OKLAHOMA KIDS COUNT
2014 DATA BOOK

Trends in Child Well-Being
ACKNOWLEDGEMENTS

We wish to thank the numerous partners who provided information and support in the creation of the Oklahoma KIDS COUNT 2014 Data Book:

Annie E. Casey Foundation
Oklahoma State Department of Education
Oklahoma State Department of Health
Oklahoma Department of Human Services
Oklahoma Office of Juvenile Affairs
Oklahoma State Bureau of Investigation
Oklahoma Health Care Authority
And other agencies and organizations that work on the behalf of Oklahoma’s children.

OICA KIDS COUNT Staff and Project Partners:

Terry Smith, President/CEO
Sarah Ashmore, Author and Design
Caleb Mitchell, Data Analysis
Jeff Wallace, Data Partner

OICA Board of Directors 2014

Jill LeVan, President, Norman
Kristin Alex Davies, Oklahoma City
Cindy L. Andrews, J.D., Edmond
Terry Boehrer, Treasurer, Washington
Jay Scott Brown, Shawnee
Laura Choate, Oklahoma City
Brondalyn Nicole Coleman, Oklahoma City
Angela Connor, Ada
William S. (Bill) Doenges, J.D., Tulsa
Dina “Dinky” Hammam, Norman
Peter Messiah, Oklahoma City
James O’Reilly, Oklahoma City
Bailey Perkins, Norman
Mitch Rozin, Oklahoma City
Rodney Timms, Oklahoma City
Chad Wilsie, Oklahoma City

The findings and conclusions presented in this report are those of the authors alone and do not necessarily reflect the opinions of our sponsors.

Permission to copy, disseminate or otherwise use information from this Data Book is granted as long as acknowledgement is given to the Oklahoma KIDS COUNT Partnership, a project of the Oklahoma Institute for Child Advocacy. Sources for the data used in this book, which are listed in the Methodology & Sources section, remain the final authority regarding the quality and meaning of the data.

Copyright © 2014 by the Oklahoma Institute for Child Advocacy. All rights reserved.
# TABLE OF CONTENTS

About Oklahoma KIDS COUNT ................................................................. 4

Oklahoma KIDS COUNT Data Book ........................................................ 5

Demographics ......................................................................................... 7

Economic Security .................................................................................. 9

Education ............................................................................................... 13

Health ..................................................................................................... 15

Family & Community ............................................................................ 20

Endnotes ............................................................................................... 23

Methodology & Data Sources ................................................................. 28
ABOUT OKLAHOMA KIDS COUNT

The Oklahoma KIDS COUNT 2014 Data Book is produced by the Oklahoma KIDS COUNT Partnership, a project of the Oklahoma Institute for Child Advocacy, and is supported by the Annie E. Casey Foundation (www.aecf.org) as a part of their national KIDS COUNT project, the premier source for data on child and family well-being in the United States.

This publication reports on the well-being of children and youth in Oklahoma. Data from the Oklahoma KIDS COUNT Data Book is included on the website for the Oklahoma Institute for Child Advocacy (www.oica.org) and at www.datacenter.aecf.org.

KIDS COUNT is a national network of state-level projects to track the status of children in the United States. KIDS COUNT provides policymakers, state and community leaders, child advocates and the public with the reliable data, policy recommendations and practical tools needed to advance sound policies that benefit children and families.

Oklahoma KIDS COUNT partnership is supported by:
The Annie E. Casey Foundation
The Chickasaw Nation
Sonic, America’s Drive-In

THE ANNIE E. CASEY FOUNDATION

SONIC
America’s Drive-In

THE CITIZENSHIP OF THE CHICKASAW NATION
The Oklahoma KIDS COUNT Data Book continues to measure the overall well-being of children and youth throughout the state, quantifying the impact of recent social and policy changes on children, families and communities. Select indicators, chosen based on their availability and impact on overall well-being, were examined. Data trends show:

**Children experienced slight gains in key areas.** While educational reforms continue to polarize the state, student test scores improved. Preschool enrollment also increased with more 4-year-olds accessing early education programs which have been shown to decrease achievement gaps and improve school readiness. The Sooner State also saw improved birth outcomes in recent years with decreases in the number of preterm births, the number of babies born at low birth weights and infant mortality.

**Childhood trauma continues to be a concern.** Child maltreatment rates have rapidly increased in Oklahoma. As a result, children are entering foster care more frequently and staying in custody longer without being reunified with parents. Child abuse and neglect can have long-term impacts on a child’s development, physical health and school performance. Even worse outcomes are associated with children who exit foster care without ever experiencing a permanent family placement. Oklahoma must do a better job of linking parents to family support and coaching programs and services in order to prevent children from experiencing such trauma.

**Oklahoma is experiencing a time of economic growth, but poverty is increasing among the state’s children and is becoming more concentrated.** This indicates an ever-widening gap between those children living in poor families and those living in families with more resources. Improved efforts to link families to supports, such as the Earned Income Tax Credit (EITC), child care subsidies and the Supplemental Nutrition Assistance Program (SNAP), that aid families in moving out of poverty and into the middle class are vital.
The state is becoming more diverse, with birth rates of racial and ethnic minorities outpacing those of Whites. However, minorities in the state routinely experience worse outcomes in terms of well-being. They are more likely to have lower academic achievement, higher poverty, poorer health (including higher rates of teen pregnancy, worse birth outcomes, and less access to health care due to a lack of insurance), and are more likely to be arrested for a violent crime. Because today’s children represent our future prosperity, it is vital to focus attention on interventions that improve the well-being of all children in the state, especially those minority youth who are disproportionately impacted by conditions which impede their health and achievement.

Where you live matters. Child well-being varies greatly from county to county. Children living in the southeastern part of the state typically have poorer well-being outcomes than other regions. Families in this area experience higher rates of poverty, child maltreatment and teen births. While being among the areas with poor child well-being, the southeast region has less prevention and support services available to families. In a world of limited resources, it is important to make special considerations for effectively meeting the needs of children and families living in isolated, rural areas.
DEMOGRAPHICS

Age Distribution
While the overall number of children under 18 years has been increasing since 2008, the percentage of the state’s young population has remained relatively stable. In 2012 nearly one in four (24.6%) Oklahomans were between birth and 17-years-old. Between 2007 and 2011 the number of babies being born each year steadily declined, however in 2012, slightly more babies were born (52,252 in 2011 vs. 52,740 in 2012). As a result, the number of very young children (0-2 years) has declined, falling from 163,730 (4.5%) in 2008 to 154,731 (4.1%) in 2012. Of all children in the state, the largest percent were between the ages of 10-14 years (6.8%), followed by 6-9 years (5.5%).

