

BROOKINGS INSTITUTION

**BROOKINGS WELFARE REFORM AND BEYOND
INITIATIVE PUBLIC FORUM**

MEASURING CHILD WELL-BEING: REDUCING RISKY BEHAVIOR

**Wednesday, March 30, 2005
9:00 a.m.**

**The Brookings Institution
Falk Auditorium
1175 Massachusetts Avenue, N.W.
Washington, D.C.**

[TRANSCRIPT PREPARED FROM A TAPE RECORDING.]

PROCEEDINGS

INTRODUCTION

MR. HASKINS: Welcome to Brookings. My name is Ron Haskins. I'm a Senior Fellow here, and on behalf of Belle Sawhill and the rest of the Welfare Reform and Beyond Project, I'd like to welcome you.

This is more or less the second edition of Ken Land's Index of Child Well-Being, supported by the Foundation for Child Development. For those of you who are interested in this area, it is actually quite fascinating. He has a very long history that goes back to many, many years ago, and Ken Land, I won't tell how many years, but many years, even back to a former association with people in this very building. So the history of child well-being is long and extremely interesting.

The one common strand, I think, in this history is that most people who have been involved, their goal has been to figure out a way, either through the use of a single composite number or of several numbers, to vividly portray the trends in the well-being of the nation's children, and, of course, it's been either in the back of their mind or in many cases in the front of their mind that this might have an impact on public policy, especially if someone paid careful attention to using this information to impact on public policy.

And as I said, Ken Land has been a leader in this field for many, many years, which is quite remarkable, because in order to do that, he has had to overcome his affiliation with Duke University, and so I compliment you on that, Ken.

The most straightforward and obvious use of these indexes is to identify problem areas and then to trace progress over a number of years, and so when we released this index last year and again this year, we have used the occasion to shine a spotlight on some of these problem areas, and the two that we've selected this year are teen pregnancy and youth violence.

Now, these are extremely interesting indexes because they both have improved remarkably. Teen pregnancy every year since 1991 has declined, and youth violence has fallen almost 70 percent—crime victimization has fallen almost 70 percent since 1995. So they really have declined greatly, but they're still very high and they're very important problems, so we want to shine a light on these issues and basically to pose the question, what are we doing right to make these things come down and could we make investments that would improve conditions even more in the future.

Here's our plan for the morning. First, Ken will provide an overview of the entire index and he will focus to some extent on teen pregnancy and youth violence. Then Bill O'Hare from the Casey Foundation—we greatly appreciate Bill coming this morning—will talk about roughly the same issue, but using State-level data rather than Federal data. Then Belle Sawhill will introduce and moderate our first panel, which will focus on teen pregnancy. And then I will introduce and moderate the second panel, which will focus on youth violence.

Our procedure will be that after brief opening statements by each of the panelists, the moderator will pose questions, and then the moderator will give an opportunity for people in the audience to pose questions, and I would caution the audience that we are really interested much more in questions than in long comments, so I hope you will bear that in mind.

One more thing. Between panels, we are not going to take a break. The first panel is going to go down, the second panel is going to come up, and we are going to start again.

So, without any further discussion, Ken Land of Duke University.

OVERVIEW

MR. LAND: That's so hard for Ron to say, Duke University.

[Laughter.]

MR. LAND: He will not let me forget that Carolina made it to the Final Four this year but Duke did not, right?

Good morning. It's great to be here. Before I launch into the presentation, I want to mention that my two collaborators on this project are in the audience, pretty far back in the rows there. Dr. Vicki Lamb [ph.] is there and Sarah Meadows [ph.], a graduate student at Duke University who just successfully defended her dissertation, so I guess we can begin to address her as Dr. Meadows, as well. They worked with us on this project and a very important part of it. Of course, you guys will take the tough questions later on, right?

Okay. Let me get into this presentation here today. We've got the Foundation for Child Development Index of Child and Youth Well-Being, the CWI for short. We have data dating back to 1975, which is our base year, up through 2003 for many of our indicators, with projections for 2004. This project is supported by the Foundation for Child Development, and let me get on with some specifics.

A brief review of the CWI. The CWI is a composite measure of trends over time in the quality of life or well-being of America's children and young people. America makes enormous investments each year in its children and youth through Federal, State, and local governments, through many private sector organizations, voluntary associations, neighborhood groups, religious organizations, and, of course, parents and guardians and members of families make investments in their children and our young people.

And we will report each year on the CWI, on this investment. You can think of this as an annual report on how our investment is doing. We will highlight each year some particular features that—where we may have some successes and some in which we need to continue to work.

The CWI consists of several interrelated summary indices of annual time series on 28 social indicators of well-being. The objective of the CWI is to give a sense of the overall direction of change in well-being of America's children as compared to the base year 1975.

The CWI is designed to address the following types of questions. Overall, on average, how did child and youth well-being in the United States change in the last quarter of the 20th century and now into the 21st century? Did it improve or deteriorate, and by how much? In which domains or areas of social life for specific age groups, for particular race and ethnic groups, for each of the sexes, and did the race, ethnic group, and sex disparities increase or decrease?

We have papers that we've developed and published on each of these topics. Today, we focus on the overall trends and the update through 2003.

The methods of index construction, just briefly. We compile annual time series data from vital statistics and sample surveys on these 28 national indicators and seven quality-of-life domains. They include family economic well-being, health, safety and behavioral concerns, educational attainments, community connectedness and social relationships, and finally, emotional and spiritual well-being.

These seven domains have been well established in over two decades of empirical research on subjective well-being by numerous social psychologists and other social scientists, study after study. In this sense, the CWI is an evidence-based measure of trends and averages of the social conditions encountered by children and youth in the United States.

For each of the 28 key indicators, we index the percentage change from the base year, 1975, that is, subsequent annual observations are computed as percentages of the base year. Three indicators began in the mid-1980s and we use these corresponding base years. The base year is assigned a value of 100, as in typical index construction. The directions of the indicator values are oriented such that a value greater or lesser than 100 in subsequent years means the social condition has improved, or deteriorated in the case of lesser values.

The time series of the 28 indicators are grouped together into the seven domains of well-being and domain-specific summary of well-being indices are constructed. Within these summary indices, each indicator is equally weighted. We have a statistical study which tells us that in the absence of a strong consensus on weights, we should equally weight because we will have the highest consensus if we equally weight. The seven component indices are then combined into an equally weighted Summary Index of Child and Youth Well-Being.

Significant findings, reports through 2003—the following charts show some of the changes over time in the CWI and its various components. Overall indices of child well-being, domain-specific indices in each of our areas, and I am going to talk about some underlying causes and policies at the end of this discussion.

Here is Figure 1, which shows the overall CWI from the 1975 base year updated through 2003 with projections for most of our indicators through 2004. As you may have seen last year if you were here, the CWI starts out and stays around the value of 100 in the late '70s, then began a long decline into what you might call a recession in child well-being in the 1980s into the 1990s, and since the early 1990s has seen substantial increases with lower levels of increase in the most recent years.

Here is Figure 2, which shows the domain-specific indices. You can see that some of them have improved very substantially. In particular—we will talk about this one in particular today—safety and behavioral shows very substantial improvements over the last decade in particular. Others show modest changes. The impact of the economy on family economic well-being is written here in this series. Health shows some deterioration because of the impact of increasing levels of child and youth obesity. Social relationship shows a decline, and stabilization in recent years. Emotional and spiritual well-being shows a decline into the late 1980s and early 1990s and some improvements since then, about up to base-year values 1975.

One that's particularly flat and merits increased attention and will be the focus of next year's report is what's happening in educational attainments, where things are pretty flat-lined over the past three decades.

Figure 3 shows the focus this year on our safety and behavioral indicators, what's happened with respect to adolescent teenage child bearing. We have two age groups, the youngest on the bottom here, which is a low rate. The highest here on the top is live births ages 15 to 17. And then the average for all the age groups, ten to 17. You can see that we did have this increase in the late '80s into the early '90s and substantial decreases since then.

Now, what's remarkable about these safety and behavioral concern indicators is you will see in all of the charts that the most recent years have recorded values, and our last value here is projected for 2004, we've recorded values that not only go down to the early years of the CWI database, but have actually pierced below those levels very substantially.

We're talking essentially here about, in terms of adolescents and teenagers, three birth cohorts. The late '70s, kids in those years were late baby boomers. In the late '80s and early '90s, we're talking about baby busters, born of the smaller birth cohorts that followed the boomers. And most recently here, we're talking about the so-called echo boomers. The busters often are popularized as Generation X and the echo boomers as Generation Y. These are children of the late boomers. These children, adolescents, and teenagers have recorded levels of behaviors here, risky behaviors, which are well below those of their parents' birth cohorts in the late '70s.

