



Kids Count Alaska 2009-10

University of Alaska Anchorage • Institute of Social and Economic Research



KIDS COUNT ALASKA 2009/2010

2009/2010 Data Book

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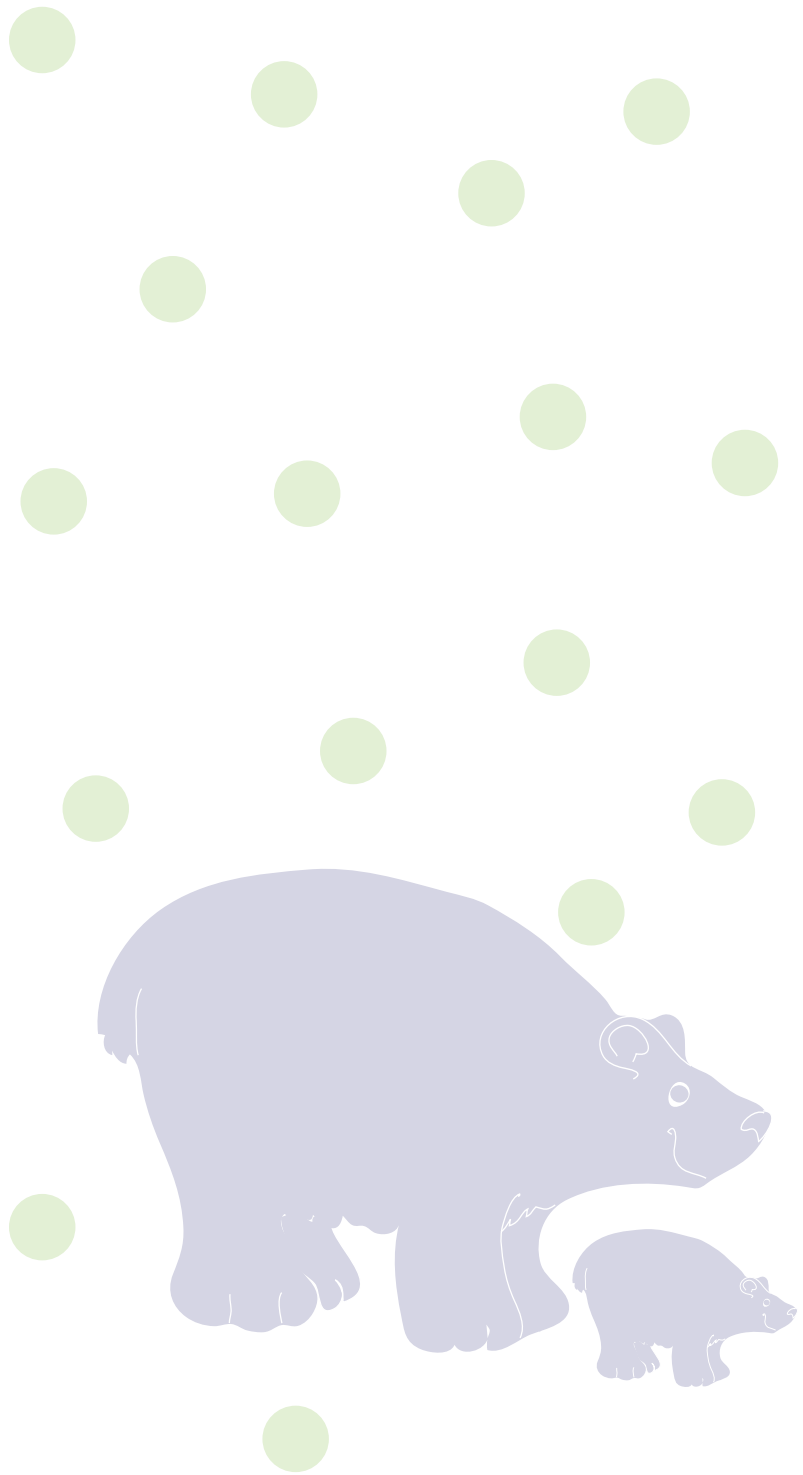
To find this and all previous Kids Count Alaska data books, go to: <http://kidscount.alaska.edu>.

To compare data on kids in Alaska and all other states, go to: <http://www.datacenter.kidscount.org>.

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Introduction

INTRODUCTION

For information on children across America, visit the Kids Count Data Center (www.datacenter.kidscount.org). Developed by the national KIDS COUNT program, the site provides data on children and teenagers for every state and hundreds of cities and counties.

For Alaska, you can select indicators for each of the state's seven regions and create your own maps, trend lines, and charts. There are also maps and graphs you can put on your website or blog. You can go directly to that national site or link from our website (kidscount.alaska.edu).

This book and all previous data books are available on our website, with each book divided into sections for faster downloading. Also on our site is a link to the most recent national KIDS COUNT data book, as well as other publications and reports.

ABOUT THIS YEAR'S BOOK

Every year we choose a theme for our illustrations. This year we call attention to homelessness among Alaska children. On the front cover, homeless children are flying over Alaska, seeing nothing but wilderness. On the back cover, they are getting ready to come in for a landing, as they spot what they've been looking for: a home. Pages 7 and 8 discuss homelessness among children in Alaska.

WHAT IS KIDS COUNT ALASKA?

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

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

WHO ARE ALASKA'S CHILDREN?

Children and young people through age 18 make up nearly a third of all Alaskans—208,084 of the state's 679,720 residents in 2008. The table below compares Alaska's children by age and sex in 1990 and 2008.

The number of children and teenagers increased close to 16% during that period, but the total state population grew 24%—so those 18 and younger make up a somewhat smaller percentage of Alaskans than they did in 1990. Also, the age composition of the youngest Alaskans has shifted somewhat, with older teenagers (15 to 18) making up a bigger share. Boys continue to outnumber girls, accounting for nearly 52% of all children and teenagers.

The map on the facing page shows the distribution of Alaska's children by region. More than four in ten (41%) of the children in Alaska live in Anchorage, and another 12% live in the neighboring Mat-Su Borough—so more than half the state's children are concentrated in a small area of Alaska. About 16% live in the sprawling Interior region and another 10% in the Gulf Coast region. Just under 10% live in Southeast Alaska. The remaining children in Alaska live in the most remote areas—Southwest (7%) and Northern (5%).

The number of minority children in Alaska has increased sharply in the past couple of decades, especially in Anchorage and other large communities. But the reported share of minority children varies, depending on the racial categories used, as the table and figure on the facing page show.

The Alaska Department of Labor classifies all children as White, Alaska Native, Black, or Asian/Pacific Islander. Children who are Hispanic or multi-race are included in those categories. With those four categories, White children make up 70% or more of children in all regions except Northern and Southwest, where Alaska Native children are in the majority.

The Alaska Department of Education and the Anchorage School District, by comparison, have separate classifications for Hispanic and multi-race children. With those additional categories, the statewide share of school children reporting their race as White is 53%, and in Anchorage the share is 48%. Except for Alaska Natives, the percentage of school children in all minority groups is higher in Anchorage than statewide. By contrast, Alaska Natives make up a much bigger percentage of students statewide than they do in Anchorage, and they are the majority in the Northern and Southwest regions.

Alaska's Children by Age and Sex, 1990 and 2008

| | 1990 | | | | 2008 | | | |
|--------------------------------|----------------|----------------|---------------|---------------|----------------|---------------|----------------|----------------|
| | Total | Male | Female | Total | Male | Female | | |
| Total Alaska Population | 550,043 | 289,868 | 260,176 | 679,720 | 346,986 | 332,734 | | |
| Children By Age | Number | Percent | | Number | Percent | | | |
| Under 1 | 11,963 | 6.6% | 6,109 | 5,854 | 11,400 | 5.5% | 5,925 | 5,475 |
| 1-4 | 44,014 | 24.5% | 22,616 | 21,398 | 44,837 | 21.5% | 23,217 | 21,620 |
| 5-9 | 51,508 | 28.6% | 26,543 | 24,965 | 54,175 | 26.0% | 28,192 | 25,983 |
| 10-14 | 42,939 | 23.9% | 22,333 | 20,606 | 52,666 | 25.3% | 26,725 | 25,941 |
| 15 | 7,652 | 4.3% | 4,021 | 3,631 | 11,048 | 5.3% | 5,640 | 5,408 |
| 16 | 7,341 | 4.1% | 3,786 | 3,555 | 11,313 | 5.4% | 5,851 | 5,462 |
| 17 | 7,443 | 4.1% | 3,887 | 3,556 | 11,439 | 5.5% | 5,915 | 5,524 |
| 18 | 7,069 | 3.9% | 3,834 | 3,235 | 11,206 | 5.4% | 5,735 | 5,471 |
| Total 18 and under | 179,929 | 100.0% | 93,129 | 86,800 | 208,084 | 100.0% | 107,200 | 100,884 |

Source: Alaska Department of Labor and Workforce Development, 2009 Age, Race, and Sex Estimates

Boroughs and Census Areas, by Region

Municipality of Anchorage

Matanuska-Susitna Borough

Gulf Coast Region

Kenai Peninsula Borough
Kodiak Island Borough
Valdez-Cordova Census Area

Interior Region

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

Northern Region

Nome Census Area
North Slope Borough
Northwest Arctic Borough

Southeast Region

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

Southwest Region

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

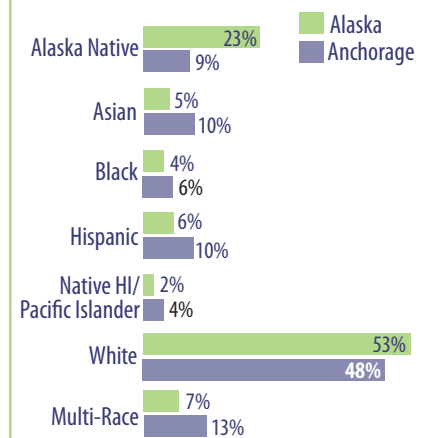
Racial Composition of Children (19 and Under), by Region, 2008

| Region | White | Alaska Native ^a | Black | Asian/Pacific Isl. |
|---------------|--------------|----------------------------|-------------|--------------------|
| Anchorage | 70.4% | 12.7% | 7.9% | 9.0% |
| Mat-Su | 82.0% | 11.5% | 2.8% | 3.8% |
| Gulf Coast | 78.7% | 13.6% | 1.3% | 6.4% |
| Interior | 73.7% | 15.9% | 7.0% | 3.4% |
| Northern | 14.1% | 82.6% | 0.7% | 2.6% |
| Southeast | 68.6% | 24.0% | 1.3% | 5.9% |
| Southwest | 13.6% | 83.9% | 0.8% | 1.8% |
| Alaska | 66.4% | 22.5% | 5.0% | 6.1% |

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

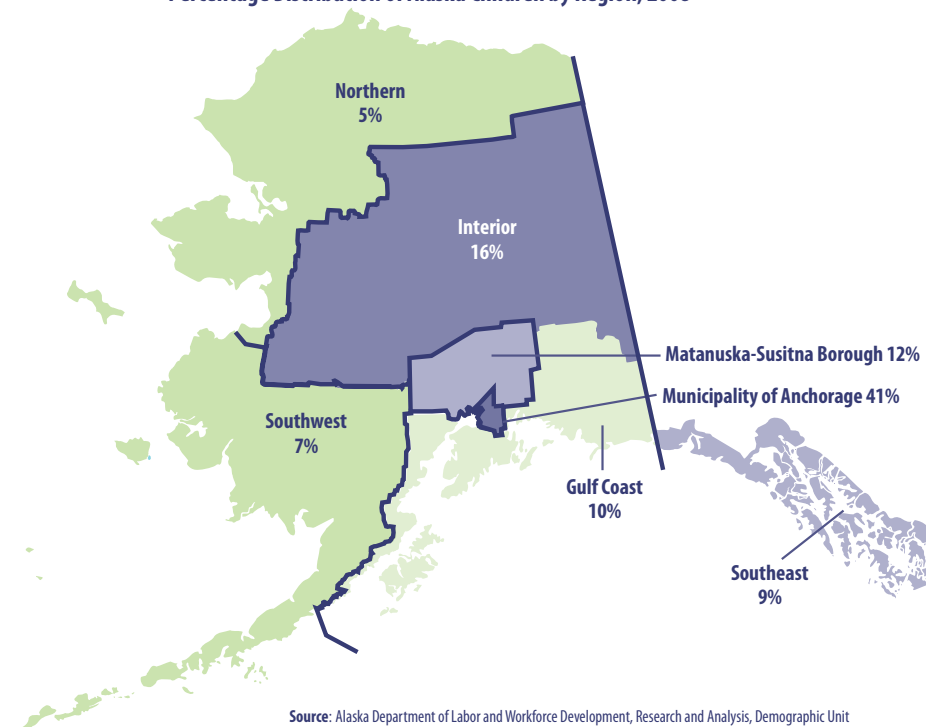
Source: Alaska Department of Labor and Workforce Development, Research and Analysis, Demographic Unit

Alaska and Anchorage K-12 Students, by Race, 2008-2009



Sources: Alaska Department of Education and Early Development and Anchorage School District

Percentage Distribution of Alaska Children by Region, 2008



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

Introduction

ALASKA/U.S. COMPARISONS

The table below compares Alaska and U.S. averages in 2000 and 2007 or 2008 on ten key measures of children’s well-being. Alaska ranks among the best in the nation on two indicators. It continues to be the state with the smallest percentage of babies born at low weight, as it has since 2000. The share of children living in poverty in Alaska is rated as the 4th lowest in the nation. But as we discuss more later, many analysts believe this measure may underestimate poverty nationwide. And in Alaska, an additional concern is that the measure is not adjusted for Alaska’s higher living costs, especially in rural areas.

Alaska ranked near the national average in its infant mortality rate, the percentage of children in single-parent households, and the teen birth rate in 2007/2008. The rate of births to teenagers in Alaska had been below the national average since 2001, before moving up sharply in 2006 and again in 2007. (But as we discuss in the indicator Births to Teens, the Alaska Bureau of Vital Statistics has calculated a substantially smaller increase in recent birth rates among Alaska teenagers.)

Alaska ranks among the worst in the U.S. on five indicators: the percentage of teens not in school and not working; the percentage of teens who drop out of school; the percentage of children with no parent working full time; and the rates of death among children and teenagers.

Among younger children, accidents cause about half the deaths. Alaska’s often unforgiving climate and terrain pose many risks. Among teenagers, nearly a third of the deaths in recent years were suicides. As we discuss later, in the Teen Death Rate indicator, the suicide rate is especially high among Alaska Native boys.

Also, children and teenagers in remote areas very commonly drive or ride on snowmachines and all-terrain vehicles—and many are injured and some killed in crashes of those off-road vehicles.

These and other things combine to make Alaska a dangerous place for children—even the youngest children. For example, results from the Alaska Childhood Understand Behaviors Survey show that 59% of two-year-olds had already ridden in boats.

And on a final indicator Alaska also ranks among the worst. The state has a very high share—almost the highest in the nation—of children with no parent working full-time, year-round. As we discuss more in the Economic Well-Being section, a number of Alaska’s private industries are seasonal—and so many Alaskans have only seasonal jobs.

Alaska and U.S. Comparison, 2000 and 2007-2008

| | Alaska | | U.S. | | Alaska Rank 2007/2008 |
|---|--------|------------|------|------------|--------------------------|
| | 2000 | 2007/2008* | 2000 | 2007/2008* | |
| Alaska Among the Best | | | | | |
| Percentage of babies with low birth weight (2007) | 6% | 6% | 8% | 8% | 1 |
| Percentage of children living in poverty ^a (2008) | 13% | 11% | 17% | 18% | 4 |
| Alaska Near U.S. Average | | | | | |
| Infant mortality rate (per 1,000 live births) ^b (2007) | 7 | 7 | 7 | 7 | 19 |
| Percentage of children in single-parent households (2008) | 30% | 32% | 31% | 32% | 23 |
| Teen birth rate (per 1,000 girls 15-19) ^b (2007) | 49 | 45 | 48 | 43 | 31 |
| Alaska Among the Worst | | | | | |
| Percentage of teens not in school and not working (2008) | NA | 11% | NA | 8% | 45 |
| Percentage of teens (ages 16-19) who drop out of school (2008) | 8% | 10% | 11% | 6% | 47 |
| Child death rate (per 100,000 children 1-14) ^b (2007) | 32 | 31 | 22 | 19 | 49 |
| Percentage of children with no parent working full-time (2008) | NA | 34% | NA | 27% | 49 |
| Teen death rate (per 100,000 teens 15-19) ^b (2007) | 142 | 100 | 67 | 62 | 50 |

*Some data available for 2008, some only for 2007

^aBased on the U.S. Census Bureau’s poverty threshold figures, which are not adjusted for Alaska’s higher living costs and may underestimate poverty in Alaska.

^bThese rates are based on small numbers and can therefore fluctuate sharply from year to year.

Note: Alaska figures in this table may differ from later figures in the regional graphs. The figures above are from the national Kids Count program; our regional figures may be based on different years and are sometimes measured differently.

Source: 2010 National Kids Count Data Book

Before we move on to discussions of specific indicators of well-being among Alaska's children, on the next several pages we highlight three issues that have been much in the news: homelessness among children and teenagers; obesity among young people; and rates of fetal alcohol syndrome among children in Alaska.

HOMELESS CHILDREN AND TEENAGERS

Here we look at two measures of homelessness among children and teenagers in Alaska: the number of students in Alaska's public schools who are counted as homeless, and the number of teenagers who come to Covenant House Alaska, which is in Anchorage and is the state's only shelter for homeless teenagers.

Homeless Students

Every year, Alaska school districts are required to collect information on homelessness among students. The districts have to use the definition of "homelessness" in the federal McKinney-Vento Homeless Assistance Act, which defines children as homeless if they don't have a "fixed, regular, or adequate" place to live—that is, a stable and dependable place to live. It lays out four categories of homelessness:¹

- *No shelter*: These are children in the most desperate circumstances: living in places "not designed for, or ordinarily used as, regular sleeping accommodations for human beings." That includes cars, campgrounds, parks, or abandoned buildings, for example.
- *Emergency shelters or transitional housing*: These are children in "supervised publicly or privately operated shelters designed to provide temporary living accommodations," or waiting for foster care placement. Children in emergency shelters have a roof over their heads, but such shelters have limited space, provide bare-bones lodgings, and typically allow people to stay only for short periods. Transitional housing units serve as a bridge until families can afford permanent housing, and generally allow longer stays—but they often have waiting lists and don't exist in most of rural Alaska.
- *Motels or hotels*: This category includes children living in motels or hotels, because their families can't find alternative, affordable places to live.

- *Staying with relatives or friends*: Children in this category are defined as "sharing the housing of others due to loss of housing or economic hardship." These children are considered homeless under the federal McKinney-Vento definition because their families are doubling-up with friends or relatives not out of choice but because they can't afford houses or apartments of their own.

Alaska school districts reported about 4,200 homeless children and teenagers—more than 3% of all students—attending public schools in the 2009-2010 year. More than half of those children were living with relatives or friends, another one quarter were in temporary shelters, and about 7% were living in motels or other non-standard housing.

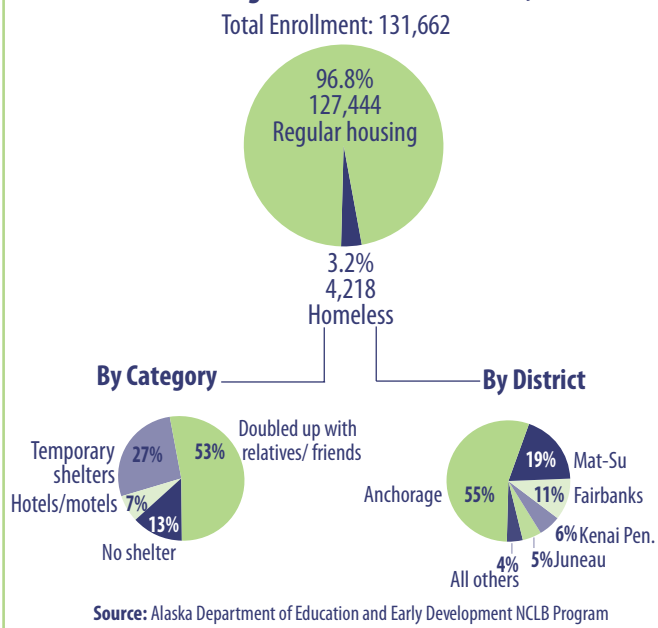
But 13%—547 children—had no shelter to go to at night. They might be living in cars or other vehicles, parks, campgrounds, or other unheated, unprotected public spaces—which is especially dangerous in the Alaska winter.

About 55% of the homeless children in 2010 were in Anchorage and nearly 20% more were in the adjacent Mat-Su Borough. So together those two districts accounted for 75% of homeless children, and most of the rest—all but 4%—were counted in the other large urban districts.

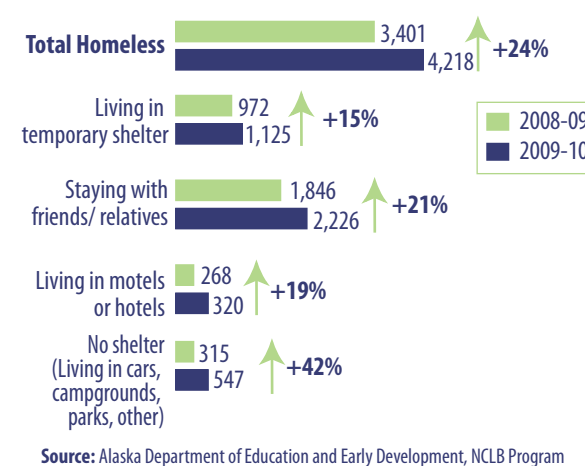
Yet the five largest districts, with 96% of homeless children, have just over 70% of Alaska school students. So either children are more likely to be homeless in larger urban areas—which could be true—or some smaller districts undercount homeless children. The Alaska Department of Education, which collects figures on homelessness from the school districts, believes some homeless children may not be identified, especially in rural areas.

The number of children in Alaska with no home of their own is rising. The total went up nearly 25% just between 2009 and 2010. Some of that increase may have been due to better identification of homeless children, but it's still worrisome. And the biggest increase was among children living in cars or other unsheltered places. That number increased 42%, from 315 to 547.

Homelessness Among Alaska's School Children, 2009-2010



Change in Number of Homeless Students in Alaska, 2008/09 to 2009/10



Highlights

Covenant House Alaska

Covenant House Alaska is Alaska's only shelter specifically for homeless young people (13 to 20). It's one of 21 sites of Covenant House International in North America and Central America. In early 2010, researchers at the Institute of Social and Economic Research analyzed data from Covenant House's crisis center, to help Covenant House administrators understand patterns and trends among the young people it helps.²

Covenant House is in Anchorage, and it provides not only temporary shelter but also medical care, counseling, and other services. In 2008, more than 1,300 teenagers spent at least one night at the shelter.

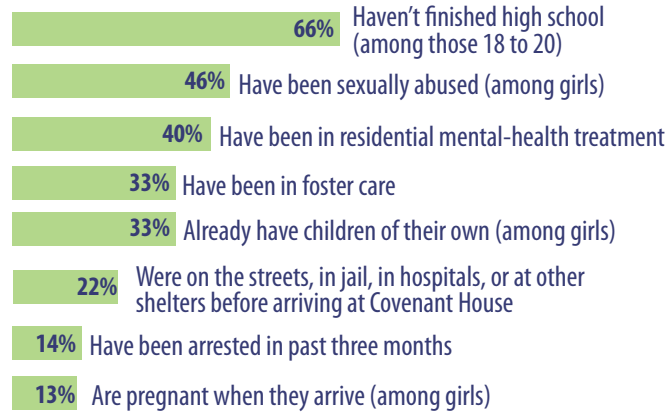
Common problems among teenagers who turn to Covenant House include living on the streets, failing to graduate from high school, having been treated for mental health issues, or having been sexually assaulted.

Who comes to Covenant House? As the figure below shows, they are almost equally divided between girls and boys; most are older teenagers; about two-thirds are either White or Alaska Native; and most are from Anchorage, although significant percentages are from other parts of Alaska or from outside the state. Often, teenagers from outside Alaska are returning from mental-health treatment in other states—but have nowhere to live when they come back.

To learn more about this research and see a full report on the characteristics of youth who turn to Covenant House Alaska, visit: <http://www.iser.uaa.alaska.edu>.

Why Do Kids at Covenant House Alaska's Crisis Center Need Help?

