

REPORT CARD 2012

KERN COUNTY NETWORK FOR CHILDREN

Celebrating 20 Years of Caring & Collaboration

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Report Card 2012. Bakersfield, California

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ACKNOWLEDGEMENTS

Celebrating 20 Years

Created in 1992, the Kern County Network for Children (KCNC) harnesses the power of community action in identifying and addressing the most critical children's issues in Kern County, including the prevention of child abuse and neglect.

KCNC programs and initiatives serve many functions to improve child safety outcomes for Kern County children and families and are carried out through the active involvement of government leaders, local community collaboratives, nonprofit agencies, organizations, businesses and private individuals.

We believe in:

- * Personal responsibility and family self-sufficiency as the cornerstones of resilient, stable communities;
- * Grassroots solutions to local problems;
- * Empowering local residents to address common concerns;
- * Locally-based, accessible services;
- * Program accountability and delivery of cost-effective services.

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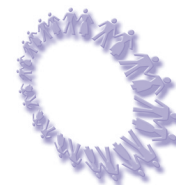
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The mission of the Kern County Network for Children is to protect and enrich the lives of children in Kern County through the commitment of all community partners by helping to build and sustain healthy families.

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WELCOME

As the Kern County Network for Children marks its 20th year in existence, we can see the progress made over the years as agencies and individuals have joined together to combat child abuse and improve the well being of children in Kern County. Despite the funding cuts of the past few years, we have a more integrated and effective system in place to support children and families than we did when the Network for Children began in 1992.

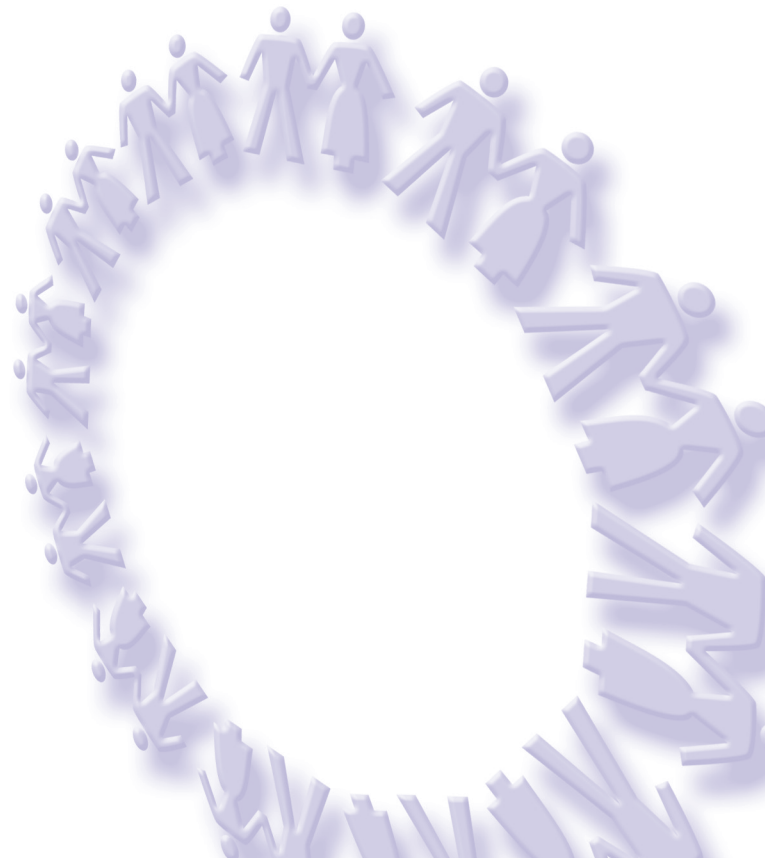
The 2012 Report Card provides clear data to demonstrate improvement in some of the key indicators of child well being. Rates of substantiated child abuse have declined, standardized test scores are increasing, fewer students are dropping out of school, the teen birth rate has declined and the number of children in foster care has decreased by 38% in the past eight years. Yet this progress is tempered by the stark reality that one out of every three children under the age of five live in poverty and 4,372 children were abused or neglected in Kern County in 2011.

A recurring theme in the Report Card this year is “it’s our responsibility.” No one personified this perspective better than long time Network for Children Board member Vernon Valenzuela. Vernon’s passion for improving the lives of children and veterans and his ability to break down bureaucratic barriers to get results is an inspiration for all of us. We need more leaders like Vernon to help insure we don’t become complacent as we continue our fight to improve the lives of children and families in Kern County over the next 20 years.

Sincerely,



Stephen M. Pelz,
KCNC Governing Board President





*“Let us put our minds together
and see what life we will
make for our children.”*
--Sitting Bull,
Lakota leader

Kern County is one of the youngest counties in California. The county’s child population in 2011 made up 30 percent of its total population, the third largest percentage in the state. In California, 25 percent of the population statewide were younger than 18 years old.

-- The California Department of Finance



COUNTY POPULATION



The 2010 Census counted 413,033 Latino residents in Kern County, making up 49% of the total population. The county's Latino population, which was 254,036 in 2000, grew 63% over the past decade. The Latino population also accounted for the vast majority of the county's growth—89%—from 2000 to 2010.

--US Census Bureau

Located in the southern Central Valley, Kern County is California's third-largest county in land area and covers 8,170 square miles of valley, mountains, and desert. According to the California Department of Finance, Kern County's population grew less than one percent between July 1, 2010 and July 1, 2011 to 848,553 residents, continuing the county's pattern of modest growth rates over the past few years. Kern County's current growth rate of 0.81 percent is a decrease over last year's growth of 1.28 percent. However, Kern County's rate of population growth continues to slightly outpace California, which grew at 0.7 percent overall from 2010 to 2011.

As in the last decade, natural increase remains the primary source of Kern County's growth. The natural increase of 9,245 in the past year is composed of roughly 14,428 births minus 5,183 deaths. This accounted for all of the 2010-11 fiscal year growth. Net outmigration reduced the population by 2,436 residents. During the fiscal year, Kern County gained about 2,037 new foreign immigrants and lost 4,473 domestic migrants to other states.

The chart below provides a breakdown of child population by age and ethnicity. This information is taken from the California Department of Finance's most recent population projections, which combine a base population from the 2010 Census with additional data based on birth/death rates, school enrollment, migration patterns, and other factors.

Kern County Child Population by Ethnicity & Age (2011)	African American	Caucasian	Latino	Asian/Pac Islander	Native American	Other	Total
Total Children (0-17)	12,950	67,551	156,463	8,317	1,431	7,369	254,081
Percentage of Total Children	5.1%	26.6%	61.6%	3.3%	0.6%	2.9%	100.0%
Under 1	706	3,616	9,289	416	67	507	14,601
1-2	1,450	7,150	18,707	827	119	930	29,183
3-5	2,132	10,906	27,421	1,223	197	1,283	43,162
6-10	3,385	17,762	42,535	2,300	364	1,924	68,270
11-15	3,638	19,414	41,430	2,507	471	1,912	69,372
16-17	1,639	8,703	17,081	1,044	213	813	29,493

FAMILY ECONOMICS

Economists mark December 2007 as when the United States economy entered into the worst recession since the Great Depression. The recession's impact in Kern County resulted in high rates of unemployment, bankruptcies and housing foreclosures. Economic recovery continues to be slow in Kern County placing more families and their children at risk of poverty, homelessness and hunger.

Families Raising Children

In 2010, 40 percent (102,961) of households in Kern County were families with children, compared to 33 percent across the state. Most of Kern's children lived in married couple families (63%), a total of 139,816 children.

Children growing up in single-parent households are more vulnerable to the negative impact of a struggling economy than children in married-couple families. In 2010, 80,645 Kern County children lived with just one parent (37% of the total child population). Children living in single parent homes were more likely to live with their mothers than with their fathers (73% versus 27%) in Kern County.

In 2010, 9,557 Kern County children lived in their grandparents' homes. This represents four percent of all children under age 18 in the county. About seven out of ten children living with their grandparents also lived with at least one of their

parents in the grandparents' home. Economists believe that difficult economic times, home foreclosures and unemployment have resulted in more families "doubling up" with family to save money or prevent homelessness.

The percentage of children being raised by immigrant parents is increasing in Kern County. In 2010, 104,438 children lived with either one or more parents who were foreign born. This number represented 43 percent of Kern County's 2010 children population, compared to 42 percent during 2009.

Income

The Census Bureau estimates the median income for Kern County families with children was \$43,499 in 2010. By comparison, the median income for families raising children in California was \$59,147 and \$57,085 nationwide. Kern County's median family income was 26.5 percent less than the state and 23.8 percent less than the nation.

Median income varies by type of family. The median family income for single fathers in Kern County in 2010 was higher than the median income for single mothers (\$26,811 versus \$20,528), but far lower than the income of a married-couple family with children (\$60,571).

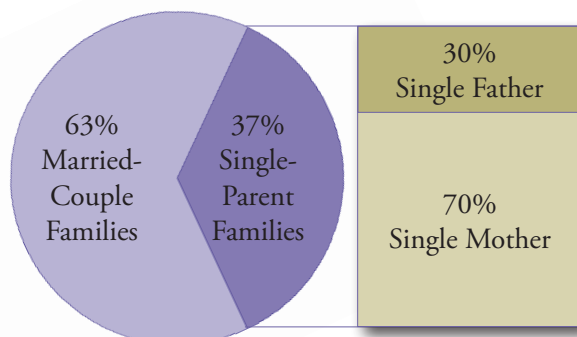
The per capita income figure is often used to measure the economic health of counties and other regions. It is calculated by dividing an area's total income by the number of residents. According to the American Community Survey, the Kern County per capita income was \$19,077 in 2010. By comparison, the per capita income in California was \$27,353 and in the nation was \$26,059 during the same year. Using the Census measure, Kern County's per capita income was 31.6 percent below the state and 26.8 percent less than the nation.



Since the 2000 Census, the types of families with children living at home have changed in Kern County. The percentage of children being raised by married couples has declined from 71% in 2000 to 63% in 2010.

-- US Census Bureau

FAMILIES WITH CHILDREN
KERN COUNTY, 2010



American Community Survey, 2010



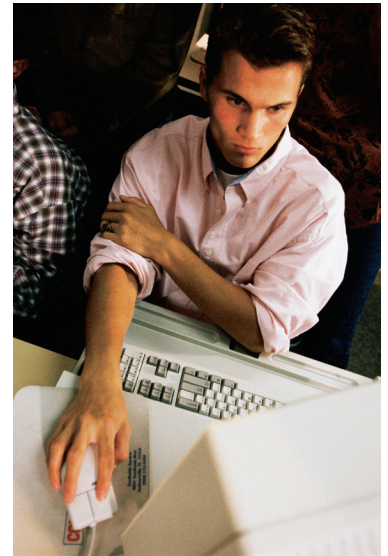
Employment

A community's unemployment rate is an important indicator in determining the health of its economy. From 2007 to 2010, Kern County's annual average unemployment rate has nearly doubled from 8.1 percent to 15.9 percent. However, the county's annual unemployment rate in 2011 declined slightly to 14.9 percent. In comparison, California's annual average unemployment rate was 11.7 percent and 8.9 percent for the nation. During 2011, an average of 382,000 Kern County residents were available for work. Of these residents, 56,900 were seeking employment.

Unemployment rates in Kern County fluctuate throughout the year, especially in regions with seasonal economies like agriculture. The county's highest monthly unemployment rates during 2011 occurred in January (17.0%), February (17.0%) and March (17.5%).

Many outlying communities have higher unemployment rates than Bakersfield, with some areas exceeding 30 percent unemployment rates. Arvin (37.2%), Delano (36.0%) and Onyx (35.4%) had the highest unemployment rates in the county in December 2011.

According to the American Community Survey, 35,442 children, 15 percent of Kern child population, lived with parents who were unemployed in 2010. California's rate of children with unemployed parents was nine percent. Unemployment places children at higher risk of poverty, homelessness, lower academic performance and child maltreatment, especially among single parent families who have fewer resources. In 2010, 29 percent of the children in single parent families were being raised by a parent who was not working.



The recession's impact on youth employment has been stark in Kern County. In 2010, 49% of youth between the ages of 16-24 were in the Kern County labor force. This is significantly lower than the 58% of youth who were employed three years ago.

-- US Census Bureau

Children in Poverty (0-17)	2008	2009	2010
Kern County	27.1%	30.3%	30.4%
California	18.1%	19.6%	21.6%

Children in Poverty (0-4)	2008	2009	2010
Kern County	32.1%	36.1%	34.5%
California	20.1%	22.0%	23.7%

All Families with Children Percent Living in Poverty	2008	2009	2010
Kern County	24.5%	25.2%	24.9%
California	14.7%	15.8%	17.6%

Children in Poverty (5-17)	2008	2009	2010
Kern County	25.0%	27.8%	28.7%
California	17.3%	18.5%	20.9%

Single Moms with Children Percent Living in Poverty	2008	2009	2010
Kern County	46.3%	47.5%	47.1%
California	32.0%	33.5%	35.4%

Students Enrolled in Free or Reduced Price Meal Program	2008-09	2009-10	2010-11
Kern County	63.8%	68.1%	69.2%
California	53.7%	55.9%	56.7%

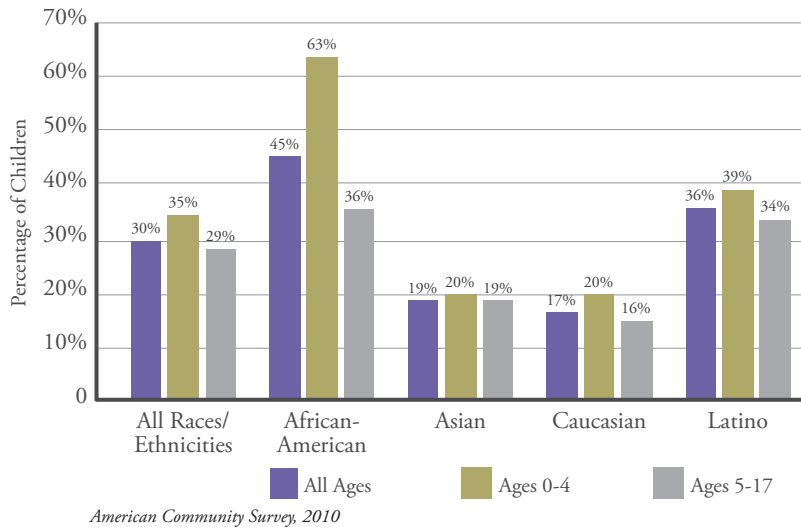
Poverty

Poverty can impede every aspect of child well-being including physical, social emotional health and ability to learn. For 2010, the federal poverty level was \$22,050 for a family of four. According to the 2010 Census, 76,408 children in Kern County (30% of all children) lived in families with incomes below the federal poverty line, an increase of 1,332 children from the previous year. By comparison, 22 percent of children in California lived in poverty during the past year.

In Kern County, one out of every four families were raising their children with incomes below the poverty line in 2010. Children raised in single parent families were most likely to be poor in Kern County. The poverty rates for children living in single father and single mother households were 40 percent and 57 percent, respectively, compared to 16 percent of children in married-couple families.

Educational attainment is an important factor in rates of poverty. Among families whose householder had less than a high school diploma, 33 percent lived in poverty during 2010. Of those families whose householder had a high school diploma, the rate of poverty dropped to 18 percent. For those families with householders having at least a bachelor's degree, the poverty rate fell dramatically to two percent.

Child Poverty Rates by Race/Ethnicity & Age Kern County, 2010



Child Support

Child support can have significant impacts on the life of a child. It has been documented in studies that the increased financial stability that comes along with child support, positively affects children's educational achievement and self-esteem. According to a study conducted by Michigan State University, nationally, child support makes up 16 percent of family incomes for households that receive

it and families receive an average of \$4,294.

With a fundamental philosophy that "Kids Come First", the Kern County Department of Child Support Services established child and medical support orders on 86 percent of open cases over the past FFY 2010-2011. In addition, the Department collected and distributed over \$71 million dollars in child support payments to children and families in Kern County representing 68,000 children. To compliment these efforts, KCDSS is responsible for establishing and enforcing the health insurance needs for every child.

