
This paper synthesizes data from recent reports about the well-being of U.S. children and youth, policies and proposals for enhancing at-risk children's quality of life, critical questions about the impact of these policies and proposals on all children and their families, trade-offs needed if proposed policies to assist disadvantaged children and families are implemented, the projected impact of education reform proposals on educationally disadvantaged populations, and recommendations for policymakers, educators, and researchers. The following sections are provided: (1) introduction; (2) current status of children in America; (3) the population of educationally disadvantaged youth; (4) educational indicators (the dropout problem); (5) major indicators of educational disadvantage (poverty, race/ethnicity, living in single-parent families, educational level of mother, non-English- or limited-English proficiency, or special education); (6) trends in indicators of physical health of children (mortality trends, lack of prenatal care, health insurance coverage, accidental injuries, violent injuries and deaths, and child abuse); (7) trends in indicators of children's mental health (drug and alcohol use, juvenile crime, fertility-related behavior, and emotional well-being of children and adolescents); (8) homeless children and lack of affordable housing (effects on schooling, the National Law Center on Homelessness and Poverty Report, and improving access to schooling); (9) child labor violations; (10) synthesis of major findings; (11) perspectives and recommendations (awareness of the problem, need to confront myths and negative attitudes involving the disadvantaged, specific policies and actions, early intervention, preparing for the 21st century and changing conceptions of schooling and parental involvement); and (12) concluding perspectives. Included are 10 figures and 162 references. (RLC)
THE EMERGING CRISIS: CURRENT AND PROJECTED STATUS OF CHILDREN IN THE UNITED STATES

WILLIAM E. DAVIS

and

EDWARD J. MCCCAUL

INSTITUTE FOR THE STUDY OF AT-RISK STUDENTS

1991
This monograph was prepared by the Institute for the Study of At-Risk Students. The Institute is sponsored and funded by the Divisions of Special Education and Compensatory Education, Maine Department of Education, and the College of Education, University of Maine. The Institute serves as a center for research and policy analysis on broad-based issues and concerns related to the education of at-risk children and youth. The Institute encourages requests for services and information. For further information regarding the Institute, please contact:

William E. Davis, Ph.D.
or
Edward J. McCaul, Ed.D.

Institute for the Study of At-Risk Students
College of Education
306 Shibles Hall
University of Maine
Orono, Maine 04469
(207) 581-2440

Electronic Mail: MCCAUL@MAINE.BITNET
FAX number: 207-581-2423
Foreword

Recently, a great deal of public attention -- through blue ribbon commissions, Governors' task forces, and the media -- has been focused on the plight of our nation's children. Increasing numbers of children are homeless, living in poverty, victims of abuse or inadequate health care, or at risk in countless other ways. In fact, any in-depth examination of the status of our children reveals the strong possibility of an emerging national crisis.

The authors offer this monograph to raise awareness of these critical problems which are projected to intensify over the next twenty years. Of more importance, we offer it as a call to action. We already have much of the information and technology to break the pernicious cycles of economic, social, and educational disadvantage which produce both short- and long-term negative consequences for a growing proportion of U.S. children and their families.

Rhetoric alone is insufficient to solve these problems. Commitment, resources, effective policies, and action are required. This monograph is intended to serve as a catalyst for action at the federal, state, and local levels.

We would like to thank David Noble Stockford, Director of the Division of Special Education, Maine Department of Education, Donald Christie, Director of the Division of Compensatory Education, Maine Department of Education, and Robert A. Cobb, Dean of the College of Education, University of Maine, for their support of this project. We would also like to extend a sincere thanks to Anne Levasseur, Secretary for the Institute for the Study of At-Risk Students, for her extra effort and care in the preparation of this document.
# Table of Contents

**EXECUTIVE SUMMARY** .......................................................... 1

I. **INTRODUCTION** .................................................................. 14

II. **CURRENT STATUS OF CHILDREN IN AMERICA** ................. 18

III. **THE POPULATION OF EDUCationally DISADVANTAGED YOUTH** .......................................................... 24
    Definitions ........................................................................... 24
    Estimated Size of the Population ......................................... 26

IV. **EDUCATIONAL INDICATORS** ............................................. 28
    The Dropout Problem ......................................................... 31

V. **MAJOR INDICATORS OF EDUCATIONAL DISADVANTAGE** .......... 34
    Poverty ............................................................................ 35
    Race/Ethnicity ................................................................... 45
    Living In Single-Parent Families ......................................... 50
    Educational Level of Mother .............................................. 56
    Non Or Limited-English Proficiency .................................... 58
    Special Education ............................................................ 64

VI. **TRENDS IN INDICATORS OF PHYSICAL HEALTH OF CHILDREN IN THE UNITED STATES** ........................................... 73
    Mortality Trends .............................................................. 73
    Lack of Prenatal Care ....................................................... 75
    Health Insurance Coverage .............................................. 76
    Accidental Injuries ........................................................ 78
    Violent Injuries and Deaths ............................................... 78
    Child Abuse .................................................................. 79

VII. **TRENDS IN THE INDICATORS OF MENTAL HEALTH OF CHILDREN IN THE UNITED STATES** .................................. 81
    Drug and Alcohol Use ..................................................... 81
    Juvenile Crime ................................................................. 86
    Fertility-Related Behavior ............................................... 89
    Emotional Well-Being of Children and Adolescents ............. 96

VIII. **HOMELESS CHILDREN AND LACK OF AFFORDABLE HOUSING** .............................................................. 100
    Effects on Schooling ....................................................... 101
    National Law Center on Homelessness and Poverty Report ................................................................................................... 101
    Recommendations for Improving Access to Schooling ......... 103
    Lack of Affordable Housing ............................................... 104

IX. **CHILD LABOR VIOLATIONS** ............................................. 106

X. **SYNTHESIS OF MAJOR FINDINGS** ...................................... 112
XI. PERSPECTIVES AND RECOMMENDATIONS ................................................................. 124
     Awareness of the Problem .................................................................................. 125
     Need To Confront Myths and Negative Attitudes Involving the Disadvantaged 131
     Specific Policies and Actions ............................................................................. 131
     Early Intervention ............................................................................................... 151
     Preparing for the 21st Century: Conceptions of Schooling Must Change 161
     Parental Involvement ......................................................................................... 174

XII. CONCLUDING PERSPECTIVE ............................................................................. 188

REFERENCES ............................................................................................................. 196
EXECUTIVE SUMMARY

"As children decline as a proportion of the American population, their lives become more precious, and our responsibility to them even greater. The test now is whether we are motivated to promote policies that we know can reverse these alarming trends in the 1990s, or whether we will enter the 21st century besiegled by the worst effects of our failure".

(U.S. House of Representatives, Select Committee on Children, Youth, and Families, 1989, p. xiii)

These are critical times for our nation's children. While the proportion of children in our society declines, the number of children who are living in poverty, homelessness, and situations of abuse and neglect is increasing steadily. Further, we are lagging far behind most other industrialized countries in our infant mortality rate and in our provision of maternal and child health care. The majority of our most affluent children obtain a level of care equal to the best in the world, but disadvantaged children too often receive less than adequate attention and treatment, especially during the most critical early periods of their lives.

We know which factors and conditions cause the cycles of social, economic, and educational disadvantage in our nation to continue, most notably: persistent poverty; lack of affordable, safe housing; family dysfunction; inadequate health care and poor nutrition.

We also have the knowledge and the technology to address this crisis. We know what works -- early intervention with children and families; early and frequent infant and maternal health care; meaningful parent involvement in the overall education process; intensive student instruction, maintained over time; and meaningful multiagency collaboration. What we need are creative new visions and new policies that demonstrate the commitment and courage to address
our children's needs. Also, we need the necessary resources, both fiscal and human, to do the job.

There are solid economic reasons for addressing the needs of our nation's disadvantaged population -- these children and youth drop out of school more frequently; they are overly represented in our prisons; and they will require more education than ever before if they are to cope with the complex challenges of the future. Preventive efforts such as early prenatal care can avoid the later costs of long-term medical problems. There are, therefore, not only moral and humanitarian reasons for addressing the needs of this population; there are also sound fiscal reasons.

We are currently amidst yet another wave of educational reform and restructuring of schools in the United States, but the problems facing today's children are much broader than the scope of traditional schooling. Pallas, Natriello, and McDill (1989) argued that "educators must become more aware of and involved in the family and community contexts of their students, both to understand the problems these contexts present for the education of students and to learn to draw on the strengths of families and communities to enhance the education of students" (p. 21).

These authors also suggested that there are five key indicators associated with educationally disadvantaged children and youth: (1) living in a poverty household; (2) minority/racial group identity; (3) living in a single-parent family; (4) having a poorly educated mother; and (5) having a non-English language background. All of these indicators are correlated with poor performance in school and they are clearly interrelated. They combine to create a vicious, self-perpetuating cycle of educational, social, and economic disadvantage.
There are numerous indicators that lead to a concern about the status of both today's and tomorrow's children. Among the major indicators are the following:

***Our nation's schools will experience differential population shifts in the future both in terms of student age and minority representation.*** The number of all preschool children has increased by more than 3 million since 1980, but this number is expected to decrease again by 2000. The number of elementary school children continues to be low in 1990 when compared with 1970 enrollments, but it is projected that this number will increase through the year 2000 before again declining. The number of secondary school youth will decline through 1990, but then increase by the year 2000.

The numbers and proportions of minority children in our nation's schools are projected to rise significantly during the next two to three decades. Based on several indicators, including earlier childbearing and higher fertility rates of certain minority groups, especially blacks and Hispanics, some demographers project an almost 200 percent increase in our nation's population of blacks by the year 2020, and an almost 300 percent increase in the Hispanic population. It is projected that by the year 2000, 40% of our public school students will be representatives of some ethnic/racial minority group. Many of these minority group children are likely to be poor.

***Children represent the single largest and fastest growing poverty group in the United States.*** Of all persons considered to be poor in the U.S., 40 percent are children. Nearly 20 percent of all children under the age of 18 presently living in this country are poor. Of all of the major indicators which are commonly associated with educational disadvantage, **poverty** is the one most significant indicator.
***The younger a child is, the greater are his or her chances of being poor. Of all children age 3 and under, 23 percent are poor; nearly 22 percent of 3-5 year olds are poor; and more than 20 percent of 6-11 year olds are poor.

***Being a member of a minority group significantly increases the chances of a child being poor. Most poor children in America are white. It is estimated that 1 in 7 white children currently living in America is poor. However, black and Hispanic children in particular, are far more likely to be living in poverty households than are white children. In 1987, 45 percent of all black children were poor, while 39 percent of all Hispanic children were considered poor. Overall, the median family income of white children is generally considered to be one and three-quarters times that of Hispanic children and twice that of black children.

***Family living arrangements of children in the U.S. have changed dramatically in recent years. In 1955, 60 percent of all U.S. households consisted of a working father, a housewife mother, and two or more school-age children. In 1985, only 7 percent fit this pattern. As of 1988, nearly 25 percent of all U.S. children were living in single-parent families, the mother in over 90 percent of the cases. Living in a single-parent household has been well documented as one of the major indicators for placing children at risk for educational and broader social and economic failure.

***Parental level of education has increased in recent years, but minority parents' level of education continues to lag behind the level of nonminority parents. One of the major indicators associated with educationally disadvantaged children and youth is the educational level of their parents, especially that of the mother. Children of poorly educated mothers have
been found to perform worse academically and leave school earlier than children of better educated mothers.

***The numbers of homeless and "precariously housed" children in the U.S. are rising dramatically. Although specific estimates vary, the number of children who have no permanent shelter has increased significantly in recent years. The negative consequences of not having a safe, permanent residence are many and complex, not the least of which is lack of access to a quality education. Young children in families represent the fastest growing single group of homeless in America. Although there are many situations which contribute to a child being homeless, one of the major causes is the lack of safe, affordable housing.

***America continues to lag far behind most other industrialized countries regarding maternal and child health care. Although most of our nation's children are in good health, many key health indicators clearly point toward a decline or stagnation of progress in maternal and child health care during the 1980s. One in five children in the U.S. has no health insurance. Our nation ranks nineteenth in the world in infant mortality and twenty-ninth in low-birthweight births.

***American students' level of academic achievement continues to be disappointing. Half of our nation's 17-year-olds do not have reading, math, and science skills that would allow them to perform moderately complex tasks such as summarizing a newspaper editorial or performing calculations with decimals. The high school graduation rates in our country have increased by only 3 percentage points during the past two decades. Approximately 25 percent of all students do not complete high school.

The achievement gap between minority and white children narrowed during the past decade, but not as much as during the
previous two decades. Poor and minority students together currently make up approximately one-third of the school-age population in America. Although they enter school only slightly behind their more advantaged peers, poor and minority children fall further behind as their schooling progresses. By third grade, blacks and Hispanics are six months behind; by eighth grade, they are two years behind; and, by twelfth grade, they are more than three years behind.

Poor teenagers are four times more likely than non-peer teens to have below-average basic skills, and they are three times more likely to drop out of high school. Whether they graduate or not, black and Hispanic 17-year-olds have reading and math skills about the same as those of white 13-year-olds. In science, their skills are about the same as those of white nine-year-olds.

***The number of babies being born to unwed women is at an all-time high in the U.S., with the fastest growing group being 15 to 17-year-olds. Early childbearing carries a double burden. It can be physically damaging to the mother, who, in many respects is still a child herself. Also, it is frequently a major factor in contributing to our country's extremely high rates of low birthweight and neonatal mortality. In 1989, the U.S. spent $21.5 billion dollars on families headed by teen mothers. Teen pregnancy often perpetuates the insidious cycles of economic, social, and educational disadvantage for both teenage mother and child.

***There has been a steady and alarming increase in the number of reported child abuse cases in the U.S. in recent years. In 1989, approximately 2.4 million child-abuse reports were filed with the National Committee for the Prevention of Child Abuse with more than 400,000 of these reports involving sexual abuse. Also in 1989, state child protection agencies
throughout our country reported nearly 1,250 child-abuse related deaths -- a 38 percent increase over 1985.

*** **Fetal Alcohol Syndrome is now generally regarded as the leading cause of mental retardation in the western world, and the second leading cause of birth defects in the United States, affecting approximately 1 in every 650 babies.** Estimates now indicate that each year in the U.S., 50,000 babies are born with alcohol-related problems, and of these, over 12,000 demonstrate the full Fetal Alcohol (FAS) dysmorphology.

All of these developments portend troubled times for our nation's children and schools. The current status of youth on such factors as physical health, mental health, and homelessness leaves ample room for pessimism. Current newspaper articles chronicle the troubles of drug and alcohol abuse, juvenile crime, teen suicide, the rise in the number of pediatric AIDS cases, and child labor abuses. Demographers, social scientists, and advocates for various disadvantaged populations have been warning us for several years that unless changes occur in many of our national, state, and local policies, our nation is headed for internal upheaval if not destruction.

Awareness of these problems is the first step toward a coordinated national effort. However, we must not stop at the awareness level. First, we must debunk the many myths, false assumptions, and negative attitudes involving disadvantaged populations -- many of which have served as major obstacles to the development and implementation of effective policies and programs (e.g., the problems are too complex and overwhelming for any reasonable solution; we lack sufficient knowledge to develop successful programs and interventions; most social programs do more harm than good, are cost-ineffective, and tend to perpetuate the cycle of disadvantage; most disadvantaged persons do not wish to be helped, etc.).
Actions are required on several fronts: The overriding, most critical need is for the development and implementation of effective policies and programs to address the complex and pervasive problems of poverty and health care facing a large and growing proportion of our nation's disadvantaged youth.

More effective interagency collaboration is needed because the problems typically confronted by disadvantaged children and their families are extremely complex, requiring the simultaneous services of several service providers. However, real cooperation must be sought -- much more than the rhetoric involving cooperative interface, which often translates into "interface without cooperation" along with the token "paper cooperative agreements" which already are in place at many levels -- and which have proven to be largely ineffective. Most traditional approaches in this regard have not worked. New, creative approaches are needed -- ones which focus on the child as a growing and developing human being who may have multiple needs across several domains.

While disadvantaged children clearly must be the primary focus of new policies and related programs, policymakers must recognize that most of the problems confronting disadvantaged children cannot be effectively remedied unless the needs of families are directly addressed. In most situations, the child's needs must be treated in the context of his/her family. Policies and programs are needed to strengthen our nation's families -- all family configurations, not just those which represent the "typical family of the 1950s" but rather the increasingly more common family configuration emerging in the 1990s -- single-parent, female head-of-household, step, adoptive, foster, and dual working parent households. We need more enlightened child care/parental leave policies.

We must confront the health care crisis in our nation and ensure that all children and families are able to receive adequate health care and proper
nutrition. Policies and programs are needed which will provide for safe, affordable housing for disadvantaged populations.

We also must expand our early intervention programs and ensure that our school reform efforts include the goal of equity as well as that of excellence. Most recent school reform movements have tended to emphasize excellence on the premise that the educationally disadvantaged population is relatively small. However, demographic trends suggest that the numbers and proportions of disadvantaged students are increasing so rapidly that we are no longer discussing small numbers.

The United States public school population in the year 2000 will be more ethnically and linguistically diverse than ever before. It will represent a population that is poorer, more precariously housed, and more vulnerable to the pressures of socioeconomic disadvantage. It will include the large and growing numbers of "crack-cocaine babies" which are now being born at an alarming rate. We could be talking about the majority of our nation's youth -- not the minority -- by the year 2010. It is critical, therefore, that educational equity be once again considered a priority.

We are unlikely to witness any substantial improvement in the quality of programs for educationally disadvantaged youth unless schools are structured and operated very differently. If, however, we are asking schools to change, to assume broader roles and responsibilities, and to provide a wider array of services and programs to students which are not essentially academic in nature, it is unjust to continue to employ a one dimensional measure (standardized, multiple-choice tests) as the sole, or major, yardstick of a school's, or for that matter, an individual student's progress. New approaches to assessment and accountability are required.
It is also very unlikely that the multiple, complex problems facing poor and near-poor families in the United States can be substantially reduced without strong leadership and commitment at the national level. The problems are so comprehensive and pervasive that substantial fiscal resources will be needed. Our values and priorities as a nation will require reassessment. At the same time, we should not ignore the successful interventions which are occurring at state, and especially at local, levels throughout the country. We need to analyze successful programs in schools and communities, e.g., those designed to keep teenage parents in school, and to replicate them to whatever extent possible in other communities which share similar demographics.

The most well-intentioned school reform efforts designed to improve the academic performance and to reduce the dropout rates of educationally disadvantaged students in our nation predictably will have minimal impact unless the broader conditions and factors affecting these children and youth are rigorously addressed: living in poverty, the lack of safe and affordable shelter, poor nutrition and inadequate health care, etc. Clearly, the instructional and curriculum needs of students must continue to be a majority responsibility of our nation's public school educators. Yet, changing demographic conditions and emerging trends strongly suggest that new concepts of schooling may be needed.

Schools should be viewed as only one of several educating institutions that simultaneously affect an individual's growth (the family and the community being the other major institutions) and that remediation cannot be confined to the school. Certainly, schools cannot be expected to solve all of the nation's social and economic problems. In fact, many observers feel that our nation's public schools already have been criticized too harshly and are being asked to assume
"unrealistic responsibilities" -- responsibilities for which they are not equipped to handle.

Our schools have been described as the convenient whipping boy for our nation's economic and social ills. Clearly, our schools, as they are not the only cause of the problems facing many of today's youth, cannot be expected to solve these problems alone.

Yet, our schools are, or could be, in an extremely critical position to assist in solving the problems. They could serve as a major facilitator of a broad spectrum of services to disadvantaged children and their families. Some basic shifts in roles and responsibilities will be required, but nevertheless, our nation's schools -- assuming that they are provided with sufficient fiscal and human resources, and this is a major assumption -- could function in a major facilitator role for the organization, collaboration, and delivery of comprehensive programming services to this population.

A substantial financial investment to improve the quality of the lives of our nation's disadvantaged children will be required. Many observers will claim that we, as a nation, simply cannot afford the costs which surely are involved. Others will continue to proclaim that "money is not the answer to solving the pervasive problems of social, economic, and educational disadvantage." Clearly, money alone, is not the answer. Yet, to suggest that we can solve these complex problems without the addition of substantial fiscal outlays is both naive and impossible.

When asked how our nation will be able to afford to pay for military buildup deemed necessary to deal with the current Middle East crisis, President Bush responded that "cost cannot be an issue -- whatever it costs, we will have to pay for it -- our future American lifestyle is being threatened." The same sense of urgency and level of commitment are required to reverse the cycles of
disadvantage in this country. We, as a nation, cannot lose sight of the fact that the lifestyles of large and growing numbers of American children have already been adversely affected by our past and present failures to develop effective policies and programs to help them improve the overall quality of their lives.

The problems facing disadvantaged children are not so overwhelming that they cannot be overcome. Given the multitude and complexity of problems presently facing large segments of children and youth which are addressed in this document, it is understandable why many readers might feel that these problems simply are so overwhelming and pervasive that they cannot be substantially alleviated, and certainly not eliminated. It is understandable why feelings of hopelessness and helplessness persist.

Yet, we already know what needs to be done. We are not beginning from a zero knowledge base. For example, we possess clear evidence that early intervention with children and families works. Likewise, we have solid evidence that intensive instruction, maintained over time, significantly reduces a student's chances for educational failure. And, we know that early and frequent maternal and infant health care substantially reduces the likelihood of later health risks for both mother and child.

We know much more also. It isn't a question of not knowing what works to help break the cycle of disadvantage. It is a question of whether or not we as a nation are committed --politically, socially, economically, educationally, and morally -- to effect those changes necessary to allow our country to develop into a pluralistic, economically sufficient and productive, and compassionate one -- rather than into a two-tiered class society of the haves and the have-nots: the advantaged and the disadvantaged.
Ernest Boyer (1990) succinctly addressed this specific concern:

The United States, if it is to remain an economically vital nation, cannot tolerate a system that divides the winners from the losers. We must affirm that all children, even those from the most difficult backgrounds, will have available to them the conditions to ensure that they will academically and socially succeed. The goal must be equity for all. . . When all is said and done, the reform movement must be measured not by what happens to students in our privileged schools, but by what happens to the rural poor and to neglected children in the inner city (p. 37).
I. INTRODUCTION

To borrow the words of Charles Dickens, "these are the best of times; these are the worst of times." On the one hand, scientific research has led to some marvelous technological advances: We are keeping more people alive who would have died at a far earlier age. We have developed electronic communication systems which allow material and information to be shared internationally in only a matter of minutes. Agricultural research has resulted in new more disease-resistant species of plants that can flourish in previously inhospitable soil and provide food for the world's hungry.

Yet, on the other hand, we are constantly reminded by soaring crime and divorce rates that interpersonal communication and interaction is not keeping pace with our technological progress. At the same time that medical technology is preserving and enhancing individual lives, other lives are being marred by the effects of homelessness, family dysfunction, or poverty. Further, reports on our nation's future often pessimistically predict growing poverty and misery for a substantial portion of our nation's citizens, especially children. Some forecasters even project a "dual society" of haves and have-nots leading to substantial social unrest and conflict (Levin, 1985; Hodgkinson, 1989).

We, as educators, work everyday with our nation's most precious resource for the future -- our children. How can we face the future with optimism and confidence? In fact, a more basic question is: What do the rapid changes that are presently occurring in our society tell us about the future of our society and our schools? How can we be better prepared to meet the challenges of the future?
Our purpose in preparing this document is to examine the current status of children and youth in the United States. The specific objectives of this document are the following:

1. To analyze current and emerging trends involving the overall well-being of children and youth in the United States;

2. To examine selected policies and proposals that purport to enhance the quality of life of at-risk children in the U.S., and to raise critical questions concerning the impact that these policies and proposals are likely to have upon all children and their families;

3. To analyze trade-offs which likely will be necessary if policies currently being proposed to assist disadvantaged children and their families are implemented;

4. To analyze the projected impact of education reform proposals on educationally disadvantaged populations; and

5. To offer recommendations, strategies, and approaches to policymakers, educators, advocates, and researchers who are concerned about the overall current and future well-being of children in the U.S. -- especially those children considered to be at risk socially, economically, and educationally.

Awareness of the problems that will be created in the wake of our society's demographic and social changes is growing rapidly, and the media provides a daily chronicle of the problems of child abuse, family homelessness, youth homicide, growing numbers of children living in poverty, and teenage pregnancy. However, awareness is only the first step. There is a danger, too, that we may become inured by the sheer volumes of information that bombard us daily in the media. This numbness and accompanying feelings of "so much being out of our control" may lead to a fatal paralysis in making the needed changes in our nation's social service delivery system as well as in our educational structure and practice.

Nevertheless, our attempt begins with developing awareness. Our goal is to provide a synthesis of major demographic and societal changes that already are having a substantial impact on educational policies and practices in our nation's
schools -- and are projected to have an even more significant impact during the
next ten to twenty years.

In the recent literature on educational research, there has been
substantial focus upon those factors and variables that are immediately accessible
and alterable for educators (see, for example, Walberg & Wang, 1987). While we
encourage and support these efforts, our perspective in this document provides a
contrast with this currently popular view. We choose to examine the forces on
education from a "macroperspective" in the belief that educators will no longer
be able to ignore the impact of societal changes on their school restructuring
efforts and on the craft of teaching.

Although our discussion is directed primarily at educators, many of the
issues raised are relevant to a broader audience: legislators, human service
professionals, social workers, and all persons who advocate for children.

We recognize that there is ample room for controversy relative to many of
the issues raised in this document. On some issues, it is even difficult to determine
and agree on factual information; for example, discrepancies exist in the reports
on the actual numbers of homeless or abused children. Despite these
discrepancies, a consensus exists that a substantial number of our children are in
jeopardy. It is far more difficult to get agreement over the solutions to the myriad
of problems involving children at risk.

Areas such as the role of the federal government in providing leadership
and resources continues to be a focus of controversy. Some policymakers believe
that an active role by the federal government will lead to fragmented programs
and an erosion of family responsibility. Others believe that an active role by the
federal government is our only hope of reversing many of the alarming trends
involving our nation's children.
Many of the issues which are addressed in this document are emotionally laden and involve political agendas. Nevertheless, we have attempted to provide the information necessary to move toward constructive solutions to the substantial problems facing our nation's children. The challenges of the future will test both our perspicacity and our compassion. Our position is well stated by The U. S. House of Representatives, Select Committee on Children, Youth, and Families (1989):

As children decline as a proportion of the American population, their lives become more precious, and our responsibility to them even greater. The test now is whether we are motivated to promote policies that we know can reverse these alarming trends in the 1990s, or whether we will enter the 21st century besieged by the worst effects of our failure (p. xiii).
II. CURRENT STATUS OF CHILDREN IN AMERICA

The newspaper headlines chronicle the experiences of our troubled youth:

"Poverty, Disease, Poor Education Imperil Nation's Youth"

"Generations of Crack Kids About To Plague Schools"

"America's Children: An Imperiled Generation"

It has become a common experience in recent years to read gloomy appraisals of the condition of children and youth in the United States. Infant mortality is reported to be among the highest of all western countries. Shocking stories about the rapid increase in the number of crack and other drug-exposed infants have become all too commonplace on nightly six and eleven o'clock television news segments. Teenagers, in particular, have been well represented in many of these stories: reported increases in violent crimes, the rise in teenage pregnancy and sexually transmitted diseases among this age group; teenage runaways; and shocking numbers of homeless teenagers.

In a dramatic effort to call attention to the "current status" of children in the United States, the Children's Defense Fund highlighted the following information in its recent publication, Children 1990: A Report Card, Briefing Book, and Action Primer (Figure 1).

We hear and read daily accounts about increasing numbers of "throwaway kids", "abused children", and "latchkey children". Blue ribbon panels are established and national conferences are held which focus on the "dismal status of children in the United States." Recently the National Commission on Children released a preliminary report which provides an extremely pessimistic portrayal of the status of children in contemporary American society. The writers of this
### One Day in the Lives of American Children

<table>
<thead>
<tr>
<th>Event</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>17,051 women get pregnant</td>
<td></td>
</tr>
<tr>
<td>2,795 of them are teenagers</td>
<td></td>
</tr>
<tr>
<td>1,106 teenagers have abortions</td>
<td></td>
</tr>
<tr>
<td>372 teenagers miscarry</td>
<td></td>
</tr>
<tr>
<td>1,295 teenagers give birth</td>
<td></td>
</tr>
<tr>
<td>689 babies are born to women who have had inadequate prenatal care</td>
<td></td>
</tr>
<tr>
<td>719 babies are born at low birthweight (less than 5 pounds, 8 ounces)</td>
<td></td>
</tr>
<tr>
<td>129 babies are born at very low birthweight (less than 3 pounds, 5 ounces)</td>
<td></td>
</tr>
<tr>
<td>67 babies die before one month of life</td>
<td></td>
</tr>
<tr>
<td>105 babies die before their first birthday</td>
<td></td>
</tr>
<tr>
<td>27 children die from poverty</td>
<td></td>
</tr>
<tr>
<td>10 children die from guns</td>
<td></td>
</tr>
<tr>
<td>30 children are wounded by guns</td>
<td></td>
</tr>
<tr>
<td>6 teenagers commit suicide</td>
<td></td>
</tr>
<tr>
<td>135,000 children bring a gun to school</td>
<td></td>
</tr>
<tr>
<td>7,742 teens become sexually active</td>
<td></td>
</tr>
<tr>
<td>623 teenagers get syphilis or gonorrhea</td>
<td></td>
</tr>
<tr>
<td>211 children are arrested for drug abuse</td>
<td></td>
</tr>
<tr>
<td>437 children are arrested for drinking or drunken driving</td>
<td></td>
</tr>
<tr>
<td>1,512 teenagers drop out of school</td>
<td></td>
</tr>
<tr>
<td>1,849 children are abused or neglected</td>
<td></td>
</tr>
<tr>
<td>3,288 children run away from home</td>
<td></td>
</tr>
<tr>
<td>1,629 children are in adult jails</td>
<td></td>
</tr>
<tr>
<td>2,556 children are born out of wedlock</td>
<td></td>
</tr>
<tr>
<td>2,989 see their parents divorced</td>
<td></td>
</tr>
</tbody>
</table>

**Figure 1.** Source: *Children 1990: A Report Card, Briefing Book, and Action Primer,* Children's Defense Fund, 1990, p.4.
document refer to the present status of children in this country as a "staggering national tragedy." They warn that unless the needs of children are given a higher priority by policymakers, as well as by the general public, not only is the future of our nation's children bleak but also the future of our country will be jeopardized.

1.5 million teenagers become pregnant each year in the United States. Children born into these circumstances are likely to be economically and developmentally disadvantaged. Among women who had their first child between 15 and 19 years of age, over half had incomes below 150% the poverty level (Children's Defense Fund, 1989). Thus both adolescent mothers and their children will most likely live in poverty and experience the detrimental psychosocial and physical effects of inadequate education and health care, repeated pregnancies, unemployment, and high social stress (Children's Defense Fund, 1989; Hughes, Johnson, Rosenbaum, Butler, & Simons, 1988).

Through July of 1989, there were 1,660 cases of pediatric AIDS reported in the United States (Centers for Disease Control, 1989). Children with HIV are now living longer. Diamond and Cohen (1987) observed that "based on current projections, HIV infection may, in the next five years, become the largest infectious cause of mental retardation and brain damage in children. We can anticipate that AIDS will be the fifth leading cause of death among children in the United States (Baumeister, Kupstas, & Klindworth, 1990).

It is conservatively estimated that the drop-out rate for students in America's schools is 25%. Even though the dropout rate is higher for minority youth, poor children are three times more likely to drop out of school each year than are their more affluent peers, and poor white children are just as likely to drop out as are poor black children (30.2% and 33% respectively). Thus, race per se is not the critical factor. Rather poverty and social disadvantage are the primary influences that society must address if we are ever to stop this tragic waste of human potential (Baumeister, Kupstas, & Klindworth, 1990).

Are our nation's children really as badly off as many of these reports are suggesting? Are most of these recent reports exaggerated and possibly even largely politically motivated? Don't many of these "shocking news releases and commission reports" bear a strikingly familiar message which has been heard before -- during the War on Poverty and the Great Society eras of the 1960s and 1970s?
Hysterical reactions? "Where are the solid data?" some ask. Admittedly, sorting through what might even be rightfully called "hysteria" in some cases and arriving at a baseline of reliable information is extremely difficult. For example, we do not know how many drug-exposed children are born each year. The National Association on Perinatal Addiction Research and Education estimates the number to be 375,000. This number is cited most frequently because it represents one of the few, if not the only, national estimate currently available that is actually based on research (English & Henry, 1990). However, as English and Henry point out, "There are at least two problems with this figure [375,000]. First, it does not include alcohol abuse, and second, the survey was based on responses from 36 hospitals representing 5% of all live births in 1987 that were not representative of the nation as a whole because they were disproportionately located in large cities.