(2006-2008)



Source: Covenant House Alaska

OBESITY AMONG YOUNG ALASKANS

Along with the rest of the nation, Alaska is seeing more and more obesity among children and teenagers. In 2007, about 34% of Alaska children ages 10 to 17 were overweight or obese, which ranked our state 38th nationwide. On average in the U.S., 32% of those 10 to 17 are overweight or obese.¹

The measure typically used to determine obesity is the body mass index (BMI), which is calculated using a child's weight and height. Children and adolescents with BMIs at or above the 95th percentile among those of the same age and gender are considered obese, while those with BMIs between the 85th and 95th percentiles are identified as overweight.²

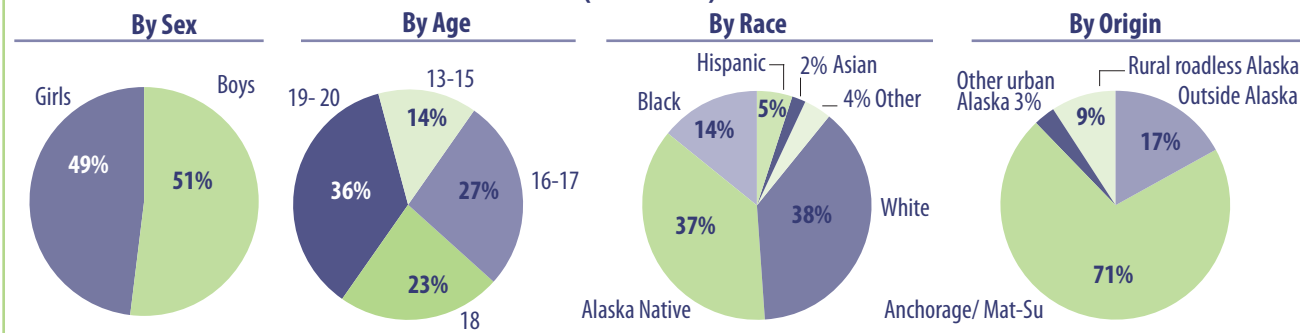
Overweight or obese adolescents are at increased risk of developing heart disease, type 2 diabetes, asthma, high blood pressure, and other chronic diseases and conditions. Obese or overweight children are also more likely to be depressed, have low self-esteem, and become the targets of discrimination and bullying. And obese or overweight students tend not to do as well in school as those of normal weight.³

In 2009, the Alaska Department of Health and Social Services published a report, *Childhood Obesity in Alaska*, using data from various sources to offer a picture of this problem in Alaska. But keep in mind these data are from specific populations of children and don't represent all children in Alaska.

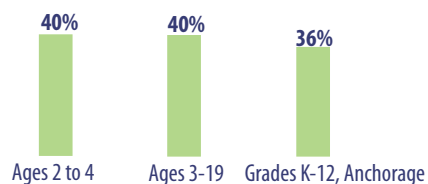
One source is the Women, Infants, and Children (WIC) Program, which provides services for low-income pregnant and postpartum women, infants, and children under 5 at nutritional risk. WIC collects data on the height and weight of children in the program. Between 2000 and 2005, 19% of those ages 2 to 4 were overweight, and 21% were obese.

Another data source is for children 3 to 19 in the Resource Patient Management System, which records the height and weight of children who see state public health nurses or visit Alaska Native health facilities. Among those children, 40% were overweight or obese in the period 2000-2005.

Who Comes to Covenant House's Crisis Center? (2006-2008)



Percentages of Overweight or Obese Children in Alaska, Selected Groups,* 2000-2005



*Children in specific programs or groups; percentages don't necessarily represent all children of those ages.

Source: Alaska Department of Health and Social Services, *Childhood Obesity in Alaska Report, 2009*

A third source of information is from school nurses in the Anchorage School District, who measure students' height and weight as part of health screening. The district and the Alaska Division of Public Health examined this data for the periods 1998-2003 and 2003-2005. They determined that in both periods, 36% of Anchorage students from kindergarten through 12th grade weighed more than what is considered a normal weight.

There is also a data source on childhood obesity that can be compared across the states—the Youth Risk Behavior Survey (YRBS). This survey is administered every other year in Alaska and other states to a representative sample of high school students, grades 9-12. Among other things, the survey asks students about their eating habits. In 2009, about 14% of Alaska high school students said they were overweight and 12% said they were obese. Nationwide, a slightly higher percentage of high-school students reported being overweight (16%), but the percentage describing themselves as obese was the same as in Alaska—12%.

Alaska boys were more likely than girls to say they were heavier than normal—31% compared with 24%. Minority students in Alaska were also more likely than White students to say they weighed more than normal—31% of Hispanic high-school students reported being overweight or obese, compared with 28% of Alaska Native students and 24% of White students.⁴

A number of factors contribute to the growing share of overweight children and teenagers, in Alaska and around the country. The Division of Nutrition, Physical Activity, and Obesity in the federal Centers for Disease Control and Prevention recommends ways to prevent and control obesity:

- Encourage mothers to breastfeed their babies and increase the duration of breastfeeding
- Eat more fruit and vegetables
- Increase physical activity
- Drink fewer soft drinks and eat less high-calorie food
- Don't let children spend so much time watching TV.⁵

Alaska in fact has one of the highest rates of breastfeeding in the country, with 91% of mothers who delivered babies in 2005 initiating breastfeeding.⁶

But on the other hand, children and adolescents in Alaska drink a lot of sugar-sweetened drinks. The Childhood Understanding Behaviors Survey (CUBS) is administered to mothers of 2-year-olds to collect health-related data. In 2006, the survey found that 15% of toddlers in Alaska had consumed one or more cups of soda or other sweetened beverages the day before the survey.⁷ In the 2009 Youth Risk Behavior Survey, about 20% of Alaska's high-school students reported drinking a can, bottle, or glass of pop at least once a day.

Fetal Alcohol Syndrome

Fetal alcohol syndrome (FAS) is the most preventable cause of birth defects and developmental delays among U.S. children—and rates in Alaska have long been higher than in other states. FAS is caused by women drinking while they are pregnant; the severity of birth defects depends on the amount and frequency of alcohol they consume, drinking patterns, and their overall health and lifestyles.

Children with FAS generally have growth deficiencies and developmental delays. FAS is diagnosed with three main criteria: characteristic facial features, central nervous system impairment,

and low birthweight. Children affected by FAS often have mental, cognitive, social, and behavioral problems.

In 2010, the Alaska Division of Public Health published findings about Alaska's recent FAS levels. Alaska is one of the five states that worked with the federal Centers for Disease Control and Prevention to create the Fetal Alcohol Syndrome Surveillance Network.

The division examined medical records of children born between 1996 and 2002 and linked them to birth certificates. A child was determined to have FAS if (1) the child was reported for suspected FAS to the Alaska Birth Defect Registry; (2) the child's medical chart had been reviewed; and (3) the child was matched to an Alaska birth certificate.

Alaska was found to have rates of FAS from about four to eight times higher than the other states participating in the FAS surveillance network (Arizona, Colorado, New York, and Wisconsin).

But the Division of Public Health found that FAS rates in Alaska fell from about 20 to 14 per 10,000 live births from the 1996-1998 period to the 2000-2002 period—a 32% drop. This decline was due solely to a 49% drop in the number of FAS cases among Alaska Native children—from 63 to 32 per 10,000 live births. During the same period, FAS rate among non-Native children in Alaska jumped from 4 to 6 per 10,000 live births—a 64% increase.¹

Still, rates among non-Native children remain much lower than among Alaska Native children. The division believes this gap in reported rates may be at least partly explained by a more comprehensive reporting of potential cases of FAS by Alaska Native health organizations.²

Possible reasons for the decline in FAS rates among Alaska Native children include “development and sustainability of a network of community-based FASD diagnostic teams; development of university-level FASD curricula and statewide training programs for educators and providers; a statewide multi-media public awareness campaign; and increased substance-use screening in primary-care settings.”³

Highlights

How widespread is drinking among pregnant women in Alaska? In 2005, 5.3% of pregnant Alaska women reported drinking alcohol in any amount during the last three months of pregnancy, and less than 1% reported binge drinking (5 or more alcoholic drinks in one setting during the last 3 months of pregnancy).⁴

The FAS surveillance project identified a number of characteristics of women more at risk of having children with FAS: drinking alcohol and smoking cigarettes during pregnancy, being of Alaska Native race, being age 30 or older, and having 12 or fewer years of education.⁵

Besides the terrible effects of FAS on the health of children, the economic effects are also great. In Alaska, the total lifetime medical costs for a child born with FAS in 1999 were estimated to range from \$21 million to \$42 million, compared with \$1.5 million lifetime costs for a healthy infant.⁶

To draw attention to the high personal, social, and economic costs of FAS, the Alaska Legislature has designated September 9th as “Fetal Alcohol Spectrum Disorders (FASD) Day.” FASD Awareness Day is an international event, and September 9th—the ninth day of the ninth month of the year—represents the nine months of pregnancy, when women should not drink alcohol.⁷

ENDNOTES FOR HOMELESS CHILDREN AND TEENAGERS

1. Subtitle VII-B, McKinney-Vento Act.
2. Stephanie Martin and Alejandra Villalobos Meléndez, *Youth in Crisis: Characteristics of Homeless Youth Served by Covenant House Alaska*, Institute of Social and Economic Research, University of Alaska Anchorage, March 2010.

ENDNOTES FOR OVERWEIGHT AND OBESE YOUTH

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Infancy

BIRTHS 2003-2007

Nearly 52,500 babies were born in Alaska from 2003 through 2007, an increase of 2.3% from the previous five-year period. That's an average of about 10,500 babies a year—a very small share of births nationwide. In the entire United States, over four million babies were born in 2007, up one percentage point from 2006.¹

The pie chart shows data for Alaska births from 2003 through 2007, by age and race of the mother. Women 20 years and older had about 90% of the babies born during that period. Those 18 and 19 had 7.4% of all babies; those 15 to 17 had slightly less than 3%. A very small share (0.1%) of babies were born to girls under 15. That breakdown by age of the mother was almost the same as in the period from 2002 through 2006.

The percentages of births by race of the mother reflect the general make-up of Alaskans by race. Alaska has relatively small populations of Black, Asian, and Pacific Islander people. Black women had the smallest percentage of babies (4%); Asian or Pacific Islander mothers had 7.6%.

The largest population groups in Alaska are White and Alaska Native. Alaska Native women had about 25% of the babies born in Alaska in recent years, while White women had almost 63%. The most recent breakdown of births by race of the mother was very similar to what it had been in the previous five-year period.

PRENATAL CARE

Early, effective prenatal care is vital for reducing maternal and infant health risks, as well as for helping women change potentially harmful behavior—so they can stay healthy and deliver healthy babies. According to the National Committee for Quality Assurance, the maternal mortality rate due to complications from pregnancy is three to four times higher among women who don't get prenatal care than among those who do.² Also, infants born to women who receive no prenatal care are three times more likely to be born at low birthweight and five times more likely to die than those whose mothers get prenatal care.³

Not only does inadequate care have significant human costs, it can also create substantial economic costs. For example, it's

estimated that if all American women got adequate prenatal care, the country would save \$14,755 for each baby born at normal weight rather than low birthweight.⁴

Definition

Prenatal care consists of three key elements: risk assessment, medical intervention, and education.⁵ Each element can help identify and address women's health issues and behavior—such as smoking and abusing alcohol or drugs—that can lead to problems for themselves and their babies. Doctors strongly recommend that pregnant women start prenatal care as early as possible.

The Adequacy of Prenatal Care Utilization (APNCU) index takes into account both when a pregnant woman begins getting care and how often she gets care. It divides care into four levels: inadequate care (care started in the fifth month of pregnancy or later and less than 50% of expected visits); intermediate care (care started by the fourth month of pregnancy and between 50% and 79% of expected visits); adequate care (care started by the fourth month and 80% to 109% of expected visits); and adequate care plus (care started by the fourth month and 110% or more of expected visits).⁶

Data

Here we typically report five-year averages of the levels of prenatal care expectant mothers in Alaska get, with data from the Alaska Bureau of Vital Statistics. But data for the period 2003-2007 aren't available right now; we hope information will be available once again for next year's data book.

We do have 2007 data from the federal Centers for Disease Control and Prevention. In that year, about 22% of pregnant women in Alaska either started prenatal care after the first trimester or did not get care at all. By comparison, in other states, the percentages starting late or not getting care at all in 2007 varied from about 14% to 30%.⁷

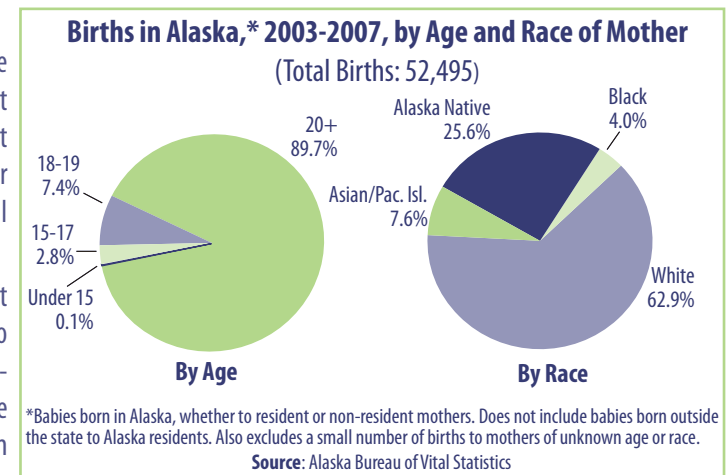
Among Alaska women who started care late or didn't get it at all, nearly half (47%) reported that they wanted to get prenatal care earlier than they did, but for various reasons could not.⁸ What influences whether women receive adequate prenatal care? A 2008 report by the Alaska Division

of Public Health cited possible factors as “the type of health-care provider seen, insurance status, early recognition of pregnancy, and ability to find prenatal care locally.”⁹

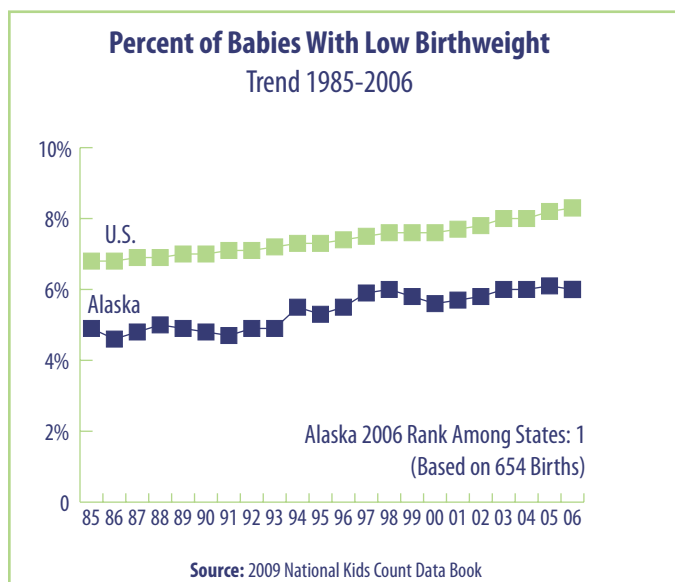
In 2007, 35% of Alaska's women had no health insurance before they got pregnant, while 12% had Medicaid coverage. About 47% of pregnant women in Alaska had Medicaid coverage for prenatal care, some through Denali KidCare—the program that extends Medicaid to pregnant women and children in families with incomes somewhat too high to qualify for traditional Medicaid.¹⁰

The Alaska Pregnancy Risk Assessment Monitoring System has also identified barriers to prenatal care. In 2004 and 2005, about 30% of women who did not get prenatal care as early as they wanted said they couldn't get appointments. Another 26% reported that their doctors or health plans delayed the start of care. More than 22% of women in Alaska who did not receive prenatal care as early as they wanted said they didn't have enough money or insurance, followed by 19% who lacked Medicaid cards.

Some Alaska women who did receive prenatal care as early as they wanted encountered similar obstacles; about 6% described difficulties getting appointments or problems with insurance coverage. Finally, personal issues kept some women from starting prenatal care as early as wanted. Among those women, 15% reported they had too many things going on, and 13% had tried to conceal their pregnancy.¹¹



Babies With Low Birthweight



DEFINITION

An infant born weighing less than 5.5 pounds (2,500 grams) is considered to be at low birthweight, while one born weighing less than 3.3 pounds (1,500 grams) is at very low birthweight. Babies are counted based on their mothers' place of residence, rather than where the babies are born.

SIGNIFICANCE

Weight at birth can be an important indicator of future well-being. The normal span of pregnancy is 40 weeks. An infant's low weight at birth can result from either preterm birth—babies born before 37 weeks of gestation—or restricted intrauterine growth; in that case, babies are born at full term but underweight.

Sometimes babies are born both prematurely and growth-restricted, but most are simply premature. In 2006, 43% of all preterm American babies weighed less than 5.5 pounds, but just 3.2% were growth-restricted.¹

The risks for very small babies differ, depending on the cause. Low birthweight due to being born early can lead to death, long-term illnesses, and disability. Specifically, premature babies born weighing less than 5.5 pounds risk having underdeveloped lungs and breathing problems, while babies weighing less than

3.3 pounds are in danger of having bleeding in the brain, which can cause learning or behavioral problems later in life.² Babies born at full term but growth-restricted can develop health problems that affect them throughout their lives. Those can include growth problems in childhood and increased risk of developing type 2 diabetes, high blood pressure, and heart-related problems as adults. Girls are at additional risk of giving birth to smaller babies when they become mothers themselves.³

Many factors affect whether babies will be born at normal or low birthweight. According to the World Health Organization, those can include the mother's own fetal growth and diet from birth to the time she becomes pregnant; her age; her nutrition, diet, and behavior (for example, abusing alcohol or drugs or smoking); her overall health during pregnancy; and her income and education. Statistics show that low-

income women with little education are more likely to have low-birthweight babies than are more affluent and educated women. Also at higher risk are African-American women and women who are either 17 or younger or 35 and older when they have babies.⁴

How can the incidence of low birthweight be reduced? One of the main strategies is giving pregnant women more access to preconception counseling and care.⁵ Making sure that women are healthy before conception will increase the likelihood they'll have healthy babies with normal birthweight. Besides screening for potential health problems and treating any existing problems, preconception counseling and care can reinforce information about how pregnant women should take care of themselves.

Another strategy is early and regular prenatal care, which allows health-care providers to monitor pregnant women for health risks and treat any chronic problems that could affect babies' birthweight. Through regular health-care consultations, expectant women can also learn about the benefits of breastfeeding, taking vitamins and minerals, eating a balanced diet, and taking other steps that reduce their risk of having low-birthweight babies. Getting prenatal care also gives women ready access to doctors in case they have health complications.

Smoking during pregnancy is the leading preventable cause of low birthweight, with smokers nearly twice as likely to give birth to underweight babies as non-smokers.⁶ In 2006, about 15% of pregnant women in Alaska reported smoking during pregnancy,⁷ compared with 10% nationwide.⁸ In a 2002 survey, 5% of Alaska's pregnant women reported using smokeless tobacco.⁹ Experts believe, however, that rates of smoking among pregnant women are likely higher than reported—because most pregnant women know they shouldn't smoke and may be reluctant to report it.

There are also significant variations by race in percentages of American women who report smoking while pregnant. American Indian and Alaska Native expectant women are most likely (17%) to report smoking while pregnant, followed by White women (11%) and Black women (8%). Asian or Pacific Islander women were the least likely (2%) to report smoking while pregnant.¹⁰

DATA

In 2006, the share of babies born at low birthweight in Alaska was 6%, compared with 8.3% for the U.S. as a whole. Alaska's rate is the lowest in the country—but 6% and 8.3% are both above the goal of 5% set by the national initiative, Healthy People 2010. And in both Alaska and the country as a whole, the percentage of babies being born underweight is higher now than it was 20 years ago, as the trend graph to the left shows.

Babies With Low Birthweight

The Alaska Bureau of Vital Statistics reports that for the five-year period from 2003 to 2007, Alaska's average rate of low-birthweight babies was 5.9%. That overall rate was unchanged from the rate in the previous two five-year periods—2002-2006 and 2001-2005.

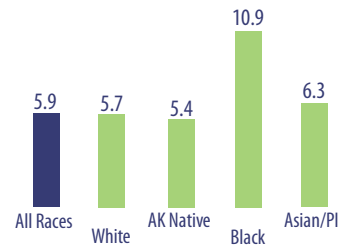
The adjacent bar chart shows low-birthweight rates among Alaska mothers of different races from 2003 to 2007. The highest rate was among Black women, at 10.9%, and the lowest among Alaska Native women, at 5.4%.

Changes in rates from the previous five-year period were mostly modest, the largest being a drop from 6.8% to 6.3% among Asian/Pacific Islander women. The percentage of low-birthweight babies born to Black women was unchanged. That percentage is high not only in Alaska but nationwide, and it remains a cause for concern. Specific reasons why the rate of low-birthweight babies is higher among Black women continue to elude researchers.¹¹

The second bar chart shows the shares of low-birthweight babies by region of Alaska in 2003-2007. The rates were highest in the Mat-Su (6.5%) and Anchorage (6.2%) areas and lowest in the Southeast (5.3%) and Gulf Coast (5.4%) regions.

Four regions (Gulf Coast, Anchorage, Northern, and Southwest) saw minor declines in rates of low birthweight from the previous five-year period, while the Interior region saw a very slight increase. The largest change was an increase from 6% to 6.5% in the Mat-Su region.

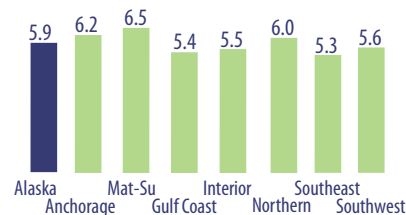
Percentage of Alaska Babies With Low Birthweight, by Mother's Race*
(5-Year Average, 2003-2007)



*Mothers whose race is unknown are included in the "All Races" calculations.

Source: Alaska Bureau of Vital Statistics

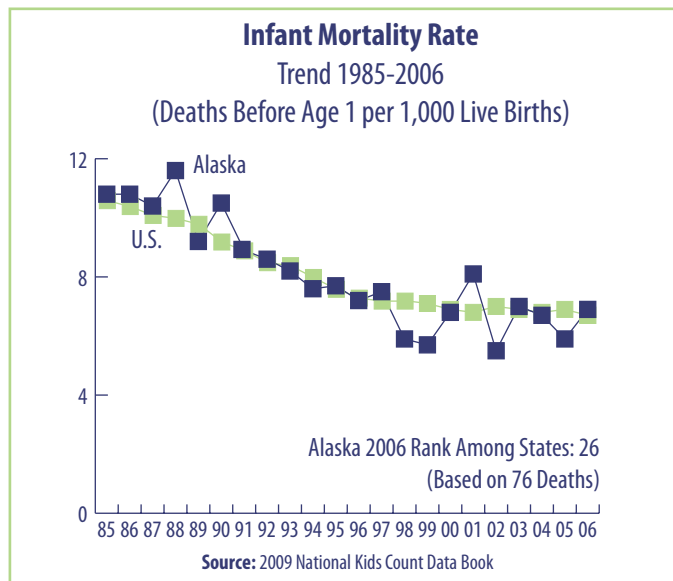
Percentage of Alaska Babies With Low Birthweight, by Region*
(5-Year Average, 2003-2007)



*Mothers whose residence is unknown are included in the statewide Alaska calculations.

Source: Alaska Bureau of Vital Statistics

Infant Mortality



DEFINITION

Babies under a year old are considered infants. The number of infant deaths for every 1,000 live births is the infant mortality rate. Infant deaths are recorded and counted in the region where the mothers live. Alaska law requires that deaths and other crucial information, like births and marriages, be registered with the Alaska Bureau of Vital Statistics.

SIGNIFICANCE

Infant mortality rates are key indicators of the health and welfare of infants and expectant women. These rates are strongly linked to the health of the mother, social and economic conditions in the countries and communities where the babies are born, public health practices, and the availability and quality of health care for infants and pregnant women.¹ Being born into poverty, in communities that are unsafe or have high levels of unemployment, to poorly educated parents, can increase the likelihood that infants won't survive their first year.

It's important to promote healthy maternal behaviors that can minimize and eventually prevent many infant and maternal deaths. Mothers who smoke, abuse alcohol or drugs, and get

late and insufficient prenatal care put themselves and their babies at risk for later problems. Taking recommended vitamins (like folic acid) before and during pregnancy, breastfeeding, and placing infants on their backs to sleep are crucial ways to help prevent infant deaths.²

The U.S. spends more than other high-income countries for health care, yet its rates of infant mortality are higher. In 2007, the United States spent 16% of its gross domestic product for health care; the next highest was France, at 11% of gross product. Per person, the U.S. spent \$7,290 in 2007; the next highest per-person spending was in Norway, at \$4,763—almost 50% less.³

International data for infant mortality were last released in 2005, when the United States ranked 30th among industrialized countries, with 6.9 infant deaths per 1,000 births. By comparison, the rate was lowest—2.1—in Singapore; a few other East Asian and some Scandinavian countries had

rates of 3.0 or lower. More than 20 countries had 5 or fewer infant deaths per 1,000 births.⁴

Reasons why the infant mortality is higher in this country are not all clear, but researchers say a big reason is that the rate of preterm births—births before 37 weeks of gestation—is higher. For example, one in eight American babies born in 2004 was preterm, while in Ireland and Finland the rate was one in eighteen births. Preterm births are known to be one of the major causes of infant deaths, and experts see reducing the number of babies born early as critical to reducing the U.S. infant mortality rate.⁵

DATA

Healthy People 2010 is a written set of health goals for the U.S. Its target goal for the U.S. infant mortality rate is 4.5 deaths per 1,000 live births.⁶ The 2006 national infant mortality rate of 6.7 deaths per 1,000 was nearly 50% higher than the set goal. Still, it was a slight improvement from 2005, when the U.S. infant mortality rate was closer to 7 deaths per 1,000 live births.

Healthy Alaskans 2010 is a set of health goals for Alaskans. Its target for the infant mortality rate is the same as the national goal of 4.5. The 2006 Alaska rate was higher than the national average, at 6.9.⁷ Among the 50 states, Alaska's ranking fell to 26th place in 2006—twice as low as its ranking of 13th place in 2005, when the state's infant death rate was 5.9.

But because Alaska has a small total population and relatively small numbers of infant deaths, the state's infant mortality rates tend to fluctuate, sometimes sharply, from year to year. Even small changes in actual deaths can affect the death rate significantly. Between 2000 and 2006, for example, Alaska's infant death rate moved up and down—6.8 in 2000 (68 total infant deaths), 5.5 in 2002 (55 deaths), 6.7 in 2004 (69 deaths), 5.9 in 2005 (62 deaths), and 6.9 (76 deaths) in 2006.⁸

The trend graph at the top left corner clearly captures a gradual overall decline in the infant mortality rates in the U.S. and noticeable fluctuations in Alaska's annual rates.

