

THE STATE OF CHILDREN IN MEMPHIS AND SHELBY COUNTY

a reference guide compiled by
The Urban Child Institute





The Urban Child Institute

A philanthropic organization that focuses on children

The institute is a coalition of community researchers, strategists and interventionists dedicated to the improvement of well-being of children, especially from conception to age 3.

We will improve the lives of children and increase the social capital of Memphis by accelerating the infusion of meaningful knowledge and intervention that will change existing policies. We will work to connect research and knowledge with action.

For other individuals and organizations who want also to improve the lives of children, they will find the institute to be a trustworthy partner and resource for expertise, advice and collaboration.

This State of Children in Memphis & Shelby County was initiated and funded by the institute. The purpose was to collect in one document all existing, important research data on children in Memphis and Shelby County. Many individuals and organizations have benefited from pieces of this data, but this is the first time that it all has been assembled in one place and then analyzed by professionals.

The data has been organized in six segments, or domains.

1. *Children's Demographics* is a necessary prelude of important statistics.
2. *Children's Health* is an overall physical exam of the city's children.
3. *Children's Educational Well-Being* is a community report card.
4. *Children's Home Environment* points out the influence of family and home.
5. *Children's Economic Well-Being* focuses on the disastrous results of poverty.
6. *Children's Community Environment* documents the impact on children of their neighborhood.

The institute's objective, and our hope, is that this reference guide will encourage and rally others into action and change. The data contained herein should provide clear direction to government leaders, education and medical professionals, community welfare and religious organizations of all types for more steps to identify objectives and strategies to improve the state of our children. The potential for many such additional actions is highlighted throughout.

Acknowledgements:

Phyllis G. Betts, Ph.D.
Fellow, The Urban Child Institute and
Director, Center for Community Building and Neighborhood Action
School of Urban Affairs and Public Policy
Research Associate, Center for Research on Women
University of Memphis

Doug Imig, Ph.D.
Fellow, The Urban Child Institute &
Professor, The University of Memphis

Nancy Hardt, M.D.
Methodist-LeBonheur Professor of Women's Health
University of Tennessee, Memphis

Leah C. Wells, M.A.
Research Affiliate, Center for Urban Child Policy
The Urban Child Institute

Cate Joyce, M.A.
Research Affiliate, Center for Urban Child Policy
The Urban Child Institute

Introduction



For all the ill effects on children* in Memphis single-mother births appears to be the primary underlying cause.

Attitudes and practices regarding sex, childbirth and marriage in Memphis are such that by age 13 two-and-a-half-times more Memphis children have had sex than the Tennessee or U.S. averages. By Grades 9-12 nearly twice as many children in Memphis have had four or more different sexual partners than in the rest of America. By their senior year in high school nearly three in 10 Memphis students have had sex with four or more different people.

The result on children of these attitudes and practices in Memphis is single-mother households, almost half of which live in poverty. Poverty leads to disease, inadequate health care, low education, poor adult supervision and unemployment and under-employment, all of which beget yet another, succeeding generation with the same pattern.

- The birth rate among 15-17-year-old females in Memphis is nearly 30 percent greater than the Tennessee average and 60 percent greater than the U.S. average.
- The rate of sexually transmitted diseases in Memphis is double that in Tennessee.
- The rate of HIV/AIDS among 15-24-year-olds in Memphis is nearly three times that of the State of Tennessee and 12 times greater than the U.S. average.
Less than half of Memphis children live in homes with their married parents. Fewer than one out of three black children lives with married parents.
- Single mothers in Memphis earn one-third of the income of married couples.

* "Children" is defined throughout as anyone under the age of 19.

- Nearly 50 percent of Memphis children living with single mothers live in poverty.
- Almost 58 percent of Memphis children under 5 living with single mothers live in poverty.
- Historically, poverty results in lower education, employment and income levels, and higher crime rates.
- The infant death rate in Memphis is the highest in the U.S.
- The infant death rate in Shelby County is 50 percent greater than in Tennessee and more than double the U.S. rate.
- The Shelby County death rate among children aged 1-14 is 12 percent greater than Tennessee's and nearly 30 percent greater than in the U.S.

A Demographic
Profile of Children
in Memphis and
Shelby County

Demographics

A Demographic Profile of Children in Memphis and Shelby County

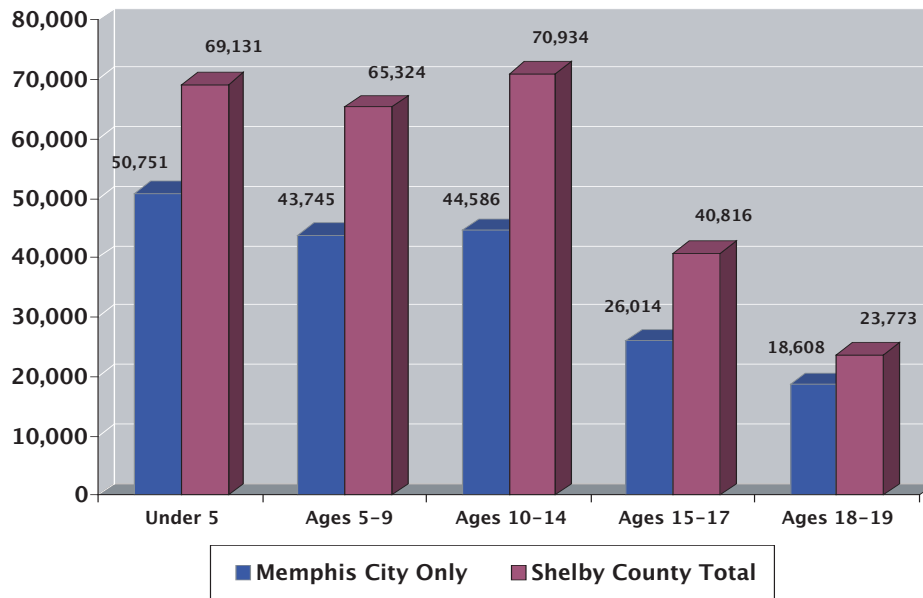


why it's important: Demographics are important because the numbers of children in different age groups, the ratio of children to adults, and the social and economic characteristics typical of families with children have implications for community resources. Demographics also capture a multitude of indicators relevant to early child development and well-being for children. Poverty is a highly reliable basic indicator for risk, and, to a great degree, can factor out race and ethnicity as direct causes of different child outcomes. In Memphis and Shelby County race and ethnicity are associated with poverty and other risk factors and remain critical demographic indicators because particular risk factors, such as early child-bearing and absence of adequate male support, are associated with race and ethnicity in this country; neighborhood influences on poverty, parenting, and child development are associated with residential segregation, and because race relations are a factor in how communities grapple with problems of children.

Sources: Census 2000 and American Community Survey 2004, unless otherwise noted. Census 2000 data offers a baseline for demographic trends in Memphis and Shelby County. Beginning in 2002, the American Community Survey provides annual updated estimates but typically provides less detail than data from the census. For example, detailed breakdowns by race and ethnicity or special calculations such as children below the "low income" level are associated with census years only. Data below represent the most current data available from secondary sources. Data for some ethnic groups are not presented in some graphics when populations are small or under-represented by census samples (e.g. Asians and Hispanics) or when the emphasis is on comparing patterns between the two largest racial/ethnic groups in Shelby County – blacks and whites. Some data calculations are readily available only for Memphis or only for Shelby County. All data for Shelby County includes the City of Memphis in the overall figures. Summary estimates and conclusions not accompanied by graphics represent author's interpretation of data available from census and other sources.

The 2004 American Community Survey estimates 246,205 children live in Shelby County, of which 165,096 (67%) live in Memphis.¹

Distribution of Children by Age Group for Shelby County and within Memphis

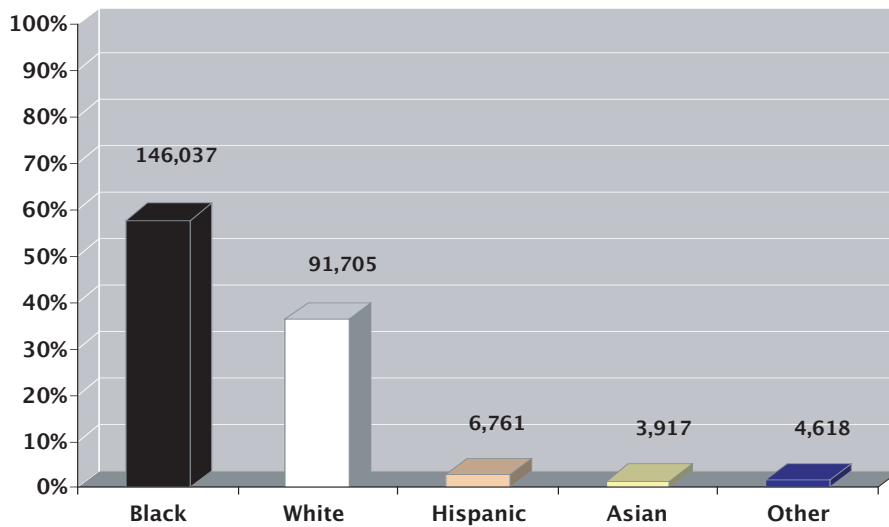


Key Finding: The number of children in Shelby County appears to be fairly stable as a cohort of children moves from pre-school age to elementary to high school age. (Note that the last two age categories combined equal the five-year groupings of the first three age categories.) The distribution of children throughout the county is changing.²

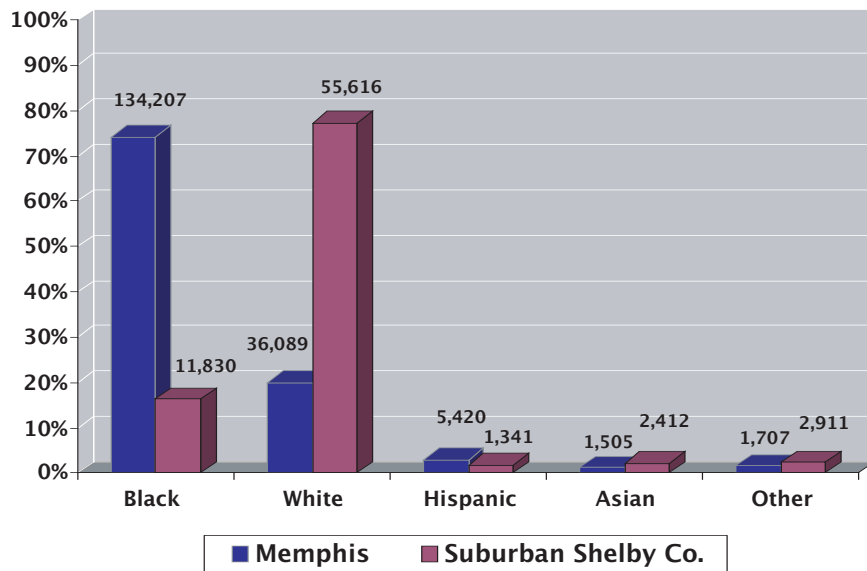
- While Memphis accounts for 74 percent of Shelby County’s population, the city accounts for only 67 percent of children in Shelby County. Suburban Shelby County families have a disproportionate impact on county resources.
- The continued increase in families with children in suburban Shelby County by contrast is putting pressure on existing schools and other resources.
- The demolition of public housing and other dilapidated housing in Memphis is shifting population to other Memphis neighborhoods, especially neighborhoods with dense multi-family developments.
- Diminishing population in inner-city neighborhoods is creating a mismatch between excess classroom capacity and the diminished school-age population in some Memphis neighborhoods.
- Children’s services and organizations serving inner-city neighborhoods report declining participation, while children moving to new neighborhoods may have too few opportunities for recreation and other healthy activities.

^{1, 2} Most data in this report are for children under 18. Some data—such as school enrollment, can include children 18 and 19, while teen births are most often calculated for girls 15 to 19. We have included 18 and 19 year olds in this chart for convenience, adding 23,773 18 and 19 year olds for Shelby County—of which 18,608 are in Memphis.

Race and Ethnicity of Children in Shelby County, 2000



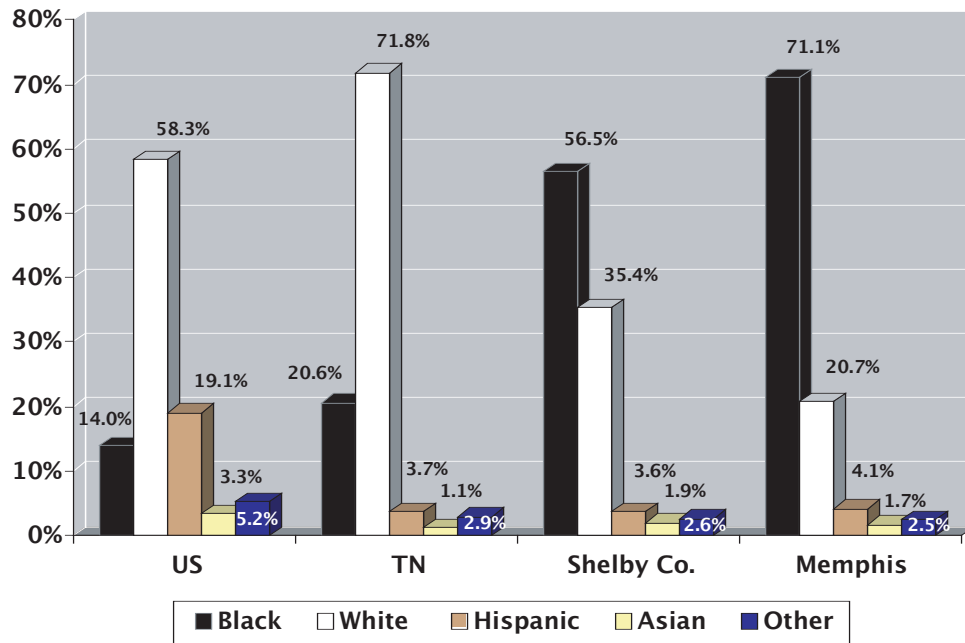
Race and Ethnicity of Children in Memphis and Suburban Shelby County, 2000



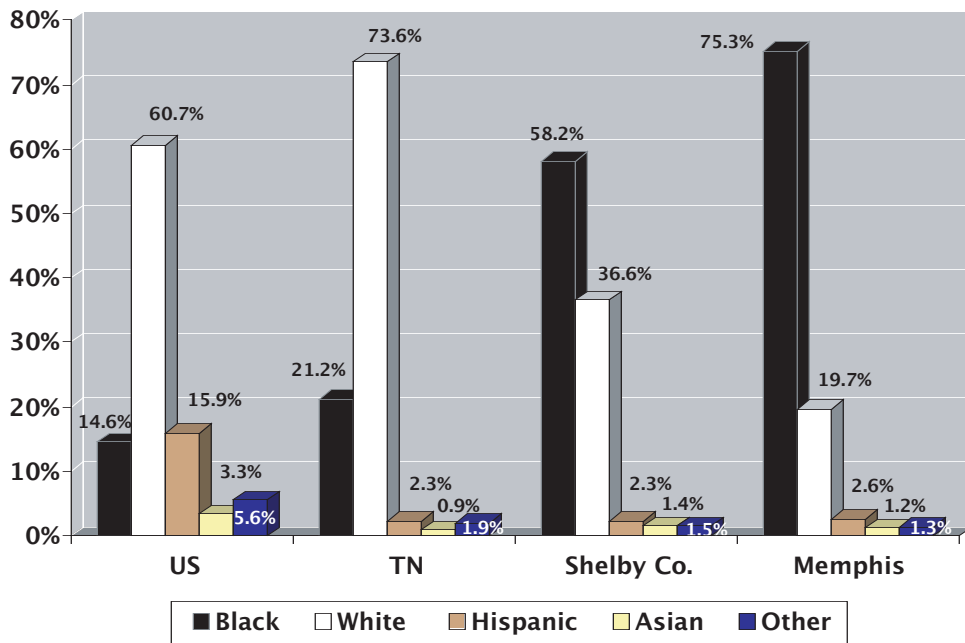
Key Finding: The high proportion of black children in Memphis and Shelby County means that what happens with black children—and increasingly, Hispanic and other immigrant children—will have a profound impact on the future of both Memphis and Shelby County.

- While they are still under-represented in suburban Shelby County compared to the City of Memphis, black, Hispanic, and other immigrant children account for over 20 percent of suburban children.

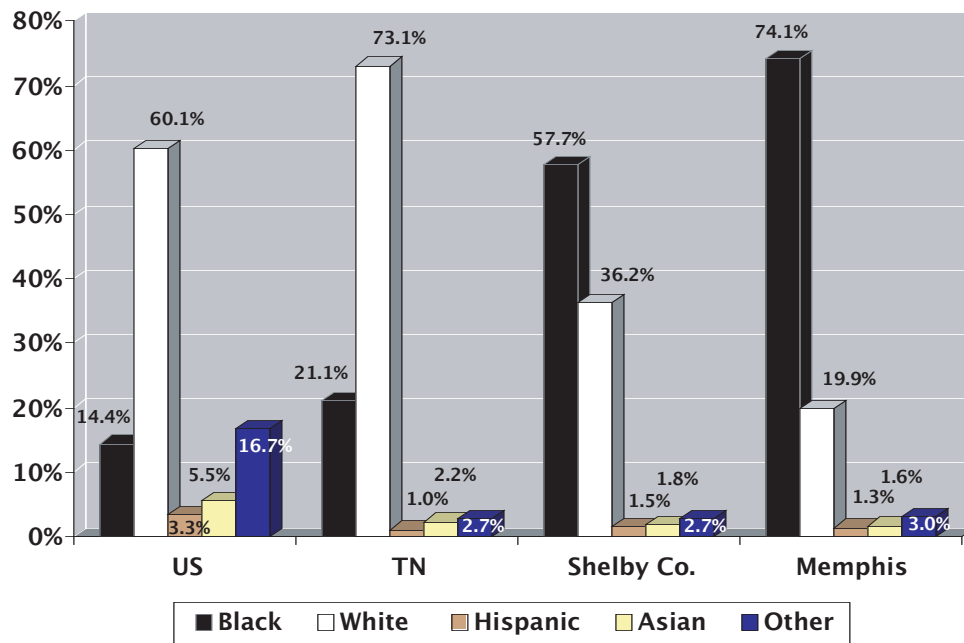
Distribution of Population Under 5 by Race and Ethnicity, 2000



Distribution of Population Age 5-17 by Race and Ethnicity, 2000



Child Population by Race and Ethnicity, 2000



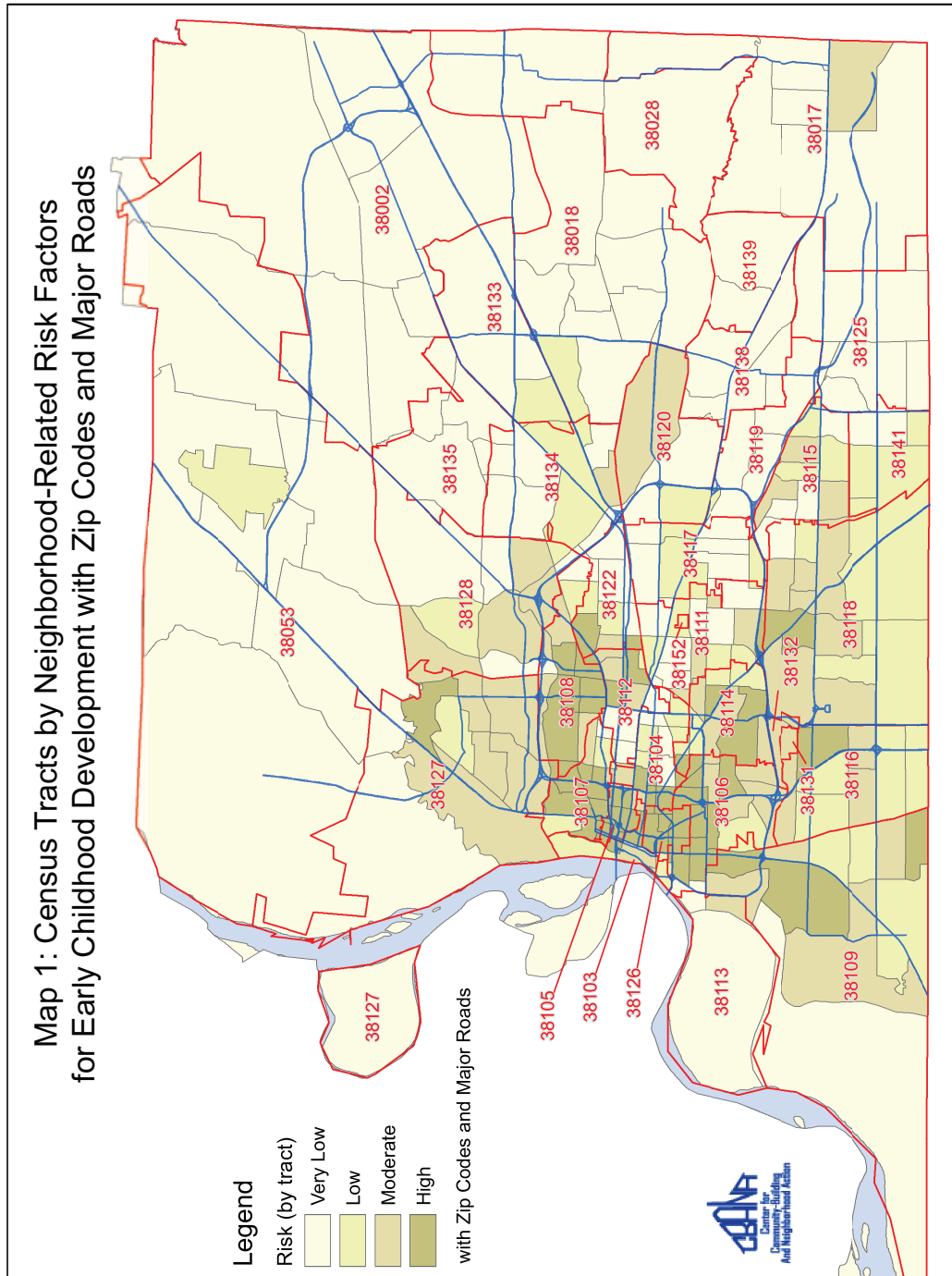
Key Finding: Compared to the State of Tennessee and the nation, the future of children, the educational system, and the labor force in Memphis and Shelby County depends on the outcomes of black children.

Critical Issue: Risk factors for child development are widely distributed.³

- Memphis has a very high proportion of neighborhoods with moderate-to-high-risk indicators for early child development, with 55 percent of census tracts scoring moderate to high on the Child and Family Policy Center’s Index of Child Vulnerability.
- While Shelby County outside of Memphis scores low in vulnerability, with only two tracts scoring moderate-risk, moderate-risk indicators have become evident in predominantly black, middle-class Memphis neighborhoods.
- The relationship between high-poverty neighborhood environments of the inner-city and child outcomes might weaken, with negative outcomes becoming more evident in formerly low-risk neighborhoods, or more favorable neighborhood environments might absorb additional risk factors and support positive outcomes.

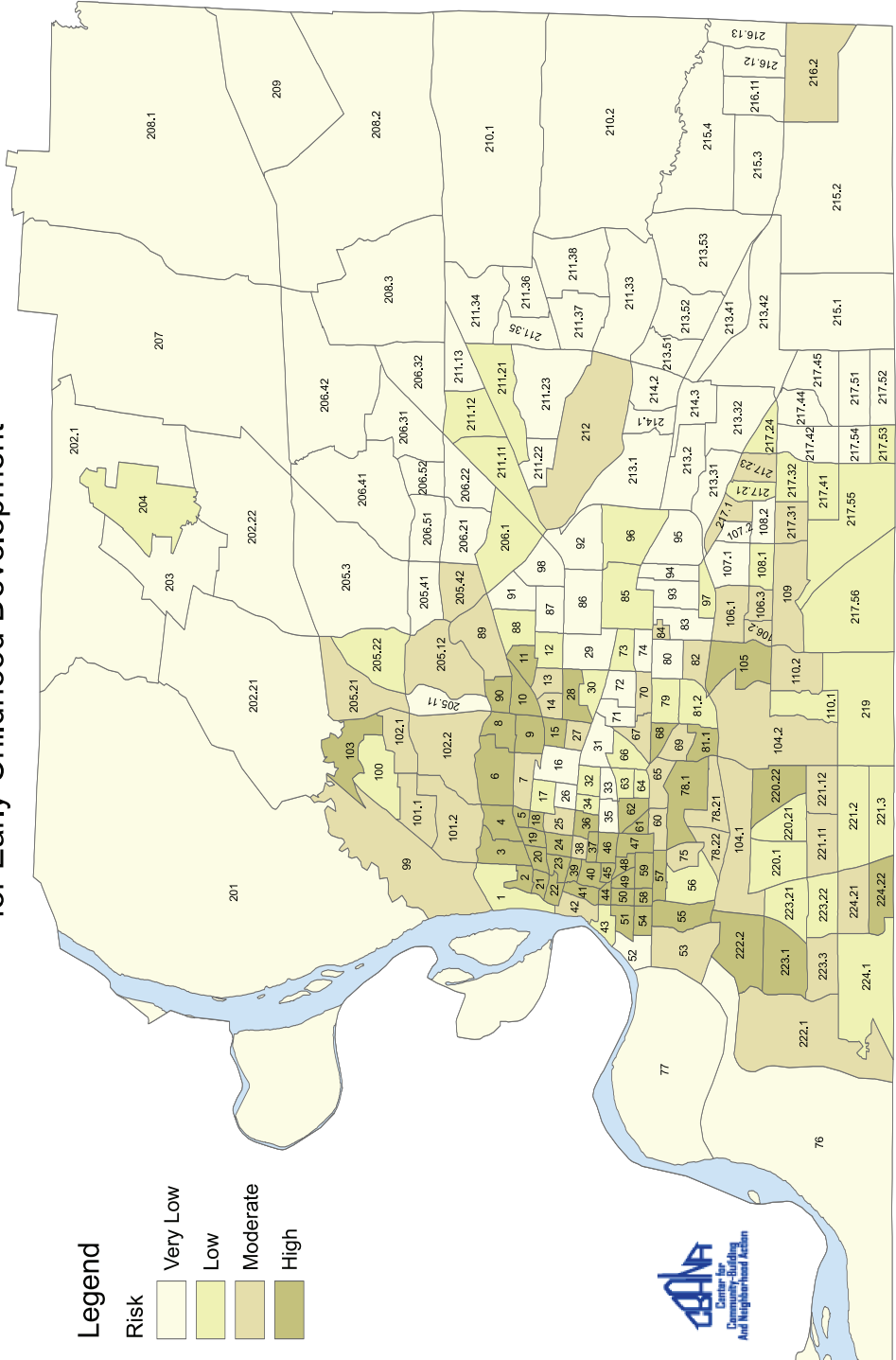
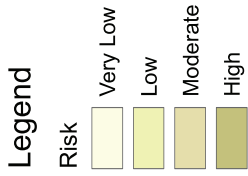
³ The Child and Family Policy Center’s Index of Child Vulnerability is discussed in greater detail in “Community Environment”

Key Finding: Fifty-five percent of City of Memphis census tracts (90 tracts) and 43 percent of Shelby County as a whole, score moderate-to-high on the Index of Child Vulnerability. All highest risk tracts are in Memphis, where 48 out of 163 tracts (22%) are high risk.



Source: Child and Family Policy Center for the Urban Institute, National Neighborhood Indicators Partnership. From Census 2000.

Map 2: Census Tracts by Neighborhood-Related Risk Factors for Early Childhood Development



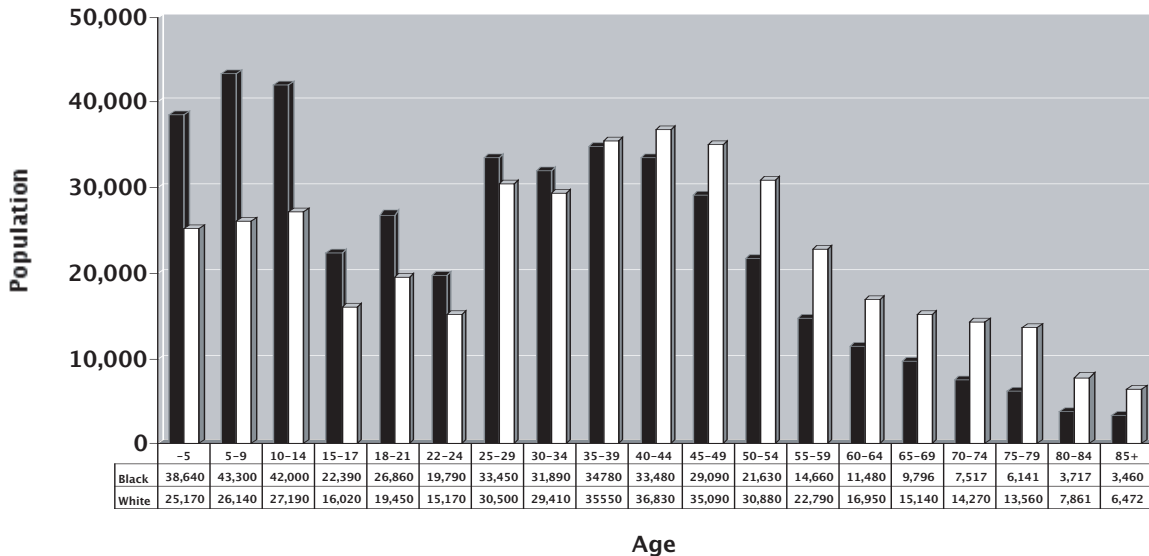
Source: Child and Family Policy Center for the Urban Institute, National Neighborhood Indicators Partnership. From Census 2000.