Urban vs. Rural
Two-thirds (616,561) of Oklahoma children under 18 years reside in counties which are considered urban metropolitan areas. More than one in five (21.7%) live in Tulsa and Oklahoma Counties alone. The remaining 34% reside in rural areas.

Children growing up in rural areas face different challenges than their urban counterparts. Access to necessary health and support services may be limited due to distance or isolated locations. As a result, rural children are:

- More likely to live in poverty;
- More likely to repeat a grade in school;
- Less likely to graduate from high school;
- Less likely to complete college;
- More likely to have public health insurance;
- More likely to die from an injury;
- More likely to use tobacco products;
- More likely to have barriers to accessing medical care; and
- More likely to be overweight or obese.  

Number of Live Births in Oklahoma by Year, 2001-2012

Age Distribution of Children Younger than 18 Years in Oklahoma, 2012
Oklahoma has been growing younger and more Hispanic in recent years. It was one of only seven states in which the median age declined in 2013, falling to 36.2 years. The Sooner State also saw an increase in the number of Hispanics due to higher birthrates among that population.

**Diversity**

Oklahoma’s population is becoming increasingly more diverse. Since 2005, every minority racial and ethnic group grew at rates exceeding those of White children, particularly among the state’s Asian and Hispanic populations which have grown significantly. In 2012, more than one in four Oklahoma children was a minority (28%).

According to Census Bureau projections, the majority population in the U.S. will change by 2043, making America a majority-minority nation for the first time in history. This increase in diversity is attributable to immigration, birth rates and interracial relationships. Notably, racial and ethnic minority children in the state typically experience worse outcomes in terms of poverty, health and overall well-being; a fact which has the potential for a diminished economic status among the next generation of Oklahomans.

**Language**

The number of children who speak a language other than English in their home has been rising in Oklahoma. In 2012, 79,000 children (12%) spoke another language at home compared to 61,000 (9%) in 2008.

Children who speak a language other than English at home are at a disadvantage for language development, and therefore, are more likely to have difficulty in school. According to the Oklahoma State Department of Education, approximately 11% of children in pre-kindergarten and kindergarten in 2011-2012 were English-language learners, meaning their first language was not English.
Poverty
Poverty has been shown to have long-term impacts on the intellectual development, behavior and health of children. Such effects are made worse for those living in poverty for long periods of time, those living in extreme poverty (50% of the poverty threshold), and for those experiencing poverty during their preschool years. Poor children are more likely to have poor academic performance, drop out of school, be in poor health, become pregnant as a teen, experience a violent crime and even die during childhood.

The number of children living in poverty in the Sooner State has been rising. In 2012, nearly one in four (24.1%) Oklahoma children under 18 years lived in households with incomes below the official Federal Poverty Level. That means a family of two adults and two children had an annual income less than $23,283. In 2014, nearly two full-time minimum-wage jobs were necessary to be able to afford fair market rent for a two-bedroom apartment in the state and still have enough left over for food, utilities and other necessities.

Children living in poverty in Oklahoma are more likely to be Black or Hispanic (of any race). They are also more likely to be young, with one in every four (28%) children 5-years-old or younger living in poverty compared to 22% of children six years and older. Therefore, the populations of children experiencing poverty in the Sooner State are those most vulnerable to its long-term impacts.

The number of children living in concentrated poverty (census tracts with poverty rates of 30% or more) has more than doubled since 2000, indicating an emerging, growing divide between those children at the bottom of the income scale and those with higher incomes.
Child Food Insecurity
Hunger has lasting impacts on a child’s health, development, education and behavior beginning during pregnancy and continuing on through their early years. Food insecurity is associated with poor pregnancy outcomes and birth complications, delayed child development, poor health and behavioral problems in school. Nationally, food insecurity is more common: among poor households; in households with older children or higher numbers of children; in families with one parent present; in families with a foreign born parent; in households where no one has a high school degree; and in minority families.

More than a quarter of a million Oklahoma children experienced food insecurity in 2012. That means one in four children less than 18 years (25.6%) lived in a family that did not have consistent access to adequate food due to lack of money or other resources.

The number of hungry children in the state has essentially remained unchanged since 2009, consistently ranking higher than the national average. The hungriest county in the state is McCurtain County (30.8%), closely followed by Okfuskee County (30.4%). The counties with the least food insecurity include: Canadian (19.5%), Dewey (19.7%) and Roger Mills (19.8%).

Public Assistance
Public assistance programs exist to aid families struggling to ensure the health and well-being of their children. They are designed to lift families out of poverty and into the middle class by providing supplemental assistance for such necessities as food, housing, child care, medical expenses and job training.

In Oklahoma, poverty among children is on the rise; however the number of kids receiving public assistance benefits has been declining. In the last three years, the number of child recipients of TANF benefits dropped 18.4%, SNAP recipients decreased 15.7% and the number of WIC recipients declined 8.7%.

Supplemental Nutrition Assistance Program (SNAP) is the nation’s most important anti-hunger program, providing low-income households with nutritional support. The long-term benefits of SNAP include better health and greater economic self-sufficiency in adulthood. According to the Center on Budget and Policy Priorities (CBPP), nearly three-fourths (73%)
of all SNAP participants in Oklahoma are in families with children. Of those Oklahoma households with children receiving SNAP benefits, each receive an average of $427 in food assistance per month. Nationally, this averages out to $1.43 per person per meal or a total of $128 per household member per month.

Temporary Assistance for Needy Families (TANF) is a vital program for low-income families with children. It is designed to allow families to attain self-sufficiency by providing direct cash assistance on a time-limited basis to pay for things such as housing, child care and job training. In 2011, the average monthly benefit for a single parent with two children was $292. The majority of the funds made available to families through TANF were used to pay for child care expenses (31%), work supports (14%) or other basic assistance needed (11%). Two-thirds (64.3%) of TANF recipients in SFY 2013 were living in no-parent families. The remaining 35.7% lived in single-parent families.

Women, Infants and Children (WIC) is a nutrition program that provides assistance to pregnant women and young children in order to purchase nutritious foods necessary for optimal health, development and overall well-being. The program improves health, reduces infant mortality, decreases health expenses and improves cognitive development in children. In FFY 2013, just over a million women and children received WIC benefits. The total number of WIC recipients has been steadily declining.
Parental Employment
Parental employment is defined as children in a household where all parents are in the labor force – both if in a two-parent household and one if in a single-parent household. Children living in families that lack secure full-time employment are more likely to fall into poverty.