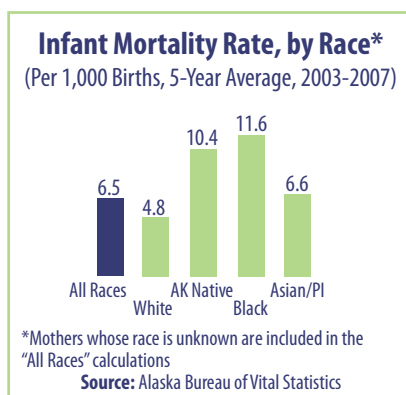
Because of the year-to-year fluctuations caused by small numbers, we prefer whenever possible to present data for Alaska as a whole and its subgroups as five-year averages. From 2003 to 2007, Alaska's infant mortality rate was 6.5 deaths per 1,000 live births—up slightly from a rate of 6.4 for the 2002-2006 period.

The difference in infant mortality rates by race seen nationwide also holds in Alaska. The bar chart on the facing page shows that from 2003 to 2007, the mortality rate in our state averaged 4.8 per 1,000 for White infants, 6.6 for for Asian/Pacific Islander infants (down from 7.4 in 2002-2006), 11.6 for Black infants (down from 11.8), and 10.4 for Alaska Native infants; that was a noticeable jump from 9.4 in 2002-2006.

Infant Mortality

Disparities in infant mortality rates among racial groups still puzzle researchers. Some studies suggest that a combination of differences in diet, genetic and environmental conditions, and health services may partially explain lower or higher rates.⁹

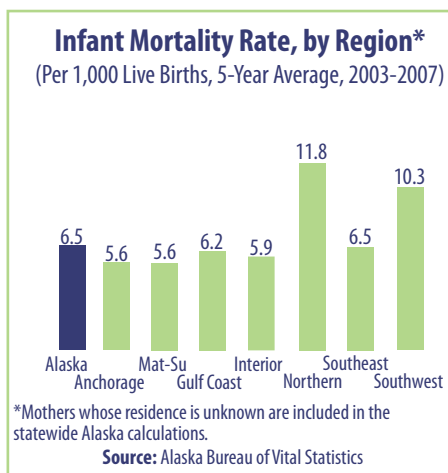
But keep in mind when interpreting these data by race that Alaska's populations of Black and Asian/Pacific Islander people are small—which means relatively small changes in numbers of deaths can affect rates much more than small changes would among the larger population groups, White and Alaska Native.



There are also differences in infant mortality rates by region of Alaska. In 2003-2007, Alaska's overall infant mortality rate was 6.5 deaths per 1,000 births, but regional rates ranged from 5.6 to 11.8.

The Anchorage and Mat-Su regions both had rates of 5.6. Anchorage's rate increased very slightly from the previous five-year period, from 5.5 to 5.6, and Mat-Su's from 5.1 to 5.6.

The next highest rate was in the Interior region, at 5.9 (no change from the previous period), followed by the Gulf Coast, at 6.2, a slight decrease from 6.6 in 2002-2006. The rate of 6.5 in the Southeast region was down from 7.1 previously.



The region with the highest infant mortality rate (11.8 per 1,000 births) was Northern; that was up from 11.3 in 2002-2006. The largest increase in 2003-2007 occurred in the Southwest, where the rate was 10.3, up from 9.4.

It's worth noting that the regions with the highest infant mortality rates are also the most remote, with less access to prenatal care—and research has linked inadequate prenatal care to higher infant mortality rates.

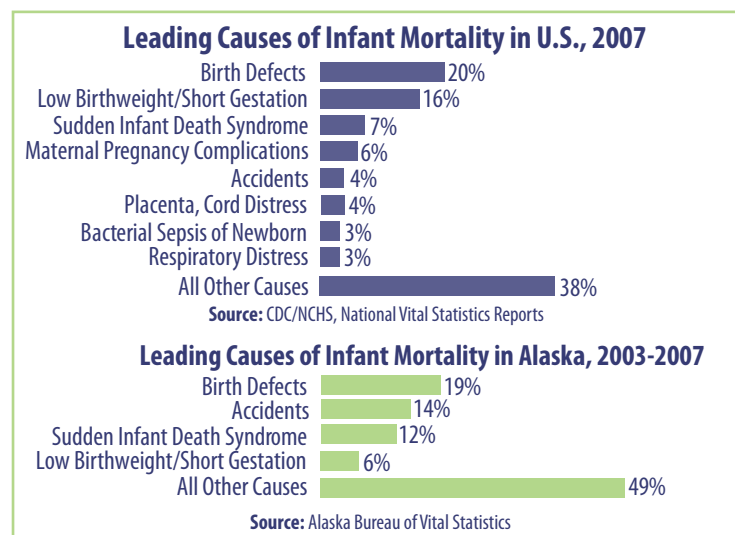
CAUSES OF INFANT DEATHS

The Alaska Bureau of Vital Statistics reports the causes of infant deaths for Alaska, while national data are gathered from death certificates and analyzed by the federal Centers for Disease Control and Prevention. The figure below shows the leading causes of infant mortality in Alaska for the combined years 2003-2007 and in the entire U.S. for 2007.

Birth defects continue to account for the most infant deaths—about 20%—both nationwide and in Alaska. But while low birthweight/short gestation is the second highest cause of infant deaths in the country as a whole (16%), in Alaska the second leading cause is accidents, which are responsible for 14% of infant deaths. That's more than three times higher than in the country as a whole, where accidents account for 4% of infant deaths.

Sudden Infant Death Syndrome (SIDS) is also nearly twice as prevalent in Alaska, accounting for 12% of deaths, compared with 7% nationwide.

By contrast, low birthweight in Alaska accounts for about 6% of infant deaths—compared with 16% nationally. That difference in part reflects the fact that Alaska has the smallest percentage in the country of babies born at low birthweight.



Infant Mortality

NEONATAL AND POST-NEONATAL MORTALITY

Generally, infant mortality is divided into neonatal and post-neonatal mortality. Neonatal mortality is an infant death that occurs before the infant is 28 days old; post-neonatal mortality is the death of an infant between 28 days and one year old.

It's important to distinguish between these two periods, because the risk of an infant dying is higher as the delivery time approaches, and the causes of death near the time of delivery differ from those later in infancy. So to find ways to reduce the number of infant deaths, we need to know how old infants are when they die.

Neonatal mortality is generally associated with preterm birth (short gestation and low birthweight), congenital malformation (physical defects), and conditions related to the prenatal period. Post-neonatal mortality is mostly caused by events after delivery, like unintentional injuries.

National data on neonatal and post-neonatal infant mortality are from the Centers for Disease Control and Prevention.¹⁰ Data for Alaska are from the Alaska Bureau of Vital Statistics.¹¹

Neonatal Mortality

The neonatal mortality rate is calculated by dividing the number of children who died before reaching 28 days by the total number of live births that year. Between 2005 and 2007, Alaska's neonatal mortality rate was 3.3 deaths per 1,000 live births—lower than the 2006 national average of 4.5.

The main causes of neonatal deaths in Alaska during 2003-2007 were birth defects (26%), preterm births (12%), and prenatal events (12%).

The neonatal mortality rate varies by race, in Alaska and across the country. In 2006 in the U.S., White infants were less likely to die during the neonatal period (3.7 deaths per 1,000) than American Indian/Alaska Native infants (4.3). In Alaska, from 2005-2007, Alaska Native babies were also at an increased risk of dying before 28 days—with a neonatal mortality rate of 3.8, compared with 2.5 among White infants.

The most recent data on neonatal mortality by region in Alaska are for the period 2001-2005. During that time, the neonatal death rate was highest in the Southwest region (4.6 per 1,000 births), followed by the Northern region (3.9). Infants born in the Southeast had the lowest risk of dying before 28 days (1.8).¹²

Post-Neonatal Mortality

The post-neonatal mortality rate is the number of children dying between 28 days and one year of age, divided by the number of live births that year. In Alaska, the post-neonatal mortality rate for 2005-2007 was higher (3.1 deaths per 1,000 births) than the 2006 national average of 2.2.

Major causes of post-neonatal mortality among Alaska infants from 2003 to 2007 were accidents (25%), sudden infant death syndrome (22%), and birth defects (11%).

Post-neonatal mortality rates vary by race, in Alaska and in the U.S. as a whole. Nationwide in 2006, the post-neonatal infant mortality rate for White infants was 1.9, while for American Indian/Alaska Native infants it was 4.0—more than 50% higher. The disparity between the two groups is even more dramatic in Alaska: during 2005-2007, Alaska Native babies were more than three times as likely to die (6.5 deaths per 1,000 births) between 28 days and one year of age than White babies (2.0).

Post-neonatal mortality rates also varied by region in Alaska from 2001 to 2005. As with the overall infant mortality rate, the Northern region had the highest post-neonatal rate (8.6 deaths per 1,000 live births), followed by the Southwest region (5.0). The lowest post-neonatal rate, 2.7 deaths per 1,000 live births, was in the Southeast region.¹³

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11. Alaska Department of Health and Social Services, Division of Public Health, Alaska Bureau of Vital Statistics, *2007 Annual Report*. Retrieved July 2010: www.hss.state.ak.us/dph/bvs/data/2007ar.htm.
12. K. J. Schoellhorn, K. A. Perham-Hester, and Y.W. Goldsmith, *Alaska Maternal and Child Health Data Book 2008: Health Status Edition*, Maternal and Child Health Epidemiology Unit, Section of Women's, Children's, and Family Health, Division of Public Health, Alaska Department of Health and Social Services, Anchorage, Alaska, December 2008.
13. See note 12.





Economic Well-Being

Children Living in Poverty

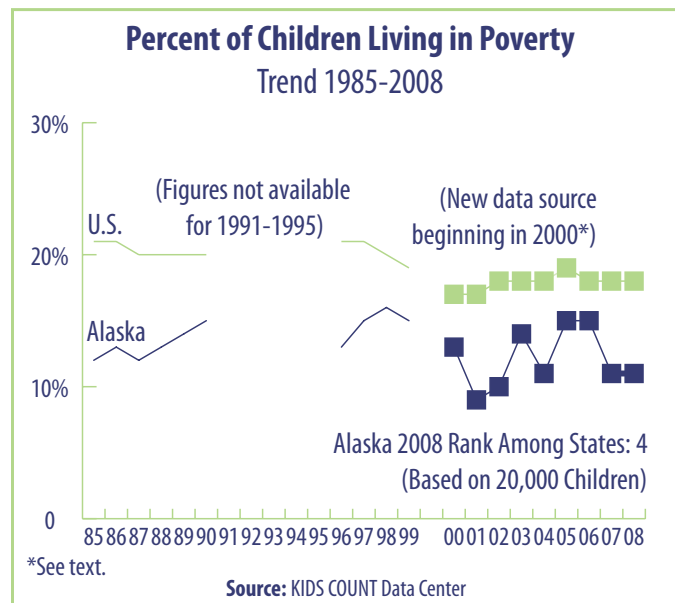
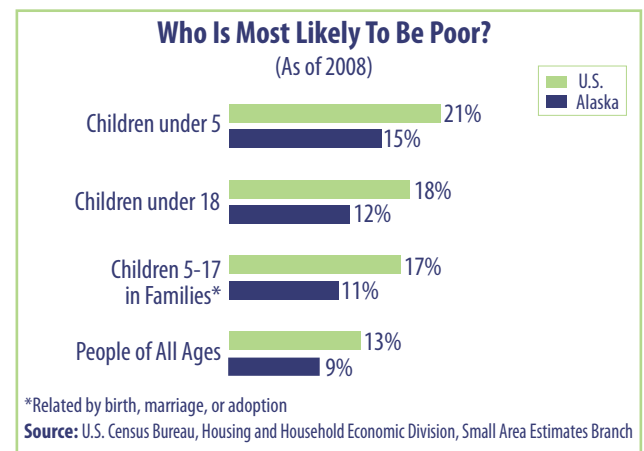
Almost 15,000 grandparents in the state have grandchildren living with them; grandparents are responsible for the children in 42% of these households, and the parent is absent in 35%. About 14% of the Alaska families headed by grandparents are below the poverty level.⁵ About one-quarter spend 30% or more of household income on housing; in the country as a whole, more than a third of households headed by grandparents spend that much.⁶

If current trends continue, over time even more children will be growing up poor. And as the figure below shows, children—especially the youngest children—are already far more likely than adults to be poor.

DATA

In 2008, the American Community Survey estimated there were 97,980 families in Alaska, with 180,656 children. Just over one in ten (11%) of these children were living in poverty in 2008; that share was unchanged from 2007. As the trend graph in the upper left corner shows, the official poverty level among children nationwide remained at 18% for the third year in a row.⁷

But we know from other indicators, with more current data, that families aren't faring well in the current recession. Alaska's unemployment rate increased from 6.8% in December 2008 to 8.8% in December 2009—up 29%. Nationwide, the increase was 35%—from 7.4% in December 2008 to 10% in December 2009.⁸



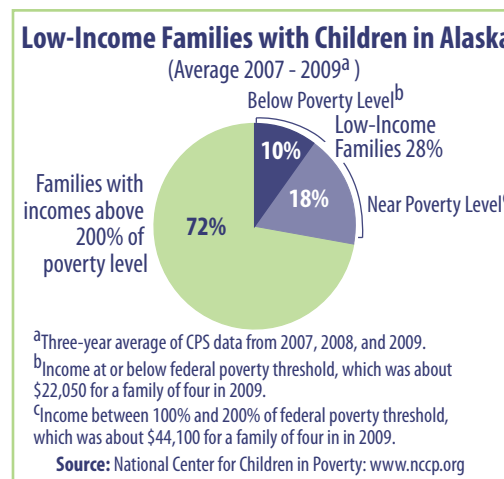
DEFINITION

The measure of poverty most widely used in the U.S. is the federal poverty level, established by the U.S. Office of Management and Budget; it varies with the size and composition of households. The federal government updates this measure every year to account for changes in the cost of living, using the Consumer Price Index. A family of two adults and two children was considered below the poverty level if the family's income was below \$21,834 in 2008 and below \$22,050 in 2009.

This measure was first released in 1964, based on a 1955 survey by the U.S. Department of Agriculture of the proportion of income households spent on food. But the share of income households spend on food and other items has changed over the past 50 years, and many analysts believe the poverty level doesn't accurately measure poverty among Americans.

For example, the National Center for Children in Poverty estimates that families need an income of about twice the federal poverty level to meet their most basic needs.¹ The pie chart shows that 28% of Alaska families with children had low incomes—below 200% of the poverty level—in recent years. Nationwide, 41% of children live in low-income families.

So for some time now, there have been calls for an improved, updated way of estimating poverty. The U.S. Census Bureau is in fact developing a new measure, the Supplemental Poverty Measure, scheduled to be released in fall 2011.² It will take into account household resources such as tax payments and work expenses. The new measure will not, however, replace the poverty level figures, and will not be used to estimate eligibility for government programs.³ Instead, it is intended to improve understanding of economic conditions and trends.



SIGNIFICANCE

Several demographic trends in the U.S. increase the likelihood that children will be poor. Numbers of both one-parent households and unmarried mothers have been growing for decades and have accustomed Americans to more children living with single parents. Research has shown that children in single-parent households are more likely to live in poverty than those in married-couple families. Yet another trend has also emerged: more grandchildren are living with grandparents—both with and without parents as part of the household. Many of those households are also financially strained.

The American Community Survey (2005-2007) estimates there are about 90,000 households with children under age 18 in Alaska.⁴

Children Living in Poverty

A recent report by the Brookings Institution notes that there is an even higher association between child poverty rates and food stamp participation rates than there is between child poverty and unemployment rates.⁹

Use of food stamps (now known as the Supplemental Nutrition Assistance Program) increased by 12% in Alaska from the first half of 2008 to the first half of 2009. And Alaska was not alone—use of food stamps went up in all 50 states during that time.

The *New York Times* reported in November 2009 that one in eight Americans—11.5%—and nearly one in four children rely on food stamps. The *Times* also listed the percentage of people receiving food stamps by county nationwide. Alaska's Wade Hampton census area—which has no organized regional govern-

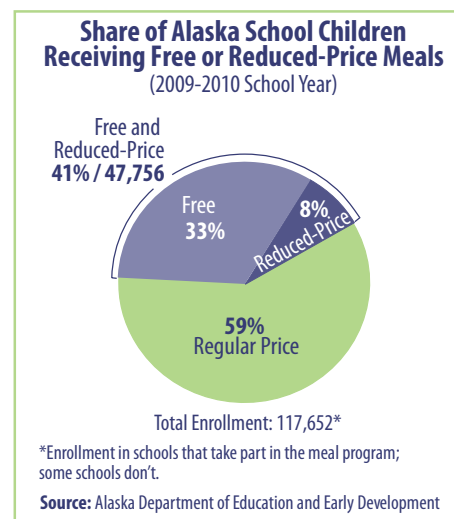
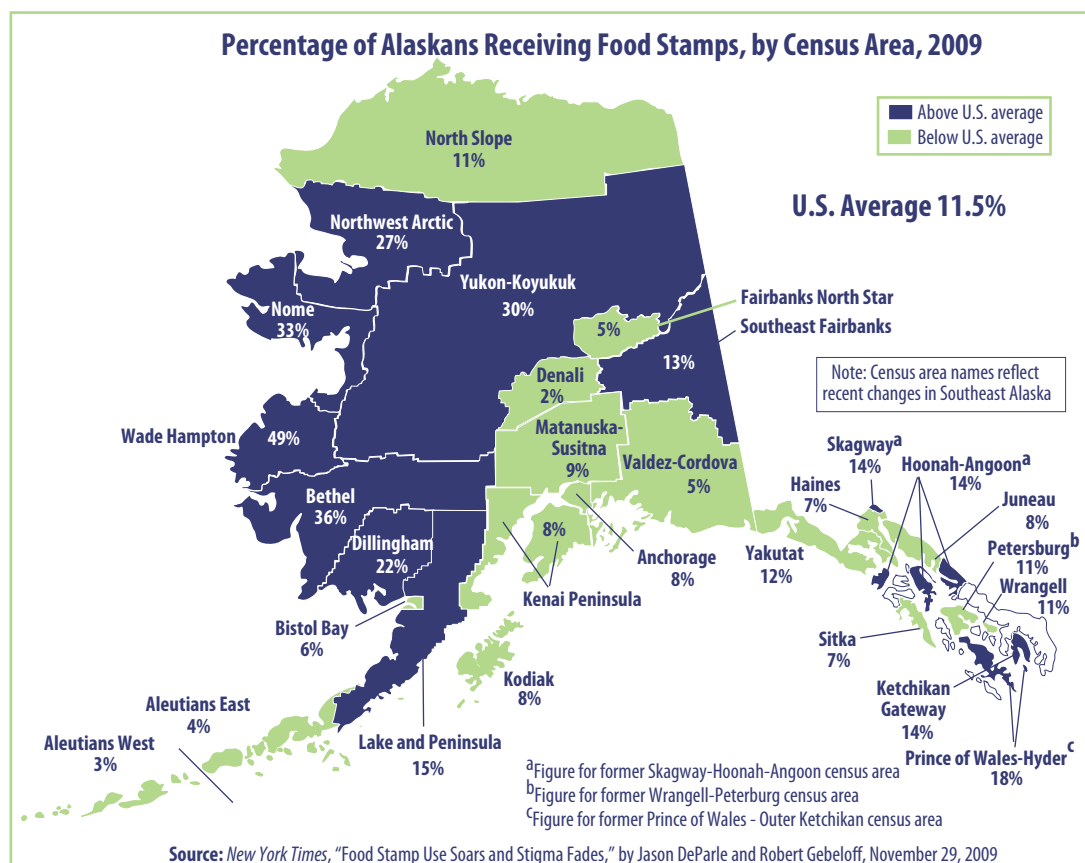
ment—is one of only three areas across the country where 49% of the population receives food stamps. The percentage of children in the Wade Hampton area who depend on food stamps is even higher—62%.¹⁰

The map below shows percentages of the population in each of Alaska's census areas who rely on food stamps, and how many of those areas are above or below the U.S. average. Many are above the national average; several are triple the average.

Another sign of poverty is the share of school children receiving free or reduced-price meals. The eligibility guidelines for free or reduced-price meals are adjusted for Alaska's higher costs of living. Children in families with incomes less than 130% of the federal poverty guidelines are eligible for free meals, and those with incomes

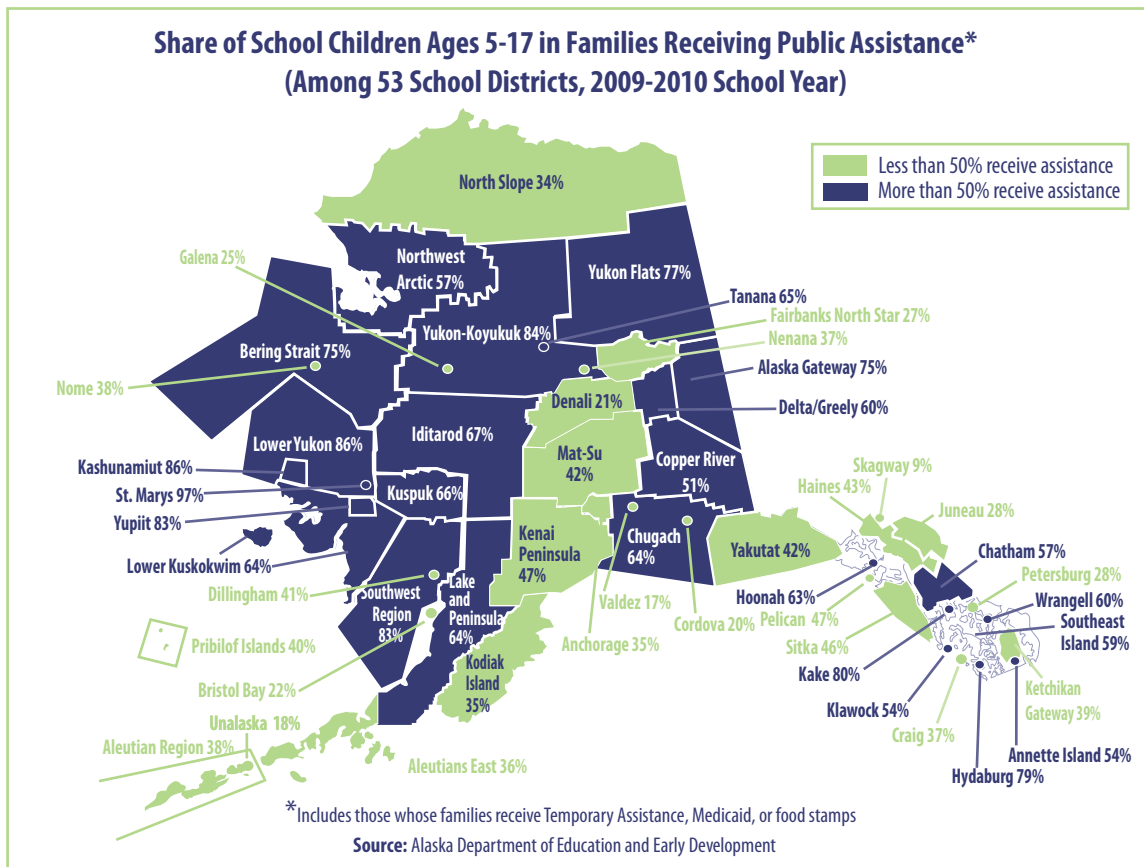
between 130% and 185% can buy meals at reduced prices. In the 2009-2010 school year, Alaska children in families of four with annual incomes up to \$51,005 could qualify for reduced-price meals.

As the pie chart shows, 41% of Alaska's public school children received free or reduced-price meals in the 2009-2010 school year; of those, most received free meals. The percentage of children receiving free or reduced-price meals varied greatly across school districts, with the highest percentages in Alaska Gateway (90%), Hydaburg (94%), Southwest Region (91%), and Yupiit (91%). The districts with the lowest proportions of eligible children were Skagway (14%), Unalaska (17%), and Juneau (22%).



Children Living in Poverty

Finally, we know that people with less education on average earn less. About 73% of American children whose parents work full-time but have less than a high-school education are low-income—compared with just 17% among those whose parents have at least some college education. Among Alaska families where parents have less than a high-school education, 80% of the children are low-income—compared with 21% of children in families where parents have some college education.

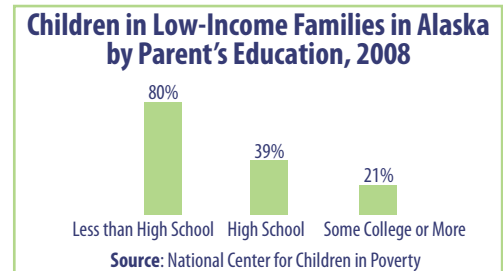
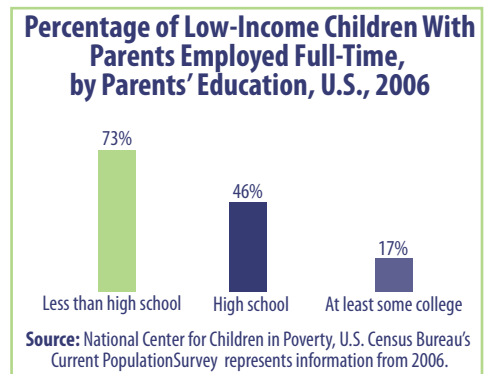
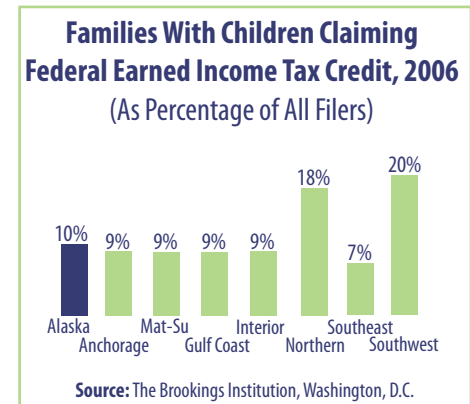


Yet another indication of poverty is the share of children in families receiving public assistance (Temporary Assistance, Medicaid, or food stamps). On the map above, school districts in green are those where under 50% of students came from families receiving public assistance in the 2009-2010 year, and districts in blue are those where more than 50% came from such families. In half the districts, 50% or more of students came from families receiving public assistance.