Key Finding: The Hispanic population in Shelby County is growing. With concentrations of families in particular neighborhoods, special challenges are posed for public schools and positive educational outcomes for this largely immigrant group of children.

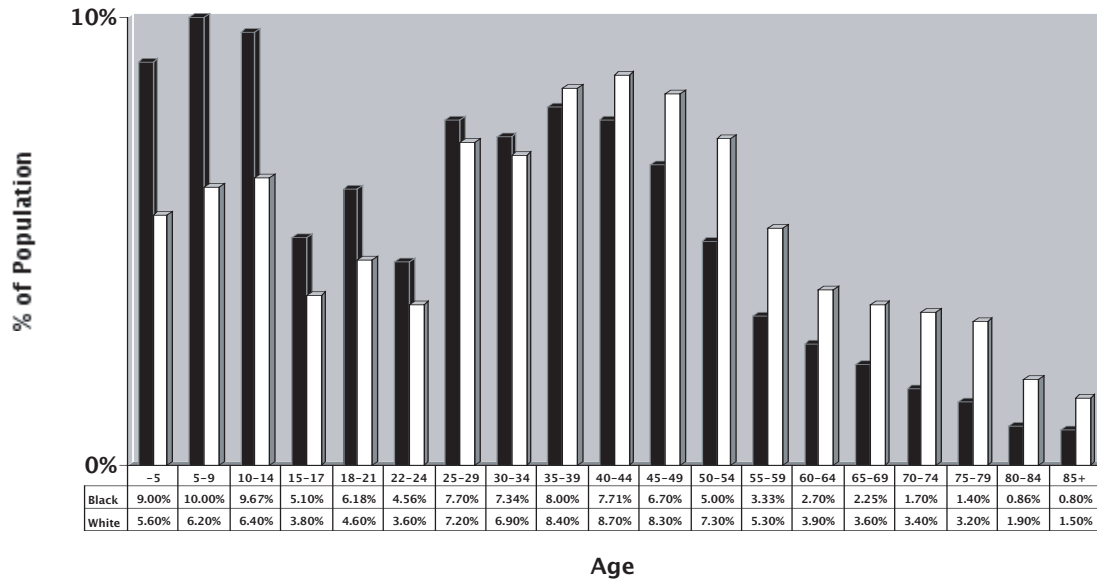
Key Concept: The Age Distribution

- The ratios of children to working adults and to the elderly influence the demand for schools, child care and other child-oriented services, as well as the tax base to pay for them and the receptivity of the political climate toward children’s issues.
- The percent of children in the population is a product of the birth rate and family size, whether adults in their working years are well-represented in the population, and whether older and retired adults are remaining or have died or moved away.
- The percent of school-age children in Memphis (23% of the total) is 27 percent higher than in Nashville (18% of the total). That creates a special funding challenge in Memphis.
- Age distribution among working adults typically represents economic opportunities. In this regard Memphis fares poorly while suburban Shelby County fares much better.
- The percent of children in a population also is higher if health issues lower life expectancy, thereby reducing the proportion of older people in the population. The under-representation of older people in Memphis compared to suburban Shelby County, for example, represents poor health and increases the child population proportionately.

Age Distribution for Black and White Populations in Shelby County by Number, 2000



Age Distribution for Black and White Populations in Shelby County by Percent, 2000



Key Finding: Age distributions for black and white populations in Shelby County reflect an identifiable “age gap.”

- Since mid-career families with children moving to Shelby County are more likely to be white than black, the distribution of the white population in Shelby County reflects a larger proportion of older adults and a closer fit between the proportion of children and adults than among the black population, where closer analysis reveals that mid-career age families are likely to relocate outside of Shelby County.

Critical Issue: High percentage of children poses challenges for Memphis.

- Both Memphis and suburban Shelby County have higher than expected percentages of children (compared to the national demographic baseline), but for different reasons and with different outcomes.
- In suburban Shelby County 31 percent of the population is under 19, compared to 28 percent in Memphis and only 22 percent in the US. In the suburbs the high percentage reflects a high proportion of family households. In Memphis, there are more single-person and other non-family-unit households. More adults are, therefore, “child-centered” almost by definition, which helps to cushion the challenge of the high concentration of children and bolster the constituency for expansion of suburban schools.
- In Memphis the high percentage of children is not accompanied by a high incidence of family-unit households, but by fewer adults in family households, the likelihood that working-age adults will be unattached to family households, and the apparent emigration of working-age adults, including a disproportionate share of two-parent households.
- National demographic patterns demonstrate a great deal of stability in the number of adults entering the age-25-to-44 cohort, meaning that there are at least as many 44-year-olds as 25-year-olds in the U.S. With immigration (and the tail-end effects of the baby boom), the number of adults at the upper end of the cohort is actually 20 percent higher than the number of those entering.
- While the age-25-to-44 cohort is stable in suburban Shelby County, indicating both that younger people are likely to stay and that newcomers move to the suburbs from elsewhere, in Memphis the cohort diminishes by 11 percent. The primary cause is emigration, but mortality and incarceration also play a role.
- National demographic patterns for the transition from the age-45-to-54 cohort to the age-55-to-64 cohort reflect the effects of delayed child-bearing during WWII and the baby boom that followed. The older cohort is 30 percent smaller nation-wide because of the size of the baby boom and the normal increase in mortality between the ages of 55 and 64. For Memphis, however, the 70 percent drop between cohorts reflects other influences, including early waves of suburbanization among white Memphians, movement of older and better educated black Memphians to higher-opportunity growth areas, and higher mortality rates among less healthy adults most likely to remain in Memphis.
- The City of Memphis is strained as much because of diminished representation of working-age adults and comparatively low property values as by family size and birth rates.
- Diminished representation of working-age adults also means less “human capital” available to support child development through informal networks in extended families and neighborhoods, as well as for more formalized community-wide efforts.

Critical Issue: Teen births in Shelby County are significant.⁴

- Birth rates for black women and white women of child-bearing age in Shelby County (15-44) are 79 and 62 births per thousand women, respectively. The higher rate among black women is due almost exclusively to earlier child-bearing. More black women are mothers at any given time because of the higher rate of births to teens. This does not mean that starting earlier necessarily results in more children per mother, but there is some relationship between starting earlier and larger family size.
- White families with children in Shelby County average 1.5 children per family, which is well below the national average of 2.1 children. This suggests that white families are older and more likely to have adult children, a pattern born out by the age distribution of white families in Shelby County.
- Black families in Shelby County, on the other hand, average 2.1 children, which is higher than white families locally, but well within the national norm for family size. National data suggest that better-educated, middle-class, black women actually have fewer children than their white counterparts. This means that the higher average number of children for black women in Memphis is largely attributable to higher birth rates among young women who become mothers as teens, and who are likely to have less education and come from low-income families.
- The birth rate for black females between the ages of 15 and 19 in Shelby County has decreased since the 1990s. Nevertheless a birth rate of 80-per-1,000 females in 2003 means that 8 percent of these teens give birth in a given year and about 35 percent become mothers between the ages of 15 and 19. Based on historical data, between 15 and 20 percent of these mothers are likely to have a second child. Considering all births to black females of child-bearing age, 20 percent (1,600) were to teen mothers in Shelby County in 2003. These births have a high probability of being non-marital.
- The birth rate for white females between the ages of 15 and 19 in Shelby County has increased since the 1990s. The birth rate of 33-per-1,000 girls in 2003 means that 3.3 percent of these teens give birth in a given year, and that 16 percent become mothers between the ages of 15 and 19. Considering all births to white females of child-bearing age, 7 percent (432) were to teen mothers in Shelby County in 2003. These births have a high probability of being non-marital.
- Black teens are 2.4 times as likely to become mothers as white teens. Considering that white girls in Shelby County are more likely to come from families with higher education and income, it appears (and merits further research) that black middle income girls in Shelby County may actually be less likely than their white counterparts to become teen mothers. There appears to be a protective factor for black, middle-income girls that may require greater understanding.

⁴ Teen birth data is from the Tennessee State Department of Health and can be accessed at the HIT (Health Information of Tennessee) site : <http://www.hit.state.tn.us>.

Key Concept: Segregation and Opportunity

- American cities have a history of racial and socio-economic segregation in housing. Segregation continues to be associated with unequal access to education and employment and other opportunities. When well-established patterns of segregation result in disadvantages – even if no one in a position of authority or power intends to discriminate – disadvantages are likely to persist.⁵
- New jobs in Shelby County are more likely to be created outside the City of Memphis than near neighborhoods with high unemployment and transportation.
- Racial and socio-economic segregation continues in Shelby County, with blacks – particularly low income families – less likely to live near expanding job opportunities outside the City of Memphis.
- Predominantly black or white neighborhoods with high poverty rates tend to suffer from higher crime and under-performing schools. In Memphis these neighborhoods are likely to be predominantly black.
- Black families are interested in suburban neighborhoods for many of the same reasons cited by white families, safety, better schools, and overall neighborhood amenities.
- Black families of moderate-income married couples are increasingly choosing suburban neighborhoods.
- Integration of black families into predominantly white neighborhoods has been associated with better education and employment outcomes for children, teens, and young adults.
- Advantages of integration for black families are diminished if racially segregated clusters of low income families are re-established in integrated neighborhoods.
- Historically, Memphis neighborhoods (as with most cities) remain integrated for a relatively short period of time between the arrival of the first black residents and the departure of the last white residents.⁶ Black neighborhoods are more likely than white neighborhoods to become mixed income. When problems associated with poverty come to middle class, integrated neighborhoods, families who can afford to move often do so. The cycle of integration and re-segregation is likely to continue unless Memphis and Shelby County find ways to discuss and deal with crime and schools while implementing strategies that counter the debilitating effects of poverty and maintain integration at the same time.

⁵ William Julius Wilson's *The Truly Disadvantaged* and *When Work Disappears* are seminal sources for discussions of race, class, and the power of segregation.

⁶ We are now seeing this same pattern with Hispanic households replacing black households in predominantly black neighborhoods in Memphis.

Children's Health
in Memphis

Health

Children's Health in Memphis



why it's important: The traditional greeting of the Masai people of East Africa is, “How are the children?” The anticipated reply is, “The children are well.” A society judges its success based on how well its children are cared for. Do they have adequate health care? Are they receiving proper nutrition to grow and learn and become healthy adults? Do they experience nurturing and love from their family and community?

In Memphis, the proper response to the Masai greeting should be that the children are doing well. This may not be the case.

Health care and health insurance for children

TENNder Care is the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program designed for the care of children from birth to young adulthood. Through the TENNder Care Program, children on TennCare from birth until the age of 21 are able to receive the health care they need. The goal of the program is to increase the number of children in Tennessee who receive preventive health screenings and intervene in the early stages of disease before the problem progresses.

- Eighty-two percent of Tennesseans without health insurance stated that the reason they don't have health coverage is that they can't afford it.
- Among those without health insurance because of its cost, 90 percent have annual incomes of less than \$10,000.
- There are 138,000 children (under age 21) in Shelby County enrolled in TENNCare, accounting for 22 percent of the total under-21 enrollment in the State of Tennessee.
- The TENNCare expenditures for Shelby County total \$130,719,214 accounting for 19 percent of the entire budget in the State of Tennessee.
- A total of 633,000 children (62%) were screened under the TENNder Care program in 2004, an increase of 17.7 percent from the previous year.
- Fifty percent of children received dental screenings in 2004, an 11.4 percent increase.

Access to affordable healthcare continues to be an issue with working and low-income people in Memphis and Tennessee.

Children make up nearly a quarter of the total U.S. population. The quality of healthcare for these children differs by race, ethnicity and socio-economic status. There are differences in rates of childhood immunization, management of asthma, evaluation and treatment of attention deficit/hyperactivity disorder. Nationally, the proportion of children who receive all recommended vaccines is lower among black children than among white children, lower among Hispanic children than non-Hispanic, white children, and lower among children in poor, near-poor and middle-income families than among children in high-income families.

From 1998 to 2001 the rate of hospital admissions for asthma was higher among black children than white children. Black children received a lower quality of care than did white children on about two-thirds of quality measurements and had less access to care on about 40 percent of access measurements. Poor families received lower quality care on about 60 percent of quality measurements and had less access to care on about 80 percent of access measurements than those with higher incomes.

Disparities exist in the quality and accessibility of health care among racial, ethnic and socio-economic groups across the country.

Critical Issue: Children's Access to Health Care

Recent changes in the provisions of TENNCare certainly will have an impact on children. We must ensure that children of all races, socio-economic groups and family types have access to adequate health care, and that they have a medical "home" in Memphis.

Healthy People 2010

We can assess the health of children by using the guidelines established as part of the Healthy People 2010 program administered by the Office of Disease Prevention and Promotion through the U.S. Department of Health and Human Services. This statement of national health objectives includes local goals for health promotion and disease prevention.

Leading health indicators measured under Healthy People 2010 include:

- Physical activity
- Overweight and obesity
- Tobacco use
- Substance abuse
- Responsible sexual behavior
- Mental health
- Injury and violence
- Environmental quality
- Immunization
- Access to health care

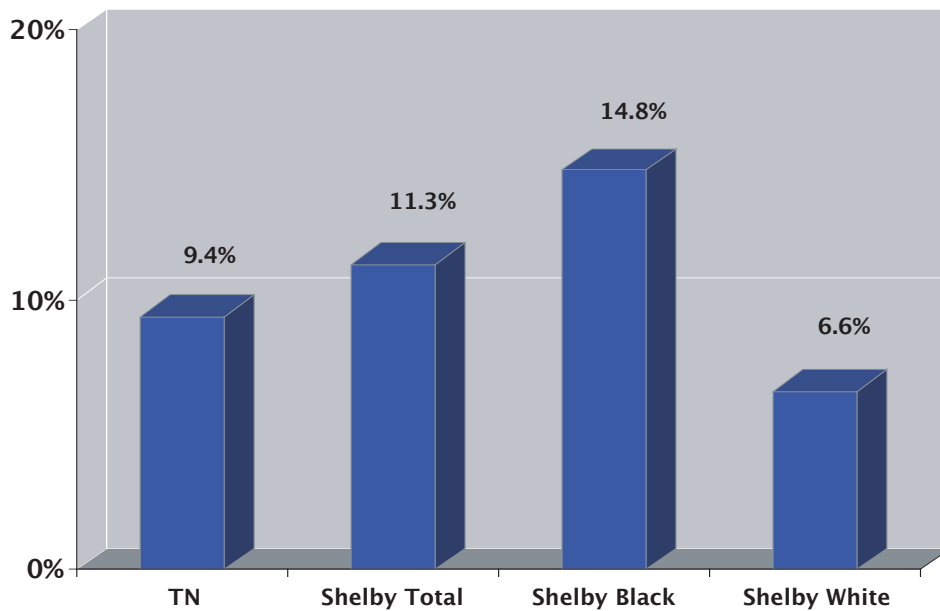
Critical Issue:

In Healthy People 2010 national issues and goals are outlined for the health and well-being of Americans. Service providers and policy makers in Memphis can use these health indicators to meet the health needs of Memphians, especially the most vulnerable populations like children.

Infant mortality and child death rates in Memphis and Shelby County

Percent of Low Birth-weight (2500 grams) Births by Race in Shelby County, 2004

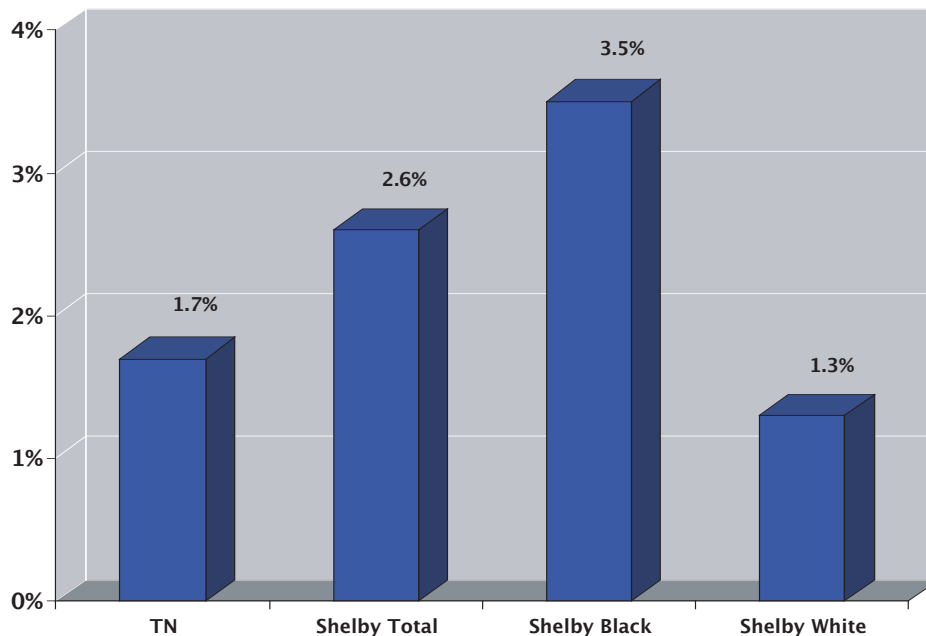
Source: CLIKS Online



Shelby County has a higher rate of low birth-weight babies than the state and nation. Babies born to black mothers in Memphis are at a greater risk of being born underweight. Low birth-weight is defined by premature birth and birth that is small for the gestational age of the baby or both. Low birth-weight babies often stay in the hospital for a time after birth due to their special health care needs. The lower the birth-weight, the more likely the baby will have chronic medical conditions or learning disabilities. Low birth-weight often is difficult to prevent.

Percent of Very Low Birth-weight (1500 grams) Births by Race in Shelby County, 2004

Source: CLIKS Online



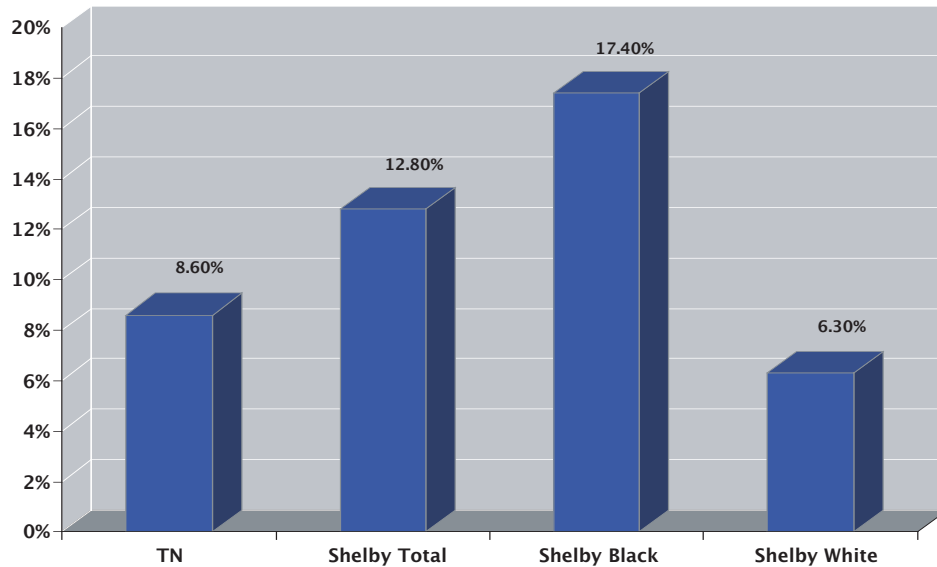
- The rate of very low birth-weight babies in Shelby county is almost twice that of the State of Tennessee.
- Stress during pregnancy has been shown to trigger biochemical, vascular and immune system changes that lead to low birth-weight.
- Shelby County's rate of infant death is consistently higher than that of the state and the nation and is more than three times the Healthy People 2010 goal. In fact, data from 1999 through 2003 show that the infant death rate started an upward trend in 2002.

Critical Issue: Low birth-weight and infant mortality

The first three years are the most critical for future success and achievement in life. Memphis is a deadly city for newborns and very young children. In order to give children the best future possible, we need to make sure that mothers have adequate prenatal care so that babies are not born underweight, and so that children can thrive in their early years with proper nutrition, immunizations and care.

Infant Death Rate Per 1,000 in Shelby County by Race, 2004

Source: CLIKS Online

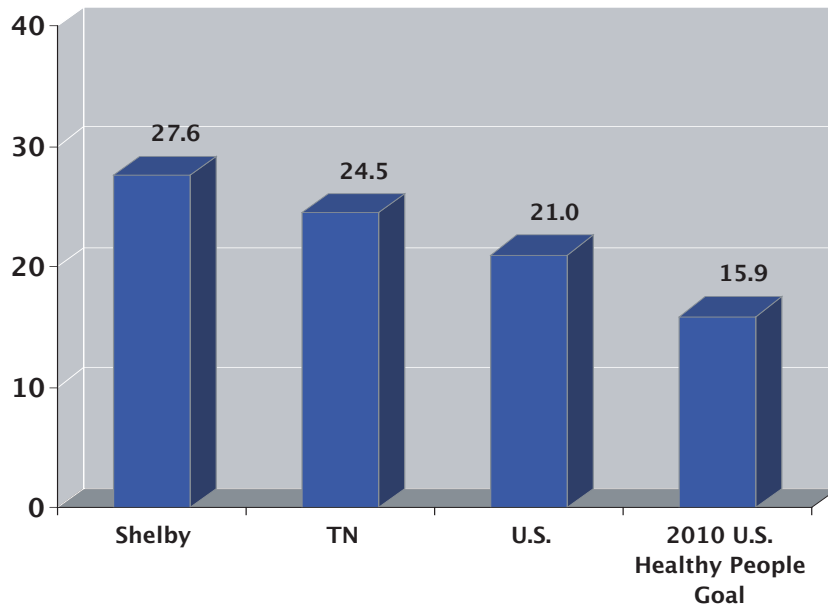


- At 14.2 deaths per 1,000 births, the infant mortality rate in the City of Memphis is the worst in the U.S. One Memphis zip code is deadlier for babies than Vietnam, Iran or El Salvador. Black mothers in Memphis are almost three times more likely to lose babies before age one than white mothers.
- An infant dies in Shelby County every 43 hours.
- The problem of infant mortality is not unique to Memphis. A dozen other large American cities have double-digit infant mortality rates.

We need to understand the infant mortality crisis within the context of poverty and related social ills, including drug abuse, violence and ignorance. We need to demand aggressive action to reduce the deaths of infants in Memphis and to change the culture of poverty and hopelessness that lies beneath it.

Child Death Rate Per 100,000 Ages 1-14 Years, 2002

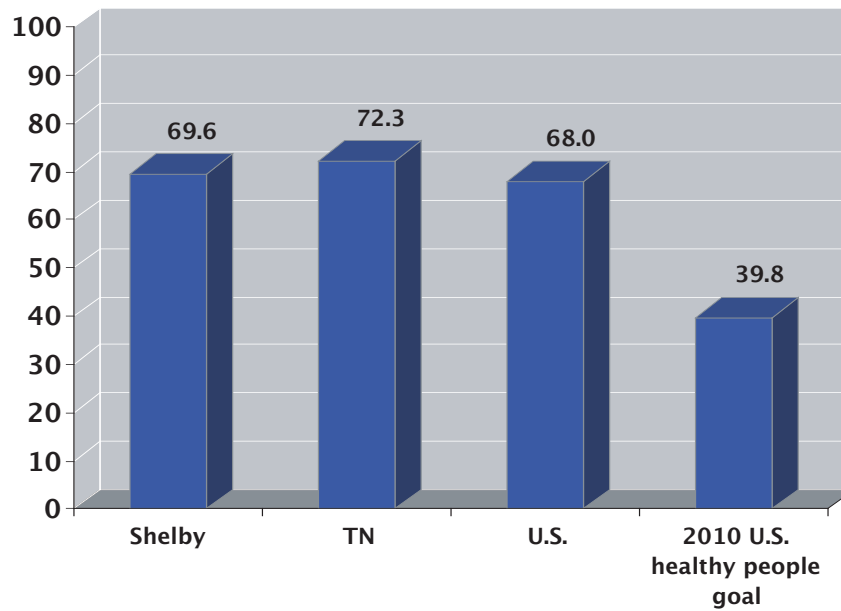
Source: CLIKS Online



The death rate for children ages one to 14 in Memphis and Shelby County is 27.6 per 100,000, which is higher than in the State of Tennessee and the U.S.

Adolescent Death Rate Per 100,000, 2002

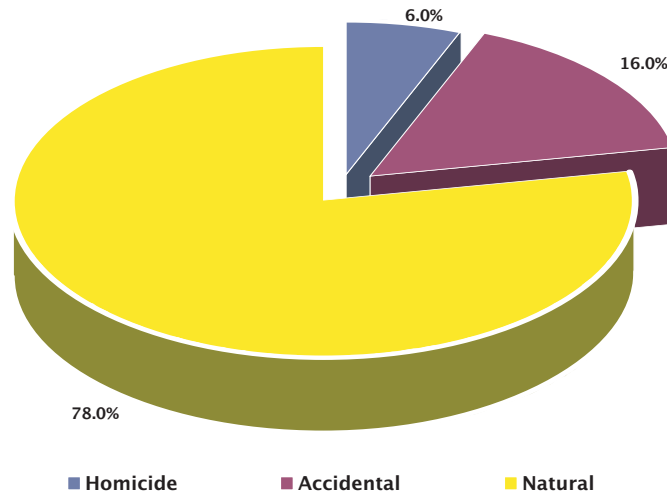
Source: CLIKS Online



- The death rate of adolescents in Memphis and Shelby County, Tennessee and the U.S. are relatively similar, with slightly fewer than 70 in 100,000 adolescent deaths in the county, state and nation.
- The Healthy People 2010 goal is to decrease adolescent deaths in Memphis and Shelby County by approximately 30 deaths per 100,000, or almost 50 percent, per year.

Child Death in Shelby County by Cause

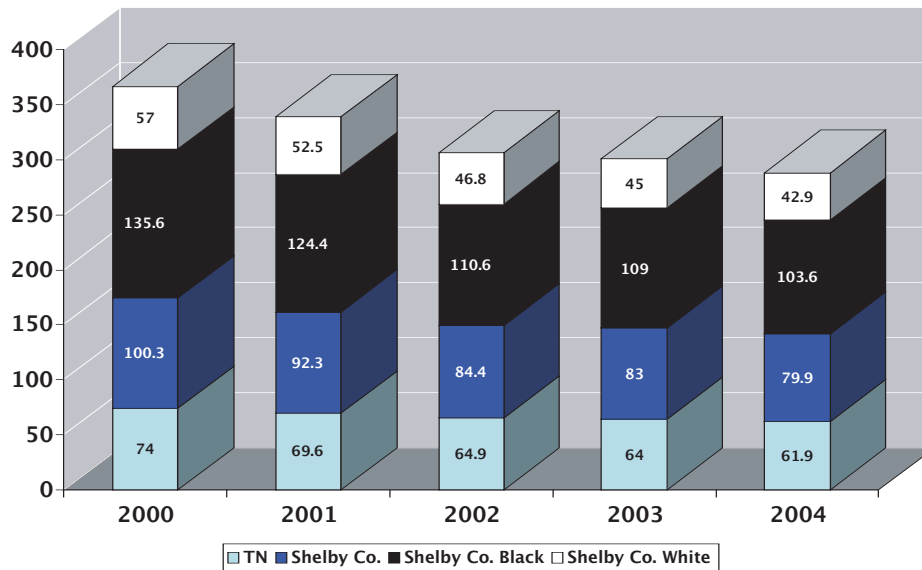
Source: Tennessee Health Department



- In Memphis and Shelby County, four in five children die of natural causes.
- Sixteen percent of child deaths are accidental.
- Six percent of child deaths are homicides.