One analyst (Besharov, 1989) has suggested that, at least with regard to crack, a figure of 30,000 to 50,000 babies, or 1-2% of all live births per year, would be more accurate. These figures also, however, are based on estimates rather than on hard data (English & Henry, pp. 1-2).

In a similar vein, it certainly is true that hard data do not exist relative to the actual numbers of children who are homeless in America on any given night. Is the usually cited 100,000 simply a convenient number? How many of America's children are really poor? According to most recent reports, it is estimated that of the poor in America, 40% are children. Presently, 23% of all young children, birth to age five, are considered poor, with the percentage of poverty among this age group rising (Hodgkinson, 1989; Natricello, McDill, & Pallas, 1990). Yet, other reports which employ different criteria to determine "poverty level" may yield lower percentages. Again, we must rely on estimates.
It has been well documented that living in a single-parent household is one of the most significant indicators for placing children at risk for educational and broader social and economic failure (Elwood, 1988; Milne, Myers, Rosenthal, & Ginsberg, 1986; Pallas, Natriello, & McDill, 1989). In 1955, 60% of all U.S. households consisted of a working father, a housewife mother, and two or more school-age children. In 1985, only 7% fit this pattern. In addition, with over one-half of all today's new marriages slated to end in divorce, we have 15.3 million children living with one parent, the mother in over 90 percent of the cases. Also, 23% of all children born today are born outside of marriage. Of the children living with one parent: 50% of white children are with a mother who divorced; 54% of black children are with a never-married mother; and 33% of Hispanic children's mothers have not married (Hoogkinson, 1989).

Children living in single-parent families have been found to score lower on standardized tests and receive lower grades in school, and to be more likely to drop out of high school (Natriello, McDill & Pallas, 1990).

Educationally disadvantaged students are once again receiving a great deal of attention in the national literature. Policymakers, researchers, and practitioners have targeted this group of children as a priority. Although the estimates of the actual numbers of educationally disadvantaged may vary considerably, there is nevertheless the feeling of urgency surrounding this topic. After a decade of neglect, policies and programs involving at-risk children and youth are receiving considerable attention.

Schooling and Educationally Disadvantaged Populations

A major purpose of this document is to examine some of the major current and emerging conditions and trends dealing with the status of children in the United States. In particular, the document will focus on indicators and issues
involving educational disadvantage. The problems of disadvantaged students are the result of long-term conditions that are not susceptible to short-term solutions and we recognize that schools were, and are, not the only causes of educational disadvantage. Likewise, public schools in America are not going to be able to solve the problems of educational disadvantage alone. The problems and conditions cut very deep and require broad thinking and action from many agencies and groups within our society.

As educators, the authors will primarily focus upon policies, trends, and conditions that affect children as students. However, in agreement with the emerging body of research which argues strongly that "educational disadvantage" usually is a product of broader-based social, economic, and racial/ethnic disadvantage (Natriello, McDill, & Pallas, 1990; Schorr, 1989), our approach, perspective and subsequent recommendations are broad-based and extend well beyond more traditional educational issues and concerns.
III. THE POPULATION OF EDUCationally DISADVANTAGED YOUTH

Gathering information on children at risk constitutes a formidable task. Confusion and difficulties begin with attempts to define who is at risk. Levin (1988a) stated that the definition of at risk "is so vague that it could easily encompass gifted and talented children, the physically or mentally handicapped, the obese, the shy, and so on" (p. 1).

Definitions

Definitions in the Professional Literature

Who are today's students at risk? Couldn't every child be considered, at least to some extent, to be at risk? Catterall and Cota-Robles (1988) described three different, and common, conceptions of "at risk": (a) children from poor families; (b) children with different cultural backgrounds or minorities; and (c) children from limited English-speaking families.

Slavin, Karweit, and Madden (1989) stated, "the meaning of the term [at risk] is never very precise, and varies considerably in practice" (pp. 4-5). They further stated that at risk often refers to those students who are unlikely to graduate from high school, although it may also refer to (1) students who leave school with an inadequate level of basic skills; (2) students with a normal IQ, but who are not achieving the basic skills necessary for success in school or adult life; and (3) students who are eligible for compensatory or special education. The term at risk may refer to any or all of the above.

Slavin (1989), while acknowledging the extreme difficulty in providing a specific definition of the term at risk because of its extreme variance relative to
how it is used in practice, offered as one possible definition: "Students who are at risk are those who, on the basis of several risk factors, are unlikely to graduate from high school" (p. 5). Among these risk factors would be low achievement, retention in grade, behavior problems, poor attendance, low socioeconomic status, and attendance at schools with large numbers of poor students. He also cautioned against employing a too narrow or restrictive definition of at risk.

Commonly, at-risk students have been referred to as educationally disadvantaged in the professional literature. Levin (cited in NSBA Monograph, 1989, p. 6) defined educationally disadvantaged as "those who lack the home and community resources to benefit from traditional schooling practices. Because of poverty, cultural obstacles, or linguistic differences, these children tend to have low academic achievement and high dropout rates. Such students are heavily concentrated among minority groups, immigrants, non-English speaking families, and economically disadvantaged populations" (p. 6).

Often these educationally disadvantaged students are associated with our inner cities. Yet, this popular perception that at-risk children and youth are found almost exclusively in inner-city schools in poor neighborhoods is challenged in a recent report, An Equal Chance: Educating At-Risk Children to Succeed published by the National School Boards Association (NSBA) in 1989.

Findings contained in this report suggested that "as many as three-fifths of this population [at risk] may be dispersed throughout the country in rural and suburban areas" (p. 1).

Clearly, it is very difficult to develop a specific definition of students at risk -- or at least one which would gain widespread acceptance among all who might rightfully view themselves as having a special interest and investment in this population, including professionals from various disciplines, parents, advocates, policymakers, as well as students themselves. There certainly are some students
who may do quite well academically and even graduate with honors, but who are at high risk emotionally or socially.

In general, nevertheless, most authors characterize at-risk students as those who are likely to leave school without the necessary skills to succeed academically, socially, and/or vocationally in today's or tomorrow's society. They are those children and youth, who for whatever reason or combination of reasons, are not prepared to become self-reliant citizens. They are those students who have already dropped out of school as well as those in school who are likely to drop out instead of graduating. These at-risk students often are regarded as victims -- victims of forces and factors which serve to contribute adversely to the likelihood of their reaching their full potential as adults in today's and tomorrow's American society.

Clearly, a variety of conceptions of "at risk" presently exists. Nevertheless, however one defines at risk, the number of children considered at risk is likely to grow if recent demographic trends are any indication. The following information provides a summary of these developments that may well have an adverse effect on our nation's children:

Estimated Size* of the Population

Despite the broad and imprecise nature of the available indicators of the educationally disadvantaged population, it is clear that substantial numbers and troubling proportions of U. S. children may be classified as educationally disadvantaged. In terms of any single indicator between 10% and 25% of children between the ages 0 and 17 may be classified as disadvantaged. Because these indicators are not totally redundant, any single indicator underestimates the size of the educationally disadvantaged population.
A conservative estimate is that at least 40% of these children are at risk of failure in school on the basis of at least one of the five disadvantaging factors: poverty, racial/ethnic minority status, living in a single-parent family, having a poorly educated mother, and having limited-English proficiency (Natriello, McDill, & Pallas, 1990, pp. 30-31). Figure 2 shows the estimated proportion of the U.S. population under age 18 at risk of school failure for each disadvantaging indicator.

**Figure 2.** Source: *Schooling Disadvantaged Children: Racing Against Catastrophe.* G. Natriello, E. L. McDill, & A. M. Pallas, 1990, Teachers College Press.
IV. EDUCATIONAL INDICATORS

Concern over the educationally disadvantaged population increased during the 1980s with concerns of educational progress, and the widespread concern generated by *A Nation at Risk* in 1983 resulted in educational researchers and policymakers seeking to develop general indicators that could be used to assess the nation's educational progress. The search for developing such indicators was driven by several objectives -- the indicators had to reflect essential aspects of the educational system; they had to rely on reliable and valid measures of educational progress; and they had to provide information on current or potential educational problems that could be influenced by changes in educational policy (Odden, 1990).

"Wall Chart"

The first national initiative for such educational indicators was the now popular "wall chart" produced by the U.S. Department of Education. The wall chart compared the fifty state educational systems on key features such as high school graduation rates, average teacher salary, pupil/teacher ratios, pupil/total staff ratios, federal funds as a percent of school revenues, expenditures per pupil, and expenditures as a percentage of income per capita. It also included measures of achievement as reflected by average scores on the American College Testing (ACT) test and on the Scholastic Aptitude Test (SAT).

*National Assessment of Educational Progress (NAEP)*

The above measures, however, only involved a sampling of states and were restricted to samples of students. In an attempt to develop a more accurate
assessment of trends in the educational achievement of the nation's general school population, a nationwide testing program, the National Assessment of Educational Progress (NAEP), has become the benchmark of comparison. Although the NAEP was originally developed in 1969, it has recently received substantially more attention as many states have initiated statewide assessment programs and national policymakers have shown an increasing interest in state-by-state achievement comparisons. In fact, beginning in 1992, the NAEP will allow such a state-by-state comparison in math and reading (Rothman, 1990a; Rothman 1990b).

In 1985-1986, the NAEP reading assessment was given to a sample of nearly 36,000 students in grades 3, 7, and 11. Smaller samples (approximately 17,000) participated in the 1985-86 math and science portions of the test. The NAEP also contained a writing assessment which include approximately 79,000 students at ages 9, 13, and 17. In the same year, the NAEP also sampled approximately 59,000 students for the writing assessment in grades 4, 8 and 11. The 1985-86 literature and history assessment included approximately 8,000 eleventh graders (Snyder, 1989).

**Ethnic/Racial Minority Differences**

An examination of a cross section of NAEP results reveals substantial gaps between students of different ethnicity and/or socioeconomic status. For example, the reading proficiency score for 17 year olds in 1983-84 indicates a score of 294.6 for white students, a score of 263.5 for black students, and a score of 268.7 for Hispanic students. In terms of SES, 17 year old students from disadvantaged metropolitan areas scored 265.9 as opposed to 300.8 for students of the same age from *advantaged* metropolitan areas. In writing, using a different scaled score, whites in grade 11 scored 24.4 in contrast to blacks and Hispanics who both scored
Students at grade 11 from disadvantaged urban areas scored 201, while those from advantaged urban areas scored 228.

Similar results were found in 1985-86 mathematics -- with white 17 year old students scoring 308 in contrast to 279 by black students and 283 by Hispanic students. In history and literature, given to 11th graders in the spring of 1986, results show gaps of over 20 points between whites and blacks and Hispanics; the gap between urban advantaged and urban disadvantaged was over 30 points (Snyder, 1989).

An analysis of the NAEP reading results since 1971 indicates that the reading performance of most youth has remained relatively stable. Blacks, however, have made gains on their white counterparts; in 1971, the gap on the NAEP 500-point scale was 53 points, but by 1988, it was 20 points. Nevertheless, according to Archie E. LaPointe, the NAEP's executive director, the gap between whites and blacks still "is of serious concern" (Rothman, 1990c).

Blacks and Hispanics have shown gains in other areas, too, according to U.S. Education Secretary, Lauro F. Cavazos. Blacks gained 21 points, from 1978-1988, on the verbal portion of the SAT and 30 points on the math portion. American Indians, Asians, and Hispanics showed comparable gains (U.S. Department of Education News, 1989). During this same period, total student scores on the SAT declined by one point (Snyder, 1989). Nevertheless, in 1988, blacks' overall average score on the verbal SAT was 353, Mexican-Americans had an average score of 382, and Puerto Ricans average score was 355. The average score for white students was 445 on the verbal portion of the SAT. Similar gaps were evident on the math portion of the 1988 SAT (Snyder, 1989).

A more recent report, Condition of Education 1990, by the U.S. Department of Education, indicates that blacks and Hispanics have made progress in narrowing the achievement gap with whites. Yet, more blacks are below grade
level for their age. For example, most 13 year old students are in the eighth grade, but 44% of 13 year-old male Blacks and 35% of female blacks were one or more years below grade level in 1985. For whites, only 29% of males and 21% of females were below grade level. These results indicate that blacks may be retained more often than whites and suggest that the use of readiness tests for kindergarten may result in a disproportionate number of blacks starting school at a later age (Kelly, 1990).

The Dropout Problem

Concern over the educationally disadvantaged also increased with awareness of the "dropout problem." Now, hardly a day goes by without a concern expressed about public school dropouts. The media is rife with such reports and increasing the graduation rate (and hence decreasing the dropout rate) was one of the national education goals developed at President Bush's Educational Summit in Charlottesville, Virginia.

Difficulty in Determining Precise Rates

In an attempt to determine the extent of the problem, a number of agencies have computed dropout rates, but these rates are often computed in different ways and their accuracy is suspect (Hahn, Danzberger, & Lefkowitz, 1987; Hammack, 1986; Morrow, 1986). Nevertheless, the graduation rate appears to have changed substantially over the past 100 years. Based on statistics from the U.S. Department of Education, the percent of the 17 year old population that had graduated from high school in 1890 was 3.5%. In 1920, it was 16.8%, and in 1940 it was 50.8%. By 1960, it had rose to 69.5%, and by 1970, the graduation rate was reported at 76.9%. According to the same source, the graduation rate had decreased slightly by 1989
to 74%. (The U.S. Department of Education Wall Chart lists the nationwide graduation rate at 71.1% in 1987.)

**Disadvantaged Populations**

Several studies have noted the differential dropout rate for ethnic and low socioeconomic status groups. Peng (1983) used the High School and Beyond (HSB) data base to calculate dropout rates and found that Hispanic and black students dropped out at 5 to 6 percent higher rates. Similarly, students from lower SES families were at much greater risk for dropping out. Only 5.2% of students classified as high SES dropped out as compared with a rate of 17.4% for students of low SES.

Barro and Kolstad (1987) compared the HSB rates with other estimates and found the HSB rates consistent with other longitudinal data bases when adjusted for students who dropped out before the sophomore year. These authors found, as did Peng, a 13.6% overall dropout rate, but blacks and Hispanics dropped out at a rate of 4 to 6 percent more than whites. Barro and Kolstad also found that "dropout rates of students in the lowest SES quartile are three times greater, on the average, than rates of students in the highest quartile" (p. 28).

Barro and Kolstad also noted, however, that "in the lowest occupational, educational, and composite SES strata, dropout rates for blacks are similar to, and in some cases lower, than the corresponding rates for whites... it is clear that interracial differences play major roles in determining gross differentials in dropout rates by race/ethnicity" (p. 29). Rumberger (1983) came to a similar conclusion in his analysis of race, sex, and family background variables on dropping out behavior.

Figure 3 shows the percent of High School dropouts by gender and race.
Figure 3. Source: *High School Dropouts: Descriptive Information from High School and Beyond*, S.S. Peng, 1983, National Center for Education Statistics, U.S. Department of Education.
V. MAJOR INDICATORS OF EDUCATIONAL DISADVANTAGE

Natriello, McDill, and Pallas (1990) suggested that there are five key indicators associated with educationally disadvantaged children and youth: (1) living in a poverty household; (2) minority/racial group identity; (3) living in a single-parent family; (4) having a poorly educated mother; and (5) having a non-English language background. All of these indicators are correlated with poor performance in school, although not always for commonly understood or agreed upon reasons.

As suggested by Natriello, McDill, and Pallas (1990), these indicators are not independent, and children classified as educationally disadvantaged on the basis of several indicators are at the greatest risk of educational failure. Further, these indicators are not totally redundant, so that any single indicator tends to underestimate the size of the educationally disadvantaged population.

Natriello, McDill, and Pallas (1990) view educational experiences as coming not only from formal schooling, but also from the family and the community. Thus, students who are educationally disadvantaged have been exposed to inappropriate educational experiences in at least one of these three institutional domains. These authors view schools as only one of several educating institutions that simultaneously affect a student's growth and argue, therefore, that remediation efforts cannot be confined solely to schools.

Clearly, not all poor children are educationally disadvantaged. Nor are all minority children, nor children living in single-parent households. Almost daily we have reports of children who come from the poorest of neighborhoods who have achieved remarkably well. Indeed, many individual children, despite what
appear to be unsurmountable odds, not only survive but excel academically and socially. Many youth are resilient and demonstrate superb coping strategies -- and they truly overcame major obstacles to achieve success. Nevertheless, each of the five key indicators cited above clearly is associated with low levels of educational achievement.

**Poverty**

*Children Are Most Vulnerable*

Children represent the largest and fastest growing group of poor in the United States. It is estimated that there are more than 12.6 million poor children presently living in this country -- nearly 20% of all children under the age of 18 (Children's Defense Fund, 1990b; Reed & Sautter, 1990). Forty percent of the poor in the United States are children (Hodgkinson, 1989; Reed & Sautter, 1990).

In raw numbers more Americans are poor today than before the War on Poverty was initiated in 1964 despite the fact that the official U.S. poverty rate for all citizens in 1989 edged slightly downward to 13.1%. Nearly 40 million people of all ages live in families below the official poverty line ($7,704 for a family of two; $9,435 for a family of three; and $12,092 for a family of four). Again, 40% of this population are children (Hodgkinson, 1989; Reed & Sautter, 1990).

*The Younger the Child, The Greater the Risk*

The younger a child is today in this country, the greater are his or her chances of being poor. Of all children age three and under, 23% are poor; nearly 22% of three to five-year olds are poor; and more than 20% of six to eleven-year old children are poor -- representing more than four million
children. Of all U.S. children between the ages 12 and 17, 16% are considered poor (Reed & Sautter, 1990; U.S. Census Bureau, 1989).

Children under six years of age are more likely to be living in poverty because their parents tend to be relatively young, have low earnings, and are faced with child-care responsibilities that make it difficult for the mother to work full-time outside the home. Further, a child who begins life in poverty is at risk of being poor throughout childhood, which is not the case for a youngster whose family becomes poor later on (Zill, Krysan, Stief, & Peterson, 1989).

Very young children who live in poverty households are especially vulnerable and face threats to their health, safety, and psychological development that can have long-term effects on their chances of becoming healthy, productive adults.

As suggested by Zill, Krysan, Stief, and Peterson (1989):

A deficient diet during the first few years can impede physical growth and brain development. Toddlers who live in run-down housing or receive insufficient supervision as they begin to walk, climb, and get into things are at risk of death, disfigurement, or handicap from falls, burns, poisonings, and other injuries. Because early childhood is a difficult time for parents in even the best of circumstances, poor young children are in danger of physical abuse; more so than older children or nonpoor children of the same age.

Inadequate medical care can result in a young child not being immunized against communicable diseases, or not getting glasses when he or she needs them, or receiving delayed treatment for ear infections or other conditions that can lead to permanent impairments. Preschoolers who are not read to or played with in intellectually stimulating ways fall behind their peers in cognitive development and arrive at school in need of compensatory instruction. Furthermore, young children who experience the family turmoil and disruption that often accompanies or causes early poverty are in jeopardy of long-lasting disturbances to their social and emotional development (Zill et al., 1989, p. 7).

Factors and Conditions Contributing to Poverty Among Young Children

Why is it that the youngest of our nation's children (under age 6) are so likely to be poor? Demographic trends certainly are a factor. For example, birth
rates are higher among groups that are disproportionately poor such as blacks, Hispanics, and high-school dropouts. Because so many of these children live in single-parent households, their family's overall level of income generally is lower.

Furthermore, as suggested by Zill et al. (1989), "Welfare benefits for families with children have been eroded by recent cutbacks and inflation far more than have programs that benefit older Americans -- in 1987, the average monthly benefit per family under the Aid to Families with Dependent Children (AFDC) program was $360. AFDC benefit levels declined by an average of 35 percent between 1970 and 1988, when calculated in constant dollars (after adjustment for inflation)" (p. 9).

Children living in families who are headed by a young person, especially by a woman, are more likely to live in poverty. The likelihood increases even more should the female head-of-household be black or Hispanic.

Zill, Krysan, Stief, and Peterson in their 1989 report, Young Children in Poverty in the United States: A Statistical Profile, prepared for the National Center for Children in Poverty, acknowledged the considerable diversity which exists in our nation's population of young children in poverty. For example, representatives from all major racial and ethnic groups are included; likewise are children from both single and two-parent families. Yet, despite this diversity among our nation's poor children under the age of six, Zill and his colleagues found that there are certain demographic groups that are clearly overrepresented (pp. 10-13).

*** Over Half Live With Their Mothers Only
By contrast, among all children under 6, about one-fifth live in mother-only families.
A Majority Are Children of Ethnic Minorities
30 percent are black; 20 percent are Hispanic; 4 percent are from other minorities, predominantly Asian and American Indian.

Nearly Half Are Children Of High-School Dropouts
47% have mothers who did not complete high school; approximately 20% of all children under 6 have mothers who did not finish high school.

Almost Half Are Children Of Teenaged Mothers
About 47% have mothers who began having children when they were teenagers. By contrast, less than 25% of all young children have mothers who began their childbearing as teenagers.

Six In Ten Have One Or Both Parents Working
Nearly 3 in 10 are in traditional two-parent families where the father works and the mother is a homemaker; just over 2 in 10 are in single-parent families in which the lone parent is in the labor force; about 1 in 10 is in a two-parent family where both parents work.

Two-Thirds Have Mothers With No Recent Work Experience
Although a majority of poor children have either a father or mother who works, nearly two-thirds of young children in poverty have mothers with no recent experience in the paid labor force. More than a third live in mother-only families in which the mother has not worked at all in the past year.

Few Have College Graduate Parents Or Mothers Who Work Year Round
Less than 4 percent of young children in poverty have a parent in the household who is a college graduate. By contrast, one-quarter of all children under 6 have at least one college-graduate parent. Only 4 percent of these children have a mother who works full-time, year round, compared to one-fifth of all young children. Finally, less than 7 percent of poor young children are in a two-parent family in which both parents are currently working. In contrast, more than a third of all young children are in such families.

Less Than A Quarter Are In Families With Four Or More Children
The mean number of children in families below the poverty level with children under 18 fell from 3.03 in 1970 to 2.22 in 1986. The comparable numbers for all families with children were 2.33 in 1970 and 1.83 in 1986. Less than a quarter of young poor children live in families with four or more children. For all children under 6, 13 percent are in families with four or more children.

Among other findings documented by Zill and his colleagues in their study of our nation's poor children under age six are the following:
More than 2.7 million live in families that are near-poor (their families have an income that is between the poverty line and 1.5 times the poverty line). Thirteen percent of all children under 6 are near-poor; the near-poor and the poor together comprise 36 percent of the population of young children in this country.

In 1986, about 60 percent of young children in poverty received cash assistance through the AFDC program.

Enrollments of 3- and 4-year-olds in early education programs have been consistently lower for children from low-income families than for those who are not poor. In 1977, 33% of 3- and 4-year-olds from non-poor families were enrolled, and 26 percent of poor 3- and 4-year-olds were enrolled. In 1986, 42 percent of those from non-poor families attended school, while only 27 percent of those from poor families did. However, poor and non-poor 5-year-olds are equally likely to be enrolled in early education programs. In 1986, 87% of the non-poor and 86% of the poor 5-year-olds were enrolled.

Among school-aged children, the proportion of poor children with chronic health limitations is nearly twice that of non-poor children, suggesting that a substantial minority of young poor children have undiagnosed conditions that are only discovered when they reach school.

Almost one-third of poor young children live in families that are not eligible for Medicaid coverage, do not get health insurance coverage through their employers, and cannot afford to purchase it on their own. As of 1986, 30 percent of poor children under 6 lived in families with no health insurance for the child. The comparable proportion for all children under 6 was 20 percent; for those with incomes of twice the poverty level or higher, 10 percent.

(Zili, Krysan, Stief, & Peterson, 1989).

Almost 50% of all U.S. children living in a family headed by a person 25 years of age or younger are poor. One-third of all children living in a family headed by a person 30 years of age or younger are poor. The poverty rate for children living in a family headed by a person 30 years of age or younger rose from 19% to 36% between 1967 and 1987 (Reed & Sautter, 1990; U.S. Bureau of the Census, 1989).
The chances of a child being poor who lives in a family headed by a woman exceed 50%. The average income for female-headed households with children is $11,299 as compared with $36,206 for married couples with children (Hodgkinson, 1989). More than 56% of families headed by a single-black woman are poor; the poverty rate for Hispanic female heads of household is an even larger 59% (Reed & Sautter, 1990). However, it should be pointed out that living in a single-parent family household does not necessarily cause poverty as approximately one-half of our country's poor children currently live with both parents.

A major factor which contributes to the poor economic status of many young families in today's society is the disproportionate amount of income which must be used for housing. Single parents today pay 58% of their income for rent. In 1988, young single parents who have children living with them paid 81% of their total income for rent. In addition, recent data suggest that 45% of all poverty families pay more than 70% of their annual incomes in rent. (Hodgkinson, 1989).

Where Do Poor Children Live?

Contrary to popular belief, poverty is not restricted to inner cities. Fewer than 9% of America's poor live in our nation's core cities. Clearly, the poverty rate is highest in central cities. However, the largest number of poor people live in rural areas, small towns, and small metropolitan areas. Almost one in three urban children and one in four rural children live in families whose incomes are below the poverty level.

Rural poor children frequently escape widespread public attention because they are more isolated and geographically much more disperse. Also, according to the findings of the recently published National Commission on Children Interim
Report (March 31, 1990), these children often go relatively unnoticed because they "live in families in which at least one parent works and are less likely to rely on public assistance" (p. 21).

Although rural poverty is not limited to any one racial or ethnic group, it is "extensive and persistent in minority communities, especially among southern blacks, Native Americans, and the families of black and Hispanic migrant workers nationwide" (National Commission on Children, 1990, p. 21).

The overall poverty rate for children in 1983 was about 22%. The rate in central cities of metropolitan areas was 31%. The rate for children in nonmetropolitan (mainly rural) areas was 24%, while the poverty rate for children in noncentral (mainly suburban) portions of metropolitan areas was only 13% (Natriello, McDill, & Pallas, 1990). Thus, while we often tend to think of poverty as only an inner city problem, it is important to recognize that "poverty rates in some rural areas have reached 50% or higher, and that 28% of today's poor live in suburbia" (Reed & Sautter, 1990).

Poverty rates do not vary substantially across regions of the country. The highest regional poverty rate for children is in the South -- 24.3%; the lowest is found in the Northeast and Mid-Atlantic regions -- 20.2% (Natriello, McDill, & Pallas, 1990; U.S. House of Representatives Select Committee Report, 1985).

**Poverty and Ethnic/Racial Minority Status**

Another popular contemporary misconception is that the vast majority of poor children in the U.S. today are members of racial or ethnic minority groups. Poverty is not directly related to race or ethnicity. Two-thirds of poor Americans are white. It is estimated that one out of every seven white children living in America today is poor (Children's Defense Fund, 1989; Children's Defense Fund, 1990a; Reed & Sautter, 1990).
Minority children are more likely to live in a single-parent family than are white children -- another major indicator associated with educational disadvantage. For example, in 1988 approximately three-fifths of black children, and just over one-third of Hispanic children were living in single-parent or neither-parent families. On the other hand, less than one-fifth of white children under 18 years of age were living in single-parent families during the same year (U.S. Bureau of the Census, 1989).

Undeniably, black and Hispanic children are much more likely to be living in poverty than are white children. In 1987, for example, the poverty rate for white children in the U.S. was 12%; for black children, the rate was 46%; and for Hispanic children, the poverty rate was about 40%. Although blacks and Hispanics comprised approximately one-quarter of the under-18 population in 1987, they represented about one-half of the children living in poverty (Natriello, McDill, & Pallas, 1990; U.S. Bureau of the Census, 1988).

**The Income Gap in U.S. Is Widening**

The income gap between the rich and the poor in the United States is widening at an unprecedented rate. In 1988, the poorest 20% of families received less than 5% of the national income, while the wealthiest 20% received 44%, the largest share ever recorded (Hodgkinson, 1989; Reed & Sautter, 1990). Using Congressional Budget Office data on income and taxes, a recent study conducted by the Center on Budget and Policy Priorities, a liberal research group, indicated that the bottom 40 percent of Americans will receive 14.2 percent of total after-tax income received by all groups in 1990, while the top 1 percent will receive 12.6 percent. Results of this study suggest that the "richest 2.5 million people have nearly as much total income as the 100 million Americans with the lowest incomes".
As shown in Figure 4, the number of U.S. children living in poverty is expected to steadily increase in the next three decades.

**Projected Number of U.S. Children in Poverty, 1987-2020 (in millions)**

![Projected Number of U.S. Children in Poverty, 1987-2020 (in millions)](image)


**The Working Poor**

Another popular misconception about the poor which has been dispelled by recent statistics is that "the poor don't work." The poor often are regarded as little more than "drains on our economy" or even worse, as "welfare cheats." Yet, according to recent U.S. Bureau of the Census data, nearly one-half of the heads of all poor households are employed although usually at low-level jobs. Full-time work at the minimum wage by the head of a family of three leaves that family $2,500 below the poverty line (Reed & Sautter, 1990). What frequently is ignored is that most new jobs being created today are very low-skilled service jobs, with low pay and few, if any, benefits.
The ranks of the working poor in America have dramatically increased in recent years. In 1987, the number of poor people who worked full-time full year was 42.9 percent higher than in 1978, despite the fact that the overall poverty rate declined during this period. Altogether, 562,000 more people in 1987 than in 1978 worked full-time, year round, yet lived in poverty (Shapiro & Greenstein, 1989).

*The Relationship of Economic Status to Educational Achievement*

Children living in families with incomes below the poverty line are nearly twice as likely to be retained a grade as are children in nonpoverty families (Bianchi, 1984). Also, according to some recent studies, children from the lowest-income families are twice as likely to drop out of school (Stedman, Salganik, & Celebuski, 1988).

Interestingly, mandatory student retention policies which have been in effect in many of our nation's schools during the past decade, currently are being widely criticized relative to their efficacy (Olson, 1990). Critics of student-retention policies cite recent research which indicates that not only doesn't retention help students academically, but it may have an adverse effect upon them emotionally -- and actually increase rather than decrease their likelihood of dropping out of school. Most retention policies have been tied to student performance on standardized achievement tests. In this regard, several high-ranking state school officials presently are calling for other methods than retention for assisting low-achieving students, many from poverty families.
Race/Ethnicity

Of all of the factors associated with educational disadvantage, racial/ethnic minority status probably is the most commonly cited. In particular, black and Hispanic children and youth traditionally have performed poorer than white children on various standardized academic achievement tests.

Performance on Standardized Tests

The reading, writing, and mathematics skills of black and Hispanic children are substantially below those of white children at ages 9, 13, and 17 as measured by the National Assessment of Educational Progress (NAEP) (Applebee, Langer, & Mullis, 1988; Dossey, Mullis, Lindquist, & Chambers, 1988). In 1986, the average 17-year old black student was performing only slightly better than the average 13-year old white youth on standardized reading and math tests, while Hispanic 17-year-old youth, although scoring slightly higher than black youth of the same age in mathematics, scored about the same in reading (Applebee, Langer, & Mullis, 1988).

Figure 5 shows the average reading proficiency for whites, blacks, and Hispanics on the 1988 NAEP. Figure 6 shows the average writing achievement for whites, blacks, and Hispanics on the 1988 NAEP.
There is evidence, however, that the academic performance of black students is improving. For example, 1988 NAEP test results show that black students at all ages demonstrated steady, significant growth in mathematics between 1982 and 1986. Yet, their scores continued to be substantially below those...
of white children. Also, between 1984 and 1989, blacks' Scholastic Aptitude Tests (SAT) scores rose by 22 points (737 out of a possible 1,600), while overall scores rose by only 6 points on this test (903 out of a possible 1,600) (Rothman, 1990c).

Although there exist some recent data which suggest that the academic performance gap between ethnic/racial minority youth and white youth may be narrowing, there continues to be a significant discrepancy between these groups. Further, this gap between white and non-white youth may actually be much larger than it appears. National achievement test results include only those children and youth who are enrolled in school. Because black and Hispanic children are far more likely to drop out of school than are white children in the United States, the educational achievement gap between these two groups may be underestimated (Natriello, Pallas, & McDill, 1990).

Data from the October 1986 Current Population Survey (Bruno, 1988) indicated that 17.3% of black respondents and 38.2% of Hispanic respondents aged 22 to 24 neither were enrolled in school nor were high school graduates, as compared with only 13.9% of white respondents within the same age group (cited in Natriello, Pallas, & McDill, 1990, p. 18). In some inner cities the dropout rate for black and Hispanic youth exceeds 60 percent (Aspira, 1983).

