Children and Adolescents

The health and well-being of children and adolescents have a dramatic impact on their physical, emotional, intellectual, and developmental abilities. By ensuring that children grow up healthy, are raised in safe and nurturing homes, and are provided with educational opportunities that stimulate their minds, children have the opportunities they need to achieve their full potential.

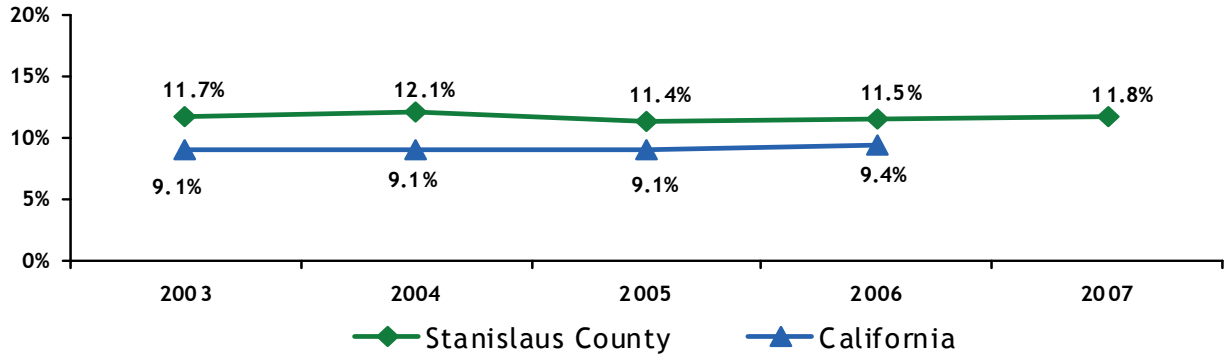
Table of Contents

Teen Births

Why It Is Important

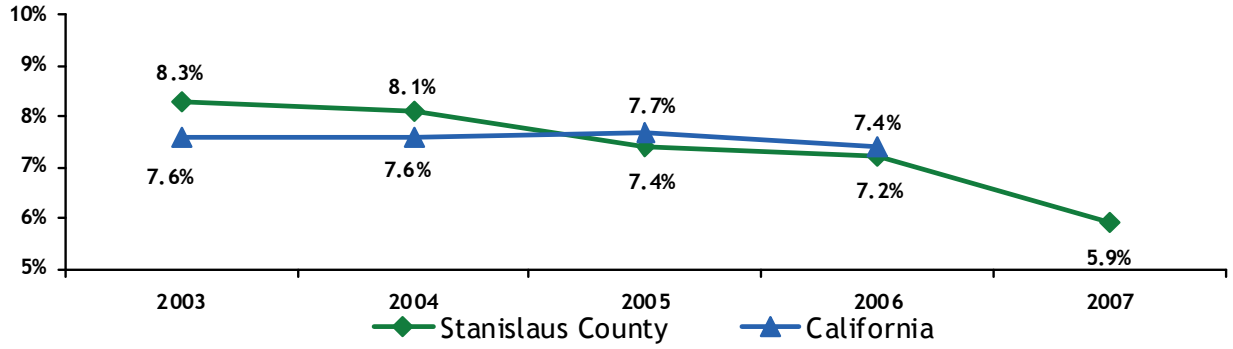
Teen girls face a greater risk of delivering low birth weight babies, and their babies have a higher risk of infant mortality.[79] Teen mothers are less likely to complete high school and go on to college than teens who delay childbirth. Only one-third of teen mothers receive a high school diploma, and only 1.5% attain a college degree by the age of 30.[80] Due in part to interruptions in the mother's education, babies born to teen mothers are more likely to live in poverty.[81]

Figure 154: Percentage of All Live Births to Teen Mothers Ages 15-19 Years



Source: State of California, Department of Public Health, Birth Records, 2003-2006, 2008. Health Services Agency, Public Health, 2007, 2008.
Stanislaus County 2003 N: 8,022; 2004 N: 8,061; 2005 N: 8,445; 2006 N: 8,728; 2007 N: 8,799.
California 2003 N: 540,827; 2004 N: 544,685; 2005 N: 548,700; 2006 N: 562,157; 2007 N: N/A.

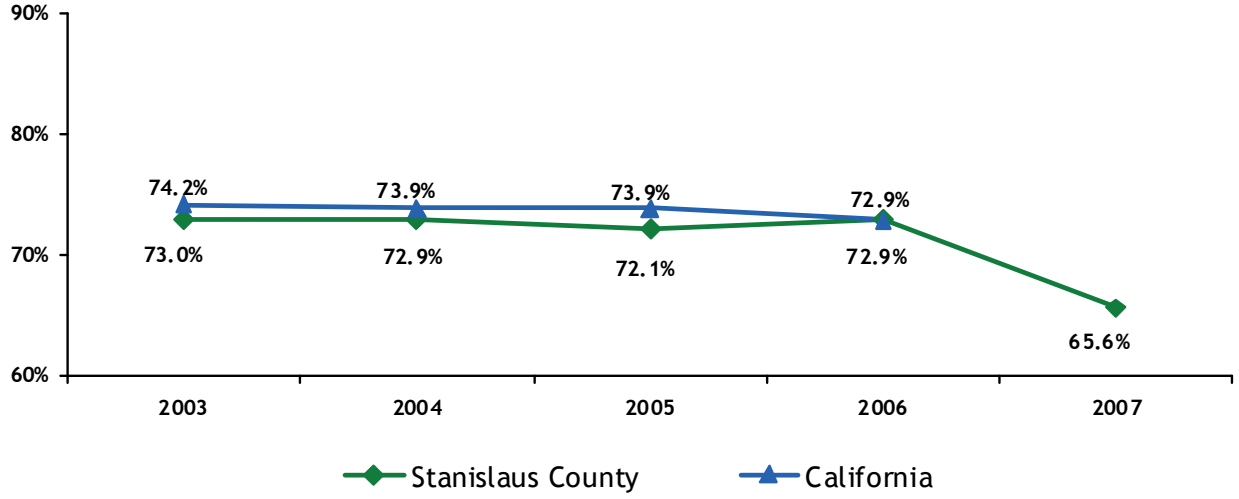
Figure 155: Percentage of Teen Births Born at Low Birth Weight (<2,500 Grams up to 5.5 Pounds)



Source: State of California, Department of Public Health, Birth Records, 2003-2006, 2008. Health Services Agency, Public Health, 2007, 2008.
Stanislaus County 2003 N: 938; 2004 N: 973; 2005 N: 960; 2006 N: 1,004; 2007 N: 1,036.
California 2003 N: 49,330; 2004 N: 49,737; 2005 N: 50,017; 2006 N: 52,770; 2007 N: N/A.

[79] Public Health Services of San Joaquin County, *Public Health Counts*, 2002.
[80] Alan Guttmacher Institute, *Facts in Brief, Teen Sex and Pregnancy*. Retrieved July 28, 2004, from http://sss.agi-usa.org/pubs/fb_teen_sex.html; see also, The National Campaign to Prevent Teen Pregnancy, General Facts and Stats, 2004. Retrieved November 10, 2004, from http://www.teenpregnancy.org/resources/data/genlfact.asap.
[81] Public Health Services of San Joaquin County, *Public Health Counts*, 2002.

Figure 156: Percentage of Teen Births with Prenatal Care in the First Trimester

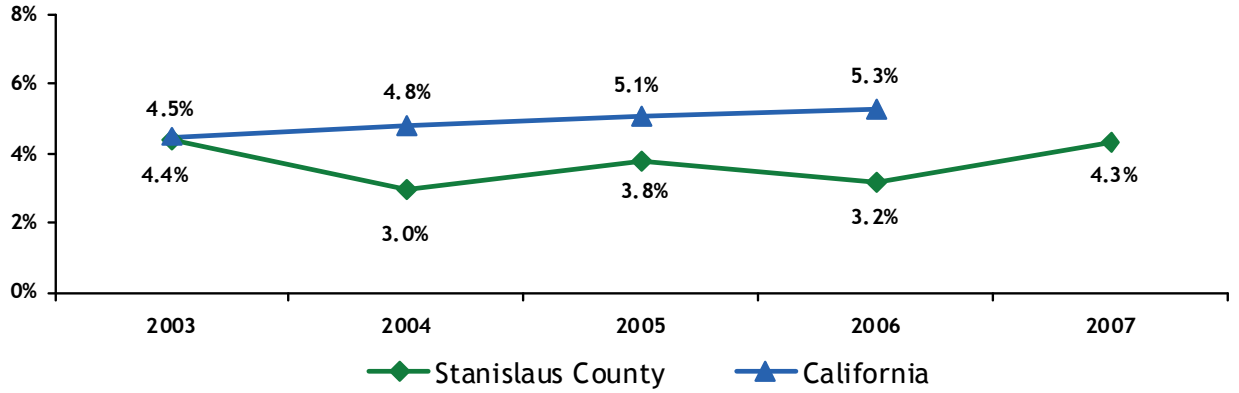


Source: State of California, Department of Public Health, Birth Records, 2003-2006, 2008. Health Services Agency, Public Health, 2007, 2008.

Stanislaus County 2003 N: 938; 2004 N: 973; 2005 N: 960; 2006 N: 1,004; 2007 N: 1,036; 2007 N: 995.

California 2003 N: 49,330; 2004 N: 49,737; 2005 N: 50,017; 2006 N: 52,770; 2007 N: N/A.

Figure 157: Percentage of Teen Births with Late* or No Prenatal Care



Source: State of California, Department of Public Health, Birth Records, 2003-2006, 2008. Health Services Agency, Public Health, 2007, 2008.

Stanislaus County 2003 N: 938; 2004 N: 973; 2005 N: 960; 2006 N: 1,004; 2007 N: 995.

California 2003 N: 49,330; 2004 N: 49,737; 2005 N: 50,017; 2006 N: 52,770; 2007 N: N/A.

* Late prenatal care is care beginning in the third trimester.

Data Summary

From 2003 to 2006, the percentage of all live births to teen mothers, ages 15-19, in Stanislaus County were consistently higher than in California. In 2007, 12% of all births in the County were to teen mothers. In Stanislaus County since 2003, the percentage of low birth weight babies born to teen mothers has been declining. In 2004, the percentage was 8%, and by 2007, the percentage was 6%. Conversely, the percentage of teen births with prenatal care in the first trimester has decreased from 2006 to 2007, while the percentage of teen births with late or no prenatal care increased during the same time period.

How We're Making a Difference

Hughson Family Resource Center Healthy Birth Outcomes

Elizabeth met Hughson Family Resource Center employee, Alma, when Elizabeth was eight months pregnant. Alma invited her to attend a program that included information on having a healthy pregnancy and being a good parent.

This was Elizabeth's first baby and she was worried that she wouldn't know how to take care of the child. Through the program though, she learned how to recognize a baby's signals. After her daughter was born, Elizabeth continued to come to the classes and learned about the value of breast feeding and health care for an infant and about various illnesses and the proper way of dealing with them. The baby was due to be born on August 1st, but Elizabeth didn't deliver until August 31, 2007. The delay would have been a source of great concern had she not been in the classes and had people to talk to about the process. What Elizabeth learned in the class has been of great help to her during the first year of her daughter's life. "I learned how to be understanding and how to discipline my children in the right way."

As a result of her success with this class, Elizabeth's desire to finish her GED was heightened. She contacted the Central Valley Opportunity Center, made an appointment, and received training to be a General Office Worker. She finished the class in June, 2008. She would have completed the class in May, but she didn't have gas money for one month and missed those classes. Although she is currently "working in the field" to pay for diapers, Elizabeth has more comfort with finding and keeping a better job.

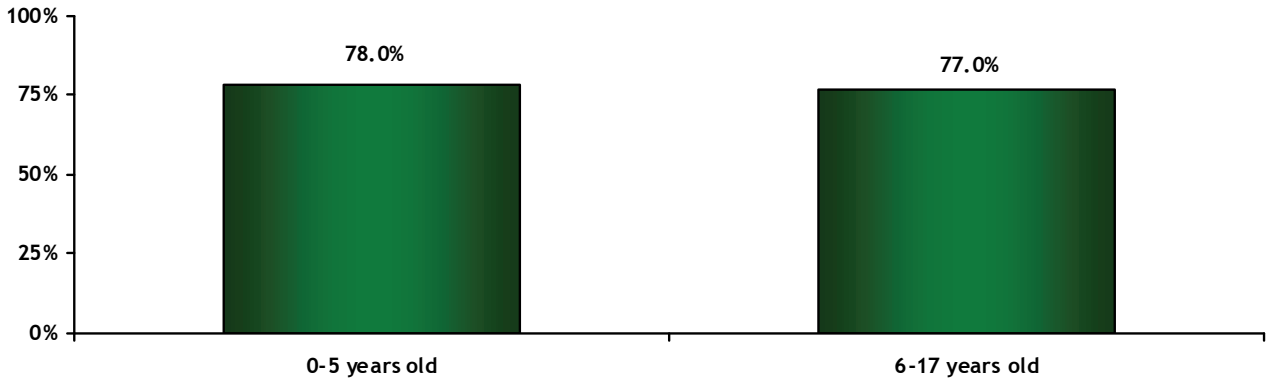
Even though Elizabeth has finished the classes, she still attends the Healthy Birth Outcomes (HBO) class occasionally as a class mentor, both in support of other soon-to-be mothers and to keep learning. She knows her daughter will be better because of it. The HBO program is run by the Stanislaus County Health Services Agency with funding by the Stanislaus County Children and Families Commission.

Health Insurance - Youth

Why It Is Important

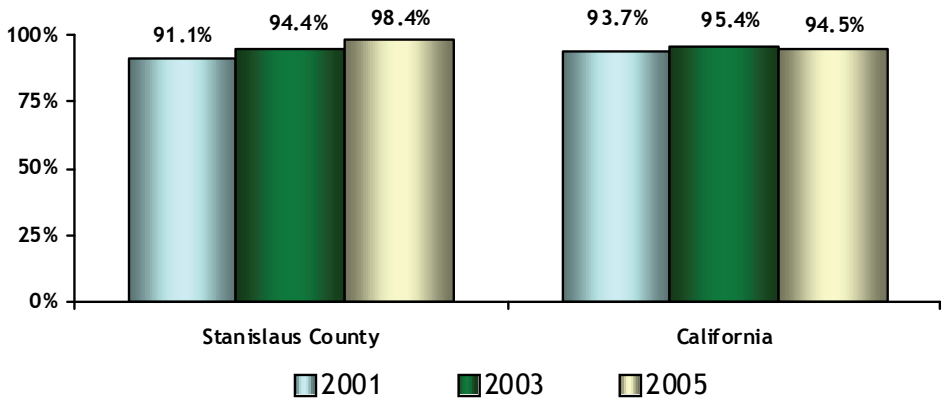
Health insurance is an important component of access to health care. People with medical insurance are more likely to have a primary care doctor and to receive adequate preventive care as compared to those without health insurance.[82] Children with health insurance are better able to receive timely check-ups, ensuring they are healthy and developing appropriately. Children with health insurance also have more access to care for more chronic conditions such as asthma and diabetes.

Figure 158: If You Have Children, Do They Have Health Insurance? (Those Responding "Yes"), 2008



Source: Applied Survey Research, *Stanislaus County Community Health Assessment Survey*, 2008. 2005 California Health Interview Survey.
Stanislaus County 2008 0-5 years old N: 1,141; 6-17 years old N: 1,129.

Figure 159: Percentage of Children Ages Five and Under Who Are Currently Insured

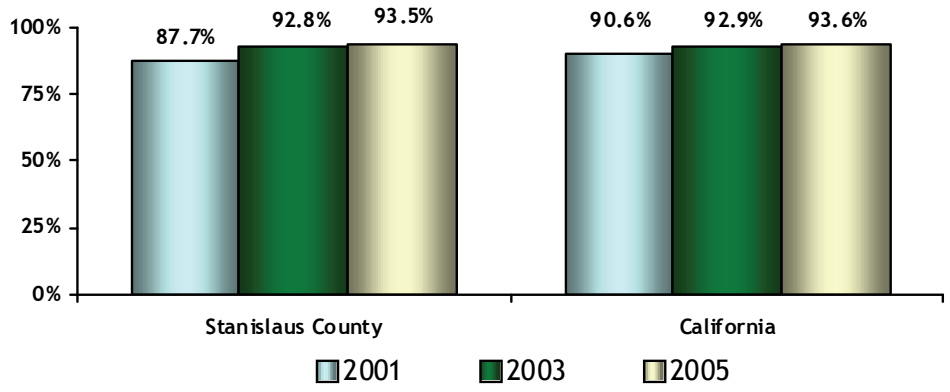


Source: 2001, 2003, and 2005 California Health Interview Survey.
Stanislaus County 2001 N: 43,000; 2003 N: 44,000; 2005 N: 45,000.
California 2001 N: 2,985,000; 2003 N: 3,006,000; 2005 N: 3,174,000.

New data not available

[82] Great Valley Center, *The State of the Great Central Valley of California: Supporting Economic, Social and Environmental Well-being in California's Great Central Valley*, 2003.

Figure 160: Percentage of Youth Ages 17 and Under Who Are Currently Insured



Source: 2001, 2003, and 2005 California Health Interview Survey.

Stanislaus County 2001 N: 141,000; 2003 N: 145,000; 2005 N: 150,000.

California 2001 N: 9,305,000; 2003 N: 9,488,000; 2005 N: 9,759,000.

New data not available

Figure 161: Type of Health Care Coverage for Children Ages Five and Under

Type of Coverage	Stanislaus County			California		
	2001	2003	2005	2001	2003	2005
Medicaid	29.3%	36.2%	21.4%	28.8%	33.1%	33.0%
Healthy Families / CHIP	4.0*	5.9*	7.1*	4.4	4.0	4.6
Employment-based	56.4	39.3	68.4	56.3	51.8	50.6
Privately purchased	1.4*	7.0*	-	2.9	5.1	4.9
Other public	-	6.0*	1.5*	1.2	1.4	1.3
Uninsured	8.9*	5.6*	1.6*	6.3	4.6	5.5
Total estimated N	**43,000**	**44,000**	**45,000**	**2,985,000**	**3,006,000**	**3,174,000**

Source: 2001, 2003, and 2005 California Health Interview Survey.

* Data are statistically unstable. According to CHIS, this is most often caused by a limitation of the sample collected in the survey. Thus, data should be interpreted with caution.

- (hyphen) = Data are not available as the estimate is less than 500 people.

New data not available

Figure 162: Type of Health Care Coverage for Youth Ages 17 and Under

	Stanislaus County			California		
Type of Coverage	2001	2003	2005	2001	2003	2005
Medicaid	18.4%	24.0%	32.0%	22.9%	26.1%	27.8%
Healthy Families / CHIP	5.7	5.0*	8.6*	4.7	6.1	6.5
Employment-based	60.8	57.1	51.4	59.0	54.4	53.3
Privately purchased	2.8*	4.9*	0.7*	2.9	4.9	4.8
Other public	-	1.8*	0.8*	1.1	1.4	1.2
Uninsured	12.3	7.2	6.5*	9.4	7.1	6.4
Total estimated N	**141,000**	**145,000**	**150,000**	**9,305,000**	**9,488,000**	**9,759,000**

Source: 2001, 2003, and 2005 California Health Interview Survey.

* Data are statistically unstable. According to CHIS, this is most often caused by a limitation of the sample collected in the survey. Thus, data should be interpreted with caution.

- (hyphen) = Data are not available as the estimate is less than 500 people.

New data not available

Data Summary

According to the 2008 Stanislaus County Community Health Assessment Survey results, 22% of respondents with children ages five and under and 23% of respondents with children ages 6-17 indicated that their children did not have health insurance.

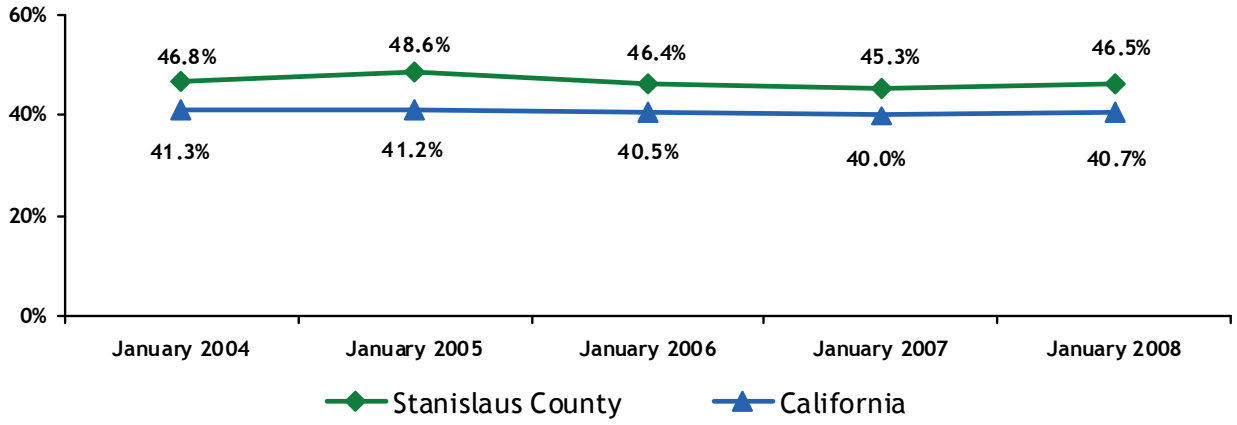
According to CHIS, over 90% of children ages 0-5 and over 88% of youth ages 0-17 in Stanislaus County and California were insured in 2001, 2003, and 2005. In Stanislaus County, a sizable majority (68%) of children ages 0-5 and over half (51%) of youth ages 0-17 had employment-based insurance coverage in 2005. This was followed by 21% of children ages 0-5 and 32% of youth ages 0-17 who were covered by Medicaid.

Medi-Cal Enrollment - Youth

Why It Is Important

The federal Medicaid program, administered as Medi-Cal in California, is available to low-income children and adults. Medi-Cal offers low or no cost insurance to those who might otherwise be uninsured. However, Medi-Cal eligibility is based on narrowly defined categories such as medical need and resource level. There are a large number of families whose resources require them to share the cost of services and, for many, this share of cost is too high, making Medi-Cal services basically unaffordable.