In 2012, two-thirds (67.3%) of children lived in households where both parents were employed. More than 8% of children lived in a home where no parent was in the labor force. There is a great deal of variation in unemployment rates across the state, ranging from 0.3% in Woods County to 38.3% in Ottawa County.

Homeless Students
Homeless children encounter many barriers to success and well-being. They are more likely to: be exposed to violence; suffer from chronic health conditions and stress; perform poorly in school; and experience hunger. The impacts of homelessness can be significant for young children, whose brains are still growing and developing, as well as for adolescents.

The number of homeless students enrolled in Kindergarten through 12th grade has been rising since the 2005-2006 school year, increasing a total of 132% over the past five years. During the 2011-2012 school year, more than 20,000 students were considered homeless. The majority of these children were doubled up (e.g. living with another family) or living in shelters. Each year, approximately one-third of homeless students are enrolled in Pre-K through the 2nd grade.
Pre-K Enrollment
Pre-K is associated with improved school performance, higher graduation rates, higher employment rates and higher incomes during adulthood. Studies have even found substantial cost savings to communities associated with decreased school retention, lower utilization of special education services, decreased delinquency, decreased dependence on public assistance and increased employment and earnings throughout a lifetime.

Oklahoma offers universal, publicly funded pre-K programs to all 4-year-olds in the state without any eligibility requirements. However, while some school districts provide pre-K programs for 3-year-olds, there is no statewide program and some areas have limited or no availability to access such programs.

Nearly three-fourths (74.1%) of 4-year-olds were enrolled in pre-K programs in the state during the 2012-2013 school year, representing the second highest enrollment percent in the nation. However, when examining the overall number of 3- and 4-year-olds enrolled in pre-K programs combined, that percent drops to only 37.4%. While the total number of 3- and 4-year-olds in the state has increased over the past five years, the number of 3- and 4-year-olds enrolling in pre-K programs have remained relatively unchanged, indicating less children are accessing such programs.

Test scores
Third grade marks the important stage when students transition from learning to read to reading to learn. Thus, reading proficiency in the third grade has become an “early warning” marker for success or adversity in future academic endeavors. Children who do not read proficiently by the end of the third grade are four times more likely to leave school without a diploma than proficient readers. Proficiency in mathematics has also been linked to long-term success and achievement. Those with limited math skills are less likely to attend and complete college, less likely to have higher incomes and are less prepared to compete in the increasingly technology-based job market.
Oklahoma test scores in third grade reading and eighth grade math proficiency have been improving since the 2008-2009 school year, however many students are still struggling. During the 2011-2012 school year, more than one in five (23.0%) third-grade students did not read at or above the proficiency level. Likewise, more than one in four (28.0%) eighth-grade students was not proficient in math.

When looking at these test scores by racial/ethnic categories a concerning picture emerges. A clear achievement gap exists among races and ethnicities, most strikingly among Black students. Asian children routinely perform the best, with 91% of third-grade students scoring at or above proficient in reading and 90% of eighth-grade students scoring at proficiency or above in math. In fact, all racial and ethnic minority groups, except for Asian children, consistently score lower than their White peers.

**On-Time Graduation**

Not completing high school affects many areas of a person’s life. It poses hazards personally, economically, physically and psychologically. Dropouts are much more likely than their peers who graduate to be unemployed, living in poverty, receiving public assistance, incarcerated, on death row, unhealthy, divorced and single parents with children who drop out from high school themselves.\(^{37}\) Financially these problems persist across time as this group, on average, earns $200,000 less than high school graduates, and about $1 million less than a college graduate over a lifetime.

Oklahoma has shown steady improvement regarding students not completing high school on time. Over the past four years (2009-2013), the rate of dropping out has been steadily decreasing from 12.37% in 2009 to 9.64% in 2013. The highest number of dropouts was in 2009 with 5,223, while the low was in 2013 with 3,911 statewide.
HEALTH

Infant mortality
Nearly 400 babies died before their first birthday in the Sooner State in 2012, which is an improvement over recent years. Infant mortality rates have dropped from 8.6/1,000 in 2007 to 7.5/1,000 in 2012. While more babies are living past their first birthday in the state, Oklahoma’s infant mortality rate remains consistently higher than the national average of 6.5/1,000 in 2012.

Minority babies are more likely than White babies to die during their first year of life. In fact, Black babies died at rates twice as high as White babies in 2012 (14.5/1,000 compared to 6.5/1,000), followed by American Indian (9.8/1,000) and Hispanic babies (8.4/1,000).

Preterm Births
A healthy baby has 40 weeks to fully develop before delivery, however in some cases, mothers go into premature labor. Early delivery often occurs naturally and can be caused by a number of social and behavioral characteristics, including: smoking, stress, obesity, diabetes, high blood pressure, domestic violence, or late or no access to prenatal care.40 Other babies are born early because mothers elect to have optional C-sections.

Premature babies may suffer health complications because their bodies do not have time to fully develop. Such complications can result in long-term medical, developmental and behavioral problems that can continue into childhood. These children may have delayed
growth and development and breathing problems. Preterm birth remains the leading cause of infant mortality and morbidity in the state.

One in every ten babies in Oklahoma is born too early (before 37 weeks gestation), representing 5,625 babies in 2013. Of those born too soon, nearly one in five is born very preterm (before 32 weeks gestation), meaning they are most at-risk to suffer complications. Overall, the percent of babies born preterm has been improving in Oklahoma since 2010, decreasing from 11.1% in 2008 to 10.6% in 2013. However, disparities exist across race and ethnicity. Black mothers are most likely to give birth to babies that are born too early. Also, while the percent of preterm births to all other minority groups remained relatively stable between 2008 and 2013, Asian/Pacific Islanders experienced an increase each year, rising from 7.3% to 11.4%.

**Low Birth Weight**

Babies born at low birth weights (less than 5.5 pounds) are more likely to experience developmental problems, short- and long-term disabilities and are more likely to die within the first year of life. While carrying multiple children (twins, triplets, etc.) often cause babies to be born smaller, too many single births result in low birth weights. Causes of babies being born too small include mothers who have low incomes, low educational attainment, are smokers, have poor nutrition, experience...
stress, suffer from infections, and are younger or older than average during pregnancy.43

One in twelve (8.1%) babies in Oklahoma is born too small (less than 5.5 pounds), totaling 4,305 infants in 2013. Of babies born at low birth weights, one in five (20.8%) were born at very low weights (less than 3 ½ pounds), meaning they are most vulnerable to poor health and developmental outcomes. Overall, the percent of Oklahoma babies born at low birth weights is improving. After rising between 2009 and 2011, the percent of low birth weight babies dropped from 7.5% in 2011 to 6.5% in 2013. While the percent of babies born at low weights has remained relatively constant across races since 2008, black mothers remain most likely to give birth to babies that are too small.

