

A Portrait of  
**children**  
in Northern Virginia 2010



A REPORT PRESENTED BY THE COMMUNITY FOUNDATION FOR NORTHERN VIRGINIA AND VOICES FOR VIRGINIA'S CHILDREN



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During FY 2010,  
The Community  
Foundation will award

**\$4 million**

in grants to nonprofits,  
interfaith groups,  
and schools.

## About The Community Foundation for Northern Virginia

The Community Foundation for Northern Virginia works to grow philanthropy to help meet the most critical needs of our community. Founded in 1978, the Community Foundation grows funds for charitable giving in our region. We are an independent, community based foundation that develops grant making funds from the community, for the community.

During FY 2010, the Community Foundation for Northern Virginia will award \$4 million in grants to nonprofits, interfaith groups, and schools; award \$130,000 in scholarships; and report approximately \$30 million in managed assets.

Our knowledge of the Northern Virginia area is what sets us apart from other community based nonprofits. In addition to grant making, we continuously look at important and innovative ways to add value to our community. We are uniquely positioned to take a leadership role in helping to identify community needs and to guide community action to meet those needs.

You can learn more about the Community Foundation for Northern Virginia and how to support our work at [www.communityfoundationnova.org](http://www.communityfoundationnova.org).

## About Voices for Virginia's Children

Voices for Virginia's Children is a statewide, non-partisan research and advocacy organization that champions public policies to improve the lives of Virginia's children. We are the independent voice advocating for children, especially those who are disadvantaged or otherwise vulnerable and who often go unheard in the public policy arena. Using our Kids Count system, we track multiple indicators of the well-being of Virginia's children and use that information to identify unmet needs and guide policy recommendations. Through independent, non-partisan research, data-based policy solutions and vigorous advocacy, we inspire Virginia's leaders and citizens to make children a higher public policy priority.

We hope this Portrait of Children in Northern Virginia will inspire the region's leaders to make policy choices that improve the lives of children. Such policy choices promote broad, longer-term system changes that strengthen communities and the organizations directly serving our children and families, ultimately benefiting thousands of children.

You can learn more about Voices and how to support our work at [www.vakids.org](http://www.vakids.org).

Through independent,  
non-partisan research,  
data-based policy  
solutions and vigorous

**advocacy,**  
we inspire Virginia's leaders  
and citizens to make children  
a higher public policy priority.

## A Resource for Knowledge and Strategic Giving

Every hope for the future depends on a community's capacity to meet the needs of its children. Children need nutritious food, shelter from the elements, access to healthcare, a sound education and a loving family. With these basic needs in place, every child in Northern Virginia has the opportunity to reach his or her full potential.

The Community Foundation for Northern Virginia and Voices for Virginia's Children are pleased to present "A Portrait of Children in Northern Virginia," a first-ever snapshot of the status of Northern Virginia's children. The research for this Portrait was assiduously performed by Health Systems Agency of Northern Virginia, and special thanks go to Dean Montgomery and his staff.

The report highlights demographic, economic, and social trends that impact children and youth ages 0-18 in Northern Virginia. It includes the most current available data from the U.S. Census Reports, American Community Survey, Virginia Vital Statistics, the Annie E. Casey Kids Count Data, and other sources.

While we are fortunate to live in an area that is highly educated and that ranks high on most standard indicators of well-being, there are a number of areas where concern and attention are warranted. As the report demonstrates, significant socio-economic differences exist between, and even within, Northern Virginia jurisdictions. Some of the most serious issues children, youth and families face are especially concentrated in specific geographic areas, or "pockets of poverty." These pockets are where low income families, larger numbers of dropouts, larger numbers of expectant mothers who do not obtain adequate prenatal care, and higher percentages of low birth weight infants are concentrated. Consequently, youth in these pockets are at higher-than-average risk for the development of child and adolescent problems.

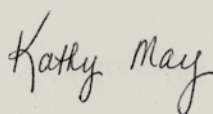
The latest data available on most indicators reviewed for this report does not reflect the full impact of the recession, which began in late 2007. Figures released by the U.S. Census Bureau in September 2009 show a substantial increase in child poverty in Virginia during 2008. As the effects of the recession and the persistently high unemployment rate continue to build, it is likely that significantly more children in the region will fall into poverty over the next two years. The 2010 census data will help to reveal the full magnitude of the economic downturn's impact on our children.

We trust that the data offered here will inform and inspire you, lead to a meaningful dialogue about the real needs of our children, grow philanthropic and public investments to meet those needs, and encourage all of us to help improve the lives of our region's children.

Sincerely,



Eileen Ellsworth  
President  
Community Foundation for Northern Virginia



Kathy May  
Director, Northern Virginia Initiative  
Voices for Virginia's Children

## DEMOGRAPHY: POPULATION CHARACTERISTICS



More than

**530,000**

children ages 0-18 live  
in Northern Virginia.

### After a decade of population shifts, the outer suburbs are younger and more diverse

Northern Virginia is home to more than 2,000,000 residents. This is about 30% of Virginia's total population. In 2008, 530,000 children, or one-fourth of Northern Virginia's total population, were under the age of 18. One in four of Virginia children under the age of 18 live in Northern Virginia.

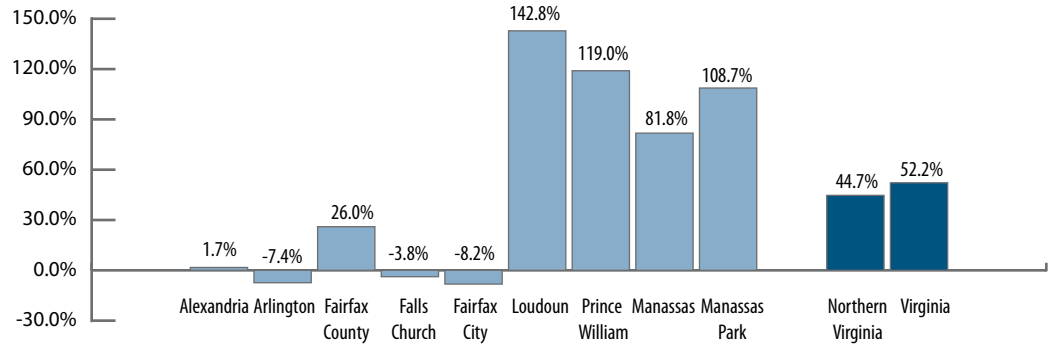
**More than one-third of the children in Northern Virginia reside in Loudoun and Prince William Counties.**

Decades ago, residential growth was centered in the inner-ring suburbs of Northern Virginia and later in Fairfax County. In contrast, during the decade ending in 2010, 75% of the net population increase has been along the outer-rim in Prince William and Loudoun counties and in Manassas and Manassas Park.

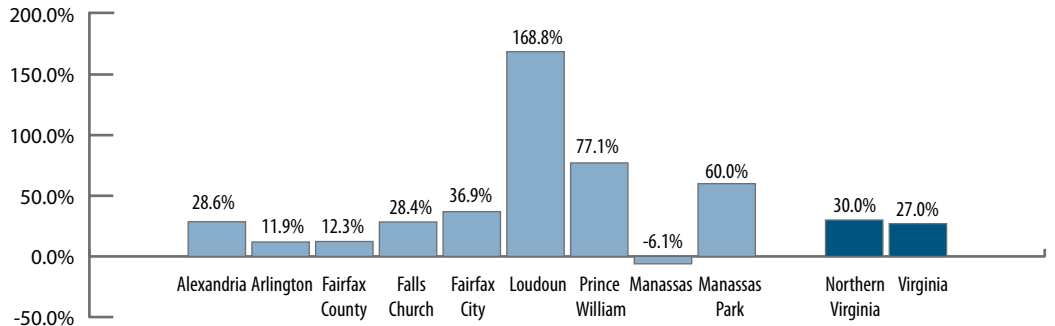
The most dramatic change in Northern Virginia's demography is the rapidly growing number of immigrants and minorities, particularly in the outer suburbs.

These demographic trends affect the need for education, health care, and affordable housing. They also test the ability of our region to meet the needs of all of its children.

**Population Change**  
*Hispanic Residents 0-17,*  
 2001-2007  
 Source: U.S. Census, 2001-2007



**Population Change**  
*Asian Residents 0-17,*  
 2001-2007  
 Source: U.S. Census, 2001-2007

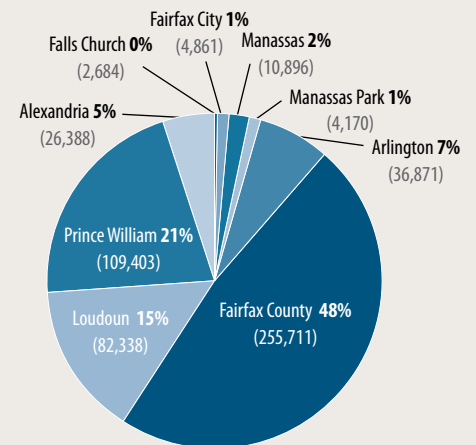


**The Facts**

- Northern Virginia’s population under 18 years of age has nearly doubled since 1980 to more than 530,000 children and youth.
- 36% of children in Northern Virginia under 18 years of age now reside in Loudoun County and Prince William County.
- Minority populations are present in substantial numbers in all Northern Virginia jurisdictions, but are more highly concentrated along the Route 1 corridor in the eastern part of the region, in the Bailey’s Crossroads area of Fairfax County, in the greater Manassas/Manassas Park area of western Prince William County, and in the Herndon-Sterling area of western Fairfax County and eastern Loudoun County.
- School populations throughout Northern Virginia are highly diverse. Only two of the region’s school systems, Loudoun County and the City of Falls Church, have a majority White non-Hispanic population. Minority populations combined make up the majority of the school population in all other school systems.
- Racial and ethnic diversity in Northern Virginia continues to increase. Between 2001 and 2007, the Hispanic population under 18 years of age grew by nearly 45% from approximately 68,000 to more than 98,000. During the same period, the Asian population under 18 years of age grew by more than 30%, from approximately 51,000 to nearly 67,000.

**Distribution of Children and Youth in Northern Virginia Communities**

Source: Weldon Cooper Center for Public Service, University of VA, 2009



Percentage of Population <18 Years of Age, 2008

## ECONOMIC & SOCIAL CIRCUMSTANCES

### Deep pockets of poverty exist across the Northern Virginia region

By most measures, Northern Virginia is relatively affluent and is known for its economic vitality and strength. Because of this, many children in the region benefit from a wide array of resources and supports. But in each jurisdiction, wide income disparities between the wealthiest and poorest residents exist. Significant pockets of poverty and disadvantage are present even in the wealthier communities.

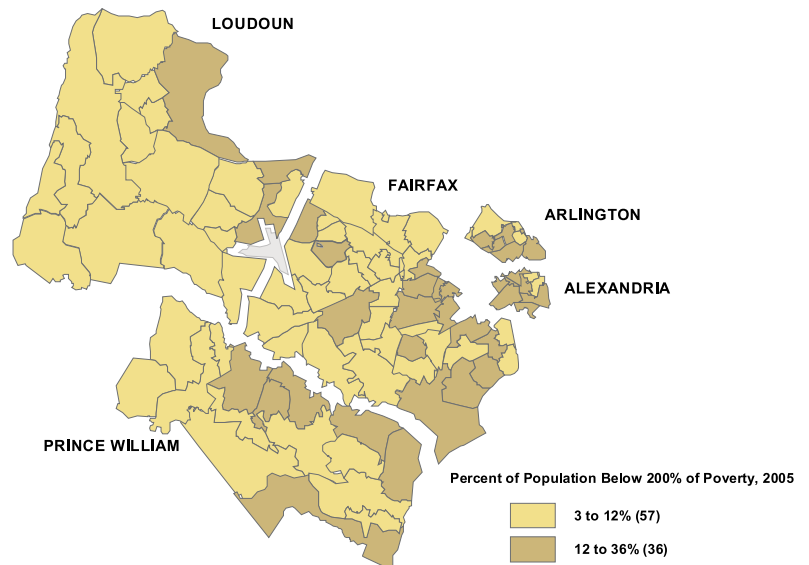
The deepest pockets of poverty in Northern Virginia can be found along the Route 1 corridor in the eastern part of the region, in the Bailey's Crossroads area of Fairfax County, in the greater Manassas/Manassas Park area of western Prince William County, and in the Herndon-Sterling area of western Fairfax County and eastern Loudoun County.

Living in poverty can significantly compromise a child's development. Children in poor families have worse health and educational outcomes and are more likely to experience violent crime compared to children growing up in more-affluent families. For many children, poverty persists into adolescence and adulthood, and is associated with a greater risk of dropping out of school, teen childbearing and lower earnings for young adults.

Federal poverty guidelines are a standard measure of family and community economic hardship. There is general agreement that, in most communities, families need an income of about twice the Federal Poverty Level (about \$44,000 per year for a family of four in 2009) to cover basic necessities. The poverty level does not take into account the cost of living in a specific community. The high cost of living in Northern Virginia means that many additional families here struggle to make ends meet.

#### Percentage of the Population Living Below 200% of the Federal Poverty Level in Northern Virginia

Source: U.S. Census, American Community Survey, 2005-2007



## The Facts

- A substantial number of children in Northern Virginia live below the Federal Poverty Level (FPL), defined as \$22,050 for a family of four in 2009. In 2005 – 2007 the percentage of families with children under 18 years of age with incomes below the FPL ranges from less than 2% in Loudoun County to nearly 18% in Manassas. In total, more than 30,000 children in Northern Virginia live in poverty.
- Specific communities in the region have large concentrations of children living in poverty. Families with low and poverty-level incomes are concentrated in the areas shown on the map on page 4. The children and youth in these families are at higher-than-average risk for the development of child and adolescent problems.
- More than 76,000 students in the region participate in the Free or Reduced Price School Lunch Program. To qualify for the program, students must live in families that earn approximately \$40,000 annually (for a family of four). Program participation levels are therefore a useful tool for estimating school district level poverty.
- Participation levels in the Free or Reduced Price School Lunch Program vary widely within the region, ranging from a low of 6% in the City of Falls Church to more than 50% in Alexandria.

More than 30,000 children in Northern Virginia live below the Federal Poverty Level.

More than

**76,000**

students participate in Free or Reduced Price School Lunch Program.





## Children in immigrant families are a rapidly growing segment of our population

Children in immigrant families, defined as people under age 18 who are foreign born or who live with at least one foreign-born parent, are a rapidly growing segment of Northern Virginia's population. Between 2005 and 2007, approximately 43% of Northern Virginia's children lived in immigrant families. This is more than twice the state and national rates. The vast majority of children in immigrant families are citizens born in the United States to foreign-born parents.

Immigrant families bring many benefits to our communities, including stable healthy families, a strong work ethic, a youthful population, and cohesive communities. Many immigrant families are thriving and contributing to the vitality of the region. But overall, immigrant families are more likely to be low-income.

For children in immigrant families, parents' English language ability is an important factor in their overall well-being and their chance for success. These children and their families may experience barriers in communicating with health and other service providers. They may spend more time mastering English skills in school, potentially putting them behind in other learning. The language barrier may also make it more difficult for immigrant parents to be involved in community activities and to obtain available food, health, mental health and housing assistance when it is needed.

Approximately

**43%**

of Northern Virginia  
children live in  
immigrant families.



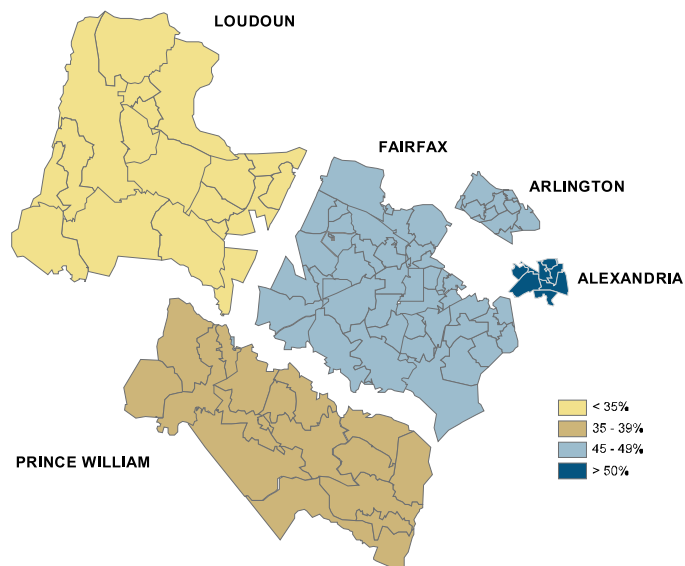
## The Facts

- The percentage of children in immigrant families in Arlington, Alexandria, and Fairfax County is higher than the regional average. However, Loudoun and Prince William Counties are catching up. Between 2001 and 2007 the Hispanic population under 18 years of age increased by more than 100% in Loudoun and Prince William counties. The Asian population under 18 years of age increased by more than 100% in Loudoun and more than 75% in Prince William County.
- More than 50% of the 30,000 children living in poverty in Northern Virginia are children in immigrant families.
- The U.S. Census Bureau considers a “linguistically isolated” household as one in which all members of the family ages 14 and up have difficulty speaking and understanding English. All Northern Virginia jurisdictions have substantially higher percentages of linguistically isolated households than are found statewide or nationally. Percentages range from a low of 4.8% of households in Loudoun County to 12% of households in Manassas City.
- Limited English Proficiency (LEP) among Northern Virginia public school students is much higher than statewide and nationally. The number of students not proficient in English increased substantially in all local jurisdictions during the last decade. In 2008 there were more than 62,000 students with limited English proficiency in the region.

More than 62,000 students in Northern Virginia have limited English proficiency.

### Distribution of Children Living in Immigrant Families by County in Northern Virginia, 2005-2007

Map source: U.S. Census Bureau, American Community Survey, 2005-2007



Approximately  
**90%**  
of adults in  
Northern Virginia  
have completed  
high school.



## In a highly educated region, there are disparities in high school drop out rates

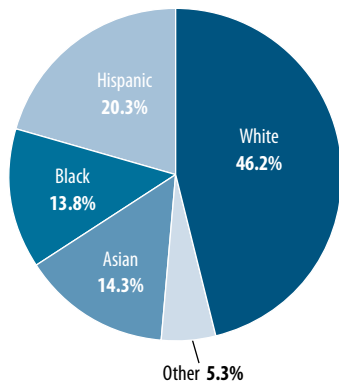
As with health status, education levels are correlated with personal and community well-being. Higher educational attainment is usually indicative of higher social status, higher income, and superior health status. Children of well educated, affluent adults and families tend to be healthier and at considerably less personal and social risk.

Northern Virginia is known for high performing school systems. Most elementary students in the region have made measurable progress in the Virginia Standards of Learning (SOL) assessment program. In most Northern Virginia jurisdictions, the percentage of students passing SOL examinations is higher than the passing rate statewide. Substantially higher numbers of third grade students passed standardized exams in 2006 than in 2000.

Average Northern Virginia high school dropout rates are lower than those seen nationally and statewide, and on time graduation rates are higher than the national rates. However, disparities exist among various population groups. For example, a disproportionate number of Hispanic and Black high school students in Northern Virginia drop out each year.

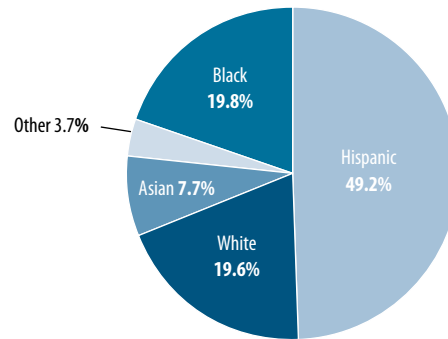
## School Enrollment by Race & Ethnicity, Northern Virginia, 2009-10

Source: Virginia Department of Education, 2009



## School Dropouts by Race & Ethnicity, Northern Virginia, 2007-2008

Source: Virginia Department of Education, 2010



### The Facts

- Education levels in Northern Virginia are high. More than 55% of adults in Northern Virginia have college degrees, about twice the national percentage.
- Approximately 90% of adults in all jurisdictions have completed high school.
- Parental education is a strong indicator of the likelihood that a child will experience poverty. In 2007 about 43% of Virginia children of parents without high school degrees lived in poor families. This compares with 12% of children whose parents graduated from high school and 6% of children whose parents had some college education.
- Overall, 8.3% of students in the State of Virginia drop out of high school. Four Northern Virginia jurisdictions exceed the statewide rate, including the City of Alexandria (10.6%), Arlington County (9.4%), Manassas City (14.8%), and Prince William County (9.4%).
- High school dropout rates in Northern Virginia are disproportionately high among Hispanic and Black high school populations. Region-wide, nearly half of all dropouts are Hispanic and about one-fifth of all dropouts are Black.

**Region-wide, nearly half of all dropouts are Hispanic and about one-fifth of all dropouts are Black.**

## Maternal and infant health indicators turned negative in the last decade

The health and well-being of mothers, infants, and young children are of critical importance, both as reflections of the current health status of the region and as predictors of the health of the next generation.

Several maternal and child health indices in the region have turned negative. In particular, the number and percentage of pregnant women not obtaining timely prenatal care, the number and percentage of births to unmarried parents, and the infant mortality rate increased region wide during the last decade.

Infant mortality rates  
in Northern Virginia  
increased by more than  
**20%**  
between 2000 and 2007.

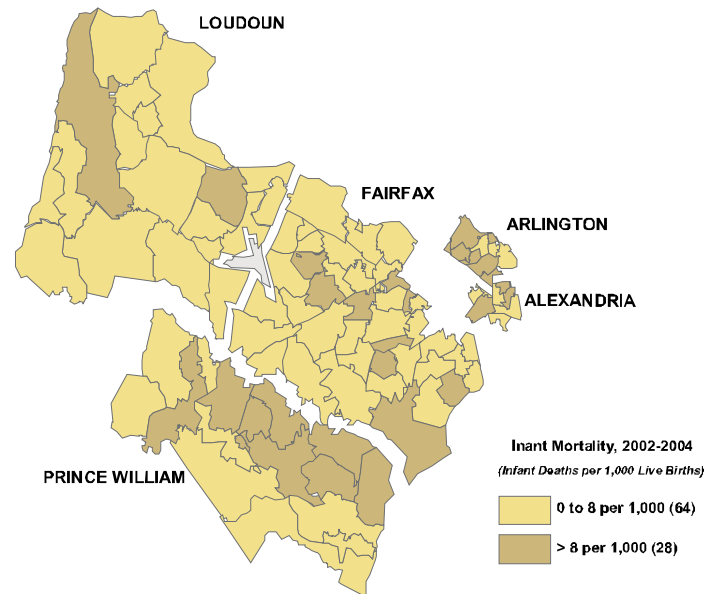


## The Facts

- Prenatal care levels in Northern Virginia have consistently been below statewide levels since 2000. Women who obtain prenatal care (ideally in the first 13 weeks of pregnancy) have healthier babies, fewer premature deliveries, and fewer serious health problems related to the pregnancy.
- Approximately 25% of all births in Northern Virginia are to unmarried parents. Non-marital births are at higher risk of being low birth weight and/or preterm. Children born to unmarried parents usually have less of the social and financial support conducive to healthy development.
- There has been a region-wide increase in the infant mortality rate since 2000. With this increase, some jurisdictions now have infant mortality rates higher than the national average. Between 2000 and 2007, the regional infant mortality rate increased by more than 20%.
- During 2007, the Black infant mortality rate in Northern Virginia, 10.9 deaths per 1,000 live births, was about twice the rate for Whites, 5.5 deaths per 1,000 live births.

## Infant Mortality Rates Across Northern Virginia

Source: Virginia Center for Health Statistics,  
Virginia Department of Health, 2007-2008



Approximately  
**25%**  
of all births in  
Northern Virginia  
are to unmarried  
parents.

### Our children and youth face additional behavioral and environmental risks

Adolescents are more likely to engage in behaviors that threaten their health and safety. Some risky behaviors measured in this report include the numbers of adolescent accidental deaths, teen pregnancy rates, teen suicide rates, and teen involvement in the juvenile justice system.

Children and youth that experience abuse, are involved in the foster care system, or have disabilities are also at increased risk.

Child suicide rates in Northern Virginia are less than half the statewide rate.