Teenage birth rates in Memphis and Shelby County

Rate of Pregnancies per 1,000 for Females 15-19 in Shelby County, 2000-2004



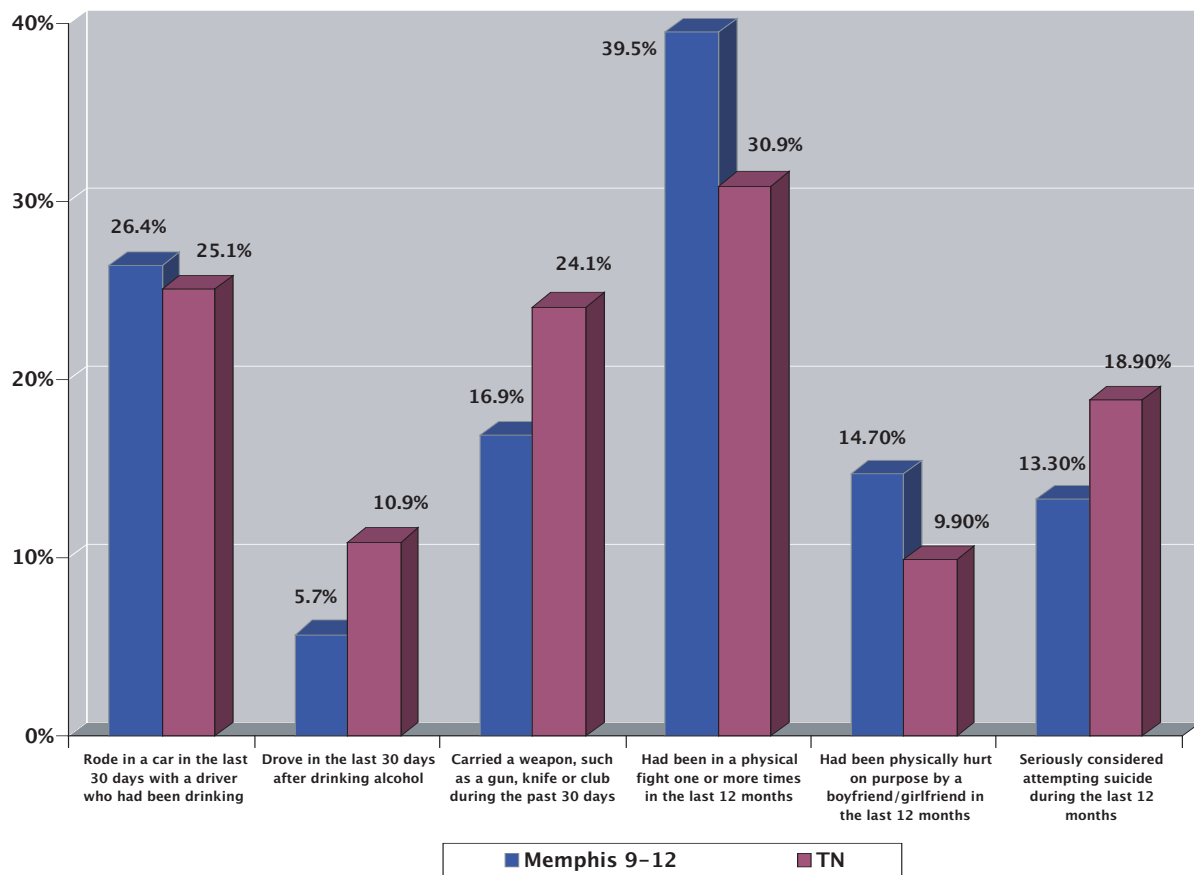
- The number of pregnancies for mothers ages 15 to 19 has been decreasing steadily in all categories since 2000, including throughout Tennessee, Shelby County, among Shelby County white mothers and among Shelby County black mothers.
- The rate of pregnancies for mothers ages 15 to 19 in Shelby County remains consistently higher, however, than the rate throughout Tennessee.
- Among teenage mothers in Shelby County the birth rate remains higher among black mothers than white mothers.

Youth Behavior Risk Survey: Memphis 2005

The Youth Risk Behavior Surveillance System (YRBSS) surveys youth behaviors through national and state education and health agencies. Particular attention is focused on health-risk behaviors that are important factors in morbidity (loss of quality of life) and mortality among children and adults. Behaviors often are established during youth and extend into adulthood. Changing risk behaviors is an important component of health promotion and disease prevention.

Risky Behavior: Intentional and unintentional injuries

Intentional and Unintentional Injuries, YBRSS 2005



Beginning very young students in Memphis and Shelby County engage in behavior that could endanger themselves and others.

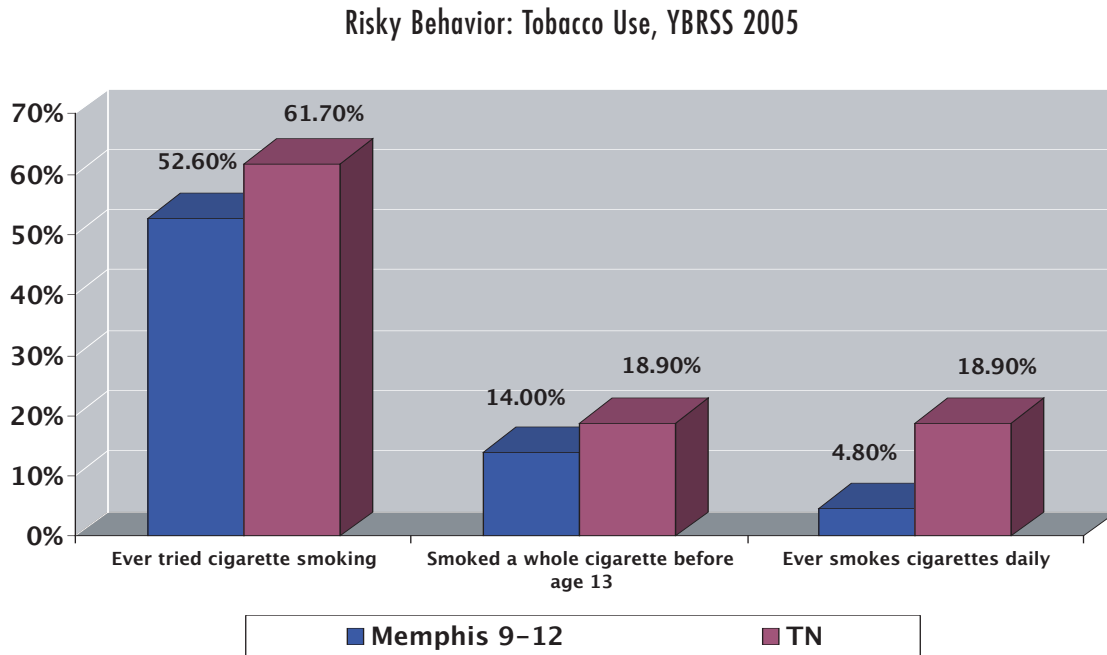
High School Students

- In Memphis and across Tennessee, one in four students rode in a car with a driver who had been drinking. Half as many students in Memphis as in Tennessee drove after drinking alcohol.
- One in four students in Tennessee carried a weapon to school. Fewer than one in five carried a weapon in Memphis.
- Forty percent of students in Memphis were in a fight in the past year compared to 33 percent in Tennessee.
- Slightly more students in Memphis were physically hurt by a boyfriend or girlfriend than in Tennessee.
- Nearly one in five students in Tennessee seriously considered attempting suicide, as compared to slightly more than one in ten students in Memphis.

Middle School Students

- In Memphis 71.5 percent of middle school students have been in a fight.
- One in three students has ridden with a driver who had been drinking.
- One in four has carried a weapon, and one in five seriously considered suicide.

Risky Behavior: Tobacco use



A lower percentage of students in Memphis and Shelby County use tobacco than do students in the rest of Tennessee.

High School Students

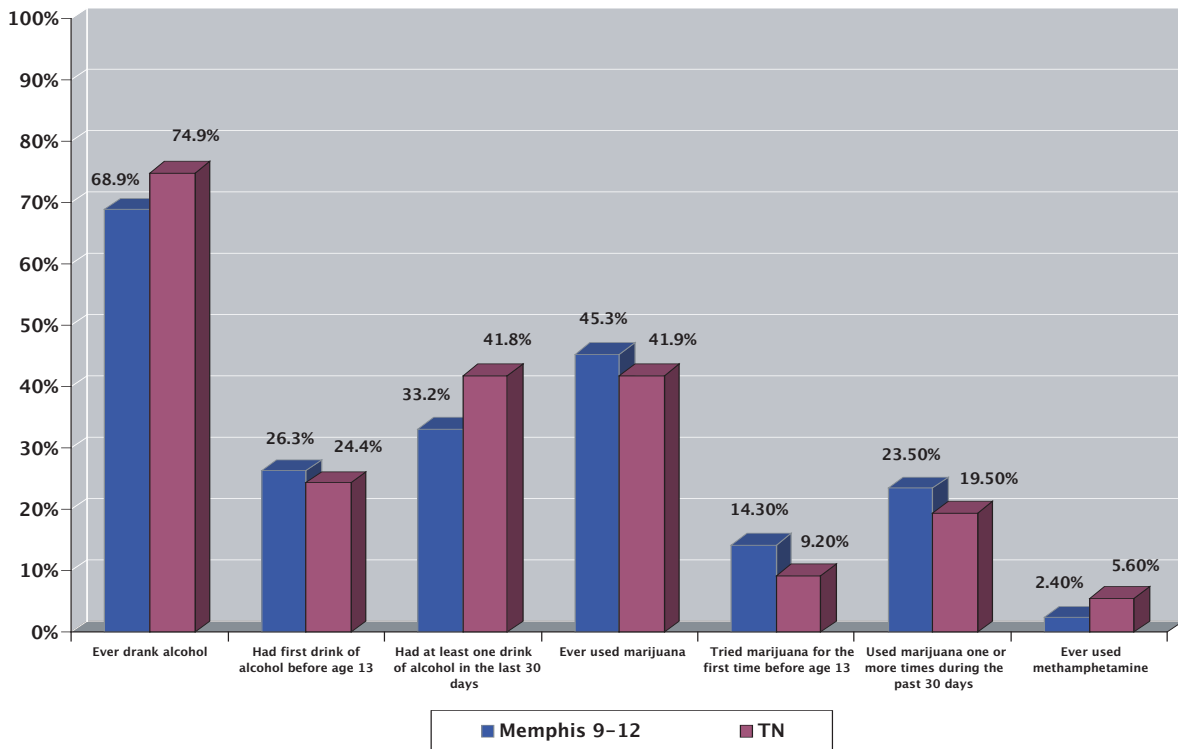
- Slightly more than 50 percent of high school students in Memphis have smoked cigarettes.
- Sixty percent of students in Tennessee have smoked cigarettes.
- Slightly less than 20 percent of Tennessee students reported smoking an entire cigarette before age 13. The figure is lower for Memphis students.
- Slightly less than 20 percent of Tennessee students smoked cigarettes daily.
- Less than 5 percent of Memphis students smoked cigarettes daily.

Middle School Students

- While high school students in Memphis report lower cigarette usage, younger students report more frequent and younger usage.
- Forty percent of middle school students have smoked a cigarette.
- About seven percent have smoked a cigarette before age 11, and 2.5 percent have smoked cigarettes daily.

Risky Behavior: Alcohol and drug use

Risky Behavior: Alcohol and Drug Use, YBRSS 2005



A large number of students in Memphis and Shelby County are drinking alcohol at young ages and drinking more frequently as they grow older.

High School Students

- Seventy-five percent of students in Tennessee and in Memphis have had an alcoholic drink.
- Twenty-five percent of students in Tennessee and Memphis had their first drinks of alcohol before age 13.
- Thirty-three percent of students in Memphis had at least one drink in the past month as compared to 40 percent in Tennessee.
- Approximately 40 percent of students in Memphis and Tennessee have tried marijuana.
- More students in Memphis (slightly more than 10%) than statewide had tried marijuana for the first time before age 13.
- Twenty-five percent of students in Memphis have used marijuana one or more times in the past month as compared to 20 percent of students in Tennessee.

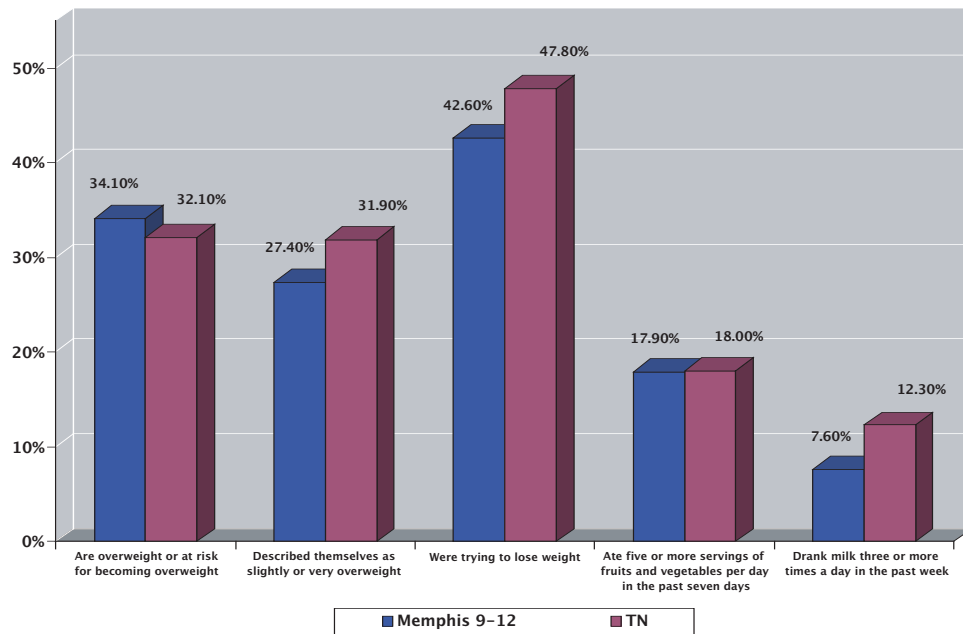
- Less than 10 percent of students in Memphis and Tennessee have used methamphetamine, and the number is slightly lower in Memphis than statewide.

Middle School Students

- Forty-four percent of middle school students in Memphis have tried alcohol.
- Seventeen percent tried alcohol before age 11.
- Twenty percent have tried marijuana. Five percent tried marijuana before age 11, and seven percent have used an inhalant.

Risky Behavior: Unhealthy diet

Risky Behavior: Unhealthy Diet, YBRSS 2005



Students in Memphis and Shelby County are at risk of becoming overweight.

High School Students

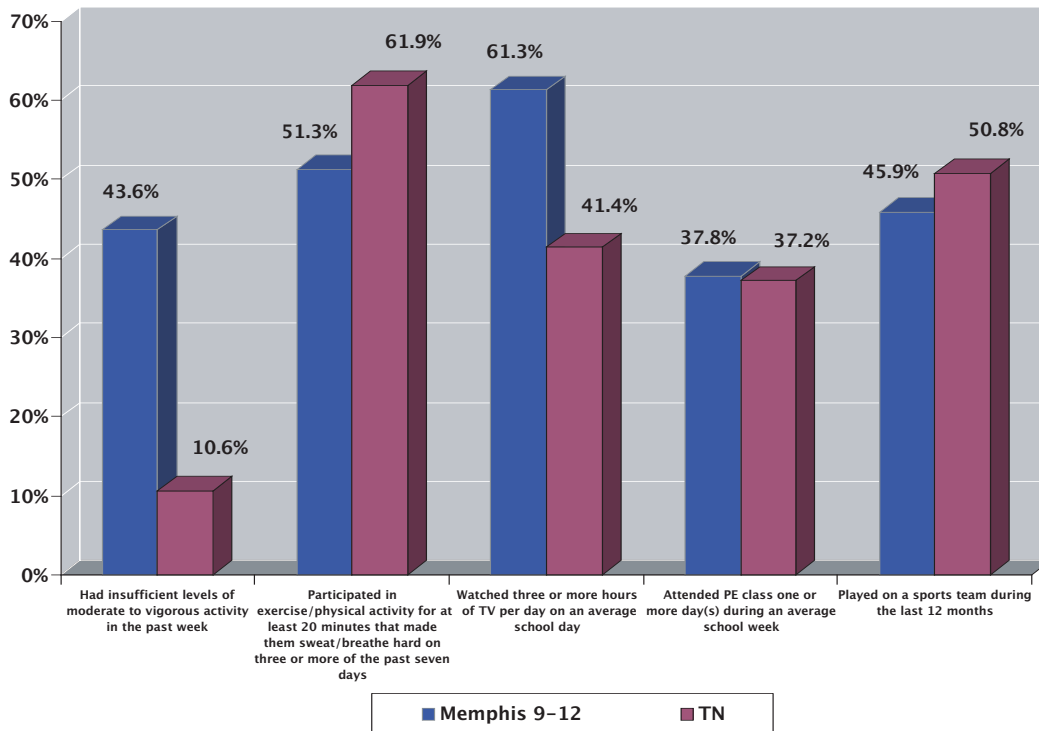
- One in three students in Memphis and Tennessee is overweight or at risk of becoming overweight. One in three in Memphis and Tennessee describes herself or himself as slightly, or very, overweight.
- Almost 50 percent of students in Tennessee are trying to lose weight as compared to about 40 percent of students in Memphis.
- In both Memphis and Tennessee, less than 20 percent of students eat five or more servings of fruits and vegetables per day in the past week.
- Fewer students in Memphis drink milk three or more times a week than the state average.

Middle School Students

- Nearly four in 10 middle school students in Memphis are overweight or at risk of becoming overweight.
- More than four in 10 report that they are dieting or trying to lose weight.
- Dietary indicators for obesity point toward potential health risks in the future such as diabetes, hypertension, heart disease and stroke.

Risky Behavior: Inadequate physical activity

Risky Behavior: Inadequate Physical Activity, YBRSS 2005



Students in Memphis are more sedentary than their counterparts across the state.

High School Students

- Four in 10 students in Memphis had insufficient vigorous physical activity as compared to only one in 10 students in Tennessee.
- Fifty percent of students in Memphis participated in vigorous physical activity three or more days of the past week as compared with 60 percent of students in Tennessee. Higher rates of inactivity put students in Memphis at risk of chronic health problems such as obesity and heart disease.
- Sixty percent of students in Memphis watched three or more hours of TV per day on an average school day as compared to only forty percent of students in Tennessee.
- Approximately one-third of students in Memphis and Tennessee attended PE class one or more days during an average school week.
- Slightly less than half of Memphis students and exactly half of Tennessee students played on a sports team during the past year.

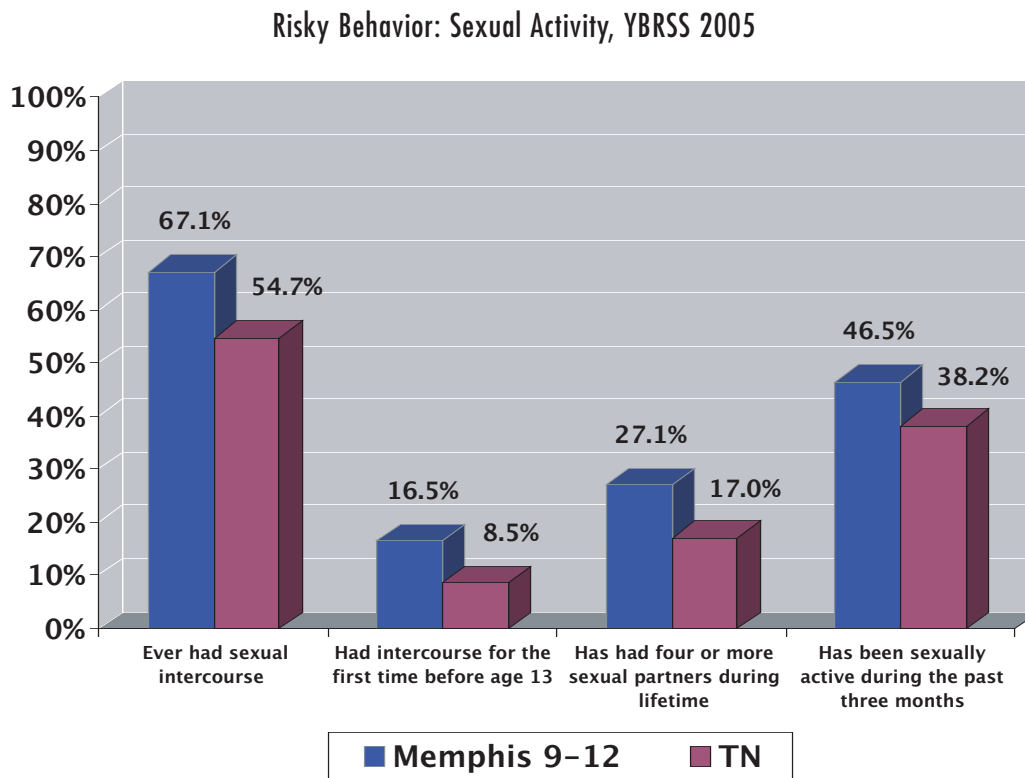
Middle School Students

- Younger students are more physically active.
- Sixty-six percent of Memphis middle school students participated in vigorous physical activity in the past week.
- Sixty-nine percent of middle school students in Memphis watched three or more hours of TV on an average school day, more than older students.
- Fifty-three percent of middle school students in Memphis attended PE classes one or more days during the week, more than older students.
- Slightly less than half of middle school students in Memphis played on a sports team.

Critical Issue: Risky Behavior

Children are exposed to, and involved in, harmful and potentially life-threatening behavior at younger and younger ages. The Youth Behavior Risk Surveillance Survey suggests that students in Memphis are experimenting with drugs and alcohol at earlier ages, increasing their chance of lifetime substance abuse and accompanying risks such as early pregnancy, school dropout, homelessness and poverty. Childhood obesity is also a problem in Memphis. Overweight children are more likely to have problems with sleep apnea and asthma conditions that are likely to lead to absenteeism and increased learning problems.

Risky Behavior: Sexual activity



Students in Memphis and Shelby County are more active sexually than their counterparts across the state.

High School Students

- More than two-thirds of high school students in Memphis have had sexual intercourse.
- By comparison, more than half of students in Tennessee have not had sexual intercourse.
- Almost 20 percent of students in Memphis had intercourse for the first time before age 13 as compared with slightly less than 10 percent in the rest of the state.
- More than 25 percent of students in Memphis have had four or more sexual partners, whereas less than 20 percent of students in Tennessee have had four or more sexual partners.
- Almost half of students in Memphis have been sexually active during the past three months as compared with less than 40 percent of students in Tennessee.

- Fewer Memphis students are sexually active today than were in 2003. In Tennessee more students are sexually active today.
- In 2005 fewer students in Memphis were sexually active before age 13 than were in 2003. In Tennessee more students were sexually active before age 13 than were in 2003.

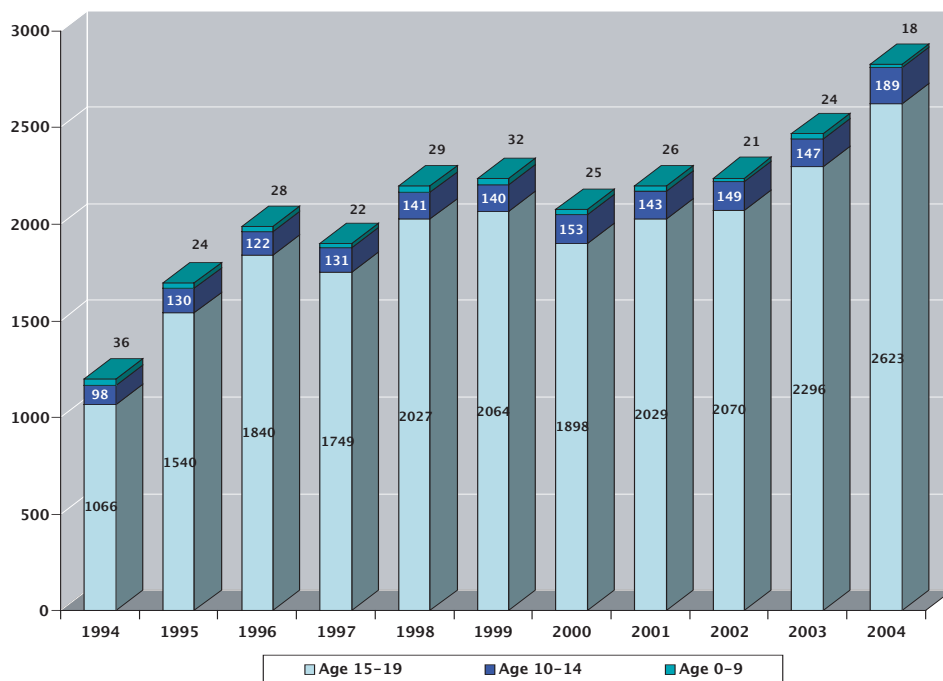
Middle School Students

- The early onset of sexual activity among younger students is cause for concern. Almost 37 percent of middle school students in Memphis have had sexual intercourse.
- Ten percent had sexual intercourse before age 11. Fourteen percent of middle school students have had three or more sexual partners.
- Seventy-three percent of middle school students in Memphis have learned about HIV/AIDS in school.

Sexually transmitted diseases

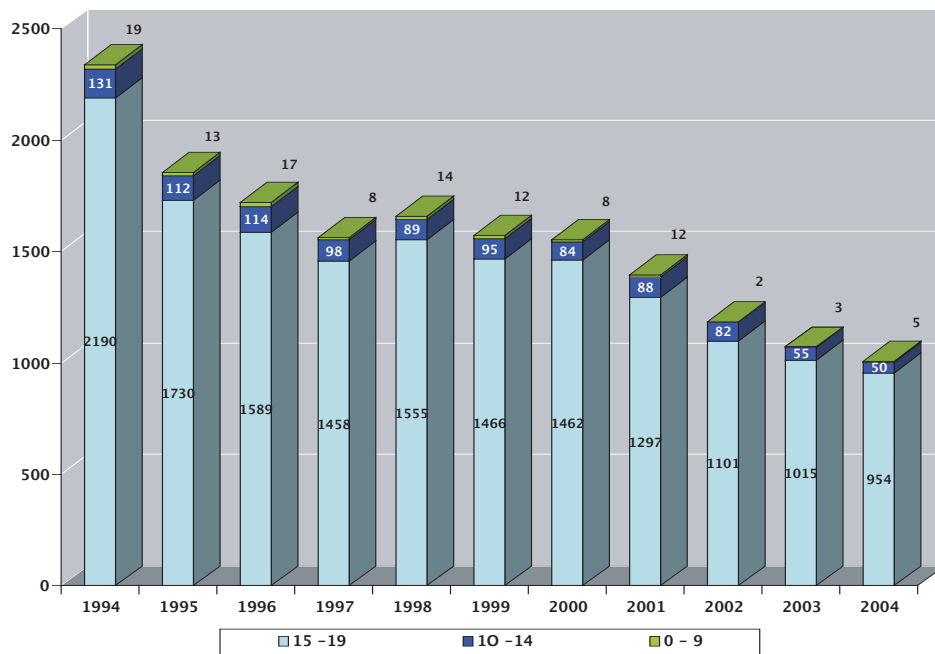
Rates of sexually transmitted disease among children in Memphis, especially the rising number of children infected with Chlamydia, represent a public health hazard. While these statistics are troubling, they also present an opportunity for policy responses and intervention, since these diseases are both preventable and treatable.

Reported Cases of Chlamydia in Children in Shelby County and Memphis, 1994-2004



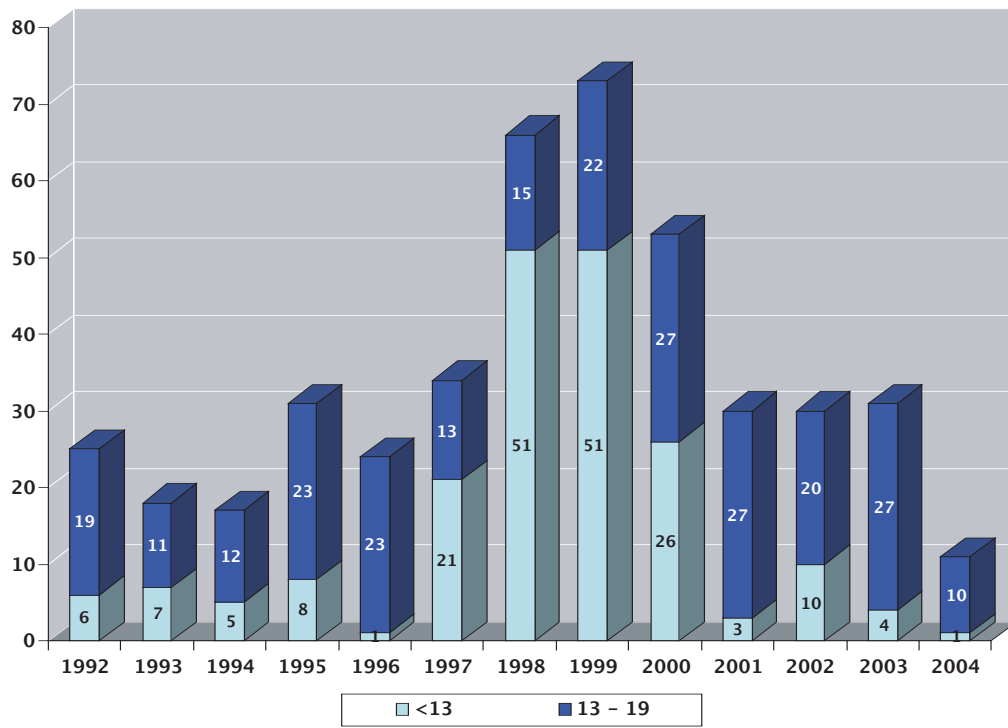
- The number of cases of Chlamydia reported in children in Shelby County is on the rise.
- Between 1994 and 2004 cases of Chlamydia reported in Memphis and Shelby County more than doubled.
- From 2003 to 2004 there was a pronounced increase in Chlamydia rates among children ages 10 to 14 (up 23%). This alarming statistic means that younger children are increasingly at risk.
- Yet, the number of cases reported in the under-10 age group decreased by 25 percent from 2003 to 2004.

