As part of the mission of the Start Smart, Stay Smart Milwaukee program to ensure that all Milwaukee area children enter school with the skills necessary for academic achievement and a lifetime of growth and development, the organization is tracking key indicators across the years of growth and development to young adulthood to better assess the results of early investments on later outcomes. This eighth annual report to the community presents information on indicators related to goals for children and youth in the following areas: (1) prenatal care and children's health; (2) early care and education; (3) nutrition; (4) safety; (5) economic security; (6) parent support; (7) school success; and (8) youth success. Among the key findings of the report are that slightly more than half of women giving birth in Milwaukee between 1998 and 2000 received adequate prenatal care, with significant racial and ethnic disparities in initiation of prenatal care, low birthweight incidence, and infant mortality rate. Head Start enrollment increased by 5 percent, but enrollment remains below capacity. Participation in WIC and the federal Free and Reduced Price Meal program has declined over the past few years. The rate of substantiated child abuse declined between 1999 and 2001. One-third of Milwaukee children lived in poverty in 2000, compared to 11 percent statewide. Parent support services have increased over the past 5 years. Although high school graduation rates increased, racial/ethnic disparities remain. Ten percent of Milwaukee County 16- to 19-year-olds were not in school and not working in 2000. The report concludes with a table comparing indicator data for Milwaukee, Milwaukee County, the county excluding the city, and the state, as well as information on data and reference sources.
STATE OF MILWAUKEE’S CHILDREN 2002
START SMART, STAY SMART
MILWAUKEE

a project of the Wisconsin Council on Children and Families
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The Voice For Wisconsin's Children
16 North Carroll Street • Suite 600 • Madison, WI 53703
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Key Findings

Goal 1 - Prenatal Care and Children's Health

- Slightly more than half (53%) of all women giving birth in the City of Milwaukee between 1998 and 2000 received adequate prenatal care, compared to 65 percent statewide. However, racial and ethnic disparities exist in three key areas of prenatal and infant health:
  
  - 69 percent of black women and 68 percent of Hispanic women initiated prenatal care in the first trimester of pregnancy in 2000, a rate that was 25 percent less than that of white women (87%).
  - Black, non-Hispanic infants were more than twice as likely to have low birthweight (14%) as white, non-Hispanic, and Hispanic infants (7%). Overall, the rate of low birthweight infants in Milwaukee County (10%) increased by 5 percent between 1999 and 2000, while the statewide rate (7%) was unchanged.
  - The three-year infant mortality rate for black, non-Hispanic infants in Milwaukee City (16.7 per 1,000 births) was three times that for white, non-Hispanic infants (5.5 per 1,000 births). For Hispanic infants, the rate was one and a half times greater.
  - Immunization rates for two-year-olds in Milwaukee County (72%) remain lower than national (79%) and state (84%) rates.
  - The screening penetration rate for one and two year olds in the City of Milwaukee has doubled over the past five years, from 25 percent in 1997 to 53 percent in 2001. Those screened were more than twice as likely to have elevated lead levels as were their cohort statewide (16% vs. 7%). Of those screened, black one and two year olds were four times more likely than white, non-Hispanic and Hispanic one and two year olds to have elevated blood lead levels.
  - More than half of Milwaukee County children under age 5 were enrolled in public health insurance programs, and enrollment overall has increased since 1999.

Goal 2 - Early Care and Education

- Head Start enrollment increased by 5 percent in 2001-02 over the previous year, but enrollment remains below capacity.
- K3 and K4 program enrollment increased in 2001-02; more than three fourths of K4 children are in full day programs.
- The total number of childcare providers in Milwaukee County has doubled since 1995; over 30,000 childcare slots were available in 2001.
- Nearly nine of ten (86%) available childcare slots in 2001 were in licensed settings; of these, most (70%) were in group care settings.

Goal 3 - Nutrition

- Milwaukee County WIC participation rates continue to decline: average monthly participation in 2001 was 31,546, a decline of 19 percent from 2000.
- The total number of Milwaukee County children receiving Food Stamps increased slightly in 2001, to 89,760.
**Goal 4 - Safety**
- Overall, crime reports for the City of Milwaukee increased in 2001 but violent crime reports declined by 4 percent.
- Twenty-two Milwaukee children under age 18 were killed in 2001-16 as a result of firearms.
- Child abuse reports increased by 34 percent between 1999 and 2001, but the rate of substantiated reports declined by nearly half, to 17 percent.
- Reported domestic violence incidents (7,123) in Milwaukee County declined between 1999 and 2000.

**Goal 5 - Economic Security**
- One-third of all children in the City of Milwaukee lived in poverty in 2000, compared to 11 percent statewide.
- In 2000, more than half of all children in the City of Milwaukee lived in neighborhoods where 20 percent or more of the population was living in poverty, compared to 9 percent statewide.
- More than 22,000 children were in families receiving W-2 support as of September 2002.
- 77 percent of W-2 participants were in placements with payment.

**Goal 6 - Parent Support**
- Family Resource Centers and fathering programs have increased services over the past five years.

**Goal 7 - Children are Successful in School**
- Retention rates doubled for middle school students between 1996 and 2001, and rates for high school students increased by a third.
- One in five (21%) elementary school students was habitually truant in 2000-01, down from 26 percent in 1998-99, as were more than half (52%) of middle school students and two-thirds (65%) of high school students.
- Attendance rates declined with age: 93 percent of elementary students, 87 percent of middle school students and 79 percent of high school students were in school on a given day.
- 28 percent of all students participated in extra- or co-curricular academic and athletic activities in 2000-01, down from 33 percent the previous year.
- Overall, 55 percent of the class of 2001 graduated. While graduation rates increased across all racial/ethnic groups, disparities exist: nearly half (49%) of black students enrolled graduated, compared to 54 percent of Hispanic students, 68 percent of white, non-Hispanic students and 74 percent of Asian students.

**Goal 8 - Youth Success**
- 10 percent of Milwaukee County youth ages 16-19 were not in school and not working in 2000, unchanged from 1990.
- More than half (57%) of 2001 MPS high school graduates pursued further education after graduation.
## Summary Indicator Data

### Demographics

<table>
<thead>
<tr>
<th>Indicator</th>
<th>City of Milwaukee</th>
<th>Milwaukee County</th>
<th>Milwaukee County excl. City of Milwaukee</th>
<th>Wisconsin</th>
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<tbody>
<tr>
<td>Total Population, 2000</td>
<td>596,974</td>
<td>940,164</td>
<td>343,190</td>
<td>5,363,675</td>
</tr>
<tr>
<td>% Hispanic</td>
<td>12%</td>
<td>9%</td>
<td>3%</td>
<td>4%</td>
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<tr>
<td>% White, non-Hispanic</td>
<td>45%</td>
<td>62%</td>
<td>87%</td>
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<tr>
<td>% Black, non-Hispanic</td>
<td>37%</td>
<td>24%</td>
<td>6%</td>
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<tr>
<td>% Asian</td>
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<tr>
<td>Population &lt;18 Years, 2000</td>
<td>170,964</td>
<td>247,825</td>
<td>76,841</td>
<td>1,369,756</td>
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<td>% Total Population &lt; 18</td>
<td>29%</td>
<td>26%</td>
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<tr>
<td>% Hispanic</td>
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<tr>
<td>% White</td>
<td>30%</td>
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<td>83%</td>
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<tr>
<td>% Black</td>
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<td>8%</td>
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<td>% Asian</td>
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</tr>
<tr>
<td>% Children in Poverty, 2000</td>
<td>31%</td>
<td>23%</td>
<td>11%</td>
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<tr>
<td>% Female-Headed Families, Children &lt; 18, 2000</td>
<td>14%</td>
<td>10%</td>
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<td>% All families w/Children &lt;5, In Poverty, 2000</td>
<td>31%</td>
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<td>% Female-Headed Families w/Children &lt;5 In Poverty, 2000</td>
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<td>51%</td>
<td>43%</td>
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<td>% Children Living in Poor Neighborhoods, 2000</td>
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<td>39%</td>
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<tr>
<td>% Aged 5-17, non-English Home Language, 2000</td>
<td>18%</td>
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<tr>
<td>Unemployment Rate, 2001</td>
<td>7.9%</td>
<td>5.6%</td>
<td>4.6%</td>
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<tr>
<td>Unemployment Rate, 2000</td>
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<td>4.5%</td>
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<tr>
<td>Per Capita Income, 2000</td>
<td>$16,181</td>
<td>$19,939</td>
<td>$21,271</td>
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<tr>
<td>% Renter-Occupied Housing</td>
<td>55%</td>
<td>47%</td>
<td>32%</td>
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<td>% Adults &gt;25 w/Less Than HS Degree, 2000</td>
<td>25%</td>
<td>20%</td>
<td>15%</td>
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<tr>
<td>Birth Rate, 2000</td>
<td>18.7</td>
<td>15.8</td>
<td>12.9</td>
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<tr>
<td>% Births to Single Mothers, 2000</td>
<td>60%</td>
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<td>30%</td>
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<td>Teen Birth Rate (per 1,000 Females Age 15-17) 2000</td>
<td>88.1</td>
<td>68.6</td>
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### Prenatal Care & Children's Health