#### The Facts

- The accidental death rate for children in Northern Virginia under the age of 18, 10.5 deaths per 100,000, is lower than the Virginia rate, 13 deaths per 100,000, and the national rate of 15 deaths per 100,000.
- Motor vehicle accidents account for about 60% of accidental deaths among youth under 19 years of age in Northern Virginia. Accidental death rates are much higher in Alexandria and Prince William County than elsewhere and much higher among males than females. The overall rate of death by motor vehicle accidents for children under 19 in Northern Virginia, 8.9 deaths per 1,000, is half the national rate, 17.8 deaths per 1,000.
- Teenage pregnancy rates vary widely within the region. The rates in Alexandria and Prince William County are higher than elsewhere in the region. The social consequences of teenage births are daunting and difficult to resolve. Teen mothers are more likely to drop out of school than those who delay childbearing. Only about 40% of teenagers who have children before age 18 finish high school, compared with 75% for those who do not give birth before age 20.
- The frequency of self-inflicted injury and suicide in Northern Virginia is much lower than the national or statewide rates. Between 1996 and 2005, the average suicide rate among Northern Virginia residents 10 to 24 years of age was 5.5 deaths per 100,000, less than half the statewide rate of 11.7 deaths per 100,000.
- Region-wide, about 12,500 children between the ages of 5 and 15 have one or more disabilities. Mental disabilities account for more than half of the total.

Approximately

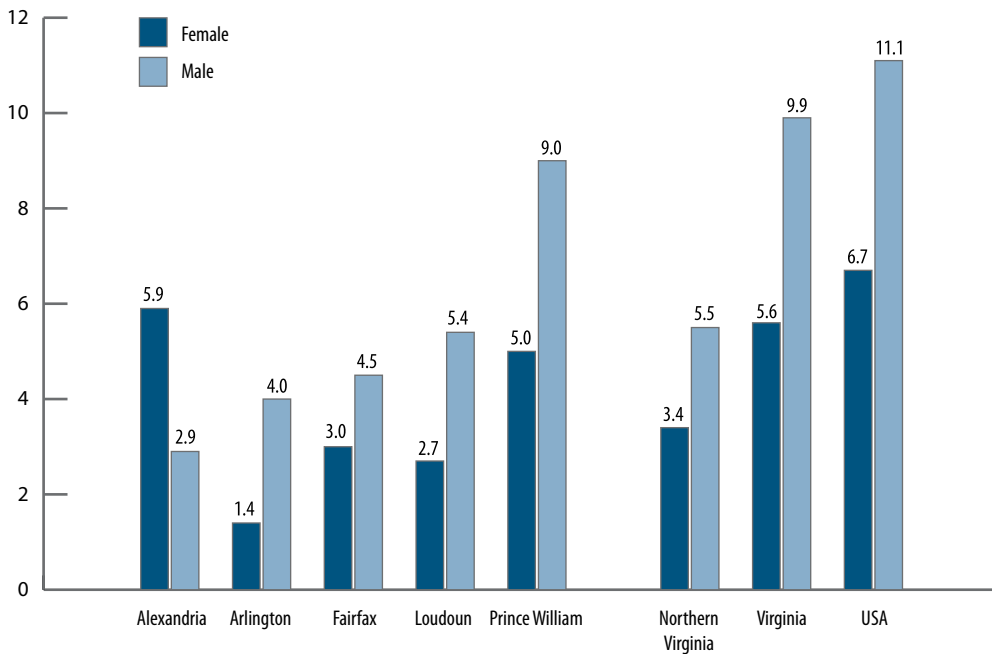
12,500

children in Northern Virginia have one or more physical or mental disabilities.



### Accidental Deaths (Motor Vehicle) per 100,000 Children Under the Age of 19

Source: Compressed Mortality File 1999-2006. CDC WONDER On-line Database, 2009



The rate of death by motor vehicle accidents for children under the age of 19 in Northern Virginia is half the national rate.





## Section I Introduction

### *Purpose*

This report examines the wellbeing of Northern Virginia residents less than 18 years of age. It focuses on selected demographic, economic, educational, social and health indicators. The profile derived from this assessment permits identification of regional and intraregional variations and disparities that may merit study in depth, or intervention and remediation.

### *Northern Virginia*

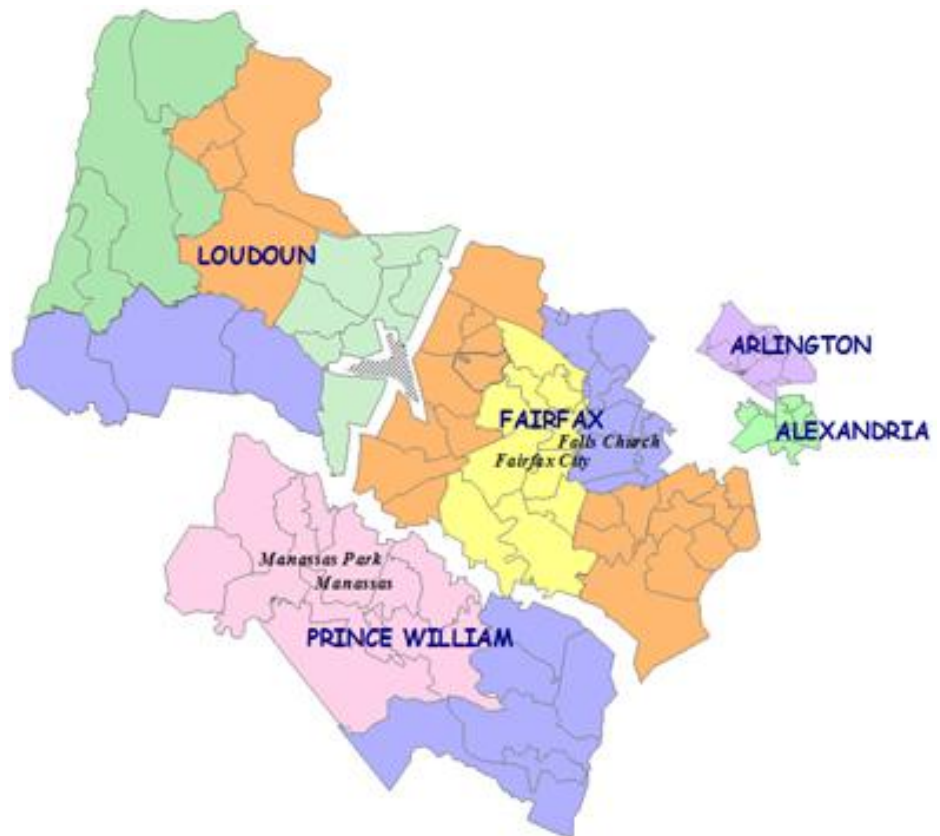
Northern Virginia is made up of nine contiguous political jurisdictions:

**Four counties** –Arlington, Fairfax, Loudoun and Prince William;

**Five independent cities** – Alexandria, Fairfax, Falls Church, Manassas and Manassas Park.

In addition to the five independent cities there are fourteen incorporated towns within the borders of Fairfax, Loudoun and Prince William counties.

This region constitutes Planning District (PD) 8, one of Virginia’s 21 multipurpose regional planning areas. Though the smallest geographically, the region is demographically distinct. Northern Virginia is the most populous, youngest, most affluent, most densely populated, and most urban of Virginia’s planning regions.





The information and discussion presented below examines regional, jurisdictional and, where possible, community conditions and circumstances that affect the social and economic wellbeing, health, and future of children and youth throughout the region.

### ***Data Sources***

Data and information examined comes largely from primary sources. Those relied upon include:

U.S. Census Reports, 1980, 1990 and 2000, U.S. Bureau of the Census, accessed in 2009; *American Community Survey*, U.S. Census Bureau, 2005 - 2007; *Virginia Vital Statistics, Annual Reports and Database*, Virginia Department of Health, 1980, 1990 and 2000 through 2007; and *Virginia Hospital Discharge Datasets, 2000—2007*, Virginia Health Information, 2008.

Virginia vital and health statistics, decennial census data, and Virginia hospital discharge information are from primary data sets. Most of these data are counts of the population and of social, economic, and health characteristics of subsets of the population. Unless indicated otherwise, the data reported are for the population 0-17 years of age.

Use of these primary data sets makes it possible to examine population characteristics at discrete levels, which permits identification of regional (Northern Virginia), intraregional, and sub-regional conditions and circumstances.

Secondary sources consulted consist largely of recent publications that report and assess the social, economic, and health status of children and adolescents nationally and in Virginia. The publications, and related data, relied upon include:

*National Healthcare Disparities Report, 2007*, Agency for Health Care Research and Quality, USDHHS, 2008;  
2008 Statistical Report, Virginia Department of Social Services, 2008;  
*Health, United States, 2006: Chartbook on Trends in the Health of Americans, NCHS, 2007*;  
*Kids Count Data*; The Annie E. Casey Foundation, 2008-2009; and  
*Virginia Atlas of Community Health*, Virginia Center for Healthy Communities, 2008.



### ***Method of Presentation***

Where data permit reliable and relevant comparison, Northern Virginia indices are compared with those of the state of Virginia and the nation.<sup>1</sup>

Data are presented for all principal Northern Virginia jurisdictions, where possible and meaningful. This permits examination of intraregional variation, which in some cases is substantial. Limitations of data collection and reporting necessitate that for many indices the independent cities within Fairfax and Prince William counties be combined with those counties. Unless otherwise indicated, City of Falls Church and, Fairfax City are included in Fairfax County data; Manassas and Manassas Park are included in Prince William County data.

### ***Limitations***

The principal limitation in the data presented is that some is based on national and state population surveys. In some instances, the sample size is not large enough, or is not available for a sufficient number of years, to permit construction of reliable local (community) rates and estimates. Synthetic estimates are derived from the data sets for specific subsets of the population. These data are inherently less precise, and less reliable, than information from data sets that include counts of the entire population being examined.

Another important limitation is that some data sets do not distinguish between the non-Hispanic White and the Hispanic populations. The principal implication of this imprecision is that in some instances rates for those of Hispanic ancestry are underestimated and those for non-Hispanic Whites are overestimated. A related concern is that reported disparities between Black and White populations necessarily underestimate the actual differences in some cases.

It should be kept in mind that these data do not reflect the negative economic dislocations that began in mid 2008 and continued throughout 2009. The 2010 census data will need to be analyzed to determine the magnitude of these changes in Northern Virginia.



## **Section II Demography**

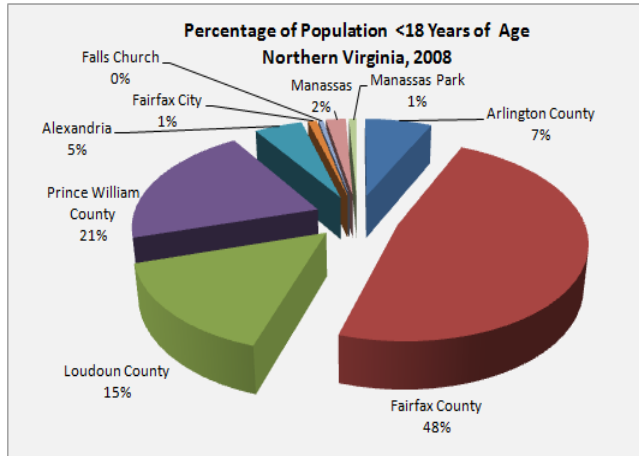
Northern Virginia is demographically distinct. The regional population, estimated to be more than 2.1 million in 2008, has grown rapidly for several decades, nearly doubling since 1980.

During the last five decades the region has added, on average, about 300,000 residents each decade. Most projections indicate that the regional population is likely to grow to about 2.5 million by 2025.<sup>2</sup>

For many decades, residential growth was centered in the inner-ring suburbs of Northern Virginia and later Fairfax County. In contrast, during the decade ending 2010, 75 percent of the net population increase has been along the outer-rim in Prince William and Loudoun counties and in Manassas and Manassas Park.<sup>3</sup>

The population 0-17 years, too, has grown rapidly, especially during the last two decades.<sup>4</sup> During the decade between 1990 and 2000 the population <18 years of age grew at about the same rate as the overall population, about 24%. Growth among this age group, estimated at nearly 24% between 2000 and 2008, has been much higher than the overall regional growth rate (16.5%) this decade.

In 2008, there were more than 530,000 persons under 18 years of age in Northern Virginia. The size and distribution of this population varies widely within the region. About half (49%) of the region's children reside in Fairfax County (including Fairfax City and Falls Church).

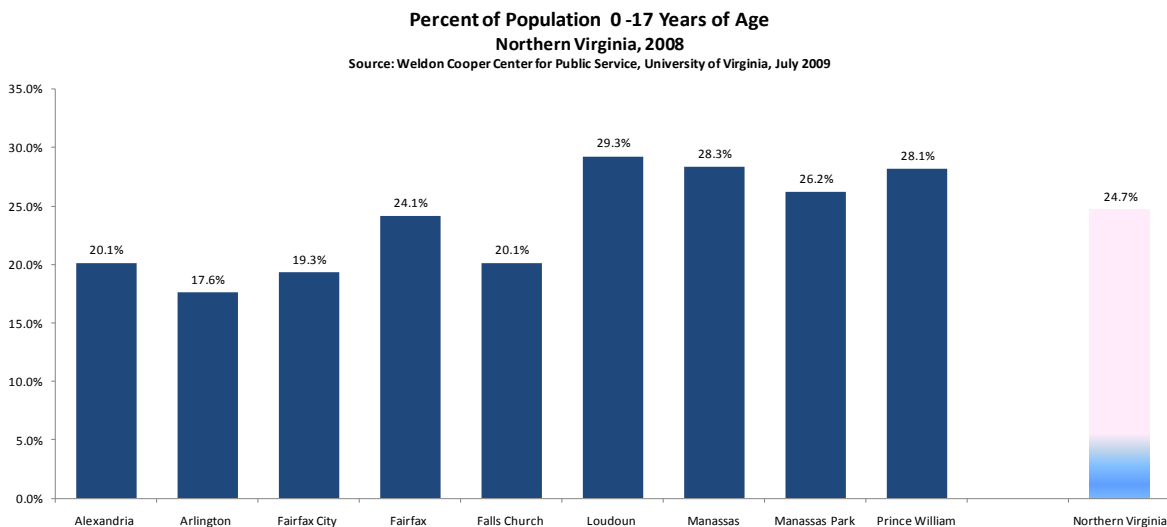


	Number	Percent
Alexandria	26,388	4.9%
Arlington County	36,871	6.9%
Falls Church	2,684	0.5%
Fairfax City	4,861	0.9%
Fairfax County	255,711	47.9%
Loudoun County	82,338	15.4%
Prince William County	109,403	20.5%
Manassas	10,896	2.0%
Manassas Park	4,170	0.8%
Northern Virginia	533,324	100.0%

Source: Weldon Cooper Center for Public Service, University of VA, 2009.

About one-fourth (23%) live in Prince William County (including Manassas, and Manassas Park). More than 15% reside in Loudoun County, with the remaining 12% in Alexandria (5%) and Arlington (7%).

The percentage of the population under 18 years of age has been decreasing as a proportion of the total population since the 1960s. In 2000, the percentage of the Northern Virginia population under 18 was 25.1%, slightly lower than the national percentage of 25.7%. Although the regional percentage ticked up slightly to 25.2% in 2008, it is expected that the percentage of the Northern Virginia population under 18 will drop to about 24% of the total population and remain relatively stable over the next 10 to 15 years.





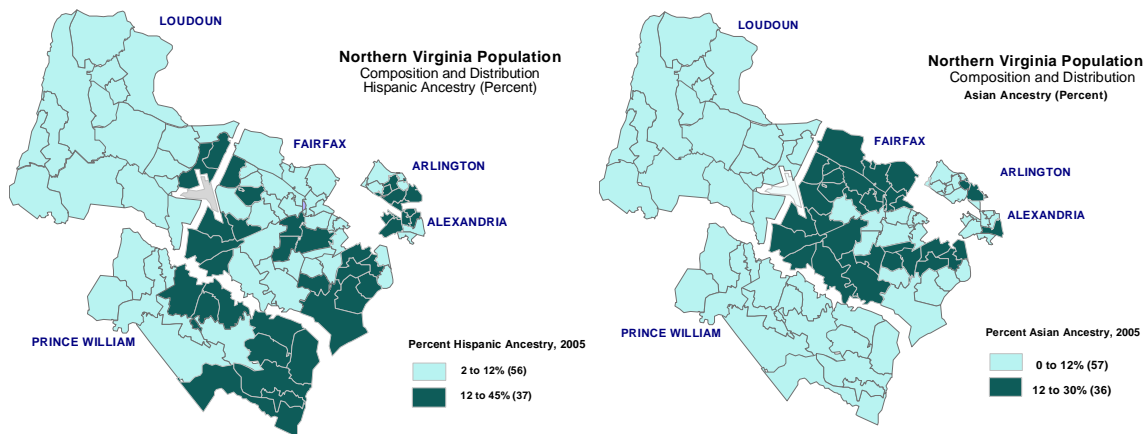
There is substantial variation among local jurisdictions in the percentage of the population that is less than 18 years of age. About one-fourth (25.2%) of the 2008 population was under 18, with a range of less than 18% in Arlington to about 30% in Prince William County. Generally, communities with higher percentages of their populations under 18 years of age are those with lower housing costs.

### ***Race and Ethnicity***

Rapid population growth has brought greater racial and ethnic diversity to Northern Virginia. During the 20 years between 1980 and 2000 the white population grew by 33%, the black population by 128%, and the Hispanic population by 457%. The three major minority racial and ethnic populations increased as a percentage of the regional population between 2000 and 2008. The Hispanic and Asian/Pacific Islander populations grew significantly.<sup>5</sup> Nearly 60% of Virginia's Hispanic population now resides in the region.

Because of higher fertility rates and migration, the minority populations less than 18 years of age increased more rapidly than the overall population during the last decade. Between 2001 and 2007, the Hispanic population under 18 years of age grew by more than 30,000 residents, compared with an increase of about 15,400 among those of Asian ethnicity and an increase of about 6,500 in the Black population 0-17 years of age.

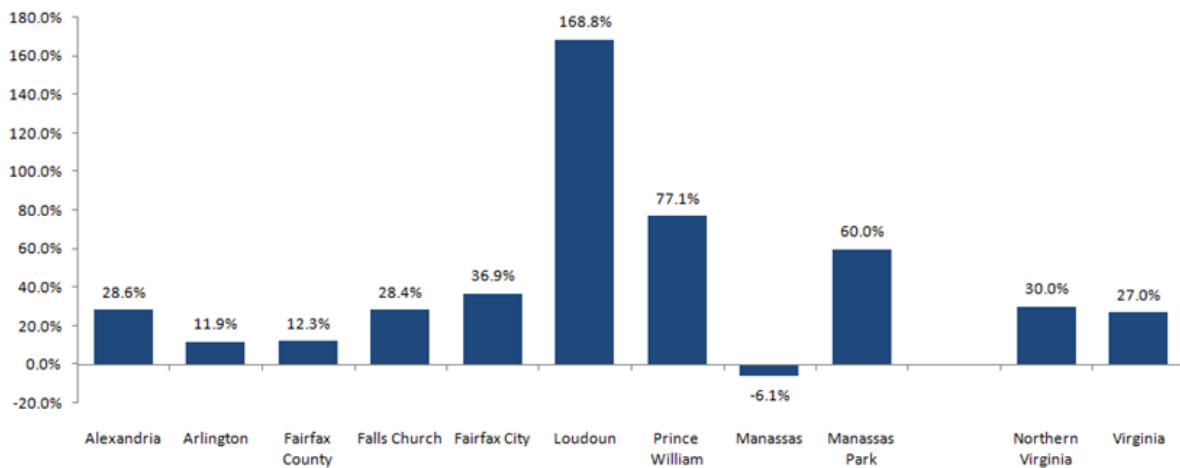
Minority populations are present in substantial numbers in all jurisdictions, but they are disproportionately located in several communities along the Route 1 corridor in the eastern part of the region, in the greater Manassas/Manassas Park area, in the Herndon-Sterling area of western Fairfax and eastern Loudoun counties. The approximate intraregional distribution of the Hispanic and Asian populations is shown below:





Northern Virginia had about two-thirds of Virginia's Asian residents less than 18 years of age in 2001. This population group grew by about 30% percent between 2001 and 2007.

**Population Change: Northern Virginia, 2001-2007**  
**Asian Residents, 0-17 Years of Age**  
Source: U. S. Census, 2001 - 2007



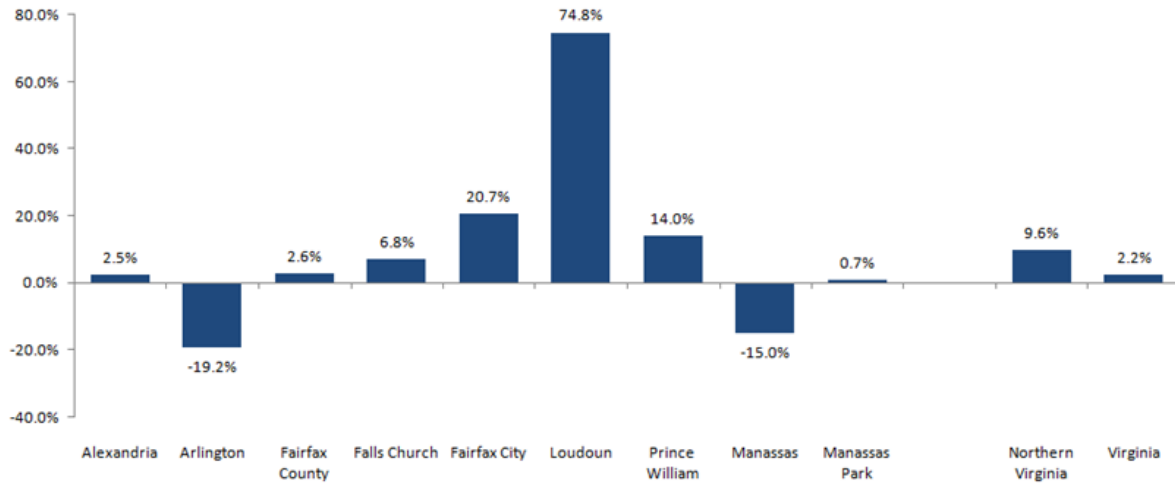
Fairfax County still has about two-thirds of the region's population of Asian ethnicity less than 18 years of age, but there has been substantial growth in both Loudoun County and Prince William County. These two counties received about two-thirds of the net growth in the under18 Asian population between 2001 and 2007.

Growth in the Black population under 18 years of age has been modest, less than 10%, during this decade. Nearly all of the net increase since the year 2000 census has been in Loudoun and Prince William Counties, which now account for nearly one-half of the region's Black population 0-17 years of age.



**Population Change: Northern Virginia, 2001-2007**  
**Black Residents, 0-17 Years of Age**

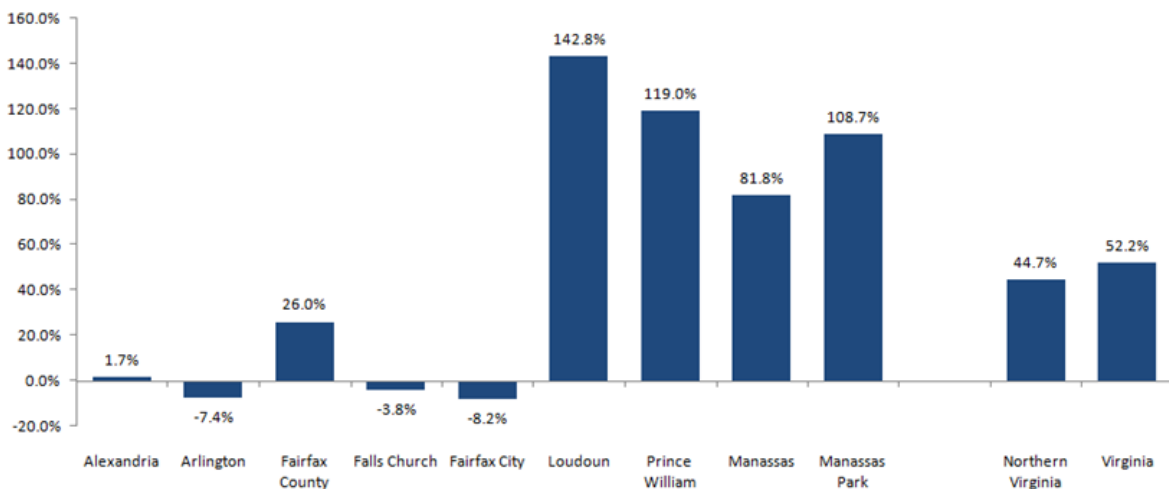
Source: U. S. Census, 2001 - 2007



The Hispanic population under 18 years of age, which increased by about 45% region wide between 2001 and 2007, grew more rapidly than any other population group during the last decade. There was substantial variation in intraregional growth rates, with increases of more than 100% in both Loudoun and Prince William counties.