Reported Cases of Gonorrhea in Children in Shelby County and Memphis by Age, 1994-2004



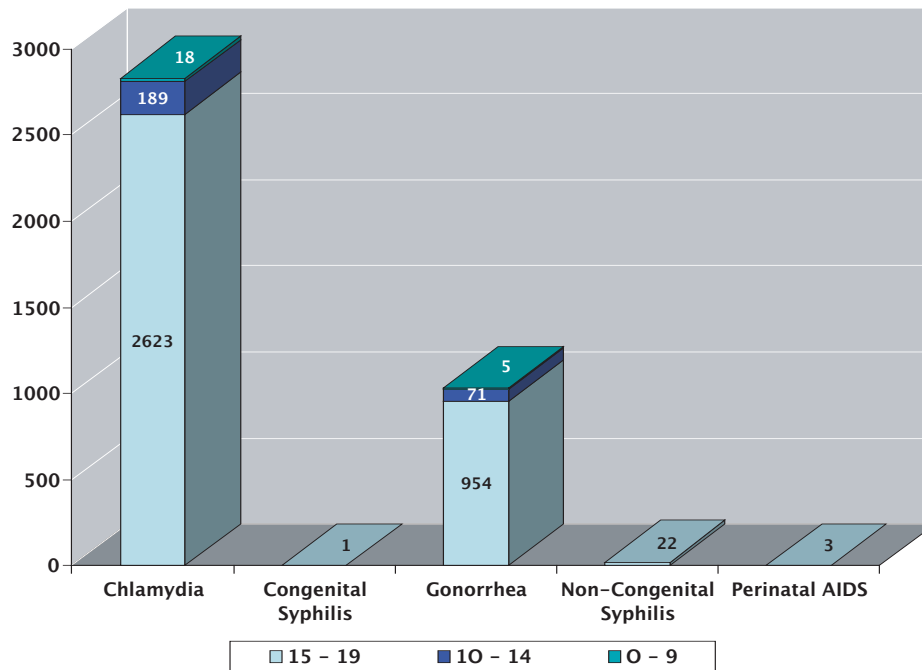
- The total number of reported cases of gonorrhea between 1994 and 2004 was reduced by more than half.
- There has been a 73 percent decrease in the number of cases reported for the under-10 age group between 1994 and 2004.

Reported Cases of HIV in Children in Memphis and Shelby County, 1992-2004



- In 2004 11 cases of HIV were reported in Shelby County, one of which was under the age of 13. This is the lowest number of reported cases of HIV since the onset of HIV reporting in 1992.

Shelby County Public Health Department: Sexually Transmitted Diseases in Children in Memphis, 2004



- Only one case of congenital syphilis was reported in Shelby County in 2004. There has been a marked decrease in reported cases since the early 1990s.
- Between 1990 and 2004 the overall rate of non-congenital syphilis cases in children in Shelby County and Memphis has been reduced by 96 percent.
- Perinatal AIDS exposure means that the HIV virus is passed from the mother to the fetus in utero during delivery or through breast milk.
- While still a cause for concern, there are relatively few cases of perinatal AIDS exposure in Memphis.

Critical Issue: Risky Sexual Behavior

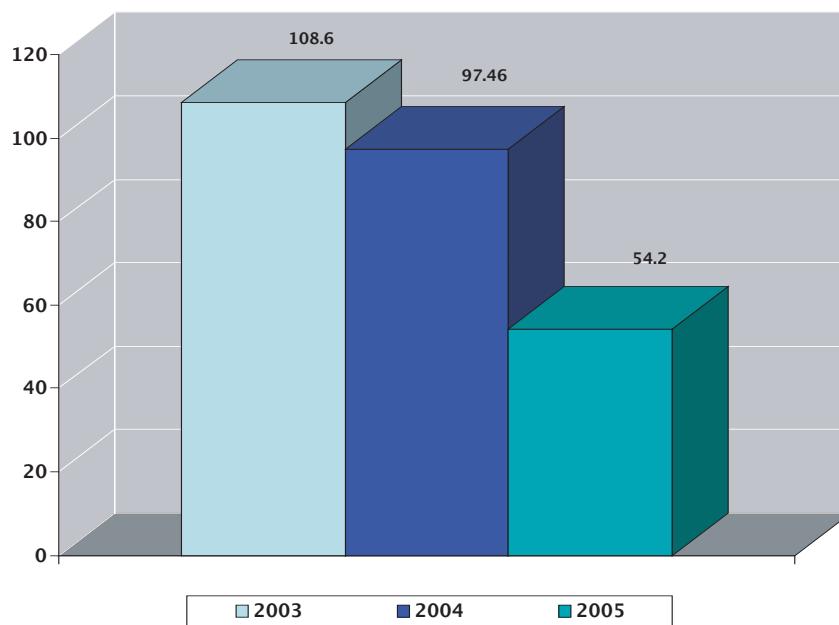
While the number of children in Memphis engaging in sexual activity seems to be declining over a three-year period, the number of younger children engaging in sexual activity is alarming. Sexually transmitted diseases are prevalent among teens and pre-teens with an overall increase in the number of reported cases of Chlamydia.

Additional Health Risk Factors

Asthma

- Across the nation, asthma accounts for 14 million lost days of school annually.
- Asthma is the third-ranking cause of hospitalization among children under 15.
- The number of children dying from asthma increased almost threefold, from 93 in 1979 to 266 in 1996.
- The estimated cost of treating asthma in children is \$3.2 billion per year.
- Of children with asthma in Tennessee
 - ✓ Two-thirds had severe asthma attacks within the past 12 months.
 - ✓ One-third had asthma attacks so bad they thought their lives were in danger.
 - ✓ Seventy percent did not have a written asthma action plan.
 - ✓ Forty percent did not have the recommended two doctor visits for their asthma in the past 12 months.
 - ✓ One-third reported having unscheduled acute care visits within the past year.
 - ✓ Half have not had lung function tests in the past 12 months.

Hospital Admits for Asthma-related Problems per 1000 Children in Memphis and Shelby County, 2003-2005



* Based on household interviews of a sample of the non-institutionalized U.S. civilian population.

- There were 484,000 asthma hospitalizations in the U.S. in 2002, or 17-per-10,000 people, according to the Asthma Surveillance Survey conducted nationally by the Center for Disease Control. Among children there were 196,000 hospitalizations (27-per-10,000). Hospitalizations were highest among children under five years old, 59 hospitalizations per 10,000. The asthma hospitalization rate among the black population was 225 percent higher than among white people. Females had a hospitalization rate about 35 percent higher than males.
- Nationally in 2002 187 children died from asthma, or 0.3 deaths per 100,000 children, compared to 1.9 deaths per 100,000 adults. Non-Hispanic black people had an asthma death rate over 200 percent higher than non-Hispanic whites and 160 percent higher than Hispanics.

The Presence of Lead in Memphis

- In 2004 17,188 children were screened for lead poisoning in Shelby County. Two percent (354) were found to have elevated blood lead levels.
- Presently 23,500 children in Shelby County (10 percent of total children) are estimated to be at risk for lead poisoning.
- Exposure to lead can result in damage to the brain and nervous system, behavior and learning problems, slowed growth, hearing problems and headaches. Young children are especially at risk for lead poisoning because their brains and nervous systems are more sensitive and absorb lead more easily.

Children most at risk for lead exposure and poisoning are not being screened in Memphis and Shelby County. While there is annual improvement in the number and percentage of children screened in Memphis and Shelby County, there still is a gap in information and outreach to parents about the issue of lead poisoning and a hole in the safety net intended to adequately assess and treat the problem.

Critical Issue: Environmental Factors

Memphis is consistently ranked in a national survey as one of the most difficult cities for asthma sufferers. There has been a significant decrease in the number of children seen in acute care between 2004 and 2005, and further research will uncover what preventions and interventions account for this. Risk for lead poisoning continues to be a problem for children in Memphis and Shelby County. Only 38 percent of the population considered at highest risk currently is being screened for exposure to lead. Thus there is a large under-served juvenile population needing screening and potential intervention for toxic levels of lead exposure.

What we need to learn:

- We have begun to understand the larger impact of asthma on the health and well-being of children, but there is much to learn about the actual impact on children in Memphis.
 - ✓ How many days of school do children in Memphis miss due to asthma-related problems?
 - ✓ What is the mortality rate for children in Memphis with asthma?
 - ✓ What are interventions and preventions available for children with asthma?
 - ✓ What are the environmental factors contributing to the high rate of asthma sufferers in Memphis?
 - ✓ What have been the changes in health care policy, such as TENNCare, that affect children in Memphis?
- How many children without health insurance live in Memphis?
- With what frequency do children in Memphis visit a pediatrician?
- Are families able to establish “medical homes” for their children?
- Are children in Memphis being vaccinated on time? Do they complete their inoculations on time?
- Do mothers in Memphis breastfeed and for what duration?

¹ Care

² Brad Kiser and William F. Fox “The Impact of TennCare: A Survey of Recipients 2005” The University of Tennessee Center for Business and Economic Research. August 2005.

³ National Healthcare Disparities Report. The US Department of Health and Human Services: Agency for Healthcare Research and Quality (2004).

⁴ Edmondson 2005a, 2005b, 2005c.

⁵ Edmondson 2005c, 4.

⁶ The Commercial Appeal 2005

⁷ Source: http://www2.state.tn.us/health/statistics/HealthData/data_sheet.htm

⁸ AIDS cases began to be reported in 1983.

⁹ http://www.shelbycountyttn.gov/FirstPortal/dotShowDoc/dotContent/Government/CountyServices/HealthServices/PersonalHealth/personal_index.htm

¹⁰ The Center for Disease Control, <http://www.cdc.gov/asthma/children.htm>

¹¹ Ibid.

¹² Ibid.

¹³ Ibid.

¹⁴ Source: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5507a7.htm>

¹⁵ Shelby County Environmental Health Services, www.shelbycountyttn.gov

Children's
Educational
Well-Being

Education

Educational Well-Being



“The education of children shapes their own personal development and life chances, as well as the economic and social progress of our Nation.”

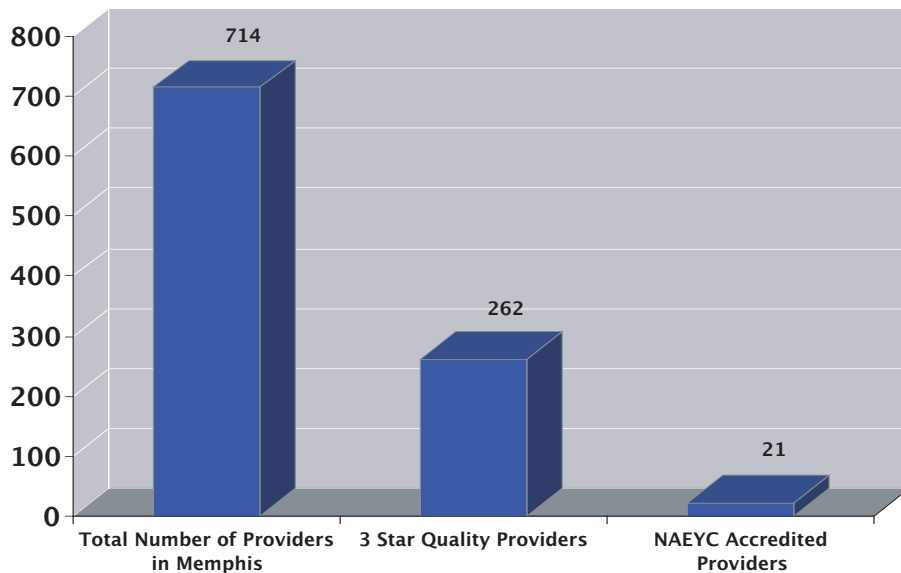
America’s Children: Key National Indicators of Well-Being

Sources: The academic statistics in this section are drawn from the Tennessee Department of Education website (<http://www.state.tn.us/education/>). Other sources are cited as used.

**The child-care business in Memphis includes nearly a thousand providers.
Only one in four has earned a “superior” quality rating.**

- Memphis is served by nearly one thousand child care providers. About one fifth of the total providers are licensed by the State of Tennessee.
- Only about one in four providers has earned the superior quality rating of three stars under the state’s Star-Quality Child Care Program. The program is voluntary, and participating providers are awarded zero to three stars based on criteria such as director qualifications, parental involvement and class size.
- In addition, less than three percent of child care providers in Memphis have earned accreditation by the National Association for the Education of Young Children (NAEYC), a voluntary program dedicated to the evaluation and improvement of the nation’s pre-schools, kindergartens and early education centers.

Child Care Providers In Memphis



According to the Developing Skills Checklist, children entering Memphis City Schools are under-prepared for kindergarten.

- Children entering kindergarten in Memphis scored in the 16th and 19th percentiles in math and language. This means that 80 percent of children entering kindergarten in the U.S., are better-prepared than children entering kindergarten in Memphis City Schools.
- The bad news does not end there. Thirty-six out of 112 Memphis elementary schools reported scores of entering kindergarteners that are below 10 percent in at least one of these two subjects.

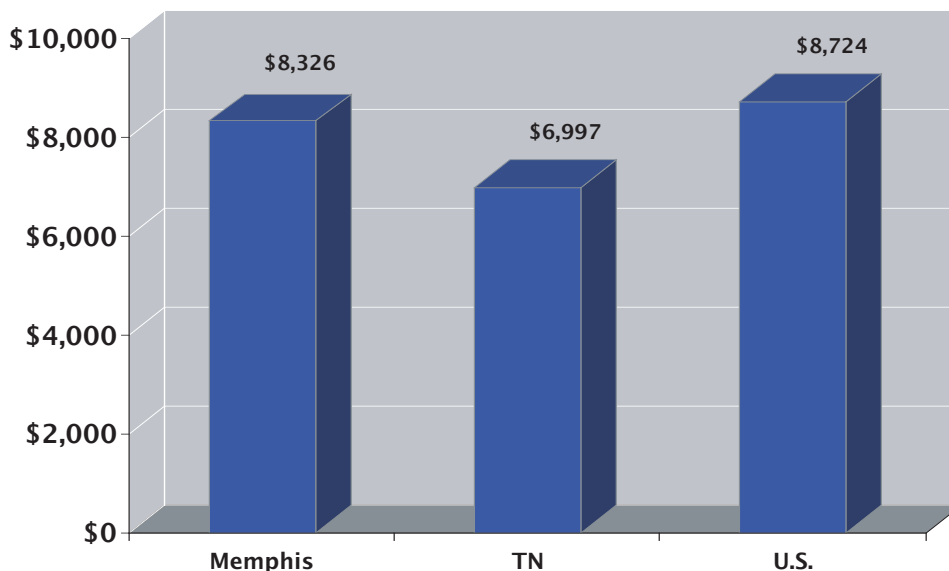
Memphis is the largest school district in Tennessee.

- The Memphis City School District (MCS) is the largest in Tennessee and 21st largest in the U.S. It is made up of 191 schools, including 112 elementary, 25 middle, four junior, and 31 high schools. The system serves more than 119,000 students. The Shelby County system (SCS) is made up of 46 schools and serves over 46,000 students.
- In Memphis, 97 percent of black children attend public schools, compared to only 62 percent of white students.

Adjusting for family income, Memphis spends roughly the same amount per pupil as Shelby County Schools.

- In Memphis, approximately \$8,326 is spent to educate a student for a year, roughly \$500 less than the national average of \$8,724 per student. Per pupil spending for the Shelby County schools is \$6,479, over \$2,000 below the national average.
- The federal government has determined that it costs 40% more to educate a low income student than a middle income student. Nearly three in four students in Memphis are from low-income families, while one in five SCS students is from a low-income family.
- Differences in family income between MCS and SCS account for almost all the difference in school spending-per-pupil. If per-pupil spending figures are adjusted to eliminate the effects of low income, the averages are the same, virtually, in Memphis (\$6,366) and Shelby County schools (\$5,996), a difference of six percent.

Per Pupil Expenditures



TCAP tests are the chief means of comparing MCS students with students across the state.

- The principal tool used to assess the performance of public schools in Tennessee is the Tennessee Comprehensive Assessment Program (TCAP) and the Gateway End-of-Course Tests.
- TCAP is mandated for Grades 3-8 (schools may test earlier grades as well) and includes tests in reading, language arts, math, science and social studies. The Gateway tests, given in Grades 9-12, cover English, math and biology. Their successful completion is required for students receiving a regular diploma. TCAP scores are used to measure the compliance of schools in Tennessee with the dictates of the No Child Left Behind Act (NCLB).
- The TCAP exam is a criterion-referenced exam, meaning that students who have mastered a grade-appropriate body of knowledge should receive high marks on the TCAP exam for that grade. In other words, the TCAP measures students' mastery of a skill set. Scores on the TCAP are categorized as Advanced, Proficient and Below Proficient.

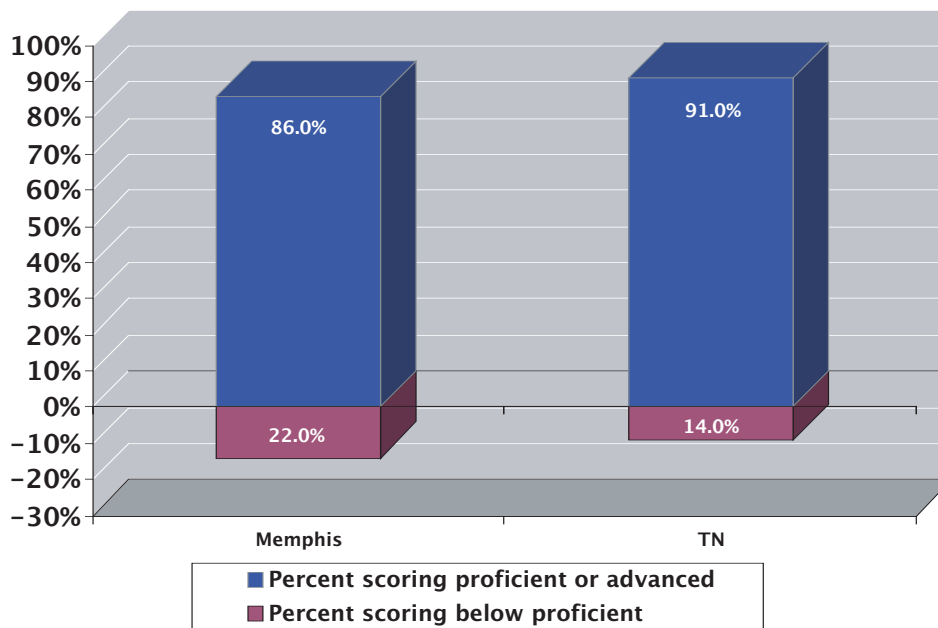
MCS students score slightly below the state average in reading.

“Perhaps the most important task of elementary schools is to teach students to read well. Strong reading skills are the key to later success both in school and in life.”

--Education Watch

- Slightly fewer students in Grades K-8 in Memphis achieved scores of Proficient and Advanced on the reading TCAP exam than students across the state.
- Ninety percent of high school students in Memphis received scores of Proficient or Advanced, while 93 percent of students across Tennessee received similar scores.

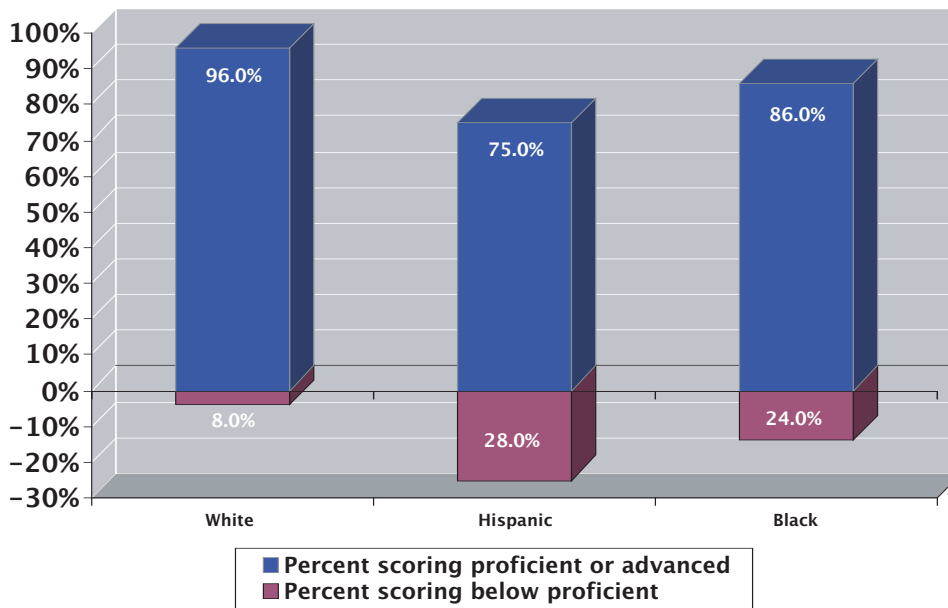
Comparing Memphis and Tennessee Reading TCAP Performances, 2005



There are significant gaps in performance in reading between ethnic groups.

- Across the U.S., persistent achievement gaps correlate with both family income and ethnicity. As Richard Rothstein of the Economic Policy Institute notes, “The black-white gap is partly the difference between the achievement of all lower-class and middle-class students, but there is an additional gap between black and white students even when...[they] come from families with similar incomes”.
- No Child Left Behind (NCLB) legislation is designed to improve the academic performance of all groups of Americans and to reduce achievement gaps between ethnic groups. The law requires schools to isolate test results by ethnic category where there are 45 or more students in an ethnic group.
- Eighty-seven percent of Memphis City Schools students are black, and nine percent are white. Average TCAP and Gateway reading scores of black students consistently fall below those of white students. The average scores for Hispanic students, meanwhile, fall below the scores of both black and white students.
- The same trend appears in the results for the Gateway test. Average scores were 97 for white, 89 for black, and 81 for Hispanic students.

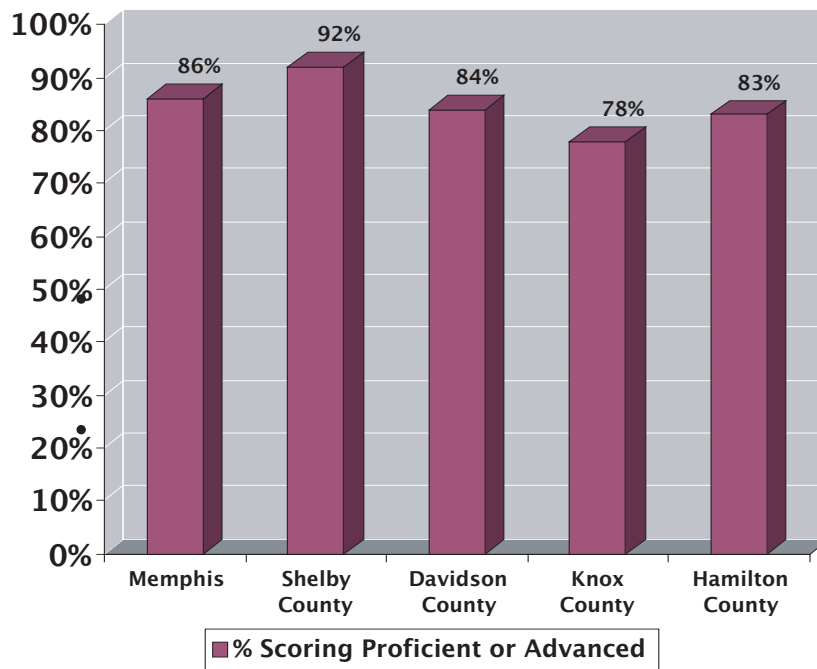
2005 TCAP - Memphis City Schools Reading Performance by Ethnic Category



Performance of black students in MCS is comparable to that of black students across Tennessee.

- The three largest metropolitan areas in Tennessee after Memphis are Nashville (Davidson County), Knoxville (Knox County), and Chattanooga (Hamilton County). Average scores of black students in these areas are similar.
- Shelby County Schools report higher scores for black students, but also have the lowest percentage of economically disadvantaged students of all five areas.

Average Scores on TCAP Reading for Black Students Across TN



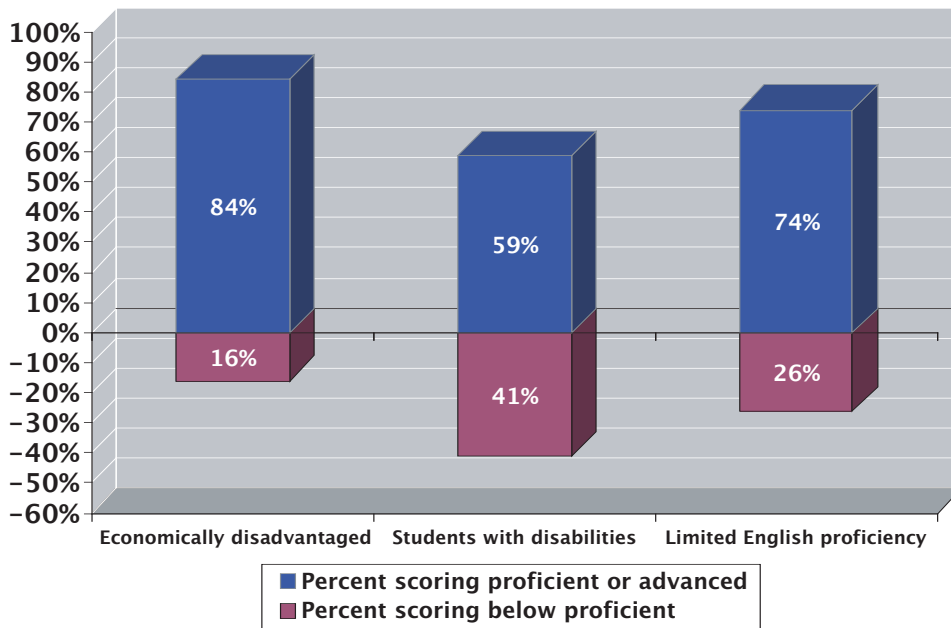
Performance gaps in reading exist also among students in risk-groups.

“Americans believe in the ideal of equal opportunity and also believe that the best way to ensure that opportunity is to enable all children, regardless of their parents’ stations, to leave school with skills that position them to compete fairly and productively in the nation’s democratic governance and occupational structure.”

- Richard Rothstein

- A large share of the achievement gap is due to differences in the resources available to different families. Social scientists conclude that socio-economic status accounts for more of the “...variation in cognitive scores than any other factor...”.
- In Memphis, about 71 percent of MCS students are from low-income families. Average scores for students from low-income families fall below the average for the school system. Similarly, students with disabilities and those with limited English proficiency typically have somewhat lower average scores.

2005 TCAP - Memphis City Schools Reading Performance by Key Risk Factors



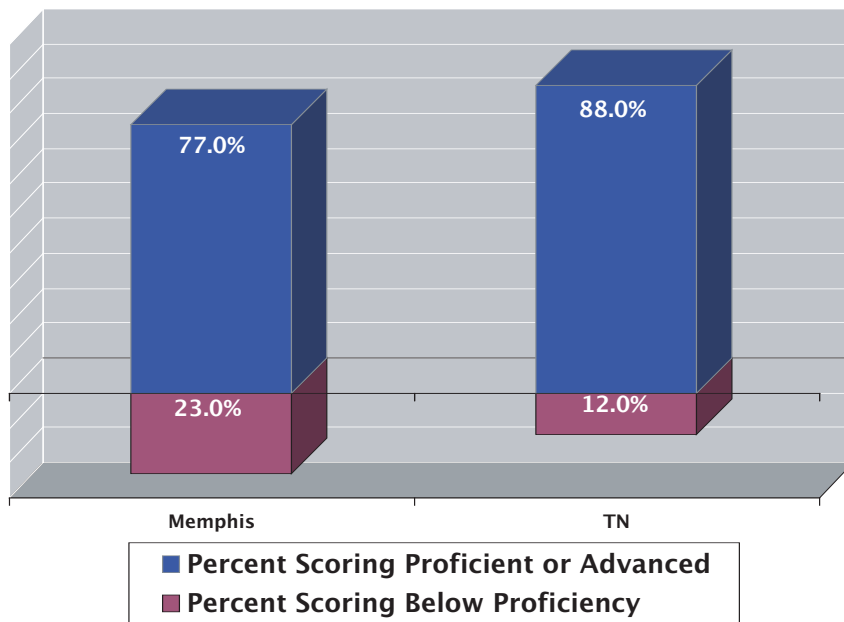
The gap between average MCS scores and average state scores is larger in math than in reading.

“Higher order thinking and problem solving skills are necessary for entry into the economic mainstream. Without these skills, children will be tracked into an economic underclass.”