<table>
<thead>
<tr>
<th>Indicator</th>
<th>City of Milwaukee</th>
<th>Milwaukee County</th>
<th>Milwaukee County excl. City of Milwaukee</th>
<th>Wisconsin</th>
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<tbody>
<tr>
<td>% Initiated Care in 1st Trimester, 2000</td>
<td>75%</td>
<td>79%</td>
<td>93%</td>
<td>84%</td>
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<tr>
<td>% With 10 or Fewer Prenatal Visits, 2000</td>
<td>26%</td>
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<tr>
<td>% Receiving Adequate Prenatal Care, 2000</td>
<td>53%</td>
<td>59%</td>
<td>77%</td>
<td>65%</td>
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<tr>
<td>% Mothers Smoked During Pregnancy, 2000</td>
<td>16%</td>
<td>15%</td>
<td>10%</td>
<td>15%</td>
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<tr>
<td>% Births to Mothers w/ HS Degree, 2000</td>
<td>35%</td>
<td>28%</td>
<td>6%</td>
<td>16%</td>
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<tr>
<td>% Infants with Low Birthweight, 2000</td>
<td>10%</td>
<td>9%</td>
<td>6%</td>
<td>7%</td>
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<tr>
<td>3 Year Infant Mortality Rate, 1998-2000</td>
<td>11.3</td>
<td>9.9</td>
<td>5.9</td>
<td>6.8</td>
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<tr>
<td>% Children Adequately Immunized (4-31 Series), 19-35 Months, 2001</td>
<td>72%</td>
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<td>84%</td>
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<tr>
<td>% Children Adequately Immunized At School Entry 2001-2002</td>
<td>72%</td>
<td></td>
<td>88%</td>
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<tr>
<td>% c/8 Screened, w/EL, 2001</td>
<td>18%</td>
<td>13%</td>
<td>7%</td>
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</tbody>
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* Blank fields indicate data not available
## Summary Indicator Data

<table>
<thead>
<tr>
<th>Indicator</th>
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<th>Milwaukee County excl. City of Milwaukee</th>
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<tbody>
<tr>
<td><strong>Prenatal Care &amp; Children's Health (cont.)</strong></td>
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<tr>
<td>% 1 and 2 Year Olds Screened for Lead Poisoning</td>
<td>52%</td>
<td>64%</td>
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<tr>
<td>% 1 and 2 Year Olds Screened, with Banned Lead Levels (ELU) 2001</td>
<td>17%</td>
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<td>Average Monthly Enrollment, Family Coverage 2001, Ages 0-5</td>
<td></td>
<td>37,979</td>
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<td>Average Monthly Enrollment, Family Coverage 2001, Ages 6-14</td>
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<td>40,212</td>
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<td>% &lt;5 Enrolled in Family Coverage, 2000</td>
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<td>Birth to Three Enrollment, 2001</td>
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<td>Asthma Prevalence Rate (per 100 Children 18), 1996-1998</td>
<td>7.80</td>
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<td><strong>Early Care &amp; Education</strong></td>
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<tr>
<td># Head Start Spaces, 2001-02</td>
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<tr>
<td># Children Enrolled, Head Start 2001-02</td>
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<td>3,631</td>
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<tr>
<td># Children Enrolled, MPS K-3, 2001-02</td>
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<td>814</td>
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<tr>
<td># Children Enrolled, MPS K-4, 2001-02</td>
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<td>5,422</td>
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<tr>
<td># 3-5 Year Olds, MPS Special Ed</td>
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<td>1,038</td>
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<tr>
<td># Licensed Group Centers</td>
<td></td>
<td>319</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Accredited</td>
<td></td>
<td>15%</td>
<td></td>
<td></td>
</tr>
<tr>
<td># Licensed Family Providers</td>
<td></td>
<td>608</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Accredited</td>
<td></td>
<td>3%</td>
<td></td>
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<tr>
<td># Certified Family Providers</td>
<td></td>
<td>1,458</td>
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<tr>
<td>Total Childcare Spaces, 2001</td>
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<td>31,337</td>
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<tr>
<td>% in Licensed settings</td>
<td></td>
<td>96%</td>
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<tr>
<td>% in Accredited Settings</td>
<td></td>
<td>18%</td>
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<tr>
<td># Children Receiving WIShares Subsidy, 2001</td>
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<td>33,471</td>
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<tr>
<td>Average Annual Subsidy per Child</td>
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<td>$2,839</td>
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<tr>
<td><strong>Nutrition</strong></td>
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<tr>
<td>WIC Average Monthly Enrollment, 2001</td>
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<td>31,546</td>
<td>101,046</td>
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<td>Food Stamp Child Recipients, 2001</td>
<td></td>
<td>89,760</td>
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<td>Participation Rate FARPM 2001-02</td>
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<tr>
<td>Elementary</td>
<td></td>
<td>77%</td>
<td>33%</td>
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<tr>
<td>Middle School</td>
<td></td>
<td>74%</td>
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<tr>
<td>High School</td>
<td></td>
<td>55%</td>
<td></td>
<td></td>
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<tr>
<td><strong>Safety</strong></td>
<td></td>
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<tr>
<td>Index Crime Arrest Rate, 2001 (per 10,000 Adults)</td>
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<td>332</td>
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<tr>
<td>Juvenile Arrest Rate, 2001 (per 1,000 Youth Ages 10-17)</td>
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<tr>
<td>Juvenile Violent Crime Arrest Rate, 2001 (per 1,000 Youth Ages 10-17)</td>
<td>6</td>
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*Blank fields indicate data not available.
## Summary Indicator Data

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<thead>
<tr>
<th>Indicator</th>
<th>City of Milwaukee</th>
<th>Milwaukee County</th>
<th>Milwaukee County excl. City of Milwaukee</th>
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<tr>
<td><strong>Safety (cont.)</strong></td>
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<td># of Substantiated CAIN Referrals, 2001</td>
<td>1,549</td>
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<tr>
<td># Children Removed From Home, 2001</td>
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<tr>
<td># Children in Out-Of-Home Care, 2001</td>
<td>5,917</td>
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<td># Reported Domestic Violence Incidents, 2001</td>
<td>7,123</td>
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<td><strong>Economic Security</strong></td>
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<td>Median Family Income, Families w/Children &lt;18, 2000</td>
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<td>$63,096</td>
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<td>WV-2 Average Monthly Enrollment, 2002</td>
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<td>9,872</td>
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<td>Children in Families Receiving WV-2, Sept. 02</td>
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<td>22,268</td>
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<td>Average Monthly Enrollment, WI Shares 2001</td>
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<td>19,406</td>
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<td><strong>Children In School</strong></td>
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<td>Total Enrollment, 2001-02</td>
<td>99,762</td>
<td>151,189</td>
<td>51,427</td>
<td>879,361</td>
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<td># Students, Parental Choice Program</td>
<td>10,580</td>
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<td># Students Attending Non-Public Schools</td>
<td>25,457</td>
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<td>Minority Enrollment, 2001-02</td>
<td>82%</td>
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<td>Enrollment by Race/Ethnicity</td>
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</tr>
<tr>
<td>% Black</td>
<td>61%</td>
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<tr>
<td>% White</td>
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<tr>
<td>% Asian</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>% Hispanic</td>
<td>15%</td>
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<tr>
<td>% Students Receiving Special Ed, 2001-02</td>
<td>13%</td>
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<td>12%</td>
</tr>
<tr>
<td>% Students English Proficient, 2001-02</td>
<td>92%</td>
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<td>97%</td>
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<td>% Students Receiving ESL Services, 2001-02</td>
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<td>% Students Changed School During Year, 2000-01</td>
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</tr>
<tr>
<td>Elementary</td>
<td>22%</td>
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<tr>
<td>Middle</td>
<td>21%</td>
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<tr>
<td>High School</td>
<td>25%</td>
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<tr>
<td>% Students Attended Same School As Previous Year, 2000-01</td>
<td></td>
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</tr>
<tr>
<td>Elementary</td>
<td>71%</td>
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## Summary Indicator Data

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<tr>
<td>% Hispanic Students</td>
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<td>% Asian Students</td>
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<td>Teacher Turnover Rate, 2001</td>
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<td>Teacher Absenteeism Rate, 2001</td>
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<tr>
<td>% HS Graduates Entered Workforce, 2001</td>
<td>23%</td>
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*Blank fields indicate data not available.
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Introduction

The Mission of Start Smart Stay Smart Milwaukee

All Milwaukee area children will enter school with the emotional, social, physical, intellectual and imaginative skills necessary for academic achievement and a lifetime of growth and development, and will succeed in school.

In 2001, Start Smart Milwaukee became a program of the Wisconsin Council on Children and Families (WCCF), a statewide multi-issue child advocacy organization. The Council's mission is to improve the well being of children and families by advocating for effective health, education, justice and human service programs that are accessible and equitable for children.

As a result of this merger, the Start Smart Milwaukee program focus has expanded to include school-age children and youth through age 18. This is reflected in its new name, Start Smart, Stay Smart Milwaukee. By tracking key indicators across the years of growth and development to young adulthood, we can assess the results of early investments on later outcomes.

The purpose of State of Milwaukee's Children 2002, the eighth annual report to the community and the first to be produced by the Wisconsin Council on Children and Families, is to advance the mission of Start Smart, Stay Smart Milwaukee. The data contained in this report will help stakeholders (parents, educators, service providers, policymakers and advocates) be better prepared to assess and influence the public policy changes needed to improve the lives of children in Milwaukee.

To assist with this expansion, a local Advisory Committee was recruited for the purpose of reviewing and updating the original six goals, adding outcome goals related to older youth, and developing benchmarks for outcomes over a three to five year time period.

Wisconsin Council on Children and Families' Start Smart, Stay Smart Milwaukee Advisory Committee

Essie Allen
United Way of Greater Milwaukee

Michael Barndt
The Nonprofit Management Center

Cecelia Gore
Jane Bradley Pettit Foundation

Christine Holmes
Children's Hospital of Wisconsin

Carol Johnson
Planning Council for Health and Human Services

Tim McElhatton
Milwaukee Public Schools

Mary McLean
UW-Milwaukee Early Childhood Research Center

Diane Pollard
UW-Milwaukee School of Education

Lois Quinn
UW-Milwaukee Employment and Training Institute

Shelly Schnupp
YWCA of Greater Milwaukee

Mark Warhus
The Richard and Ethel Herzfeld Foundation

Jan Wilberg
Consultant, Brighter Futures Project

Joyce Mallory
Start Smart, Stay Smart Project Director
In this report, two goals have been added, with related indicators. Indicators used in previous years have been included with some updates to reflect current research on factors related to school readiness and school success. Further, some indicator data in this report is broken out by race/ethnicity in those instances where research indicates that disparities exist. Comparisons with other geographic areas, including the state, are made to add to the contextual understanding of how children and youth are faring in the City of Milwaukee.

