

## The Status of Children in Michigan

All areas of child well-being for children registered some improvement between 1995 and 2002. The largest and most consistent gains occurred among adolescents where the rates of teen birth, teen injury death, and high school dropout showed steep declines. Economic security improved with the state and all of its counties experiencing substantial decreases in child poverty between 1995 and 2000, but over one-third of the state's children continued to live in families only marginally above the poverty level.

Most measures of child health improved or worsened only slightly except for the child death rate that dropped by 19 percent. Of particular concern are the stagnating infant mortality and low-birthweight rates.

The area of child safety reflected worsening trends on all but one measure, out-of-home care for delinquency. The rates of children in families investigated for neglect and abuse, confirmed victims, and children in out-of-home care all increased between fiscal years 1995 and 2003. During this same period the state cut back on prevention programs, and funding for programs to mitigate the effects of poverty for the state's most vulnerable families and children has eroded. With the implementation of the category system in 1999, a third of cases where abuse or neglect has been confirmed receive no state services.

### Improvements

- **High school dropout rates plummeted by 40 percent** between 1996 and 2002. In 2002, the rate had dropped to 4 percent compared to 6 percent in 1996.
- **Teen births to high school-aged teens dropped by over one-third**—from 30 to 20 births among every 1,000 teens. Only three counties experienced an increase in teen birth rates between 1994-96 and 2000-02.
- **Teen injury death rates declined by almost one-third**—from 66 to 46 deaths among every 100,000 youth, ages 16-19. More Michigan teens died from auto accidents in 2002 than the total caused by homicide and suicide combined.

### Challenges

- **Child victims of abuse and neglect rose by over one-quarter**—from 8 to 10 victims per 1,000 children. Roughly 26,700 children were found to be victims of abuse or neglect in 2003.
- **Children in out-of-home care for abuse or neglect rose by almost one-fifth**—from 6 to 7 children per 1,000. Roughly 17,500 children in Michigan were in out-of-home care for abuse or neglect in 2003.
- **High school students not meeting proficiency standards in the MEAP math test increased by one-quarter**—rising from 31 to 40 percent of the Class of 2003. Only five counties experienced improvement in meeting the high school math MEAP standard for the Class of 2003 as compared to 2001.

<sup>1</sup> The 2000 Small Area Income and Poverty Estimates were the latest child poverty data for counties at the time of publication.

## EXECUTIVE SUMMARY

### Kids Count in Michigan Data Book 2004

#### County Profiles of Child and Family Well-Being

**a focus on young children**

Kids Count in Michigan is part of a broad national effort to measure the well-being of children at the state and local levels, and use that information to shape efforts to improve the lives of children. The partners in the Michigan project include:

- **Michigan League for Human Services**  
A statewide citizens' research and advocacy organization that works to promote effective policies to improve the economic security of low-income people
- **Michigan's Children**  
A statewide, multi-issue, independent, broad-based advocacy group that works with policy-makers, other organizations and the public to improve the quality of life for children and their families.

The project is funded by the Annie E. Casey Foundation, Skillman Foundation, and the Blue Cross and Blue Shield of Michigan Foundation, as well as United Ways.



The Michigan Data Book 2004 is available as

- A book for \$15 plus sales tax (shipping and handling \$3) from the Michigan League for Human Services (bulk rates available). Call or e-mail Jackie Benson (jbenson@mmlan.net) at the Michigan League for Human Services – 517/487-5436 or toll free 1/800/837-5436
- A PDF file on the League website: [www.milhs.org](http://www.milhs.org)

For copies of the book, further information or presentations, contact:



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*Children begin to learn as soon  
as they are born, and experiences  
in their early years provide  
a foundation for their physical  
and emotional well-being  
throughout their lives.*



## Young Children in Michigan

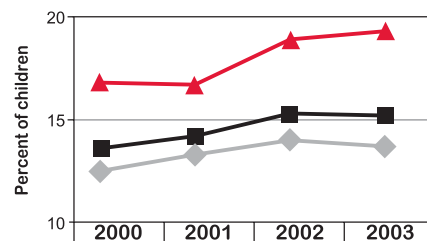
Federal and state policies have focused on the goal of *all* children attaining a set standard of proficiency on math and reading tests. Success in school starts in the early years of life. The case for ensuring an environment that enables the development and learning necessary to later success has become even more compelling.