The Kern County Department of Child Support Services continues to be committed to promoting the well-being of children and the self-sufficiency of families by assisting both parents to meet the financial and medical needs of their children through the delivery of quality child support establishment, collection, and distribution services.



Young Children in Poverty

The most sensitive time for a child's health and development is before the age of five making very young children especially vulnerable to the effects of poverty. According to U.S. Census Bureau, 35 percent of Kern County's children less than five years old (25,061 children) lived in poverty during 2010. Kern's poverty rate among its youngest children declined slightly from the previous year, but continues to be higher than the 29 percent poverty rate just three years before. This means 5,131 more young children have lived in poverty since the 2008 financial crisis began.

Poverty rates among young children were highest among African-American children. In 2010, six out of every ten African-American children under the age of five lived in poverty (63%). During the same year, the poverty rate among young Latino children was 39 percent compared to 20 percent of Caucasian children and 20 percent of Asian children.

Comparing all families, young children being raised by single mothers were the most at risk of growing up in poverty in Kern County. The 2010 poverty rate for children under five years of age being raised by single mothers was 68 percent compared

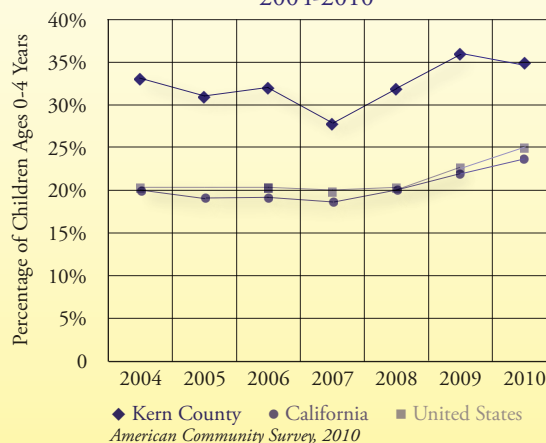
to 29 percent of young children in single father homes and 19 percent in married-couple families.

The effects of the county's economic decline will have a variety of negative impacts on all Kern County children. However, child advocates believe younger children are more likely than older children to have health, social and emotional difficulties and perform poorly in school as they grow up in poverty. With continued investment in prevention programs and support for families within the community, many of the negative impacts can be mitigated.

What Can We Do About Young Children Living In Poverty

- Support your local food bank or church food pantry.
- Donate items to a Family Resource Center in your community.
- Encourage help. If you know a family that is experiencing stress and in need of food, financial aid, utility assistance, housing, clothing, etc., encourage them to call 2-1-1, Kern's comprehensive information and referral service, so they can be linked with helping agencies.

Young Child Poverty Rates
Kern County, California & United States
2004-2010



Housing

Families paying more than 30 percent of their gross income for housing are cost burdened and often have difficulty meeting other important financial obligations. In 2010, 57 percent of renting households spent 30 percent or more of their household income on rent, a rate equal to the state's figure. The 2012 Fair Market Rent for a two-bedroom apartment in Kern County is \$793 a month. The National Low Income Housing Coalition calculates a housing wage, which is the amount a household must earn to afford a two-bedroom unit. For 2012, the monthly housing wage is \$2,643; the full-time hourly housing wage is \$15.25. Kern County's housing wage represents 191 percent of the current minimum wage.

According to the 2010 Census, there were 107,754 housing units in Kern County with a mortgage. The median monthly mortgage was \$1,482 in 2010. In recent years, the combination of overbuilding, the subprime mortgage crisis, and high unemployment rates has resulted in Kern County having some of the highest rates of foreclosure (i.e., loss to lender) in the country.

The loss of a home from foreclosure is especially disruptive for families with children. The Census Bureau estimates that 49 percent of all owner-occupied housing units have children living in the home. The financial and residential instability produced by a home foreclosure can affect a child's educational progress and emotional development. In February 2012, one in every 232 housing units in Kern County received a foreclosure notice, a total of 1,224 properties. In comparison, the foreclosure rate is one in every 283 housing units in California and one in every 637 housing units nationwide.

Food Security

As defined by the U.S. Department of Agriculture (USDA), food security for a household means all family members at all times have access to enough food for an active, healthy lifestyle. Several food and nutrition assistance programs are in place to help low-income families and their children avoid hunger and poor nutrition.

CalFresh Program Participation (Formerly Food Stamps)

The CalFresh Program, formerly known as Food Stamps, provides monthly electronic benefits to increase the food budgets to eligible low-income households so that they are able to purchase healthy and nutritious food. In December 2011, 54,637 households in Kern County participated in CalFresh, which is administered locally by the Kern County Department of Human Services. Since the recession began in late 2007, the number of Kern County households participating in this food assistance program has increased 77 percent, a total of 23,851 more households.



A renter in Kern County earning minimum wage must work 76 hours per week to afford a two-bedroom rental unit at Fair Market Rent.

-- National Low Income Housing Coalition

Women, Infants & Children (WIC)

Pregnant women who do not have enough to eat during pregnancy are more likely to have pregnancy complications and deliver low birth weight babies. According to the 2010 Maternal and Infant Health Assessment survey, one out of four Kern County mothers who gave birth reported they experienced food insecurity during their pregnancies.

WIC is a federally-funded health and nutrition program for low-income (up to 185% of the federal poverty level) pregnant, breastfeeding, and postpartum women and their children under age five. WIC provides vouchers for specific nutritious foods, counseling, nutrition education, breastfeeding support and referrals to other needed services. In November 2009, 53,975 participants in Kern County received WIC services administered by Community Action Partnership of Kern and Clinica Sierra Vista. The California Department of Health Services estimates that 89 percent of Kern County's eligible women, infants and young children were enrolled in the WIC program, a figure higher than the state rate of 82 percent. In 2009, there were 181 WIC-authorized stores throughout Kern County, a rate of 0.22 WIC-authorized stores per 1,000 population.



The Summer Food Service Program (SFSP) ensures that children in lower-income areas can continue to receive nutritious meals during long school vacations, when they do not have access to school lunch or breakfast. In the summer of 2010, 6,773 Kern County children received summer meals, ranking the county 7th in SFSP participation in the state.

-- California Food Policy Advocates

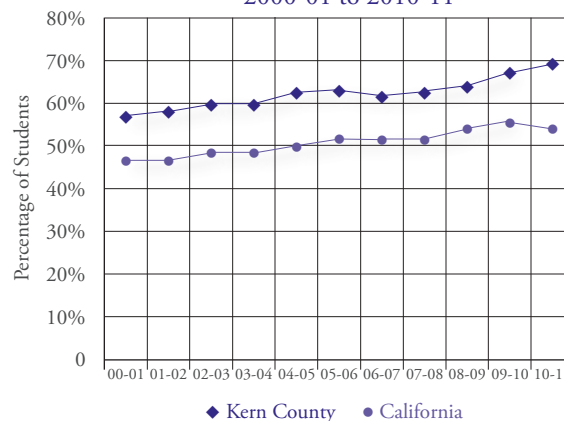
Free & Reduced School Meals

The National School Lunch Program is a federal meal program that assists schools in providing nutritionally balanced, low-cost or free breakfasts and lunches to students from income-eligible families. More than half of California students were enrolled in the school meal program (57%) during the 2010-11 school year. School meal programs are important social safety nets in communities with high rates of poverty and unemployment. According to research, free/reduced meals at schools improve the academic performance, nutrition, health and food security status of low-income children.

In Kern County, the free/reduced meal enrollment reached its highest level in the 2010-11 school year with about seven out of ten K-12 public school students participating in the program (69%). The percentage of students enrolled ranged from 20 percent to 100 percent in Kern County school districts. Kern County students were more likely to receive free meals (89%) than reduced price meals (11%).

Over the past decade, the enrollment of students in their school's free/reduced meal programs has steadily increased in Kern County. The total number of students participating in the free/reduced meals program has grown 39 percent from 85,659 in 2000-01 to 119,244 in 2010-11.

Free/Reduced Meal Enrollment
Kern County & California
2000-01 to 2010-11



California Department of Education

EARLY CARE & EDUCATION

In good and bad economic times, the need for quality child care remains constant. Studies show that the quality of child care and early education programs is linked to improved language, academic skills and social development when children enter school. As they look for less costly child care options, some parents may choose an unlicensed provider such as a friend, family member or neighbor over a more structured setting. These caregivers are not required to meet state health and safety regulations and may lack experience in child development. Families may also string together multiple child care arrangements to allow them to work or attend school.

According to child care advocates, quality child care is more important than ever as the economy slowly recovers. A safe, reliable and nurturing child care environment assists families so they can work or go to school and supports the healthy development of young children with nutritious meals, school readiness and social skills.

Child Care Supply & Demand

Child care is an essential work support for families. In 2010, an estimated 110,395 children under the age of 13 in Kern County were in need of some kind of care--whether for part or all of the day--while their parents worked. This number represents 61 percent of Kern's child population between the ages of 0 to 12 years.

A total of 841 licensed family child care providers and 194 licensed child care centers/half-day child development programs are located throughout Kern County. There are also 148 programs with a capacity to supervise 13,283 school-age children before and after school. Combined, these providers and programs have the capacity to serve less than one-third of Kern's estimated child care need (31%).*

For more than a decade, family child care homes have filled important gaps in child care services throughout Kern County, especially for those parents who have infants, live in outlying communities or work nontraditional hours.



Licensed care and school age programs in Kern County are available for only 31% of children with working parents compared to 34% in the previous year. This decline means parents heading back to work as the economy recovers will have difficulty finding care that best fits the needs of their families.

-- Community Connection for Child Care

Kern County Child Care Supply By Provider/Setting & Spaces (March, 2012)	Number of Providers/Settings	Percentage of Total Providers/Settings	Number of Spaces	Percentage of Total Spaces	Average Number of Spaces Per Provider/Setting
Family Child Care Homes	841	71%	8,612	25%	10.2
Licensed Child Care Centers/ Half-Day Enrichment Programs	194	16%	12,638	37%	65.1
License-Exempt Programs (School-Age: 6 years and up)	148	13%	13,283	38%	89.8
Total*	1,183	100%	34,533	100%	28.4

From 2006 to 2007, an expanding economy increased the number of family child care homes to its peak with 1,138 caregivers who were able to serve nearly 10,900 children in their homes. As of March of 2012, there were 297 fewer family child care homes which translates in a loss of child care slots for 2,288 infants, preschoolers and children in Kern County over the last five years.

**Footnote: Kern County's reported capacity does not include license-exempt care provided by relatives, friends, neighbors, and nannies. This type of care is not required to meet the State's child care licensing requirements and the extent to which families choose license-exempt care is unknown.*

Cost of Early Care & Education

The U.S. Department of Health and Human Services recommends that parents should not spend more than 10 percent of their family income on child care. However, to purchase child care for an infant and a four-year old in a Kern County child care center, a family would have to spend 41 percent of their median annual income for child care.

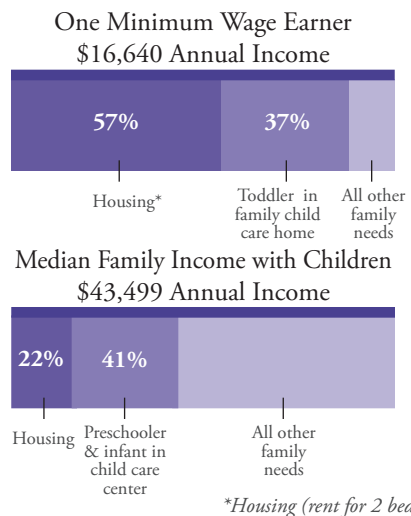
Currently, the average annual cost of full-time care for an infant or toddler in Kern County is \$10,598 in a licensed center and \$6,185 in a family child care home. The cost of care for a preschooler is \$7,274 for a center and \$5,979 in a family child care home.

Child care is unaffordable for many Kern County families. In each county, a Centralized Eligibility List (CEL)

program provides low-income families with financial assistance to help them access child care and child development programs. In the spring of 2011, there were 2,717 families waiting to enroll 4,220 children in subsidized child care or child development programs through the Kern County CEL.

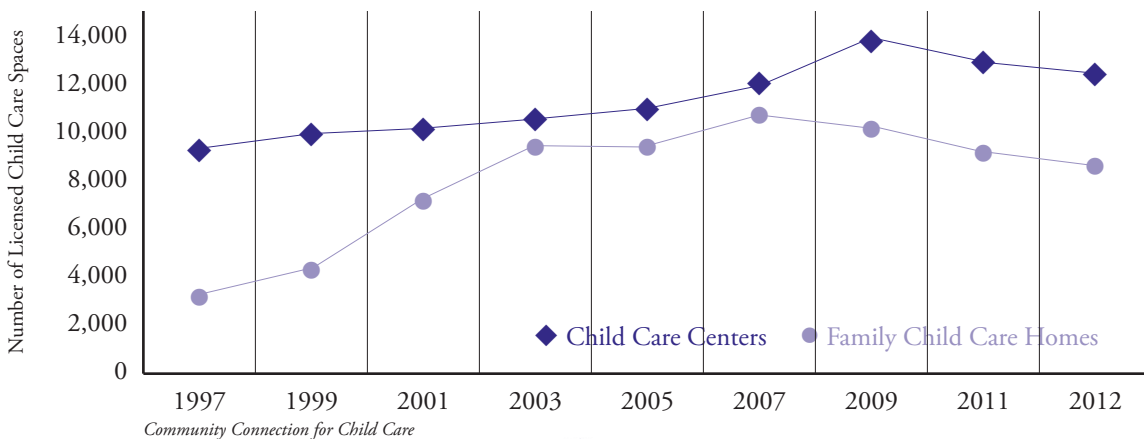
The majority of these families need financial assistance with child care in order to work (71%) and 68 percent of the children required full time care. Unfortunately, limited funding offers very few subsidized slots to meet this need, and even fewer opportunities for children less than two years of age.

Child Care & Family Budgets



Licensed Child Care Capacity

Kern County, 1997-2012

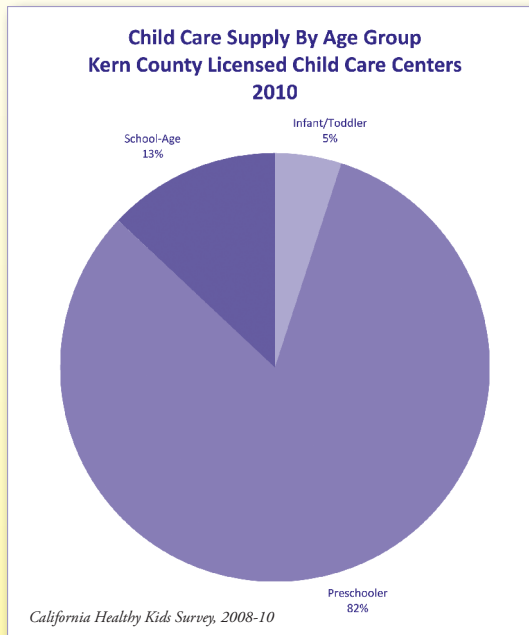




Ninety percent of a child's brain development occurs during his/her first three years, making quality child care in the early years critical to a child's well-being. However, choices for licensed child care for infants are in short supply across Kern County.

Parents who cannot either find or afford licensed child care for their infants or toddlers must rely on poorer quality child care settings during these valuable developmental years. These caregivers may not be able to provide the nurturing and support that these very young children need to thrive and be safe.

From 2000 to 2010, the population for children under age two years increased by 32 percent, a higher rate of growth than Kern's child population overall during the same time period. Further, the 2011 Child Care Portfolio shows that while 33 percent of requests for provider referrals were from parents seeking infant/toddler care, but only 5 percent of licensed center slots in Kern County were specifically for children under age 2.