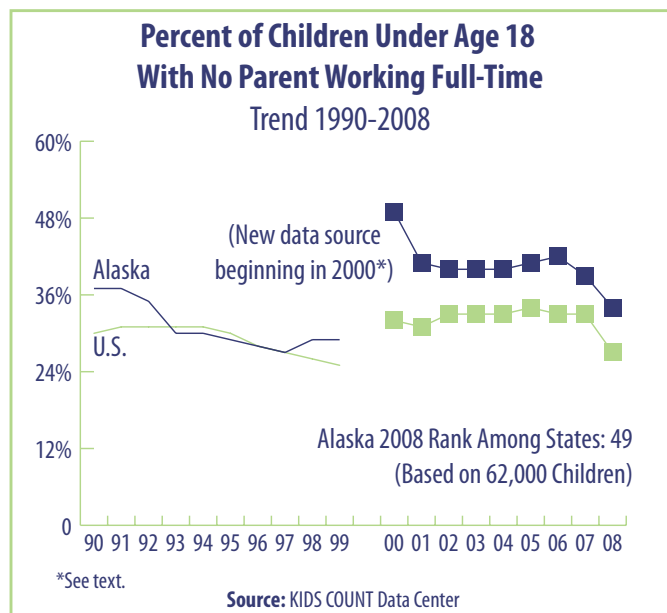
That was up from 2008-2009, when the share of students from families receiving public assistance exceeded 50% in only about a third of districts. Some districts saw dramatic increases. But remember that many districts have small numbers of students—so even a modest increase in actual numbers receiving public assistance can cause a significant increase in the percentage receiving assistance.

Still another sign of how many families have low incomes is the share claiming the Earned Income Tax Credit (EITC), a refundable federal income tax credit for individuals and families who work but earn low wages. The credit is first applied to the amount of taxes owed; if the credit exceeds the amount owed, the filer may claim the remainder as a refund. The top bar chart shows the regional distribution of Alaskans with children who claimed the EITC, among all those who filed tax returns in 2006.

On average, 10% of Alaska families with children claimed the EITC in 2006. The regional share claiming the credit ranged from a high of 20% in the Southwest to a low of 7% in the Southeast.



Children With No Parent Working Full-Time



suggests options to make higher education more accessible to low-income parents: increase access to financial aid for low-income students; help low-income parents enrolled in higher education with child-care costs; and continue support for Head Start, because low-income children who attend are more likely to graduate from high school and attend college.³

DATA

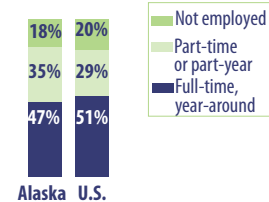
The trend graph to the left shows that in 2008, 34% of Alaska's children had no parent working full-time, year-around—better than in 2007, when the share was 39%, but still much higher than the U.S. average of 27%.

The line graph below shows types of parental employment for children just in low-income families—those with incomes below 200% of the poverty level—in Alaska and the U.S. from 1997 to 2008. Children from low-income families in Alaska are less likely to have parents working full-time and more likely to have parents working part-time.

In 2008, 47% of children from low-income families in Alaska and 51% nationwide had at least one parent working full-time, year-around (bar graph, upper right). About 35% in Alaska had parents employed part-time or part-year—not surprising, since many Alaskans work seasonally in construction, fishing, or tourism. But having only seasonal work can have serious consequences for families, which often lack health insurance and other benefits.

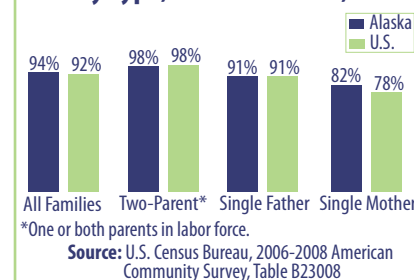
Employment Status of Parents in Low-Income Families

Alaska and U.S., 2008



Source: National Center for Children in Poverty, Alaska Family Economic Security Profile, Data Source: U.S. Census Bureau's Current Population Survey, collected in 2007, 2008, and 2009

Parents in Labor Force by Family Type, Alaska and U.S., 2007



As the adjacent bar graph shows, levels of employment among two-parent and single-parent households also vary. Labor-force participation among all Alaska families was 94% in 2006-2008, up from 91% in 2005-2007. Nationwide, the percentage remained constant at 92%.

But while almost all two-parent families in Alaska and around

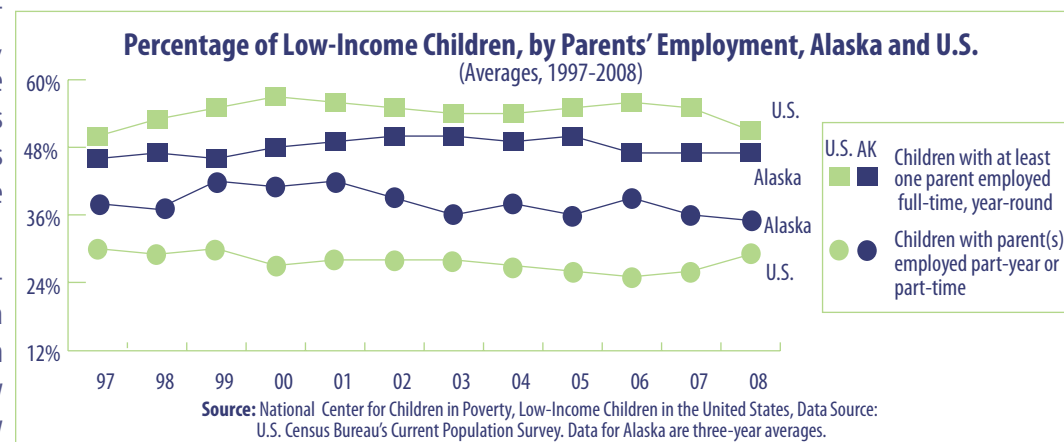
DEFINITION

The trend graph shows the percentage of children under 18 with no parent working full-time, year-around—including children who live with one parent, both parents, or neither parent. Full-time, all-year employment is usually defined as working 35 or more hours a week for 50 to 52 weeks per year. Since 2000, the source of these data has been the American Community Survey (ACS).

SIGNIFICANCE

Full-time employment that provides families with adequate income can have many benefits: adequate housing, nutritious food, and access to health care—all of which reduce stress and improve family functioning.¹ A number of studies have shown that children in households with higher incomes have fewer behavioral problems and do better in school, are healthier, and are likely to be better off financially as adults.²

But full-time work doesn't guarantee economic security. Other factors, including educational attainment, have a substantial effect on family income. In general, children with parents who have less than a college education are more likely to be low-income. The National Center for Children in Poverty

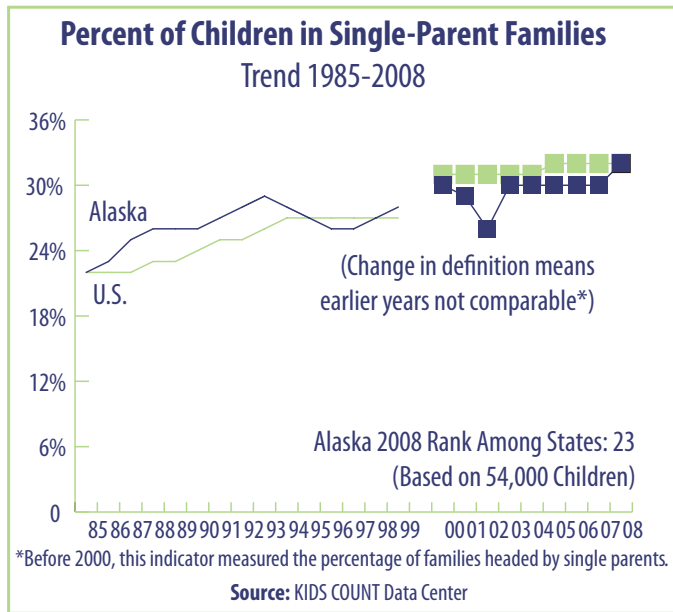


Nationwide, the share of low-income children with parents working part-time was 29%—up from 26% in 2007.

By contrast, 83% of children in Alaska families with incomes above 200% of the poverty level have parents who work full-time. Only 16% have parents working just part-time or part-year.⁴

As the adjacent bar graph shows, levels of employment among two-parent and single-parent households also vary. Labor-force participation among all Alaska families was 94% in 2006-2008, up from 91% in 2005-2007. Nationwide, the percentage remained constant at 92%. But while almost all two-parent families in Alaska and around the country have at least one parent in the labor force, that figure drops to 91% among single fathers and 82% among single mothers raising children in Alaska. Still, the share of single mothers in Alaska who are in the labor force continues to be higher than the U.S. average of 78%.

Children Living in Single-Parent Families



DEFINITION

This indicator is defined as the percentage of children under 18 living with their own single parents, either in families or subfamilies. These families may include unmarried couples living together. Children who live in institutions, dormitories, or other group quarters are not included.

SIGNIFICANCE

Family structure strongly influences whether children will be poor. Children who live with a single parent—regardless of race or ethnicity, or whether the parent lives with an unmarried partner—are more likely to be poor than those living with married parents.¹ Although various sources report somewhat different percentages, roughly 21% of single-father families and 35% of single-mother families live below the poverty line.²

Children raised in poverty are at great risk for a wide range of educational, cognitive, social, emotional, economic, and health problems—and the percentage of children in single-parent families below the poverty line is higher than among children who live with two parents. Children in poor

families often have less parental supervision and their parents are more likely to be stressed. Also, these children are more likely to have unstable families that continually face changes, including frequent moves.³

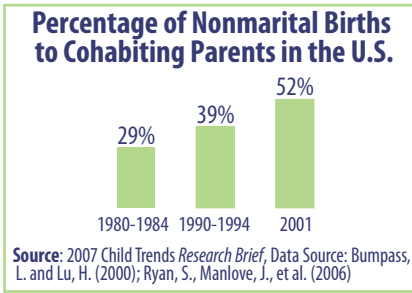
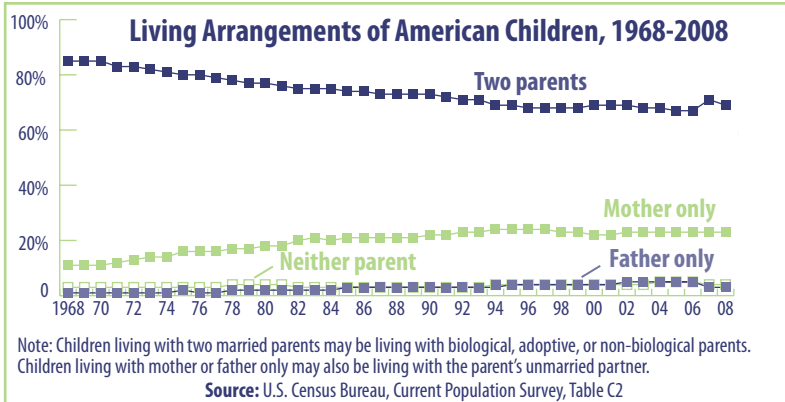
Child Trends—a nonprofit research center that studies children of all ages—suggests that providing support for single-parent families can be key to reducing poverty and alleviating its effects on children. The organization suggests it might help to “support efforts to strengthen marriages and to decrease births to teens and unmarried women; redouble efforts to promote child-support enforcement; continue child-care subsidies; and inform low-income parents about food and health-care assistance.”⁴

DATA

As the graph to the left shows, the share of children in single-parent families in the U.S. has remained at 32% for four consecutive years. In Alaska, the share increased from a level 30% during 2003-2007 to 32%—the U.S. average—in 2008.

The U.S. has seen a long-term trend of fewer children living with both parents and more living with single mothers and to a lesser extent with single fathers (line graph below). That trend has, however, slowed in recent years.

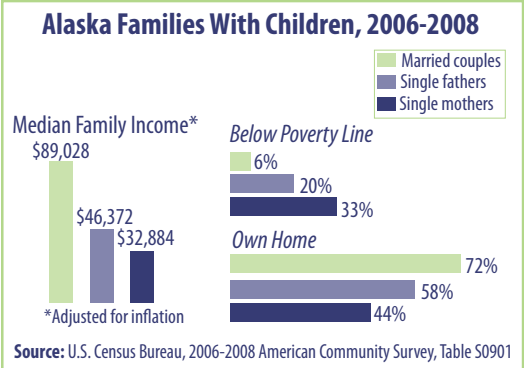
Most American children are still born to married couples, but the share born outside marriage increased from 22% in 1985 to 37% in 2005. And among those births outside marriage, there



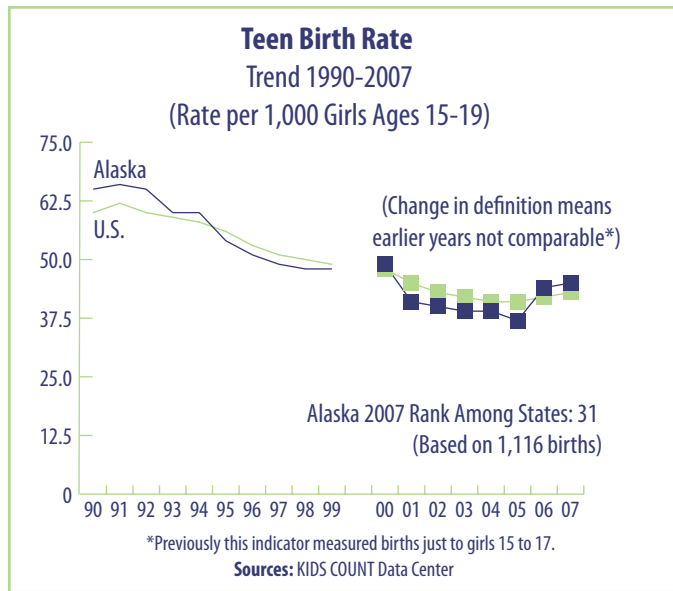
is an increasing trend of more babies being born to unmarried couples living together. From the early 1980s to 2001, the percentage of births to unmarried parents living together increased from 29% to 52%.⁵ This continuing growth in the share of babies born outside marriage—together with growth in the percentage of babies born to unmarried couples living together—makes it likely that the share of American children being raised in single-parent households will continue to rise.

The bar chart below confirms that Alaska children being raised by married couples are far better off economically. The median income of married couples with children (\$89,028) is almost twice that of single fathers (\$46,327) and almost three times that of single mothers (\$32,884). Single mothers are five times more likely and single fathers three times more likely to live below the poverty line than married couples.

And while nearly three-quarters of married couples with children own homes, less than half of single mothers and just over half of single fathers are homeowners.



Births to Teens



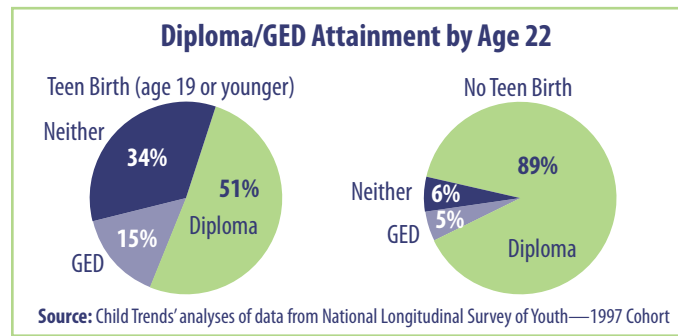
DEFINITION

The trend graph above shows the teen birth rate—the number of births per 1,000 girls 15 to 19, based on population estimates of the U.S. Census Bureau. Before 2000, this indicator measured just births to girls 15 to 17—so the rates before and after 2000 aren't comparable. Births are reported based on the mother's residence, not the place where the baby was born.

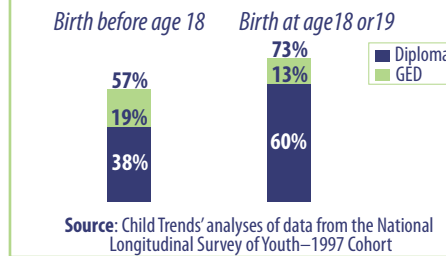
SIGNIFICANCE

At the core of problems teenage mothers face is lack of education. Using data from the National Longitudinal Survey of Youth, Child Trends (a nonprofit research organization) recently assessed whether women in their early 20s who had babies as teenagers had graduated from high school or passed the General Educational Development (GED) test.¹ Their findings include the following:

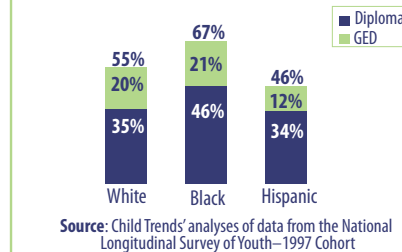
- Girls who had babies as teenagers are less likely to earn diplomas by age 22. The differences in educational attainment among those who did and didn't have babies when they were teenagers are dramatic (see pie charts above). Among the teenage mothers, 51% had high-school diplomas, 15% had GEDs, and 34% had neither. Among other young women, 89% had diplomas, 5% had GEDs, and 6% had neither by age 22.



Diploma/GED Attainment Before Age 22, by Age at First Birth



Diploma/GED Attainment Among Teen Mothers Before Age 22 by Race/Ethnicity



- Those who have babies when they are 17 or younger are much less likely to earn high-school diplomas (38%) than those who have babies at 18 or 19 (60%). But the younger mothers are more likely to obtain GEDs.
- Black teenage mothers are more likely to earn high-school diplomas or GEDs by age 22 than either White or Hispanic mothers—67% among young Black mothers, compared with 46% among Hispanic mothers and 55% among White mothers.

DATA

The trend graph to the far left is from the national KIDS COUNT data center and is based on information from the U.S. Census Bureau. It shows that the birth rate among American teenagers, which had been declining since the early 1990s, leveled off and then went up from 40 per 1,000 teenage girls (15 to 19) in 2005 to 43 in 2007—nearly an 8% increase.² Preliminary data for 2008 show the national rate starting to decline again.

The trend graph also shows a substantial increase in birth rates among Alaska's teenage girls from 2005 to 2007. But the Alaska Bureau of Vital Statistics has calculated different results for that period. Both sources show a long-term decline in birth rates, falling to a low point in 2005 and then climbing again. The 2006 increase shown in the trend graph is much larger than that reported by the Alaska Bureau of Vital Statistics.

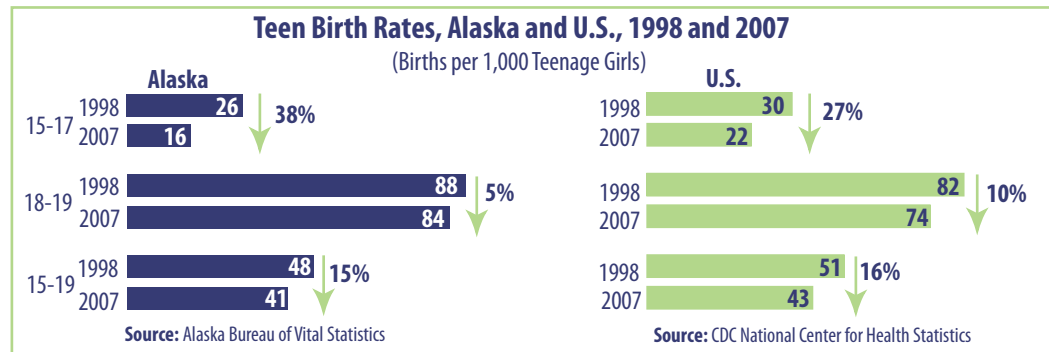
Alaska Teen Birth Rates, 2003-2007

(Rate per 1,000 Girls 15 to 19)

| | 2003 | 04 | 05 | 06 | 2007 |
|-------------------------------|------|----|----|----|------|
| KIDS Count Data Center | 39 | 39 | 37 | 44 | 45 |
| AK Bureau of Vital Statistics | 41 | 41 | 39 | 41 | 41 |

The difference seems to be that the Census Bureau's estimates of the number of girls 15 to 19 in Alaska in 2006 and 2007 are considerably lower than those of the Alaska Department of Labor, which also estimates population by age.³ The Bureau of Vital Statistics uses the Department of Labor's estimates when calculating teen birth rates—which means its recent rates are lower than those based on Census Bureau estimates. We believe that the Alaska Department of Labor's estimates, which are based on broader sources of information, are likely more accurate.

Births to Teens



The bar chart above compares birth rates in 1998 and 2007, among younger (15 to 17) and older (18 and 19) girls, in both Alaska and across the country. The Alaska rates are those reported by the Alaska Bureau of Vital Statistics.

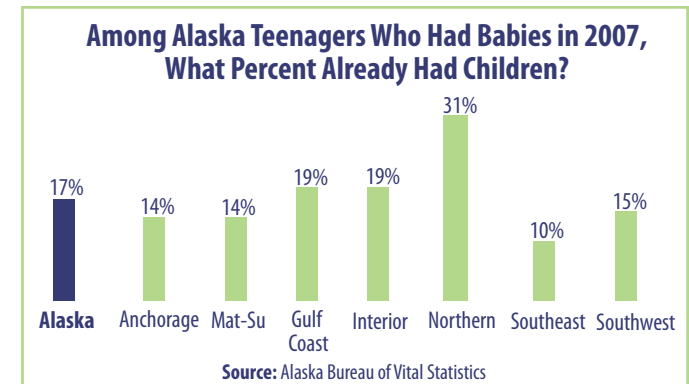
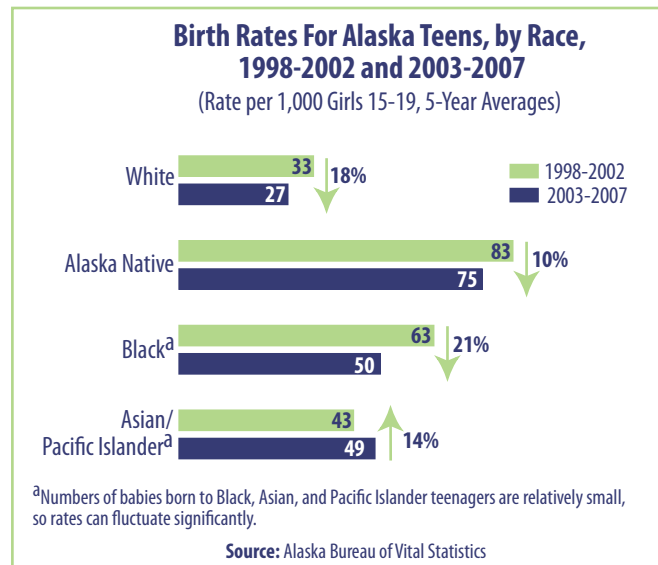
Birth rates were lower among both older and younger girls in 2007 than in 1998, but the drop was especially large—38%—among younger teenagers in Alaska. So the overall 2007 teen birth rate, according to the Alaska Bureau of Vital Statistics, was lower in Alaska (41 per 1,000 girls) than it was nationwide (43).

Rates by Race and Region

The adjacent bar charts compare birth rates among Alaska girls by race and by region, for the period 2003 to 2007, as well as reporting changes from earlier periods.

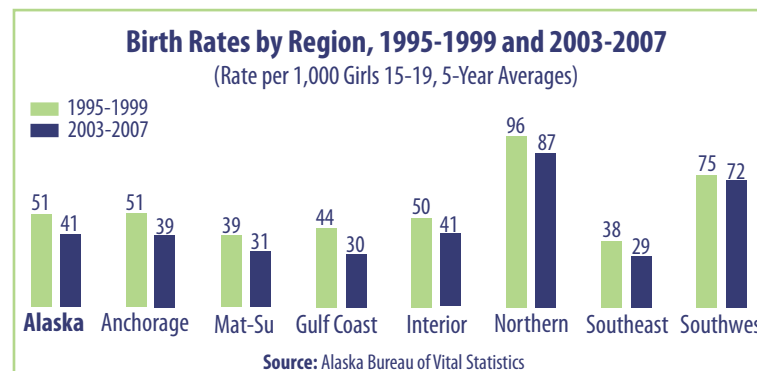
We use five-year averages (rather than single years) for these breakdowns, because the number of teenage girls by race or region can be so small that an increase—or decrease—in the actual number of births can translate into a substantial change in the birth rate. Using averages helps smooth out year-to-year fluctuations.

Birth rates among Alaska teenagers declined in three of four racial groups between 1998-2002 and 2003-2007—down 21% among Black teenagers, 18% among White teenagers, and 10% among Alaska Native teenagers. Only among Asian and Pacific Islander teenagers did the rate increase—up 14%, from 43 to 49 births per 1,000 girls.