About the Data
In compiling a report like this, we are dependent on administrative data systems developed and maintained by others. In some cases, data we would like to report on was not available. In other cases, data was available at some but not at all geographic levels (state, county, city and areas within the city). In many instances, this report relied on access to unpublished, though public, data.

The data collected by an organization reflects its values and issues of importance. As more research on child well-being and school readiness validates the relevance of the indicators included in this report, we need to be committed to influencing local and state government to collect meaningful data on related outcomes.

We are grateful to the many sources that supplied the data for this year's report. Data sources are documented at the end of the report.

Acknowledgements
This report was prepared by Dianne Jenkins for the Wisconsin Council on Children and Families, with funding support from the following organizations: United Way of Greater Milwaukee, the Greater Milwaukee Foundation, the CAP Network, and the Richard and Ethel Hertfeld Foundation.
Demographics & Birth Trends

Population
Changes in a population's age and racial/ethnic composition influence a community’s health and social profile, as does socioeconomic status. The City of Milwaukee and Milwaukee County comprise the largest urban area in the state of Wisconsin.

- The total population in 2000 was nearly one million (940,164), of which 63 percent reside in the City of Milwaukee (population 596,974).
- Milwaukee County was the 23rd most densely populated county in the nation in 2000, with 3,885 people per square mile.
- The City of Milwaukee was the 19th largest city in the nation in 2000.
- 26 percent of Milwaukee County's population is under age 18, on par with the state rate, while the City of Milwaukee's population is slightly younger, with 29 percent under age 18.

Race/Ethnicity
Milwaukee City is more racially diverse than the state at large, and has become more so over the past ten years.

- Of the city's total population, 45 percent is white, non-Hispanic, compared to 62 percent in Milwaukee County and 87 percent statewide.
- More than one-third (37%) of the city's population is black, non-Hispanic, compared to 24 percent in Milwaukee County and 6 percent statewide.
- 12 percent of the city's population is Hispanic, compared to 9 percent of Milwaukee County and 4 percent statewide.
- The percent of the population that is Asian (3%) is similar for the County and the state.
- Ten years ago, in 1990, the city's population was 63 percent white and 30 percent black. Hispanics of any race made up 6 percent of the city's population in 1990.

The child population (children under age 18) in Milwaukee City is more diverse; however, census data does not provide race/ethnicity data for children in the same manner as it does for adults. The data is broken out by race or ethnicity, not both.

- 17 percent of children are Hispanic, nearly three times the state proportion of 6 percent.
- 52 percent are black, more than six times the state rate of 8 percent.
- 30 percent are white, compared to 83 percent statewide.
- 4 percent are Asian, compared to 3 percent statewide.

Poverty
Living in poverty is one of the greatest risk factors threatening good outcomes for children. Poverty is especially detrimental for children under age five, and living in poor neighborhoods exacerbates the risk. Children in female-headed families are more likely to be living in poverty than those in married couple families.
31 percent of children in the city of Milwaukee lived in poverty in 2000, nearly three times the state rate of 11 percent.

In the City of Milwaukee, 14 percent of family households with children under age 18 were headed by a single female parent, compared to 6 percent in the state.

Nearly one in three (31%) of families with children under age five in the City of Milwaukee were living in poverty in 2000, compared to 12 percent statewide.

- In the City of Milwaukee, more than half (53%) of female-headed families with children under age five were in poverty in 2000; statewide, the rate was 43 percent.

- In 2000, more than half (56%) of all children in the City of Milwaukee lived in neighborhoods in which more than 20 percent of residents were living below the federal poverty level. Statewide, only 9 percent of children lived in such neighborhoods.

**Non-English Home Language**

- In 2000, 18 percent of school-age children in the city of Milwaukee lived in families in which a language other than English was spoken at home compared to 9 percent statewide.

**Employment**

Secure parent employment can reduce the incidence of poverty and its attendant risks to children, as well as reduce family stress. Wages and benefits differ by employment sector, with services and retail trade jobs having lower wages than others.

- In 2001, the City of Milwaukee's unemployment rate was 7.9 percent, nearly double the state rate of 4.6 percent.

- Milwaukee's unemployment rate in 2000 was ranked 25th of 239 cities with populations greater than 100,000.

- Per capita income in 2000 for the City of Milwaukee was $16,181 in 2000, compared to $21,271 statewide.

- 43 percent of city jobs were in the retail and services industries.

**Housing**

Secure housing that is affordable results in less mobility for children. A standard of affordability used by housing lenders is that 30 percent or less of household income should be used for rent or mortgage payments.

- More than half (55%) of all housing units in the City of Milwaukee were renter-occupied, placing it in the top fifth among 239 similar sized cities in the proportion of rental units to owner-occupied units. Statewide, 32 percent of housing units were renter-occupied.

- 39 percent of renters in the City of Milwaukee paid 30 percent or more of their household income for rent in 2000, compared to 32 percent statewide.
Education
Higher levels of educational attainment are related to higher earnings and more stable employment.

- One in five adults over age 25 (20%) in the City of Milwaukee had less than a high school education in 2000, compared to 15 percent statewide.

Grandparents Parenting
- In the City of Milwaukee, 14,401 grandparents were living with their grandchildren in 2000; of these, 49 percent were responsible for their grandchildren. Of these, 16 percent had been responsible for their grandchildren for 5 or more years.

Birth Trends
In general, changes in birth rates may indicate changes in demand for childcare and other services, such as health care.

- In 2001, there were 14,698 births in Milwaukee County, slightly less than the 2000 total of 14,846.

- 75 percent (11,152) of 2000 Milwaukee County births were to City of Milwaukee residents; 3,694 births were recorded in Milwaukee suburbs.

- The birth rate for the City of Milwaukee (18.7 per 1,000 residents) was higher than the state rate of 12.9 in 2000, a differential that has held over the past five years (1995-2000).

- Birth rates in the state, county and city have remained stable over the past five years (1995-2000).

Births to Unmarried Mothers
Births to single mothers may indicate an increased risk of child poverty and of negative outcomes related to child well being that results when a parent is absent.

- 60 percent of births in the City of Milwaukee were to single mothers, double the state rate of 30 percent; and fifth highest among 50 large cities nationally.

- 92 percent of teens giving birth in Milwaukee County were single mothers.

[Chart 2: Births by Mothers' Marital Status 2000]
Teen Births

Births to teens indicate an increased risk of child poverty and parenting problems. Teen mothers may not be financially or emotionally ready to support their children. Teen mothers are less likely than other teens to finish high school, placing them at greater risk for reduced income over time.

- 2,331 births (16% of all births) in Milwaukee County in 2000 were to mothers age 19 or less.
- The teen birth rate for the City of Milwaukee (88 births per 1,000 females ages 15-19) declined by 13 percent between 1995 and 2000, but is nearly twice the national rate (48.7), and more than double the state rate (35.7).
- Milwaukee has one of the highest rates of repeat teen births in the nation - in 1999, 28 percent of teens who gave birth were already mothers. At the same time, this represents a decline of 20 percent from 1990, when 35 percent of teens who gave birth were already mothers.
Goal 1 - Prenatal Care and Children's Health

**Outcome:** Children are born healthy and are healthy throughout childhood.

**Goal:** Access for all pregnant women to early prenatal care and access for all young children to preventive, primary and long-term medical care.

**Prenatal Care**

Women who receive early and consistent prenatal care are more likely to give birth to a healthy child of normal birth weight, as early and regular prenatal care encourages women to engage in healthy behaviors. Three key indicators of good prenatal care are: trimester care was initiated (where care has begun in the first trimester, mothers are more likely to have healthy habits during pregnancy), number of prenatal visits (with 10 or fewer being inadequate) and adequacy of prenatal care. In Wisconsin, the last indicator is based on the month prenatal care began, the number of prenatal care visits and gestational age at delivery.

**Trimester Prenatal Care Initiated**

- 93 percent of mothers in Milwaukee suburbs initiated prenatal care in the first trimester of 2000, compared to 75 percent of mothers in the city of Milwaukee, and 84 percent statewide.

- There has been no significant change in the percent of mothers initiating prenatal care in the first trimester, regardless of location: rates for the nation, the state, Milwaukee County and the City of Milwaukee increased by less than 2 percent between 1995 and 2000. However, disparities across race/ethnicity exist.

![Chart 4](chart4.png)

- In 2000, white non-Hispanic mothers in the city of Milwaukee were more likely to have initiated prenatal care in the first trimester of pregnancy (87%) than were black, non-Hispanic mothers (69%) or Hispanic mothers (68%).

---

![Chart 5](chart5.png)
Ten or Fewer Prenatal Visits

- In 2000, 26 percent of mothers in Milwaukee County had ten or fewer prenatal visits during their pregnancy, unchanged from 1995. County level data on this indicator were not available, but statewide data indicate that racial/ethnic discrepancies exist, with black and Hispanic mothers more likely to have had minimal visits: 36 percent of black, non-Hispanic mothers and 35 percent of Hispanic mothers had ten or fewer prenatal visits, compared to 19 percent of white, non-Hispanic mothers.

Inadequate Prenatal Care

- 46 percent of Milwaukee mothers giving birth in 2000 received inadequate prenatal care, compared to 41 percent in Milwaukee County and 35 percent statewide.

In the suburbs, the proportion of mothers who initiated prenatal care in the first trimester ranged from 89 percent to 98 percent in 2000; however, given the small numbers associated with local health departments, such variations should be viewed critically and over a longer period of time (Chart 6).
Smoking among Pregnant Women

Infants whose mothers smoked during pregnancy are more likely to be born at low birthweight.

- 16 percent of expectant mothers in the City of Milwaukee, and 15 percent statewide, smoked during pregnancy in 2000, a decline of more than 20 percent from 1995. Nationally, 10 percent of expectant mothers smoked during pregnancy in 2000.

- Non-Hispanic expectant mothers in the City of Milwaukee were more than twice as likely as Hispanic mothers to have smoked during pregnancy: 19 percent of black, non-Hispanic mothers and 18 percent of white, non-Hispanic mothers smoked, as compared to 7 percent of Hispanic mothers.

