU	453	18.9	32.0	47.4	30.4
Montpelier SD	450	26.1	38.1	32.8	31.5	Windsor Northwest SU	70	22.7	13.3	40.0	20.3
Orange East SU	336	13.0	28.6	31.3	26.8	Windsor Southeast SU	NA	NA	NA	NA	NA
Orange North SU	189	19.1	33.3	42.3	31.2	Winooski SD	190	36.8	59.6	42.9	48.9
<b>Vermont</b>	<b>7,165</b>	<b>29.0</b>	<b>41.0</b>	<b>45.0</b>	<b>38.0</b>						

## Fighting

Abuse and violence are profound public health problems nationally and in Vermont. Children and youth who witness domestic violence or are themselves abused, are more likely to act violently. Table 32 reveals that 47 percent of eighth graders were in a physical fight in the past twelve months. Overall, fighting drops as students get older. According to the Statewide YRBS Report, male students were two-thirds more likely than female students to have been in a fight. (45 percent vs. 27 percent).

### Healthy Vermonters 2000 Goal

- Increase the number of schools that teach non-violent conflict resolution to at least 50 percent.

Drugs, Thrives, Fighting, wise guys. Our school is full of it. I don't want to be like that. Because if I do so will my brother I don't want him like that. I don't want my brother at teachers. That makes me mad also people never doing work. I want my brother going all the way to collage. That's skipping classes, yelling



Table 32

### Fighting Percent of students in a physical fight during the past 12 months, 1995 YRBS

Supervisory Union (SU) / School District (SD)	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate	Supervisory Union/School District	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate
Addison Central SU	686	40.1	36.4	26.3	36.4	Orange Southwest SU	416	42.9	34.1	23.0	33.8
Addison Northeast SU	474	46.2	31.9	37.7	37.2	Orange-Windsor SU	199	41.9	37.5	22.9	34.4
Addison Northwest SU	NA	NA	NA	NA	NA	Orleans Central SU	NA	NA	NA	NA	NA
Addison-Rutland SU	576	54.0	39.8	29.7	43.2	Orleans-Essex North SU	962	42.7	44.7	29.7	37.0
Arlington SU	NA	NA	NA	NA	NA	Orleans Southwest SU	266	36.8	43.6	15.6	36.2
Barre City SU	805	52.7	34.8	25.5	33.0	Rutland Central SU	238	38.2	30.6	35.9	35.2
Barre Town SD	NA	NA	NA	NA	NA	Rutland City SD	902	48.1	34.4	34.5	38.4
Blue Mountain UHS #21	172	25.8	32.4	32.5	34.9	Rutland Northeast SU	492	52.9	39.6	31.7	38.3
Burlington Public Schools	1007	49.3	36.4	25.9	37.2	Rutland South SU	562	41.2	36.8	26.4	38.2
Caledonia Central SU	NA	NA	NA	NA	NA	Rutland Southwest SU	203	49.1	52.5	21.9	40.5
Caledonia North SU	NA	NA	NA	NA	NA	Rutland Windsor SU	NA	NA	NA	NA	NA
Chittenden Central SU	1036	45.1	29.8	18.5	26.9	South Burlington SD	840	52.0	36.8	25.3	36.8
Chittenden East SU	NA	NA	NA	NA	NA	Southwest Vermont SU	1055	47.9	26.5	22.4	33.6
Chittenden South SD	687	NA	36.1	28.1	28.7	Springfield SD	567	42.0	32.2	32.4	32.9
Colchester SD	728	56.1	33.8	12.1	37.0	St. Albans Area	998	47.6	31.6	28.7	3.9
Dresden SD #22	NA	NA	NA	NA	NA	St. Johnsbury SD	NA	NA	NA	NA	NA
Essex-Caledonia SU	NA	NA	NA	NA	NA	Washington Central SU	608	40.6	29.1	23.9	32.3
Essex Town SD	NA	NA	NA	NA	NA	Washington Northeast SU	221	38.5	37.5	11.1	39.3
Franklin Northeast SU	208	27.8	41.9	35.3	32.7	Washington South SU	328	54.4	36.9	34.7	40.4
Franklin Northwest SU	660	47.6	39.3	27.8	39.3	Washington West SU	NA	NA	NA	NA	NA
Hartford School District	686	36.3	32.5	27.5	32.5	Windham Central SU	275	56.7	32.7	27.9	43.0
Lamoille North SU	446	50.0	32.4	19.4	34.6	Windham Northeast SU	446	36.8	40.0	27.4	37.6
Lamoille South SU	569	47.6	41.2	36.8	39.6	Windham Southeast SU	622	NA	28.6	22.1	28.0
Manchester Area	339	41.0	34.5	28.6	36.8	Windham Southwest SU	87	41.2	32.1	14.3	36.5
Milton SD	NA	NA	NA	NA	NA	Windsor Central SU	453	47.7	26.3	30.9	36.1
Montpelier SD	450	50.0	25.8	18.0	29.7	Windsor Northwest SU	70	36.4	53.3	75.0	40.0
Orange East SU	336	44.8	27.8	32.6	35.1	Windsor Southeast SU	NA	NA	NA	NA	NA
Orange North SU	189	52.1	47.7	33.3	45.2	Winooski SD	190	52.6	47.9	38.1	45.4
Vermont	7,165	47	37	29	37						

## Suicide

Another serious public health problem of youth is suicide. Suicide is the second leading cause of death among Vermont teens aged 15 -19 (see narrative on page 28). Table 33 provides information about students who made a suicide plan during the past 12 months. There is little difference across grade levels in the percent of youth who made a suicide plan, but there is a gender difference. According to the YRBS Statewide Report, female students were more likely than male students to make a plan (26 percent vs 19 percent) or actually attempt suicide (12 percent vs 8 percent). According to a Vermont Department of Health report, males are nearly five times more likely to complete a suicide than females, and firearms are the most commonly used method. Risk factors for suicide can include depression and isolation, and mental illness.

### Healthy Vermonters 2000 Goal

- Reduce suicide rates to less than 10.5 per 100,000 population.

1. Blyth, Dale Dr. *Healthy Communities, Healthy Youth*. Search Institute, MN, 1993.

EVERY PERSON ON MY EMERGENCY TEAM HAS HELPED MAKE A DIFFERENCE IN MY LIFE. MY THERAPIST, CASE WORKER, EMERGENCY TEAM WORKERS AND MY MEDICAL CLERK HAVE ALL HELPED ME. A BIG DIFFERENCE BETWEEN MY LIFE AND THE WAY MY MOTHER HAS MADE IT IS THAT SHE WAS STAYED WITH DIFFERENCE IN STAYING HOME WHEN I WAS IN THE HOSPITAL AND STAYED UP LONG THEY FIGHTS WITH ME WHEN I COULDN'T SLEEP. SHE HAS TAUGHT ME TO LIKE MYSELF FOR WHO I AM BUT NOT TO BE SHALLOW AND LOVE OTHERS EVEN WITH THEIR FAULTS.



Table 33

## Suicide Plans

*Percent of students who made a suicide plan in the past 12 months, 1995 YRBS*

Supervisory Union (SU) / School District (SD)	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate	Supervisory Union/School District	Number Surveyed	8th Grade Rate	10th Grade Rate	12th Grade Rate	Total Rate
Addison Central SU	686	23.7	21.0	19.6	24.3	Orange Southwest SU	416	26.3	24.1	8.2	21.9
Addison Northeast SU	474	20.8	22.1	17.7	21.1	Orange-Windsor SU	199	28.3	37.1	40.0	31.3
Addison Northwest SU	NA	NA	NA	NA	NA	Orleans Central SU	NA	NA	NA	NA	NA
Addison-Rutland SU	576	22.3	25.5	25.5	25.9	Orleans-Essex North SU	962	17.0	22.4	18.0	20.4
Arlington SU	NA	NA	NA	NA	NA	Orleans Southwest SU	266	16.1	35.7	31.3	24.3
Barre City SU	805	30.7	23.8	16.4	22.0	Rutland Central SU	238	30.6	35.9	28.2	28.0
Barre Town SD	NA	NA	NA	NA	NA	Rutland City SD	902	17.9	18.3	23.9	22.4
Blue Mountain UHS #21	172	12.1	17.1	21.4	23.4	Rutland Northeast SU	492	22.7	22.6	27.0	25.5
Burlington Public Schools	1007	25.7	21.4	17.5	21.2	Rutland South SU	562	27.2	20.8	15.6	23.2
Caledonia Central SU	NA	NA	NA	NA	NA	Rutland Southwest SU	203	24.1	14.6	21.9	20.6
Caledonia North SU	NA	NA	NA	NA	NA	Rutland Windsor SU	NA	NA	NA	NA	NA
Chittenden Central SU	1036	28.3	21.1	15.8	20.9	South Burlington SD	840	25.8	19.5	18.4	22.8
Chittenden East SU	NA	NA	NA	NA	NA	Southwest Vermont SU	1055	23.8	25.4	21.4	23.9
Chittenden South SD	687	NA	25.4	17.9	20.3	Springfield SD	567	13.9	23.7	23.4	20.2
Colchester SD	728	21.1	28.7	22.0	23.8	St. Albans Area	998	22.1	21.9	17.8	22.2
Dresden SD #22	NA	NA	NA	NA	NA	St. Johnsbury SD	NA	NA	NA	NA	NA
Essex-Caledonia SU	NA	NA	NA	NA	NA	Washington Central SU	608	18.6	20.0	13.8	18.6
Essex Town SD	NA	NA	NA	NA	NA	Washington Northeast SU	221	18.5	26.2	14.3	21.3
Franklin Northeast SU	208	15.4	15.6	14.7	17.2	Washington South SU	328	31.7	26.5	25.9	24.9
Franklin Northwest SU	660	28.6	23.8	16.0	20.3	Washington West SU	NA	NA	NA	NA	NA
Hartford School District	686	21.4	25.7	17.1	21.6	Windham Central SU	275	21.0	12.1	14.0	18.2
Lamoille North SU	446	40.2	25.2	9.0	29.7	Windham Northeast SU	446	18.6	31.9	27.0	23.4
Lamoille South SU	569	20.5	20.5	22.7	20.1	Windham Southeast SU	622	NA	17.4	21.7	18.4
Manchester Area	339	21.0	20.0	9.3	17.3	Windham Southwest SU	87	17.6	17.2	42.9	20.7
Milton SD	NA	NA	NA	NA	NA	Windsor Central SU	453	15.2	16.8	7.1	17.3
Montpelier SD	450	20.0	18.4	11.7	19.5	Windsor Northwest SU	70	21.7	26.7	40.0	30.9
Orange East SU	336	24.6	19.5	14.3	20.5	Windsor Southeast SU	NA	NA	NA	NA	NA
Orange North SU	189	25.0	8.9	11.1	18.7	Winooski SD	190	10.3	29.2	36.4	21.8
<b>Vermont</b>						<b>Vermont</b>	<b>7165</b>	<b>22.0</b>	<b>22.0</b>	<b>21.0</b>	<b>22.0</b>

### "My Parents"

My mom and dad,  
 My special in their own ways.