**Population Change: Northern Virginia, 2001-2007**  
**Hispanic Residents, 0-17 Years of Age**

Source: U. S. Census, 2001 - 2007



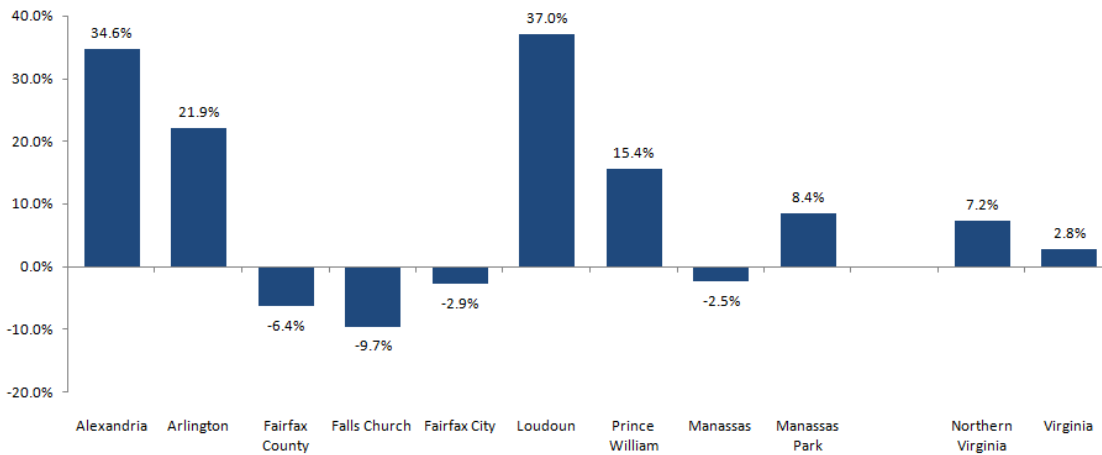




There are indications that census data undercounts immigrant and some ethnic populations. Research on Hispanic participation in the U. S. Census counts suggests that there is likely to be a substantial undercount in many communities. Some immigrants, and some other population groups, distrust government and wish to remain invisible. Some immigrants reside with friends and relatives who also may not participate in the census, particularly if they view their stay in the U. S. as temporary. This could mean that current estimates of the growth in the Northern Virginia Asian and Hispanic populations under 18 years of age are low.<sup>6</sup>

The White population 0-17 years of age grew by about 25,400 between 2001 and 2007. This increase, about 7.2%, was smaller in absolute terms than the increase in the Hispanic population under 18 years of age and a smaller percentage increase than the increases for the three principal minority groups: Asians, Blacks and Hispanics.

**Population Change: Northern Virginia, 2001-2007 White Residents**  
**White Residents, 0-17 Years of Age**  
Source: U. S. Census, 2001 - 2007



There have been notable increases in the White children and youth population this decade in Alexandria, Arlington County, and Loudoun County, compared with a significant decrease in Fairfax County.



### Section III Economic & Social Circumstances

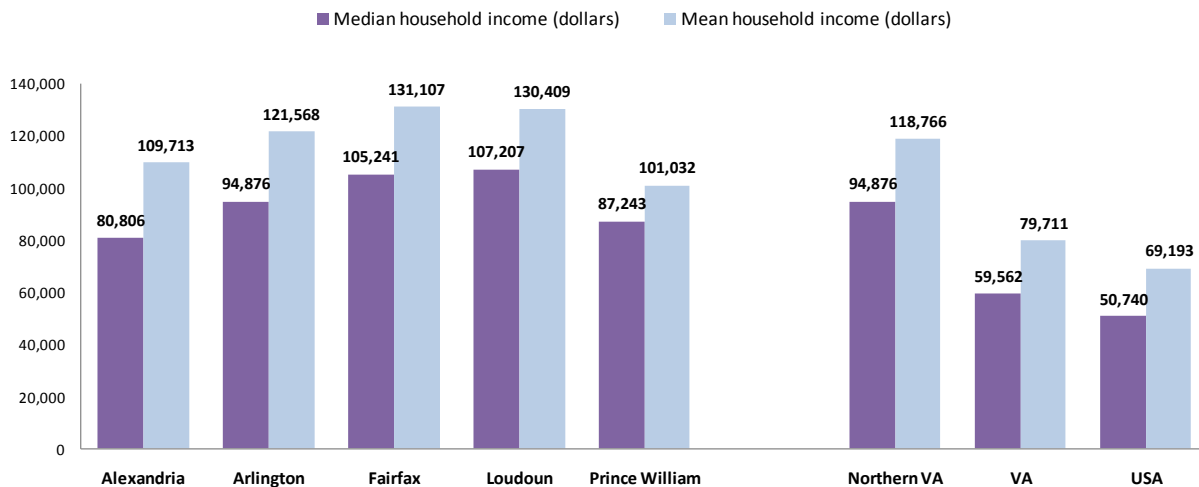
Child and adolescent health, educational performance and attainment, behavior, and general well being are affected by family economic circumstances.<sup>7</sup> Children in poor families have worse health and educational outcomes and are more likely to experience violent crime compared to children growing up in more-affluent families.<sup>8</sup>

Children who live in extreme or persistent poverty are affected most and have more lasting negative consequences. The age at which a child experiences poverty also appears to be consequential. Children who live in poverty during preschool and early school years have lower rates of school completion than those who first experience poverty during late childhood or adolescence. Poverty that persists into adolescence and adulthood is associated with increased incidence of teen childbearing and lower earnings for young adults.<sup>9</sup> These findings, and related research, suggest that intervention during early childhood is important in mitigating the negative effects of poverty on children.<sup>10</sup>

#### *Income Levels and Distribution*

By most measures, Northern Virginia is comparatively affluent. Average and median household and family incomes in all local jurisdictions are relatively high.<sup>11</sup>

**Northern Virginia Household Income**  
Household Income (Mean & Median) by Jurisdiction, 2007  
Source: US Census, 2007 American Community Survey, 2008





Similarly, per capita income, too, is much higher in Northern Virginia than statewide and nationally. Family income is significantly higher in Fairfax and Loudoun counties than elsewhere in the region. Average annual family income is about 30 percent less (about \$30,000 lower) in Prince William County<sup>12</sup> than in Fairfax and Loudoun counties. It is nearly 20% less (more than \$21,000 lower) in Alexandria.

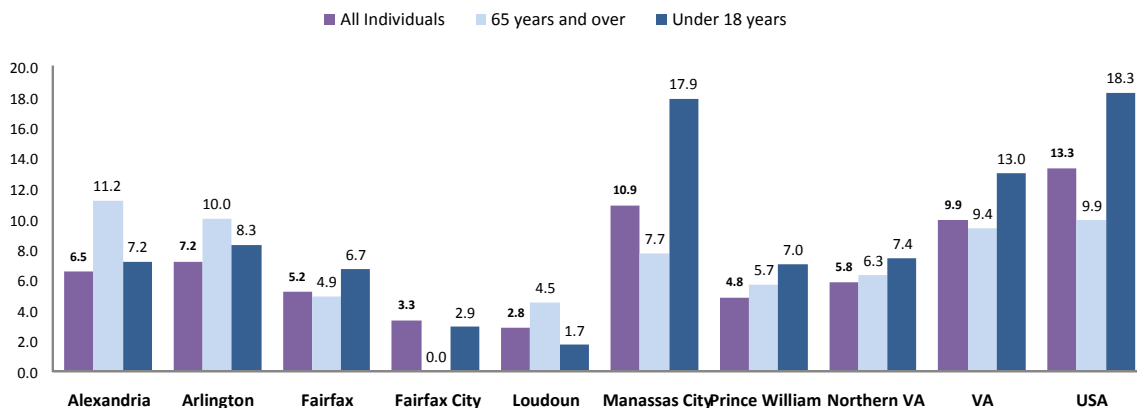
Family income is substantially lower in those areas where the number and percentage of racial and ethnic minority populations are relatively high, especially in the Route I corridor, running from south Arlington through eastern Prince William County, and in the greater Manassas/Manassas Park and Herndon-Sterling areas.

### Poverty and Low Income

Nearly one-fifth of children in the U. S. are in families with incomes below the federal poverty level (FPL), \$22,050 for a family of four in 2009.<sup>13</sup> There is general agreement that, in most communities, families need an income of about twice the FPL, or about \$44,000 for a family of four in 2009, to cover basic necessities. Using this standard, nearly 40% of children nationwide are in “low income,” or poor, families.<sup>14</sup>

Between 2005 and 2007 the percentage of the total Northern Virginia population below the poverty level ranged between less than 3% in Loudoun County to nearly 11% in Manassas. This compares with about 10% statewide and more than 13% nationally. Poverty among children under 18 years of age has been higher than among other age groups in several jurisdictions.

**Poverty in Northern Virginia**  
Percentage of Individuals with Income Below the Poverty Level, 2005 - 2007 (3 Year Average)  
Source: US Census, 2007 American Community Survey. Due to small sample size, does not include data for Fall Church, Fairfax

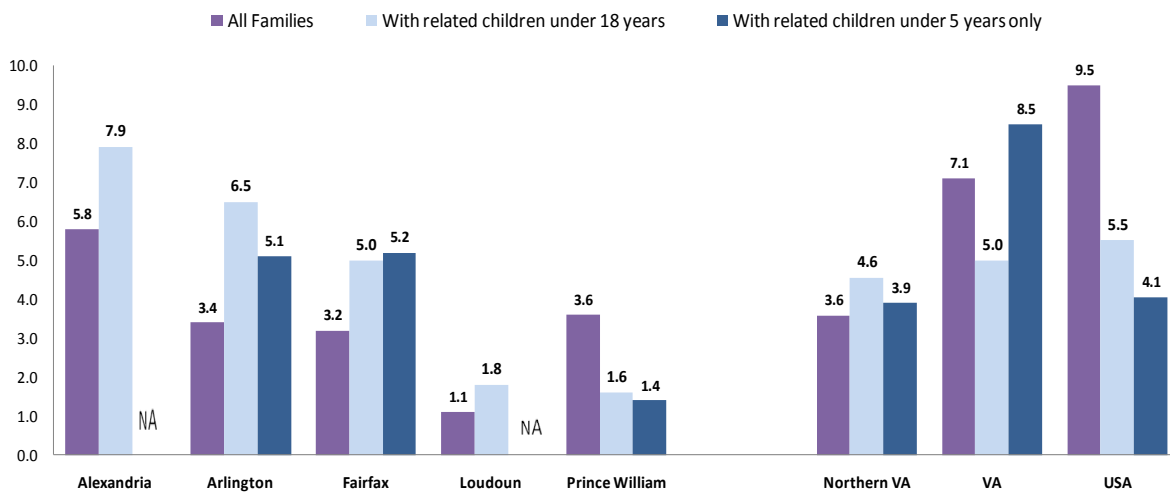




As with individual and family poverty levels, the percent of households with incomes below the poverty level varies widely within the region. Between 2005 and 2007, households with incomes below the poverty level ranged from an estimated 1.3% in Loudoun County to 10.6% in Manassas. In most local jurisdictions, the percent of households was less than half the national level (15.1%) and substantially lower than the statewide level (10.8%). The percentage of Northern Virginia families with income below the federal poverty level (\$22,050 for a family of four in 2009) was about half the statewide rate and about one-third the national rate in 2007.

There is wide variation within the region in the number and percentage of households and families with poverty level incomes. The percentages in Alexandria and Arlington were higher than the regional average in 2007, whereas the percentage in Loudoun County was much lower than in all other jurisdictions. There was a more than fivefold difference in the Alexandria and Loudoun County percentages of families with children under 18 years of age with incomes below the poverty level.

**Poverty in Northern Virginia**  
Percentage of Families with Income Below the Poverty Level (Last 12 Months), 2007  
Source: US Census, 2007 American Community Survey, 2008



The percentage of children and adolescents under 18 years of age living in poverty is highest in Alexandria. The estimated percentage region wide is below the state and national rates, but only Loudoun County and Prince William County have rates significantly below the state and national levels. Arlington and Alexandria families with children under 18 years of age have higher poverty rates than comparable families statewide and nationally.

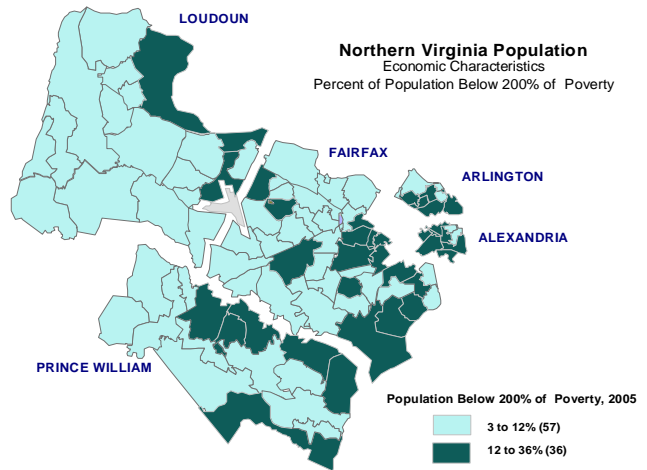


# A Portrait of children in Northern Virginia

# 2010

A REPORT PRESENTED BY THE COMMUNITY FOUNDATION FOR NORTHERN VIRGINIA AND VOICES FOR VIRGINIA'S CHILDREN

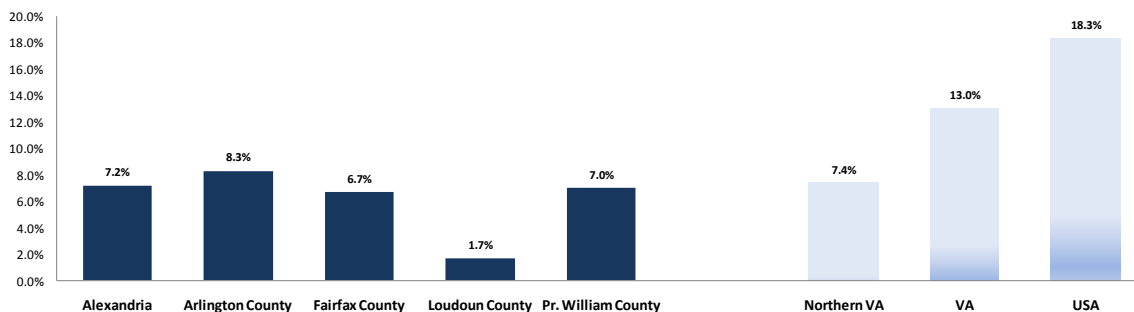
The distribution of low-income residents, households and families with incomes below 200% of the FPL, is shown below. As with the arrays showing mean and median income levels, those areas with the higher poverty levels coincide with the areas with comparatively large racial and ethnic minority populations.



A larger percentage of families and households with children have poverty level incomes than families without children.

Between 2005 and 2007, the percentage of households with children under 18 years of age with incomes below the FPL ranged from less than 2% (1.7%) in Loudoun County to nearly 18% (17.9%) in Manassas, a more than twentyfold difference. Most jurisdictions had average poverty levels among families with children well below state and national levels. The percentage of households with children under 18 years of age with poverty level income has been higher in Manassas than elsewhere in the region. The percentage has been much lower than the regional average in Falls Church, Fairfax City, and Loudoun County.

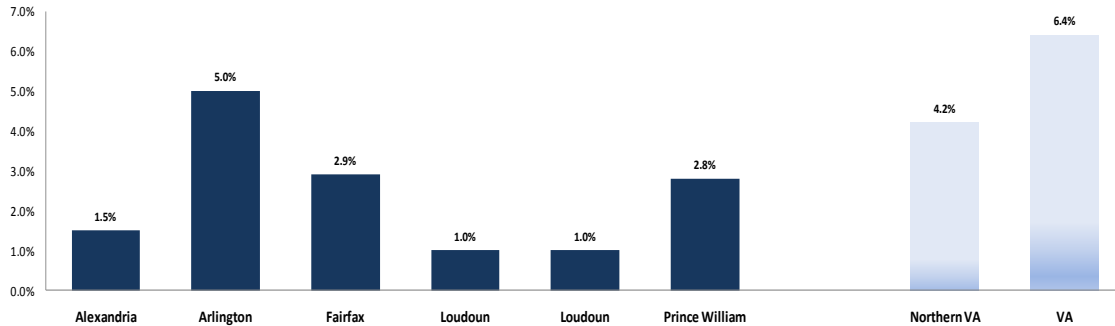
**Poverty in Northern Virginia**  
Percentage of Households with Children < 18 Years of Age with Income Below the Federal Poverty Level, 2005 - 2007 (3 Year Average)  
Source: US Census, 2007 American Community Survey, 2008



Children in families with married parents are much less likely to experience poverty than children in households and families with unmarried parents or single parent households. The percentage of families consisting of married couples and children less than 18 years of age with poverty level incomes ranged from less than 1% in Loudoun County to more than 3% in Arlington and Manassas.



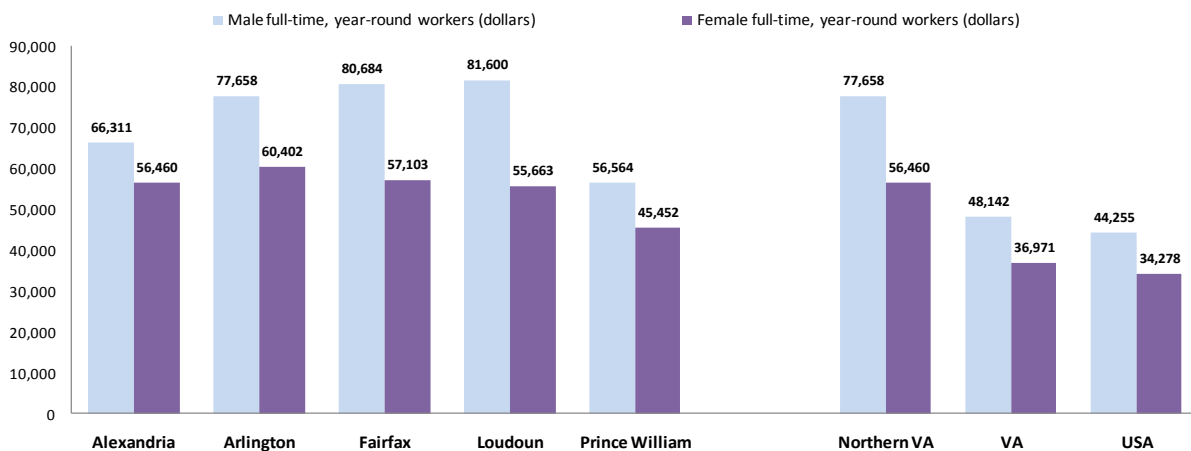
**Poverty in Northern Virginia**  
 Percentage of Married Couples with Children < 18 Years of Age with Income Below the Federal Poverty Level, 2005 - 2007 (3 Year Average)  
 Source: US Census, 2007 American Community Survey, 2008



There is wide variation in household income by gender. Income among female workers is substantially lower than among working males, nationally, statewide, and regionally. This pattern holds throughout Northern Virginia. Average and median female headed households in all localities have substantially lower income than male headed households.

Gender disparity in household income is greatest in female headed households region wide. Children in female headed households are at higher risk of experiencing poverty and related risks region wide.

**Northern Virginia Household Income**  
 Household Income (Median) by Gender & Jurisdiction, 2007  
 Source: US Census, 2007 American Community Survey, 2008



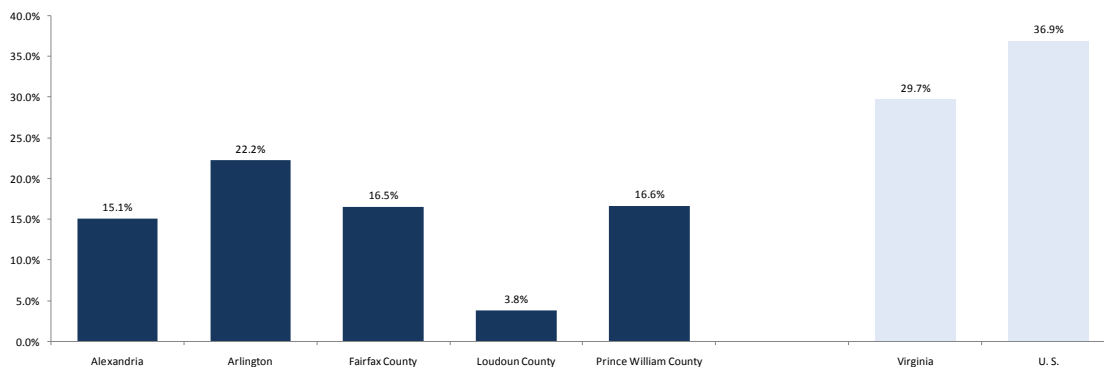


Gender based income disparity is greater in Northern Virginia than the differences reported statewide and nationally. Male household income in Northern Virginia exceeded female household income by nearly 43% in 2007, compared with about 31% statewide and about 20% nationwide. Within the region, the margin by which male households incomes exceeded female household incomes ranged for a low of 14% in Alexandria to nearly 47% in Loudoun County.

The difference in male and female annual income ranges from between about \$10,000 a year in Alexandria and Prince William County to an average of about \$25,000 a year in Loudoun and Fairfax counties. The absolute disparity (dollar value difference) is less in Prince William County than elsewhere in the region. This is because the male income level is much lower in the Manassas and Manassas Park area than elsewhere in the region, not because of higher incomes among Prince William County female headed households. Female household income is lower in the City of Manassas and Prince William County than elsewhere in the region.

Children most likely to live in poverty are those in female headed households.<sup>15</sup> Between 2005 and 2007, the percentage of female headed households with children under 18 years of age ranged between 3% and 4% in Fairfax City and Loudoun County to more than 35% in Manassas. The regional average was about 18%, compared with nearly 30% statewide and more about 37% nationally.

**Poverty in Northern Virginia**  
Percent of Female Headed Households with Children <18 Years of Age Below Federal Poverty Level  
2005 - 2007  
Source: U.S. Census Bureau; 2005-2007 American Community Survey



The likelihood that children in low income families will experience poverty increases with family size. The number and percentage of families moving from low income (200% of the



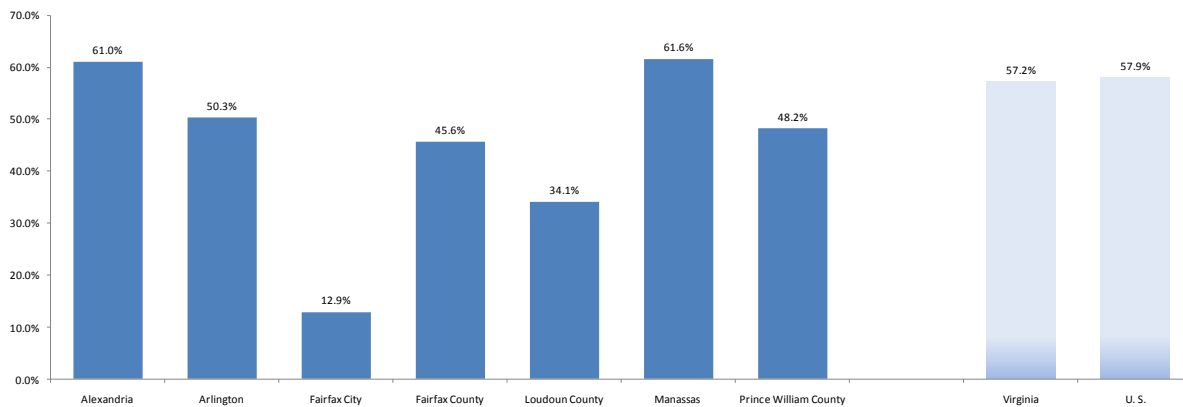
poverty level) to poverty status rises sharply with increases in the number of dependent children.

