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A Brookings Public Forum

MEASURING CHILD WELL-BEING:

A NEW INDEX

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Introduction:

Dr. Isabel Sawhill, Vice President and Director, Economics Studies, Brookings Institution

PANEL ONE: The Index and Changes in Child Well-Being, 1975-2003

Panelists:

U.S. Rep. Benjamin L. Cardin (D-Md.)

U.S. Rep. Dave Camp (R-Mich.)

Kenneth Land, Professor of Demographic Studies and Sociology, Duke University

THIS IS AN UNCORRECTED TRANSCRIPT.

PROCEEDINGS

Introduction

DR. SAWHILL: [I'd like to welcome] all of you to Brookings. We are very, very pleased to have the opportunity this morning to showcase some important work that's been done by Professor Kenneth Land from Duke University, who is sitting up here with my colleague Ron Haskins.

It's on trends on child well-being in the United States, and I think is a very excellent example of how research can catalyze a broader conversation about what's happening to children in this country.

I might mention, before we turn to the program, that Brookings has been doing a lot of work on children's issues over the last few years. I might just mention three of our efforts that are related to today's program.

The first is something that we call the Children's Roundtable, which was a group of scholars that met for about five years, and we put out a book in the middle of last year called "One Percent for the Kids." And in that book, we asked leading researchers in different areas to put forward policy proposals that their research suggested the country should consider adopting.

And we called it "One Percent for the Kids," because when we added up the budget for all of these policy proposals, they came to about an extra one percent of GDP.

And although that seems like pie in the sky, given the fiscal difficulties the country faces right now, we noted in the book that in Great Britain, under Tony Blair's leadership, the British have done exactly that: have devoted an extra one percent

of their GDP to children. So, there are copies of that book, if you're interested, out on the credenza.

We have also, as many of you know, had an extensive effort underway over the past few years assessing the consequences of welfare reform, and looking particularly at the impacts on children and synthesizing the research on that question, putting out policy briefs, doing a variety of events on that set of questions.

Finally, our newest effort in this area we call the "Future of Children." We have been awarded a grant by the Packard Foundation and a group of other foundations to take over the policy journal by that name, the Future of Children. We're doing this jointly with Princeton University, and we will be working extensively on, again, bringing research to bear on policy through that mechanism in the future.

We have a great program for today. In addition to Professor Land, we will shortly be joined we hope by two members of Congress. They have both--they're both a little bit late. One is Professor--I mean, excuse me--Congressman Ben Cardin, who is on his way here from BWI Airport, but we expect will be here soon. And the other is Representative Dave Camp, who we also expect to turn up shortly.

I'm very pleased that in addition to Professor Land and two members of Congress, we have Professor Lindsay Chase-Landsdale joining us today.

Lindsay, as many of you know, is a leading expert in the country on children's issues. She is someone I always listen to carefully because she not only knows the research, she always makes good sense when she talks about it in a very nuanced and intelligent way.

She will be joined by a panel of experts and policy makers, and we're very pleased to welcome all of you here, as well.

I want to thank the Foundation for Child Development, and particularly its president, Ruby Takanishi--Ruby's in the second row here--and her colleague, Fasaha Traylor, who have really catalyzed this whole effort.

They have funded the production of this and the research going into this index, and they are also funding this event today and other activities that will follow on it.

So, with that, I'm going to turn this over to my colleague, Ron Haskins, who will hopefully get a chance to welcome our two members of congress before too long, but, who, in the interim, can perhaps turn to Professor Land.

DR. HASKINS: Don't go too far away. We may insert you as a member of congress in just a moment.

DR. SAWHILL: All right.

The Index and Changes in Child Well-Being, 1975-2003

DR. HASKINS: Well, the business that we're about this morning has two roots. The first is that the federal government collects, publishes, and analyzes or otherwise pays for masses of data. Many of you may be familiar with what is probably the second best federal publication after the Ways and Means Green Book, the Statistical Abstract of the United States, which contains numerous charts about children and families, as well as many, many other issues.

In addition to that, there's a magnificent piece of work that was done by the Federal Interagency Forum on Child and Family Statistics called America's Children: Key National Indicators of Well-Being. This is the most recent edition, but there's several previous editions.

So, we are a country that loves statistics. Our Federal Government pays for many--the collection and analysis of statistics. So, we have a lot of information about children and families.

But second, I'm going to shock you now and tell you that this is a political town, and in this political town, people are fighting for media attention and, most importantly, money. And, so, when decisions are being made about war and peace and Medicare and Medicaid, some people have notices that kids occasionally get lost in the shuffle.

And, so, there is a second strand who believes that statistics could be used to inform the country, to inform parents, to inform program people, and, above all, to inform policy makers at the federal and state level of the condition, the well-being, the status of the nation's children.

And if we could do that and bring prominence to it, that it would be, it could be, a stimulus to policy making and to additional programs for children. So, for both of those reasons, we're very pleased to have this program here this morning, and to welcome Kenneth Land, a long-time professor at the University of North Carolina--oh, I'm sorry. Really, I'm so sorry. He's from Duke. I'm sorry. He went to Duke only 30 years ago, so I got confused, you know.

So, Professor Land has been working in this area for many, many years, and has, in fact, derived a single measure as well as other measures that are associated with the single measure; and we're very pleased to welcome him here. He will give a brief overview of the Land FCD Index and tell you the results since 1975. And following that, perhaps, we will have two members of congress, highly reliable members of congress, who will appear and will be appropriately introduced at that moment.

So, Professor Land, thank you.

DR. LAND: Thank you. So, I'm told this will come up. Okay.

Let me begin--can you hear me? Okay. Let me begin with a brief historical note of appreciation.

Some 25 to 30 years ago, at the other end of the Brookings huge building here, there was an organization with a long title called the Social Science Research Council Center for Coordination of Research on Social Indicators.

And it existed for about 10 years there, with National Science Foundation support, and its objective was to stimulate the production of social indicators that would complement the very good gross domestic product indicators of the economy at that time.

And I was on the Advisory Committee of that Center, and there are at least a couple of people in the audience today who remember that Center and who worked with it. I know Don Hernandez perhaps started your career there, and the Center did focus the attention of the federal statistical agencies on the objective of developing social data, social indicators; and it spun off, among other establishments, Child Trends, which continued that work here in Washington, D.C., and, later on, in the 1990's, the Federal Interagency Forum on Child and Family Statistics was established and began the annual publication of America's Children. And we have built on that work, and you will see that in the presentation here today.

Let me also preface my remarks by saying that Ron asked me to speak for 15 minutes, and I have to say that, you know, asking a professor to speak for 15 minutes is almost cruel and unusual punishment.

DR. HASKINS: So is more.

[Laughter.]

DR. LAND: Well, I just want to point out to Ron that, you know, we chose colors for the presentation today which have, you know, the Carolina blue sky in the background, but, on the top, you see etched above the sky, in Duke blue, the main logo for this presentation.

So, let me get on with the presentation here today. Okay. What is the Foundation for Child Development Index of Child Well-Being, abbreviated form, the Child Well-Being Index. What is the CWI?

What we are attempting to do here is develop a composite measure of trends over time in the quality of life or well-being of America's children and young people. It consists of several interrelated summary indices of annual time series of 28 social indicators of well-being.

The objective of the CWI is to give a sense of the overall direction of change in the well-being of children and youth in the United States as compared to a base year. The base year we use for our longest historical comparisons is 1975, and that's because several of the indicator series that we use in constructing the CWI began to be available in the mid-1970's.

Now, the CWI is designed to address the following kinds of questions:

Overall, for example, on average, how did child and youth well-being in the United States change in the last quarter of the 20th century and beyond?

This project began when Ruby Takanishi, the President of the Foundation for Child Development, approached me and indicated that she sometimes gets this type of question from journalists and others who say things, like, well, you know, you're engaged in all these efforts, and there are all these other groups engaged in efforts to

improve the well-being of children in the United States, and we have many kinds of studies out there and indicators of this and indicators of that, but really how are we doing overall? Can we answer that question?

And, while our efforts certainly will not be the last word on this, and we will continue to work and improve our indices in the future, and there will be better indicators series developed and that can be incorporated into this sort of project, at least we're beginning to focus our attention on this question at this time.

So, we ask questions like:

Did well-being improve or deteriorate, and by how much?

In which domains or areas of social life?

For which age groups?

For particular race/ethnic groups?

How do they compare for each of the sexes?

And did race/ethnic group and sex disparities increase or decrease?

Now, a brief word about the methods of index construction: we use annual time series data, to the extent that we have it, and in a few cases, we interpolate data series that are not available on an annual basis from vital statistics and sample surveys that have been assembled into some 28 national-level indicators in seven quality of life domains.

Now, let me point out that we're now resting on about 30 years of studies of well-being, quality of life, life satisfaction, and happiness that have been conducted since at least the early 1970's, and what we did in beginning this project is we took advantage of that body of literature. Because, you see, back in the 1970's, when the SSRC Center and others were beginning their advocacy and development work for

social indicators, we really didn't know what we know today about the kinds of things these studies reveal over and over again about the aspects of life that lead to good adjustment, to happiness, to life satisfaction.

And what we did, when we started this project, is we looked at that literature, and we found that seven so-called domains of well-being, areas of social life, occur over and over again in study after study. And we identified these.

One of them, of course, you would imagine is material well-being. A second is health. A third pertains to what we call safety and behavioral concerns. Productive activity. For most children, this is educational attainments. A place in the community. Attachments to social institutions, such as participation in schooling or work institutions. Social relationships with family and peers. And, finally, an emotion and or spiritual well-being dimension.

Now, again, these seven areas of social life occur over and over again, and study after study has verified that there out there in individual's lives. Now, let me remark that, of course, get turned on, probably by something that's unique to ourselves; and, so, in addition to these seven areas if you look at the quality of life studies, you'll find that, in focus groups and sample surveys and so forth, individuals will identify some unique aspects of their lives that really turn them on. But these seven tend to occur over and over again.

In this sense, what we have here in the CWI is what you can think of as an evidence-based measure of trends and averages of the social conditions encountered by children and youth in the United States.