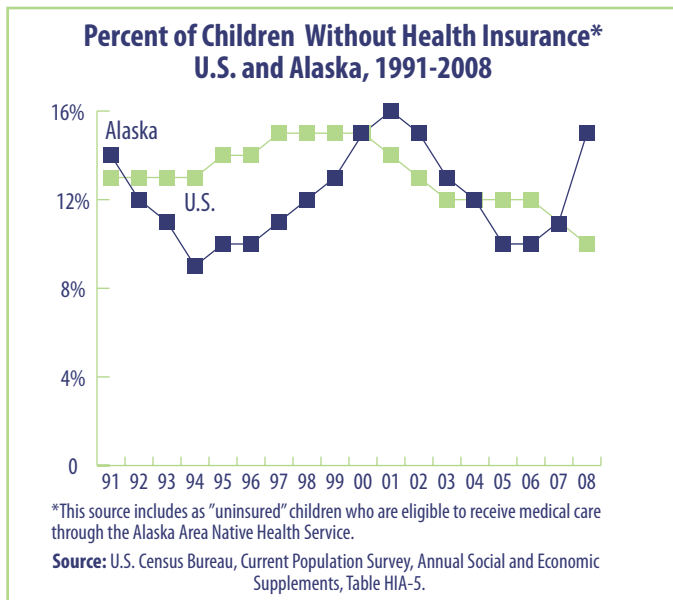


Repeat Births

For the first time, we now have data by region on repeat births among teenage mothers in Alaska—and they show that substantial numbers of girls have more than one baby before they turn 20. In 2007, 17% of teenagers statewide who had babies were already mothers. That share varied widely among regions, from a low of 10% in the Southeast to a high of 31% in the Northern region.



Health Care



DEFINITION

Most of the data in this section are from the U.S. Census Bureau's Current Population Survey (CPS). There are several points to keep in mind about CPS data. The figures count as "uninsured" children who lacked health insurance the entire previous year. Children who had coverage at some time during the year—no matter how brief—are considered insured.

Also, CPS classifies Alaska Native children—who are eligible for health care through the Alaska Area Native Health Service—as uninsured. That's because these children don't have standard health insurance they can use at any health-care facilities; they must get services at health clinics or hospitals operated by the Alaska Area Native Health Service. Yet they do have access to medical care. The American Academy of Pediatrics uses the CPS figures, but adjusts them to count Alaska Native children as insured.

Another note of caution is that CPS data are designed to represent the nation, not individual states. Relatively few people are interviewed in less populated states like Alaska. So a single year's worth of CPS data for Alaska can have a large amount of error, because it's based on so few interviews. When possible, we average

three years of CPS data for Alaska to compensate for the small sample. But three years of information are not always available; when there's less, interpret the information cautiously.

In 2010, CPS respondents were asked for the first time to report out-of-pocket medical expenses. This is one part of the U.S. Census Bureau's current work on the Supplemental Poverty Measure (SPM)—a new measure, scheduled to be available in late 2011. It's different from the Office of Management and Budget's poverty level, which many analysts argue doesn't measure poverty adequately. One aspect of the debate revolves around out-of-pocket medical expenditures, which aren't currently taken into account in calculating family finances—yet medical expenses reduce the amount families have to spend on food or shelter. If these self-reported expenditures turn out to be reliable, they could be used to improve estimates of resources available to families.¹

And a final point about the data: some sources report health-care coverage for those 18 and under, and others report coverage for ages 17 and under.

SIGNIFICANCE

Uninsured children have historically been less likely to get preventive and routine care. In 2007, for example, 54% of uninsured children had not had a well-child check-up in the previous year, compared with about one-quarter among those with insurance. Also, only 10% of insured children but 33% of uninsured children hadn't seen a doctor in the previous year.²

The new federal health-care law requires insurers to cover many preventive and routine services for children that weren't always covered in the past. Insurance companies will be required to cover recommended immunizations and preventive care for infants, children, and adolescents who—effective six months after enactment of the law—can no longer be denied coverage because of pre-existing conditions. Alaska must continue coverage until 2019 of eligible children under Medicaid and Denali KidCare—Alaska's Medicaid expansion program for pregnant women and children in families earning too much to qualify for the tradi-

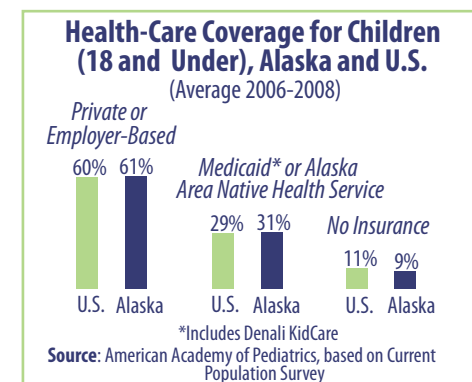
tional Medicaid program, but not enough to pay for private insurance. In the coming years, most uninsured families not eligible for Medicaid or Denali KidCare will be able to buy coverage through state-based exchanges—American Health Benefit Exchanges and Small Business Health Options programs, where individuals and small businesses with up to 100 employees can purchase coverage.

Also, effective October 1, 2010, Medicaid will cover tobacco cessation services for pregnant women. Smoking is the leading preventable cause of low-birthweight infants.

DATA

The trend graph at the far left uses data from the Current Population Survey to track trends in the percentage of children 18 and under who did not have health insurance in the previous year. Nationwide, that percentage declined from 11% in 2007 to 10% in 2008. In Alaska, by contrast, the share of children CPS classifies as uninsured jumped from 11% in 2007 to 15% in 2008.

But CPS data count Alaska Native children as uninsured. The bar graph below, from the American Academy of Pediatrics, adjusts CPS numbers and groups children covered by the Alaska Native Area Health Service with those covered by Medicaid and Denali KidCare. Those figures show that on average from 2006 to 2008, 9% of Alaska children and 11% of children nationwide were uninsured. That 9% of Alaska children without insurance was an increase from the 7% reported for 2005 to 2007. So both the unadjusted CPS numbers and the figures from the American Academy of Pediatrics show a recent increase in the share of children in Alaska without insurance.



The two adjacent tables show the sources of coverage for Alaskans and other Americans in 2008, based on CPS data. One table shows coverage for people of all ages, and one shows coverage just for those 17 and under. For the entire U.S., one year of data is sufficient to show an accurate picture of coverage, but a single year of data for Alaska—based on a small CPS sample—is subject to considerable error.

Differences in coverage between Alaska and the country as a whole can partly be explained by demographic differences. The share of Alaskans 65 and older is smaller than it is nationwide, so fewer Alaskans are covered by Medicare. Alaska has a much larger share of Native Americans than other states—so more Alaskans are covered under the Indian Health Service (the Alaska Area Native Health Service in Alaska). Alaska also has a large military presence, as well as a considerable number of military veterans—so many more Alaskans get their coverage through the military.

Another Alaska-U.S. difference is that fewer Alaskans are covered by private insurance. That tracks with what we know about Alaska businesses: many are small, and they are less likely to offer health insurance than are their counterparts nationwide.

This is the first time we've included a chart showing the source of health-care coverage for children under age 18. Very few children—only those with specific disabilities—are covered by Medicare, which is primarily for those 65 and older.

Not surprisingly, children in Alaska (and nationwide) are far more likely than adults to be covered by Medicaid, including the expansion program, Denali KidCare. And even more than adults, children in Alaska are much more likely to have health-care coverage through the military. But remember that the standard errors associated with some of these percentages are so large that they should be used with caution.

The figure to the right compares the percentages of private firms offering health insurance in Alaska and around the country in 2008. It shows that almost all large firms (more than 50 employees) in Alaska and across the U.S. offer health insurance. But small firms (fewer than 50 employees) are much less likely to offer

Health-Care Coverage for People of All Ages, Alaska and U.S., 2008

| | Private Insurance | Medicaid | Medicare | Military | IHS only* | None |
|---------------|-------------------|----------|----------|----------|-----------|------|
| Alaska | 62% | 12% | 9% | 12% | 4% | 20% |
| U.S. | 67% | 14% | 14% | 4% | N/A | 15% |

Note: Totals add to more than 100% because some people have more than one type of coverage.

* U.S. Census Bureau figures classify people who receive care through the Indian Health Service as “uninsured.” Based on a study by the University of Minnesota in the late 1990s, Mark Foster and Associates estimated the share of Alaskans covered by IHS only and subtracted them from the uninsured category.

Source: U.S. Census Bureau, Current Population Survey

Health-Care Coverage for Children (17 and Under), Alaska and U.S., 2008

| | Private Insurance | Medicaid | Medicare | Military | None |
|---------------|-------------------|----------|----------|----------|------|
| Alaska | 63% | 22% | 0.5% | 16% | 12% |
| U.S. | 64% | 30% | 0.8% | 3% | 10% |

Note: Totals add to more than 100% because some people have more than one type of coverage.

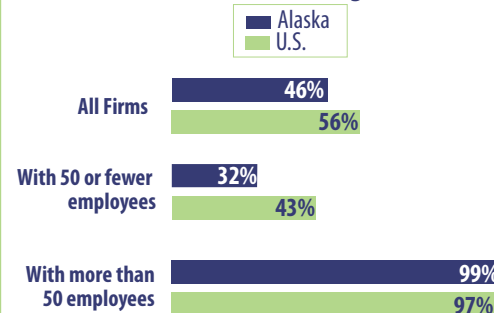
Source: U.S. Census Bureau, Current Population Survey

insurance, especially in Alaska: only 32% of small Alaska businesses offer health insurance, compared with 43% nationwide.

And Alaskans with private-sector jobs are more likely than other Americans to work for small businesses. More than a third (36%) of Alaska's private-sector workers are employed in small firms; that compares with 27% nationwide. Also, more Alaskans work in the smallest firms: 17% are in firms with fewer than 10 employees, compared with 11% nationwide.³

Still, even though small Alaska firms are less likely to offer health insurance, that percentage did increase between 2006 and 2008. Only 25% of small Alaska firms offered insurance in 2006; that share was up to 32% in 2008.

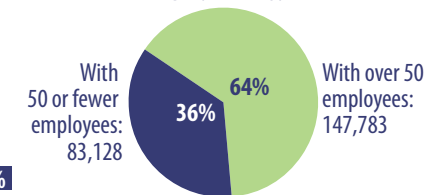
Private Firms Offering Health Insurance,* Alaska and U.S., 2008



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

Source: Medical Expenditure Panel Survey, Table II. B. A. 2

How Many Alaskans Work for Small Firms?



2008 total: 230,911 employees

Source: Medical Expenditure Panel Survey, Table II. B.1. a, 2008

Health Care

We conclude this indicator by looking at children without health insurance by age and at the health insurance status of children with special needs.

Uninsured Children by Age

As we discussed earlier, in the Children Living in Poverty indicator, younger children are more likely than older children to be poor. In Alaska, the youngest children are also more likely to be uninsured: among those under six, 14% are without insurance, compared with 11% among those 6 to 17. In the U.S. as a whole, older children are slightly more likely to be uninsured.

The good news for Alaska children is that since 1997, when Denali KidCare began providing health-care coverage to eligible children and pregnant women, the number of children without health insurance has fallen by a third.⁴ Also, a 2009 regulatory change improved access to Denali KidCare, allowing children to have 12-month continuous eligibility. Previously, if a change in family income made children temporarily ineligible during the year, their parents would have to re-apply.⁵

Still, a significant number of uninsured Alaska children who could be covered by Medicaid or Denali KidCare are not. CPS data for 2007-2009 show that roughly 16,567 children in Alaska were uninsured, with 5,539—34%—eligible for Medicaid or Denali KidCare coverage.

Children (17 and Under) Without Health Insurance by Age Group, Alaska and U.S.

(Average 2007-2009)

| | Alaska | U.S. |
|---------------------------|--------|------|
| 0 to 5 | 14% | 10% |
| 6 to 17 | 11% | 11% |
| Total 17 and below | 12% | 11% |

Source: Kids Count datacenter, based on Current Population Survey
<http://datacenter.kidscount.org/data/bystate/Default.aspx>

Coverage for Special-Needs Children

Finally, the last table shows that a substantial share of Alaska children with disabilities have intermittent or inadequate health-care coverage.

The Centers for Disease Control and Prevention and the National Center for Health Statistics conducted a nationwide telephone survey of parents in 2007 and 2008, to collect a variety of information on the health and well-being of children with special needs. Based on reports provided by parents, there are an estimated 22,406 children in Alaska with special health-care needs.

The survey included several questions about health insurance coverage that revealed similar results for children with special needs in Alaska and across the country. One-third of respondents in Alaska and in the entire U.S. felt their current insurance for their children with special needs was inadequate; close to 8% reported they'd been without coverage at some time in the previous year; and about 3.5% said they had no coverage at the time of the survey.

Health Insurance of Children with Special Health-Care Needs, Alaska and U.S.

| | Alaska | U.S. |
|---|--------|-------|
| Without coverage at some point in past year | 7.6% | 8.8% |
| Without coverage at time of survey | 3.6% | 3.5% |
| Current insurance is inadequate | 33.1% | 33.1% |

Source: *The National Survey of Children with Special Health Care Needs Chartbook 2005-2006*
 U.S. Department of Health and Human Services, Health Resources and Services Administration,
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Education

Teens Who Drop Out

DEFINITION

In this indicator we discuss high-school dropout rates as well as graduation rates. Both are important measures of future economic well-being for individual students and the American workforce.

Dropout Rate

States count high-school dropouts in different ways, and there is also more than one method of calculating dropout rates. Different methods can be useful for answering specific questions—but they can also cause confusion and result in misleading comparisons. Here we report two measures of dropout rates: the *status* rate and the *event* rate. The two rates aren't directly comparable; each presents a somewhat different picture of the dropout problem.

The status rate estimates the percentage of teenagers 16 through 19 who are not enrolled in school and have not received high-school diplomas or equivalent credentials—for example, General Educational Development (GED) certificates. The trend graph on the next page shows the status dropout rate for the U.S. and Alaska; the national KIDS COUNT program uses the American Community Survey as the data source for calculating this rate.

The Alaska Department of Education and Early Development, by contrast, uses an event dropout rate: the percentage of students who stop attending school in a given year, divided by the total enrollment in either grades 7 to 12 or grades 9 to 12. This method does not count students as dropouts if they transferred to other types of schools (such as private schools or vocational programs), died, left to obtain GEDs, or left temporarily because they had been suspended or were sick. Those event dropout rates are shown in the bar graphs and map on the next page.

Graduation Rate

As with dropout rates, there are different methods of counting high-school graduates. Here we use figures from the National Center for Education Statistics (NCES) and the Alaska Department of Education.

NCES reports the “averaged freshman graduation rate,” which is an estimate of the percentage of students who graduate four years after they start as freshmen, with standard high-school diplomas.

NCES estimates the averaged freshman graduation rate by dividing the number of graduates in a given year by the average of the number of 8th graders four years earlier, 9th graders three years earlier, and 10th graders two years earlier. That measure is comparable across states.

The Alaska Department of Education publishes a graduation rate, called a “leaver” rate, in the state’s annual *Report Card to the Public*. That rate is computed by dividing the total number of high-school graduates in a given year by the sum of (1) the number of graduates; (2) the number of first-time dropouts in each grade 9 through 12; (3) the number of 12th graders who don’t graduate on time but are continuing in school; and (4) the number of students receiving Certificates of Achievement (awarded to those who complete high school but don’t pass the Alaska High School Graduation Qualifying Exam).

SIGNIFICANCE

In 2009, roughly 1.2 million American teenagers failed to graduate from high school with standard diplomas four years after they started as freshmen.¹ An estimated 383,000 young people dropped out of high school nationwide between 2008 and 2009.² In a recent statement, President Obama said the U.S. can’t afford “to accept or ignore” the dropout problem and pledged to invest in “strategies to ensure students graduate prepared for college and careers.”³

Dropouts are less likely to be regularly employed, and they face increased risks of staying unemployed, especially during economic downturns. The jobless rate among 2008-2009 dropouts was 55%— 20 percentage points higher than the rate of 35% for recent high-school graduates not enrolled in college.⁴

The 2009 unemployment rates for adults 25 and over by educational attainment are shown in the adjacent bar chart. The unemployment rate among Americans who hadn’t graduated from high school was 1.5 times higher than among those who had high-school diplomas, and nearly 3 times higher than among those with bachelor’s degrees. Although unemployment rates increased from 2008 to 2009 among all working-age Americans, those with the least education saw the highest increase—from 9% to 15%.

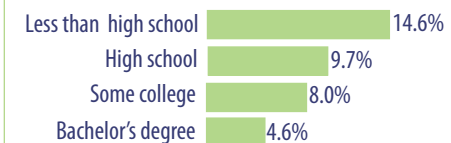
Besides being at a disadvantage in the labor market, most high-school dropouts can expect to earn on average \$9,634 less a year than those who graduate. At first glance this difference might not appear especially large. But to put it in perspective, if all the students in the class of 2009 who dropped out had instead graduated from high school, their earnings would have added \$335 billion to the country’s economy over their lifetimes. In Alaska, if all the dropouts from the class of 2009 had graduated with their peers, the state would have gained over \$1 billion in additional income over their lifetimes.⁵

Research also shows that not only are people who drop out more likely to be unemployed and earn less, they are also far more likely to be incarcerated, to be in poor health, to rely on public assistance, to be single parents, and to live in poverty.⁶

Teenagers who are at high risk of dropping out of school often give warning signs. Students who miss a lot of school, have behavioral problems, repeat grades, or have lower grades in their core subjects tend to be at higher risk of dropping out.⁷ In 2007, about 7% of Alaska’s children ages 6-17 repeated at least one grade—considerably less than the 11% average nationwide.⁸

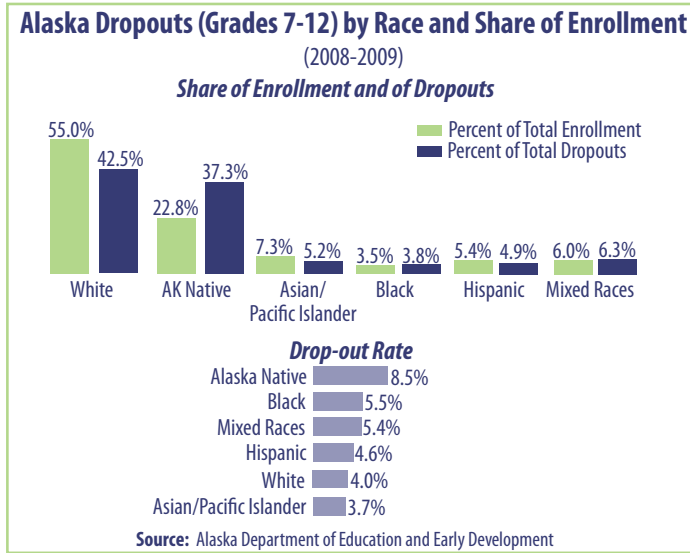
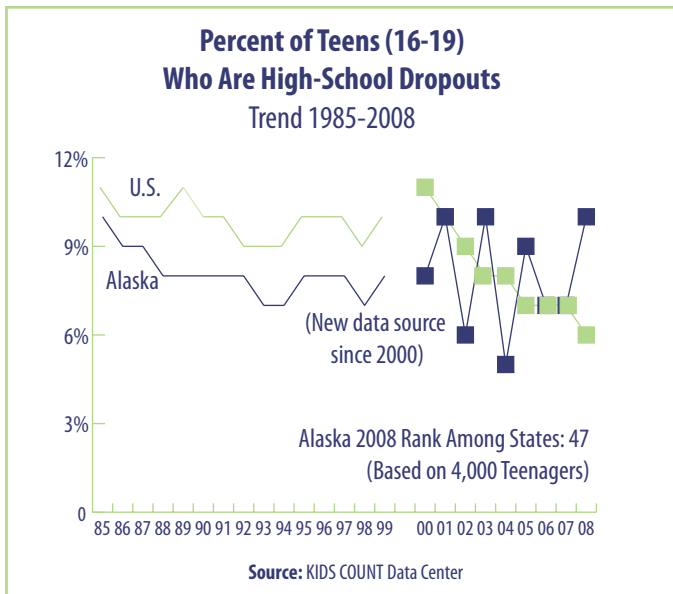
Ninth grade seems to be a particularly pivotal time: one third of all the students who drop out around the country do so during the ninth grade. And students who are in the lowest quartile of academic achievement are far more likely to drop out than those in the top quartile—just 1% of those with test scores in the top quartile drop out, compared with 20% among those with scores in the bottom quartile.⁹

U.S. Unemployment Rate by Education Level, 2009



Source: U.S. Dept. of Labor, Bureau of Labor Statistics,
Data Source: U.S. Census Bureau's Current Population Survey

Teens Who Drop Out



dropped out of grades 7-12 were Alaska Native — which is disproportionately high, since they make up only 23% of all students in those grades. Asian and Pacific Islander, Hispanic, and White students dropped out at rates below their enrollment percentages. Asian and Pacific Islander students had the lowest dropout rate for grades 7-12, at 3.7%

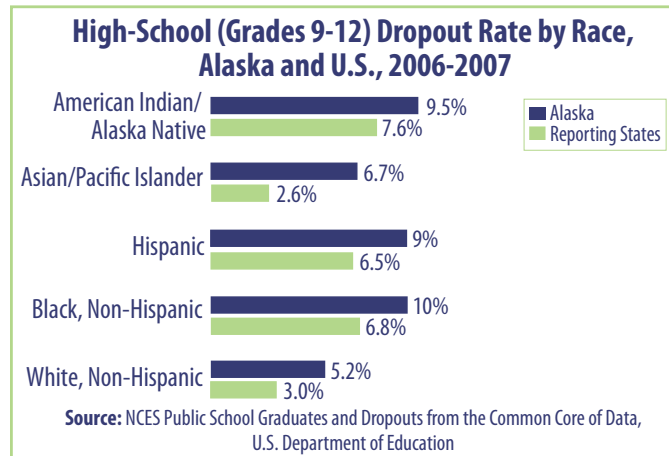
The second bar chart compares Alaska and U.S. average dropout rates by race for high-school students—grades 9-12—in 2006-2007. American Indian/Alaska Native and Black students had higher dropout rates than White and Asian/Pacific Islander students. The dropout problem is more severe in Alaska. In 2006-2007, Alaska's high-school students—regardless of race or ethnicity—dropped out at much higher rates than the U.S. averages.

DROPOUT RATES

The trend graph above shows annual changes in status dropout rates among teenagers 16 to 19, in the U.S. as a whole and in Alaska. The dropout rate among teens nationwide has been declining since 2000. Between 2007 and 2008 it dropped from 7% to 6%. In Alaska, by contrast, the dropout rate fluctuates from year to year; it spiked up in 2008—to 10%, from 7% in 2007. This increase pushed Alaska to near the bottom in ranking among the states—from 23rd in 2007 to 47th in 2008.

The status rate shows how many teenagers 16-19 have not completed high school and are not enrolled in high school programs at a given time—no matter when they dropped out. It doesn't show how many students drop out in a single year.

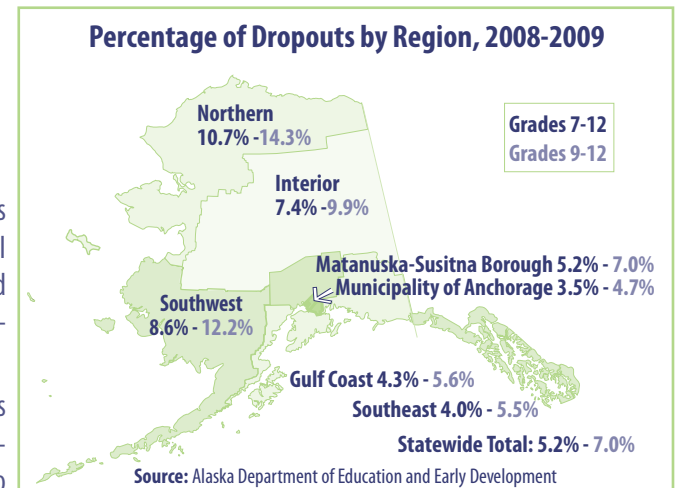
But the event dropout rate does show the number of dropouts in a specific year. The Alaska Department of Education and Early Development reports the event dropout rate among Alaska's students by race and region.



In the 2008-2009 school year, Alaska had 41,399 students in grades 9 through 12, and 7% dropped out. In the same school year, there were 60,713 students in grades 7 through 12, and 5.2% dropped out. Those rates were almost unchanged, compared with those of the previous school year.

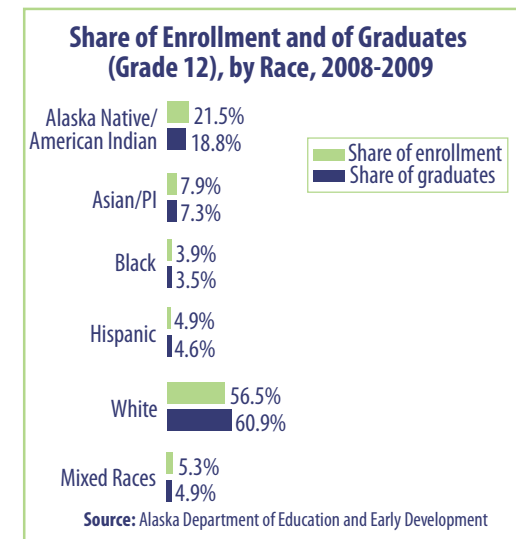
The figure at the top of this column shows the differences in enrollment and dropout rates by race and ethnicity. In 2008-2009, more than one-third (37.3%) of all the students who

Dropout rates also vary by region in Alaska, as the map below shows. The Northern region had the highest dropout rates in the 2008-2009 year, both for grades 7-12 (10.7%) and grades 9-12 (14.3%). Next was the Southwest, where nearly 9% of 7-12 graders and 12% of 9-12 graders dropped out. Anchorage, where more than a third of the state's students are enrolled, had the lowest rates for both groups—3.5% for grades 7-12 and 4.7% for grades 9-12.