You see this here also in Figure 4, which is from the Monitoring the Future Project at the Survey Research Center at the University of Michigan, and it shows you the time series for smoking among 12th graders. This is a discontinuity in the question, the way the question was asked, but basically, it was at this level until we had this wave of increase in the '90s which caused a lot of concern, the tobacco settlement in 1998 and subsequent declines in smoking among 12th graders.

Drinking, this is binge drinking, and you see that here are the numbers for the parents of today's adolescents and teenagers, substantial decline into the early '90s, an increase in the mid-'90s, and most recently, a slight decline. But again, levels well below those of the parents' generation.

The same thing with illicit drugs, where the major drug of choice for 12th graders is marijuana. And here, most recently, the increase into the mid-'90s and the most recent slight decline in that indicator series, as well.

Figure 5 shows what's happened in violent crime, victimization and offending, perceived ages of offenders from the National Crime Victimization Surveys. And again, for violent crime victimization, here are the numbers for the late '70s and early '80s. The impact of the crack cocaine epidemic of the late '80s and early '90s affected youth crime very substantially. But again, we're into this very substantial slide over the last decade, piercing to levels well below those of the parents recorded a generation ago.

The same thing is true of the violent crime offending, and these last two numbers in this series are projected. I'm not sure we'll actually reach these extremely low levels, but we go with our time series models and these are the projected values for 2003-2004.

So some conclusions to set up the stage for the panel discussions. This gives the overall picture and indicates the overall well-being of children and youth in the United States showed substantial improvements for the eight years, 1994 to 2002. These improvements continued at a slower pace in 2003 and are likely to continue through 2004. However, historically, the CWI

showed a decline in well-being for a number of years in the 1980s and reached low points in 1993 and '94. These declines mirror economic restructuring recessions, and demographic changes across the last quarter-century or more of America's history. Only since 1999 has the CWI improved to above 1975 base year levels.

A number of key indicators in the safety and behavioral domain have had significant impact on the CWI, in particular the teenage birth rate, smoking, binge drinking and drug use, and criminal offending and violent crime offending and victimization.

Some underlying causes and policies, what accounts for these long-term improvements, criminologists have studied the decline in violent crime in the 1990s and have concluded that the stabilization and then decline of the crack cocaine epidemic accounts in part for these declines. Strong economic expansion of the mid- to late 1990s was a factor. Some criminologists have studied the impact of community-oriented policing and problem solving and getting officers into the schools and the neighborhoods to work with parents and children towards reducing violent crime.

Baby boomer parents, late baby boomers experienced the rise in marijuana use in the 1970s, the powdered cocaine fad of the early 1980s, the crack cocaine epidemic of the late 1980s, and they may have been more willing to speak to their children about the negative consequences of this.

We also—some social scientists have studied what's happening with parents recently and suggest that parents are scheduling their kids' after-school hours much more rigorously than perhaps in previous years. Soccer practice, music practice, language instruction, religious instruction, all of these things are happening, and when the kids are not programmed into one of these after-school activities, what are they doing? Well, we all know they're likely to be playing video games inside the home, which does protect them from violent crime victimization and other types of risky behaviors outside the household.

Another question about causes and policies pertains to the adult treatment of juvenile offenders. Clearly, States stiffened their laws in the 1990s and did this have an impact on youthful crime? Perhaps our panel will get into a discussion of that question.

The tobacco settlement of 1998 appears to have had an impact in reducing smoking behavior.

To get on to the panels, I'm going to stop here and indicate that you should have our reports, copies of the printed copies available, and we also have a web page which gives our tables, our figures, and cites our scientific papers that have been part of this project. Thanks very much.

COMMENTS ON STATE-LEVEL DATA

MR. O'HARE: Good morning. I'm Bill O'Hare. I run the Kids Count Project at the Annie Casey Foundation and it's a great pleasure to be here this morning to talk about measuring child well-being, something that I personally am interested in and the Annie Casey Foundation has a long history of promoting better measurement of child well-being.

Before I start my presentation, which is going to be focused on State data, I just want to say congratulations to Ken and his colleagues for another terrific report this year and particularly to the Foundation for Child Development for supporting Ken's work and other work in moving

this field of measurement of child well-being ahead, and thanks to Brookings for providing this platform for getting this information out to our key audience.

I just want to add, I guess, I think this study is particularly important for a couple of reasons. One is the scientific scholarly part of it, which is impeccable, as you would expect from someone from Duke.

[Laughter.]

MR. O'HARE: But also, the fact that it builds on previous research we're going to talk about in a minute, but the more important part for me, and I think for my Foundation colleagues, is the fact that it speaks to the public in a way that a lot of other scholarly and statistical work doesn't do. I think people want to know, are things getting better or are things getting worse for children, and I think this index idea and breaking it down after that really speaks to a public in the ways a lot of our other studies don't. So I want to say congratulations to all of you for that fine work.

My history of the measurement of child well-being starts in 1990 with the Kids Count Report, which is what I've been doing for the last 12 years or so. There's copies out on the table back there. Let me just take a second. How many of you have heard of Kids Count, just a show of hands? Oh, my God. It does my heart and soul good.

[Laughter.]

MR. O'HARE: It's something we've been doing since 1990. We just did something for our board about a week ago that we have produced almost a million copies of the data book and disseminated them since 1990. We have a network of State grantees that have done similar reports at the State level, over 600 State-level reports on child well-being since 1990. So it's something that we have put a lot of effort into since that point in time, and I think it has spurred people to think more about measuring child well-being and reporting it than certainly was the case 20 years ago.

Another key event here was 1994, when the Federal Inter-Agency Forum on Child and Family Statistics was launched. In 1996, the Department of Health and Human Services started this annual series of a report called Trends and the Well-Being of America's Children and Youth, which documents trends in about 120 or 130 indicators over time. In 1997, the America's Children Key National Indicators of Child Well-Being report began being issued by the Inter-Agency Forum, and I think that was probably a lot of the data that Ken was able then to use to put into this index, and I think that's the way, in many ways, the index kind of built on work that was done previously, which is in the best tradition of science and scholarship.

There's a number of reasons why I think the time is ripe and the time is very well suited for getting the kinds of measures of child well-being that Ken has showed here State by State or even city by city. A couple of the reasons for that optimism is the political scene, where we've seen devolution over the last ten or 15 years, political devolution, give a lot more decision making power to States and sometimes to counties and cities than was the case 20 years ago. A lot of this was done through block grants and everything I've seen says that idea is still alive and well, and I wouldn't be surprised if you see more devolution in the next five or ten years than we've seen in the past.

So the idea that States and cities are now being required, have responsibility for making more decisions about the programs that affect children says to me it would be real useful to have

the kind of data that we have at the national level in each State to make those decisions, to see whether a State has been getting better or getting worse for children.

A second trend or a second item is what I call the appetite for accountability. I'm not sure if I'm just drawn to that because of the alliteration or what it is, but I think there is a growing sense that we want to hold government programs, and ourselves more broadly, accountable for child well-being, that we want the kind of measures that will allow us to see whether things are getting better or worse overall, and in particular domains and for particular programs. So I think this appetite for accountability makes it more likely that we'll get the kinds of statistical measures that we need to develop those accountability schemes.

The other point I want to make is I think there's a tension here between accountability and flexibility that makes the collection of data particular relevant. On the one hand, we want to give States and localities the flexibility to develop programs that address their population that may be different than other population. So we want to give States and localities that flexibility. On the other hand, we want them held accountable for getting the job done, for improving well-being for children and families.

And I think collection of good data on outcome measures gives the Federal Government or any other level of government the kind of ability to give people flexibility to develop the program that best meets their ends, their population, and at the same time can hold them accountable for achieving better outcomes for children. If you have good data, you can give people the flexibility and still have the accountability in a way that you can't if you don't have that good outcome data.

Finally, the technological developments over the last ten or 15 years, I think bode well for this. Computers have certainly advanced, and lots of systems have been developed in States that allow us to get better data, more data, integrate it better than we ever could before. And in some ways, statistical science has advanced in ways that helped us, as well.

So I think the time is right for advancing this agenda for better data on the State level.

I am a demographer by training and one of the credos of the demographer is you have to have a statistical table when you talk to an audience, so I produced this table to meet that requirement for this presentation. Every year in the Kids Count data book, we have ten measures of child well-being for each of the 50 States, and this is data that's going to be in our next data book that will come out in June of this year and it looks at how many of those State measures for each of those ten indicators are statistically significantly different than the national measure for that same indicator.