So, it's evidence-based in two senses: evidence-based in the sense that we use data series that are based on real empirical data; and evidence-based in the sense that its organization builds on some 30 years of studies of well-being and quality of life.

So, our methodology--and do I have to wing through this, Ron; are you going to pull the hook out if I go over?

DR. HASKINS: No, you've got about 45 seconds.

DR. LAND: Each of our 28 key indicators is indexed as a percent change from a base year. Our methodology here is kind of like a Consumer Price Index methodology. Subsequent annual observations are computed as percentages of the base year. The indicators, a couple of them, began in the mid-1980's. These use the corresponding base years from the '80's.

The base year is assigned a value of a hundred. Directions of the indicators are oriented such that a value greater or lesser than 100 in subsequent years means the social condition has improved or deteriorated.

The time series of the 28 indicators are grouped into our seven domains, and the domain-specific summary, or composite indicators are constructed within these summary indices. Each indicator is equally weighted, and the seven component indices are combined into an equally weighted summary index of child and youth well-being.

Why equal weights? Well, I have a methodological paper with a statistician colleague, and we show that in the absence of a strong consensus on a preferential ordering of weights, it's better to equally weight because you get more consensus around the equal weights than you do around any other type of weighting scheme unless there's strong consensus on what the weights should be. And I don't think there's strong consensus at this point.

So, some significant findings. The following chart shows some changes over time in the CWI and its various components. I think everyone here has a copy of our 2004 report. We'll look here at a couple of minutes for the overall index of child well-being, the domain specific indexes. We look at some particular indices on obesity, single parent families, poverty, criminal offending and victimization, teenage birth rates and suicide, some race specific indices.

This is the first one. This is our overall summary composite index, and, again, using 1975 as the base year with a value of 100, we see that this index kind of bounced around in the late 1970's around that value, and then it began a long decline that continued through the '80's into the early 1990's, and since then has shown a fairly steady increase, with increases in recent years slowing down somewhat.

Here is the spaghetti chart. This one shows the domain-specific summary indices, and I'll remark about some of the findings here. I'll point out to you that our-- that some of these are closely correlated with changes in the overall macro economy. Material well-being you might expect to be one of these, and, if you look at the material well-being diamond series here, you see the imprint of major economic expansions and contractions: in the early '80's, a recession; in the early '90's, a recession; and an expansion in the late '90's; and a somewhat tapering off since then.

Some of the other series composite indicator series here show different trends, and I'll remark about some of the findings on those in just a moment.

I want to show you some of the sensitivity analyses we've done. This is our health domain summary index, with and without the obesity series. And you'll see that this series show substantial improvements in the early part of the period, up until the mid-1980's, and kind of an oscillating trend since then. But if you factor in the trend

towards children being overweight, you get an overall composite index that's pulled down quite a bit.

This is a particular component of the safety and behavioral domain of well-being. It's based on the National Crime Victimization Survey data on violent crime victimization and offending for ages 12 to 17. And the victimization series shows again a kind of oscillating trend up until the mid-1980's: a takeoff beginning in '87 to a peak around '94, and a slide since then.

And what's remarkable and really confounding to us criminologists is the continuing slide here, well beyond and below the levels observed in the early part of the series. This upsurge here, of course, was associated with the crack cocaine epidemics and wars of the late 1980's and early 1990's.

Here is another series. It's a major component in our emotional well-being area. This is the suicide rates for ages 10 to 19, 1975 to 2001, with our projections. And, of course, we're not constrained as are the America's Children folks being part of the Federal Government. They have to be very careful as statisticians. We can study the time series properties of these indicator series and do our projections. And, so, we take the bold step of projecting, in some cases, 2002 and 2003--in most cases, just 2003. But, in any case, you see that there was also a period in which the suicide rate went way up compared to its early years, and then has come down more recently.

This is from our race and ethnic specific group studies, and this shows our overall composite index for white children and youths, African American children and youths, and Hispanic children and youths.

And, of course, these are three large and heterogeneous population categories, and another problem with these data is we can only go back to the mid-1980's, because most of the data series don't have these race and ethnic identifiers before then.

What they do show is that our minority children and youths did suffer more during the downturn in well-being in the late '80's and early '90's, but since then, the overall composite indices have come up quite substantially, just as for the white children and youths.

So, some conclusions. I know Ron is going to get the hook and pull me off the stage here in a moment.

The overall well-being of children and youth in the United States shows substantial improvement in the seven years from 1994 to 2000. These improvements continued in 2001, and are likely to continue through 2003, but at a slower pace. However, historically, the CWI showed a decline in well-being for a number of years in the 1980's and reached low points in 1993 and '94.

These declines mirror economic restructuring and especially in the 1980's recessions and expansions and demographic changes.

The replacement done by major demographic change was the replacement of the GI generation of parents, those parents who fought World War II and the Korean War, and then raised the boomers; the replacement of that generation of parents by the boomers themselves as parents in the 1980's and 1990's; and the changes in social institutions that the boomers have brought with them, such as changes in family structures, definitely shows up in the--leaves its tracks on the imprints of these indices.

Only since 1999 has the CWI improved to above the 1975 base year levels. A number of key indicators have had a significant impact on the CWI over this 25- to 30-year period. Clearly, obesity, and we need to address that as a society, both for adults and children in contemporary times. Single parent families and its trends. Poverty. Criminal offending and victimization. Teenage birth rates and suicide. Each of these indicator series have had substantial impacts over the 25- to 30-year period of the CWI.

Although children and youth in the United States currently are faring at least better than they did in 1975, they could be doing much better. We engage in an exercise we call best practice frontier by using the best value on each of our 28 indicators and computing what our overall composite indices would be if each of our indicator series were at their best historical values for this historical period. And we find, when we do that, that we could be some 15 to 20 percent higher in recent years than the observed values.

So, anyhow, that's a brief version of the story we have to tell with this overall composite indicator. It's not the last word. It's a beginning effort. And I would hope a generation from now, just as we can do a lot more than the SSRC Center could have done in 1975, I would hope a generation from now, this type of effort could be much improved from where it is today. Thank you very much.

[Applause.]

DR. HASKINS: Thank you very much, Dr. Land, and now we're fortunate to be joined, and I mean fortunate, by two very influential members of what I think could safely be called the least influential subcommittee of the most influential committee in the Congress, the Human Resources Subcommittee.

And I would call your attention that this Committee has jurisdiction over a host, a mass, of children's programs, including Supplemental Security Income, Cash Welfare, the Child Support Enforcement Program, almost all of the child protection programs; has substantial influence on the Earned Income Tax Credit. So, this is a Committee that really has a lot of responsibility for children's programs.

And we're very pleased to have Dave Camp from Michigan, who's a long-time member of that Committee, and also probably one of the most important Republicans in the House on children's issues. He was the acknowledged House leader back in 1997, when the Adoption and Safe Families Act was passed.

And Ben Cardin, who I think is acknowledged as the House leader among Democrats on several issues, including most recently the Reauthorization of Welfare Reform Bill. Hopefully, when this meeting is over, we'll get Camp and Cardin together in the back room and let them cut a deal, and we'll get a bill this year, I hope.

So, thank you very much. We've asked them to speak for eight minutes, and then we're going to have questions. So, why don't we start with Ben Cardin?

CONGRESSMAN CARDIN: Ron, thank you very much. First, I disagree with you. The Human Resources Subcommittee is the most influential subcommittee, and I was going to say that, you know, since we've had new staff there, the subcommittee has gotten--

DR. HASKINS: The influence has gone up.

CONGRESSMAN CARDIN: Right. Exactly. I do want to acknowledge Nick Wynn, who's here, of course, as staff director on the Democratic side for Human Resources, and is very, very helpful to the entire Committee. And Ron's absolutely right: if Dave Camp and I could cut a deal right now on TANF Reauthorization, I think

you would have a very good bill that would be sent to the President. And I'm not so sure the President would sign it, but we would work out, I think, a very good bill.

It's a pleasure to be here with Dave Camp, who I think is one of the most serious legislators in Congress on child welfare issues and child well-being issues, and it's a pleasure to be here with him. He is very much interested in trying to figure out ways that we can get policy changed to help children in America. So, Dave, it's a pleasure to be here with you.

CONGRESSMAN CAMP: Thank you.

CONGRESSMAN CARDIN: Professor Land, I thank you for your presentation. I read the material. I'm very impressed by it. Congressman David Price told me to expect a high quality of product, and it is; and I'm feeling much better about Duke University now since the ACC Tournament, and Maryland beat Duke. It's nice to be here with you. So, it's a pleasure to be--it's interesting. I looked over your material, and I was trying to figure out the reason why all the domains were rated evenly.

And you gave a very good explanation: you couldn't get consensus on which factors are more important than others, 'cause I had a hard time equating a child's faith strength versus material wealth as being equal. But I understand you needed consensus.

If we had a way for consensus in Congress between the Democrats and Republicans, nothing would get done. So, I appreciate that, although I think there is a difference on the importance of the different factors. But you clearly utilized existing material to come up with a well-being index, which is extremely helpful to us, because so many of our policies are affected by the factors that you have used to develop your indexes. And that can only be helpful to us in trying to come together with policy that

can improve the well-being of children. So, we are very much appreciative to the work that was done, and I think it can be extremely helpful.

Now, I'm going to talk--one factor I would ask that we look at and that is this is good national numbers. It would be nice to have it on a state-by-state basis. We do rely on our states to implement many of the policies concerning child well-being. I know that Senator Rockefeller is working particularly with the Annie Casey Foundation to develop a state-by-state analysis for a well-being of children, and I think we should be supportive of that, because it would be useful to see how our states are doing in relationship to each other, and trying to get the best practices.

Now, you went through what your report showed, and I'm not going to repeat that--the decline in the early '80's to the mid-'90's; that we're slightly higher today than we were in 1975. The biggest increases in safety issues on well-being. The biggest decline on health, mainly because of obesity. The material well-being climbed from 1993 to 2001, and then it has now started to decline.

Now, that's what you show. Now, my, of course, inquiry is why did this happen--the causation. I understand that social scientists have to be cautious in this regard, and you have to go through certain protocols before you can make declarations on causation. Well, I'm a member of congress, and I don't have to do that, so--

[Laughter.]