Figure 163: Percentage of Children Ages Five and Under Enrolled in Medi-Cal

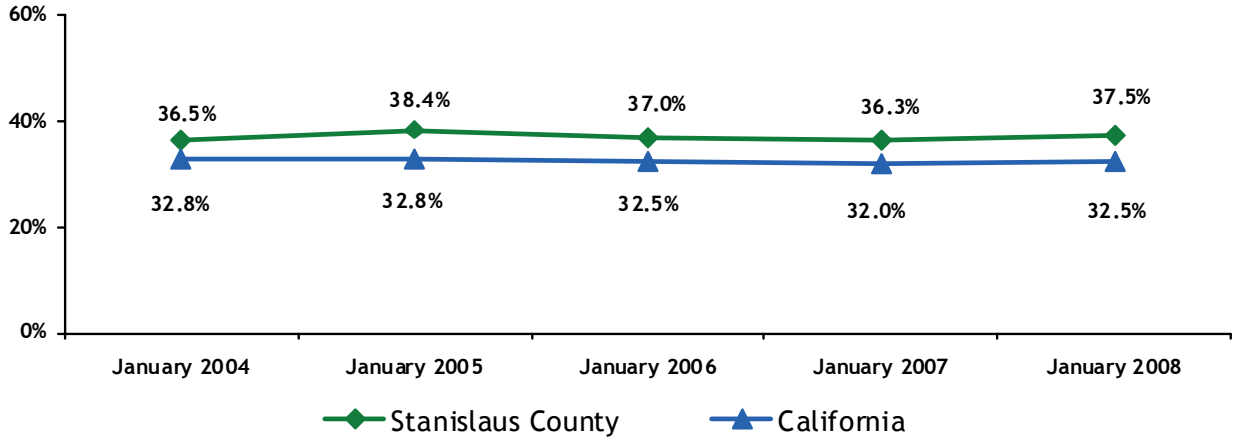


Source: California Department of Health Care Services, Medical Care Statistics Section, Medi-Cal Beneficiaries by Age Category, 2008. California Department of Finance, Demographic Research Unit, E-4 Population Estimates for Cities, Counties, State, 2000-2008 with 2000 DRU Benchmark, 2008.

Stanislaus County 2004 N: 45,420; 2005 N: 46,870; 2006 N: 48,667; 2007 N: 50,256; 2008 N: 51,680.

California 2004 N: 3,067,622; 2005 N: 3,119,684; 2006 N: 3,181,647; 2007 N: 3,221,891; 2008 N: 3,270,922.

Figure 164: Percentage of Youth Ages 17 and Under Enrolled in Medi-Cal



Source: California Department of Health Care Services, Medical Care Statistics Section, Medi-Cal Beneficiaries by Age Category, 2008. California Department of Finance, Demographic Research Unit, E-4 Population Estimates for Cities, Counties, State, 2000-2008 with 2000 DRU Benchmark, 2008.

Stanislaus County 2004 N: 147,216; 2005 N: 148,306; 2006 N: 149,430; 2007 N: 150,510; 2008 N: 151,522.

California 2004 N: 9,575,520; 2005 N: 9,620,511; 2006 N: 9,664,747; 2007 N: 9,697,088; 2008 N: 9,709,999.

Data Summary

Between 2004 and 2008, Stanislaus County consistently had higher percentages of children ages 0-5 and youth ages 0-17 enrolled in Medi-Cal than did California. During this time period, the percentage of Stanislaus County children ages 0-5 who were enrolled in Medi-Cal remained fairly constant, fluctuating between 45-49%. For youth ages 0-17, the percentage enrolled in Medi-Cal fluctuated slightly between 36%-38% during this time period.

How We're Making a Difference

Ceres Partnership for Healthy Children

Established in 1994, Ceres Partnership for Healthy Children is a community collaborative and Family Resource Center dedicated to the improved health and quality of life for children and families. We desire to see our children well, safe, educated, and prepared to live responsibly and with sufficiency in today's society.

Ceres Partnership for Healthy Children has become a well-known and trusted resource for the families in the Ceres community and its surrounding areas. We strive to strengthen families, and our programs are designed to improve self-sufficiency and build family capacity. Along with community events, door-to-door outreach, case management, and parent education and support groups, our programs and services serve as the foundation for positive growth and healthy family development.

Through the Healthy Birth Outcomes (HBO) Program, pregnant women and new mothers receive appropriate educational materials and additional support. This program is run by the Stanislaus County Health Services Agency, with funding by the Stanislaus County Children and Families Commission. Last year, over 70 women attended the Ceres HBO group, with 100% of babies born at a healthy birth weight.

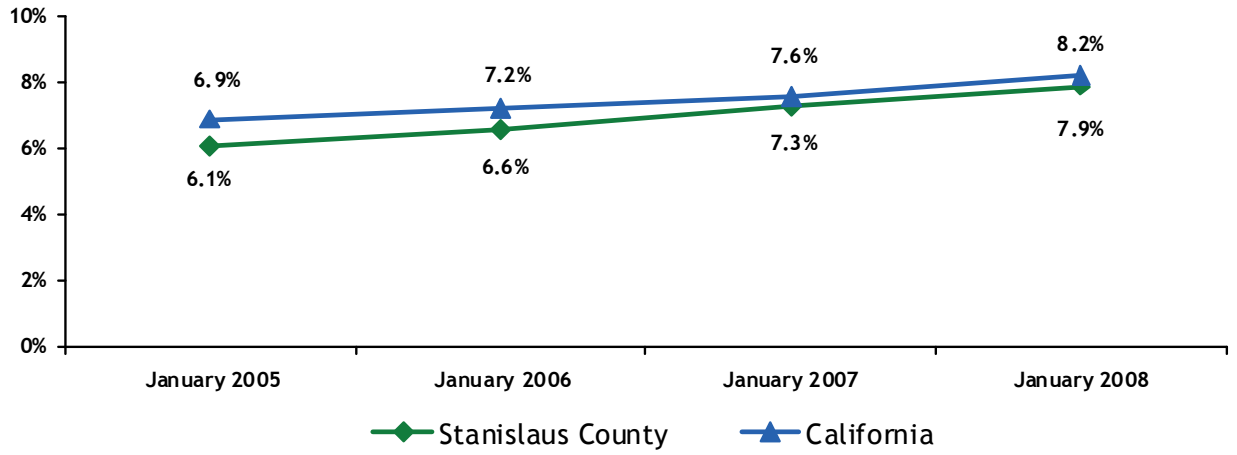
Ultimately, our purpose is to support and empower families to be responsible for meeting the needs of children through safe neighborhoods, strong families, and a supportive community.

Healthy Families Program (HFP) Enrollment

Why It Is Important

In response to the increasing number of uninsured children, the Federal Government created a health insurance program for children whose parents earn up to 250% of the Federal Poverty Level. Administered in California as "Healthy Families" since 1998, it has provided health insurance for the first time to many children who were not eligible for other programs. This program seems to be working to insure more children as according to CHIS 2005, 94% of County children under age 18 were insured in 2005. It is likely that without the Healthy Families program and the new Healthy Kids program, many of these children would go without health insurance coverage.

Figure 165: Percentage of Youth Ages 18 and Under Who Are Enrolled in Healthy Families Program



Source: State of California, Managed Risk Medical Insurance Board, *HFP Currently Enrolled Subscribers by County*, 2008. State of California, Department of Finance, *Race/Ethnic Population with Age and Sex Detail, 2000-2050.* Sacramento, CA, June 2004.

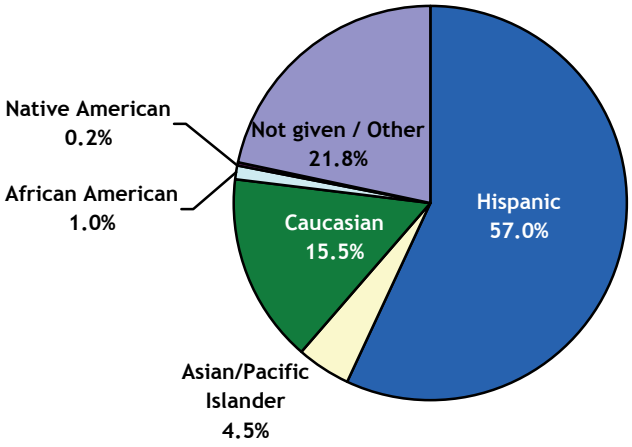
Figure 166: Number and Percentage of Youth Ages 18 and Under Who Are Enrolled in Healthy Families Program

	2005	2006	2007	2008
Stanislaus County				
Total number of youth ages 18 and under	157,091	158,426	159,774	161,068
Number of youth ages 18 and under enrolled in HFP	9,528	10,444	11,654	12,712
Percentage of all youth ages 18 and under enrolled in HFP	**6.1**	**6.6**	**7.3**	**7.9**
California				
Total number of youth ages 18 and under	10,161,885	10,228,907	10,280,378	10,319,640
Number of youth ages 18 and under enrolled in HFP	702,142	741,041	781,094	845,635
Percentage of all youth ages 18 and under enrolled in HFP	**6.9**	**7.2**	**7.6**	**8.2**

Source: State of California, Managed Risk Medical Insurance Board, *HFP Currently Enrolled Subscribers by County*, 2008. State of California, Department of Finance, *Race/Ethnic Population with Age and Sex Detail, 2000-2050.* Sacramento, CA, May 2004.

Note: Enrollment data are from the month of January of each year.

Figure 167: Youth Ages 18 and Under Who Are Enrolled in Healthy Families Program by Ethnicity, Stanislaus County, 2008



Source: State of California, Managed Risk Medical Insurance Board, HFP Currently Enrolled Subscribers by County, 2008.

N=12,712

Note: Enrollment data are from the month of January of each year.

Figure 168: Number and Percentage of Youth Ages 18 and Under Who Are Enrolled in Healthy Families Program by Ethnicity

Ethnicity	2005		2006		2007		2008	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Asian/Pacific Islander	472	5.0	501	4.8	531	4.6	569	4.5
African American	102	1.1	114	1.1	125	1.1	130	1.0
Caucasian	1,979	20.8	1,901	18.2	1,924	16.5	1,971	15.5
Hispanic	5,408	56.8	6,004	57.5	6,844	58.7	7,247	57.0
Native American	45	0.5	42	0.4	24	0.2	28	0.2
Not given/Other	1,522	16.0	1,882	18.0	2,206	18.9	2,767	21.8
Stanislaus County total	**9,528**	**100.0**	**10,444**	**100.0**	**11,654**	**100.0**	**12,712**	**100.0**

Source: State of California, Managed Risk Medical Insurance Board, HFP Currently Enrolled Subscribers by County, 2008.

Note: Enrollment data are from the month of January of each year.

Figure 169: Top 10 ZIP Codes with the Greatest Number of Youth Ages 18 and Under Enrolled in Healthy Families Program, Stanislaus County, 2008

ZIP Code	Number	Percent
95351	1,523	12.0
95307	1,350	11.0
95380	1,147	9.0
95358	1,010	7.9
95350	868	6.8
95355	825	6.5
95367	789	6.2
95382	723	5.7
95363	708	5.6
95361	531	4.2
Stanislaus County total	**12,712**	**100.0**

Source: State of California, Managed Risk Medical Insurance Board, *HFP Currently Enrolled Subscribers by County*, 2008.
Note: Enrollment data are from the month of January of each year.

Data Summary

As of January 2008, Stanislaus County had 12,712 youth ages 18 and under who were enrolled in the Healthy Families Program (HFP) and virtually had the same percentage of youth enrolled in HFP as California. In Stanislaus County, the percentage of youth ages 18 and under who were enrolled in HFP increased from 6% in 2005 to 8% in 2008. This was compared to an increase from 7% to 8% in California during the same time period.

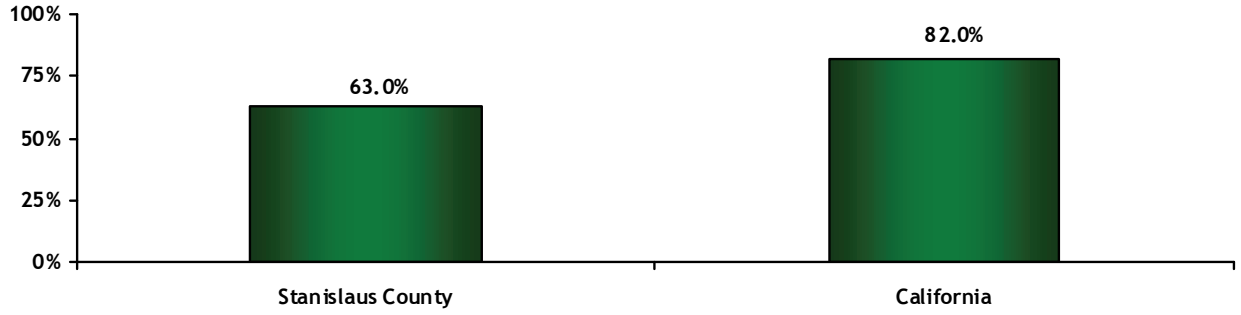
According to the 2008 HFP enrollment data, over half (57%) of youth ages 18 and under who were enrolled in the Healthy Families Program in Stanislaus County were Hispanic. This was followed by youth who were Caucasian (16%), Asian/Pacific Islander (5%), African American (1%), and Native American (<1%).

Women, Infants and Children (WIC) Enrollment

Why It Is Important

The Women, Infants, and Children (WIC) Supplemental Nutrition Program is a federally administered supplemental food and nutrition program for low-income pregnant, breastfeeding, or postpartum women and children under age five who have a nutritional deficiency. The purpose of WIC is to prevent poor birth outcomes and improve the health and nutrition of low-income participants. WIC provides nutrition education, breastfeeding promotion, medical care referrals, and specific supplemental nutritious foods that are high in protein and/or iron. The specific nutritious foods provided to participants include peanut butter, beans, milk, cheese, eggs, iron-fortified cereal, iron-fortified infant formula, and juices.[83] It has been shown to be cost effective and a positive public health intervention in many scientific studies.

Figure 170: Estimated Percentage of Eligible Population Enrolled in WIC, April 2003*



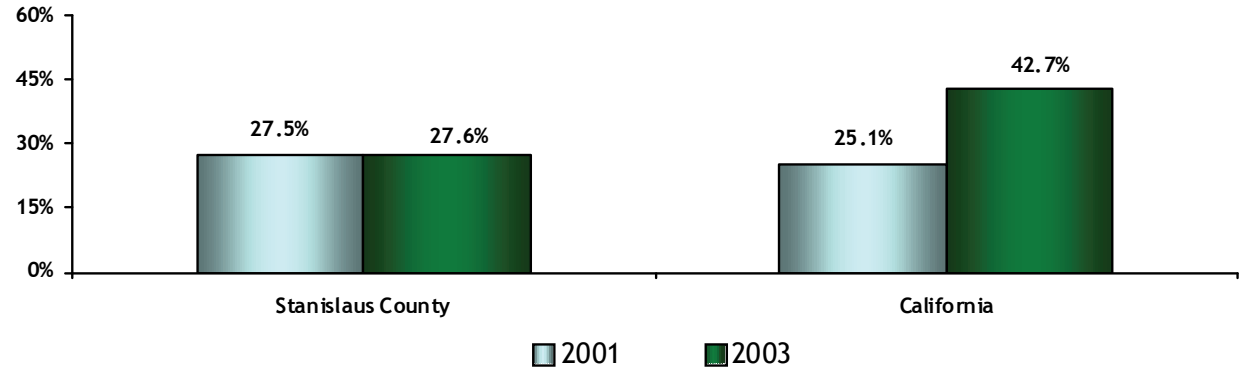
Source: California Department of Public Health, *Estimated Percent of Eligible Population Enrolled*, 2008.

* Estimates developed in January 2005 using data for April 2003. WIC eligible population based on 2000 Census income data at 185 percent poverty level, updated with 2002 California Department of Finance personal income estimates.

New data not available

[83] California Department of Health Services, Women Infants and Children (WIC) Supplemental Nutrition Program, *About WIC – Detailed Description*. Retrieved February 28, 2005, from http://www.wicworks.ca.gov/about/detailed.html.

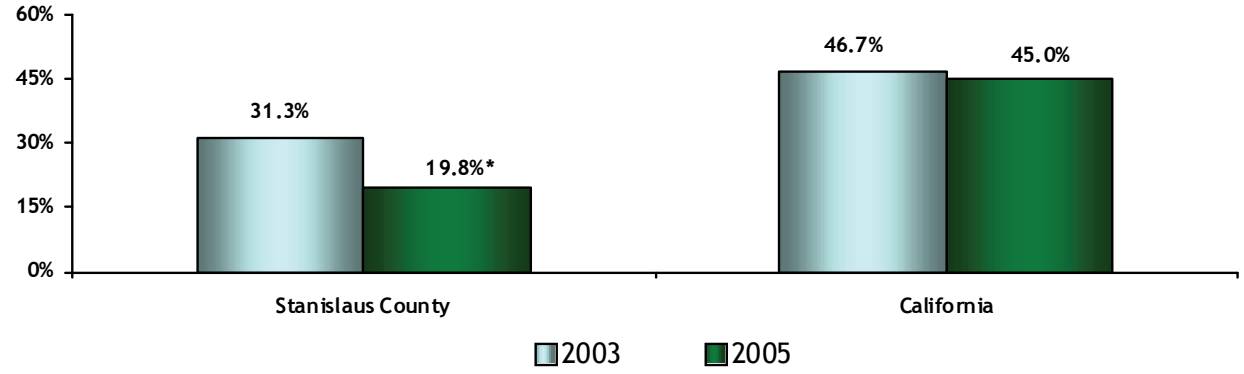
Figure 171: Percentage of Children Ages Six and Under Currently Enrolled in WIC



Source: 2001 and 2003 California Health Interview Survey.
Stanislaus County 2001 N: 49,000; 2003 N: 42,000.
California 2001 N: 3,528,000; 2003 N: 2,132,000.
Note: 2003 is the most recent data available.

New data not available

Figure 172: Percentage of Eligible Adult Women Ages 18 and Over Currently Enrolled in WIC



Source: 2003 and 2005 California Health Interview Survey.
Stanislaus County 2003 N: 33,000; 2005 N: 33,000.
California 2003 N: 1,843,000; 2005 N: 1,798,000.
Note: This was only asked of adult women whose total annual household income is equal to or less than 300% of the Federal Poverty Level and who have a child under age 7 or who are pregnant.
* Data are statistically unstable. According to CHIS, this is most often caused by a limitation of the sample collected in the survey. Thus, data should be interpreted with caution.

New data not available

Data Summary

Of the residents who were eligible to be enrolled in WIC, 63% of this eligible population in Stanislaus County were enrolled in April 2003, compared to 82% statewide.

According to CHIS data, 28% of children ages six and under were enrolled in WIC in 2003, compared to 43% statewide. There was a decrease in the number of eligible adult women ages 18 and over enrolled in WIC between 2003 and 2005 (31% and 20% respectively), whereas the state enrollment only slightly decreased in the same time period from 47% in 2003 to 45% in 2005.

Health Care Access and Utilization - Youth

Why It Is Important

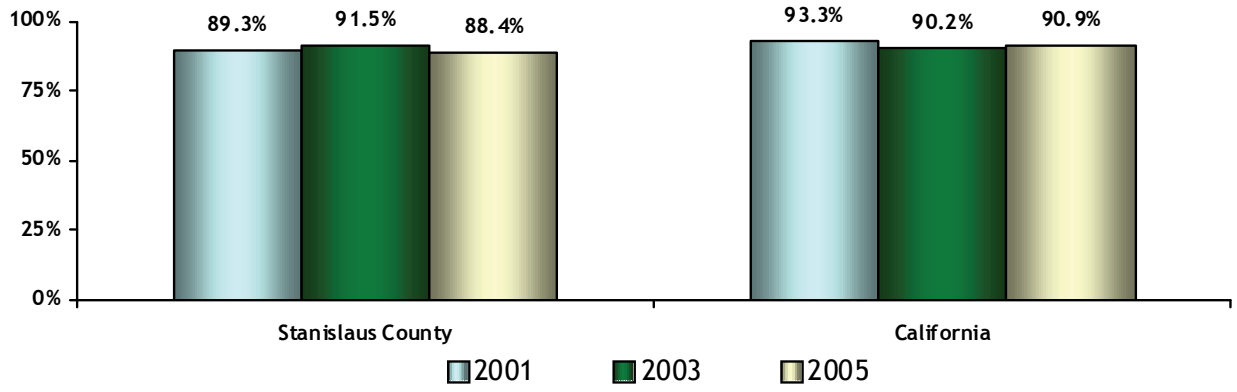
Timely medical visits help residents get appropriate preventive care and treatment for common and chronic conditions. Parents and caregivers with a place to take their child or children for health care may be more likely to access care and to feel more comfortable accessing care when their children are sick or they need health advice.

Figure 173: If Your Child Had to Go Without Health Care in the Past 12 Months, Why Couldn't Your Child Receive It? (Mark All That Apply), 2008

Response	Frequency	Percent
No insurance	259	49.9
Couldn't afford it	137	26.4
Insurance wouldn't cover it	93	18.0
Unable to find doctor to accept public health insurance	79	15.2
Transportation issues	56	10.7
Didn't know where to go	55	10.6
Doctor's office hours were not convenient	49	9.4
Not enough doctors/specialists available	36	6.9
Other	13	2.4
Total respondents	**519**	**100.0**
Total responses	**776**	**100.0**

Source: Applied Survey Research, *Stanislaus County Community Health Assessment Survey*, 2008.

Figure 174: Percentage of Youth Ages 17 and Under Who Have a Usual Place to Go to When They Are Sick or Need Health Advice



Source: 2001, 2003, and 2005 California Health Interview Survey.
Stanislaus County 2001 N: 140,000; 2003 N: 145,000; 2005 N: 150,000.
California 2001 N: 9,267,000; 2003 N: 9,488,000; 2005 N: 9,759,000.

New data not available

Data Summary

Respondents to the Stanislaus County Community Health Assessment Survey were asked, "if your child had to go without health care in the past 12 months, why couldn't your child receive it?" The most frequent responses given were: "no insurance" (50%), "couldn't afford it" (26%), "insurance wouldn't cover it" (18%), and "unable to find a doctor to accept public health insurance" (15%).

Eighty-eight percent (88%) of Stanislaus County youth ages 0-17 and 91% of California youth ages 0-17 have a usual source of care.

How We're Making a Difference

MOMobile

What happens when children are sick or injured, but barriers such as transportation prevent them from receiving the necessary medical care? MOMobile is a fully equipped mobile health care unit that delivers services to individuals in communities who are identified as needing greater access to health care. Funded by the Stanislaus County Children and Families Commission, it is operated through a collaboration of Golden Valley Health Centers and Doctors Medical Center Foundation. In 2007-2008, the mobile clinic provided medical care to 319 children.

Continuity of quality care and trust are important components of providing services through MOMobile, and this is evident in the story of Alberta and her family. Alberta relies on the MOMobile for the care of her entire large family. She does not have transportation, Alberta only speaks Spanish, and she does not have child care assistance.

A short time ago Teresa carried her youngest child into the MOMobile. Manuel was screaming in pain and Teresa explained to staff that he had a large sliver of wood in his buttock. Our provider, Joanne Helfer FNP, is a part-time ER Nurse and has been one for years: she took a look and then recommended that Teresa take Manuel to the Emergency Room due to the size of the sliver and how deeply embedded it was. Teresa broke into tears along with her already crying son. How was she going to be able to take her children (all under 10 years of age) on the bus, and then wait with them in ER for hours? Ms. Helfer recognized that it would be extremely difficult for Teresa and decided to do what she would have done in the ER. She pulled out the sliver (2 inches long), cleaned the exit wound, and provided a prescription for antibiotics along with detailed instructions in Spanish for Teresa to care for the wound and watch for signs of infection.

A few days later, Teresa came back with a healthy and smiling Manuel carrying a hand-made thank you card. Teresa, and others like her, come to the MOMobile because they trust the highly trained, Spanish speaking staff who treat her with respect and understanding.