Maybe you can't see this in the back, but the bottom line is there are lots of indicators. The State measures—most of the State measures are different than the national measure. In fact, some cases, teen childbearing—we're going to talk about later—49 of the 50 States had a teen childbearing rate that's different than the national rate. Forty-three of the States have a child poverty rate that's different than the national rate. I think that speaks to the idea that the national rate isn't going to tell you much about what's going on in your State, and if you're a State legislator or Governor or State official, those are the measures, the populations that you have to make decisions about. So it underscores, I think, the importance of having State-level data.

This is a similar table that's not quite as rigorous. I didn't have time to look at statistical significance, but if you look at the national trend from 2000 to the most recent data at the

national level and then look at the States and see if they have the trends in the same direction or not, you see that in many of these cases, many States are not even moving in the same direction as the national rate for these indicators. A lot of these are small, and I wouldn't push this too far, but it underscores the previous point that knowing the national rate doesn't tell you much about what's going on in your State.

I am optimistic about our short-term trends in terms of getting better and more indicators of child well-being at the State level. Part of that is based on several things that have occurred over the last couple years and efforts that are just getting started in many ways that I think will provide the kind of data we're talking about. I just want to talk about a few of them here, mention a few of them.

The first is the Census Bureau's American Communities Survey, which is going to be a very large national survey, data for each State and for large cities and for large counties. It will have census-type data available every year for those units of geography. So for States, we'll have essentially long-form census data every year. This American Communities Survey has just gone into the field, fully implemented in 2005. We'll have that data available in July of 2006, so that will be the first ability to use this new data collection system in an ongoing way, and we'll have it every year after that.

This SLAITS, which I think stands for State and Local Area Integrated Telephone Survey, and some of you may know this because it produces the data on immunization rates for children, but it's also been used for a couple other special reports. The one that I think has just become available is the National Survey on Child Health, which has over—I think it's about 2,000 cases for each State on a host of measures that reflect child health, broadly speaking, including some neighborhood measures, for example. So it's another example of where the Federal Government and the Federal statistical system is starting to produce more data on the State level.

The National Assessment of Education Progress, which you probably know about in the context of No Child Left Behind, does the same thing with the No Child Left Behind. It is now available for all 50 States. It's mandated for all 50 States. So we'll have that on a regular basis over a time. It's been something that's been in the field for many years, but now we'll have it for every State.

And the last one I just want to mention is called AFCARS, the Adoption Foster Care Analysis and Reporting System, which looks at the most vulnerable children in society in adoption and foster care and so on. It's a system that's been in development for about ten years and now I think it's at the point where it is producing at least some measures that are consistent across all the States.

Finally, in terms of data on children at the State level, the State Finance Committee has passed an act called the Personal Responsibility and Individual Development for Everyone Act, which is essentially TANF reauthorization, and in there, they have earmarked \$10 million a year for the Federal Government to collect and organize and report State-level measures on child well-being. There's still some uncertainty about exactly how that would be done, which is probably fine given the fact this is just a piece of legislation, but if this is adopted by the whole Senate, which I'm reasonably optimistic about, it would earmark a set of money every year to kind of promote this idea of getting better data on child well-being at the State level. The real

crunch, of course, will come when the House and the Senate have to reconcile these two bills, because it's not in the House bill, but I'm optimistic that we might get something out of that.

Finally, in summary, three points I'd like to leave you with. One is that State-level data is important, and I hope I convinced you that just knowing the national numbers is not going to tell you much about what's going on in the 50 States.

Secondly, that the time is ripe for these improvements. There is some momentum building. It's still rather fragile, but I think things are moving in the right direction, in part because of work that's been going on for ten or 15 years in this field.

And finally, the need to develop—to support the improvements that are going on now, particularly the PRIDE bill in the Senate, which I think would go a long ways towards moving this idea of good measures of child well-being from the national level down to the State level. Thank you.

PANEL ONE: TEEN PREGNANCY

MS. SAWHILL: Thank you very much, Bill. I think that was very important to focus on the need to disaggregate this data by State. In fact, just to pick up on Ken and Ron and your earlier comments, it seems to me that the major value of having a set of indicators of the sort we've heard about this morning is that it does shine a focus on how children are doing and brings attention back to the importance for any society of investing in the young.

But having gotten the attention—and I note this morning that there is a nice article in the Washington Post about the FCD Land Index, and we hope in other places, as well—but having focused attention on it, then the obvious questions are how do we disaggregate, what domains are pushing the trends here, what's happening at the local or State level, not just at the national level, and finally and most importantly, and I hope this is what we will begin to focus on in the next two panels, what kind of policies might be driving these changes.

Ken in his comments suggested that this is very much a matter of generational change, that the baby boomers were different from the baby busters, which in turn are different than the echo children of the baby boom. I think that's an interesting thesis, but it suggests, at least, that these things go in cycles that are natural phenomenon and are not much driven by policy. And so I'd like to hear more discussion of that point from the next two panels.

This first panel is going to focus on just one of these trends, which is teenage pregnancy and childbearing. We have a terrific group of people here who are all very expert on this topic.

We're going to start with Kris Moore. Kris is the President of Child Trends, and one of the great things about Kris is that in addition to running this very important organization these days that focuses all of their attention on children, she maintains her interest in research and her ability to talk about the data.

We will then hear next from Rebecca Maynard. Becca is Professor of Education Policy and Communication at the University of Pennsylvania, then from Shanita Burney, Director of Prevention Services at Covenant House. Welcome, Shanita. And finally, last but not least, Sarah Brown, my friend and colleague from the National Campaign to Prevent Teen Pregnancy.

So, Kris, over to you.

MS. MOORE: Good morning. I want to explore the factors underlying the decline in the teen birth rate, and I think it's important to take a look at the trend first. These data are slightly different than what Ken had. They're for teens 15 to 19.

But to me, the most noticeable aspects of this trend are the long-term secular decline in the teen birth rate and then the interruption in this decline in the late 1980s. This temporary increase in the teen birth rate peaked in 1991 and the rate has declined substantially since then.

The question is really why didn't the teen birth rate continue—the decline continue, as you might expect, and as shown by the red line? Though I'm not going to focus on it very much, to me, it is just as important to ask why the teen birth rate went up in the late 1980s as it is to ask why it's gone down in the succeeding decade.

The economy was having difficulty during this time. This was a time when crack, gangs, crime, and homicide were particularly serious problems and immigration levels were highly. Interestingly, the teen birth rate went up in virtually every State and in several other developed nations during these years. So it is hard to say it was just a reflection of crime and drugs in central city areas. And the teen birth rate has continued to decline during the current recession, so it's hard for me to conclude that it is just the economy. Ditto for immigration.

As this figure shows, the teen birth rate varies enormously across States. New Hampshire, at the bottom, had a low rate consistently, and Mississippi, at the top, has consistently had a high rate. But they, and virtually every other State, experienced an increase in their teen birth rate in the late 1980s.

And now the teen birth rate is declining again in every single State. I'm not going to try to explain the increase in the 1980s, though, but rather discuss the more recent decline. Why did the teen birth rate go down?

Obviously, on the face of it, abstinence and contraception are the logical factors and there have been increases in both abstinence and contraception. But what factors underlie trends in abstinence and contraception? It seems to me that's the real question.

People seem to prefer silver bullet explanations, but I'm going to take a different approach. Rather, I'm going to take an ecological and life course perspective and consider the factors that higher research, theory, or policy interest might suggest as potential explanations for the decline in the past decade, ranging from family to community to the largest society and public policies.

I've not done a formal lit review. My purpose instead is to raise questions and take a developmental perspective.

First, I want to highlight early childhood. We know from two experimental studies that high-quality early childhood programs can delay adolescent childbearing years later. We also know that more children are enrolled in preschool programs. The missing evidence is whether more children are enrolled in high-quality preschool programs. I think this is a compelling, but only a potential explanation, so I've coded it "maybe."

Turning to childhood and early adolescence, we know from the experimental evaluation of the Children's Aid Society, the Carerra Program [ph.], that a high-quality after-school program can delay parenthood, at least for girls, and we know that a lot of kids are in after-school

programs. Again, however, it is not clear that these programs are high quality, so I'd have to categorize this again a potentially compelling explanation, but maybe.

Risky behaviors—we know from many studies that teen sexual activity and pregnancy are linked with other risky behaviors. We don't really know whether there's a causal association among these behaviors, though, and they don't track perfectly, and though problem behaviors are now generally declining, as was said. So this gets another maybe.

Child abuse, including child sexual abuse, has also declined, though data from the National Survey of Family Growth do not show a decline in non-voluntary sex between 1995 and 2002. In some cases, of course, abuse is a direct cause of teen pregnancy. In other cases, it is an early antecedent of risky sex. It is hard to know what the lag is, and that's true for many of these variables, but this still seems like a reasonable potential explanation, so I've coded it "maybe."