So, I'm going to give you my views as to why we all this occurred.

My first observation is that the overall index in the individual domain on well-being, material well-being of a child, are closely parallel; that if we're looking at one area where we could make progress on the overall well-being of children, I would suggest that the material well-being is the one that we should probably spend our most

attention on dealing with, 'cause so many other factors are affected by that. That's just commonsense tells us that. But there have been many studies that have shown that the material well-being of children will affect many of the other factors that you have used in developing your indexes.

Considering that the material well-being is currently moving in the wrong direction, even though the index is slightly increasing overall, I would suggest that that could be a forecaster of some problems ahead, on the overall well-being of children, and it's something that we should be very concerned about.

Now, even if we agree that we need to do something about material well-being, there would be a tough time for us all reaching consensus as to the best way to achieve material well-being of children. I think we all would agree that we need to improve the economy and create new job opportunities. Democrats and Republicans agree on that. We certainly don't agree as to how we're going to get there.

So, let me first mention by history going back onto to two policy changes that we did that were done by Democrats and Republicans working together that I think made a major difference. And that is it's interesting to show that the material well-being really started to take off after we increased significantly the Earned Income Tax Credit, which was a matter supported by both Democrats and Republicans, and a matter that I think added greatly to the fact that we've been able to show an increase in the well-being of children.

The second is welfare reform, which we've all been involved. Ron Haskins, of course, was the principal staff person who developed it for us, the welfare reform bill, that I think also was a very positive step in increasing the well-being of children. So, that's two issues that we have. I'll make one other observation. I looked at

the--the greatest growth in the well-being of children took place during the eight years that President Clinton was President of the United States. Now, to me, that's a very interesting observation. So, it's--just put that on the--maybe David has a different view on that, but I just thought I would like to make that observation.

I'll make one other observation in this regard, and that is the overall index has increased modestly since 1975; yet, children living with a single parent, the social relationship has actually had a marked decline.

Now, I mention that in that I strongly support the positive impact of a two-parent family on children. I think that's an important factor, but I would suggest that promoting marriage is not the only thing that we need to do in order to deal with child well-being today. And I don't believe it's the primary core factor that needs to be dealt with.

Some suggestions. On child obesity, it needs attention clearly. And one of the problems is overeating. But I would suggest that children are not overeating today because they have too much money. And there are some people who might suggest well, perhaps we should put our money elsewhere rather than in nutrition and food programs. I would suggest that we could do a better job in education so children eat better foods and that, in many cases, the junk foods are cheaper; and that eating well sometimes is a result of the financial ability of our children, the resources that they have.

Reducing child poverty, to me, should be our number one consideration, and I take that out of here. And there's many things that we can do to try to reduce child poverty. I would suggest extending unemployment insurance. Unemployment compensation would be one area that we could do it. We know that that would cut their children, those who receive unemployment compensation, poverty rate in half. We

could increase the child care amounts. Democrats and Republicans are both in agreement on that. Let's figure out a way to get it done. Increasing child care would certainly, in my view, have an impact on this. We could raise the minimum wage-- another area that I think we can deal with child material well-being. We could have fair tax policies, helping the six and half million low- and moderate-income families that were left out of the child tax credit last year. We could improve the foster care system, and here David's been working very aggressively. Our Committee has taken up several of the child foster care issues and improved the efficiency of our child foster care system.

We could enact welfare reauthorization. I really do think that what Ron said is right: I think Democrats and Republicans should get together and enact a multi-year reauthorization bill. But it shouldn't be dictated by one philosophy or another. Let's sit down and let the legislative process really work and produce a fair bill, and David and I have had a slight disagreement as to whether this bill currently underscores the importance of reducing child poverty enough. I think it should be at least equal in importance to the other already statutory goals within the welfare system itself.

And then lastly, I would suggest education and training is a key factor in allowing low-income families and families that are on welfare to be able to move up the economic ladder of success; and anything we can do to increase education and training on low-income and moderate-income families we should be encouraging and not discouraging.

The bottom line is that I think the Brookings Institution has done a wonderful job--the Institute has done a wonderful job in bringing forth Professor Land

and this program. It allows us a forum to talk about the well-being of children. It's clearly America's most precious resource, and it really speaks to our future.

So, I thank you very much for bringing Professor Land here, and allowing us a chance to talk about ways that we can improve the well-being of children here in the United States.

DR. HASKINS: Thank you very much. Dave Camp. Thank you.

[Applause.]

CONGRESSMAN CAMP: Thank you, Ron. Well, thank you, Ron, and thank you all for being here, and it is great to be here with Ben Cardin. We do work together on a lot of issues. He's really a leader on the Committee, and really the person that a lot of us want to work with on issues. I mean, I'm glad you introduced him as Ben, so we don't think his first name is Portman.

We really do try to come together, particularly on these issues, and they're so critical. Obviously, the children in today's world are going to be our next leaders and really are the future of our whole country and society, and Professor Land, thank you for your report.

Ron and I worked very closely together when he was on the Ways and Means Committee. I don't know if you really work with Ron. You sort of work for him, if you know what I'm talking about.

[Laughter.]

But we did accomplish a lot, and we're in some very difficult times, really difficult debates, in terms of how do we really approach the whole question, not just of welfare, but of how to help children and families. And, so, you know, I appreciate all

the work you've done over the years on this, Ron. Ron really has been an intellectual powerhouse in driving these issues. In fact, you know, and Ben has as well.

And, you know, when Ron asked me to come here, I said, you know, who's going to be on the other side. And when I heard it was Ben, I said yes instantly. I mean, because he's somebody that you really can and have a civil discussion with, and sometimes that gets in short supply.

But, let me just say I think these studies show that the policies in place really have benefitted children. Now, while Ben might point to the election of the Clinton Administration, I would say that the decline in child well-being stopped in 1994, when we had a Republican Congress, if you look at the data, and started increasing in 1996, when we had welfare reform pass the Congress.

But I guess that's one of the things about data: you can make it say pretty much what you want at times.

But sort of kidding aside, I do think that we really have seen some levels that have benefitted children, some policies that have benefitted children.

And what's also I think exciting and interesting is that these benefits have extended to all children, regardless of ethnic background. And I think that is important, because in some areas, we're seeing, particularly in education, a big divergence there.

So, I think overall to see that in all ethnic groups I think is something that's very positive.

And to see this go on really at a time when we had sweeping changes to our nation's cash welfare program, really dramatic policies compared to the way things had been done for ever and ever and ever. And, yet, to see these improvements I think confirms that we did make some positive changes, because we did have a lot of

discussion that if we made any changes at all, we would hurt children. And I think that has proven to be untrue. So, I think that what our--what these proposals, and particularly what welfare was about was really trying to increase child well-being, and clearly that's happened.

I think this obviously shows there's still a lot to do. The number of children raised in single-parent households continues to be an issue of concern, and seems to be one of the key factors that stands out whenever there is difficulty with a child's life. That seems to be one of those regrettable constants that we find, and so I think there's obviously something we can do there. I mean, I've--we've worked in the House, trying to pass legislation to provide some resources to families that are interested in, and particularly mothers, that are interested in marriage and for stronger relationships, and I think clearly marriage has been determined to be the best course of that.

This whole child well-being was first proposed by the Bush Administration in the TANF Reauthorization, and I think has--is an important tool to really track what is happening in society and what are the effects of the policies that we pass? And it is sometimes difficult to find a direct cause and effect.

But I think what's really been proven by these studies is that throwing money at the problem isn't going to necessarily do it. Clearly, resources are an important part of helping children and families, but I think throwing money doesn't equal better well-being for a child.

And I know that Dr. Haskins and Isabel Sawhill have issued a report on welfare reform and beyond that really concludes that, even if the current welfare benefit were doubled, that would do little to reduce poverty, compared to what full-time work,

marriage, high school diploma, clearly education, and I think those issues I see as being much more significant in terms of how we move forward.

I guess I would say that I think it's encouraging to find out that we are doing better, and to see that we've regained some of the ground we've lost in the '80's. And if you look at this in a broad sense, I read this as the economy has a significant downturn, you see a downturn in well-being for children. Clearly, in '82 and the '80's, and we've weathered that. Clearly, in the early '90's, when we weathered with that economic cyclical downturn, and now, while we have a downturn, it's not as severe. For example, in my part of Michigan, the unemployment rates were more than double in the '80 recession than they are now. And things aren't going that well. But I think that's why you see, continue to see, maybe the child well-being number decline maybe on the material side, but--and some of these other factors. And clearly, when you can have improvements, like the death rate for children, having been cut in half since 1975, I think that is a whole host of factors that can have that sort of positive and dramatic turnaround in what was happening to children. I mean, clearly, that is a very positive.

So, I think we're here really to try to find ways to highlight policies that will even make these numbers better and try to work together in a way that we can actually get something done. So, I appreciate the opportunity to be here, and be glad to extend your discussion.

DR. HASKINS: Thanks a lot.

[Applause.]

We are going to have a second panel of people who are largely professionals and scholars.

CONGRESSMAN CAMP: As opposed to the amateurs.

DR. HASKINS: Yeah. No. No. As opposed to people who actually get to make decisions. So, I want to focus your attention on, because you're the two experts on this issue, which is a major part of the thinking behind this index and behind having a single number that says child well-being is at such and such a level, and it's going up or it's going down or historically it's low and so forth, clearly part of the thinking is that people would like to bring attention to children. And to have policy makers focus at least as much attention on children as they do on Medicare and defense and so forth. Do you think that this is going to work? Do you think--can you imagine that a number like this, an index, would be useful for people who want to focus the nation's attention, and especially the attention of the Congress, on children's issues?

CONGRESSMAN CAMP: Well, I think it's helpful. Now, clearly, you can misrepresent, as we sort of did in a light hearted way about what the numbers mean and what they do. And I think you'd have to get behind just the index. But hopefully, having the index will then cause people to go behind that index to find out what made that index up. So, you know, it's sort of like the unemployment rate, too, as an indicator, and you have to go behind what is that--you know, how long have people been unemployed? What sectors of the economy are they unemployed? So, I do think this will be a helpful approach, but, you know, it's--it could be used in a way that isn't helpful, but so can anything--just about anything else.