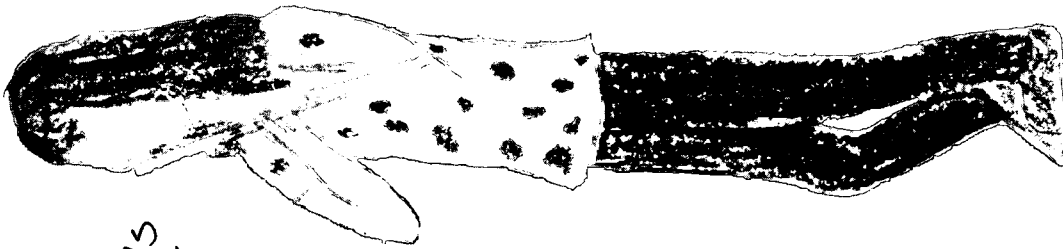
Both special in their sports,  
 My dad for sports, my two slender skis.

We'll whiz down the mountain on our two  
 My mom for when sports are done, a cup of cocoa.

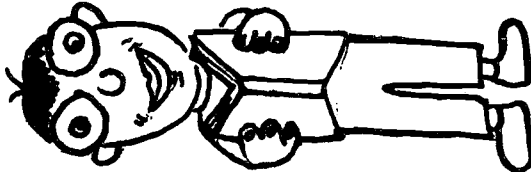
My mom for when sports are done,  
 Different but alike,  
 They both have taught me.

We relax next to a cozy fire drinking a  
 Different but alike,  
 They both have taught me.

My flute teacher has  
 shown me how music can  
 be beautiful and fun. That's  
 why she is very important  
 to me.



# BKS



My friend Peter—

He has made me turn from a dumb oaf

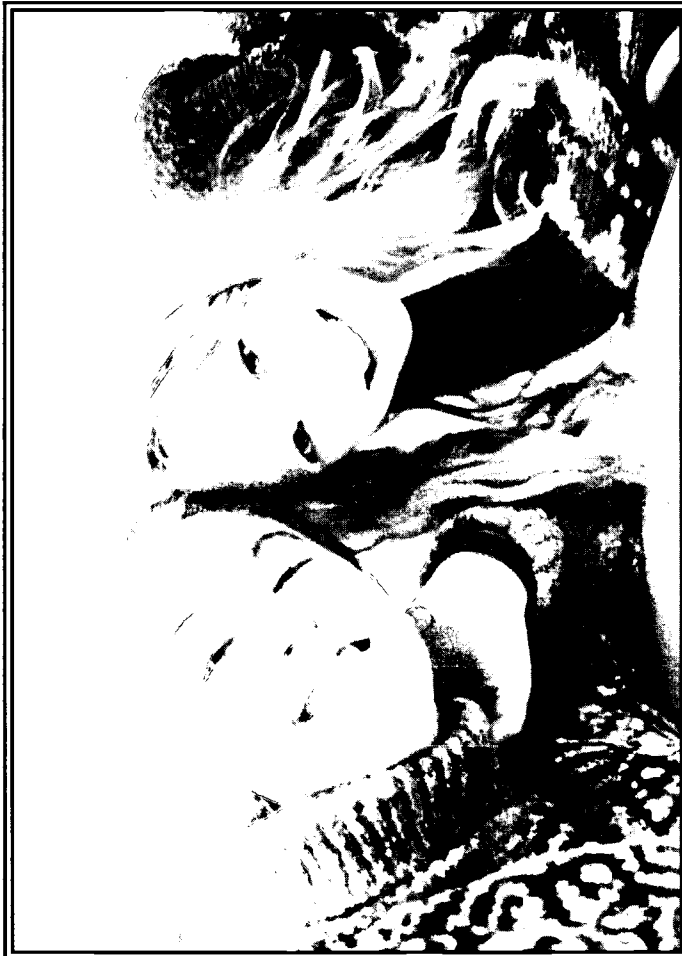
To a smarter oaf.



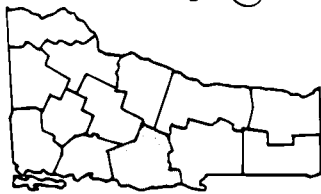
## Vermont Community Partnerships

A major theme of this year's data book is the impact of poverty on children and youth, and another focus is adolescent well-being. For both concerns, community supports play an important role in any effort to address these and other issues faced by Vermont's children, youth and families. Featured on the following County-by-County pages are community partnerships that work to positively impact their lives. Partnerships are briefly summarized. The purpose is to provide information about the unique ways in which communities work together in Vermont. They are, of course, only twelve out of the many vital partnerships that exist throughout the state. We plan to feature more in our next county-level publication.

Do not hesitate to call or write us if you know of a partnership in your community that works to enhance the lives of children, youth and families.



*Community Partnerships*



**Vermont Kids Count**

*Addison  
County*

**Residential Learning Center**

The Residential Learning Center Program (Transitional Housing Program) is a partnership of Addison County service agencies, and is designed to assist young parents and their children. It provides safe and affordable housing to young families, and opportunities for parents to further their education, acquire job skills and experience, develop financial and household management practices, and learn parenting skills. Program participants create self-development plans for themselves and their families, with the assistance of a Program counselor.

Five area agencies or state district offices coordinate their services for the Residential Learning Center Program. They are: Addison County Community Action Group, Addison County Parent Child Center, and the Vermont Departments of Social Welfare, Social and Rehabilitation Services, and Health.

For more information, call the Addison County Community Action Group at 388-3608, or the Addison County Parent Child Center at 388-3171.

**Data Notes:** Many health indicators show improving rates, following state trends. Early prenatal care, low birth weight, infant mortality, births to teens and teen violent deaths all demonstrate improvement. Following another statewide trend of rising births to single teens, the rate in Addison County increased by over 40 percent, though it is still below the state average. While the overall abuse rate declined, the sexual abuse rate increased by over 10 percent.

<b>Population</b>			
	1980	1990	1994
Children under 18	8,616	8,601	8,652
Total population	29,406	32,953	34,699
Children as a percentage of total population	29.3	26.1	24.9
			Percent change 1980-1994
			-14.9

<b>Children and Youth in Custody</b>						
	1990 <sup>1</sup>	1993 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
<b>Abuse/Neglect Custody Cases</b>						
Average daily number	47	80			62	105
Average daily rate	54	93	72.6	-		
<b>Delinquent Custody Cases</b>						
Average daily number	11	28			40	73
Average daily rate	30	72	139.6	-		
<b>Unmanageable Custody Cases</b>						
Average daily number	23	48			53	113
Average daily rate	61	126	104.5	-		

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

<b>Child Abuse and Neglect</b>						
<i>Confirmed victims of child abuse by type</i>						
	1985 <sup>1</sup>	1994 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
<b>Child Abuse and Neglect</b>						
Total Victims	68	42			111	81
Rate	80	49	-38.8	+		
<b>Physical Abuse</b>						
Physical Abuse Victims	22	9			34	22
Rate	26	10	-61.5	+		
<b>Sexual Abuse</b>						
Sexual Abuse Victims	25	28			41	40
Rate	29	32	10.3	-		
<b>Neglect</b>						
Neglect Victims	23	10			34	24
Rate	27	12	-55.6	+		

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18

*Addison County*

**Child and Youth Health Indicators**

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1983 <sup>1</sup> Vermont Rate		1993 <sup>2</sup> Vermont Rate	
	Number	Rate	Number	Rate		Rate						
Early prenatal care	396	83.0	372	84.1	1.3		+	82.3	85.3	<i>Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.</i>  <i>Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.</i> <i>Child death rate is: Deaths per 100,000 children ages 1-14.</i> <i>Infant mortality rate is: Infant deaths per 1,000 births.</i>		
Low birth weight babies	27	5.6	24	5.3	-5.4		+	6.0	5.8			
Infant mortality	4	9.0	3	7.3	-18.9		+	8.9	7.0			
Births to single teens	21	4.3	28	6.1	41.9		-	5.6	7.0			
Births to all teens	44	9.0	34	7.5	-16.7		+	10.6	8.5			
Child deaths	1	20.4	2	29.5	44.6		-	32.3	26.2			
Teen violent deaths	3	92.0	1	51.1	-44.5		+	62.4	53.9			

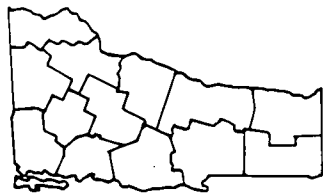
**Economic Indicators**

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1990 <sup>3</sup> Vermont Rate		1993 <sup>2</sup> Vermont Rate	
	Number	Rate	Number	Rate		Rate						
Child Poverty Rate	1019	11.7	1230	14.3	21.9		-	13.0	15.9	<i>Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.</i>  <i>Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.</i> <i>Child death rate is: Deaths per 100,000 children ages 1-14.</i> <i>Infant mortality rate is: Infant deaths per 1,000 births.</i>		
Children Receiving ANFC	593	6.9	827	9.6	38.5		-	9.8	12.9			
Children Receiving Food Stamps	812	9.4	1342	15.5	65.0		-	12.0	17.7			
New Families at Risk	11	5.5	13	7.3	32.7		-	6.7	7.8			
Children Approved for Free and Reduced-Price Lunches	637	14.5	1165	25.5	75.9		-	18.6	26.2			

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991

<sup>4</sup> = Average of years 1993 - 1995  
 \* = Single year

<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.