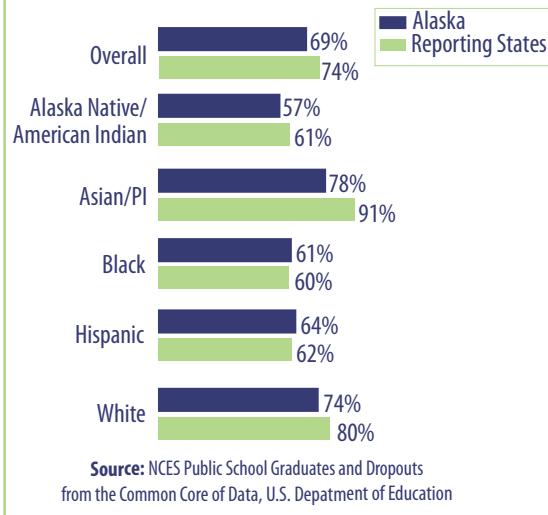


Teens Who Drop Out

The figure below compares the shares of enrollment in 12th grade and of graduates among students by race and ethnicity in Alaska in 2009. All minority students had bigger shares of enrollment than of graduates, but the differences for most were modest. White students were the only group with a higher share of graduates than of enrollment.



Averaged Freshman Graduation Rate by Race, Alaska and U.S., 2006-2007



HIGH-SCHOOL GRADUATION RATES

As we discussed earlier, the National Center for Education Statistics (NCES) reports the averaged freshman graduation rate, which is comparable across states. This is an estimated percentage of students who graduate within four years of the time they started as freshmen.

The chart above shows that in the 2006-2007 school year, the averaged freshman graduation rate in the U.S. was 74%, compared with Alaska's rate of just 69%. As in previous years, Alaska's students trailed their national peers in graduation rates, except for Alaska's Black and Hispanic students, who graduated at slightly higher rates than their counterparts nationwide.

The averaged graduation rate varied considerably across the country in 2006-2007, from a low of 52% in Nevada to a high of 89% in Vermont. Only 10 states had rates lower than Alaska's.

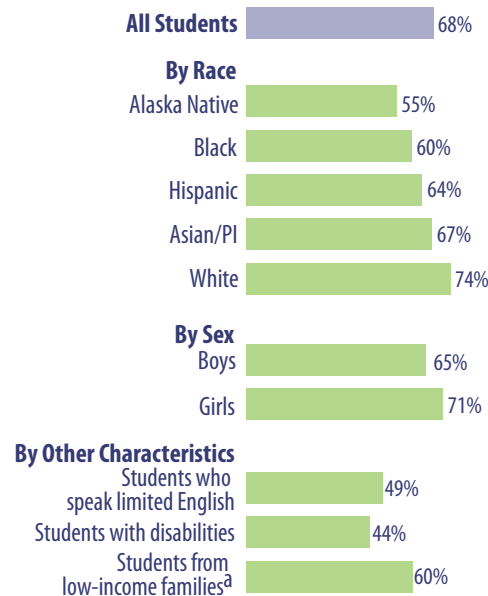
As we described earlier, the Alaska Department of Education and Early Development reports a somewhat different graduation rate, based on more detailed data about how many students dropped out, received certificates of achievement, or didn't graduate within four years. That's called a leaver graduation rate.

Alaska had 8,008 new high-school graduates in 2009, with a graduation rate of 68%—an increase of 5 percentage points from 2007. The increase was led by substantial improvements in rates reported for the state's largest districts. The reasons for that big improvement are not clear, but the Alaska Department of Education reports that districts have stepped up their efforts to keep teenagers from dropping out.

Alaska's graduation rate improved among almost all student groups in 2009. The only slight decrease was among students who speak limited English, down from 50% in 2007 to 49% in 2009.

In line with national trends, Alaska girls had a higher graduation rate (71%) than boys (65%). White students graduated at a higher rate (74%) than minority students, whose graduation rates varied from 55% among Alaska Native students to 67% among Asian and Pacific Islander students.

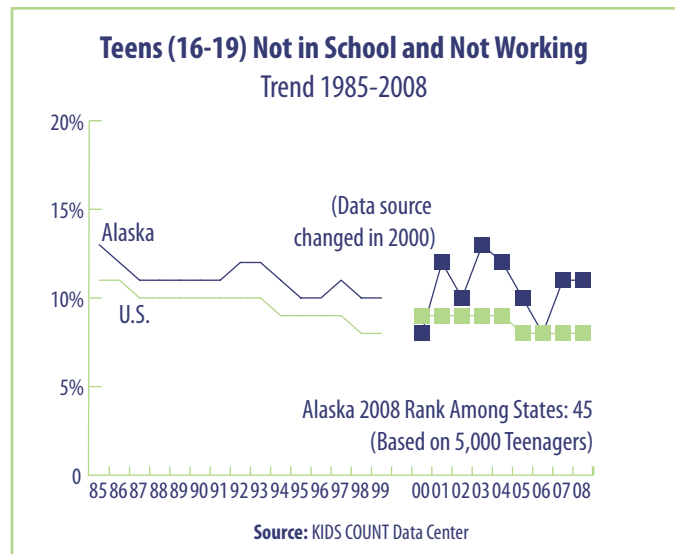
Graduation Rates Among Alaska Students, 2009



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

Source: Alaska Department of Education and Early Development

Teens Not in School and Not Working



DEFINITION

Here we report on the number of teenagers 16 to 19 who are not attending school, not working, and not in the military. Because they are not getting education, training, or skills, these teenagers are sometimes referred to as disconnected. The figures include both those who have dropped out of high school and those who have earned General Educational Development (GED) certificates.

SIGNIFICANCE

When teenagers withdraw from school and work, that's an important sign they might have trouble transitioning to adulthood. They are less likely to acquire skills and knowledge necessary for becoming self-sufficient adults and are at higher risk of unemployment, poverty, homelessness, and incarceration.

Research has shown that teenagers are at greater risk of becoming disconnected if (1) they are growing up in low-income households; (2) their parents have little education; (3) they are being raised by single parents; (4) they are members of racial or ethnic minorities; (5) they commit crimes; (6) they are in foster care; or (7) they have disabilities.¹

But whatever the reason teenagers become disconnected, parents, educators, and other adults should help them. A number of

programs have proven useful for helping teenagers make a smooth transition to adulthood. For example, school-to-work programs link academic knowledge with hands-on experience, allowing young people to recognize the relevance of education and get accustomed to the world of work.²

DATA

In 2007, about 1.4 million teenagers nationwide were not in school, not working, and not in the military. The longer young people stay disconnected, the more difficulties they experience later. Teenagers who have been out of school and not working for three or more years are more likely to receive welfare and food stamps, be uninsured, have lower overall incomes, and have trouble being hired and keeping jobs.³

The trend graph shows that in 2008 the share of Alaskans 16 to 19 who were not in school, not in the military, and not working remained at 11%, the same as it had been in 2007. That was 3 percentage points higher than the 2008 national average of 8%, dropping Alaska to the low rank of 45th among the 50 states.

The share of Alaska's teenagers who are considered disconnected has varied dramatically in recent years, from a high of 13% in 2003 to a low of 8% in 2006—while the share of disconnected teenagers in the country as a whole remained steady at 8% from 2004 through 2008. But some of the sharp fluctuation in the Alaska numbers occurs because the sample size in Alaska is small.

We don't have data by race and gender on the share of disconnected teenagers in Alaska, but the Federal Interagency Forum on Child and Family Statistics reports national data (adjacent table).

Overall there was no change between 1999 and 2008 for all teenagers 16 to 19—the share considered disconnected remained at 8%. But there were changes among groups. The percentage of Hispanic teenagers considered disconnected dropped from 14% to 11%, and the share of Black teenagers from 13% to 11%. Among teenage girls, the share declined from 9% to 8%. On the other hand, rates among teenage boys increased—from 7% to 8%—and also among White teenagers, from 6% to 7%. But despite

significant improvements among minority teenagers, they are still more likely than White teenagers to be disconnected.

Having an education is critical to obtaining and keeping jobs. Alaska and the nation as a whole need an educated workforce to compete in the global market. So how might Alaska's higher percentage of disconnected young people translate into education levels among young adults (18 to 24)? The bar chart on the facing page compares educational attainment among young men and women in Alaska and the nation on average from 2006 to 2008.

Young women—in both the U.S. as a whole and Alaska—are more likely than young men to have at least some college credit. About 45% of young women nationwide have at least some college credit, as do 40% in Alaska. About 38% of young men nationwide and 34% in Alaska have at least some college credit.

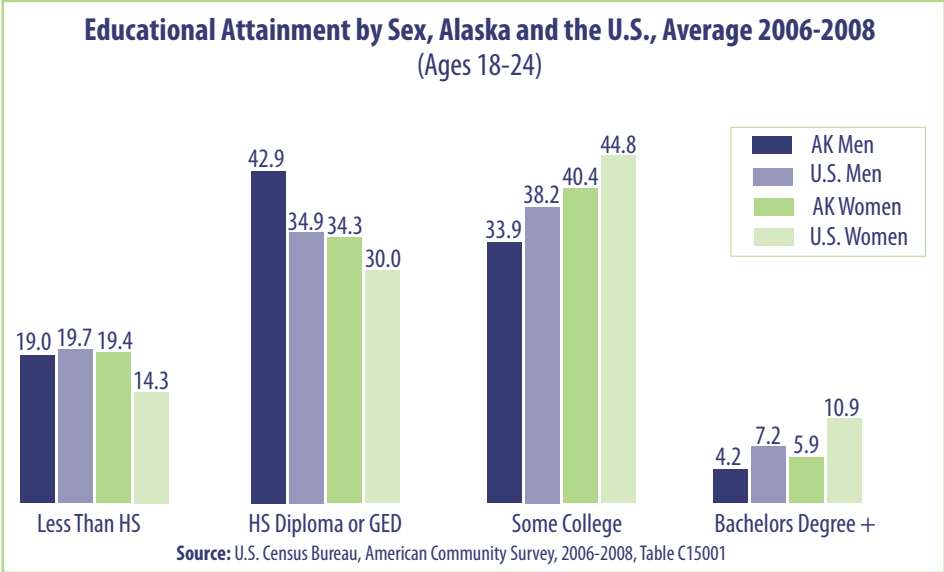
The share of young Alaskans holding 4-year degrees falls short of U.S. averages among both men and women. Nationwide about 11% of young women and 7% of young men hold 4-year or higher degrees. That compares with about 6% among young women and 4% among young men in Alaska.

Percentages of U.S. Teenagers (16-19) Not in School and Not Working, 1999 and 2008

| | 1999 | 2008 | Change |
|--------------------|------|------|--------|
| All 16-19 | 8% | 8% | 0% |
| Teenage Girls | 9% | 8% | -11% |
| Teenage Boys | 7% | 8% | +14% |
| White Teenagers | 6% | 7% | +17% |
| Black Teenagers | 13% | 11% | -15% |
| Hispanic Teenagers | 14% | 11% | -21% |

Source: Federal Interagency Forum on Child and Family Statistics

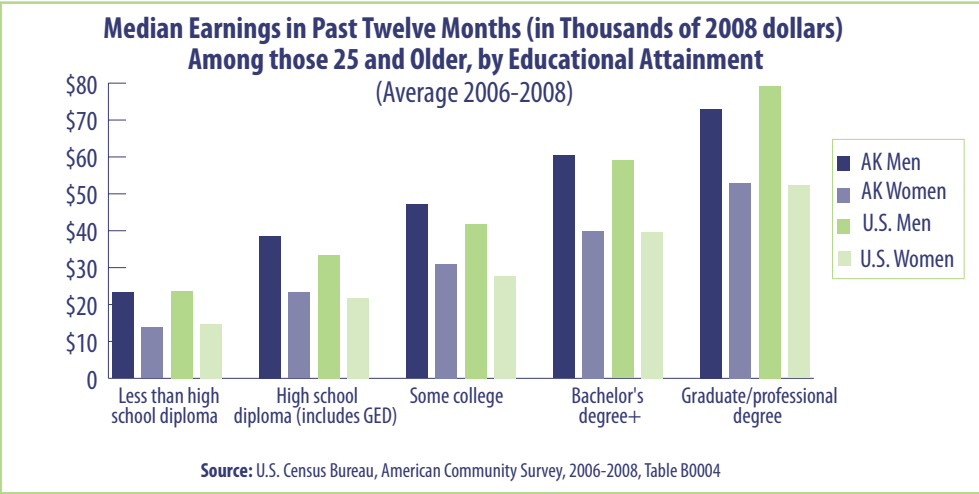
Teens Not in School and Not Working



Levels of education also have significant effects on people’s earnings. The bar chart to the right shows median earnings by educational attainment for men and women in Alaska and the U.S. as a whole. Men in Alaska with high-school diplomas, some college credit, or 4-year degrees tend to earn more than their national counterparts—but less than those who didn’t graduate from high school and those with advanced degrees.

Across the country and in Alaska, women earn less than men regardless of how much education they have. Women in Alaska with less education do tend to earn more than their counterparts nationwide—but among women with more education, earnings are about the same in Alaska and in the entire nation.

It’s clear that more education translates into higher incomes in Alaska and around the country. With the current high unemployment in the U.S., it’s especially important for young people to improve their chances of succeeding by staying in school.



School Achievement

DEFINITION

The Alaska Department of Education and Early Development is required to administer statewide student testing to assess students' academic skills and knowledge and to ensure academic standards are being met. Those assessments are:

(1) Developmental profiles for kindergarteners and first-graders; (2) Standards-based assessments in math, reading, and writing skills among third- through tenth-graders, and science skills among fourth-, eighth-, and tenth-graders; (3) A nationally norm-referenced TerraNova, third edition, for fifth- and seventh-graders; and (4) A High School Graduation Qualifying Examination students must pass to graduate with high-school diplomas.

Alaska students who want to go on to college can also choose to take the Scholastic Aptitude Test (SAT), which measures math, reading, and writing skills, or the American College Achievement Test (ACT), which evaluates math, reading, science, and English skills. Taking these tests is not mandatory, and students may take them more than once. SAT and ACT scores help colleges make decisions about admission, financial aid, and course placement.

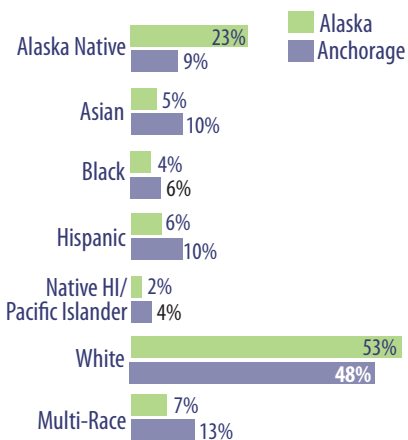
STUDENT DEMOGRAPHICS

In the 2008-2009 school year, Alaska's K-12 public schools had 128,381 students, a drop of 3.5% from the previous year. In that year, about 53% of students identified themselves as White, 23% as Alaska Native, 7% as mixed race, 5% as Asian, 4% as Black, 6% as Hispanic, and 2% as Native Hawaiian/Pacific Islander.

The share of minority students has been increasing statewide, but especially in Anchorage, where close to 40% of Alaska's K-12 students attend. The figure at the top of the column shows that minority students together now make up more than half of Anchorage students.

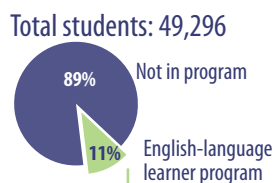
Nearly 40% of Alaska students in 2009 came from low-income families, and 9% were identified as not proficient in speaking English. In Anchorage, about 11% of students in the

Alaska and Anchorage K-12 Students, by Race, 2008-2009



Sources: Alaska Department of Education and Early Development and Anchorage School District

Enrollment in English-Language Learners Program, Anchorage School District, 2009-2010



| | |
|------------------------------|--------------|
| 1. Spanish | 1,291 |
| 2. Hmong (Southeast Asia) | 1,130 |
| 3. Samoan (Pacific Island) | 842 |
| 4. Tagalog (The Philippines) | 662 |
| 5. Yupik | 234 |
| 6. Korean | 185 |
| 7. Lao (Laos) | 171 |
| 8. Nuer (East Africa) | 123 |
| 9. Russian | 87 |
| 10. Inupiaq | 86 |
| All other languages | 724 |
| Total | 5,535 |

Source: Anchorage School District

to 25 percentiles), and the other quartiles (percentiles 26 to 75) represent the average range. So if more than 25% of Alaska's stu-

2009-2010 year were enrolled in the English-language learners program. The district reports those students speak 90 languages other than English—but as the figure below shows, most speak Spanish, Hmong, Samoan, or Tagalog.

TERRANOVA, THIRD EDITION

In 2009, for the second consecutive year, the Alaska Department of Education used TerraNova, third edition (TerraNova 3), to assess fifth- and seventh-graders' mastery of reading, language, and mathematics. TerraNova 3 is a nationally normed test—which means the results can be used to compare achievement of Alaska students and their peers across the country.

Scores from TerraNova 3 are distributed in quartiles, with the average score set at the 50th percentile. The highest-achieving scores are represented in the fourth or top quartile (76 to 99 percentiles), the lowest achieving scores fall into the bottom quartile (1

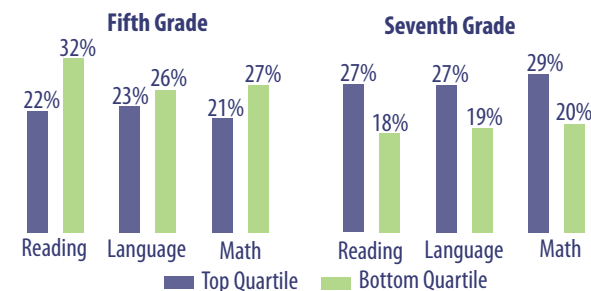
to 25 percentiles), and the other quartiles (percentiles 26 to 75) represent the average range. So if more than 25% of Alaska's students score in the top quartile, and fewer than 25% in the bottom quartile, we can conclude that students in Alaska scored above the national average.

As the bar chart below shows, in the 2008-2009 year more of Alaska's fifth graders scored in the bottom quartile than in the top in reading, language, and mathematics. By contrast, more seventh-graders scored above national averages in all three areas.

In 2009, 22% of Alaska's fifth-graders scored in the top quartile in reading, compared with 27% among seventh-graders. Approximately one in three (32%) of the fifth-graders scored in the bottom quartile on the reading portion of the test, while only 18% of the seventh graders did so. Scores on the language and math sections of the test followed a similar pattern.

There were substantial differences by gender, race, and ethnicity in the percentage distribution of Alaska fifth- and seventh-graders in the top quartile, as the table below shows. More girls in both fifth and seventh grade scored in the top quartile on the reading portion of the test, and more boys in both grades scored slightly higher in math. Minority students were less likely than their White counterparts to score in the top quartile on the reading and math portions of the test. Of all the students in the fifth and seventh grades, Alaska Native students had the smallest percentage in the top quartile. This gap in achievement scores for Native Americans is an unfortunate trend not only in Alaska but also across the country.¹

TerraNova Test Results, Alaska 5th and 7th Grades, 2008-2009



Source: Alaska Department of Education and Early Development

School Achievement

Percentages of Alaska 5th and 7th Grade Students Scoring in the Top Quartile, TerraNova, 2009

| Gender | Reading | | Math | |
|----------------------------------|---------|-----|------|-----|
| | 5th | 7th | 5th | 7th |
| Boys | 19% | 26% | 21% | 30% |
| Girls | 25% | 29% | 20% | 27% |
| Race and Ethnicity | | | | |
| Alaska Native | 6% | 10% | 8% | 12% |
| White | 32% | 38% | 29% | 38% |
| Black | 10% | 12% | 10% | 13% |
| Hispanic | 18% | 21% | 16% | 22% |
| Native Hawaiian/Pacific Islander | 8% | 15% | 11% | 16% |
| Asian | 17% | 21% | 22% | 31% |
| Mixed Races | 22% | 25% | 20% | 27% |

Source: Alaska Department of Education and Early Development

High School Graduation Qualifying Exam

To graduate with diplomas, Alaska students must complete 21 credits in specific topic areas and also pass the High School Graduation Qualifying Exam, which tests proficiency in basic skills.

The graduation exam measures students' proficiency in reading, writing, and mathematics. It is administered over three days. Students can take the test for the first time in the spring of their sophomore year. After that, twice a year they can re-take any portion they failed, until they pass.

Passing this exam has been a requirement for receiving a diploma since 2004; students who don't pass but meet the other requirements for graduation receive a Certificate of Achievement.

The figure below shows the percentage of Alaska students who passed the exam in the spring semester of 2009. The Alaska Department of Education reports that among all tenth-grade students in 2009, 94% took the reading portion, 95% took the writing portion, and 94% took the math portion.

Among those who took the exam, 90% passed reading, 79% passed writing, and 80% passed math. More girls passed the reading and writing portions of the test, while more boys passed the math test. And as was true with the TerraNova 3 test, White students were more likely than minority students to pass the exam, in all three disciplines. Students from families with higher incomes were also more likely to pass than those from low-income families.

COLLEGE PREPARATION

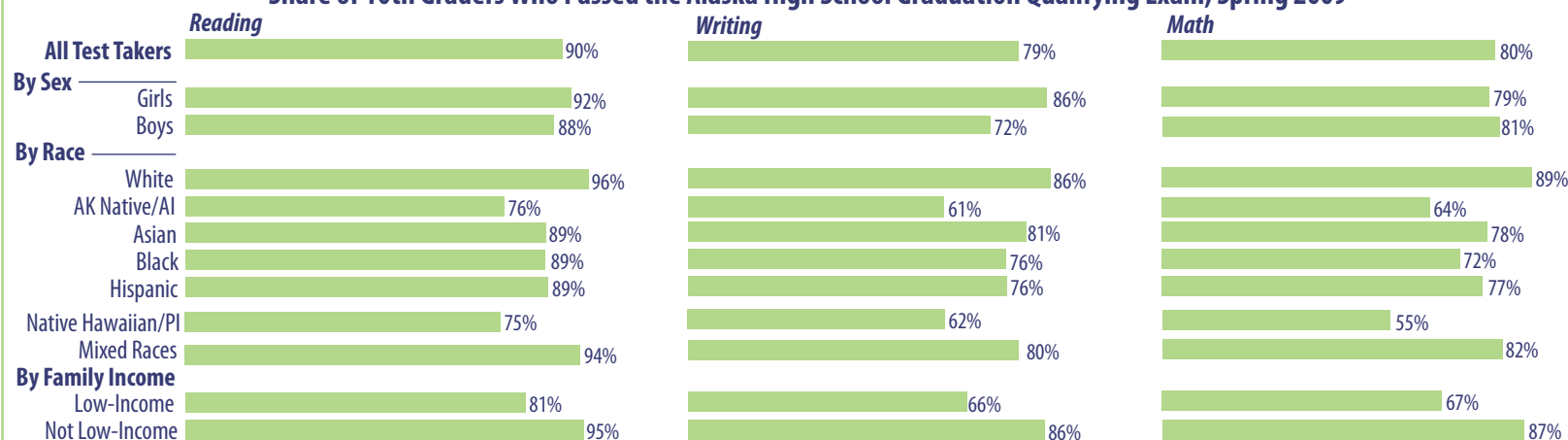
The two tests students may need to include in their college applications are the Scholastic Aptitude Test (SAT) and the American College Achievement Test (ACT).

The Alaska Department of Education reports that seniors in Alaska public schools tend to score higher than their U.S. peers on both the SAT and the ACT tests.

A perfect score on each subsection of the SAT is 800. In 2008-2009, Alaska's public-school students had an average score of 492 in writing (5 points higher than the U.S. average), 517 in mathematics (7 points higher than the U.S. average), and 519 in critical reading (23 points higher than the U.S. average). Students in Alaska's private schools also generally scored above national averages.

A perfect composite score on the ACT is 36. The composite score is the average score of the English, mathematics, reading, and science subsections. In 2008-2009, Alaska's public-school students had a slightly higher mean composite score of 21.2, compared with the national average of 20.8. Students in both public and private schools in Alaska had a similar composite score of 21; the national average was also 21.

Share of 10th Graders Who Passed the Alaska High School Graduation Qualifying Exam, Spring 2009



Source: Alaska Department of Education and Early Development

Endnotes for Education

ENDNOTES FOR TEENS WHO DROP OUT

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2. Bureau of Labor Statistics, "College Enrollment and Work Activity of High-School Graduates," *News Release*, April 2010. Retrieved June 2010: <http://www.bls.gov/news.release/hsgec.html>.
3. The White House, Office of the Press Secretary, *President Obama Announces Steps to Reduce Dropout Rate and Prepare Students for College and Careers*, March 2010. Retrieved June 2010: <http://www.whitehouse.gov/the-press-office/president-obama-announces-steps-reduce-dropout-rate-and-prepare-students-college-and-prepare-students-for-college-and-careers>.
4. See note 2.
5. Alliance for Excellent Education, "The High Cost of High-School Dropouts: What the Nation Pays for Inadequate High Schools," *Issue Brief*, August 2009, Washington, D.C. Retrieved June 2010: www.all4ed.org/files/archive/publications/HighCost.pdf.
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8. Child and Adolescent Health Measurement Initiative, *2007 National Survey of Children's Health*, Data Resource Center for Child and Adolescent Health. Retrieved June 2010: www.nschdata.org.
9. See note 1.