Family influences—of course, the family is very proximal to the child, so you would expect family influences to be important. Levels of parent education are consistently associated with adolescent pregnancy and parent education has been increasing, so this should be associated with lower levels of adolescent pregnancy, especially in disadvantaged populations. In addition, adolescent school enrollment and educational expectations are consistently associated with delays in sex and childbearing, and high school graduation rates have been rising. Accordingly, I've coded this as "probably."

Family structure—changes in adult family structures should be an important factor, but the stabilization of divorce rates and rates of non-marital childbearing has been fairly recent, so it's not clear to me that they are responsible for the decline in adolescent childbearing that occurred during the 1990s. Again, it's a lag problem. One possibility suggested by David Levy is that increases in joint custody have helped to keep non-custodial parents, usually fathers, more involved in the lives of their children, which would help to reduce adolescent sexual activity. These are plausible, so I have coded it "maybe."

Family poverty is, of course, strongly linked with the risk of an adolescent birth and patterns of poverty sort of track with the increase and decline in the teen birth rate, so this seems like a compelling maybe.

Religiosity—while overall religious attendance didn't increase substantially during these years, it seems that some adolescents became more traditionally religious and this may have been a factor in increasing levels of abstinence among teens. It doesn't explain contraceptive use, however. Overall, the net effect is not clear and, in fact, is quite controversial, so I'm going again to say "maybe."

And messages—messages about teen pregnancy from family, their attitudes and their values, don't get a lot of discussion, but these messages for sons as well as daughters seem to me to be an important potential explanation that may account for social change. Evidence from the National Survey of Family Growth suggests, though, a decline in discussions between 1995 and 2002, so I've coded this as "don't know."

Neighborhood and community factors, sex education, is one that has the potential to provide important knowledge and messages to allow adolescents to consider the consequences of their action and explore their goals and their values. However, experimental evaluations find that didactic education has little influence on behavior and we don't yet know about abstinence

education. Also, we don't know much again about the quality of sex education that adolescents receive. Most teens do get sex education by ninth grade, but we know little about the quality, content, the delivery, and whether they've changed over time. So I was tempted to say "probably," but I held to "maybe."

There are obviously other neighborhood and community factors and peer influences, but I need to move quickly and I want to highlight some potential explanations at the level of society.

Again, messages from—I'm sorry, media. I see personally little evidence that the media content, if you think about television, music, the Internet, and advertising, I see little evidence that it's become less sexualized. On the other hand, there have been some messages of responsibility which could have a tempering influence. I'd have to say we don't know, but this is an important topic for further research.

And now messages. Again, messages at the level of society seem like a promising potential explanation. When I look at the patterns in teen childbearing across States and see the commonality across States in the pattern of decline, increase, and then a resumption of the decline, it seems to me that there must be some common messages, norms, or understandings that have changed over time. These may be the accumulative effect of hundreds or thousands of small programs of parents, religious institutions, cultural groups, school programs. I don't really know, so I'm coding it "maybe." But I think that messages are probably important in understanding this societal change.

The economy—like poverty at the family level, better economic opportunities would be expected to track with lower rates of teen childbearing, and I'd like to see that examined further at the State level. Right now, I'd have to code it as a "maybe."

New methods of contraception, like Depo-Provera, however, seem associated with a decline in repeat births among teens, and it was a decline in repeat births that led the decline in teen childbearing, so I'm coding this as "probably."

Fear of sexually-transmitted disease—the dramatic increase in condom use among adolescents has undoubtedly been driven at least in part by fear of sexually-transmitted disease, including HIV-AIDS. In addition, this is cited by some teens as the reason that they've not had sex, so I've coded it "probably."

Turning to public policy, welfare reform—I have never found welfare to be a compelling explanation for adolescent sex, so it seems unlikely to me that this was the driving factor in the decline. Welfare benefits in real dollars were declining while the teen birth rate was rising, and welfare reform didn't occur until 1996, when the decline in the teen birthrate was already well underway.

Nevertheless, I think that the discussion about welfare reform may have played a role. This discussion may have changed the messages that adolescent received about the propriety of early childbearing, so maybe.

Abortion—it does not appear that abortion is the driving factor behind the decline. Both the abortion rate and the proportion of pregnancies that end in abortion have been declining, so this seems unlikely to be the cause.

Child support—with the decline in shotgun marriages, the disincentives for males to avoid pregnancy were reduced. However, increased enforcement of child support obligations may have changed both the fact and the messages about male responsibility, so maybe.

Finally, modernization. This is the term that I'm using to describe the secular trend in declining teen birthrates over decades. Teen childbearing is highly incompatible with the demands of a modern society and economy, and this ongoing process of modernization seems to me to be a crucial factor which probably drives many of the other potential explanations.

But the upward trend in the late 1980s should be a warning. Some forces not well understood seem to have trumped the secular trend. If we understood the factors underlying that upward blip, we would have a better shot at preventing another such increase. However, the forces for decline, while numerous, affect behavior in ways that we do not fully understand, and teen childbearing is the result of several different behaviors. As such, it is possible that behaviors may change and the rate may increase again despite the ongoing secular decline that is evident for the United States and for all States. Thank you.

MS. SAWHILL: Thank you, Kris. We'll turn now to Rebecca Maynard.

MS. MAYNARD: I'm going to stand up. I'm not going to use PowerPoint, but I just can't see you all, so thank you.

I'm going to take a little different tact here. I'm not going to try to look at why the overall trends in teen births have been going down, but I want to look at the evidence on whether or not specific strategies that we've put in place as templates for the silver bullets work and what we know about them.

Now, one of the things that's important as we think about evaluating interventions aimed at reducing teen birthrates is to note that most youth are exposed to a variety of services aimed at encouraging various forms of risk avoidance or reduction, whether it's teen pregnancy and birth or other forms of risk. By the mid-1990s, 93 percent of school districts nationwide offered sex education. So kids are getting information out there regardless of targeted interventions that we've put in place. Over three-fourths of the schools have written curricula for these interventions and where districts vary is in the grade levels where they introduce the curriculum, the information and messages they offer, the intensity of their services, and the fidelity in its delivering.

There are a small portion of schools that provide STD screening and treatment and family planning counseling on site, but over 60 percent of the schools either provide these services on site or make referrals. So there's a lot going on out there in addition to these targeted interventions that have been subject to evaluation.

So what I want to do is look at why—what kinds of school and community group services have been put into place and what the evidence is as to the effectiveness of various types of interventions.

There's been a fair bit of research on health and sex education and there are lots of debates out there as to what works for whom and under what conditions. I want to just read to you the quotations from three reviews of the evidence on the effectiveness of health and sex education programs in reducing teen sexual activity and in preventing pregnancies.

One review by Frost and Forest based on five studies concluded sexual initiation can be reduced by as much as 15 percent. Programs should target younger adolescents and provide contraceptive programs for sexually active youth.

Another study, Kirby, 2001, analyzed the results of 75 studies and he concluded, "in the final analysis, professionals working with youth should not adopt simplistic solutions. They should replicate those programs that have the best evidence for success, build their efforts around the common elements of successful programs, and continue to explore, develop, and evaluate innovative and promising models."

And a third review, DeSenso et al. [ph.], 2002, looked at 26 randomized controlled trials and concluded, "the review shows that we do not have a clear solution to the problem of high pregnancy rates among adolescents in countries such as the United States, the United Kingdom, and Canada." So you can pick your review and you can pick your conclusion.

What we've done, Lauren Scher, myself, and Matt Stagner have taken a much more, I think, careful and thorough look at the literature than in any of these previous reviews and systematically evaluated it for the methodology, for the definition of the outcome measures, and for the conclusions that are derived from the research. In this review, we identified a total of 40 intervention studies based on either randomized controlled trials, which is the highest quality of evidence, if conducted properly, or reasonably well implemented quasi-experiments, we had 12 of those that involved matched comparison groups.

We looked at three outcomes, whether adolescents had ever had sexual intercourse, whether they were having sex and not using contraception, and whether they had become pregnant or gotten somebody pregnant. Okay, that's a little different definition of the outcome measures than sometimes is used. We have not yet but will be looking at whether or not adolescents are having sex and not using condoms consistently as a means of protection or reduction in the risk of contracting STDs.

The results of this review show nearly as many positive as negative estimated differences in outcomes between the intervention and the control groups. It shows that the differences are almost always very small, three percentage point differences. That's large. And most of the differences estimated for the individual studies are not statistically significant, which is to say that the differences may be just the result of sampling error or chance.

We also looked at whether or not, if we combined the evidence across all of these studies, we would get a more favorable conclusion, and only two of the estimated pooled results showed statistically significant differences. We had a two percentage point difference in sexual initiation rates and a three percentage point difference in the pregnancy risk rates for those studies that were based on the quasi-experimental designs, which is the lower standard of evidence. There's much more likelihood in those studies that there will be some uncaptured systematic differences between the groups we're comparing.