### ***Food Stamp Participation***

Enrollment in the food stamp program is relatively low in Northern Virginia. Region wide between 2.0% and 2.5% of households and families were enrolled between 2005 and 2007. The level of participation is less than one-half the state level (6.1%) and less than one-third the national level (7.9%).<sup>16</sup>

Participation in the food stamp program by Northern Virginia households and families with poverty level incomes is comparatively low, much lower in most localities than state and national levels. Between 2005 and 2007, average participation ranged from about 13% in Fairfax City to about 61% in Alexandria and Manassas. Average regional participation was less than 50%, compared with more than 57% nationally and statewide. A substantial number of low income households that qualify to receive food stamps do not obtain them. Reasons underlying relatively low participation rates are not well understood.

**Poverty in Northern Virginia**  
Percent of Households Below Poverty Receiving Food Stamps  
2005 - 2007  
Source: U.S. Census Bureau; 2005-2007 American Community Survey



Food stamps are an important form of economic and social assistance for low income families and dependent children in those families. The unexpectedly low food stamp program participation level may be related to the region's large number of immigrant families and to the high levels of linguistic isolation.



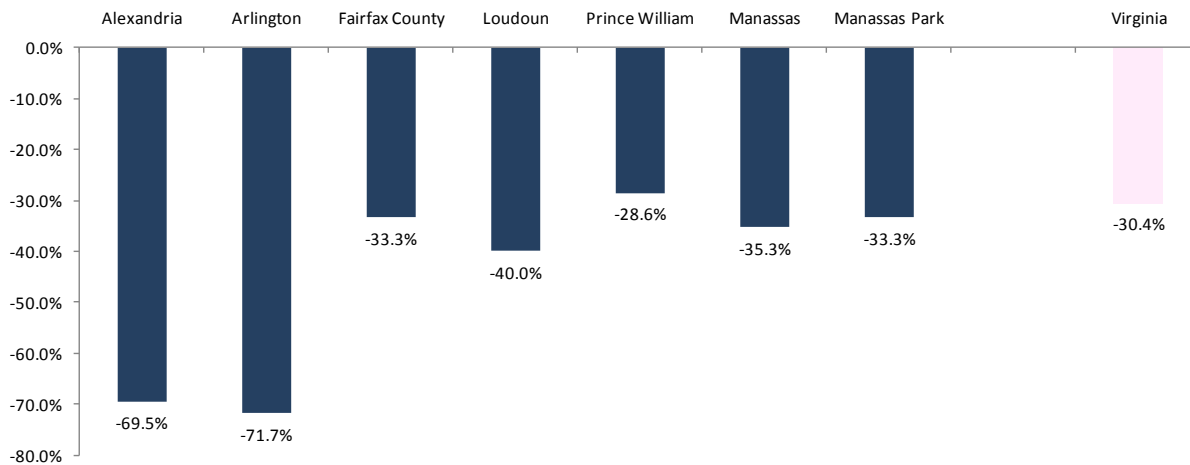


### Temporary Assistance to Needy Families (TANF)

Virginia’s temporary assistance to needy families (TANF) program provides cash assistance to qualifying families to help ensure that children are cared for properly. The program, administered by the Virginia Department of Social Services, also promotes job preparation among those receiving assistance, reduction in “out of wedlock” pregnancies, and the formation and maintenance of two parent families.

With active efforts to reduce the number of families and children requiring assistance, program participation rates decreased significantly statewide over the last decade. Statewide the participation rates for children 0-17 years of age fell from 46 per 1,000 in 1998 to 32 per 1,000 in 2006, a decrease of about 30%. The decrease in Northern Virginia has been even greater, ranging from about 29% in Prince William County to about 70% in Alexandria and Arlington.

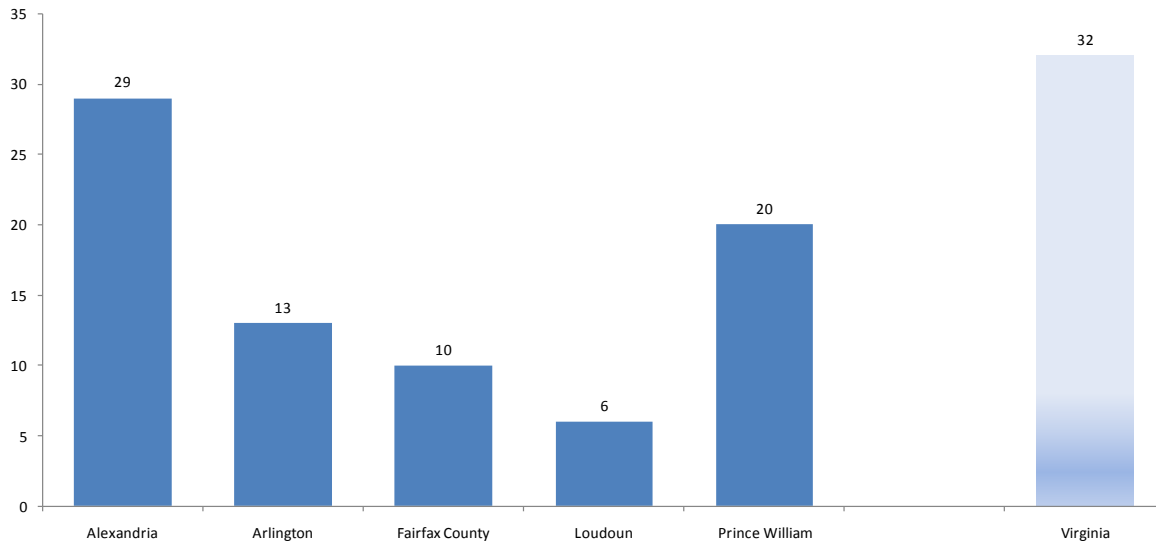
**Temporary Assistance to Needy Families (TANF)**  
Percent Decrease in Average Monthly Enrollment, 1998 - 2006  
Source: Virginia Department of Social Services, 2008



TANF enrollment levels vary widely within the region, from a low of about 6 enrollees per 1,000 children 18 years of age or younger in Loudoun County in 2006 to more than 20 enrollees per 1,000 children in Alexandria and Prince William County. Enrollment levels in all local jurisdictions were lower than the statewide rate of 32 children per 1,000 among children 0-18 years of age. The average participation rate in Northern Virginia is about half the state rate.



**Temporary Assistance to Needy Families (TANF)**  
Monthly Average of Virginians Ages 0 - 18 per 1,000 Families Receiving Temporary Assistance  
Source: Virginia Department of Social Services, 2008



***Women, Infants, and Children (WIC) Program***

Virginia’s WIC (Women, Infants, and Children) program provides nutritional services to eligible pregnant, lactating, and postpartum women with low-income and their children up to age five. The principal objective is to improve the health of pregnant women, infants, and children less than five years of age through better nutrition and improved access to health care. Services offered include supplemental foods, nutrition education, breastfeeding promotion and support, counseling and screening and referrals to other health, welfare, and social services. Eligibility is based on income, residence, and nutritional risk considerations. Current (2009 – 2010) income eligibility levels for otherwise qualified women and children range from about \$20,000 for one person to about \$40,000 for a family of four.

Participation in the WIC program in Northern Virginia varies widely within the region, generally consistent with the distribution of populations with low income and households and families with annual incomes below the poverty level.



**Women, Infants, Children (WIC) Program , Northern Virginia  
Change in Average Monthly Caseloads, 2004 - 2008**

	2004	2005	2006	2007	2008	% Change 2004 - 2008
Alexandria	2,290	2,400	2,684	2,979	3,242	41.6%
Arlington	3,797	3,571	3,597	3,782	3,793	-0.1%
Fairfax County	11,790	12,721	14,218	16,551	17,758	50.6%
Loudoun County	1,324	1,468	1,483	1,624	1,934	46.1%
Prince William County	6,225	6,733	6,745	5,993	6,058	-2.7%
Northern Virginia	25,426	26,893	28,727	30,929	32,785	28.9%
State	138,221	140,695	143,271	150,820	158,642	14.8%

Source: Virginia Department of Health, 2009

The more notable changes over the last five years has been the increase in WIC program participation regionally, especially in Alexandria, and Fairfax and Loudoun counties, contrasted with the absolute decrease in average monthly caseloads in Arlington and Prince William County. It is noteworthy that the Arlington and Prince William County participation levels historically have been comparatively high relative to other Northern Virginia jurisdictions.

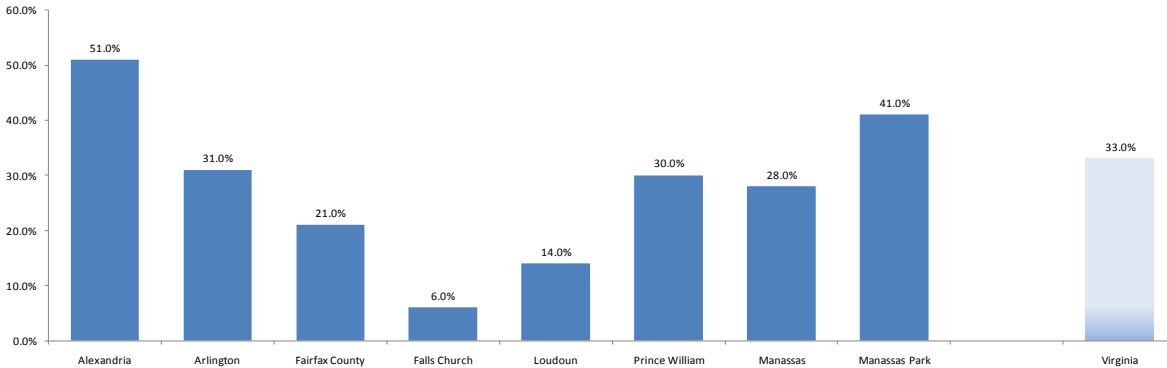
***Free and Reduced Price School Lunch Program***

Participation in the subsidized school lunch program is seen by many as an important indicator of economic and social risk for children. Students participating in the program in many cases face other difficulties that place them at significant risk.

The number and percentage of Northern Virginia children participating in the federal reduced price school lunch program varies widely within the region. Participation patterns are consistent with the regional distribution of low income and poverty level households and families.



**School Lunch Program Participation, 2008**  
 Percent of Northern Virginia Public School Students, K-12, Approved for Free or Reduced-Price School Lunches  
 Source: Virginia Department of Education, 2008



Overall, Northern Virginia student participation was considerably lower (about 26%) than the statewide percentage (33%) in 2008. Participation levels varied widely within the region, ranging from a low of 6% in Falls Church to more than 50% in Alexandria. The wide intraregional variation in school lunch participation reflects to a substantial degree regional family income distribution patterns.

### Homeless Children

Homelessness is a chronic problem throughout the Washington metropolitan area. Obtaining an accurate count of homeless persons and families is inherently difficult. Unlike many other social and economic conditions, there is no ongoing information gathering and reporting process. The most reliable information comes from periodic counts conducted annually under the auspices of the Washington Council of Governments (MWCOC).

Jurisdiction	Northern Virginia Homeless Homeless Counts, 2001 - 2009									%Change 2001-2009	%Change 2005-2009
	<u>Persons Counted</u>										
	2001	2002	2003	2004	2005	2006	2007	2008	2009		
Alexandria	543	604	515	414	433	377	375	348	337	-37.9%	-22.2%
Arlington County	419	471	453	408	410	477	462	410	511	22.0%	24.6%
Fairfax County	1,935	2,067	1,944	1,700	1,675	1,766	1,813	1,835	1,730	-10.6%	3.3%
Loudoun County	167	242	133	92	93	184	211	170	152	-9.0%	63.4%
Prince William County	421	329	515	520	504	498	614	550	630	49.6%	25.0%
<b>Northern Virginia</b>	<b>3,485</b>	<b>3,713</b>	<b>3,560</b>	<b>3,134</b>	<b>3,115</b>	<b>3,302</b>	<b>3,475</b>	<b>3,313</b>	<b>3,360</b>	<b>-3.6%</b>	<b>7.9%</b>

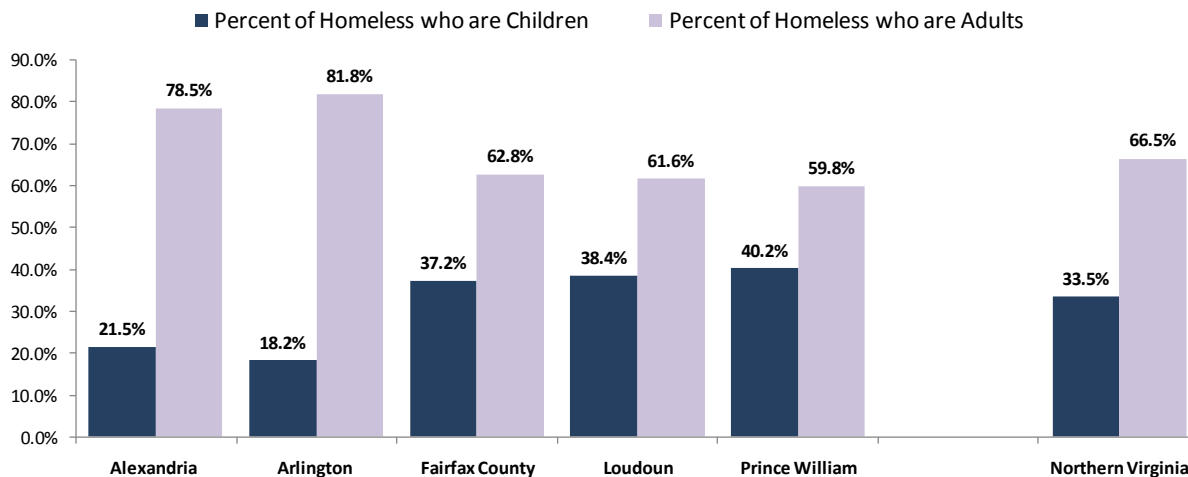
Source: Homeless Services Planning and Coordinating Committee, MWCOC, April 8, 2009.



Although there has been considerable annual variation over the last decade, the number of enumerated homeless individuals in Northern Virginia has not changed greatly over the last decade. The number of homeless residents decreased about 4% between 2001 and 2009. Most of this decrease occurred between 2001 and 2005. During the last five years, the number of homeless residents counted increased by about 8%.

There has been a notable shift in the distribution of homeless residents within the region. Between 2001 and 2009, the number of homeless decreased nearly 38% in Alexandria and increased by nearly 50% in Prince William County. Three jurisdictions—Arlington, Fairfax County and Loudoun County—saw net decreases in the number of homeless residents between 2001 and 2009.

**Homeless Children, Northern Virginia**  
**Percent Adults and Children in Homeless Families, 2007**  
Source: Homeless Services Planning and Coordinating Committee, May 2008



In recent years, more than one-third of the homeless in Northern Virginia have been members of a homeless family; more than 30% are children less than 18 years of age. In 2007, for example, there were nearly 1,200 homeless children in the region, 33.5% of the regional homeless population. Children were a much higher percentage of homeless populations in Fairfax County (37.2%), Loudoun County (38.4%) and Prince William County (40.2%).

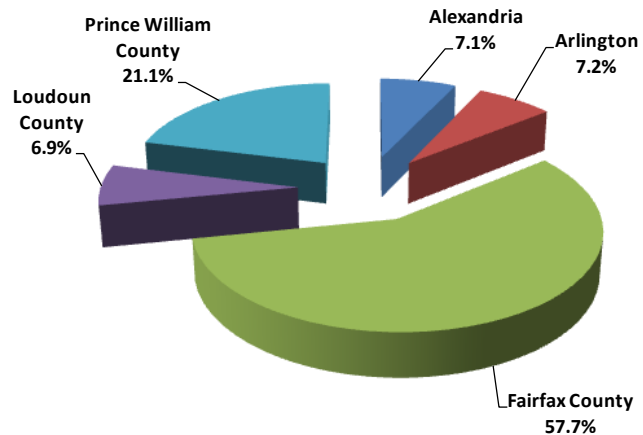
The large majority of homeless children are in Fairfax and Prince William counties. Nearly 80% of enumerated homeless children live in these two jurisdictions. Alexandria,



Arlington, and Loudoun County each have less than 8% of the homeless children population.

There is evidence that children are more adversely affected by the experience of homelessness than older persons. In addition to the material privation inherent in homelessness, children often are dislocated from familiar surroundings, family, friends, and neighborhood schools. They also have to contend with the stigma associated with being homeless. Compared with other children, homeless children have twice as many health problems, are more likely to go hungry, are more likely to suffer from depression and use alcohol and drugs, and have higher rates of developmental delay.<sup>17</sup>

Distribution of Homeless Children, Northern Virginia  
Homeless Children (Percent) by Jurisdiction, 2007  
Source: Homeless Services Planning and Coordinating Committee, May 2008



### Employment

Employment levels in Northern Virginia typically are high. The region has a large, well educated and skilled work force. Higher percentages of those 16 to 64 years of age are in the workforce than statewide or nationally.

Employment levels for parents of children under 18 years of age are comparable to those found statewide and nationally. Both parents are in the work force in about 60% of Northern Virginia families with children under 6 years of age, compared with an estimated 64% statewide and 61% nationally. Average employment levels of both parents with children less than 6 years of age ranged from 50% in Fairfax City to 70% in Manassas between 2005 and 2007.

Parental participation in the labor force increases with the age of their children. For children between 6 and 17 years of age, both parents were working in about 70% of families between 2005 and 2007. Both parents worked in more than two thirds of families with children between 6 and 17 years in all Northern Virginia jurisdictions between 2005 and 2007.

Regional unemployment levels averaged an estimated 3.4% between 2005 and 2007, compared with about 5.0% statewide and 6.6% nationally. Average unemployment rates ranged from a low of 2.6% in Arlington to nearly 5% in Manassas.



## **Section IV Immigrant Families**

Children in immigrant families, defined as people under age 18 who are foreign born or who live with at least one foreign-born parent, are a rapidly growing segment of Northern Virginia's population. The vast majority of children in immigrant families are citizens born in the United States to foreign-born parents.<sup>18</sup>

Immigrant families bring many benefits to our communities, including stable healthy families, a strong work ethic, a youthful population, and cohesive communities.<sup>19</sup> Many immigrant families are thriving and contributing to the vitality of the region.

Children of immigrants face risks not routinely encountered by native children. Although they are more likely to live in two-parent families than other children, immigrant families are much more likely to have low-income. Based on best estimates using American Community Survey data, it is evident that somewhat more than half of the children living in poverty in Northern Virginia are in immigrant families.

Children of immigrants experience greater social isolation. They participate in fewer extracurricular activities and are less likely to work after school. Their parents appear less able to access community resources than other families in need and are less likely to be involved in community activities, or to obtain available food, health, mental health, and housing assistance when it is needed. Unmet needs are most pronounced among the foreign-born children who are the most likely to remain ineligible for public benefits.

Children in immigrant families are also more likely to be in poor health than their native counterparts.<sup>20</sup> Even when they have comparable income levels, children of immigrants have poorer health than native children of similar age.

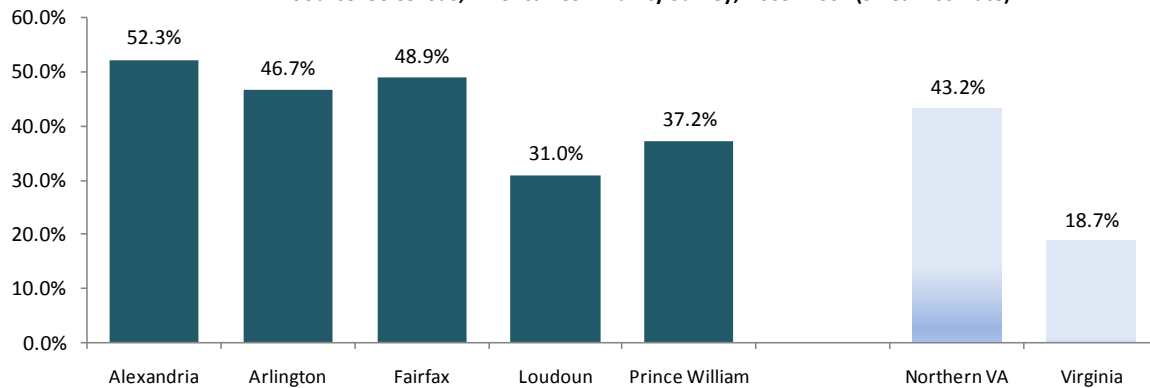
### ***Children in Immigrant Families***

A large percentage of Northern Virginia children live in immigrant families.<sup>21</sup> During the three year period 2005 to 2007 more than 43% of children residing in Northern Virginia lived in families which immigrated to the region. The Northern Virginia percentage is more than 2.3 times the statewide rate.



### Children in Immigrant Families, Northern Virginia Percent of Children (0 - 17 Years of Age) in Immigrant Families, 2005 -2007

Source: US Census, American Community Survey, 2005 - 2007 (3 Year Estimate)



More than half of the children in Alexandria lived in immigrant families and nearly half in Arlington and Fairfax County. Loudoun County had the lowest percentage of children in immigrant families (about 31%) in Northern Virginia but that is still two-thirds higher than the statewide rate.

### ***Linguistic Isolation***

The U. S. Census Bureau defines a “linguistically isolated” household as one in which no member 14 years old and over speaks only English, or speaks a non-English language and does not speak English “very well.” In other words, a family or household where all members 14 years old and over have difficulty with English.

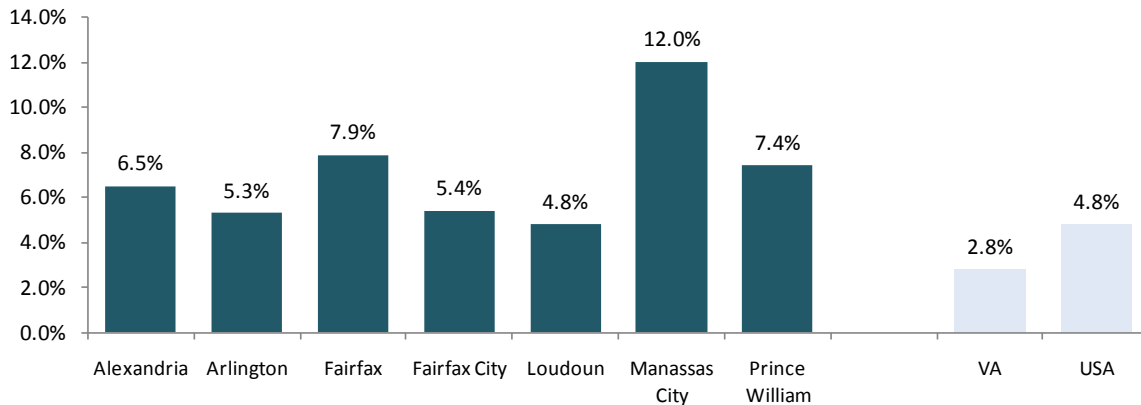
Northern Virginia has large numbers, and high percentages, of foreign born, naturalized citizens, and non-U.S. citizen residents. The percentage of the population that is foreign born is about twice the national percentage and about 2.5 times the state rate. Many of these residents do not speak English well. They are likely to have difficulty in obtaining needed services, succeeding in school, and finding employment.

Spanish is the language most commonly spoken in households where English is not the principal language. Although the percentage of households speaking languages other than English does not vary significantly regionally, the principal non-English languages spoken vary considerably among jurisdictions. Spanish speakers are disproportionately located in Prince William County, Arlington, and Alexandria. Those speaking Asian languages are disproportionately located in Fairfax and Loudoun counties.





**Linguistic Isolation, Northern Virginia**  
**Percent of Households Linguistically Isolated, 2005 - 2007**  
Source: US Census, American Community Survey, 2005 - 2007 (3 Year Estimate)



The larger numbers and percentages of households that may be characterized as linguistically isolated in Northern Virginia are in Fairfax and Prince William counties (including Manassas and Manassas Park). All Northern Virginia jurisdictions have substantially higher percentages of linguistically isolated households than is found statewide or nationally.

School age children in linguistically isolated households often must dedicate time in school to mastering English language skills, putting them at risk of falling behind in other academic areas. These children and their families also encounter barriers in communicating with health and other providers of essential services.<sup>22</sup>

***Limited English Proficiency***

The number of students not proficient in English, the language of instruction, increased substantially in all local jurisdictions during the last decade.