**Heterogeneous Nature of Hispanic Subgroups**

As pointed out by Natriello, Pallas, and McDill (1990), considerable diversity exists among Hispanics currently living in the United States. There are substantial social and economic differences among Hispanic subgroups. For example, in 1987, 38% of families of Puerto Rican origin were living below the poverty line, compared to 26% of families of Mexican and other Hispanic origin, 19% of families of Central and South American origin, and 14% of Cuban-origin families. Families of Puerto Rican origin were nearly three times as likely to be
living in poverty in 1987 than Cuban-origin families, and twice as likely as families of Central and South American origin (U.S. Bureau of the Census, 1988; Natriello, Pallas, & McDill, 1990, p. 20).

Therefore, one must be careful not to over-generalize when drawing relationships between likely educational disadvantage and Hispanic populations. They, indeed, are a very heterogeneous group. Based upon available data, however, one could infer that children from families of Puerto Rican origin, because of their reported economic levels, are presently at much higher risk for educational disadvantage than are other Hispanic-origin children.

**Overrepresentation in Special Education**

Black and Hispanic children and youth are also far more likely to be placed in special education programs than are white children and youth in the United States. The overrepresentation of minority children who are identified as handicapped and subsequently placed in special education programs has been widely criticized in the literature (MacMillan, Hendrick, & Watkins, 1988; MacMillan, 1989; National Coalition of Advocates for Students, 1989; Reschly, 1981, 1985, 1988).

Despite these long-term, consistent charges that many of the instruments which are used to identify minority children as handicapped are racially/ethnically biased, minority children continue to be substantially overrepresented in our nation's special education programs. Data collected by the National Coalition of Advocates for Students provide solid support that black children and youth, in particular, are overrepresented in this area.

In its 1988 report which analyzed the U.S. Department of Education's Office of Civil Rights data collected on 3,378 sample school districts throughout the
United States during the 1986-1987 school year, The National Coalition of Advocates for Students cited the following:

Although black students constituted only 16% of all public school students, 35% of all students classified as educable mentally retarded were black; 27% of all students classified as trainable mentally retarded and as seriously emotionally disturbed were black; only 8% of our school's gifted and talented students were black. Also, 30% of all students who were expelled were black, and finally -- despite representing only 16% of the overall public school enrollment during this period, 31% of all students who were documented as having received corporal punishment were black children (The National Coalition of Advocates for Students, 1988a).

Clearly, not all children from racial/ethnic minority families are educationally disadvantaged. However, being a member of a racial/minority family certainly increases the likelihood of educational disadvantage. Minority racial/ethnic group identity is not independent from the other major indicators of educational disadvantage. For example, black and Hispanic children are more likely to be living poverty-level households; they are more likely to be living in single-parent families; they are more likely to be living in families with poorly educated parents, especially mothers; and Hispanic children are more likely to be less proficient in English. Each of these indicators has been shown to be related.

Therefore, it is not simply being a member of a racial/ethnic minority group which tends to place these children at higher risk of educational failure. Because they are also more likely to suffer from other conditions and factors which have been demonstrated to correlate with being educationally disadvantaged, the risk factor is substantially higher for racial/ethnic minority children.
Living In Single-Parent Families

Changing Family Demographics in U. S.

Family structure in America today is vastly different from what it was in the 1950s and 1960s. As stated by Hodgkinson (1989), "Today the 'Leave It To Beaver' household seems very atypical. The American family is now one person smaller than in 1950. Although most of us are married, over one-third of all marriages performed in 1988 were second marriages for at least one partner. Divorce is more common. It is estimated that over one-half of all of today's new marriages will end in divorce. Twenty-three percent of all children born today are born outside of marriage" (Hodgkinson, 1989).

In 1986, some 23 million children -- more than one-third of all U.S. children under age 18 -- were living in some arrangement other than a two-parent family in which both biological parents were present. More than 13 million were living with their mothers only, 76% more than in 1970. Nearly 1.6 million were living with their fathers only, double the number in 1970. And approximately 5.5 million were living with one biological parent and one step-parent (Zill & Rogers, 1989, p. 37).

Minority children are much more likely to live in a single-parent family than are white children. According to U.S. Bureau of the Census data, in 1988 approximately three-fifths of black children and just over one-third of Hispanic children under 18 years old were living in single-parent families (Natriello, McDill, & Pallas, 1990; U.S. Bureau of the Census, 1989).

Due to declining birthrates, the proportion of children to adults has decreased in recent years. Whereas in 1960, children under age 18 made up more than a third of the U.S. population, they currently represent just over a quarter of
our population. However, the number of young children has started to rise again, reflecting the increasing number of adults in their childbearing years, with the total number projected to be about 67 million by the year 2000. The proportion of children is expected to remain relatively constant, at about 25 percent (Zill & Rogers, 1988).

Although fertility rates (births per 1,000 women ages 15 to 44 years) have fallen since 1970 among virtually all age and race groups, and are expected to remain low in future years, the fertility rates for black and Hispanic women remain somewhat higher than nonminority rates. Also, the fertility rates among better educated women have declined more sharply than for less educated women. Thus, in the past several decades, growing numbers of U.S. children have come from the least well-off segments of society (Zill & Rogers, 1988).

In addition, in recent years large numbers of Hispanics and Caribbean blacks of childbearing ages have immigrated to the United States. Therefore, it is expected that the child population in the year 2000 will not only be larger, but it will also contain a larger proportion of minority youth. It is projected that black children will constitute 17 percent of the U.S. child population by the year 2000, now 15%; and Hispanic children will constitute 13 percent of this population as compared to the current 10 percent (Zill & Rogers, 1988; U.S. Bureau of the Census, 1984).

**Relationship of Family Structure to Well-Being**

Family structure is closely linked to poverty. Children living in single-parent households are far more likely to be impoverished than those children living in two-parent households. Among children who grew up in the 1970s, nearly three-quarters who spent at least some time in a
single-parent family lived in poverty at least part of the time. More than a third (37.8%) of these children spent at least 4 years of their first decade in poverty, and one in five (21.8%) lived in poverty for 7 or more of their first 10 years. Conversely, children living continuously in a two-parent, male-headed family have but a 20% chance of living in poverty at least one year in their first ten, and only a 2% chance of being poor continuously from birth to age 10 (Ellwood, 1988, cited in Natriello, McDill, & Pallas, 1990).

Increasingly, family structure appears to be the chief determinant of whether or not a child will grow up in poverty. Children in single-parent families are five times as likely to be poor as children born to married couples, especially those families headed by a single female parent (more than 50% are poor). Although many children in two-parent families also experience poverty, "marriage and the earnings of a male-head-of-household are often a buffer against sustained economic disadvantage" (National Commission on Children, 1990, p. 33).

Nevertheless, it must be recognized that parental employment does not always guarantee an escape from poverty. Among poor, two-parent families, 44% have a full-year, full-time worker. Another 25% have one or two adults who work at least part-time or part of the year. Almost 40% of poor single mothers work at least part-time or part-year.

In many respects, these working poor families face the harshest dilemma of all. Their incomes preclude or seriously diminish welfare payments, food stamps, and other means-tested forms of public assistance. To the extent that a family's Medicaid participation is pegged to eligibility to receive Aid to Families with Dependent Children, working poor families often have no health coverage, since many low-paying jobs do not include insurance
benefits. For single mothers and two-earner families with low incomes, child care expenses can consume more than a third of their annual incomes (National Commission on Children, 1990, p. 34).

Female Heads of Households

Where a female head-of-household parent lives in America determines to a significant extent how much public assistance she can or cannot expect to support her family. Monthly welfare benefits vary widely among states. For example, as of January 1989, monthly welfare benefits for a family of three headed by a mother who has no other income ranged from a low of $118 in Alabama to a high of $740 in Alaska. Mothers who fit this family configuration in the South and Southwest were particularly hurt by state variation in welfare benefits -- Mississippi - $120; Tennessee - $173; Texas - $184; Arkansas - $204; South Carolina - $206; and Kentucky - $218.

In contrast, monthly welfare benefits for a family of three headed by a mother who has no other income were substantially higher in other states, especially those in the Northeast, e.g., Vermont - $629; Massachusetts - $579; New York - $535; Connecticut - $534; Rhode Island - $517. Other states who provided monthly payments of $500 or more to mothers fitting this family configuration in January 1989 were the following: California - $633; Hawaii - $557; Minnesota - $532; and Wisconsin - $517 (Family Support Administration, Department of Health and Human Services, cited in Family Affairs, 2 (2-3), 1989, Institute for American Values, p. 7).

Family Structure and Educational Achievement Are Linked

Lower Student Performance. Children living in single-parent families tend to score lower on standardized tests (Natriello, McDill, & Pallas, 1990), receive
lower grades in school (Milne, Myers, Rosenthal, & Ginsburg, 1986), and are almost twice as likely to drop out of school than children from two-parent families (Steadman, Salganik, & Celebuski, 1988).

Living in a single-parent household, of course, does not always translate into educational disadvantage. However, it does represent a high risk factor for school failure. Single-parent households are more likely to be poorer. Most are headed by women who typically make lower wages. Further, racial/ethnic minorities are disproportionately represented in single-parent households. For many of these children, therefore, living in a single-parent household represents but just one of several interrelated factors which tend to place children at educational disadvantage.

An opposing viewpoint. David Blankenhorn, president of the Institute for American Values, a conservative private organization which focuses its efforts on policy issues affecting American families, takes major issue with those politicians and advocacy groups which have been claiming that present American family demographics are vastly different from those which existed during the 1950s:

What is today's most repeated statistic about the American family? Surely it is that fewer than ten percent of families today fit the old "Ozzie and Harriet" model of homemaker Mother and breadwinner Father -- yet this dramatic statistic suffers from one defect. It ain't true. In fact it is a false and pernicious claim -- mathematically false, since the numbers don't add up, and socially pernicious, since it seeks to help one type of family by belittling another. ...

Over one-third of all families with pre-school children are "Ozzie and Harriet": homemaker mothers married to breadwinner fathers. They comprise the nation's largest single category of families with young children. Among all mothers with pre-schoolers, well over half are either not employed, or employed only part-time. So despite the marked trend toward maternal employment and family diversity in recent decades, the under-ten percent claim simply does not reflect reality (Blankenhorn, 1989, p. 10).

Blankenhorn (1989) accused some national leaders of distorting Bureau of Labor and Bureau of the Census statistics to support their less than ten percent
claim, implying that these "distorted statistics" will help their legislative agenda, e.g., passage of child care proposals.

Blankenhorn (1989) arguing that "all American families deserve support, not just some" (p. 11) [presumably the poor] suggested that the ten percenters employ two basic techniques to distort their figures:

First, they boost the number of "working" families by merging full time and part time maternal employment into one category of "working." They do it despite basic differences between the two types of employment which relate directly to childbearing and family. Thus millions of mothers whose primary occupation is at-home childrearing, but who hold a job for only a few hours each week, or a few weeks each year, are suddenly re-defined as primarily "working" parents ...

The second technique for shrinking the percentage of "traditional" families is even more distorting. It simply shifts the basis of comparison -- not once but twice. The logical way to measure "traditional" childrearing is to compare traditional families to other families with children. If we instead compare them to all other families, with or without children, we arbitrarily swell the "non-traditional ranks with millions of newly-wed, "empty nest" and other childless families... then, they go even further: they measure "Ozzie and Harriet" against the combined weight of every single household in the nation (Blankenhorn, 1989, p. 10).

Clearly, statistics and data bases can be manipulated to support one's specific political, economic, and/or economic agenda. It is important, therefore, that policymakers be presented with information which represents diverse viewpoints and analyses in order for them to make fully informed decisions. Nevertheless, despite the claims of critics such as Blankenhorn, there does appear to exist a general consensus among demographers that the makeup of the American family has changed substantially since the 1950s. Today, there are substantially more single-parent families, especially those headed by females. Further, there are substantially more family situations in which both parents are working.
Children of poorly educated mothers (1) perform worse academically, and (2) leave school earlier than children of better educated mothers. According to 1986 NAEP test results, children of poorly educated mothers scored lower than children of better educated mothers in both reading and mathematics at every age level measured, with the most pronounced difference occurring in mathematics. For example, of the third grade children participating in the 1986 NAEP, only 46% of those children whose mothers had not completed high school scored above level 200, beginning skills and understanding, on the mathematics proficiency test, while 73% of those children whose mothers were at least high school graduates attained that level of mastery (Natriello, McDill, & Pallas, 1990).

Maternal education also is related to the likelihood of dropping out of school. Barro and Kolstad (1987), in their analysis of High School and Beyond data, documented that children in families where the mother has not completed high school are two to three times more likely to drop out of high school than those children in families where the mother has obtained more schooling.

The educational level of the mother is especially important because it is the mother who usually is the primary caretaker in single-parent households. Many of these mothers either do not work or hold low-paying jobs. Clearly, their chances of being poor are much higher than for children who live in two-parent families.

In 1987, approximately 20% of all children under age 18 lived with mothers who had not completed high school, with a disproportionate number of these children being black and Hispanic. Nearly 30% of black youth living in families where the mother was present, had mothers who had not finished high school.
Over 50% of Hispanic children living in the same family structure had mothers who had not completed high school. In contrast, about 87% of all white children living in families with the mother present had mothers who had at least completed high school (Natriello, McDill, & Pallas, 1990; U.S. Bureau of the Census, 1988).

Mothers who are better educated themselves tend to have more contact with their children's schooling. They are more apt to have a higher "comfort level" when approaching school personnel. In contrast, mothers who performed relatively poorly during their own school years, and particularly those who dropped out of school, are less likely to become actively involved in their own children's educational programs. Very simply, many of these mothers find schools extremely intimidating and threatening partially because of their own schooling experiences.

Thus, the cycle of educational disadvantage tends to perpetuate itself. Being a poorly educated mother increases the likelihood of having poorly educated children. The likelihood of educational disadvantage is even greater in these environments because poorly educated mothers are disproportionately poor, more likely to be a member of a racial/ethnic minority group, and more apt to be living in a single-parent household.

Transportation Systems and Poverty

We have divided our discussion above into discrete sections, but our list is by no means all-inclusive nor are the factors themselves independent in their effect. For example, the development of metropolitan transportation systems arguably exacerbates the problems of poverty. Hodgkinson (1989) argued that the metro and highway systems of our cities were designed for suburban commuters going to a suburban job. These systems are of little help to the inner city mother
struggling with getting her children to child care so that she may get to work. Similarly, they fail to meet the needs of other high-risk individuals, such as persons with disabilities and the elderly. In fact, Hodgkinson stated of our transportation systems, "This is a great system for the wrong people... If the transportation system goes down, so do education, health, and government" (pp. 9-11).

Non- Or Limited-English Proficiency

**Academic Performance**

Students whose primary language is other than English (PLOTE) or who have limited English proficiency (LEP) are at a distinct disadvantage in our nation's public schools. These students not only often encounter academic obstacles but many also are forced to deal with emotional and social obstacles.

Little agreement exists relative to either precise definition or actual size of this vastly growing population of students within our schools. Likewise, wide differences of opinion exist regarding what are the most effective and appropriate methodologies and curricula for these students. Nevertheless, there is agreement among most educators and parents that unless some rather drastic changes occur in how these students are educated, the problem will only exacerbate.

Baratz-Snowden, Rock, Pollack, & Wilder (1988) concluded from their analysis of the 1985-1986 NAEP special survey of language minority children that Hispanic, Asian, and native American children not only performed more poorly than their white peers, but also that the use of a non-English language in the home was not nearly as important in influencing children's academic
achievement as whether or not a child is competent in English (cited in Pallas, Natriello, & Mc Dill, 1989, p. 17).

Because the population of PLOTE and LEP students is so diverse, and further, because there is little agreement regarding how to most accurately measure the language phenomenon, it has been extremely difficult to obtain "hard data" on these students. However, some researchers suggested that data from the 1986 NAEP provide evidence of the educational achievements of children with limited English proficiency:

Our own unpublished tabulations of third-graders' responses [1986 NAEP] indicate that children who are exposed to or speak a language other than English at home score lower in both reading (in English) and math than their peers. In reading for instance, the average score of third graders who speak a language other than English at home at least some of the time is approximately 36.7, while for third graders who speak only English at home, the average score is about 38.5. The difference in performance between the two groups represents about two-tenths of a standard deviation (relative to all third-graders).

Our best guess is that a difference of this size puts third-grade children who speak a language other than English at home at least some of the time about half a year behind other third-graders who speak only English at home. A similar gap is observed in mathematics proficiency. Of the third-graders who speak a language other than English at home at least some of the time, about 59% scored above level 200, beginning skills and understanding. But, among those third-grade children who speak only English at home, approximately 69% scored above level 200. Even in mathematics performance, then, language usage can be consequential (Natriello, McDill, & Pallas, 1990, p. 26).

Natriello, McDill, and Pallas (1990) further suggested that the differences in academic achievement between these two populations of students are even greater when the frequency with which languages other than English are spoken at home. In both reading and mathematics proficiency 1986 NAEP measures, third-graders who reported that a language other than English is often spoken in the home were already a full year or more behind their predominantly English speaking peers.
Children with limited-English proficiency also are more likely to drop out of school than are children from homes in which English is spoken exclusively. Among sophomores in the High School and Beyond study, those students from homes where only a non-English language was spoken were more than twice as likely to drop out of high school as students from homes where English was the sole or primary language (Salganik and Celebuski, 1987, as cited in Natriello, McDill, & Pallas, 1990).

**Nonacademic Problems**

Poor academic performance is not the only problem faced by many PLOTE and LEP children and youth in our schools and society. These children represent a very heterogeneous group in terms of native language, degree of acculturation, socioeconomic status, ethnic values and customs. Frequently their cultural and language diversity not only is not valued nor respected, but often it is totally rejected (Davis & McCaul, 1990).

Ethnic and cultural customs of these students often are not understood by their peers and teachers. For example, children from some cultures tend to be more passive in group settings. Thus, a child's "lack of verbal responsiveness" could be misinterpreted by teachers as lack of interest or motivation. Likewise, children from still other cultural backgrounds may manifest behaviors in the classroom or in the community which are perceived of as being verbally or physically aggressive. In reality, these verbalizations and physical behaviors may not represent overt acts of defiance or disrespect but rather they are reflective of cultural or subcultural norms.
There is little agreement among U.S. bureau and agency officials relative to the actual number of children and youth who are non or limited-English proficient in today's public schools. Different indicators of dependency and criteria are employed to determine, for example, which children "qualify" as being within the category of limited-English proficient. The estimated number of LEP children in the United States during 1986 ranged from 1.2 million to 2.6 million. However, many observers contend that these numbers are very conservative and substantially underestimate the actual number of children within this category.

Regardless of the differences, which exist relative to estimating the actual size of PLETE and LEP students in our schools and broader society, there is no question that this population is rising dramatically in the United States and is likely to continue to do so in subsequent years. In particular, there has recently been a large influx of immigrant students, especially those from Third World countries, into our public schools.

According to a recent analysis of preliminary United States 1990 census data, approximately 30 percent of our nation's population growth during the 1980s appears to have been due to immigration (see Figure 7). Demographers estimate that between 7 million and 9 million immigrants, legal and illegal, arrived in the United States during the 1980s. At no other time since the 1920 U.S. Census has so much population growth been attributable to migration from foreign lands (cited in Sege, 1990, pp. 1, 18).

This recent influx of immigrant students already has helped change the "face of American education" in many cities. In 1988, it was estimated that as
many as 2.7 million school-aged immigrants resided in the United States. Many of these recent immigrants, mostly Asian, Hispanic, and Caribbean, have tended to settle in certain states (e.g., California, Florida, Texas, New York, and Massachusetts) and have had a major impact upon schools in these states. For example, more than one-third of San Francisco United School District's students primary language is other than English (Davis & McCaul, 1990).

Changing Face of America

<table>
<thead>
<tr>
<th>Net immigration as percent of total US growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>1980-90</td>
</tr>
<tr>
<td>1970-80</td>
</tr>
<tr>
<td>1960-70</td>
</tr>
<tr>
<td>1950-60</td>
</tr>
<tr>
<td>1940-50</td>
</tr>
<tr>
<td>1930-40</td>
</tr>
<tr>
<td>1920-30</td>
</tr>
<tr>
<td>1910-20</td>
</tr>
</tbody>
</table>

Figure 7. Source: Boston Sunday Globe, September 2, 1990.

A report prepared by the National Coalition of Advocates for Students, New Voices: Immigrant Students in U.S. Public Schools (1988b), provides a comprehensive and vivid portrayal of the current status of educational opportunities for these students:

Despite the fact that every immigrant child has the legal right of access to a free public education, serious problems with access exit. Many schools discourage immigrant children from enrolling. Once inside the schoolhouse, these children continue to experience barriers to a comprehensive and effective education. (p. xii)

Immigrant students need years to learn a new language and make difficult adjustments; but most U.S. schools are not structured to provide this time. Immigrant students are more likely to be retained in-grade and inappropriately placed in low academic tracks on the basis of language
limitations or slow academic progress. The cumulative effects of these experiences often cause immigrant students to leave school early, and create great emotional stress. (p. xii).

Recent school reforms have produced schools that are meritocratic, less flexible, and less able to respond to the needs of highly diverse student populations. Unless schools are restructured in fundamental ways, school success will elude large numbers of immigrant students. (p. xii).

U.S. Is Becoming More Diverse

In recent years the United States has experienced a pronounced shift in demography. We are increasingly becoming a nation of cultural diversity and minorities. In 1986, minorities represented approximately 30% of public school enrollments in the United States. It is projected that by 2000, 40% of our public school students will be representatives of some ethnic/racial minority group.

In 1988 there were at least six states with a black, Hispanic, Asian, and American Indian public school enrollment of 35% or more, and another twelve states in which these students made up between 25% and 34% of the enrollment (Ramirez, 1988). The number of minority students in many large city school systems approaches or exceeds 80% (Plisko & Stern, 1985). In Texas, approximately half of all kindergarten students are Hispanic (Yates, 1986).

The Graying of America

The face of America is in the process of changing in still other ways. Clearly America is getting older. The median age of America was 28 in 1970, 30 in 1980, and it is projected to be 36.5 by 2000 and 39 by 2010 if current trends continue. The number of persons over age-65 is expected to double by 2010. Presently 28% of the total federal budget is allocated to the elderly. Given the expected increase in the total number and proportion of elderly citizens by 2010,
it is very likely that the competition between our youth and senior citizens for fiscal support will become even keener in the future.

Special Education

Traditionally, many students who displayed learning difficulties were served by the special education system in our public schools. But, special education has changed drastically in the last twenty-five years, and it has developed into a complex system with its own administrative and regulatory guidelines. This development has led some authors to refer to it as "the second system of education" (Reynolds, Wang, & Walberg, 1988). In this section, we will briefly: (1) outline some of the major changes which have occurred in special education, and (2) discuss the impact of this system on the future of our nation's children.

Historical Overview

For many years, handicapped students were denied basic access to public education. It was not until the mid-twentieth century that these students could consistently be found in public schools and then only in separate, segregated classrooms for the mildly mentally retarded. Children with other handicapping conditions were generally excluded from public schools, and parents had two choices: (1) keep them at home, or (2) enroll them in private schools for students with disabilities. In short, students with disabilities were not viewed as being the responsibility of public education.

The 1960s and 1970s, however, marked a prolonged and intensive period of upheaval and change for the country as a whole as well as for special education programs in particular. This era is sometimes referred to as the "period of
legislation, litigation, and advocacy for handicapped rights." As a logical outgrowth of the civil rights movement for other minority populations, several significant judicial decisions (e.g., *Larry P. v. Riles*, 1979; 1984; *Maryland Association for Retarded Children v. State of Maryland*, 1974; *Mills v. Board of Education*, 1972; *Pennsylvania Association for Retarded Children (PARC) v. Commonwealth of Pennsylvania*, 1972) challenged the exclusion of students with handicaps from the public education system (cited in Davis & McCaul, 1988).

The momentum of this advocacy for students with disabilities led to the passage in 1975 of P.L. 94-142, the Education of All Handicapped Children Act (EAHCA), which has resulted in substantial changes in how and where handicapped students are served in our nation's public schools. Both supporters and critics of EAHCA agree that it has had a profound impact on all aspects of public education. Perhaps the most significant components of the law are (a) the requirement that students with handicaps be educated in the least restrictive environment; (b) the team decision-making process which involves parents as an equal partner with the school; (c) the development of an individualized education plan (IEP) for students with handicaps; and (d) the procedural safeguards for parents which include the right to appeal schools' decisions to an independent hearing officer or the courts.

*The "New" Special Education: A Shifting Population*

At the time that EAHCA was passed by Congress in 1975, it was difficult to foresee many of the changes that would occur along with the controversies that would ensue. Even now, in the early 1990s, it is difficult to predict how our entire educational system will be affected by the changing special education population, the increase in resources (both human and fiscal) committed to special education, and the growing tendency to settle special education disputes in court.
The types of students considered as having a "handicapping condition" are specified in EAHCA. Further, this handicapping condition must adversely affect the student's education and require the provision of special education services. However, the population of students considered handicapped has changed drastically. In 1975, learning disabled students constituted 17% of the handicapped students' population; in 1987-88, this percentage grew to 47%; the percentage of learning disabled students grew 119% from 1975 to 1985. In other words, almost half of today's special education students are classified as learning disabled. Figure 8 shows a breakdown of the special education population in 1988.

Percentage of Students (6-21) Served Under EHA-B and ECIA (SOP) by Handicapping Condition, School Year 1987-88

- Learning Disabled: 6%
- Speech Impaired: 9%
- Mentally Retarded: 23%
- Emotionally Disturbed: 47%
- Other: 15%

Figure 8. Source: Eleventh Annual Report to Congress, 1989.

As is evident from an examination of Figure 8, the categories of learning disabled, speech impaired, mentally retarded, and emotionally disturbed constitute approximately 94% of the special education population. Further, these categories
are growing rapidly. The number of learning disabled students increased by 2% between 1986-87 and 1987-88, while the number of speech impaired students increased by 1.9%. The number of mentally retarded students actually declined by 3.0%. (The number of emotionally disturbed students increased by .7%).

More recent figures indicate that 4,587,370 children from birth through age 21 were served under EAHCA and the Chapter 1 state-operated programs in 1988-89 (Twelfth Annual Report to Congress, 1990). This represents an increase of 2.1% over the number served in 1987-88, the largest increase since 1980-81, and largely reflects the growing ranks of students identified as learning disabled and speech/language impaired.

**Current Controversies/Regular Education Initiative**

Partly because of the significant growth in the learning disabled population in recent years, many special education scholars began, in the early 1980s, to question the basic assumptions underlying the process of assessment, identification, and placement of handicapped students. Stainback and Stainback (1984), for example, argued that there were not "two distinct types" of students -- handicapped and nonhandicapped -- but that "all students are unique individuals, each with his/her own set of physical, intellectual, and psychological characteristics" (p. 103). These authors stated that the current system discriminated against many educationally disadvantaged students who did not "qualify" for special education -- at least, not based on their scores on individual intelligence and achievement tests.

The questioning of special education policies and practices during the mid and late 1980s (emanating largely from within the field of special education itself) has been commonly referred to as the Regular Education Initiative (REI) or the General Education Initiative (GEI) debate. Presently, this discourse continues
to be one of the most controversial and intense issues receiving attention in the special education literature (Carnine & Kameenui, 1990; Davis, 1989, 1990; Davis & McCaul, 1988; Jenkins, Pious, & Jewell, 1990; Kauffman, 1989; Lilly, 1989; Vergason & Anderegg, 1989).

The proposed merger of special education and regular education into a unitary general education system which would have primary responsibility for all students in our public schools -- including identified handicapped students as well as those students who have "other special needs" -- has attracted both strong advocates and critics.

**Proponents** of the REI have called for a restructuring of our public education system so that all students could be better served, arguing that many past and current policies and practices within the special education paradigm are based on flawed logic and assumptions, are program- ally and cost-ineffective, and, in many cases, discriminatory (Lilly, 1988, 1989; Lipsky & Gartner, 1989; Skrtic, 1987; Sapon-Shevin, 1989).

**Opponents** of the REI generally have argued that the majority of past and current special education policies and practices are essentially sound, and if abandoned too hastily and without a solid research base to justify such, many handicapped students would likely suffer irreparable harm -- and further that both they and their parents likely would lose their hard-earned due process rights (Gerber, 1988; Kauffman, 1989; Keogh, 1988; Lieberman, 1990).

Increasingly, psychologists and educators have questioned the validity of both the discriminative power of the tests employed (Ysseldyke, Algozzine, Richey, & Graden, 1982) and the IEP team's ability to make decisions (Ysseldyke, Algozzine, & Mitchell, 1982) relative to the eligibility and instructional approach with mildly handicapped students -- particularly the basis for decisions on which students are truly "learning disabled" and which students are not. In addition,
many have questioned whether such a determination truly has educational relevance; that is, would such a decision really lead to a different instructional approach with a particular child (Reynolds, Wang, & Walberg, 1987).

Perhaps Lilly (1986) best stated the position of special education reformers when he discussed the possibility of a unified system of service delivery:

Special education for students labeled "mildly handicapped," as currently conceptualized and implemented, over-identifies students, results in inefficiency in service delivery, and operates counter to mainstreaming principles. Supportive services are needed which are based in regular education, aimed at students who are low achievers and/or disruptive in school, do not require complex diagnostic testing and labeling of students as handicapped, and minimize "pull out" of students from normal classroom activities. A single coordinated system of service delivery is preferable to the array of special education programs currently offered in the schools (p. 10).

It should be noted that not all researchers or special educators agree with the position of these critics or are in favor of the REI; many educators feel the basic special education system is sound and needs to be refined rather than reformed (Gerber, 1988; Hallahan, Keller, McKinney, Lloyd, & Bryan, 1988; Keogh, 1988; Lieberman, 1985; Mesinger, 1985). Nevertheless, this debate presently is having an impact on more than just special education; it is helping to shape the course of education for the educationally disadvantaged population in general.

The Challenges of the Future

Many of the critics of the REI feel that the special education system needs to be preserved for the "truly handicapped." And, if present trends are to continue, then the number of demonstrably physically and multiply impaired children is likely to increase. Buehler (cited in Counterpoint, 1990) stated that "twenty-five years ago, for every three children born with severe handicaps, one would be alive at the age of 21. Today, for every three children born with a severe defect, two are alive at the age of 21, and the prediction is that it will be two
and one-half out of three by the year 2000. This means that you've doubled your population of multiply handicapped just by longevity" (p. 8).

These statistics suggest that many of these multiply handicapped students will need a wide variety of individualized programs and services when they reach school, and that these students will likely strain the human and fiscal resources of schools to a breaking point. Greer (1990) stated that "no single human service agency, including the schools, has the human and fiscal resources to meet the needs of these children and their families" (p. 383).

Buehler (1990) cited a student with Trisomy 13 whose program "accounted for the entire special education budget of one school district" (p. 8). It is probable that programs for more severely handicapped children may require coordinated programs from a number of agencies involved in medical and social services. Still, in addition to the coordination of these services from different agencies, schools will take considerable financial responsibility for the related services (those services related to the special education program and necessary for the achievement of IEP goals) for these students.

Because the related services for these multiply handicapped students may be costly, and also because of demands for costly residential programs for special education students -- as well as the costs involved in due process hearings and litigation -- a backlash against special education expenditures appears to be occurring. Noting that it costs, on the average, about two and a half times as much to educate a special education student, Zirkel (1990) argued that the costs of special education have led to resentment among educators, policymakers, and taxpayers:

Special education in the 1990's will tend toward one of two alternatives. The optimum option would be to dramatically increase the overall budget for and efficacy of education such that special education's share would be healthy and productive. The other -- and much more likely -- scenario is
that the special education tide will turn: The odds are that the handicapped, the favored minority of the 1980's and even, assuming that the "Americans with disabilities act" (sic) passes this year, of the early 1990's, face the same fate as their predecessors, such as black Americans. The needs will starkly remain, but awareness and action toward addressing them may fade. The increasing costs, approaches, and competition from other interest groups add up to the probability of a public backlash (p. 64).

Special education may indeed face difficult times as the competition for resources, in an aging and rapidly changing America, becomes intensified. Special education appears to be at the threshold of change. With the population of mildly handicapped students growing, the lines of distinction between these students and other educationally disadvantaged students is beginning to blur. In addition, the burgeoning costs of medically fragile children, extensive related services, and prolonged litigation, all make special education ripe for reform.