**Vermont Kids Count**

*Bennington  
County*

**Bennington Youth Promotion Council**

The Bennington Youth Promotion Council (BYPC) is a community forum with the mission to promote a healthy community that supports the youth of Southern Bennington County. The Council's goals include increasing youth access to, and participation in, healthy activities; assessing the strengths and needs of area youth and helping to develop programs that serve those strengths and needs; and providing public education on youth assets and strengths.

The Youth Promotion Council is sponsored by the Southwestern Vermont Supervisory Union, and is comprised of youth, parents, service providers, clergy, government officials and interested residents of the Bennington community. In conjunction with the BYPC, the Bennington Youth Council, comprised of local young people, works to promote healthy activities for the area's youth.

For more information, contact Al Bashevkin at 447-7501.

**Data Notes:** Following statewide trends, child abuse and neglect declined and the county rate is lower than the state average. Both child poverty, and the number of children eligible to receive no- and low-cost lunches has risen, and the child poverty rate is higher than the state average.

Population			
	1980	1990	1994
Children under 18	9,330	8,993	8,985
Total population	33,345	35,845	36,167
Children as a percentage of total population	28.0	25.1	24.8
			Percent change 1980-1994
			-11.2

**Children and Youth in Custody**

	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
	Average daily number	Average daily rate	Average daily number	Average daily rate		Average daily number	Average daily rate		
<b>Abuse/Neglect Custody Cases</b>									
Average daily number	52	88	58	99	70.5	-	62	105	
Average daily rate									
<b>Delinquent Custody Cases</b>									
Average daily number	20	32	55	80	46.6	-	40	73	
Average daily rate									
<b>Unmanageable Custody Cases</b>									
Average daily number	16	41	44	104	137.7	-	53	113	
Average daily rate									

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>		1994 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
	Total Victims	Rate	Total Victims	Rate		Total Victims	Rate		
<b>Child Abuse and Neglect</b>									
Total Victims	93	67	67	74	-28.2	+	111	81	
Rate									
<b>Physical Abuse</b>									
Physical Abuse Victims	23	23	23	26	4.0	-	34	22	
Rate									
<b>Sexual Abuse</b>									
Sexual Abuse Victims	47	31	31	34	-34.6	+	41	40	
Rate									
<b>Neglect</b>									
Neglect Victims	25	14	14	16	-42.9	+	34	24	
Rate									

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18



### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Early prenatal care	429	80.6	341	82.4	2.2	+	82.3	85.3
Low birth weight babies	34	6.4	26	5.8	-9.4	+	6.0	5.8
Infant mortality	6	11.2	3	7.6	-32.1	+	8.9	7.0
Births to single teens	35	6.5	32	7.2	10.8	-	5.6	7.0
Births to all teens	64	11.9	44	10.1	-15.1	+	10.6	8.5
Child deaths	3	47.6	1	9.4	-80.3	+	32.3	26.2
Teen violent deaths	1	35.0	1	59.6	70.3	-	62.4	53.9

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.

Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.

Child death rate is: Deaths per 100,000 children ages 1-14.

Infant mortality rate is: Infant deaths per 1,000 births.

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Child Poverty Rate	1467	16.3	1607	17.9	10.5	-	13.0	15.9
Children Receiving ANFC	1068	11.8	1230	13.7	16.0	-	9.8	12.9
Children Receiving Food Stamps	1284	14.2	1662	18.5	30.3	-	12.0	17.7
New Families at Risk	16	7.5	15	9.1	21.3	-	6.7	7.8
Children Approved for Free and Reduced-Price Lunches	862	16.3	1177	23.5	44.2	-	18.6	26.2

Percent change in rate

1990-1993

1990-1994

1983-1993

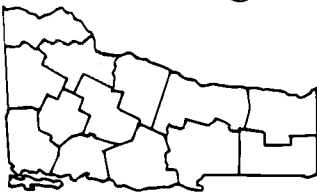
1989-1994

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
<sup>\*</sup> = Single year

<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.



Vermont Kids Count



Caledonia County

**Hardwick Area Patch Project**

The Hardwick Patch Project is a coordinated effort to provide social service and education programs to area residents in their own community. The Patch is run by community members and service providers who are working together to help determine both the needs of the community, and to identify its strengths and assets.

The Patch Team consists of eight organizations that have committed financial and staff resources to work more effectively with area residents and help build stronger and healthier communities in the region. The eight organizations include: Orleans Southwest Supervisory Union, Lamoille County Mental Health, Lamoille Family Center, and the State Departments of Social and Rehabilitation Services, Social Welfare, Public Health, Vocational Rehabilitation, and Employment and Training.

For more information, call 472-3127.

**Data Notes:** Following statewide trends, all categories of child abuse or neglect have declined. The child poverty rate has increased, and is substantially higher than the state average. Health indicators that show improvement include early prenatal care, births to teens and teen violent deaths.

Population			
	1980	1990	1994
Children under 18	7,585	7,680	7,745
Total population	25,808	27,846	28,579
Children as a percentage of total population	29.4	27.6	27.1
			Percent change 1980-1994
			-7.8

**Children and Youth in Custody**

	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
	Average daily number	Average daily rate	Average daily number	Average daily rate					
<b>Abuse/Neglect Custody Cases</b>									
Average daily number	83	124	107	160	49.4	-		62	105
Average daily rate									
<b>Delinquent Custody Cases</b>									
Average daily number	6	15	19	42	123.6	-		40	73
Average daily rate									
<b>Unmanageable Custody Cases</b>									
Average daily number	17	27	48	73	51.3	-		53	113
Average daily rate									

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>		1994 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
	Total Victims	Rate	Total Victims	Rate					
<b>Child Abuse and Neglect</b>									
Total Victims	92	64	64	81	-33.6	+		111	81
Rate	122	81							
<b>Physical Abuse</b>									
Physical Abuse Victims	25	16	16	21	-36.4	+		34	22
Rate	33	21							
<b>Sexual Abuse</b>									
Sexual Abuse Victims	34	32	32	40	-11.1	+		41	40
Rate	45	40							
<b>Neglect</b>									
Neglect Victims	33	20	20	25	-43.2	+		34	24
Rate	44	25							

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18

### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate	Number	Rate			
Early prenatal care	309	80.9	286	85.2	5.3	+	82.3	85.3	
Low birth weight babies	22	5.7	22	6.5	14.0	-	6.0	5.8	
Infant mortality	3	8.7	4	11.6	33.3	-	8.9	7.0	
Births to single teens	25	6.6	26	7.5	13.6	-	5.6	7.0	
Births to all teens	53	13.7	35	10.1	-26.3	+	10.6	8.5	
Child deaths	1	23.3	2	27.4	17.6	-	32.3	26.2	
Teen violent deaths	1	56.2	1	33.7	-40.0	+	62.4	53.9	

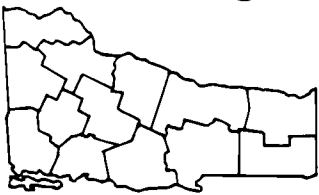
Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.  
 Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.  
 Child death rate is: Deaths per 100,000 children ages 1-14.  
 Infant mortality rate is: Infant deaths per 1,000 births.

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate	Number	Rate			
Child Poverty Rate	1329	17.3	1556	20.1	16.2	-	13.0	15.9	
Children Receiving ANFC	905	11.8	1153	14.9	26.2	-	9.8	12.9	
Children Receiving Food Stamps	1197	15.5	1724	22.3	43.6	-	12.0	17.7	
New Families at Risk	13	8.6	9	7.2	-16.3	+	6.7	7.8	
Children Approved for Free and Reduced-Price Lunches	1124	27.5	1942	35.3	28.4	-	18.6	26.2	

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
 \* = Single year  
<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.





## Vermont Kids Count

# Chittenden County

### Education Program for Homeless Youth

The Burlington School District and Spectrum Youth and Family Services sponsor a joint project for the education of homeless youth. A Burlington school teacher works directly with homeless youth at Spectrum One Stop (SOS) — a multi-service program for homeless youth located in Burlington. A critical goal of the educational project is to help homeless youth reestablish positive feelings about education.

The services offered by the joint educational project include tutoring; supplemental instruction and enriched educational services; maintaining an on-site GED preparation program; referral of homeless youth to needed medical, dental, mental and other health services; and making available before- and after-school support and mentoring.

For more information, contact SOS at 862-5396.

**Data Notes:** Many health measures show improvement. Rates of low birth weight, infant mortality, births to teens, child deaths and teen violent deaths are all below their corresponding state averages. Following statewide trends, children and youth in custody have increased in all categories and all are well above state averages. Over 3,700 children and youth live below the poverty line and the rate of child poverty has increased by over 25 percent.

	Population			Percent change 1980-1994
	1980	1990	1994	
Children under 18	31,792	30,816	32,264	-15.5
Total population	115,530	131,761	138,770	
Children as a percentage of total population	27.5	23.4	23.2	

## Children and Youth in Custody

	1990 <sup>1</sup>	1993 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)		Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
<b>Abuse/Neglect Custody Cases</b>	117	308	161.3	-		62	105
Average daily number	38	98					
Average daily rate							
<b>Delinquent Custody Cases</b>	57	110	88.0	-		40	73
Average daily number	45	84					
Average daily rate							
<b>Unmanageable Custody Cases</b>	95	281	185.9	-		53	113
Average daily number	75	214					
Average daily rate							

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

## Child Abuse and Neglect

### Confirmed victims of child abuse by type

	1985 <sup>1</sup>	1994 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)		Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
<b>Child Abuse and Neglect</b>	291	236	-21.3	+		111	81
Total Victims	94	74					
Rate							
<b>Physical Abuse</b>	93	70	-26.7	+		34	22
Physical Abuse Victims	30	22					
Rate							
<b>Sexual Abuse</b>	99	103	0.0	same		41	40
Sexual Abuse Victims	32	32					
Rate							
<b>Neglect</b>	84	74	-14.8	+		34	24
Neglect Victims	27	23					
Rate							

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18



### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-)†		1993 <sup>2</sup> Vermont Rate	
	Number	Rate	Number	Rate	Percent change in rate	Percent change in rate	Improved (+) Worsened (-)†	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate	
Early prenatal care	1583	88.5	1628	86.3	-2.5	-	-	82.3	85.3	
Low birth weight babies	106	5.9	106	5.5	-6.8	+	+	6.0	5.8	
Infant mortality	15	8.2	12	6.1	-25.6	+	+	8.9	7.0	
Births to single teens	88	4.9	100	5.1	4.1	-	-	5.6	7.0	
Births to all teens	149	8.3	123	6.3	-24.1	+	+	10.6	8.5	
Child deaths	4	16.9	3	13.3	-21.3	+	+	32.3	26.2	
Teen violent deaths	6	47.7	4	40.6	-14.9	+	+	62.4	53.9	

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.

Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.

Child death rate is: Deaths per 100,000 children ages 1-14.

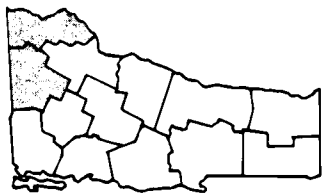
Infant mortality rate is: Infant deaths per 1,000 births.

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-)†		1990 <sup>3</sup> Vermont Rate	
	Number	Rate	Number	Rate	Percent change in rate	Percent change in rate	Improved (+) Worsened (-)†	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate	
Child Poverty Rate	2926	9.4	3705	11.8	25.2	-	-	13.0	15.9	
Children Receiving ANFC	2661	8.6	3724	11.5	34.2	-	-	9.8	12.9	
Children Receiving Food Stamps	2748	8.9	4292	13.3	45.5	-	-	12.0	17.7	
New Families at Risk	45	5.2	46	5.7	9.6	-	-	6.7	7.8	
Children Approved for Free and Reduced-Price Lunches	2340	12.2	4046	19.1	56.6	-	-	18.6	26.2	

† The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
\* = Single year



**Vermont Kids Count**

*Essex/Orleans  
Counties*

**Northeast Kingdom Workforce Investment Board**

The Northeast Kingdom Workforce Investment Board (WIB) helps coordinate workforce training and education programs throughout the region. The purpose of the board is to pull together education and service agencies, and the private sector. "Weaving a partnership of technology and work for the Northeast Kingdom" is the goal, according to the program's slogan.

The WIB consists of five committees: School-to-Work, Welfare-to-Work, Workforce Education Roundtable, Membership/Community Involvement, and the Steering Committee. Examples of WIB Committee initiatives include: calling attention to the desperate need for child-care providers; A School-to-Work business and education communication forum; a process to help parents who are receiving welfare prepare for work; and a free seminar for employers who are interested in updating computer software.

For more information, contact NEK WIB at 334-7316.

**Data Notes:** Early prenatal care, infant mortality and child death rates all show improvement. Following statewide trends, economic indicators show worsening conditions, and all rates are substantially higher than state averages. Over 43 percent of school children are eligible for free or reduced-price lunches.

Population			
	1980	1990	1994
Children under 18	9,267	8,532	8,432
Total population	29,753	30,458	31,429
Children as a percentage of total population	31.1	28.0	26.8
			Percent change 1980-1994
			-13.9

**Children and Youth in Custody**

	1990 <sup>1</sup>	1993 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
<b>Abuse/Neglect Custody Cases</b>						
Average daily number	76	115				
Average daily rate	88	135	53.1	-	62	105
<b>Delinquent Custody Cases</b>						
Average daily number	18	42				
Average daily rate	45	105	130.9	-	40	73
<b>Unmanageable Custody Cases</b>						
Average daily number	10	25				
Average daily rate	25	63	150.0	-	53	113

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>	1994 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
<b>Child Abuse and Neglect</b>						
Total Victims	117	59				
Rate	133	71	-46.6	+	111	81
<b>Physical Abuse</b>						
Physical Abuse Victims	31	10				
Rate	36	12	-66.7	+	34	22
<b>Sexual Abuse</b>						
Sexual Abuse Victims	45	40				
Rate	52	47	-9.6	+	41	40
<b>Neglect</b>						
Neglect Victims	54	12				
Rate	61	15	-75.4	+	34	24

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18



### Child and Youth Health Indicators

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values. Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19. Child death rate is: Deaths per 100,000 children ages 1-14. Infant mortality rate is: Infant deaths per 1,000 births.

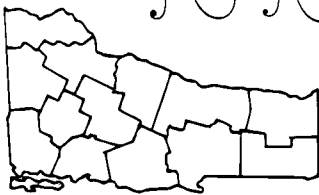
	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate	Number	Rate				
Early prenatal care	326	74.0	311	83.2	12.4		+	82.3	85.3	
Low birth weight babies	25	5.6	27	6.9	23.2		-	6.0	5.8	
Infant mortality	4	8.2	2	5.1	-37.8		+	8.9	7.0	
Births to single teens	23	5.1	37	9.5	86.3		-	5.6	7.0	
Births to all teens	55	12.3	48	12.4	0.8		-	10.6	8.5	
Child deaths	4	63.2	2	29.8	-52.8		+	32.3	26.2	
Teen violent deaths	2	93.0	2	116.4	25.2		-	62.4	53.9	

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate	Number	Rate				
Child Poverty Rate	1633	19.0	1891	22.2	16.8		-	13.0	15.9	
Children Receiving ANFC	1137	13.3	1358	16.1	21.1		Improved (+) Worsened (-) <sup>†</sup>	9.8	12.9	
Children Receiving Food Stamps	1586	18.6	2270	26.9	44.7		-	12.0	17.7	
New Families at Risk	12	6.7	16	10.3	53.7		-	6.7	7.8	
Children Approved for Free and Reduced-Price Lunches	1719	34.4	2525	43.4	26.2		Improved (+) Worsened (-) <sup>†</sup>	18.6	26.2	

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
<sup>\*</sup> = Single year  
<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.





**Vermont Kids Count**

*Franklin  
Grand Isle  
Counties*

**Georgia Elementary and Middle School Mentor (GEMM) Program**

The GEMM Program is a school-business-community Mentor Partnership between Georgia Elementary and Middle School, and Wyeth Nutritional. This project is based on the statewide Vermont Initiative for Mentoring (VIM), which is sponsored by the Vermont Chamber of Commerce Business/Education Partnership.

The GEMM Program provides Georgia Elementary and Middle School students with mentors – employees of Wyeth Nutritional – who meet regularly with students at the school. Trained by VIM staff, mentors are paired with students for a year and work one-on-one for two hours a month. Learning and development activities are provided to help students to develop their abilities and talents.

For more information, contact Judy Laraway at 524-6358.

**Data Notes:** *The rate of women receiving early prenatal care has improved, and the infant mortality rate has dropped by over 44 percent. Bucking statewide trends, abuse and neglect rates continue to increase in all categories and custody rates are well above state averages. The rate of births to single teens has increased by 24.2 percent, and the rate of New Families at Risk is higher than the state average.*

Population			
	1980	1990	1994
Children under 18	12,638	13,191	13,517
Total population	39,401	45,290	47,958
Children as a percentage of total population	32.1	29.1	28.2
			Percent change 1980-1994
			-12.1

**Children and Youth in Custody**

	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
	Average daily number	Average daily rate	Average daily number	Average daily rate					
<b>Abuse/Neglect Custody Cases</b>									
Average daily number	143	212	108	157	44.9	-	62	105	
Average daily rate									
<b>Delinquent Custody Cases</b>									
Average daily number	19	41	34	68	97.6	-	40	73	
Average daily rate									
<b>Unmanageable Custody Cases</b>									
Average daily number	26	68	46	112	141.1	-	53	113	
Average daily rate									

<sup>1</sup> Average 1989-1991    <sup>2</sup> Average 1992-1994    Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>		1994 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
	Total Victims	Rate	Total Victims	Rate					
<b>Child Abuse and Neglect</b>									
Total Victims	100	148	78	108	38.5	-	111	81	
Rate									
<b>Physical Abuse</b>									
Physical Abuse Victims	32	37	25	27	8.0	-	34	22	
Rate									
<b>Sexual Abuse</b>									
Sexual Abuse Victims	35	77	28	56	100.00	-	41	40	
Rate									
<b>Neglect</b>									
Neglect Victims	31	40	25	30	20.0	-	34	24	
Rate									

<sup>1</sup> Average of 1984-1986    <sup>2</sup> Average of 1993-1995    Rate= Number of victims per 10,000 children under 18

### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Early prenatal care	554	79.5	593	84.3	6.0	+	82.3	85.3
Low birth weight babies	40	5.8	47	6.4	10.3	-	6.0	5.8
Infant mortality	6	9.0	4	5.0	-44.4	+	8.9	7.0
Births to single teens	46	6.6	59	8.2	24.2	-	5.6	7.0
Births to all teens	82	11.7	79	10.9	-6.8	+	10.6	8.5
Child deaths	5	51.2	4	34.6	-32.4	+	32.3	26.2
Teen violent deaths	3	86.4	2	64.7	-25.1	+	62.4	53.9

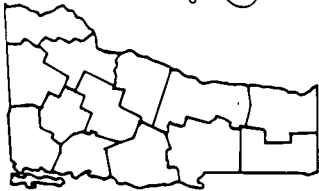
Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values. Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19. Child death rate is: Deaths per 100,000 children ages 1-14. Infant mortality rate is: Infant deaths per 1,000 births.

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Child Poverty Rate	1847	13.9	2180	16.2	16.3	-	13.0	15.9
Children Receiving ANFC	1434	10.8	1728	12.8	18.4	-	9.8	12.9
Children Receiving Food Stamps	1811	13.7	2603	19.3	40.6	-	12.0	17.7
New Families at Risk	27	9.2	33	11.3	22.8	-	6.7	7.8
Children Approved for Free and Reduced-Price Lunches	1957	21.7	2792	29.8	37.3	-	18.6	26.2

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
 \* = Single year  
<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.





**Vermont Kids Count**

*Lamoille  
County*

**People in Partnership**

People in Partnership is a coalition of community members and regionally-based health, education and human service providers in the Lamoille Valley region. By working together, they are improving supports and resources for children, families and individuals in ways that support their mission to "promote the growth of shared responsibility among members of every community in the Lamoille Valley region."