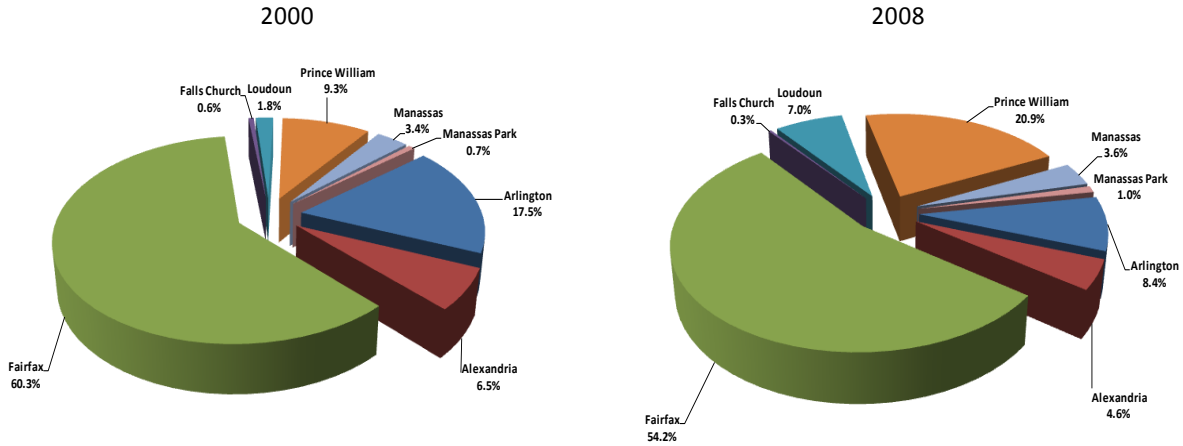
The increases were much greater in the western half of the region: Fairfax County, Loudoun County and Prince William County. Manassas and Manassas Park, the independent cities located in western Prince William County, also had sharp increases.



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**Limited English Proficiency (LEP)**  
**Northern Virginia LEP Students, Percent of Regional Total**  
**2000 & 2008**

Source: Report of Limited English Proficient (LEP) Students Receiving Services as of September 30, 2008, Virginia Department of Education, 2009



The relative growth and regional shift in the number of students with limited English proficiency from the eastern half of Northern Virginia to communities in the western half of the region is pronounced.

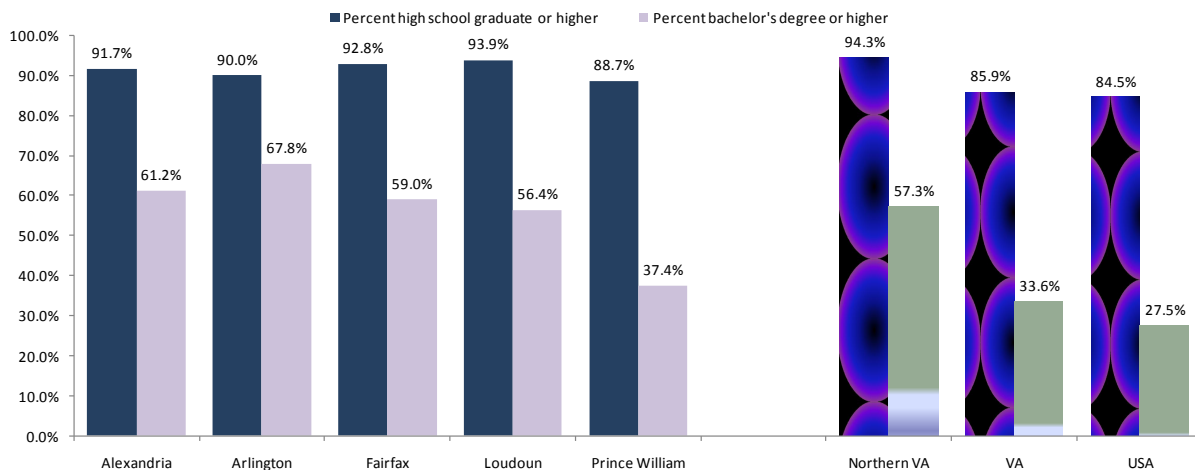


## Section V Education: Attainment & Performance

Education levels, and often academic performance, are correlated with social and economic status, health status, and personal and community well being. Higher educational attainment usually is indicative of higher social status, higher income, superior health status, and better access to an array of health and social support services. Children of well educated, economically stable adults and families tend to be healthier and at considerably less personal and social risk.

Education levels in Northern Virginia are high. Higher percentages of the population have high school and college degrees than nationally or statewide. Though higher than state or national levels, educational attainment levels are lower in Prince William County than elsewhere in the region.

**Northern Virginia Education Levels**  
**Educational Attainment by Jurisdiction, 2007**  
Source: US Census, 2007 American Community Survey





Education levels among residents of Northern Virginia vary more from state and national levels as the level of educational attainment increases. The differences, for example, are greater among those with college degrees than among high school graduates without a college degree. The pattern among local jurisdictions is similar. With the exception of Prince William County, more than 90% of adults in all local jurisdictions completed high school. More than 55% of Northern Virginia adults also have college degrees, about twice the national percentage. The percentage of the adult population with college degrees varies widely, ranging from a low of about 37% in Prince William County and to about 67% in Arlington.

Parental education is a strong indicator of the likelihood that a child will experience poverty. In 2007, about 43% of Virginia children of parents without high school degrees lived in poor families.<sup>23</sup> This compares with 21% of children whose parents graduated from high school but did not attend college and 6% of children whose parents have some college education.<sup>24</sup>

A similar education/income pattern exists with families with low-income. More than three-fourths (77%) of children of parents without high school degrees are in low income families. This compares with about 50% of children whose parents have a high school degree but no college and 21% of children whose parents have some college or more.<sup>25</sup>

The effects of parental education for young children (children <6 years) are even more pronounced. More than 80% of young children of parents without a high school degree live in low income families, with nearly half (49%) in families with incomes below the poverty level. More than half (57%) of young children of parents with a high school degree but no college live in low income families and more than one-fourth (26%) in poor families. As with all children, young children of parents with some college education are far less likely to live in low income (24%) or poor (7%) families.<sup>26</sup>

These data reflect patterns throughout Virginia. There is no indication that they do not apply equally forcefully in Northern Virginia.

### ***High School Completion***

Graduation from high school is a basic education benchmark. Nationally, about 70% of students graduate on time with a standard diploma. This represents a modest increase over the last decade. In 1996, the national on time graduation rate was about 66%.

Graduation and dropout rates vary widely geographically, by race and ethnicity, and by economic status. In 2006, for example, the non-Hispanic white graduation rate was about 76.1%



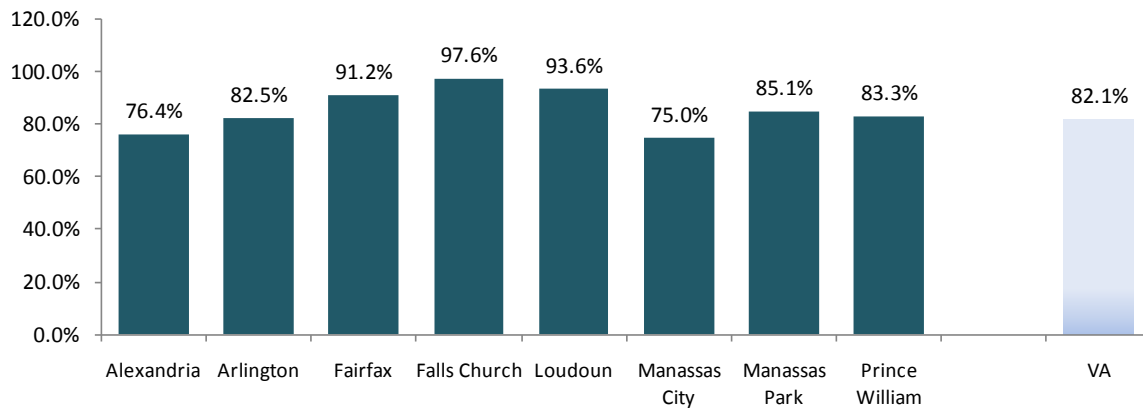
nationwide, the Hispanic rate about 55 percent, and the Black rate about 51%. Graduation rates among all three groups improved modestly over the last decade.<sup>27</sup>

On time graduation rates in all Northern Virginia jurisdictions have been consistently higher than the national rate for many years. In 2008, the percentage of high school students graduating on time ranged from a low of about 75% in Manassas to about 98% in Falls

Church. Graduation rates in six of eight local jurisdictions were higher than the rate statewide.

**Academic Performance, Northern Virginia**  
**Percent of High School Students Who Graduated on Time, 2008**

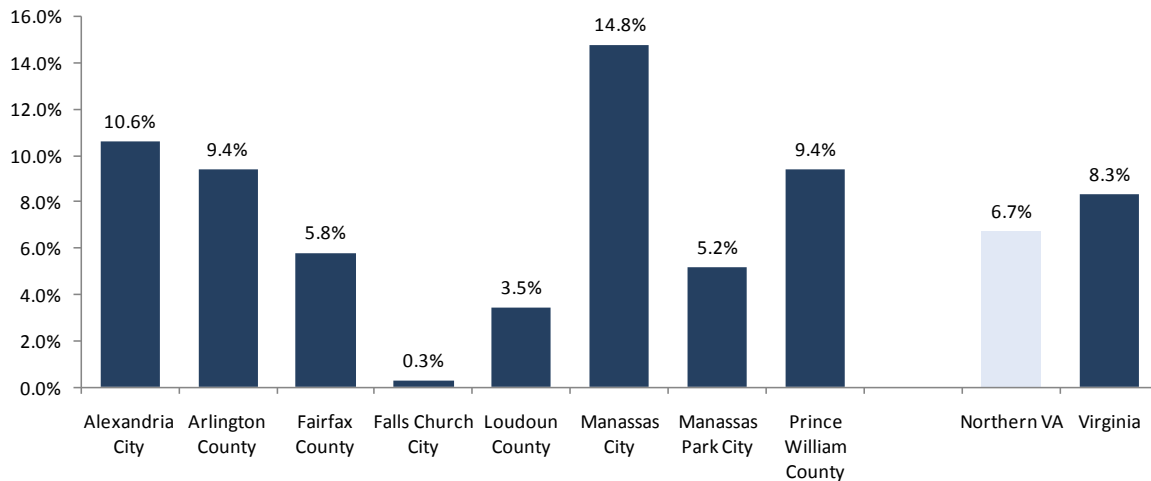
Source: Virginia Department of Education, 2009



Average Northern Virginia high school dropout rates are lower than those seen nationally and statewide. As with on time graduation rates, dropout rates vary widely within the region.



**Academic Performance, Northern Virginia**  
**Percent of Students Dropping Out, Grades 9 to 12, 2008 - 2009**  
Source: Virginia Department of Education, 2009



Generally, jurisdictions with higher on time graduation rates have correspondingly lower dropout rates. Dropout rates are notably higher than the regional average in Alexandria, Arlington, Manassas, and Prince William County. All of these jurisdictions have higher rates than reported statewide. Dropout rates in Falls Church, Loudoun County, and Manassas Park are far below the regional and state averages.

Racial and ethnic distribution of graduation and dropout levels in Northern Virginia reflect the changing demography of the region's school enrollment population. About 48% of the regional school population is non-Hispanic Whites. Non-Hispanic White students are the majority in Falls Church and Loudoun County. Minority populations, in combination, are the majority of the school population of all other jurisdictions.

Two jurisdictions, Alexandria and Arlington, are experiencing demographic changes that are contrary to the regional trend of increased minority school enrollment. Black and Hispanic student enrollments are decreasing in these jurisdictions as non-Hispanic white enrollment is increasing. This pattern was pronounced in Arlington during the last decade.



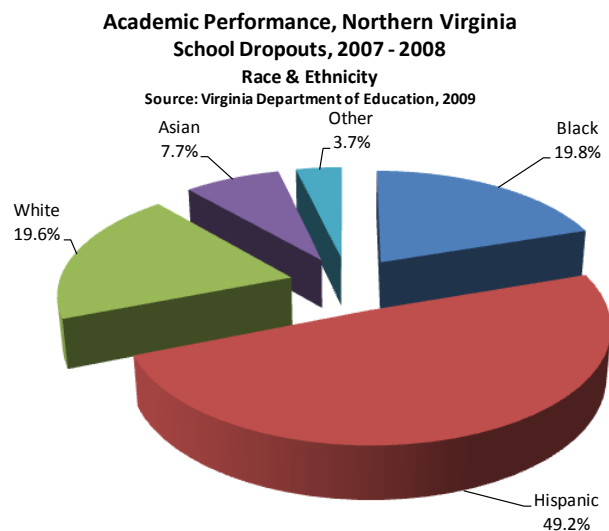
High school (grades 9-12) dropouts in Northern Virginia are disproportionately high among minority Hispanic and Black school populations. Region wide, nearly half of those dropping out (49%) are Hispanic and about one-fifth are Black (20%). About 20% of Hispanic high school students drop out before graduation. Dropout rates for non-Hispanic Whites and Asian students are substantially below the regional average.

There is a substantial gender variation in high school dropout rates. Region wide, the dropout rate is nearly 50% higher among males.

### *Elementary SOL Performance*

Observed achievement gaps among young and school age children appear early in life and are difficult to reverse. Providing young children with the social and emotional, language, and academic skills they need to [succeed](#) in the early school years is critical across all early care and learning settings. Of special concern are young children who experience [multiple risks](#), including economic hardship.

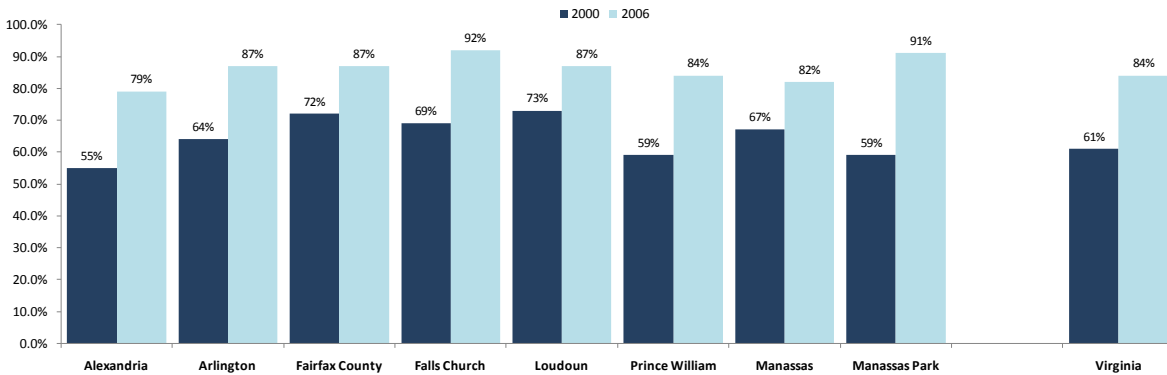
Virginia's standards of learning (SOL) assessment program attempts to measure improvement in learning (and teaching) as part of the effort to facilitate academic success. Judged by the measures applied, most Northern Virginia elementary students have made measurable progress over the last decade.





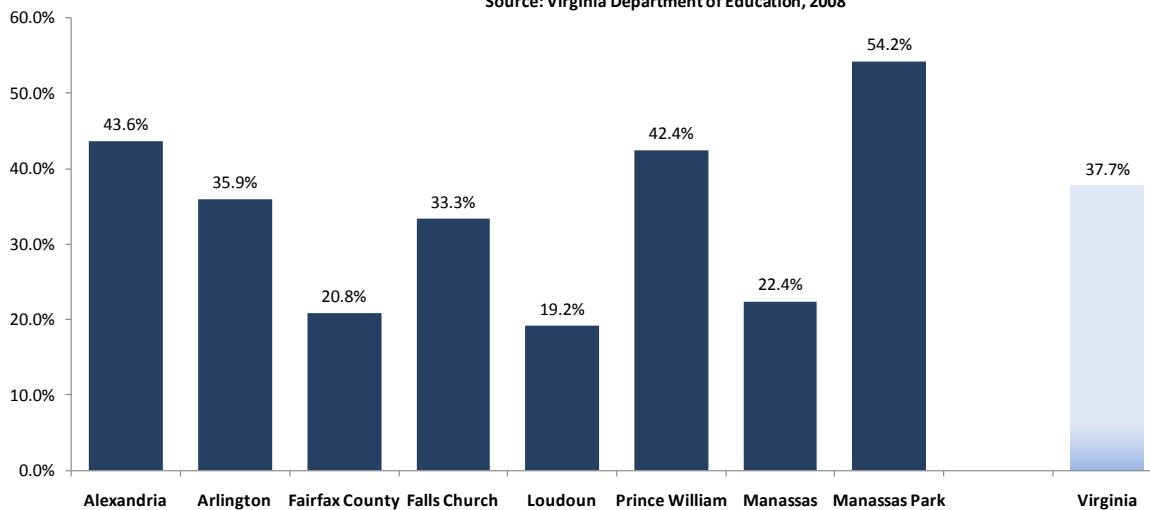
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**Academic Performance, Northern Virginia  
Standards of Learning (English -3rd grade, Spring)  
Percent of Students Passing, 2000 & 2006**  
Source: Virginia Department of Education, 2008



Annual performance assessments by third grade students in English, science, mathematics, and history show substantially higher percentages of students passing standardized exams in 2006 compared with the percentage of those passing in 2000. In most Northern Virginia jurisdictions, the percent of students passing SOL examinations is higher than the statewide passing rate. There is, however, room for progress in all subject areas and in all jurisdictions.

**Academic Performance, Northern Virginia  
Standards of Learning (English - 3rd grade, Spring)  
Percent Change in Students Passing, 2000 to 2006**  
Source: Virginia Department of Education, 2008







Improvement in the number and percentage of students passing SOL exams in all subjects has been substantial statewide and in all Northern Virginia jurisdictions. Improvement has been greatest in those jurisdictions where achievement was comparatively low at the beginning of the decade.

## **Section VI**

### **Maternal & Child Health**

Maternal, infant, and child health is of critical importance, both as a reflection of the current health status of individuals and communities and as a predictor of the health and wellbeing of the next generation.

Infant health and mortality are recognized worldwide as an important measure of a community's health and social wellbeing. Compared with other developed countries, the United States and most communities have comparatively high infant mortality rates.<sup>28</sup>

About half of infant deaths result from four causes: birth defects, short gestation and low birth weight, sudden infant death syndrome (SIDS), and respiratory distress syndrome. These "causes" account for the majority of deaths during the first month following birth. Sudden infant death syndrome is the leading cause of infant death after the first month of life. Maternal age is a significant risk factor. Mortality rates are highest among infants born to young teenagers (<17 years of age) and to mothers more than 43 years of age.

There is considerable evidence that some mothers and young children in Northern Virginia are not receiving the social and health care services they need.

#### ***Prenatal Care***

Prenatal care refers to the medical and health related care women, and occasionally the baby, receive during a pregnancy. The principal objective is to monitor the health of the mother and baby and to identify problems that may require medical intervention or a change in behavior by the mother. Prenatal care may be provided by a physician, midwife or other qualified health care professional.

Prenatal care is recognized as a cost effective means of providing pregnancy education, monitoring health conditions (e.g., hypertension, gestational diabetes) and arranging for any support services that may be necessary following delivery. Women who obtain care

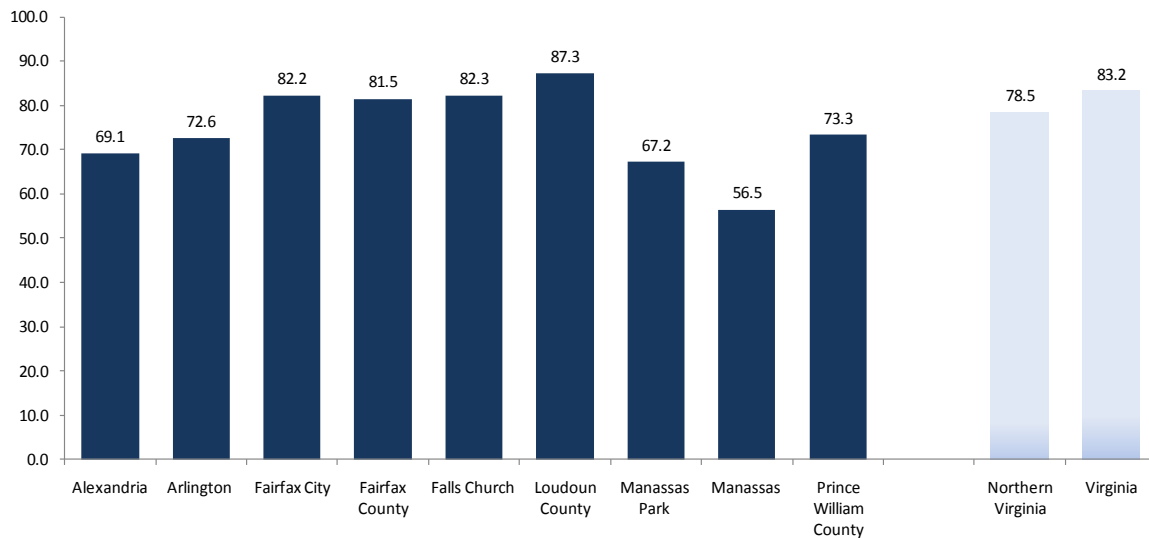


and advice regularly during pregnancy have healthier babies, have fewer premature deliveries, and have fewer serious health problems related to pregnancy.

Ideally, prenatal care starts with a preconception health care visit. Barring this, initiation of prenatal care during the first trimester (first third, or 13 weeks) of the pregnancy is a long-standing public health goal.

Prenatal care levels in Northern Virginia are far from optimal. Between 2000 and 2007, the percentage of pregnant women who began prenatal care during the first trimester of pregnancy fell from about 84% to about 79%. Though not uniform, the decrease was region wide, with significant decreases in all jurisdictions. The decrease was particularly sharp in Manassas, Manassas Park and Prince William County, where collectively the drop was more than 15%. Regionally, the range in 2007 was from a low of about 57% in Manassas to a high of about 87% in Loudoun County.

**Northern Virginia Prenatal Care, 2007**  
Percent Who Began Prenatal Care in First Trimester (13 weeks)  
Source: VDH, Virginia Center for Health Statistics, 2009



It is noteworthy that, unlike most indices, prenatal care levels in Northern Virginia consistently have been below statewide Virginia levels since 2000.

***Birth Rates***

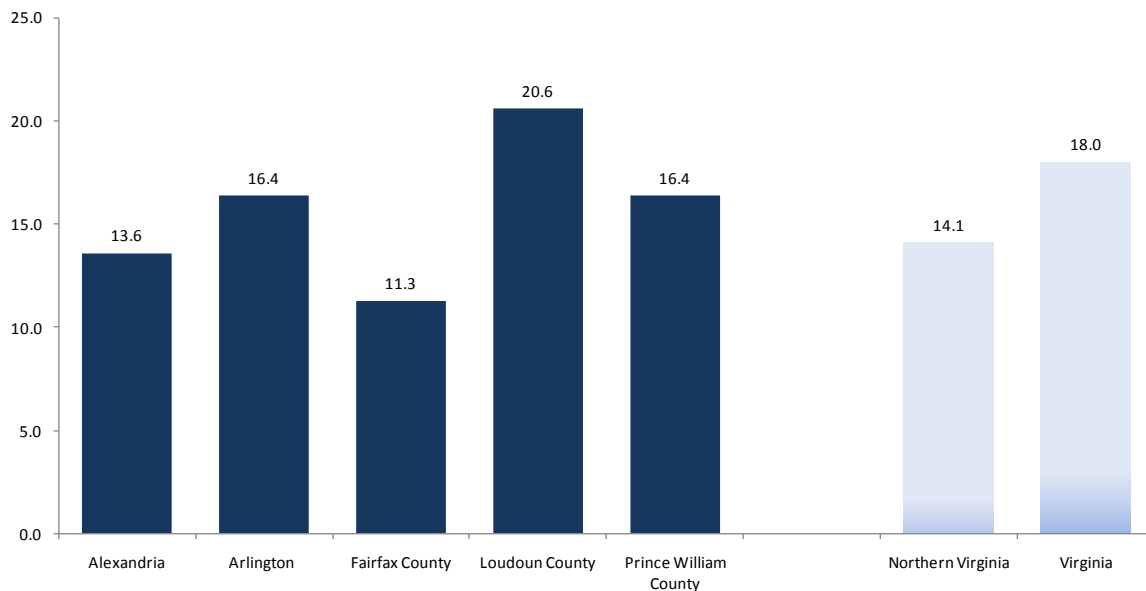


Northern Virginia birth rates, which are comparable to the national rate and considerably lower than the statewide Virginia rate, have been relatively stable for more than a decade. The year 2000 rate, 14 live births per 1,000 persons, was nearly identical to the 2007 rate, 14.1 births per 1,000.