What Can We Do About Quality Child Care for Infants and Toddlers

- Contact Community Connection for Child Care (CCCC) for names of licensed family providers, center programs, and other helpful quality care information.
- Visit at least three caregivers or child care programs and be prepared to spend some time to observe caregivers interacting with children during the day -at least an hour or longer.
- Ask questions about issues that are important to you. For example: How do you feel about children who

In general, the younger the child, the more expensive the child care. Quality infant/toddler care requires a lower provider-to-child ratio, smaller group sizes, special equipment and additional health and safety regulations. Current statistics show the average annual cost of full-time care for an infant or toddler in a Kern County center is \$10,598. In a family child care home, a year of care for an infant or toddler averages \$6,185. From 2008 to 2011, the cost for infant/toddler child care in centers and family child care homes has increased 13 percent and 3 percent, respectively.

cry a lot? Find out how they handle the situation. CCCC can give you list of questions to get you started.

Affordable licensed infant/toddler care is even harder for low-income families to find. For example, a parent of an infant or toddler who makes a minimum wage would spend 64 percent of his/her annual income on care in a child care center or 37 percent of their income on care in a family child care home.

- Caregivers need to upgrade their skills through continuing education. Ask caregivers how often they attend workshops or training in 0-3 child development.
- Continually monitor your child care situation and express concerns to your caregiver. If you believe that your child care arrangement is not safe, take immediate action.

K-12 EDUCATION

California's economic decline that began in 2008 has had an especially strong impact on Kern County's teachers and students. Kern's 48 public school districts have seen their tax bases over the past four years diminish. To close budget shortfalls, districts have been forced to make deep reductions in personnel, education programs, and prevention/intervention services putting more Kern County students at risk of falling behind academically.

In the fall of 2010, 8,131 full-time-equivalent (FTE) elementary and secondary school teachers were engaged in classroom instruction, a total of 329 fewer teachers than before the 2008 financial crisis began. As a result, the number of Kern County students per teacher has risen from 20.7 to 22.8 between the 2008-09 and 2010-11 school years. California's ratio also increased to 23.2 students per teacher during the 2010-11 academic year.

Education advocates link smaller class size to improved academic achievement among students. In Kern County, the average class size for public schools ranged from a low of 3.2 students (Belridge Elementary) to a high of 37.0 students (Lost Hills Elementary) in the 2010-11 school year. Overall, Kern County averaged 22.6 students in each classroom, a figure lower than the state's average of 24.2 students.

K-12 Public School Enrollment

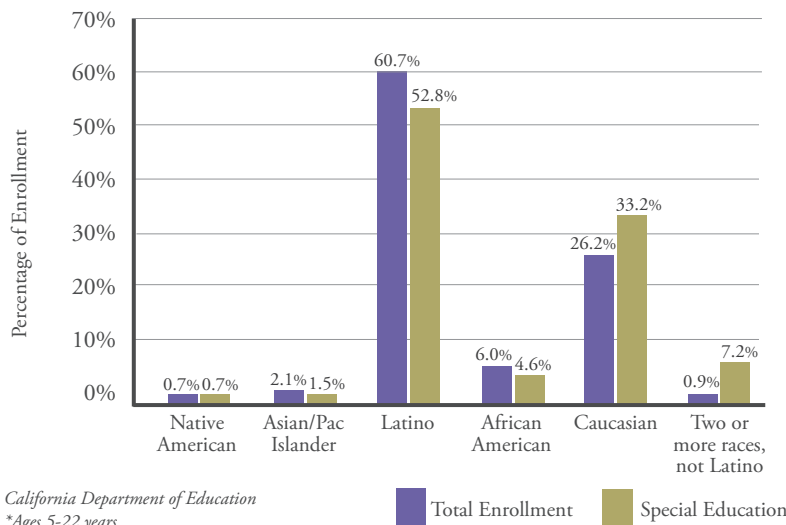
In the 2010-11 school year, 173,733 students were enrolled in the county's 267 public schools. Trends in student enrollment are critical when it comes to predicting local education funding. Throughout the previous decade, Kern County schools added an average of 3,500 students each year, culminating in a high of 174,180 students during the 2007-



Positive teacher-student relationships that convey high expectations help students become successful in school and later in life. Of the 5th grade students surveyed in Kern County, 79% believed there was a teacher or other adult who cared about them all or most of the time and 87% reported that there was a teacher or other adult who believed they could do a good job.

-- California Healthy Kids Survey, 2008-10

Total Enrollment & Special Education Enrollment* by Ethnicity Kern County, 2010-11



08 school year. However, for the third consecutive year, Kern County's total school enrollment experienced no growth during 2010-11 and, in fact, enrolled 366 fewer students than the previous year's count.

Kern schools are linguistically diverse, with 38 languages or dialects represented by students county-wide. During the 2010-11 academic year, 32,038 students (18% of total county enrollment) were English Learners. Most English Learner students were in the earlier grade levels, and nearly all spoke Spanish as their first language (95%).

Special Education

Kern County's Special Education system served 16,413 children and young adults from newborn to age 22 during the 2010-11 school year. Of these students, 14,141 children were between the ages of five and 17 and 856 young adult students continued to receive educational and transitional services from age 18 to 22. Overall, 9 percent of the total public school enrollment (age 5-22 years) were enrolled in special education services in 2010-11, compared to 11 percent statewide.

The most common disabilities among children and youth receiving special education services in Kern County public schools were learning disabilities (48%), speech or language impairments (22%), mental retardation (10%), autism (6%), health impairments (6%) and emotional disturbance (3%).

There were an additional 1,416 children under the age of five years old receiving special education services during the 2010-11 school year. Of these young children, 51 percent were receiving speech and language services, 15 percent had a developmental delay, 15 percent had a health impairment and 9 percent were diagnosed with an autism spectrum disorder.

The California Standards Tests (CST)

The Standardized Testing and Reporting Program (STAR) uses several tests to measure stu-

dent performance in California schools. The California Standards Tests (CST) are used to measure mastery of state-adopted standards.

Student achievement in Kern County public schools has steadily improved each year. While there has been overall progress in the percentage of students proficient and advanced, Kern County scores remain below California statewide rates and reveal achievement gaps within ethnic/racial, socioeconomic and specific educational groups.

3rd Grade Reading and Math

In Kern County, 37 percent of 3rd graders were proficient or above in English Language Arts and 60 percent were proficient or above in mathematics in the spring of 2011. Statewide, 46 percent of 3rd grade students were proficient or above in English Language Arts and 68 percent were proficient or above in mathematics.

7th Grade Reading and Math

For the 2010-11 school year, 47 percent of Kern County's 7th graders were proficient or above in English Language Arts and 42 percent were proficient or above in mathematics. Statewide, 57 percent of 7th grade students were proficient or above in English Language Arts and 50 percent were proficient or above in mathematics.

High School Exit Exam

The purpose of the California High School Exit Exam (CAHSEE) is to make sure that every California student that receives a high school diploma has a basic understanding of English-Language Arts and mathematics.

CAHSEE Exam data from the 2010-11 school year show that the majority of Kern County students pass the exam on their first opportunity in the tenth grade. Eighty percent of the Class of 2013 passed the English Language Arts portion and 80 percent passed the exam's mathematics section. Statewide, 82 percent of California's 10th graders tested passed the English Language Arts



Truancy is a risk factor for school dropout and for delinquent behavior, including substance abuse, gang involvement, and criminal activity. During the 2010-11 school year, one-third of Kern County's K-12 public school students were considered truant—an average of 311 students each school day.

-- California Department of Education

California

3rd Grade Test Scores (CST) Percent "Proficient" or Above	08-09	09-10	10-11
Reading	44%	44%	46%
Mathematics	64%	65%	68%

7th Grade Test Scores (CST) Percent "Proficient" or Above	08-09	09-10	10-11
Reading	54%	55%	57%
Mathematics	43%	49%	50%

Out-of-School Youth Percent of youth ages 16-19 not in school and without high school diploma	2008	2009	2010
American Community Survey, US Census	3.9%	3.5%	5.3%

Graduation Rates	07-08	08-09	09-10
National Center for Educational Statistics formula	80.2%	78.6%	80.5%

College Prepared Youth	07-08	08-09	09-10
% Grads w/ CSU/UC Require	33.9%	35.3%	35.6%
% 12th Graders Taking SAT	35.9%	34.7%	33.4%

Community Education Levels Percent of all adults 25 and older without at least high school diploma	2008	2009	2010
American Community Survey, US Census	19.8%	19.4%	19.3%

Kern County

3rd Grade Test Scores (CST) Percent "Proficient" or Above	08-09	09-10	10-11
Reading	34%	34%	37%
Mathematics	55%	57%	60%

7th Grade Test Scores (CST) Percent "Proficient" or Above	08-09	09-10	10-11
Reading	44%	45%	47%
Mathematics	36%	42%	42%

Out-of-School Youth Percent of youth ages 16-19 not in school and without high school diploma	2008	2009	2010
American Community Survey, US Census	7.7%	6.1%	7.8%

Graduation Rates	07-08	08-09	09-10
National Center for Educational Statistics formula	73.5%	72.9%	79.4%

College Prepared Youth	07-08	08-09	09-10
% Grads w/ CSU/UC Require	25.1%	27.2%	26.1%
% 12th Graders Taking SAT	22.5%	21.6%	20.4%

Community Education Levels Percent of all adults 25 and older without at least high school diploma	2008	2009	2010
American Community Survey, US Census	29.8%	28.5%	28.9%

portion and 83 percent passed the exam's section on mathematics.

College Preparation

One of the goals of Kern County's public education system is to help students access higher education and succeed in college. The Advanced Placement Program (AP) allows high school students to participate in a college level course and possibly earn college credit before they graduate high school. Secondary schools and colleges participate in this program to give students the opportunity to show mastery in college-level courses by taking the AP exam in May of each school year.

During the 2010-11 school year, Kern County high schools offered 285 AP courses. In May of 2010, 51 percent of the 4,011 Kern County high school students who took AP examinations scored a 3 or higher -- the score typically needed to earn college credit for the course -- on AP exams. Statewide, 58 percent of California's students taking the AP test scored well enough on the exams to earn college credit.

In California, students are believed to be fully prepared for a four-year college when they have completed all of the "A-G" class requirements for entering the California State University (CSU)/ University of California (UC) system with a grade of "C" or better. In the 2009-10 school year, 26 percent of Kern County students graduated with all "A-G" classes completed, a figure slightly lower than the previous school year's rate of 27 percent. At the same time, 36 percent of seniors statewide completed these requirements.

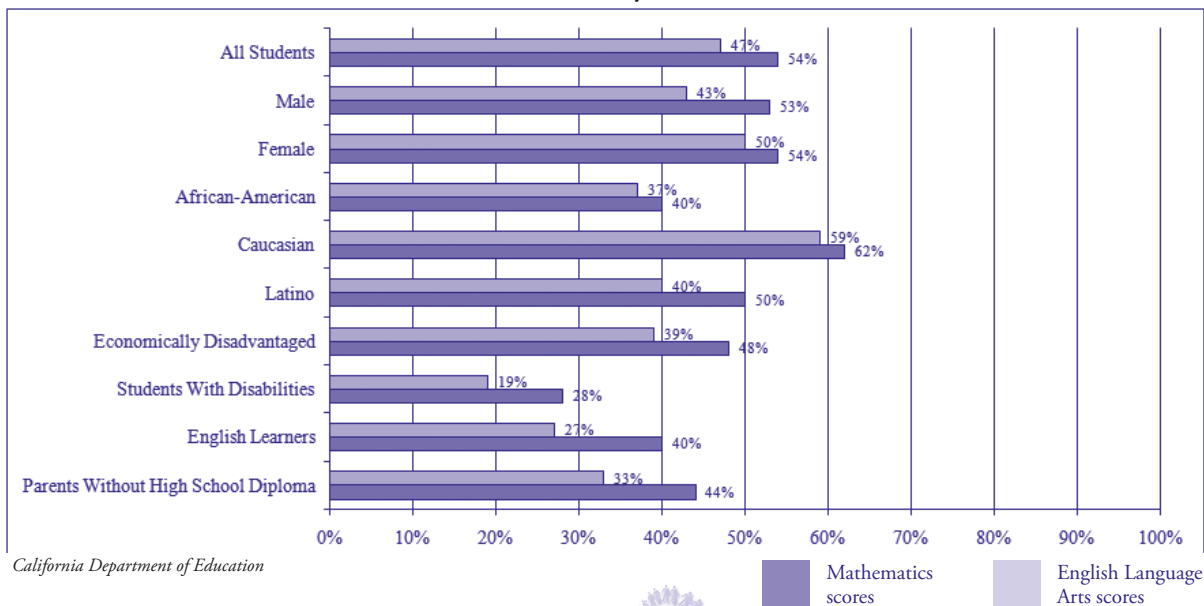
In Kern County, female graduates (31%) had a much higher likelihood of graduating with CSU and UC college prep classes than male graduates (21%) during the 2009-10 school year. Asian/Pacific Islander (50%), Filipino (50%) and Caucasian (32%) graduates exceeded the County's A-G requirement completion rate. In contrast, Native American (23%), African-American (22%) and Latino (21%) graduates each had a completion rate lower than the Kern's overall rate.



A family's ability to send their children to college has been hampered by the poor economy. From 2008 to 2009, the rate of public high school students from Kern County attending any California public college or university plummeted from 44% to 33%.

-- California Postsecondary Education Commission

Students (Grades 2-7) Scoring Proficient or Higher on English Language Arts & Mathematics CST
Kern County, 2011



California Department of Education



Most college bound students take the SAT college admissions exam, now called SAT Reasoning Test. The SAT contains three sections with scores of 200 to 800 for a maximum score of 2,400.

During the 2009-10 school year, 20 percent of Kern's 12th graders took the SAT exam, compared to 33 percent of 12th graders statewide. Kern County students averaged 491 in Math, 470 in Writing and 478 in Critical Reading. Kern's average scores were below California's scores of 520 in Math, 500 in Writing and 501 in Critical Reading.

Graduation

Few would debate the importance of graduating high school. A high school diploma can be the gateway to a postsecondary education and better employment opportunities. High school graduation rates can also measure the health of a community's economy and the skill level of its future workforce.

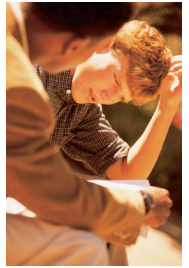
In Kern County, 10,850 students met the requirements to graduate for the 2009-10 school year, a

rate of 79.4 per 100 students. Kern County's high school graduation rate increased from the previous year's rate of 72.9, but remains lower than California's graduation rate of 80.5 per 100 students.

High School Dropout Rates

High dropout rates impact the economy and public safety of a community. In 2010, an estimated 29 percent of Kern County's residents (age 25 and older) did not have a high school diploma or GED. Kern's percentage of adults with low educational attainment is 10 percentage points higher than California and 14 percentage points higher than the nation.

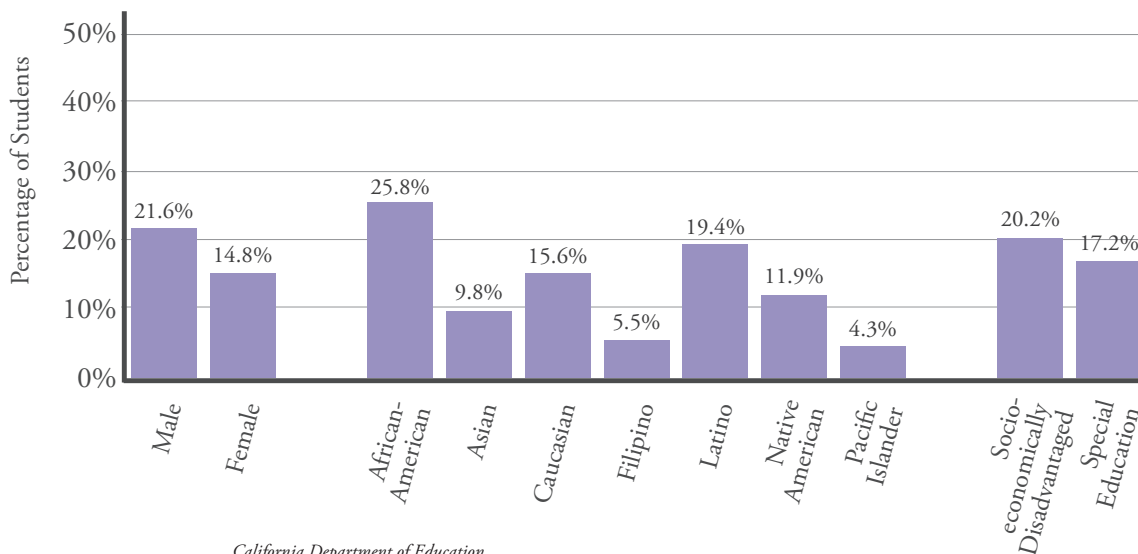
During the 2009-10 school year, 2,668 students, or 18.3 percent of the students in grades 9 through 12, dropped out of Kern County high schools. This figure is a dramatic improvement from the previous year's rate of 25.9 percent and moves Kern County's drop out rate closer to the state rate of 17.4 percent.