Now, one could argue that there are some dangers in pooling results of dissimilar studies across interventions, and we've done a fair bit of looking at whether or not pooling is okay. But remember that we started out with a basic pattern of results across all of these studies that suggested at most small differences, and most of the studies had no difference or differences that we could not determine were different from chance.

Okay. So what I'm going to do, if any of you have the handouts, I'm going to sort of go through some of the graphs that are in those handouts just very, very briefly to show you how this evidence plays out. I'm going to focus first on the strongest body of studies, which are the randomized controlled trials, and if you look at the results from these—this begins with Figure 4—we find that, on average, roughly a third of both the program participants and their control group counterparts engaged in sexual activity at the time of the follow-up survey, which is typically about a year to a year and a half, two years after the kids come into the intervention.

Underlying the graph for the overall results, seven of 32 estimated impacts were statistically significant. Four were positive. Three were negative.

[Break between sides of recorded tape.]

MS. MAYNARD: About 15 percent of both groups, the program group and the control group, reported having sex and not using contraception, which is to say putting themselves at pregnancy risk, and about 12 percent of both groups reported pregnancy. For the pregnancy risk, we had five positive, statistically significant differences, two negative, and for the pregnancy outcomes, we had four statistically significant positive and one negative. The majority of the results are not statistically significant.

And the story is pretty much the same when we look at the results by the type of intervention, so if we break the interventions down by is this a one-time consultation, is this an abstinence focus, a sex education program, a comprehensive sex education program, or a multi-component youth development program. Looking, for example, at one-time consultations, we see very little evidence of effects. If we look at abstinence-focused intervention, we had only three studies in this category. We see very little evidence of effect. Comprehensive sex education in Figure 7, the same thing. Multi-component youth development.

The exception to this is that both the one-time consultation and the multi-component intervention shows some evidence of reducing the likelihood of youth exposing themselves to pregnancy risk or to pregnancy, but I would say that the numbers of studies are small and the evidence is not compelling and the differences are small.

If you flip to Figure 9, the other thing that you'll notice is that the answers to the question of whether or not we see differences between the program group and the intervention group and a control group varies substantially based on the standards of evidence we use. This chart shows the results for the experimental studies pooled together and the quasi-experimental studies pooled together. On all three measures, when you pool the results, the evidence for, or the estimates for the—based on the experimental studies are right around zero, okay, and the little lines through those bars show you what the competence interval is around that point estimate of the impact. So we're lapping zero. There is no evidence based on the randomized controlled trial.

There is some evidence, greater evidence, if you believe the results of the quasi-experiments. However, I would urge you also to look at the size of those differences. They look big on the bars, but they're two and three percentage point differences, okay, which is to say—and that's not—I mean, that's not nothing. We want to capture that when we can. But the differences are small.

So what do I make of these findings? First, I want to just underscore the fact that kids are not reared in antiseptic bubbles, so any attempt to intervene with education and services aimed at

preventing or reducing sexual health risks should be designed with local context in mind and you should think about you're adding on, in most cases, not substituting for.

For the same reasons, any evaluation of an intervention needs to be sensitive to the kind of factual conditions. The fact that interventions generally show little to no evidence of changing outcomes doesn't mean that the interventions themselves are not effective, but it may mean that you're not adding much to what's already there. And so it's important to have that context, and I will say that for most of the studies in this review, we do not know a lot about what the kind of factual is.

So in conclusion, let me just say that I would urge the research community to be much more attentive to the methods we use for judging intervention effectiveness. I would urge the program and policy community to be much more selective than we have been in how we use the evidence, how we frame the questions that we want researched, and also be much more willing to subject our interventions to rigorous evaluation so that maybe we can get some real answers and change some of Kris's "maybes" to yeses or noes. Thank you.

MS. SAWHILL: Okay. I hear two conclusions so far. The first one, from Kris Moore, was we don't know very much about what's going on. It's mostly informed guess work except for the issue of modernization, which seems to have been reducing this trend for a long time. And now we just heard from Becca that based on very rigorous research, it doesn't look like sex education programs are particularly effective.

So Shanita, this is your turn to weigh in on these trends. Shanita works on this from more of a practitioner's level and probably has some nuances here, I suspect, that the rest of us are missing. Welcome.

MS. BURNEY: Thank you. Good morning. Again, my name is Shanita Burney, Director of Prevention Services at Covenant House, Washington. Currently, I'm within the Prevention Services Unit. It's a special project within the agency that focuses on pre-teens and teenagers plagued with a multitude of risk factors in the lower socio-economic areas of the city that placed them at risk for early sexuality and teen pregnancy.

Through the year, out-of-school programming that strives to sculpt and mold youth leaders, we developed this programming with the goal of comprehensively addressing many of the risk factors that young people are facing, 11 of which Covenant House Washington has determined that our young children and youth are facing here in the District. It was great to read through reading the Child Well-Being Index that all of our 11 risk factors that we've identified directly correspond to the different domains.

A couple of examples. The safety and behavioral concerns domain directly corresponds to those risk factors that we've determined as teen pregnancy, substance abuse, and violence. A couple of others, the community connectedness domain corresponds directly to what we've determined high school dropouts and academic deficiencies. So all of our 11 risk factors that we base our programming on directly correlates and corresponds.

So what is behind the declines in teen pregnancy, particularly over the past ten years? Probably more reasons than I could ever venture to mention. But as a programmer, I would be remiss without highlighting the role that comprehensive, effective teen pregnancy prevention programming efforts like Covenant House Washington's prevention programs, that are modeled in many ways after research proven effective programs, such as the Carrera model, where the

emphasis is on offering youth alternatives to resisting peer pressure and engaging in risky behaviors, where this program is helping youth to discover their individual interests, their talents, emphasizing life opportunities made possible through education and employment.

As well, the Teen Outreach Program is another example of a successful program that we've modeled our Prevention Services Unit after, where there's at least one experimental evaluation which found that participation in this program led to lower levels of course failure, school dropout, school suspensions, skipping school, arrest rates, and teen pregnancy.

With this in mind, the perception of decline is relative, quite frankly, to what day it is, what neighborhood you're in, what school you're in. I may walk into a school where there is a day care as a result of the amount of teen pregnant girls that are in the school, see scantily-clad hall walkers that avoid responsibilities, and teachers yelling obscenities at the students in their classrooms. Then I may visit a school just around the corner in the same neighborhood that has relatively high test scores, an attractive facility with motivated students, and positive activities occurring where youth achievements are visible.

To put it simply, as programmers, there are good days where we feel encouraged and motivated because we see the impact of our work, and there are not-so-good days when we get a blatantly disrespectful child and questioned what else do we need to do to make a difference.

It has been my observation that there appears to be a disconnect between youth perceptions of the teen birthrates dropping nationally and locally, which is the well-documented case, as we have seen here today, and the messages that teens, specifically low-income, are continuing to get.

For example, in a workshop where I may be preparing a group of youth to outreach to their peers with teen pregnancy prevention messages, I may share with them the good news of teen pregnancy rates, particularly among African-American teens, seeing the steepest decline. It's been my experience on most occasions that they will just look at me in disbelief and argue that this isn't the case in their neighborhood. Are they lumping all risk factors together, for example, substance abuse, violence, poverty, et cetera? And by them not seeing an obvious and visible decline in their neighborhoods, does this potentially create the illusion that there have been no changes to teen pregnancy to note?

With this in mind, how do we continue with the positive trends and discourage those factors that contribute to teen risky behaviors? Well, I believe that a continuation of youth development programming, such as Covenant House Washington's prevention services, currently going through annual process evaluations since inception with child trends, and those nationally recognized and proven effective programs such as the Carrera model and the Teen Outreach Program.

I believe we need to enhance training opportunities for youth workers to build their abilities to work effectively with youth populations, thusly building the capacity of youth serving agencies and the youth workers themselves; by expanding our schools' abilities and resources to actively engage and work with parents to support the positive development of their children; and with our major competition being the media and popular culture, or pop culture, counteracting this saturation of negative messages and media images with our own positive messages and work with those media icons to buy into the role model status they hold and to become more responsible with it; as well as we love to have visitors come and actually see what we're doing, to

have policy makers come out, see our neighborhoods that we're working in, meet our kids, meet our families, and see the types of programming that we're doing firsthand.

With all of this said, I want to tell you about Patrice. She grew up poor in a single-parent household with mom having many boyfriends in and out of the house. She was sexually abused by her biological father from the age of eight to 12 and subsequently birthed his child at age 13. While raising her father's son as her own, her world continued to be plagued with substance use and abuse. While having been a bright child in elementary school, on the honor roll, academic achievement throughout middle school and high school was a challenge, at best. A range of various risky behaviors—suicide attempts, overeating leading to obesity, early sexual activity—was the norm for her.