Many of the changes outlined in other parts of this document are intensified and magnified in the special education arena. The entire special education system may go through a period of painful change -- perhaps voluntarily, but perhaps through an extensive period of turmoil created by a public backlash against the current system.

Thus far, this report has focused on indicators of educational disadvantage. In contemporary American society there is a growing number of children and youth who are at risk for broader health, behavioral, and social reasons. Clearly, some of these children and youth are the same ones who are educationally disadvantaged. However, there are many infants, children, and adolescents in America today who are suffering from much broader deficits and pain than from educational disadvantage. In fact, there
are children who are not having any particular problems academically, and may even, in some cases, be excelling in school, who are at a high level of risk -- for illness, severe emotional suffering, or even death.

The following sections of this document, focus will shift away from educational disadvantage, per se. Rather, emphasis is placed on broader health, social, economic, and vocational concerns and issues involving U.S. children and youth. Recent developments and emerging trends will be presented and analyzed.
VI. TRENDS IN INDICATORS OF PHYSICAL HEALTH OF CHILDREN IN THE UNITED STATES

A recent report prepared by the U.S. Bureau of the Census for the House Select Committee on Children, Youth, and Families, provided some pessimistic, if not startling, statistics regarding the current health status of children in the United States. Among the major findings of this report, which compared U.S. children with children in 11 other developed countries, Australia, Canada, France, West Germany, Hungary, Italy, Japan, Norway, Sweden, the Soviet Union, and the United Kingdom, and four developing nations, China, India, Israel, and Mexico were:

*** Only the Soviet Union, which has 25 deaths per 1,000 live births, has an infant-mortality rate that exceeds the U.S. rate of 10 deaths per 1,000 live births.

*** Polio immunization rates are 67% higher in Europe than in the U.S.; diphtheria, tetanus, and pertussis immunizations are 41% higher.

*** Young males in the U.S. are five times more likely to be murdered than are those in other developed countries. In Mexico, however, young males are killed at nearly double the U.S. rate.

*** One in 10 U.S. teenagers between the ages of 15 and 19 becomes pregnant, the highest teenage pregnancy rate in the study.


Mortality Trends

One of the most widely used indicators of health conditions in a society is the infant mortality rate. The U.S. infant mortality rate (the proportion of babies
who die within the first year of life) in the mid-1980s -- less than 11 infant deaths per 1,000 live births -- was less than half of what it was in 1960 and only about one-third of what it was as recently as 1950. Although mortality rates provide only a partial picture of children's health status, these dramatic declines attest to real improvements in the physical health of our young children (Zill & Rogers, 1988, pp. 54-55).

However, as pointed out by the same authors, "when the U.S. infant mortality rate is compared with that of other industrialized countries, the United States ranks only seventeenth, behind countries like Japan, the Scandinavian countries, France, Australia, and Britain. This rank is unchanged from 1980 and contrasts sharply with our rank in per capita gross national product, which is second only to Switzerland" (Population Reference Bureau, Inc., 1988 World Population Data Sheet, as cited in Zill & Rogers, 1988, pp. 55-56).

More recent international data regarding infant mortality yield even more disturbing news relative to the declining health status of our nation's children. The United Nation's Children's Fund publication, The State of the World's Children 1990 provides the following statistics for the year 1988:

- 10 babies died for every 1,000 live births in the U.S. The United States ranked #19, behind 18 other nations including Singapore and Hong Kong.

- 13 of 1,000 babies died before their 5th birthdays in the U.S. The United States ranked #21, behind 20 other nations including Japan, East Germany, and New Zealand.

- 7 percent of babies in the U.S. were born at low birthweight. The United States ranked #29 behind 28 other countries, including Hong Kong, East Germany and West Germany.

A report recently released by the National Center for Health Statistics indicates that the infant mortality rate in the United States dropped slightly in 1989 (9.7 of every 1,000 babies) from that recorded in 1988 (9.9 of every 1,000 babies) (cited in Painter, 1990).

Black infants are especially vulnerable to early death. The mortality rate for black infants is twice that for white infants in the United States -- about the same rate as it was 26 years ago (Hodgkinson, 1989; Reed & Sautter, 1990).

Lack of Prenatal Care

In spite of overwhelming evidence attesting to the value of prenatal care in reducing infant mortality and prematurity, reducing prenatal diseases and disorders, and preventing low birthweight (LBW), the percentage of pregnant women receiving adequate and timely prenatal care today has decreased overall (Hughes, Johnson, Rosenbaum, Butler, & Simons, 1988; Hughes, Johnson, Rosenbaum, & Liv, 1989; cited in Baumeister, Kupstas, & Klindworth, 1990).

*** For 1 out of every 20 babies born in the United States, and for 1 out of every 10 black or Hispanic babies, the mother has obtained prenatal care either late or not at all. These proportions have remained essentially unchanged during the 1980s (Zill & Rogers, 1988, p. 57).

*** Pregnant women who are at a higher risk of not obtaining timely prenatal care include young teenagers, school dropouts, unmarried women, and black women (Zill & Rogers, 1988, p. 57).

*** 1 of every 4 pregnant women in the U.S. receives no health care during the critical first trimester of pregnancy, about 20 percent of white mothers and 38 percent of black mothers. Without care in the first three months, a mother is three to six times more likely to have a premature, low birthweight baby, just the kind who is
likely not to survive the first year of life. Black infant mortality in the U.S. is twice the rate of whites (Hodgkinson, 1989, p. 13).

Recent U.S. government figures indicate that the overall proportion of low birthweight (LBW) among infants increased to 6.9% in 1987, compared to 6.8% for 1986. Annually, 262,344 babies are born LBW. A racial disparity again is obvious: more than twice as many black infants are born small when compared to white babies (12.7% and 5.7% respectively). In addition, LBW increases risks for several neurodevelopmental conditions, such as cerebral palsy, autism, developmental delay or mental retardation, hearing impairment, and various mental disorders (Baumeister, Kupstas, & Klindworth, 1990).

Health Insurance Coverage

Poor children are far less likely to have adequate health insurance. Only about two-thirds of children from families below the poverty line have some form of health insurance coverage, as opposed to nearly 90 percent of the children in families with incomes of twice the poverty level and above. In addition, more than 85 percent of children in two-parent families have health insurance, as compared with less than 70 percent of those children living in mother-only families. Children with divorced mothers, ironically, are less likely to be covered than those with never-married mothers, because the latter are more likely to be eligible for coverage under the Medicaid program (Zill & Rogers, 1988, pp. 57-58).

* * * In 1987, 37 million Americans, including more than 12 million children had no health insurance. Uninsured children have a 20% greater chance of poor health and are less likely to have proper immunization against infectious diseases (Reed & Sautter, 1990).
Nearly one-half of all poor children do not receive benefits from Medicaid (Reed & Sautter, 1990).

One pregnant woman in four receives no prenatal care during the critical first trimester. Such a mother is three to six times more likely to give birth to a premature, low birthweight baby who will be at risk for developmental disability or even death. 10.6 of every 1,000 newborns in the U.S. die -- the highest rate in the developed world (Reed & Sautter, 1990).

Only 15 states provided Medicaid coverage in late 1989 to the full extent that the federal program would fund with federal dollars (for all pregnant women and infants younger than one with family incomes less than 185 percent of the federal poverty level) (Children's Defense Fund, 1990a).

Federal WIC funds reach slightly more than half of all eligible women and children. Despite the proven effectiveness of the Special Supplemental Food Program for Women, Infants, and Children (WIC) in improving maternal and child health, and its dramatic cost effectiveness, only nine states and the District of Columbia supplement their federal WIC allotment to provide food and nutrition services to additional pregnant women, infants, and children beyond those covered by the federal allotment (Children's Defense Fund, 1990a).

More than 12 million children and more than 14 million women of childbearing age have no health insurance (Children's Defense Fund, 1990a).

Poverty and social disadvantage clearly work together to play a significant role in the number of low birthweight babies born each day in the United States. Federal budget cuts have forced many states to eliminate or substantially reduce preventive health services for pregnant women as well as for newborns. For example, many states do not have sufficient funds to implement large scale prevention programs for immunization of infectious childhood diseases. Many of our nation's poorest mothers-to-be do not receive critical prenatal care, especially during the critical first trimester of pregnancy.
Accidental Injuries

Children in the United States are at a much higher risk of dying from injuries than children in many other industrialized countries. Injury is the leading cause of death to children after the first few months of life. In particular, motor vehicle accidents represent a large proportion of deaths and serious but nonfatal injuries among American youth.

Nearly 7,400 teenagers died in automobile accidents in 1984. This represented more than twice the number of teen deaths due to homicide and suicide combined. Yet some progress has been made. Motor vehicle deaths among U.S. teenagers, which rose during the 1970s, have dropped more than 20 percent during the 1980s (National Center for Health Statistics, cited in Zill & Rogers, 1988, p. 58).

Violent Injuries and Deaths

Homicide rates for children and youth in the United States are far higher than those in other industrialized countries. Homicides among adolescents, in particular, have been occurring at a rapid rate, with 4,772 adolescent homicides reported in 1985 (National Center for Health Statistics, August, 1987). There exists a large racial disparity, with homicide rates for black males nearly 500% higher than the national average (Blum, 1987). According to a recent CBS News report, homicide is now the leading cause of death for children in Washington, D.C..

The increase in violent crime among adolescents has resulted in drastic actions being taken by concerned parents, local citizens, and school officials in several of our nation's largest cities. A recent report on crime and violence in
Los Angeles schools has called for sweeping changes in the school district's discipline policies, including a major increase in the use of expulsion for students found to have committed serious offenses.

Despite the school district's existing expulsion policies, the report stated, very few of the students who were caught with dangerous weapons in school in 1988-89 were forced out of the system for an extended period of time. The issue of school violence has become a top priority for school officials in Los Angeles in light of the growing level of gang-related violence in that city. In 1989, an average of one youth between the ages of 10 and 19 was murdered every day in Los Angeles (Jennings, Education Week, April 4, 1990, pp. 8-9).

In New York City, concern about the increasing incidence of violence against children on their way to and from school has led a group of principals within this city to develop a plan to establish guarded subway trains for students only. Although there are no statistics on the number of incidents that have occurred, Jack Pollock, principal of the Abraham Lincoln High School in the Bronx, stated, "the number is definitely not going down. These are kids preying upon kids. They look for the weak and vulnerable to attack" (Education Week, April 4, 1990, p. 9).

Child Abuse

In recent years probably no other area involving the well-being of children in American society has received more attention than that of child abuse. Physical and emotional abuse and neglect, and most certainly sexual abuse of children, have been "brought out of the closet." In 1989, approximately 2.4 million child-abuse reports were filed with the National Committee for the Prevention of Child Abuse -- with more than 400,000 of these
reports involving sexual abuse (Boston Sunday Globe, July 1, 1990, p. 90).

The total number of reports of cases of abuse and neglect made to federal and state agencies throughout the United States rose sharply between 1976 and 1984, from nearly 700,000 to 1.7 million per year (Select Committee on Children, Youth, and Families, 1987). The rate of reported child abuse in 1987 was more than three times the rate in 1970 (American Association for Protecting Children, Inc., 1990). According to a recent report by the U.S. Advisory Board on Child Abuse and Neglect (1990), in 1989, state child protection agencies throughout the United States reported nearly 1,250 child-abuse related deaths -- a 38 percent increase over 1985 (cited in Bernier, 1990).

Zill and Rogers (1988) suggested that statistics on deaths among infants and young children due to homicide and undetermined injury are probably more reliable as indicators of change over time in child abuse, at least with respect to the more extreme forms of abuse. In 1984, there were approximately 8 deaths per 1,000 infants due to undetermined injury or homicide, and 3 such deaths per 100,000 children between the ages of one and four. These rates of violent death have tended to fluctuate within a fairly narrow range since 1970, with no substantial trend upward or downward (Cook & Laub, 1985, cited in Zill & Rogers, 1988, p. 60).
VII. TRENDS IN THE INDICATORS OF MENTAL HEALTH OF CHILDREN IN THE UNITED STATES

The social behavior and attitudes of youth in the United States have changed significantly during the past twenty to thirty years. Increased drug and alcohol use, violence, and early sexual activity represent three of the major areas of social behavior and attitudes among adolescents, in particular, which have been of major concern to parents, educators, and the public at-large. Clearly, these are emotionally laden issues and often they receive wide media attention. National commissions have been established to study these "problems." Both the professional and lay literature are replete with reports and studies related to these behaviors and attitudes. It is not possible to provide an in-depth treatment of these topics in this report; however, we offer some general statistics and trends related to these three areas which may, at the very least, provide some very broad indicators of the current social behavior and attitudes of present-day U.S. youth.

Drug and Alcohol Use

Across the nation, the sale and use of illegal drugs have burst upon our national consciousness -- both as a threat to children's health and well-being and as a source of increasing crime, violence, and family dissolution.

The devastating effects of drugs, especially crack-cocaine, on the health and safety of American children and their families are readily apparent. Health crises such as elevated drug-related emergency room episodes, the high number of transmissions of the AIDS virus associated with drug use, and the growing number of pregnant women abusing drugs have placed enormous strains on the nation's public health system.

Violent crime and a thriving and ruthless drug economy tax the resources of the law enforcement and criminal justice systems. Alarming increases in child abuse and neglect resulting from
parental substance abuse threaten to overwhelm the already strapped child welfare systems of most states. And everywhere, treatment programs compete with prevention efforts for scarce financial resources (National Commission on Children Report, 1990, pp. 35-36).

Data from the National Institute on Drug Abuse indicate a significant increase in youth drug activity since the early 1970s, but there appears to be a leveling off of rates of drug use since 1985 -- at least for some drugs. Survey data show that marijuana use among 12 to 17 year-olds rose from 7 percent to 17 percent between 1972 and 1977. At the peak of marijuana use in 1979, more than half of all high school seniors reported that they had used drugs within the past year, and more than a third, within the past month. The proportion of young persons, ages 12 through 17, who used marijuana within the past month fell from 17 percent in 1979 to 12 percent in 1985, which was the same as the 1974 level (National Institute on Drug Abuse, 1986, cited in Zill & Rogers, 1988, p. 78).

Teenager use of other illicit drugs, e.g., LSD and other hallucinogens, inhalants, barbiturates, amphetamines, and cocaine, also has declined from peak levels reached in the late 1970s or early 1980s -- with one major exception -- cocaine (National Institute on Drug Abuse, 1986, cited in Zill & Rogers, 1988, p. 78).

Rise in Drug-Impaired Births

In particular, crack-cocaine has become "the battle of the 1990s" for many teenagers, their parents, law enforcement officials, educators, and American society. This drug has been shown not only to have devastating physical and emotional effects upon teenage users themselves, but also upon the babies which are being born to teenage women who are crack-cocaine users and abusers.

Recent evidence consistently suggests that cocaine use adversely affects both the course and outcome of pregnancy, as manifested by various fetal

...
abnormalities (e.g., Chasnoff, Griffith, MacGregor, Dirkes, & Burns, 1989; Collins, Hardwick, & Jeffrey, 1989), labor and delivery complications (e.g., Chasnoff et al., 1989), low birthweight (e.g., Chasnoff, et al., 1989; Smith, 1988), neonatal seizures (e.g., Chasnoff, et al., 1989; Collins, et al., 1989), and permanent neurobehavioral and affective deficits (e.g., Adler, 1989; Dow-Edwards, 1988; Howard, Beckwith, Rodning, & Kropenske, 1989) (cited in Baumeister, Kupstas, & Klindworth, 1990, pp. 7-8).

Bruce Buehler, Medical Director, Children's Rehabilitation Institute, University of Omaha, Nebraska (1990) warned: "Drug use in our society has created an epidemic of impaired babies now entering school or nearing school age" (p. 8). Anticipating the major, adverse impact that "drug babies" will have on our nation's schools, especially our special education programs, Jeptha Greer (1990), former Executive Director of the Council for Exceptional Children, wrote:

The evidence [drug abuse by pregnant women] is mounting and it is horrifying. Some studies have reported that as many as 15 percent of pregnant mothers report using illegal drugs or alcohol; experts fear that the real rates may be double that. At D.C. General Hospital in 1988, 20 to 30 percent of the pregnant women admitted to being drug abusers, whether of cocaine, heroin, PCP, or 'poly-drug.'

According to a recent survey of hospitals, the overall rate of deliveries affected by illicit substance abuse is about 11%, thus affecting at least 375,000 newborns annually (Weston, Ivins, Zuckerman, Jones, & Lopez, 1989). Drug-exposed births have increased 300% to 400% since 1985 according to a recent report of the Select Committee on Children, Youth, and Families. In some hospitals, as many as one in six newborns is born "hooked" (Miller, 1989).

Between 1974 and 1982, cocaine use among youths aged 12 through 17 increased 81% (U.S. Department of Commerce & Bureau of the Census, 1986). The strong likelihood of drug addiction from crack-cocaine use in particular presents multiple problems for our nation's youth. Not only can the use of this drug have
long-term, irreversible adverse consequences on their physical and emotional well-being, but it also can have other serious effects.

Cocaine is expensive. In order to obtain the money necessary to "support his/her habit" teenagers often engage in violent crimes, prostitution and so forth. Even for many youth who do not necessarily engage in criminal activities, the consequences often are bleak. For example, many teenagers, needing to work excessive hours to support their habit, attend school irregularly or drop out of school completely.

*Teenagers and Alcohol Use*

Despite the rapid rise in the use of cocaine by youth, alcohol continues to be the most common intoxicant used by adolescents in the United States. Survey data indicate that the regular use of alcohol by teenagers has fluctuated since the early 1970s, peaking in 1979. Nevertheless, as of 1985, two-thirds of all high school seniors reported that they were current users of alcohol (Zill & Rogers, 1988).

In 1984, approximately 50% of male high school seniors and 30% of female seniors admitted that they drank alcohol excessively, at least once every two weeks, and 1 in 20 reported daily drinking. According to a 1989 poll of seniors, 60% said they had drunk alcohol in the past 30 days, down from 72% in 1979 (University of Michigan study as reported in *Newsweek* Special Issue, Summer/Fall 1990, p. 59).

Although statistics vary relative to incidence, drinking of alcohol by adolescents in the United States continues to be a very common behavior. Youthful drinking, because it is so widespread and "socially acceptable", may be grossly underestimated in terms of its negative personal and societal effects, and
may, according to Zill and Rogers (1988) "far exceed the effects attributable to teenage drug abuse" (p. 79).

Relationship of Parental Supervision to Alcohol Use

The results of one recent study (Richardson et al., published in the September, 1989 issue of Pediatrics, cited in Education Week, September 13, 1989, p. 19) suggested that the amount of time that young people are unsupervised is a critical factor relative to their use of alcohol and marijuana. In a survey conducted with 4,932 8th-grade students and their parents in southern California, it was found that "latchkey children" are twice as likely to drink alcohol, and nearly twice as likely to use marijuana, as are their more supervised peers. Also, the more time these students were left unsupervised, the greater was their use of alcohol and marijuana.

This "risk factor" was higher for unsupervised children, regardless of sex, race, income, extracurricular activities, or school performance. This study further pointed out that latchkey children were more likely to come from affluent neighborhoods and to be white. Clearly, although the results of this study are not necessarily generalizable to a broader population of American youth, they do appear to suggest that parents who leave their children unsupervised for extended periods, irrespective of the reasons for such, need to be more aware of the greater possibility for substance abuse among their children that this situation seems to encourage.

Fetal Alcohol Syndrome

Estimates now indicate that each year 50,000 babies are born with alcohol-related problems, and of these, over 12,000 demonstrate the full Fetal Alcohol Syndrome (FAS) dysmorphology. Native
Americans are 33 times more likely to deliver a FAS baby than whites; blacks, 7 times more likely (Baumeister, et al., 1990, p. 8).

The estimated incidence of FAS varies between 1.7 and 5.9 per 1,000 live births depending on the population (Abel, 1982). Children born with FAS often go undetected until much later in life, or they are misdiagnosed completely. Frequently, reported "school problems" lead to a child's referral and subsequent initial diagnosis of FAS. Children with FAS often suffer from mild to moderate mental retardation, delayed motor and language development etc.. Fetal Alcohol Syndrome is now generally regarded as the leading known cause of mental retardation in the western world, and the second leading cause of birth defects in the United States, affecting approximately one in every 650 babies (National Association for Perinatal Addiction Research and Education, 1989).

Many children manifest some, but not all, of the effects which are necessary to constitute a diagnosis of FAS. Those children who show partial expression of the syndrome generally are referred to by the term Fetal Alcohol Effects (FAE). The incidence of FAE is more difficult to estimate because uniform diagnostic criteria have not yet been established. Most studies, however, report much higher rates for FAE than for the full syndrome. Abel (1982) estimated the incidence of FAE at 3.1 per 1,000 live births while other estimates approach 6 per 1,000 (Hanson, Streissguth, & Smith, 1978, cited in Phillips, Henderson, & Schenker, 1989).

Juvenile Crime

Suggested indicators of delinquent and criminal activity by youth in the United States are not only varied but also they often are very limited. Hence,
reported numbers and proportions of youthful offenders are frequently quite different. Reed and Sautter (1990) reported that the number of children in juvenile detention centers rose 27% between 1979 and 1987. However, data provided by Zill and Rogers (1988) appear to suggest a much different trend:

From the mid-1960s to the mid-1970s, the rate [juvenile crime] was going up. Since about 1975, however, juvenile crime has remained at about the same level or declined, depending on which form of crime one looks at.

Because there are fewer teenagers nowadays, the recent stability in youthful arrest rates has meant that teens play a smaller role in overall crime than they did in the past. For example, young people under age 18 accounted for 23 percent of all violence index crime arrests in 1975, but for only 17 percent in 1985. And whereas youthful arrests accounted for 48 percent of all property index crime arrests in 1975, the proportion was down to 34 percent in 1985 (Zill & Rogers, 1988, pp. 72-73).

One major factor which could reasonably account for the apparent difference between the Reed and Sautter data and the Zill and Rogers data regarding juvenile crime trends is that the Reed and Sautter 27% figure does not indicate an upper age level for the children being reported. If, for example, their data refer to children under ages 16 or 15, or even younger, rather than those under 18, a substantial difference in the size of the population being reported could occur.

**Rise in Youth Incarceration Rate**

What perhaps is a more serious and disturbing trend regarding juvenile crime in America, however, is the rising proportion of youth who are being incarcerated -- those placed in Public Detention Centers and Public training schools. According to recent data, there has been a 41 percent increase in the number of youths aged 10 through the age of the maximum original juvenile court jurisdiction in each state who have been incarcerated between 1979 and 1987. In 1979, 11.8 juveniles per 10,000

In their analysis of the current well-being of children and youth in America, the Center for the Study of Social Policy employed 10 national indicators -- including juvenile incarceration rate -- which they suggest are reliable measures of child and adolescent health, education, social, and economic well-being. Of all 10 indicators, the juvenile incarceration rate percentage increase represented the single most negative trend employed as a measure of youth well-being in this country (Center for the Study of Social Policy. 1990. p. 5).

The above data, although they have been criticized regarded as somewhat suspect and unreliable because the numbers were based on counts from a one-day facility census, nevertheless clearly indicate a disturbing trend which has been developing in the U.S. -- an increasingly larger proportion of our nation's youth are being placed in public detention centers and public training schools.

*Overrepresentation of Males and Minorities*

Despite reporting differences relative to the extent of juvenile crime in the United States, there is general agreement that (1) males represent the vast majority of youth who are arrested or incarcerated for criminal offenses (males accounted for 78 percent of all arrests of persons under age 18 in 1985); and (2) racial disparities exist -- in 1985, about 37 percent of the young people held in juvenile correctional facilities were black and about 13 percent were Hispanic. Thus approximately half of the juveniles in custody were from ethnic minorities (Cook & Laub. 1986. cited in Zill & Rogers. 1988. pp. 76-77).
Relationship of Educational Level to Juvenile Incarceration

Hodgkinson (1989) cited statistics which offer a very convincing argument that one's level of education plays a major role in keeping him/her out of a correctional facility. Eighty-two percent (82%) of America's prisoners are high school dropouts. The correlation between high school dropout and prisoner rates is a trifle higher than the correlation between smoking and lung cancer (p. 15).

Using 1987 data from the U.S. Department of Education and Bureau of the Census, Hodgkinson (1989) indicated that states with the best rate of high school graduation, by and large, have very low rates of prisoners per 1,000 population. For example, in 1987, Florida led the nation in high school dropouts and in prisoners per 100,000 population, while Minnesota was ranked 50th in dropouts (90.6% graduate rate) and 49th in prisoners, 60 per 100,000. Also, nine of the top ten states with the best graduation rates during 1987 were below the national average of 228 prisoners per 100,000 population (p. 15).

Hodgkinson argued that although getting more youth through high school is no guarantee of a lowered prison population in future years, it makes good economic sense, if for no other reason, to spend more money on education (a college student or a young child in a Head Start program costs the U.S. taxpayer about $3,500 each) in an effort to prevent having to incur the much higher costs of maintaining our prisons (estimated to be $20,000 per prisoner per year -- national average cost in 1987).

Fertility-Related Behavior

Teenage pregnancy -- sexually transmitted diseases -- teenage abortions -- each of these issues frequently receives considerable attention in our nation's
Likewise, the number of federal and state reports which are concerned with sexually-related issues involving American teenagers has substantially increased in number in recent years.

Following is a sample of statistics relating to teenage sexuality issues which have been published in recent newspaper accounts, professional and lay periodicals, and/or various commission and panel reports. The majority of these statistics did not include specific source data -- and there are conflicting numbers and proportions in certain areas. Nevertheless, these are being presented in an attempt to illustrate the magnitude of the problem of contemporary teenage sexual behavior in this country.

**Teenage Sexual Behavior in the U.S.**

*** About 1 million teenagers in the U.S. become pregnant every year. Put another way, 1 out of 10 girls, ages 15 to 19, becomes pregnant every year.

*** U.S. teens under age 15 are at least 15 times more likely to give birth than their peers in other western nations.

*** 70% of teen births are out of wedlock.

*** Only 56% of all teen mothers graduate from high school (only 33% of Hispanic teen mothers graduate).

*** Welfare assistance is needed by 73% of teen mothers within four years.

*** Everyday in the U.S., 40 teenage girls give birth to their THIRD CHILD.

*** By March 1990, the Centers for Disease Control had counted 1,429 cases of AIDS among teenagers. Although accounting for only 1% of the nation's total, the number of cases doubles every 14 months.

*** The Centers for Disease Control report that the syphilis rate for teens, age 15-19, has jumped 67% since 1985, and that between 7% and 40% of female teens are estimated to become infected with chlamydia each year.
One of the most comprehensive data compilations and analyses of teenage fertility trends in the United States is contained in the 1989 edition of "Facts at a Glance" published by Child Trends, Inc., Washington, D.C. This report utilizes material obtained from several national data collection groups such as the Alan Guttmacher Institute and the Centers for Disease Control. Following are selected highlights from this report:

*** In 1987, teens had 472,623 babies, down from a total of 507,609 in 1977. This decline in the number of births is primarily due to a decline in the number of teens during the past decade. The rate of births has declined only slightly among teens aged 15-19, while staying virtually unchanged among teens younger than 15.

*** In 1987, nearly two-thirds of teen births were non-marital, reflecting a steady increase in this trend during the 1980s.

*** The proportion of teens becoming pregnant increased during the 1970s and has remained fairly steady during the 1980s, with about 11 percent of females 15-19 becoming pregnant annually. The rate of abortion among teens also increased during the 1970s and has remained level during the 1980s, with just over 4 percent of teen females having abortions each year. About 5 percent of females 15-19 give birth annually.

*** The proportion of pregnancies terminated by abortion climbed in the 1970s, but has remained stable in the 1980s, with 4 in 10 pregnancies among teens 15-19 ending in abortion.

*** Non-white teens are twice as likely to become pregnant as white teenagers: 18.6% in 1985 compared with 9.3% among white teens 15-19. Once pregnant, whites and non-whites are equally likely to obtain abortions, 42% of each group.

*** 2.5 million teenagers are estimated by the Centers for Disease Control to be affected by a sexually transmitted disease (STD) annually.

*** Although school-age mothers are substantially less likely to complete high school than older mothers, important gains have been made in recent decades. Among women in their twenties who had their first child at age 17 or younger, the proportion who graduated from high school was 19% in 1958; 29% in 1975; 56% in 1986. Among women in their twenties who were aged 20-24 when their first

98
child was born, 81% had graduated in 1958; 89% in 1975; and 91% in 1986.
(Moore, Child Trends, Inc., September, 1989)

It is important to recognize that the above data may, in fact, underestimate the actual numbers and proportions of teenagers becoming pregnant, contracting an STD, or having an abortion. These figures represent reported cases. There exist ample informal data and anecdotal information which suggest, for example, that the actual number of STDs and abortions among today's teenagers far exceeds these figures. Quite simply, they are unreported.

Problems Faced by Pregnant Teenagers

The negative social and economic consequences of having a child while a teenager are well documented. For example, parenting teenagers frequently are denied opportunities to socialize with their peers and take advantage of positive social aspects of adolescence. Also, large numbers of parenting teens leave school early without having had the opportunity to obtain those skills necessary to find employment which pays a decent wage. Thus, often the negative consequences of having a child while a teenager are not just short-term, but life-long.

Although teenage pregnancy crosses all socioeconomic lines in the United States, racial/ethnic minority group teenagers are especially victimized. As a group, they tend to be poorer, less well-educated, and more likely to leave school early. Also, because certain racial/ethnic groups, especially blacks and Hispanics, tend to have higher fertility rates than whites, the negative consequences are even more apparent. For many of these young mothers welfare dependency has been the all-too-common predictable -- and, frequently, disparaging outcome.
There is some evidence, however, which suggests that having a child while a teenager does not necessarily result in negative consequences. For example, a recent study (cited in *Newsweek*, May 28, 1990) followed the life circumstances of more than 400 mostly black teen mothers in Baltimore for a twenty-year period, beginning in the late 1960s. During that time, many of the mothers eventually managed to return to school, get off welfare, and find steady jobs. Of even more importance, two-thirds of their daughters did not become teenage parents themselves and most graduated from high school.

Although this study indicated that the mothers involved were not doing as well in most aspects of their lives as other women who had delayed motherhood, nevertheless, most of their daughters were somehow successful in breaking the intergenerational cycle of teen motherhood. The primary researcher who conducted this study, Frank Furstenberg, University of Pennsylvania, could not specify any single reason why so many daughters managed to avoid their mothers' fate: "With some of them, it had to do with the individual families and how they managed the teen pregnancy; with others, it was the school system, or the kids themselves -- or simply luck. There's a certain amount of risk-taking among teenagers, and some kids just don't get caught" (Kantrowitz, *Newsweek*, May 28, 1990, p. 78).

Many authorities agree, however, that the most effective methods for breaking the intergenerational cycle of teen motherhood involve education. An increasingly larger number of schools in the United States has developed programs which are designed to encourage teenage mothers (and fathers) to remain in school and complete their education. Many schools, for example, provide on-site day-care services for babies and young children of teenagers so that they can attend classes. Also, many schools are beginning to offer parenting classes for their teenage students. Of course, it has been long recognized that

\[ \int_1^1 \]
"meaningful" sex education classes can be effective in reducing teenage pregnancy and STDs.

**AIDS and Teenagers**

Some estimates suggest that as many as 1 in 7 teenagers will contract an STD each year. Although any STD can have serious medical effects, the threat of teenagers' contracting AIDS unquestionably is becoming an issue of most critical concern.

Thus far, a relatively small percentage of all reported AIDS cases in the United States involve adolescents (less than 1 percent). However, this percentage may be very deceiving and drastically underestimates the potential seriousness of the AIDS problem for teenagers. Presently, over 21% of all people with AIDS are in their twenties (Centers for Disease Control, 1989), and with the incubation period for this disease being up to 10 years, one can presume that many of the young adults who have AIDS today in this nation probably got the disease as teenagers.

Further, in view of the facts that (1) intravenous drug use and sex are the two major modes of transmission for human immunodeficiency virus (HIV) infection, and (2) teenagers are reported to engage in many behaviors which are considered to be "high-risk", one can infer that this particular age group is very vulnerable. Several researchers are predicting that today's teens may have similar rates of infection as they get older. Of particularly high risk appear to be inner-city youth. In a 1988 study of adolescent AIDS cases in New York, 58 percent were black and Hispanic males (Kantrowitz, 1990b).
Pediatric AIDS

Pediatric AIDS is developing into a major problem in this country. Through July of 1989, there have been 1,660 cases of pediatric AIDS reported in the United States (Centers for Disease Control, 1989). It has been estimated that by 1991, there will be between 10,000 and 20,000 symptomatic HIV-infected children, and the infection will advance to full-blown AIDS in about one-third of the cases. The vast majority of these infants (78%) were infected perinatally by mothers who used IV drugs or were sexual partners of infected men (The Surgeon General's Workshop, U.S. Department of Health and Human Services, 1987, cited in Baumeister, Kupstas, & Klindworth, 1990, p. 9).