Kern County residents who did not complete high school earned a median annual income of \$16,146 in 2010. By comparison, the median income of those who completed high school (including GED) was \$25,829 and those with a bachelor's degree was \$56,987.

-- American Community Survey, 2010

High School Dropout Rates Kern County, 2009-10



California Department of Education



The California Department of Education defines “bullying” as aggressive behavior repeated over time that intends to harm or distress an individual or group. Bullying involves either a real or perceived imbalance of power, with the more powerful child or group attacking those who are less powerful. Bullying may be physical

(hitting, kicking, spitting, pushing), verbal (taunting, teasing, racial slurs, verbal harassment), or emotional (spreading rumors, purposely excluding someone from a group or activity, extorting, or intimidating). With more youth accessing the Internet and cell phones, bullies can now spread rumors, harass, threatened or stalk their targets at all times of the day.

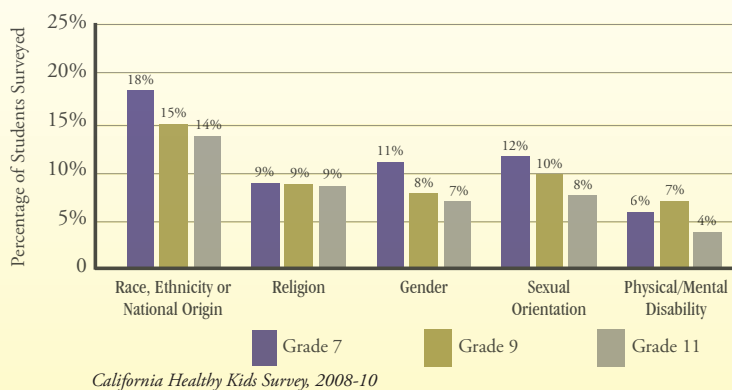
According to the 2008-10 California Healthy Kids Survey, 35 percent of Kern County’s students in grades 5, 7, 9 and 11 reported they were pushed, hit or kicked in the past year by someone at school who was not just kidding around. In addition, 48 percent of these students have had mean rumors or lies about themselves spread by other students at their schools.

Survey data show physical bullying and harassment are greater problems in the elementary and junior high years, and decrease as students move into high school. Nearly half of 5th and 7th graders reported being physically bullied (45%) and had rumors/lies told about them (48%) at least one time at school.

Older students were more often bullied through rumor-spreading than physically bullied in school. More than one-third of 9th and

11th graders reported having mean rumors and lies told about them (38%). In comparison, 31 percent of 9th graders and 21 percent of 11th graders reported being pushed, hit, or kicked in the past year by someone at school.

Reason For Bullying/Harassment by Grade Level Kern County, 2008-10



Bullying has severe academic, health and safety consequences for students. Not only does it harm victims, bullying also creates a climate of violence and intimidation within the school. Overall, fewer than one quarter of surveyed 5th, 7th, 9th and 11th graders reported feeling very safe at school at all

times (19%).

What Can We Do About Bullying

- Know the school policies on bullying. Ask for a copy or check the student handbook to see whether your school has standards in place that will help resolve the situation.
- Help your child understand bullying. Explain what bullying is. It is more than physical; it can be done in person or over the phone or computer.
- Teach your child to take a stand against bullying. Give guidance about how to stand up to those who bully if it is safe to do so.
- Talk to your child about seeking help from a trusted adult when feeling threatened by a bully. Talk about whom they should go to for help and role-play what they should say. Assure your child that they should not be afraid to tell an adult when someone they know is being bullied.

CHILD & ADOLESCENT HEALTH

In comparison to other California counties, Kern County ranks near or at the bottom of several health indicators. Kern currently leads all other counties in the rates of births to teen mothers and cases of Chlamydia in addition to deaths from coronary heart disease and chronic lower respiratory disease.

As Kern County slowly recovers from the worst economic crisis in 70 years, budget cuts have either threatened or severely limited the community's ability to provide primary and/or preventive health care services for its residents. This affects a wide range of services including chronic disease and injury prevention, health education and teen pregnancy prevention programs.

Advocates from the health and social services fields are concerned that Kern County's low-income families, young children and the uninsured will move from preventive care to acute care which will lead to increased illness and preventable deaths.

Prenatal Care

Adequate and accessible prenatal health care is vital to the well being of both mother and baby. According to the California Department of Public Health, the percentage of pregnant mothers in Kern County who obtained prenatal care services during the first trimester of their pregnancies decreased between 2009 and 2010, from 72.2 percent to 71.3 percent. In California, 81.7 percent of mothers received care during their first trimester during 2010.

In Kern County, Caucasian babies (75.9%) were most likely to have mothers who received prenatal care in the first trimester, followed by Asian (73.6%) and Native American (63.9%) babies. In contrast, Pacific Islander (66.7%), Latina (69.5%) and African-American (65.5%) women were least likely to receive prenatal care during their first three months of pregnancy.

Prematurity & Low Birthweight

During 2010, 14,416 babies were born in Kern County. Babies born too soon or too small are at greater risk of disability and dying during infancy. From 2008 to 2009, the percent of babies born prior to 37 weeks declined from 13.9 percent to 13.5 percent. By comparison, 10.4 percent of California's babies were premature during 2009.

Newborns have a low birthweight when they weigh less than 5.5 pounds (2,500 grams). These infants have increased risk of health complications. In 2010, the percentage of low birthweight babies declined slightly to 7.0 percent of all live births. In California, 6.8 percent of babies were born with a low birthweight.

African-American infants are more likely to weigh less than 5.5 pounds at birth than babies of other major race and ethnic group. In 2010, 15.0 percent of African-American infants were born with a low birthweight, compared with 8.3 percent of Native Americans, 7.2 percent of Asian/Pacific Islanders, 6.4 percent of Latinos and 6.4 percent of Caucasians.



Postpartum depression, or PPD, is a type of depression that affects women within a year after they give birth causing them to have difficulty bonding with their babies. A woman can have PPD regardless of income, age, race or ethnicity, culture or education. The 2010 Maternal and Infant Health Assessment showed Kern County had one of the highest rates of reported PPD in the state with 18% of respondents admitted they experienced PPD symptoms.

-- California Department
of Public Health



Sleep-Related Infant Deaths

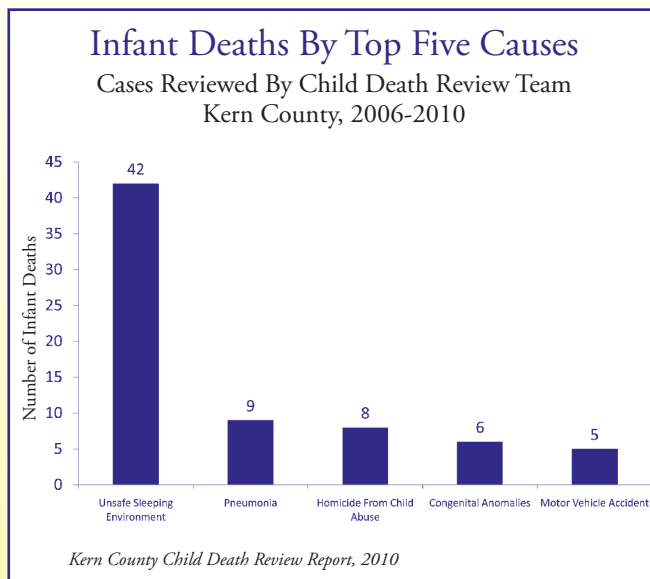
Sleep-related deaths include Sudden Infant Death Syndrome (SIDS), unintentional suffocation in bed and those in which the cause was “undetermined” but investigations found that the infant died during sleep.

Infants who sleep in the same bed as an adult are more likely to suffer injury, even death when a person who is sleeping with a child rolls onto the child and unintentionally smothers the child. Some parents choose to co-sleep with their babies, because of cultural or social conventions. Poverty, limited education, lack of prenatal care and substance abuse also place infants at risk of unsafe sleep environments.

Unintentional suffocation occurs when an infant cannot move out of a sleeping position in which his/her mouth and nose is blocked, or where his/her chest may be unable to fully expand, and suffocates. Positional asphyxia differs from SIDS, the unexpected, sudden death of a child under a year of age. Almost all SIDS deaths occur without any warning or symptoms when the infant is thought to be sleeping.

Deaths linked to an unsafe sleeping environment was the leading cause of infant death in cases reviewed by the Kern County Child Death Review Team. From 2006 through 2010, the Child Death Review Team reviewed the reports of 44 infants who died in their sleep, representing 48 percent of deaths among infants ages birth through one year with a determined cause. Of these, two infant deaths were diagnosed as SIDS (4%). The remaining 42 infant deaths were linked to unintentional suffocation and

“undetermined” causes from unsafe sleeping environments. The majority of these deaths occurred between the years of 2009 and 2010 when 28 babies died in their sleep.



What Can We Do About Sleep-Related Infant Deaths

- When shopping in stores with crib displays that show heavy quilts, pillows, and stuffed animals, talk to the manager about safe sleep, and ask them not to display cribs in this way.
- Set a good example – realize that you may not have slept on your back as a baby, but we now know that this is the safest way for babies to sleep. When placing babies to sleep, be sure to always place them on

their backs.

- Monitor the media. When you see an ad or a picture in the paper that shows a baby sleeping on her tummy, write a letter to the editor.
- If you know teenagers who take care of babies, talk with them. They may need help with following the proper safe sleep practices.
- Make sure whoever takes care of your baby has a crib or portable crib for your baby to sleep. Talk to grandparents, babysitters, child care, neighbors and anyone who cares for your baby about the safest way for your baby to sleep.

Safely Surrendered Babies

California's Safely Surrendered Baby Law was enacted in 2001 in response to the increasing number of abandoned baby deaths in California. The law allows distressed birth parents to confidentially surrender their baby (up to 3 days old) into the hands of any Emergency Room staff or Fire Station personnel without fear of arrest for abandonment. Since 2006, a total of 26 newborns in Kern County have been delivered to a "safe surrender site."

Infant Death

In 2009, the most recent year data is available, 100 Kern County babies died before their first birthday. The three-year (2007-2009) average mortality rate for infants in Kern County was 7.2 per 1,000 live births. Kern's figure was higher than the rate for California (5.2 per 1,000). African-American infants die more frequently than those of any other race/ethnicity. In Kern County, the three-year (2007-2009) average mortality rate for African-American infants was 14.7* per 1,000 live births.

**Unreliable, relative standard error greater than or equal to 23 percent.*

Breastfeeding

The Centers for Disease Control and Prevention promotes breastfeeding as one of the most highly effective preventive measures a mother can take to protect the health of her infant and herself. In California, 90.8 percent of mothers breastfed in the hospital after giving birth and 56.8 percent of mothers breastfed exclusively after giving birth during 2010. In comparison, 84.2 percent of Kern County mothers breastfed in the hospital after giving birth, while only 37.7 percent of mothers breastfed exclusively after giving birth.

Similar to statewide trends, Caucasian mothers were more likely to breastfeed exclusively than other racial/ethnic groups (58.9%) in Kern County. African American and Latina mothers were half as likely as Caucasian mothers to breastfeed their newborns exclusively after giving birth, 23.6 percent and 28.7 percent, respectively.

Immunizations

Vaccination coverage in California is at or near all-time high levels. California's goal for the year 2010 is 90 percent coverage for all individual vaccines. The Immunization Branch, local health departments, and physicians are working together to get more children vaccinated in time and to protect them from vaccine-preventable disease such as hepatitis, polio, measles, tetanus and pertussis (whooping cough). The California Department of Health Services conducts an immunization assessment of enrolling Kindergartners to monitor compliance with California's School Immunization Law. In 2010, 91.7 percent of Kern County children enrolling in Kindergarten had all required immunizations. California's rate for the same year was 90.8 percent.



The Back to Sleep campaign began in 1994 as a way to educate parents, caregivers, and health care providers that babies who sleep on their stomachs are much more likely to die of accidental suffocation or Sudden Infant Death Syndrome (SIDS) than babies who sleep on their backs. According to the Maternal and Infant Health Assessment Survey, 73% of Kern County mothers with babies born during 2010 reported that they place their babies down to sleep on their backs most of the time.

-- California Department
of Public Health

Late or No Prenatal Care (Percentage of live births)	2008	2009	2010
Kern County	6.3%	5.4%	5.6%
California	3.2%	3.2%	3.1%

Low Birth Weight Births (Percentage of live births)	2008	2009	2010
Kern County	7.1%	7.4%	7.0%
California	6.8%	6.8%	6.8%

Premature Births (Percentage of live births)	2007	2008	2009
Kern County	13.8%	13.9%	13.5%
California	11.1%	10.7%	10.4%

Infant Mortality Rate (Rate per 1,000 live births)	2007	2008	2009
Kern County	6.7	7.2	6.7
California	5.2	5.1	4.9

Births to Teen Mothers 15-19 (Percentage of live births)	2008	2009	2010
Kern County	14.9%	14.3%	13.9%
California	9.4%	9.1%	8.5%

Overweight Youth (Percentage of 5 th /7 th /9 th grade)	2008 -2009	2009 -2010	2010 -2011
Kern County	35.8%	34.3%	49.5%
California	31.0%	29.3%	44.4%

Births to Teen Mothers 15-19 (Rate per 1,000 population)	2008	2009	2010
Kern County	64.9	59.7	56.0
California	35.2	32.1	29.0
United States	41.5	39.1	34.3

Chlamydia Infection in Female Youth (Ages 15-19) (Rate per 100,000 population)	2008	2009	2010
Kern County	3341.3	3069.5	3267.3
California	2354.4	2216.6	2247.0
United States	3269.5	3329.3	3378.2

Kern County Births to Teens 15-19 (2010)	African American	Caucasian	Latino	Asian/ Pac Islander	Native American	Total *
Number of Live Births	127	401	1,443	8	5	2,010
Teen Birth Rate per 1,000 females in race/ethnicity group	57.0	30.1	79.1	6.4	15.5	56.0

* Figures will not total 100 percent as unknown or multiple races are excluded from these tables.

Childhood Obesity & Fitness

A healthy lifestyle, including good nutrition and fitness levels, can significantly reduce an adult's risk of developing heart disease, stroke, diabetes, and cancer. For the best lifelong health, good nutrition and activity habits must begin in childhood.

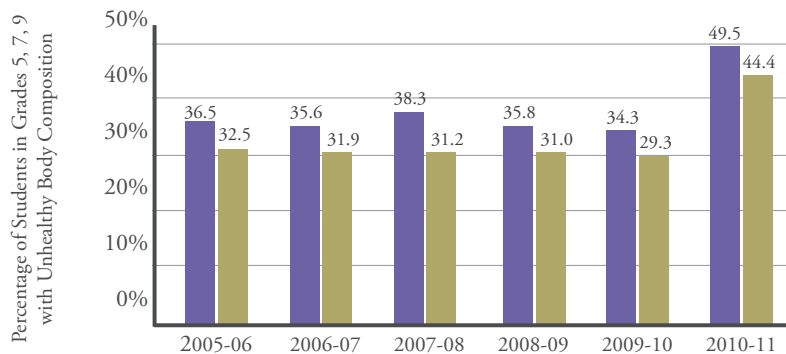
During the 2010-11 school year, 36,789 Kern County 5th, 7th and 9th graders completed California Physical Fitness Testing. Among these students, 49.5 percent had unhealthy body composition based on individual Body Mass Index (BMI) scores. This is an increase from the previous year's average of 34.3 percent and is higher than California's rate of 44.4 percent. On average, boys (51.0%) had poorer body composition than girls (48.0%).