However, a mentor came into her life, showed her that she was beautiful, that she was special, that she could overcome any obstacle that stepped into her path no matter how large. She began to write poetry in journals, sing to release her pain, and used tears as a form of healing. She began to get involved as a youth advocate in advocacy groups that supported teen girls who had been sexually victimized, often relaying her story to others as a form of motivation that they, too, could survive it. She continued to be supported by her mentor no matter the bad choices she made, always knowing that the next day would be the opportunity to make a better choice.

She graduated from high school and is currently in college studying psychology and English. However, at 19 years old, she finds herself pregnant. However, she's gotten married and plans to continue college. So do we see this as a success or do we see this as a failure?

Our goal should be to make a difference and to change the lives of each and every young person we come into contact with that make up these statistics we mention in presentations like you've seen today in trying to paint a picture for those about the state of the world and all of its social ills. By encouraging effective programs to build their capacities through training and evaluation, working with the schools to maximize the goals of both institutions, and just accepting our young people who are hurting without judgment, we can make a difference between this young lady's success or her failure. Thank you.

MS. SAWHILL: Thank you, Shanita. I think we all admire the work that Covenant House is doing with these very difficult cases.

Sarah Brown?

MS. BROWN: I'm going to stay put, if that's okay. I'll be the only one, I think, is that right, that stayed down?

I want to thank you all for inviting me here today and extra thanks to the Duke group, to the Foundation for Child Development, to Casey and to Brookings, in particular, for highlighting the foundational topic of teen pregnancy and birth. All of us celebrate the terrific success that has been shown in these declining rates in several slides, but I must remind us all that we still have a lot of work to do even with this progress on teen pregnancy and birth.

The United States still has the highest rates of teen pregnancy and birth in the industrialized world, and it is still the case, even with recent declines, that about one in three girls in America, teenage girls, gets pregnant at least once before her 20th birthday. So we have to keep the spotlight on this problem, we have to keep the heat up, because for teen mothers, having a child rarely advances her well-being, and for the children born to teen mothers, being born to

these young women is often the first step in confronting many of the difficult challenges that are captured in the CWI over time.

I also want to thank you all for having this issue of teen birth and childbearing embedded in a larger conversation about child well-being. At the National Campaign to Prevent Teen Pregnancy, this is exactly our view of where the issue is best positioned. The Campaign's mission, mind you, is to improve the lives of children, youth, and families by preventing teen pregnancy. That is, teen pregnancy reduction is a means to a larger end. Too often, we think, this issue gets mired in the weeds of divisive fights over a number of reproductive health topics, but here today, I think we're talking about it in just the right context.

Now, this connection between teen pregnancy and childbearing and larger social issues was highlighted very clearly last spring through an analysis that was conducted by the Congressional Joint Economic Committee. They asked a very simple question. What would have happened if the teen birth rate had not declined by a third between 1991 and 2002? That is, what if it had stayed at this high water mark, the 1991 level? And they found that 1.2 million more children would have been born to teen mothers in the U.S. Four-hundred-and-sixty-thousand more children would be living in poverty. Seven-hundred-thousand more children would be living in single-mother households.

Moreover, they calculated that the decrease in the teen birth rate between 1995 and 2002 is directly responsible for 26 percent of the decrease in the number of children under age six living in poverty and 68 percent of the decrease in the number of children under age six living with single mothers.

Now, I want to tell you that in the next couple of weeks, the Campaign is going to be releasing these same data for each State, because as was pointed out, people live in States and that's where a lot of people see these issues.

Now, in a similar vein, just to beat this horse a little more, Nick Zill at Westat asked again recently what are the chances of a child growing up in poverty if, number one, the mother gave birth as a teen; number two, the parents were unmarried when the child was born; and number three, the mother did not receive a high school diploma or a GED, and he found the answer to be 27 percent if one of these factors is present, 42 percent if two are, 64 percent if three are, but if none of these factors are present, a child's chance of growing up in poverty is about seven percent. Put another way, when all three factors are in place, a child's chance of growing up in poverty is nine times greater than if none of these things happen.

Now, I, like Kris Moore, incidentally, am very interested in this question of why the rates went up in the late 1980s, and in addition to all of the things that Kris mentioned, I would add one other possible explanation. It's been mentioned to me a few times but clearly needs a lot more investigation, and that may be that in the late 1980s, there was a slight change in the mix of contraceptive methods used by sexually active teen girls and their partners.

It's been suggested, for example, that at that point, there was really deep concern—not enough ever, but deep concern over HIV/AIDS and STDs in the late '80s and that some young people, some couples may have turned away from relying principally on oral contraceptives, moving to condoms, and, of course, condoms are very effective in preventing against HIV/AIDS, but it's oral contraceptives that are the best hormonally-based methods at preventing teen pregnancy. So there may be something about the method mix and I think it's something we

should look at more. I also appreciated Kris's very clear statement that it is both less sex and more contraception that have contributed to the recent decline in teen pregnancy.

A recently published analysis by John Santelli and some other terrific researchers noted that about half of the decline is due to less sex and about half to more contraception. Now, interestingly to us, this science seems to be consistent with public opinion. Our polling data at the Campaign show that most Americans do not see abstinence and contraception as pitted against each other. They understand the importance of both and they think we need more of both.

For example, clear majorities of teens and parents think teens need more information about both abstinence and contraception. In addition, though, the vast majority of both adults and teens—over 90 percent—support a strong message about delaying sex until teens are at least out of high school. Being very practical people, also Americans give strong support, too, for providing contraceptive information and, of course, services for teens who are sexually active. So it's nuanced and it's combined.

Now, Becca has pointed out that we need to apply better research methods to the intervention world, which I completely agree with. But I also think we have to be very careful about not falling into a trap that suggests that it is through programs alone that we will continue to drive teen pregnancy rates down, and I think that's been a major theme of this panel. Many young people are not in programs. Many programs are just barely or thinly funded. Some required expensive. The impact, as Becca pointed out, even amongst the effective ones can be small. Few programs seem to endure. And I think, in particular, very few are of the caliber of what Shanita Burney runs at Covenant House, I can assure you. Maybe if they all were of that level of intensity, we'd have less teen pregnancy than we do now.

We also know that teens report themselves that morals and values and parents exert very powerful influences on their sexual attitudes and decisions, factors that are often, not always, but often outside traditional programs to reduce teen pregnancy. Just for example, teens consistently rank parents as the number one influence on their decisions about sex, higher than friends, school classes, and more.

For these reasons and more, I would add that it's social norms and values and perhaps possibly changes in them are very important factors in explaining the declines in teen pregnancy. Again, I'm adding to Kris's list. These are not easy to track, these sort of squishier values and norms, but here are just a few pieces of examples—a few little bits of evidence.

Many young people, and increasing numbers, disapprove of casual sex. For example, in the 2004 survey that the Campaign did, we found that about 82 percent of teens 12 to 19 say that teen sex should only occur in a committed relationship, and the famous UCLA study of college freshmen asked this question: Is it all right to have sex if two people have known each other for a short time? In 1987, 52 percent said, yes, it was okay. In 2001, it was down to 42 percent.

We also know that teens report less sex, as has been noted a number of times, in particular, teen boys. We know, too, that many teens say they wish they'd waited. About two-thirds of adolescents who say they've had sex say that they wish they'd waited longer. For the younger ones, it's 81 percent.

And interestingly now, almost 80 percent of young people say they do not think it's embarrassing to admit that they're virgins, and Newsweek magazine and Teen People has now declared it's cool.

So we may here be at somewhat of a tipping point, this phrase of tip and tipping. When you look at these numbers, I'm wondering if we really aren't seeing a really profound change that is driven in part surely by programs and other things, but very much a change in just what's in, what's out, what we do as adolescents, and what our values are in this area.

MS. SAWHILL: Thank you, Sarah.

QUESTIONS AND ANSWERS

MS. SAWHILL: I think we've heard a diversity of views here. I wish we had more time. I think we do have about five minutes before we need to shift to the other panel. So rather than asking a lot of questions myself, I want to see if there's anyone out there who would like to ask a question. Yes?

MS. MULLIN: Yes. I just wanted to ask Shanita—

MS. SAWHILL: Would you identify yourself, please?

Yes. My name is Mary Mullin [ph.] and I used to be a teacher. I'm not anymore. I wanted to know—ask Shanita, when she went into the neighborhood where she said there were two entirely different schools, one where it was run very incorrectly, another where there was a very positive feeling, did you ever do a study as to what was wrong? Did you ever present any information to the school that was failing? What was done about it, and did you ever find out exactly what the problems were?