Annual Health Assessments - Youth

Why It Is Important

Regular and timely screenings for children and adolescents can detect health conditions at their early stages when they are most easily treated, as well as uncover potential risk factors for chronic disease that can be managed with lifestyle changes.[84] Since children undergo significant changes as they grow, regular health assessments can help determine whether or not the child is developing normally in the areas of physical, mental, and emotional health.

Figure 175: Last Time Teens Ages 12-17 Saw a Doctor for a Routine Physical/Check-up

Response	Stanislaus County			California		
	2001	2003	2005	2001	2003	2005
Never	3.3%*	1.5%*	3.4%*	1.7%	1.4%	2.4%
Less than 3 months ago	23.3	28.1	20.6*	30.1	30.3	34.0
3-6 months ago	23.0	19.0	24.8*	23.4	24.5	23.1
6-12 months ago	22.1	13.2*	39.7	23.0	20.8	22.0
1-2 years ago	28.2**	25.8	8.9*	21.7**	16.4	13.7
More than 2 years ago		12.4*	2.6*		6.7	4.8
Total estimated N	**44,000**	**52,000**	**55,000**	**2,818,000**	**3,260,000**	**3,359,000**

Source: 2001, 2003, and 2005 California Health Interview Survey.

Note: Data for children ages 11 and under are not available.

* Data are statistically unstable. According to CHIS, this is most often caused by a limitation of the sample collected in the survey. Thus, data should be interpreted with caution.

** In 2001, the response option was: "12 months or more."

New data not available

Data Summary

According to CHIS data, the percentage of Stanislaus County teens ages 12-17 who saw a doctor for a routine physical or check-up within a year prior to taking the survey increased from 68% in 2001 to 85% in 2005. Similarly, the percentage of California teens ages 12-17 who saw a doctor for a routine physical or check-up within a year prior to taking the survey increased from 77% in 2001 to 79% in 2005.

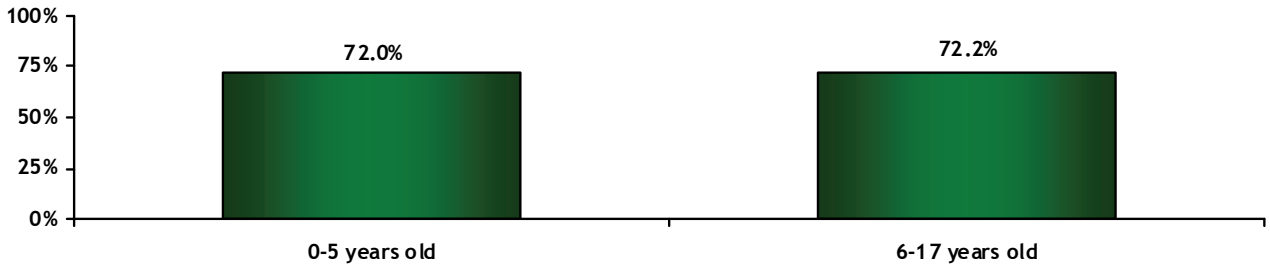
[84] U.S. Department of Health and Human Services, Administration on Aging, *Promoting Healthy Lifestyles – Health Screenings*, 2004. Retrieved February 28, 2005, from http://www.aoa.gov/eldfam//Healthy_Lifestyles/Screenings/screenings.asp.

Dental Insurance / Oral Health - Youth

Why It Is Important

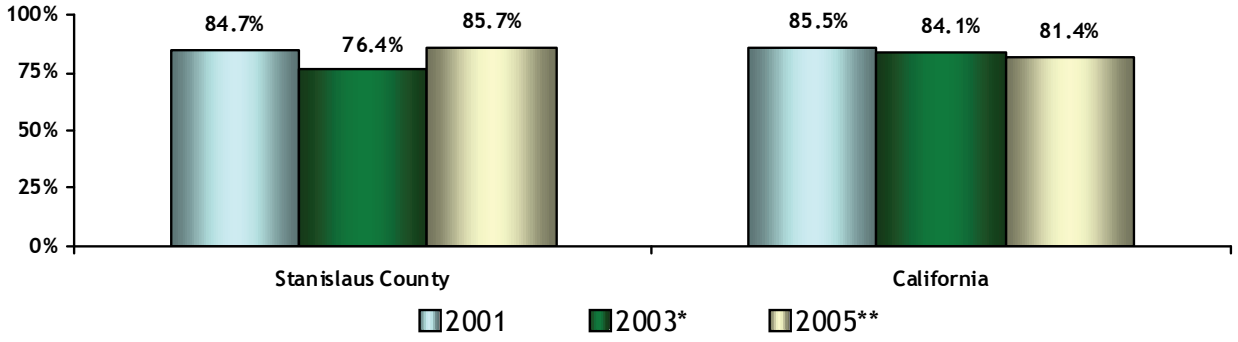
The American Academy of Pediatric Dentistry and U.S. Health Resources and Services Administration (HRSA) recommend that parents take children to the dentist twice annually, but according to a study from the U.S. Department of Health and Human Services, almost one-quarter of U.S. children do not receive the recommended number of dental checkups, and 20% of all children do not visit the dentist at all.[85] Regular dental visits for children are important for preventing, diagnosing, and treating oral diseases, and having dental insurance makes getting adequate dental care easier. Children who don't see dental professionals miss the opportunity to have problems caught early before they escalate into larger, more expensive problems to treat.

Figure 176: If You Have Children, Do They Have Dental Insurance? (Those Responding "Yes"), 2008



Source: Applied Survey Research, *Stanislaus County Community Health Assessment Survey*, 2008. 2005 California Health Interview Survey.
Stanislaus County 2008 0-5 N: 1,069; 6-17 N: 1,043.

Figure 177: Percentage of Children Ages 2-5 Who Have Dental Insurance

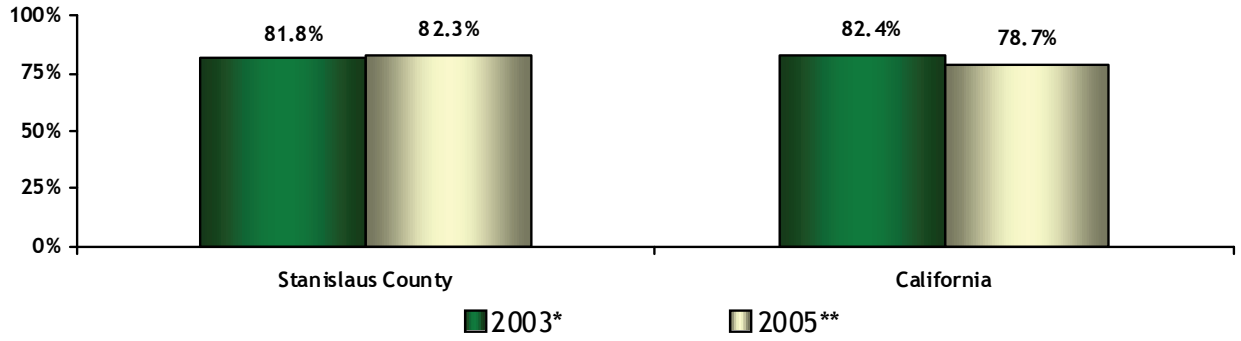


Source: 2001, 2003, and 2005 California Health Interview Survey.
Stanislaus County 2001 N: 33,000; 2003 N: 41,000; 2005 N: 27,000.
California 2001 N: 2,320,000; 2003 N: 2,723,000; 2005 N: 1,431,000.
* Asked of child respondents who are 2 years or older, or are under 2 but have teeth.
** Asked of child respondents 2 years or older who have visited the dentist. Also asked of younger children if a tooth is present and they have visited the dentist.

New data not available

[85] Too few dental checkups for children. [Electronic version]. *The Journal of the American Dental Association*, (February, 2003), *134*, 156.

Figure 178: Percentage of Youth Ages 2-17 Who Have Dental Insurance



Source: 2003 and 2005 California Health Interview Survey.

Stanislaus County 2003 N: 142,000; 2005 N: 131,000.

California 2003 N: 9,205,000; 2005 N: 7,877,000.

Note: 2001 data are not available for youth ages 11-17.

* Asked of child respondents who are 2 years or older, or are under 2 but have teeth. Asked of adolescents who at some point in the past 12 months did not have any health insurance at all.

** Asked of child respondents 2 years or older and all adolescents who have visited the dentist. Also asked of younger children if a tooth is present and they have visited the dentist.

New data not available

Figure 179: Time Since Last Dental Visit for Children Ages 2-5

Response	Stanislaus County			California		
	2001	2003*	2005*	2001	2003*	2005*
Never	64.7%	59.3%	20.4%	41.7%	53.3%	34.3%
1-6 months ago	27.7	22.7	59.9	39.0	33.9	46.3****
7-12 months ago	6.7**	11.7**	18.0**	15.4	10.0	16.6****
1-2 years ago	-	6.3**	1.7**	3.2	2.4	2.3
2-5 years ago	-	-	-	0.6	0.3**	0.5**
More than 5 years ago	-	-	N/A***	-	0.1**	N/A***
Total estimated N	**25,000**	**41,000**	**34,000**	**1,972,000**	**2,723,000**	**2,039,000**

Source: 2001, 2003, and 2005 California Health Interview Survey.

* Asked of child respondents who are 2 years or older. Also asked of younger children if a tooth is present.

** Data are statistically unstable. According to CHIS, this is most often caused by a limitation of the sample collected in the survey. Thus, data should be interpreted with caution.

*** Response option was not used in 2005.

**** Response option was: "less than 6 months ago" / "6 months up to 1 year ago".

- (hyphen) = Data are not available as the estimate is less than 500 people.

New data not available

Figure 180: Time Since Last Dental Visit for Children Ages 2-17

Response	Stanislaus County		California	
	2001	2003*	2001	2003*
Never	15.5%	18.5%	12.2%	17.1%
1-6 months ago	51.8	49.4	55.6	55.4
7-12 months ago	22.7	15.4	22.1	18.6
1-2 years ago	7.0**	11.2	6.9	5.7
2-5 years ago	2.1**	2.3*	2.5	2.6
More than 5 years ago	0.9**	3.2*	0.7	0.6
Total estimated N	**121,000**	**142,000**	**8,136,000**	**9,205,000**

Source: 2001 and 2003 California Health Interview Survey.

Note: 2003 is the most recent data available.

* Asked of child respondents who are 2 years or older. Also asked of younger children if a tooth is present.

** Data are statistically unstable. According to CHIS, this is most often caused by a limitation of the sample collected in the survey. Thus, data should be interpreted with caution.

- (hyphen) = Data are not available as the estimate is less than 500 people.

New data not available

Data Summary

According to the 2008 Stanislaus County Community Health Assessment Survey results, 28% of respondents with children ages five and under and 28% of respondents with children ages 6-17 indicated that their children did not have dental insurance.

There was a small increase in the percentage of Stanislaus County children ages 2-5 who had dental insurance between 2001 and 2005 (from 85% to 86%). However, the percentage of California children ages 2-5 with dental coverage decreased from 86% in 2001 to 81% in 2005. Further, 82% of Stanislaus County youth ages 2-17 had dental insurance in 2003 and 2005. In California, the percentage decreased from 82% in 2003 to 79% in 2005.

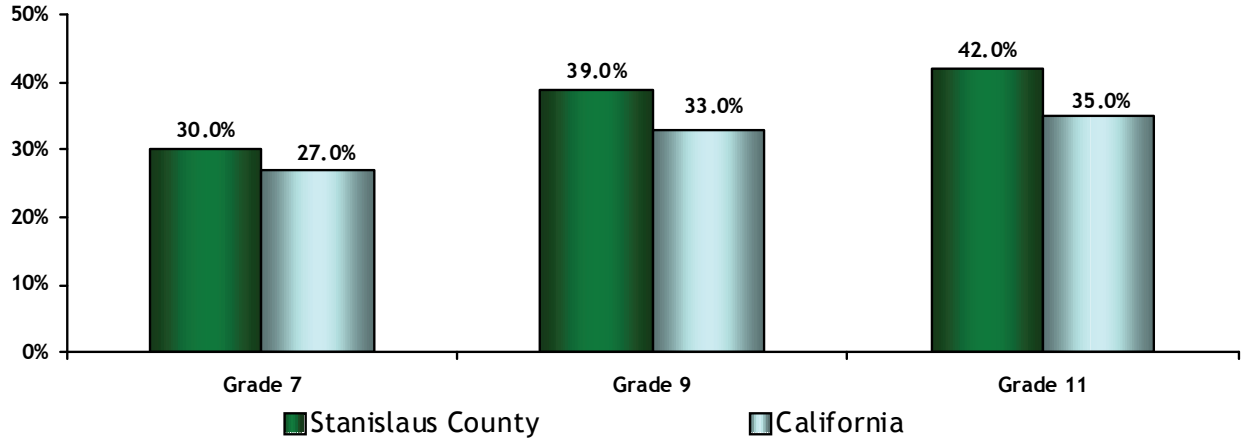
Mental Health - Youth

Why It Is Important

According to the U.S. Department of Health and Human Services Center for Mental Health Services, at least one in five children and adolescents in the U.S. have a mental health disorder and at least one in ten have a serious emotional disturbance that disrupts daily functioning in the home, school, or community. The most common mental disorders among children are anxiety disorders, mood disorders (such as depression), and disruptive disorders (such as attention-deficit/hyperactivity disorder). The U.S. Surgeon General has found that fewer that one in five children with a mental health disorder receives the mental health services they need.

Untreated mental health disorders can be very costly to families, communities, and the health care system, potentially leading to school failure, family conflicts, substance abuse, and violence. Untreated mental disorders may increase a child's risk of coming into contact with the juvenile justice system. Studies show that 66% of boys and almost 75% of girls in juvenile detention have at least one mental disorder. Children with mental disorders, particularly depression, are at a higher risk of suicide; the U.S. Surgeon General estimates that 90% of children who commit suicide have a mental disorder.[86]

Figure 181: Percentage of Students Who, During the Past 12 Months, Felt So Sad and Hopeless Almost Every Day for Two Weeks or More that They Stopped Doing Some Usual Activities, by Grade Level, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

Note: Data for 5th grade students not available.

New data not available

[86] U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration Center for Mental Health Services, "Fast Facts about Children and Mental Health" and "Child and Adolescent Mental Health." Retrieved October 28, 2008, from http://mentalhealth.samhsa.gov/.

Data Summary

The 2004-2006 California Healthy Kids Survey results indicate that compared to California, Stanislaus County had higher percentages of 7th, 9th, and 11th grade students who felt so sad and hopeless almost every day for two weeks or more that they stopped doing some usual activities in the twelve months prior to taking the survey. The 2004-2006 data also indicated that the percentage of students who had these feelings were highest among 11th graders (42% countywide and 35% statewide), followed by 9th graders (39% and 33%), and 7th graders (30% and 27%).

How We're Making a Difference

Working on Life Changes at Turning Point

One twin was vivacious and one was a "daydreamer." Growing up as an identical twin, Noel Silva was different from her sister – like night and day.

"It was easy to hide behind my sister, "said Noel. "I could easily withdraw while she seemed to be the center of attention. I heard voices. Spending time talking to myself seemed normal to me. But, by the time I had a diagnosis of depression and psychosis, it was easy to see I had serious problems."

So, how does someone like Noel turn a life around? A life-long struggle with mental illness didn't prepare Noel to enter the workforce and engage in society. Noel was accustomed to a more protected, solitude life. After all, she could escape, disengage and hide behind her sister. That is, until Turning Point discovered her.

"We talk to mental health consumers at all stages of their illness and ask one important question," said Ron Gilbert, Director of Adult Mental Health Services of Turning Point Community Programs. "Did you ever think about working and contributing to the community?"

Noting its unique purpose, Kaiser Permanente funded $50,000 for Turning Point's Career Exploration and Mentoring Program. Employing close to 400 full and part-time employees, Turning Point assists individuals, like Noel, with psychiatric disabilities in a variety of vocational opportunities, including peer-to-peer support in a Warmline Program, offering telephone support 24/7. Other programs, including one like Ron's offer job coaching and counseling.

Noel and Turning Point found each other during a hospital stay and it's been a good match ever since. Today, she is program director for Employment Empowerment Center and Warmline.

"Part of my therapy is having a responsible job where I feel valued," said Noel. "I am learning life skills and what it takes to coach others," she said.

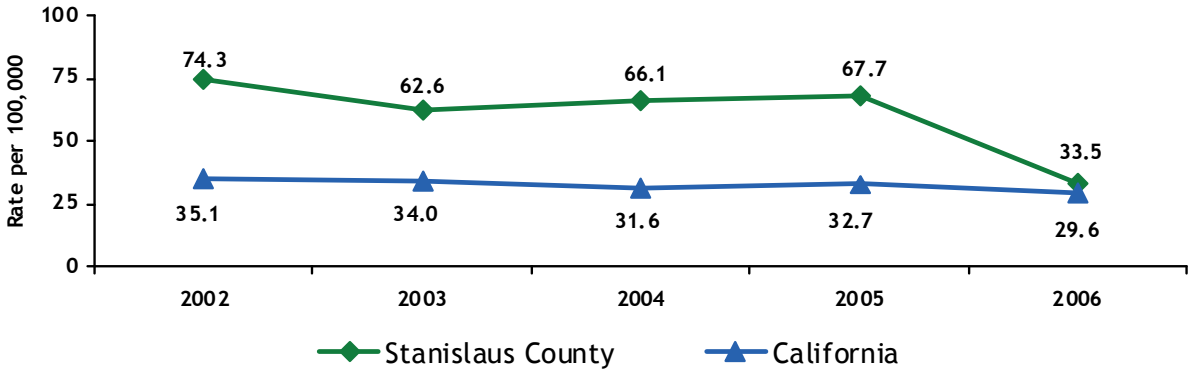
"When you earn a wage and can support yourself, now that's therapy!" said Ron. "We are headed in a good direction and Kaiser Permanente is helping us get there."

Self-Inflicted Injuries - Youth

Why It Is Important

In 2001, suicide was the third leading cause of death among teenagers ages 15–19.[87] Because the death of a young person is usually only called a suicide if there is a suicide note, many health professionals believe suicides are underreported. Further, injuries are not tracked systematically unless they result in hospitalization or death. Thus, these nonfatal self-inflicted injury hospital data only represent the most serious injuries among children. Suicidality, including intentional self-harm and completed suicide, is indicative of serious mental health problems and may signal other traumatic life events such as depression, social isolation, discrimination, and physical or substance abuse. A growing body of research estimates that gay, lesbian, bisexual, and transgendered youth attempt suicide at a rate 2–3 times higher than their heterosexual peers.[88]

Figure 182: Rate of Nonfatal Self-Inflicted Injuries Leading to Hospitalizations* Per 100,000, Youth Ages 0-20



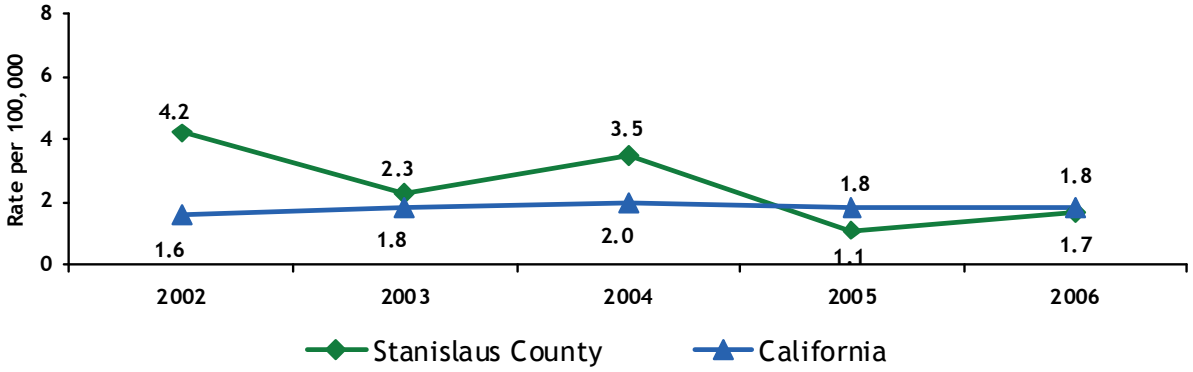
Source: State of California, Department of Health Services, Epidemiology and Prevention for Injury Control (EPIC) Branch, 2008. State of California, Department of Finance, *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, June 2004.

*Self-inflicted injuries are injuries that one intentionally inflicts upon oneself. Nonfatal self-inflicted injuries are often considered suicide attempts whereas fatal self-inflicted injuries are called suicide.

New data not available

[87] Centers for Disease Control and Prevention, National Center for Health Statistics, *National Vital Statistics Report, Volume 49, Number 11*, 2001.
[88] University of New Hampshire, Counseling Center, *Suicide and Lesbian, Bisexual and Transgender Youth*, 2002.

Figure 183: Rate of Fatal Self-Inflicted Injuries / Suicides Per 100,000, Youth Ages 0-20



Source: State of California, Department of Health Services, Epidemiology and Prevention for Injury Control (EPIC) Branch, 2008.
State of California, Department of Finance, *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, June 2004.

New data not available

Figure 184: Number of Nonfatal Self-Inflicted Injuries Leading to Hospitalizations, Youth Ages 0-20, by Age Group, Stanislaus County

Age Group	2002	2003	2004	2005	2006	02-06 % Change
Less than 5 years	0	0	0	0	0	-
5-12 years	3	2	3	8	1	-66.7
13-15 years	36	35	35	44	18	-50.0
16-20 years	86	70	76	66	40	-53.5
Stanislaus County total (ages 0-20)	**125**	**107**	**114**	**118**	**59**	**-52.8**

Source: State of California, Department of Health Services, Epidemiology and Prevention for Injury Control (EPIC) Branch, 2008.

New data not available

Figure 185: Number of Nonfatal Self-Inflicted Injuries Leading to Hospitalizations, Youth Ages 0-20, by Age Group, California

Age Group	2002	2003	2004	2005	2006	02-06 % Change
Less than 5 years	3	2	1	4	5	66.7
5-12 years	103	92	89	106	86	-16.5
13-15 years	1,194	1,148	1,015	1,096	1,038	-13.1
16-20 years	2,550	2,534	2,424	2,473	2,232	-12.5
California total (ages 0-20)	**3,850**	**3,776**	**3,529**	**3,679**	**3,361**	**-12.7**

Source: State of California, Department of Health Services, Epidemiology and Prevention for Injury Control (EPIC) Branch, 2008.

New data not available

Figure 186: Number of Fatal Self-Inflicted Injuries / Suicides, Youth Ages 0-20, by Age Group, Stanislaus County

Age Group	2002	2003	2004	2005	2006	02-06 % Change
Less than 5 years	0	0	0	0	0	-
5-12 years	0	0	1	1	1	-
13-15 years	1	0	1	0	1	0.0
16-20 years	6	4	4	1	1	-83.3
Stanislaus County total (ages 0-20)	**7**	**4**	**6**	**2**	**3**	**-57.1**

Source: State of California, Department of Health Services, Epidemiology and Prevention for Injury Control (EPIC) Branch, 2008.