The rates of students with unhealthy body composition increased among all racial and ethnic groups except Asian/Pacific Islander students. Latino (54.2%), African-American (50.6%) and Native American (49.8%) students continue to have the highest percentages of unhealthy body composition.

According to the 2009 California Health Interview Survey, 14 percent of Kern County school-age youth drink more than two glasses of soda each day and 53 percent had eaten fast food more than once during the last week. The Survey also found that 29 percent of Kern County elementary school age children and 35 percent of high school youth were not physically active for at least an hour for three days or less during the week.

Unhealthy Body Composition of 5th, 7th & 9th Graders by Ethnicity

Kern County & California, 2005-06 through 2010-11

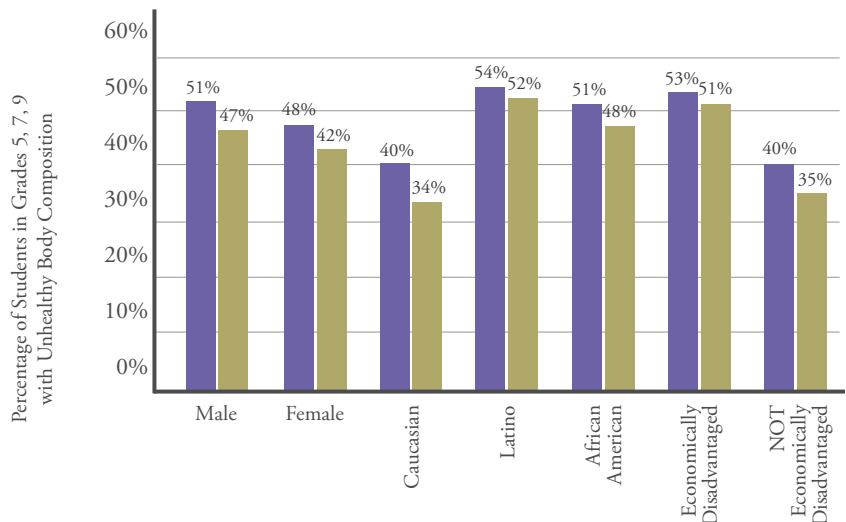


California Department of Education
Physical Fitness Testing

■ Kern County ■ California

Unhealthy Body Composition of 5th, 7th & 9th Graders by Gender, Ethnicity & Family Income

Kern County & California, 2010-11



California Department of Education
Physical Fitness Testing

■ Kern County ■ California

Results from the California Physical Fitness Testing show the percentage of Kern County 5th, 7th and 9th graders who scored within the Healthy Fitness Zone for aerobic capacity dropped from 59.3 percent in the 2009-10 to 56.4 percent in 2010-11. In comparison, 62.0 percent of 5th, 7th and 9th graders statewide scored within the Healthy Fitness Zone for aerobic capacity, the most important indicator of physical fitness.

Asthma

Asthma is a chronic respiratory disease characterized by temporary coughing, wheezing, shortness of breath and chest tightness. Childhood asthma is widespread in the Central Valley and is often linked to the Valley's poor air quality, heavy trucking corridors, and physical geography. Results from the 2009 California Health Interview Survey estimate that 13 percent of children (ages 1-17 years) in Kern County have been diagnosed with asthma during their lifetime.

Approximately, 35 percent of the Kern County students diagnosed with asthma missed between five and ten days of school in the past year. Children with asthma need proper support at school to keep their asthma under control. About, 95 percent of students with asthma experienced one or more asthma attacks during the last year. Asthma can be life threatening and is one of California's most common causes for emergency room visits of children. During 2009, there were 2,052 emergency room visits by Kern County children and youth due to asthma. Children under age five accounted for 44 percent of all emergency room visits. Health advocates believe that the number of emergency room visits can be reduced by improving family access to primary care physicians, preventive medicine, and health education.

Oral Health

Tooth decay is the most prevalent chronic disease of childhood and can lead to problems with a child's nutrition, growth and academic performance. The American Academy of Pediatric Dentistry recommends a dental check-up at least twice a year for children. According to the 2009 California Health Interview Survey, 84 percent of Kern County's children, ages 2-11 years, had visited a dentist at least one time in the last 12 months. Further, 15 percent of Kern County children surveyed, ages 2-11, had never seen a dentist.

Health Care

Every child has different health care needs throughout childhood. Consistent healthcare and access to health insurance increases the likelihood that children remain healthy by providing early identification and treatment of health problems. As of 2009, 11 percent of Kern County's children under 18 years of age had not visited a physician within the past year, according to the California Health Interview Survey. In 2009, a doctor's office or health maintenance organization (HMO) was the usual place for sick care for 57 percent of children in Kern County. One in three children went to either a community clinic or hospital in Kern County for their health care (33%). Further, two percent of Kern County children rely on emergency rooms or urgent care for care and eight percent



In an effort to address rising obesity rates in children, more programs throughout California are encouraging children to walk to and from school to increase physical activity. In Kern County, 49% of children and youth surveyed had walked, biked or skated from school in the past week.

-- California Health Interview Survey, 2009

do not have any place to go when sick or need health advice. An estimated 14,000 Kern County children, or 5.8 percent of the 2009 child population, were uninsured. When compared, 16 percent of uninsured children had not visited a physician during the last year versus 11 percent of insured children.

Sexually Transmitted Infection

Rates of chlamydia and gonorrhea increased in Kern County from the previous year. Kern County had 5,264 cases of chlamydia reported (a rate of 623.2 per 100,000 population) and 970 cases of gonorrhea reported (a rate of 114.8 per 100,000 population) in 2010. Since they can be asymptomatic, STIs are often undiagnosed and left untreated, thus increasing their potential for proliferation among adolescents.

Chlamydia is the most commonly reported STI in Kern County, California and the United States. Moreover, for the third consecutive year, Kern County reported the highest rate of chlamydia infection among California counties in 2010. Kern County's rate of diagnosed chlamydia infection for females of all ages increased from 707.3 in 2009 to 710.0 per 100,000 population in 2010. For males, the rate per 100,000 population fell from 514.7 in 2009 to 501.5 in 2010. By comparison, California 2010 rates were 542.3 and 247.6 for females and males, respectively.

The highest rates of chlamydia in 2010 were within the African-American and Latino populations. The rate of chlamydia infection was highest for African-American women (1,855.4 per 100,000 population); African-American men (1,503.6 per 100,000 population); Latina women (752.8 per 100,000 population); and Latino men (501.2 per 100,000 population).

Chlamydia mainly affects adolescents and young adults in Kern County. Young women between the ages of 15-19 (3,267.3 per 100,000) and 20-24 (3,064.1 per 100,000) were at highest risk for chlamydia infection in the county. These rates were significantly higher than California's rates of 2,247.0 and 2,950.5 for females in the same age groups, respectively. Chlamydia, if left untreated, can cause irreversible damage to female reproductive organs and can be transmitted to newborn babies.

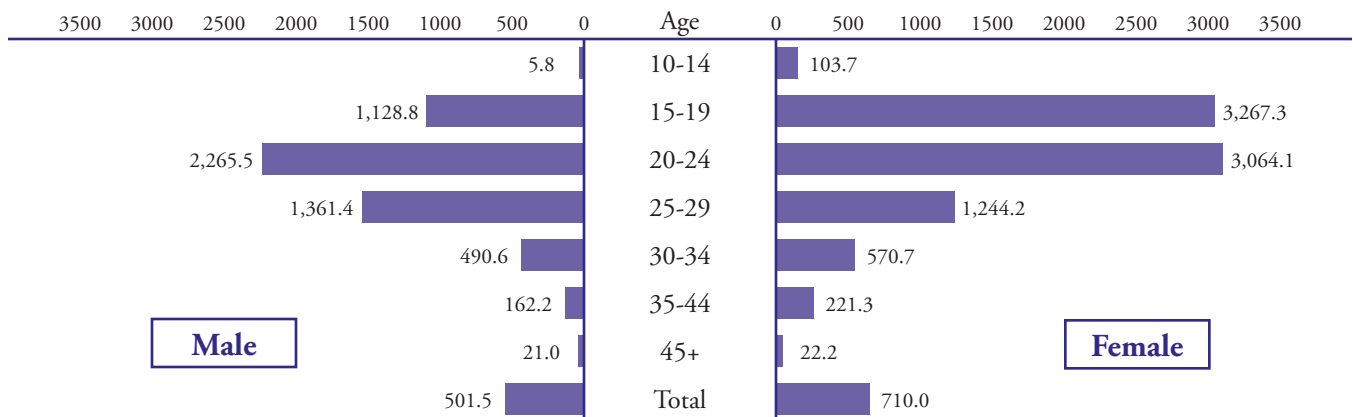
Mental Health

Depression is one of the most frequently diagnosed mood disorders in children and adolescents. Stress and experiencing a loss as well as attention, learning, conduct and anxiety disorders place youth at a higher risk for depression. Moreover, growing research strongly suggests a genetic link to depression.

For youth experiencing mental health issues, the transition to adulthood can be particularly challenging.

Chlamydia, Rates by Age & Gender

Kern County, 2010



STD Control Branch, California Department of Public Health



In 2010, 2,010 babies were born to mothers between the ages of 15 and 19 years in Kern County, a birth rate of 56.0 per 1,000 females in this age group. During the same year, California's teen birth rate was 29.0 per 1,000 females. Kern County's teen birth data from 2010 show a 6 percent decrease from the previous year, however, its 2008-10 three-year average of 60.1 per 1,000 females ranks the county second for highest rate of teen births in the state.

Teen mothers and their babies are at greater risk of birth complications and long term health issues. Young mothers are less likely to complete high school and their babies are more likely to experience poverty, abuse and neglect during their childhood. Moreover, infants born to teenage mothers are at higher risk of being born prematurely, born at a low birth weight, and dying before their first birthday, compared to babies born to mothers ages 20 and older.

Kern County's teen birth rates decreased for all racial/ethnic groups from 2009 to 2010. Teen birth rates among Asian/Pacific Islanders (6.4 per 1,000 females) dropped by 65 percent; Native American females (15.5 births per 1,000 females) decreased by 51 percent; African-American females (57.0 births per 1,000 females) decreased by 17 percent; Caucasians (30.1 per 1,000 females) decreased by 13 percent; and Latinas (79.1 per 1,000 females) declined by 2 percent.

Young mothers in their teens are less likely than older mothers to receive timely prenatal care. In 2010, 63 percent of the mothers between the ages of 15 and 19 years received prenatal care during their first trimester compared to 73 percent among mothers ages 20 and older.

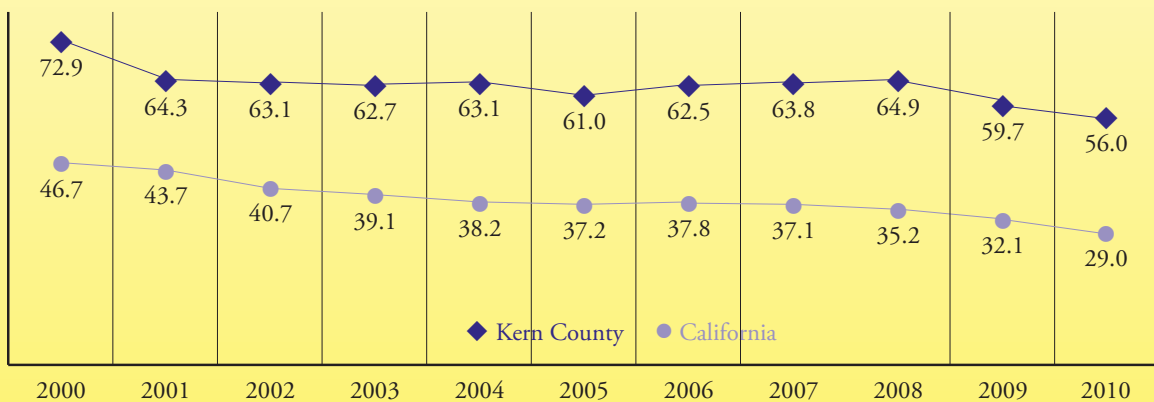
Early and continuous prenatal care helps identify medical issues and behavior that can result in babies born at a low birthweight. Of the babies born to teen mothers during 2010, 8.8 percent were born weighing less than 2,500 grams (5 pounds, 5 ounces) in contrast with 6.7 percent among babies born to mothers aged 20 years or older.

What Can We Do About Teen Pregnancy

- Talk with your teen early and often about sex, contraception, your morals and values.
- Make their future attractive by teaching your children to dream.
- Let your children know that you value education highly.
- Know what your children are watching, reading, and listening to.
- Encourage good health care. Take your child to the physician for regular appointments.

Rate of Births to Mothers Between the Ages of 15-19 (per 1,000)

Kern County & California, 2000-2010



California Department of Public Health

According to a 2009 study from the Urban Institute, youth with depression engage in more risk-taking behaviors by age 18 such as using drugs, early sexual activity, stealing, fighting and running away than youth experiencing less or no depression. Youth with depression were also twice as unlikely to complete high school than peers with less or no depression.

Findings from the 2008-10 California Healthy Kids Survey show older students and female students were most likely to report feeling sad or hopeless almost every day for two or more consecutive weeks in the last year. Twenty-eight percent of 7th graders, 32 percent of 9th graders and 34 percent of 11th graders admitted that they stopped some of their usual activities during the past year because of feelings of sadness or hopelessness. The highest rates of depression from the survey came from students in community schools with 41 percent of youth reporting feelings of sadness or hopelessness the past 12 months.

The Survey found 7th, 9th and 11th grade females (37%) were more likely to admit feeling sad or hopeless than their male peers (24%). Over half of the female students who attended community schools reported the highest rate of depression-related feelings (54% of girls versus 28% of boys in these programs).

The early diagnosis of depression and its treatment are critical to a youth's emotional, social, and behavioral development. Even though the recovery rate from a single episode of major depression is high, future episodes are likely to recur among children and adolescents. Left untreated, depression can lead to problems at home and school, drug abuse, violence and suicide.

Suicide

From 2000 to 2009, Kern County lost 20 youth the ages of 11 and 17 years to suicide. Males accounted for 80 percent of Kern's suicides in this age group. Youth committed suicide with either a firearm (40%) or by hanging/suffocation (60%) between 2000 and 2009. The annual number of youth suicides fluctuated throughout the 2000 decade with a high of 5 suicides in 2001 and no suicides recorded during the years 2006 and 2007.

From 2000 to 2009, 240 children and youth between were hospitalized for self-inflicted injuries. Females (76%) had a higher rate of attempted suicide than males (24%). The attempted suicide rate for Caucasian youth (66%) was considerably higher than any other racial or ethnic group. Latino (26%), African American (3%) and Asian (2%) comprised the remaining racial/ethnic groups.

Most youth attempted suicide by poisoning themselves (91%). The remaining methods used by youth during suicide attempts were cutting/piercing (5%) and hanging/suffocation (1%). In addition, there were five attempts in which the method was unknown and one self-inflicted injury was from a firearm.



In Kern County, 20% of 9th graders and 17% of 11th graders admitted that they seriously considered attempting suicide during the past year. Parents can help their children prevent suicide by being actively engaged in their children's lives, recognizing the warning signs of suicidal thoughts and seeking immediate professional help.

-- California Healthy Kids Survey,
2008-10

Tobacco, Alcohol & Substance Use

The California Healthy Kids Survey (CHKS) is administered every two years in order to meet the requirements of the federal Safe and Drug Free Schools and Communities Act. Between the fall of 2008 and spring of 2010, the Survey asked 7th, 9th, 11th graders and community school students health and behavior questions to find out what problems students face in regards to substance abuse and violence to help put programs in place to effectively address problems.

In Kern County, rates of tobacco, alcohol and marijuana use are higher among older students, males and community school students with the exception of alcohol use which was higher among female students than males.