Despite a reported slight decrease in rate of pediatric AIDS during the past year (Centers for Disease Control, 1990), HIV-infected children are living longer. Because of this trend, we are, as suggested by Baumeister, Kupstas, and Klindworth (1990), "perhaps confronted with this generation's most serious threat to children's health ... we can anticipate that AIDS will be the fifth leading cause of death among children" (p. 9). In a similarly dire observation, Diamond and Cohen (1987) stated that based on current projections, HIV infection may, in the next five years, become the largest infectious cause of mental retardation and brain damage in children.

In summary, it is critical that we recognize that the profile of AIDS patients in the United States is changing. Although most AIDS patients are still gay and bisexual men (19,652 reported cases in 1989) and IV drug users (7,970 reported cases in 1989), the rate of increase of AIDS patients between 1988 and 1989 in the U.S. was the largest for newborns (38% -- 547 reported cases in 1989, and for heterosexuals (36% -- 1,562 reported cases in 1989) (Centers for Disease Control, 1990).
Emotional Well-Being of Children and Adolescents

"There is human suffering on the part of young people, and it is growing worse." (Fordham Institute for Innovation in Social Policy, 1989).

How well are our nation's children and adolescents coping emotionally? Are there indications that the emotional well-being of U.S. youth has been deteriorating in recent years? According to the most recent, reliable data available, there is convincing evidence that the emotional well-being of U.S. youth has, in fact, declined.

A recent report issued by the Fordham Institute for Innovation in Social Policy indicated that the well-being of children and youth in this country has declined significantly over the past 18 years, with the incidence of child abuse and teenage suicide reaching record highs (cited in Education Week, November 1, 1989, p. 9). The Fordham Institute employs a "social-health index" to measure increasing and declining percentage rates for a number of youth problem areas. For the last year studied, 1987, the overall health index for children and youth fell to a record low, reflecting a continuation of the overall downward trend since 1973.

Youth Suicide

Data from the National Institute of Mental Health show that the rate for teen suicides has doubled since 1970, reaching its highest level in 1987 -- a total of 1,901, which represents nearly 18 teen suicides per 100,000 youth. The suicide rate has increased most significantly for teenagers ages 15-19 -- 50 percent from 1960 to 1975, and 20 percent from 1975 to 1984; the rate for younger adolescents (ages 12 to 14) although considerably lower, also has been climbing in
recent years, going from 1.3 to 1.9 deaths per 100,000 between 1978 and 1984 (National Institute of Mental Health, 1986).

Suicide attempts, rather than actual suicides, may provide a more realistic indicator of the overall emotional well-being of our nation's youth. Across all ages, it is commonly estimated that there are 8 to 10 suicide attempts for every suicide completion. For teenagers and young adults, however, the ratio is substantially higher, generally considered to be more in the order of 25 to 50 suicide attempts for every suicide completion. Females have been found to attempt suicide more than males, but males far outnumber females in suicide completion, the reason being that males generally use more effective means, e.g., guns rather than wrist-slash ing (National Institute of Mental Health, 1986, cited in Zill & Rogers, 1988, p. 88).

Racial Disparities. By a wide margin, suicide is more common among white teens than among black teens. In 1984, the suicide rate for white males ages 15 to 19 was nearly 16 per 100,000; for black males the rate was about 6 per 100,000. For the same year, 1984, the suicide rate for 15 to 19 year old white females was about 4 per 100,000, and for black females within the same age group, the rate was less than 2 per 100,000 (National Institute of Mental Health, 1986, cited in Rogers & Zill, 1988, p. 88).

Contributing Factors and Conditions. Several factors and conditions have been suggested as contributing to the rise in adolescent suicide in recent years, including changing family demographics, changing social mores, and lack of substantial employment opportunities. Some researchers and observers of the "American teenage scene" suggest that one of the major reasons why such large numbers of our adolescents suffer stress is that they frequently feel devalued or feel that they lack any real sense of empowerment.
In this regard, Ernest Boyer, Director of the Carnegie Foundation, commenting on the responses of teenagers' attitudes toward work and community service in a 1985 national survey, stated: "Time and time again, students complained that they felt isolated, unconnected to the larger world ... and this detachment occurs at the very time students are deciding who they are and where they fit." Marc Miringoff, Fordham Institute for Innovation in Social Policy, suggested a similar theme, and linked the rising suicide rate among teens to their "feelings of disconnection" ... "not feeling part of something larger" (cited in Gelman, Newsweek, Special Edition, Summer/Fall, 1990, p. 16).

To what extent does a teenager's family situation contribute to his/her likelihood of committing suicide? Zill and Rogers (1988) in their review of the literature and national data bases involving this question, offered the following analysis:

Suicide shows a tendency to "run" in families, perhaps as much for genetic as for environmental reasons. In addition, abusive families and families with persistently high levels of tension and disorganization seem to put their offspring at greater risk of self-destructive behavior. However, suicide does not seem particularly linked to divorce; about as many suicidal youngsters come from two-parent as from single-parent families. But rates of suicide do seem to be somewhat higher among young people who have lost both their parents through death or family breakdown (p. 89).

Other Indicators of Emotional Well-Being

In attempting to assess levels of emotional well-being, the actual number of suicides committed by youth may be a somewhat precarious and misleading indicator. For example, as suggested by Zill and Rogers (1988) the suicide rate "involves extrapolating from the extreme behavior of a small number of individuals to the alienation or unhappiness of large segments of the population. Such extrapolation may not be warranted" (p. 89).
Yet, there are other indicators which suggest that the overall emotional well-being of our nation's youth is in a state of decline. Survey data on the use of mental health services by children and adolescents indicate a significant increase in recent years, the proportion doubling that of the 1960s. Certainly, the greater availability of mental services could account for some of this increase. However, mental health workers throughout the country commonly report that they are seeing substantially larger numbers of children and adolescents -- and it is not unusual for many mental health facilities to have lengthy waiting lists of children and adolescents who have requested psychiatric and psychological help, or have been referred for mental health services by their parents or by school personnel.

Still another indicator of the emotional well-being of our nation's youth may be the number of students who receive special education programming services within the category of "emotionally disturbed" or "behaviorally impaired." During the 1987-1988 school year, 374,730 students nationwide were placed in these programs. Yet, many researchers suggest that our public schools are grossly underserving this population of students, estimating that, at best, only between 10 and 30 percent of children with emotional and/or behavioral problems are presently being actually identified (Knitzer, Steinberg, & Fleisch, 1990).
VIII. HOMELESS CHILDREN AND LACK OF AFFORDABLE HOUSING

Current estimates indicate that 25 percent of all homeless persons in the United States are children (U.S. Conference of Mayors, 1989). Estimates vary relative to the actual number of these children. According to the Department of Education, at least 450,000 children are now homeless throughout the country (1989 Report on Department of Education Activities and 1989 Status Report on Homeless from State Coordinators). However, based on other government data, a significantly greater number -- over two million -- are "precariously housed" (e.g., doubled-up families) and in imminent risk of homelessness.

According to a 1989 report of the General Accounting Office (GAO), "nearly 68,000 children age 16 and younger are homeless on a given night, sleeping in shelters, churches, abandoned buildings and cars, and various other settings." The GAO report estimated that another 186,000 children are "precariously housed" and "could be interpreted" as falling within the Stewart B. McKinney Homeless Act's (1987) definition of "homeless" (cited in National Law Center on Homelessness and Poverty Report, 1990).

The GAO findings cited above differ widely from an estimate of 220,000 school-age homeless children submitted in a separate report to Congress by the Department of Education. The DOE report was based on data collected from 42 state reports and acknowledged that the states' data collection methods varied widely, and further that its estimate was "very conservative" and "should be viewed with caution" (cited in Jennings, Education Week, September 13, 1989, p. 16).
Effects on Schooling

It is especially cruel and perplexing that it is our nation's children who are the most victimized by homelessness. Not only do most of them suffer from a lack of proper shelter but also from a lack of food, clothing, and opportunities to develop positive peer relationships. Many of these children, quite understandably, develop very poor self-images. They often are embarrassed, ashamed, and feel isolated and rejected. In addition, large numbers of homeless children do not attend school on a regular basis, if at all. And, for many who do attend school, they are at a distinct disadvantage because they typically lack "the space" necessary to study at "home."

I used to go to school -- no more. Me and my mother and two brothers live in an old car 'til it gets too cold. Then, we try to find some buildings where no one lives any more and sleep there for the night. I hate school now. When the teachers or other kids ask, Where do you live? What do I say? (Eric, 10 years old, Brooklin, Maine, from Davis & McCaul, At-Risk Children and Youth: A Crisis in Our Schools and Society, 1990, p. 12).

National Law Center on Homelessness and Poverty Report

A recent report, Shut Out: Denial of Education to Homeless Children, prepared by the National Law Center on Homelessness and Poverty (May, 1990), provides a comprehensive and detailed analysis of the myriad problems and difficulties faced by homeless children relative to their accessing public education in America. According to a 1987 survey of eight cities across the country, 43% of homeless children did not attend school (Child Welfare League of America, 1987). Another 1987 survey of 104 shelters across the country (The
Center for Law and Education, 1987) indicated that 34% of these shelters reported that homeless children faced barriers that shut them out from school. A 1989 DOE report estimated that 28% of all homeless children and youth did not attend school (DOE Report to Congress, 1989).

As suggested by the National Law Center on Homelessness and Poverty Report (May, 1990), the absence of education hurts homeless children in at least two ways. First, it deprives them of the stability and opportunity for growth associated with school, and second, it deprives them of the tools needed to break the cycle of poverty.

How are many homeless children denied access to education? The National Law Center on Homelessness and Poverty Report cited several of the most common obstacles which these children must overcome in order to attend school: (1) residency rules that impose permanent address requirements; (2) delays in the transference of school records; (3) burdensome documentation requirements; (4) testing delays which are required for entry into special education programs; (5) unrealistic guardianship rules; and (6) lack of transportation.

The "residency rule" requirement frequently poses the most difficult obstacle for homeless children to overcome. Typically, in order for a child to attend public school, he/she must be a "resident" of the relevant school district. In some cases, school districts have interpreted this rule to require a permanent address. A homeless child, by definition unable to meet this requirement, may be denied access to school. In other cases, a child, who upon becoming homeless moves out of the original school district, may be denied access because the districts disagree as to whether the child is a resident of the original or new school school district (National Law Center on Homelessness and Poverty Report, 1990, p. 5).
Some homeless families, hoping to spare their children the trauma of shelter life or unable to find accommodations in family shelters, may send their children to live with friends or relatives. However, schools require that either a parent or a legal guardian register a child. When the parents are not nearby and cannot afford transportation to the school, this requirement may effectively preclude homeless children from registering for school (National Law Center on Homelessness and Poverty Report, 1990, p. 6).

The National Law Center in its investigation of the Department of Education's implementation of the McKinney Act concluded that the DOE has failed to implement the McKinney Act properly; the states have failed to implement the McKinney Act adequately; and homeless children are still being shut-out of school (pp. ii-iii).

Recommendations for Improving Access to Schooling

Among the several recommendations for improving the access of homeless children to public schooling offered in the National Law Center on Homelessness and Poverty Report (1990) are the following:

(1) Each state should make clear that all homeless children, whether living in a shelter, in a car, or on the street, have a right to attend school. No residency requirements of any sort may be imposed to bar homeless children from attending school. Merely allowing a shelter to serve as a "residence" is insufficient. The imposition of a residency requirement is a clear violation of the McKinney Act;

(2) All school records should be transferred expeditiously. But, homeless children should be permitted to attend school before transfer occurs;

(3) Homeless children should not be required to produce documents in order to attend school. Remove birth certificate, guardianship, and other documentary requirements. School authorities should develop flexible alternatives to obtain any needed information;
(4) The Department of Education now prohibits states from spending McKinney Act funds on direct services to educate homeless children. There is no basis for this limitation in the Act and it should be removed.

(5) The McKinney Act must also be expanded to provide additional services to children who are homeless or who are at risk of homelessness, such as after school programs, tutoring, school meals and after-school meals, and school supplies (pp. 30-32).

"Roughly 40-50 percent of all homeless children are of pre-school age -- a total of over 296,000 children. All signs are that without swift, decisive action the existing educational problem is destined to grow much worse in the future" (National Law Center on Homelessness and Poverty, May 1990, pp. 6-7).

Lack of Affordable Housing

Children become homeless for many reasons. Clearly, one of the major reasons why so many children in America, especially those who are poor, find themselves without a permanent home has been the lack of affordable housing. Poor families typically have to expend a disproportionate amount of their income on rent -- if housing is available at all. "Income housing assistance is down 76 percent (adjusted for inflation) since 1980" (Children's Defense Fund, 1990a, p. 27).

Recent Changes in U.S. Housing Trends

As suggested by Hodgkinson (1989), several significant changes and trends in American housing arrangements have occurred in recent years, each of which has contributed to the current lack of safe, affordable housing for many of our nation's children and their families -- especially those who find themselves at the lower end of the income spectrum. Among these factors are the following:
In the past 15 years, housing costs have increased three times faster than income, resulting in a decrease in home ownership from 1980-87. First-time home buyers are especially hurt, as an average down payment in 1985 was 50% of a buyer's wages, up from 33% in 1978.

From 1984-86, households with real income of under $5,000 increased 55 percent, while the stock of low-rental housing units decreased by over one million.

The federal government has basically stopped building low income housing ... There are 8 million low income renters competing for 4 million housing units.

In 1975, rentals averaged only 23 percent of income. According to housing specialist Apgar, single parents today pay 58 percent of their incomes in rent; young single parents with children living with them are now paying 81 percent of their income in rent in 1988. According to A Place to Call Home, released in April, 1989, 45 percent of all poverty families pay more than 70 percent of their annual incomes in rent. The typical poor family of three would have $3,000 left to pay for everything else -- medical care, transportation, food.

Tax breaks for home builders have produced an over-abundance of condominiums for the wealthy, suburban mansions, and even second homes for vacations and retirement, but not low income housing. There are presently no incentives for building the latter.

Rental housing vacancies have increased from 1.5 million units to 2.7 million during the 1980's, but over 90 percent of the vacancies are in the high end of the market. Demand for low income units, caused by major increases in Americans who work full-time and yet are in poverty, will push rents on low income units up another 25 percent by 1993, given the realities of demand being twice the supply.

(Hodgkinson, 1989, pp. 5-7)
IX. CHILD LABOR VIOLATIONS

In contemporary American society one group of children and youth is at very high risk of abuse and exploitation. It is an extremely heterogeneous group -- and one which often lacks visibility and attention. These are the children who on a daily basis are in jeopardy because of labor violations.

There are large numbers of young people in the United States who currently are working under illegal and/or unsafe conditions. In 1989, U.S. labor officials discovered 22,508 children who were working illegally, the highest number since the Fair Labor Standards Act was enacted in 1938 -- and this figure is widely assumed to represent a very conservative estimate of the true number of children who fall within this category (Butterfield, 1990).

A report released on August 31, 1990 by the American Youth Work Center, a youth advocacy group, estimated that 200,000 children will be injured on the job during 1990. Further, it is estimated that 40,000 cases of child labor violations will be reported during 1990, double the number found in 1989.

America's children are among the nation's most widely exploited workers.

They live in poverty and neglect as they harvest our food, work in hundreds of dingy factories stitching "Made in America" tags into our clothes, assemble cheap jewelry in trailer homes and tenements, operate dangerous machines in restaurant kitchens and neighborhood stores. In town after town, they serve our fast-food meals late at night, prepare our muffins and coffee early in the morning...

Sometimes, they are left badly maimed and disfigured for life. Sometimes they are killed. Nearly all the time, they get tired, miss school, and are ignored.
A half century after child labor laws were enacted, millions of children are working long and frequently illegal hours across America. Records show tens of thousands are seriously injured and hundreds are killed every year as the nation's work force shrinks and young children are pressed into jobs that are often unsafe (Bruce D. Butterfield, "The Tragedy of Our Children", first of five-part series: Children at Work, Boston Sunday Globe, April 22, 1990, p. 1).

Types of Violations

Child labor violations have doubled in the last five years with the majority of these violations involving young teenagers who work excessive hours and/or under unsafe conditions. Some of these children work on farms and often must use unsafe equipment. Large numbers of them toil in inner-city garment district shops. Still others, in increasingly larger numbers, work excessive hours after school (or, some cases in lieu of school entirely) in our country's fast-food restaurants, neighborhood convenience stores, and hotels/motels. And many others are involved in both legal and illegal "homework". A rapidly growing number of these youth are migrants who attend school on a very irregular basis, if at all.

Illegal and unsafe work by youth takes place in all regions of America. According to labor and union officials, an estimated 7,000 children, some as young as 8 and 9, work daily in New York's garment industry, and thousands more work in Los Angeles, San Francisco, and Chicago. It is estimated that nearly a million migrant farm children work under the weakest child labor laws in the country and have been largely ignored by state and federal support programs (Butterfield, 1990, pp. 22).

Each year, 300 or more children under the age of 16 are killed and another 23,500 are injured while working in agriculture -- many of them on family farms in middle America. Between 1.5 million and 2 million children are believed to work in American agriculture, on commercial and family farms, and according to
Joseph Kinney, director of the National Safe Workplace Institute, Chicago: "It's our 1990s harvest of shame" (cited in Butterfield, 1990, p. 22).

However, as further stated by Butterfield (1990) "a more widespread and to many, equally shameful, child labor problem exists beyond the big city factories and the nation's farms. It is in America's backyard -- the small cities and suburbs -- that an explosion of service-sector jobs combined with a shortage of labor has pressed a wave of 12- to 17-year old youths into work in neighborhood stores, fast food restaurants, motels, grocery stores, and on suburban building sites" (p. 22).

Lack of Enforcement

Despite the existence of child labor laws designed to protect the health and safety of children and youth, these laws frequently are ignored by some employers. Also, during the Reagan era of deregulation there existed a clear de-emphasis on enforcement of child labor laws. There even was an attempt by the Reagan administration during the 1980s to increase the number of hours which 14- and 15-year olds could work. Although this attempt was unsuccessful, the ban on homework was lifted in several areas, including jewelry assembly, where home labor had been outlawed for decades because of child labor violations.

Regional Variance

According to the most recent General Accounting Office (GAO) report dealing with child labor violations during the 1987-1989 period as identified by the U.S. Labor Department, the New England states accounted for the largest percentage of violations (23%) while the smallest percentage of violations were recorded in two clusters of states: (1) Washington, Oregon, and Idaho (3%), and (2) Montana, Wyoming, North Dakota, South Dakota, Utah, and Colorado (3%). Of course, these percentages may be somewhat misleading in that they reflect only
"identified violations." They do not necessarily represent the true scope of the problem. Further, these figures clearly could be a reflection of the rigor in which child labor laws were enforced within those particular states.

It is encouraging that the U.S. Labor Department has launched a highly visible crackdown on child labor violators. Former U.S. Labor Secretary Elizabeth Dole publicly stated a major commitment to enforce child labor laws in the country and promised "a series of major sweeps by investigators to root out violations" (cited in Butterfield, 1990, p. 1). Regardless, this task will be a very complex one and some observers are not confident that the problem of child labor violations in America will go away very soon. It appears to be too widespread to allow for any simple, quick solutions. It will take more than rhetoric and promises. It will require both commitment and resources.

Proposals To Address the Problem

Bruce D. Butterfield, in the concluding article to his five-part series, *Children at Work* (*Boston Globe*, April 26, 1990, p. 27) suggested that the following actions are required in order to seriously address the problem of child labor violations in the United States:

1. Labor laws on the books must be enforced in a meaningful way. Instead of making appointments to check records in grocery stores during business hours, investigators need to visit workplaces at the times children work, and focus efforts first on the worst violations;

2. Enforcement efforts should be linked with school and social service programs to help child workers and their parents. In New York's garment shops, ordering children home when they are with their parents and have no place else to go, is not a solution;

3. Injuries to working minors need to be identified immediately through workers' compensation records and tougher reporting laws, and investigated promptly...
Federal limitations on the hours youths can work during school weeks should be extended to older minors -- students who often work long hours to the detriment of their school work. Many states set such limitations for 16- and 17-year olds, but the rules vary widely; A stronger work permit system for all minors is needed, one that is strictly administered by local school districts and monitored by labor officials. Such permits are required by many states, but school districts issue them with little if any inquiry into whether the job is illegal or the minor is working in abusive conditions; Meager federal farm safety programs must be expanded and funding allocated for a focus on children working on family farms. Last year, the federal government spent $180 per mining worker for safety programs but only 30 cents per farmer. Yet, the death rate on farms is higher than in the mines; and Social programs cut by the Reagan administration should be expanded with emphasis on farm worker children, many of whom live in poverty and do not attend school.

Benefits of Working

Certainly, youth employment can produce many benefits. By working, many young people are able to develop very valuable lifelong skills, attitudes, and behaviors. They can learn a sense of independence and are taught responsibility. For some youth, working brings them one of their real first successes in life. They are able to take pride in themselves and their work. Self-esteem often is remarkably enhanced through good work experiences. This is particularly true for those students who may not have had an especially rewarding school experience -- possibly even a very negative one.

Clearly, a major benefit of work for many youth and their parents is the money which is earned. Many students need to work to help support themselves and their family. Tens of thousands of students each year work to obtain money for their education. Work by youth can be both rewarding -- and in some cases -- a necessity.
To be sure, some young people work for other reasons: to pay for their "toys" -- their excesses -- and most certainly their "habits." Students who are "hooked on alcohol or drugs," for example, typically are forced to obtain the money necessary to support their habit either (1) by illegal or other means which may pose dangerous risks to their health, e.g., engaging in prostitution, or (2) by working excessive hours. In either situation, negative consequences usually result.

**Balance Needed**

Many students certainly are capable of balancing their work and school schedules. In fact, one activity can be very complimentary to the other. Yet, for a large number of students in contemporary American society, excessive employment and, most certainly, abusive, exploitative employment, is having an extremely negative effect upon both their school performance and upon their health -- physical and social/emotional.

The abuses and excesses of child and youth employment are the real problem -- not work itself. They clearly are placing an increasingly larger number of young people in jeopardy and they are posing serious health hazards for many of them. Granted, some young people in the United States may need to work excessive hours to support their habits; others may choose to work to "buy expensive toys." Yet, as stated by Reed and Sautter (1990), we should not lose sight of the fact that:

Many teenagers work long hours because they must do so in order to survive, not because they are trying to buy designer jeans or are exploring future careers in food services (p. K5).
X. SYNTHESIS OF MAJOR FINDINGS

The information presented in the previous sections of this document clearly show that a large and increasing number of children and youth living in America today are in jeopardy. What is even more disturbing, however, are projections that many of the conditions and developments which have contributed to the "current status" of children in this nation will likely continue and even intensify during the next 10 to 30 years -- unless substantial changes in attitude are developed, along with the necessary actions and policies to reverse many of the present cycles of disadvantage.

Major demographic, social, and economic changes over the past two decades have had profound effects on the lives of America's children and their families. Many of these changes have been presented and analyzed. Several emerging trends involving American children and youth likewise have been identified. We must not ignore these changes and trends as well as current projections regarding the "future status" of our nation's children and youth.

Following are some of the major findings, trends, and projections involving the current and projected status of children and youth in America which have been identified by recent studies, by youth advocacy groups, and by national commission reports. They are presented here in an effort to synthesize much of the information which has been reported in recent studies involving American children and youth.

*** Children continue to decrease as a share of the overall U.S. population. It is estimated that in 1990 children comprised 26 percent of the U.S. population as compared with 36 percent in 1960. By 2010, it is projected that children (ages birth-17) will represent only 23 percent of our nation's
Population. Children of minority groups will continue to grow as a proportion of all children, however, and are projected to represent 1 in 3 children by 2010.

The number of children approaching young adulthood in America -- those about to enter our nation's workforce -- likewise is decreasing. It is projected that in the year 2000, there will be 5.4 million (18%) fewer Americans between the ages of 18 and 24 than there were in 1980. Again, minority youths will make up an increasing proportion of this young work force: projected to be 30 percent in 2000 and 37 percent in 2020, as compared with 23 percent in 1980.

*** Our nation's schools will experience differential population shifts in the future both in terms of student age and minority representation. The number of all preschool children has increased by more than 3 million since 1980, but this number is expected to decrease again by 2000. The number of elementary school children continues to be low in 1990 when compared with 1970 enrollments, but it is projected that this number will increase through the year 2000 before again declining. The number of secondary school youth will decline through 1990, but then increase by the year 2000.

The numbers and proportions of minority children in our nation's schools are projected to rise significantly during the next two to three decades. Based on several indicators, including earlier childbearing and higher fertility rates of certain minority groups, especially blacks and Hispanics, some demographers project an almost 200 percent increase in our nation's population of blacks by the year 2020, and an almost 300 percent increase in the Hispanic population. It is projected that by the year 2000, 40 percent of our public school students will be representatives of some
ethnic/racial minority group. Many of these minority group children are likely to be poor.

Also, in recent years there has been a rapid increase in the number of immigrant students in our schools, especially those from Third World countries. Thus, it is projected that the "face of our nation's public schools", particularly those which are located in more metropolitan areas, will continue to change dramatically during the next twenty to thirty years. Our student population most likely will be a much more heterogeneous group, consisting of a much larger percentage of minority children than presently exists. Further, given past and current indicators and trends, it is likely that large numbers of these students will suffer from socioeconomic disadvantage, placing them at significantly higher risk for school failure.

Finally, two additional trends which are emerging in American society are likely to have a substantial impact on our nation's schools in the future: (1) the dramatic rise in the number of drug-related births which are occurring throughout our country, and (2) the largely unknown, but potentially devastating, impact of our nation's AIDS epidemic. It is likely that our schools will be required to provide programs for increasingly larger numbers of children and youth who are victims of these conditions in the future. As a society, we have just begun to realize how devastating these conditions can be not only to the victims themselves but also to their families and communities.

And, there is yet another emerging trend that is likely to have an impact upon our country's schools of the future. Because of recent medical advances, many children with severe medical problems, such as Trisomy 13 and Trisomy 18, are now surviving. These children too will be entering our nation's schools, and they will likely require intensive and expensive services.
*** Children represent the single largest and fastest growing poverty group in the United States. Of all persons considered to be poor in the United States, 40 percent are children. Nearly 20 percent of all children under the age of 18 presently living in this country are poor. Of all of the major indicators which are commonly associated with educational disadvantage, poverty is the one most significant indicator.

*** The younger a child is, the greater are his or her chances of being poor. Of all children age 3 and under, 23 percent are poor; nearly 22 percent of 3-5 year olds are poor; and more than 20 percent of 6-11 year olds are poor.

*** Being a member of a minority group significantly increases the chances of a child being poor. Most poor children in America are white. It is estimated that one in seven white children currently living in America are poor. However, black and Hispanic children are far more likely to be living in poverty households than are white children. In 1987, 45 percent of all black children were poor, while 39 percent of all Hispanic children were considered poor. Overall, the median family income of white children is generally considered to be one and three-quarters times that of Hispanic children and twice that of black children.

*** The gap between the rich and poor in the U.S. has widened considerably since 1980. A recent study by the Center on Budget and Policy Priorities showed that the richest 2.5 million Americans have nearly as much total income as the 100 million Americans with the lowest incomes. The bottom 40 percent of Americans will receive 14.2 percent of total after-tax income received by all groups in 1990, while the top 1 percent will receive 12.6 percent. During the 1980s, most affluent Americans received large income gains, while middle-income people gained little, and the poor fell even further behind.
Children living in female-headed households tend to fare the worse. In 1987, for example, 46 percent of female-headed families with children and approximately 60 percent of female-headed families with pre-school children were poor.

In addition, the proportion of children in poverty receiving AFDC assistance has decreased during the past decade. In 1987, only 56 percent of children living in poverty received AFDC assistance as compared with 73 percent in 1975.

*** The proportion of children born to unmarried women has been rising rapidly in the U.S. Among blacks, three out of five births now occur outside of marriage, despite a decline in the rate of births to unmarried black women. Almost 32 percent of Hispanic births and 16 percent of white births in 1986 were to unmarried mothers. The proportion of births to teens that occurs outside of marriage continues to increase. In 1986, 61 percent of all births to women under age 20 were non-marital.

*** Family living arrangements of children in the U.S. have changed dramatically in recent years. In 1955, 60 percent of all U.S. households consisted of a working father, a housewife mother, and two or more school-age children. In 1985, only 7 percent fit this pattern. As of 1988, nearly 25 percent of all U.S. children were living in single-parent families, the mother in over 90 percent of the cases. Living in a single-parent household has been well documented as one of the major indicators for placing children at risk for educational and broader social and economic failure.

Black and Hispanic children are more likely than non-minority children to be living in single-parent families. As of 1988, the proportion of children living with their mothers only was 51 percent among black children; 27 percent among Hispanic children; and 16 percent among white children.
Nearly half of all marriages today end in divorce, and more than a million children per year see their parents get divorced. Although divorce rates have stabilized in the United States since the late 1970s, large numbers of children each year continue to experience marital disruption. In recent years, there also has been a substantial increase in the number of step, adoptive, and foster families. And, for the first time, our nation has witnessed the emergence of gay couple family configurations.

*** Parental level of education has increased in recent years, but minority parents' level of education continues to lag behind the level of nonminority parents. One of the major indicators associated with educationally disadvantaged children and youth is the educational level of their parents, especially that of the mother. Children of poorly educated mothers have been found to perform worse academically and leave school earlier than children of better educated mothers.

Today's children are more likely than past generations of children to have parents who graduated from high school, increasing from 70 percent in 1979 to 78 percent in 1988. Among both black and Hispanic students, parent education levels have increased during the 1980s although they continue to lag behind those of white parents. For example, in 1988, 82 percent of all white elementary-age children had parents who had completed 12 or more years of education, as compared with 75 percent in 1979. By contrast, in 1988, 69 percent of all black elementary-age children had parents who had completed 12 or more years of education, compared with 51 percent in 1979. For Hispanic elementary-age children, in 1988, 46 percent had parents who had completed 12 or more years of high school, as compared with only 41 percent in 1985 (1979 comparable data are not available for this group).
Although specific estimates vary, the number of children who have no permanent shelter has increased significantly in recent years. The negative consequences of not having a safe, permanent residence are multiple and complex, not the least of which is lack of access to a quality education. Young children in families represent the fastest growing single group of homeless in America. Although there are many reasons which contribute to a child being homeless, one of the major causes is the lack of safe, affordable housing.

Poor families must expend a disproportionate amount of their income on rent -- if housing is available at all. It is estimated that 45% of all poverty families pay more than 70% of their annual income in rent. The federal government basically has stopped building low income housing, and income housing assistance has been decreased significantly since 1980. In brief, the demand for safe, affordable housing in America today far exceeds the supply.

The proportion of children with working mothers has increased substantially in recent years. For children under age 6, the proportion has increased by nearly 80 percent since 1970, from 29 percent to approximately 51 percent in 1988. As of 1988, over half of all married mothers with infant children 1 year old or under were working or actively looking for work. In 1975, the comparable proportion was 31 percent; and in 1970, only 24 percent. By the time their youngest child is 2 years of age, about 60 percent of today's married mothers are in the work force.

As increasingly larger numbers of mothers, married or unmarried, choose, or are forced to, enter our nation's labor force, affordable, safe daycare becomes a critical issue. In order to survive economically, in today's society, it is often necessary for both parents to work. The situation is even more critical for single-
parent mothers or fathers. The lack of availability of safe, affordable, flexible daycare arrangements has surfaced as a major issue for young families in the early 1990s. Affordable daycare is likely to become an even more significant issue in the future.

Figure 9 shows the rising percentage of children with mothers in the labor force.

![Rising Demand for Childcare](image)

Figure 9. Source: *S.O.S. America: A Children's Budget, 1990, Children's Defense Fund.*

***America continues to lag far behind most other industrialized countries regarding maternal and child health care.*

Although most of our nation's children are in good health, many key health indicators clearly point toward a decline or stagnation of progress in maternal and child health care during the 1980s. One in five children in the U.S. has
no health insurance. Our nation ranks nineteenth in the world in infant mortality and twenty-ninth in low-birthweight births.