- In 2000, ten percent of mothers in Milwaukee suburbs smoked during pregnancy, on par with the national rate.

Percent Births to Mothers with Less than a High School Degree

Higher levels of parent educational attainment - independent of income - are strongly associated with positive outcomes for children's health, readiness for school and educational achievement. Maternal education level is most predictive of later outcomes for children.

- In 2000, more than one-third (35%) of women giving birth in the City of Milwaukee did not have a high school degree, compared to 16 percent statewide and 6 percent in the suburbs of Milwaukee. Racial/ethnic disparities also exist.
Low Birthweight Infants

Infants who are premature or who did not attain normal growth in utero are at higher risk for mortality, long-term illness and disability (including asthma, vision problems, hyperactivity, auditory impairments, learning disorders, behavioral problems) and developmental delays. Low birthweight has been associated with grade retention and school failure in children aged 4-17 years.

- More than half (56%) of all Hispanic women giving birth in the State, County and City did not have a high school degree.

- 42 percent of black, non-Hispanic women giving birth in the City of Milwaukee did not have a high school degree; compared to 15 percent of white, non-Hispanic women.

- One in ten babies born in the City of Milwaukee in 2000 were low birthweight, compared to 6 percent in Milwaukee suburbs and 7 percent statewide. Rates in the City of Milwaukee have increased slightly over the past three years while remaining unchanged at the state level.

- Black, non-Hispanic infants in both the city and the state were more likely than Hispanic and white non-Hispanic infants to be low birthweight. In 2000, 14 percent of Black, non-Hispanic infants were low birthweight, twice the rate for Hispanic and white, non-Hispanic infants (7% each).

- In the Milwaukee suburbs, six percent of infants were low birthweight in 2000. The relative number of total births makes this data cautionary, as fluctuations may be exaggerated.
Infant Mortality

Infant mortality refers to the death of an infant before his/her first birthday, and is an internationally accepted key indicator of community health. Risk factors for infant mortality include lack of preventive health and prenatal care, inadequate nutrition and poor living conditions. Communities with multiple problems such as poverty, poor housing conditions and high unemployment tend to have higher infant mortality rates than more advantaged communities. Rates noted are per one thousand births.

- The three-year (1998-2000) infant mortality rate for the City of Milwaukee was 11.3, one and a half times higher than the rate for the State of Wisconsin (6.8).

- The five-year (1996-2000) infant mortality rate for the Milwaukee suburbs was 5.9 deaths per thousand births.

- The three-year infant mortality rate for black, non-Hispanic infants in the City of Milwaukee (16.7) was three times higher than the rate for white, non-Hispanic infants (5.5).

- The infant mortality rate for Hispanic infants (9.0) was one and a half times greater than that for white, non-Hispanic infants in the City of Milwaukee.

Immunizations

Many vaccine-preventable diseases are more common and more deadly among infants and small children. Childhood immunization is an important step in maintaining high vaccination levels. Children adequately immunized at age two (19-35 months) are healthier in the years up to school entry. At school entry, the rate of students not adequately immunized indicates poor access to health care. Data on children under age 5 reflect rates for children registered with the state's Immunization Registry.

- 72 percent of Milwaukee County children aged 19-35 months were fully immunized in 2001, compared to 84 percent statewide and 79 percent nationally.
Lead Poisoning

Lead exposure, even at low levels, harms a child's physical health and intellectual development. It is associated with decreased intelligence, reduced attention span, reading and learning disabilities and behavior problems. The most likely sources of lead in a child's environment are paint dust and contaminated soil and water. Houses built before 1950 that are in deteriorating condition are most likely to contain lead-based paint and paint dust. Children who are poor are at greater risk of lead poisoning than are children from higher income levels, because they are more likely to live in homes that are in deteriorating condition.

- 72 percent of Milwaukee public school children in grades K-5 met immunization requirements at school entry for school year 2001-02, compared to 88 percent in Milwaukee suburbs.

- 2,800 children in grades K-5 were excluded from MPS schools for five days in the 2001-02 school year because they did not meet the basic immunization requirements, down more than 10 percent (13%) from 3,227 students the previous year.

- 18 percent of all children screened in the City of Milwaukee in 2001 had elevated lead levels; a decline of 41 percent from 1997, but nearly three times the statewide rate.

- 13 percent of all children screened in Milwaukee County in 2001 had elevated lead levels, a 52 percent decline from 1997.

- The screening penetration rate for one and two year olds in the City of Milwaukee has doubled over the past five years, from one in four (25%) in 1997 to over half (53%) in 2001.
• One and two years olds in the city of Milwaukee were more than twice as likely to have elevated lead levels than their cohort statewide (16% vs. 7%).

• In Milwaukee County, the rate of elevated blood lead levels among black one and two year olds (28%) was four times that of white, non-Hispanic one and two year olds (7%).

Primary and Secondary Target areas were established by the City of Milwaukee Health Department to target prevention and intervention efforts to reduce the incidence of lead poisoning. In these areas, almost all the housing stock was built prior to 1950. The Primary Target Area includes city zip codes 53205, 53206, 53208, 53210 and 53212; The Secondary Target Area is comprised of city zip codes 53204 and 53215.

• 32 percent of children living in the City’s Primary Target areas had elevated lead levels - nearly double the citywide rate.

• 27 percent of children living in the City’s Secondary Target areas had elevated lead levels - one and a half times the citywide rate.

Eliminating the Causes of Lead Poisoning

The Milwaukee Health Department’s Childhood Lead Poisoning Prevention Project targets lead screening to communities at highest risk. It provides environmental inspection, abatement, and public health nurse case management services to children with lead levels 25 μg/dL and greater.

The City of Milwaukee’s Lead Poisoning Prevention and Control Ordinance provides the city health department with the authority to issue legally binding work orders to property owners when a lead poisoned child has been identified. The work orders specify treatments to remediate lead-based paint hazards. Originally passed in 1991, 1998 amendments included specific standards for lead hazard reduction projects and prevention treatments, as well as the inclusion of lead-dust clearance tests as a final condition of compliance with orders.

The Pilot Project for Lead-based Paint Hazard Control in Residential Properties (also known as the Pilot Primary Prevention Ordinance) aims to control lead-based paint hazards before children are poisoned. It requires that all pre-1950 rental properties in two pilot project areas (the Primary and Secondary Target Areas referenced above) control lead-based paint hazards through the application of standard window treatments and essential maintenance practices. Housing units that pass a city health department inspection are certified for a lead-safe housing registry.
Access to Health Care

Access to health care is the first line of defense in ensuring the healthy development of a child. Children with health insurance are more likely to have a regular and accessible source of health care, necessary to maintain well being. Children not covered by health insurance are more likely to go without routine checkups and medical care, and to require emergency room care for preventable or treatable illnesses. Pregnant women with access to health care are more likely to have adequate prenatal care, and to deliver infants of normal birth weight.

Every year the state conducts a survey of residents regarding health insurance coverage and health status. The 2001 Family Health Survey found that:

- In 2000, 83 percent of all Milwaukee County residents had health insurance coverage all year; an additional 8 percent were covered for part of the year. Statewide, 88 percent were covered all year and 7 percent were covered for part of the year.

- 89 percent of all children statewide were covered by health insurance; of these 84 percent were covered by private or employer-sponsored health insurance and 13 percent were covered by public health insurance.

Family Coverage

Children through age 18 qualify for Medicaid health insurance coverage if their families have incomes at or below 185 percent of the federal poverty level. **AFDC-related Medicaid** covers children and their caretakers with family income below 55 percent of the federal poverty level. **Healthy Start** covers pregnant women and children ages 0-6 with family income below 185 percent of the federal poverty level, and older children up to age 17 with family income below the federal poverty level.

Families with income above 185 percent of the federal poverty level who do not have access to employer-provided or other private health insurance and who meet income eligibility requirements may enroll in the state’s children’s health insurance program, known as **BadgerCare**.

Specific data regarding enrollment of Milwaukee County children in public health insurance indicates increasing coverage:

- Overall, the average monthly enrollment in public health insurance programs for Milwaukee County children ages 0-20 increased by 30 percent between 1998 and 2002 (through September 2002).

- More than half (53%) of Milwaukee County children under age 5 were enrolled in public health insurance programs in 2000.

- Average monthly enrollment in the first nine months of 2002 for the three programs combined totaled 100,987. Of this, 61 percent of children were enrolled in AFDC-related Medicaid, and 30 percent in Healthy Start. BadgerCare enrollment comprised 8 percent of the total.

- Healthy Start enrollment increased by 62 percent during this period, while AFDC-related enrollment increased by 5 percent.

- Implemented in late 1998, average monthly BadgerCare enrollment more than tripled between 1999 and 2002, from 1.810 to 8,501 children.

(Note: families with a disabled adult or child, and children in foster care or subsidized adoptions are covered under other Medicaid coverage groups. data on these coverage groups is not included in this analysis.)
**Children with Developmental Delays/Disabilities**

Early identification of disability and developmental delay is associated with decreased delays in later school performance.

- Referrals to the County's *Birth to Three* program have increased by 15 percent over the past three years, from 1,575 referrals in 1999 to 1,826 referrals in 2001.

- The program served 2,733 children in 2001, down 3 percent from the total served in 2000 of 2,809.

**Asthma**

Asthma is the most common chronic disorder among children, with immense social and economic costs. A child with uncontrolled asthma experiences symptoms that can be life threatening and affect all aspects of his or her life. Children with asthma in poor control miss school frequently, affecting their education and their parents' ability to work and support them. Good family asthma self-management guided by appropriate primary health care can prevent emergency room visits and hospitalizations that result from poor asthma control.

Asthma is a disorder that disproportionately affects poor and minority children, and children living in central city urban areas. Risk factors associated with asthma include having a parent with asthma, having eczema or allergies, and being exposed to tobacco smoke. Poverty, family stressors, and fragmented and inadequate health care are associated with poor asthma control.

- Milwaukee County asthma hospitalization rates were the highest in the state, with 26.4 hospitalizations per 10,000 population, as compared to 12.1 for the state.