People in Partnership is working to: find better ways to understand and respond to community needs, effectively coordinate community services, and actively involve citizens.

For more information, call 888-4576.

**Data Notes:** All categories of abuse or neglect declined and are well below the state averages. Economic indicators mirror statewide trends of increasing rates of child poverty and New Families at Risk, as well as the rates of children receiving Food Stamps, ANFC Benefits and those eligible for no- and low-cost lunches.

Population			
	1980	1990	1994
Children under 18	4,830	5,072	5,275
Total population	16,767	19,735	21,076
Children as a percentage of total population	28.8	25.7	25.0
			Percent change 1980-1994
			-13.1

**Children and Youth in Custody**

	1990 <sup>1</sup>	1993 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
<b>Abuse/Neglect Custody Cases</b>						
Average daily number	30	47				
Average daily rate	58	91	55.4	-	62	105
<b>Delinquent Custody Cases</b>						
Average daily number	6	17				
Average daily rate	26	75	193.2	-	40	73
<b>Unmanageable Custody Cases</b>						
Average daily number	10	21				
Average daily rate	48	92	93.1	-	53	113

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>	1994 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
<b>Child Abuse and Neglect</b>						
Total Victims	38	22				
Rate	77	41	-46.8	+	111	81
<b>Physical Abuse</b>						
Physical Abuse Victims	9	7				
Rate	19	13	-31.6	+	34	22
<b>Sexual Abuse</b>						
Sexual Abuse Victims	18	12				
Rate	37	22	-40.5	+	41	40
<b>Neglect</b>						
Neglect Victims	10	3				
Rate	20	6	-70.0	+	34	24

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18

### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1983 <sup>1</sup> Vermont Rate		1993 <sup>2</sup> Vermont Rate	
	Number	Rate	Number	Rate		Rate						
Early prenatal care	233	78.5	235	84.9	8.2		+	82.3	85.3			
Low birth weight babies	21	7.0	13	4.5	-35.7		+	6.0	5.8			
Infant mortality	3	11.1	1	2.3	-79.3		+	8.9	7.0			
Births to single teens	18	6.0	18	6.3	5.0		-	5.6	7.0			
Births to all teens	34	11.4	28	9.6	-15.8		+	10.6	8.5			
Child deaths	1	35.6	3	64.9	82.3		-	32.3	26.2			
Teen violent deaths	2	102.9	0	0.0	-100.0		+	62.4	53.9			

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.

Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.

Child death rate is: Deaths per 100,000 children ages 1-14.

Infant mortality rate is: Infant deaths per 1,000 births.

### Economic Indicators

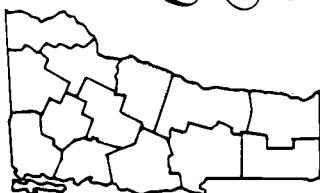
	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1990 <sup>3</sup> Vermont Rate		1993 <sup>2</sup> Vermont Rate	
	Number	Rate	Number	Rate		Rate						
Child Poverty Rate	796	15.5	1002	19.3	24.2		-	13.0	15.9			
Children Receiving ANFC	451	8.9	621	11.8	32.3		-	9.8	12.9			
Children Receiving Food Stamps	625	12.3	967	18.3	49.0		-	12.0	17.7			
New Families at Risk	9	6.8	10	8.3	22.1		-	6.7	7.8			
Children Approved for Free and Reduced-Price Lunches	670	19.9	1090	29.3	47.2		-	18.6	26.2			

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
<sup>\*</sup> = Single year  
<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.





Vermont Kids Count



Orange County

**Vershire School Breakfast and Lunch Program**

A partnership between Chelsea and Vershire Public Schools ensures that school breakfast and lunch programs are available to students at the Vershire Elementary School.

Chelsea Public School, supported, in part, by the Vermont Campaign To End Childhood Hunger (VCECH), produces meals and transports them to Vershire to ensure that public school students have access to school breakfasts and lunches. Without this partnership, Vershire would be unable to provide the school meals, due to the increasing costs of maintaining the program at its own school.

For more information, contact VCECH at 865-0255.

**Data Notes:** Births to teens, prenatal care and infant mortality rates all show improvements, following state trends. The child poverty rate has increased by nearly 26 percent and is higher than the state average. Abuse and neglect rates have dropped in all categories, but custody rates continue to increase.

Population			
	1980	1990	1994
Children under 18	6,845	7,242	7,369
Total population	22,739	26,149	26,569
Children as a percentage of total population	30.1	27.7	27.7
			Percent change 1980-1994
			-7.9

**Children and Youth in Custody**

	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
	Average daily number	Average daily rate	Average daily number	Average daily rate					
<b>Abuse/Neglect Custody Cases</b>									
Average daily number	34	50	47	68	44.7	-		62	105
Average daily rate									
<b>Delinquent Custody Cases</b>									
Average daily number	5	14	15	41	174.4	-		40	73
Average daily rate									
<b>Unmanageable Custody Cases</b>									
Average daily number	6	16	18	47	157.6	-		53	113
Average daily rate									

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>		1994 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
	Total Victims	Rate	Total Victims	Rate					
<b>Child Abuse and Neglect</b>									
Total Victims	87	54	124	73	-41.1	+		111	81
Rate									
<b>Physical Abuse</b>									
Physical Abuse Victims	28	19	40	26	-35.0	+		34	22
Rate									
<b>Sexual Abuse</b>									
Sexual Abuse Victims	36	24	51	33	-35.4	+		41	40
Rate									
<b>Neglect</b>									
Neglect Victims	17	17	24	23	-4.2	+		34	24
Rate									

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18



### Child and Youth Health Indicators

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.

Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.

Child death rate is: Deaths per 100,000 children ages 1-14.

Infant mortality rate is: Infant deaths per 1,000 births.

	1983 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Early prenatal care	315	85.4	282	86.2	0.9	+	82.3	85.3
Low birth weight babies	18	4.9	19	5.5	12.2	-	6.0	5.8
Infant mortality	2	5.4	1	2.0	-63.0	+	8.9	7.0
Births to single teens	15	3.9	25	7.4	89.7	-	5.6	7.0
Births to all teens	39	10.4	34	10.1	-2.9	+	10.6	8.5
Child deaths	2	31.6	3	45.9	45.3	-	32.3	26.2
Teen violent deaths	1	48.4	1	73.3	51.4	-	62.4	53.9

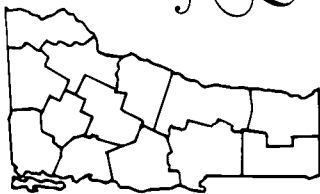
### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Child Poverty Rate	1013	14.0	1296	17.7	25.9	-	13.0	15.9
Children Receiving ANFC	607	8.4	868	11.8	40.2	-	9.8	12.9
Children Receiving Food Stamps	815	11.2	1366	18.5	65.5	-	12.0	17.7
New Families at Risk	9	6.0	12	9.0	50.0	-	6.7	7.8
Children Approved for Free and Reduced-Price Lunches	1021	22.6	1606	31.7	40.3	-	18.6	26.2

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
<sup>\*</sup> = Single year  
<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.



## Vermont Kids Count



*Rutland  
County*

### Neshobe Family Network

The Neshobe Family Network in Brandon offers coordinated services to all families with young children (birth to age six) in the Brandon area. These services include a drop-in family room, resources and referrals, and community outreach. This is a partnership of parents and service providers — the Board of Directors consists of 50 percent parents, and 50 percent service providers, agency professionals, and community members.

Some of the partners on the Advisory Committee of the Neshobe Family Network include: the Rutland County Parent Child Center, Associates in Child and Family Services, Vermont Adult Learning, Children's Growth Company, Neshobe School, Early Childhood Education, and community members.

For more information, call 247-4418.

**Data Notes:** Most health indicators show improvement — the low birth weight rate decreased by over 20 percent. The overall abuse and neglect rate declined, while the physical abuse rate showed no change. All of the economic measures show worsening rates, and all are above the state averages.

Population			
	1980	1990	1994
Children under 18	15,825	14,993	15,098
Total population	58,347	62,142	62,506
Children as a percentage of total population	27.1	24.1	24.2
			Percent change 1980-1994
			-10.9

## Children and Youth in Custody

	1990 <sup>1</sup>	1993 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
<b>Abuse/Neglect Custody Cases</b>						
Average daily number	91	113				
Average daily rate	60	75	24.8	-	62	105
<b>Delinquent Custody Cases</b>						
Average daily number	39	52				
Average daily rate	61	83	36.4	-	40	73
<b>Unmanageable Custody Cases</b>						
Average daily number	56	76				
Average daily rate	87	123	41.3	-	53	113

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

## Child Abuse and Neglect

Confirmed victims of child abuse by type

	1985 <sup>1</sup>	1994 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
<b>Child Abuse and Neglect</b>						
Total Victims	144	107				
Rate	94	71	-24.5	+	111	81
<b>Physical Abuse</b>						
Physical Abuse Victims	30	30				
Rate	20	20	0	same	34	22
<b>Sexual Abuse</b>						
Sexual Abuse Victims	63	56				
Rate	41	38	-7.3	+	41	40
<b>Neglect</b>						
Neglect Victims	56	26				
Rate	37	17	-54.1	+	34	24

<sup>1</sup>Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18



### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate	Percent change in rate	Rate			
Early prenatal care	649	78.7	626	84.4	7.2	+	82.3	85.3	
Low birth weight babies	61	7.4	45	5.9	-20.3	+	6.0	5.8	
Infant mortality	7	8.4	5	6.1	-27.4	+	8.9	7.0	
Births to single teens	50	6.0	54	7.1	18.3	-	5.6	7.0	
Births to all teens	93	11.3	67	8.8	-22.1	+	10.6	8.5	
Child deaths	4	31.3	2	14.0	-55.3	+	32.3	26.2	
Teen violent deaths	2	38.1	3	86.3	125.5	-	62.4	53.9	

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values. Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19. Child death rate is: Deaths per 100,000 children ages 1-14. Infant mortality rate is: Infant deaths per 1,000 births.