New data not available

Figure 187: Number of Fatal Self-Inflicted Injuries / Suicides, Youth Ages 0-20, by Age Group, California

Age Group	2002	2003	2004	2005	2006	02-06 % Change
Less than 5 years	0	0	0	0	0	-
5-12 years	3	2	6	6	6	100.0
13-15 years	30	17	32	26	29	-3.3
16-20 years	142	179	182	166	173	21.8
California total (ages 0-20)	**175**	**198**	**220**	**198**	**208**	**18.9**

Source: State of California, Department of Health Services, Epidemiology and Prevention for Injury Control (EPIC) Branch, 2008.

New data not available

Data Summary

In Stanislaus County, the rate of nonfatal self-inflicted injuries leading to hospitalizations decreased from 74.3 injuries per 100,000 youth ages 0-20 in 2002 to 33.5 injuries per 100,000 youth in 2006. Between 2002 and 2006, the rate of fatal suicides in Stanislaus County decreased from 4.2 deaths per 100,000 youth ages 0-20 to 1.7 deaths per 100,000.

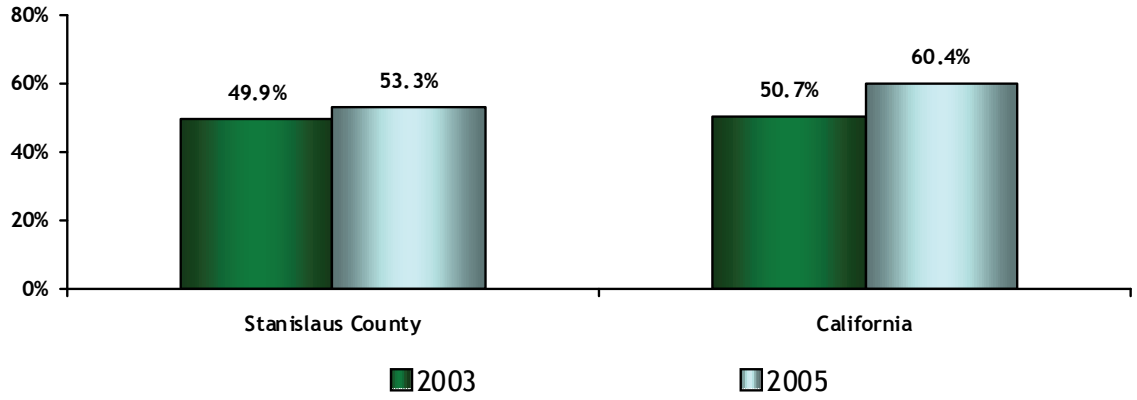
Overall, the total number of nonfatal self-inflicted injuries leading to hospitalizations for youth ages 0-20 decreased 53% countywide and 13% statewide. Furthermore, the total number of fatal suicides among youth ages 0-20 decreased 57% in Stanislaus County, but increased 19% statewide.

Nutrition - Youth

Why It Is Important

Poor nutrition and lack of physical activity contribute to obesity and chronic diseases. Fruits and vegetables provide vitamins, minerals, fiber, and other nutrients important to good health. Diets rich in fruits and vegetables may even help reduce the risk of cancer.[89] The United States Department of Agriculture (USDA), the National Academy of Sciences, the American Cancer Society, and the National Cancer Institute recommend that people consume between 5 to 9 servings of fruits and vegetables each day to help maintain good health and reduce the risk of cancer and heart disease.[90] Unfortunately, despite the benefits of proper nutrition, the average American diet falls far short. In 2005, one in three adults ate fruit two or more times per day and one in four adults ate vegetables three or more times per day.[91] In addition, a recent study published in the Journal of Food Composition and Analysis revealed that the average American is receiving a third of their daily caloric intake from junk foods such as soft drinks, sweets, desserts, salty snacks, and alcohol beverages.

Figure 188: Percentage of Children Ages 2-5 Who Eat Five or More Servings of Fruits or Vegetables Daily

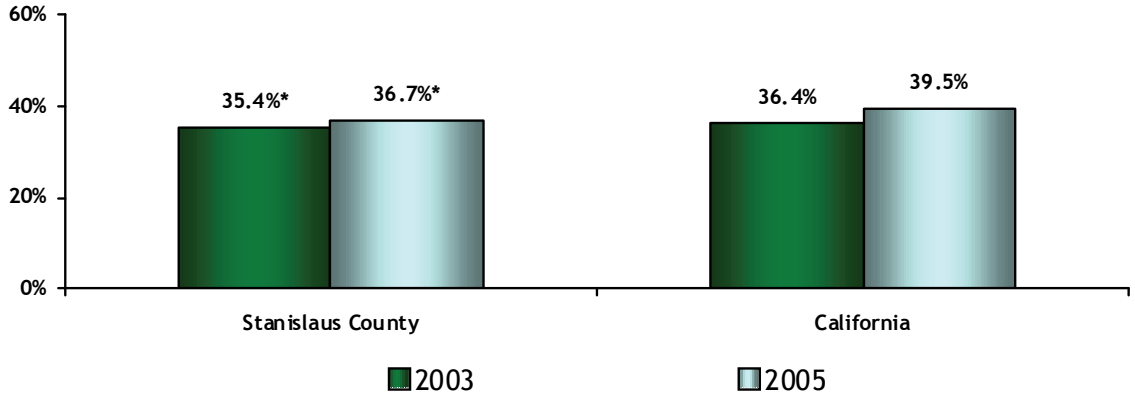


Source: 2003 and 2005 California Health Interview Survey.
Stanislaus County 2003 N: 29,000; 2005 N: 34,000.
California 2003 N: 1,994,000; 2005 N: 2,047,000.
Note: Comparable data for 2001 are not available.

New data not available

[89] Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Nutrition and Physical Activity, *5 a Day*, 2004.
[90] Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *5 a Day Frequently Asked Questions*, 2004.
[91] Center for Disease Control and Proper Nutrition, *Physical Activity and Good Nutrition: Essential Elements to Prevent Chronic Diseases and Obesity*, 2008.

Figure 189: Percentage of Children Ages 2-17 Who Eat Five or More Servings of Fruits or Vegetables Daily



Source: 2003 and 2005 California Health Interview Survey.

Stanislaus County 2003 N: 130,000; 2005 N: 139,000.

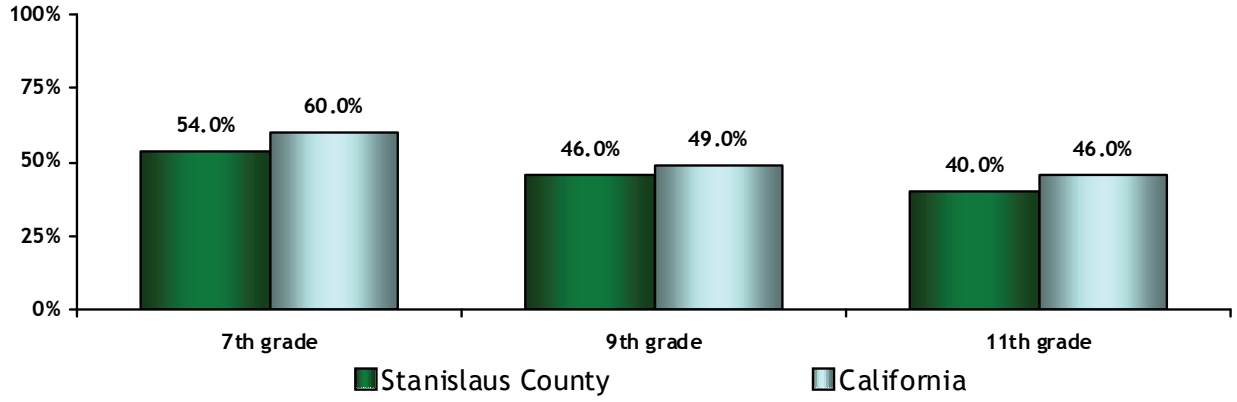
California 2003 N: 8,477,000; 2005 N: 8,633,000.

Note: Comparable data for 2001 are not available.

* Data for respondents ages 12-17 are statistically unstable. According to CHIS, this is most often caused by a limitation of the sample collected in the survey. Thus, data should be interpreted with caution.

New data not available

Figure 190: Percentage of Students Who Consumed Five or More Portions of Fruits or Vegetables in the Past 24 Hours, by Grade Level, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report,* 2004-2006. California Healthy Kids Survey, *Technical Report,* 2004-2006.

Note: Data for 5th grade students not available.

New data not available

Data Summary

According to CHIS, the percentages of children ages 2-5 and youth ages 2-17 who ate five or more servings of fruits or vegetables daily increased in both Stanislaus County and California between 2003 and 2005. During this time period, the percentage increased from 50% to 53% for Stanislaus County children ages 2-5, and from 35%to 37% for Stanislaus County youth ages 2-17.

Data from the 2004-2006 California Healthy Kids Survey indicated that the percentages of Stanislaus County 7th, 9th, and 11th grade students who consumed five or more portions of fruits or vegetables in the 24 hours prior to taking the survey were lower than their statewide counterparts. In both Stanislaus and California, the percentages of students who consumed five or more servings of fruits or vegetables were highest among 7th graders (54% and 60%, respectively), followed by 9th graders (46% and 49%, respectively), and lowest among 11th graders (40% and 46%, respectively).

Overweight and Underweight Youth

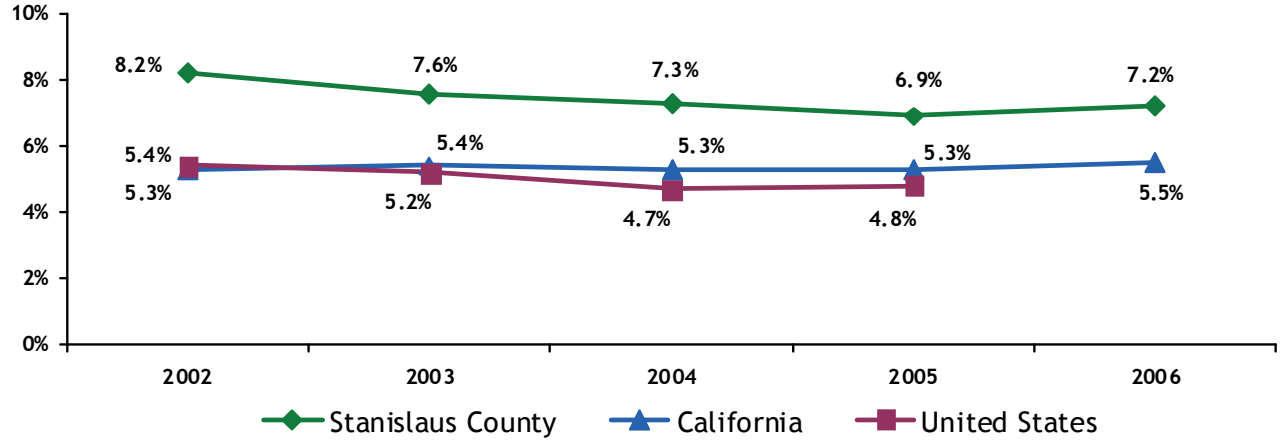
Why It Is Important

Since the 1970s, the percentage of overweight children and adolescents in the United States has more than doubled. In 2007, 10% of 2- to 5-year-olds and more than 15% of children between the ages of 6 and 19 were overweight. When the percent of youth who were overweight or at risk of becoming overweight were combined, about one out of three children were affected. Overweight children are at risk for serious health problems like type 2 diabetes, high blood pressure, and high cholesterol - all once considered exclusively adult diseases. Risk factors present in childhood can lead to serious adult medical conditions like heart disease, heart failure, and stroke. Preventing or treating obesity in children may reduce the risk of developing these conditions as they get older.[92]

Young people who are underweight (less than 5th percentile for Body Mass Index) may be that way for a variety of reasons, including dietary, health, or emotional problems. An under-nourished child is more likely to become sick, may feel weak or tired, have trouble focusing and concentrating, and may have stunted growth or a delay in the onset of puberty. It has been estimated that 12 million children live in food-insecure households, meaning that they have limited availability of nutritious and safe foods.[93]

Stanislaus County has a high percentage of overweight children. In 2006, Stanislaus County ranked 34th (1 being the best) out of California's 66 counties and health jurisdictions[94] for overweight children ages five and under. The County ranked 29th in 2002, 39th in 2003, 32nd in 2004, and 40th in 2005.[95]

Figure 191: Percentage of Children Ages Four and Under Who Are Underweight (< 5th Percentile)

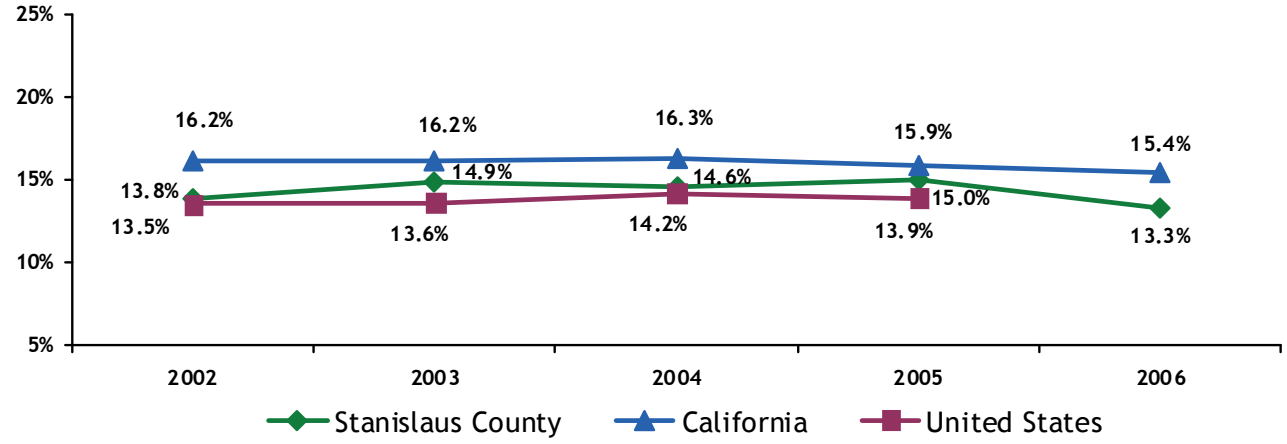


Source: California Department of Health, Pediatric Nutrition Surveillance, *Growth Indicators by Race/Ethnicity and Age*, 2008.
Note: 2006 national data are not available.

New data not available

[92] Nemours Foundation, KidsHealth for Parents, *Overweight and obesity*. Retrieved January 14, 2008 from http://www.kidshealth.org/parent/general/body/overweight_obesity.html, 2005.
[93] Serrano, E., & Branstad, K., *Healthy Weights for Healthy Kids: What Should I Do if My Child Is Underweight?* Retrieved January 14, 2008 from http://www.ext.vt.edu/pubs/nutrition/348-271/348-271.html, 2007.
[94] The health jurisdictions include: City of Berkeley, Pasadena, Long Beach, Los Angeles North, Los Angeles South, Los Angeles West and Los Angeles East, and Los Angeles Other.
[95] California Department of Health

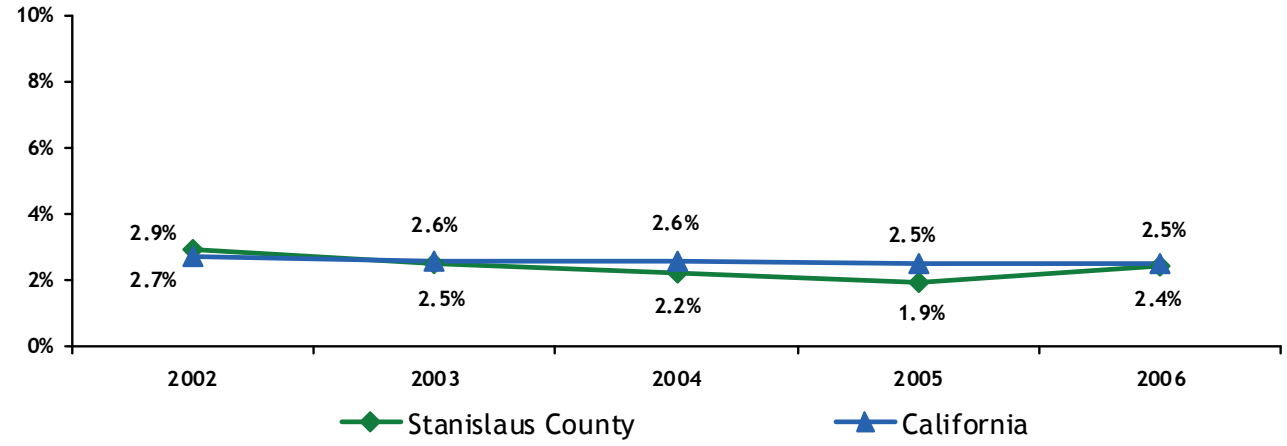
Figure 192: Percentage of Children Ages Four and Under Who Are Overweight (> 95th Percentile)



Source: California Department of Health, Pediatric Nutrition Surveillance, *Growth Indicators by Race/Ethnicity and Age*, 2008.
Note: 2006 national data are not available.

New data not available

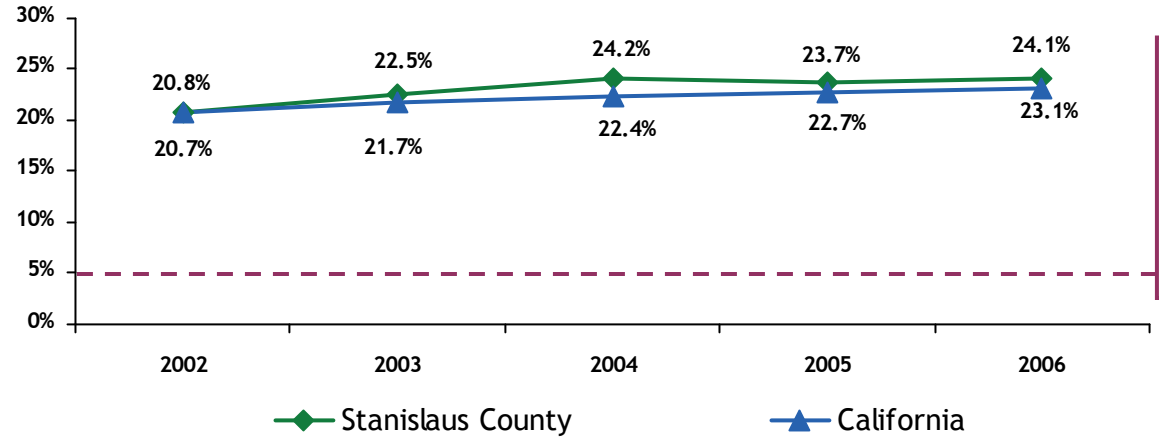
Figure 193: Percentage of Youth Ages 5-19 Who Are Underweight (< 5th Percentile)



Source: California Department of Health, Pediatric Nutrition Surveillance, *Growth Indicators by Race/Ethnicity and Age*, 2008.
Note: National data are not available.

New data not available

Figure 194: Percentage of Youth Ages 5-19 Who Are Overweight (> 95th Percentile)

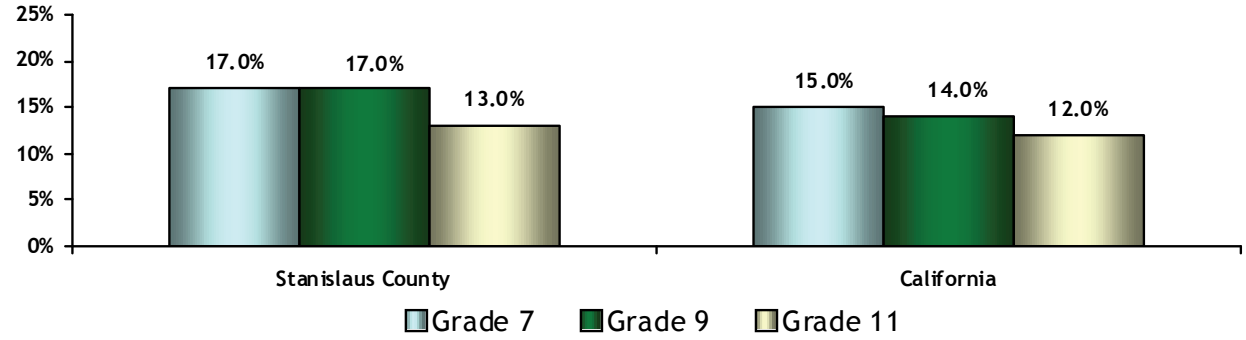


HEALTHY PEOPLE 2010 OBJECTIVE: No more than 5% of children and adolescents ages 6-19 will be overweight or obese.

Source: California Department of Health, Pediatric Nutrition Surveillance, *Growth Indicators by Race/Ethnicity and Age*, 2008.
Note: National data are not available.

New data not available

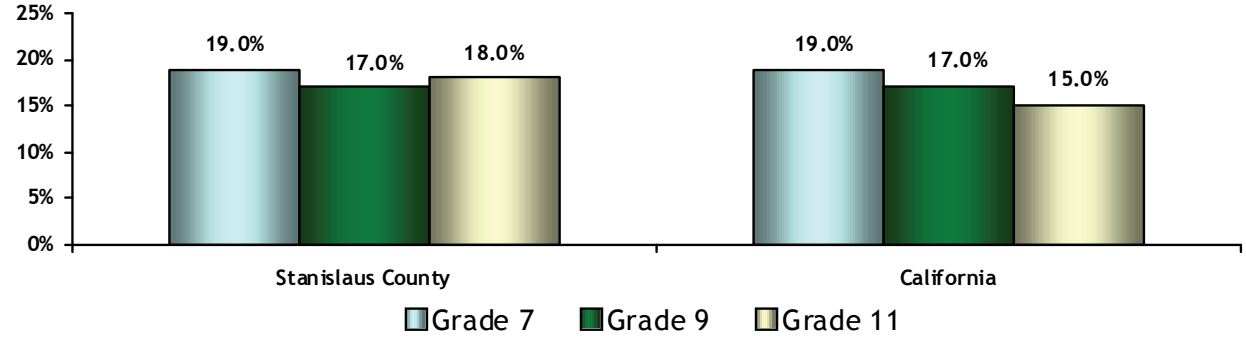
Figure 195: Percentage of Students Who Are Overweight by Grade Level, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

New data not available

Figure 196: Percentage of 7th, 9th, and 11th Grade Students Who Are At Risk of Becoming Overweight, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

New data not available

Data Summary

According to the 2006 Pediatric Nutrition Surveillance, Stanislaus County had a slightly higher percentage of children ages four and under (7%) who were underweight than did the state (6%). For youth ages 5-19, Stanislaus County and California had virtually the same percentage of underweight youth in 2006 (2-3%).

While the percentage of children ages four and under who were overweight was higher for California than Stanislaus County in 2006 (15% compared to 13%, respectively), the percentage of overweight youth ages 5-19 was higher for Stanislaus County than the statewide percentage (24% compared to 23%, respectively).

In addition, the percentages of overweight children ages 0-4 in Stanislaus County and California slightly decreased between 2002 and 2006, whereas the percentages of overweight youth ages 5-19 in the County and the state increased during the same time period. From 2002 to 2006, the percentage of overweight children ages 0-4 slightly decreased in both Stanislaus County (from 14% to 13%) and California (from 16% to 15%). During the same time period, the percentage of overweight youth ages 5-19 increased in both Stanislaus County (from 21% to 24%) and California (from 21% to 23%). Between 2002 and 2006, both Stanislaus County and California did not meet the Healthy People 2010 Objective that no more than 5% of children and adolescents ages 6-19 would be overweight or obese.

