SUMMARY REPORT

Background and history

Minnesota Planning developed the Children’s Report Card in 1994 to help the state and its 87 counties gauge the well-being of Minnesota’s children and youth. The Children’s Report Card provides data and interpretation online at www.mnplan.state.mn.us/children. The site includes state, county and school district data over several years for each of the 31 indicators. Maps and county rankings by indicator allow comparisons from county to county and with the state as a whole.

Overall trends

Overall, the data reported in the 2002 Children’s Report Card points to improving conditions for Minnesota’s children and youth. The current report card identifies positive trends for 18 indicators and negative trends for only four indicators. Eight indicators show no discernable trend, while marijuana use decreased among ninth-graders, but increased among 12th-graders. For the seven indicators with positive trends reported in the 1999 Children’s Report Card, six are still showing progress, while the seventh, the suicide rate, has held steady.

Positive trends:

- Lower rates of child poverty
- Fewer children receiving welfare
- A decrease in births by teens
- Less physical abuse
- Less sexual abuse
- More children feel their parents care about them
- Better prenatal care
- Higher rates of on-time immunization
- Improved scores on elementary assessment tests
- Improved scores on eighth-grade basic skills tests
- Reduced infant mortality
- Less tobacco use
- Less alcohol use
- Less sexual activity
- More volunteering
- Less fighting
- A lower incidence of driving under the influence of alcohol or drugs
- A decrease in juvenile apprehensions

Negative trends:

- More school transfers
- An increase in child abuse and neglect
- An increase in low birth-weight babies
- Fewer children assessed as normal in preschool screening
Data for the following indicators showed no discernable trend:

- Low-income school children
- Children placed out of home
- Family alcohol abuse
- High school graduation
- Exercise and physical activity
- Suicide attempts
- Daily intake of fruit and vegetables
- Children who usually feel good about themselves

Good progress has been made across a range of indicators. Improvements are most evident in the goal areas of reducing child poverty, raising education standards, and creating caring communities. The self-reported decreases in physical and sexual abuse are reassuring but the Minnesota Department of Human Services reports an overall increase in child abuse and neglect. There has been limited progress in improving other aspects of providing a stable, supportive environment for children. Health indicators remain stable, with a reduction in alcohol and tobacco use, but many have shown minimal progress. Indicators grouped around early childhood development are also mixed, with the continued increase in low birth-weight babies a cause for concern.

New in the 2002 Children's Report Card

The 2002 Children's Report Card is the fourth in a series of progress reports which measure the welfare of children and youth in Minnesota. Previous report cards were issued in 1994, 1996 and 1999.

The Children's Report Card was created as an extension of Minnesota Milestones, a long-range plan for the state and a tool to measure results, which was developed by Minnesota Planning in 1992. Since 1999, the Children's Report Card has been organized around six Minnesota Milestones goals. This structure strengthens the state’s ability to track trends. With a focus on county-level and school-district data on children and youth, the Children's Report Card supplements the broader focus of Minnesota Milestones goals by tracking more specific indicators related to young people.

The online 2002 Children’s Report Card includes many direct links to local data and the site allows for more frequent data updates than printed copies permit. Each indicator will be updated as soon as new data becomes available.

The report card includes five new indicators and one revised indicator. The new indicators relate to preschool screening, how much children feel their parents care about them, marijuana use, daily intake of fruit and vegetables and the extent to which children feel good about themselves. Fifth-grade assessments have been added to third grade assessments to give a fuller picture of elementary school skills. Eleven indicators are shared with Minnesota Milestones. Data for 15 indicators comes from the 2001 Minnesota Student Survey, a statewide survey of public school students administered by the Minnesota Department of Children, Families & Learning. These 15 indicators present data for ninth- and 12th-grade students. Other indicators use data from a variety of state and federal sources.

Assessing progress toward goals

In 21 of 31 indicators trends are positive if the data shows a consistent decrease over time. For these indicators, trends are considered negative when the data consistently increases. Trends are rated the opposite for 10 indicators: how much children feel their parents care about them, on-time immunizations, preschool screening, elementary school skills, basic standards, high school graduation, exercise, daily intake of fruit and vegetables and volunteer work. For these indicators, trends are ranked positive when the data increases, and negative when it decreases. Any indicator showing a slight or unclear data change is judged to be stable or mixed.

Calculating trends for the 15 indicators from the Minnesota Student Survey is challenging. Since these indicators present data for ninth- and 12th-graders, positive trends are noted only when the data consistently changes in the same direction for both grades. When data showed positive results for one grade but not the other, the indicators were judged to be mixed. The same criteria was used for judging the multiple components of the basic standards and elementary school assessment indicators, which include various scores.

Many report card indicators use rates. Unless stated otherwise in the technical notes, the rates use population data from the 2000 Census.

Goal 1: Our children will not live in poverty.

Progress

Recent data indicates that the percentage of Minnesota children living in poverty has decreased. This positive trend is clearly shown by a 3 percent drop from 1990 to 2000 in the number of children living below the federal poverty guideline. Preliminary figures show almost a 10 percent drop in the number of children receiving welfare in Minnesota. These indicators paint a brighter picture for Minnesota’s children than existed even a few years ago. However, after decreasing in 2001, the number of children receiving free or reduced-price school meals increased in 2002.

Challenges

While all indicators in this goal yielded largely positive results, questions are still left unanswered. Did the decline in overall child poverty result from better public services during the last decade or should it be attributed to the thriving economy of the mid- and late-1990s? Inequality of socio-economic status continues to present a significant challenge not only in Minnesota but also nationally.