### Northern Virginia Birth Rates, 2007

#### Live Births per 1,000 Population

Source: VDH, Virginia Center for Health Statistics, 2009



There is substantial variation in the birth rates within the region. Rates are lower than the regional average in Alexandria and Fairfax County. They are significantly higher in Loudoun County and Prince William County (including Manassas and Manassas Park). Noteworthy changes during the last decade include reduced rates in Alexandria and Fairfax County and a significant increase in Arlington. None of these changes and variations appears to be related to the decline in the number and percentage of women obtaining appropriate prenatal care or with maternal and infant health generally.

### ***Birth Weight and Prematurity***

Weight at birth usually is an indicator of the approximate maturity of a newborn and of the infant's chances of survival and normal growth and development.

Birth weight is dependent on the duration of the pregnancy and the rate of fetal growth during gestation. Infants who are delivered earlier than normal (40 weeks of gestation) are

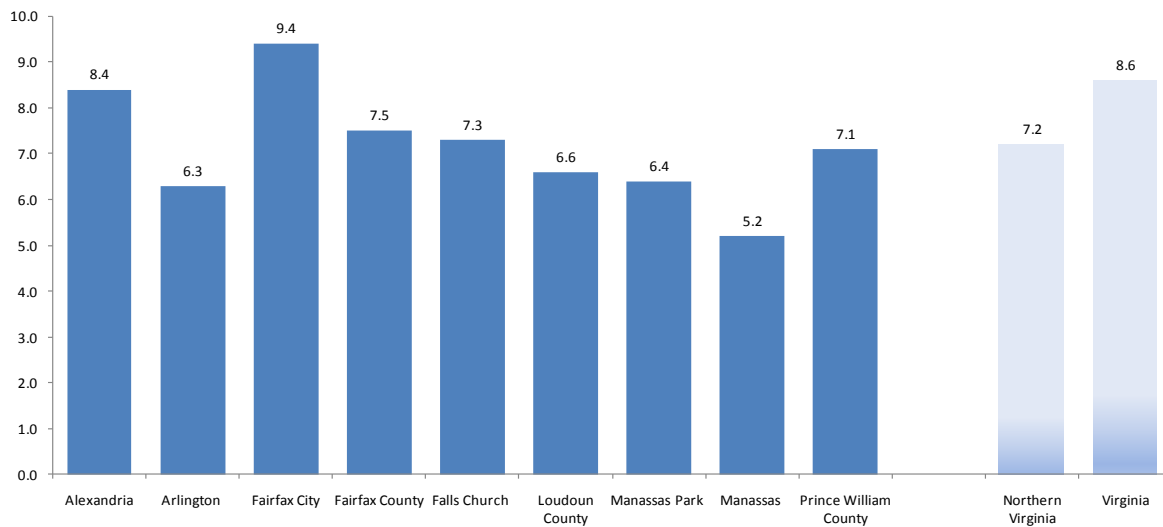


expected to be of lower birth weight than average. Infants with slower or faster fetal growth can also have lower or higher than usual weight at birth. Median weight at birth for full-term births in the U. S. is about 3,500 grams (7 pounds, 11 ounces).

Low birth weight infants (<2,500 grams) often have weakened immunity, with associated increased risk of disease and disability. Many low birth weight children remain underdeveloped, with reduced muscle strength, throughout their lives, and tend to have higher incidence of diabetes and heart disease. Low birth weight children also are more likely to have cognitive disabilities that affect academic performance and vocational opportunity. In short, low birth weight poses serious health risks. Undernourished babies face increased risk of dying during infancy and early childhood.

In 2007, about 8.2% of U. S. births were 2,500 grams or less. The Virginia rate was higher at about 8.6%, the Northern Virginia rate was significantly lower at about 7.2%. Low birth weight birth rates increased locally and statewide between 2000 and 2007. The 4.3% increase in Northern Virginia, though problematic, was considerably lower than the state increase of more than 7%.

**Low Birth Weight Births, Northern Virginia, 2007**  
 Percent of Total Births <2,500 Grams  
 Source: VDH, Virginia Center for Health Statistics, 2009



The number and percentage of low birth weight births varies within the region, with lower rates in Arlington and Loudoun County and high rates in Fairfax County (including Fairfax City and Falls Church) and Alexandria.



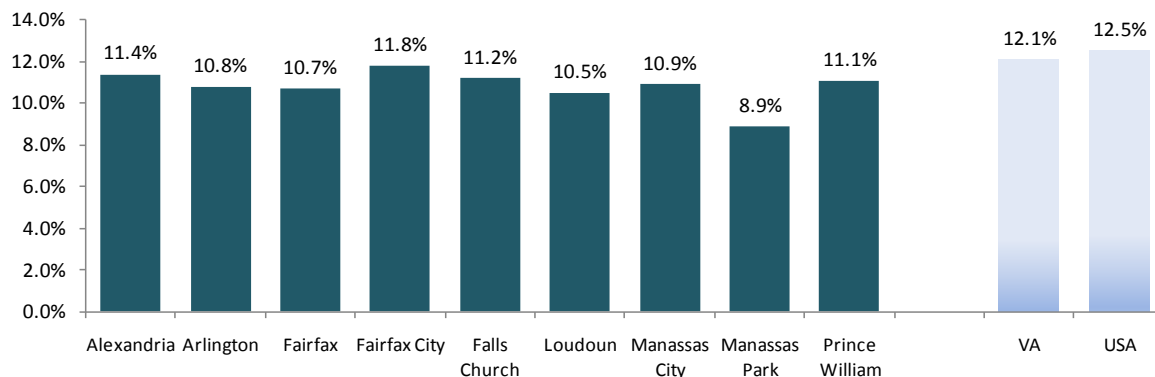
Low birth weight arises as a result of a baby being born too soon (at less than 37 weeks) or too small for gestational age. Infants born prematurely (preterm births), and also small for their gestational age, are at greatest risk, and often have the worst health and development outcomes.

Nationally, about 13% of births are preterm. Preterm birth rates in Northern Virginia are lower than national and Virginia rates, but higher than desirable.

### Preterm Births, Northern Virginia 2003 - 2006

#### Percent of Live Births <37 Weeks Gestation

Source: Virginia Center of Health Statistics, 2009



Preterm birth rates vary within a relatively narrow range within the region. Although all jurisdictions have higher rates than desirable, none differ greatly from the regional average. The highest rate in the region in recent years has been in Alexandria.<sup>29</sup>

### *Births to Unmarried Parents*

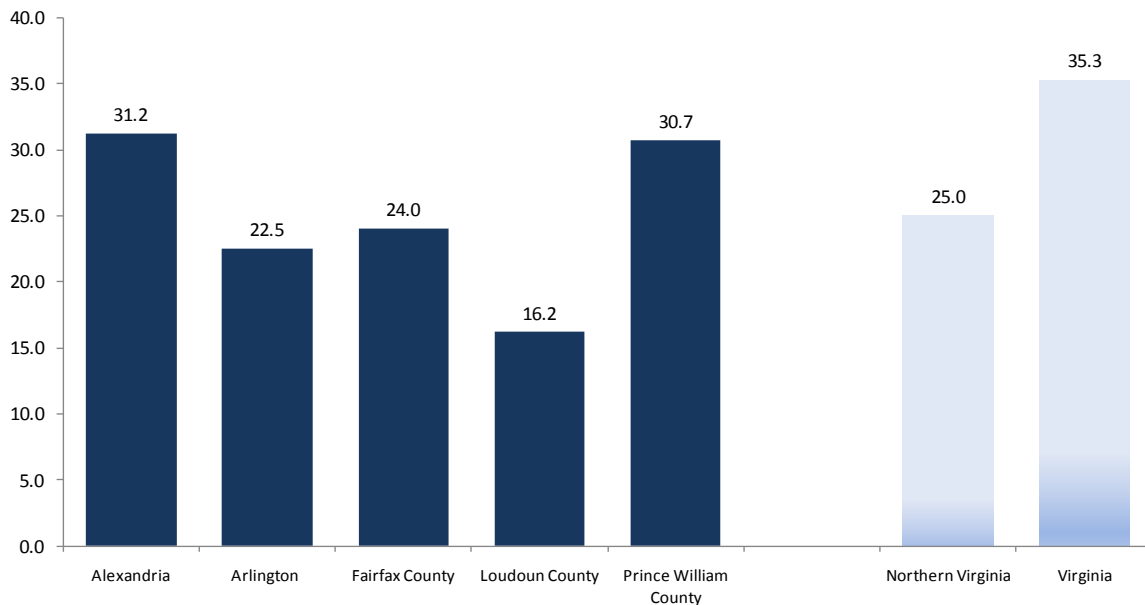
Births to unmarried parents have been a matter of intense debate and a public health concern for many years. Health concerns center on the importance of family development and economic wellbeing. Non-marital births are at higher risk of being low birth weight and/or preterm, with associated higher risks of disability and death than among children born to married parents. Children born to unmarried parents usually have less of the social and financial support conducive to normal development.

The number and percentage of non-marital births continues to increase nationwide. In 2007, about 40% of all births were to unmarried parents. Most births to teenagers are non-marital. In 2007 more than 85% of teenage births were to unmarried parents. Births to teenage parents accounted for about 23% of all non-marital births in 2007. During the last



decade, birth rates have increased substantially among single women 20 years of age and older. There has been little change recently in the unmarried birth rates among teenagers.

**Northern Virginia Births, 2007**  
**Non Marital Births (Percent of Live Births)**  
Source: VDH, Virginia Center for Health Statistics, 2009



The nationwide pattern of significant increase in births to unmarried parents is evident in Northern Virginia, but local rates are, on average, much lower than national and statewide rates. In 2007, about one-fourth of all births in Northern Virginia were to unmarried parents, an increase of more than 30% since 2000. Though the average regional rate remains below state and national levels, Alexandria and Prince William County (including Manassas and Manassas Park) have comparatively high rates. Loudoun County has the region's lowest rate, about 16% of live births.

***Infant Mortality***

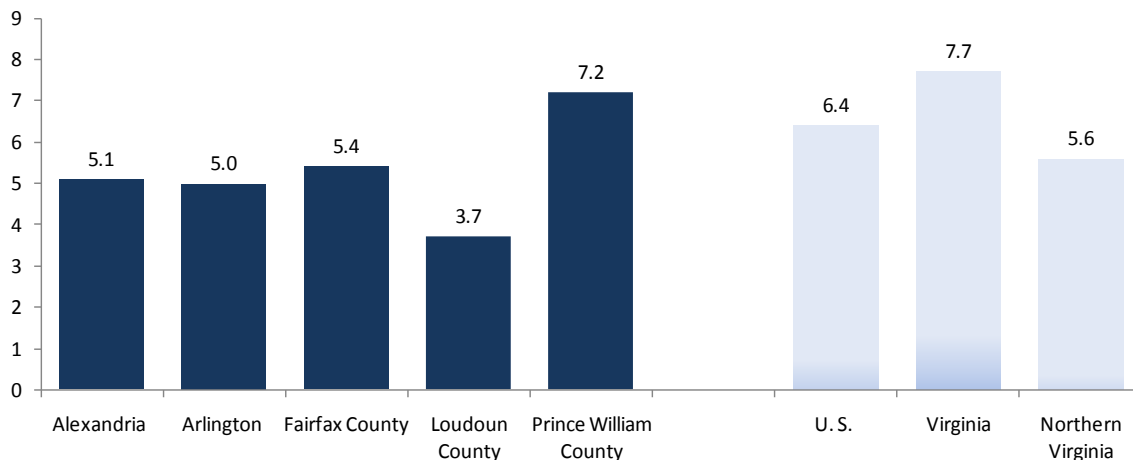
Infant mortality has long been recognized as an important indicator of community health and wellbeing. The number of infant deaths and the infant mortality rate, defined as the number of deaths among children less than one year of age per 1,000 live births, declined significantly in the United States and in most communities for most of the six decades between the 1930s and the 1990s. That trend ended earlier this decade. Since 2000, national infant mortality rates have varied from year to year, but have not decreased significantly.



Similar negative patterns have emerged in Virginia and Northern Virginia. Statewide, Virginia infant mortality rates have been consistently higher than the national rate, notwithstanding a number of favorable social, economic and demographic factors that would predict a lower rate.

Infant mortality rates and patterns in Northern Virginia are distinctive. The regional rate consistently has been lower than national and state rates, but the pattern and trend over the last decade is problematic. The 2007 regional rate is actually higher than in 1995, and significantly higher than the 2000 rate. Between 2000 and 2007 the regional rate increased by more than 20%.

**Infant Mortality Northern Virginia, 2007**  
**Infant Deaths per 1,000 Live Births**  
 Source: VDH Virginia Center for Health Statistics, 2009



There long has been notable variation in infant mortality rates among Northern Virginia jurisdictions. In general, these differences reflect community development patterns and demographic variation within the region. The more notable, and largely problematic, changes between 2000 and 2007 include a substantial decrease in infant mortality rates in Loudoun County, contrasting with large increases in Fairfax County (including Fairfax City and Falls Church) and in Prince William County (including Manassas and Manassas Park). It is noteworthy that the combined rates of Manassas, Manassas Park and Prince William County exceed both the national and Virginia rates, both of which are higher than desirable.<sup>30</sup>

There are substantial differences in infant mortality rates by racial and ethnic groups. As is the case nationally, the Black infant mortality rate in Northern Virginia, 10.9 deaths per 1,000 live births in 2007, long has been, and currently remains, about twice the rates for Whites, 5.5 deaths per 1,000 live births in 2007. It may be noteworthy that the differential between Black and White infant mortality rates in Northern Virginia is less than the differences for the rest of Virginia.



Reported data do not distinguish adequately the Hispanic population from the non-Hispanic White and Black populations to permit a reliable calculation of the Hispanic rate. There is reason to believe that the current Hispanic rate is higher than the non-Hispanic White rate, but lower than the Black rate. The infant mortality rate among the Asian population is generally comparable to that of non-Hispanic Whites. Rates among all groups are higher than desirable.

## **Section VII**

### **Children and Youth at Risk**

A significant percentage of children and youth in most communities are at risk for negative outcomes. The conditions that increase the risk of unhealthy outcomes usually result from family, community, social, and economic conditions over which children and youth have little influence and no control.

Adolescents are more likely to engage in behaviors that threaten their health and safety. Common indications of youth risk include substance abuse, teenage pregnancy, violent crime, and self-inflicted injury.

Children and youth that experience abuse, are involved in the foster care system, or have disabilities are also at increased risk.

Poverty exacerbates most risk factors and is one of the underlying reasons that many children and families do not thrive. Children and adolescents who are denied the basic supports for a safe and healthy environment are at higher risk of social and academic failure. They may be homeless, may be exposed to physical and psychological abuse, may have limited access to education, and may experience social isolation. Such children are more likely to be unable to function in accordance with social norms and expectations. They are likely to be more open to substance abuse, crime and related problematic behavior. Most are likely to have circumscribed futures.

#### ***Teen Births***

Teenage births are a public health concern because teen mothers and their babies are at markedly higher risk for health, social, and emotional problems. Teen mothers are more





likely than women over age 20 to give birth prematurely. Preterm babies face an increased risk of immediate health problems, long-term disability and death.

Social consequences of teenage births, too, are daunting and difficult to accommodate. Teen mothers are more likely to drop out of school than those who delay childbearing. Only about 40% of teenagers who have children before age 18 finish high school, compared with 75% for those who do not give birth before age 20.

Teenage mothers often lack job skills, making them financially dependent on family or public assistance, especially if unmarried. More than 75% of unmarried teenage mothers require public assistance within 5 years of the birth of their first child.

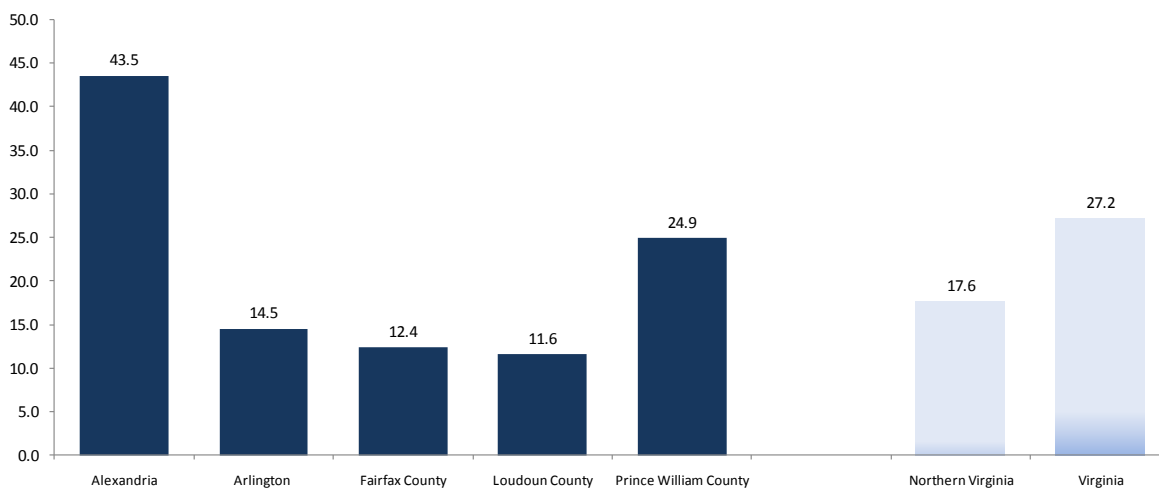
Nearly two-thirds of children born to unmarried teenage high-school dropouts live in poverty, compared to about 7% of children born to women over age 20 who are married and are high school graduates. Children born to teenage mothers are about 50% more likely to repeat a grade in school and drop out before finishing high school.

Teenage birth rates in the U. S. decreased steadily between 1991 and 2005, but increased in both 2006 and 2007. The reason for this reversal is not well understood. Although teenage births are the norm in much of the world, U. S. rates are much higher than those in most developed countries.

### Teen Pregnancy Rate, Northern Virginia, 2007

Pregnancies per 1,000 Females 10-19 Years

Source: VDH, Virginia Center for Health Statistics, 2009

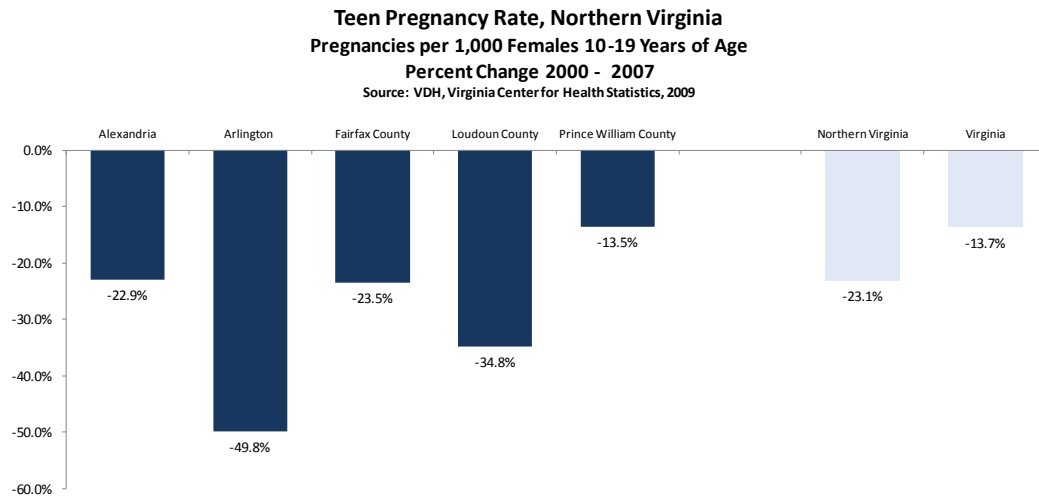


Teenage birth rates in Northern Virginia, about 18 births per 1,000 females 10-19 years of age, are substantially lower than national (about 42 births per 1,000) and statewide (about 27 births



per 1,000) rates. There were sizable reductions in the teenage pregnancy rates in all Northern Virginia jurisdictions between 2000 and 2007.

There is wide variation in teenage pregnancy rates within the region. Fairfax and Loudoun counties have comparatively low rates. Alexandria and Prince William County (including Manassas and Manassas Park) have high rates, even with substantial reductions between 2000 and 2007. Alexandria's rate has been consistently higher than state and national rates in recent years.



Pregnancy rates for females 15-17 years of age decreased substantially, more than 30%, in Northern Virginia between 2000 and 2007. The 2007 regional rate, 15.1 pregnancies per 1,000 females 15-17 years of age, was about 60% of the state rate, 25 pregnancies per 1,000. Alexandria and Prince William (including Manassas and Manassas Park) had relatively high rates. The Alexandria rate was high throughout the period.

Pregnancy and births to younger teenage girls are especially troublesome. The pregnancy rate for females under 15 years of age is lower than national and state rates. Notable exceptions are the relatively high rates in Alexandria and Prince William County (including Manassas and Manassas Park). The pregnancy rates in those jurisdictions exceeded the state rate for most of the last decade.

### ***Accidental Injury and Death***

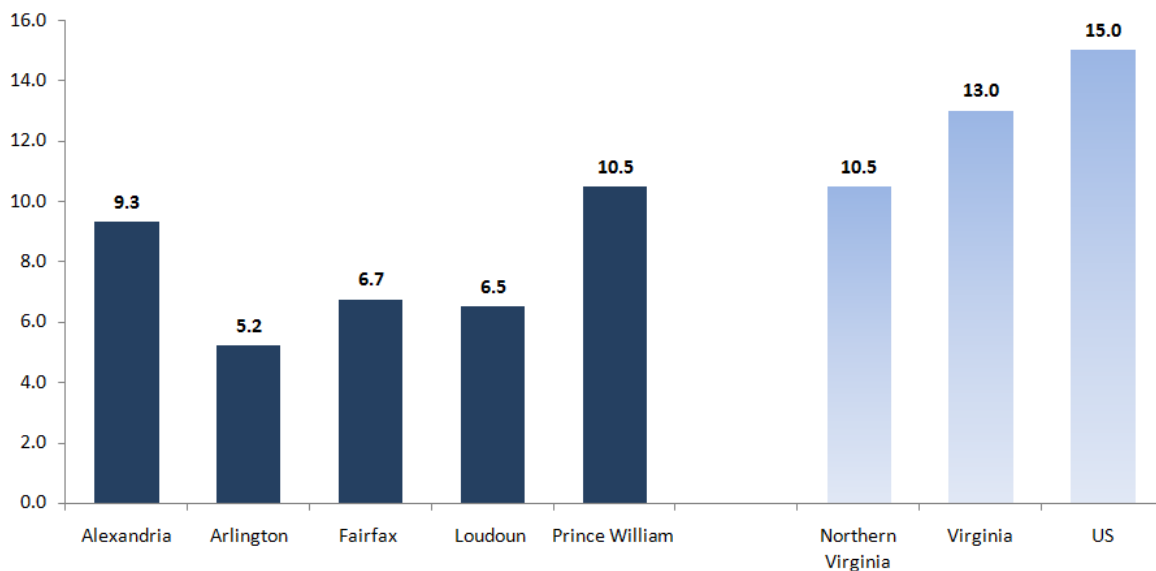
Accidental injury and death are enduring risks encountered by nearly all children and adolescents. The likelihood for serious accidental injury and death is lower in Northern Virginia than in most communities. Between 1999 and 2006, the overall accidental death



rate for Northern Virginians for youth under 19 years of age (10.5 deaths per 100,000), for example, was much lower than the Virginia (13.0 deaths per 100,000), and national (15.0 deaths per 100,000) rates.