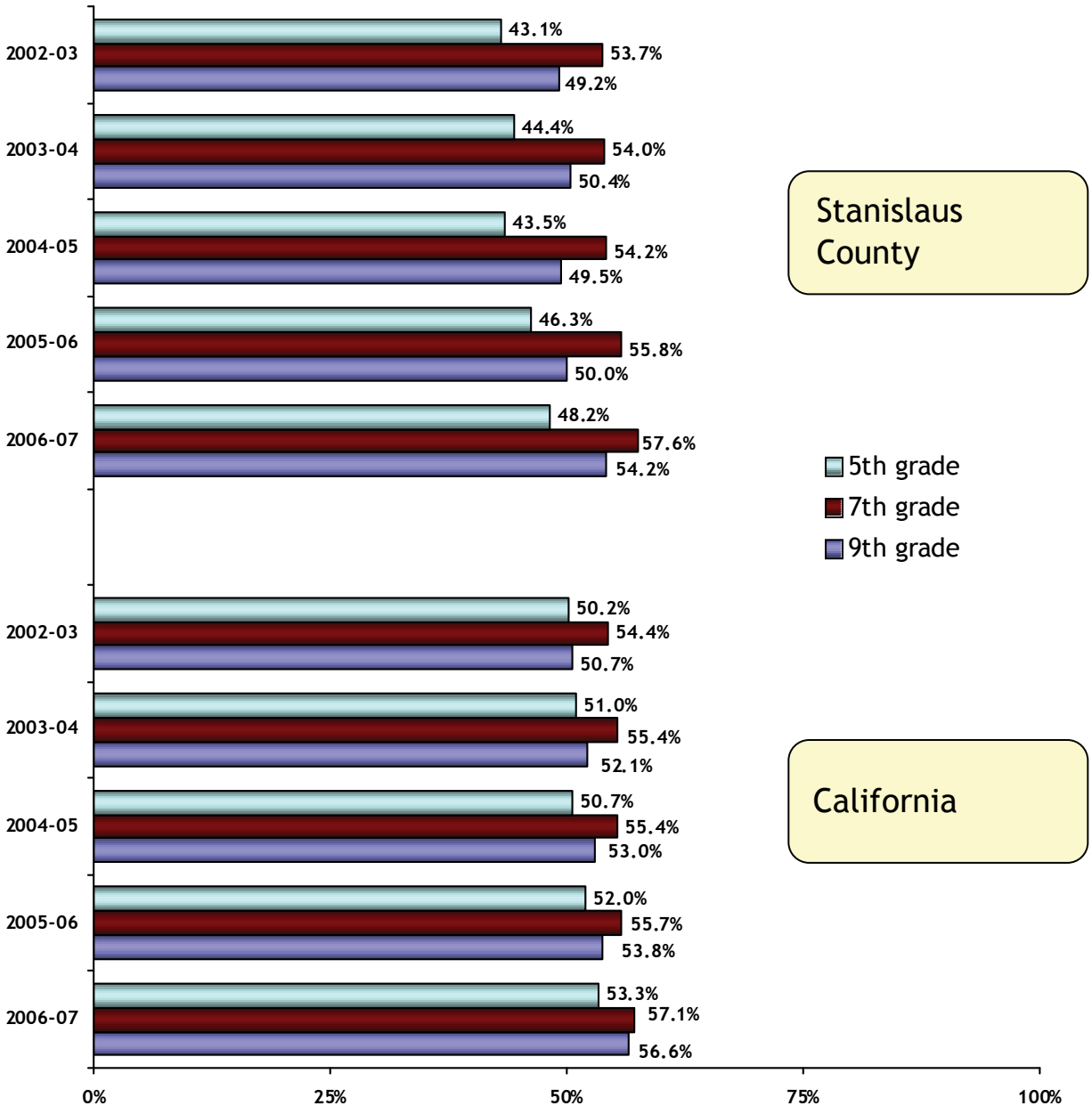
Further, the 2004-2006 California Healthy Kids Survey results for Stanislaus County showed that the percentage of students who were overweight was lowest among 11th graders (13%), compared to 7th and 9th graders (17% and 17%). This was compared to the statewide data, which showed lower percentages of overweight 7th, 9th, and 11th graders than in Stanislaus County. Statewide, the percentage of students who were overweight was lowest for 11th graders (12%), followed by 9th graders (14%), and 7th graders (15%).

Physical Activity - Youth

Why It Is Important

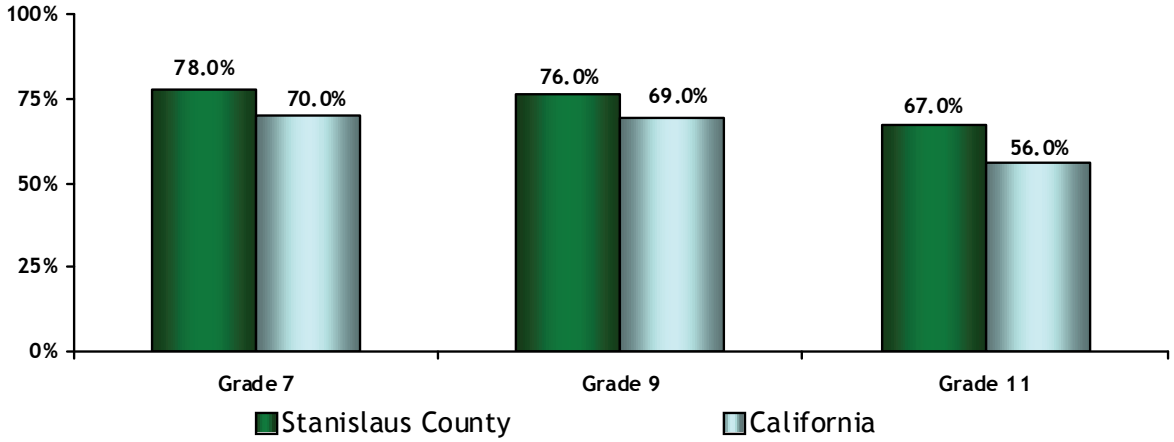
Regular physical activity helps children maintain a healthy weight. Children who are physically fit are less likely to suffer from chronic diseases in childhood and adulthood, and are more likely to become physically active adults, which in turn helps reduce the risks of heart disease and diabetes.

Figure 197: Percentage of Students Achieving 5 or More out of 6 Fitness Standards, by Grade



Source: State of California, Department of Education, Standards and Assessment Division, *California Physical Fitness Report*, 2008.

Figure 198: Percentage of Students Who Exercised or Did a Physical Activity for at Least 20 Minutes that Made Them Sweat and Breathe Hard on Three or More of the Last 7 Days, by Grade Level, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

Note: Data for 5th grade students not available.

New data not available

Data Summary

From the 2002-2003 to the 2006-2007 school years, student "fitness" improved by a small margin for all grades in Stanislaus County. In 2006-2007, 48% of 5th graders, 58% of 7th graders, and 54% of 9th graders achieved five or more out of six fitness standards. Between 2002-2003 and 2006-2007, the percentages of students who achieved five or more out of six fitness standards were consistently higher in California than in Stanislaus County, higher for 9th graders than 5th graders, and highest among 7th graders. During this same time period, the percentages of 5th, 7th, and 9th grade students who achieved five or more fitness standards continuously increased in Stanislaus County and in California.

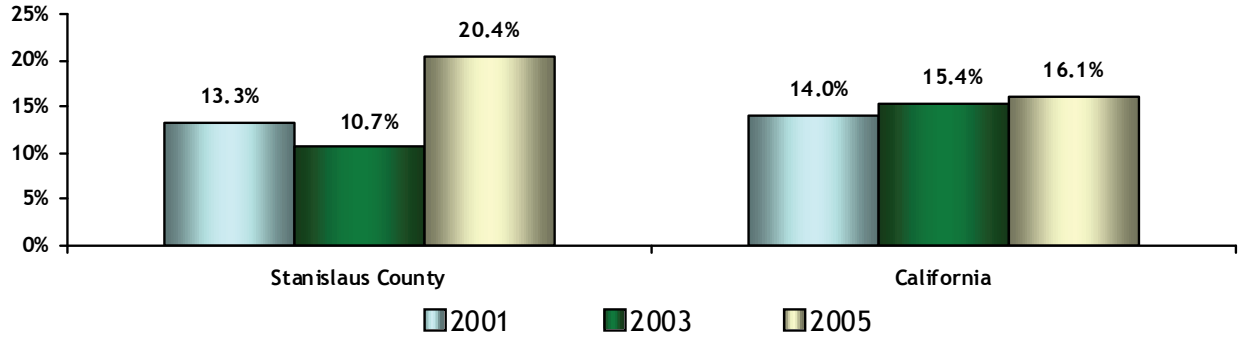
According to the 2004-2006 California Healthy Kids Survey results, the majority of Stanislaus County 7th and 9th graders (78% and 76%, respectively) reported exercising or doing a physical activity for at least 20 minutes that made them sweat and breathe hard on three or more of the seven days prior to taking the survey. The percentage was lowest among 11th grade students in Stanislaus County (67%). Further, Stanislaus County had higher percentages of 7th, 9th, and 11th grade students who reported engaging in a physical activity for at least 20 minutes on three or more of the seven days prior to taking the survey (78%, 76%, and 67%, respectively) than did California (70%, 69%, and 56%, respectively).

Asthma - Youth

Why It Is Important

Asthma is a chronic disease that causes the airways in the lungs to become sore and swollen. In the United States, about 9 million children have asthma. Children have smaller airways than adults, which makes asthma especially serious for them. Children with asthma may experience wheezing, coughing, chest tightness, and trouble breathing.[96] Asthma is the leading cause of activity restriction among children and is the second most common chronic childhood condition.[97]

Figure 199: Percent of Youth Ages 1-17 Ever Diagnosed with Asthma



Source: 2001, 2003, and 2005 California Health Interview Survey.

Stanislaus County 2001 N: 133,000; 2003 N: 138,000; 2005 N: 141,000.

California 2001 N: 8,801,000; 2003 N: 9,021,000; 2005 N: 9,186,000.

Note: Stanislaus County data exclusively for children ages five and under are statistically unstable and thus not used.

New data not available

Data Summary

From 2001 to 2005, the percentage of youth ages 1-17 who had ever been diagnosed with asthma fluctuated in Stanislaus County. In 2005, 20% of youth ages 1-17 in Stanislaus County indicated that they had been diagnosed with asthma, an increase from 13% in 2001 and 11% in 2003. Conversely, the percentage of California youth ages 1-17 ever diagnosed with asthma increased from 14% in 2001 to 16% in 2005.

[96] United States National Library of Medicine, National Institutes of Health, (2008). *MedlinePlus Health Topics: Asthma in Children*. Retrieved January 14, 2008, from http://www.nlm.nih.gov/medlineplus/asthmainchildren.html.

[97] UCLA Center for Health Policy Research, *Policy Brief: Asthma among California's Children, Adults and the Elderly: A Geographic Look by Legislative Districts*, September 2004.

Child Care

Why It Is Important

After food and housing, child care is often the next most expensive item that constitutes a family's household budget. For low-income families, child care can take up 50% or more of a household's income. In many situations, families have found it to be more economical to stay home and take care of children rather than work because their potential salary would not or would barely cover the costs of child care. This represents a burden to both families and society since overall productivity and income decrease due to the lack of access to affordable child care.[98]

Figure 200: Condition of Children & Youth Report, 2007

Category	Selected Findings
Availability of licensed child care slots	Stanislaus County ranked 2nd lowest in the state in its availability of licensed child care for children with parents in the labor force.
Cost of child care and the family budget	Annual income with 2 minimum wage earners is $28,080. Care for one infant in a licensed family child care home would total approximately 21% of total income.
Need for subsidized child care	There are 3,021 children on the Stanislaus Centralized Eligibility List hoping to receive help in paying for their child care. 1,500 of these children are preschool age.
Need for preschool programs	According to estimates, approximately 52% of the 4-year-olds in Stanislaus County are not receiving services in a state or federally funded program.
Number of after school programs	There are 81 sites with 7,278 students attending.

Source: Stanislaus County Children's Council, *Condition of Children & Youth Report*, 2007.

Note: All statistics in this report are from 2006.

[98] Providing Access to Affordable Child Care, United Way of Greater Attleboro/Taunton, <http://www.uwgat.org/contentmgr/showdetails.php/id/364>, 2008.

Figure 201: Number of Children in Stanislaus County

Population	Stanislaus County			California
	2000[1]	2006	00-06 % Change	2006
Children 0-13[2]	108,287	128,559	18.7	7,628,506
Under 2	13,659	17,276	26.5	1,078,951
2 years	6,921	8,731	26.2	539,981
3 years	7,318	9,318	27.3	542,494
4 years	7,684	9,500	23.6	537,387
5 years	7,641	9,747	27.6	547,458
6-13 years	65,064	73,987	13.7	4,382,235
Children 0-5 living in poverty	9,304	10,636[3]	14.3	595,847[3]
Children 0-13 with parents in the labor force*	56,955	67,617***	18.7	3,980,711***
Children 0-13 receiving subsidized child care**	N/A	7,899	N/A	486,327

Source: California Child Care Resource and Referral Network, *The California Child Care Portfolio*, 2007.

[1] Source: United States Census Bureau, 2000.

[2] Source: California Department of Finance Projections, 2006.

[3] Source: American Community Survey, 2006.

* Children living with two parents or single head of household in the labor force.

** Child care slots funded by Head Start, CA Child Development Division, and Department of Social Services, 2006.

*** Network estimate applied to 2006 child population projections.

New data not available

Figure 202: Licensed Child Care Centers and Family Child Care Homes in Stanislaus County, 2006

Facilities	Licensed Child Care Centers		Licensed Family Child Care Home	
Total number of sites		123		559
Total number of slots*	7,111	56%	5,546	44%
Infant slots (under 2 years old)	738	10%	N/A*	N/A*
Preschool slots (2-5 years old)	5819	82%	N/A*	N/A*
School-age slots (6 years and older)	554	8%	N/A*	N/A*
Full-time and part-time slots		75%		85%
Only full-time slots		3%		6%
Only part-time slots		17%		1%
Care available during non-traditional hours**		2%		22%
Language				
English		91%		92%
Spanish		55%		24%
Vietnamese		2%		0%
Chinese, Tagalog, and other languages		18%		10%

Source: California Child Care Resource and Referral Network, *The California Child Care Portfolio*, 2007.

* Breakdown by age not available for family child care homes.

** Evening, weekend, overnight care.

New data not available

Figure 203: Cost of Licensed Care[1] and Housing[2], 2006

Child Care Services	Cost
Care for one infant/toddler	
Licensed family child care home	$6,390
Licensed center	9,906
Care for one preschooler	
Licensed family child care home	5,827
Licensed center	6,771
Housing (rent for 2 bedroom unit)	9,360

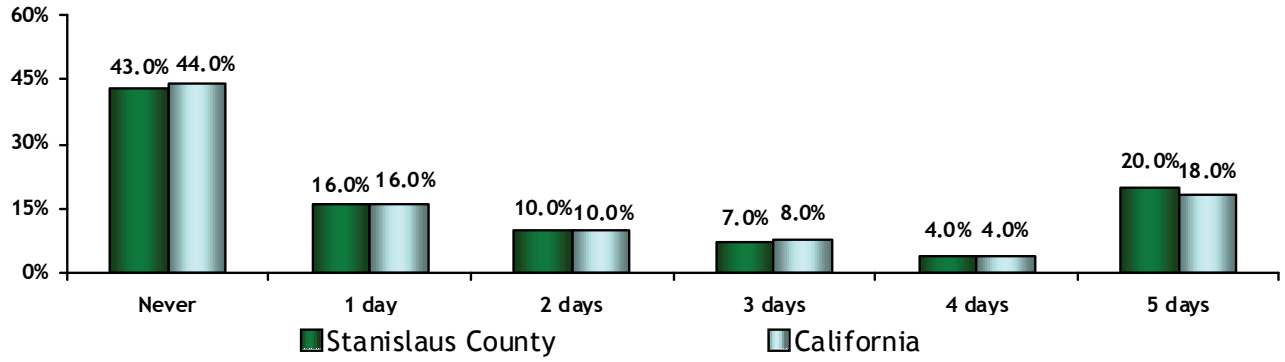
Source: California Child Care Resource and Referral Network, *The California Child Care Portfolio*, 2007.

[1] Source: Regional Market Survey of CA Child Care Providers, 2004-2005.

[2] Source: United States Department of Housing and Urban Development, 2006. Median rent for 2 bedroom unit, 2006.

New data not available

Figure 204: Number of Days 7th Grade Students Are Home Alone During a Normal School Week, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

Note: Data for 5th, 9th, and 11th grade students not available.

New data not available

Data Summary

According to the 2007 *Condition of Children and Youth Report,* Stanislaus County ranked 2nd lowest in the state in its availability of licensed child care for children with parents in the labor force. The report also indicated that child care for one infant in a licensed family child care home would total approximately 21% of the total annual income for two minimum wage earners, which was $28,080 in 2007.

Data from the 2007 *Condition of Children and Youth Report* also showed that of the total number of slots in child care facilities in Stanislaus County (12,657), over half (56%) were licensed child care centers, while 44% were licensed family child care homes. Of the total slots in licensed child care centers, 82% represented slots for preschool children ages 2-5, 10% represented slots for infants ages two and under, and 8% represented slots for school-age children ages six and older.

Further, the 2004-2006 California Healthy Kids Survey results showed that nearly one-third (31%) of 7th grade students in Stanislaus County reported that they are at home alone three or more days during a normal school week, compared to 30% of 7th grade students statewide.

How We're Making a Difference

Stanislaus County CARES

Stanislaus County CARES, a program funded by Stanislaus County Children and Families Commission (SCCFC) and First 5 California, cares about our youngest resources – children ages 0-5. The First 5 California CARES Initiative was developed due to a convincing body of research that indicated that school readiness is improved in children whose Early Care Educators have a B.A. degree or higher, and notes that poor quality can be harmful. In Stanislaus County, a mere 18% of California's Central Valley Early Care and Education (ECE) teachers hold a Bachelor's degree, indicating an 82% disparity in education levels that provide the high quality experiences for preschool children.

Stanislaus County CARES addresses this disparity by providing incentives for ECE teachers/providers to return to college for degree completion and attainment of higher Child Development Permit levels, as well as providing services that support their efforts including college education planning, transcript evaluation, mandatory trainings, and stipends for eligible applicants. Further, for the 81% of Stanislaus County's working families who do not have access to licensed child care and development services, CARES provides community childcare providers (family, friends, and neighbors) training on basic early childhood care and education topics and information on becoming licensed providers.

During 2007-2008 alone, 943 providers were trained to better care for Stanislaus County's children ages 0-5. Concha Alvarez was one of those providers. Concha came to Modesto from Texas when she was five years old, her parents originally from Coahuila Mexico. Concha was married at the age of sixteen, was in an abusive relationship, and then became a divorced and single mother of three. She did not complete high school, and worked full time to support her family.

Concha's involvement in the early childhood education field started when she enrolled her son in Migrant Head Start in 1975. When Concha interacted with the children there, the supervisor was so impressed that Head Start offered her a job. She returned to college, eventually obtaining a Child Development Teacher Permit, Site Supervisor Permit, and Child Development Director Permit. Employed at the same agency for 32 years, Concha went from being Assistant to Teacher, Head Teacher, Center Supervisor, Program Specialist, Program Compliance Coordinator, to her current position of Program Coordinator.

CARES played a large role in Concha's success. When she applied for a CARES stipend eight years ago, for the first time she felt valued as a child care professional. The stipend tremendously helped her financially and she used it each year to return to school to pursue her degrees in Early Childhood. She states, "CARES motivated me to continue my education."

Through her own perseverance as well as support from CARES, Concha did receive her AA and BA in Child Development. Currently, she is pursuing her MA in Human Development, and plans on graduating in December, 2008. Concha says, "This is a dream come true, due to all the challenges in my life. My mother, who is my inspiration, encouraged me to believe in myself." With that encouragement, along with the support from CARES, Concha is an inspiration to all of the children she works with in our community!

Public School Enrollment

Why It Is Important

Looking at school enrollment over a period of time provides insight on population trends. School enrollment is of particular concern to school districts since education funding, in California, is largely based on enrollment numbers.

Figure 205: Number of Students Enrolled in Public K-12 Schools, by School District

School District	2003-04	2004-05	2005-06	2006-07	2007-08	03-08 % Change
Ceres Unified	10,211	10,479	10,896	11,885	12,478	22.2
Chatom Union Elementary	690	723	702	683	700	1.4
Denair Unified	1,311	1,416	1,468	1,520	1,600	22.0
Empire Union Elementary	4,066	3,970	3,832	3,647	3,499	-13.9
Gratton Elementary	104	104	115	125	119	14.4
Hart-Ransom Union Elementary	967	987	986	977	1,001	3.5
Hickman Community Charter	1,061	1,054	1,074	1,029	1,060	-0.1
Hughson Unified	2,048	2,129	2,181	2,175	2,165	5.7
Keyes Union Elementary	1,805	1,842	1,893	1,368	1,485	-17.7
Knights Ferry Elementary	139	145	141	133	142	2.2
La Grange Elementary	38	36	73	80	68	78.9
Modesto City Elementary	18,803	18,025	17,345	16,680	16,147	-14.1
Modesto City High	15,581	15,856	15,967	15,904	15,742	1.0
Newman-Crows Landing Unified	2,293	2,459	2,629	3,069	2,650	15.6
Oakdale Joint Unified	4,984	5,058	5,200	5,326	5,234	5.0
Paradise Elementary	129	140	148	153	182	41.1
Patterson Joint Unified	4,407	4,659	5,087	5,414	5,669	28.6
Riverbank Unified	3,102	3,118	3,157	3,000	2,903	-6.4
Roberts Ferry Union Elementary	110	101	108	110	107	-2.7
Salida Union Elementary	3,458	3,382	3,411	3,334	3,135	-9.3
Shiloh Elementary	142	142	131	130	133	-6.3
Stanislaus County Office of Education	1,411	1,557	1,365	1,278	2,213	56.8
Stanislaus Union Elementary	3,267	3,314	3,251	3,261	3,224	-1.3
Sylvan Union Elementary	7,733	8,014	7,991	7,987	8,217	6.3
Turlock Unified	13,536*	13,787	13,982	13,944	13,890	2.6
Valley Home Joint Elementary	166	158	162	165	159	-4.2
Waterford Unified	3,135	3,388	3,472	3,617	3,790	20.9
Stanislaus County	**104,697**	**106,043**	**106,767**	**106,994**	**107,712**	**2.9**
California	6,298,783	6,322,141	6,312,436	6,286,943	6,258,007	-0.6

Source: State of California, Department of Education, *Educational Demographics Unit*, 2008.

* Data reflect enrollment data for Turlock Joint Elementary and Turlock Joint Union High School Districts.