While 95 percent of the U.S. one-year olds were immunized, 14 other nations had better rates. Poor, minority children are especially vulnerable in this regard. For example, the infant mortality rate remains nearly twice as high among black infants as among white infants. Cutbacks at both the federal and state levels during the 1980s in major programs designed to provide poor pregnant women with early health care and their infants with early medical care have been widely cited as contributing factors to the "poor health record" of many of our country's children and youth.

*** American students' level of academic achievement continues to be disappointing. Half of our nation's 17-year-olds do not have reading, math, and science skills that would allow them to perform moderately complex tasks such as summarizing a newspaper editorial or calculating decimals. The high school graduation rates in our country have increased by only 3 percentage points during the past two decades. Approximately 25 percent of U.S. all students do not complete high school.

The achievement gap between minority and white children narrowed during the past decade, but not as much as during the previous two decades. Poor and minority students together currently make up approximately one-third of the school-age population in America. Although they enter school only slightly behind their more advantaged peers, poor and minority children fall further behind as their schooling progresses. By third grade, blacks and Hispanics are six months behind; by eighth grade, they are two years behind; and, by twelfth grade, they are more than three years behind.

Poor teenagers are four times more likely than nonpeer teens to have below-average basic skills, and they are three times more
likely to drop out of high school. Whether they graduate or not, black and Hispanic 17-year olds have reading and math skills about the same as those of white 13-year olds. In science, their skills are about the same as those of white 9-year olds.

In addition to the above trends involving the current status of children in America, many of our nation's youth are in jeopardy due to other personal, family, and societal factors and conditions. Alcohol and drug abuse place many youth at high risk. Other youths are victims of physical and/or sexual abuse and neglect. Still other children increasingly find themselves living in unsafe neighborhoods in which the threats of violence, even homicide, are everyday realities.

For yet other large and growing numbers of children, their limited proficiency in the English language adversely affects their ability to perform successfully in many of our nation's schools. Then, there are those children and youth who are victims of child labor violations. Many contemporary American youth are working under illegal and/or unsafe conditions.

Attempting to synthesize the current and projected condition and status of our nation's children and youth is a complex task -- one which can lead to overly simplistic or one-dimensional interpretation. Clearly, the majority of children and youth living in America today appear to be physically healthy, relatively well adjusted emotionally, and are likely to become healthy, well-adjusted, and productive members of society.

However, there is growing evidence that an increasing number and proportion of our nation's children currently are not as fortunate. Unless certain basic changes occur in the lives of these
children and their families, the prognosis for both these children, their families, and American society at large is anything but good.

The litany of facts and trends has become all too familiar. Despite the fact that the United States continues to be one of the richest and most powerful nations in the world, increasingly larger numbers of the most vulnerable and precious segment of our society -- our children -- are in the greatest jeopardy. As a group, children represent the poorest, most vulnerable segment in America today.

If recent trends continue, the plight of our nation's children predictably will worsen in the next ten to thirty years. For example, it is projected that by the year 2000, one in every five births, and more than one in three black births, will be to a mother who did not receive early prenatal care. One in every five 20-year old women will be a mother, and more than four out of five of them will not be married.

A growing proportion of U.S. children are being born to and reared by young, unmarried women who are poorly educated and do not have the means to support themselves, let alone their children. Young children, especially ethnic/racial minority children, are particularly vulnerable to economic, social, and educational disadvantage.

In recent years, American society has undergone major changes in its labor market, wage structures, culture, and demographics which have had a significant influence on the family. The incomes of young families have plummeted. Affordable housing is difficult, if not impossible, for many young families to obtain. Single-parent families have become increasingly common. Most of these single-parent families are headed by women whose earnings tend to be far less than men. Safe, affordable childcare often is not available. Even in
those family situations in which both parents are in the labor force, the cost of quality child care frequently is exorbitant. The result:

These conditions and trends have contributed to a substantial increase in the amount of stress which is placed on many American families. As parents become more stressed in the struggle to survive economically, their children increasingly become innocent victims and targets.
XI. PERSPECTIVES AND RECOMMENDATIONS

What can be done to solve the problems of at-risk children and youth in the United States? First, and perhaps foremost, we need to move beyond the awareness level. Reports such as this may be helpful in that they can serve to heighten awareness levels regarding the current status and the projected future status of children in the United States. The information may be shocking to some readers. It may even cause them to become very angry. Much of the information cited is not necessarily new. For several years now trends which point toward the deterioration of the overall well-being of youth in this country have been emerging. Both scholarly reports and media sound bites have presented to the American public information which portrays the current status of children as a fairly dire one.

Clearly, the problems are complex. Simple solutions are not likely. Action must be taken on several fronts if we are to have any real hope of reversing many of the trends affecting children and youth which have been emerging during the past decade. The cycle of disadvantage -- educational, social, and economic -- which affects a rapidly growing number of children and families in this country will not easily be broken. Yet, unless concerted and immediate efforts are undertaken to accomplish this very objective, the resulting negative educational, social, and economic consequences are indeed very predictable.

Demographers, social scientists, educators, and advocates for various disadvantaged populations have been warning us for several years that unless changes occur in many of our national, state, and local policies, we as a nation are headed for internal upheaval, if not destruction. Yet, some will reply to these warnings that they represent little more than
inflammatory rhetoric, often designed to gain political or professional prestige or advantage. Others will retort: "The Doomsdayers are at it again -- predicting disaster -- we've heard it all before; yet the sky hasn't fallen, has it? We have survived predicted disasters in the past, and surely we will again."

To be sure, none of us can predict with any degree of specificity what the true status of children and youth will be in the year 2020 or the year 2000, or for that matter, the year 1992. Totally unforeseen events and occurrences -- political, social, economic, or even natural -- could drastically alter the shape of American children and American society. Nevertheless, given what we now know, it seems imperative that we (1) give serious consideration to emerging trends and projections, and (2) take those actions which are necessary to reverse many of the present conditions and trends which clearly are devastating to a large and increasing number of our nation's children and their families. We must do this to help shape the future of an American society which will be more economically sound, more educationally effective, more socially equitable, and more morally defensible.

The 1990s present this nation with a rare combination of challenges and opportunities. The social disorganization, poverty, crime, and hopelessness that grip many urban neighborhoods -- and the new stranglehold of drugs -- threaten to relegate whole groups of children to permanent second-class status (National Commission on Children Interim Report, 1990, p. 45).

Awareness of the Problem

With the exception of a few skeptics, the growing problem of the disadvantaged population in America is readily apparent to policymakers, bureaucrats, educators, and the public at large. Our awareness level has been raised by the barrage of national reports, media coverage, and conferences which
have focused unprecedented attention on the problems of poor children, homeless children and families, teenage pregnancy, the rise in adolescent violent crime, school failure, and drug use.

Studies and reports have warned the American public that unless the cycle of disadvantage is broken, we will most certainly suffer personal, social, and economic harm. The likely negative consequences for not dealing with the problems of "the underclass" have been discussed in both the professional and lay literature. In addition, many observers have cautioned that for economic reasons alone American society cannot continue to ignore the dangerous trends which have been emerging relative to the rapid growth of disadvantaged populations in this nation.

Poverty, school failure, teenage pregnancy, drug abuse, etc. have been demonstrated to be clearly interrelated. The message has been consistent and growing in its urgency: We and our children will all pay for our society's failures to provide quality educational, social, medical, and vocational programs for those children and youth who are disadvantaged and considered to be at "high risk." In this regard, Schorr (1989) suggested:

We all pay to support the unproductive and incarcerate the violent. We are all economically weakened by lost productivity. We all live with fear of crime in our homes and on the streets. We are all diminished when large numbers of parents are incapable of nurturing their dependent young, and when pervasive alienation erodes the national sense of community (p. xix).

For the vast majority of Americans, therefore, lack of awareness is not the major problem. If this is true, then, why haven't we as a nation been able to solve the problems of economic, social, and educational disadvantage? Clearly, the problems are complex, and they do not lend themselves to quick-fix, simple solutions. Further, it is recognized that there are some individuals who feel little,
or no, responsibility to take action to improve the quality of life of disadvantaged children and families.

Some view the "problem of disadvantage" essentially as a problem for them. In brief, it is their problem. Others blame poor, disadvantaged families for their plight, believing that they "get what they deserve," frequently attributing their condition in life to a lack of motivation or a lack of desire to remove themselves from their situation. It is our firm conviction, however, that most American citizens do not harbor these attitudes and feelings toward the disadvantaged. Rather, what often prevents positive actions from being taken in this regard is the perpetuation of myths, false assumptions, and incorrect beliefs involving the disadvantaged which presently exist.

Need To Confront Myths and Negative Attitudes Involving the Disadvantaged

Following is a discussion of three of the most common myths and false assumptions involving disadvantaged populations as well as past and present efforts to assist them. Often, these myths and false assumptions prevent positive actions from being taken to help disadvantaged children and their families.

(1) The problems are too complex for any reasonable solution:

Many observers believe that the multiple problems faced by most disadvantaged children and their families are so pervasive that it is impossible for even the best intentioned of social service agencies to assist them. Schorr (1989) argued that this belief is a myth, and that poor families can, in fact, be helped to break the cycle of economic, social, and educational disadvantage that currently engulfs them. However, because many of the programs presently in place to
assist this group are too fragmented, underfunded, and/or constrained by bureaucratic regulations and guided by ineffective policies, they are largely unsuccessful.

Schorr (1989) argued strongly that the disadvantaged are not beyond hope and help -- and further, that this belief system represents a myth which often works against effective problem resolution. She stated that traditionally we have relied on short-term measures to remedy health, social, economic, and educational deficiencies for the poor and disadvantaged -- most of which have proven to be largely unsuccessful. More long-term investments in the lives of our nation's most vulnerable citizens are essential.

(2) Many social programs not only do not help the disadvantaged but they may, in fact, do harm to this population:

There exists a belief system shared by some individuals that most of our nation's social policies which are designed to help disadvantaged persons improve the quality of their lives, in reality, serve as impediments and actually prevent them from solving their economic and social problems. As stated by Schorr (1989), "the specter of investments in human services actually doing harm is given an air of reality because so many people are in fact worse off -- after twenty years of vastly increased social spending. More children are poor, more children are growing up without stable families, and more young people are out of work" (p. xxiv).

Criticisms of social policies

One of the most widely recognized critics of American social policies designed to aid the poor and disadvantaged has been Charles Murray. In his 1984 book, Losing Ground, Murray contended that the social policies of the Great
Society changed the rewards and penalties that govern human behavior, and thereby brought about increasing rates of joblessness, crime, out-of-wedlock births, female-headed families, and welfare dependency. Faced with the choice between an unattractive job and a welfare check, Murray stated that it is "rational on grounds of dollars and cents" for poor unmarried women to decide to have babies. Only the elimination of support from outside the family would discourage young women from pregnancy and encourage both young men and young women to work for low wages and accept the discipline of the workplace -- because the alternative would be so grim (cited in Schorr, 1989, pp. xxiv-xxv).

Defense of social policies

Many scholars have refuted Murray's argument that most welfare assistance in fact works against the very population that it is theoretically designed to help (e.g., Danzinger & Gottschalk, 1985; Ellwood & Summers, 1986; Schorr, 1989; Schwarz, 1988; Wilson, 1987). As an illustration, Schorr (1989) suggested that the evidence does not support Murray's contentions, and she offered two specific examples:

First, countries with far more generous social welfare programs than the United States -- Germany, Denmark, France, Sweden, and Great Britain -- all have sharply lower rates of teenage births and teenage crime; and

Second, if welfare benefits figured in the decision to have a baby, more babies would be born in states with relatively high levels of welfare payments. But careful state-by-state comparisons show no evidence that Aid to Families with Dependent Children (AFDC) influences childbearing decisions; sex and childbearing among teenagers do not seem to be a product of careful economic analysis (p. xxv).

(3) We lack sufficient knowledge to develop successful programs and interventions:

The multiple problems faced by disadvantaged children and their families frequently are perceived of as not only being overwhelming and possibly beyond
remedy, but also what further complicates the development of effective policies, programs, and practices is the false assumption that we do not know what specific interventions really are effective with this population. We already know what works. This is not the real problem. Rather, the major problem lies in our individual and collective failures to apply what we already do know -- in a comprehensive, intensive, and well-coordinated manner.

What works

There exists ample documented evidence, for example, that quality early childhood intervention programs help disadvantaged children and their families. Probably the most visible example in this respect has been the twenty-five year success enjoyed by Project Head Start. Also, there have been numerous other projects and programs, which have operated on a much smaller scale than Head Start, but which likewise have demonstrated the positive outcomes of quality early childhood intervention programs -- for example, The Early Training Project in Tennessee; the Perry Preschool Program in Ypsilanti, Michigan; the IDS Harlem Project in Central and East Harlem (cited in Schorr, 1989, pp. 192-197); the Beethoven Project in Chicago; and the Parents as Teachers Project in Missouri (cited in Reed & Sautter, 1990, p. K9).

We know that early and frequent prenatal care can significantly reduce the risk of low birthweight babies. We know that pregnant teenagers who are encouraged (allowed) to remain in school have a much better chance of completing their educations and are far less likely to drop out. We know that quality child care programs and parenting classes held in schools allow many young teenage women to complete their educations. We know that appropriate sex education courses are effective.
We know that early health care, including necessary immunizations, along with proper nutrition, can prevent the occurrence of serious or even fatal diseases in children. We know that children who are homeless or precariously housed are at a major disadvantage for developing those academic, social, and vocational skills necessary to lead fulfilled and productive lives.

We know that intensive instructional programs conducted in a school climate which is safe and conducive to both learning and promoting positive self-esteem can remarkably enhance the chances of disadvantaged children to become literate, self-assured, and eventually productive adults. And, we know much more! Lack of knowledge is not the real issue. The willingness to demonstrate the necessary commitment and to procure the necessary fiscal and human resources to solve the problem -- is the real issue.

Specific Policies and Actions

What actions are needed? New, creative national policies which promote the overall well-being of children and their families must be developed and implemented as quickly as possible. Strong and effective policies are needed in several areas, especially those involving the physical, emotional/social, economic, and educational well-being of our nation's children and youth. Policymakers already have much of the information which is necessary to develop these policies. What is required is the courage, willingness, and the resolve to act.

The rhetoric regarding the plight of the disadvantaged is wearing thin -- most of all for its victims. More resources, both fiscal and human, are needed to implement those policies which are necessary to improve the quality of lives of disadvantaged children and their families.
Less rhetoric and more resources are required. Of course, it is "safe", prudent, "politically astute", and often, necessary to offer the usual qualifying statement in regard to the suggested need for additional resources: "Money alone cannot solve the problem."

Especially in these times of fiscal restraint, "prudent spending is necessary." Certainly, "new monies" may not be readily available, requiring, therefore, resource allocations. This will call for a re-evaluation of our priorities particularly at the national level, but also at the state level. However, to suggest that the well-documented cycles of socioeconomic and educational disadvantage can be broken without the infusion of substantial new fiscal resources is not only naive but also certain to guarantee their perpetuation.

In this section, we address some of the specific policies and actions which are needed to help disadvantaged children and their families.

(1) Need for Increased Agency Collaboration

Major changes in the collaborative efforts of agencies which serve children and families are needed. While in recent years, communication has improved somewhat among certain federal, state, and local agencies which serve socially and educationally disadvantaged children and their families, there continues to exist unnecessary fragmentation and duplication in many areas. Yet, as Hodgkinson (1989) warned: "Communication is no longer enough for the urgent problems we face. Service organizations must begin to see their interdependence across functional lines. The best way to do this is to perceive the client as the most important part of the organizations who provide services to that person, family, or group" (p. 1).
With respect to the need to develop more effective models of collaboration among service providers, Hodgkinson (1989) further stated: "educators at all levels need to become familiar with other service providers at their level as they are serving the same children and families as clients. It is painfully clear that a hungry, sick or homeless child is by definition a poor learner, yet schools usually have no linkage to health or housing organizations outside those run by schools themselves" (p. 1).

The specific role that schools should play within the overall collaborative effort to provide more effective programs to disadvantaged children and their families currently is not particularly clear. Different views obtain. For example, Michael Kirst, a strong advocate of the need for increased and improved collaboration among agencies serving at-risk children and their families, argued: "there has to be some way people come together around those services. The child with multiple needs is like a pinball in a pinball machine bouncing from one place to another" (cited in Education USA, January 8, 1990, p. 135). Kirst suggested that "the school can be a 'broker' or a catalyst to bring service providers together ... but schools should be involved in the 'orchestration of services' rather than trying to deliver all of the services" (cited in Education USA, January 8, 1990, p. 136).

However, Harold Hodgkinson, noted American demographer and an equally strong advocate of service-provider collaboration, cautioned against schools being the center of collaboration: "There is money in all agencies for children but instead of thinking of the child as the client, all services have a czar who controls their budgets. Many supporters of collaboration say schools are the obvious place where services can come together ... but this will create another 'czar' and 'miss the point' of collaboration ... the whole point is to create a new
system ... the idea is to have 'leaders of all the bureaucracies meet a couple of
times a week and launch different projects'" (cited in Education USA, January 8,
1990, p. 141).

Regardless of the precise methods by which schools are involved in the
overall collaborative process, it is critical that (1) meaningful collaboration take
place among all agencies and bureaucracies who are involved with disadvantaged
students and their families, and (2) educators be actively involved in this process.
Not to do so will most assuredly lead to the perpetuation of the current system -- or
lack of a system -- and guarantee the continuation of fragmented, inefficient, and
duplicative services to these children.

More effective interagency collaboration is needed because the problems
typically confronted by disadvantaged children and their families are extremely
complex, requiring the simultaneous services of several service providers.
However, real cooperation must be sought -- much more than the rhetoric
involving cooperative interface, which often translates into "interface without
cooperation" along with the token "paper cooperative agreements" which already
are in place at many levels -- and which have proven to be largely ineffective.
Most traditional approaches in this regard have not worked. New, creative
approaches are needed -- ones which focus on the child as a growing and
developing human being who may have multiple needs across several domains.

(2) Health Care

Despite having spent $551 billion dollars on health care in 1988, the United
States continues to show a dismal record in several health-related areas as
compared with many other countries, many of whom are significantly "poorer"
in both fiscal and technological resources. Thirty-seven million Americans
have no health insurance or coverage. Twelve million of these
Americans are children. Poor children and their families are far less likely to have adequate health insurance, with only about two-thirds of children from families below the poverty line estimated to have some form of health insurance coverage. Nearly one-half of all poor children do not receive benefits from Medicaid.

The dismal record of our nation's infant mortality, young children mortality, and low-birthweight rates has been thoroughly documented in this report. The lack of early and adequate prenatal care has been clearly linked to infant mortality as well as to other severe long-term health consequences for both the mother and child. Poor, racial/ethnic minority infants and children, as well as their mothers, are especially unlikely to receive early health care. During the 1980s, federal dollars for prevention of many childhood diseases, e.g., immunization programs, were cut back, contributing in large part to the present disturbing rise in the number of childhood diseases which "we thought we as a nation had conquered."

Certainly, the current health picture is not all bad in America. Definite progress has been made in some major areas. For example, despite the fact that we continue to trail well behind most other developed countries, there has been a reduction in neonatal mortality. Also, because of medical advances and early prevention programs, children with severe medical impediments are now living longer.

Of course, even within this area, problems arise -- especially with respect to quality of life issues as well as the ability and readiness of our schools to adequately serve these children once they reach school age.

Perhaps the greatest, and potentially the most devastating, long-term health threat to our nation's infants and children, however, has just begun to surface -- and its real impact is largely unknown at this time: pediatric AIDS
and drug-related births. Again, particularly in the case of drug-related births, we witness the interactive effects of economic and social disadvantage. Poor pregnant women are far less likely to receive early and adequate medical attention and prenatal care. Poor, black mothers, especially, are vulnerable in this regard. The fact that black infant mortality in the United States is twice the rate of whites clearly relates to the lack of early, preventive health care.

Undeniably, for those Americans who can afford it, "high end" medical care is among the best available anywhere. Certain groups, however, are systematically vulnerable: (1) children whose parents may not have health coverage, or when they do, the coverage may be limited to the worker and not dependents; and (2) older people, as Medicare now covers less than half of elderly health costs; while Medicaid is a "safety net" for many, one must become financially indigent before many of its benefits can be activated (Hodgkinson, 1989, p. 13).

Medical costs are escalating at a rapid rate in this country. This factor, when combined with changing demographic patterns, does not portend well for the future health care of many of our nation's most vulnerable citizens: its poor children and its elderly citizens. Our nation is becoming "older". As increasingly larger numbers of our citizens are living longer, they will require medical care costing substantial sums of money -- just at the time in their lives when most of them will be retired and living on fixed-incomes.

Similarly, as cited earlier in this document, the fastest growing population of poor people in America are young children. Currently one in five American children lives in poverty. If the present trends continue, and there is no plausible reason to suggest that they won't, it is projected that one in four children will be living in
poverty by the year 2000. Clearly, these two vulnerable and most needy groups (the very young and the elderly) will likely be competing with each other for diminishing health care resources during the next decade -- and seemingly long thereafter -- unless our present health care system in America receives a drastic overhaul.

Isn't it finally time to give serious consideration to the establishment of a national health care system in the United States which will ensure that every citizen, regardless of age or income level, will be able to receive adequate health care -- in both prevention and treatment domains? Certainly, the implementation of such a system will be expensive. And, most certainly the same objections to this model of health care which have been heard for many years -- and from the same vested interest groups -- will be heard again: "prohibitive cost", "reverse discrimination", "unfairness to businesses and employers", charges by the American Medical Association that "socialized medicine" would not only be unworkable in this country but also that it will not guarantee better or more adequate medical care for those 'most in need', and may even result in an overall lower quality of care for this population.

The larger and more pertinent question, however, may be: Can we as a country afford not to establish a national, subsidized health care program? The ultimate fiscal costs which will result should we fail to do so may far exceed any costs involved in its implementation (e.g., expensive long-term treatment and hospitalization for many preventable diseases and medical conditions; countless lost hours, weeks, and even years of tax-generating income to the economy because of poor health, prolonged illness etc.). And, there is yet another more basic reason to give strong consideration for the development of a
subsidized national health care program -- it would be the most compassionate and humane action to take.

(3) New Policies Are Needed for Children and Families

Breaking the cycles of social, economic, and educational disadvantage will require action on several fronts. Clearly, this represents a mammoth task which must involve the commitment of policymakers, advocates, legislators, educators, as well as the American public. To accomplish this goal a reevaluation of many current values and programs is necessary.

A reallocation of current national, state, and local fiscal resources likely will be necessary. In addition, new financial resources will be required. Most of all, there must exist a firm commitment to act. Our nation's people must believe that it truly is in their own and their nation's best interests -- socially, economically, and educationally -- to collectively work toward improving the overall well-being of children and their families -- all children and families regardless of socioeconomic, educational, geographic, and other demographic differences.

Especially, however, new policies are needed to improve the status of those children and their families who are currently and/or projected to be disadvantaged as measured by one or more of the common indicators. As documented several times in this report, children, especially those children, birth to five, represent the largest and most rapidly growing population of the poor in the United States. Poor children whether they live in inner cities or remote, rural regions are far more likely to be educationally disadvantaged and they are at the greatest risk of school failure. Many racial/ethnic minority children, especially blacks and Hispanics, because
in large part they are also more likely to be poor, are at much higher risk of educational disadvantage and school failure than are their white peers.

Also family configurations and patterns affect the chances of a child becoming educationally disadvantaged. Children in families headed by a single female parent, particularly a poorly educated mother, are more likely to suffer from educational disadvantage. Again, the indicators of educational and social disadvantage are not independent of each other. Children living in households headed by a single female, for example, are more likely to be poor, in large part because the total household income earning power is generally substantially less than that of two-parent families.

Poverty affects all races and ethnic groups. It transcends all geographical boundaries. Its emotional and social toll can be insidious. Some will claim that poverty in America cannot be reduced and certainly, not eliminated. In a similar vein, some also will claim that "many people currently living in poverty want to remain poor -- that they choose to live this way, and if they really wanted to, they could pull themselves out of this socioeconomic situation by their own hard work."

Further, our nation currently is faced with possibly one of its most embarrassing and greatest challenges ever: homeless children. Homeless children living in families represent the single largest and fastest segment of our nation's homeless population.

There exists a degree of cynicism on the part of some Americans toward homeless children and families. Again, this particular population is perceived of by some as "choosing to be homeless" -- not as the victims that the vast majority of them truly are. There will always be skeptics.

Some individuals will continue to harbor convictions (biases) about those among us who are poor, homeless, emotionally ill, or physically different. There
will continue to exist the perception on the part of some Americans that "some people choose to be hungry, poor, or homeless" -- and further, that many of them are "ripping off society." These perceptions, or belief systems, represent a 'let them be' and/or "they are better where they are" mentality.

These cynics and skeptics obviously have not really looked into the eyes of a poor, hungry child who is living either in a woefully substandard apartment, or worse, living on the street. Nor likely have they talked with a young married couple, both of whom are working at low-level paying jobs, and who are attempting to support three young children. This same family is struggling to survive but is finding it practically impossible because of exorbitant rental costs and reduced benefits. This family also cannot afford any health insurance and is unable to obtain any health insurance coverage from their employers. They represent the working poor. Do the skeptics and cynics really believe that those individuals living in the situations described above are choosing to live under these conditions?

The cost of eliminating poverty

Of course, it will cost money to eliminate, or even substantially reduce, poverty in America. To suggest that it won't is totally naive. How much money? There are so many factors and variables which must be considered in this regard that one can only speculate, at best, what the total dollar figure would be. Nevertheless, it is reasonable to ask this question with respect to such an important area, and some advocacy groups have attempted to respond with projected dollar amounts.

For example, the Children's Defense Fund (1990a) estimated that, based on 1988 figures, relative to the number of persons living below the federal poverty line:
Eliminating poverty in families with children would cost $26.1 billion.

Eliminating poverty among all persons would cost $53.8 billion (p. 18).

At first glance, 53.8 billion dollars seems unfathomable and overwhelming to most American citizens, and 26.1 billion dollars likewise represents a considerable sum of money. Most of us cannot even begin to identify with the magnitude which these figures represent, leading to the quite understandable conclusion by many that the cost of eliminating or even significantly reducing poverty in this nation is prohibitive.

Need to Consider Priorities and Values

When the costs of seriously addressing the national crisis of poverty is compared to the financial commitment our national government has made to bailing out our unregulated savings-and-loan industry (conservatively estimated to be $400 billion dollars), they pale in comparison. This decision was made by our national leaders. And, strangely, up to this point in time, there appears to be very little negative reaction from the American public regarding this situation.

Likewise, many of our nation's bankers and business leaders seem very willing to "bite the bullet" when it comes to providing hefty financial support for one of their own. The present financial predicament of billionaire, real-estate tycoon, Donald Trump, provides a good example. In an attempt to save Trump from default or bankruptcy, his bankers have placed him on a bank-supervised personal allowance of $450,000 a month.

Donald Trump represents power. Donald Trump represents wealth. Power and wealth beget power and wealth in this country. Free enterprise is heralded as the American way. The Donald Trumps of our nation often are not criticized nor
rejected -- they are admired. Yet, contrast Trump's situation to that of tens of thousands of Americans who each day suffer from the physical, social, and emotional consequences of living in poverty.

Real estate experts estimate that interest and upkeep on Trump's mansions in Connecticut and Florida run $4 million dollars a year (USA TODAY B1, June 26, 1990). Again, the contrast is painfully obvious to all of the "Rachels," as so poignantly described by Jonathan Kozol (Rachel and Her Children: Homeless Families in America, 1988), who currently are forced to endure not only the socioeconomic disadvantages but also the personal humiliation of being homeless in present-day America.

To be sure, the above savings-and-loan and Donald Trump analogies to poverty and homelessness in this nation are overly simplistic. Clearly, they do not represent all of the factors and conditions which must be considered if we are serious about reducing poverty in America. Most proponents of supply-side, trickle-down economic policy even will argue that should the present-day efforts to bail out the savings-and-loan industries or to "save the Donald Trumps of this nation from bankruptcy" fail, the present and future conditions of those U.S. citizens living in poverty will worsen, arguing that there will be less money available to help them.

Although it is highly unlikely that the majority of those children and families who are living at poverty or near poverty levels would accept this argument, it is clear that there are no simple solutions to the elimination of poverty in this nation. And, most certainly the offering of what possibly are poor analogies alone will not bring about a solution to the problem. The issues are indeed complex and they will require sound, well-developed policies to be implemented at all levels of government -- national, state, and local.
Nevertheless, as a nation, we must first be willing to reassess our basic values, attitudes, and priorities. We cannot be lulled into believing that the admittedly difficult task of eliminating or "substantially poverty among our children and families "is impossible to accomplish." Nor, should we be convinced that there is simply not enough money to reach this goal. The task can be accomplished. There is sufficient money. However, we must want to do it. We must sacrifice to do it.

We must be willing to write the checks that guarantee poor children a real chance of success, from the moment they are conceived until the moment that they receive as much education as they can absorb. Only then will the tragedy of children deprived from birth of a dignified life be banished forever from this land (Reed & Sautter, 1990, p. K11).

Address the Needs of the Whole Child

As we noted earlier, the factors which place children in jeopardy are interrelated. For example, we have argued that the need for inexpensive and efficient transportation may have a profound impact on the ability of a single-parent family to obtain adequate child care and that this affects his or her chances of finding employment. Given the cumulative effect of multiple factors, it is not time to improve coordination and consolidation among the various agencies designed to help children in need.

A recent report by the President's and Speaker's Blue Ribbon Commission on Children and Families (Robison, 1990) indicated that states which had either multiple divisions within one "umbrella" agency or states with one consolidated service agency reported increased communication and cooperation in meeting children's needs.

However, simply consolidating children's services at the state level does not solve the problem. Existing agencies have limited resources and some protection
of turf appears inevitable. What we do need is sensitivity, at all levels in
children's services agencies, to the fact that interagency and multiagency
collaboration is not just desirable, but essential, for disadvantaged
children to receive the services which are necessary to improve
their overall quality of life. As Hodgkinson (1989) stated, "If health wins,
education wins as well. If education wins, prisons win as well" (p. 25).

In other words, human service personnel must seek collaborative "win-
win" solutions. Fisher and Ury (1981) discussed "brainstorming for mutual gain"
as an essential step in the process of reaching an acceptable and equitable
agreement. Developing creative options for meeting children's needs will be,
therefore, the charge of everyone involved in marshalling resources or
programs for tomorrow's children in need. To quote Hodgkinson (1989) again:

The problems are important while the demographics suggest
that a limited amount of time is available for their solution. At
the center of all our social agencies sits a client who must be
housed, transported, educated, fed and kept healthy. For every
agency, it is the same person, the same client (p. 25).

Child Care/Parental Leave

Congressional passage of a comprehensive child care bill on October 27,
1990 appears to constitute a major step toward providing safe, effective care for
thousands of our nation's youngest and most vulnerable children, especially those
living in impoverished environments. The bill essentially doubles the maximum
tax credit that poor families are allowed and will provide assistance to 750,000
children in the first year. The bill also requires states to establish health, safety,
and quality requirements.

The passage of a comprehensive child care bill was listed as the top priority
in 1990 by our nation's largest children's advocacy organization, the Children's
Subsidized child care and parental leave policies have recently received a great deal of attention and support by a large cross-section of American families. While earlier child care policies mostly received support largely from advocates for poor and disadvantaged families, the changing patterns of American families in recent years (e.g., the significant increase in the number of single-parent families across all socioeconomic levels) have resulted in a much broader-based support for government-assisted family policies and programs.

Bane and Jargowsky (1988) argued that the United States needs policies that "invest in children in all types of families, on the ground that society has a legitimate interest in the future of the next generation" (p. 227). Citing that "policy discussion has generally focused only on the problems of female-headed households and households on public assistance, tending to ignore the problems of intact families and working poor families" (p. 246), Bane and Jargowsky (1988) stated:

The goal of public policy in this area [families] should be to shape a social and economic climate that values children and supports family life. Public policy should in our opinion attempt to reflect and reinforce those values and structures in American society that care for and invest in children. As part of this goal, policymakers might pay particular attention to the problems of children in poverty. Such attention might bring about small shifts in attitudes and behavior and might, at the very least, improve the conditions for some of the most disadvantaged families and children (pp. 246-247).

**Policy Trade-Offs**

Bane and Jargowsky (1988) stressed the need for advocates of more effective policies for disadvantaged children and families to be keenly aware of the "policy trade-offs" which are likely to be the source of discussion and
concern to politicians and bureaucrats as they wrestle with the development of broad-based family policies in America. For example, Bane and Jargowsky suggested that one question that needs to be asked about family support programs such as parental leave and child care is whether they would contribute, financially and symbolically, to a supportive environment for families and children. Do they appropriately convey the concern of the society for the well-being of children and their families? What message do they send? There may be two. One is of general support for families and children; the other is of special attention to working families, those with a single parent who works or those with two employed parents (p. 248).