ENDNOTES FOR TEENS NOT IN SCHOOL AND NOT WORKING

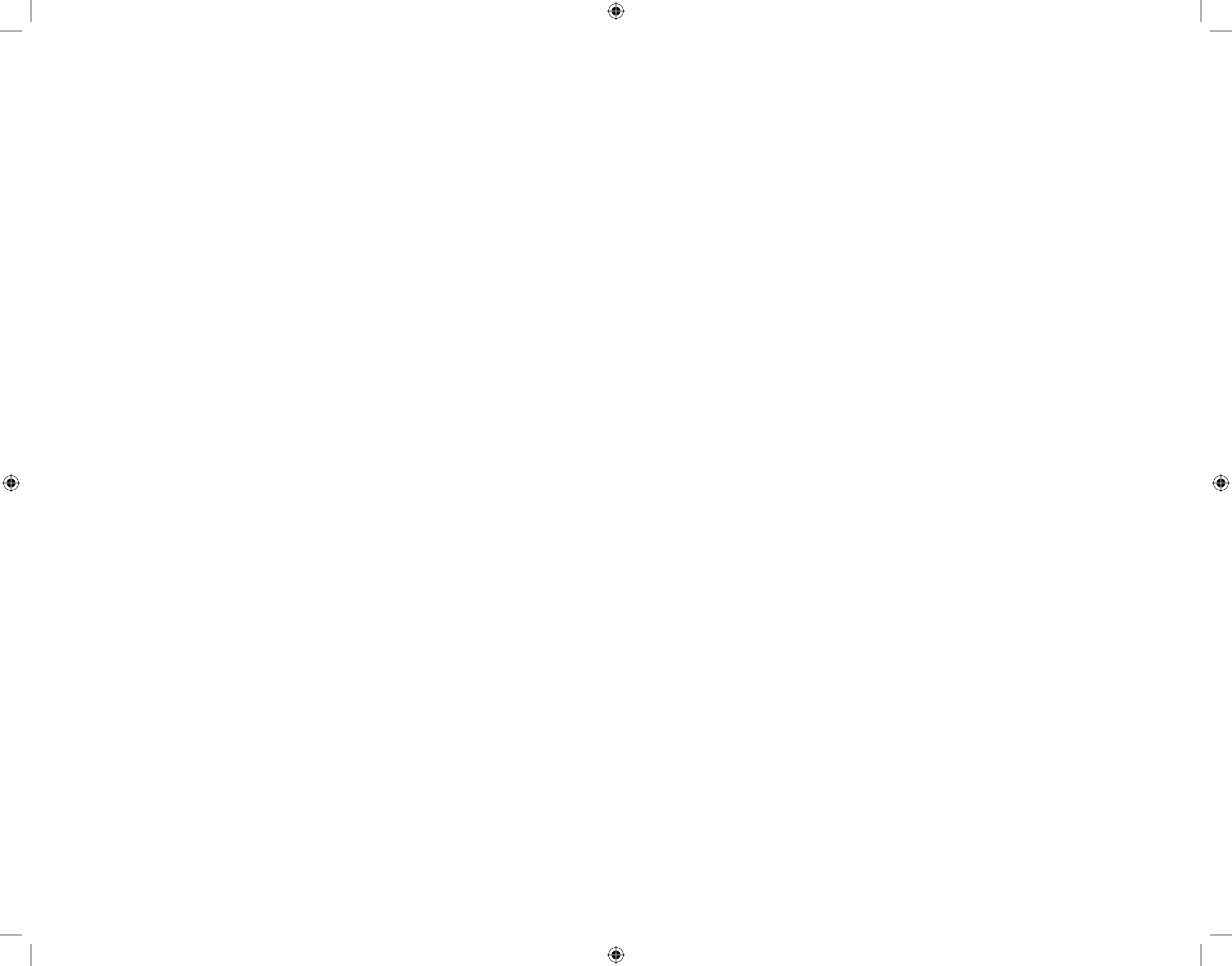
1. Elizabeth C. Hair, K. A. Moore, T. J. Ling, C. McPhee-Baker, and B. Brown, "Youth Who are 'Disconnected' and Those Who Then Reconnect: Assessing the Influence of Family, Programs, Peers, and Communities," *Child Trends Research Brief*, July 2009. Retrieved April 2010: <http://www.backontrack.us/library/youth-who-are-disconnected-0709.pdf>.
2. See note 1.
3. Federal Agency Forum on Child and Family Statistics, *America's Children: Key National Indicators of Well-Being, 2009*. Washington, D.C. Retrieved February 2010: http://www.childstats.gov/pdf/ac2009/ac_09.pdf.

ENDNOTES FOR SCHOOL ACHIEVEMENT

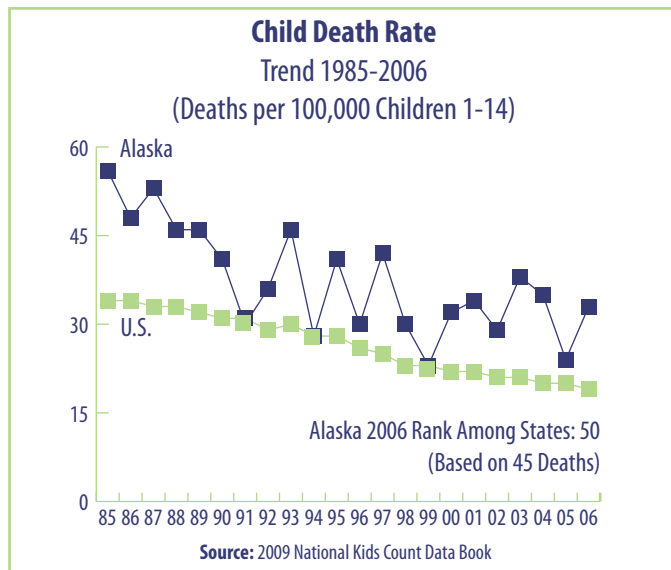
1. For example, see: Steven Nelson, R. Greenough, and N. Sage, *Achievement Gap Patterns of Grade 8 American Indian and Alaska Native Students in Reading and Math*. Issues and Answers Report, REL 2009–No. 073, 2009. Washington, D.C.: U.S. Department of Education, Institute of Education Sciences, National Center for Education Evaluation and Regional Assistance, Regional Educational Laboratory Northwest, with contributions from REL Central, REL Midwest, REL Northeast and Islands, REL Pacific, REL Southeast, REL Southwest, and REL West. Retrieved June 2010: www.ies.ed.gov/ncee/edlabs.



Children in Danger



Child Death Rate



DEFINITION

The child death rate is the number of deaths per 100,000 children ages 1 to 14. Deaths among children under age one are reported in the Infant Mortality section. Regional death rates are based on the child's place of residence, not place of death.

SIGNIFICANCE

Deaths among children are often indicators of the health of mothers and children, access to health care, and environment. But they also reflect how well parents keep children safe—like having functioning smoke alarms or using age-appropriate restraints in cars.¹ Most deaths among children are preventable, and injuries remain the leading cause of child death in the United States.² From 2000 to 2005, the leading cause of injury-related deaths in American children ages 1 to 14 was motor vehicle accidents.³

In Alaska, “Click it or Ticket” is the law—drivers can be stopped specifically for not wearing seatbelts. Alaska's Occupant Protection Law also requires drivers to properly secure children and their safety seats as well.⁴ It is also illegal in Alaska to sell or install a child safety device that does not meet federal standards.

CHILD DEATH RATE DATA

The trend graph to the left shows that the child death rate nationwide has been decreasing more or less steadily for 20 years. But Alaska's rate fluctuates sharply—because the number of children in the state is small, and a relatively small change in the number of children's deaths can move the death rate sharply up or down. As of 2006, Alaska had the country's highest child death rate—33 deaths per 100,000; the national average was 19.⁵ In 2005, Alaska ranked 34th in the nation, but plunged to 50th in 2006.

Child death rates tend to be higher among minorities nationwide. In 2006, Black children had the highest death rate in the country (28 per 100,000), followed by Alaska Native and American Indian children (26), Hispanic (18), White (17), and Asian and Pacific Islander (13).⁶ Boys account for most (61%) of fatal injuries among U.S. children younger than 15.⁷

Between 2003 and 2007, Alaska's child death rate averaged 31 per 100,000. The bar chart to the right shows the child death rate by region during that 5-year period. The Southwest region had the highest rate (70 per 100,000) followed by the Northern region (53). Anchorage had the lowest rate (23).

The table shows the number of deaths by age group and cause for the period 2003 to 2007, among Alaska children 1 through 17. Accidents caused the most deaths overall (42%), but the youngest children were most likely to die from natural causes.

ALASKA CHILD PASSENGER SAFETY PARTNERSHIP

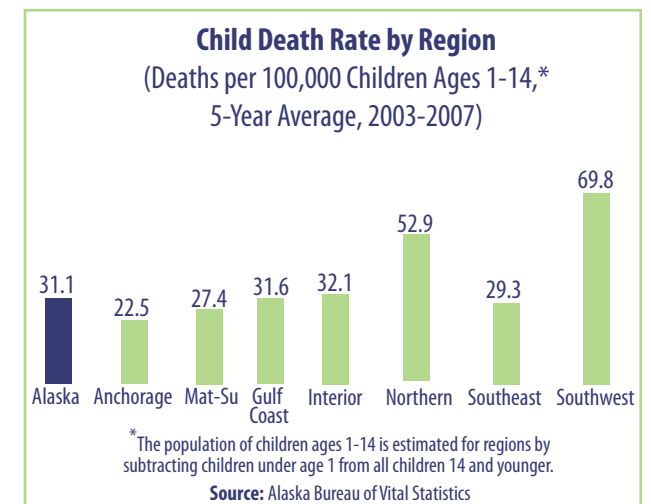
Motor vehicle accidents accounted for 1 out of every 5 deaths of children in the U.S. in 2006, and approximately half those who died were not wearing seat belts or other restraints.⁸ According to the Alaska Trauma Registry, motor vehicle and all-terrain vehicle accidents contributed to approximately 27% of the 160 deaths among children (1-14) in Alaska between 2002 and 2006.⁹

Motor vehicle accidents cause many deaths that could have been prevented if the children had been using proper restraints. Child safety seats and booster seats have been shown to reduce

motor vehicle fatal injuries by 54% for children ages 1 to 4 and by 59% for children 4 to 7.¹⁰

The mission of the Alaska Child Passenger Safety Partnership is to reduce the number of child injuries and deaths that occur as a result of adults' misusing child restraints.¹¹ This partnership provides education and car/booster seat checks around Alaska to help parents or guardians keep their children safe when riding in cars.

To learn more about child restraints, recalls, and where child restraints can be checked by a professional, go to the Alaska Child Passenger Safety Partnership website: www.carseatsak.org/.

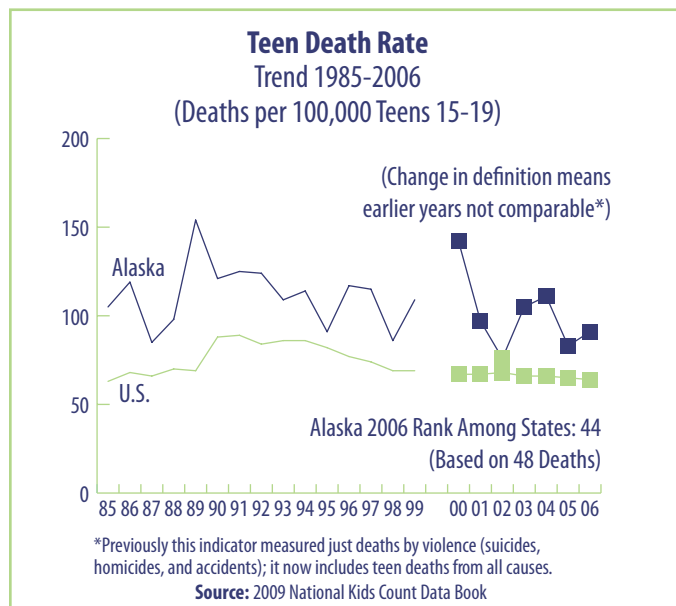


How Do Alaska Children Die?
(Number of Deaths, by Age, 2003-2007)

| | 1-4 | 5-9 | 10-17 | Total | Percent |
|----------------|-----------|-----------|------------|------------|-------------|
| Natural Causes | 36 | 18 | 59 | 113 | 30.9% |
| Accidents | 29 | 29 | 96 | 154 | 42.1% |
| Suicides | 0 | 0 | 50 | 50 | 13.7% |
| Homicides | 5 | 0 | 25 | 30 | 8.2% |
| Other | 2 | 6 | 11 | 19 | 5.1% |
| Total | 72 | 53 | 241 | 366 | 100% |

Source: Alaska Bureau of Vital Statistics

Teen Death Rate



DEFINITION

The teen death rates are the number of deaths per 100,000 teenagers 15 to 19. The three sets of data presented in this section are the overall death rate (both natural and preventable causes), the violent death rate (accidents, homicides, and suicides combined), and the suicide rate. The graph above shows the overall rate.

SIGNIFICANCE

Adolescence is a critical time in the lives of young people, and most teenagers weather it more or less successfully. But some face problems that threaten their health and even their lives.

In 2006, nearly 14,000 teenagers died in the U.S.¹ Over three-quarters died by accident, homicide, or suicide—violent deaths that could mostly be prevented.² Many teenagers die because of risky behavior—like using drugs or alcohol, not wearing seat belts, or carrying weapons. Emotional problems, lack of self-esteem, and mental conditions can also put teenagers at risk.

The federal Centers for Disease Control and Prevention conducts a national Youth Risk Behavior Survey every two years for students grades 9 through 12; the Alaska Department of Education

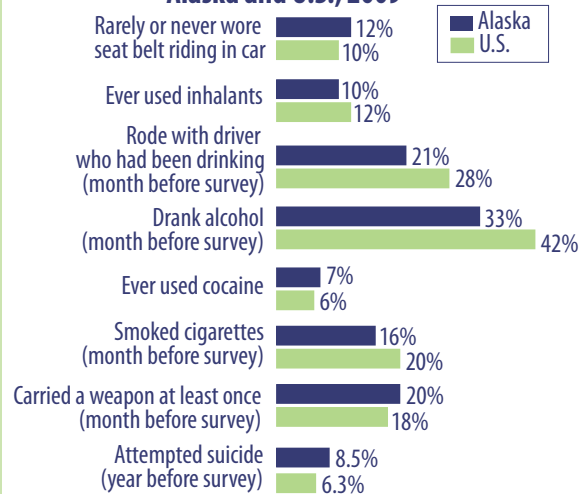
and Early Development administers this survey in Alaska's high schools. In 2009, the department surveyed 1,373 students in 43 Alaska schools—a representative sample of the more than 33,000 high-school students in Alaska.

The survey allows the Centers for Disease Control to track behavior that puts teenagers at risk of harming themselves or others, and individual states can use the data to assess how teen behavior compares around the country.

The table below shows selected results of the 2009 survey, among students in Alaska and nationwide. Overall, Alaska students are not much different from their national counterparts in risky behavior—and on some measures, they are less likely to take risks.

About 33% of Alaska students reported drinking alcohol in the month before the survey, compared with 42% nationwide. And while 21% of Alaska students said they had ridden with drivers who had been drinking, the U.S. average was 28%. About 10% of Alaska teenagers reported using inhalants at some time, compared with 12% around the country. Alaska students were also less likely to smoke cigarettes.

Selected Results, Youth Risk Behavior Survey, Alaska and U.S., 2009



But Alaska students were somewhat more likely than U.S. students on average to carry weapons to school—20% compared with 18%. That statistic is especially alarming because guns are the most common weapon teenage boys use to commit suicide.³ Nearly 9% of Alaska students reported attempting suicide in the year before the survey.

DATA

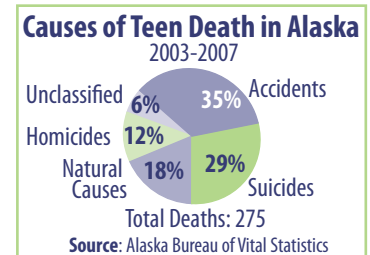
The trend graph to the left shows that Alaska's teen death rate continues to be considerably higher than the national average—although it fluctuates, depending on the number of actual deaths. In 2006, Alaska saw the rate increase to 91 deaths per 100,000 teens, compared with 83 in 2005. That increase dropped Alaska in national ranking from 36th to 44th. The U.S. average decreased slightly—from 65 per 100,000 in 2005 to 64 in 2006.

Teen death rates in the U.S. vary by race. At 95 per 100,000, death rates for Alaska Native and American Indian teenagers nationwide in 2006 were almost 50% higher than the U.S. average, followed by rates among Black teenagers (85), Hispanic (65), White (59), and Asian and Pacific Islanders (37).⁴ In Alaska, the pattern was similar, with death rates among Alaska Native teenagers from 2003 to 2005 more than three times higher (234.2 per 100,000) than among non-Native teenagers (69.5).⁵

MANNER OF DEATH AND REGIONAL RATES

The Alaska Bureau of Vital Statistics reports that 275 teenagers (15 to 19) died between 2003 and 2007. Of those deaths, 35% were caused by accidents, 29% by suicides, 18% by natural causes, and 12% by homicides. Anchorage's homicide rate was higher (14.7 per 100,000) than elsewhere in Alaska, but the suicide rate (15.6 per 100,000) was lower.

Accident and suicide rates were higher in areas outside Anchorage and the Interior, as were rates of death from natural causes.



Teen Death Rate

Teen Death Rates, by Manner and Region

(Rate per 100,000 Teens 15-19, 5-Year Average, 2003-2007)

| Region | Accident | Homicide | Suicide | Natural |
|--------------------|-------------|-------------|-------------|-------------|
| Anchorage | 23.8 | 14.7 | 15.6 | 19.2 |
| Interior | 34.3 | 12.3 | 24.5 | 9.8 |
| Remainder of State | 45.6 | 8.8 | 36.0 | 20.2 |
| Alaska | 35.5 | 11.7 | 29.3 | 18.3 |

Source: Alaska Bureau of Vital Statistics

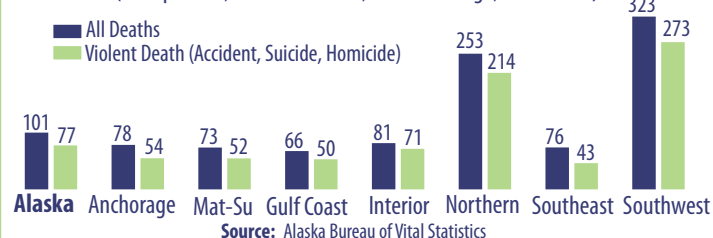
Overall and Violent Teen Deaths

The bar chart below shows overall and violent teen death rates in regions of Alaska for the period 2003 to 2007. On a 5-year average, the overall state death rate was 101 per 100,000 teenagers. The Southwest region had the highest death rate (323 per 100,000), or more than three times the state average. The second highest rate was in the Northern region (253). The Gulf Coast region had the lowest death rate (66 per 100,000), followed by the Mat-Su (73) and Anchorage (78).

Violent death rates for teenagers followed a similar pattern as overall death rates. Statewide, the violent teen death rate was about 77 per 100,000. Southwest again had the highest rate (273 per 100,000), followed by the Northern region (214). The Southeast region had the lowest violent death rate (43 per 100,000), followed by the Gulf Coast (50). The Anchorage, Interior, Southeast, and Northern regions saw small decreases in violent death rates, compared with the 2002-2006 period.

Teen Death Rate and Violent Death Rate, by Region

(Rate per 100,000 Teens 15-19, 5-Year Average, 2003-2007)



TEEN SUICIDE

Suicide is the third leading cause of death among Americans 10 to 24,⁶ and in 2006 nearly a quarter of deaths among teenagers nationwide were suicides.⁷ Suicide rates among Alaska teenagers are much higher than in most states and the nation as a whole. Suicide is the second highest cause of death among Alaska teens. The three main methods teenagers use to commit suicide are firearms, suffocation, and poisoning.

The pie chart to the right shows suicides among Alaska teenagers from 1998 to 2007, by sex and by Alaska Native and non-Native. Of the 168 teenagers who committed suicide during that period, nearly 76% were boys. Alaska Native teenagers (boys and girls) accounted for nearly 70% of those who killed themselves.

Suicide rates among teenagers also vary dramatically by region. Between 1998 and 2007, the highest rates of suicide were in the Northern (179 per 100,000) and Southwest (124) regions—multiple times the state average of 32. The Gulf Coast (13) and Southeast Alaska (14) had the lowest suicide rates. Such wide disparities can be explained partly by demographics. Alaska Natives are at the greatest risk of committing suicide—and the majority of teenagers in Northern and Southwest Alaska are Alaska Native.

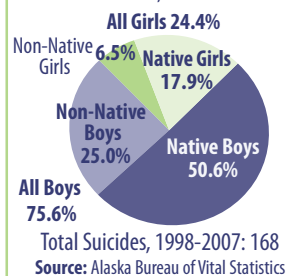
The number of teenagers who kill themselves is high, but the number who consider or attempt suicide is much larger. The 2009 Youth Risk Behavior Survey reports that 14% of Alaska's high-school students considered suicide during the year before the survey, 12% made plans, and 9% made attempts—including 3% who required medical treatment.⁸

The survey also found that teenagers nationwide and in Alaska were just as likely to consider suicide—but Alaska teenagers were more likely to have to require medical attention after suicide attempts.

Girls are at much higher risk of suicidal thoughts and suicide attempts. For example, 12% of teenage girls in Alaska attempted suicide during the year

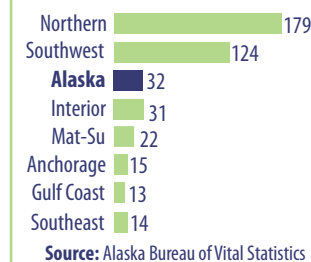
Suicides by Sex and Race

Teens 15-19, 1998-2007



Regional Suicide Rates

(Per 100,000 Teens 15-19, 1998-2007)



before the survey, compared with 5% of boys. But boys are much more likely to succeed in committing suicide.⁹

The survey also found that Alaska Native teenagers were more likely to consider suicide (17%), make suicide plans (15%), and attempt suicide (14%) than non-Native teens. Hispanic and Alaska Native students were twice as likely (4%) to have made suicide attempts requiring medical attention as White students (2%).

Risk Factors

Analysts say four out of five teen suicide attempts follow clear warning signs.¹⁰ So suicide could often be prevented, if we understand more about the signs. Factors commonly associated with teenage suicide include depression, previous suicide attempts, and access to firearms and other lethal means.¹¹ Talking about death, intense mood swings, and changes in normal habits can also be warning signs.¹²

An estimated 20% of American teenagers experience depression, with girls twice as likely as boys to become depressed. Signs include changes in eating and sleeping patterns, irritability, anger, sadness, lower self-esteem, changes in school performance, loss of interest in activities, loss of energy, and social isolation.¹³

Other factors that increase the risk for suicide include a family history of suicide or mental disorders, a history of abuse, mental or physical disorders, and substance abuse.¹⁴

Child Abuse and Neglect

DEFINITION

The federal Centers for Disease Control and Prevention (CDC), defines maltreatment of children as neglect and physical, sexual, and emotional abuse of children under 18.¹ Abuse is inflicting or failing to prevent physical, sexual, mental, or emotional harm. Neglect is failure by parents or guardians to provide children with basic needs—food, shelter, medical attention, clothing, or education.² The child abuse and neglect rate is the number of victims of maltreatment per 1,000 children under 18.

SIGNIFICANCE

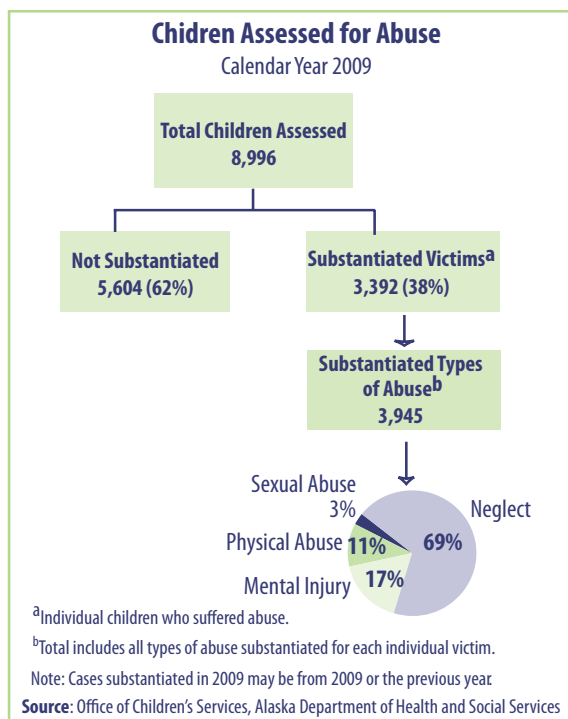
Child abuse is one of society's darkest crimes—perpetrated by adults children love and depend on. Children who are abused sometimes die, and those who survive can suffer from physical injuries, low self-esteem, isolation, developmental delays, and learning disabilities.³ As they get older, they are more likely to have psychiatric disorders, abuse alcohol or drugs, become pregnant as teenagers, and get sexually transmitted diseases.⁴ And adults who were abused as children are at higher risk to become victims of domestic violence and to abuse their own children.⁵

DATA

The Office of Children Services (OCS) in the Alaska Department of Health and Social Services investigates reports of child abuse. In 2009, OCS assessed reported abuse of nearly 9,000 children. It substantiated neglect or abuse of nearly 3,400—or 38%—of those children. Abuse of the remaining 62% was not substantiated, for various reasons; for example, some reports are referred to law enforcement agencies and for some there's insufficient evidence.