CONGRESSMAN CARDIN: The difficulty, of course, is to get any significant change in index takes some time. There's not one factor, or one policy, that's going to change the index dramatically. It's a--it's really more of a way of tracking a whole host of different types of policy, and the impact that those policies have on the 28 factors that go into the different domains.

So, I think it is useful, though. I think it is useful for us to track where we are. I'm not sure it will translate into direct policy change by having this index. I think it will help us confront different policy options by reflecting the fact that there are multiple factors that go into this. So, I think it's useful. And I think it--I hope David's right. I hope we just don't use this for a political purpose, but we use it instead to focus in on policy changes that will help us improve the well-being of children.

DR. HASKINS: A related issue is that a number of people think that there is a child--a problem with children, and the index is going down, that that means that we should spend more money. So that an index of this sort is sort of inherently democratic. It's useful that Democrats and people who would like to increase spending to have more programs. Is that correct? Do you see it that way or do you think that's not correct?

CONGRESSMAN CARDIN: I'm trying to figure out if that was a compliment or not.

[Laughter.]

I think it--well, I'm going to take it as a compliment.

Look. What we're trying to do is get America to focus on the well-being of children. I think that's what we're all trying to do. Now, we may, again, differ as to the best way to solve the problem. I happen to believe that we should be putting more resources into children's programs, whether it's education, whether it's nutrition, whether it's job training or dealing with the economic conditions of their families. I think we should be putting more of the resources of government into those programs. So, I hope that it will lead to more public support and legislative action for resources going into these various types of programs.

But regardless of what path is taken, we want to focus America more on the fact that we need to deal with the well-being of our children, because we're not doing a satisfactory job today.

I accept the fact that the index is slightly better than it was in 1975, but I think most of us would have hoped that we would have made more progress during this period of time.

And I think that's the big message, and it's not really a Democratic or Republican agenda right now; it should be America's agenda to deal with, in the next 25 years, making substantially greater progress than we made in the last 25 years.

CONGRESSMAN CAMP: Yeah. I think it's hard to know whether the policy that we passed actually directly impacted this index. For example, we've made dramatic changes in the adoption tax credit, trying to move children out of foster care. You know, has that had an impact, for example, which isn't necessarily--I mean, clearly, a tax credit does mean, in some ways, revenue to the government declines.

But it's not a spending program as such. And those have been pretty much supported, and, you know, very big bipartisan majorities, so, I mean, what it might allow you to do is to dig further to find out if we need to do more of something.

It may not necessarily be spending, but I think what the data shows is that if we did spend a lot more, that doesn't necessarily impact children in the direct way that some of these other programming efforts might in terms of really requiring work in terms of welfare, really maybe having an impact, as some of the reports have said, to have children stay in school longer, because they know they're going to have to work anyway.

And, so, where you end up having positive consequences that weren't necessarily evident from the initial discussion of the bill or the policy.

CONGRESSMAN CARDIN: I would just clarify one point. I believe more resources are needed, but I agree with David: I'm not so sure the answer is just putting a lot more money into these programs. I agree with the point that he's making, but it doesn't refute the question, though, that for material well-being, in my view, should be where we should place our primary focus. It doesn't necessarily require government spending to increase factors that deal with material well-being.

DR. HASKINS: I'm going to ask. Can he continue on this line for just a minute and bring Professor Land in about the policy relevance of these issues. But here--if you think about this index, and for any of you who have had chance to really look at it, smoking, drinking, drug use, single-parent families, non-marital births, almost many, a majority of the issues here have to do with self-discipline, with self-control, with teaching young people to do the right thing, so to speak. And, so the question is--this is what I think you meant when you said you can't just throw money at these problems and expect to solve them.

So, if this is correct, that most of these have to do with individual decisions, will government programs, can government programs, have impacts on young people making the right decision?

CONGRESSMAN CARDIN: Well, clearly government has a role here. We've seen that government policies has affected societal views on things like driving and drinking, on the acceptability of smoking, on education programs, on drug use; have all had major impact, all of which have been initiated through government actions.

So, government actions can have a major impact on acceptable conduct and taking responsibility for your lifestyle, and we need to continue to do that in a very aggressive way in every area that you mentioned. Obesity is an area that we haven't been aggressive on in government; quite frankly, we haven't been. And I think we're paying a very heavy price. The index indicates that we paid a very heavy price, 'cause there hasn't been much attention. We sort of joke about, you know, the hamburger issues here--like, it's not a serious problem of this nation. It is a serious problem. I'm not suggesting there's an easy answer for government, but for government to take a pass on it is wrong. Government has to be part of dealing with responsibility by making it easier for individuals and children and their families to understand the risks involved and that the--that the decision you make will affect your well-being.

DR. HASKINS: Dave Camp.

CONGRESSMAN CAMP: Well, we've been hearing for a couple of years about the obesity issue in children, and so it's not a surprise that--but I think that is one that clearly education programs I think are going to have to be the way to go, and those have to be continual, because you always have a new generation of people coming along, and some of basic concepts of nutrition that are really not as commonly understood as you might think. And you have--you do have this personal choice issue there, too. I mean, my eight-year-old, we were in the car, and just out of the blue, he says, you know, why are they suing McDonald's. He says, isn't their choice to go eat there? And, so you do have to--I mean, there is--but I think an education side of how we deal with that obesity issue is critical, but I just don't think you can ignore in this child well-being issue without the emotional, spiritual side, because if you're going to have the

self-discipline to say--to conduct your life in a certain way, there has to be some emotional and spiritual stability there.

Now, government's role in there is hotly debated, but I don't think we can ignore that that is a critical factor in any child's--I mean, and certainly even certain basic concepts of, you know, treating people how you like to be treated, are I think important to the well-being of society and critical. But, you know, that has been on the rise, and getting hard social science data on that I'm sure is very difficult, too.

DR. HASKINS: Professor Land, would you like to add something to this?

DR. LAND: May I respond. Thank you very much for these comments, and I want you two Honorable Representatives to know I did check you out with David Price.

[Laughter.]

And he said you were both good guys. So.

Several comments. We are working with Bill O'Hara, the Casey Foundation people to develop summary indices at the state levels.

CONGRESSMAN CARDIN: Good.

DR. LAND: Material well-being. Let me focus on that for a moment. I think that, you know, what happened in the early 1980's, and you see the impact, the imprint of the economic recessions of the early '80's and early '90's on that trend, on children living in single-parent families. It really jumps up when that economy goes down. And what happened in the '80's was economic restructuring. Remember the decline of the Rust Belt economy in the late '70's and early '80's, and throwing out of work many men especially who had relatively high wage unionized jobs, who had to

take lower wage jobs and or job retrained, and the adjustments for that, the impacts on families and on children were dramatic and enormous.

And then we had a younger cohort of young adults coming into the family formation and childbearing ages who faced a very different economic environment, and the imprint of that on single parenting was very substantial.

Now, I mention this because, as you both know, we have been in a recently in a no-growth or slow-growth era on jobs and incomes--and we need to recognize, I'm not sure exactly what policies we need to adopt--that's your jobs--but we need to recognize that if that period continues five or ten years, we may setting up another generation of young adults, forming families and rearing children for similar types of problems which impact on child well-being. So, just something to think about.

Interactions on these trends. One of the series we were interested in is the poverty series, of course. And it down trended in the 1990's. And, yes, I believe there is an impact there of the EITC program and perhaps of welfare reform. But there's something else that was going on in that time, and there are people in this room who should get some credit for it. And that is part of the--what happened in the lat '80's was that upsurge in teenage childbearing, and that trend has been down dramatically as well in the 1990's and into the 2000's. And ask yourself: who is at greatest risk of rearing a child in a household with an income beneath the poverty line? Well, certainly at the high end of that group are teenage mothers.

And so, there were nationwide efforts, grassroots efforts, including some national organizations and grassroots efforts, through the '90's, the objective of which was primarily to reduce teenage childbearing. That probably had an impact on the percent of children living in families beneath the poverty line.

The final remark. I want to talk about obesity a little bit. The last time I checked, I think the Department of Agriculture has a county extension and agents in virtually every county of the U.S.; right? Part of their efforts is devoted towards home economics, and I think we could harness the Department of Agriculture county extension folks, together with schools and teachers, to do a lot more instruction on proper eating patterns and exercise patterns and so forth.

What has happened? Another interaction in these series is the downtrend in violent crime victimization over the past decade. Parents have a fear of crime and the risk of their children being exposed to crime.

And, so, what happened is they programmed their kids after school hours much more closely today with soccer practice, piano practice, et cetera, et cetera.

But when the kids are not in practice what do they do? They go home and play video games. And they sip on soda water and eat snacks. And I showed these data series to one of our family sociologists at Duke, and her remark was this obesity thing is entirely correlated with the disappearance of the family dinner. Think about it. Grazing on whatever is in the fridge or available has, by and large, replaced that old ceremony we used to have; not that it's gone entirely, but it's certainly been impacted. And that grazing is done on prepared foods from the supermarket and or fast foods. And I think we can work with the food preparation industries a lot more than we have to get those wholesome foods in there, and we can educate children on the impacts of those foods on their weights and so forth.

So, just some reactions to your comments.

DR. HASKINS: Thank you for that. We're going to take one question from the audience. Please raise your hand. Someone will come around with a mike. And tell us your name and position, and ask a brief question.

Right there, on your right.

MS. PHILLIPS: Hi, I'm Susan Phillips from Connect for Kids. My question is this: do we have any, or do you know of any, data that would allow us to compare these trends for children to trends for elderly in America, for example?

Since I think sometimes in Congress, we're making choices or it should be about how to spend money.

DR. LAND: May I respond? One of the other things I do as a demographer is I work on demography of aging, and we do have a number of studies that pertain to the well-being of elderly folks in American society. However, there's no panel existing to construct this type of index that I know of on a broad scale basis for elderly folks in America. I think that's a project that needs to be undertaken.

DR. HASKINS: Part of the answer to the question is certainly that if you look at--

[Tape change.]