Teen births
Teen pregnancy has long-lasting effects on both teen mothers and their children. Only about half of teens who give birth have a high school diploma by age 22, compared to nearly 90% of young women who did not become mothers as teens.44 Adverse health outcomes associated with teen births include: increased rates of preterm delivery, low-birth weight babies, low Apgar scores, small for gestational age babies, and neonatal death.45 Adverse outcomes are also experienced by children born to teen mothers. These children are more likely to experience chronic health problems; live in poverty; rely on publicly funded health care; have involvement with the juvenile justice system; drop out of high school, become pregnant and give birth as a teen. Additionally, they are less likely to be prepared to enter kindergarten and succeed in school.46

In 2012, 5,909 babies were born to mothers aged 19 or younger with one in every ten births in the state occurring to a teen mother. Of those, 4,176 (70.7%) were born to 18- or 19-years-olds, 1,667 (28.2%) were born to 15 to 17 year olds, and 66 (1.1%) were born to children ages 14 years or younger. Two counties accounted for over one-third (36%) of all teen births: Oklahoma County (1,223 births) and Tulsa County (922 births). Eight counties represented over half (51%) of all teen births: Oklahoma, Tulsa, Comanche, Cleveland, Muskogee, Pottawatomie, Garfield and Creek.
During 2012, almost 7 out of 10 births to teens were to White females (68.24%). The percentage of teen births for females of other racial/ethnic groups was: Hispanic (19.2%), American Indian (16.5%), Black (14.1%), and Asian/Pacific Islander (1.2%). However, when looking at birth rates for females between 15 and 19 years old, Hispanic teens had the highest rate (76.4/1,000), followed by Black teens (57.7/1,000), American Indian teens (55.5/1,000), White teens (44.9/1,000) and Asian/Pacific Islander teens (22.5/1,000).

In Oklahoma and across the U.S., teen birth rates have been declining since the peak in 1991 and are presently at an historic low. Even so, in 2012 Oklahoma had the second highest teen birth rate in the nation for 15- to 19-year-olds (47.3/1,000), compared to the U.S. average of 29.4/1,000, and the highest birth rate for 18- to 19-year-olds at 83.0/1,000 compared to the U.S. average of 51.4/1,000.

**Uninsured**

Lack of insurance coverage directly impacts children’s poor health outcomes in the state by not allowing children access to needed preventive treatment. Lack of health insurance contributes to higher school absenteeism and lower academic performance because sick children miss school more often.

The percent of children without health insurance in the state has improved in recent years, however still remains higher than the U.S. average of 7%. Since 1990, the number of uninsured children in the state has decreased 46.4%, dropping from 166,000 to 89,000 by 2011. The groups most likely to be uninsured are children in families between 200-250% of the poverty level (12%), followed closely by those below 100% of poverty.

Oklahoma provides access to health care for more than 535,000 low-income children through Sooner Care, Oklahoma’s Medicaid program. Two-thirds of people (65%) covered by Sooner Care are under the age of 18 years. Consequently, these children have full access to inpatient and outpatient hospital, dental, behavioral health, prescription medications and child health services that they likely could not access otherwise, including preventive care. However, an estimated 94,000 children (10%) under the age of 18 years do not have health insurance.
FAMILY AND COMMUNITY

Single Parents
Children living in single-parent families are less likely to have access to the same economic and emotional resources as children in two-parent households. These children are more likely to experience cognitive, social and emotional problems. Such issues may be associated with economic hardship, exposure to stress and quality of parent/child relationships. Compared with children in married-couple families, children raised in female-headed households are more likely to drop out of school, to have or cause a teen pregnancy and to experience a divorce in adulthood.

Overall, one-third (36%) of Oklahoma children are currently living in single-parent households. Of those, 62% (134,489) are living in poverty. Black and children of two or more races are most likely to be living in single-parent households in Oklahoma.

Violent crime arrests
Youth engaging in murder, rape, robbery and aggravated assault place themselves and their communities at risk. Children at higher risk for involvement in violence and crime include boys born to teen mothers, children from families whose parents never completed high school and young people doing poorly in school. Victims of child abuse and neglect are more likely than others to later be arrested for delinquent behavior, crimes of violence or prostitution. A young poor child is more likely than a non-poor one to be a current victim and a later perpetrator of violent crime.
Overall, the number of juveniles being arrested and detained has been declining. In 2012, 545 Oklahoma juveniles were arrested for violent crimes. This represents a 30.8% decrease in juvenile violent crime in the state since 2008. In 2012, 16,357 youth between 10-17 years were arrested, representing one in every ten criminal arrests in the state and 3% of all violent crime arrests.

The majority (85.3%) of violent crime arrests were males and 14.7% were females. The most common violent crime resulting in juvenile arrests was aggravated assault followed by robbery, forcible rape and murder.

Minority teens are more likely to be arrested for a violent crime. While non-White children comprise only about one-fourth (28%) of the child population, they account for about twice as many (45%) of the violent crime arrests for children under age 18 (2012).

Child Abuse and Neglect
The cycle of child abuse and neglect threatens Oklahoma’s future generations. Young victims often experience related childhood problems. Half suffer delay in their development or serious physical or emotional impairments. Attachment disorders are common. School performance suffers. Poor children, low birthweight infants, infants born premature, and children with disabilities, chronic illness or developmental delay are at high risk for abuse from their caregivers. Children experiencing maltreatment today are more likely to repeat the cycle of abuse by becoming tomorrow’s abusers.

Overall, the number of juveniles being arrested and detained has been declining. In 2012, 545 Oklahoma juveniles were arrested for violent crimes. This represents a 30.8% decrease in juvenile violent crime in the state since 2008. In 2012, 16,357 youth between 10-17 years were arrested, representing one in every ten criminal arrests in the state and 3% of all violent crime arrests.

The majority (85.3%) of violent crime arrests were males and 14.7% were females. The most common violent crime resulting in juvenile arrests was aggravated assault followed by robbery, forcible rape and murder.

Minority teens are more likely to be arrested for a violent crime. While non-White children comprise only about one-fourth (28%) of the child population, they account for about twice as many (45%) of the violent crime arrests for children under age 18 (2012).