- Statewide, asthma hospitalization rates for blacks were 6.6 times that of whites (58.5 vs. 8.8 per 10,000); this difference has increased over time and is greater than racial differences reported at the national level.

- Racial disparities are starkest among Wisconsin children under age 4: black children under age four had hospitalization rates six times higher than white children (147.9 vs. 25.9 per 10,000 children).

- The asthma prevalence rate in the City of Milwaukee was 7.80 per 100 children under age 17, compared to 7.25 per 100 children statewide.

The Milwaukee Public School District estimates that 10-15 percent of enrolled students have asthma.

**Children's Dental Health**

Tooth decay is preventable and treatable. Receipt of dental care is an indicator of access to health care services. Data on Medicaid-enrolled children who received dental care in the past year was not available for this report. Another indicator of access is the number of available service providers.

- The number of licensed dentists in Milwaukee County declined from 653 in 2000 to 597 in 2001; of these, 187, or 31 percent are Medicaid-certified.
Goal 2 - Early Care & Education

**Outcome:** Children experience optimal development throughout early childhood.

**Goal:** Access for all children to quality, affordable, developmentally and culturally appropriate child care/early childhood education.

Early care and education experiences have long-lasting effects on how children learn and develop. Recent research underscores the critical importance of quality care for very young children, and policy initiatives both nationally and statewide are working toward greater access to quality care for those who would benefit most from it.

Public Early Childhood Programs

Public early childhood programs are formal programs funded with public revenues, whether federal or local. The two largest public programs serving Milwaukee County children are Head Start, a federally funded child development program serving low income children, and the Milwaukee Public Schools' Early Childhood programs.

**Head Start**

- A total of 3,631 children ages 3 and 4 were enrolled in Head Start programs in 2001-02, more than three times the number enrolled in 1995.

- The total number of funded slots (spaces for children) for Milwaukee Head Start programs was 4,155 children in 2001-02; actual enrollment of 3,631 represents 87 percent capacity.

- There are two Head Start grantees in Milwaukee County, the Social Development Commission and the Milwaukee Public School (MPS) District.

<table>
<thead>
<tr>
<th>Head Start Enrolment</th>
<th>2000-01</th>
<th>2001-02</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Milwaukee Public Schools (3-4)</td>
<td>1,016</td>
<td>980</td>
<td>-3.5%</td>
</tr>
<tr>
<td>Social Development Commission (SDC) (3-4)</td>
<td>2,437</td>
<td>2,651</td>
<td>9%</td>
</tr>
<tr>
<td>SDC - Early Head Start (0-3)</td>
<td>84</td>
<td>91</td>
<td>8%</td>
</tr>
<tr>
<td>Total Enrolled</td>
<td>3,453</td>
<td>3,631</td>
<td>5%</td>
</tr>
</tbody>
</table>

The Next Door Foundation operates an Early Head Start program for infants and toddlers up to age three.

- In 2001, 91 children under age three were enrolled in Early Head Start.
MPS Early Childhood Enrollment

MPS operates a variety of early childhood programs for 3 and 4 year olds, and contracts with local childcare centers for a limited number of K-4 classrooms.

- K-3 enrollment increased 17 percent, from 695 in 1999-2000 to 814 in 2001-02.
- K-4 enrollment increased by 7 percent, from 4,967 four year olds in 1999-2000 to 5,422 in 2001-02.

- In 2001-02, three-fourths of four-year-olds were in full-day K-4 programs, three times as many as the previous year.
- Ten percent were in full-day programs created by combining half day K-4 and half-day Head Start or childcare.

Early Childhood Special Education Programs

- The Milwaukee Public Schools served 1,038 children aged three through five in special education programs in 2001.

Child Care

Estimated Demand

Most children with working parents require some form of non-parental care for at least part of the day.

- In Milwaukee County in 2000, there were 74,650 children under age 6. Nearly two-thirds (63%) lived in families in which all parents were in the labor force, compared to 68 percent statewide.
- A recent report by the U.S. Bureau of the Census noted that 48 percent of working mothers with children under age five relied on relatives to provide childcare.

| Percent of Children < 6 Years, All/No Parents in Labor Force |
|------------------|------------------|------------------|------------------|
| Milwaukee County | City of Milwaukee | Wisconsin        |
| Total | 74,650 | 51,741 | 399,076 |
| All Parents in Labor Force | 47,399 | 32,285 | 273,021 |
| % of Total | 63% | 63% | 68% |
| No Parent in Labor Force | 12,098 | 10,874 | 29,724 |
| % of Total | 16% | 21% | 7% |

Definitions of Childcare Providers

This report includes data on regulated childcare only; care provided by relatives and unregulated providers, while representing nearly half of childcare arrangements, is not documented. The State of Wisconsin licenses childcare homes and facilities, and the state and county together regulate non-licensed home-based childcare.

- **Licensed Group Care** refers to childcare centers serving nine or more children that have been licensed by the State Department of Health and Family Services (DHFS), Bureau of Regulation and Licensing.

- **Licensed Family Care** refers to family childcare providers serving between four and eight children who have completed 40 hours of training and have been licensed by the DHFS Bureau of Regulation and Licensing.

- **Certified Family Care** refers to family childcare providers regulated by the County Department of Human Services, which administers the state subsidized childcare program, Wisconsin Shares, locally. There are two levels of certified care: Level 1, or regular certified, providers have completed 20 hours of training in child care in addition to required background criminal investigation and a home safety inspection; Level 2, or provisionally certified, providers have not received the training in child care but have cleared the background check and the home safety inspection. Data sources do not regularly report on the number of provisionally certified providers.

- **Accredited Care** refers to a group childcare center or a licensed family childcare home that has demonstrated specific high quality care standards as prescribed by the National Association for the Education of Young Children (NAEYC).

Childcare Availability: Provider Mix

- The number of childcare providers in Milwaukee County nearly doubled between 1995 and 2001, from 1,244 to 2,385.

- The greatest increase occurred in the number of certified family providers, from 854 in 1995 to 1,458 in 2001.

- Nearly two-thirds (62%) of all providers are certified family providers.

- The number of licensed group centers increased from 211 in 1995 to 319 in 2001.

### TABLE 3

<table>
<thead>
<tr>
<th>Provider Type</th>
<th>1995</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed Family</td>
<td>1,430</td>
<td>4,859</td>
</tr>
<tr>
<td>Licensed Group</td>
<td>14,982</td>
<td>22,104</td>
</tr>
<tr>
<td>Certified Family</td>
<td>-</td>
<td>4,337</td>
</tr>
<tr>
<td>Total Slots</td>
<td>31,337</td>
<td></td>
</tr>
</tbody>
</table>


### Availability: Slot Mix

- Regulated providers in Milwaukee County had a total capacity of 31,337 slots in 2001. Nearly all (94%) of these slots were located in the City of Milwaukee.
• 86 percent of all slots were located in licensed settings: 70 percent in licensed group facilities and 16 percent in licensed family homes.

• In 2001, infant/toddler (ages 0-2) slots represented 47 percent of all childcare slots; nearly 90 percent (87%) of these slots were located in licensed group provider settings.

• Preschool (ages 3-4) slots accounted for 53 percent of all childcare slots; 88 percent of these slots were located in licensed group provider settings.

Quality
 Participation in high quality early childhood care and education programs can have positive effects on children's cognitive, language, and social development, particularly among children at risk. Children from all backgrounds who have received high quality childcare score higher on tests of both cognitive and social skills in their early school years than do children who received poor quality care. Disadvantaged children are most affected by poor quality childcare and benefit most from high quality care.

A key indicator of a quality childcare setting is its accreditation status.

• 47 of the 319 licensed group providers (15%) were accredited in 2001.

• 17 of the 608 licensed family providers (3%) were accredited in 2001.

• Nearly one of every five childcare slots (18%) was located in an accredited childcare setting in 2001.
Other indicators of quality include teacher education levels, turnover rates, and wages paid to teachers. A statewide study of childcare sponsored by the Wisconsin Early Childhood Association (WECA) in 2001 found:

- 42 percent of childcare center teaching staff had an associate’s degree or higher, down from 61 percent in 1994.
- Annual turnover rates increased from 25 percent in 1994 to 41 percent in 2001.
- Average annual earnings for providers surveyed were just over $22,000.

According to a recent analysis by UW-Milwaukee’s Center for Economic Development, average annual pay for Milwaukee County childcare workers was $14,927 in 2000.

**Affordability**

Children from low-income households are at greater risk for failure in school, and benefit most from quality early care and education programs. However, the cost of childcare can limit access to high quality programs for many low-income families. Wisconsin Shares is a statewide program that uses state and federal funds to subsidize the cost of childcare for working families with incomes below 185 percent of the federal poverty level. Once they are enrolled, families remain eligible until earnings exceed 200 percent of the poverty level.

- 33,471 Milwaukee County children received subsidized childcare through the Wisconsin Shares program in 2001, representing nearly half of the total number of children served statewide.
- The average annual payment per child in 2001 was $3,839, for a total of $128.5 million in subsidies, accounting for more than half of total expenditures for the statewide program.