Among the elderly. So, if you look at our demographic groups and said who needs the most help, and just based on poverty and many other problems, you would say the children should be a focus because we've done so much for other age groups. Now, I know the standard answer is well, we can help them all. But as the \$500 billion we just spent on Medicaid drug benefits shows, we don't always spend it on all of them, and that we do favor certain groups.

CONGRESSMAN CARDIN: I think a lot of that would depend on what base year you start with, because that may--it's very true if you go back to the 1930's. It may not be true if you start in 1975. I don't know. So, I think a lot depends on base year. But I'm not aware of any reliable analysis that would compare, on a broad basis, the well-being of children versus the well-being of seniors in a comprehensive way like Professor Land has done.

DR. HASKINS: One more question. Very quickly.

This gentleman right here looks to me like Nick Zill. I think we should-- wait until you get to the mike.

DR. ZILL: I do want to say that Congressman Cardin's comment about the equal weighting is, I think, a key problem here. Just to think that infant mortality rate, the child dying in infancy, is equivalent to a child being overweight in importance I think is really incorrect. And I think there are some approaches that could be used to try to give some weighting to this one.

For example, psychologists all the time do magnitude scaling. There's a stressful life events scale. You could get a sample of parents and say how stressful would these different events be? How important they would be? And that would give you some sense of rating.

The other thing is we have a growing body of longitudinal data that tells us the predictive importance of childhood events for later adult well-being. And using some of that to perhaps give some weight.

I just think something like the race gap in achievement is so important compared to obesity in terms of its effect on--

DR. HASKINS: Professor Land, you want to respond to that?

DR. LAND: Those comments are well taken, and certainly this is an initial effort, Nick, and we plan to continue working and exploring various possibilities.

DR. HASKINS: Well, join me in thanking the panel. Thank you.

[Applause.]

DR. HASKINS: And if you just sit tight for a minute, the second panel will be here in a moment.

THE BROOKINGS INSTITUTION

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MEASURING CHILD WELL-BEING:

A NEW INDEX

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PANEL TWO: The Index and Its Policy Implications

Panelists:

Rachel Jones, Science Desk Reporter, National Public Radio

Kristin Moore, President and Senior Scholar, Child Trends

Bill O'Hare, KIDS COUNT Coordinator, Annie E. Casey Foundation

Don Winstead, Deputy Assistant Secretary, Human Services Policy, Office of Planning and Evaluation, Department of Health and Human Services

Ruth Zambrana, Adjunct Professor of Family Medicine, University of Maryland

THIS IS AN UNCORRECTED TRANSCRIPT.

DR. CHASE-LANSDALE: I'd like to bring--get your attention, please. We'd like to start the second session. If you all would return to your seats, we'd like to start the second session.

DR. CHASE-LANSDALE: Okay. It's on? If we could begin the second session, please? Now, I have to get back on here. Terrific. That was a terrific first session, and now we'll turn to the second session and the policy implications. We're going to have a terrific panel of commentators here, and each will speak for eight minutes, and they're very well prepared; and they have a tough chair. I'm delighted to chair this panel and also would like to thank the Brookings Institution because we at the Foundation for Child Development are just delighted this is happening today.

So, our first speaker is Bill O'Hare. He's the KIDS COUNT Coordinator from the Annie E. Casey Foundation.

MR. O'HARE: Thank you. It's a--can people hear me all right? If you can't, you wouldn't say anything, I guess.

Well, it's certainly a pleasure to be here on this distinguished panel and to be here to be part of this presentation and see this work finally come to light after several years of work.

And I want to applaud Ken and his staff and the Foundation for Child Development to put this out. And I applaud it for several reasons. One is that it is--I think it elevates children's issues and the well-being of children in a way that lots of other things can't do. And I think that's an important contribution to put children higher on the public agenda.

And if I could just add a note to this about the connection between this Child Well-Being Index and public policy, I think it is important for a way that may not be immediately obvious. I think when we think of public policy choices, we often think of individual choices, like, do you have family caps in TANF or--and things like that.

I think there's another way of thinking about public policy, and that's about what issues are higher on the public agenda and what are lower. Certainly, that's changed over the last 10 years, the last couple years, and I think this kind of work moves children's issues higher on the agenda so they get the attention of policy makers and things are more likely to get done.

The second reason I really like this work is that it builds on a long tradition, at least 15 or 20 years, of child well-being indicator work. And, for those of us who have been involved in that, a relatively small number over time, it's gratifying to see that work kind of build on past work and reach this stage that Ken has put it into now.

And I think many ways building on past work is the hallmark of developing a scientific field. And so, I think to some extent, this is kind of a watershed in some ways of the fact that measuring child well-being is now much more of a scientific field than it was 10 or 15 years ago, and that's important.

The third reason I really applaud this work is that I think it's a starting point, as Ken mentioned, and I applaud your courage in putting this out. As he acknowledged and other of those in this work, this is not perfect. And it's a work in progress. And it takes a certain amount of courage to put something out there, but I think it's important to do so because it is a starting point, and it's a place we can advance from. And, so, I think it's important in that respect as well.

Let me shift to what I really want to talk about. Let me--if I could get a show of hands. A little audience participation. How many of you are familiar with the KIDS COUNT Program at the Casey Foundation? Oh, that's gratifying. All right. There's some material out in back if you're not.

But basically, we use indicators of child well-being, state-by-state, to track the well-being of children. And our first report was issued in January of 1990. We have been doing it every year since then. Our 15th annual report is due out June 3rd this year. And the reason I mentioned that is that in 1990, this child indicator business was a very lonely place to be. There was a few people around. Chris I know, and Nick Zill and some that are in here. And there was an interest, a beginning of a field there. But certainly compared to where we are now, it was a very less developed field. And so, it's gratifying to see the Federal Government get involved in this, and just as a quick point--I think Ken mentioned this--but the America's Children Report that the Federal Government now has been doing for six or seven years was a very important starting point for Ken's work. So, it's a way of building on our past work that really I think is a hallmark of science and a very useful way to move forward.

I think, as you can tell from my work or the Casey Foundation work, the KIDS COUNT work, we focus on state indicators of well-being, and one of the questions that came up here from the Congressman is why you haven't done this for states.

And those of you who know this field, know that there's a lot--the data sets are much richer at the national level than they are at the state level; and, of course, much richer at the state level than they sub-state level. And, so, I think there's an opportunity now to move forward on the state level in a way that we haven't been able to

do in the past. And I think there's a combination that say the time is right for--because of three different forces or factors. I'm not quite sure what the word to use is here. But one of them, I'm sure you're aware, was devolution, political devolution, where decision making has been passed from the Federal Government down to the states and sometimes below that. So, this decision making power is now more in the hands of states than ever before, and if that's where decisions are being made, we should have the data at that geographic level to help make that decisions--those decisions.

The second factor, or force, is what I'll call science or technology, and it's a combination of a bunch of things, part of which is just the science of measuring child well-being; that we have a much firmer grasp now of a variety of indicators and measures, and I'm sure Kris Moore could talk for the next several hours about measures she's been working on for the last 50 or 20 years. We've used them now in various surveys. We have a sense of where there's strength and weakness and what doesn't work, and so that field has moved forward greatly over the last 15 or 20 years, and I think is ripe for some real advancement now at the state level.

The other part of this science technology is the computer revolution, for lack of a better word; that we can do things now with computers that were unthinkable even 10 or 15 years ago in terms of getting data, organizing data, making it available to users. So, that field is now ripe I think to move to the state level for making data--collecting data and making it available.

And the third factor here is a little more difficult to describe but I use the word accountability, and what I mean that all this data that we use is collected by taxpayers dollars, and I think increasingly they want to know what they're getting for their dollar. And I think it makes a lot more--we get a lot more support from state and

local people if we can show them data at the state level. I've worked with KIDS COUNT for the last 15 years, and I know, when you talk about national level data, and you're talking to the Governor of Illinois, it's almost irrelevant. What they want is Illinois or probably Chicago or something more detailed. So, I think it's incumbent on us as data producers and data analyzers to try and push this down to the state level to achieve or maintain the support for this effort in the federal statistical system.

Excuse me. One other little factor that's not as big, but I'll mention anyway, I guess. In the TANF--well, the TANF Reauthorization that is underway, for lack of a better word now, the President has said that child well-being should be the main overarching goal of welfare reform or something like that. And I certainly support that wholeheartedly. The next question is well, how are you going to measure well-being and what geographic level are you going to measure it at? And certainly if we're devolving the TANF decisions to state levels and lower, I think we need the data at that same level. So, I think it's important to have whatever measures on child well-being we have at the state level to match up with the approaches that states use for welfare reform.

Let me end with a minute or two in my top five. I've got--there are a whole bunch initiatives underway right now that I think are enormously--are going to be enormously helpful in allowing us to portray a much richer picture of child well-being at the state level than we have been in the past. I want to give you the top five, a la David Letterman. You know, he has 10, but I only have five. And I haven't given a lot of thought to this priority, but a little bit. So, I'm open to suggestion on this.

First is marriage and divorce statistics at the state level. You know, 10 years ago, I could go to the federal statistical system and tell you how many kids were involved in a divorce in Virginia last year. They had a system to do that. Now, we lost

that because of budget cuts in the mid-90's. So, I want to see that kind of system restored. My friends at the National Center for Health Statistics say it would take about \$10 million a year to restore that system and build on it. That seems like a very small price to pay for these events that are so central to our social fabric and our life and certainly in the political realm now. I know the Department of Health and Human Services has an initiative underway to look at where we sit, and how we can get that data restored, either using the old system or some new way. So, I want to urge you to support that and get this--get that kind of data as quickly as we can.

Number four. Some of you may have heard of No Child Left Behind Act. It's got a little bit of press in the last few months. And there's a lot of controversial issues about that that I'm not going to talk about. But one of the things that I don't think a lot of people recognize is that because of that, all states had to participate in the National Assessment of Educational Progress. For the first time ever, we now have math and reading scores for fourth graders and eighth graders for every state and the District of Columbia. We've never had it for all states before. And, in fact, having done KIDS COUNT for 10 years, I don't think we have any measure of outcome, educational outcomes, for states that is available for all states and comparable until this round of NAEP that we now have. So, I don't want to lose that when we--give me two more minutes.