--The Algebra Project

- The gap between MCS and Tennessee state math scores (11 points) is almost twice as large as the gap in reading scores (5 points).
- Moreover, achievement gaps in math increase as students reach high school. On the TCAP test, the gap between Memphis and Tennessee is 11 points; on the Gateway test the gap is 16 points.

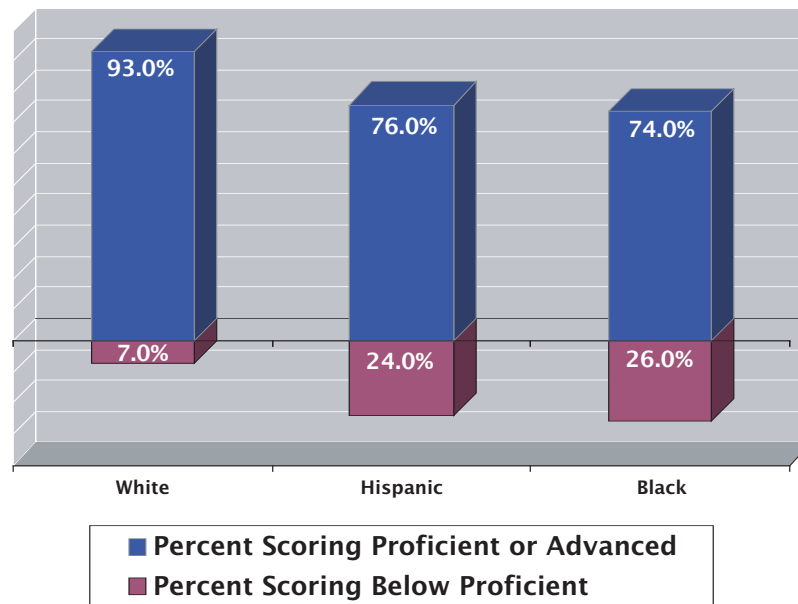
Comparing Memphis and Tennessee: 2005 TCAP Math Proficiency



Performance gaps in math among ethnic groups are larger than those in reading.

- The gap between white and Hispanic students is about the same in math and English. The gap in math scores between white and black students is much larger.
- Again, the gap widens by high school. On the 2005 Gateway (Grades 9-12) test the gap between white and black students is 25 points.

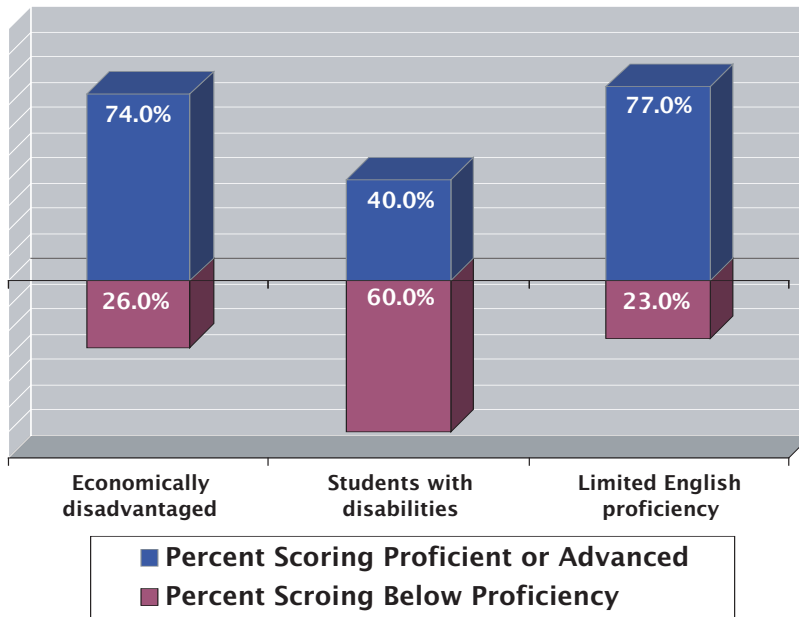
2005 TCAP - Memphis City Schools Math Performance by Ethnic Category



Performance gaps in math between risk-groups are similar to those in reading.

- As is the case with reading scores, math scores of low-income students are slightly lower than the system average. However, 71 percent of students in MCS come from economically disadvantaged homes.

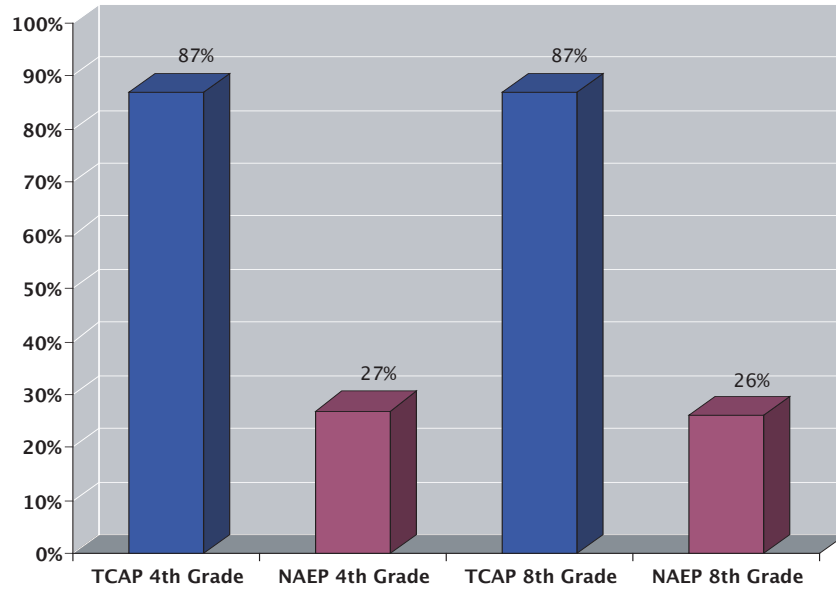
2005 TCAP - Memphis City Schools Math Performance by Key Risk Factors



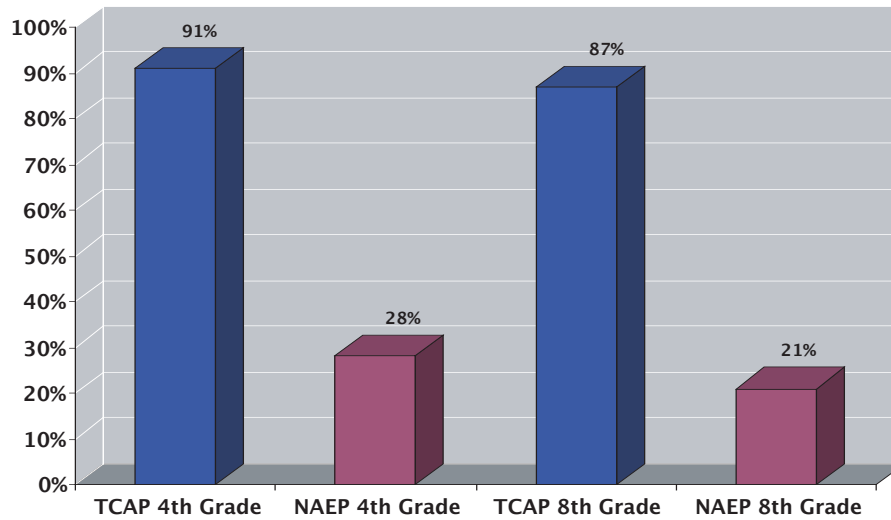
It is difficult to compare MCS students to students nationwide.

- Tennessee students also participate in the nationwide achievement tests called the National Assessment of Educational Progress (NAEP). The NAEP is administered to only a representative sample of students across the state, so it is not possible to isolate scores for Memphis City Schools. By comparing the performance of Tennessee students on the NAEP and TCAP, however, we are able to place the performance of Memphis City Schools students into a broader context.
- The results of the TCAP and the NAEP paint two very different pictures of educational achievement in Tennessee. Consider the results of the two tests for 2005:

Tennessee TCAP and NAEP Reading Performance



Tennessee TCAP and NAEP Math Performance



- While the TCAP has three rankings, Advanced, Proficient, and Below Proficient, the NAEP test has four, Advanced, Proficient, Basic and Below Basic.

- The Basic level denotes "partial mastery of prerequisite knowledge and skills that are fundamental for proficient work at each grade assessed." The Tennessee Department of Education suggests that the TCAP Proficient level is comparable to the NAEP Basic level. If so, then Tennessee is assigning grades of Proficient to some students with "partial mastery" of fundamental skills.

Explanations vary for the discrepancy between the TCAP and the NAEP.

- Some claim that the difference in performance on the two tests can be explained by the fact that the NAEP is a low-stakes test, while poor performance on the TCAP can have repercussions for schools. As a result, students and teachers have little incentive to take the NAEP test seriously.
- However, many states do not show a similar discrepancy between state achievement tests and NAEP results. In 2003 *Education Next*, a journal dedicated to school reform, examined the discrepancy between state tests and NAEP tests for all states for which data were available. "A" grades were assigned to states with the smallest gaps between students on the two tests. Tennessee received Fs in all categories, performing last out of all states included in the study.
- The U.S. Department of Education asserts that NAEP data, "will highlight the rigor of standards and tests for individual states: if there is a large discrepancy between children's proficiency on a state's tests and their performance on the NAEP, that would suggest that the state needs to take a closer look at its standards and assessments and consider making improvements."

Similar achievement gaps exist on the NAEP and TCAP.

- If the gaps in average scores between ethnic and socio-economic groups on the TCAP are striking, those on the NAEP paint an even bleaker picture. The trends are similar to those on the TCAP. Black students score lower than whites, as do economically disadvantaged students. As on the TCAP, achievement gaps in math are particularly large.
- According to Richard Rothstein of the Economic Policy Institute, small gaps between socio-economic and racial groups may reflect a strategy by some states of administering extremely simple exams. "If very simple skills are judged proficient, most students of both races can pass the test. If more skill is required, fewer will pass. The simpler the level, the smaller the gap."
- Achievement gaps, then, may be larger than they appear on the TCAP. Proficient scores are set by the state. In order to show proficiency in many of the different categories of the TCAP, students must answer as few as 27 percent of the items correctly.

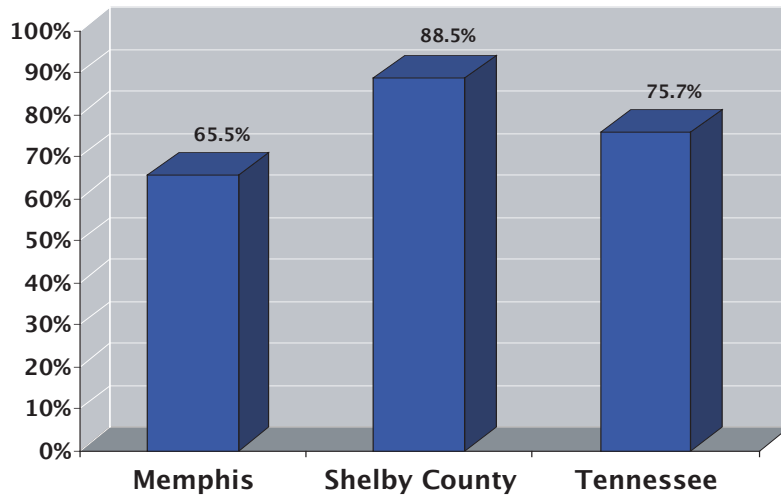
Multiple ways of reporting graduation make it difficult to know what percent of MCS students complete high school.

“No one can dispute the singular importance of high school graduation. The high school diploma represents the bare minimum requirement for successful participation in the workforce, the economy and society as a whole. The unemployment rate for high school dropouts is more than 30 percent higher than that of graduates. And when employed, dropouts earn close to 30 percent less. Dropouts are also more likely to end up incarcerated and to rely on public assistance.”

- The Education Trust

- Performance on standardized exams is only one measure of the success of a school district. “Graduation rates used in conjunction with test scores provide a more complete picture of school performance than test scores alone because a school’s test-proficiency rate will be higher if low-performing students drop out and do not have their scores included with their peers.”
- States report graduation rates and goals in different ways. The Education Trust reports that some states have set goals that are actually below their current graduation rates. Others, such as Tennessee, have determined that any improvement will be sufficient.
- States do not report graduation rates by ethnic or socio-economic groups. Only the overall rate for the school or system is considered. In states such as Tennessee, that consider any progress to be adequate, the graduation rate of black students, for example, may be declining. As long as the overall rate is increasing, the state will meet its graduation goal.
- Cohort dropout rates may be the most accurate indicator of graduation success. Cohort rates compare the number of twelfth-grade graduates with the number of students enrolled as ninth-graders four years earlier, adjusting for students who transfer in or out.
- Schools are required by Federal law to calculate a graduation percent that measures the number of students who graduate on time (within four years, plus one extra summer.)
- In Memphis, 65.5 percent of the 2005 cohort graduated on time. This is more than 10 percentage points below Tennessee and 23 points below Shelby County.
- Meanwhile, 20 percent of ninth-graders entering in 2001 dropped out before graduation in 2005

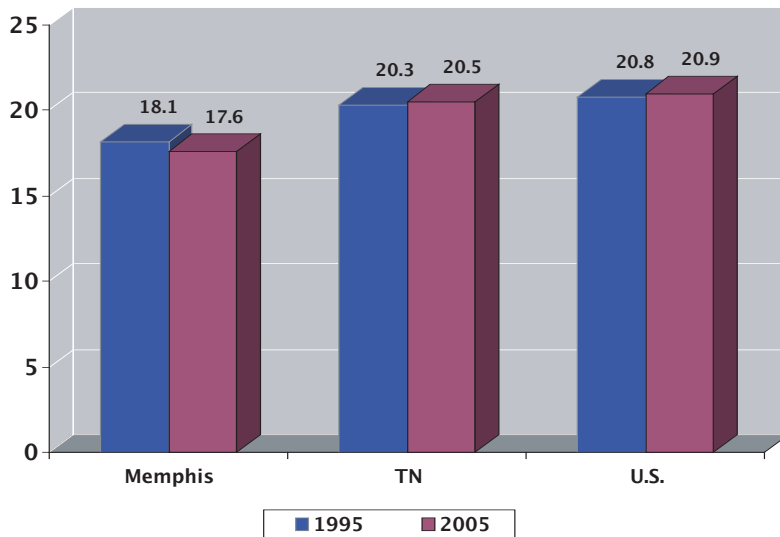
2005 Graduation Percent



MCS students are less prepared for college than their peers across the state and nationwide.

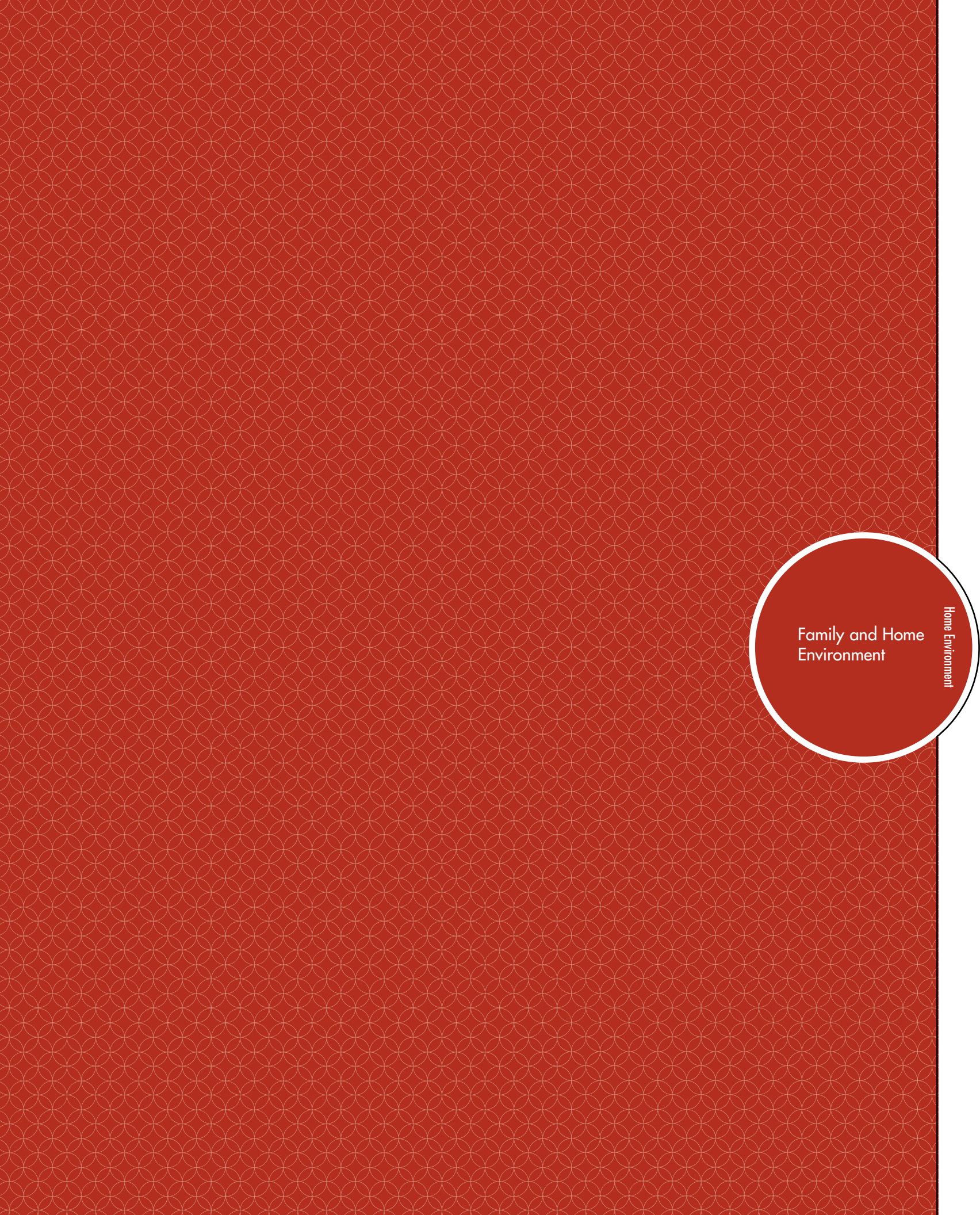
- Students considering college take the American College Test (ACT). MCS students who take the test routinely score lower than state and national averages.
- Also noteworthy, the average ACT score in Memphis has decreased since 1995, while average scores across TN and the U.S. have risen.

Average ACT Scores of Memphis Students Compared to Tennessee and U.S.



What we need to learn:

- If there are schools in the MCS system with high percentages of black students and low percentages of low-income students, how do they perform academically?
- What are the performance trends of schools that have optional (school-within-a-school) programs?
- Is it possible to isolate academic data for the optional and non-optional students?
- Where are non-MCS students being educated?
- How many are attending private schools or county schools?
- How many are being home schooled?
- Is it possible to obtain graduation statistics by race and ethnicity for black , white, and Hispanic students?



Family and Home
Environment

Home Environment

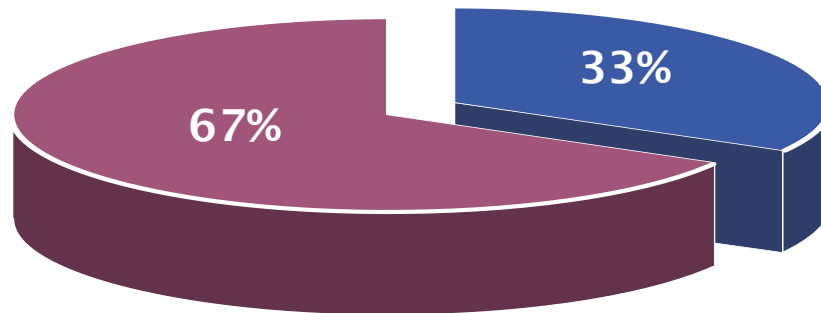
Family and Home Environment



why it's important: American children are born into, and grow up in, a variety of different types of families. Research consistently shows that the well-being of children is associated with a wide variety of factors, including family income and family structure. Family structure usually is defined as the number, type, and marital status of parents or guardians

Two-thirds of households in Memphis do not include children.

Memphis Households by Presence of Children, 2004



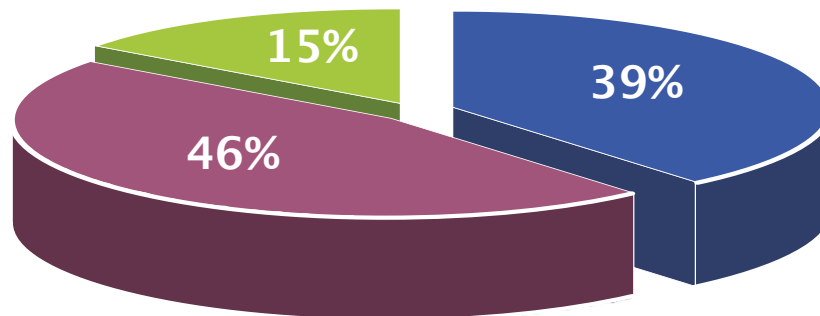
■ Households with Children Under 18
■ Households without Children

- Of the more than 100 million households in the United States, a third (34 million) have children at home. Similarly, 33 percent of households in Memphis include children.
- While parents with young children made up a majority of U.S. voters in 1956 (55 percent), today they constitute a shrinking minority.

Critical Issue: Although there is widespread concern about the condition of children, it becomes increasingly difficult to build a coherent and effective political voice for children and families as the number of households with children declines.

Children in Memphis have less than a 50-50 chance of being born into a married-couple family.

Children in Memphis by Living Arrangement, 2000



- Children living with their married parents
- Children living with their single parent
- Other Relatives

- In Memphis, 39 percent of children live with married parents.
- In contrast, across the rest of Tennessee 75 percent of children live with two parents.
- Across the U.S. 68 percent of children live in a married-couple family.
- Forty-six percent of children in Memphis live with single parents.
- Younger children in Memphis are more likely to live in single, female-headed families than are older children.
- In Memphis 64 percent of children were born to unmarried mothers. This is much higher than the national average.
- One in four children was born to a mother who had less than 12 years of education.

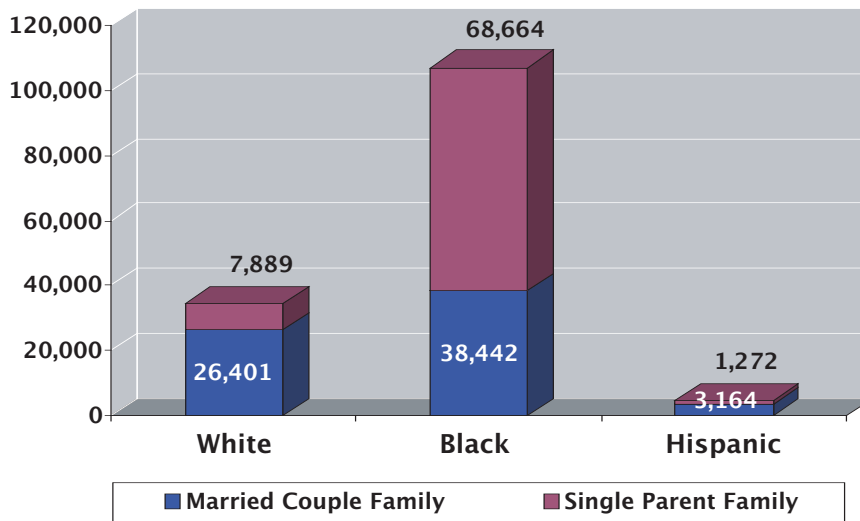
- Fifteen percent of children in Memphis live with grandparents or other relatives.
- More than 20,288 Grandparents in Memphis live with their grandchildren.
- Roughly half of these grandparents (9,660) share responsibility for the care of their grandchildren.
- One in five grandparents living with grandchildren has cared for those children for more than five years.

Critical Issue: Social scientists have found that child and family well-being is the product of a complex mix of factors that includes:

- The age at which mothers first give birth
- The educational attainment of mothers and fathers
- Levels of child support received
- Education levels of parents.

White and Hispanic children are more likely than black children to live with married parents.

Children in Families by Race and Living Arrangement, 2000

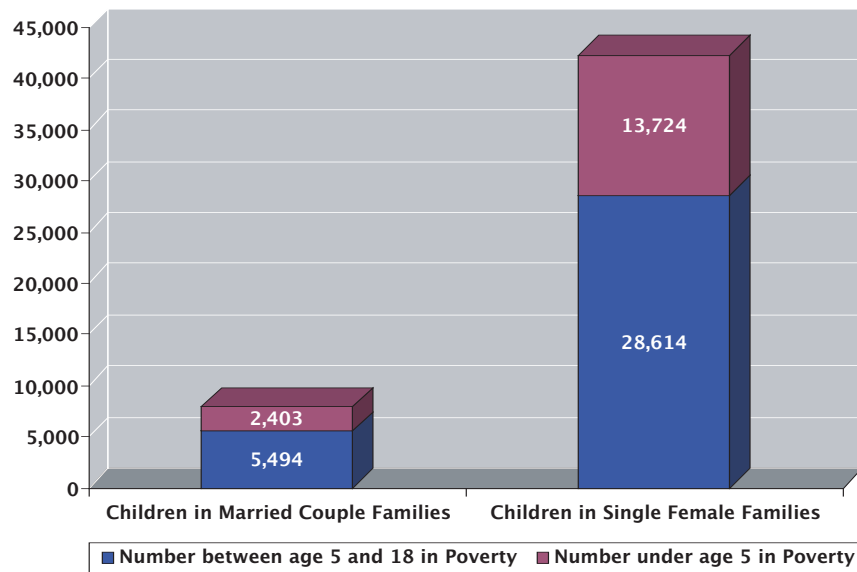


- Seventy-five percent of white and Hispanic children in Memphis live with married parents.
- White children are four times more likely to grow up in a married-couple family than a single-female family.
- Twenty-six percent of white babies in Shelby County are born to single mothers. This is comparable to Tennessee's rate (29%).
- Two in three black children live with single mothers.
- Black children are twice as likely to live with a single mother as with married parents.
- The percentage of live births to single, black mothers in Shelby County (77%) is marginally higher than that of Tennessee (74%).

Critical Issue: While rates of marriage vary with ethnicity, it would be incomplete to blame poor child and family outcomes on high rates of single parenthood alone. While Hispanic children are just as likely to grow up with married parents, Hispanic families are two and a half times as likely (26%) to confront poverty than their white counterparts (10%).

Children raised by single mothers are more likely to face poverty and economic hardship.

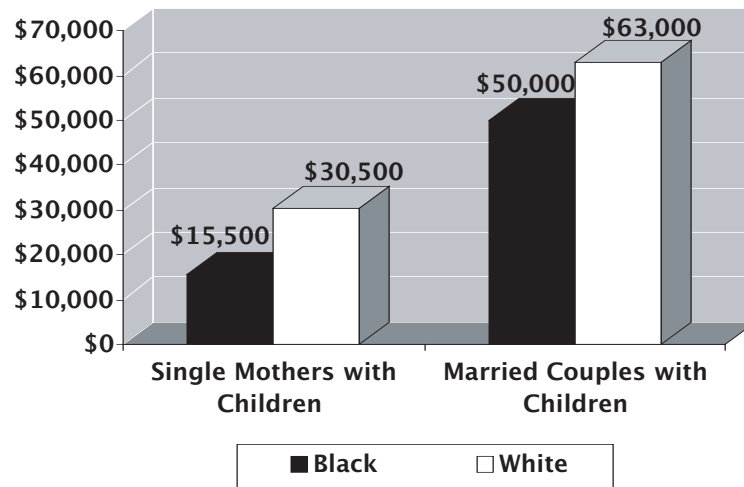
Children Under Age 5 and Ages 5 - 18 in Poverty in Memphis by Living Arrangement, 2000



- Ten percent of children living with married parents live in poverty.
- Forty-eight percent of children raised by single mothers live in poverty.
- The numbers are more serious for young children living with single mothers, where nearly six in 10 (57.6%) children live in poverty.

Even after adjusting for family type, significant differences exist still in the incomes of black and white families.

Differences in Family Income in Memphis by Race and Living Arrangements, 2000

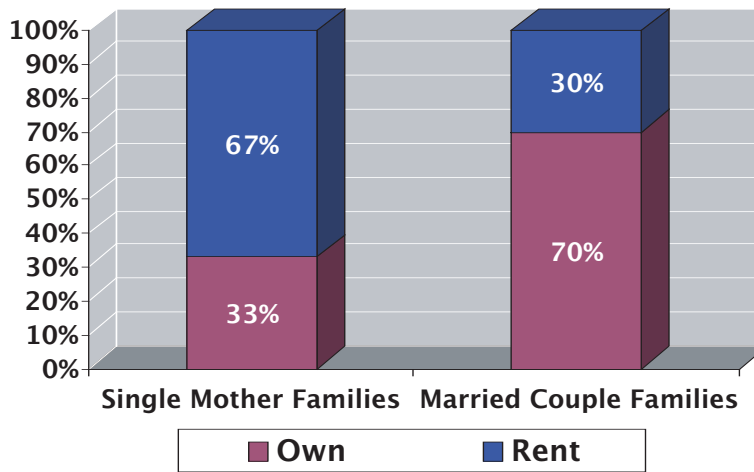


- Families headed by single mothers have significantly lower incomes than do two-parent families.
- The median household income in Memphis is \$32,285. This is almost 25 percent lower than the national median, \$41,994.
- In Memphis, the median married-couple annual income is \$52,666.
- Single-mother families in Memphis have a median annual income of \$18,029.
- So married-couple families in Memphis earn three times as much as do families headed by single mothers.
- In Memphis white, single mothers earn double the amount of black single mothers.
- White married couples earn 20 percent more than do black married couples.