Goal 2: Families will provide a stable, supportive environment for their children.

Progress

Families are the basic building block for successful and healthy children. Generally, Minnesota has made strides toward meeting this goal. The marked decrease in students reporting physical and sexual abuse is reassuring. Although the figures for out-of-home placement have remained constant over the past decade, in 2000 more children left out-of-home placement than entered it. Small, but still encouraging, improvements are evident in the declining percentage of births by teens and increase in children who feel their parents care about them “very much.”
Goals and indicators at a glance

**Our children will not live in poverty.**
1. Child poverty
2. Low-income school children
3. Children receiving welfare

**Families will provide a stable, supportive environment for their children.**
4. School transfers
5. Births by teens
6. Children placed out of home
7. Child abuse and neglect
8. Physical abuse
9. Sexual abuse
10. Family alcohol abuse
11. Children who feel their parents care about them

**All children will be healthy and start school ready to learn.**
12. Prenatal care
13. Low birth weight
14. On-time immunization
15. Preschool child development

**Minnesotans will excel in basic and challenging academic skills and knowledge.**
16. Elementary school skills
17. Eighth-grade basic skills
18. High school graduation

**Minnesotans will be healthy.**
19. Infant mortality
20. Exercise and physical activity
21. Suicide attempts
22. Smoking and tobacco use
23. Alcohol use
24. Marijuana use
25. Sexual activity
26. Daily intake of fruits and vegetables
27. Children who usually feel good about themselves

**Our communities will be safe, friendly and caring.**
28. Volunteering
29. Fighting
30. Driving under the influence of alcohol or drugs
31. Juvenile apprehensions

**Challenges**
Although progress towards this goal is encouraging, much work remains. The proportion of young people who have experienced child abuse and neglect rose to 9.2 percent. This represents the highest figure since 1992. Minnesota continues to have high rates of school transfers, a key indicator for family stability and emotional well-being. Family alcohol abuse, as reported by students, increased slightly in 2001.

**Goal 3: All children will be healthy and start school ready to learn.**

**Progress**
Minnesota infants are marginally more healthy than in previous years. The level of prenatal care improved in 2001 when only 2.9 percent of all babies born in Minnesota received less than adequate prenatal care. The percentage of children whose immunizations were up-to-date by age two has increased dramatically since 1989 and continues to rise. This is an important indicator for the health of young children and work remains to be done in this area.

**Challenges**
The positive trends are mirrored by one negative, and one mixed trend. The percentage of children identified as normal in preschool screenings declined in 2001 by 1 percent, though this may be mitigated by better assessment methods and the fact the more children are receiving help earlier. The number of low birth-weight babies has changed little since 1999 although, after 10 years of annual increases, the figure appears to have leveled off. Minority children are heavily disadvantaged in their pursuit of this goal and continue to show progress at a much slower rate than white children.

**Goal 4: Minnesotans will excel in basic and challenging academic skills and knowledge.**

**Progress**
Key indicators demonstrate progress toward Minnesota’s K-12 education goals. Elementary assessments show improvements of 5 percent or more on mathematics, reading, and writing tests from just last year. Since eighth-grade basic standards tests became mandatory in 1998, the trend has been positive. Passing math scores rose from 71 percent in 1998 to 75 percent in 2002. Reading test pass rates also rose from 68 percent in 1998 to 80 percent in 2002. On national tests, Minnesota consistently ranks at or near the top in the nation.

**Challenges**
Four-year high school graduation rates dropped slightly from 2000 to 2001, but remain fairly steady at 78.5 percent. Despite the rise in test scores and Minnesota’s high ranking nationally, there is still room for improvement. Only one-third of Minnesota elementary and secondary students demonstrate “proficient” mastery in national mathematics and reading tests. Nearly one in four falls short of even basic mastery.
Goal 5: Minnesotans will be healthy.

Progress
Data from 2001 suggests positive trends for the health of Minnesota’s young people. Infant mortality, use of tobacco products and alcohol use were all reported at lower levels. Sexual activity was lower, as was ninth-grade use of marijuana. Minnesota’s children consumed slightly more fruits and vegetables in 2001 than in 1998. Minnesota consistently leads the nation in public health related outcomes, a trend which the most recent data continues to support.

Challenges
Several indicators of the health of Minnesota’s children are of concern. Exercise and physical activity rates remain constant, with 68 percent of ninth-grade and 50 percent of 12th-grade students reporting such activity four or more days a week. Suicide rates leveled off after some progress in the 1990s. Also, the self esteem of Minnesota’s young people decreased slightly from previous years. The overall positive trend similarly fails to note the discrepancy between white and minority children for whom progress toward this goal has been much slower.

Goal 6: Our communities will be safe, friendly and caring.

Progress
Minnesota’s children are volunteering more, fighting less, and driving under the influence of drugs or alcohol less often, thus making progress toward the goal of safer, friendlier communities. Since 1998, volunteering has increased by 2 percent for ninth-grade and 3 percent for 12th-grade students. The number of students who fought in the past year has decreased since 1998 by 3 percent in ninth-grade and remained nearly constant at 21.9 percent in 12th-grade. In 2001, driving under the influence of alcohol or drugs is down 2 percent from 1998 levels. Youth apprehensions rose until 1998, fluctuated between 1999 and 2000, but fell dramatically in 2001.

Challenges
The number of young people who admit to driving after consuming alcohol or drugs remains high. Despite the decrease in juvenile apprehensions in 2001, there were significant increases in less serious crimes between 1991 and 2000, so it is too early to judge whether this positive trend can be maintained over time.