Child Abuse and Neglect
The cycle of child abuse and neglect threatens Oklahoma’s future generations. Young victims often experience related childhood problems. Half suffer delay in their development or serious physical or emotional impairments. Attachment disorders are common. School performance suffers. Poor children, low birthweight infants, infants born premature, and children with disabilities, chronic illness or developmental delay are at high risk for abuse from their caregivers. Children experiencing maltreatment today are more likely to repeat the cycle of abuse by becoming tomorrow’s abusers.
Child abuse and neglect confirmations are rapidly rising in the Sooner State, increasing 58% between 2010 and 2013. During SFY 2013, more than 11,400 children were confirmed victims of maltreatment, a rate of 12.2 per every 1,000 children in our state. That means a report of child abuse was made every 10 minutes in Oklahoma and a child became a victim of maltreatment every hour.

In 2013, two-thirds (69.0%) of maltreatment victims were neglected, one in four (27.7%) were abused, and 3.3% were both abused and neglected. The most common reasons for child neglect were exposure to domestic violence (25.1%), failure to protect the child (19.9%) and threat of harm (19.0%). This indicates family dysfunction continues to be a significant obstacle to improved child safety and well-being.

The majority of children experiencing child abuse and neglect are young, with 60.3% of victims being 6-years-old or younger. Children experiencing such trauma at particularly young ages have been shown to be most likely to suffer long-term impacts including poorer mental and physical health. Three-fourths of confirmed victims of maltreatment were abused or neglected by their mother (46.2%) or father (30.4%).

**Children in foster care**
As a result of rising maltreatment rates, more children are being placed in foster care. While removal from families for a period of time may be necessary, these children are at risk of suffering short- and long-term impacts associated with out-of-home placements. Such adverse effects include emotional and mental health issues, educational challenges, and increased likelihood of further maltreatment.
behavioral problems and educational difficulties. More severe issues may arise for those children who age out of foster care, as they are more likely to experience homelessness, incarceration, be underemployed and rely on public assistance.\textsuperscript{48}

During SFY 2013, nearly 10,000 children were in out-of-home placements through the family foster care system, a rate of 10.6 per 1,000 children in Oklahoma. This represents a 36.6\% increase in foster care placements since 2009. Almost half of children in out-of-home placements are 6 years old or younger, and nearly 300 (276) transitioned out of foster care without ever experiencing a permanent placement.

<table>
<thead>
<tr>
<th>Oklahoma Children Aged 0-17 in Foster Care</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>7,301</td>
<td>6,329</td>
<td>8,391</td>
<td>8,887</td>
<td>9,975</td>
</tr>
<tr>
<td>Rate</td>
<td>7.9/1,000</td>
<td>6.9/1,000</td>
<td>9.0/1,000</td>
<td>9.5/1,000</td>
<td>10.6/1,000</td>
</tr>
</tbody>
</table>

Source: Oklahoma Department of Human Services

<table>
<thead>
<tr>
<th>Oklahoma Children Aging Out of (Emancipated from) Foster Care</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>446</td>
<td>386</td>
<td>317</td>
<td>301</td>
<td>276</td>
</tr>
</tbody>
</table>