Critical Issue: As these findings suggest, low income families and single parent families are not all the same. The data reflects the reality that there are many different paths to poverty and there are subtle but important differences that characterize the well-being of children and families in Memphis.

Married-couple families with children are more than twice as likely as single-parent families to own their homes.

Home Ownership Rates of Families with Children in Memphis, 2000



- Median rent in the city of Memphis is \$530, compared with \$632 in the suburbs.
- Median value of a home in Memphis in 2000 was \$70,4330
- Approximately 85 percent of families in Memphis have lived in Shelby County for at least five years. Over half of families have lived in the same houses for five years.

Critical Issue: Homeownership is often considered a key ingredient in family stability. In Memphis rates of home ownership are low among both married-couple and single-parent families. Still, married couples are twice as likely to own their homes as are single parents.

Half of all children in Memphis live in neighborhoods of concentrated poverty.

Fifty-one percent of children in Memphis live in neighborhoods of concentrated poverty, whereas 19 percent of children across the State of Tennessee live in neighborhoods of concentrated poverty.

Things we need to learn:

The relationships between family type, education, income and race result in different opportunities for children in Memphis. Some children are clearly faring better than others. We need to develop an understanding of the reciprocal relations between income, race, educational attainment and family type.

Additional variables to be considered in future studies include age of mother at first birth, levels of involvement of grandparents, parental workforce participation, the degree to which single mothers can rely on child support and differences that exist between single-mother homes (i.e.: differences between families where the mother has never married and families led by a mother who is separated or divorced).

Family
Economic
Well-Being

Family Economics

Family Economic Well-Being



why it's important: Early child development, school readiness, delinquency and educational attainment all are associated with the advantages and disadvantages of a family's economic situation.¹ Economic disadvantages often mean less-educated parents, which affects parenting skills. Economic insecurity also introduces stress that affects parenting. Along with mother's education and age at first birth, family income is the best predictor of developmental outcomes for children and youth. Being near or below the poverty level is a special risk. Child poverty in Memphis and Shelby County poses serious challenges because it is pervasive, long standing and increasing. Shelby County families as a whole suffer from relatively low income and wealth. Nearly 45 percent of Shelby County children live in families with economic security issues.

Source: Census 2000 and American Community Survey 2002, 2003, and 2004, unless otherwise noted. Census 2000 data offers a baseline for family economic well-being in Memphis and Shelby County. Beginning in 2002 the American Community Survey provides annual updated estimates but typically provides less detail than data from the census. For example, breakdowns by race and ethnicity or special calculations such as children below the "low income" level are associated with census years only. Data below represent the most current data available from secondary sources. Data by ethnicity is not included in some graphics when populations are small or under-represented by census samples (e.g. Asians and Hispanics). Some data calculations are readily available only for Memphis or only for Shelby County. All data for Shelby County include the City of Memphis in the overall figures. Summary estimates and conclusions not accompanied by graphics represent author's interpretation of data available from census and other sources.

¹ See Lee and Burkam's *Inequality at the Starting Gate: Social Background Differences in Achievement as Children Begin School* for an overview.

Critical Issue: Many Memphis families have few financial assets and little wealth to protect against economic hardship.

- Census data commonly report annual income, but accumulated assets (measures of wealth) are just as important for gauging family security and estimating the likelihood of economic stress.
- Economic stress can affect pre-natal care and parenting even in families that are not poor economically, and also is associated with high rates of residential mobility, which mean children moving from school to school, which undermines achievement.
- One estimate of wealth is captured by IRS data on households reporting income from interest, dividends and rent, all of which imply assets that can cushion against economic insecurity.
- The map below shows that only about half of Shelby County census tracts fall within the normal range of asset income when compared to households nationally.
- Many of these low-asset census tracts are in predominantly black neighborhoods with middle-class incomes and a high proportion of family households.

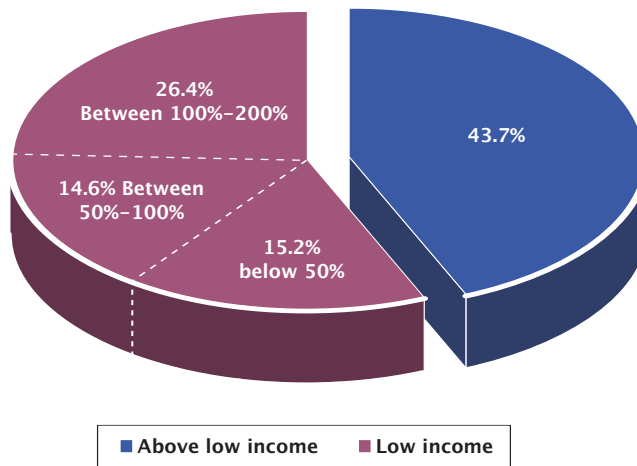
Key Concept: Understanding the poverty rate and other measures of low income

Poverty-level income is determined by an arguably outdated formula first implemented in 1959. It is calculated based on family size. Eligibility for some income support programs such as Temporary Assistance to Needy Family (Families First in Tennessee) requires income well below the poverty level to qualify. Eligibility for other programs or other reporting methods is determined by other standards such as extreme poverty, near poverty and low income. The typical family size for a poor family in Memphis is three.

- The 2005 (most recent) poverty level for a family of three is \$15,735.
- “Extreme poverty” or “very poor” means 50 percent or less of the poverty level income, or about \$7,868 for a family of three.
- “Near poverty” means income between the poverty level and up to 125 percent of the poverty level income, or \$19,669.
- “Low income” eligibility for programs such as Section 8 subsidized housing vouchers means income up to 80 percent of the “area median income” (AMI) for families in the metropolitan area. The current AMI for Shelby County is \$41,250 for a family of three.
- Some government reporting methods and child advocacy programs use a standard of up to 200 percent of poverty level income to mean “low income.” In Memphis, 200 percent of the poverty level for a family of three is \$31,470, which is almost 25 percent less than the AMI standard noted above. The 200 percent method, which is included in data below, therefore is a conservative estimate of economic disadvantage.

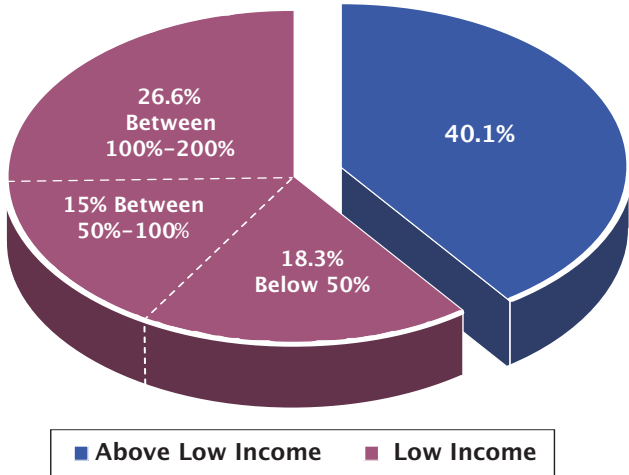
Children At-Risk for Poverty, 2000

Source: U.S. Census, 2000



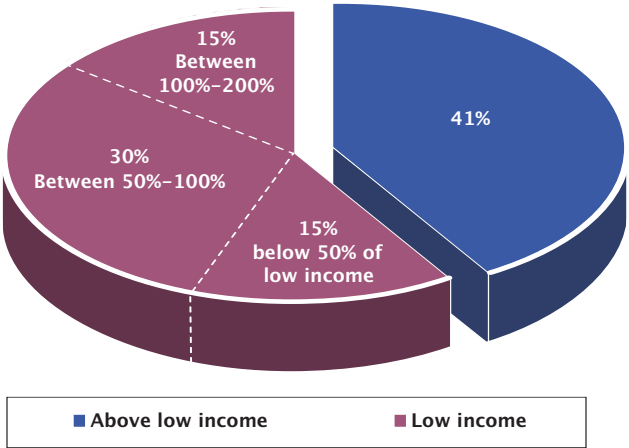
Children in Memphis Under 6 At-Risk for Poverty, 2000

Source: U.S. Census, 2000



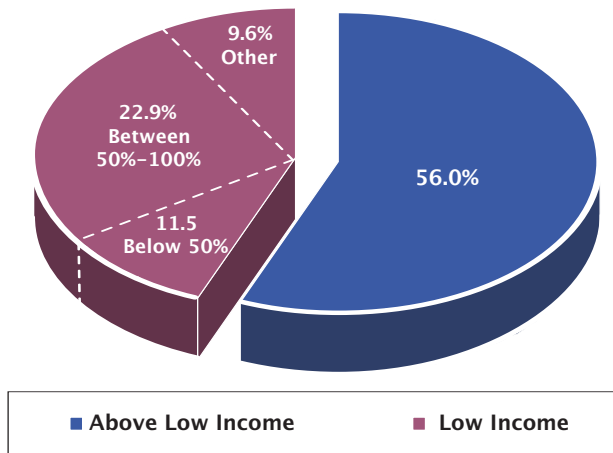
Living Standards of Children in Memphis, 2000

Source: U.S. Census, 2000



Children and Poverty Status in Shelby County for 2000

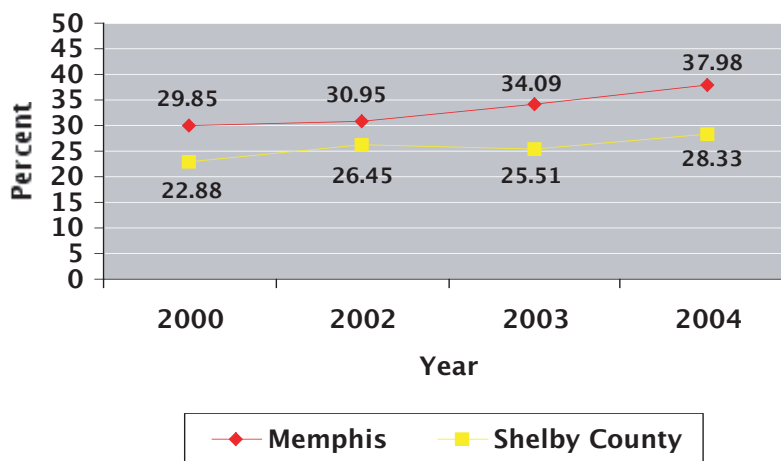
Source: U.S. Census, 2000



Key Finding: Over half of children in Memphis are in low income or poverty. Even in Shelby County as a whole, 44 percent of children are in economically vulnerable families.

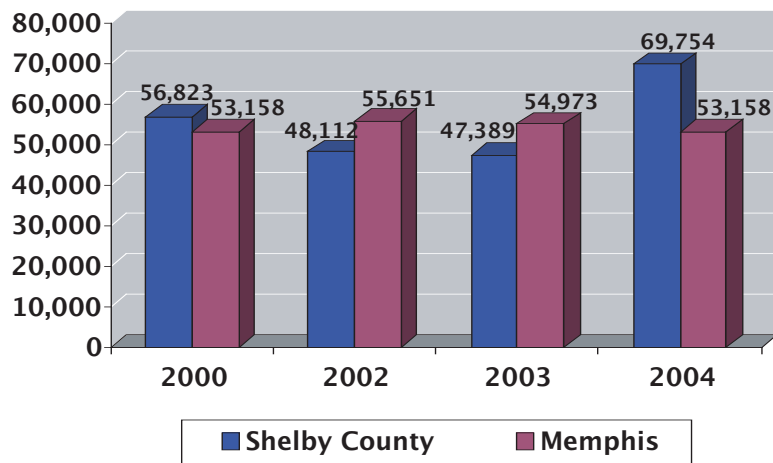
Percentage of Children Below Poverty in Memphis And Shelby County, 2000 - 2004

Source: U.S. Census, 2000



Number of Children in Poverty in Memphis and Shelby County, 2000-2004

Source: U.S. Census, 2000



Key Finding: Poverty among children in Memphis increased by 23 percent between 2000 and 2004. The increase in Shelby County was a comparable 22 percent.

- Shelby County patterns are heavily influenced by what happens in Memphis, but the trend data show that children outside the City of Memphis in suburban Shelby County suffered setbacks as well.
- This suggests that low-income suburban families were not insulated from economic trends during this period, and/or that some poor and economically marginal families are relocating to suburban Shelby County.
- Data analysis from a variety of sources suggests that both things are occurring.

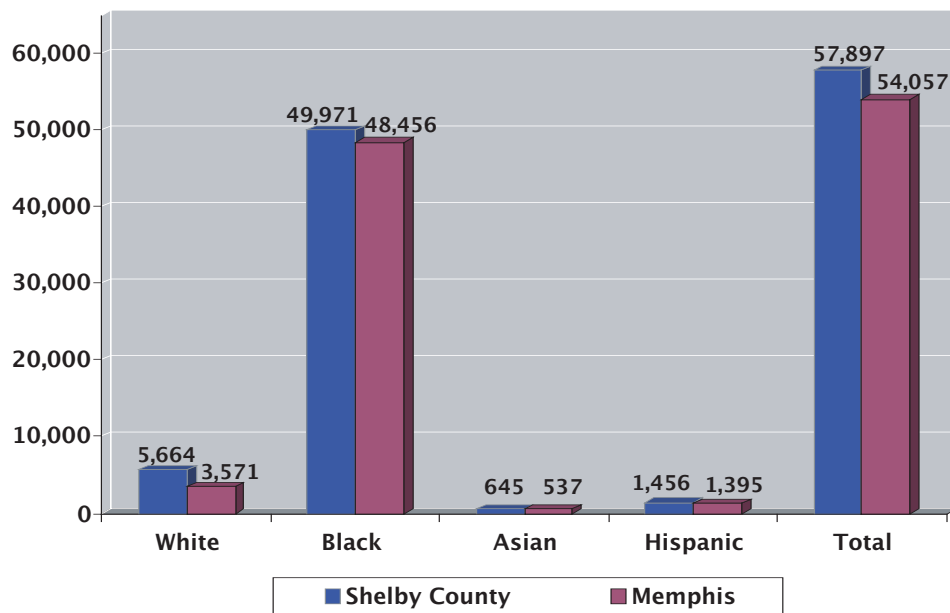
Critical Issue: Links between poverty, race and ethnicity remain strong in Memphis and Shelby County.

- Child poverty continues to be associated with race and ethnicity in Memphis and Shelby County.
- Even when education levels are constant, white men and women in Memphis earn more than black and Hispanic workers, who are concentrated among less profitable industries and companies or in occupations that pay less than jobs requiring similar education.
- We know more about the correlates of poverty among black children than among other ethnic groups, especially immigrant groups.

- Mother’s education and age of mother at first birth are important predictors of child poverty, which for Memphis and Shelby County are especially critical for black children.
- Both education and age of mother are associated with non-marital births and single-parent households, which are more of an indicator than a direct cause of poverty.
- National research demonstrates that when unmarried girls and young women with low educational attainment have children at an early age, the fathers of their children are unlikely to be significant contributors to family income even if parents were married. This is less true of older and better-educated, single mothers where father’s and mother’s income together can make a difference in economic security. At the same time, however, being older and having more education mitigate the effects of low income on parenting even among single mothers .

Children in Poverty in Memphis and Shelby County by Race/Ethnicity, 2000

Source: U.S. Census, 2000



Key Finding: Black children are more than three times as likely, and Hispanic children more than two times as likely, to be in poverty than non-Hispanic white children. Asian children, many of whom are likely to be recent immigrants, also fare poorly, although little is known about poverty and the prospects for upward mobility for these Asian families and other immigrant groups that are represented in small numbers in Memphis and Shelby County.

Key Concept: Poverty is a risk for children and youth, affecting a host of measurable outcomes. Related outcomes range from health, child abuse and neglect, school readiness, and delinquency to educational attainment, the likelihood of becoming pregnant as a teen, the likelihood of marriage, and future employment and income. Research generally concludes that poverty and poor child development outcomes are associated with single parenting, teen mothers, and low parental education, but poverty introduces stress on child development that cannot be explained by single parenting, young mothers, or mother's education alone.

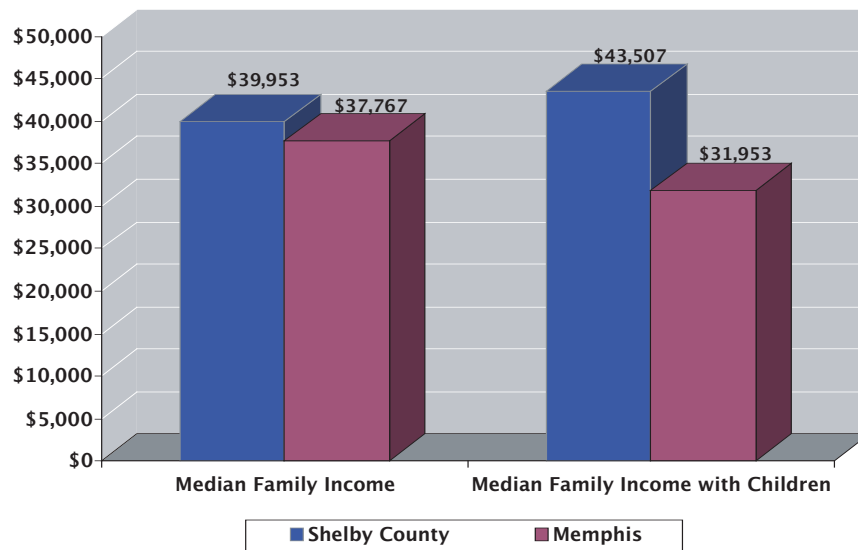
- Sometimes poverty causes poor outcomes because it means lack of resources. Living in old, dilapidated housing is associated with lead poisoning from peeling paint. Lead poisoning impairs brain development, and damage cannot be reversed.
- Poverty is associated with housing insecurity. Poor families experience high rates of residential mobility compared to moderate and higher income families, and are more likely to be evicted because of non-payment. Moving from neighborhood to neighborhood means children changing schools, which is associated with reduced achievement.
- Poverty is also associated with unreliable transportation options, utility cut-offs, even food insecurity. All of these challenges increase parental stress, which, along with parental education, is associated with parenting skills and child neglect and abuse.
- Sometimes poverty is associated with poor outcomes because of the relationship between poverty and parent education. Early child development is affected by verbal stimulation, which varies considerably by parent education. Mother's education is one of the strongest predictors of school readiness and other outcomes.
- Most of the relationship between poverty and outcomes for children and youth is more complex than simple cause and effect, and can be mediated by interventions such as pre-and-post-natal home visitation, quality pre-kindergarten programs and other investments that yield demonstrable results.
- Poverty also is associated with labeling and self-fulfilling prophecies, where expectations are set low, children are written off, or children begin to internalize low regard communicated by caretakers, teachers, juvenile justice or others in positions of authority, all of whom need a practical understanding of how to work best with children from diverse backgrounds.
- Poverty accounts for most of the disparity in outcomes for children from diverse racial and ethnic backgrounds. We need to learn more about ways in which race and ethnicity act independently from socio-economic background on particular indicators.

Critical Issue: Families with children are most vulnerable economically.

- Both young, childless couples and empty-nesters are economically advantaged in Shelby County compared to families with children.
- Census 2000 reports over 24,000 families with children below the poverty level in Shelby County, or nearly one of five families. An estimated half of families are economically vulnerable with incomes below the low-income standard.
- Middle class, mid-career families with children are under-represented in Memphis. These families have moved disproportionately into suburban Shelby County or beyond.

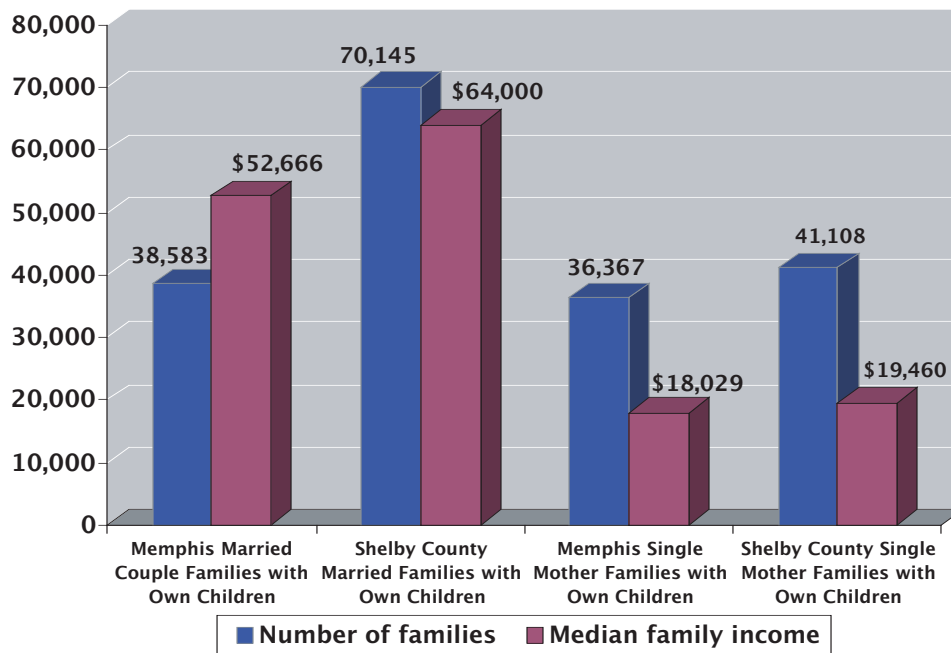
Median Family Incomes in Memphis and Shelby County, 2000

Source: U.S. Census, 2000



Median Family Incomes in Memphis and Shelby County Families with Children by Living Arrangement, 2000

Source: U.S. Census, 2000



Key Concept: Economic hardship and income support systems

- Until the 1970s the poorest group of Americans was the aged. During the 1970s Social Security payments were indexed to the cost of living. Since that policy change, older Americans are less likely to live in poverty than either non-elderly adults or children. Public assistance benefits for children (Families First in Tennessee), unlike Social Security, have not been indexed, or are they treated as entitlements.
- Non-entitlement programs, including cash, food stamps, health care, housing and child care assistance, do not have automatic enrollment provisions (typical of Social Security and Medicare), so that participation typically is well below numbers estimated to be eligible.
- Non-entitlement status means that benefits can be cut, eliminated, or discontinued when funding runs out in a fiscal year.
- Income support programs for families and children are not as generous as Social Security entitlements. In Shelby County cash and in-kind income from Families First and food stamps for a family of three amount to \$529 monthly, or \$6,348 per year. Less than half of this amount is in cash.

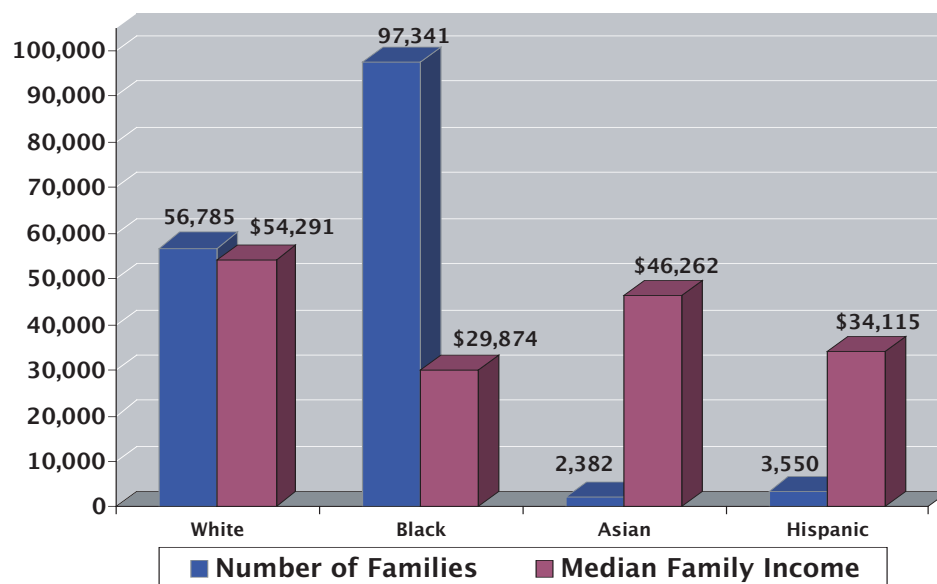
- With an estimated 10,000 subsidized housing units in Shelby County and an estimated 50,000 families with children eligible for assistance, no more than 20 percent of families have access. Even if we consider only officially poor families with children (24,000 families in Shelby County), less than half would have access.
- The reduction in the number of public housing units in Memphis has not been accompanied by a comparable increase in other forms of subsidy. In Memphis, 55 percent of low income households have a “housing cost burden” where they are forced to spend more than 30 percent of their income on housing.
- Half of the 10,000 subsidized units are based on contracts with developers over half of which can opt out in the next three years.
- Among all U.S. cities of at least 500,000 population (29 cities), Memphis ranks 12th highest in housing cost burden, ahead of cities with higher costs of living overall such as San Francisco, Washington DC, and Philadelphia.
- Twenty percent of Memphis households do not own cars. Transportation requirements create stress for the working poor, most of whom have children.
- Turnover in rental units in the city’s highest poverty tracts averages about 50 percent every year.
- Among lower income families attempting home ownership, foreclosure rates are high. In one southeast Memphis zip code (38115) with a high percentage of first-time, single-parent buyers 36 percent of single-family homes have been threatened with foreclosure between 2000 and 2005.

Critical Issue: The working poor are well-represented among poor families.

- Family income level is associated with race and ethnicity in both Memphis and Shelby County.
- Differences in education and occupational status are the major factors, but an additional cause is the lower labor force participation among single parents.
- Nevertheless, working force participation is high for both white and black single parents.
- Moderate level earnings for white families tend to be transitional, trending upward over time, while moderate level earnings for black families are more vulnerable to disruptions of unemployment and barriers to labor force participation.
- Income support programs in Memphis and Shelby County are more likely to target unemployed mothers receiving public assistance for job searching rather than grapple with issues such as child care for working-poor mothers or other barriers to workforce development and upward mobility.

Median Family Income by Race and Ethnicity in Memphis, 2000

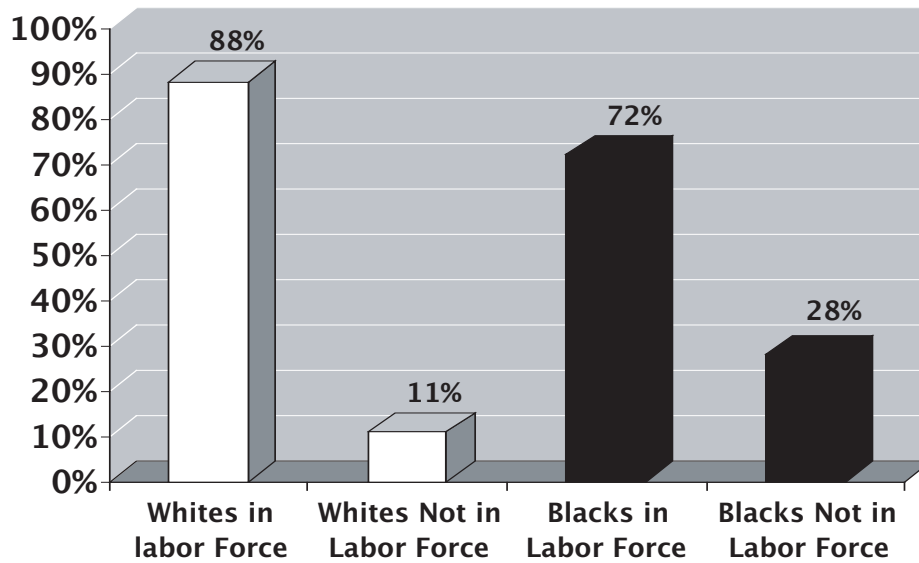
Source: U.S. Census, 2000



Key Finding: Differences in median income for comparing whites and racial and ethnic minority groups in Memphis result from a white income distribution that skews toward upper middle and high income, while minorities skew toward low income. The size of the moderate income group in between is relatively proportional for these two groups.