MS. BURNEY: No and no, and I'll tell you why. The schools—it's, you know, the support of the schools is crucial for us to be able to even engage the youth or be able to pull them to us or have them feel as if we're a safe space to come to when we have that support from the schools as well as the parents, and we're just trying to recruit the youth. It's kind of, you know, a sticky type of situation here in the District in particular. The state of the schools is a hot topic. It's a hot issue. There are many arenas where we're sort of advocating for, you know, better schools on different levels. On the level of where—at Covenant House, in terms of sort of taking a stand against the schools, not so much at that level. That would be more so for, you know, not necessarily being the most appropriate place to do that.

Our former Executive Director is now the Ward 7 City Councilman in the District and so that's an area where we can sort of begin to deal with some of those issues. But this is something that is not just in this particular neighborhood. It's all over the District. So it's more of a—it's a larger problem than I think any one person or any one agency can begin to tackle.

MS. SAWHILL: Back here, the plaid shirt. Yes.

MR. SCIAMANNA: John Sciamanna for the Child Welfare League of America. Just a question on the Child Well-Being Index. Why no numbers in terms of child abuse and neglect in terms of the indicators?

MR. LAND: There are reporting problems on those. There are filtering problems. And it's difficult to know how accurate they are and do they reflect real trends or reporting trends. We have studied those and to the extent that we can correlate them with the data we have, we do

find that the trends and those numbers compare quite closely to our trends and overall mortality rates for children. So in some sense, we've captured those trends, as well.

MS. SAWHILL: On the aisle here.

MR. BATES: Darian Bates [ph.]. I'm with the Falls Church News Press. There's been recent—this is for Rebecca Maynard. I did get your name right, correct?

MS. MAYNARD: Mm-hmm.

MR. BATES: Okay. There's been a recent discussion about the accuracy of information presented in abstinence-only programs. Do you have any idea about the effectiveness according to the—as far as have you actually looked at the programs that have been taught as far as their effectiveness in preventing pregnancy and sexual activity?

MS. MAYNARD: Three of the programs that are included in this review had primarily an abstinence-only focus, but as I mentioned, for these three particular programs, the researchers were not very careful to document exactly what went on in those programs.

MS. SAWHILL: Over here.

MS. VILANDER: My name is Sarah Vilander [ph.]. I'm a graduate student at George Washington University and my question is sort of relating to the previous one. I've read in the media that schools in more conservative districts, in more conservative States, are moving more toward abstinence-only education and away from contraception, and then also are not necessarily teaching all of the biology or physiology, are kind of glossing over things. Do you see this as sort of a serious problem or is it something that, you know, is really only happening in isolated incidents, and how do you think that the shift in the way sex ed is taught might affect the pregnancy rate going forward?

MS. MAYNARD: One of the charts that is in the packet is a chart that shows that there has been, in fact, a substantial shift as reported by health educators, school-based health educators towards curriculum that is abstinence-only focused. It's gone up from like two percent in 1988 to 23 percent in 1999.

One of the things I think is important to keep in mind is that there are multiple sources from which kids get information. Even schools that have abstinence only as their health and sex education also have biology courses and other health courses that teach more of the physiology, biology, and so on. So I would say that there is a wide range out there in terms of what kids get as part of their standard curriculum. Many school districts also vary the curriculum by the age of the kids. There is much greater emphasis on abstinence only in the middle school years and much less focus on abstinence only in the high school years, which is not to say that there aren't trends, as well, but—

MS. SAWHILL: Sarah wanted to get in, as well.

MS. BROWN: Just another comment. As important as these arguments are in discussions about these curricula, if you talk to teenagers about where they're gaining a lot of information about sex, love, and relationships, they will talk an enormous amount about the Internet and media and so forth. And, in fact, the Kaiser data just released a couple of weeks ago shows that young people, teenagers, now spend more time each year engaged with the media than they do in school altogether, to say nothing of their sex ed class or those two weeks in April when we do family life.

So if people are concerned about what young people know, what the messages are, what we want them to do, what we want them to stay away from, I would suggest that while we continue to investigate particular curricula, school-based and so forth, that we try and understand an enormous amount more about the media environment, all things—text messaging, Internet, TV, movies, and all that—and understand much more about the composite messages there, what their effect are, what their accuracy may be, and so forth, because that's where—that's the 800-pound—is it an elephant or a gorilla? An elephant? A donkey?

[Laughter.]

MS. BROWN: And that, I think, merits at least as much attention as these school-based curricula.

MS. SAWHILL: Okay. I think that we should move on to the next panel. I want to thank this panel very much for your comments, and Bill and Ken for getting off to a very good start here.

[Applause.]

PANEL TWO: YOUTH CRIME

MR. HASKINS: Okay. Our next panel is on youth crime, both victimization and perpetration of crime.

Let me announce first that when you got here, these were not in the back, but on your way out, you might notice that there's a brief, a policy brief on the information Ken presented and also kind of an overview brochure that are available in the back, so please pick those up when you leave.

The format of this panel will be the same as the first panel. We're going to have brief opening statements and then we'll open it up to the audience as soon as the statements are completed.

We have asked our panelists to focus on the things that we can do to continue trends in the right direction. Both of these issues that we selected, as Belle mentioned and as I mentioned in the opening statement and as Ken chose so very clearly, have had very substantial improvements, but they're still very high. The improvements in crime victimization are really—I doubt that anybody alive even came close to predicting a huge decline in criminal victimization among youth. So why is this happening, and above all, if we did more of something, would we continue to see improvements? So we want to focus on the solutions, the programs and the policies that will continue improvements in this important area.

So we have a wonderful panel, a mixture, as on the first panel, of scholars and people who are more practical in their orientation.

First of all, we have James Lynch, who is a professor and Chair of the School of Public Affairs, American University. And then Sandy Newman, who's the President of Fight Crime: Invest in Kids. Gil Kerlikowske, who's the Police Chief in Seattle Washington. Jeffrey Butts, who's the Director of Program on Youth Justice at The Urban Institute. And then Janice Sullivan right here from the District, who's the Director of the Office of Youth Violence Protection.

So let's begin with Jim Lynch. Oh, and let me tell the panelists, you're welcome to stay in your seat or go to the podium, whichever you prefer.

MR. LYNCH: I've been a professor so long, I get scared if I stay in my seat, so—

[Laughter.]

MR. HASKINS: Everybody in Washington chooses the podium. Can you believe it?

MR. LYNCH: No, no, we had one person who was courageous enough to stay in her seat.

[Laughter.]

MR. HASKINS: No, I know, but she's strange.

[Laughter.]

MR. LYNCH: I hope you're good friends.

MR. HASKINS: We were.

MR. LYNCH: You were.

[Laughter.]

MR. LYNCH: I want to thank you all for asking me to come down here today. I found Ken's—I always find Ken's work very enlightening and exciting and I think this is no exception.

I want to talk for a minute about—the thing that strikes you about that work is just, I think as was said here earlier, especially in the public safety component, is just how big it is. I have a friend, Al Bitterman [ph.], who when he talked about crime increases, he said the good news is that it's so bad, and the good news here is that we've got these massive drops and they're so big that they attract attention. The problem comes with trying to parse out why these things have occurred so as to gain some kind of lessons from this pretty impressive, I don't know if it's a natural experiment, but fortuitous phenomena.

And so Howard Snyder and I from the National Center of Juvenile Justice have done some of the things that Ken has done here in terms of first defining these drops in crime and victimization and then beginning to sort of ransack the data to say what kinds of things are occurring that are large enough in scale and big enough in magnitude to begin to give us an idea as to what's going on and what's producing these kinds of changes.

So what I'd like to do for a few minutes is talk about the proceeds of these efforts and how they tend to complement some of Ken's, and I think there's more juice to be squeezed from this particular fruit that Ken has proceeded and I find it pretty exciting, because I have always focused on the crime component and it's interesting to see the trends in these other components that presumably are not responsive to the same forces that crime and victimization are responsive to.

Let me start by saying that what I'm going to try and do is look—give you an overview of the work that Howard and I did that looks for correlates or peculiarities in these trends that would give us an inkling as to what may be driving them.

In doing this, we had two approaches. One is to look at juveniles and to see if this, whatever was going on, was unique to juveniles or whether it was a more general phenomena. Was it affecting adults? Was it affecting middle-age guys like me? What was going on? That begins to sort of focus us on things that are unique to juveniles, if that's the case, so that's one of the strategies that we took.

The second strategy was disaggregation. These trends are highly aggregated trends and they're meant to be that way and that's where you should start. But illumination comes from disaggregation. So if certain sub-groups are affected more than other sub-groups, then this would suggest reasons why these things might be occurring, and this goes to some of the explanations that are briefly gone over in Ken's report about this drop.