The dual nature of the message raises an interesting issue. The minority of families with two full-year, full-time workers tends to be better off than families with a single earner. Moreover, some American families do not believe that full-time work by mothers of young children is appropriate, although the proportion of mothers who work full time has certainly been increasing rapidly and attitudes toward mothers' employment have been changing. How strongly should government policy support one kind of family over others, and is it appropriate in a pluralistic society to throw the weight and money of government behind certain work patterns? These conflicting views must be dealt with as program details are worked out, and the issue will probably be resolved in the political arena (Bane & Jargowsky, 1988, p. 248).

A second policy trade-off issue raised by Bane and Jargowsky (1988) is the question of who will participate in the programs and benefit from the subsidies, and who will pay for them. Would subsidies be limited to families in which parents worked a certain number of hours? What about family preferences relative to specific child care arrangements? Some families work split shifts; other use informal care (e.g., child care provided by a relative or a nonrelative in either family home or other home). Should only formal group care be subsidized?
As further suggested by Bane and Jargowsky (1988), "day care centers, as opposed to care by relatives, 'family day care,' or other informal arrangements, are used more often by higher-income families. This means that a program that subsidized only formal, licensed care might not meet the needs of many families" (p. 249). Even should this problem be resolved by providing subsidies to informal as well as formal care, other questions are raised: "the quality of care and perhaps conflicts with the child development goals that many people hold for child care programs" p. 249).

Still other sets of questions and concerns about family support programs need to be considered according to Bane and Jargowsky (1988):

The direct effects of parental leave and child care programs on families and children (e.g., given the lack of firm conclusions in child development research and given the varying preferences of families for their children, it is hard to argue for limiting subsidies to a fixed package of parental leave for a certain period of time plus day care of a given type -- it seems more prudent to design policies that offer families a fair amount of choice about child care....

The indirect effects: e.g., would requiring employers to provide parental leave disproportionately hurt certain kinds of employers, for example small businesses? Are employers likely to start discriminating against parents?....

The alternative uses of resources that would be devoted to child care or parental leave (presuming that most of the subsidies would go to low- or middle-income families), "it is important to ask about trade-offs between spending money on day care for these families and spending it on other services, cash transfers, or tax reductions. Formal day care for a welfare family with two children could easily cost $5,000 a year, whereas yearly AFDC benefits for a family of three in many states are lower than that amount. Subsidized day care may have substantial long-term benefits in helping families achieve or maintain financial self-sufficiency; nursery school-like settings may represent important investments in children. Nonetheless, these trade-offs need to be weighed in assessing policies" (pp. 248-250).

In June 1990, the U.S. House of Representatives passed the Family Medical Leave Act which would require business and government employers to provide
workers with up to 12 weeks of unpaid medical leave or with leave for the care of a new child, or an ill child, parent, or spouse. Co-sponsored by Senator Thomas Dodd of Connecticut and Representative Marge Roukema of New Jersey, this bill exempted businesses with fewer than 50 workers and workers who are among the highest-paid 10 percent in a company. However, on June 29, 1990, President Bush, despite strong bipartisan support, vetoed this piece of legislation.

The U.S. Chamber of Commerce and other business groups lobbied hard against passage of this bill, and President Bush in a written statement said, "I strongly object ... to the federal government mandating leave policies for America's employers and work force ... we must ensure that federal policies do not stifle the creation of new jobs nor result in the elimination of existing jobs" (cited in S. Kurkjian, The Boston Globe, June 30, 1990, p. 1).

President Bush's veto of the Family Medical Leave Act is likely to receive somewhat mixed reactions from advocates who are concerned with the overall well-being of children and families in America. Advocacy groups which are primarily concerned with the well being of poor, disadvantaged children and families, although probably disappointed in the veto as a general indication of Bush's apparent unwillingness to support progressive children's and family policies, may feel that this particular bill, would have had most benefit for those families who could afford an extended unpaid leave -- with only minimal benefit for poor and near poor families.

On the other hand, critics of the President's veto most assuredly will point out that the United States continues to be one of the very few of industrialized nations in the world which does not provide its workers with parental leave benefits. Clearly, the profile of the American worker has been transformed in recent years, with women now constituting 45 percent of the work force, projected to be 50 percent of all workers by the mid-1990s. Thus, working women
-- and their children -- will likely be viewed as the single group which will be most negatively impacted by Bush's veto.

**Safe, Affordable Housing**

Currently, one of the greatest threats to children's well-being in America is the inability of poor and near-poor families to obtain, safe, affordable housing. As indicated by Hodgkinson (1989), the demand for low income rental units, caused by major increases in the number of Americans who work full-time and yet are in poverty, will push rents on low income units up another 25 percent by 1993, given the realities of demand being twice the supply.

Poor and near poor families continue to pay a disproportionate amount of their monthly income for rent, and in many cases, all they receive for this outlay is the "opportunity to live in substandard dwellings." Or, worse -- many children in families are forced to move into temporary, emergency shelters -- or live on the street.

No state pays a monthly AFDC (Aid to Families with Dependent Children) benefit that ensures that typical inexpensive housing costs will be less than 30 percent of income, as recommended by HUD. In 38 states, the cost of the lowest priced rental units exceeds the family's entire monthly AFDC payment (Children's Defense Fund, 1990a, p. 8).

Action is needed at all governmental levels, especially at the national and state levels, to ensure that those American children and their families who presently are homeless or "precariously housed" can afford decent, safe housing. More affordable housing must be made available to our nation's poor families if they are to have any hope of breaking out of their cycle of disadvantage. It is estimated that 45 percent of all poverty families pay more than 70 percent of their annual income in rent --
leaving the typical poor family of three in America with only $3,000 left to pay for everything else -- medical care, transportation, and food."

Need for Increased State Involvement

More states need to take advantage of federal funding designed to improve the overall well-being of disadvantaged children and their families -- when and where it is available. For example: (1) only 15 states at the end of 1989 were covering all pregnant women and infants with incomes below 185 percent of the federal poverty level, as permitted by federal law (Medicaid coverage); and (2) only nine states and the District of Columbia supplemented their federal WIC allotment to provide food and nutrition services to additional women and children. Only 59 percent of all eligible women and children receive WIC benefits (Children's Defense Fund, 1990a, pp. 8-9).

Employment Training

Job training, apprenticeship, and community service programs that equip young adults with job skills necessary to become as self-sufficient as possible in today's and tomorrow's society must be expanded. Currently only 3 percent of the 1.2 million teenagers officially counted as unemployed are served. For example, every $1 invested in Job Corps yields $1.45 in benefits to American society. Other youth employment and training programs have raised post-program employment rates by nearly one-fourth and annual earnings by more than $1,300 per participant (Children's Defense Fund, 1990a, p. 13).

A living family wage and income supplements for low-income families must be ensured. An increase in the nation's minimum wage must be
implemented. In 1991, after scheduled increases take effect, a worker employed full-time, year-round at the minimum wage still will earn less than 90 percent of a poverty-level income for a family of three.

An increase in the national minimum wage will increase parental earnings and financial incentives to work, and it will provide an adequate economic base to support children. The cost savings will likely be in several areas: reduced expenditures for income support programs targeted on low-income families; increased personal income and payroll tax revenues associated with increased employment and earnings etc. (Children's Defense Fund, 1990a, p. 13).

Early Intervention

Proven success

Successful early intervention programs for disadvantaged children and their families must be expanded and more adequately subsidized. Project Head Start, initiated in 1965 as part of President Lyndon B. Johnson's "War on Poverty", has been widely acclaimed as one of the most popular and successful programs in the history of our country for its long-term positive impact on the lives of poor disadvantaged children. Designed to give poor children a "head start" on school with a comprehensive program that not only offers preschool education, but also provides health care services and screening, nutritional guidance, parental education and substantial parental involvement, Head Start has served approximately 11 million children and their families since its inception.

Despite its strong, well-established record in helping disadvantaged children overcome many of major obstacles to early success in school, primarily
in the areas of health care, nutrition, language stimulation and acquisition, and parental support. **Head Start currently serves only 1 in 5 eligible children, aged 3 to 5.** At its peak in 1987, Head Start reached one quarter of eligible children, and at its nadir, in 1983, it reached 16 percent.

In October of 1990, a bill intended to provide full funding for the Head Start program passed both Houses of Congress. The bill, H.R. 4151, called for Head Start to serve all eligible three-and four-year olds and thirty percent of five year-olds by 1994. The 1991 reappropriation, which allows for full-day, full-year participation and represents an increase of more than $400 million over funding for the program last year, triggers an early childhood intervention program in the form of Parent-Child Centers which are designed to provide comprehensive social, health, and education services.

Priority for grants will go to Head Start programs that certify that they will strive to provide continuous services to children until compulsory school age. In addition, in passing the reauthorization, Congress emphasized the need for more effective coordination between Head Start and elementary school programs. The bill sets aside $20 million each year for Head Start transition projects.

Also, a major feature of the reauthorization is $156 million a year for quality improvement; the money will go to all Head Start grantees and may be used for training or facilities improvement. The funds are intended to make up for a 13 percent funding cut that Head Start agencies took from 1981 to 1989.

In addition, 2 percent of the appropriation, or $40 million, will go to Head Start agencies for training personnel. By 1994, Head Start programs will be required to have at least one teacher with a Childhood Development Associate (CDS) degree in every classroom.

The reauthorization calls for a study of various approaches to providing early, continuous, and comprehensive services to low-income, at-risk children.
from birth to age three, as well as a comprehensive report on the Head Start program as a whole.

**Fiscal/Budgetary Concerns**

Clearly, despite what appears to be solid bipartisan political support, as well as general public endorsement, for substantial financial increases for our nation's early childhood intervention programs, there is no guarantee that this will occur. Certainly, present concern over the size of the national budget deficit, along with the significant costs of the Persian Gulf crisis, could prove extremely detrimental in this regard. As a result, Congress and/or the President may look less favorably upon significantly increased spending on social programs.

At the time of this writing, the White House projected an increase in next year's budget deficit to approximately $168.8 billion dollars -- $231.4 billion if savings and loan costs are counted -- and warned of devastating cuts in programs without a quick budget compromise with Congress. This new estimate was more than two-thirds higher than the administration's projection six months ago. Unless the budget deficit issue is resolved satisfactorily and quickly, it is predictable that the necessary funding increase for Head Start and other related programs will be in jeopardy. Legitimately or not, many bureaucrats likely will use the budget deficit and/or the Persian Gulf crisis as a rationale to curtail projected spending on these social programs.

Schorr (1989), however, cautioned against "allowing the chilling effects of budgetary deficits to deter action" [appropriating the necessary financial resources to support social programs]. Schorr cited an analysis of this issue by Isabel Sawhill, senior economist at Washington's Urban Institute:

**Large deficits make it difficult to argue for new social spending [because they] lower the rate of economic growth and threaten**
future standards of living. Unfortunately, a failure to invest in the next generation has precisely these same effects (cited in Schorr, 1989, p. 294).

Increased support for effective early childhood programs such as Head Start also is required at the state level. Clearly, as we enter the 1990s, many individual states are suffering severe financial difficulties. A large share of these economic problems at the state level frequently are blamed on recent reductions of federal support for programs which were predominately subsidized in the past by federal funds but which now must be paid for with state dollars.

Nevertheless, despite the proven effectiveness of Head Start or other early childhood education programs in reducing subsequent school failure, the number of school dropouts, and lifetime dependency, only 28 states and the District of Columbia invest their own funds in these programs (Children's Defense Fund, 1990a, p. 35). Breaking the vicious, interrelated cycles of economic, social, and educational disadvantage cannot be left entirely up to federal action and support. Firm commitments and actions are also needed at the state and local levels. Spending priorities need to be re-assessed as well as the willingness demonstrated to raise additional revenues to support programs which have already proven their efficacy in aiding disadvantaged children and their families.

Schorr (1989) argued strongly for both the expansion and the increased financial support of successful early childhood education programs such as Head Start if our nation is truly serious about "breaking the cycle of disadvantage" which currently prevents many children from ever reaching their potential as fulfilled individuals as well as contributing members of society. Schorr, citing the well-documented successes of Head Start and other early childhood intervention programs for disadvantaged populations, stated:
We now know that the education, health, nutrition, social services and parent support provided by these programs have prevented or ameliorated many of the educational handicaps associated with growing up in poverty. We now know that children who have attended quality early childhood programs develop social and academic competencies later manifested in increased school success. They "enter school healthier, better fed and with parents who are better equipped to support their educational development."

The basic Head Start model has proved to be sound. When three to five-year old children are systematically helped to think, reason, and speak clearly; when they are provided hot meals, social services, health evaluations, and health care; when families become partners in their children's learning experiences, are helped toward self-sufficiency, and gain greater confidence in themselves as parents and as contributing members of the community, the results are measurable and dramatic (p. 192).

**Ingredients for Successful Programs and Interventions**

Given what we already know about what works relative to disadvantaged populations, and further, assuming that we have the necessary will and commitment to act upon this knowledge base, why have we as a nation failed to reverse the cycle of disadvantage which has for many years existed in this country -- and which, based upon current projections, is likely to reach alarming proportions in the decades ahead? Will we truly become a two-tiered nation of "haves" and "have-nots" by the year 2020, or even sooner, as is predicted by some researchers?

Schorr (1989) in her comprehensive analysis of the policies, programs, and practices involving disadvantaged children and families in America suggested, "the programs that succeeded in changing outcomes for high-risk children are different, in fundamental ways, from prevailing services, and we cannot build upon these programs unless we understand the differences" (p. 256). Schorr (1989) identified three major attributes of programs which have been successful for this population: (1) intensity, (2) comprehensiveness, and (3) flexibility (p. 256-259).
As suggested by Schorr (1989), successful programs offer a broad spectrum of services and they recognize that social and emotional support and concrete help (e.g., housing, food, income, employment etc.) may have to be provided before a family can make use of other interventions such as help with parenting skills. Further, interventions cannot be routinely or applied uniformly. There must exist flexibility in staff and program structures, and receivers of the interventions must be actively involved in the decision-making processes relative to what constitutes their most immediate and critical needs, as well as their specific type of participation in the overall program (p. 257).

Schorr (1989) further suggested that successful programs "see the child in the context of family and the family in the context of its surroundings" (p. 257). Professionals working with disadvantaged families need to see beyond the isolated client or problem which they are primarily responsible for and be more aware of the larger or the more immediate needs which may exist within the family situation (e.g., the physician or public health nurse treating a sick child may need to take action to arrange for counseling or social services for the family). Successful programs are able to offer services and support to parents who need help with their lives as adults before they can make good use of services for their children (pp. 257-258).

Still another major attribute of successful programs for disadvantaged families with multiple problems is that the services which are provided are coherent and easy to use. Continuity in professional-client relationships is required. Often, potentially successful programs are jeopardized by the large turnover of staff, seriously destroying a trust relationship which has been developed. Family members frequently feel they are little more than faceless
entities, bounced among several different professionals or agencies (Schorr, 1989).

Someone needs to take responsibility for assuring that child and family needs are in fact met, regardless of bureaucratic or professional compartments. Successful programs "find ways to adapt or circumvent traditional professional and bureaucratic limitations when necessary to meet the needs of those they serve" (Schorr, 1989, p. 258).

**Why Programs Fail**

Program services that are inaccessible generally are of little value to disadvantaged families. Often payment arrangements and eligibility determinations pose seemingly insurmountable obstacles. The paperwork usually required to "enter" many programs can be a major deterrent. Also, preconditions which are frequently established in order to receive services often screen out those most in need. Successful programs make a concerted effort to reduce those barriers and obstacles (e.g., money, time, fragmentation, geographic and psychological remoteness) which make heavy demands on those with limited resources, energy, and organizational skills (Schorr, 1989, p. 259).

The distinct needs of society's most disadvantaged families -- those families which are generally regarded as having the most serious, multiple problems -- must be taken into consideration when developing intervention strategies. Most of these families have special needs which will not usually be adequately met by "normal, routine interventions." Interventions must be tailored to the complexity and specificity of individual families. General models of service delivery often do not work with these families. Well-intentioned services such as counseling and parent training often become irrelevant because they are
too isolated, fragmented, of insufficient intensity, and/or because they fail to address more pressing, immediate needs which are present.

Schorr (1989) suggested still other reasons why so many program interventions for high-risk, disadvantaged populations fail:

First, many programs are based on diluted models. In the effort to replicate a successful model, some programs are organized in a local community in a very mechanistic and often, highly watered-down manner. Frequently the original concept is lost. Often replicators are asked to obtain the same results with severely reduced funds. Also, in the replication process, the unique characteristics and needs of the "new population" may be quite different from those upon which the original model was based. If these are not taken into consideration, the likelihood of program success is significantly reduced. A variety of replication strategies must be devised which take into full consideration the unique and diverse needs of various disadvantaged populations.

Second, the evaluation procedures which are often employed to measure the success of various programs for disadvantaged populations often tend to detract from the real, more important issues which are involved -- "energy is diverted into evaluation research that asks trivial questions and sacrifices significance to precision" (Schorr, 1989, p. 268). The reasonable demand for evidence that the investment of funds is producing benefits frequently exerts unreasonable pressures to convert both program input and outcomes into whatever can be readily measured.

This rush to quantify, which engages funders, policymakers, academics, policy analysts, and program administrators alike, has had damaging effects on the development of sound interventions aimed at long-term outcomes. Programs are driven into building successes by ducking hard cases. Agencies shy away from high-risk youngsters who provide scant payoff for effort expended when it comes to bottom-line totals.
Pressures to quantify have crippling effects on the development of the kind of programs most likely to help high-risk families .... Organizations are pressed to shape their objectives and methods of intervention with an eye to easy measurement, and cannot be blamed for choosing to narrow rather than to broaden their efforts (Schorr, 1989, p. 268).

Emphasizing that many of the most effective interventions with high-risk families are inherently unstandardized and idiosyncratic, Schorr (1989) raised a pertinent question:

Are program objectives like the acquisition of trust or the development of warm personal relationships, found to be essential attributes of virtually all programs serving high-risk families, to be sacrificed because they are so much harder to reduce to quantifiable terms than is performance on multiple-choice or IQ tests (p. 269)?

Third, programs which are designed to help severely disadvantaged populations frequently are ineffective because the personnel that are involved in their implementation are often undertrained, underpaid, suffer from pervasive feelings of hopelessness and low self-esteem, and are forced to work in isolation. In this regard, Schorr (1989) stated:

When it comes to professional status and economic compensation, the direct provision of basic services to the least powerful has little prestige. The development of better methods to accomplish such important public purposes as reaching hard-to-reach populations with effective services is also not sufficiently prized (p. 273).

Many persons who work with disadvantaged populations often feel that what they are doing is not truly valued. It is not uncommon for many dedicated professionals to leave their positions because either they cannot afford to remain in those positions due to extremely low wages or because they feel that they are not having any substantial positive impact upon the lives of their clients (students). They often feel isolated, frustrated, and devalued.

Further, programs for disadvantaged populations regularly suffer from lack of appropriately trained personnel. Because of common high position turnovers, front-line staff often are hired in entry level positions with minimal,
if any, training. Lacking both the necessary awareness and the skills to work successfully with difficult populations, many potentially "good employees" become frustrated, physically and emotionally stressed, and, at times, even cynical. They perceive the problems of their clientele to be overwhelming and often irremediable. These individuals frequently are not provided with the supervision, the emotional support systems and/or the quality of training which are necessary for them to carry out their job responsibilities in an effective manner -- both for their clients as well as for their own personal/professional growth.

Professionals representing several disciplines including medicine, psychology, social work, and education, typically receive a very narrow training focus. They may be prepared to deal with problems which are more directly related to "their profession," but they are generally not equipped to deal with broader problems manifested by their clients or students. As disadvantaged populations typically present a multitude of complex problems, professionals working with these groups often find themselves in the position of either becoming extremely frustrated, sensing that what they are doing is having minimal, relevant impact, or as Schorr (1989) suggested, "they are inclined to retreat to more familiar ground [their own specific area of expertise] rather than to mobilize the help of others" (p. 274).

Teachers, for example, often are ineffective working with various disadvantaged populations because they have not had the appropriate training to truly understand the complex, multiple needs usually presented by these students. Beginning teachers, in particular, often become victims of a lack of adequate preparation for working effectively with disadvantaged students and their families. Many beginning teachers, as well as veteran teachers, have not been exposed to the complexity of psychological, social, and
economic issues and obstacles faced by disadvantaged populations -- issues and obstacles which can have a direct impact upon the ability of students to perform successful academic work.

The lack of adequate awareness and training on the part of educators to work successfully with seriously disadvantaged students and their families certainly is not a new issue. It has been recognized and discussed in the professional literature for many years. Yet, this critical issue is often given little more than token consideration in many personnel preparation programs throughout the country.

Preparing for the 21st Century:

Conceptions of Schooling Must Change

Tomorrow's workers will encounter the realities of a rapidly changing work place that requires "tooling and retooling" in order to stay competitive (Rumberger, 1984). The growth of technology will almost certainly result in substantial changes in the structure of education. As Hodgkinson (1985) stated: "Diversity is the American hallmark, and recent successes of the military and business worlds in their educational endeavors suggests [sic] a very different postsecondary world. Most institutions with which we are involved, from hospitals and local governments to museums and the workplace, today have an educational arm. Lifelong learning is here today for about half of the American adult population -- ready or not" (p. 16).

Educational Reform and the Future

Once again pleas for needed educational reform are receiving considerable attention throughout our nation. Many contemporary educational reformers
argue for major changes in how our nation's schools instruct students as well as what they teach students. Declining student SAT scores, especially within the verbal area, are pointed to as strong measurable evidence by critics of public education in America that "our schools simply are not doing a satisfactory job of preparing our nation's 'most talented' youth."

Our nation's schools also have been severely criticized for their poor preparation of American youth in the areas of mathematics and science. Concerns are regularly expressed that students who are in the college-bound track have been receiving an increasingly inferior education in recent years -- judged to be far below that received by students in many other countries. One of the five major goals established at the Educational Summit is for "American students to rank first in the world in achievement in mathematics and science by the year 2000."

However, much of the recent educational reform efforts has focused upon what is regarded as a more serious and pervasive problem in American education: the poor academic achievement records of students in the general or noncollege bound track. The basic concern which has been raised in increasing regularity is that the majority of American students are leaving school academically and vocationally unprepared to hold even entry-level jobs in our nation's workplace.

Further, educational reformers such as Willard Daggett have argued strongly that our nation's students are not receiving those skills which will be necessary for them to compete in a changing international job market of the future. Daggett has stated that our nation's schools need to be more visionary, and they must institute substantial changes in curriculum in order to provide students with those skills necessary to compete in a high tech national and international
economy. No longer, according to Daggett, can the American economy depend on unskilled labor.

Very simply, the unskilled U.S. labor market is far too expensive, and it is expected that this segment of our overall labor force will represent only 15 percent of our nation's workforce by the year 2000. Thus, unless schools change, many educational reformers argue, not only will students be ill-prepared to enter the future workforce, the overall socioeconomic future of our nation will be severely jeopardized.

Well-intentioned scholars, researchers, and educators -- as well as the general public -- often disagree regarding the specific paths which educational reform efforts should follow. Some would even argue that drastic educational reform is not necessary. Yet, regardless of the differences which may exist in this area, there is growing and convincing evidence that the face of America has changed in recent decades -- and that it is very likely to change even more drastically by the beginning of the 21st century.

Our nation's schools must be prepared to meet the complex challenges which they will almost surely face in the future. To ignore the projections involving disadvantaged children and their families which have been cited in this document would be intellectually and morally indefensible. It is our position that the contemporary pleas for educational reform will prove to be little more than hollow echoes unless major consideration be given to the broader societal indicators which have been clearly shown to place such large and growing numbers of American youth at risk of educational failure. To attempt to "improve our public educational system" in the absence of full understanding and consideration of broader-based socioeconomic conditions and factors, will result only
in piecemeal, short-term solutions at best. The underlying, more pervasive problems will remain.

American education actually has been in an extended period of reform since A Nation at Risk was published in 1983. Not surprisingly, opinions vary widely relative to what our schools should look like -- what roles they should assume and what responsibilities they should have to meet the needs of a changing American society -- and finally, upon what should the progress of our schools be measured.

Many of the recent recommendations put forth to improve schools have involved establishing more rigorous student performance standards, establishing stricter graduation requirements, establishing a rigorous core curriculum and so forth. These efforts may prove to be beneficial to many students. Striving for excellence in our schools certainly is an admirable goal. Yet, caution must be taken.

The larger and more basic questions must be asked. Simply raising student standards -- without giving serious consideration to the complex and multiple factors which have been shown to place such large and growing numbers of our children at risk of educational disadvantage -- along with the firm commitment and actions necessary to reduce these factors -- will likely produce even larger numbers of at-risk students. The excellence-equity issue needs to be firmly addressed.

**Excellence and Equity**

Although it is dangerous to attempt to draw a dichotomy between the basic philosophies of those who advocate for excellence in education and those who advocate for equality in education -- we need to recognize that proponents of these
two prevailing philosophies basically view the overall purpose of education in distinctly different ways. They generally reflect drastically different belief systems.

The tension between equity and excellence in education is a reflection of a tension between two basic societal values. "Equity is concerned with the assurance that all individuals in society be given an opportunity to succeed. Excellence is concerned with the assurance that there will be an adequate pool of well-trained individuals to control society's vital functions. Thus excellence implies that the "best" students reach their full potential. Although it would appear that equity and excellence do not imply a zero-sum game, they are rooted in different social philosophies" (Bacharach, 1990, p. 418).

As stated by Bacharach (1990), excellence is based on a rationalistic/functionalist model that assumes that unless a society, as a competitive nation-state, creates a core of skilled, and constantly self-improving individuals, it will fail to compete successfully in the world market. Unless students are held to high standards and compete for grades, are placed in the "best" schools, and are rewarded for competence, our nation will lose its competitive edge. Conversely, the equity movement implies that the goal of education is to prepare all individuals intellectually and socially for economic and social survival. The inherent inequality to which certain social groups are subjugated is taken into consideration. Schools are viewed as playing a major ameliorating role.

The 1980s clearly were dominated by conservative thinking relative to educational reform at the national level. The "problems" of the U.S. educational system frequently were attributed to the "excessive equity emphasis" placed on education policies which were developed and implemented during the 1960s and
1970s. Our schools were said to be failing our most capable students because of the heavy emphasis on equity-based policies, e.g., programs for minority and handicapped children. With respect to this specific issue, the Heritage Foundation, a Washington, D.C.-based conservative think-tank stated:

The most damaging blows to science and mathematics education have come from Washington. For the past 20 years, federal mandates have favored "disadvantaged" pupils at the expense of those who have the highest potential to contribute positively to society . . . By catering to the demands of special-interest groups -- racial minorities, the handicapped, women, and non-English speaking students -- America's public schools have successfully competed for government funds, but have done so at the expense of education as a whole (cited in Pincus, 1985).

Clearly, some of the goals and objectives formulated at the President's and Governors' Educational Summit address broad equity issues and concerns. However, the overall thrust of this education reform initiative is heavily weighted toward excellence goals. Many observers of past and recent education reform movements have raised strong caution that an overemphasis on excellence in education can result in severe negative consequences for our nation's children and youth who are considered to be educationally disadvantaged (e.g., Boyer, 1990; Cuban, 1990; Futrell, 1989; Hawley, 1990; Howe, 1990; Medina, 1990; National Coalition of Advocates for Students, 1985).

In brief, the major concern expressed by these critics is that educational reform, should it be excessively driven by excellence in education goals, may benefit the "bright, advantaged students" but it could cause our nation's disadvantaged youth to fall even further behind. It is argued that the gap between the "haves" and "have-nots" will widen -- not lessen -- unless the cycles which place students at disadvantage are broken.

Although past educational reform efforts sporadically have addressed equity issues, they usually have focused upon those students who were considered to represent a distinct minority of our nation's overall school-age population. For
example, several past reform movements referred to the need to address the "bottom quartile" of students. Basically these efforts were directed at what was assumed to be a relatively small and stable number and proportion of our nation's youth. Although not usually stated, the underlying message of much recent reform has been fairly clear: even should efforts being directed at "the disadvantaged" not be fully, or even partially successful, the end-result would not be too serious overall. The majority of U.S. students -- approximately 75 percent to 80 percent would benefit.

However, as much of the information presented in this document strongly suggests -- the numbers and proportions of disadvantaged students are increasing steadily, and they are projected to rise even more dramatically during the next ten to thirty years. We no longer are talking about "relatively small numbers."

The American public school population in the year 2000 will be more ethnically and linguistically diverse than ever before. It will represent a population that is poorer, more precariously housed, and more vulnerable to the myriad pressures and stressors of socioeconomic disadvantage. Further, it will include the large and growing numbers of "crack-cocaine babies" and other substance-impaired babies which are now being born at an alarming rate in the United States. Educational reform cannot afford to ignore this population. Unless several current trends are reversed, we could be talking about the majority of our nation's youth -- not the minority -- by the year 2010.

Ernest Boyer (1990) succinctly addressed this specific concern:

The United States, if it is to remain an economically vital nation, cannot tolerate a system that divides the winners from the losers. We must affirm that all children, even those from the most difficult backgrounds, will have available to them the conditions to ensure that they will academically and socially
succeed. The goal must be equity for all... When all is said and done, the reform movement must be measured not by what happens to students in our privileged schools, but by what happens to the rural poor and to neglected children in the inner city (p. 37).

The excellence vs. equity issue is at the very core of much of the current school reform rhetoric. Can equity and excellence co-exist? Or, are they mutually exclusive? Although conceptually this may not be true, pragmatically it may well be the case. In a society with limited resources, the expansion of programs to achieve excellence may necessitate (or be used as an excuse for) the elimination of programs that aspire toward equity (Bacharach, 1990).

The question of excellence versus equity may be a moot point and it may be forcing policymakers to choose between two goals: excellence and equity, which cannot, and should not, be separated. Mary Futrell (1989), former president of the National Education Association, addressed this specific issue: "We've only begun to address the basic issues of schooling in America. For example, we've just begun to redefine the goals of public education. We've just begun to accept the fact that our schools can -- and must -- offer both educational equity and educational excellence" (p. 10).

Yet, clearly policies will be shaped -- and programs in our schools will be developed -- which essentially reflect the "prevailing political mood" of the nation at a given point in time. Perhaps, Bacharach (1990) is correct:

It appears at times that the advocates of excellence and the advocates of equity are talking past each other. The problem for the advocates of equity in education is how to achieve equity without appearing to support socialism; the problem for the advocates of excellence in education is how to achieve excellence without appearing to support social Darwinism (p. 420).
The Changing School Populations and Educational Reform

We are unlikely to witness any substantial improvement in the quality of programs for educationally disadvantaged youth unless schools are structured and operated very differently. Many educators and certainly most advocates for the educationally disadvantaged are calling for schools to respond to the needs of these students in a very comprehensive and intensive manner.

Cooperative learning, highly individualized and small group instruction, ungraded placement, full and meaningful parental involvement, and differential "time blocks for instruction", as well as the overall viewing of school as a true facilitator (and, in some cases, the deliverer) of social, family, and community services to children -- all have been widely suggested as being necessary ingredients of successful programs for disadvantaged children. Some of our nation's schools already have begun to implement such programs with marked success. However, for the large part, we continue to measure the success of students -- as well as the success of schools in general -- by a very narrow standard: standardized multiple-choice tests.

Moving Beyond Standardized Testing

If we are asking schools to change, to assume broader social roles and responsibilities, to provide a wide array of services and programs to students which are not essentially academic in nature, then it would appear to be extremely unjust to employ a one dimensional measure (standardized academic tests) as the sole yardstick of a school's, or for that matter, an individual student's, progress. The creation of student assessment alternatives to standardized multiple-choice tests must be an essential feature of our future redesigned schools.
The results of student performance on SAT and NAEP tests certainly yield valuable information, and they may represent a fairly reliable indicator of overall academic accountability. However, such test results provide absolutely no measure of a school's progress, for example, toward meeting the needs of its pregnant teenagers' acquisition of appropriate parenting skills. Nor do these tests provide any feedback to the students themselves in such areas. This may be the greater tragedy. Large numbers of young, often very fragile and vulnerable teenagers may, in fact, be learning some very critical, life-long skills (how to parent) but they receive "no scores or grades" for their efforts. For many of these students, their "performance in school" is measured solely by the grades which they obtain in academic subjects.