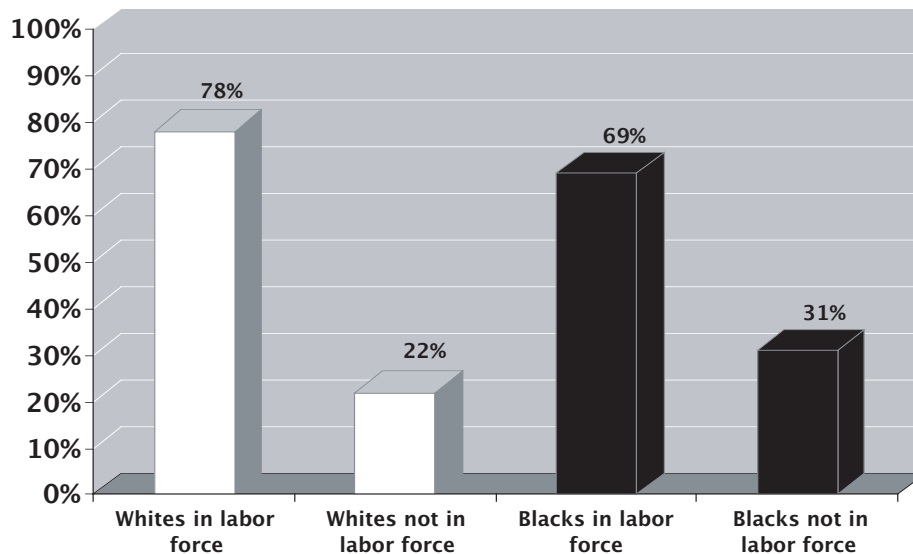
Single Parents of Children by Race, 2000

Source: U.S. Census, 2000



Shelby County Workforce Participation: Single Parents of Children Under Age 6 by Race, 2004

Source: U.S. Census, 2000



Key Finding: Differences in labor force participation are associated both with a higher incidence of health issues among black mothers and greater barriers, such as the absence of subsidized child care for working-poor mothers.

Critical Issue: Economic Self-Sufficiency

The poverty level is arguably an inadequate measure of economic well-being. It is based on a Department of Agriculture food budget that was designed for “emergency use when food supplies are temporarily low.” Food dollars were then multiplied by three because families in the 1950s typically spent one-third of their income on food and two thirds on other expenditures. This food-budget-driven formula does not adequately take into account today’s spending patterns. Inflation in utilities since the 1950s, for example, is not factored into today’s calculation. The “economic self-sufficiency” budget corrects for problems with the poverty level.

- Economists estimate the income necessary for basic economic self-sufficiency (sometimes called a living wage when related to labor force issues) by calculating the actual costs of basic expenditures for different size families in different parts of the country.
- When the poverty level was initially set in 1963 by Mollie Orshansky, it reflected the existing spending trends of American families who spent roughly one-third of their income on food, one-third on housing and one-third on all other incidentals. Moreover, it was set to reflect the cost of a nutritionally adequate diet. Since 1963 it has been adjusted to reflect inflation, but not the changing spending trends of American families who now spend a little more than a tenth of their income on food and the rest on housing and incidentals.
- Additionally, establishing the Federal poverty level is a highly politicized issue. The Office of the President, not the Bureau of Economic Analysis or the Bureau of Labor Statistics, has jurisdiction over measurement of national poverty standards and levels. Amending the measurement of poverty in the U.S. is a political landmine, especially if the adjusted trends reflect that more Americans actually live in poverty.

Rebecca M. Blank, dean of the Gerald R. Ford School of Public Policy at the University of Michigan, suggests that making three changes in the way we measure poverty would help to reflect more accurately current poverty trends :

1. Refine what is meant by income. Subtract taxes and add near-cash income like food stamps.
 2. Update thresholds to include not only food expenditures, but also housing, clothing and out-of-pocket medical costs.
 3. Adjust for differences in family size.
- The self-sufficiency budget for a single mother and two children, the typical low-income family in Memphis, is \$31,000 (based on 2002 prices).

- Basic self-sufficiency typically requires about 200 percent of the poverty level income for a given family size. A married couple with two children requires \$35,000 annual income.
- A self-sufficiency budget is based on the Department of Agriculture's low-cost food plan (all prepared at home), and the actual cost of a detailed market basket of other goods and services, including
 - ✓ Basic rental housing and utilities
 - ✓ Basic clothing and personal care products
 - ✓ Five-year-old car
 - ✓ Adequate child care
 - ✓ Basic premiums/co-pay
 - ✓ Payment of local, state, and Federal taxes
- What is not included?
 - ✓ Savings
 - ✓ Insurance/expenditures for eye and dental care
 - ✓ Cable TV
 - ✓ Long distance calling plans
 - ✓ A realistic opportunity to build home equity
 - ✓ Vacations
- A single parent needs to earn \$16 per hour and work full-time all year to meet the self-sufficiency standard. Two working parents would have to earn \$8.85 each per hour and work full-time all year. Even \$8.85 per hour is 67 percent higher than minimum wage, while low-wage work is increasingly part time and temporary.
- The Memphis economy is dominated by service jobs at \$7 - \$10 per hour.
- Half of women who work full-time earn less than \$25,000 per year.

Summary Findings:

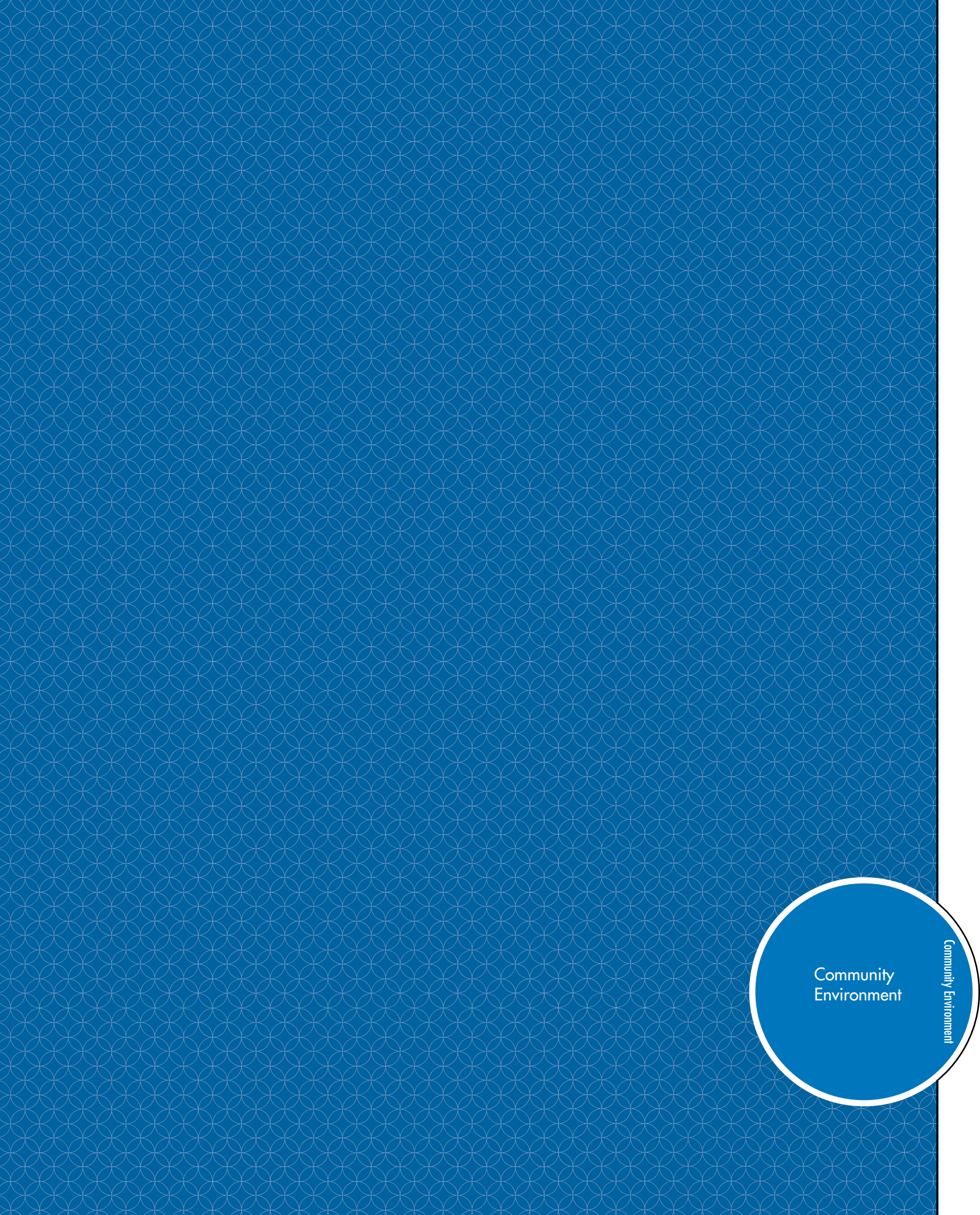
- In 2000 nearly 30 percent of Memphis children lived in poverty. This was nearly double the national children's poverty rate of 16.1 percent, and was also substantially higher than the poverty rate for children in Tennessee (18%). At the same time, poverty among children in Shelby County as a whole was nearly 23 percent.
- 2000 figures represent a decline from 1990, when child poverty began a downward trend from 35 percent in Memphis and 26 percent in Shelby County.
- Even with downward trends in the 1990s, more than 10 percent of children in Memphis were in families living below 50 percent of the Federal poverty line in 2000. These

families are considered “very poor” and are most likely to suffer from multiple economic and social problems.

- For children in mother-only families, almost half are living in poverty.
- In Memphis poverty rates are highest among very young children. One-third of children in Memphis under age 5 live in poverty. Young parents with young children are the most vulnerable to poverty.
- Reversing the downward trend from the 1990s, the percent of children in poverty in both Memphis and Shelby County increased by about 25 percent from 2000 to 2004.
- In Memphis poverty among children increased from nearly 30 percent to nearly 38 percent from 2000 to 2004. For Shelby County the increase was from nearly 23 percent to over 28 percent.
- Shelby County as a whole has a lower child poverty rate than the City of Memphis, but the downward trend in child economic well-being is not restricted to the city.
- Married-couple families with children in Memphis have significantly higher incomes than single-parent families.
- In Memphis married-couple families earn three times as much as families headed by single mothers. Marriage is associated with better education, and also contributes to family income because two parents are available for work.
- Nearly a third of families in Memphis are headed by a single mother. These families earn substantially less than those headed by married couples or by single fathers. Single mothers are better educated than single fathers, suggesting gender-based segregation in labor markets that especially disadvantage children in mother-only families.
- Family income in Memphis also varies by race, with white families earning an average of 40 percent more than black families.
- Marriage, graduation from high school, and delayed child-bearing all are associated with higher income. Marriage by itself, however, does little to raise the income level of black families when both mothers and fathers have low educational attainment. At lower levels of education, the combined earning of black couples is lower than that of white married couples even when education is similar.
- Economists estimate that “economic self-sufficiency” requires an income equal to 200 percent of the poverty level. In Memphis nearly six in 10 children lived in families below 200 percent of the poverty level in 2000.
- Adjusting for inflation, since 1970 median family income in Memphis has actually declined from over \$39,000 to less than \$38,000. Some of the decline is due to demographic changes, but some of the decline also represents income stagnation and deterioration in relative wages for typical jobs in Memphis’ economic base.

Things we need to learn:

- What will be the racial and ethnic makeup of Memphis and Shelby County in 20 years, especially given the increasing number of Hispanics in the area?
- How will shifting demographic patterns in the urban and suburban areas affect economic well-being for children in Memphis and Shelby County?
- How well are our children in poverty being taken care of? What is our promise to them in terms of a safety net, and where are gaps in our care for children?
- What are our strategies for improving the effectiveness of policies meant to give a “hand up” not a “hand out” to children and families in need?
- What can be done to rectify pernicious and lingering effects of racism and discrimination in employment and opportunity in Memphis and Shelby County?
- What will the Memphis and Shelby County economy look like in 20 years?



Community
Environment

Community Environment

Community Environment

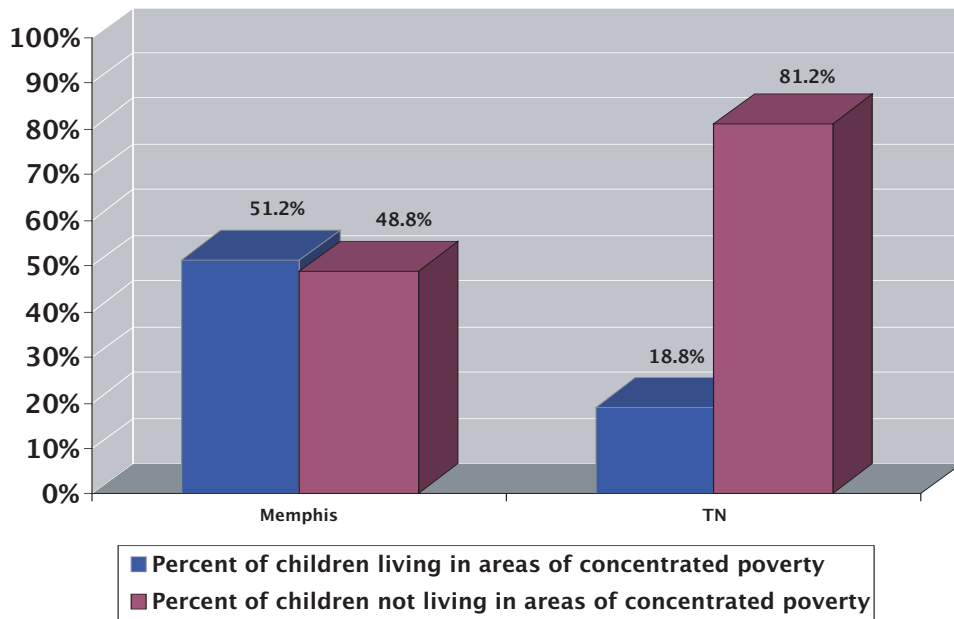


why it's important: Social support systems and peer influences can mitigate or aggravate risk factors such as poverty and undermine or reinforce the effects of parenting on child development. Many of these influences are brought to bear at the neighborhood level, where children experience “neighborhood effects” on their health, education and general welfare. New statistical methodologies enable us to identify “high vulnerability” neighborhoods where interventions might be introduced. We also can identify poor neighborhoods where child outcomes are better than expected, enabling us to understand better how neighborhoods can counter family-level risks.

Twenty-two percent of neighborhood-level census tracts in Shelby County are at high risk for early childhood development. Within the city of Memphis 40 percent are at high risk.

Sources: Basic demographic data is from Census 2000. Special tabulations on neighborhood vulnerability are from the Child and Family Research Center and from the Mid-South Social Survey. Specific sources are noted below, and annotations to these sources are included in a references section at the end of the data book.

Percentage of Children Living in Poverty Areas in Memphis vs. Tennessee, 2000



Key Concept: Neighborhood Social Capital

The larger community, including peer influences and neighborhood support systems, has as much effect on child outcomes as the immediate family environment.¹ Poverty is a risk factor not only because poor families may lack personal resources for effective parenting, but because challenges from a high poverty neighborhood environment make parenting more difficult and resources that support parents may be less accessible.

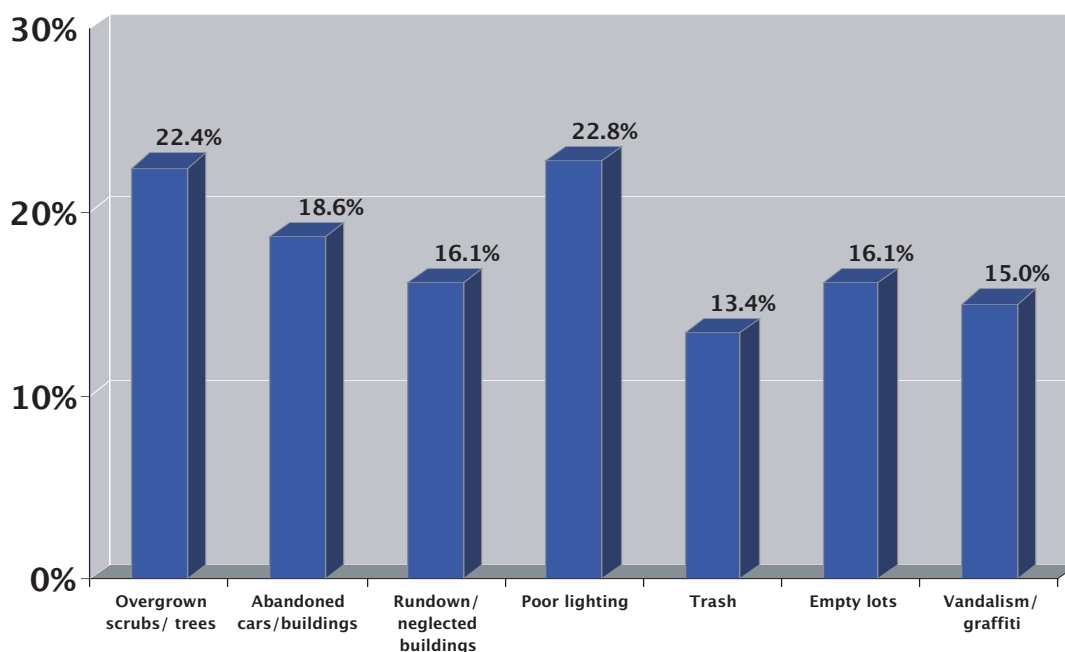
- When neighborhoods provide a supportive environment that reinforces effective parenting and offers complementary opportunities for positive child development, and/or offers surrogate supervision, nurturance, and positive stimulation for children, such neighborhoods have high “social capital.”
- Neighborhoods with concentrated poverty and physical blight tend to have low social capital, but those with high evidence of social capital can counter risks to health child development that are generally associated with poverty.
- Poverty and blight mean poor living conditions and high rates of residential mobility. Neighbors are less likely to know, and look out for, one another than in more stable neighborhoods.

¹ Felton Earls and the Project on Human Development in Chicago Neighborhoods, along with The Urban Institute’s “Moving to Opportunity” studies of HOPE VI neighborhood redevelopment strategies continue to inform our understanding of community and neighborhood effects and the role of social capital in neighborhoods and child outcomes.

- Over half of Memphis children live in neighborhoods of concentrated poverty, while only 18 percent for Shelby County as a whole live in such neighborhoods.
- Half of the children in high poverty neighborhoods change schools at least once a year. Changing schools is associated with academic under-performance.
- Poor families needing the most parental support, such as high quality child care, are the least likely to have access within their immediate Memphis neighborhood.
- Informal neighborhood support systems in poor neighborhoods may be weak, and peer culture may include self-destructive or anti-social behaviors. Concentrated poverty means low labor force participation, especially among young adult males.
- Low labor force participation is associated with absent role models, weak connections to outside resources and anti-social behavior.
- When neighborhood support systems and social capital are strengthened, families and children are more likely to overcome challenges associated with poverty.
- Physical and social disorder can be associated with low social capital.
- Social surveys measure resident perceptions of social capital and threats to social capital using a standard set of questions such as those illustrated below.

Percent Residents Reporting Physical Disorder in Their Neighborhoods

Source: AEC Kids Count



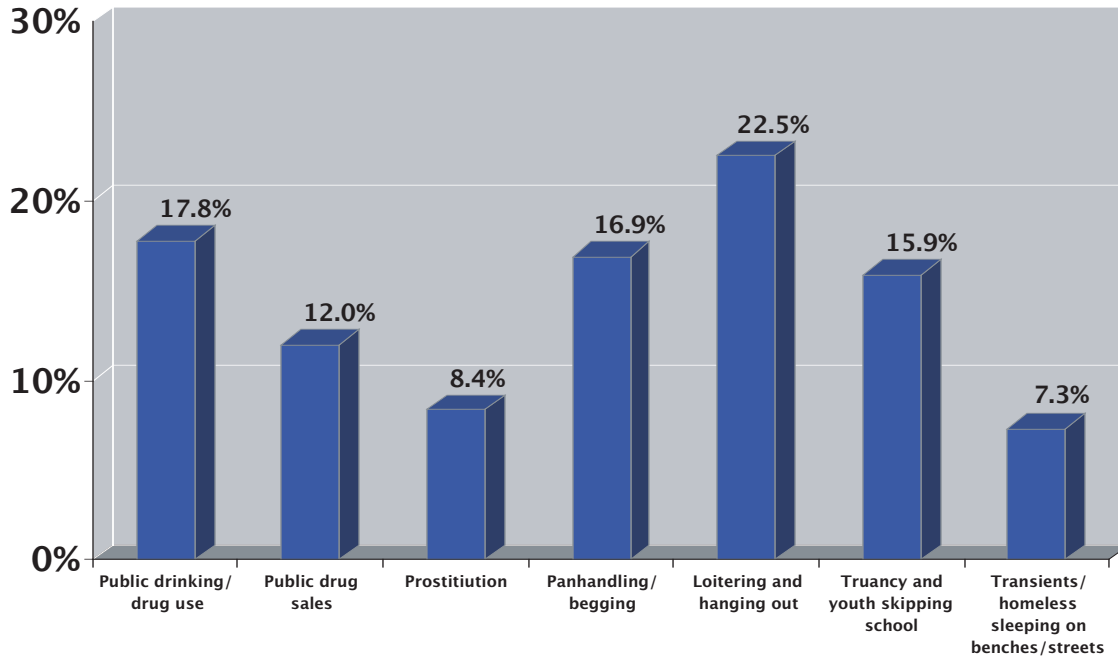
Key Finding 1: One out of every five-to-six households in Shelby County is in a neighborhood where signs of neglect signal a lack of care and concern.²

- Data from the American Housing Survey for Memphis and Shelby County reveal that blighted neighborhoods are concentrated in the City of Memphis.
- Asked to describe what they thought of in relation to the terms “healthy” and “unhealthy,” middle school children in a TUCI-sponsored “Health Information Project” in north Memphis focused on neighborhood blight. They described the redeveloped “Uptown” neighborhood as healthy, and the neighborhood surrounding Humes Middle School as unhealthy.
- National research from the Project on Human Development in Chicago Neighborhoods documented the relationship between blight and diminished social capital, which in turn appears to be related to parental stress.

² Data on resident perceptions of physical and social disorder and social capital is from the Mid-South Survey Social Survey: Memphis and Shelby County Criminal Victimization Survey, 2003-2005.

Percent Residents Reporting Social Disorder in Their Neighborhoods

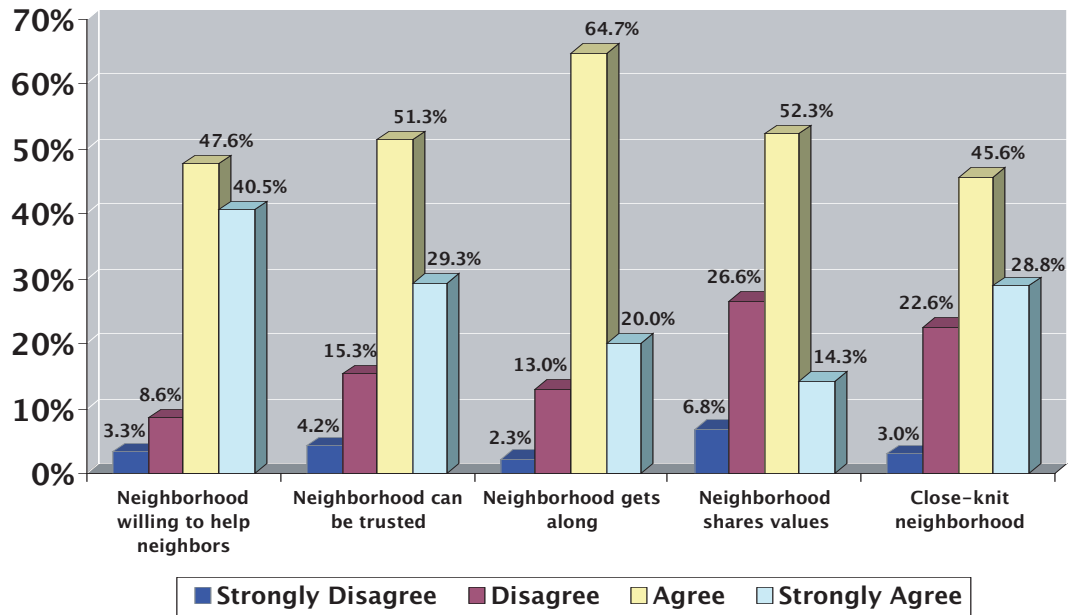
Source: AEC Kids Count



Key Finding 2: One out of every five-to-six households in Shelby County is in a neighborhood where social disorder poses special challenges for parents.

Resident Perceptions of Social Support from Neighbors, 2004

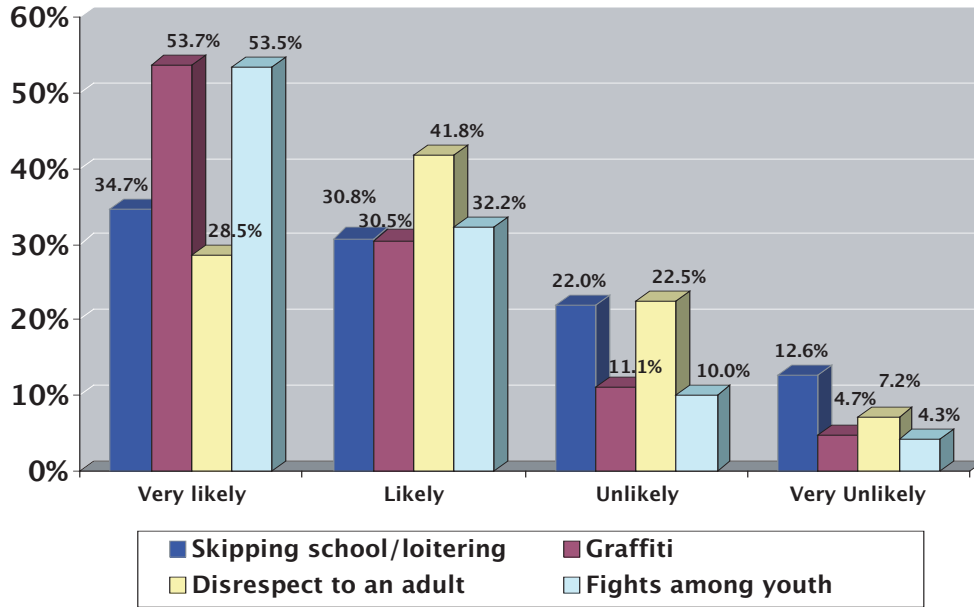
Source: AEC Kids Count



Key Finding 3: Social support varies widely among neighborhoods. Some parents and families perceive themselves in resource-rich environments while others experience isolation.

Resident Perceptions of Neighbors' Willingness to Intervene, 2004

Source: AEC Kids Count



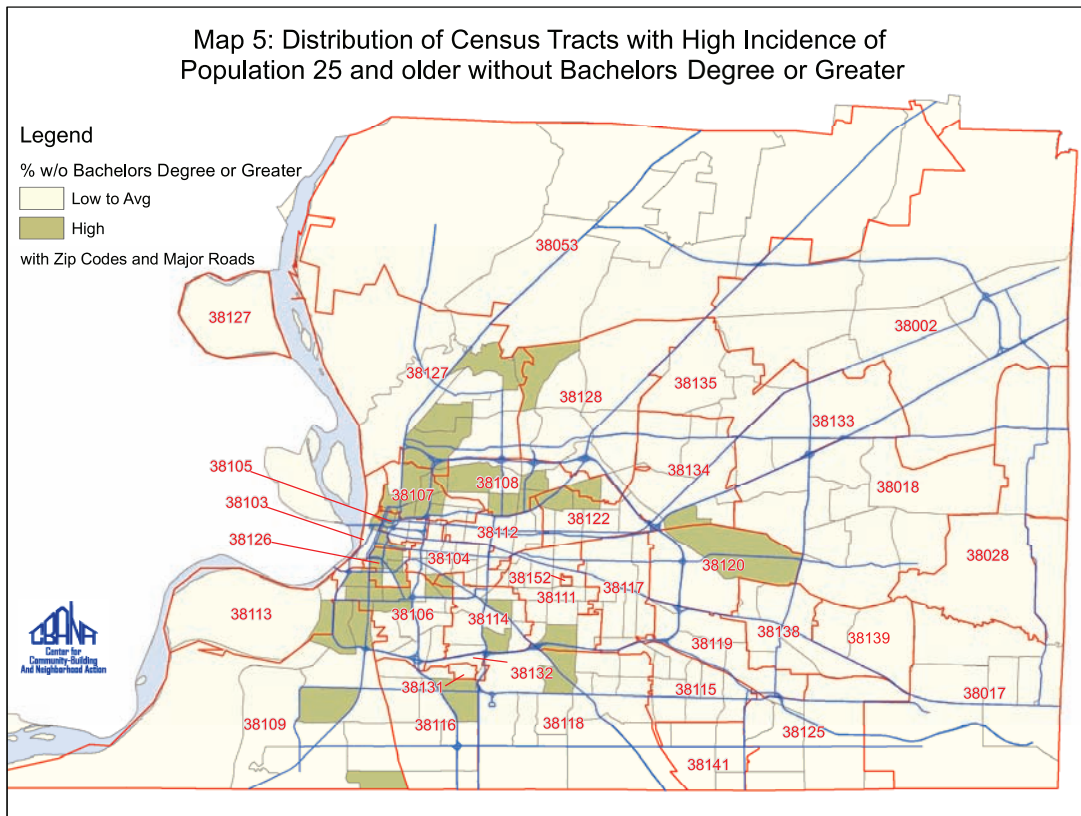
Key Finding 4: Little more than half of adult respondents envision their neighborhoods as environments where clear standards of behavior are likely to be enforced by neighbors.