Source: Oklahoma Department of Human Services
ENDNOTES


24. Ibid.

25. Ibid.


27. Ibid.

28. Ibid.

29. Ibid.


35. Ibid.


## APPENDIX I: COUNTY RANKINGS

<table>
<thead>
<tr>
<th>County</th>
<th>Overall Rank</th>
<th>Economic Well-Being Rank</th>
<th>Education Rank</th>
<th>Health Rank</th>
<th>Family &amp; Community Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adair County</td>
<td>69</td>
<td>75</td>
<td>48</td>
<td>26</td>
<td>43</td>
</tr>
<tr>
<td>Alfalfa County</td>
<td>23</td>
<td>25</td>
<td>54</td>
<td>2</td>
<td>59</td>
</tr>
<tr>
<td>Atoka County</td>
<td>60</td>
<td>56</td>
<td>46</td>
<td>42</td>
<td>61</td>
</tr>
<tr>
<td>Beaver County</td>
<td>17</td>
<td>6</td>
<td>27</td>
<td>77</td>
<td>2</td>
</tr>
<tr>
<td>Beckham County</td>
<td>68</td>
<td>35</td>
<td>64</td>
<td>71</td>
<td>72</td>
</tr>
<tr>
<td>Blaine County</td>
<td>59</td>
<td>34</td>
<td>55</td>
<td>57</td>
<td>66</td>
</tr>
<tr>
<td>Bryan County</td>
<td>37</td>
<td>46</td>
<td>12</td>
<td>46</td>
<td>58</td>
</tr>
<tr>
<td>Caddo County</td>
<td>55</td>
<td>52</td>
<td>49</td>
<td>64</td>
<td>32</td>
</tr>
<tr>
<td>Canadian County</td>
<td>4</td>
<td>1</td>
<td>20</td>
<td>5</td>
<td>25</td>
</tr>
<tr>
<td>Carter County</td>
<td>58</td>
<td>39</td>
<td>44</td>
<td>69</td>
<td>56</td>
</tr>
<tr>
<td>Cherokee County</td>
<td>47</td>
<td>60</td>
<td>37</td>
<td>41</td>
<td>42</td>
</tr>
<tr>
<td>Choctaw County</td>
<td>77</td>
<td>72</td>
<td>67</td>
<td>67</td>
<td>70</td>
</tr>
<tr>
<td>Cimarron County</td>
<td>50</td>
<td>57</td>
<td>77</td>
<td>31</td>
<td>10</td>
</tr>
<tr>
<td>Cleveland County</td>
<td>5</td>
<td>8</td>
<td>19</td>
<td>7</td>
<td>13</td>
</tr>
<tr>
<td>Coal County</td>
<td>65</td>
<td>54</td>
<td>16</td>
<td>16</td>
<td>77</td>
</tr>
<tr>
<td>Comanche County</td>
<td>36</td>
<td>37</td>
<td>32</td>
<td>17</td>
<td>65</td>
</tr>
<tr>
<td>Cotton County</td>
<td>54</td>
<td>30</td>
<td>10</td>
<td>43</td>
<td>76</td>
</tr>
<tr>
<td>Craig County</td>
<td>40</td>
<td>42</td>
<td>66</td>
<td>18</td>
<td>28</td>
</tr>
<tr>
<td>Creek County</td>
<td>30</td>
<td>27</td>
<td>53</td>
<td>34</td>
<td>34</td>
</tr>
<tr>
<td>Custer County</td>
<td>16</td>
<td>19</td>
<td>5</td>
<td>21</td>
<td>60</td>
</tr>
<tr>
<td>Delaware County</td>
<td>48</td>
<td>65</td>
<td>34</td>
<td>58</td>
<td>17</td>
</tr>
<tr>
<td>Dewey County</td>
<td>14</td>
<td>10</td>
<td>62</td>
<td>56</td>
<td>1</td>
</tr>
<tr>
<td>Ellis County</td>
<td>1</td>
<td>5</td>
<td>11</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Garfield County</td>
<td>24</td>
<td>28</td>
<td>25</td>
<td>30</td>
<td>33</td>
</tr>
<tr>
<td>Garvin County</td>
<td>35</td>
<td>36</td>
<td>38</td>
<td>63</td>
<td>19</td>
</tr>
<tr>
<td>Grady County</td>
<td>15</td>
<td>22</td>
<td>26</td>
<td>13</td>
<td>18</td>
</tr>
<tr>
<td>Grant County</td>
<td>21</td>
<td>7</td>
<td>47</td>
<td>65</td>
<td>20</td>
</tr>
<tr>
<td>Greer County</td>
<td>38</td>
<td>40</td>
<td>21</td>
<td>50</td>
<td>53</td>
</tr>
<tr>
<td>Harmon County</td>
<td>76</td>
<td>76</td>
<td>13</td>
<td>61</td>
<td>73</td>
</tr>
<tr>
<td>Harper County</td>
<td>8</td>
<td>3</td>
<td>6</td>
<td>75</td>
<td>12</td>
</tr>
<tr>
<td>Haskell County</td>
<td>56</td>
<td>61</td>
<td>60</td>
<td>62</td>
<td>23</td>
</tr>
<tr>
<td>Hughes County</td>
<td>73</td>
<td>64</td>
<td>69</td>
<td>33</td>
<td>74</td>
</tr>
<tr>
<td>Jackson County</td>
<td>41</td>
<td>44</td>
<td>31</td>
<td>47</td>
<td>41</td>
</tr>
<tr>
<td>Jefferson County</td>
<td>67</td>
<td>62</td>
<td>50</td>
<td>70</td>
<td>54</td>
</tr>
<tr>
<td>Johnston County</td>
<td>70</td>
<td>63</td>
<td>59</td>
<td>60</td>
<td>67</td>
</tr>
<tr>
<td>Kay County</td>
<td>45</td>
<td>50</td>
<td>61</td>
<td>40</td>
<td>37</td>
</tr>
<tr>
<td>Kingfisher County</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>35</td>
<td>14</td>
</tr>
<tr>
<td>Kiowa County</td>
<td>27</td>
<td>59</td>
<td>8</td>
<td>23</td>
<td>36</td>
</tr>
<tr>
<td>Latimer County</td>
<td>28</td>
<td>48</td>
<td>28</td>
<td>25</td>
<td>16</td>
</tr>
<tr>
<td>Le Flore County</td>
<td>64</td>
<td>69</td>
<td>52</td>
<td>38</td>
<td>49</td>
</tr>
<tr>
<td>Lincoln County</td>
<td>39</td>
<td>32</td>
<td>33</td>
<td>28</td>
<td>64</td>
</tr>
<tr>
<td>Logan County</td>
<td>13</td>
<td>16</td>
<td>74</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Love County</td>
<td>43</td>
<td>41</td>
<td>30</td>
<td>76</td>
<td>22</td>
</tr>
</tbody>
</table>
# APPENDIX I: COUNTY RANKINGS

<table>
<thead>
<tr>
<th>County</th>
<th>Overall Rank</th>
<th>Economic Well-Being Rank</th>
<th>Education Rank</th>
<th>Health Rank</th>
<th>Family &amp; Community Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>McClain County</td>
<td>10</td>
<td>14</td>
<td>45</td>
<td>29</td>
<td>7</td>
</tr>
<tr>
<td>McCurtain County</td>
<td>61</td>
<td>38</td>
<td>15</td>
<td>52</td>
<td>46</td>
</tr>
<tr>
<td>McIntosh County</td>
<td>63</td>
<td>58</td>
<td>56</td>
<td>27</td>
<td>50</td>
</tr>
<tr>
<td>Major County</td>
<td>6</td>
<td>9</td>
<td>4</td>
<td>51</td>
<td>15</td>
</tr>
<tr>
<td>Marshall County</td>
<td>52</td>
<td>73</td>
<td>40</td>
<td>74</td>
<td>47</td>
</tr>
<tr>
<td>Mayes County</td>
<td>46</td>
<td>70</td>
<td>51</td>
<td>37</td>
<td>35</td>
</tr>
<tr>
<td>Murray County</td>
<td>31</td>
<td>31</td>
<td>18</td>
<td>68</td>
<td>27</td>
</tr>
<tr>
<td>Muskogee County</td>
<td>66</td>
<td>51</td>
<td>72</td>
<td>45</td>
<td>63</td>
</tr>
<tr>
<td>Noble County</td>
<td>11</td>
<td>15</td>
<td>43</td>
<td>8</td>
<td>26</td>
</tr>
<tr>
<td>Nowata County</td>
<td>51</td>
<td>55</td>
<td>35</td>
<td>59</td>
<td>45</td>
</tr>
<tr>
<td>Okfuskee County</td>
<td>71</td>
<td>68</td>
<td>71</td>
<td>53</td>
<td>52</td>
</tr>
<tr>
<td>Oklahoma County</td>
<td>44</td>
<td>33</td>
<td>63</td>
<td>32</td>
<td>57</td>
</tr>
<tr>
<td>Okmulgee County</td>
<td>62</td>
<td>66</td>
<td>39</td>
<td>11</td>
<td>68</td>
</tr>
<tr>
<td>Osage County</td>
<td>26</td>
<td>20</td>
<td>65</td>
<td>10</td>
<td>39</td>
</tr>
<tr>
<td>Ottawa County</td>
<td>72</td>
<td>77</td>
<td>29</td>
<td>48</td>
<td>38</td>
</tr>
<tr>
<td>Pawnee County</td>
<td>29</td>
<td>43</td>
<td>42</td>
<td>15</td>
<td>29</td>
</tr>
<tr>
<td>Payne County</td>
<td>12</td>
<td>24</td>
<td>14</td>
<td>9</td>
<td>31</td>
</tr>
<tr>
<td>Pittsburg County</td>
<td>53</td>
<td>49</td>
<td>36</td>
<td>36</td>
<td>69</td>
</tr>
<tr>
<td>Pontotoc County</td>
<td>33</td>
<td>45</td>
<td>23</td>
<td>24</td>
<td>55</td>
</tr>
<tr>
<td>Pottawatomie County</td>
<td>57</td>
<td>47</td>
<td>57</td>
<td>39</td>
<td>62</td>
</tr>
<tr>
<td>Pushmataha County</td>
<td>75</td>
<td>74</td>
<td>3</td>
<td>66</td>
<td>75</td>
</tr>
<tr>
<td>Roger Mills County</td>
<td>3</td>
<td>4</td>
<td>2</td>
<td>55</td>
<td>3</td>
</tr>
<tr>
<td>Rogers County</td>
<td>7</td>
<td>11</td>
<td>41</td>
<td>14</td>
<td>4</td>
</tr>
<tr>
<td>Seminole County</td>
<td>74</td>
<td>67</td>
<td>68</td>
<td>49</td>
<td>71</td>
</tr>
<tr>
<td>Sequoyah County</td>
<td>49</td>
<td>71</td>
<td>9</td>
<td>54</td>
<td>44</td>
</tr>
<tr>
<td>Stephens County</td>
<td>22</td>
<td>21</td>
<td>58</td>
<td>22</td>
<td>30</td>
</tr>
<tr>
<td>Texas County</td>
<td>34</td>
<td>17</td>
<td>73</td>
<td>72</td>
<td>9</td>
</tr>
<tr>
<td>Tillman County</td>
<td>32</td>
<td>53</td>
<td>76</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Tulsa County</td>
<td>42</td>
<td>23</td>
<td>70</td>
<td>44</td>
<td>40</td>
</tr>
<tr>
<td>Wagoner County</td>
<td>19</td>
<td>13</td>
<td>75</td>
<td>19</td>
<td>11</td>
</tr>
<tr>
<td>Washington County</td>
<td>18</td>
<td>26</td>
<td>17</td>
<td>6</td>
<td>48</td>
</tr>
<tr>
<td>Washita County</td>
<td>20</td>
<td>29</td>
<td>22</td>
<td>12</td>
<td>21</td>
</tr>
<tr>
<td>Woods County</td>
<td>9</td>
<td>12</td>
<td>7</td>
<td>20</td>
<td>51</td>
</tr>
<tr>
<td>Woodward County</td>
<td>25</td>
<td>18</td>
<td>24</td>
<td>73</td>
<td>24</td>
</tr>
</tbody>
</table>
METHODOLOGY & DATA SOURCES