Data Summary

In the 2007-2008 school year, Stanislaus County had 107,712 students enrolled in public K-12 schools. Based on the 2007-2008 enrollment data by school district, the districts with the highest number of students enrolled were: Modesto City Elementary (16,147 students), Modesto City High (15,742 students), Turlock Unified (13,890 students), and Ceres Unified (12,478 students). Conversely, La Grange Elementary and Roberts Ferry Union Elementary School Districts had the lowest number enrolled students in 2007-2008 (68 and 107 students, respectively). Further, between 2003-2004 and 2007-2008, the number of students enrolled in La Grange Elementary School District increased 79%. During the same time period, the number of students enrolled in the Stanislaus County Office of Education School District also increased 57%. However, for Keyes Union Elementary School District, the number of students enrolled in its district decreased 18%.

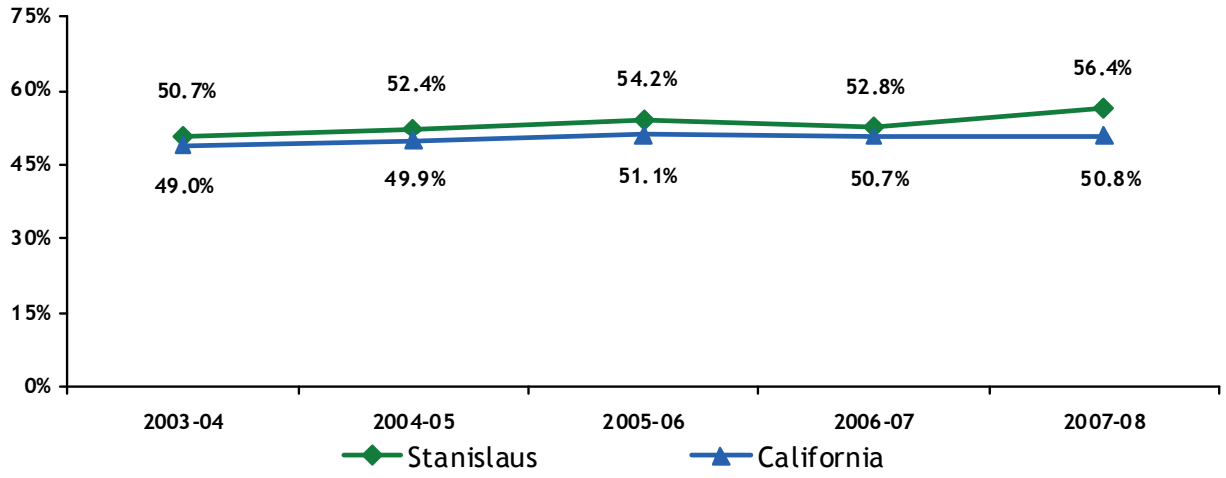
Free and Reduced Cost Meals

Why It Is Important

The National School Lunch Program qualifies low-income children living in families below 185% of the Federal Poverty Level for reduced-cost meals and those below 130% of the Federal Poverty Level for free meals.

Free and reduced cost meal programs serve children who might otherwise go without meals or choose nutritionally inferior food because of cost. School breakfasts and lunches also provide a nutritionally balanced and appropriately portioned meal at the lowest possible price. Moreover, studies have shown that when children's nutritional needs are met they have fewer attendance and discipline problems and are more attentive in class.[99]

Figure 206: Percentage of Students Receiving Free or Reduced Cost Meals



Source: State of California, Department of Education, Educational Demographics Unit, 2008.

[99] California Department of Education (2008). *School Lunch.* Retrieved July, 2008, from http://www.cde.ca.gov/ls/nu/sn/nslp.asp.

Figure 207: Percentage of Students Receiving Free or Reduced Cost Meals by School District

School District	2003-04	2004-05	2005-06	2006-07	2007-08	03-08 Net Change
Ceres Unified	59.8%	59.6%	65.2%	61.9%	67.8%	8.0
Chatom Union Elementary	79.8	76.2	75.9	82.2	77.0	-2.8
Denair Unified	38.0	43.6	34.6	37.1	34.9	-3.1
Empire Union Elementary	57.9	65.5	66.2	66.9	63.7	5.8
Gratton Elementary	4.8	4.8	1.7	0.8	4.2	-0.6
Hart-Ransom Union Elementary	20.9	26.3	26.3	26.6	26.6	5.7
Hickman Community Charter	15.7	14.6	28.3	30.1	37.1	21.4
Hughson Unified	44.3	41.9	46.2	42.9	46.8	2.5
Hughson Union Elementary	N/A	N/A	N/A	N/A	N/A	N/A
Hughson Union High	N/A	N/A	N/A	N/A	N/A	N/A
Keyes Union Elementary	50.6	49.7	30.0	59.2	59.0	8.4
Knights Ferry Elementary	12.5	22.1	14.8	18.0	17.6	5.1
La Grange Elementary	65.0	62.5	61.1	42.5	56.5	-8.5
Modesto City Elementary	73.8	75.1	76.0	75.3	77.5	3.7
Modesto City High	32.7	37.6	41.3	42.5	43.4	10.7
Newman-Crows Landing Unified	55.7	60.4	57.9	50.1	64.7	9.0
Oakdale Joint Unified	36.9	37.3	35.6	34.7	33.3	-3.6
Oakdale Joint Union High	N/A	N/A	N/A	N/A	N/A	N/A
Oakdale Union Elementary	N/A	N/A	N/A	N/A	N/A	N/A
Paradise Elementary	36.4	35.7	31.8	34.7	39.4	3.0
Patterson Joint Unified	57.6	58.0	55.0	56.4	56.8	-0.8
Riverbank Elementary	N/A	N/A	N/A	N/A	N/A	N/A
Riverbank Unified	58.3	60.0	63.6	62.8	61.2	2.9
Roberts Ferry Union Elementary	45.5	34.7	37.1	37.8	36.4	-9.1
Salida Union Elementary	41.2	43.8	43.5	49.7	45.8	4.6
Shiloh Elementary	53.5	55.3	61.1	64.7	70.7	17.2
Stanislaus County Office of Education	51.2	23.8	77.1	72.6	78.1	26.9
Stanislaus Union Elementary	49.7	50.7	53.1	54.1	58.0	8.3
Sylvan Union Elementary	33.8	33.9	39.1	40.1	45.3	11.5
Turlock Joint Elementary	56.6	N/A	N/A	N/A	N/A	N/A
Turlock Joint Union High	26.1	N/A	N/A	N/A	N/A	N/A
Turlock Unified	N/A	49.2	49.6	38.8	52.1	N/A
Valley Home Joint Elementary	49.4	46.8	50.6	45.4	48.4	-1.0
Waterford Elementary	N/A	N/A	N/A	N/A	N/A	N/A
Waterford Unified	67.9	75.7	62.9	70.7	66.2	-1.7
Stanislaus County total	**50.7**	**52.4**	**54.2**	**52.8**	**56.4**	5.7
State total	49.0	49.9	51.1	50.7	50.8	1.8

Source: State of California, Department of Education, Educational Demographics Unit, 2008.

Data Summary

Between the 2003-2004 and the 2007-2008 school years, the percentage of students who received free or reduced cost meals increased in Stanislaus County (from 51% to 56%) and in California (49% to 51%). Among individual school districts within Stanislaus County, the district with the highest percentage of students who received free or reduced cost meals in 2007-2008 was Stanislaus County Office of Education (78%), followed by Modesto City Elementary (78%), Chatom Union Elementary (77%), and Shiloh Elementary (71%). The school district with the smallest percentage of students in the free or reduced cost lunch program was Gratton Elementary (4%). Further, Stanislaus County Office of Education had the greatest net increase in the percentage of students who received free or reduced cost meals between 2003-2004 and 2007-2008 (a net increase of 26.9), followed by Hickman Community Charter (a net increase of 21.4).

Test Scores - STAR (California Standards Test)

Why It Is Important

Since 1998, the Standardized Testing and Reporting (STAR) program has been California's choice for assessing students' academic proficiency. Every year, second through eleventh graders take a test that reflects the state's academic content standards and nationally normed standardized test.[100]

Figure 208: Grade 3: Stanislaus County

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	98.0	98.8	98.8	98.9	98.7	0.7
Percent proficient or above	29.0	26.0	27.0	31.0	32.0	3.0
Mathematics						
Percent of students tested	98.0	98.7	98.7	98.8	98.6	0.6
Percent proficient or above	37.0	43.0	48.0	52.0	54.0	17.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 209: Grade 3: California

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	98.0	98.7	98.7	98.7	98.7	0.7
Percent proficient or above	33.0	30.0	31.0	36.0	37.0	4.0
Mathematics						
Percent of students tested	98.0	98.7	98.6	98.6	98.6	0.6
Percent proficient or above	46.0	48.0	54.0	58.0	58.0	12.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

[100] STAR testing, Oak Park United School District, 2008.

Figure 210: Grade 5: Stanislaus County

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	98.0	98.6	98.7	98.7	98.8	0.8
Percent proficient or above	32.0	38.0	39.0	39.0	39.0	7.0
Mathematics						
Percent of students tested	98.0	98.6	98.7	98.6	98.6	0.6
Percent proficient or above	27.0	32.0	38.0	42.0	43.0	16.0
Science						
Percent of students tested	N/A	97.0	98.0	98.4	98.4	N/A
Percent proficient or above	N/A	20.0	23.0	25.0	30.0	N/A

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 211: Grade 5: California

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	98.0	98.7	98.7	98.7	98.8	0.8
Percent proficient or above	36.0	40.0	43.0	43.0	44.0	8.0
Mathematics						
Percent of students tested	98.0	98.7	98.6	98.7	98.7	0.7
Percent proficient or above	35.0	38.0	44.0	48.0	49.0	14.0
Science						
Percent of students tested	N/A	97.8	98.3	98.5	98.6	N/A
Percent proficient or above	N/A	24.0	28.0	32.0	37.0	N/A

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 212: Grade 7: Stanislaus County

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	98.0	97.9	98.7	98.4	98.5	0.5
Percent proficient or above	34.0	34.0	40.0	41.0	44.0	10.0
Mathematics						
Percent of students tested	98.0	97.8	98.6	98.2	94.6	-3.4
Percent proficient or above	27.0	27.0	31.0	36.0	37.0	10.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 213: Grade 7: California

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	98.0	98.5	98.4	98.4	98.5	0.5
Percent proficient or above	36.0	36.0	43.0	43.0	46.0	10.0
Mathematics						
Percent of students tested	98.0	98.4	98.3	98.3	93.9	-4.1
Percent proficient or above	30.0	33.0	37.0	41.0	39.0	9.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 214: Grade 9: Stanislaus County

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	96.0	96.1	97.3	97.5	97.6	1.6
Percent proficient or above	36.0	38.0	43.0	44.0	45.0	9.0
General Mathematics						
Percent of students tested	52.0	46.9	47.2	43.9	31.4	-20.6
Percent proficient or above	20.0	16.0	20.0	16.0	14.0	-6.0
Algebra I						
Percent of students tested	27.0	31.2	31.9	35.6	47.4	20.4
Percent proficient or above	26.0	26.0	27.0	30.0	26.0	0.0
Geometry						
Percent of students tested	11.0	11.5	12.7	14.1	15.2	4.2
Percent proficient or above	61.0	62.0	65.0	54.0	53.0	-8.0
Biology / Life Sciences						
Percent of students tested	7.0	9.8	9.6	15.3	19.6	12.6
Percent proficient or above	39.0	30.0	37.0	38.0	37.0	-2.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 215: Grade 9: California

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	95.0	95.9	96.6	96.6	96.6	1.6
Percent proficient or above	38.0	37.0	43.0	44.0	47.0	9.0
General Mathematics						
Percent of students tested	32.0	27.6	24.6	20.6	16.7	-15.3
Percent proficient or above	14.0	13.0	14.0	13.0	13.0	-1.0
Algebra I						
Percent of students tested	37.0	43.1	46.4	48.9	51.6	14.6
Percent proficient or above	19.0	15.0	16.0	19.0	17.0	-2.0
Geometry						
Percent of students tested	16.0	17.4	19.0	21.0	22.1	6.1
Percent proficient or above	47.0	43.0	47.0	45.0	44.0	-3.0
Biology / Life Sciences						
Percent of students tested	21.0	23.9	27.0	29.7	31.3	10.3
Percent proficient or above	46.0	40.0	42.0	44.0	47.0	1.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 216: Grade 11: Stanislaus County

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	94.0	93.2	96.0	97.0	96.7	2.7
Percent proficient or above	27.0	31.0	34.0	35.0	33.0	6.0
Algebra I						
Percent of students tested	21.0	21.6	22.2	25.4	24.1	3.1
Percent proficient or above	15.0	6.0	8.0	10.0	10.0	-5.0
Algebra II						
Percent of students tested	16.0	16.4	16.4	15.4	17.1	1.1
Percent proficient or above	23.0	16.0	19.0	19.0	23.0	0.0
Geometry						
Percent of students tested	18.0	18.3	17.8	18.6	19.5	1.5
Percent proficient or above	9.0	9.0	12.0	13.0	10.0	1.0
Summative High School Mathematics						
Percent of students tested	9.0	7.3	8.5	9.2	9.8	0.8
Percent proficient or above	39.0	49.0	50.0	54.0	52.0	13.0
U.S. History						
Percent of students tested	91.0	91.0	93.8	94.8	94.8	3.8
Percent proficient or above	33.0	33.0	36.0	35.0	35.0	2.0
Biology / Life Sciences						
Percent of students tested	24.0	22.1	21.8	17.4	15.8	-8.2
Percent proficient or above	51.0	48.0	46.0	40.0	36.0	-15.0
Chemistry						
Percent of students tested	15.0	18.5	19.6	22.2	24.1	9.1
Percent proficient or above	18.0	18.0	23.0	26.0	29.0	11.0
Physics						
Percent of students tested	1.0	1.7	1.7	2.3	3.4	2.4
Percent proficient or above	60.0	45.0	48.0	35.0	41.0	-19.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Figure 217: Grade 11: California

Subject	2003	2004	2005	2006	2007	03-07 Net Change
English Language Arts						
Percent of students tested	91.0	93.3	94.7	95.0	95.5	4.5
Percent proficient or above	32.0	32.0	36.0	36.0	37.0	5.0
Algebra I						
Percent of students tested	13.0	15.8	16.8	16.4	15.6	2.6
Percent proficient or above	6.0	4.0	4.0	6.0	5.0	-1.0
Algebra II						
Percent of students tested	20.0	21.4	21.9	22.9	23.7	3.7
Percent proficient or above	15.0	10.0	12.0	10.0	12.0	-3.0
Geometry						
Percent of students tested	15.0	17.0	17.7	17.8	17.9	2.9
Percent proficient or above	8.0	5.0	7.0	7.0	6.0	-2.0
Summative High School Mathematics						
Percent of students tested	15.0	16.5	17.8	19.0	20.0	5.0
Percent proficient or above	44.0	39.0	43.0	43.0	44.0	0.0
U.S. History						
Percent of students tested	88.0	91.2	92.7	93.4	93.0	5.0
Percent proficient or above	34.0	32.0	37.0	35.0	35.0	1.0
Biology / Life Sciences						
Percent of students tested	12.0	17.1	19.9	20.7	20.6	8.6
Percent proficient or above	34.0	30.0	30.0	32.0	36.0	2.0
Chemistry						
Percent of students tested	23.0	25.3	25.6	26.7	27.2	4.2
Percent proficient or above	25.0	23.0	22.0	22.0	26.0	1.0
Physics						
Percent of students tested	7.0	7.2	7.9	8.4	9.0	2.0
Percent proficient or above	39.0	41.0	40.0	41.0	42.0	3.0

Source: State of California, Department of Education, *STAR District/School Summary Report*, 2008.

Data Summary

One of the most powerful predictors of later academic success is a child's reading level in third grade. In Stanislaus County, only 32% of third graders were deemed proficient or above in the English Language Arts portion on the 2007 California Standards Test (STAR), compared to 37% of California third graders. However, there was improvement for Stanislaus County third graders from 29% who were deemed proficient or above in 2003, to 32% in 2007. In fact, in the English Language Arts subject area, the percentages of students who scored proficient or above between 2003 and 2007 increased for all grade levels in Stanislaus County and California.

When 2007 STAR test scores for Stanislaus County and California were compared, the percentages of 3rd, 5th, and 7th grade students who scored proficient or above in English, Math, and Science was lower in Stanislaus County than in California. However, the percentages of 9th and 11th grade students who scored proficient or above were higher in Stanislaus County than in California in many subject areas including General Mathematics, Algebra I, Geometry, Summative High School Mathematics, and Chemistry.

Test Scores - Academic Performance Index (API)

Why It Is Important

The Academic Performance Index (API) is a measurement of school achievement for accountability purposes developed as a result of the 1999 Public Schools Accountability Act (PSAA). The API summarizes a school's performance on each year's STAR scores and is based on the performance of individual pupils on STAR content areas, as measured through national percentile rankings (NPRs) and scored on a scale of 200 to 1,000.

Figure 218: Academic Performance Index Scores by School District

School District	2003	2004	2005	2006	2007	03-07 % Change
Ceres Unified	676	687	701	716	721	6.7
Chatom Union Elementary	659	651	692	713	721	9.4
Denair Unified	692	688	699	695	706	2.0
Empire Union Elementary	717	723	748	752	768	7.1
Gratton Elementary	823*	821*	842*	866*	879*	6.8
Hart-Ransom Union Elementary	750	773	767	778	779	3.9
Hickman Community Charter	760	758	790	809	828	8.9
Hughson Unified	675	705	713	741	754	11.7
Keyes Union	640**	653**	659**	707	702	9.7
Knights Ferry Elementary	906	834*	866	892	863	-4.7
La Grange Elementary	652*	686*	728*	727*	784*	20.2
Modesto City Elementary	662	671	683	699	723	9.2
Modesto City High	656	683	701	708	711	8.4
Newman-Crows Landing Unified	659	670	701	711	720	9.3
Oakdale Joint Unified	745	742	750	764	757	1.6
Paradise Elementary	754	786*	785	828*	808*	7.2
Patterson Joint Unified	649	658	672	671	677	4.3
Riverbank Unified	633	649	680	686	682	7.7
Roberts Ferry Union Elementary	739*	785*	796*	833*	811*	9.7
Salida Union Elementary	734	742	760	751	761	3.7
Shiloh Elementary	771	741	756	750*	750*	-2.7
Stanislaus County Office of Education	486	449	462	496	471	-3.1
Stanislaus Union Elementary	719	725	732	743	745	3.6

(cont.)

Academic Performance Index Scores by School District (cont.)

School District	2003	2004	2005	2006	2007	03-07 % Change
Sylvan Union Elementary	759	764	776	785	801	5.5
Turlock Unified	668***	681***	699	715	723	8.2
Valley Home Joint Elementary	774	767	771	786	783	1.2
Waterford Unified	631	632	711	736	731	15.8

Source: State of California, Department of Education, Policy and Evaluation Division, 2008.

* API was calculated for a small school, defined as having between 11 and 99 Standardized Testing and Report (STAR) test scores including in the API (valid scores). APIs based on small numbers of students are less reliable and therefore should be carefully interpreted.

** Data for Keyes Union Elementary.

*** Data reflect average API score of Turlock Joint Elementary and Turlock Joint Union High School Districts.

Data Summary

Between 2003 and 2007, all school districts in Stanislaus County improved their API scores, except Knights Ferry Elementary (5% decrease), Stanislaus County Office of Education (3% decrease), and Shiloh Elementary (3% decrease). The schools districts with the greatest improvement in API scores from 2003 to 2007 were: La Grange Elementary (20% increase), Waterford Unified (16% increase), and Hughson Unified (12% increase). In 2007, Gratton Elementary School District had the highest API score (879) in Stanislaus County, while Stanislaus County Office of Education had the lowest API score (471).

Special Education - Youth

Why It Is Important

Federal law requires that school districts provide a free appropriate public education to eligible children with disabilities. A "free appropriate public education" means special education and related services are to be provided as described in an individualized education program (IEP). Data on special education programs and student outcomes can equip districts to serve the unique needs of students with disabilities so that each student can meet or exceed high standards of academic achievement.

Figure 219: Special Education Enrollment Counts by Selected Disabilities, Stanislaus County

Type of Disability	2003	2004	2005	2006	2007	03-07 % Change
Autism	251	320	373	466	571	127.5
Deaf	56	49	52	59	55	-1.8
Emotional Disturbance	565	594	587	578	534	-5.5
Mental Retardation	1,269	1,286	1,245	1,177	1,108	-12.7
Visual Impairment	71	76	77	77	68	-4.2
Multiple Disability	40	26	23	20	50	25.0
Total enrollment (all types)	**12,828**	**12,995**	**13,126**	**13,097**	**12,703**	**-1.0**

Source: State of California, Department of Education, Special Education Division, *Special Education Enrollment by Age and Disability*, 2008.
Note: Data include students ages 0-22 years old.

Figure 220: Special Education Enrollment Counts by Selected Disabilities, California

Type of Disability	2003	2004	2005	2006	2007	03-07 % Change
Autism	24,943	29,370	34,668	39,711	46,196	85.2
Deaf	4,510	4,462	4,337	4,242	4,185	-7.2
Emotional Disturbance	27,292	27,912	27,512	27,081	27,199	-0.3
Mental Retardation	44,017	44,263	43,739	43,522	43,113	-2.1
Visual Impairment	4,599	4,798	4,761	4,697	4,530	-1.5
Multiple Disability	6,606	5,926	6,125	5,673	5,476	-17.1
Total enrollment (all types)	**681,980**	**681,969**	**683,178**	**679,648**	**677,875**	**-0.6**

Source: State of California, Department of Education, Special Education Division, *Special Education Enrollment by Age and Disability*, 2008.
Note: Data include students ages 0-22 years old.

Data Summary

From 2003 to 2007, the overall number of students enrolled in special education decreased by 1% in both Stanislaus County and California. During this time period, the number of students enrolled in special education with autism increased 128% in Stanislaus County, from 251 students in 2003 to 571 students in 2007. Statewide, the number of students enrolled in special education with autism increased 85%, from 24,943 students in 2003 to 46,196 students in 2007.

Truancy

Why It Is Important

Any time that a student is not at school is time spent not learning in the classroom and can affect a child's ability to stay on top of their school work and subject matter. Absenteeism, like school enrollment, is also important to schools since they receive funding based on student attendance.