Number three. Slates. State local area integrated telephone system. You may note it because we get immunization data from it, but it's a mechanism which we can use and has been used to gather lots of other data at the state level. The AFCAR, Adoption, Foster Care Analysis and Reporting System, has been underway for about 10 years, and it gives us data now on the most vulnerable children, those in adoption and

foster care and under state supervision. And, for the first time, we have some measures, and we'll continue to have better measures of that very vulnerable population.

And number one on my list is the American Community Survey that's being conducted by the Census Bureau that would give us Census-type data every year for every state and some other levels of geography. But I think the other part about the American Community Survey is the timeliness. We will now get this data about six months after the calendar year ends. And I know for a lot of us, timeliness is a very important issue here. Let me stop there.

DR. CHASE-LANSDALE: Thank you, Bill.

Now, I have the pleasure of introducing Rachel Jones, Science Desk Reporter for National Public Radio.

MS. JONES: I know that most of you would rather I spend my seven minutes explaining to you what the heck NPR was thinking about letting Bob Edwards go--

[Laughter.]

But we're not going to go there. Rather, usually, when I am on a panel like this, I feel that the biggest contribution that I can make is to sort of give you an insight into the decision making at process in newsrooms to sort of explain what editors believe and feel is news; what reporters come up with in that process, to try to let you know about the priorities of what children's issues mean to editors and reporters, and what the challenges are and what the opportunities might be. When this--news of this report came across the desk at NPR, it was shifted over to the science desk, because I have essentially spent the past 10 years in Washington focusing on policy affecting children and families, first for Knight Ridder and now part-time for NPR. And so, they

asked me to assess it and let them know whether or not this is something that in terms of my interest in covering child health and development and research affecting children is this something that we wanted to do.

The initial response from editors in meetings was that this is a compilation of statistics from the past 30 years. And many of these things we've talked about in other stories. We've already done stories on obesity. We've done stories on changing family structure and how it affects children. So what was the news in this report--which was--that was my directive in doing the research on this.

And, so, as I culled through the information, the one thing that jumped out on me was that the years between '81 and '94 were a particularly troubling time for children and youth in America. So, that as the next news meeting, when we talked about that, editors wanted to know why. One of the things that first came to our head was perhaps the crack epidemic. Did this have an impact?

And, so, I was again charged to go out and find out the definitive answer to that question. I called Professor Land, and we had a--actually a very good conversation. He helped me to really think this--these issues through and some of the things he mentioned this morning: the fact that the erosion of industrial jobs and family structures being, children being affected by the fact that their parents lost their jobs during those years; single parent families; more women on the work force. All these things had an impact on child well-being.

So, I was excited after the conversation. I thought--and one other thing I might add. He said that with the economy in the situation that it's in right now, we could be faced with another period or another downturn in child well-being. So, it's sort of a, you know, let's keep in mind what we're doing.

I went back to my editor, and the long story short, she said that that's an interesting policy story, but we don't do policy stories on the science desk.

So, the challenge now, of course, is to interest the national desk in doing this, and this is something that I may or--if not directly or indirectly be able to do. But the point is that when you look at the pieces of this statistic and what the numbers mean, I feel that I'll be able to go back and pitch quite a few ideas from this. For example, the obesity piece. NPR's done plenty of stories on obesity. One of the stories that actually was on my list before this report came out was something called Syndrome X. For those of you who know about that, it's compilation of various results of obesity--hypertension, bone problems. Everything that there--there are complications that come from obesity. What researchers are finding now is that it's affecting more children. It's something that used to be seen in the elderly, but now more children are struggling with Syndrome X.

If I do that story, what I can now do is bring in mention of this child well-being index. I can talk to--interview Professor Land for a story on obesity. Talk about the fact that this report feels that we need to make this a national policy issue.

His comments about county extension offices. You know, I can remember them, being in 4-H as a child. Perhaps they have a role in educating children and families about nutrition. This is something that maybe I could look into. And certainly for an NPR story, that would be great to go into the local county extension office and see what's going on there.

So, I bring these things up to you to say that it's incumbent upon researchers, like Professor Land and others who deal with indices of child well-being, particularly when it comes to policy, to reach out to media organizations, to reporters, to writers who are interested in these issues and to sort of flag them on the fact that there

are ways to report on these issues based on data that enlighten, illuminate. One of the aspects of policy that we cannot ignore is that readers and viewers and people who are consumers of news really are the ones--the engines that are driving a lot of the development of policy. And when politicians say that we respond to what the public wants, the public has to be educated about how these issues affect their lives; how they affect children's lives; and how child well-being affects their whole community. So that--but, again, the education of editors and reporters about these issues is very important, and there are some very encouraging trends that lead me to believe that it's a more receptive attitude in some newsrooms.

The Foundation for Child Development, for example, has been involved in training journalists in child and family policy through their program at the University of Maryland. Also at the University of Maryland is the Casey Journalism Center. It also trains journalists in child and family policy issues.

So, there's a lot to be positive about. But, again, I would end by saying that one of the things that I did at the Knight Ridder Washington Bureau was to try to develop or to raise awareness or interest in a concept of a news wire service that would focus exclusively on children's issues. And I say that to say that the biggest challenge in all of this is something that we can't ignore and that is the definition of what is news. And, as long as the definition of what is news is crime, war, political strife, tension, negativity clashing or whatever, the well-being of children is simply not going to be in the top 10. That's just the reality of the situation, so that we have to, from a media perspective, individual reporters and companies and editors have to get to the point where we realize that these issues are not just on the periphery. They are not just excess things. They feed into actually the well-being of our country and our society as a whole.

DR. CHASE-LANSDALE: Thank you, Rachel. Now, I have the pleasure of also introducing Don Winstead, who's here as the Deputy Assistant for Human Services Policy, the Office of Assistant Secretary for Planning and Evaluation in the Department of Health and Human Services.

MR. WINSTEAD: Thank you very much, Lindsay. I've got some slides that I'm going to show--in case you didn't pick up a copy of them; I hope there were enough copies for folks to have--for two purposes: one is to kind of orient you to a couple of other things that may be of interest if you're interested enough in the issue of indicators to come out today; and then also to maybe frame a couple of comments that I'd like to make.

First of all, as Congressman Camp mentioned and Bill mentioned also, the issue of child well-being is an important policy issue for the Administration. The President's plan to strengthen welfare reform, Working Towards Independence, did propose to establish the well-being of children as the overarching purpose of the TANF program, and here's a quote from the plan. So, this is an issue that we're vitally interested in and see this as a key feature of what we hope will be welfare reform and TANF reauthorization soon.

I'm going to skip over this, and I'm going to come back to it in just a few minutes, just for some concluding comments. I wasn't sure what questions people might ask, so I thought I'd give myself some that I wanted to answer.

A couple of things about some comparisons with some other reports. There's been mention of America's Children: Key National Indicators of Child Well-Being that Ron held up earlier. If you would like to see more about this one, and there's a reference in here on that that gives you a little descriptor, but if you go to

childstats.gov, you can get to that report; and this is a report that I think anyone who's interested in this subject ought to take a look at. And there's information in the material, the written material, about the report and also about the work of the federal statistical agencies' Federal Interagency Forum on Child and Family Statistics that puts out the report, the indicators that are included, and all of that.

I'll also mention if you go to the ASPE Web site at hhs.gov, there are a couple of other reports that you can get to, including Trends in the Well-Being of America's Children and Youth--this is the 2002 edition; 2003 will be out right shortly--and Indicators of Welfare Dependence, the 2003 report is out; is a report to Congress. That's also on our Web site that also includes information on this topic.

There's also a new report that's not on the Web site yet, but will be soon, that Kris knows about, Social Indicators: Measures of Children, Family, and Community Connections, that we've been working on that is looking more in a community context of social indicators. And in the written material that's out on the table, we've done an analysis, just laid out some of the domains in Professor Land's index, as well as America's Children and the social indicators of what some of the different domains, how many indicators within each domain. And there's a two-page matrix that lays out all the different indicators that are in these reports and kind of crosstabs them, just to give you a sense of some other possible approaches to looking at this issue.

But I want to come back to the questions for myself about the index, to close with that.

First of all, I think if we want to address whether it's useful to have an index, there are kind of two key sub questions: first of all, is it informative? And secondly, is it a basis for action?

And I think the Land child welfare index is informative. I think it does add value over having individual indices if: and the if is to the extent that it helps focus attention on the issue. And I think to the extent that it's successful in focusing attention on child well-being then that is an added value for this.

There's material on how it compares to other reports, so a lot of interesting issues about what indicator goes in what domain, et cetera, and I think also an important question is, does this tell us more than just tracking, for example, child poverty, since so many of these issues come off of that. And also I think we need to face the issue of could it be misleading. And I think part of the answer there is once you focus attention, you need to get deeper into the indices and into the individual measures that are behind that. For example, with material well-being, I note in the Land index that one of the measures of material well-being is access to health care, and if you look there, you see some different trends I think that are important. And if you look at what's happened since the implementation of the State Children's Health Insurance Program, you see some important things there that are important trends. So, you need to really get past the domains into the individual indicators to get the most meaning.

The other issue I think is it the basis--or is it a basis for action. And being a former state administrator, that's what I think is the most important is do we get action at the national, state, and local level.

To me, an indicator, it's sort of like going up in the fire tower and looking out on the horizon and seeing smoke. You don't really know until you go look further whether a forest fire is about to start or whether there's a barbecue going on. And I think that indicators need to propel action.

Nationally, and Bill mentioned some efforts to try to get state data, I think one of the things nationally, if I had my wish list, one of the things that we most need to do is to get more longitudinal data and to get richer context for information. Taking indicators and taking cross-sectional data and arraying it year by year does not make it longitudinal. Okay. You can draw a trend line, but I think with a lot of policy things on the national level, enhancing the SIP, doing--looking at other important sources of longitudinal information is something that we really need to give serious consideration to so we can go from taking snapshots to making movies in terms of understanding what's going on.