Key Concept: Measuring High Risk Neighborhood Environments

- The Child and Family Research Center, in conjunction with The Urban Institute's Annie E. Casey supported "Making Connections" initiative, developed an index of neighborhood-level risks for early child development. The index is based on statistical indicators that have been related to neighborhood effects on child outcomes in the literature on child development.³
- Each of the more than 68,000 U.S. census tracts was coded in comparison to nationwide norms on 10 indicators. Vulnerable census tracts vary significantly from the national statistical norms for indicator characteristics.⁴
- Indicators capture a high probability of healthy or unhealthy outcomes partly because of the family environment that is associated with different kinds of neighborhoods, but a growing body of research suggests independent effects from the neighborhood environment itself.
- High poverty neighborhoods are often identified as high risk neighborhoods. In Memphis, over half of children live in neighborhoods of concentrated poverty, where at least 20 percent of the population lives in households with income below the poverty threshold. This means that nearly 93,000 children are in neighborhoods with concentrated poverty.
- Poverty is associated with vulnerability index indicators but was not included as an individual indicator. This enables researchers to grasp better the more specific circumstances that undermine healthy child development.
- When we compare neighborhoods with concentrated poverty to neighborhoods high on the Child Vulnerability Index we narrow our focus by about 50 percent, to 48,000 children in the 48 high-risk census tracts mapped in the demographics introduction. The highest risk census tracts represent over one out of five census tracts in Memphis (22%). This smaller, but higher risk-group of neighborhoods may require different kinds of supportive interventions than other high poverty neighborhoods.

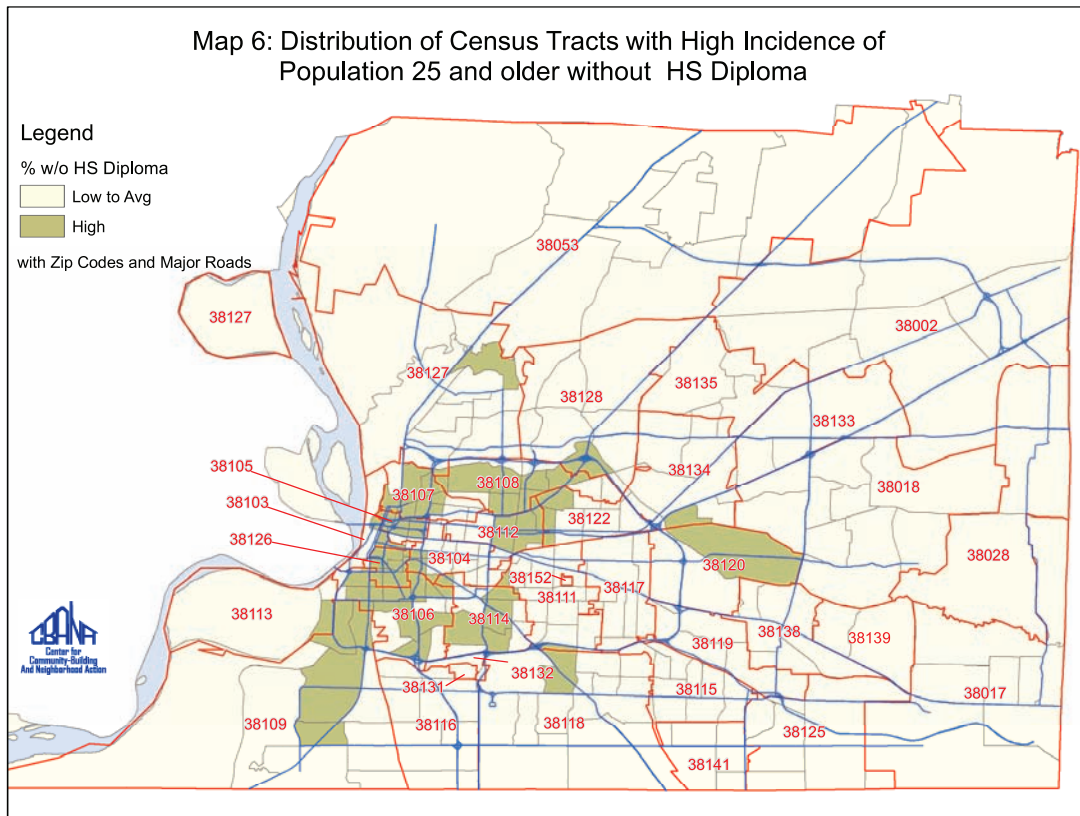
³ See, for example, *Managing to Make It: Urban Families in High Risk Neighborhoods*.

⁴ Descriptive percentages falling outside of one standard deviation above or below the mean percentage for all 68,000 US census tracts are considered outside the norm. Nationally, only 6.7% of census tracts are high vulnerability, compared to 40% of tracts in Memphis and 22% for Shelby County as a whole.



Key Finding: One in four Memphis census tracts (42 tracts) has very low representation of adults with a college degree. Census tracts outside the city in suburban and unincorporated Shelby County are all within the national norm.

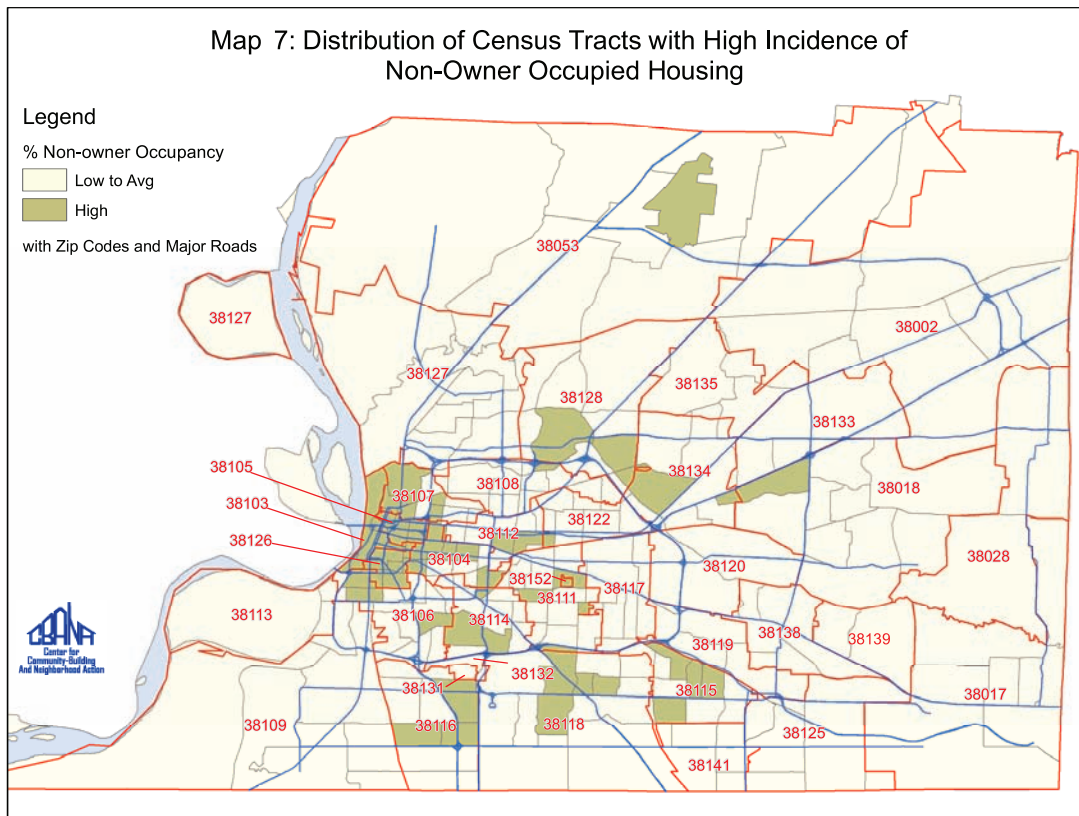
- The relative absence of better-educated adults means less exposure to highly verbal child-rearing environments, and for older children, fewer connections with potential role models and employment opportunities.
- The more widely scattered distribution of high-risk neighborhoods on this factor (compared to other risk factors mapped below), demonstrates that college-educated adults are relatively well-represented in many neighborhoods. These adults may be a resource that has not been tapped adequately to support healthy child outcomes.



Source: Child and Family Policy Center for the Urban Institute, National Neighborhood Indicators Partnership. From Census 2000.

Key Finding: One in three Memphis census tracts (55 tracts) has very high representation of adults without a high school diploma, more than the number and percentage of tracts low on college graduates. This suggests that some neighborhoods are especially heterogeneous, with college graduates and high school drop-outs living in close proximity.

- Census tracts outside the city in suburban and unincorporated Shelby County are all within the national norm for high school drop-outs.
- Statistical data on drop-out rates for Memphis City Schools and Shelby County schools present some methodological problems, but it is safe to say that drop-out rates overall are at least 30 percent in Memphis.



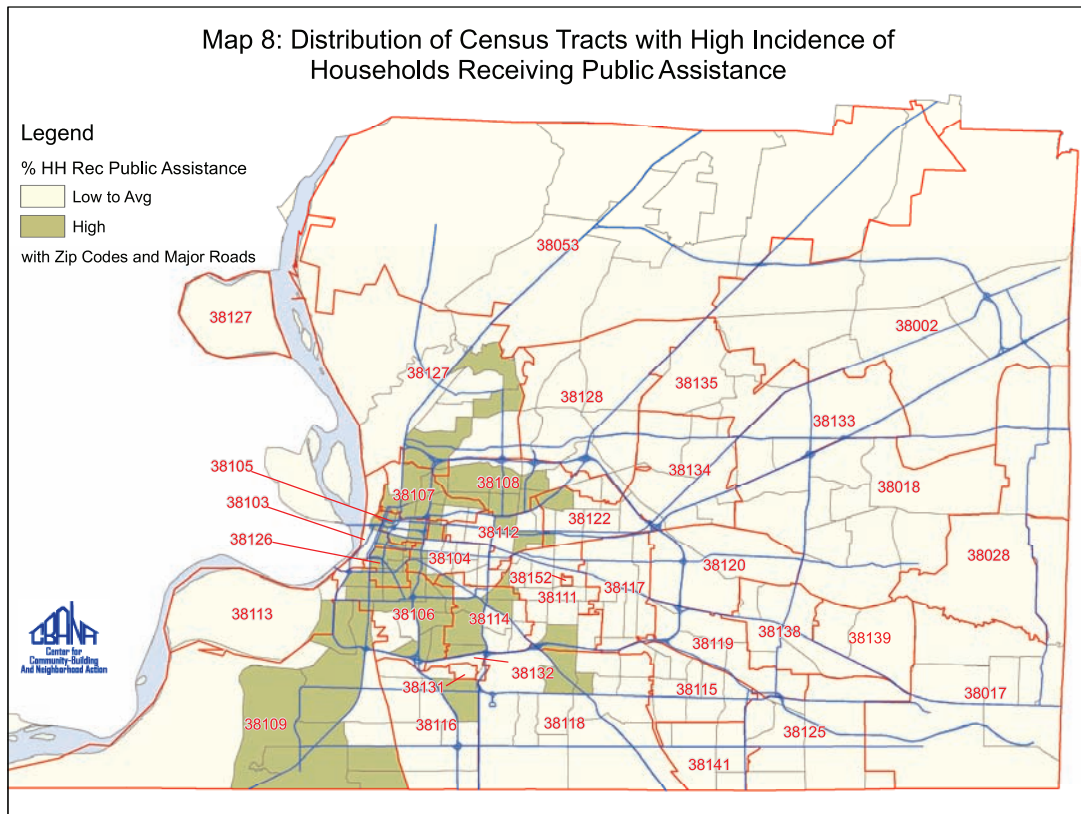
Source: Child and Family Policy Center for the Urban Institute, National Neighborhood Indicators Partnership. From Census 2000.

Key Finding: One in three Memphis census tracts (54 tracts) has a low rate of home ownership, typically associated with high concentrations of multi-family housing.

- The overall home-ownership rate for Memphis households is 56 percent, with 60 percent of all housing units in single-family properties.
- Neighborhoods with high concentrations of apartments, compared to single-family rentals, are higher on most indicators of neighborhood risk and also are associated with clusters on criminal incident maps for Memphis.
- Home ownership in single-family neighborhoods averages 75 percent,⁵ but for some neighborhoods high foreclosure rates increase transience and undermine the social capital that is typically associated with home ownership. In high foreclosure neighborhoods at least one out of five families will be threatened with foreclosure over a five-year period.⁶

⁵ Based on tax assessor's data where tax bills are sent to addresses other than the assessed property.

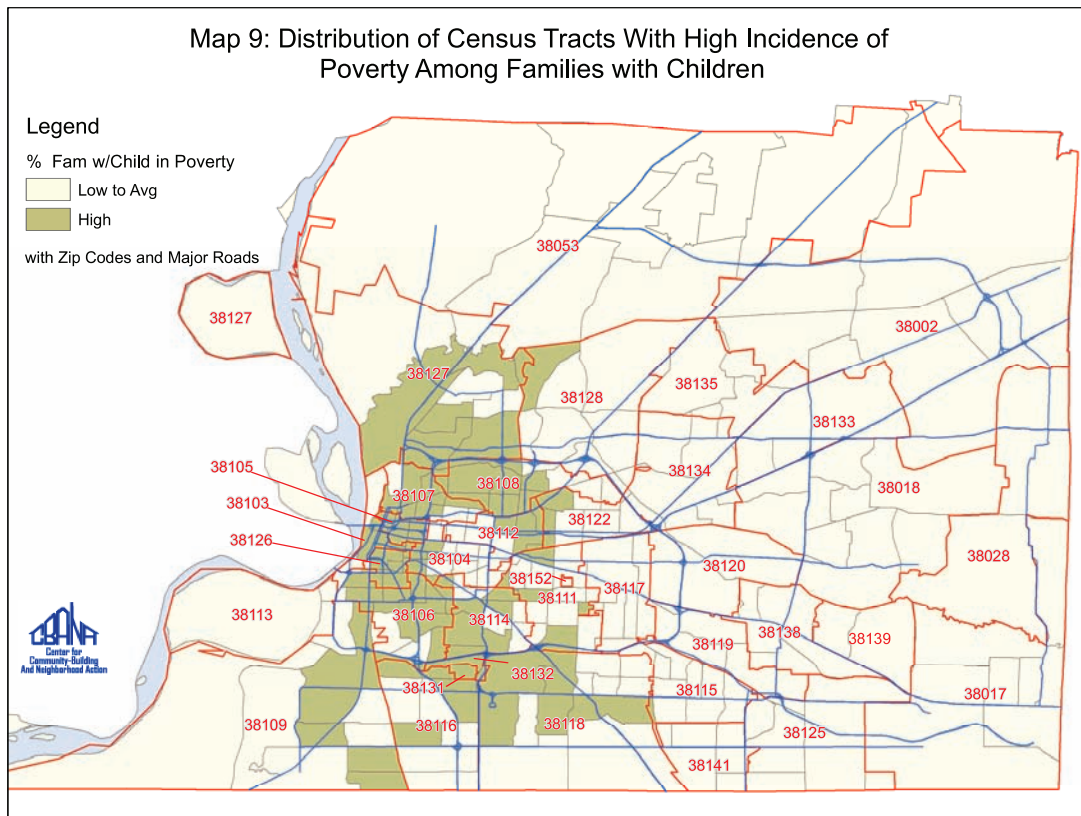
⁶ See discussion on "Economic Hardship and Income Support Systems" in the Family Economic Well-Being section for more on housing.



Source: Child and Family Policy Center for the Urban Institute, National Neighborhood Indicators Partnership. From Census 2000.

Key Finding: Over one in four Memphis census tracts (62 tracts) has a high incidence of families receiving public assistance.

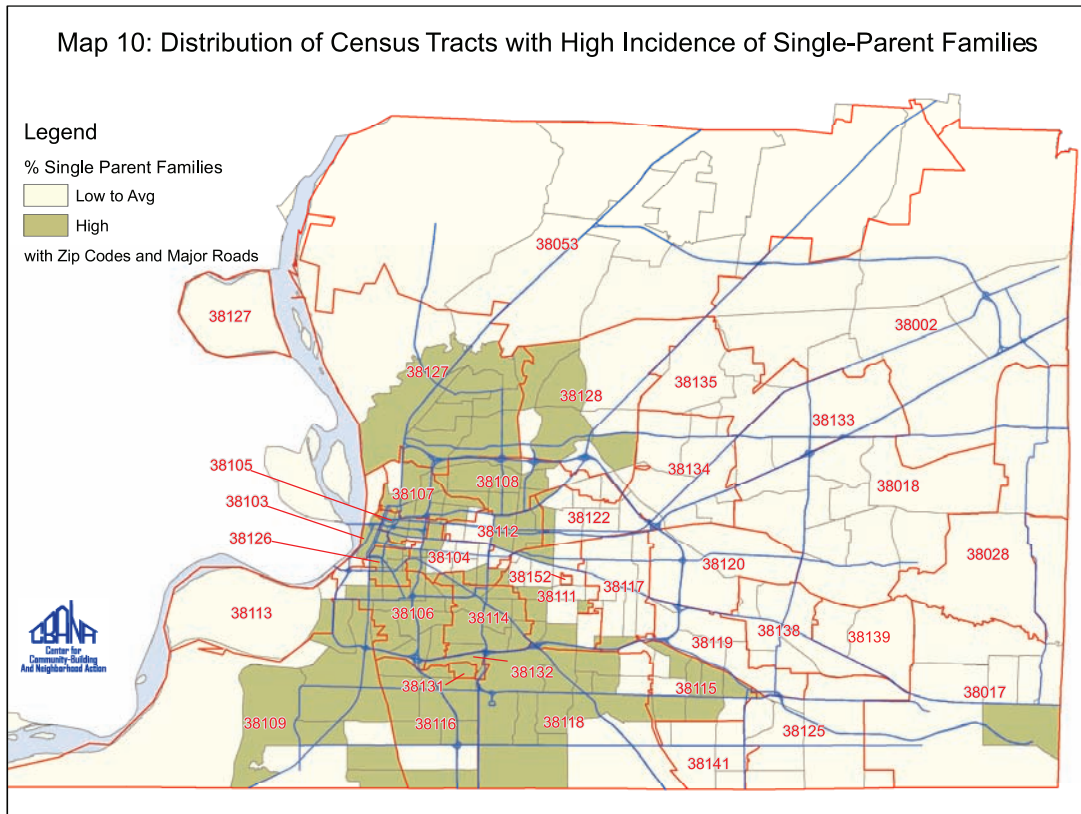
- Most families are NOT Families First participants, but instead are receiving disability benefits through the Supplemental Security Income program (SSI), which is available to both adults and children.
- About five percent of Memphis households receive Families First, but figures for SSI are not available.
- Self-reported disability rates are as high as 30 percent in some low-income census tracts in Memphis. Another five percent of households received SSI in 2000 based on census self-reports.



Source: Child and Family Policy Center for the Urban Institute, National Neighborhood Indicators Partnership. From Census 2000.

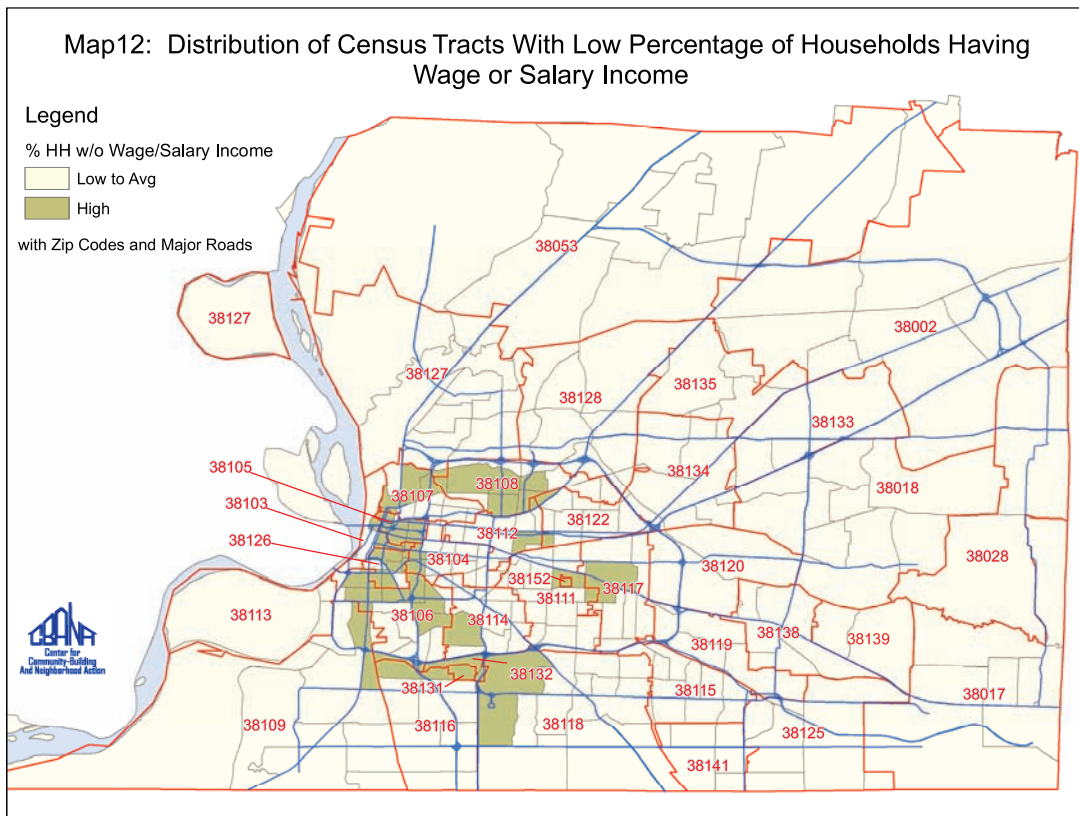
Key Finding: Nearly half of Memphis census tracts (74 tracts) have a high concentration of poverty among families with children.

- This pattern should not be confused with census tracts having large actual numbers of poor and low-income children. This particular risk factor means that there is little variation among families with children in the neighborhood, which is important in terms of peer influences.
- The larger actual numbers of poor (and low-income) children are increasingly outside of these tracts, however, in tracts with high proportions of single-parent families (Map 10) who have moved out of the highest poverty neighborhoods in response to demolition of public housing and other low-cost housing.



Key Finding: Nearly two out of three Memphis census tracts (106 tracts), and one suburban tract, have high incidences of single-parent families.

- The difference in the appearance of Map 10 compared to Map 9 represents the decentralization of poverty and the changing geographic dynamics of reaching higher-risk families.
- Neighborhoods absorbing poor-or-low-income families are lower risk overall on the Child Vulnerability Index and generally have greater institutional and organizational resources, but there may be an absence of support systems for single parents in neighborhoods where single-parent families traditionally have been less represented.



Key Findings: Isolation from school and work is also evident in census tracts where few households have earned income. One in five Memphis census tracts (35 tracts) reflects this kind of economic isolation.

- The over-representation of elderly households in poor neighborhoods contributes to this pattern, but what makes these tracts different is a high percentage of working age adults without earned income.
- These tracts tend to be in close proximity to tracts in Map 11, suggesting that neighborhoods cluster on both patterns.
- When wage-earning households are exceptional, research suggests the presence of chronic poverty, where risks to child development are both most severe and most difficult to counter.

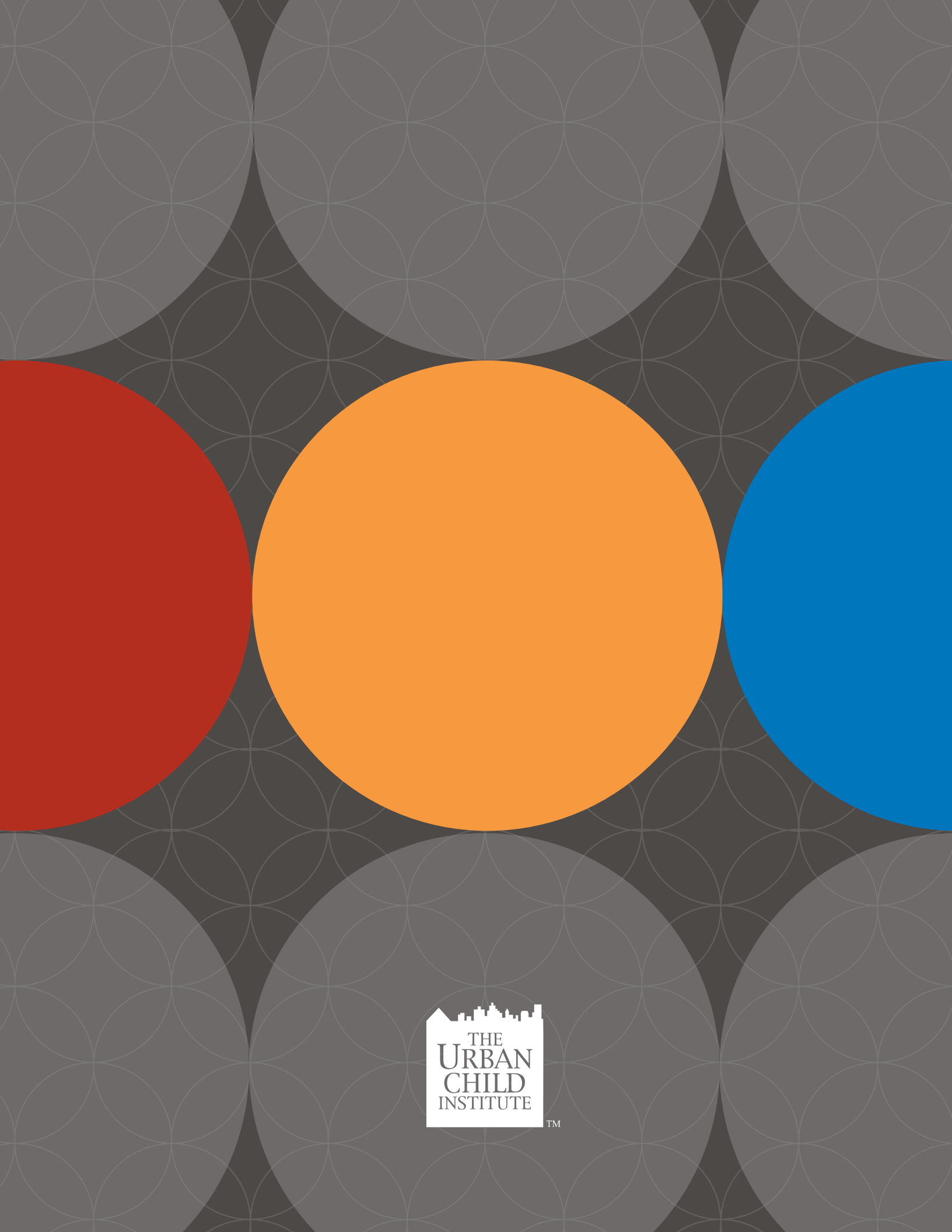
Critical Issue: Patterns for neighborhood risks are changing in Memphis, requiring new forms of outreach and posing new challenges to community support systems.

- High vulnerability census tracts in Memphis today, unlike in the past where densely populated tracts of public housing meant large numbers and concentrations of children in poor neighborhoods, are in “hollowed-out” neighborhoods where non-family households predominate and populations are diminished because of a high incidence of vacant and abandoned housing. In fact, the higher the risk on the Vulnerability Index for Memphis, the lower the percentage of children in the neighborhood.
- It is the moderate-risk census tracts that are absorbing growing numbers of low income families in a pattern where poverty is decentralizing from inner-city Memphis to transitional neighborhoods, where poor children are increasingly concentrated.
- Decentralization of poverty has been associated with positive outcomes for children in some studies, but if decentralization becomes re-concentration in new neighborhoods, we would not expect the same positive results.⁷
- For example, crime mapping analysis from the Center for Community Criminology at the University of Memphis reveals clustering of crime incidents around high density apartment developments where new concentrations of low income families are evident from a comparison of 1990 and 2000 census data.

⁷ See “Moving to Opportunity” research in References, and the discussion of “Segregation and Opportunity” in the Demographics section.

What we need to know:

- How can we reach out to the most vulnerable children in Memphis?
- What are the identifiable safety nets for kids living in high-risk communities and neighborhoods?
- How do parents themselves rate the safety and support of their own communities?
- Do people feel safe and supported in Memphis?
- What accounts for positive feelings of safety and support, and what accounts for negative feelings of safety and support?
- How can we address risk factors such as high mobility of families, poverty and lack of community connection which might be steps on the path to criminal behavior?
- What preventions and interventions are available and work (according to best practices) for young children in these contexts?
- What is the unemployment rate in Memphis? How many people are under-employed?
- What impact would a living wage (as an ordinance, city council resolution and/or in practice) have on working families in Memphis?
- What are the average savings, total net-worths (including assets and income) for families in Memphis?
- What are the rates of debt (from myriad causes, including medical-related debt) and bankruptcy in Memphis?
- What are identifiable best practices for building safe, healthy communities for children in Memphis whose lives are vulnerable, precarious, insecure and complicated by high-risk indicators?



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