**Quality Initiatives**

- Milwaukee County partnered with The Registry, the professional recognition system for providers in Wisconsin, to track training levels and establish career ladders for childcare providers. In 2001, more than 300 certified providers were added to the Registry’s database.
- A substitute teacher pool for licensed childcare centers was established in 2000 and grew in 2001. The substitute pool supports staffing issues for programs that have participants in credit-based education aimed at advancing quality, by providing reliable professionals to work in a staff member’s absence. A family provider substitute pool is in place, tailored to the needs of home-based providers.
- Childcare Career Alliance is a collaborative of six childcare agencies in Milwaukee County that offers career assessments for family childcare providers in order to establish a career development plan. In addition, the Alliance offers informational and advisory services for qualified family childcare providers who are candidates to move up the regulatory ladder and/or achieve accreditation for their programs.
- Milwaukee County Early Childhood Council, composed of key area funders of early care and education, was established in 2000. Its purpose is to identify administrative, fiscal and programmatic barriers to establishing quality early childhood services, and to remove those barriers. The Council has developed a community plan for early care and education funding priorities, and implementation began in 2001. Taking on Turnover is a project that focuses on training and providing ongoing support for childcare center directors on managing staff development and reducing turnover. Another program offers monetary incentives for entry level childcare workers to pursue training.
- 4Cs Milwaukee, the childcare resource and referral agency for the four county metropolitan area, offered a Professional Support Program, providing grants to childcare programs whose staff members participated in training through local Centers of Excellence. Thirteen childcare centers in the Milwaukee area were awarded this designation from the State Department of Workforce Development.
Goal 3 - Nutrition

**Outcome:** Children are born healthy and are healthy throughout childhood.

**Goal:** Access for all young children and pregnant women to adequate nutrition and food security.

Hunger and food insecurity (inadequate or no access to nutritionally adequate and safe foods) has adverse consequences for children, particularly very young children. Research has demonstrated that children who experience hunger and food insecurity are more likely to:

- Be in poor health and have compromised ability to resist illness;
- Experience health problems such as stomachaches, headaches, colds, ear infections and fatigue;
- Display higher levels of aggression, hyperactivity and anxiety as well as passivity;
- Have difficulty getting along with other children;
- Have impaired cognitive functioning and a diminished capacity to learn, often resulting in lower test scores and poorer overall school achievement and grade retention; and
- Have increased school absences, tardiness and school suspension.

**WIC Participation**

The U.S. Department of Agriculture’s Women, Infants and Children (WIC) Program provides low-income women, infants and children with supplemental nutritious food, nutrition education and counseling, and screening and referrals for other health and social service programs. It is not an entitlement program, but is available to Medicaid-eligible pregnant women and children up to age 5 through federal grants to states, administered at local sites such as county health departments, community centers and public housing sites. Among other outcomes, WIC participation has been shown to increase children's likelihood of having a regular healthcare provider and to improve children's growth rates.

- 58,092 women and children in Milwaukee County were served in 2001, a decline of 3 percent from 2000 and 15 percent less than in 1998.
- 78 percent of those enrolled were children.
- Average monthly participation in 2001 was 31,546, a decline of 19 percent from 2000.
- Statewide, the monthly participation rate was 101,046 in 2001; nearly one third of all WIC participants statewide resided in Milwaukee County.
- In 2001, there were 13 WIC sites in Milwaukee County, down from 15 sites in 2000.
- WIC Farmers’ Market Nutrition Program provided vouchers to 21,397 families to purchase fresh produce at area farmers’ markets in 2001. Two-thirds (66%) redeemed these vouchers.
School Meal Programs

Students in families with income at or below 185 percent of the Federal Poverty Level are eligible for the federal Free and Reduced Price Meal (F/RPM), which offers eligible children nutritious breakfasts and lunches. While an indicator of children's access to nutritious food, it is also a key indicator of poverty status in a school district. Not all students who are eligible participate in the program, particularly at older grade levels.

- 71 percent of all MPS students participated in the F/RPM program in 2001-02, compared to 26 percent statewide.

- 77 percent of MPS elementary students participated in the F/RPM program in 2001-02, down from 81 percent in 1998-99. Statewide, 33 percent of elementary school children participated in the program.

CHART 28

Percent MPS Students Participating in Free/Reduced Price Meal Program: 2001-02

<table>
<thead>
<tr>
<th>Year</th>
<th>Elementary</th>
<th>Middle</th>
<th>High School</th>
</tr>
</thead>
<tbody>
<tr>
<td>1998-99</td>
<td>85%</td>
<td>76%</td>
<td>77%</td>
</tr>
<tr>
<td>1999-00</td>
<td>80%</td>
<td>75%</td>
<td>73%</td>
</tr>
<tr>
<td>2000-01</td>
<td>77%</td>
<td>73%</td>
<td>74%</td>
</tr>
<tr>
<td>2001-02</td>
<td>81%</td>
<td>74%</td>
<td>77%</td>
</tr>
</tbody>
</table>

- Participation rates for middle school and high school students has declined slightly over the past three years (1999 to 2001), from 76 percent to 74 percent of middle school students and from 58 percent to 55 percent of high school students. Statewide comparable rates were not available.

- In MPS elementary schools, the average number of meals served daily in February 2002 was 67,721 lunches (representing 68% of total enrollment) and 11,365 breakfasts (11% of total enrollment).

Food Stamps

The Food Stamp program was designed to increase the food purchasing power of low-income households; however, the impact of food stamps as an income source has declined since 1995 due to program cuts. Another barrier is the requirement that families' eligibility for the program must be re-certified every three months.

- A total of 89,760 children received Food Stamp assistance in 2001, slightly above the 2000 unduplicated total of 86,856 children.

- Total enrollment in the program was 102,000 in 2000, down from 150,000 in 1995.
Community Food/Meal Programs

A recent report, Passing the Buck, notes that

When cash is scarce, families are likely to spend their earnings on non-negotiable expenses like rent or health care. As a result, utilization of food pantries and meal programs reflects on generalized levels of need in Milwaukee neighborhoods. (page 10)

- The Hunger Task Force of Milwaukee, in its February 2001 report, Building Community to End Hunger, noted that residents in 10 City of Milwaukee zip codes (53224, 53223, 53225, 53218, 53216, 53206, 53233, 53207, 53221 and 53110) were critically underserved with regard to food security.

- The Task Force coordinates emergency food programs via a network of 80 food pantries (27 designated as infant need pantries) and 18 hot meal sites for families.

- In 2001, the Task Force provided emergency food to nearly 40,000 individuals each month. More than half of those served (52%) were under age 18.

Second Harvest

- Serves six southeast Wisconsin counties, including Milwaukee County, and operates 3 Kids Café programs in City of Milwaukee.

- 231,013 individuals were served through Second Harvest in 2001, of whom 48 percent were children under age 18.
Goal 4 - Safety

Outcome: Children are physically and emotionally safe.

Goal: Access for all children to a safe home and neighborhood environment.

Growing up in a physically and emotionally safe environment allows a child to develop trust, self-confidence and effective interpersonal skills, all of which are critical developmental milestones. Exposure to violence, as victims or witnesses, can have short and long term harmful effects on children, including social and emotional problems and poor school performance. Children under age six are especially vulnerable to negative outcomes.

**Millions of children are exposed to violence each year.** Violence is in the media, in communities and schools, and in children's homes. An estimated 3 to 10 million children witness domestic violence every year. One in two high school students is threatened or injured with a weapon each year:

- The maltreatment of children and violence against women often go hand in hand. Child abuse occurs in 30 to 60 percent of domestic violence cases involving families with children.

- The home can be a dangerous place. Far more children are victims of serious physical abuse within their homes than are severely injured in acts of violence on school grounds or elsewhere. In 1995, the FBI reported that 27 percent of all violent crime involves family on family violence, and 48 percent involved acquaintances, with the violence often occurring in the home. There is no existing data source for an accurate calculation of children's exposure to domestic violence.

- Children who are poor, non-white, male, and urban residents have the highest rates of exposure to community violence.

**Children suffer severe emotional and developmental consequences from exposure to violence.** Children who are victims of, or witnesses to, violence are at an increased risk for development of behavioral, psychological and physical problems. Even when children do not suffer physical injury, the emotional consequences of viewing or hearing acts of violence may be severe and long lasting. In the short term, exposure to violence can result in the total upheaval of a child's life. In the long term, many children exposed to violence experience difficulties in school, at work and in relationships; have physical and mental health problems; and may be at risk of being re-victimized by violence throughout their lives.

**Child victims are at greater risk of becoming offenders themselves.** Children who are victims of, or witnesses to, violence are more likely to engage in alcohol and drug use, delinquent acts and later adult criminality. Furthermore, these children are often at risk of repeating the violence they have experienced, thus perpetuating a cycle of violence that continues throughout future generations. Being abused or neglected as a child increases the likelihood of arrest as a juvenile. A comparison of delinquent and non-delinquent youth found that a history of family violence or abuse is the most significant difference between the two groups.
Crime
- Overall, crime reports for the City of Milwaukee in 2001 increased by four percent over 2000; this was the first increase reported in several years. Crime reports are compiled for eight categories of crimes, known as index crimes: four violent crimes (homicide, forcible rape, robbery and aggravated assault) and four property crimes (burglary, theft, motor vehicle theft and arson).

- The 2001 citywide index crime rate (index crime reports per 10,000 residents) was 768, compared to the state rate of 332. Seven of the city's seventeen aldermanic districts exceeded this rate (districts 1, 4, 6, 7, 10, 12 and 17).

- Violent crime reports declined by four percent in 2001 from the previous year. Two aldermanic districts (7 and 17) had homicide rates more than three times greater than the citywide rate of 2.2 per 10,000.

- 295 rapes or attempted rapes were reported in 2001. In addition, there were more than 1,000 reports of other sexual assault. Five aldermanic districts had rates of forcible rape significantly higher than the citywide rate of five per 10,000 residents (districts 1, 6, 7, 10, and 17).

Child Victims
- Sixteen children were killed by firearms in 2001 - four were under age 14 and twelve were between the ages of 15 and 17. This represents a decline of 27 percent from 1999, when 22 children were killed by firearms.

- Eight of thirteen children killed in domestic violence incidents in the state in 2000 lived Milwaukee County; six of the eight were killed by stepparents or parents.

- 64 girls aged 10 or younger in the City of Milwaukee were victims of forcible rape in 2001.

Juvenile Crime
- There were 2,726 juvenile arrests for index crimes in 2001 in the City of Milwaukee, a 7 percent decrease from 2000. The total number of juvenile arrests for all crimes (18,724) increased by 2 percent from 2000.

- The juvenile arrest rate in the City of Milwaukee for all crimes was 257 per 1,000 youths ages 10-17, slightly above the previous year's rate.