At the state and local level, I think that while state indicators are very important, and as a former state administrator, you'd hope I'd say that, but I think the most important thing is being able to drive down to local indicators. If you have state-level information but you don't have sub state-level information, it can be very frustrating and sometimes can make it difficult to pinpoint action. There is no such thing as aggregate performance. There is only individual performance that gets added together for the purpose of making charts. Okay. And if you're really going to affect what happens in program performance, you need to disaggregate data, and you need to go down and be able to break it down by country, by service center, et cetera. And I think that's important.

So, getting better and more useful local data I think should also be a priority. I would echo Bill's call for the ACS. I think that's going to be an important contribution to having better local data.

I'll close by pointing out, or making a comment on the issue of weighting that in the 2000 Olympic Decathlon head-to-head, Chris Huppins of the U.S. and Erke

Newell of Estonia each beat each other in five events, and, therefore, were tied. It was through weighting that Erke Newell got the gold medal and Chris Huppins got the bronze.

[Laughter.]

DR. CHASE-LANSDALE: Thanks very much, Don.

I have the pleasure of introducing now Ruth Zambrana, who's the Professor of Women's Studies and Director of Research at the Consortium on Race, Gender, and Ethnicity at the University of Maryland, College Park.

DR. ZAMBRANA: Thank you. Good morning. I want to thank the Brookings Institute, and especially Dr. Ruby Takanishi, a courageous leader and champion for children and families, for this invitation and the opportunity to comment on this index, particularly with respect to its utility to guiding federal social policy.

I have written remarks, because, as Dr. Land mentioned, it's difficult for professors to do anything in less than three hours. So, I will read my remarks.

My remarks are shaped by the focus of my work in the last 10 years in four different areas: my work on indicators of child well-being, by race, ethnicity, and socio-economic status across the domains of health, education, and child welfare; my work with Family Support America, a non-profit organization based Chicago, whose mission is to change the way America works with families to improve the lives of children; my past work with the Casey Foundation on the Neighborhood Transformation-Family Development Initiative; and lastly, more recent work on racial and ethnic disparities in major domains of social concern, namely educational success of economically disadvantaged youth, welfare reform and transitions, and civic engagement.

Although new knowledge in the last five years has acknowledged a wealth divide, a digital divide, a health divide, that is, disparities, this information has not sufficiently provided the catalyst to move beyond aggregate national categories to state- and community-population based data as key sources of uncovering what do we need to do differently to change children's lives.

Thus, I wish to contextualize my remarks within the frame work of what we as researcher-scholars have learned over the last two decades about data that has been disaggregated to specific populations, regions, income groups, et cetera.

A significant lesson has been that the quantification of items, in index or report form, does not tell the whole story of what is happening in different communities and people's lives. They fail to capture two key contexts: one is the assets and strengths, or resiliency, of those groups or individuals who rise above the trend of the aggregate norm and the group or individuals who, for multiple reasons, fall below or outside the aggregate norm.

Secondly, when data are disaggregated by state, race and ethnicity, and socio-economic status, there are impressive differences that demonstrate that all is not well, and that progress has not been an equal reality for all. These findings speak to unequal treatment, such as the recent report by the Institute of Medicine, "Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care," and our work at the University of Maryland's Consortium on Race, Gender, and Ethnicity for the Casey Foundation, where data show that structural barriers in public schools and public welfare institutions contribute to discriminatory practices that do not strengthen individual or community assets and goals.

Thirdly, there are multiple limitations in the use of national data sets and surveys, such as the underrepresentation of low-income populations, language minority U.S. citizens of Hispanic descent. And often times, these data are not representative of many inner-city communities, rural communities, and U.S.-Mexico border communities where about 75 percent of the individuals are U.S. citizens.

Overall, the factors necessary to include a child well-being index have been the subject of extensive debate and discussion, and certainly no index can accurately include or measure all important areas.

However, the increasing development of data by race, ethnicity, and socio-economic status and the plethora of work on poverty and disparities can inform our work on children.

My remarks fall into three areas: what have we learned about factors that are associated with child well-being? Does the index include what we know, and does it reflect the accurate reality of low-income African American and Latino children in this country? And how do the findings of the index, coupled with other information, provide a basis for federal social policy?

First and foremost, we know that poverty matters, because it is associated with economic instability, stress, poor nutrition, limited access to quality services.

Race and ethnicity matter. However, race and ethnicity cannot be used alone to analyze data, as its meaning is best understood by the interrelationship of race, ethnicity, and poverty. These meetings are further mediated by the seemingly invisible dual service systems in education, health, criminal justice, to name just a few.

Community matters. The after-school activities, the safety of the community, the police, the recreational activities, and the communities where children live influence their well-being.

Does the index reflect the lives of low-income racial and ethnic children? In reviewing these indicators, I looked behind the scenes, as so many people have commented, to illustrate my contextual comments. These are not a critique, but a heuristic exercise.

For example, the indicators of social relationships are two. Undoubtedly, there are a variety of operational definitions for this concept. However, in examining this variable for children, I think of social relationships as measuring connections to the external world of activities.

Thus, I asked myself what are the implications of using the indicator of rate of children in single families as a measure of social relationships? Does it imply that a single parent is the only and most important social relationship?

What we know is that single parents is related to material well-being. At the lower the income of the parent, the less likely that child is to do well. But as a student of children's lives over the last 10 years, I suggest that there are other important indicators that measure children's social relationships and reflect their life experiences.

Two examples are television watching for African American and Latino children, which is twice the rate for white children. The other one is participation in after-school sports, culture, and arts, which again we see that Latino and African American children are half as likely as white children to engage in any enrichment academic or cultural activity.

So, the concern for the well-being of grade school children has drawn attention to these arrangements in out of school activities, and this concern is around social relationships.

Let me say the most unsettling set of indicators are under community domain. Community domain usually involves institutional variables. For example, measurement of the quality of the educational system, number of computers available, number of public and private pre-schools, number of educational opportunities.

I see I have one minute. So, I'm going to go to my recommendations.

I offer recommendations based on what is behind the scenes of these data. My recommendations are also based on the fact that we cannot focus on children without focusing on family. We strengthen families in order to strengthen children.

Child well-being is strongly associated with economically stable families. In looking behind the data, we would see that there's a relationship between race, ethnicity, economic status, and child well-being. Therefore, I think a federal social policy is imperative is a national living wage for individuals and families, if we're going to improve the lives of children.

Child well-being is strongly associated with good health and mental health status. We need a universal health insurance program for families and children, not just for children. Children need healthy families in which to thrive.

We need a set of services, family support services, that assure that families remain health, strong, and stable. And these include the support services such as civic engagement, information on services, et cetera.

We need to build the community infrastructures. It is not about throwing money at programs. It is about building human capital in the communities. And I think our Congress needs to understand what this means.

Let me just end that I think it is finally clear to many of us that the national discourse on child well-being cannot remain color blind or economics neutral. If we are to sincerely develop federal social policy that enhances the well-being of all children in the United States, we must strengthen their families. Thank you.

DR. CHASE-LANSDALE: Thank you. Thank you very much.

And now, our last speaker is Kristin Moore, who is President and Senior Scholar of Child Trends here in Washington.

DR. MOORE: I thank you.

Well, you always like to have your last speaker kind of wrap things up with some very definitive, decisive conclusions. So, here I am.

[Laughter.]

DR. MOORE: Child Trends has done some polling, in collaboration with Bill O'Hare, that indicates that Americans are very poorly informed about trends in child and family well-being. The public is not aware that the rate of teen childbearing is down. The public does not know that welfare rolls are down. The public does not know that violent crimes among teens are down.

In general, the public is unaware of positive trends and exaggerates the magnitude of problems.

This lack of information on the part of the public suggests to me a pretty important argument for a single, simple overall indicator.

It's easy to understand, and it might attract attention. For example, this meeting today. Perhaps a single indicator of child well-being would result in a better informed public.

A third advantage is that a child well-being index reflects a whole child perspective. It doesn't treat children as segmented silos, where issues like drug abuse, pregnancy, and school success are treated as unrelated issues.

Fourth, a single measure makes it much more feasible to provide race-ethnicity contrasts. You can compare one index across three race-ethnicity groups, as Ken has done, in a way that is hard to do with 25 or 80 indicators.

Similarly, fifth, you can provide each contrast when you have one indicator.

And sixth, a child well-being index is useful for international comparisons if the measures are comparable.

How are we doing in terms of both levels and trends of child well-being compared with other nations?

And seventh, the work done by Ken Land and his colleagues is based on theory and precedent in that it draws from a decade's long body of work on social indicators. Although I would have preferred that the theory reflect child development research rather than being a sort of downsized adult theory, it is nevertheless a pretty workable framework.

And eighth, as a member of Ken's advisory group, I can attest to the fact that this work has been very carefully and thoroughly--thoughtfully done. They've done sensitivity analyses and comparisons, and invited input from many people on many occasions like today.

On the other hand, I am concerned that the child well-being index mixes measures of child well-being with measures of family and adult well-being. I have been saying for years that health insurance, poverty, and parental employment are not measures of child well-being. They're important measures of family context, but they're not measures of child well-being.

Measures of child well-being assess the status or development of the children themselves, such as their health, academic achievement, and behavior.

Child outcomes are shown on the right, for example, low birth weight, teen birth rate, reading and math test scores, overweight, suicide, religious attendance. Adult and family variables, shown on the left, include poverty, parental employment, income, single parenthood, and these are more inputs to child outcomes, not measures of child well-being. And I feel quite uncomfortable including measures of family context among the measures of child well-being. In fact, I am more comfortable with tracking child well-being within domains, such as health, education, and behavior, than I am with creating a single, overall index that averages across the different trends.

And I want to share with you a chart prepared by David Johnson, of the Bureau of Labor Statistics, who I think is here today. And it shows indicators in America's children in an overall index and in four domains.

The economic domain is shown in orange. Health is in pink. Behavior is in green, and education is in blue. And then the overall is the dark line in the middle.

Well, as you can see, the trends differ a lot across the domains. Even within domains, trends get averaged, but the problem is less--that averaging problem is less within domains than it is with an overall index.

Second, as Ken acknowledges in what he writes, an overall well-being index does not inform policy. For example, teen birth rates are declining while obesity among children is increasing. But these contrasting trends get averaged in an overall index, and this does not inform policy.