The Oklahoma KIDS COUNT county level index reflects child health and education outcomes as well as risk and protective factors, such as economic well-being, family structure and community context. The indicators are consistently and regularly measured, which allows for legitimate comparisons across counties over time. The 16 indicators of child well-being are derived from state and federal government statistical agencies and reflect the best available data for tracking yearly changes. Some of the indicators are derived from samples, and like all sample data, they contain some random error. Other measures are based on relatively small numbers of events in some counties and may exhibit some random fluctuation from year to year. Therefore, readers should focus on relatively large differences across states, as small differences may simply reflect insignificant fluctuations, rather than real changes in the well-being of children. Assessing trends by looking at changes over a longer period of time is more reliable. County data for past years are available at the KIDS COUNT Data Center (datacenter.kidscount.org).

Indicator Rank
Indicator rank for each county was obtained in the following manner. First, counties were sorted by greatest to least (or vice versa whenever appropriate) and then ranked from 1 (highest/best) to 77 (lowest/worst). Ties were measured out to one decimal place, and an asterisk (*) was used to denote any ties in the ranks. The indicator rank is a simple measure of how each county compared to others based upon individual measures.

Domain Rank
Child well-being is reported in four key domains: Economic Security, Education, Health and Family & Community. The domain rank for each county was obtained in the following manner. First, we converted the county numerical values for the most recent data for each of the key indicators within each domain into standard scores. We summed those indicator standard scores to get a domain standard score for each county. Finally, we ranked those county’s standard scores by domain in order from 1 (highest/best) to 77 (lowest/worst). Standard scores were computed by subtracting the average score for that indicator from the county’s observed score and dividing by the standard deviation for that distribution of scores. All measures were given the same weight using the domain standard score. Standard scores were measured to five decimal places to eliminate tie ranks. It should be noted that the difference between ranks is not always the same, e.g., counties ranked at 70 & 71 might be much closer than those at 52 & 53.

Overall Rank
Overall rank for each county was obtained in the following manner. First, domain standard scores were calculated. We then summed the four domain scores to get a total standard score for each county. Finally, we ranked the counties based on their total standard score from 1 (highest/best) to 77 (lowest/worst). All measures were given the same weight using the total standard score. Ranks were measured to five decimal places to eliminate tie ranks.
**Percent Change Over Time**

Percent change over time analysis was calculated by comparing the most recent data to the baseline data for each of the key indicators. To calculate percent change, we subtracted the values for the recent data from the base data and divided that quantity by the base data. The results are multiplied by 100 for readability. The sign of the percentages (i.e., positive or negative) was changed if necessary to ensure that positive percentages represented an improvement across time and negative percentages represented a worsening across time.

**ECONOMIC WELL-BEING INDICATORS**

**Children Living in Poverty**

Children living in poverty refers to the number of children under the age of 18 who live in families with incomes below the U.S. poverty threshold, as issued by the U.S. Census Bureau. The percentage of children in poverty is the percent of children under age 18 who live in families with incomes below poverty. The federal poverty definition consists of a series of thresholds based on family size and composition and is updated every year to account for inflation. A family is classified as poor if their income falls below a minimum standard. For example, in 2012, a family of adults with two children would fall in the “poverty” category if their annual income was below $23,283. The data are based on income received in the 12 months prior to the survey. Numbers include related children, or those children related to the “family head” by birth, marriage, or adoption and include relatives such as nieces and nephews. Children who are not related to the head of household are not included, nor those living in group quarters, such as institutional quarters or military barracks. Source: U.S. Census Bureau, Small Area Income and Poverty Estimates (SAIPE).