- The juvenile violent crime arrest rate was 6 per 1,000 youth aged 10-17.
Child Abuse/Neglect

- Reports of child abuse and neglect in Milwaukee County increased by 34 percent between 1999 and 2001.
- 17 percent of all referrals were substantiated, nearly half the rate of 41 percent in 1999.
- Two-thirds (67%) of children in families with substantiated referrals were kept in their homes through safety services.
- Nearly one in five (19%) of children in out-of-home care achieved permanency in 2001, through reunification, adoption or guardianship.

| TABLE 4 |
|-----------------|---------------|---------------|---------------|---------------|
| Child Maltreatment | Milwaukee County 1999-2001 | | | |
| Child Abuse/Neglect (CAN) | 1999 | 2000 | 2001 | Trend |
| N CAN referrals | 6,599 | 8,317 | 8,862 | 34% |
| N of referrals that are substantiated | 2,690 | 1,617 | 1,549 | |
| % of referrals that are substantiated | 41% | 19% | 17% | -57% |
| N of children removed from their families | 2,426 | 1,944 | 1,571 | |
| % of children removed from families | 27% | 22% | 18% | -32% |
| Total family cases opened | 2,428 | 2,015 | 1,928 | |
| Transferred to Safety Services (in-home) | 1,392 | 1,326 | 1,296 | |
| % transferred to Safety Services | 57% | 64% | 67% | 17% |
| N transferred to out-of-home care | 1,006 | 689 | 632 | |
| % transferred to out-of-home care | 43% | 24% | 23% | -23% |
| N of children in out-of-home care | 5,778 | 4,487 | 5,917 | -13% |

Domestic Violence

As defined in Wisconsin Statutes, domestic abuse is a crime between two adults who are currently or were formerly married, currently or formerly living together, or who have a child in common.

- Reported incidents of domestic violence in Milwaukee County have declined by one-third, from 10,723 in 1998 to 7,123 in 2000. Milwaukee County incidents account for 28 percent of total incidents reported statewide, down from 35 percent of all reported incidents in 1999.
- There was a 32 percent increase in the number of restraining orders issued in the City of Milwaukee in 2001 (5,207) over 1999.
- 164 orders to protect children were issued in 2001. More than three-fourths (76%) of these orders were to protect children ages 13-17.
- The Task Force on Family Violence provided restraining order assistance to 4,905 City of Milwaukee residents in 2001.
- Milwaukee's Domestic Violence Hotline received 19,394 calls in 2001, a 20 percent increase over the number of calls received in 1999.
- The Milwaukee Sexual Assault Counseling and Crisis Line received 6,503 calls in 2001, 15 percent fewer calls than in 1999.

Children's Advocacy Programs

The Children's Advocacy Program of the Task Force on Family Violence provides specialized case management and legal assistance services to protective parents whose children are victims or witnesses of abuse. The primary goal of the program is to protect children from violent homes and to educate those who work with children about the effects of witnessing violence.

The Child Protection Center of Children's Hospital of Wisconsin provides multi-disciplinary forensic interviews and examinations for children alleged to have been abused in Milwaukee County. In June of 2002, the Task Force on Child Victim Advocates began providing staff for the center. Center staff provide protective parents with access to Task Force advocacy services.
Goal 5 - Economic Security

Outcome: Families' basic need for economic security is met.

Goal: Access for all families to opportunities for a foundation of economic security.

As noted earlier, poverty is one of the strongest predictors of later negative outcomes for children. Pathways out of poverty to economic security include adequate income through secure employment, as well as means to secure adequate health care, childcare and nutrition.

Children with Employed Parents

Secure parent employment reduces the incidence of poverty and family stress. Income levels reflect a family's ability to provide financial support to meet children's basic needs. Higher incomes enable adults to secure safe housing, food and jobs with benefits.

- 65 percent of City of Milwaukee families with children under age 18 reported all parents working in 2000; statewide, the rate was 74 percent.
- Median income for City of Milwaukee families with children under age 18 was $31,378 in 2000; income was significantly lower for single parent families.

![Chart 29: Median Family Income by Family Type](chart)

Earned Income Tax Credit

Families may claim the Earned Income Tax Credit (EITC) on their federal and state income tax returns if they are working but have earnings less than 200 percent of the federal poverty level.

- 53,438 employed families with children in Milwaukee County claimed the EITC on their returns, relatively unchanged from the previous year.

W-2 Enrollment

- Average monthly participation in W-2 in Milwaukee County for the first eight months of 2002 was 9,872.
- 77 percent of W-2 participants were in placements with payment; 23% were in unsubsidized employment.
- As of September 2002, 22,268 children were in families receiving W-2 support, an increase of 13 percent from December 2001, when 19,746 children were receiving support.
Public Health Insurance Coverage

- Average monthly enrollment for children in family coverage (AFDC-related Medicaid, Healthy Start and BadgerCare) increased by 30 percent overall between 1998 and 2002, from 77,973 in 1998 to 100,987 in the first eight months of 2002.

Wisconsin Shares Enrollment

- In the first eight months of 2002, the average number of families enrolled was 10,988, representing a 7 percent increase over monthly enrollment in 2000.
Goal 6 - Support Services for Parents

Outcome: Parents are supported in their parenting efforts.

Goal: Access for all parents to parent education/family supportive programs.

Causal risk factors for early school failure include early cognitive deficits, early behavior and adjustment problems, parental psychological problems, problematic parenting practices and difficulties with peers and teachers. Family support programs offer services to support positive parenting practices and access to needed child services. Examples of available services follow. Further analysis is needed regarding adequacy of these programs to meet needs.

- **Family Resource Centers** - Fourteen Family Resource Centers located throughout the City of Milwaukee offer a wide-range of programs and services to help parents strengthen their parenting skills, educational workshops/seminars and recreational activities.

- **Rosalie Manor Community & Family Services** - Rosalie Manor offers a variety of parent support programs, including Supporting Today's Parents provides family support and parenting education, using the Parents as Teachers curriculum, to Milwaukee County residents who are first time parents, with initial contact in the hospital.

- **Milwaukee Brighter Futures Initiative** is an innovative program created to strengthen families, communities and create opportunities for youth to achieve their maximum potential to become responsible, self-sufficient, productive adults. Funded by the State Division of Children and Family Services within the Department of Health and Family Service, Community Advocates serves as the lead agency for this collaborative initiative. A consortium of twenty-three agencies provides services to youth, children and families in a targeted area of Milwaukee.

- **The Parenting Network** offers several programs, including Parent Helpline, Circles of Parents Groups, Parenting Education and Home Visiting programs.

- **Fatherhood Programs**
  Recognizing the importance of having fathers actively involved in the lives of their children, local health and human service agencies have developed programs to support fathers in their role as parents. Some of the programs that provide services to fathers in Milwaukee include YWCA Fatherhood Programs, New Concept Self-Development Center/George M. Sanders Father's Family Resource Center, and Today's Dads Program - offered by Rosalie Manor Community & Family Services.
Goal 7 - Children Are Successful In School

Outcome: Children are successful in school.

Goal: All students attend school regularly and demonstrate achievement in academic performance.

Enrollment

- The Milwaukee Public School District is the largest in Wisconsin and the 27th largest in the nation. Total public school enrollment in 2001-02 was 97,762.

- More than one in ten (11%) public school students (10,580) participated in the Milwaukee Parental Choice Program in the 2001-02 school year. This program allows public school students to attend private schools, using public funds.

- More than one in five (21%) school age children (25,457) living in the Milwaukee Public School district attended non-public schools in 2001-02.

CHART 30

- Between 1999-2000 and 2001-02, elementary grade (PK-5th grade) enrollment declined by 9 percent, while middle grade (6th - 8th) enrollment increased by 21 percent and high school (9th-12th) by 14 percent.

- In 2000-01, the Milwaukee Public School District included 116 elementary schools, 23 middle schools, 18 high schools and 42 alternative/partnership schools.

CHART 31

- In 2001, the Milwaukee school district ranked 11th in the nation in racial segregation, with 82 percent minority enrollment compared to 19 percent statewide.

- Black students comprised 61 percent of the student body, white students 17 percent, Hispanic students 15 percent and Asian students 4 percent.

- More than one in ten (13.5%) students in 2001-02 were identified as having Exceptional Education Needs (EEN), receiving special education services (excluding speech), slightly above the state rate of 12 percent. Rates were higher in the middle and high school grades than in the elementary grades.
• In 2001-02, 92 percent of students were English Proficient, compared to 97 percent statewide.

• Nearly one in ten (9%) students was designated as an English Language Learner (ELL; also referenced as children with Limited English Proficiency, or LEP), receiving English as a Second Language (ESL) services, compared to 3 percent statewide.

• 10 percent of elementary students, 7 percent of middle school students and 6 percent of high school students were English Language Learners.

Student Outcomes
The MPS district regularly monitors five student outcome areas: mobility, stability, retention, truancy and suspension rates.

- **Mobility** refers to the rate of students who change schools during the school year. Mobility during the school year is associated with academic and disciplinary problems in school, affecting students' performance and classroom stability.

- **Stability** refers to the rate of students who change schools within the district before a school year begins, excluding newly entering Kindergartners and students graduating from one school level to the next (e.g., elementary to middle).

- **Retention** refers to the practice of retaining a student in a grade from one year to the next, due to inadequate academic performance. While retention has been associated with poor academic and social outcomes over time, the state legislature recently required schools to retain students in 4th and 8th grades who do not meet specific academic standards.

- **Habitual truancy** refers to absence from school without an acceptable excuse for part or all of five or more school days during a semester.

- **Suspension** refers to students suspended out of school, usually due to rule infraction or endangering others.

**Mobility and Stability 2000-01**

- 23 percent of all elementary students, 21 percent of middle school students and 25 percent of high school students changed schools during the school year.

- 71 percent of elementary students, 76 percent of middle school students and 68 percent of high school students attended the same school as the previous year.
Retention 2000-01

- Four percent of elementary students were retained in a grade, unchanged from previous years. Statewide, fewer than 1 percent of elementary students were retained.

- Seven percent of middle school students were retained in a grade due largely to an increase in students retained in 8th grade as a result of recently instituted eighth grade proficiency requirements. Statewide, fewer than 1 percent of middle school students were retained in a grade.