Tobacco Use

Individuals who begin using cigarettes or smokeless tobacco at a young age are more likely to become strongly addicted to nicotine than those individuals who start using tobacco products at older ages. In Kern County, 6 percent of 7th graders, 12 percent of 9th graders and 14 percent of 11th graders responded that they had smoked cigarettes during the past 30 days. Nearly half of Kern's community school students (46%) admitted they smoked cigarettes during the past month. Among California students, 5 percent of 7th graders, 10 percent of 9th graders, 13 percent of 11th graders and 39 percent of students in nontraditional schools reported use of cigarettes in the past 30 days during the same school years.

The Centers for Disease Control and Prevention reports use of smokeless tobacco among youth declined in the late 1990s and early 2000s, but an increasing number of high school students nationwide have reported using smokeless tobacco products in recent years. In Kern County, 3 percent of 7th graders, 4 percent of 9th graders and 5 percent of 11th graders responded that they had used smokeless tobacco during the past

month. Fifteen percent of Kern's community school students reported they had used smokeless tobacco during the past 30 days. Statewide, 3 percent of 7th graders, 4 percent of 9th graders, 4 percent of 11th graders and 10 percent of students in nontraditional schools reported use of smokeless tobacco in the past 30 days during the same school years.

Alcohol Use

Alcohol is the most abused drug among teens. In Kern County, alcohol had a higher rate of use by responding students when compared to other problem substances such as tobacco and marijuana. Survey results showed 15 percent of 7th graders, 25 percent of 9th graders and 35 percent of 11th graders self-reported they had drunk alcohol during the past 30 days. Among Kern County's community school respondents, 63 percent responded that they had drunk alcohol during the past month. In comparison, 14 percent of California's 7th graders, 25 percent of 9th graders, 34 percent of 11th graders and 54 percent of students in nontraditional schools reported use of alcohol in the past 30 days during the same school years.

Marijuana Use

Regular marijuana use interferes with a youth's learning in school by affecting the parts of the brain that controls memory and attention. The 2008-10 survey showed that 6 percent of 7th graders, 14 percent of 9th graders and 19 percent of 11th graders had used marijuana in the past 30 days. The highest rate of marijuana use was among Kern's youth in community schools. More than half of community school students surveyed admitted they smoked marijuana in the last 30 days (58%). Statewide, 6 percent of 7th graders, 15 percent of 9th graders, 20 percent of 11th graders and 47 percent of students in non-traditional schools reported marijuana use in past month.



In addition, the 2008-10 California Healthy Kids Survey shows that 25 percent of Kern County 9th grade respondents and 31 percent of 11th grade respondents said they had either driven a car after consuming alcohol or been a passenger in a car when the driver (a friend) had been drinking.

-- California Healthy Kids Survey, 2008-10

CHILD WELL-BEING



Child Abuse and Neglect Overview

Child abuse and neglect affect children of every age, race and income level. Mandated reporters and other concerned adults often refer potentially dangerous situations to Child Protective Services (CPS) for investigation. While the number of reports to CPS can indicate about how many children in the county are potentially at risk of abuse and neglect, referral rates also demonstrate the willingness of community members to report events where children may be in danger.

Kern County's Differential Response (DR) program is an effective, research-based strategy to prevent abuse -- an outstanding example of how CPS, the Kern County Network for Children, Clinica Sierra Vista and the Kernville Union, Taft City and Richland School Districts are working to improve child safety. DR expands the ability of CPS to respond differently to suspected reports of child abuse/neglect, by assisting families at the first signs of trouble with counseling, parenting education, job training, food and housing assistance to prevent future problems. Another partner is First 5 Kern, which provides the fiscal year funds for DR that are necessary to maintain service levels despite state and local budget cuts.

During 2010-11 funding year, 3,379 children and their families throughout the county received DR services. Analysis of follow-up records shows that these families are less likely to have further contact with CPS. Moreover, since 2007--the year DR services were expanded countywide--Kern's foster care entry rate has decreased 1.2 times more than the average decline experienced by other California counties. Despite the availability of child abuse prevention services, the reality is that some families will not use them in time. Kern County children need individuals to decide to make a difference. The box on the right gives examples of ways we can all prevent child abuse and neglect.

It's Our Responsibility

* **Know what child abuse is, and what the signs are.** Physical and sexual abuse clearly constitute maltreatment, but so does neglect, the failure of parents or others to provide food, clothing and care. Children can also be emotionally abused when they are rejected, berated or continuously isolated. Unexplained injuries are not the only signs of abuse. Depression, fear of a certain adult, difficulty trusting others or making friends, sudden changes in eating or sleeping patterns, inappropriate sexual behavior, poor hygiene, secrecy and hostility are often signs.

* **Report abuse.** If you witness a child being harmed, if a child tells you about abuse, or if you merely suspect abuse, call the CPS hotline at (661) 631-6011, or 9-1-1.

* **Encourage help.** If you know a family that is experiencing stress and is in need of food, financial aid, utility assistance, housing, counseling, parent education, child care, clothing, etc., encourage them to call 2-1-1, Kern's comprehensive information and referral service.

* **Support prevention efforts.** Share your time and concern by volunteering with agencies and organizations throughout Kern County. Sign up to mentor a teen mom, become a foster parent, donate items children and families need, assist at a Family Resource Center or share your talents.

CPS Referral Rates

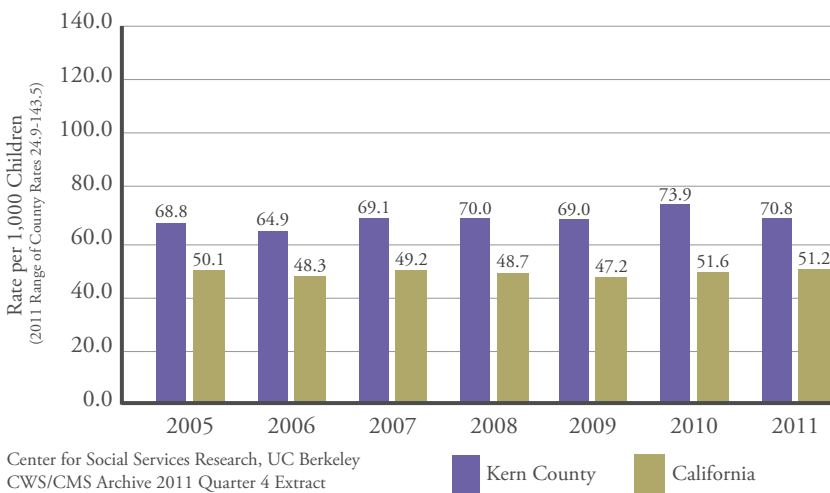
During 2011, Kern County CPS received reports of suspected child abuse or neglect on 17,988 children, a referral rate of 70.8 per 1,000 children. Statewide, referrals for investigation were made on 475,908 children, a referral rate of 51.2 per 1,000 children. Thirty-nine percent of suspected abuse and neglect cases in 2011 were later determined as unfounded during the investigative phase.

Child Abuse Rates

In 2011, 4,372 Kern County children were found to have been victims of abuse and neglect--an average of 84 children per week. Child abuse rates per 1,000 children in California counties ranged from 2.5 to 34.9 during 2011. Kern County's substantiated child abuse rate of 17.2 children per 1,000 children was nearly twice California's child abuse rate of 9.1. Kern County had the tenth highest substantiated child abuse rate in the state.

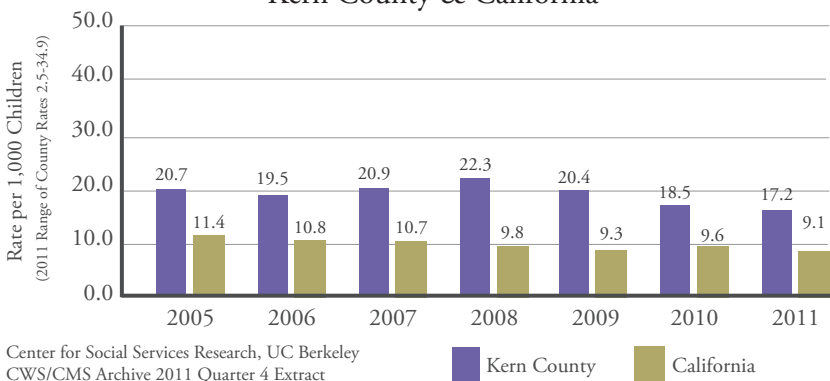
As in prior years, most victims of maltreatment in Kern experienced general or severe neglect (88%), meaning a caretaker failed to provide for the child's basic needs. Fewer children had substantiated referrals for physical abuse (5%), caretaker absence/incapacity (3%) or sexual abuse (2%).

CPS Referral Rates 2005-2011
Kern County & California



Children of all ages experience abuse and neglect, but the youngest children are the most vulnerable. In 2011, children younger than a year old had the highest rate of substantiated abuse with 51.4 per 1,000 children, about three times higher than Kern's overall rate of substantiated abuse and neglect. African-American children had the highest rate of substantiated abuse reports in Kern County with 42.2 per 1,000 children. Caucasian (20.6 per 1,000), Native American (15.4 per 1,000) and Latino (13.4 per 1,000) children had the next highest rates of substantiated abuse. Asian/Pacific Islander children had the lowest rate of abuse with 4.1 per 1,000 children.

Child Abuse Rates 2005-2011
Kern County & California



Services provided by Kern County CPS reduce the risk that victims of child abuse and neglect will not experience a second substantiated report. In 2011, 88.3 percent of children for whom there was substantiated maltreatment did not have another substantiated incident within six months of their first founded report.



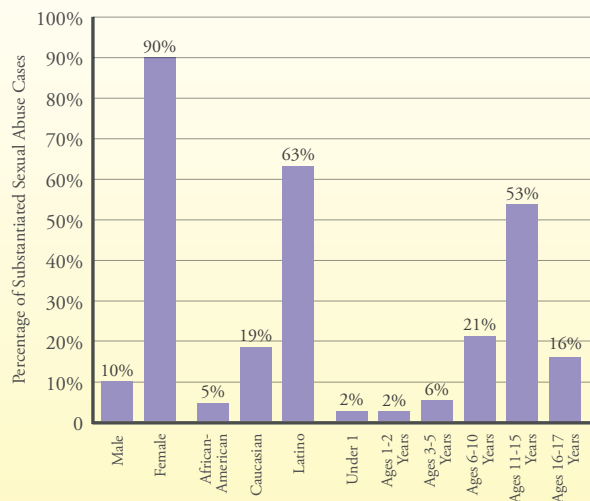
For many, the sexual abuse of children can be very difficult to talk about. It may be even more difficult to acknowledge that children, regardless of age, gender or socioeconomic status, are sexually abused every day in Kern County. Child sexual abuse includes both sexual assault (sex acts with children, masturbation in the presence of children and child molestation) and sexual exploitation (allowing children to engage in prostitution or in the production of child pornography).

Research shows that sexual abuse negatively interferes with a child's attitude toward self, trusting relationships, and sexuality. Without intervention, these children are likely to experience psychological problems as they become older, including posttraumatic stress disorder, anger, depression, inappropriate sexual behavior, poor self-esteem, difficulty with close relationships and substance abuse.

During 2011, Kern County CPS responded to the allegations of sexual abuse for 1,132 children to ensure they were safe. Sexual abuse comprised six percent of Kern County's total allegations of child maltreatment. The major reporters of 2011 sexual abuse allegations were from Kern County's law enforcement/legal personnel (18%), other mandated reporter professionals (16%), counselors/therapists (13%), educators (11%), DHS staff (8%) and medical professionals (7%).

During 2011, 83 Kern County children (7%) were found to have been victims of sexual abuse and 28 children were placed into

Substantiated Cases of Child Sexual Abuse by Gender, Race/Ethnicity & Age Kern County, 2011



*Center for Social Services Research, UC Berkeley
CWS/CMS Archive 2011 Quarter 4 Extract*

foster care as a result of CPS' investigation. Fortunately, 93 percent of children placed in foster care due to sexual abuse returned home in less than a year.

What Can We Do About Sexual Abuse

- Teach children about body safety and the difference between "okay" and "not okay" touches.

- Educate children about the difference between good secrets (like surprise parties—

which are okay because they are not kept secret for long) and bad secrets (those that the child is supposed to keep secret forever, which are not okay).

- Learn the physical and behavioral warning signs so you can take action to protect a child.

- Understand that children may recant due to fear or embarrassment, but this does not mean they were not initially being honest.

- If you suspect sexual abuse or if a child tells you about abuse, call the Child Abuse Hotline (661) 631-6011. Remember that you may be the only person in a position to help a child who is being sexually abuse.

Severe Injury To Children

In Kern County the practice is to have the Department's Ombudsman review social work practice, policy, training and personnel issues for each child fatality and near fatality brought to the attention of Child Protective Services.

Additionally the Department of Human Services initiated a practice of having the Department Ombudsman review all incidents that involve severe injuries of children even though the State does not require that information be tracked or reported. Kern County defines severe injury as any injury that includes, but is not limited to, multiple fractures, amputation of limbs, burns requiring hospitalization, severe sexual abuse, torture, etc. Although these injuries are of a severe nature but do not fit the state's definition of near fatality, it is imperative to recognize this category of injuries as it relates to the condition of children in our community.

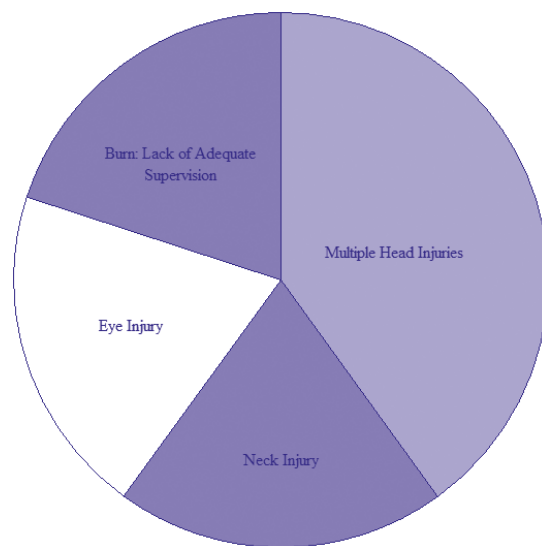
In 2010, 14 children suffered from severe injuries as a result of abuse or neglect. Kern County's data is consistent with state and national trends that reflect the most vulnerable population were children four years of age or younger, with the majority of those children less than one-year old. Further noted was that the majority of children suffered from injuries sustained from blunt force trauma. An additional trend identified in the review of the cases that involved severe injury was that the perpetrator of the abuse was most often the parent or caretaker responsible for the safety and well-being of the child. This is also true for child fatalities and near-fatality injuries.

Although this data is alarming, it is important to share this information. It is only through the combined efforts of the entire community that we can work effectively to address the issues related to child abuse and neglect. Identifying and reporting incidents of suspected abuse or neglect is critical to ensuring the safety and well-being of our children.

Child Near Fatalities

The California Department of Social Services (CDSS) requires the reporting of near child fatalities that are a direct result of child abuse or neglect. A near fatality is defined by the state as: a severe childhood injury or condition caused by abuse or neglect which results in the child receiving critical care for at least 24 hours following the child's admission to a critical care unit. In 2010 there were four (4) near fatalities resultant from abuse or neglect reported to CDSS. The data gathered for these cases indicates the most vulnerable population were children four years of age or younger. Trends found in the data gathered for near fatalities in Kern County are consistent with state and national trends, as well as, the causes of child fatalities as illustrated in the chart below.

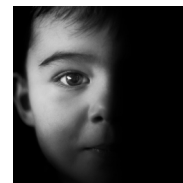
Child Near Fatality Causes Determined to be Result of Abuse/Neglect Kern County, 2009



Kern County Department of Human Services

Child Fatalities

County social service departments are required to report to CDSS all cases of child fatalities where there is reasonable suspicion that the child died as a direct result of abuse or neglect. In 2010 there



The death of a child is the most tragic result of maltreatment. In 2011, five Kern County children died from abuse or neglect – all of those children were 3 years old or younger.