**Northern Virginia Accidental Deaths (All Causes)**  
**Deaths per 100,000 Persons 0 to 19 Years of Age**

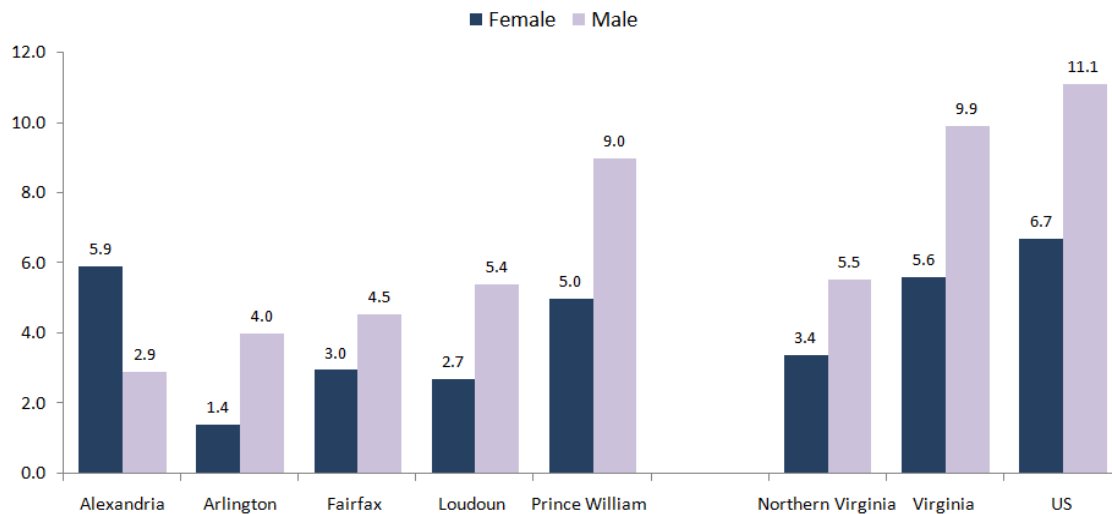
Source: Compressed Mortality File 1999-2006. CDC WONDER On-line Database, 2009



Motor vehicle accidents are the most frequent cause of accidental injury and death among those under 19 years of age. About 60% of accidental deaths among this age group in Northern Virginia result from motor vehicle accidents. Accidental deaths rates vary considerably within Northern Virginia and by gender. Accidental deaths are higher in Alexandria and Prince William County than elsewhere and, with the exception of Alexandria, are much higher among males than females in all jurisdictions.



**Northern Virginia Accidental Deaths (Motor Vehicle)**  
**Deaths per 100,000 Population Persons 0 to 19 Years of Age by Gender**  
 Source: Compressed Mortality File 1999-2006. CDC WONDER On-line Database, 2009



### ***Self-Inflicted Injury, Suicide***

In most communities, suicide is the third leading cause of death among those 10 to 24 years of age.<sup>31</sup> Suicide deaths among teenagers are more frequent than those from all other causes other than accidental injury and homicide.

A recent study found that more than one-third (about 35%) of youth suicide deaths occur the same day the youth experiences a crisis (e.g., a romantic disappointment, academic failure, an argument with a parent)<sup>32</sup>.

Between 1996 and 2005, 1,066 suicide deaths were recorded among those 10-24 years of age in Virginia. Nearly half (46%) were among those 10 to 19 years of age.

Analysis of suicides between 2003 and 2004 among Virginians 10 to 19 years of age revealed that:

- About 40% of suicides had an identifiable mental health problem,
- About 35% had been diagnosed with depression,
- About 37% were seeking treatment when they killed themselves,
- More than 14% had an alcohol and/or drug problem,
- About 32% experienced a crisis in the two weeks prior to suicide, and



- About 14% were having problems at school.<sup>33</sup>

Suicide frequency among children and adolescents increases with age. During the decade between 1996 and 2005, the Virginia youth suicide rate was 11.5 deaths per 100,000 among those 20 to 24 years of age, 8.6 deaths per 100,000 among those 15-19 years of age, and 1.5 deaths per 100,000 among those 10 to 14 years of age. Overall, suicide rates for Virginia youth and young adults have been decreasing for more than a decade. The rate among those 20 to 24 years of age decreased by about one-third between 1996 and 2005, and the rate for those 15 to 19 years of age decreased by more than 50%. The rate among those 10 to 14 years of age has remained relatively stable over the decade at less than 2.0 per 100,000.<sup>34</sup> The average rate for the decade (1996-2005) was 7.2 suicide deaths per 100,000 for Virginia residents 10 to 24 years of age.

There are, of course, many more suicide attempts than suicides. Obtaining an accurate count of suicide attempts is unusually difficult because many attempts do not result in hospital treatment and some are not recorded (coded) as a self-inflicted injury. In addition, suicide is not the underlying intent for all self-inflicted injuries. A 1999 survey of high school students found that nationwide about 19% of students had seriously considered suicide, with about 15% having made plans to attempt suicide and about 8% attempting suicide during the year preceding the survey.<sup>35</sup>

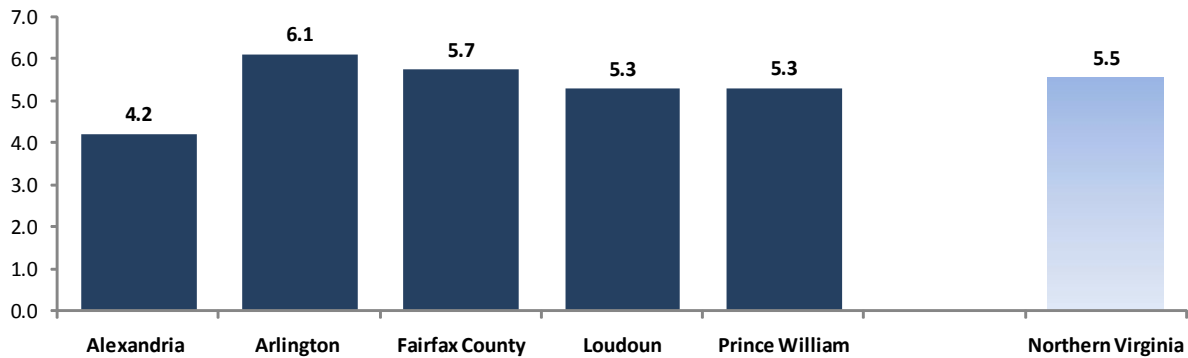
Gender distribution of self-inflicted injury and suicides in Virginia is distinctive. Those committing suicide were disproportionately non-Hispanic White males.<sup>36</sup> Males were more than five times as likely as females to die from suicide. The ten-year male suicide rate was 11.7 per 100,000 compared with a female rate of 2.2 per 100,000.

Hospitalization from self-inflicted injuries among those 10 to 24 years of age was more than tenfold the suicide rate, about 81 hospital admissions per 100,000 between 1996 and 2005. Those hospitalized for self-inflicted injury were disproportionately non-Hispanic White females. The average female rate (108 per 100,000) was nearly twice male rate (56 per 100,000). The overall White, non-Hispanic rate was about 84 per 100,000, compared with 56 per 100,000 among non-Hispanic Blacks and 46 per 100,000 among Hispanics.<sup>37</sup>

Frequency of self-inflicted injury and suicide in Northern Virginia is much lower than nationally or statewide. Between 1996 and 2005, the average suicide rate among Northern Virginia residents 10 to 24 years of age was 5.5 deaths per 100,000, less than half the statewide rate (including Northern Virginia) of 11.7 deaths per 100,000.



**Youth and Young Adult Suicides, Northern Virginia**  
**Suicides per 100,000 Population Among Those 10 - 24 Years of Age, 1996 - 2005**  
Source: "Youth Suicide in Virginia," Virginia Department of Health, Division of Injury and Violence Prevention, 2008



The notable variation in youth suicide rates within Northern Virginia is the nearly 50% difference between the Arlington and Alexandria rates during the decade between 1996 and 2005. Much of this difference is attributable to the larger percentage of Black and Hispanic residents in Alexandria. Both groups have youth suicide rates that are much lower than the non-Hispanic White rate. The Arlington rate, though the highest in the region, was about 48% below the statewide average.

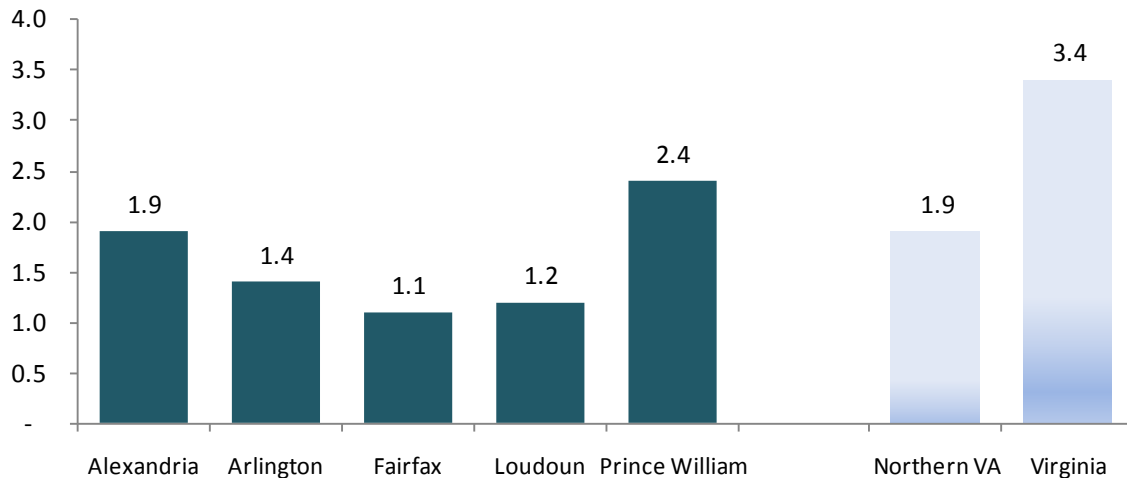
***Child Abuse***

Virginia and Northern Virginia have relatively low rates of reported child abuse. Nationally, the child abuse rate was 10.6 founded (substantiated) cases per 1,000 children in 2007. Virginia's rate was about 3.4 cases per 1,000 children.

Northern Virginia's 2007, the rate was about 1.9 founded cases per 1,000 residents 0-17 years of age. This was about 56% of the rate statewide. The Northern Virginia rate, which decreased significantly between 2000 and 2003, has not changed appreciably over the last five years.



**Child Abuse, Northern Virginia 2007**  
**Founded Cases per 1,000 Population (< 18 Years of Age)**  
Source: Virginia Department of Social Services, 2008



Child abuse and neglect is not restricted to a specific socioeconomic class, race or ethnicity, or religion. There are, however, a number of conditions and circumstances that are associated with higher incidence of abuse and neglect. They include: teenage parents, parental (or family) substance abuse, family isolation, unemployment and poverty, and parents who were abused during childhood.

Children younger than four years of age are most vulnerable and are at the greatest risk of severe injury or death. More than half of founded cases are maltreatment or neglect of children under seven years of age, with more than three-fourths among those under age twelve.

Reported founded cases of child abuse and neglect have been higher in Prince William County and Alexandria than elsewhere in the region in recent years. The substantial variation in intraregional founded case rates is not well understood. It may be noteworthy that most studies that have looked at child abuse have found that the official statistics (e.g., founded case rates) tend to underestimate true incidence.

***Foster care***

Foster care refers to a variety of temporary living arrangements provided for children who do not have a safe family environment. Often, foster care results from the removal of children from their home because of child abuse or neglect. The intent is to place children



in a safe and nurturing environment until they can be returned to a safe and stable home. Most authorities agree that the time spent in foster care should be as short as possible, and that children be moved quickly to a stable, supportive environment.

Families from which children are removed for foster care usually have complex problems that may involve parental neglect, physical and psychological abuse, parental substance abuse, and homelessness. These conditions and circumstances put children in need of foster care at greater risk than other children. Children in foster care:

- Have more health problems than children in general. They often have untreated acute conditions, chronic illnesses, poor nutrition, and lack recommended immunizations. These children also tend to have low height and weight and to show other developmental delays.<sup>38</sup>
- Have comparatively low rates of school achievement and high rates of academic failure. A disproportionate number require special education classes. They are at higher risk of dropping out of school.<sup>39</sup>

Children from minority groups, especially African Americans, are overrepresented in the foster care population.

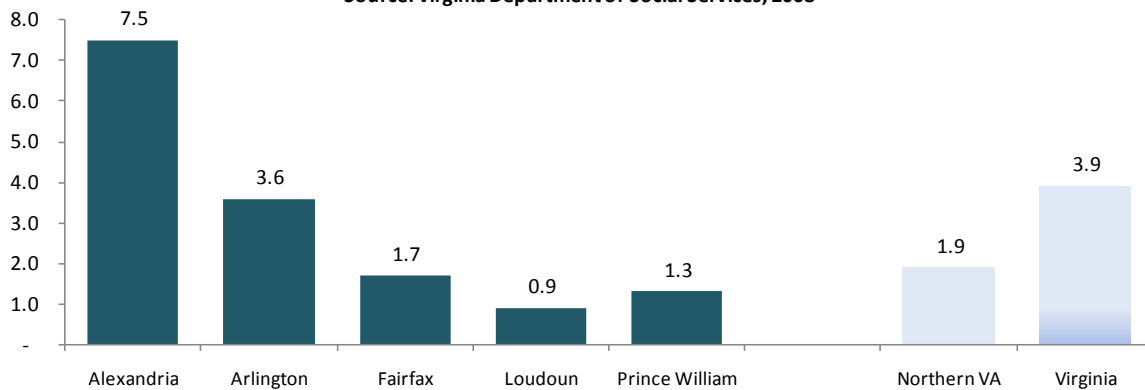
Nationally, the foster care rate was about 7.0 cases per 1,000 children 0-17 years of age in 2006. Virginia and Northern Virginia have relatively low foster care caseloads and rates. The Virginia rate was about 4.3 per cases 1,000 children in 2006. The Northern Virginia rate was about 1.9 per 1,000 children, less than half the rate statewide. Foster care caseloads and rates have been higher in Alexandria and Arlington than elsewhere in the region.





### Foster Care, Northern Virginia 2007 Children in Foster Care per 1,000 Population 0 - 17 Years of Age

Source: Virginia Department of Social Services, 2008



Child abuse and neglect are the principal reasons for placing children in foster care. Circumstances that increase the risk of abuse and neglect include family violence, isolation, poverty, and substance abuse. The availability of social and family support services to intervene when child abuse and neglect are found may be instrumental in avoiding removal of children from their home and, thereby, reducing the need for and reliance on foster care.

### ***Disabilities***

Though comparatively small in number, physical and mental disabilities are a major health and social concern. Disabilities usually are chronic conditions that have lifelong effects. Social, economic and related effects extend well beyond the individual directly affected, often affecting both immediate and extended families for many years.

These conditions and circumstances help produce environments in which children with disabilities are:

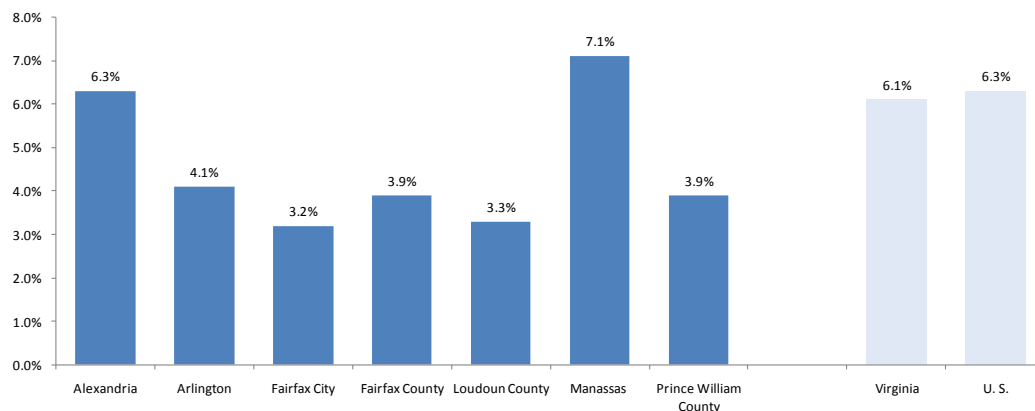
- At greater risk of maltreatment and abuse, usually because of social isolation, dependency on care givers and limited communication skills,<sup>40</sup>
- More likely to drop out of school than other children,<sup>41</sup>
- More vulnerable to feelings of loneliness than their peers without disabilities, particularly children with learning disabilities and mental retardation,<sup>42 43</sup>



- At risk for the same types of psychological disorders as students without cognitive deficits, with comparatively high rates of depressive disorders among those with mental retardation.<sup>44</sup>

Disability rates among Northern Virginia children and youth are relatively low. Between 2005 and 2007, the percentage of those with any disability (physical and mental) among Northern Virginia residents between five and 15 years of age was about 4.2%, compared with more than 6% statewide and nationally.

**Northern Virginia Child & Adolescent with Disabilities**  
**Percent of Population 5 - 15 Years Of Age with Any Disability, 2005 - 2007 (Average)**  
 Source: U.S. Census Bureau; 2005-2007 American Community Survey



Within Northern Virginia, child disability rates are lowest in Loudoun County and highest in Alexandria and Manassas.

Mental disability rates among Northern Virginia children and youth also are comparatively low. Mental (or mental health) disability refers to having a limitation in activity because of a mental health condition or problem, which may include mental illness, cognitive or intellectual disability or other mental or emotional disorders that seriously interfere with the ability to work, attend school or manage day to day activities. Region wide, the mental disability rate was about two-thirds of the Virginia and U.S. rates.



## Footnotes

<sup>1</sup> Where a Northern Virginia measure is compared with the state of Virginia, the state statistic includes the Northern Virginia data unless otherwise indicated. Because most Northern Virginia indices differ significantly from those for the rest of the state, this method usually understates the actual difference between Northern Virginia and the state as a whole. The underestimation is in the direction of the difference(s) reported.

<sup>2</sup> Population growth continues to be higher than statewide, but the rate of growth has decelerated. Northern Virginia's growth rate, about 33% between 1980 and 1990, decreased to about 24% between 1990 and 2000, and to approximately 16.5% between 2000 and 2008. For the last few years, growth has averaged between 1% and 2% annually. The rate of population growth is expected to remain comparatively low ( $\pm 1\%$  annually) over the next decade.

<sup>3</sup> New Demographic Trends Seen In Northern Virginia Population Shifts. November 13, 2008. [News Release] Northern Virginia Regional Commission. Retrieved from <http://www.novaregion.org/archives/52/08-23-Demographic-Shifts.pdf>.

<sup>4</sup> Between 1980 and 1990 the regional population under 18 years of age grew by about 14%, less than half the overall regional growth rate of about 33%.

<sup>5</sup> The generic terms Hispanic and Asian refer to ethnic groups that include residents whose ancestry is traceable to countries formerly ruled by Spain or located on or near the continent of Asia. Hispanic residents in Northern Virginia typically trace their ancestry to Mexico, Puerto Rico, a number of Central and South American countries, and the Philippines. Asian residents may trace their ancestry to China, India, Vietnam, Japan, Korea, Pakistan, Indonesia, the Philippines, and Cambodia. The social and economic status of Hispanic and Asian residents in Northern Virginia varies widely.

<sup>6</sup> Robert Channick, "Hispanics Urged to make Census Count," Chicago Tribune, November 4, 2009. For an analysis of the basis of the undercount and efforts required to counteract it see Mary Romero, *Ethnographic Evaluation of Behavioral Causes of Census Undercount of Undocumented Immigrants and Salvadorans in the Mission District of San Francisco*, U. S. Bureau of the Census, 1992.

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<sup>9</sup> Susan E. Mayer. (1997) Trends in the Economic Well-Being and Life Chances of America's Children. *Consequences of Growing Up Poor*, ed. Greg J. Duncan and Jeanne Brooks-Gunn: 46-69.

<sup>10</sup> Family income appears to be more strongly related to the achievement of children than to their emotional status. See data and argument presented by the National Center for Children in Poverty at [www.nccp.org](http://www.nccp.org).

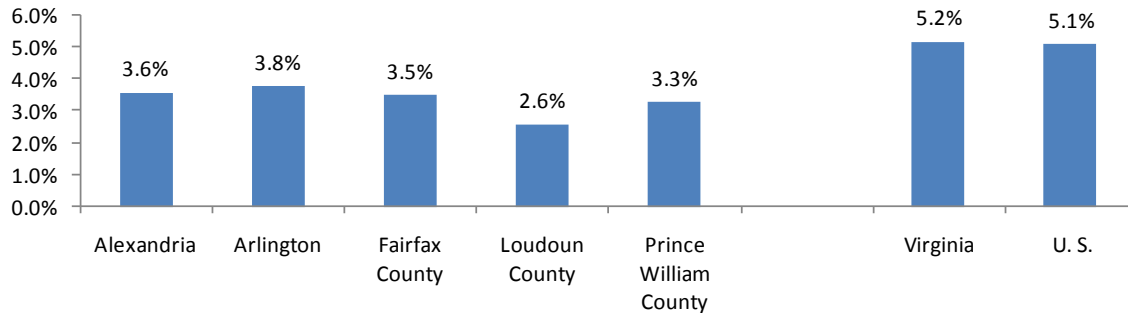
<sup>11</sup> Mean and median are terms used to describe or denote properties or types of statistical distributions. The mean value of set of numbers is the mathematical average of all the values. It is calculated by adding all of the values of all the terms and dividing sum of those values by the number of terms added together. This term may also be referenced as the arithmetic mean.

The median value of a set of numbers is the value of the term in the middle of the set of numbers considered. It is the midpoint of the range numbers that are arranged in order of value. The median value is the value such that the number of terms having values greater than or equal to it is the same as the number of terms having values less than or equal to it. If the number of terms is even, then the median is the average of the two terms in the middle, such that the number of terms having values greater than or equal to it is the same as the number of terms having values less than or equal to it.



### Northern Virginia Children 5-15 Years of Age Percent with a Mental Disability, 2005 -2007 (Average)

Source: U.S. Census Bureau, 2005-2007 American Community Survey.



Within Northern Virginia, Loudoun County child mental disability rates are lower than those in other jurisdictions.

### *Juvenile Arrests*

Northern Virginia is a relatively safe community. Violent crime region wide is much less frequent than in U. S. urban and suburban areas of comparable size. In 2007, the Northern Virginia violent crime (robbery, aggravated assault, rape, murder) rate was 1.4 offenses per 1,000 persons. This was less than one-third the national rate of 4.7 offenses per 1,000 persons. No Northern Virginia jurisdiction has a higher rate than the national rate. Fairfax and Loudoun Counties, have the lower rates in the region, approximately 1.0 and 0.9 violent offenses per 1,000 persons respectively.<sup>45</sup>

Best estimates are that gangs account for about 7% of reported aggravated assaults and are responsible for approximately 2% percent of overall crime in Northern Virginia and 5% of the violent crimes.

Juvenile arrest rates in Northern Virginia are low. The 2008 rate, about 53 arrests per 100,000 persons 10-17 years of age in 2008, was much lower than state and national rates, about 145 and 300 arrests per 100,000 respectively.

School age children and adolescents benefit from the overall low crime rate. Violence in schools has decreased by more than 40% over the last five years. The total number of reported offenses has decreased in each of the last five years. The school offense rate decreased from 18.1 per 1,000 enrolled students in 2002 to 10.2 offenses per 1,000 students in 2007. Fights were down 43% and assault and battery cases down 30%. It is

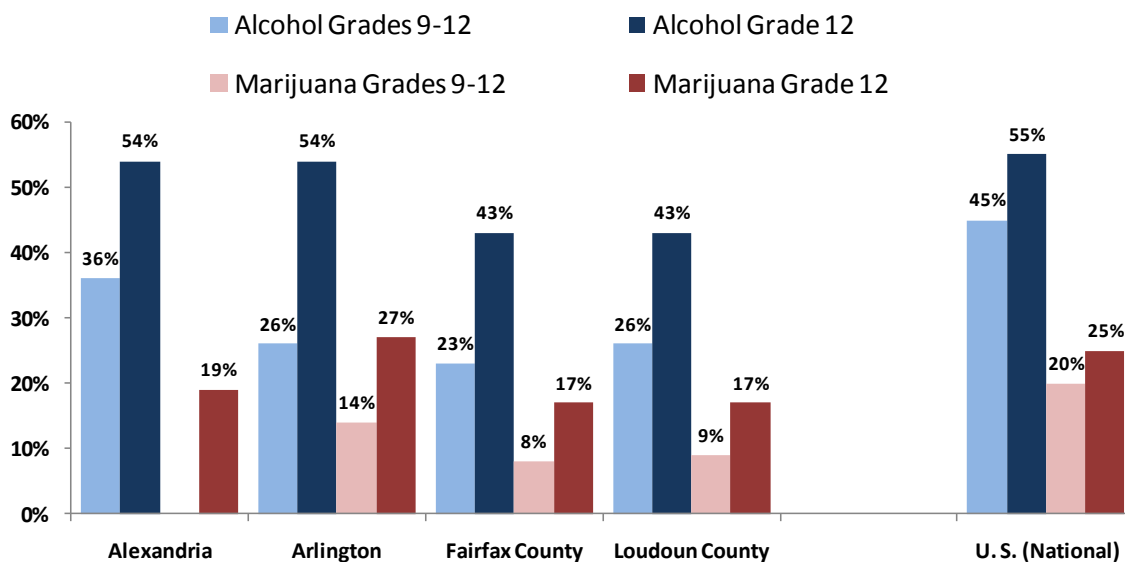


noteworthy that the higher offense rates are in middle schools, which have incident rates almost twice those in high schools.