If more children are to arrive at kindergarten “ready to learn,” early investments must be made to assure a better start in life for more children. These conditions include: meeting the basic needs of infants and children; ensuring their physical health; addressing their social and emotional needs; guarding their safety; and guaranteeing access to high-quality care and education.

**Meeting the basic needs of young children is the threshold measure** as it has an impact on a child’s physical health, socio-emotional needs, safety, and quality care and educational needs—all are compromised by the living conditions of a family mired in poverty.

- In 2003 roughly one in five young children in Michigan lived in poverty.
- Roughly half of young children in single mother families in Michigan lived below the poverty line.

### Child poverty in Michigan worsened between 2000 and 2003, particularly for young children.



Source: US Census Bureau, American Community Survey

**Ensuring the physical health of infants and young children has been addressed in some aspects in Michigan.** The state has a relatively low rate of children without health insurance and toddlers without all their immunizations when compared to the national averages, but several other measures raise concerns.

- The rates of well-child check-ups among Medicaid-enrolled children in 2003 were below the national averages.
- Michigan’s annual average hospitalization rate (49) for asthma among young children in the three-year period 2000-02 is almost double the *Healthy People 2010* target of 25 per 10,000.
- While Michigan has been making steady progress in the numbers of children being tested for lead, only 19 percent of children, ages one and two, were tested in 2003. Undetected lead poisoning causes irreparable damage to the central nervous system in young children.

**Addressing the social and emotional needs of young children is critical to success in school and life.** Security and attachment in the early lives of children is grounded primarily in the emotional health of parents and their ability to respond with sensitivity to their children. Two of the major family pressures that interfere with this interactive process include poverty—the daily pressures of meeting basic needs—and domestic abuse. Children in the foster care system as a result of confirmed abuse or neglect are also at high risk of social and emotional problems.

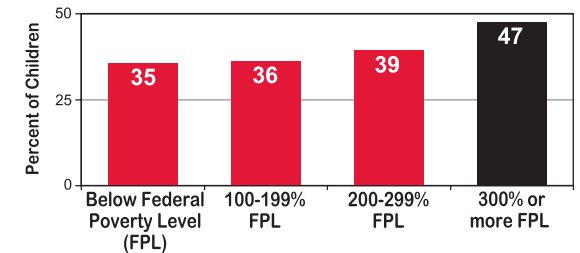
- Parents of kindergarteners in poverty had double the risk for depression as parents with incomes above the poverty threshold—27 percent compared to 13 percent.
- Mental health services to meet the needs of children and families are lacking in the majority of Michigan counties.

**Guarding the safety of young children involves providing a wide range of supports that fragile families need** to stay together and raise children in a secure and stable environment. One strategy for preventing child abuse and neglect, particularly in the early years, involves such activities as parent education, home visitation, parent support groups, and connecting the family to additional supports such as emergency services, child care subsidies, substance abuse or mental health treatment, or cash assistance. To successfully integrate these supports on a timely basis, coordination and an early detection system are critical.

- Infants and toddlers in Michigan were roughly twice as likely as all children to be confirmed victims of abuse or neglect. Among every 1,000 children under age two, 19 were confirmed as victims of abuse or neglect in fiscal year 2003 as compared to 10 among all children.
- Most deaths from maltreatment occurred among young children. Of the 52 Michigan child fatalities that resulted from maltreatment in 2002, over half (56%) were infants under the age of one, and one-quarter were children between the ages of one and four.



### Highest income children in Michigan were most likely to attend preschool.



Source: US Census 2000, Tabulations from Library of Michigan

**Guaranteeing access to high-quality care and education provides young children a safe and stimulating environment** where caregivers offer responsive supervision, verbal and cognitive stimulation, individualized attention, and opportunities for stable relationships. While the positive interaction between caregivers and children is key to quality, structural components such as a low ratio of children to caregiver (one of the most vital components of high quality care), staff trained in early childhood development, and adequate staff wages and benefits also have an effect.

- Michigan is the only state in the nation that has not instituted any basic training requirements for the providers of child care.
- Almost half of the state’s children in higher income families (300% of poverty or above) attended preschool in 2000 compared to just over one-third of poor children. Many poor or low-income children who qualify for Head Start or the Michigan School Readiness Program cannot attend because of limited program capacity or parental employment schedules.
- While child care subsidies help low-income families cover the cost of child care so parents can work, the hourly payment structure and relatively low rates restrict parental options for care.