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate	Percent change in rate	Rate			
Child Poverty Rate	1966	13.0	2525	16.9	30.1	-	13.0	15.9	
Children Receiving ANFC	1559	10.4	2248	14.9	43.2	-	9.8	12.9	
Children Receiving Food Stamps	1871	12.4	3009	19.9	60.7	-	12.0	17.7	
New Families at Risk	29	7.9	21	7.9	0.0	same	6.7	7.8	
Children Approved for Free and Reduced-Price Lunches	1636	18.1	2662	27.0	49.2	-	18.6	26.2	

1990-1993 Percent change in rate

1990-1994 Percent change in rate

1983-1993 Percent change in rate

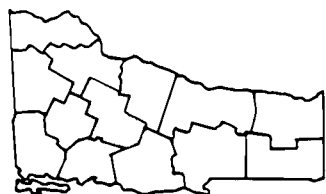
1989-1994 Percent change in rate

<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
 \* = Single year



Vermont Kids Count



Washington County

**Barre Gardens For Learning**

Gardens For Learning is a summer youth gardening project, coordinated by Food Works, and in collaboration with the Vermont Campaign to End Childhood Hunger (VCECH), Barre Cityscape, and the Barre City School. The essential goals are to engage Vermont youth in hands-on food gardening activities, over the summer months, and to teach youth basic skills and concepts in nutrition education.

The program is located at the Barre City Elementary and Middle School. An after-school gardening project was started to enable students to start seedlings for the summer gardens. Project activities focus on the whys and hows of growing your own food. The vegetables were used in the summer lunch program, as well as eaten by the gardeners.

A manual on developing school/community youth gardens will be available from Food Works in the spring of 1997.

For more information, call Food Works at 223-1515.

**Data Notes:** All health indicators show improvement and the rate of births to single teens decreased, bucking statewide trends. The early prenatal care rate is nearly 90 percent. The overall abuse and neglect rate has dropped, but the rate of sexual abuse has increased. The county rate of delinquent youth in custody is higher than the state average.

Population			
	1980	1990	1994
Children under 18	14,642	13,940	14,001
Total population	52,393	54,928	56,180
Children as a percentage of total population	27.9	25.4	24.9
			Percent change 1980-1994
			-10.8

**Children and Youth in Custody**

	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
	Average daily number	Average daily rate	Average daily number	Average daily rate					
<b>Abuse/Neglect Custody Cases</b>									
Average daily number	99	156	70	112	58.5	-		62	105
Average daily rate									
<b>Delinquent Custody Cases</b>									
Average daily number	25	53	41	83	100.1	-		40	73
Average daily rate									
<b>Unmanageable Custody Cases</b>									
Average daily number	21	37	35	58	62.3	-		53	113
Average daily rate									

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>		1994 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
	Total Victims	Rate	Total Victims	Rate					
<b>Child Abuse and Neglect</b>									
Total Victims	192	148	135	106	-21.5	+		111	81
Rate									
<b>Physical Abuse</b>									
Physical Abuse Victims	67	34	47	24	-48.9	+		.34	22
Rate									
<b>Sexual Abuse</b>									
Sexual Abuse Victims	76	81	53	58	9.4	-		41	40
Rate									
<b>Neglect</b>									
Neglect Victims	48	47	34	34	0.0	same		34	24
Rate									

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18



### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1983 <sup>1</sup> Vermont Rate		1993 <sup>2</sup> Vermont Rate	
	Number	Rate	Number	Rate	Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	Improved (+) Worsened (-) <sup>†</sup>	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate			
Early prenatal care	652	83.6	602	89.3	6.8	+		82.3	85.3			
Low birth weight babies	49	6.2	40	5.9	-4.8	+		6.0	5.8			
Infant mortality	9	11.5	8	11.1	-3.5	+		8.9	7.0			
Births to single teens	46	5.8	36	5.2	-10.3	+		5.6	7.0			
Births to all teens	91	11.6	46	6.7	-42.2	+		10.6	8.5			
Child deaths	3	30.6	2	18.0	-41.2	+		32.3	26.2			
Teen violent deaths	2	50.5	2	47.9	-5.1	+		62.4	53.9			

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.

Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.

Child death rate is: Deaths per 100,000 children ages 1-14.

Infant mortality rate is: Infant deaths per 1,000 births.

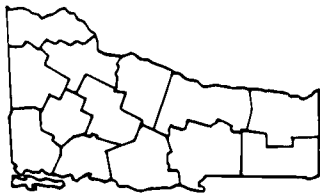
### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1990 <sup>3</sup> Vermont Rate		1993 <sup>2</sup> Vermont Rate	
	Number	Rate	Number	Rate	Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	Improved (+) Worsened (-) <sup>†</sup>	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate			
Child Poverty Rate	1675	11.9	2104	15.0	26.3	-		13.0	15.9			
Children Receiving ANFC	1255	9.0	1740	12.4	38.1	-		9.8	12.9			
Children Receiving Food Stamps	1542	11.0	2285	16.3	48.4	-		12.0	17.7			
New Families at Risk	25	7.1	14	5.2	-26.8	+		6.7	7.8			
Children Approved for Free and Reduced-Price Lunches	1610	17.4	2104	22.4	28.7	-		18.6	26.2			

† The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.

1 = Average of years 1982 - 1984  
 2 = Average of years 1992 - 1994  
 3 = Average of years 1989 - 1991  
 4 = Average of years 1993 - 1995  
 \* = Single year





**Vermont Kids Count**

*Windham County*

**The Community Alliance**

The Community Alliance is a group of concerned people who live and/or work in the towns of Athens, Grafton, Rockingham and Westminster. It was formed in response to a growing need for local, integrated services for families living in the four-town area. The goal of the Alliance is to improve the system of support and service for all people in the Alliance towns and in the greater Bellows Falls area.

The Alliance objectives include education from infancy through adulthood; learning about the history of the area, including the oral histories of senior citizens; supporting a sense of belonging through the community garden, and healthy activities run by and for teens; and developing local business opportunities. In 1995, the Alliance secured funding in conjunction with the Town of Rockingham, to develop a business incubator project.

For more information, call Parks Place at 463-9927.

**Data Notes:** Child abuse and neglect rates have declined in all categories, and the overall rate has dropped by over 44 percent. The low birth weight rate has increased to 5.4 percent, yet is below the state average. Unmanageable youth in custody increased by over 125 percent.

Population			Percent change 1980-1994
	1980	1990	1994
Children under 18	10,055	10,630	10,680
Total population	36,933	41,588	42,316
Children as a percentage of total population	27.2	25.6	25.2

**Children and Youth in Custody**

	1990 <sup>1</sup>		1993 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
	Average daily number	Average daily rate	Average daily number	Average daily rate					
<b>Abuse/Neglect Custody Cases</b>	46	81	43	76	75.6	-		62	105
<b>Delinquent Custody Cases</b>	23	39	53	84	60.1	-		40	73
<b>Unmanageable Custody Cases</b>	16	39	37	84	125.5	-		53	113

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
*Confirmed victims of child abuse by type*

	1985 <sup>1</sup>		1994 <sup>2</sup>		Percent change in rate	Improved (+) Worsened (-)		Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
	Total Victims	Rate	Total Victims	Rate					
<b>Child Abuse and Neglect</b>	179	103	174	97	-44.3	+		111	81
<b>Physical Abuse</b>	56	27	55	25	-54.5	+		34	22
<b>Sexual Abuse</b>	59	44	58	41	-29.3	+		41	40
<b>Neglect</b>	73	37	72	35	-51.4	+		34	24

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18

### Child and Youth Health Indicators

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate						
Early prenatal care	465	77.4	413	82.8	7.0	+		82.3	85.3	
Low birth weight babies	30	5.0	28	5.4	8.0	-		6.0	5.8	
Infant mortality	5	7.7	4	7.7	0.0	same		8.9	7.0	
Births to single teens	34	5.6	43	8.2	46.4	-		5.6	7.0	
Births to all teens	62	10.2	51	9.8	-3.9	+		10.6	8.5	
Child deaths	2	21.5	3	39.2	82.3	-		32.3	26.2	
Teen violent deaths	1	45.8	1	42.1	-8.1	+		62.4	53.9	

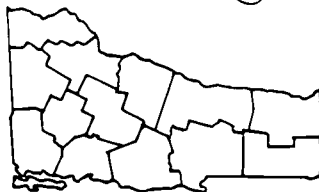
Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.  
 Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.  
 Child death rate is: Deaths per 100,000 children ages 1-14.  
 Infant mortality rate is: Infant deaths per 1,000 births.

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate		Improved (+) Worsened (-) <sup>†</sup>		1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate						
Child Poverty Rate	1513	14.2	1802	16.9	18.8	-		13.0	15.9	
Children Receiving ANFC	1188	11.1	1487	13.9	25.4	-		9.8	12.9	
Children Receiving Food Stamps	1441	13.5	1924	18.0	33.4	-		12.0	17.7	
New Families at Risk	17	6.6	23	10.8	63.6	-		6.7	7.8	
Children Approved for Free and Reduced-Price Lunches	831	23.5	1465	26.0	10.6	-		18.6	26.2	

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
<sup>†</sup> = Single year

Vermont Kids Count



Windor County

**Norwich Community Garden**

The Norwich Community Garden is a project of the Vermont Anti-Hunger Corps and the Hanover, N.H. Food Co-op. The Co-op oversees the Norwich community garden, and has donated nine garden plots to low-income community members and the Corps.

The vegetables grown in the gardens were distributed to local food assistance programs, shelters, Meals-on-Wheels providers, and to those contributing to garden maintenance. Volunteers included individuals from Dartmouth College, the Bugbee Senior Center, Interlocken summer camp, and community members.

For more information, call 1-800-360-2577.

**Data Notes:** Following statewide trends, all economic indicators have worsened. Rates of child poverty and children receiving Food Stamps are below corresponding state averages. The overall abuse and neglect rate declined along with physical abuse, yet sexual abuse and neglect rates increased.

