

Research-to-Results ^{Brief}

Child TRENDSSM

...information for program designers, program providers, funders, and policy makers on the fit between programs and the needs of children.

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CUMULATIVE RISKS AMONG AMERICAN CHILDREN

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BACKGROUND

How many American children are developing poorly? If you asked the average American, you'd probably get a pretty pessimistic assessment. Indeed, polls suggest that the public tends to overestimate the problems faced by America's children.¹ For example, the public believes that the number of children who lack health insurance is three times larger than the actual number. This tendency to overestimate problems affects public perceptions about the magnitude of the health insurance problem and the cost of addressing it.

This pessimistic tendency is surprisingly pervasive, with polls by Public Agenda indicating that the public has quite negative perceptions of adolescents.² However, it is important for policy makers, taxpayers, and the media to recognize the diversity in children's circumstances, because this recognition affects the number of children believed to need varied services or opportunities and the magnitude of the challenge of meeting that need.

To describe the circumstances of children, a number of researchers have developed indices of risk.³ Building on this work, Child Trends has developed a measure with a clunky name but an important meaning: the "Sociodemographic Risk Index".⁴ Of course, family income is often used alone as the critical marker of risk. However, many low-income families have no other risk factors, while some higher income families experience multiple risk factors. Based on a review of research, we identified five widely and readily measured factors as indicators of risk for children's development:⁵

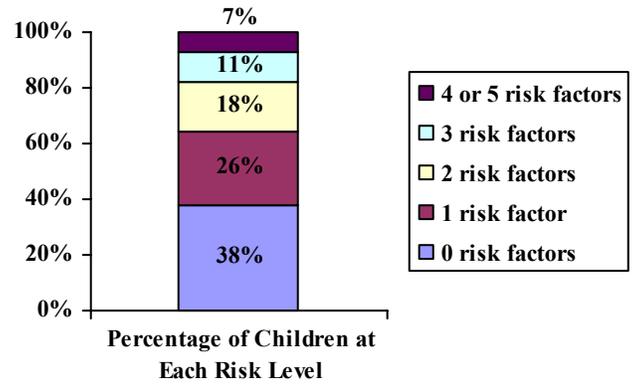
- poverty,
- single-parent family,
- parents or parent with a low level of education
- large family, and
- family not able to own or buy a home.

DISTRIBUTION OF LEVELS OF SOCIODEMOGRAPHIC RISK

Low Risk. We find that most children grow up in families with no risk factors (38 percent) or only one risk factor (26 percent). In other words, more than six in ten (64 percent) children experience no or only one family risk factor. It seems safe to assume that most of these families have the resources available in their families or communities or through their employment to meet the needs of their children.

Medium Risk. Another three in ten children (29 percent) grow up in medium-risk families. Specifically, these children experience two (18 percent) or three (11 percent) of the five family risk factors studied. Children in these families may need some assistance in addressing needs that their families, schools, and communities are not able to meet fully.

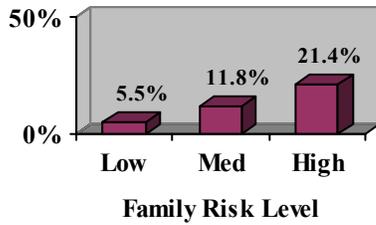
High Risk. Finally, about 7 percent of all children experience four (5 percent) or all five (2 percent) of the social and economic family risk factors that we identified. Children in these families jointly experience poverty, single parenthood, low parental education, numerous siblings, and rental housing, or four of these five risk factors. And in life, these risks often occur together. For example, single parents are more likely to be poor and less likely to own a home than are married parents.



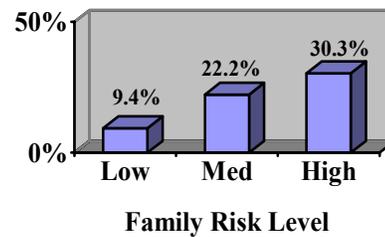
THE RELATIONSHIP BETWEEN RISK AND CHILD WELL-BEING

In addition, our analyses show clearly that children experiencing multiple risks are developing less well. For example, children in high-risk families are more likely to have been suspended or expelled from school, to have behavior problems, to be in poor health, and to be less engaged in schoolwork than are children in lower risk families. Parents in high-risk families are more likely to experience symptoms of poor mental health, more frequent feelings of aggravation, and more worries about being able to provide the basics, such as food, than are parents in lower risk families. Thus, the level of cumulative risk is related strongly and consistently to children's development.