–Kern County Department of Human

CPS Referral Rates per 1,000 Children	2009	2010	2011
Kern County	69.0	73.9	70.8
California	47.2	51.6	51.2

Substantiated Child Abuse Rates per 1,000 Children	2009	2010	2011
Kern County	20.4	18.5	17.2
California	9.3	9.6	9.1

Foster Care Rates per 1,000 Children (Entry + Re-Entry)	2009	2010	2011
Kern County	5.3	4.9	4.9
California	3.2	3.3	3.2

Percentage of CPS Referrals Substantiated	2009	2010	2011
Kern County	29.5%	25.0%	24.3%
California	19.6%	18.5%	17.8%

Substantiated Child Abuse Rates per 1,000 Children (2011)	African American	Caucasian	Latino	Asian/Pac Islander	Native American	All Children
Kern County	42.2	20.6	13.4	4.1	15.4	17.2
California	23.0	8.2	9.4	2.9	21.8	9.1

Substantiated Child Abuse Rates per 1,000 Children (2011)	Under 1	1-2 yrs	3-5 yrs	6-10 yrs	11-15 yrs	16-17 yrs
Kern County	51.4	24.6	20.5	15.3	10.8	7.6
California	21.8	11.3	10.5	8.6	7.2	5.4

Foster Care Prevalence Rate per 1,000 Children (Children in care on 7/1/11)	African American	Caucasian	Latino	Asian/Pac Islander	Native American	Total
Kern County	17.8	9.6	5.8	2.3	6.3	7.1
California	24.5	5.3	5.3	1.3	21.7	5.8

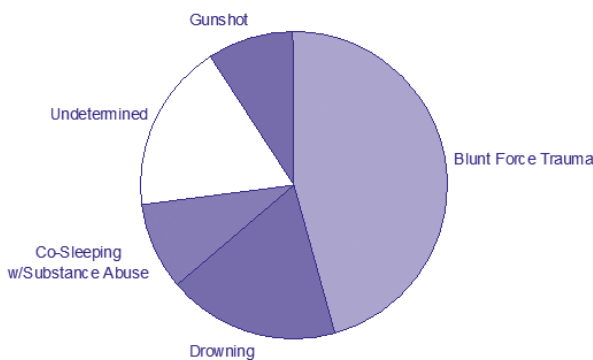
Foster Care Prevalence Rate per 1,000 Children (Children in care on 7/1/11)	Under 1	1-2 yrs	3-5 yrs	6-10 yrs	11-15 yrs	16-17 yrs
Kern County	12.0	9.3	7.0	5.1	6.9	7.7
California	6.7	7.3	5.8	4.6	5.4	7.4

Foster Care Population (2006-11)	2006	2007	2008	2009	2010	2011
Kern County	2,475	2,480	2,237	2,113	2,030	1,838
California	76,873	75,069	68,129	62,179	57,593	56,138

were seven (7) child fatalities resultant from abuse or neglect reported to CDSS. The data gathered for these cases indicates the most vulnerable population were children four years of age or younger, with the majority of that number less than one-year old. Trends found in the data gathered for child fatalities in Kern County are consistent with state and national trends, as well as, the causes of death as illustrated in the chart below.

Child Fatality Causes Determined to be Result of Abuse/Neglect

Kern County, 2009



Kern County Department of Human Services

*Undetermined: After utilizing all possible investigative techniques, the coroner is unable to determine with certainty the cause of death.

Foster Care

Of the 4,372 Kern County children with substantiated reports of abuse and neglect during 2011, 1,244 were placed into foster care (28% of substantiated cases). The rate of foster care placement was 4.9 per 1,000 children. Kern's entry rate into foster care was higher than California's rate of 3.2 entries per 1,000 children.

In 2011, 984 children entered the Kern County foster care system for the first time, a figure of 79 percent of all entries, comparable to California's 81 percent.

The number of children in foster care is always changing. However, a point-in-time count is taken on July 1 of each year. On July 1, 2011,

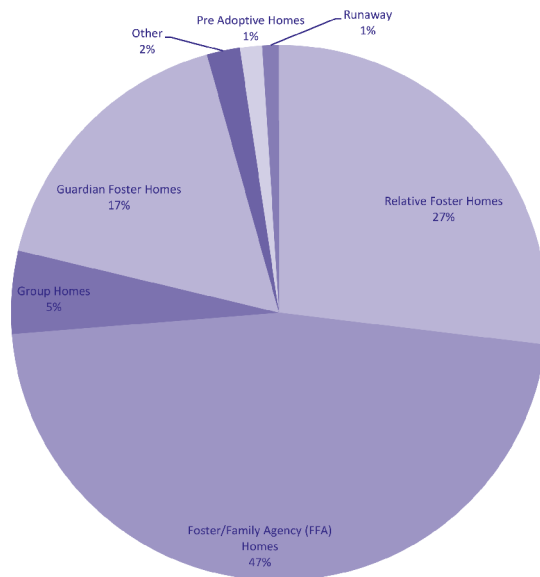
there were 1,838 children in the foster care system across Kern County, 192 fewer children than the previous year's count.

In 2011, African-American children (17.8 per 1,000) were in foster care at a rate greater than children in any other racial/ethnic group. Infants (12.0 per 1,000) and toddlers (9.3 per 1,000) experienced the highest in-care rates in Kern's foster care system.

Research shows that placement stability in foster care is essential for a child's healthy development. A smaller percentage of children in the Kern

Placement Settings for Children in Foster Care

Kern County, July 1, 2011



Center for Social Services Research, UC Berkeley
CWS/CMS Archive 2011 Quarter 4 Extract

County foster care system experienced more than two placements in less than 12 months in 2011 than in 2010 (24% versus 35%). Statewide, this rate was 16 percent in 2011.

Research shows that placement stability in foster care is essential for a child's healthy development.



The goal for most foster children is to return to their family, however, sometimes children are not able to return home and need a permanent family. During 2011, 284 children left foster care through adoption and half were under the age of three years.

-- Center for Social Services Research, UC Berkeley

However, a higher percentage of children in the Kern County foster care system experienced more than two placements in less than 12 months in 2010 than in 2009 (35% versus 33%). Statewide, this rate was 16 percent in 2010.

Preserved Family Relationships

For those children living in foster care, the preservation of natural family relationships is important in maintaining a child's positive sense of identity and knowledge of cultural, personal, and familial histories. Whenever possible, sibling units are placed in the same foster home. In 2011, the share of Kern County's foster youth placed with at least one sibling was 70 percent in comparison to 74 percent throughout California.

Kinship care is the full time care of children by relatives, godparents, stepparents, or any adult who has a kinship bond with a child. On July 1, 2011, 27 percent of the Kern County children in out-of-home care lived with relatives, a figure lower than the statewide rate 34 percent. Among children placed with kin, 48 percent were between the ages of 0 and 5 years and 57 percent were Latino.

Reunification

During 2011, 1,028 children and youth exited foster care in Kern County. Returning children safely to their home is the primary goal of CPS. Seventy-two percent of these children and youth were reunified with their families in less than 12 months. In comparison, California's reunification rate was 65 percent.

In 2011, the median length of time before Kern County children in foster care were reunified with their families was 8.0 months comparable to the state's 8.6 months. Throughout Kern County, youth ages 11 to 15 years were in care longest before reunification (9.6 months) and older youth ages 16 to 17 years were in care the shortest amount of time (4.0 months).

Recurrence After Reunification

Even when reunification is initially successful, some children must be placed again into foster care when another abuse/neglect event occurs. In

2010, 132 of the 881 children who reunified with their families returned to foster care in less than 12 months (15%). Kern's reentry-after-reunification rate was above the state's rate of 12 percent. Compared to other age groups, children younger than six years old (70%) were most likely to re-enter foster care after being reunified with their families.

Emancipation

Some children remain in foster care until they are 18 or have graduated from high school. These youth are often referred to as "aging out" or emancipating from foster care. In Kern County, 119 youth were either discharged to emancipation or turned 18 while still in foster care during 2011. The majority of these youth (67%) had been in foster care for three years or longer.

Because the transition from foster care to adulthood is very difficult, DHS offers foster youth (ages 16-21) voluntary services through Independent Living Program (ILP) to help youth with money management skills, educational assistance, household management and employment preparation.

During 2011, 95 percent of Kern County foster youth offered ILP services accepted those services. Statewide, 86 percent of foster youth accepted ILP services as well. Of the youth contacted by Kern County's ILP during this 12 month period, 14 percent had obtained employment, 92 percent had housing arrangements, 60 percent had completed high school/GED and 100 percent had a permanency connection.

In September 2010, a bill was signed into law giving foster youth the option to remain in foster care and receive services and supports until age 20. The California Fostering Connections to Success Act, also known as Assembly Bill 12 (AB 12), allows young adults to remain in care after they turn 18. The goal is to help them prepare for their futures through additional educational and employment training, safe housing and connections with caring adults, including relatives, mentors and community members.



On July 1, 2011, there were 255 youths aged 16 and older in out-of-home placement in Kern County. Half of these youth had been in the foster care system for five years or more.

-- Center for Social Services Research, UC Berkeley

CHILD SAFETY



Cyber bullying is a growing trend in today's connected world. About 20% of Kern County middle school and high school students have been harassed, threatened or humiliated through electronic means such as email, texting or by using social networking sites. Almost 1 in 10 youth had it happen more than once.

--California Healthy Kids Survey,
2008-10

Childhood Unintentional Injury

Injury data is classified as unintentional, intentional, assault/homicide or intent unknown. Motor vehicle accidents, falls, drowning, poisonings and burns are generally classified as unintentional injuries. During 2009, unintentional injuries killed 28 Kern County children under the age of 18 years and caused serious, non-fatal injury to 469 other children. Over the past decade, the majority of child nonfatal injuries were from three causes: falls, burns, and motor-vehicle related accidents.

Falls

Falls are the leading cause of emergency room visits among Kern County children under age 18 years. In 2009, 5,875 children had an initial emergency department visit for injuries from a fall in Kern County.

Between 2000 and 2009, there were 1,521 Kern County children admitted as inpatients with injuries caused by a fall, an average of 152 children each year. Falls can result in serious injuries. Nearly one half (44 percent) of the hospitalizations were for injuries to the upper extremities, and most of these (67 percent) were fractures. Moreover, 23 percent of these children were hospitalized for traumatic brain injury (23%).

Boys regardless of age were more likely to have injuries (66%) from a fall than girls (34%). Caucasian and Latino children had the highest rates of fall-related injuries, 65 percent and 26 percent, respectively. Kern County children aged 0 to 5 years had a higher rate of injuries from falls than any other age group. Moreover, falls accounted for one-third of the total nonfatal unintentional injuries for children less than 6 years of age during this ten year period

Fire & Burn Injury

Burns are one of the most devastating and painful injuries a child can sustain. From 2000 to 2009, 180 children were hospitalized for non-fatal injuries fire, flames, and hot objects or substances in Kern County, an average of 18 children a year. Burns can range from mild to life-threatening. Child burn victims were most likely hospitalized for injuries to the head and neck (28%), torso (23%) and lower extremities (22%).

Boys are at a higher risk of fire and burn-related injuries (66%) than girls (34%). Children under the age of six years were most likely to be injured by accidents involving fires and hot objects (75%) during these years. The skin of younger children is thinner and therefore an injury from burns can cause a greater degree of injury. Latino and Caucasian children had the highest rates of fire/burn injuries, 51 percent and 39 percent, respectively.

Motor-Vehicle–Traffic Injury

Motor vehicle-related injuries are the leading cause of unintentional injury-related death of Kern County children. From 2000 to 2009, 169 children died and 1,255 children were hospitalized from injuries caused by motor-vehicle related accidents throughout Kern County.

Most children injured or killed in motor-vehicle related accidents between 2000 and 2009 were occupants in a motor vehicle (59%). Children hospitalized with serious injury were most likely to experience fractures and internal injury to their torsos and lower extremities. Twenty-three percent of youth hospitalized were diagnosed with traumatic brain injury.

Traffic-related injuries also include those sustained while walking, riding a bicycle, or riding a motorcycle. From 2000 to 2009, 25 children died from traffic-related pedestrian injuries and an additional 279 children were admitted to Kern County hospitals with serious injuries after being struck by a motor vehicle.

In Kern County, 205 children were injured after being struck by motor vehicles while riding a bike or motorcycle and another 17 were killed from 2000 to 2009. Children hospitalized with serious injury were most likely to experience fractures and internal injury to their lower extremities and torso. Seventeen percent of youth hospitalized were diagnosed with traumatic brain injury.

Children under the age of six years were most likely to be injured in motor-vehicle accidents as an occupant (58%) and as a pedestrian (38%) from 2000 to 2009. Caucasian children had the highest rates of injuries in motor-vehicle accidents as occupants (67%), pedestrians (66%), bicyclists (75%) and motorcyclists (79%).

Child Deaths

In 2010, the Kern County Child Death Review Team (CDRT) investigated 61 deaths of children to better understand the circumstances of the child's death and recommend local action to prevent other deaths. The cases reviewed included 19 accidental deaths, 13 deaths from natural causes, 12 homicides, 4 suicides and 13 deaths of undetermined manner.

Between 2006 and 2010, deaths involving motor vehicle and traffic related accidents represented 54 percent of the accidental death cases reviewed by CDRT members. In 2010, a total of 9 children were killed in motor vehicle related accidents. For crash deaths, six



Homicide claimed the lives of 10 Kern County children in 2009. The average age of these child homicide victims was 5.8 years old.

--EpiCenter California
Injury Data



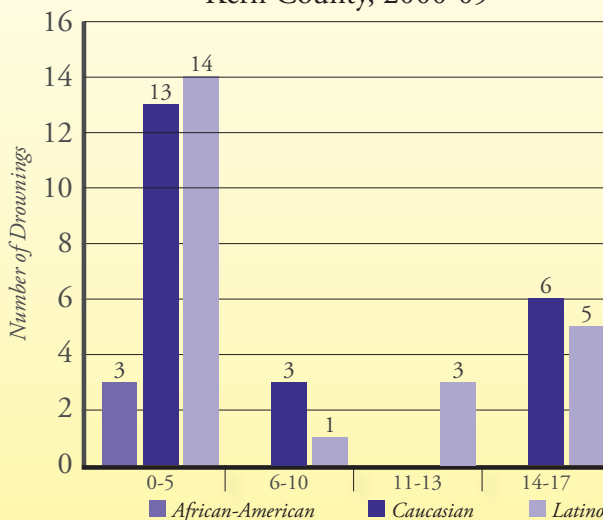
Drowning can happen quickly and silently. A child can drown in just a few inches of water—within seconds—often without any splashing or screaming. Two minutes after submersion, a child will lose consciousness. Irreversible brain damage occurs after four to six minutes and determines the immediate and long-term survival of a child. The majority of children who survive (92 percent) are discovered within two minutes following submersion, and most children who die (86 percent) are found after 10 minutes. Nearly all who require cardiopulmonary resuscitation (CPR) die or are left with severe brain injury.

Drowning is the second leading cause of accidental death among children under the age of 18 in Kern County. From 2000 to 2009, 48 Kern County children drowned and another 99 children were sent to the hospital for near-drowning injuries. Near drownings may damage the brain and cause long-term disabilities such as memory problems, learning disabilities, and even permanent loss of basic functioning.

More than half of the children who drowned in Kern County between 2000 and 2009 were male (58%). Young children had the highest rate of drowning. Sixty-three percent of child drowning victims were under the age of six years. Rates of fatal drowning were highest among Latino (48%) and Caucasian (46%) children.

Among children ages four years and under, there are approximately 300 residential swimming pool drownings each year nationwide. More than half of these drownings occur in the child's home pool, and one-third occur at the homes of friends, neighbors or relatives. From 1999 to 2008, 14 Kern County children between the ages of 1 and 4 years old drowned in swimming pools.