**Children with Parents Not in Labor Force**

Children with parents not in labor force refers to the number of children under age 18 living in families where one or both parents lack regular, full-time, year-round employment. Constituents included in this category are homemakers, retired workers, seasonal workers not currently looking for work, institutionalized people (e.g., incarcerated parents), and people doing unpaid family work, and such, does not necessarily represent traditionally unemployed parents. The percentage is a comparison of the estimate of the number of children in families with at least one parent (or both) not in the labor force to the estimate of the total number of children in families. Children at greatest risk in this category are those with neither parent in the work force as they are most likely to economically vulnerable. The 2012 estimate for this measure should not be compared with estimates prior to 2008 because of substantial changes made to the 2008 American Community Survey questions on labor force participation and number of weeks worked. Source: U.S. Census Bureau, American Community Survey, Table B23008.
SNAP Recipients
Children recipients of Supplemental Nutritional Assistance Program (SNAP) benefits refers to the unduplicated number of persons under age 18 who received SNAP benefits by year. Persons are eligible for participation in SNAP (formerly the Food Stamp Program) if they meet certain resource and income tests. Not everyone who is eligible for food stamps elects to take them. The percentage is a comparison of the number of children who received SNAP benefits to the estimate of the total number of children. Source: SNAP statistics: OK Dept. of Human Services. Population statistics: U.S. Census Bureau, Population Estimates.

Child Food Insecurity
Child food insecurity refers to the household-level economic and social condition of limited or uncertain access to adequate food. It does not necessarily mean a household has no access to food, but rather, a household may have financial difficulties paying for rent, healthcare, and groceries that leads to inadequate access to food. The percentage is a comparison of households with children who experienced food insecurity at some point in the past year to the total number of households. Feeding America examined the relationship between food insecurity and indicators of food insecurity and child food insecurity (poverty, unemployment, median income, etc.) at the state and county level. They then used the coefficient estimates from this analysis plus information on the same variables defined at the county level to generate estimated food insecurity rates for individuals or children at the county level. Information on calculations can be found at: http://feedingamerica.org/hunger-in-america/hunger-studies/map-the-meal-gap/how-we-got-map-data.aspx. Source: Feeding America, Map the Meal Gap 2012.

EDUCATION INDICATORS

Third graders Proficient or Above in Reading
Third graders proficient or above in reading refers to the percent of students scoring at proficient or above on the third grade Oklahoma Core Curriculum Reading Test, as defined by Oklahoma's PASS standards. Scores are only for regular education, full academic year students attending public schools. Source: OK State Dept. of Education, Profiles State Report.

Eighth graders Proficient or Above in Math
Eighth graders proficient or above in math refers to the percent of students scoring at proficient or above on the eighth grade Oklahoma Core Curriculum Math Test, as defined by Oklahoma's PASS standards. Scores are only for regular education, full academic year students attending public schools. Source: OK State Dept. of Education, Profiles State Report.

High School Students Not Graduating on Time
High school students not graduating on time refers to the percentage of a freshman class that does not graduate in four years. The measure is calculated by adding the dropout counts (under age 19) for the 9th, 10th, 11th, and 12th grades over the previous four-years and then diving that quantity by the sum of
the class graduates plus dropouts. It does not include students dropped from rolls for legitimate reasons, such as mobility, dropping out after 19, or students’ death. Source: OK State Dept. of Education, Profiles State Report.

**Children Attending Preschool**

Children attending preschool refers specifically to the number of 3- and 4-year-olds enrolled in a public early childhood/preschool class. Children enrolled in kindergarten are excluded from this analysis. The percentage is a comparison of children enrolled to an estimate of the total 3- and 4-year-old population. U.S. Census annual population estimates were utilized and yielded some enrollment percentages over 100%, and thus, should be interpreted with caution as a best estimate, and not a definitive count, of 3- and 4-year-olds attending preschool. Source: Education statistics: OK State Dept. of Education. Population statistics: U.S. Census Bureau, Population Estimates.

**HEALTH INDICATORS**

**Low Birthweight Babies**

Low and very low birthweight babies refer to percentage of live births weighing less than 2,500 grams (≈5.5 pounds). The percentage is a comparison of low birthweight babies to total number of live births. The data reflect the mother’s county of residence, not the place where the birth occurred. Source: OK State Dept. of Health, OK2SHARE, Vital Statistics.

**Children Without Health Insurance**

Children without health refers to estimates of the population under age 19 who have no health insurance coverage at any time during the year. The percentage is a comparison of uninsured individuals to all individuals in that age group. Source: Small Area Health Insurance Estimates (SAHIE), U.S. Census Bureau.

**Teen Births, Ages 15-19**

Teen births refers to the rate of births to teenagers between ages 15 to 19 per 1,000 females in this age group. The standard teen birth rate comparison age range is 15-19 years. The data reflect the mother’s county of residence, not the place where the birth occurred. Source: Birth statistics: OK State Dept. of Health, OK2SHARE. Population statistics: U.S. Census Bureau, Population Estimates.

**FAMILY AND COMMUNITY INDICATORS**

**Confirmed Child Abuse and Neglect**

Child abuse and neglect refers to harm or threatened harm to a child’s health or welfare by a person responsible for the child’s health or welfare. Child abuse and neglect includes sexual abuse, sexual exploitation, non-accidental physical or mental injury, and neglect of essential needs. Child abuse and neglect rate is the number of confirmations of maltreatment of children under age 18 per 1,000 children. Years listed are state fiscal years (SFY), not calendar years, meaning that 2013 data is based upon confirmations from July 1, 2012 to June 30, 2013. Source: Maltreatment statistics: OK Dept. of Human Services. Population statistics: U.S. Census Bureau, Population Estimates.
Children in Single-parent Families
Children in single-parent families refers to children under age 18 who live with their own unmarried parent, either in a family or subfamily. By this definition, single-parent families may include cohabitating couples. Children living with married stepparents are not included in this definition. The percentage is a comparison of children living in single-parent families (either mother or father alone) to all children in married-couple families. Source: U.S. Census Bureau, American Community Survey, Table B09002.

Juveniles Arrested for Violent Crimes
Juveniles arrested for violent crimes refers to the rate of arrests for juveniles between ages 10-17 per 100,000 children in this age group. Violent offenses include homicide, forcible rape, robbery, and aggravated assault. Arrest figures include rearrests of the same individual for different offenses. Source: Arrest statistics: Oklahoma State Bureau of Investigation. Population statistics: U.S. Census Bureau, Population Estimates.

Children in Foster Care
Children in foster care refers to the rate of children in foster care per 1,000 children under age 18. Years listed are state fiscal years (SFY), not calendar years, meaning that 2013 data is based upon foster care rates from July 1, 2012 to June 30, 2013. Source: Foster care statistics: OK Dept. of Human Services. Population statistics: U.S. Census Bureau, Population Estimates.

Aging Out of Foster Care
Youth aging out of foster care refers to the total number of youth emancipated from foster care. These youth have reached the age of 18 while in the custody of the state without ever achieving a permanent placement. Source: OK Dept. of Human Services.