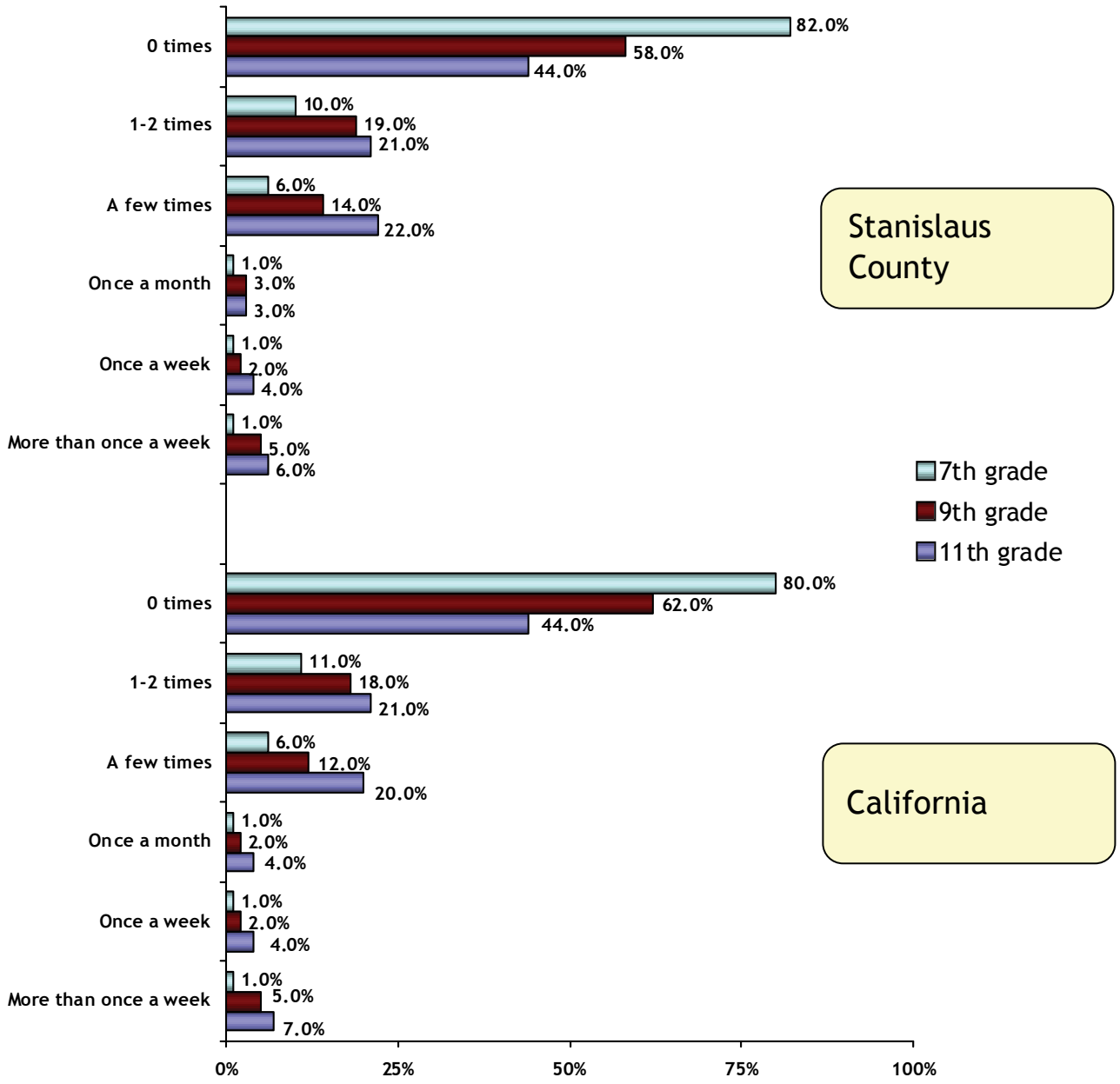
Figure 221: Percentage of Students with Unexcused Absence or Tardy on Three or More Days by School District

School District	2004-05	2005-06	2006-07	04-07 Net Change
Ceres Unified	37.1%	32.4%	40.2%	3.1
Chatom Union Elementary	14.4	23.9	2.6	-11.8
Denair Unified	12.5	13.4	13.2	0.7
Empire Union Elementary	15.3	25.0	17.9	2.6
Gratton Elementary	13.5	4.4	4.0	-9.5
Hart-Ransom Union Elementary	0.1	2.7	28.1	28.0
Hickman Community Charter	2.6	24.1	16.3	13.7
Hughson Unified	4.1	34.6	3.1	-1.0
Keyes Union	10.6	8.1	7.4	-3.2
Knights Ferry Elementary	3.5	5.7	37.6	34.1
La Grange Elementary	8.3	0.0	15.0	6.7
Modesto City Elementary	25.7	26.7	33.3	7.6
Modesto City High	16.0	15.9	81.9	65.9
Newman-Crows Landing Unified	22.6	41.4	17.6	-5.0
Oakdale Joint Unified	28.9	27.8	54.6	25.7
Paradise Elementary	2.1	5.4	35.3	33.2
Patterson Joint Unified	24.7	23.0	25.6	0.9
Riverbank Unified	13.7	26.3	18.3	4.6
Roberts Ferry Union Elementary	4.0	7.4	7.3	3.3
Salida Union Elementary	19.5	3.1	19.6	0.1
Shiloh Elementary	2.8	0.0	41.5	38.7
Stanislaus Union Elementary	22.6	25.7	20.2	-2.4
Sylvan Union Elementary	7.9	8.5	8.7	0.8
Turlock Unified	27.9	40.0	27.5	-0.4
Valley Home Joint Elementary	3.8	4.9	17.6	13.8
Waterford Unified	1.6	26.5	16.9	15.3
Stanislaus County	**21.0**	**24.7**	**36.3**	**15.3**
California	22.6	24.6	25.2	2.6

Source: State of California, Department of Education, Policy and Evaluation Division, 2008.

Note: Data for Stanislaus County Office of Education were not used due to its oddly high data in 2006-2007.

Figure 222: Number of Times in the Past 12 Months Students Skipped School or Cut Classes by Grade Level, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

Note: Data for 5th grade students not available.

New data not available

Data Summary

In the 2006-2007 school year, Modesto City High School District had the greatest percentage of students who had any unexcused absence or tardy on three or more days (82%), and the greatest net increase since the 2004-2005 school year (a net increase of 65.9). This is followed by Shiloh Elementary with 42% of students who had any unexcused absence or tardy on three or more days in 2006-2007, a net increase of 38.7 from 2.8% in 2004-2005. On the contrary, Chatom Union Elementary School District had the smallest percentage of students who had any unexcused absence or tardy on three or more days in 2006-2007 (3%) and the greatest net decrease since the 2004-2005 school year (a net decrease of 11.8).

According to the 2004-2006 California Healthy Kids Survey Results, the percentages of students who skipped school or cut classes in the twelve months prior to taking the survey were highest among 11th graders, followed by 9th and 7th graders, and were similar for Stanislaus County and statewide. In Stanislaus County, 13% of 11th grade students had skipped school or cut classes once a month or more in the twelve months prior to taking the survey, compared to 10% of 9th graders, and 3% of 7th graders.

High School Dropout Rates

Why It Is Important

Dropout rates are indicators of those students who interrupt and may not continue their education, thereby increasing the likelihood they will not meet the minimum work skills required by the workforce and community. More than 24% of California public high school students dropped out in the 2006-07 school year, according to figures released on July 16, 2008 by the state Department of Education.[101] The data were compiled from a newly implemented tracking system that issues each student an identifier number. The number enables officials to monitor each student as he or she progresses through school, allowing for a more accurate accounting. According to the new system that started tracking students in 2002, 68% of students graduated, 24% dropped out, and 8% withdrew—completing high school equivalency diplomas, moving out of state, or transferring to private school.[102] The new data revealed high dropout rates for minority students: 41% of black students, 31% of Native American students, 30% of Hispanic students, and 28% of Pacific Islander students.[103] White students had a 15% dropout rate, while Asians had a 10% rate.[104]

Figure 223: Condition of Children & Youth Report, Stanislaus County, 2007

Category	Selected Findings
Total number of K-12 students	107,712 students
Total number of high school students (9-12)	33,682 students
High school graduation rate*	78%
Expulsion rate	0.54%

Source: Stanislaus County Children's Council, *Condition of Children & Youth Report*, 2008.

* Enrolled 7,667, graduated 5,965; does not include GED.

[101] Contra Costa Times, *"24 percent of California high school students drop out,"* July 16, 2008.
[102] Ibid.
[103] Ibid.
[104] Ibid.

Figure 224: Annual High School Dropout Rates* Per 100 Students by School District

School District	2002-03	2003-04	2004-05	2005-06	2006-07	02-07 Net Change
Ceres Unified	6.5	4.6	5.8	9.3	4.6	-1.9
Denair Unified	0.4	0.4	1.0	0.6	5.3	4.9
Hughson Unified	0.5	2.0	1.4	0.5	2.1	1.6
Keyes Union	0.0	0.0	0.0	0.0	7.6	7.6
Modesto City High	3.6	4.0	5.6	6.3	4.7	1.1
Newman-Crows Landing Unified	0.8	1.4	0.1	0.3	2.2	1.4
Oakdale Joint Unified	1.7	0.7	0.8	1.7	3.5	1.8
Patterson Joint Unified	2.1	3.3	2.2	1.9	4.6	2.5
Riverbank Unified	2.5	1.1	3.7	2.0	3.8	1.3
Stanislaus County Office of Education	2.5	0.0	16.4	2.3	N/A	N/A
Turlock Unified	4.4**	2.9	2.1	3.0	4.3	-0.1
Waterford Unified	0.0	3.8	2.6	12.8	8.2	8.2
Stanislaus County	**3.4**	**3.3**	**4.6**	**5.3**	**5.3**	**1.9**
California	3.1	3.2	3.0	3.4	5.5	2.4

Source: State of California, Department of Education, Policy and Evaluation Division, 2008.

* The 1-year dropout rate is the percent of dropouts during a single year, calculated from the actual data submitted. It is also called "annual" or "event" rate, and it is the dropout rate used by the National Center for Education Statistics to compare states and school districts.

** Data for Turlock Joint Union High School District.

Figure 225: Four-Year High School Dropout Rates* Per 100 Students by School District

School District	2002-03	2003-04	2004-05	2005-06	2006-07	02-07 Net Change
Ceres Unified	24.8	18.3	22.7	36.2	18.6	-6.2
Denair Unified	1.8	1.7	4.1	2.3	19.0	17.2
Hughson Unified	2.0	7.8	5.8	2.1	9.0	7.0
Keyes Union	0.0	0.0	0.0	0.0	31.0	31.0
Modesto City High	14.2	15.3	21.5	23.1	18.4	4.2
Newman-Crows Landing Unified	3.3	5.5	0.5	1.1	8.3	5.0
Oakdale Joint Unified	6.8	2.7	3.4	6.9	13.4	6.6
Patterson Joint Unified	8.7	13.6	8.2	8.7	18.4	9.7
Riverbank Unified	10.1	4.6	15.5	8.5	15.7	5.6
Stanislaus County Office of Education	8.5	0.0	53.5	9.8	N/A	N/A
Turlock Unified	18.3**	11.9	8.6	12.3	16.4	-1.9
Waterford Unified	0.0	14.9	10.0	42.8	29.7	29.7
Stanislaus County	**13.7**	**12.8**	**17.9**	**20.0**	**20.5**	**6.8**
California	12.5	12.9	12.4	14.0	21.1	8.6

Source: State of California, Department of Education, Policy and Evaluation Division, 2008.

* The 4-year dropout rate is an estimate of the percent of students who would drop out during a four-year period, based on data collected for a single year.

** Data for Turlock Joint Union High School District.

Data Summary

According to the 2007 *Condition of Children and Youth Report,* 78% of the total number of high school students in Stanislaus County (33,682) graduated from high school. During the 2006-2007 school year, Waterford Unified and Keyes Union School Districts had the highest annual high school dropout rates per 100 students in Stanislaus County. Based on these annual dropout rates, it is estimated that almost one-third of high school students in Waterford Unified and Keyes Union School Districts dropped out of high school during a four year period (30% and 31%, respectively).

Between 2002 and 2006, Stanislaus County had consistently higher annual dropout rates than did California. However, Stanislaus County had virtually the same annual dropout rate as the state in 2006-2007. Furthermore, Stanislaus County also had consistently higher four-year dropout rates than did California between 2002 and 2006, with the exception of the 2003-2004 and 2006-2007 school years where the four-year dropout rates were virtually the same in the County and statewide.

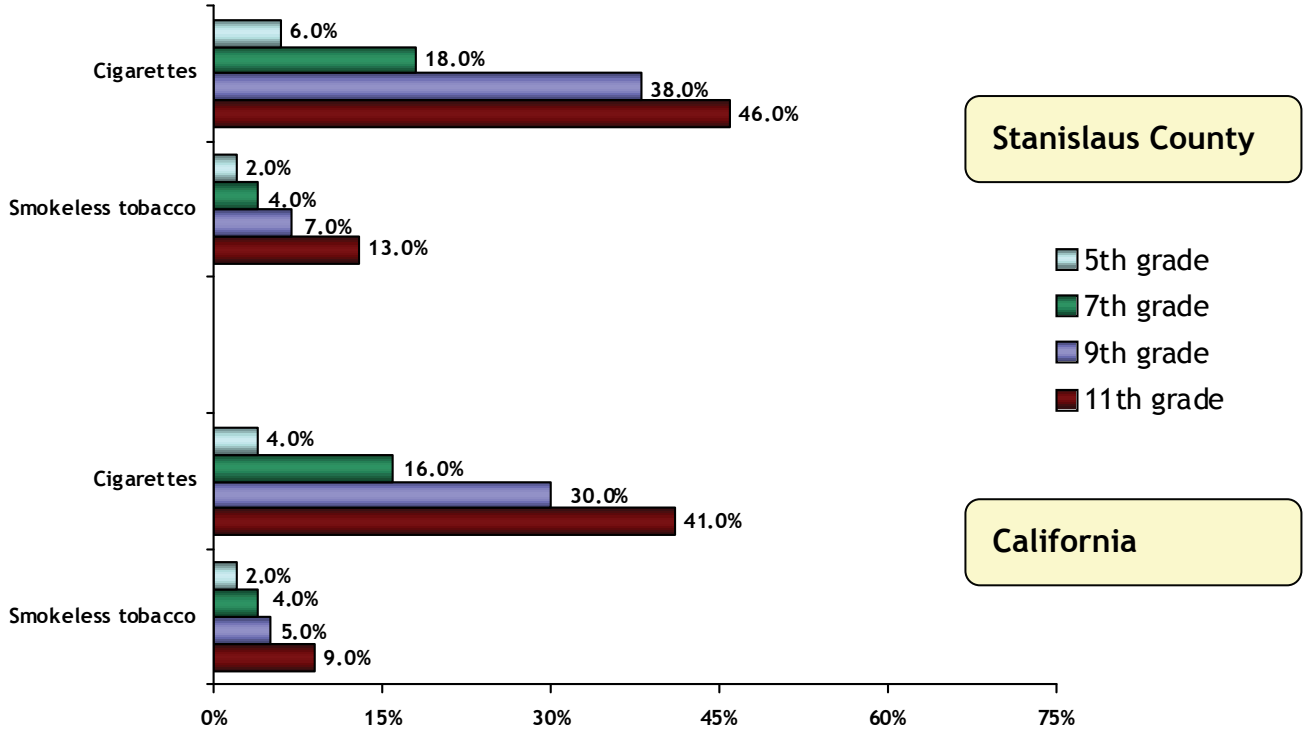
Tobacco Use - Youth

Why It Is Important

Smoking and secondary smoke have serious health consequences for people of all ages; however, tobacco use by young people is particularly problematic as the earlier a person uses tobacco the more likely he or she will be to use tobacco heavily as an adult.[105] Nearly all first-time tobacco use takes place before high school graduation; almost 90% of adult smokers started at or before the age 19. For the most part, people who do not start using tobacco when they are teens never start using it.[106]

Cigarette smoking causes serious health problems among children and teens, including coughing, shortness of breath, respiratory illnesses, reduced physical fitness, poor lung growth and function, worse overall health, and addiction to nicotine.

Figure 226: Percentage of Students Who Have Ever Used Cigarettes or Smokeless Tobacco in Their Lifetime, by Grade Level, 2004-2006

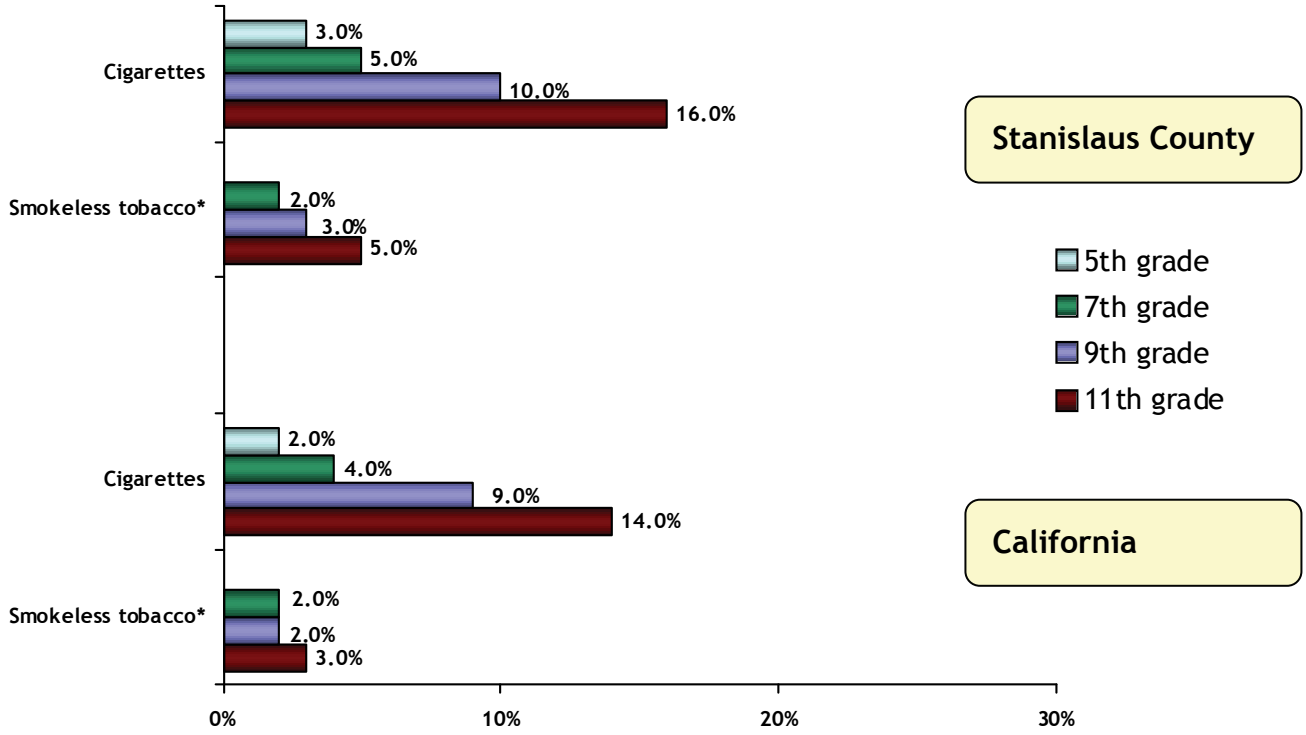


Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

New data not available

[105] The National Center for Chronic Disease Prevention and Health Promotion. *Preventing Tobacco Use Among Young People: A Report of the Surgeon General*, 1994.
[106] American Cancer Society, *Child and Teen Tobacco Use* [Electronic version], 2007.

Figure 227: Percentage of Students Who Have Used Cigarettes or Smokeless Tobacco in the Past 30 Days, by Grade Level, 2004-2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

* Data for 5th grade students are not available.

New data not available

Data Summary

According to the 2004-2006 California Healthy Kids Survey results, Stanislaus County and California students in upper grade levels reported higher lifetime cigarette and smokeless tobacco use than students in lower grade levels. In 2004-2006, 46% of Stanislaus County 11th graders reported that they had smoked cigarettes in their lifetime, compared to 38% of 9th graders, 18% of 7th graders, and 6% of 5th graders. Overall, California had lower percentages of students who smoked cigarettes in their lifetime than did Stanislaus County (41% of 11th graders, 30% of 9th graders, 16% of 9th graders, and 4% of 5th graders).

Similar patterns were also true for 30 day cigarette and smokeless tobacco use in Stanislaus County and California. The percentages of students who have smoked cigarettes in the 30 days prior to taking the survey were higher in Stanislaus County than statewide, and highest among 11th graders (16% countywide and 14% statewide), followed by 9th graders (10% and 9%), 7th graders (5% and 4%), and 5th graders (3% and 2%).

Alcohol and Drug Use - Youth

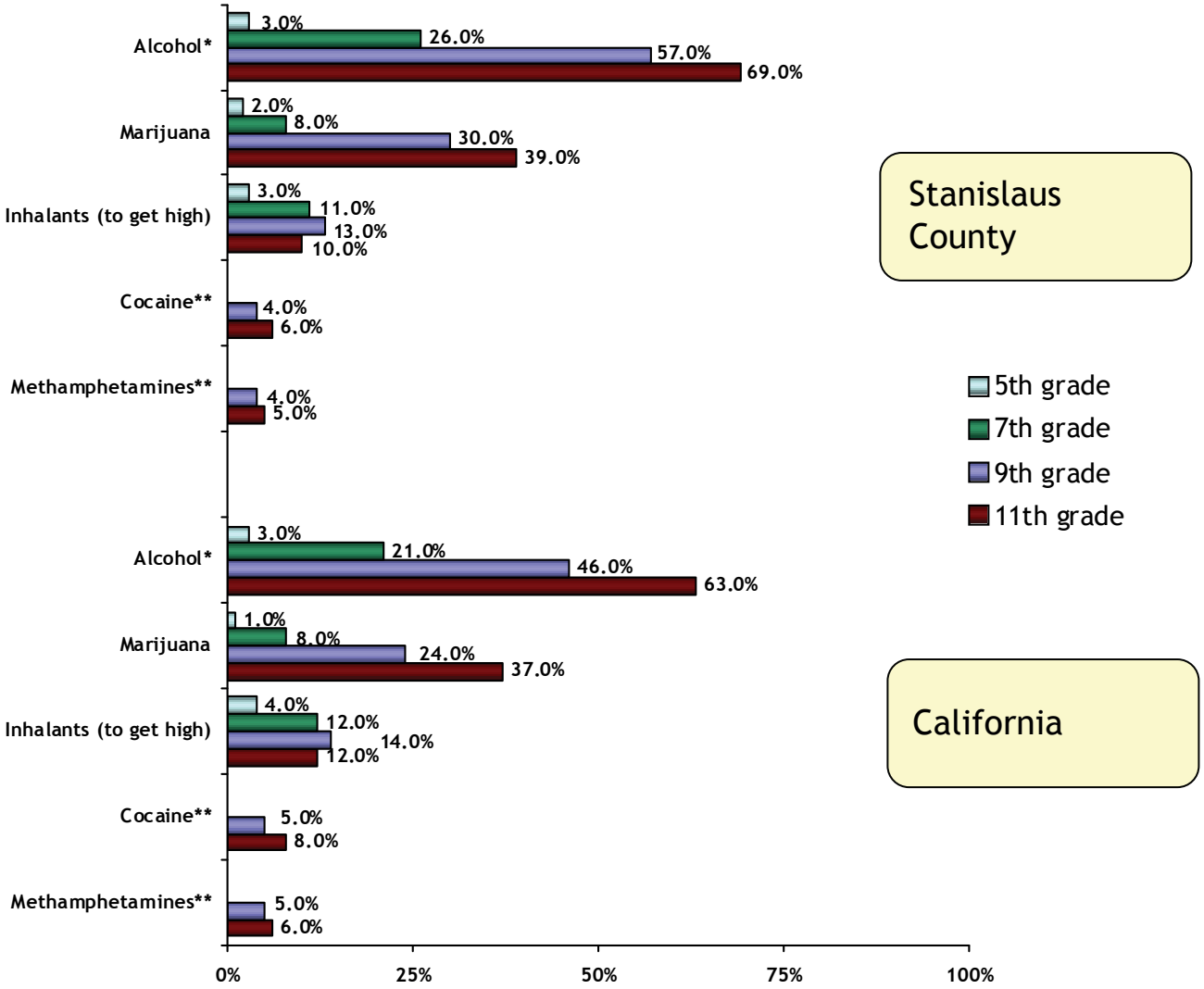
Why It Is Important

Alcohol is the leading drug of abuse by American youth. The National Center on Addiction and Substance Abuse connects youth alcohol consumption to higher levels of dangerous sexual activity, school drop outs, overdose deaths, and suicides. Moreover, the center indicates that teens who experiment with alcohol are "virtually certain" to continue using alcohol in the future.[107]

Further, youth who engage in substance abuse are more likely to also engage in risky or unhealthy behavior that can result in serious diseases, chronic health conditions, injuries, and even death. Drug use is also linked to educational failure and family and social problems. Unfortunately, most drug use is cyclical as children with parents who have a history of alcohol and drug use are more likely to use them as well.[108]

[107] The National Center on Addiction and Substance Abuse at Columbia University. *Teen Tipplers: America's Underage Drinking Epidemic,* 2003.
[108] Applied Survey Research, *San Mateo County Children's Report*, 2005.