Some of the victims suffered more than one type of abuse. The pie chart in the figure above shows that of all the types of abuse substantiated in 2009, 69% was neglect, 17% mental or emotional abuse, 11% physical abuse, and 3% sexual abuse.

The adjacent table shows substantiated child abuse by race and type in 2009—including more than one type of abuse for some children. The smaller adjacent table shows actual numbers of victims by race, counting each victim only once.



Neglect is by far the most common type of abuse among children of all races, and sexual abuse is the least common. Alaska Native children are the most likely to be abused; they accounted for half the victims in 2009.

RATES OF ABUSE, ALASKA AND U.S.

The National Child Abuse and Neglect Data System compiles reports of child abuse and neglect throughout the U.S. for children 17 and under; the most recent data are for 2008.

Substantiated Cases of Abuse,^a by Type and by Race, 2009

| | Mental Injury | Neglect | Physical Abuse | Sexual Abuse | Total | Percent |
|----------------------------|---------------|--------------|----------------|--------------|--------------|-------------|
| Alaska Native ^b | 368 | 1,485 | 172 | 45 | 2,070 | 52% |
| White | 142 | 611 | 126 | 35 | 914 | 23% |
| Other Races | 32 | 262 | 79 | 10 | 383 | 10% |
| Not reported | 119 | 382 | 59 | 18 | 578 | 15% |
| Total | 661 | 2,740 | 436 | 108 | 3,945 | 100% |

^aCounts all types of abuse substantiated for each victim.
^bAlaska Native category also includes those identified as American Indian.
Source: Office of Children's Services, Alaska Department of Health and Social Services

Across the U.S. in 2008, reports of harm were filed for approximately 6 million children. Investigations proceeded for 3.7 million children, and abuse was substantiated for 772,000. And over 1,700 American children died as a result of abuse.

The average rate of abuse in the U.S. in 2008 was 10.3 per 1,000 children. Alaska's rate was twice as high—25.1 per 1,000, second only to that of Massachusetts (29.1). Neglect was the most common type of abuse (71.1%). Children found to have been abused were likely to have suffered more than one type of abuse.

Minority children in general are more likely to be abused; the exception is Asian children, who are the least likely to be abused. The 2008 rate of abuse in the U.S. was highest among Black children (16.6 per 1,000), followed by Alaska Native and American Indian children (13.9), multi-race children (13.8), Hispanic children (9.8), White children (8.6), and Asian children (2.4).

The youngest and most vulnerable U.S. children, those under a year old, suffered the highest rate of abuse in 2008: 21.7 per 1,000. The rate was slightly higher for infant boys than girls (21.8 compared with 21.3). Abuse rates fall as children get older. In 2008, abuse among children 4 to 7 was 11 per 1,000, compared with 5.5 among those 16 and 17.

Most reports of possible abuse or neglect nationwide are made by professionals who work with children—doctors and teachers, for example. Concerned friends or relatives typically file the rest. The overwhelming majority (80% of reported cases in 2008) of abuse is committed by parents.⁶

Victims of Abuse,^a by Race, 2009

| | Number | Percent |
|----------------------------|--------------|-------------|
| Alaska Native ^b | 1,731 | 51% |
| White | 791 | 24% |
| Other races | 347 | 10% |
| Not reported | 523 | 15% |
| Total | 3,392 | 100% |

^aVictims are counted only in the most serious category of abuse, even if they suffered more than one type.

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

DEFINITION

Typically we end this section by reporting on injuries among Alaska children by region. But this year we were unable to get that data. So instead, we decided to talk about bullying—which has been in the news across the country in recent months.

Bullies repeatedly inflict physical or mental harm on those less powerful, either physically or psychologically.¹ Direct bullying can be physical harm, name-calling, or threats. Indirect bullying includes intentionally talking about others to cause harm, excluding victims from groups, or preventing them from making friends.² Cyberbullying is using the Internet or other media to send threatening messages, share private information about the target, spread rumors, or bully the target under a false identity.

SIGNIFICANCE

Some victims of bullying commit suicide. Many more are psychologically or physically stressed, skip school and have difficulty concentrating on schoolwork, and think about suicide.³ The bullies themselves can be at risk for a different kind of trouble—they are more likely to smoke, drink, drop out of school, carry weapons, steal, and vandalize property. Research has found that boys who were bullies in middle school are four times more likely to have criminal convictions by the time they are 24.⁴

Based on data from recent studies of cyberbullying, the U.S. Health Resources and Services Administration finds that 17% of children 6 to 11 and 36% of those 12 to 17 have been cyberbullied. The number of students who reported being cyberbullies or targets of cyberbullying doubled from 2000 to 2005—and 55% of the victims did not know who the perpetrators were.⁵

DATA

Here we report data from the National Survey of Children's Exposure to Violence, the School Crime Supplement to the National Crime Victimization Survey, and the Youth Risk Behavior Survey.

In the first National Survey of Children's Exposure to Violence in 2008, about 13% of children reported being physically bullied and 20% emotionally bullied in the previous year. Cyberbullying was

less prevalent, with about 7% of children 10 and older reporting Internet harassment during the previous year.⁶ The 2007 School Crime Supplement surveyed students 12 to 18 across the country. About 32% said they had been bullied at school during the year—21% were ridiculed, called names, or insulted; 18% were subjects of rumors; and 11% were pushed, shoved, tripped, or spat on. Most (79%) were bullied inside their schools. Girls are more often targeted than boys, but boys tend to use direct bullying while girls are more likely to bully indirectly. About 35% of White students, 31% of Black, 28% of Hispanic, and 18% of Asian students reported being bullied during the school year.⁷

The Youth Risk Behavior Survey asks high-school students in most states about bullying. In 2009, about 21% of Alaska high-school students said they had been bullied on school property in the previous year; among those students, 17% were Alaska Native, 19% Hispanic, and 22% White. About 6% of Alaska students admitted they had not gone to school at least one day in the previous month because they felt unsafe, and 7% said they had been threatened or hurt with a weapon on school property.⁸

In 2006, Alaska passed legislation prohibiting bullying in schools. This legislation required Alaska school districts to implement by July 2007 “a policy that prohibits the harassment, intimidation, or bullying of any student.” For more information about the required policies, go to <http://www.eed.state.ak.us/tls/schoolsafety/bullying.htm>. Nationwide, 43 states have passed anti-bullying laws.

There are warning signs that children are being bullied. They may not bring classmates home, may seem to lack friends, and may have worsening grades. They may be unusually reluctant to go to school, seem depressed or anxious, have mood swings, complain of headaches or stomachaches, and have trouble sleeping or eating.⁹ Experts suggest that parents or guardians should closely monitor their children's computers, phones, and Web history for evidence of cyberbullying—and encourage their children to tell them if they are being bullied.¹⁰

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Juvenile Justice

DEFINITION

Here we report data from both state and federal sources. The Alaska Division of Juvenile Justice provides figures on delinquency referrals—police reports and notices of probation violations—among Alaskans 10 to 17. A referral is “a request by a law enforcement agency for a response following the arrest of a juvenile or as a result of the submission of a police investigation report alleging the commission of a crime or violation of a court order. A referral is counted as a single episode or event and may relate to multiple charges.”¹

Police make referrals to the division when it is probable that a juvenile (1) committed an offense that would be a crime if committed by an adult; (2) committed a traffic offense; or (3) committed an alcohol offense after two prior convictions in district court for minor consuming.² Referrals are reasonable measures of juvenile crime—but remember they’re not the same as proof of guilt.

The Federal Bureau of Investigation reports federal data on the number of juvenile arrests. The federal numbers allow us to compare juvenile crime in Alaska and nationwide.

The Alaska Division of Juvenile Justice’s annual numbers are for state fiscal years, which start July 1 and end June 30. The federal figures are for federal fiscal years, starting October 1 and ending September 30.

SIGNIFICANCE AND BACKGROUND

Research has shown that teenagers who are referred to the juvenile justice system are at higher risk of dropping out of school, staying unemployed, committing more crimes, becoming poor parents, and abusing drugs and alcohol.³ Keeping juveniles in detention facilities also has a high cost to communities. For example, it’s estimated that the average cost to build, finance, and operate one detention bed for 20 years is about \$1.5 million.⁴

Juvenile delinquency is very costly to people and society, and researchers have tried to better understand and prevent it. Risks associated with juvenile delinquency

can be put into three categories: individual, social, and community.⁵ Individual factors include psychological, behavioral, and mental problems—children who are aggressive or hyperactive, or have developmental delays, are at increased risk of becoming delinquent.⁶ For example, 46% of Alaska teenagers who went through the juvenile justice system in 2007 had at least one major behavioral health disorder.⁷

Social risk factors include poor parenting, child abuse, and peer influences. Research has shown that children from unstable families and children with friends who are delinquent are more likely to become delinquent themselves. Community factors include unsafe, disorganized neighborhoods; school policies on grade retention, suspension, and expulsion can also be associated with increased delinquent behavior, depending on what those policies are.⁸

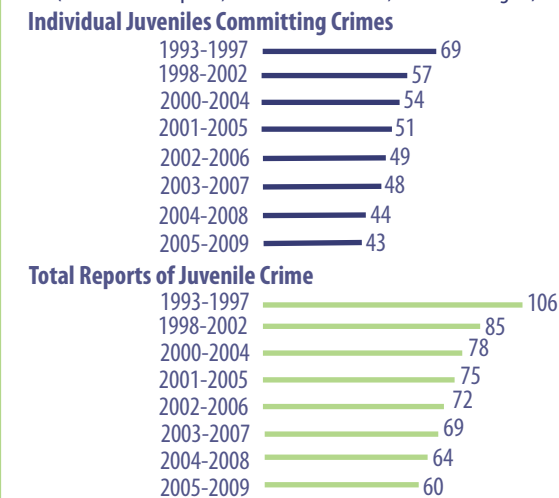
The Alaska Division of Juvenile Justice emphasizes three major goals: holding juveniles accountable for their actions; keeping communities safe; and helping young people become productive citizens. The division publishes an annual report, the *Juvenile Justice Report Card*, describing how it is advancing those goals.

The division has eight youth facilities for the juveniles who are detained for treatment, ranging from small (10 beds) to large (160 beds), as the figure below shows.

One of the division’s current targets is reducing to less than 33% the share of juveniles who commit more crimes after being released from facilities. Among juveniles released in 2007, 45% had again been found delinquent in court proceedings by 2009. That represents a relatively small number of teenagers—113. But

Juvenile Crime in Alaska, 1993-1997 to 2005-2009

(Referral Rates per 1,000 Juveniles 10-17, 5-Year Averages)



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

the recidivism rate has been increasing for the past four years, and the division is reviewing its treatment practices, to determine how it can better help teenagers learn how to stay out of trouble after they are released.⁹

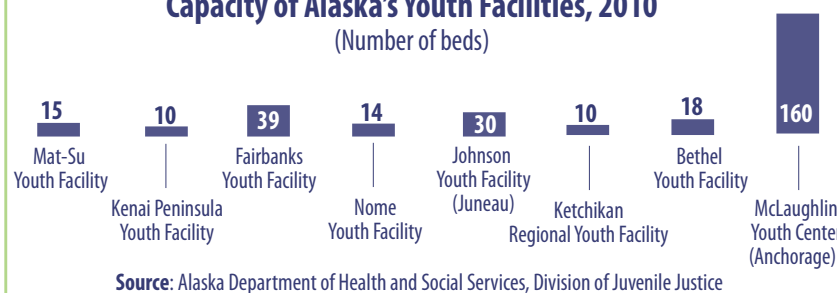
STATE CRIME DATA

Both the rate of individual teenagers committing crimes and the overall rate of crime (counting multiple offenses by the same juveniles) are in long-term declines. Each bar in the figure above is a five-year average. In 2005-2009 the rate of individual juveniles committing crimes was 38% below what it had been in 1993-1997, and the rate of reported crimes was down 43%.

The table on the next page shows the annual average numbers and percentages of referrals by region and type of crime. As in the previous years, in 2005-2009 the most common type of referral was for crimes against property (45.3%), followed by crimes against persons (17.9%), and violations of drugs and alcohol laws (10%). The remaining 26.7% includes violations of probation or public order and weapons laws.

Capacity of Alaska’s Youth Facilities, 2010

(Number of beds)



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

Juvenile Justice

Juvenile (Ages 10-17) Delinquency Referrals^a by Region and Type of Crime

(Annual Average, Fiscal Years 2005-2009^b)

| Region | Crimes Against Persons | | Crimes Against Property | | Drug/Alcohol Laws | | Other ^c | | Total ^d | |
|---------------|------------------------|--------------|-------------------------|--------------|-------------------|--------------|--------------------|--------------|--------------------|-------------|
| | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Anchorage | 360 | 17.3% | 1,012 | 48.6% | 143 | 6.9% | 568 | 27.3% | 2,084 | 100% |
| Mat-Su | 78 | 16.2% | 236 | 48.9% | 70 | 14.5% | 98 | 20.4% | 482 | 100% |
| Gulf Coast | 110 | 16.6% | 283 | 42.8% | 98 | 14.8% | 171 | 25.8% | 661 | 100% |
| Interior | 107 | 17.3% | 269 | 43.4% | 80 | 12.9% | 164 | 26.4% | 620 | 100% |
| Northern | 103 | 20.9% | 240 | 48.5% | 33 | 6.7% | 118 | 23.9% | 494 | 100% |
| Southeast | 116 | 15.4% | 278 | 36.8% | 90 | 11.9% | 271 | 36.0% | 755 | 100% |
| Southwest | 111 | 27.4% | 174 | 43.1% | 38 | 9.4% | 81 | 20.1% | 404 | 100% |
| Alaska | 984 | 17.9% | 2,491 | 45.3% | 552 | 10.0% | 1,474 | 26.8% | 5,501 | 100% |

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

^bThe state fiscal year is from July 1 through June 30. ^cIncludes probation violations, violations of public order and weapons laws, and miscellaneous other offenses. ^dAnnual average number of crimes.

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

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

Regionally, Anchorage, the Mat-Su, and the Northern region had the highest percentages of referrals for crimes against property (close to 49%), while Southwest had the highest percentage of referrals for crimes against persons (27.4%). Drug and alcohol violations accounted for 14.8% of the referrals in the Gulf Coast region, compared with just 6.7% in the Northern region.

The adjacent table shows Alaska's population 10 to 19 by race and region, and the table on the facing page shows the number of juveniles (10 to 17) referred to the juvenile justice system from 2005 to 2009. The age and race categories are not exactly the same in the two tables, because the Alaska Department of Labor and the Division of Juvenile Justice have different age and race groupings.

Still, we can see by comparing the two that Alaska Native and Black teenagers are referred to the juvenile justice system at higher percentages than they represent in the overall teenage population.

Alaska Natives make up about 22% of Alaskans 10 to 19, yet they accounted for 30% of the referrals from 2005 to 2009. Black teenagers make up 4.7% of those 10 to 19, but accounted for almost 7% of the referrals statewide.

Minority teenagers were also more likely to be over-represented in the juvenile justice system regionally. For example, Alaska Natives make up 12.2% of Anchorage residents 10-19, but they accounted for 16% of those referred to the juvenile justice system in the 2005-2009 period.

The Division of Juvenile Justice attributes at least part of this over-representation of some minority young people to two circumstances: (1) minority teenagers are at higher risk than White teenagers of being detained and formally charged; and (2) minority teenagers are more likely to have detention screenings than White teenagers.¹⁰

Alaska Juvenile Population (Ages 10-19) by Race and Region, 2008

| Region | Alaska Native ^a | Black | White | Asian / Pacific Isl. |
|---------------|----------------------------|-------------|--------------|----------------------|
| Anchorage | 12.2% | 7.6% | 71.3% | 9.0% |
| Mat-Su | 11.5% | 2.6% | 82.7% | 3.2% |
| Gulf Coast | 13.1% | 1.1% | 79.6% | 6.2% |
| Interior | 16.4% | 6.0% | 73.8% | 3.2% |
| Northern | 83.9% | 0.8% | 13.2% | 2.1% |
| Southeast | 23.5% | 1.3% | 68.9% | 5.6% |
| Southwest | 83.0% | 1.0% | 14.1% | 1.8% |
| Alaska | 21.9% | 4.7% | 67.4% | 6.0% |

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

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

FEDERAL CRIME DATA

The arrest rates in this section represent the number of arrests made by law enforcement agencies. That is not the same as the number of juveniles arrested, nor as the number of crimes committed. A juvenile can be arrested more than once in a year, and a single crime can lead to the arrest of multiple people. Also, one person might commit multiple crimes but be arrested only once.

The pie chart in the figure below shows how much various types of crime contribute to overall juvenile crime in Alaska, as well as the rates of arrest for the various crimes. The total rate of arrests rose from 5,250 per 100,000 juveniles in 2006 to 5,317 in 2007, an increase of just over one percent.

The bar charts compare juvenile arrest rates for Alaska and the U.S. in 1994 and 2007. In the U.S. as a whole, the rates declined sharply for most types of crime. In Alaska, the rates for most crimes dropped so much that Alaska's juvenile arrest rate for all crimes combined was substantially below the U.S. average by 2007; in 1994 it had been higher.

As has been true in the past, in 2007 rates of property crime among juveniles in Alaska were higher but rates of violent crime were lower than U.S. averages.

The exception to the pattern of declining juvenile crime—in both Alaska and the country as a whole—is driving under the influence of alcohol. Rates in both Alaska and the entire U.S. were higher in 2007 than they had been in 1994. But as the trend graph on the next page shows, the general trend since 2001 has been down—but with a spike up in Alaska in 2007.

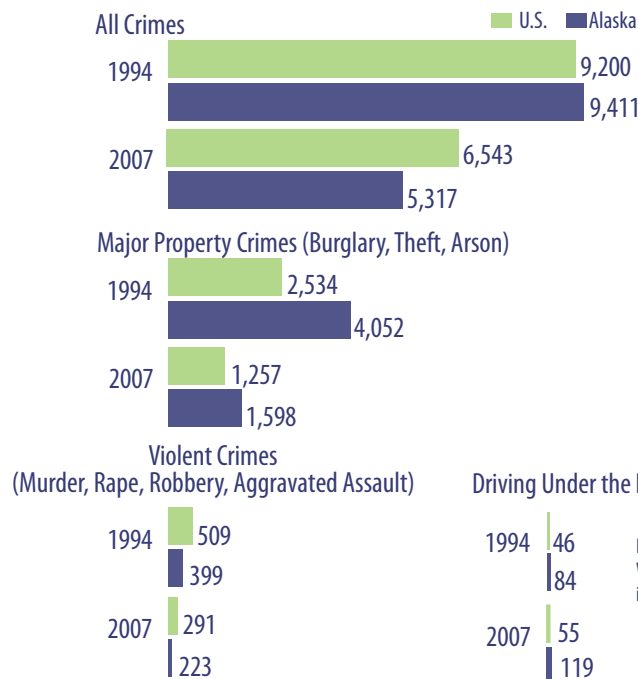
Total Juveniles (10-17) Referred to Juvenile Justice System, by Race and Region, Fiscal Years 2005-2009^a

| Region | Alaska Native | Black | White | NH/ Pacific Isl. | Asian | Mixed Races | Other | Unknown |
|---------------|---------------|-------------|--------------|---------------------|-------------|----------------|-------------|-------------|
| Anchorage | 16.1% | 12.7% | 41.8% | 4.5% | 6.0% | 11.4% | 3.2% | 4.3% |
| Mat-Su | 10.0% | 1.9% | 81.1% | 0.2% | 1.5% | 3.1% | 0.5% | 1.8% |
| Gulf Coast | 9.2% | 1.8% | 70.9% | 0.8% | 3.7% | 8.6% | 0.8% | 4.1% |
| Interior | 32.7% | 9.8% | 50.7% | 0.2% | 0.4% | 3.8% | 0.8% | 1.6% |
| Northern | 88.9% | 0.6% | 2.2% | 0.2% | 0.1% | 5.4% | 0.3% | 2.2% |
| Southeast | 36.1% | 1.8% | 49.3% | 1.1% | 1.0% | 4.9% | 0.4% | 5.5% |
| Southwest | 92.8% | 0.2% | 3.5% | 0.1% | 0.1% | 2.3% | 0.1% | 0.8% |
| Alaska | 30.0% | 6.8% | 45.5% | 2.1% | 3.2% | 7.5% | 1.6% | 3.5% |

^aThis is an unduplicated count of all individual juveniles referred to Alaska's juvenile justice system from 2005 through 2009. Race is reported by the juvenile.

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

FBI Estimates of Juvenile Arrest Rate, U.S. and Alaska, 1994 and 2007
(Rate of Arrests Per 100,000 Juveniles 10-17^a)



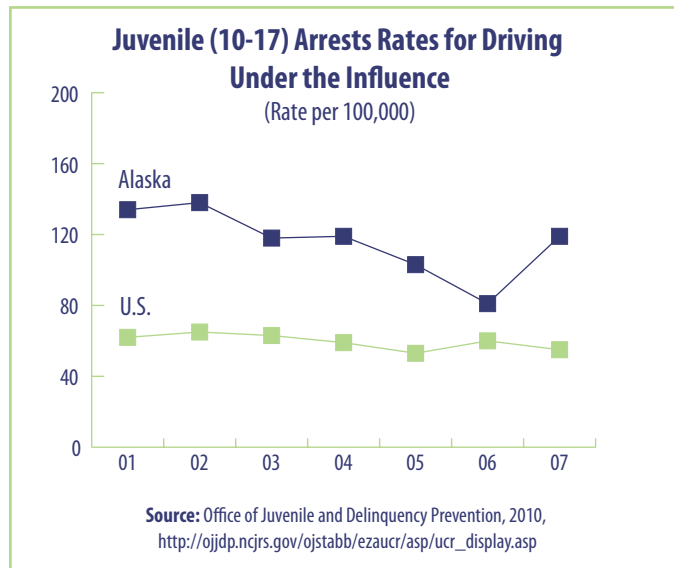
Breakdown of Alaska Juvenile Arrest Rate, 2007
(Rate of Arrests Per 100,000 Juveniles 10-17^a)



Note: Federal figures on arrest rates are for single years and differ somewhat from state juvenile referral reports. We report data from the state Division of Juvenile Justice in five-year averages; the number of juveniles in Alaska is small, so figures vary more from year to year. Crimes included within categories also differ.

Source: Office of Juvenile Justice and Delinquency Prevention, 2010.
http://www.ojjdp.ncjrs.gov/ojstatbb/ezaucr/asp/uer_display.asp

Juvenile Justice



The trend graph above compares juvenile arrest rates for driving under the influence nationwide and in Alaska. It is discouraging to see that Alaska's rates are almost twice the U.S. average—but despite a spike up in 2007, Alaska's rate has been on a downward trend.

In October 2009 Alaska released its "Plan to Reduce and Prevent Underage Drinking."¹¹ The plan describes the dangers of drinking for teenagers and its costs in Alaska:

- Alcohol can seriously damage long- and short-term growth processes of the brain during adolescence.
- Brain damage can be long-term and irreversible.
- Alcohol was a factor in an annual average of 30 suicide attempts between 1991 and 1998.
- During those same years, 66% of alcohol-related accidents required hospitalization.
- Alaska ranks second in the nation for per capita costs of underage drinking.

To read the complete plan, go to http://www.hss.state.ak.us/DBH/prevention/docs/2009_underagedrinkplan.pdf.

The 2009 Youth Risk Behavior Survey provides figures on teenage drinking in Alaska. One-third of Alaska's high-school students reported drinking alcohol in the month before to the survey, and 22% reported having five or more drinks in a row within a couple of hours on at least one day in the previous month. Also, 21% reported riding with drivers who had been drinking.¹²

The Pacific Institute for Research and Evaluation, with funding from the Office of Juvenile Justice and Delinquency Prevention, estimated that underage drinking cost Alaskans \$320.1 million in 2007. The adjacent table shows how each alcohol-related problem contributed to the overall cost.¹³ By far the largest portion comes from violence committed under the influence of alcohol, including murder, rape, suicide, robbery, and other assaults.¹⁴ Violence accounts for over two-thirds of the total costs of underage drinking.

Finally, we close with a look at what percentages of total crime—adult and juvenile—young people in Alaska and nationwide commit.

Teenagers in Alaska commit a bigger share of property crimes and a smaller share of violent crimes than their counterparts nationwide. Juveniles in Alaska commit about 30% of all property crimes and 10% of violent crimes, compared with national averages of 26% and 16%.

Costs of Underage Drinking by Problem, in Alaska 2007

| Problem | Total Costs (in millions) |
|-----------------------------|---------------------------|
| Youth Violence | \$217.4 |
| Youth Traffic Crashes | \$40.6 |
| High-Risk Sex, Ages 14-20 | \$15.9 |
| Youth Property Crime | \$7.9 |
| Youth Injury | \$15.6 |
| Poisonings and Psychoses | \$1.2 |
| FAS Among Mothers Age 15-20 | \$4.3 |
| Youth Alcohol Treatment | \$17.3 |
| Total | \$320.1 |

Source: www.udetc.org/factsheets/Alaska.pdf

How Much of Total Crime (Adult and Juvenile) Do Juveniles Commit? (2007)

| | | |
|----------------|--------|-------|
| Property Crime | U.S. | 26.0% |
| | Alaska | 30.2% |
| Violent Crime | U.S. | 16.2% |
| | Alaska | 10.1% |

Source: Office of Juvenile Justice and Delinquency Prevention http://www.ojjdp.ncjrs.gov/ojstatbb/ezaucr/asp/ucr_display.asp

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