The dissatisfaction with traditional multiple-choice tests as the sole method by which schools measure student abilities already has resulted in the development of performance-based assessments in many states. These assessments, which are designed to measure students' abilities to perform tasks such as conduct science experiments or write essays, presently are being used in at least one subject area in seven states: Delaware, Hawaii, Maine, Massachusetts, Michigan, New York, and North Carolina. Several other states currently are in the process of actively developing such performance measures. In addition, the NAEP has included performance components on its 1990 tests, and it plans to expand them in 1992 (Rothman, 1990d).

This rush to embrace performance-based assessments as alternatives to traditional multiple-choice tests has been criticized by several researchers, claiming that it is premature to eliminate the more traditional tests as performance-based tests represent an essentially untried and unproven method of measuring student abilities, are extremely costly, and they may not prove to be a better measure of student abilities. For example, Chester Finn, former Assistant
U.S. Secretary of Education for educational research and improvement, referred to performance assessment as being "similar to 'Star Wars': the idea remains to be demonstrated as feasible" (cited in Rothman, 1990d, pp. 1, 10).

It is our perspective, however, that even the performance-based student assessments currently in use, as well as those presently being developed, do not go far enough. They continue to represent a very restrictive view of schooling. They fail to take into consideration the much broader aspects of students' lives, learning styles, and needs. They are not designed to address, and certainly they are not capable of measuring, quality of life needs of students.

Schools traditionally have operated in a very narrow paradigm relative to measuring individual student intelligence and achievement. Schools tend to reinforce linguistic and logical-mathematical forms of intelligence while neglecting other ways of knowing. Teachers tend to respond very favorably to children who are adept with words and logic but, at the same time, tend to ignore children who, for example, demonstrate proficiency in social relations, intuition, art, music, and other forms of self-expression.

Individual learning styles possessed by many students frequently are not taken into consideration when teachers and administrators (as well as psychologists and educational diagnosticians) plan instructional methodologies and curricula. The contributions of such scholars as Robert Sternberg and Howard Gardner are extremely important in assisting educators develop a broader understanding of intelligence and individual learning styles.

Sternberg, in his book, The Triarchic Mind (1988), argued that there are not one but three kinds of intelligence. Componential intelligence is the kind that can be measured by an IQ test. The others are contextual, the kind you use in creating new environments, and experiential, a practical or street-smarts kind of
intelligence. Only the first kind of intelligence shows up on standardized tests. And yet, it is the contextual and experiential intelligences that are now being demanded by the workplace (cited in Satin, 1990).

Gardner, in his work, *Frames of Mind* (1983) suggested that individuals possess seven distinct forms of intelligence: linguistic, logical-mathematical, spatial, bodily-kinesthetic, musical, interpersonal, and intrapersonal. Again, schools traditionally have only been concerned with the first two intelligences when attempting to instruct students -- and measure their rate of progress. The theory of multiple intelligences as proposed by Gardner has interesting and important implications for educators. In accordance with Gardner’s theory, schools and parents need to become much more sensitive to individual differences in how children learn; and therefore, provide them with those specific methods and materials which are tailored to their own unique learning styles.

Schools, as they continue to struggle with some of the many broader issues involved in school reform and school restructuring, may do well to give attention to the very basic issue of “how individual students best learn -- and how schools can best help them develop those skills, irrespective of the domain in which they may be located.”

Should IQ tests and multiple-choice, standardized academic achievement tests continue to constitute the sole measures of a student’s ability as well as his/her achievement in school, a great deal of human potential will likely continue to go unrecognized and never be given the opportunity to grow and develop. The loss will be significant -- not only to those children themselves, many of whom will likely continue to view themselves as “losers” (because they were not able to perform successfully according to the established IQ/academic achievement test standard) -- but also to society. The
potential contributions of these students might never be realized.

Certainly, the larger and more difficult questions involve the purpose of education. Clearly, there are different views as to what the goals of education should be for American public schools. Nevertheless, it would be both illogical and unfair to ask schools to change and become much more involved in the holistic needs of children and their families in a changing society -- while continuing to employ such an extremely limited and narrow measure of success as academic performance as measured by standardized academic tests.

Pallas, Natriello, and McDill (1989) argued, "educators must become more aware of and involved in the family and community contexts of their students, both to understand the problems these contexts present for the education of students, and to learn to draw on the strengths of families and communities to enhance the education of students" (p. 21). In this era of a strict emphasis on academics, this will require educators to display considerable courage.

Clearly, schools cannot and should not be expected to solve all of the social and economic ills of society. Very simply schools lack the resources, fiscal and human, as well as the sole mission to accomplish this end. Nor should major carefully measured efforts designed to improve our nation's schools be abandoned. Of course, our schools must improve. Certainly, we as a nation must strive to develop the best possible educational programs for all of our present and future students.

However, educational reform cannot take place in a vacuum. For reform efforts to realize any substantive long-term benefits, they must consist of much more than "internal restructuring." Simply establishing more rigorous student standards and rational performance goals will not be sufficient. Without the simultaneous attention to the broader societal factors and conditions which have been shown to place children at
risk of educational disadvantage, e.g., persistent poverty, lack of affordable housing, inadequate health care etc., these "educational reform efforts" arguably will result in an even larger number of future American children being regarded as "educationally disadvantaged." The gap between our country's have and have-nots predictably will widen even further under these conditions.

Parental Involvement

Importance of Parental Involvement

The importance of parental involvement in the educational process for their children has been long been recognized, and generally widely accepted as a critical element for promoting student academic success. Effective parent-school partnerships often is suggested by both educators and parents as the sine qua non ingredient necessary for students to obtain optimal benefit from their formal schooling. Clearly, in many of our nation's school systems, educators and parents have been extremely successful in developing meaningful and cooperative relationships which have had a very positive impact upon students.

Several states have developed and implemented large-scale programs designed to encourage parents to become full partners in the education of their children. Likewise, through creative planning and a strong commitment on the part of parents, educators, and researchers, successful parental involvement programs have been implemented at the individual school and district levels (Interested readers can find several of these "successful programs" described in the October 1989 issue of Educational Leadership, Vol. 47, Number 2).

Nevertheless, despite these recognized successes, Olson (1990b) stated what many observers feel is a more accurate portrayal of the contemporary status of parent-
school relationships -- especially for the majority of poor and socially disadvantaged parents:

The sad truth is that far too many parents and teachers find themselves strangers. Separated by vast bureaucracies, mutual fear, and the lack of time and energy, parents and educators have slid into a polite, but distant relationship (Olson, 1990b, p. 1).

It is beyond the scope of this document to provide a comprehensive analysis of the parent-school involvement issue. It is possible to offer only a very brief overview and analysis of some of the more relevant concerns, problems and issues in this extremely complex area. For a more in-depth treatment of critical issues involving parent-school relationships as well as for some programming recommendations in this specific area, the following resources should prove to be informative and helpful:

Center on Parent Involvement
The Johns Hopkins University
c/o Joyce Epstein
3505 N. Charles Street
Baltimore, MD 21218

The Home and School Institute, Inc.
1201 16th St., N.W.
Washington, DC 20036

Institute for Responsive Education
605 Commonwealth Avenue
Boston, MA 02215

Obstacles to Effective Parent-School Collaboration

Despite the fact that nearly every significant report on schooling in America released in recent years has emphasized the critical role which parents must play in their child's overall education, there continues to exist a major gap between theory and practice in this regard. The importance of meaningful parental involvement in their children's educational programs has been viewed as being especially critical for disadvantaged families. Yet, it is this specific
group of children and parents -- those considered to be at the greatest risk failure because of poverty and social disadvantage -- for which attempts at forming effective parent-school partnerships have, with some clear exceptions, been least successful. Researchers, educators, and parents alike have agreed upon some generally consistent reasons for these barriers: obstacles.

(a) Lack of agreement over specific roles and responsibilities: Parents and educators often have conflicting views relative to the very purposes of schooling as well as to the specific roles and responsibilities which each of them should have in this process. Sara Lawrence Lightfoot, in her widely cited study, Worlds Apart: Relationships Between Families and Schools, suggested, "parents want what is best for their children while teachers search for standards of fairness that apply to all the youngsters in their classroom ... [as parents and teachers argue about who should control a child's life in school, conflict is inevitable] the ambiguous, gray areas of authority and responsibility between parents and teachers exacerbate the distrust between them ... the distrust is further complicated by the fact that it is rarely articulated, but usually remains smoldering and silent" (cited in Olson, 1990b, pp. 18-19)

(b) Lack of Awareness of Changing Family Configurations and Dynamics: Many educators are fully aware of the vastly different family configurations and dynamics which presently exist in America as compared with those of the 1950s; yet, others are not. Some teachers are painfully aware of the negative consequences upon the academic and social performance of students which often result from living in a single-parent family, a racial/ethnic minority family, a limited-English family, a persistently poor family, and/or a homeless family. Unfortunately, other teachers are not as aware.
Even in those situations wherein educators are fully aware of the often devastating consequences of the above conditions, frustration and anger frequently occur. Teachers understandably feel helpless at times to reverse some of the physical and psychological conditions which they may, very correctly, identify as impeding their ability to provide their students with appropriate and meaningful instructional programs. It is not uncommon to hear some teachers state: "these students already have two strikes -- and in some cases, three strikes, against them when they enter the classroom -- what can I possibly do to help them?

The frustration and anger that many teachers feel in these situations is understandable. Often, teachers feel that they are being asked to assume responsibilities for problems which are well beyond their ability to solve -- and they are often asked to do this with limited resources -- and without the cooperation and active involvement of the parent(s) of these students. It is understandable why so many contemporary teachers, particularly those who are expected to work on a daily basis with seriously disadvantaged students, become, if not totally cynical, extremely frustrated and angry.

It is important, nevertheless, that educators avoid being overly judgmental regarding what they perceive to be a lack of interest or caring on the part of many parents of their "disadvantaged students." What they may be interpreting as lack of interest or caring on the part of these parents may be something totally different.

(c) False Assumptions Regarding Perceived Lack of Parent Interest: Many teachers often develop false assumptions about the parents of the children that they teach -- especially poor and minority parents. They assume that these parents either cannot or will not contribute to their child's education. Many of
these parents, it is assumed, are incapable of really participating in a collaborative effort to promote their child's best educational efforts.

Still many other parents who fall within this category, it is assumed, don't really care enough about their child to expend the energy and effort necessary to bring about optimal academic gains. These assumptions may be totally false and extremely dangerous. In fact, the results of several recent research studies appear to suggest that this is precisely the situation that obtains. "Studies of poor and minority parents in Maryland, New England, and the Southwest have found that they care deeply about their children's education, but may not know how to help" (Olson, 1990b, p. 21).

Joyce Epstein, Principal Research Scientist and Director, Effective Middle Grades Program, Center for Research on Elementary and Middle Schools, Johns Hopkins University, has been conducting research on teachers' practices of parent involvement and the effects of family-school connections on students, parents, and teachers for over a decade. Epstein disagrees with the assumption held by some educators [poor families don't have the same goals for their children as middle-class families]:

Data from parents in the most economically depressed communities simply don't support that assumption. Parents say they want their children to succeed; they want to help them; and they need the school's and teacher's help to know what to do with their children at each grade level. Our data suggest that schools will be surprised by how much help parents can be if the parents are given useful, clear information about what they can do, especially at home.

We're seeing the same results emerge from many studies by different researchers using different methods of data collection and analysis. If schools don't work to involve parents, then parent education and family social class are very important for deciding who becomes involved. But if schools take parent involvement seriously and work to involve all parents, then social class and parents' level of education decrease or disappear as important factors (Joyce Epstein, cited in R. Brandt, 1989, p. 27).
There are numerous other examples of programs which have been operating successfully throughout our nation which provide a strong, convincing argument against the assumption that poor, disadvantaged parents don't care about their children's education or are not capable of being effective participants in school-parent partnerships. Among some of the most widely recognized of these programs are the following:

**The Accelerated Schools Program**, which presently operates in two schools in California and seven schools in Missouri, attempts to raise parents' expectations about what their children can do, while it focuses on giving literacy training to the parents. The goal is to empower parents so they can become more involved in their children's education.

**The Schools Reaching Out Project**, organized by the Institute for Responsive Education (IRE) at the Boston University School of Education, conducted a two-year pilot study of ways to develop new relationships between low-income parents and schools in two inner-city communities (Roxbury, Massachusetts and the west side of Manhattan, New York) with generally positive results. Among the strategies employed by this project to foster more positive parent-school relationships were the establishment of an on-site parents' center in one of the schools; the hiring of a full-time "key teacher" to serve as a link between the school, the students' families, and the community; the offering of ESL classes for parents; the formation of parent support groups to study for high school equivalency exams, etc. (Reed and Sautter, 1990, p. K9).

**The School Development Program**, an experimental project headed for 18 years by James P. Comer, Yale University's Child Study Center, provides solid evidence that the barrier of distrust between low-income parents and schools can be broken down effectively. By bringing together
mental-health professionals, educators, parents, and others to focus on children's academic, social, and emotional development. Comer and his colleagues were able to reduce parental apathy and improve student achievement and attendance at two predominantly low-income elementary schools in New Haven, Connecticut. This project also has had spinoff benefits for parents as well, with many of them eventually obtaining their GED diplomas (Olson, 1990b; Schorr, 1989).

Yet, despite clear successes involving parent-school involvement such as those illustrated above, why is it that so many of our schools generally have experienced difficulty forming more positive relationships with many poor, disadvantaged parents?

Some poor parents may feel very intimidated by their children's schools. Many of them likely did not enjoy especially rewarding experiences when they themselves were students. Many parents are school dropouts. They tend to associate schools not only with their own academic failure but also with their feelings of low self-worth. For many poor parents, their own past negative associations with schools, administrators, and teachers prevent them from becoming more active participants in their own children's educational programs. There simply exists too much distrust and past hurt.

Other factors and conditions may lead educators to incorrectly assume that poor disadvantaged parents lack a true interest in their children's education. For some parents, lack of transportation may constitute a very formidable obstacle. Very simply, they are not able to get to school to attend parent-teacher conferences or participate in normal school activities. This is especially true in rural, isolated regions where the schoolbus may very effectively meet the transportation needs of the student but not those of his or her parents. Yet, even
in many inner-cities in order for a parent to attend a school activity, several inconvenient transfers on public transportation are often required.

Family living arrangements also play a major role in preventing many well-intentioned, concerned disadvantaged parents from participating more actively in their children's educational programs. Many poor students live in single-parent families in which either the sole parent is working or must stay at home to take care of other children. Childcare costs are often prohibitive for many of these families. Even temporary babysitting which would allow the parent to attend school functions is not a possibility for many parents because of the cost involved or its lack of availability.

Likewise, even in two-parent household situations in which one or both parents are working, poor families often find it difficult to attend school events, including important teacher conferences. Frequently under these conditions, either one or both parents hold down entry level, low-paying jobs -- positions which generally are much more inflexible relative to getting time off as compared to positions held by most middle and upper-income families. It is generally much easier for a parent who is employed in a professional or semi-professional capacity to arrange his/her work schedule to accommodate most school schedules. This is not the case for most poor or near poor working parents.

Certainly, many educators are very much aware of the problems of disadvantaged students, and schools throughout the country have been very responsive to parents' needs regarding meeting times. Many schools have made a concerted effort to offer parents extremely flexible meeting times and do everything possible to make it as easy as possible for parents to participate fully in their own child's education program. Yet, unfortunately this is not true in many other school systems. Educators must guard against misinterpreting what
on the surface may appear to be a lack of parental interest for what, in actuality, are real obstacles and impossible circumstances for many parents to overcome.

What is often perceived to be a lack of parental interest or concern may, in many cases, be due to a total misunderstanding of, as well as a major lack of appreciation for, the complexity of intertwined negative circumstances, in which many disadvantaged children and their parents find themselves. Many poor parents are struggling for survival on many levels. For many of these parents, their most basic human needs are not being adequately met -- food, shelter, and health care. Under these conditions, it is difficult for many parents to "become active participants in their children's educational programs."

"I know how educators feel when they see kids come to school who haven't been fed or look like they've been neglected or abused... it makes them sick... when you see a kid who's way behind in school, who has problems learning and so on, you just tend to blame it on the family -- it's the natural thing to do" stated Anne T. Henderson, National Committee for Citizens in Education (cited in Olson, 1990b, pp. 20-21). Perceptions among parents and teachers of the other side as uncaring or irresponsible serve to heighten the distance between them. Such images can lead to an escalating cycle of mutual blame and recrimination that is largely unproductive.

It is our contention, which is largely supported in the majority of the available literature on this topic, that most parents -- including those in the most destitute of circumstances -- want the very best for their children. They do care about their children's education, but often they are unable to act upon these positive feelings because either (1) they are so entrapped by their own problems and their need for basic survival, and/or (2) they simply lack sufficient information as to what specifically to do. Many poor
disadvantaged parents may not fully understand or trust their children's schools but still the large majority of them continue to view public schooling as the one possible saviour of their children. One parent, a resident in a Chicago public-housing project, may most accurately have captured the essence of the feelings of the majority of these parents in this respect:

We poor parents have dreams for our children's future... education is crucial to us; it is our kids' only legal ticket to a better life (cited in Olson, 1990b, p. 21).

**Attributes of Successful Parent Involvement Programs and Future Directions**

Despite a proliferation of studies in recent years which have focused on attempting to determine which programming models and strategies are most effective for producing more positive cooperation between parents and schools, which, in turn, will lead to increased student achievement, little hard research evidence presently exists. Much of the past and current research on this topic suffers from the fact that there has been a wide diversity of reasons offered why parents should be involved in schools. Parent involvement programs often have very different goals and objectives, making evaluative comparisons among programs extremely difficult.

Many programs have focused on encouraging parents to work with their children within the home environment, while others have been primarily, if not exclusively school-based. Some programming strategies have depended heavily upon the use of parents as tutors and school-based volunteers; other programs have focused on developing various strategies for improving communication between the school and the home; while still other programs have actively sought to involve disadvantaged parents in the actual governance of their children's schools -- at various levels.
As suggested by Kagan (1990) in her review of several research studies on parent involvement, "Although the correlation between parent involvement in education and student achievement has been well documented, there is little evidence of any direct, causal link... For the most part, correlation studies [between parent involvement and student achievement] are not sufficiently precise to determine the mechanism by which achievement is influenced... What we need is a more robust research base... while some organizations are doing wonderful work, one or two organizations will not be able to counter decades of malaise" (cited in Olson, 1990b, p. 21).

However, Epstein (1989) asserted that we are now beginning to collect some valuable data regarding the efficacy of various types of parent involvement programs and we presently have a much better developed knowledge base in this area than we have had in the past. Epstein, based upon her and her colleagues' research, identified five major types of parent involvement. These five types (Figure 10) occur in different places, require different materials and processes, and lead to different outcomes (cited in Brandt, 1989, pp. 24-25).

Based upon her research on parent involvement, Epstein concluded that in large measure parents do want to be more involved in their children's learning, especially at home, but that they need clear direction from the school regarding how to be most effectively involved in the overall education process. Epstein also stressed the need for schools to be creative in their methods for developing effective parent involvement programs at each of the five major levels which she proposed.

Conceding that a very small number of parents (about 2 to 5 percent) may have problems which are so severe that their school involvement, at least for a
Five Major Types of Parent Involvement

Type 1. The basic obligations of parents refers to the responsibilities of families to ensure children's health and safety; to the parenting and child-rearing skills needed to prepare children for school; to the continual need to supervise, discipline; and to the need to build positive home conditions that support school learning and behavior appropriate for each grade level.

Type 2. The basic obligations of schools refers to the communications from school to home about school programs and children's progress. Schools vary the form and frequency of communications such as memos, notices, report cards, and conferences, and greatly affect whether the information about school programs and children's progress can be understood by all parents.

Type 3. Parent involvement at school refers to parent volunteers who assist teachers, administrators, and children in classrooms or in other areas of the school. It also refers to parents who come to school to support student performances, sports, or other events, or to attend workshops or other programs for their own education or training.

Type 4. Parent involvement in learning activities at home refers to parent-initiated activities or child-initiated requests for help, and ideas or instructions from teachers for parents to monitor or assist their own children at home on learning activities that are coordinated with the children's classwork.

Type 5. Parent involvement in governance and advocacy refers to parents' taking decision-making roles in the PTA/PTO, advisory councils, or other committees or groups at the school, district, or state level. It also refers to parent and community activism in independent advocacy groups that monitor the schools and work for school improvement.

Figure 10. Source: Educational Leadership, "On parents and schools: A conversation with Joyce Epstein," 1989.
time, may not be possible. Epstein suggested that in the vast majority of cases, effective and strong parent-school partnerships can be developed -- as long as parents receive the necessary information and guidance from school personnel (cited in Brandt, 1989, p. 27).

Although at the present no solid research base exists which would suggest that any one model of parent-school involvement is clearly superior to any other, there is emerging evidence that successful programs are generally characterized by some common attributes. In brief, the following program attributes are likely to significantly increase the chances for successful parent-school partnerships.

*Program Attributes for Successful Parent-School Partnerships*

*** Parents are treated with respect and their views and opinions are valued.

*** Assumptions about why parents aren't more actively involved in their children's programs are made with considerable caution. Parental motives are not prejudged.

*** School personnel maintain varied and open lines of communication with parents. Communication is honest, relevant, meaningful, and frequent.

*** School personnel make a concerted effort to remove as many obstacles and barriers as possible. For example, parent meetings are scheduled at flexible and convenient times, transportation is provided when necessary, and potential language barriers are considered.

*** Parents are provided with clear, specific, and relevant information and guidance regarding how they can best help their children at school and at home.

*** Programs take into full consideration the complexity of needs and problems which many disadvantaged parents have and attempt to assist parents with these basic needs and problems. For example, a school might initiate an adult literacy class for parents or help parents "connect" with other social service agencies.
Efforts at promoting positive parent-school partnerships are not limited to the early grades. These efforts often are even more important for students during middle and high school years.

Parents are treated as adults and as equal partners in their children's educational process. They are not only listened to and valued but are also empowered to act responsibly and forcefully on their children's behalf.
XII. CONCLUDING PERSPECTIVE

One of the major objectives of this document has been to collect and synthesize information gathered from recent reports and studies involving the current status of children and youth in the United States. Another major objective has been to identify several emerging trends involving our nation's youth and their families -- trends, which if not reversed, are likely to have a significant adverse impact upon not only the futures of American children and youth themselves but also upon the social and economic future of our nation.

Policymakers, as they attempt to resolve many of the problems facing today's and tomorrow's American youth, will need to have both vision and courage. The problems are multiple and complex, and they clearly do not lend themselves to simple solutions.

In attempting to present and analyze the large amounts of information contained in this document -- along with the offering of suggested recommendations for resolving some of the problems cited -- several issues appear to be especially critical, and we present them as a "concluding perspective" to this investigation.

First, we must move beyond the awareness level. Action is needed. To simply bemoan many of the current and projected worsening conditions of our nation's children and youth which are portrayed in commission reports will not solve the problem. Both immediate and long-term actions are needed. Certainly, there exists the need to take action to solve some of the more immediate, critical problems facing children in such areas as health care and housing. However, policies and actions which are directed at long-term solutions
to the complex problems facing disadvantaged children and youth are even more important.

Traditionally most of our country's efforts in this regard have been short-term and primarily remedial in approach. We need to focus much more on prevention and long-term approaches. Action is required at all levels of government: federal, state and local.

It is very unlikely that the multiple, complex problems facing poor and near-poor families in the United States can be substantially reduced without strong leadership and commitment at the national level. The problems are so comprehensive and pervasive that substantial fiscal resources will be needed. Our values and priorities as a nation will require reassessment. At the same time, we should not ignore the successful interventions which are occurring at the state, and especially at the local levels, throughout the country. We need to analyze successful programs in schools and communities, e.g., those designed to keep teenage parents in school, and to replicate them to whatever extent possible in other communities which share similar demographics.

Second, policymakers, professionals, and advocates collectively must recognize that many of the conditions and factors which place children and their families at high risk for failure and disadvantage are interrelated and are not independent of each other. Narrow, perspectival and piecemeal solutions will not work. Many young children and their families find themselves in growing jeopardy today due to a series of interrelated factors and conditions.

The most well-intentioned school reform efforts designed to improve the academic performance and to reduce the dropout rates of educationally disadvantaged students in our nation predictably will have minimal impact unless the broader conditions and factors
affecting these children and youth are rigorously addressed: living in poverty, lacking safe and affordable shelter, poor nutrition, inadequate health care etc. Clearly, the instructional and curriculum needs of students must continue to be a majority responsibility of our nation's public school educators. Yet, changing demographics, conditions, and emerging trends strongly suggest that new concepts of schooling may be needed.

As suggested by Pallas, Natriello, and McDill (1989), schools should be viewed as only one of several educating institutions that simultaneously affect an individual's growth (the family and the community being the other major institutions) and that remediation cannot be confined to the school. We agree with this perspective. Certainly, schools cannot be expected to solve all of the nation's social and economic problems. In fact, many observers feel that our nation's public schools already have been criticized too harshly and are being asked to assume "unrealistic responsibilities" -- responsibilities for which they are not equipped to handle.

Our schools have been described as the convenient whipping boy for our nation's economic and social ills. Clearly, our schools, as they are not the only cause of the problems facing many of today's youth, cannot be expected to solve these problems alone.

Yet, our schools are, or could be, in an extremely critical position to serve as a primary facilitator for a broad spectrum of services to disadvantaged children and their families. Some basic shifts in educators' roles and responsibilities will be required, but nevertheless, our nation's schools -- assuming that they are provided with sufficient fiscal and human resources (and, this is a major assumption) could function in a major facilitator role for the organization, collaboration, and delivery of comprehensive programming services to this population.
Third, the problems facing disadvantaged children are not so overwhelming that they cannot be overcome. Given the multitude and complexity of problems presently facing large segments of children and youth which have been addressed in this document, it is understandable why many readers might feel that these problems simply are so overwhelming and pervasive that they cannot be substantially alleviated, and certainly not eliminated. It is understandable why feelings of hopelessness and helplessness persist.

Yet, we already know what needs to be done. We are not beginning from a zero knowledge base. For example, we possess clear evidence that early intervention with children and families works. Likewise, we have solid evidence that intensive instruction, maintained over time, significantly reduces a student's chances for educational failure. And, we know that early and frequent maternal and infant health care substantially reduces the likelihood of later health risks for both mother and child.

We know much more also. It isn't a question of not knowing what works to help break the cycle of disadvantage: It is a question of whether or not we as a nation are committed -- politically, socially, economically, educationally, and morally -- to effect those changes necessary to allow our country to develop into a pluralistic, economically sufficient and productive, and compassionate one -- rather than into a two-tiered class society of the have and the have-nots: the advantaged and the disadvantaged.

We wish to offer one final observation/perspective. In spite of our best efforts, unpredictable events can divert the attention of policymakers and the American public very rapidly from one set of problems and issues to others -- those perceived as being "more critical", and, therefore, requiring not only our
attention but also our action. The current crisis in the Middle East represents a good example in this regard.

Prior to the invasion of Kuwait by Iraq and the subsequent massive deployment of U.S. troops to the Middle East, our nation's media had been giving almost daily attention to some aspect of the "problems being faced by U.S. children and youth." Whether the issue was childhood poverty, teenage homicide, homeless children, pediatric AIDS, or teenage pregnancy, substantial public attention was being directed to "these crises." Since tensions in the Middle East have escalated, there has been very little mention of these "crises" facing thousands of American children and their families.

It is understandable why media and public attention has been diverted to the serious situation in the Middle East. Clearly, there exists almost universal opinion that events in the Persian Gulf are extremely serious and that they demand close attention by the American public. Yet, while our nation's attention turns to events in the Middle East, the problems facing its children and youth have not gone away. They remain as critical, or likely are even more critical, as they were prior to Saddam Hussein's takeover of Kuwait.

President Bush, in response to questions and concerns relative to what the financial costs to the American public which our involvement in the Middle East would be, responded that "cost cannot be an issue -- whatever it costs, we will have to pay for it -- our future American lifestyle is being threatened" [referring to our dependence on foreign oil]. In our efforts to deal with the serious Middle East crisis, we cannot lose sight of the fact that the lifestyles of large and growing numbers of American children and youth have already been adversely affected by our past and present failures to develop effective policies and programs to help them improve the overall quality of their lives.
Therefore, while we cannot ignore the seriousness of events in the Middle East, we also cannot ignore the seriousness of the problems facing our children and youth at home. Hopefully, the crisis in the Middle East will lessen considerably. Yet, surely there will be other crises in the future, possibly not of the same magnitude as the present situation, but nevertheless, serious enough to once again divert attention away from domestic problems.

It is not our intent to minimize the importance of events in the Middle East to all Americans, most certainly including the very children and youth who are the focus of this document. Rather, we strongly caution against this population being inadvertently forgotten in the process. That these children are no longer receiving the attention in the public media that they did just a very brief time ago, does not in any way mean that they are no longer in jeopardy. They are -- and they cannot be ignored by policymakers and the American public.

Lisbeth Schorr (1989) described the task before us very well:

Knowing now that effective social interventions can reduce the number of children hurt by cruel beginnings and simultaneously promote the national welfare, we must be certain that these newly available tools are put to work. We have the knowledge we need. We know how to organize health programs, family supports, child care, and early education to strengthen families and prevent casualties in the transition from childhood to adulthood. We know how to intervene to reduce the rotten outcomes of adolescence and to help break the cycle that reaches into succeeding generations. Unshackled from the myth that nothing works, we can assure that children without hope today will have a real chance to become the contributing citizens of tomorrow (p. 294).

We are currently amidst yet another wave of educational reform in the United States. The issues and concerns being discussed as part of this reform movement certainly are important ones -- as are the issues and concerns presently being discussed as part of broader discourses being conducted: those involving poverty, homelessness, health care, and the budget deficit.
Policymakers must continue to be provided with important information in order for them to develop appropriate and meaningful policies for our nation's children and their families. Amendments to current pieces of legislation involving disadvantaged children, e.g., PL 94-142, will continue to be proposed. Likewise, present policies involving disadvantaged children and their families must continue to be evaluated for their efficacy -- and, new more effective policies developed and implemented.

The development of meaningful cooperative agreements among agencies involved with at-risk children and their families likewise are necessary at all levels of government: federal, state, and local. Yet, none of these efforts unto themselves, or even collectively, will likely produce any substantive changes in the future lives of our nation's at-risk children. For many years now, these very same "remedies" have been offered. And, unfortunately, the problems facing disadvantaged populations not only remain, but in many cases, they have become worse. Minor adjustments in the current system are not enough. Short-term, band-aid remedies will not work.

New, creative visions of how to utilize and implement the information that we already have in order to reverse the cycles of disadvantage -- as well as the willingness and commitment to take those actions which are necessary to really effect change in these areas -- are required. Yes, some of the reasons why so many children fall through the cracks of our nation's educational, social, health, and economic systems are due to inadequate or ineffective policies and inadequate levels of funding for necessary programs. These areas clearly require our attention and action.

However, underlying all of this are issues of values, attitudes, and priorities. The real questions which need to be asked are:
How much do we as a people truly value the quality of life of our nation's children and youth, particularly those who are most disadvantaged?

Where do our priorities lie relative to supporting those policies and actions which are necessary to improve the overall quality of life for these children and their families -- today and in the future?

Finding the answers to these questions is clearly a complex and formidable task. For each day that we deliberate, however, increasing numbers of children become educationally disadvantaged. For each day that we deliberate, an increasing number of children suffer from abuse, neglect, and preventable illness. For each day that we deliberate -- and not act -- increasing numbers of children and youth join the ranks of the hungry, homeless, and poor.

A crisis is upon us: The future of our children hangs in the balance. Do we as a nation, and as individuals, have the concern, compassion, and courage to face the challenge?
REFERENCES


Buehler, B. (1990). The changing nature of special education: Children will be younger, some will be more impaired, and many will be expensive to serve, researcher says. Counterpoint, 10(3), 8.


Kantrowitz, B. (1990b, Summer/Fall). The dangers of doing it [Special Issue]. *Newsweek*, pp. 56-57.


Mesinger, J. F. (1985). Commentary on "A rationale for the merger of special and regular education" or, is it now time for the lamb to lie down with the lion? Exceptional Children, 51, 510-512.


Olson, L. (1990a, May 16). Education officials reconsider policies on grade retention. Education Week, 2(34), 1, 13.

Olson, L. (1990b, April 4). Parents as partners: Redefining the social contract between families and schools. Education Week. 2(28), 1, 17-24.

Painter, K. (1990, August 31-Sept 3). Infant death rate drops to a record low. USA Today, 1A.


Study finds 'risk factor' for 'latchkey children'. (1989, September 13). Education Week, 2(1), 19.