Children Ages 12-17 from High Risk Families Are More Likely to Have Been Suspended or Expelled From School in the Past Year

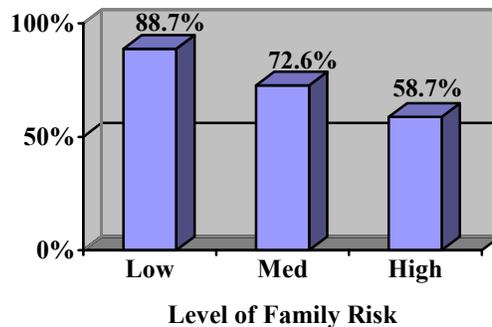


Children Ages 12-17 from Higher Risk Families Are More Likely to Have High Behavioral and Emotional Problems



Moreover, we find that children's levels of family risk affect the opportunities available to them, including their involvement in out-of-school-time activities and programs.

Children Ages 6-17 from Higher Risk Families Are Less Likely to Participate in One or More Out-of-School-Time Activities



In sum, while most children come from low-risk families, we see great diversity in family risks. Low-risk families generally can meet the needs of their children in their families, schools, and communities. As the number of family risks increases, the outcomes of children become less positive. The needs of children from higher risk families are greater, yet fewer of these children are in any kind of program. Importantly, given the more difficult circumstances and the problems experienced by children in higher risk families, it seems that they not only are more likely to need to be connected to some type of program, but they also are more likely to require a more intensive or longer-lasting program.

IMPLICATIONS FOR PROGRAMS

Developmental research indicates that all children, especially adolescents, benefit from positive and ongoing involvement with caring adults outside their family, as well as within their family. Moreover, practitioner experience and some research⁶ suggests that programs benefit from having a mix of participants, some of whom come from such low-risk families. Well-structured supportive programs for lower-risk children seem valuable, and the evidence indicates that most children from low-risk families are involved in out-of-school activities that can bring youth into contact with caring adults and provide both safety and skill-building opportunities.

The needs of medium-risk children are greater, yet the odds that they are in any kind of a program are lower, compared with low-risk children. This is the group for which, we believe, most out-of-school time programs are aiming. Since many are not participating, however, barriers to being involved or gaps in program availability, program recruitment, and retention, may need to be addressed.

Children from high-risk families are even less likely to be in any program. Moreover, even if a high-risk child or adolescent participates in an out-of-school time program, it is not clear that the typical program would have the resources or intensity to meet his or her needs. The needs of children from high-risk families seem to be quite significant and cross several developmental areas, including educational, psychological, and social functioning. As noted above, substantial proportions of children from high-risk families have high levels of problems. A program that meets monthly during the school year, for example, is unlikely to address problems at this level.

If the success of a typical program is being judged on whether or not the program can improve the life of a highly troubled adolescent, this seems like too high a standard for the program. More importantly, it seems too low a level of support for an adolescent from a high-risk family. While as yet we lack research to specify exactly how intensive or long-term such services might be, and they probably vary substantially even among adolescents from high-risk backgrounds, it seems reasonable to conclude that deeper, longer, more intensive and expensive programs are necessary for high-risk children and youth.

Note: The source for all graphs is Child Trends' analyses of the National Survey of America's Families

¹ Guzman, L., Lippman, L., Moore, K.A., & O'Hare, W. (2003). *How children are doing: The mismatch between public perception and statistical reality*. Washington DC: Child Trends.

² Public Agenda. (1999). *Kids these days '99: What Americans really think about the next generation*. New York: Author.

³ Barocas, R., Seifer, R., & Sameroff, A.J. (1985). Defining environmental risk: Multiple dimensions of psychological vulnerability. *American Journal of Community Psychology*, 12, 433-447. Deater-Deckard, K. & Dunn, J. (1999). Multiple risks and adjustment in young children growing up in different family settings: A British community study of stepparent, single mother, and nondivorced families. In M. Hetherington (Ed.), *Coping with Divorce, Single parenting, and Remarriages: A Risk and Resiliency Perspective*, (pp. 47-64). Mahwah, NJ: Erlbaum. Forehand, R., Biggar, H., & Kotchick, B.A. (1998). Cumulative risks across family stressors: Short- and long-term effects for adolescents. *Journal of Abnormal Child Psychology*, 26, 119-128. Ramey, C.T., Ramey S.L., & Lanzi, R.G. (1998). Differentiating risk levels for families in poverty: Creating a family typology. In M. Lewis & C. Feiring (Eds.), *Families, Risk, and Competence* (pp. 187-205). Mahwah, NJ: Erlbaum.

⁴ Moore, K.A., Vandivere, S., & Redd, Z. (2006). A sociodemographic risk index. *Social Indicators Research*, 75, 45-81.

⁵ Ibid.

⁶ Dodge, K.A., Dishion, T.J., & Lansford, J.E. (2006). Deviant peer influences in intervention and public policy for youth: Social policy report: giving child and youth development knowledge away. *Society for Research in Child Development*, 20(1).

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