**Child Drowning Victims
by Age Group & Race/Ethnicity
Kern County, 2000-09**



What Can We Do About Water Safety For Children

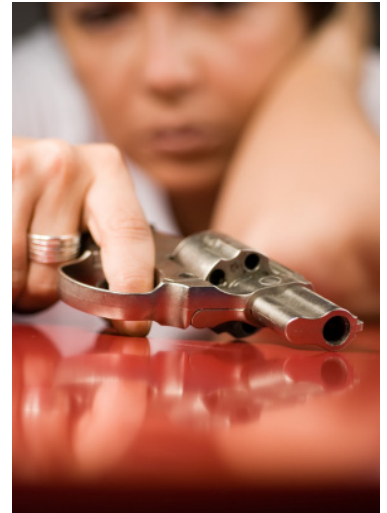
- Empty all bathtubs, buckets, pails and wading pools completely after each use—do not leave them full and unattended. Store them upside-down and out of children's reach.
- Always stay within an arm's reach of your child when he or she is in or near the bathtub, toilet, pools, spas or buckets. Don't mix alcohol and supervision of children around water.
- Always secure the safety cover on your spa or hot tub.
- Keep toilet lids closed, use toilet seat locks and keep bathroom doors closed.
- Teach your child to swim at an early age and always have an adult supervising.

out of seven children killed were unrestrained/improperly restrained as an occupant in the car. Of the remaining cases reviewed involving motor vehicles, two children died in motorcycle accidents.

Death from a natural cause (21%) was the second leading cause of mortality among the child deaths in 2010 reviewed in Kern County followed closely by homicide (20%) and suicide (7%). Among the homicide victims, nine children died from being beaten or by blunt force trauma, two children died from gunshot wounds and one child was stabbed. Of the four youth who committed suicide, two died from hanging, one died from an overdose and one died from self-inflicted gunshot wounds.

Thirty-nine percent of the cases of child deaths reviewed in 2010 involved the deaths of infants. The cases reviewed included two accidental deaths, four natural causes, five homicides from beating/blunt force trauma. Fifteen deaths were undetermined, however, 14 were associated with an unsafe sleep environment and one death was linked to failure to thrive.

The Child Death Review Team also identified any family issues that occurred prior to the child's death with local agencies. Nearly all of the 61 cases reviewed had at least one reported family issue preceding the child's death (92%). Inadequate supervision (43%), substance abuse (23%), chronic health condition (15%) and law enforcement (13%) were most frequently identified.



Half of the youth homicides and suicides reviewed in 2010 involved a firearm.

--Kern County Child Death Review Report, 2010

Kern County

Submersion / Drowning (Number of children 0-17 killed or injured)	2007	2008	2009
Fatal Injury	8	5	8
Non-Fatal Hospitalization	11	8	7

Assault/Homicide (Number of children 0-17 killed or injured)	2007	2008	2009
Fatal Injury	4	11	10
Non-Fatal Hospitalization	39	47	40

Motor Vehicle Occupant	2007	2008	2009
Fatal Injury	10	5	6
Non-Fatal Hospitalization	65	31	52

Pedestrian / Traffic (Number of children 0-17 killed or injured)	2007	2008	2009
Fatal Injury	3	3	3
Non-Fatal Hospitalization	19	20	19

Self-Inflicted Injury / Suicide (Number of children 0-17 killed or injured)	2007	2008	2009
Fatal Injury	0	2	3
Non-Fatal Hospitalization	23	19	22

Firearm (Number of children 0-17 killed or injured)	2007	2008	2009
Fatal Injury	3	2	6
Non-Fatal Hospitalization	12	18	10

Missing Children

In 2010, 4,204 children were reported missing in Kern County. Of these, 4,096 were suspected runaways, 7 were lost, 22 were suspected family abduction, 9 were missing under suspicious circumstances, 2 were stranger abductions and 68 were reported under unknown circumstances.

Law enforcement officers log missing children reports into the Department of Justice Missing Persons System. Statistics taken from this database include the number of children entered into and canceled in the system during the given year. During 2010, 3,981 of the missing child reports previously noted were canceled: 2,915 children were returned, 717 were located, 176 were arrested, 2 became emancipated, 20 were withdrawn or invalid and 151 were removed from the system for other reasons. A total of 223 children remained missing at year end.

Youth Violence

Youth violence is a process that happens over time. The 2008-10 California Healthy Kids Survey shows 22 percent of Kern County 7th, 9th 11th graders and community school students surveyed had been in a physical fight one or more times at school and 14 percent admitted they had damaged school property on purpose. Moreover, five percent of students had carried a gun onto school property and 11 percent had brought another type of weapon to school.

Gang entry is considered one of the next developmental steps in escalating delinquent behavior. Youth who are members of gangs are much more likely to commit serious and violent crimes at their schools and in their communities. Among seventh and eleventh grade students, eight percent identified themselves as gang members and nine percent of Kern's eighth grade students identified themselves as gang members. About one out of every four students served by Kern's continuation schools identified themselves as gang members (23%).

Without appropriate actions or prevention services to address early violent acts, negative life experiences and subsequent involvement in crime will only reinforce the path towards continued delinquency. In 2009, juveniles accounted for seven percent of all violent felony arrests within Kern County. This figure translates into over 300 arrests of youth between the ages of 10 and 17 which includes 219 arrests for aggravated assault, 85 arrests for robbery, 6 arrests for homicide, 5 arrests for forcible rape and 1 arrest for kidnapping.

The Office of Juvenile Justice and Delinquency Prevention has found that too much idle time and too little positive adult supervision are contributing factors to delinquent and risky behaviors among young people. When older teens are not connected to school or jobs, idle time is abundant and supervision is reduced. In 2010, eight percent of Kern County youths age 16 to 19 years were not enrolled in school and were not employed. Kern's figure increased from its previous year's rate of 7.8 percent and remains higher than state (5.3%) and national (5.6%) figures.



During the 2010-11 school year, there were 38,465 suspensions and another 2,578 expulsions in Kern County schools - 37% of the suspensions and 78% of the expulsions were incidents related to drugs and violence.

--California Department
of Education

Gun Violence

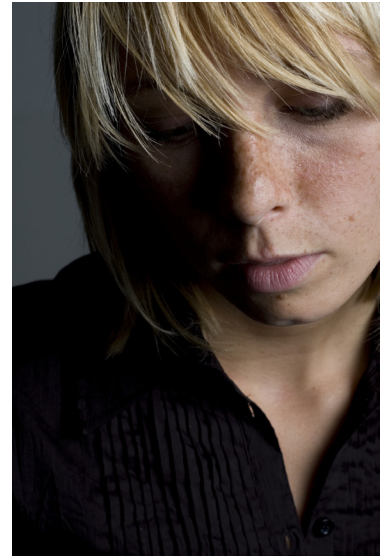
The causes of youth violence are complex, however, easy access to guns demands special attention. In Kern County, 37 children and youth died from firearm-related injuries between 2000 and 2009. These include homicides, assaults, suicides and unintentional injuries. Homicide accounted for 70 percent of the deaths; 22 percent were the result of suicide and 8 percent were the result of accidents.

African-American (50%) and Latino (42%) youth were most likely to be homicide victims from gunshot wounds during 2000 to 2009. The average youth who died as a victim of homicide or from an accidental shooting was 15.1 years old. Male children and youth were eleven times more likely to be killed from firearms than females.

During this ten year period, another 110 Kern County children required hospitalization because of gun-related injuries. Seventy-nine percent of the firearm related injuries were the result of assaults; 20 percent were the result of accidents; 1 percent were the result of self-inflicted injuries. Again, males (85%) were more likely than females to be involved in intentional and accidental shootings. The average age of youth who were injured in assaults with a firearm was 15.3 years old. Younger children averaged 6.7 years old who were injured accidentally with firearms.

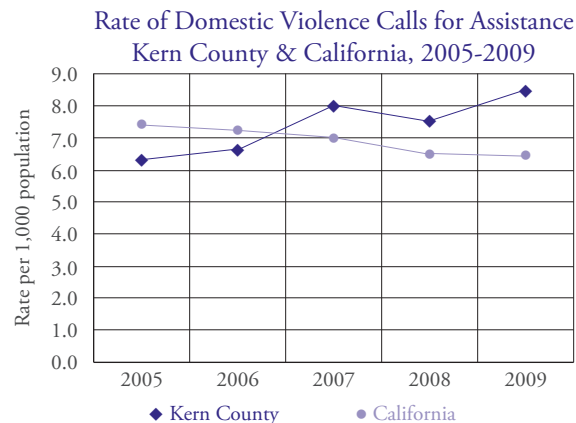
Caucasian (45%) and African-American (43%) youth were most likely to be victims of nonfatal gunshot wounds from assault and attempted homicide from the years 2000 to 2009. More than half of the accidental shootings in Kern County were Caucasian children (59%) during the same time period followed by Latino (27%) and African-American (14%) children.

A national study from RAND reported that 34 percent of children in the United States live in homes with at least one firearm. In addition, in 69 percent of homes with firearms and children, more than one firearm was present. Research continually shows that the presence of a gun in the home will increase the risk of intentional and unintentional shootings and suicide among youth. Child safety advocates believe safely storing all guns is the most important thing parents and gun owners can do to protect children from firearm related injuries. They also encourage community partners to increase public awareness of the role of firearms in accidental injuries and youth suicides.



Teen dating violence is just as serious and lethal as adult domestic violence. One out of every 10 Kern County students who have dated in grades 7, 9, 11 and community schools reported that a boyfriend or girlfriend hit, slapped or physically hurt them during the past year.

--California Healthy Kids Survey, 2008-10



Crime Rates

Violent & Property Crime

In 2009, 4,892 violent crimes were reported to Kern County's law enforcement agencies county-wide. Kern's violent crime rate was 586.6 per 100,000 population, an increase of 4.3 percent from the previous year. By comparison, California's rate was 453.6 per 100,000 population during the same year. All violent crimes in Kern County increased over the year with the exception of rape (24.6 per 100,000 population), which had a 13.1 percent decrease. Homicide (9.0 per 100,000 population) increased by 30.4 percent; robbery (159.6 per 100,000 population) increased 2.0 percent; and aggravated assault (393.4 per 100,000 population) increased 6.2 percent.

Property crime in Kern County had a reported incident rate of 2,415.7 per 100,000 people in 2009, a decrease of 2.6 percent from the previous year. California's rate in 2009 was 1,548.1 per 100,000 population. When compared to 2008 rates, burglary (1,128.7 per 100,000 population) increased slightly by 0.5 percent; larceny theft (over \$400) (687.8 per 100,000 population) decreased 4.6 percent; and motor vehicle theft (599.3 per 100,000 population) decreased 5.7 percent.

Juvenile Arrests

Kern County's felony arrest rate among juveniles has declined again for the third consecutive year. The 2009 juvenile felony arrest rate was 1,359.0 per 100,000 youths between the ages of 10 and 17 years, a 17.3 percent decrease from the previous year rate. California's rate in 2009 was 1,290.2 per 100,000 youth population.

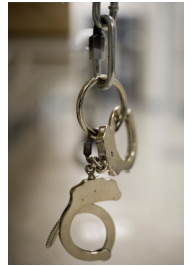
Arrests for violent crimes (282.9 per 100,000 population) decreased by 29.6 percent; property crimes (612.4 per 100,000 population) decreased 14.2 percent; sex offenses (18.8 per 100,000 population) decreased 36.1 percent and drug offenses (76.1 per 100,000 population) increased 33.5 percent.

Sixty-five percent of the juvenile arrests in Kern County were for misdemeanor offenses in 2009. Kern County's juvenile arrest rate for misdemeanor crimes decreased from 2,825.5 per 100,000 youth in 2008 to 2,557.7 per 100,000 youth in 2009. Kern's 2009 rate is close to California's rate of 2,554.9 per 100,000.

Domestic Violence

All family members are affected by domestic violence. Children who live with domestic violence in their homes are at greater risk of experiencing neglect or abuse. During 2009, Kern County law enforcement officers recorded 4,650 calls for assistance in domestic violence situations, a rate of 8.5 calls per 1,000 population. This rate increased from 7.6 calls per 1,000 population in 2008. The California rate of calls for assistance declined slightly from 6.6 calls per 1,000 in 2008 to 6.5 calls per 1,000 in 2009.

In total, 51 percent of these calls for assistance involved weapons. Fifteen percent involved the use of firearms, knives, or other dangerous weapons. The remaining 85 percent involved personal weapons, such as hands, fists or feet.



2012 COMMUNITY COLLABORATIVES

Since 1992, Kern County communities have partnered together as Community Collaboratives to better care for children and families. Twenty of these partnerships have completed an in-depth application process and review by Kern County Network for Children and have been designated Accredited Community Collaboratives. Most Community Collaboratives host a Family Resource Center (FRC) or Community Resource Center (CRC). The following list can be used to refer individuals or families to needed services within their own community.



Family Resource Centers are “one-stop” centers that provide multiple resources for individuals and families in need within their own community.

Accredited Community Collaboratives

Arvin	Arvin Collaborative and FRC.....	661.854.6525
Bakersfield	34th Street Neighborhood Partnership.....	661.636.4240
	East Bakersfield Community Collaborative and CRC	661.631.5895
	Greenfield H.E.L.P.S. Collaborative and FRC	661.837.3720
	Rosedale Collaborative.....	661.868.1219
	South Chester Collaborative and FRC	661.631.5945
	Southeast Neighborhood Partnership and FRC	661.322.3276
Buttonwillow	Buttonwillow Community Collaborative and CRC.....	661.764.9405
Frazier Park Area	Mountain Communities Collaborative and FRC.....	661.245.4303
Lake Isabella Area	Kern River Valley Collaborative and FRC	760.379.2556 ext. 601
Lamont/Weedpatch	Lamont/Weedpatch Collaborative and FRC.....	661.845.2724 ext. 300
Lost Hills	Lost Hills Collaborative	661.797.3042
McFarland	McFarland Community Collaborative and FRC	661.792.1883
Mojave Area	East Kern Collaborative and FRC	661.824.4118
Ridgecrest Area	Indian Wells Valley Collaborative and FRC.....	760.375.4357
Shafter	Shafter Healthy Start Collaborative and FRC.....	661.746.8690
Taft Area	Greater Westside “Together We Can” Collaborative and CRC.....	661.765.7281
Wasco	Wasco Collaborative	661.758.7706
Kern County	Kern Senior Network.....	661.301.6427
	Richardson Special Needs Collaborative and FRC.....	661.336.5482

Other Community Collaboratives

Bakersfield	Oildale Collaborative and CRCs	661.392.2110 ext. 118 or 661.392.8758 ext. 1
	Fairfax/Edison Community Collaborative	661.366.6783
Delano	Delano Neighborhood Partnership and CRC	661.721.5000

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2012/2013 Prevention Calendar

<i>April</i> Child Abuse Prevention	<i>May</i> Teen Pregnancy Prevention	<i>June</i> Water Safety	<i>July</i> Sexual Abuse Awareness
<i>August</i> Keeping Kids Safe In & Around Cars	<i>September</i> Suicide Prevention	<i>October</i> Safe Sleeping For Infants	<i>November</i> Substance Abuse Prevention
<i>December</i> Severe Injuries & Fatalities of Children Due to Abuse	<i>January</i> Gang & Youth Violence	<i>February</i> Safely Surrender Baby	<i>March</i> Kids Home Alone & Safety Tips

Who We Are

The mission of the Kern County Network for Children (KCNC) is to protect and enrich the lives of children in Kern County through the commitment of all community partners by helping to build and sustain healthy families.

What We Do

The prevention of child abuse requires the involvement of the entire community. In an effort to involve our community, the Children's Advocacy Committee was formed to help guide our outreach and education efforts. This committee of private business, faith-based, non-profit, education and public service organizations assist in development of the Kern Cares calendar of themes to promote child safety and well being.

How You Can Help

We all can do small things every day that help children have healthy, safe lives. Anything you do to support kids



and parents can help reduce the stress that often leads to abuse and neglect.

Visit www.kerncares.org to access information and resources for each monthly topic and ways to get involved.

What is Child Abuse and Neglect?

Child abuse is the purposeful physical injury inflicted on a child by a parent, guardian or other adult. Child neglect is any treatment or mistreatment that threatens the child's health, safety or welfare.

Report suspected abuse or neglect.
Child Abuse Hotline: (661) 631-6011

Visit www.kerncares.org each month to learn important prevention information and access free resources

It's Our Responsibility!