### Substance Abuse

As with most other at risk behaviors, use of alcohol, marijuana and other drugs by Northern Virginia children and youth is less frequent than among comparable age groups statewide and nationally. Though the data is incomplete, youth risk behavior survey data indicate that use of alcohol among high school students appears to be about two-thirds the reported national level.<sup>46</sup>

**Youth Risk Behavior**  
**Alcohol and Marijuana Use (Last 30 Days), Northern Virginia, 2007 - 2008**  
Source: Compiled from Local Youth Risk Behavior Surveys, 2007 - 2008



Similarly, use of marijuana appears to be significantly less frequent among Northern Virginia students than nationwide.

It may be noteworthy that the differential reported between local and national experience with alcohol and drug use decreases with age (grade level).



<sup>12</sup> Unless indicated otherwise, Prince William County data includes (incorporates) the populations of Manassas and Manassas Park.

<sup>13</sup> See information and discussion presented by the National Center for Children in Poverty at [www.nccp.org](http://www.nccp.org).

<sup>14</sup> The current poverty measure was established more than 40 years ago. It is based on research suggesting that families spend about one-third of their incomes on food. The official federal poverty level was set at three times the average cost of food. Since the 1960s the FPL has been adjusted annually for inflation, with not change to the base rate or underlying assumptions. Many argue that failure to update the FPL for changes in the cost of living results in people who are considered poor today being much poorer compared with the general population that those considered poor when the FPL was established. Currently, the FPL is less than 30% of the median household income, compared with nearly 50% of the median when it was established.

<sup>15</sup> A female headed household is defined as one where either no adult males are present, because of divorce, separation, migration, non-marriage or widowhood, or where men, although present, do not contribute to the household income.

<sup>16</sup> As used here, the terms “enrollment” and “participation” in the food stamp program are used interchangeably.

<sup>17</sup> For a fuller discussion see: Eugene M. Lewit and Linda Schurmann Baker, “The Future of Children, Financing Child Care,” *Child Indicators: Homeless Families and Children*, Vol. 6, No 2 Summer/Fall, 1996.

<sup>18</sup> Mark Mather, Population Reference Bureau Reports on America. (2009). *Children in Immigrant Families Chart a New Path*. Retrieved from <http://www.prb.org/pdf09/immigrantchildren.pdf>.

<sup>19</sup> The Future of Children. (2004). *Children in Immigrant Families: An Analysis*. Volume 12, No. 2. Retrieved from [http://futureofchildren.org/futureofchildren/publications/docs/14\\_02\\_ExecSummary.pdf](http://futureofchildren.org/futureofchildren/publications/docs/14_02_ExecSummary.pdf).

<sup>20</sup> Jane Reardon-Anderson, Randy Capps, and Michael Fix, *The Health and Well-Being of Children in Immigrant Families*. The Urban Institute: Series B, No. B-52, November 2002.

<sup>21</sup> The term “children in immigrant families” is defined by the U.S. Census Bureau “as children who are foreign-born or reside with at least one foreign-born parent.” Foreign-born is defined as either a U.S. citizen by naturalization or not a citizen of the U.S. Native-born is defined as born in the U.S., Puerto Rico, Guam, the U.S. Virgin Islands, or the Northern Marianas or born abroad of American parents.

<sup>22</sup> For fuller discussion see Donald J. Hernandez, Ph.D., “Demographic Change and the Life Circumstances of Immigrant Families”, *The Future of Children*, Volume 14, Number 2: Summer 2004.

<sup>23</sup> As used here, the term poor refers to family income below the federal poverty level, \$22,050 for a family of four in 2009. Low income refers to family income between 100% and 200% of the federal poverty level, between \$22,050 and \$44,100 for a family of four in 2009.

<sup>24</sup> U. S. Census data (2007) analyzed and reported by the National Center for Children in Poverty at [www.nccp.org](http://www.nccp.org).

<sup>25</sup> U. S. Census data (2007) at [www.nccp.org](http://www.nccp.org).

<sup>26</sup> Ibid.

<sup>27</sup> Data reported by *Christian Science Monitor*, June 9, 2009. Data analysis and report from *Education Week* and Editorial Projects in Education Research Center, June 2009 at [www.edweek.org](http://www.edweek.org)

<sup>28</sup> Over the last decade the U. S. infant mortality rate has ranked between 25<sup>th</sup> and 29<sup>th</sup> among developed countries. For example, see National Center for Health Statistics (NCHS). *Health, United States* (annual editions 1999-2007). Hyattsville, MD: U.S. Department of Health and Human Services.

<sup>29</sup> Similar patterns holds for very premature births, those with less than 32 weeks gestation, and late preterm births, those with 34 to 36 weeks gestation. Northern Virginia rates are lower than the national and state rates, significantly lower for very preterm births. Variation within the region is not significant.

<sup>30</sup> Both the Virginia and U. S. rates are higher than the Health People 2010 goal of no more than 4.5 infant deaths per 1,000 live births.

<sup>31</sup> See *Suicide Fact Sheet*, Centers for Disease Control, DHHS, April 2007. Available at [www.cdc.gov/ncipc/factsheets/suifactgs.htm](http://www.cdc.gov/ncipc/factsheets/suifactgs.htm)



<sup>32</sup> Results of the Harvard University study are reported in the Suicide Prevention Resource Center Fact Sheet: *Youth Suicide*. [www.sprc.org/library/YouthSuicideFactSheet.pdf](http://www.sprc.org/library/YouthSuicideFactSheet.pdf)

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<sup>34</sup> "Youth Suicide in Virginia: A Look at Youth Suicide in Virginia, 1996-2005," Division of Injury and Violence Prevention, Virginia Department of Health, 2008, p. 2.

<sup>35</sup> SAVE: Suicide Awareness Voices of Education. [www.save.org](http://www.save.org)

<sup>36</sup> About 85% were male and about 75% were non-Hispanic whites (male and female). Overall, white, non-Hispanic youth suicide rates were 1.4 times higher than black, non-Hispanic rates, and two times higher than other, non-Hispanic and Hispanic, any race.

<sup>37</sup> During the 5 year period 2001 to 2005, there were 11,989 self-inflicted injuries recorded for those 10 to 24 years of age. Nearly two-thirds (65%) were female, more than two-thirds (68%) were white, non-Hispanic, and nearly half (47%) were between 15 and 19 years of age. The leading means of injury were poisoning (83.4%) and cut/pierce (12%). See *Youth Suicide in Virginia: A Look at Youth Suicide in Virginia, 1996-2005*, Division of Injury and Violence Prevention, Virginia Department of Health, 2008.

<sup>38</sup> American Academy of Pediatrics. Health Care of Young Children in Foster Care. *Pediatrics*. Vol. 109 No. 3 March 2002, pp. 536-541

<sup>39</sup> James S. Vacca. *Breaking the cycle of academic failure for foster children — What can the schools do to help?* Long Island University/C.W. Post Campus, Brookville, NY 11548, United States. Available online 15 February 2008.

<sup>40</sup> Roberta A. Hibbard, MD, Larry W. Desch, MD. *Maltreatment of Children With Disabilities*. *Pediatrics* Vol. 119 No. 5 May 2007, pp. 1018-1025 (doi:10.1542/peds.2007-0565) .

<sup>41</sup> Rima Shore, Ph.D. & Barbara Shore, M.A. Reducing the High School Dropout Rate. KIDS COUNT Indicator Brief . July 2009.

<sup>42</sup> Loneliness in Children with Disabilities; Pavri; 2001

<sup>43</sup> Though most of the research has focused on students with learning disabilities and mental retardation, students with other disabilities are likely to experience similar levels of loneliness.

<sup>44</sup> Virginia Commission on Youth. Available at <http://coy.state.va.us/Modalities/retardation.htm>.

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<sup>1</sup> A female headed household is defined as one where either no adult males are present, because of divorce, separation, migration, non-marriage or widowhood, or where men, although present, do not contribute to the household income.

<sup>1</sup> As used here, the terms “enrollment” and “participation” in the food stamp program are used interchangeably.

<sup>1</sup> For a fuller discussion see: Eugene M. Lewit and Linda Schurmann Baker, “The Future of Children, Financing Child Care,” *Child Indicators: Homeless Families and Children*, Vol. 6, No 2 Summer/Fall, 1996.

<sup>1</sup> Mark Mather, Population Reference Bureau Reports on America. (2009). *Children in Immigrant Families Chart a New Path*. Retrieved from <http://www.prb.org/pdf09/immigrantchildren.pdf>.

<sup>1</sup> The Future of Children. (2004). *Children in Immigrant Families: An Analysis*. Volume 12, No. 2. Retrieved from [http://futureofchildren.org/futureofchildren/publications/docs/14\\_02\\_ExecSummary.pdf](http://futureofchildren.org/futureofchildren/publications/docs/14_02_ExecSummary.pdf).

<sup>1</sup>Jane Reardon-Anderson, Randy Capps, and Michael Fix, *The Health and Well-Being of Children in Immigrant Families*. The Urban Institute: Series B, No. B-52, November 2002.

<sup>1</sup> The term “children in immigrant families” is defined by the U.S. Census Bureau “as children who are foreign-born or reside with at least one foreign-born parent.” Foreign-born is defined as either a U.S. citizen by naturalization or not a citizen of the U.S. Native-born is defined as born in the U.S., Puerto Rico, Guam, the U.S. Virgin Islands, or the Northern Marianas or born abroad of American parents.

<sup>1</sup> For fuller discussion see Donald J. Hernandez, Ph.D., “Demographic Change and the Life Circumstances of Immigrant Families”, *The Future of Children*, Volume 14, Number 2: Summer 2004.

<sup>1</sup> As used here, the term poor refers to family income below the federal poverty level, \$22,050 for a family of four in 2009. Low income refers to family income between 100% and 200% of the federal poverty level, between \$22,050 and \$44,100 for a family of four in 2009.

<sup>1</sup> U. S. Census data (2007) analyzed and reported by the National Center for Children in Poverty at [www.nccp.org](http://www.nccp.org).

<sup>1</sup> U. S. Census data (2007) at [www.nccp.org](http://www.nccp.org).

<sup>1</sup> Ibid.

<sup>1</sup> Data reported by *Christian Science Monitor*, June 9, 2009. Data analysis and report from *Education Week* and Editorial Projects in Education Research Center, June 2009 at [www.edweek.org](http://www.edweek.org)

<sup>1</sup> Over the last decade the U. S. infant mortality rate has ranked between 25<sup>th</sup> and 29<sup>th</sup> among developed countries. For example, see National Center for Health Statistics (NCHS). *Health, United States* (annual editions 1999-2007). Hyattsville, MD: U.S. Department of Health and Human Services.

<sup>1</sup> Similar patterns holds for very premature births, those with less than 32 weeks gestation, and late preterm births, those with 34 to 36 weeks gestation. Northern Virginia rates are lower than the national and state rates, significantly lower for very preterm births. Variation within the region is not significant.

<sup>1</sup> Both the Virginia and U. S. rates are higher than the Health People 2010 goal of no more than 4.5 infant deaths per 1,000 live births.

<sup>1</sup>See *Suicide Fact Sheet*, Centers for Disease Control, DHHS, April 2007. Available at [www.cdc.gov/ncipc/factsheets/suifactgs.htm](http://www.cdc.gov/ncipc/factsheets/suifactgs.htm)

<sup>1</sup>Results of the Harvard University study are reported in the Suicide Prevention Resource Center Fact Sheet: *Youth Suicide*. [www.sprc.org/library/YouthSuicideFactSheet.pdf](http://www.sprc.org/library/YouthSuicideFactSheet.pdf)

<sup>1</sup>Information summarized in “Youth Suicide in Virginia: A Look at Youth Suicide in Virginia, 1996-2005,” Division of Injury and Violence Prevention, Virginia Department of Health, 2008, p. 1. Data from Virginia Violent Death Reporting System, Office of the Medical Examiner, Virginia Department of Health.

<sup>1</sup> “Youth Suicide in Virginia: A Look at Youth Suicide in Virginia, 1996-2005,” Division of Injury and Violence Prevention, Virginia Department of Health, 2008, p. 2.

<sup>1</sup> SAVE: Suicide Awareness Voices of Education. [www.save.org](http://www.save.org)



<sup>1</sup>About 85% were male and about 75% were non-Hispanic whites (male and female). Overall, white, non-Hispanic youth suicide rates were 1.4 times higher than black, non-Hispanic rates, and two times higher than other, non-Hispanic and Hispanic, any race.

<sup>1</sup> During the 5 year period 2001 to 2005, there were 11,989 self-inflicted injuries recorded for those 10 to 24 years of age. Nearly two-thirds (65%) were female, more than two-thirds (68%) were white, non-Hispanic, and nearly half (47%) were between 15 and 19 years of age. The leading means of injury were poisoning (83.4%) and cut/pierce (12%). See *Youth Suicide in Virginia: A Look at Youth Suicide in Virginia, 1996-2005*, Division of Injury and Violence Prevention, Virginia Department of Health, 2008.

<sup>1</sup> American Academy of Pediatrics. Health Care of Young Children in Foster Care. *Pediatrics*. Vol. 109 No. 3 March 2002, pp. 536-541

<sup>1</sup> James S. Vacca. *Breaking the cycle of academic failure for foster children — What can the schools do to help?* Long Island University/C.W. Post Campus, Brookville, NY 11548, United States. Available online 15 February 2008.

<sup>1</sup> Roberta A. Hibbard, MD, Larry W. Desch, MD. *Maltreatment of Children With Disabilities*. *Pediatrics* Vol. 119 No. 5 May 2007, pp. 1018-1025 (doi:10.1542/peds.2007-0565).

<sup>1</sup> Rima Shore, Ph.D. & Barbara Shore, M.A. Reducing the High School Dropout Rate. KIDS COUNT Indicator Brief . July 2009.

<sup>1</sup> Loneliness in Children with Disabilities; Pavri; 2001

<sup>1</sup> Though most of the research has focused on students with learning disabilities and mental retardation, students with other disabilities are likely to experience similar levels of loneliness.

<sup>1</sup> Virginia Commission on Youth. Available at <http://coy.state.va.us/Modalities/retardation.htm>.

<sup>1</sup> The data reported here is from the Northern Virginia Regional Gang Task Force's recently published *Northern Virginia Comprehensive Gang Assessment 2003-2008*. The full report is available at [www.novaregion.org/DocumentView.aspx?DID=2197](http://www.novaregion.org/DocumentView.aspx?DID=2197)

<sup>1</sup> Comparable, standard youth risk survey data are is not available for all school systems or jurisdictions. The information reported here reflects the most recent survey data that is publicly available.



## A Portrait of Children in Northern Virginia Indicator Summary

### Northern Virginia Children and Adolescents Indicators of Wellbeing: Demography

	Base Year		Current Year	Desired	
	Year	Value		Direction	Direction
<b>Population</b>					
Northern Virginia Children 0–17 years of age,	2000	430,935	533,374	↔	↔
Percent of total population	2000	25.1%	25.2%	↔	↔
<b>Racial and ethnic composition</b>					
Children 0–17 years, percent of ethnic or racial group					
White, Non-Hispanic percent	2000	64.5%	59.9%	↔	↓
Black	2000	12.6%	12.1%	↔	↓
Hispanic (any race)	2000	12.6%	16.2%	↔	↑
Asian	2000	9.5%	10.6%	↔	↑
<b>Distribution of Population 0-17 Years</b>					
Alexandria	2000	4.8%	5.3%	↔	↑
Arlington	2000	6.8%	7.0%	↔	↑
Fairfax County	2000	55.4%	48.4%	↔	↓
Loudoun County	2000	11.2%	16.1%	↔	↑
Prince William County	2000	21.8%	23.2%	↔	↑



# A Portrait of children in Northern Virginia

# 2010

A REPORT PRESENTED BY THE COMMUNITY FOUNDATION FOR NORTHERN VIRGINIA AND VOICES FOR VIRGINIA'S CHILDREN

## Northern Virginia Children and Adolescents Indicators of Wellbeing: Immigrant Families

### Immigrant Families

	<i>Base Year</i>		<i>Current Year</i>	<i>Desired</i>	<i>Direction</i>
	Year	Value		Direction	Direction
Percent of Children (0-17 Years) in Immigrant Families (2005 -2007 average)	2004	39.0%	43.2%	↔	↑
Alexandria	2004	50.0%	53.2%	↔	↑
Arlington	2004	41.0%	46.7%	↔	↑
Fairfax County	2004	42.0%	48.9%	↔	↑
Loudoun County	2004	30.0%	31.0%	↔	↑
Prince William County	2004	31.0%	37.2%	↔	↑

### Limited English Proficiency

	<i>Base Year</i>		<i>Current Year</i>	<i>Desired</i>	<i>Direction</i>
	Year	Value		Direction	Direction
Students with limited English proficiency, Northern Virginia	2000	27,790	62,947	↓	↑
Students with limited English proficiency					
Alexandria	2000	1,806	2,868	↓	↑
Arlington	2000	4,858	5,275	↓	↑
Fairfax County	2000	16,746	34,118	↓	↑
Loudoun County	2000	506	4,416	↓	↑
Prince William County	2000	2,583	13,157	↓	↑

### Linguistic Isolation

	<i>Base Year</i>		<i>Current Year</i>	<i>Desired</i>	<i>Direction</i>
	Year	Value		Direction	Direction
Percent of households Linguistically Isolated (2005 -2007 average)					
Alexandria	2000	6.7%	6.5%	↓	↓
Arlington	2000	8.4%	5.3%	↓	↓
Fairfax County	2000	9.7%	7.9%	↓	↓
Loudoun County	2000	2.1%	4.8%	↓	↑
Prince William County	2000	2.4%	7.6%	↓	↑



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**Northern Virginia Children and Adolescents**  
**Indicators of Wellbeing: Economic Conditions and Circumstances**

	<i>Base Year</i>		<i>Current Year</i>	<i>Desired</i>	
	<i>Year</i>	<i>Value</i>		<i>Direction</i>	<i>Direction</i>
<b>Income and Poverty</b>					
Median Family income	2000	\$83,325	\$94, 876	↑	↑
Households with children <18 years below poverty level (2005-2007 average)					
Alexandria	2002	6.9%	7.2%	↓	↑
Arlington	2002	7.8%	8.3%	↓	↑
Fairfax County	2002	6.5%	6.7%	↓	↑
Loudoun County	2002	1.2%	1.7%	↓	↑
Prince William County	2002	7.3%	7.0%	↓	↓
Female headed households with children <18 years below poverty level (2005-2007 average)					
Alexandria	2002	13.6%	15.1%	↓	↑
Arlington	2002	21.8%	22.2%	↓	↑
Fairfax County	2002	19.1%	16.5%	↓	↓
Loudoun County	2002	2.8%	3.8%	↓	↑
Prince William County	2002	19.1%	16.6%	↓	↓
<b>Economic support program participation</b>					
Households below poverty receiving food stamps (2005 -2007 average), NV jurisdiction range					
Alexandria	2004	59.9%	61.0%	↔	↔
Arlington	2004	51.2%	50.3%	↔	↔
Fairfax County	2004	44.6%	45.6%	↔	↔
Loudoun County	2004	32.7%	34.1%	↔	↔
Prince William County	2004	46.8%	48.2%	↔	↔
Free and Reduced Lunch Participation (Percent of School Children Participating)					
Alexandria	2002	51.0%	51.0%	↔	↔
Arlington	2002	41.0%	31.0%	↔	↔
Fairfax County	2002	19.0%	21.0%	↔	↔
Loudoun County	2002	11.0%	14.0%	↔	↔
Prince William County	2002	21.0%	30.0%	↔	↔
WIC program participation	2005	25,426	32,785	↑	↑



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**Northern Virginia Children and Adolescents  
Indicators of Wellbeing: Maternal and Child Health**

	<i>Base Year</i> Year	<i>Value</i>	<i>Current Year</i>	<i>Desired</i> Direction	<i>Direction</i>
<b>Maternal and infant health</b>					
<b>Prenatal Care</b>					
Percent pregnant women receiving care in first trimester	2000	83.1%	78.5%	↑	↓
<b>Birth weight and prematurity</b>					
Low birth weight: percent of births <2,500 grams	2000	6.9%	7.2%	↓	↑
Very low birth weight: percent of births <1,500 grams	2000	1.3%	1.4%	↓	↑
<b>Preterm births: percent of live births &lt;37 weeks gestation(2003-2006 average)</b>					
Alexandria	2000	12.2%	11.4%	↓	↓
Arlington	2000	11.4%	10.8%	↓	↓
Fairfax County	2000	10.0%	10.7%	↓	↑
Loudoun County	2000	10.4%	10.5%	↓	↑
Prince William County	2000	12.1%	11.1%	↓	↓
<b>Non marital births</b>					
Non marital births: percent of live births	2000	19.0%	25.0%	↓	↑
Non marital births: percent change 2000 - 2007			31.6%	↓	↑
<b>Infant Mortality</b>					
<b>Infant deaths per 1,000 live births, Northern Virginia</b>					
Alexandria	2000	6.5	5.1	↓	↓
Arlington	2000	5.8	5.0	↓	↓
Fairfax County	2000	4.3	5.4	↓	↑
Loudoun County	2000	4.1	3.7	↓	↓
Prince William County	2000	4.0	7.2	↓	↑



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**Northern Virginia Children and Adolescents  
Indicators of Wellbeing: Education**

	Base Year	Current Year	Desired	Direction	
	Year	Value	Direction	Direction	
<b>Education</b>					
<b>On time high school graduation rate, 2008</b>					
Alexandria	2004	73.7%	76.4%	↑	↑
Arlington	2004	81.6%	82.5%	↑	↑
Fairfax County	2004	89.4%	91.2%	↑	↑
Loudoun County	2004	87.1%	93.6%	↑	↑
Prince William County	2004	80.6%	83.3%	↑	↑
<b>High school dropout rate, jurisdiction range, 2007-2008</b>					
Alexandria	1999	4.2%	4.5%	↓	↑
Arlington	1999	3.9%	2.5%	↓	↓
Fairfax County	1999	3.5%	2.3%	↓	↓
Loudoun County	1999	3.4%	1.3%	↓	↓
Prince William County	1999	5.6%	4.2%	↓	↓
<b>Standards of learning: English - 3rd grade students passing</b>					
Alexandria	2000	55%	79%	↑	↑
Arlington	2000	64%	87%	↑	↑
Fairfax County	2000	72%	87%	↑	↑
Loudoun County	2000	73%	87%	↑	↑
Prince William County	2000	59%	84%	↑	↑

**Northern Virginia Children and Adolescents  
Indicators of Wellbeing: Children at Risk**

	Base Year	Current Year	Desired	Direction	
	Year	Value	Direction	Direction	
<b>Teen Pregnancy</b>					
Pregnancies per 1,000 females <15 years	2000	0.8	0.6	↓	↓
Pregnancies per 1,000 females 15-17 years	2000	21.9	15.1	↓	↓
<b>Suicide, Self Inflicted Injury</b>					
Deaths per 100,000, NV average 1996-2005	2000	7.5	5.5	↓	↓
<b>Accidental Injury &amp; Death</b>					
Deaths (All Accidental Causes) per 100,000, NV average 1999-2006	2000	12.3	10.5	↓	↓
Motor Vehicle Deaths per 100,000, NV average 1999-2006	2000	8.5	6.3	↓	↓
<b>Child Abuse and Neglect</b>					
Founded Cases per 1,000 Children 0-17 Years of Age, 2007	2000	2.5	1.9	↓	↓
<b>Children in Foster Care</b>					
Foster Care Placements per 1,000 Children 0-17 Years of Age, 2007	2000	2.1	1.9	↓	↓
<b>Children with Disabilities</b>					
Percent of Children with a Disability (Physical and/or Mental), (2005-2007 Average)	2000	6.9%	6.1%	↓	↓
Percent of Children with a Mental Disability, (2005-2007 Average)	2000	5.5%	5.2%	↓	↓





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For the complete report, including data tables and citations,  
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