Population			
	1980	1990	1994
Children under 18	13,893	13,393	13,544
Total population	51,030	54,055	53,960
Children as a percentage of total population	27.2	24.8	25.1
			Percent change 1980-1994
			-7.8

Children and Youth in Custody						
	1990 <sup>1</sup>	1993 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1990 <sup>1</sup>	Vermont 1993 <sup>2</sup>
<b>Abuse/Neglect Custody Cases</b>						
Average daily number	79	139			62	105
Average daily rate	59	103	76.2	-		
<b>Delinquent Custody Cases</b>						
Average daily number	14	22			40	73
Average daily rate	25	37	48.5	-		
<b>Unmanageable Custody Cases</b>						
Average daily number	28	45			53	113
Average daily rate	50	76	51.6	-		

<sup>1</sup> Average 1989-1991 <sup>2</sup> Average 1992-1994 Rate= number of children or youth in custody. Abuse/Neglect rates are per 10,000 children under 18. Delinquent and Unmanageable rates are per 10,000 youth between 10-17 years.

**Child Abuse and Neglect**  
Confirmed victims of child abuse by type

	1985 <sup>1</sup>	1994 <sup>2</sup>	Percent change in rate	Improved (+) Worsened (-)	Vermont 1985 <sup>1</sup>	Vermont 1994 <sup>2</sup>
<b>Child Abuse and Neglect</b>						
Total Victims	190	126			111	81
Rate	141	93	-34.0	+		
<b>Physical Abuse</b>						
Physical Abuse Victims	70	35			34	22
Rate	52	26	-50.0	+		
<b>Sexual Abuse</b>						
Sexual Abuse Victims	51	56			41	40
Rate	38	42	10.5	-		
<b>Neglect</b>						
Neglect Victims	36	47			34	24
Rate	26	35	34.6	-		

<sup>1</sup> Average of 1984-1986 <sup>2</sup> Average of 1993-1995 Rate= Number of victims per 10,000 children under 18





### Child and Youth Health Indicators

Rates for most of the indicators listed in these tables are expressed as percentages (per 100). However, rates for some of the indicators are presented using different methods because percentages would show very small values.

Teen violent deaths rate is: Deaths per 100,000 teens ages 15-19.

Child death rate is: Deaths per 100,000 children ages 1-14.

Infant mortality rate is: Infant deaths per 1,000 births.

	1983 <sup>1</sup>		1993 <sup>2</sup>		1983-1993 Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1983 <sup>1</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Early prenatal care	608	82.8	517	85.9	3.7	+	82.3	85.3
Low birth weight babies	42	5.7	38	6.1	7.0	-	6.0	5.8
Infant mortality	7	9.5	7	11.4	20.0	-	8.9	7.0
Births to single teens	44	6.0	42	6.9	15.0	-	5.6	7.0
Births to all teens	78	10.5	54	8.7	-17.1	+	10.6	8.5
Child deaths	4	41.9	4	40.4	-3.6	+	32.3	26.2
Teen violent deaths	5	120.2	1	45.5	-62.1	+	62.4	53.9

### Economic Indicators

	1990 <sup>3</sup>		1993 <sup>2</sup>		1990-1993 Percent change in rate	Improved (+) Worsened (-) <sup>†</sup>	1990 <sup>3</sup> Vermont Rate	1993 <sup>2</sup> Vermont Rate
	Number	Rate	Number	Rate				
Child Poverty Rate	1607	12.0	2075	15.4	28.3	-	13.0	15.9
Children Receiving ANFC	1142	8.5	1830	13.5	59.0	-	9.8	12.9
Children Receiving Food Stamps	1376	10.3	2327	17.2	66.8	-	12.0	17.7
New Families at Risk	22	6.6	17	7.8	18.2	-	6.7	7.8
Children Approved for Free and Reduced-Price Lunches	1432	16.7	2131	23.1	38.3	-	18.6	26.2

<sup>1</sup> = Average of years 1982 - 1984  
<sup>2</sup> = Average of years 1992 - 1994  
<sup>3</sup> = Average of years 1989 - 1991  
<sup>4</sup> = Average of years 1993 - 1995  
<sup>†</sup> = Single year  
<sup>†</sup> The (+) or (-) designation for each indicator shows rates which have improved or worsened between the years compared in the Percent Change in Rate.



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# Notes on Statistics and Methodology

## Abuse/Neglect Custody

Data on children in custody as a result of abuse or neglect were provided by the Department of Social and Rehabilitation Services (SRS). Child population data were calculated from the 1990 Census of Population and Housing and Vermont Department of Health estimates taken between Census surveys. The number of abused and neglected children in custody represents an average daily number of custody cases, averaged again for the years 1989, 1990, 1991 and 1992, 1993, 1994. SRS determines average daily custody cases by calculating the number of custody days (days between opening and closing dates) for each case, totaling the number of custody days for all cases, and dividing by the number of days in the year.

Annual numbers of average daily custody cases were averaged by Vermont KIDS COUNT for the years 1989-1991 and 1992-1994. Average daily rates of abused and neglected children in custody were calculated by adding the average daily number of custody cases for the two time periods, and dividing by the sum of child population totals for the corresponding years. The resulting proportion was then multiplied by 10,000 to show the rate of abused and neglected children in custody, per 10,000 children under 18.

## Births to Teens

Data on births to teens were obtained from vital statistics files from the Vermont Department of Health, Division of Public Health Analysis and Policy. Births to teens are defined as live births that occur to women under age 20. Data are reported by the mother's residence. The number of births to teens represents a three-year average. The percentage of all births that are to teens was calculated by adding the number of births to teens over a three-year period, dividing by the total number of live births for that same period, and multiplying by 100.

## Births to Single Teens

Data on births to single teens were obtained from vital statistics of the Vermont Department of Health, Division of Public Health Analysis and Policy. Births to single teens are defined as live births that occur to unmarried women under age 20. Data are reported by the mother's residence. The number of births to single teens is shown as a three-year average. The percentage of all births that are to single teens was calculated by adding the number of births to single teens over a three-year period, dividing by the total number of live births for that same period, and multiplying by 100.

## Child Abuse

Child abuse data were provided by the Department of Social and Rehabilitation Services. Child population data used in the calculation of rates are from both the 1990 Census of Population and Housing, and

Vermont Department of Health estimates for inter-censal years. Child abuse cases are defined as substantiated cases of physical abuse, sexual abuse, or neglect involving children under 18. The number of child abuse cases represents a three-year average. Child abuse rates were calculated by using the total number of child abuse cases in a three-year period, divided by the total of the child population for the corresponding years. The calculated proportion was multiplied by 10,000 to show the child abuse rate per 10,000 children under 18.

The status of any abuse and neglect report (substantiated or unsubstantiated) may change overtime. County and state data for the years 1984-1995 have been adjusted to reflect the annual state totals as of March for the preceding years.

Calculations for separate categories of abuse or neglect are calculated as above, using the total number of specific type (total of physical abuse, total of sexual abuse and total of neglect cases) divided by the total child population for the corresponding years.

## Child Deaths

Data on child deaths were taken from vital statistics of the Vermont Department of Health, Division of Public Health Analysis and Policy. Child population data used in the calculation of rates were taken from both the decennial U.S. Census of Population and Housing (1980 and 1990), and Vermont Department of Health population estimates for inter-censal years. Child



deaths include deaths from all causes, to children ages 1 to 14. The number of child deaths is shown as a three-year average. The total number of child deaths in a three-year period was divided by the sum of the child populations for the corresponding years. The calculated proportion was multiplied by 100,000 to show the child death rate per 100,000 children ages, 1 through 14.

### Child Population

Data on child population are from the Census of Population and Housing STF1 (Standard Tape File), 1980 and 1990, and Health Department population estimates for inter-censal years. The number of children is defined as the total resident population under 18. Children as a percent of the total population, is the total resident population under 18, divided by the total resident population, multiplied by 100.

### Child Poverty

In addition to the 1989 child poverty rates taken from the 1990 Census of Population and Housing, annual county-level estimates of child poverty have been calculated for the years 1990 through 1994. Statistical relationships between the number of children in poverty in 1989, and the number of ANFC and Food Stamp recipients for that year, were determined using regression analysis techniques. The number of ANFC recipients and Food Stamp recipients variables were found to explain over 97 percent of the variance for the number of children in poverty. Average percent errors for the 12 counties' predicted values were very low, which indicated a good fit for the 1989 model.

Numbers of ANFC and Food Stamp recipients for the years 1990, 1991, 1992, 1993 and 1994 were then substituted to provide annual estimates of the number of children in poverty. These estimates were then divided by county-level estimates of child populations produced by the Vermont Department of Health. The resulting proportion was then multiplied by 100 percent, to provide annual county-level estimates of the percent of children living in poverty.

### Children in Households Receiving ANFC Benefits

Data for children in households receiving ANFC benefits were provided by the Vermont Department of Social Welfare. Child population data were used in the denominator for rate calculations, and were obtained from both the Census of Population and Housing for 1990 and Vermont Department of Health estimates for 1994. The number of children in households receiving ANFC benefits refers to "snapshots" of April 1990 and April 1994. The percent of children in households receiving ANFC Benefits is calculated as the number of children in these households, divided by the total child population, and multiplied by 100.

### Children in Households Receiving Food Stamp Benefits

Same as above, but substitute Food Stamps for ANFC.

### Children in Single-Parent Families

Data for children in single-parent families are from the Census of Population and Housing STF1, 1980 and 1990. Children in single-parent families were counted in 1980 and 1990, and include all related children under 18, who live in families headed by a person without a spouse present in the home. The percent of children in single-parent families represents the number of children in single-parent families, divided by the total resident population under 18, multiplied by 100.

### Delinquent or Unmanageable Youth in Custody

Data on delinquent or unmanageable youth in custody were provided by the Department of Social and Rehabilitation Services (SRS). Population data used in rate calculations are from both the 1990 Census of Population and Housing, and Vermont Department of Health estimates between Census surveys. The number of delinquent or unmanageable youth in custody represents an average daily number of custody cases averaged again for the years 1989-1991 and 1992-1994. SRS determines average daily custody cases by calculating the number of custody days (days between opening and closing dates) for each case, adding custody days for all cases, and dividing by the number of days in the year. Annual numbers of average daily custody cases were averaged for the years 1989-1991 and 1992-1994. Average daily rates of delinquent or unmanageable youth



in custody were calculated by adding the average daily number of custody cases for the two time periods, and dividing by the sum of population totals of youth, ages 10-17 for the corresponding years. The resulting proportion was then multiplied by 10,000 to show the rate of delinquent or unmanageable youth in custody, per 10,000 youth between 10 and 17.