Figure 228: Percentage of Students Who Have Ever Used Alcohol or Drugs in Their Lifetime, by Grade Level, 2004-2006



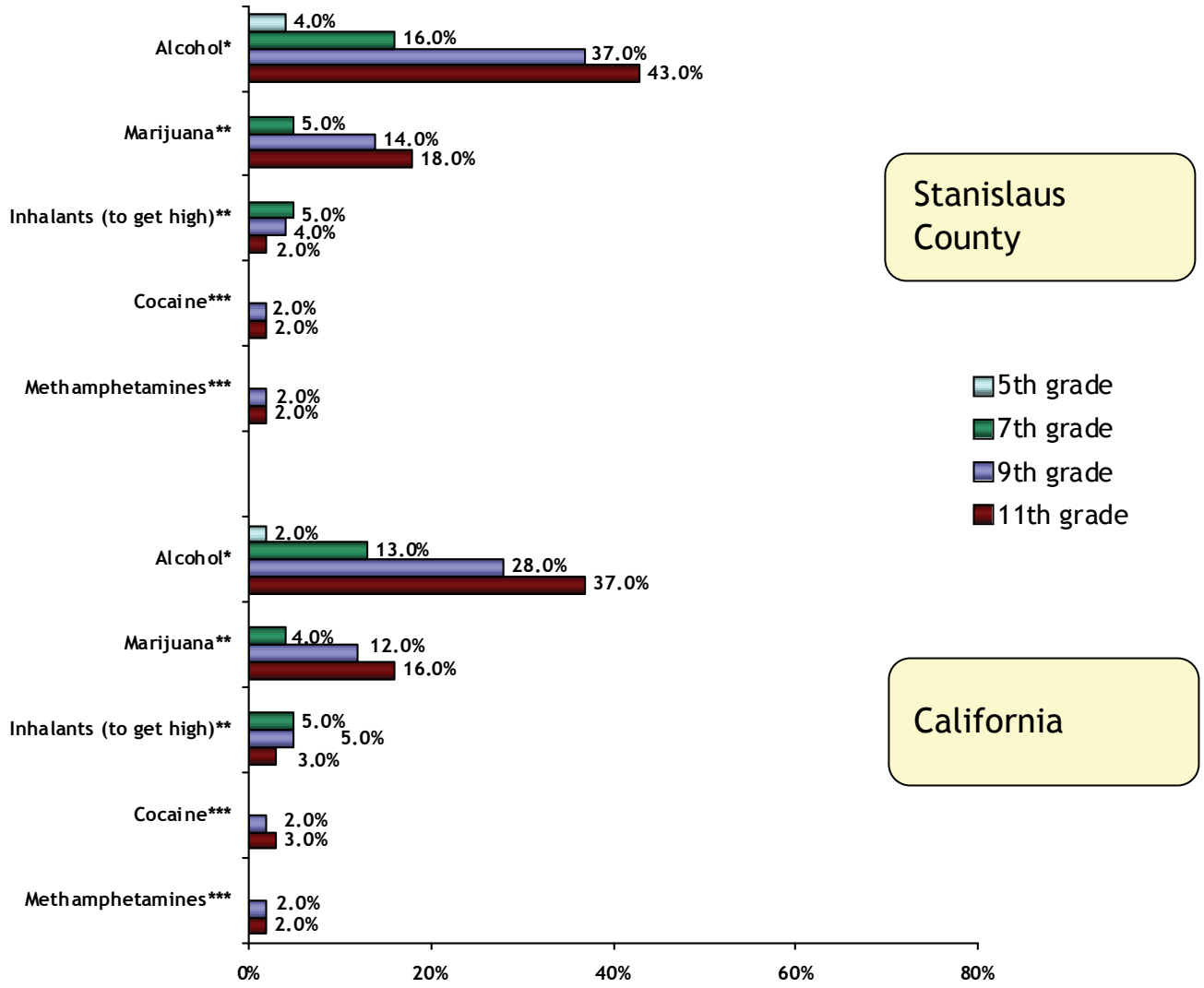
Source: Stanislaus County's California Healthy Kids Survey, *Technical Report,* 2004-2006. California Healthy Kids Survey, *Technical Report,* 2004-2006.

* At least one full drink.

** Data for 5th and 7th grade students are not available.

New data not available

Figure 229: Percentage of Students Who Have Used Alcohol or Drugs in the Past 30 Days, by Grade Level, 2004 2006



Source: Stanislaus County's California Healthy Kids Survey, *Technical Report*, 2004-2006. California Healthy Kids Survey, *Technical Report*, 2004-2006.

* At least one full drink.

** Data for 5th grade students are not available.

*** Data for 5th and 7th grade students are not available.

New data not available

Data Summary

Data from the 2004-2006 California Healthy Kids Survey indicated that lifetime and 30-day use of alcohol and marijuana were higher in Stanislaus County than in California. In 2004-2006, a sizeable majority (69%) of 11th grade students had consumed at least one full drink of alcohol in their lifetime, compared to 57% of 9th graders, 26% of 7th graders, and 3% of 5th graders. Furthermore, 43% of 11th grade students had consumed at least one drink of alcohol in the 30 days prior to taking the survey, followed by 37% of 9th graders, 16% of 7th graders, and 4% of 5th graders.

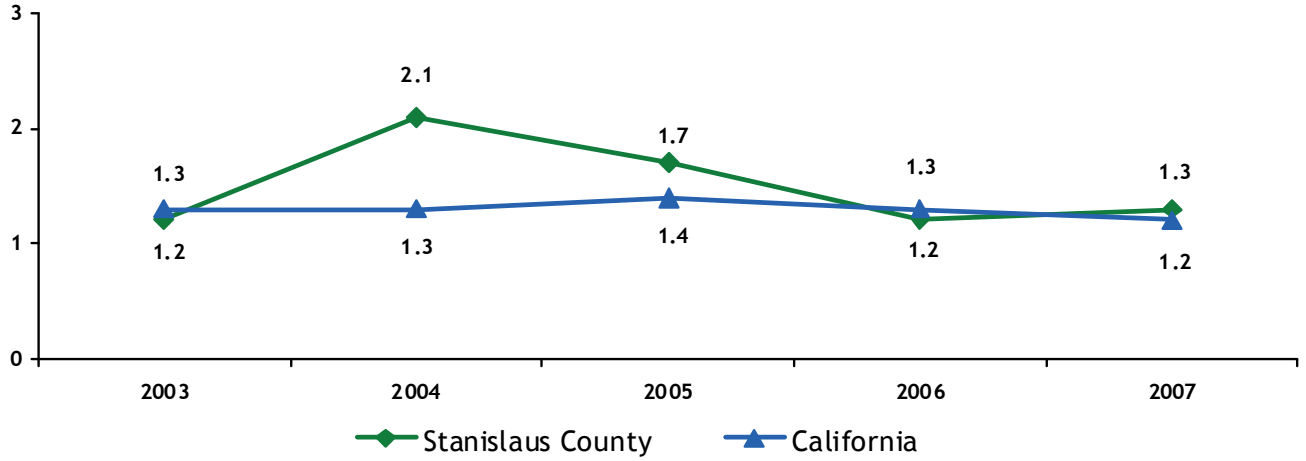
Second to alcohol, the drug with the highest percentages of lifetime use was marijuana (39% of 11th graders, 30% of 9th graders, 8% of 7th graders, and 2% of 5th graders). Percentages of 30-day marijuana use (18% of 11th graders, 14% of 9th graders, and 5% of 7th graders) were also highest compared to 30-day use of other drugs. This was followed by lifetime use of inhalants in Stanislaus County, where the percentages of lifetime use were highest among 9th graders (13%), followed by 7th graders (11%), 11th graders (10%), and 5th graders (3%). Conversely, the percentages of 30-day use of inhalants countywide were highest among 7th graders (5%), followed by 9th graders (4%), and 11th graders (2%).

Drug and Alcohol Related Arrests - Youth

Why It Is Important

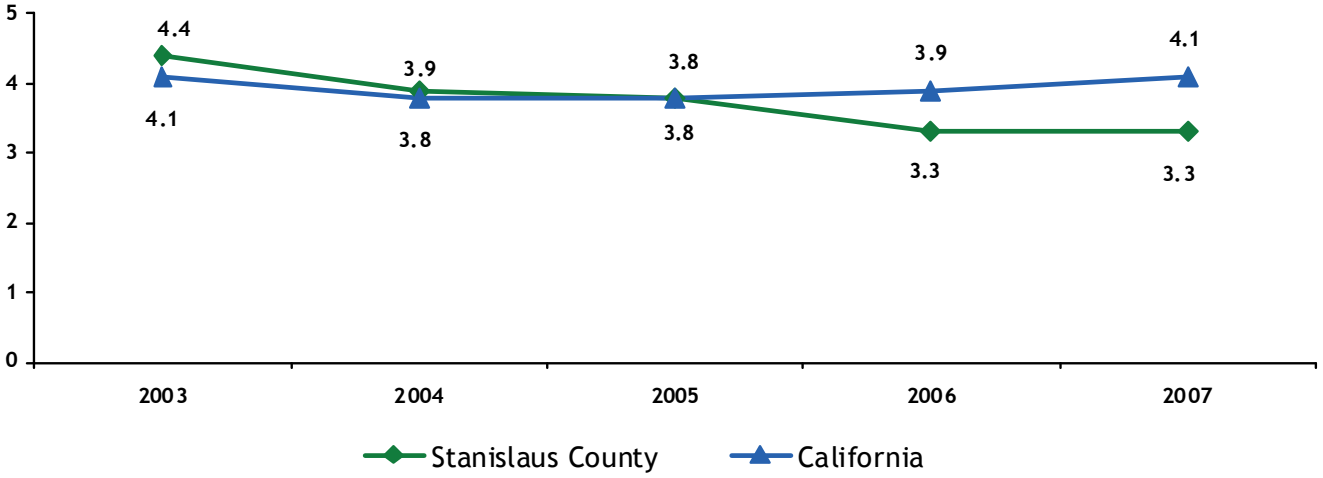
Youth who engage in illegal activities are a risk to themselves, their friends and family, and the larger community. Moreover, young offenders recidivate at a high rate, often returning to criminal activity even after becoming adults. Juvenile arrest rates may also indicate other risk-taking behavior and be a sign of substance abuse, gang involvement, and mental health issues.[109]

Figure 230: Drug and Alcohol Related Felony Arrest Rates per 1,000 Youth, Ages 10-17



Source: California Department of Justice, Juvenile Felony Arrests, 2008. Population data: California Department of Finance, Race/Ethnic Population with Age and Sex Detail, 2000-2050, 2008.

Figure 231: Drug and Alcohol Related Misdemeanor Arrest Rates per 1,000 Youth, Ages 10-17



Source: California Department of Justice, Juvenile Misdemeanor Arrests, 2008. Population data: California Department of Finance, Race/Ethnic Population with Age and Sex Detail, 2000-2050, 2008.

[109] *The Santa Clara County Children's Report,* 2005.

Data Summary

While the California drug and alcohol related felony arrest rates per 1,000 youth ages 10-17 have been fairly consistent from 2003 to 2007, the rates in Stanislaus County fluctuated slightly during the same period. In 2003, the rate was 1.2 in Stanislaus County. The rate peaked at 2.1 in 2004, dropped to 1.2 in 2006, and then slightly increased to 1.3 in 2007. Further, the drug and alcohol related misdemeanor arrest rates per 1,000 youth ages 10-17 in Stanislaus County decreased overall between 2003 and 2007. In 2003, the rate was 4.4, and by 2007, the rate dropped to 3.3.

Child Abuse and Neglect

Why It Is Important

Children who are victims of abuse or neglect are more likely to suffer from depression, substance abuse, learning and behavioral difficulties in school, and attempted suicide.[110] Further, they are more likely to participate in crimes and misdemeanors, mistreat their own children, and become involved in intimate partner violence.[111] The incidence of child abuse and neglect crosses all social, economic, and ethnic boundaries, and can be exacerbated by unemployment, poverty, social isolation, family breakup, substance abuse, and other stresses.[112]

It is an unfortunate fact that there are children in the community at risk of abuse and/or neglect. Below are data that reflect the number of children receiving Child Welfare Services from the Stanislaus County Community Services Agency.

Figure 232: Number of Children with One or More Substantiated Referrals by Allegation Type, Stanislaus County

Allegation Type	2001	2002	2003	2004	2005	01-05 % Change
Sexual abuse	203	226	170	149	115	-43.3
Physical abuse	181	134	127	112	70	-61.3
Severe neglect	47	42	41	36	15	-68.1
General neglect	1,816	1,496	1,671	1,553	1,519	-16.4
Emotional abuse	28	2	2	3	3	-89.3
Caretaker absence / incapacity	154	127	131	118	132	-14.3
At risk, sibling abused	105	184	202	188	215	104.8
Substantial risk	81	67	65	74	45	-44.4
Stanislaus County total	**2,615**	**2,278**	**2,409**	**2,233**	**2,114**	**-19.2**

Source: Needell, B., Webster, D., Armijo, M., Lee, S., Cuccaro-Alamin, S., Shaw, T., Dawson, W., Piccus, W., Magruder, J., Exel, M., Smith, J., Dunn, A., Frerer, K., Putnam Hornstein, E., & Ataie, Y. (2006). Child Welfare Services Reports for California. Retrieved May 12, 2008, from University of California at Berkeley Center for Social Services Research website. URL: <http://cssr.berkeley.edu/CWSCMSreports/>

New data not available

[110] Kids in Common, Cross-Systems Evaluation County of Santa Clara, Public Health Department Santa Clara Valley Health & Hospital System, and Applied Survey Research, *Santa Clara County Children's Report: Key Indicators of Well-being,* 2005.

[111] Ibid.

[112] Ibid.

Figure 233: Twelve-Month Average Number of Children Receiving Child Welfare Services, Stanislaus County

Program	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08	04-08 % Change
Child welfare services emergency response dispositions	1,162	1,338	1,285	1,137	-2.2
Child welfare services case management					
Family maintenance	348	387	376	437	25.6
Family reunification	277	205	202	226	-18.4
Permanent placement	411	386	341	333	-19.0
Children in foster care	627	545	510	527	-15.9
Children receiving adoption assistance	939	1,004	1,015	1,023	8.9

Source: Stanislaus County Community Services Agency, *Key Programs Quarterly Report: FY 2007-08*, 2008.

Figure 234: Number and Rate of Child Abuse and Neglect Referrals for Youth Ages 0-17, by ZIP Code, Stanislaus County, 2006

ZIP Code	City	Population 0-17 years	Referrals 0-17 years	Incidence Per 1,000 Children
95385	Vernalis	56	0	0.0
95368	Salida	4,833	38	7.9
95313	Crows Landing	417	4	9.6
95316	Denair	1,542	22	14.3
95326	Hughson	2,875	45	15.7
95360	Newman	3,418	60	17.6
95363	Patterson	6,949	122	17.6
95382	Turlock	7,661	139	18.1
95323	Hickman	251	5	19.9
95357	Modesto	4,663	97	20.8
95367	Riverbank	7,168	151	21.1
95386	Waterford	3,381	74	21.9
95355	Modesto	14,609	327	22.4
95356	Modesto	8,052	185	23.0
95380	Turlock	14,304	334	23.4
95361	Oakdale	7,443	200	26.9
95358	Modesto	10,614	323	30.4
95350	Modesto	13,510	431	31.9

(cont.)

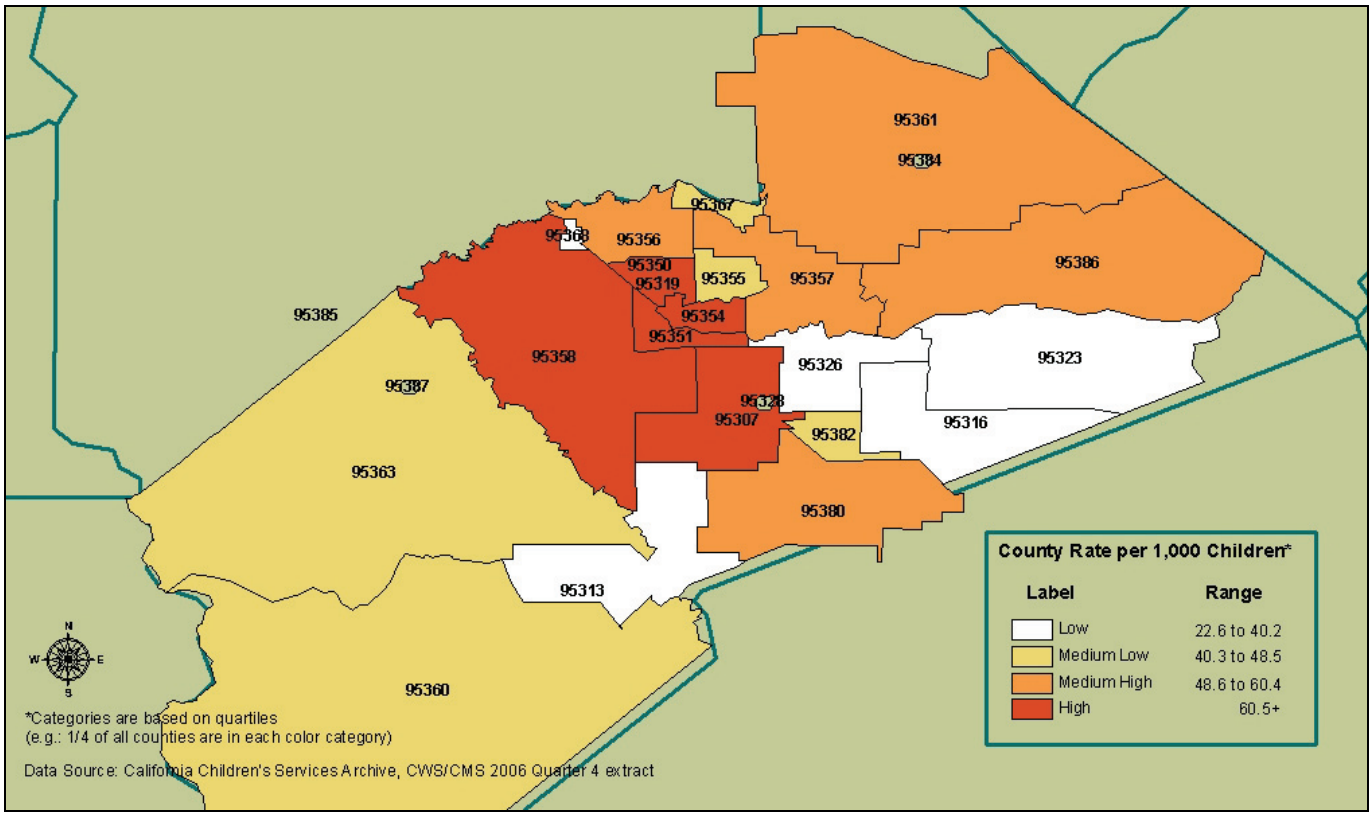
Number and Rate of Child Abuse and Neglect Referrals for Youth Ages 0-17, by ZIP Code, Stanislaus County, 2006 (cont.)

ZIP Code	City	Population 0-17 years	Referrals 0-17 years	Incidence Per 1,000 Children
95307	Ceres	12,509	411	32.9
95351	Modesto	17,547	774	44.1
95354	Modesto	8,336	416	49.9
Unknown / missing	-	-	6,806	-
Out of County	-	-	114	-
Stanislaus County	**-**	**150,138**	**11,078**	**73.8**
California	-	9,685,679	482,897	49.9

Source: Center for Social Services Research, University of California, Berkeley, California Child Welfare Performance Indicators Project, *California Children's Services Archive, CWS/CMS 2006 Quarter 4 extract*.

New data not available

Figure 235: Rate of Child Abuse and Neglect Referrals for Youth Ages 0-17 Map, by ZIP Code, 2006



Source: Center for Social Services Research, University of California, Berkeley, California Child Welfare Performance Indicators Project, *California Children's Services Archive, CWS/CMS 2006 Quarter 4 extract*.

New data not available

Data Summary

In 2005, there were 2,114 substantiated cases of child abuse in Stanislaus County, a 19% decrease from 2,615 cases in 2001. The highest percentage of cases in 2005 was in the category of "general neglect" (72%), followed by "at risk, sibling abused" (10%). Between 2001 and 2005, the number of child abuse cases in Stanislaus County decreased for all allegation types, except the category of "at risk, sibling abused," which increased 105% over the five year period.

From fiscal years 2004-2005 to 2007-2008, the 12-month average number of children who received Emergency Response Dispositions decreased 2% from 1,162 children to 1,137 children. During the same time period, the 12-month average number of children in foster care decreased 16% – from 627 children to 527 children – and the number of children who received adoption assistance increased 9% from 939 children to 1,023 children per month.

How We're Making a Difference

Grayson-Westley Family Resource Center

The Grayson/Westley Family Resource Center opened its doors to the community in July 2000. With funding from the Stanislaus County Children and Families Commission, Community Services Agency, and other organizations, the center provides services and family support programs for children and families, including those at risk of abuse and neglect. The Center also hosts several classes and a series of support services such as the Healthy Birth Outcomes program, Lending Library, ESL, Parents as Teachers and support groups. These are much needed services due to the rural setting of the Grayson and Westley Communities.

During the month of September, the center hosts an annual Health and Safety Fair in Westley. The 2008 fair marked the sixth time the Grayson-Westley Family Resource Center hosted the event. This event was a grassroots effort to promote healthy lifestyles, drawing an estimated 400 local residents to attend. While children are kept busy with activities, the parents are able to visit information booths and attend brief educational sessions. This year's attendees could get an eye exam at one booth and then walk a few yards and hear about fire safety. As the event wound down, the attendees continued to express their gratitude to the center's staff, thanking them for giving them access to such important information and resources. The Grayson/Westley Family Resource Center is well known as a center that promotes the health and well-being of its community.