Third, we lack a research base for selecting variables. A lot of the measures, such as suicide, have substantial face validity, but, at present, we lack the research necessary to identify the important constructs, redundant constructs, and missing constructs.

We also lack the knowledge base to create comparable indicators for children of varied ages. In particular, we have many more measures for older children than we have for pre-school children.

Similarly, we lack a research base for weighting the different constructs and domains. How do we weight math test scores against suicide? How should we weight the domain of emotional and spiritual well-being against educational attainment?

Again, Ken and his colleagues are well aware of this issue and have experimented with different weighting strategies. This is not their problem, but a problem with the state of the knowledge base.

Fifth, we lack a full set of indicators. Most salient to me is the absence of positive indicators. The indicator system is not tracking critical positive constructs, like sibling relationships and school engagement. So, it is not possible to incorporate them into an index.

For example, the domain of emotional and spiritual well-being is measured by religious attendance and suicide. These are important constructs, of course, but you have to wonder if there isn't something that might be added.

But, on the other hand, this work to develop a child well-being index has stimulated awareness of the gaps in data and the need for further research. It has stimulated others to develop additional indices and to compare and contrast the advantages of different approaches. My primary concern is that the index might be reified prematurely, like the poverty index has been. Taking advantage of the strengths of the index to stimulate discussion about child well-being, about research needs, about data needs, and about the factors that are driving the index is very helpful, as long as we don't reify the current index prematurely. Thank you.

DR. CHASE-LANSDALE: Thank you, Kris. Well, we have a few moments for questions, and I would like to start it off for a question to the panel, and thank you very much for all of your different perspectives on the index. I am coming at this question as my--wearing my hat as the chair of the board of the Foundation for Child Development, where we have been discussing this issue for some time. We are delighted to have invested in Dr. Land's work and to work with the Brookings Institution to promote the CWI. And I think the comments today about how this is a beginning. We need to think about its various components and various scientific aspects are important because it's a work in progress.

We have, however, funded Dr. Land for the next seven to eight years, and one of our goals is that every year this number gets published, along with all of the background data, and exactly some of the issues that have been raised today about disparities, about what are--what makes up each domain, and so forth.

So, my question to the panel is: how would you respond to the Foundation's goal to create more political will in the United States about children's issues? Is it all possible and what steps would you recommend taking so that the public,

which does not know this, as Kris Moore mentioned, that teenage pregnancy rates have gone down, starts to look for this number the way the public looks for the unemployment rate or the CPI? Is this a reasonable goal? It's our goal to create much more awareness about children in an informed, knowledgeable way so that, in fact, people decide to take action.

So, I would invite your comments about what's news; what's political will; and what action should be taken.

MR. O'HARE: I'll start I guess.

DR. CHASE-LANSDALE: Great.

MR. O'HARE: I certainly support the idea of building a political will for more interest in children and child well-being and studying that in maybe the same way we study the Dow Jones--well, that's from an extreme example. But I think children are very important to our country's future. And most people share that view, but we don't have the kind of measures that we have for the economy, for example, and this old bromide that we value what we measure; we measure what we value. Well, if we aren't measuring it, people will assume that we don't value it. So, I think there's an important there.

The only other comment I think that--and we talked--Ruby and I talked about routinizing this so it comes out every year about the same time, and people are looking for it and expecting it, and kind of saying did it go up or go down I think is a way of building awareness. And I think there's kind of two components to that in my mind. One is the--probably to most people in this room--the kind of infrastructure of child indicator development folks who kind of want to see what's happening and look at

it more. And then a higher level, the news folks, like--higher might not be an example to use--but of people who get this out to the media. You'll take that--

DR. CHASE-LANSDALE: Closer to political will.

MS. JONES: I would--just sitting here thinking about my earlier remarks about what the process of me trying to get it to raise to the level of news, I would suggest that you work with other research bodies. For example, take one of the elements of the indicator--one indicator rather that might deal with health. Let's take the obesity piece. I would say that you try to coordinate the release of the index with some new research that's coming out about obesity, about child victimization, about whatever. That, then, raises the interest of a news room in that oh, there's this new report, a new study in JAMA, something that we can link the two to, and say that this new research says that more children are obese, blah, blah, blah. Concurrently, the child well-being index says that for 2004, more children are whatever. I think--you have to be creative. Reporters have to be creative when going to editors and saying, this is why we want to do this story. And I think that might be one way to do that.

DR. CHASE-LANSDALE: Go ahead, Ruth.

DR. ZAMBRANA: I think what's unique here is that, for a long time as a researcher, we thought that if the data was compelling enough, it would somehow inform policy. And what I like what you're saying, which is very new, is that there's a new understanding that data in and of itself, no matter how compelling, will not become policy unless we change political will.

I do think the index is an important beginning--we have used data in the Federal Government for different types of things--to begin to look at this and look at what is not going well and look at how to invest money in communities and people as

opposed to programs may be a way to help us to move forward. And I think over the next eight years--I don't agree with Kristin--I think we have more than enough data and research. We just have to begin to get the minds who know the community, who've been in the community, to come and inform those of us who are thinking about it with those of us who live it.

DR. CHASE-LANSDALE: Thank you. Kris, you had a comment.

DR. MOORE: Well, of course, I think we need more research, but we have multiple economic indicators, so I'm not sure that it's absolute essential to have just one. I mean, people look for the poverty rate and the unemployment rate and the inflation rate, and they, you know, have some understanding of what that means. So, I think it's possible to have a smaller subset to do that by domains.

I think it might be valuable to have cutoffs, you know, like a--for example, the poverty rate really is--it's a low-income cutoff, and it might be helpful to be able to track at the bottom end and at the top end, as well as just the mean.

MR. WINSTEAD: Lindsay, if I--I think one thing, though, that's--you know, sometimes people want to put out information and see how it translates to political will, as if that's some kind of magical process. And it--you know, having worked with the Florida legislature for many years, it's not that they don't know some of this stuff. It's they have to balance a lot of different priorities.

Secondly, I'd like to just say, again, about the local dimension and how important that is. I think it is important to raise awareness, but when you can localize it as a basis for action. A few years ago, when the southern governors wanted to really focus not only attention but action on issues of infant mortality in the South, because we had specific county-by-county data on low birth weight and very low birth weight

babies and other information from vital records, I can remember vividly, you know, going out, sitting around the table, with medical directors and country health nurses and social workers and all in Jasper, Florida, which all of you know that's a country seat in Hamilton County. And talking about it in Jasper, Florida. Okay. What are we doing with getting people involved in early pre-natal care? What are we doing, you know, with this action and that action. See that mobile clinic. Where is it each day and all of that.

And I think you really need both. You really need to focus attention, but then you also need things that can translate into action. And unless you can take some of these measures and make it real at the local level, then it's hard to make that connection with action.

DR. CHASE-LANSDALE: Thank you. We have a few moments for questions to open it up to you. And I'd like to remind you you need to wait for the mike, and ask questions and not give great speeches, since we are trying to end at noon today. The gentleman over here.

MR. SHERMAN: Arlock Sherman, Center on Budget and Policy Priorities. One question I had--one of the big trends in the last 30 years is a pulling apart. Certainly along many economic dimensions, you had--and it's not something you can necessarily get at by simple white-black breakdown. Black child poverty, measured conventionally, hit its lowest point in 2001, when extreme Black child poverty, by some measures, hit its highest number. And yet, regions were coming together. And, you know, and so, different dimensions are moving in different ways, and I'm wonder if ultimately a single measure helps us right now. If one of the big issues is leaving no

child behind, and society is moving in all different directions at once, does the very notion of a single measure by itself help or hurt?

DR. CHASE-LANSDALE: Does anyone want to respond?

MR. O'HARE: I'll take one quick response, and I think that you're-- certainly it came before. I mean, going beyond the single measure is where you really get the traction. But I think having the single measure raises questions. Does this reflect all children? Is there this kind of racial division that we talked about? So, I think it stimulates people to do the kind of analysis that you're talking about that might not have been stimulated otherwise.

DR. ZAMBRANA: I think a single measure can do it, again, if it's based on what we know. I mean, we know a lot about what are the differences in terms of the divides, in terms of racial and ethnic difference and socio-economic status. So, I think what this--and we need one thing to help to move social policy forward. We have a lot of different studies that give us the data, but none of them have really moved political will or our country forward.

So, I think the measure has the potential to identify key variables from what we have learned in the past 30 years and bring some of those together to show, to illustrate, these differences. I don't know--there are a lot of myths and stereotypes which are perpetuated by the media and by lack of information, and by perhaps the overwhelming nature of so much data that we really don't want to know.

So, I think it does have a potential that we can start here, and I think it can make a difference.

I mean, your work in budget and priorities is fabulous, and there's a lot of good work here. So, I think we're moving towards can one measure begin to talk about some of the major social policies that we need to address.

DR. CHASE-LANSDALE: Thank you. We have time for one or two more questions. Don?

DR. HERNANDEZ: Don Hernandez, the University at Albany. I have just a couple of quick sort of comments and suggestions as we think about the future of analysis of this index but also of data collection, as we think sort of expanding it in new ways. And the first really reinforces something Kris and other people have alluded to, and that is distinguishing between people who are--children who have enormous economic resources, those in the middle, and those at the bottom. The index does tend to focus on the middle overall, and it would be extremely valuable to be able to distinguish the index and components by economic status of the children, with the comment about deep poverty for Black children really epitomizes the need for that. The trends can be very different in different parts of the income distribution.

The other is that one out of five children today lives in an immigrant family. This is up from 13 percent just 10 years ago. There's an enormous expansion in children in immigrant families in the U.S., and we know that they're different with regard to poverty. We know that they're more likely to be in poverty. We know they're less likely to be in one-parent families, and there are other differences. And I just took-- sort of a took a quick look at the indicators, and it looks alike about half of them, probably about a dozen, could currently distinguish children by their immigrant family status. And most of the rest could easily have questions added to the data collection instruments that would make it possible to do that. I think that's just a critical distinction

as we think about communities and culture and race and ethnicity to draw that kind of distinction as well as to--We're going to end. Please join me in thanking the panel. I'd like to thank you.

[Applause.]

[Whereupon, at 12:00 p.m., the panel concluded.]