- Nearly one-fourth (24%) of high school students were retained in a grade. Almost half of all retention occurred in grade nine. Statewide, 7 percent of high school students were retained in grade.

Habitual Truancy

- 22 percent of elementary school students were habitually truant during the 2000-01 school year; this represents a decline from 26 percent in the 1999-2000 school year. Statewide, 5 percent of elementary students were habitually truant.

- More than half (52%) of all middle school students were habitually truant in 2000-01. Statewide, 9 percent of middle school students were habitually truant.

- Nearly two-thirds (65%) of all high school students were habitually truant in 2000-01, relatively unchanged from 1998-99 rates. Statewide, 16 percent of high school students were habitually truant.

School Suspensions

- Six percent of elementary students were suspended out of school in 2000-01, double the 1995-96 rate of 3 percent. Statewide, 2 percent of elementary students were suspended.

- Nearly half (48%) of all middle school students and approximately one-third (35%) of all high school students were suspended out of school in 2000-01, slightly down from the previous year. Statewide, 11 percent of middle school students and 10 percent of high school students were suspended.
Expulsions

- 243 students were expelled in the 2000-01 school year, for an expulsion rate of 2.43 per 1,000 students. Nearly two-thirds (62%) were high school students. Statewide, the expulsion rate was 1.67, with 1,472 students expelled.

Attendance 2001-02

- Overall, the attendance rate for MPS students was 87 percent in 2000-01; statewide the attendance rate was 94 percent.

- The attendance rate for MPS elementary students (including K-5 schools and children in grades K-5 located in K-8 schools) was 93 percent; statewide, the rate was 96 percent.

- Twenty-three schools, 20 percent of all elementary schools, met the district goal of 95 percent in 2000-01; 75 percent had attendance rates of at least 92 percent.

- The attendance rate for middle school students was 87 percent, slightly higher than the 1995-96 rate of 85 percent, but less than the state rate of 94 percent.

- Seven of the district’s 35 middle and K-8 met the district goal of 85 percent in 2000-01, and nine others surpassed this goal.

- The attendance rate for high school students in 2001-02 was 79 percent, up from 76 percent in 1998-99, but lower than the state rate of 92 percent.

- Three high schools met the district goal of 90 percent attendance.
Student Performance

MPS reports assessment results by performance level - minimal, basic, proficient or advanced - using three different methods (see tint box below); this report reflects results using the first method, as it is comparable to state data.

- **All students enrolled** - used by the state, this method reports out on all students enrolled at the time the test is administered;

- **All students tested** - reports results only for those students who were tested and scored at or above the proficient level.

- **Tier 1 Student Cohort** - this method, used by the MPS school district, reports on the percent of all regular education students tested (omitting all EEN and LEP students) who were enrolled in the school at the time school began in September.

**CHART 38**

Grade 3 Wisconsin Reading Comprehension Test (WRCT)

- 2001-02: Percent of Students Scoring At or Above Proficient Level and At or Above Basic Level

**CHART 39**

Grade 3 Wisconsin Reading Comprehension Test (WRCT)

- Half (50%) of the district's elementary school students scored Proficient or above on the Grade 3 WRCT, also known as the Third Grade Reading Test, as compared to 74 percent statewide.

- 74 percent scored at or above the Basic level on the WRCT, compared to 88 percent statewide.

- Ten schools had 90 percent or more students scoring at or above the Proficient level.

**Wisconsin Knowledge and Concepts Exam (WKCE) - Fourth Grade: Reading and Math**

- 55 percent of students enrolled in grade 4 scored at or above the Proficient level in Reading in 2001-02, slightly above the previous year's rate of 52 percent. Statewide, 79 percent of fourth graders scored at or above Proficient.

- 40 percent of fourth grade students scored at or above the Proficient level in Math in 2001-02, slightly above the previous year's rate of 37 percent; statewide, 69 percent scored Proficient or above.
WKCE Grade 8 Reading and Math

- 40 percent of eighth graders scored at or above the Proficient level on the Grade 8 WKCE - Reading, slightly above the 2000-01 rate of 37 percent; statewide, 74 percent of eighth graders scored at or above Proficient.

- 9 percent of eighth graders scored at or above the Proficient level on the Grade 8 WKCE - Math subtest in 2001-02, down from 11 percent in 1999-2000; statewide, 44 percent of eighth graders scored at or above Proficient.

WKCE Grade 10 Reading and Math

- One fourth (25%) of tenth grade students scored at or above the Proficient level on the WKCE Reading subtest, a 20 percent decline from the 1999-2000 rate of 32 percent; statewide, 60 percent of tenth grade students scored at or above Proficient.

- 11 percent of tenth grade students scored at or above the Proficient level on the WKCE Math subtest, unchanged from recent years; statewide, 43 percent of tenth grade students scored at or above Proficient.

Cumulative High School Dropout Rate

Education level is highly correlated with later positive outcomes, and adults with less than a high school education face particularly difficult economic challenges. The median annual income of adults who lacked a high school diploma is seldom higher than the minimum wage.

The cumulative or "longitudinal" dropout rate reports on a cohort for four years, from 9th to 12th grade. It refers to the sum of all students who dropped out of school between 9th and 12th grades (excluding students who transfer out or pursue other educational options, die or are incarcerated) divided by the original 9th grade enrollment.
• Of those who entered 9th grade in 1997-98, one third had dropped out of school by 12th grade, for a cumulative high school dropout rate of 33 percent in 2000-01.

• The cumulative dropout rate declined by 17 percent from the 1998-99 rate of 40 percent.

**Graduation Rate**

Graduation rates increased across all race/ethnic groups in the Milwaukee Public School district, but disparities across groups exist.

• The graduation rate for the MPS class of 2001 was 55 percent; statewide, 90 percent of the class of 2001 graduated.

Graduation rates for black students were lower than all other racial and ethnic groups in MPS high schools.

• Nearly half (49%) of black students graduated in 2000-01, an increase of more than 10 percent over the previous year;

• Nearly three-fourths (74%) of enrolled Asian students, 68 percent of enrolled white students and 54 percent of enrolled Hispanic students graduated in 2000-01.

**Participation in Extra- and Co-Curricular Activities**

• Slightly more than one-fourth of all MPS students (28%) participated in extra- or co-curricular academic and athletic activities in 2000-01, down from one-third in 1999-2000. Statewide, 41 percent of all students participated in academic activities and 43 percent in athletic activities.

• One in ten students participated in music activities in 2000-01, unchanged from the previous year. Statewide, 36 percent of all students participated in music activities.
After-School Programs

Recent studies indicate that after-school programs, particularly in low-income communities, are an effective and affordable way to keep children safe and engaged in school. Children in school-based after school programs were found to benefit both academically and socially in programs that offer a diverse set of activities, helping them to develop a broad range of core competencies.

- 45 elementary and middle schools are designated Community Learning Centers, offering before and after school programming in the areas of academics, social development, family support, health and nutrition and recreation. These schools also offer programming on weekends and during the summer, and are open to all enrolled children and their families.

- An additional 16 elementary and middle schools are designated Safe Place sites, offering after school programming for enrolled students.

Schools Data

Just as students are assessed as to their performance in school, schools need to be held responsible for meeting student needs. Attracting and retaining good teachers is key to school success, along with class size, quality of facilities and classroom resources. Parent involvement in their children's schools increases children's likelihood of succeeding in school. At the same time, fiscal constraints attributable to school financing policies affect schools' ability to provide a quality education.

- The teacher absenteeism rate in 2001-02 was 7.5 percent, unchanged from the previous year.

- The teacher turnover rate in 2001-02 was 6 percent, nearly half the previous year's rate of 11 percent.

- The starting salary for teachers was $28,297, up 3.5 percent from the previous year.

Goal 8 - Later Outcomes for Youth

Goal: All students demonstrate good citizenship, community service and personal responsibility.

Youth who complete high school and have post-graduation school plans are more likely to contribute positively to their communities.

Youth Aged 16-19 Not in School and Not Working

- In 2000, 13 percent of Milwaukee City youth aged 16-19 were not in school and not working; statewide, the rate was 6 percent.

Percent Youth Aged 16-19 Who Are High School Dropouts

- 14 percent of Milwaukee City youth aged 16-19 were high school dropouts in 2000; statewide, 6 percent of youth aged 16-19 were high school dropouts.
Youth Employed/Work Permits Issued

- 5,216 MPS students were issued work permits in 2001.

Post-Graduation plans

- More than half (57%) of the MPS Class of 2001 had post-secondary education plans, compared to 69 percent statewide.

- More than one third (35%) of the MPS Class of 2001 enrolled in a four-year college or university following graduation, an increase of 12 percent over the previous year. Nearly one in four (22%) enrolled in a two-year Technical/Community college.

- 23 percent of graduates directly entered the workforce, down from 25 percent in 2000. Statewide, 9 percent of 2001 graduates entered the workforce.

Next Steps

This report has offered updated information on indicators related to the identified outcome areas of the Start Smart, Stay Smart Milwaukee initiative. The information will be used to inform policy advocacy efforts of the Wisconsin Council on Children and Families' Milwaukee office.

Identifying and Prioritizing Areas for Action

After eight years of reporting, one can point to improvements in many areas as well as identify areas where no improvement has occurred. In future reports, priority areas for improvement will be identified and reported on in relation to benchmarks established by the Wisconsin Council on Children and Families, in collaboration with the Start Smart, Stay Smart Advisory Committee. Following this, the Wisconsin Council on Children and Families will identify state and local policies that affect local outcomes and develop a policy agenda to improve outcomes in these areas.
Data and Reference Sources

The following sources were consulted in the preparation of this report.

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Economic Security

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WI Department of Revenue
WI Department of Workforce Development

Support Services for Families

Data compiled by Joyce Mallory, Start Smart, Stay Smart Project Director, Wisconsin Council on Children and Families - Milwaukee office.

Schools

WI Department of Public Instruction
Milwaukee Public School District

Later Outcomes

U.S. Census Bureau
Annie E. Casey Foundation Census Data Online
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