### Early Prenatal Care

Data on early prenatal care were obtained from Vermont Department of Health, Division of Public Health Analysis and Policy vital statistics files. Early prenatal care is defined as prenatal care received within the first trimester (three months) of pregnancy. Data are reported by the mother's residence. The number of mothers receiving early prenatal care is shown as a three-year average. The number of mothers who received early prenatal care was added for three-year periods and divided by the total number of live births, for which prenatal care information was available. The resulting proportions were multiplied by 100 to indicate the percent of all mothers who received early prenatal care.

### Educational Attainment of Adults

Data for the number and percent of people 25 years of age or older who have completed high school or a General Equivalency Diploma are from the Census of Population and Housing STF3, 1980 and 1990. These indicators include the number and percent of people 25 years of age or older, whose highest degree was a high school diploma or

its equivalent, persons who attended college or professional school, and persons who received a college, university, or professional degree. Persons who reported completing the 12th grade, but not receiving a diploma, are not included.

### High School Dropouts

High school dropout data were provided by the Vermont Department of Education. The numbers of dropouts are shown as three-year averages for the school years 1982-1983 through 1984-1985, and 1992-1993 through 1994-1995. The total number of high school dropouts was added for the three-year periods and divided by the three-year totals of adjusted enrollments (enrollments adjusted for transfers and deaths). The calculated proportion was multiplied by 100 to show the percent of high school students who dropped out during the specified periods.

### Infant Mortality

Data for infant mortality were compiled using vital statistics files of the Vermont Department of Health, Division of Public Health Analysis and Policy. Infant deaths include all deaths of babies less than one year of age. The number of infant deaths is shown as a three-year average. Infant mortality rates were calculated using the total number of infant deaths for three-year periods divided by the total number of live births for the same periods and the calculated proportion was multiplied by 1,000 to show the number of infant deaths per 1,000 live births.

### Low Birth Weight Babies

Data for low birth weight babies were compiled using Vermont Department of Health, Division of Public Health Analysis and Policy vital statistics files. Low birth weight was defined as less than 5 1/2 pounds (2500 grams), and data were reported by mother's residence. The number of low birth weight babies represents a three-year average. The total numbers of low-birth weight babies born in the three-year periods, were added and then divided by the total number of live births for which birth weight information was available in the corresponding time periods. The calculated proportions were multiplied by 100 to indicate the percent of all babies that were born of low birth weight.

### New Families at Risk

Data for this indicator were compiled from vital statistics files of the Vermont Department of Health, Division of Public Health Analysis and Policy. First births to unmarried women under the age of 20, with less than 12 years of schooling, represent the formation of "high-risk" families. The number of first births with these three risk factors is expressed as a three-year average. The total number of first births with three risk factors was summed for the three-year periods and used in the numerator for rate calculations. The total number of all first birth, for which complete data on mother's age, education, and marital status were available, was used in the denominator. The calculated proportion was multiplied by 100, to show the percent of all new families formed at high socioeconomic risk.

## Racial and Ethnic Composition of Child Population

Data on race and ethnicity of children are from the Census of Population and Housing STF1, 1980 and 1990. Counts of children under 18 in 1980 and 1990 are shown for five Census Bureau race categories and Hispanic ethnicity. Because Hispanics comprise an ethnic group, they can be of any race. The sum of children in the five race categories equals the total number of children. Hispanic children are included within the race categories, but are also counted separately in the Hispanic ethnicity group.

## Students Approved for Free and Reduced-Price Lunches

Data on school meals programs were provided by the Vermont Department of Education, and represent the number and percent of public school students approved for free and reduced lunches in 1989, and the average of the years 1993, 1994, and 1995. Percentages were calculated by dividing the number of children approved for free and reduced lunches by total enrollment of schools participating in the school lunch program and multiplying by 100.

## Teen Violent Deaths

Data for teen violent deaths were compiled from death record files provided by the Vermont Department of Health, Division of Public Health Analysis and Policy. Population data used in the calculation of

rates were taken from the U.S. Census of Population and Housing for the years 1980 and 1990. Population data for inter-censal years were taken from population estimates provided by the Vermont Department of Health. Teen violent deaths are defined as deaths of teens ages 15 through 19 that occurred by accident, suicide, or homicide. The number of teen violent deaths is shown as a three-year average. The total numbers of teen violent deaths that occurred during three-year periods were added and divided by the total number of teens in the 15-19 age group for the corresponding years. The calculated proportion was multiplied by 100,000, to show the rate of violent deaths per 100,000 teens, ages 15 through 19.

## Teens Not In School and Not in the Labor Force

Data for the number and percent of teens not in school and not in the labor force are from the Census of Population and Housing STF3, 1980 and 1990. Teens included in this indicator are those between the ages of 16 and 19 who were not enrolled in school (full or part-time); not in the labor force; and not in the Armed Forces. The percent of these teens was calculated using the population ages 16 through 19 in the denominator and multiplying by 100.

## Vermont Youth Risk Behavior Survey

In order to obtain a representative sample of Vermont students, 20 high schools of varying sizes, along with their 26 associated middle schools, were randomly selected for the state sample (1:3 systematic sample after sorting by enrollments). Thirty-four of the forty-six

sample schools participated. Out of the 8,474 sampled students 7,165 completed usable questionnaires. The state sample results were weighted in order to compensate for differences between the sample and the population of all 8th to 12th grade students in Vermont. The weighting procedure ensures that the sample is representative of the population. This permits us to draw inferences about the entire student population based on the results of the sample. Individual supervisory union results were not weighted, therefore, we urge caution when comparing these results with the results of the state sample.

## Working Mothers Youngest Child Under Age 6

Data for the number and percent of women in the labor force with youngest child under age 6 are from the Census of Population and Housing STF3, 1980 and 1990. This indicator measures the number and percent of women ages 16 and over (regardless of marital status) who are in the paid labor force, and whose youngest child is under age 6.

## Working Mothers Youngest Child Ages 6-17

Data for the number and percent of women in the labor force with youngest child ages 6-17 are from the Census of Population and Housing STF3, 1980 and 1990. This indicator measures the number and percent of women ages 16 and over (regardless of marital status) who are in the paid labor force, and whose youngest child is between the ages of 6 and 17.

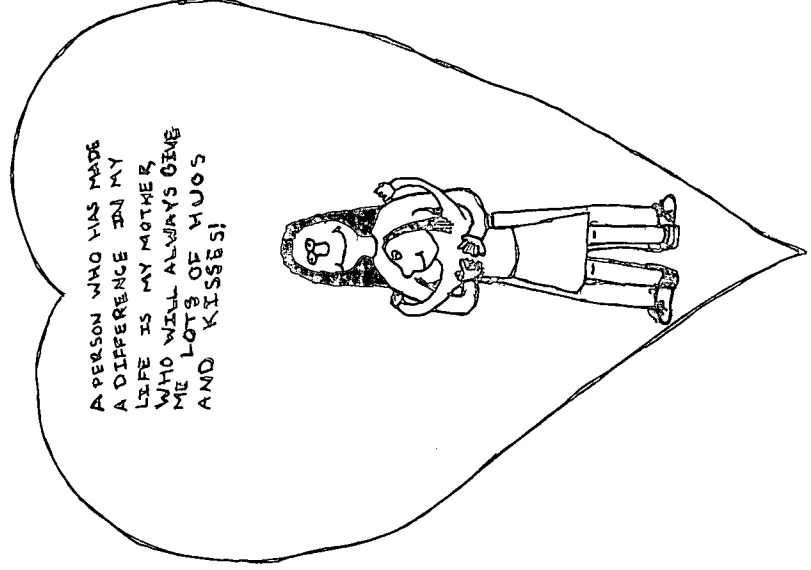




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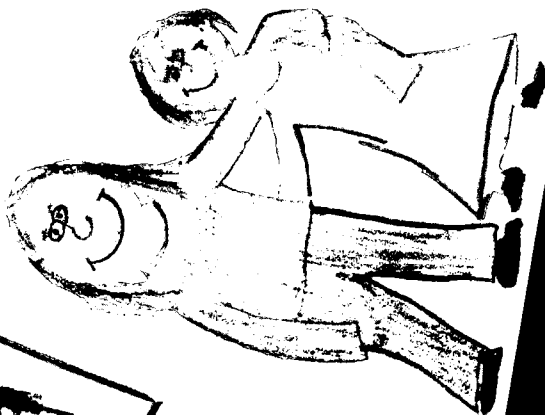
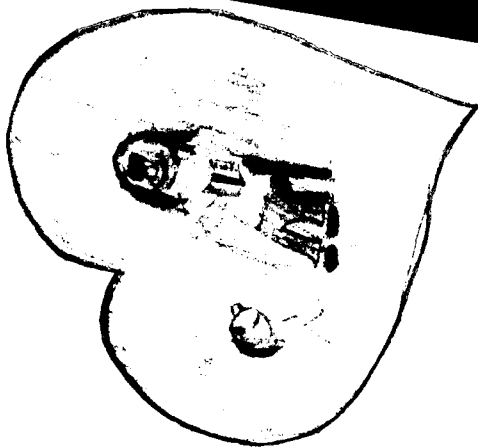
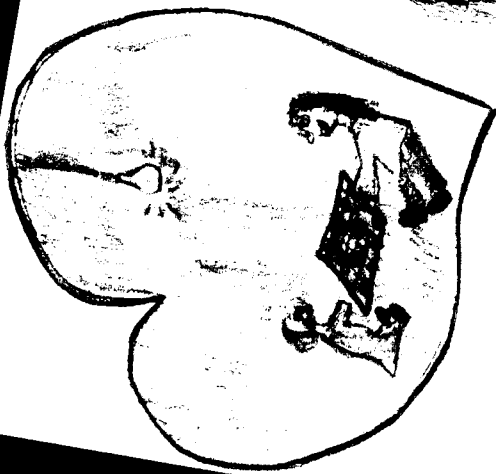
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Vermont Department of Education  
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My sister has made a difference in my life  
by being someone to care about  
and look after. She is someone to  
play with and to teach. She is someone to  
love. She makes me feel important.



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