So in the first instance, the idea, is it unique to juveniles, the answer was yes and no when you look at these trends in terms of offending, is what we focused on primarily. So there was a drop. The drop for juveniles was substantially larger than the drop for other age groups, even proximate age groups, 21 to 24, those kinds of age groups. And we did this both with official crime statistics and with the National Crime Victimization Survey offender data. That's what the victims tell us about offenders, because we know the police are a powerful filter and so much of what we pretend to know is driven not only by police statistics, but driven by homicide, which is a rarified subset of that whole business.

But what we found, then, is that—so the drop for—there is something unique in this period, and I say the period from '90—we looked at the period '80 to 2000, or 2001, I think, but focused a lot on that period of the drop, which is from about 1993 through to the present time. So there is something unique. Something's happening with juveniles, or something happened with juveniles during that period that is unique, so we can begin to hone in on the juveniles and how their experience may have changed over this period.

In terms of disaggregation, as Ken probably can tell you, the ability to disaggregate, and in many of these data sets it is not great, but we were able to do some disaggregation and that disaggregation supported in a very crude way—when people start talking about experiments, I cringe, because what we're looking at is these gross trends—but is consistent in many ways—some of these disaggregations are consistent in many ways with the explanation that Al Bloomstein and others have talked about in terms of the routinization of the drug trade and the dissemination of violence from the drug trade into the communities that were hosting that trade.

For example, we found that the drops in offending behavior were much greater for black youth than for white youth, substantially greater, at least—especially in that initial period from '93 to '98, and we'll get back to that.

Some other—it was—the drop was greater for males than females, but there's a bunch of stuff going on in the female juvenile trends that are more historic in terms of long-term effects.

Some of the other interesting things are group offending. This is something we were able to squeeze out of the National Crime Victimization Survey. A disproportionate amount of this drop was due to group offending. So there's less group offending among juveniles as reported by the victims. Now, whether that's gangs—there's an attribution of gang in some of these data, but it's a poor attribution. But certainly group offending.

Another drop was the drop in stranger-to-stranger offending was much more substantial than among intimates, and so—there was a much greater drop in serious violence for firearm-related. Now, that was both in the UCR trends, which are official data, and in the reports from the victims. So you have these characteristics that are very consistent with Bloomstein's explanation that says what happened was the violence diffused into the communities and the upsurge from around '86 or '87 to '92 or '93 where everybody is kind of like small claims court, you know, you bring an attorney, I have to bring an attorney. He argued guns is the same way. If guns diffuse into your neighborhood, you must arm yourself to protect yourself, and then fights over jackets become fatal as opposed to bruises, and that was kind of his explanation.

And so many of these things are consistent with that. And he said the decrease in crime was the reverse of that process. When the guns came out and the violence came down, people didn't have to affiliate, for example. Kids affiliate a lot for self-protection, and so group offending goes up. When you don't have to affiliate for group protection or you don't have to arm yourself for protection, these things will reverse themselves, and that's what he attributes that drop in the beginning.

So the fact that we're finding co-offending, if you look at that as affiliation, as the greater proportion of the drop than lone offending, which stays relatively flat.

If you think of firearms as a greater decrease than the rest of the violent crime, that again is consistent with Bloomstein's dissemination idea, that what's happening is you no longer have

to affiliate, you no longer have to arm because the trade has been routinized and the need for violence to resolve disputes goes down.

The same is true with stranger-to-stranger. Much of the increase that we saw earlier on was due to stranger-to-stranger violence that was attendant to the drug trade, and now, we see that's where the biggest drop is coming.

In black communities, or among the black population—I can't speak to communities—the drop is greater.

So all of these sort of accidents, all of these attributes and disaggregations of these trends are very consistent with Bloomstein's argument for the initial increase in violent crime. They were talking about violent crime and serious violent crime, principally. And very consistent with this argument for the decrease, at least for the period 1993 to 1998.

Then something happened, and we don't know what happened. If I have to talk to another reporter and say, I haven't the faintest idea, because the trends kind of break around '98. So very consistent with Bloomstein's explanation until '98, and then the drop gets greater for white populations, not black populations. So it begins to—it starts to diffuse again. So the places which could be easily explained by the diffusion of violence attendant to the drug trade no longer fit these trends, and that's continued. Our data—our analysis ended around 2000, 2001, and those things have continued. So the people who are contributing to this drop in offending and in victimization are not consistent with that earlier explanation.

So we take from that the idea that this is not a uni-dimensional explanation. You're not going to find—even though Bloomstein's is not uni-dimensional, it was a very complex set of phenomena, but it was a consistent cogent story, something else has to explain it now. Why did it diffuse into these other places which were populations that were at lower risk?

This is where the wild speculation starts about what's going on, and I think Ken is right in his report. We don't know what—we have a pretty good idea what that first phase was, but we don't know what's driving the second phase, and I think it's important that we begin to get a handle on it, except we are absolutely clueless, because when the drops in crime are coming in the beginning from large drops in small groups. Now we're getting small drops in large groups that are driving this kind of thing.

So what it may be is that there may be even more diffuse and complicated and multiplicitous explanations for this kind of thing and nobody likes that. You like something like "Super Predator" or something like that that's quotable.

[Laughter.]

MR. LYNCH: But I think we have to begin disaggregation further, I think, to begin to identify these other things, and what we're doing—the things have to be effective. In other words, someone was quoting an experiment. The great thing about an experiment is that you know what's happening. You know what caused what. And the stuff we're doing, you can't do that. But what's bad about that is that we have to explain this broad-based, massive change, and a little experiment may not do that.

I've got the hook here, so let me say one more thing and a suggestion to Ken, and that is—and it came probably from your discussion, really, and that is to say I think some of the links between what you're seeing, which is these other indicators of risk which have nothing to do with

crime on their face, you know, a decision to engage in sex, I can't see that really related to incarceration and all the things people complain that are driving crime. So looking at crime together with these other indicators of well-being is very exciting, I think, and can reveal some things, because we can perhaps get our head off incarceration and begin thinking about what could drive both the decision not to engage in risky behavior and the decision not to engage in crime, which is a subset. So that would be very exciting.

But I think the place where they meet is community, and we need to disaggregate down to those levels where we can begin to see the dynamics that link certain aspects of well-being with these other aspects of well-being. I think that would be an interesting place to go. I know the data aren't there, but presumably, we can hopefully get there. I think that will go a long ways, so thank you very much.

MR. HASKINS: Thank you. I don't think we should be overly concerned that we don't have a clue about what causes this because policy makers can go right ahead and make lots of policies anyway, so we're still in business up here.

Next, Sandy Newman. Oh, you want—okay, good.

MR. KERLIKOWSKE: Sandy's going to defer to me. I'm Gil Kerlikowske. I'm the Police Chief in Seattle. I only have three slides, so I won't do death by PowerPoint. If you run into Bill Gates, please don't tell him I'm technologically incapable of doing PowerPoint. Being from Seattle, I'm sure he would—it would not be particularly good, and Sandy will bring those up at the appropriate time.

Fight Crime: Invest in Kids is an organization. We're ten years old. It's an anti-crime organization. We have about 2,000 police chiefs, sheriffs, prosecutors, and crime victims across the country, and we are essentially—it's a nonpartisan group and about two-thirds of the membership are Republicans.

I think we're all—and I'm speaking now as a practitioner—certainly we're all very pleased with the decline in the youth crime and the youth victimization rates, but I also think as practitioners we clearly realize we could be doing so much more. As practitioners, we very much value and appreciate and to a certain degree understand research, the longitudinal studies, the empirical research, the rigorous evaluation of programs, but also to us, it's not rocket science. I think that in some ways, we've had a great deal of enlightenment just based on our own experiences.

Mine in particular, I think, came about—I had a young police officer shot almost a dozen times and, of course, he died of those wounds. He was shot by a 19-year-old offender who had just recently been released from a jail situation, a non-violent crime. And during the trial and during the death penalty phase, we actually found out a great deal about this individual who had taken this police officer's life.

This individual had been arrested for breaking into cars, and after multiple property crime arrests actually ended up serving some time in the jail. But before that, as a juvenile, he had come to our attention. He had broken into the house next door, obviously not the sharpest criminal in the world to break into the next-door neighbor's. And before that, he had been arrested for some other crimes, including one of the times he came to our attention was shoplifting at K-Mart.

But even before that, in researching the records, we found that he had come to our attention because his mother called and essentially had declared that he was an incorrigible youth, and this was while he was in grade school. And come to find out that his mother, as is no surprise to many of you here, his mother had abused alcohol while she was pregnant with him, so he was a fetal alcohol baby syndrome, many other problems.

We looked at what had occurred and we looked at the technological changes that could improve the Office of Safety issues, whether it is in training or things that we call such as handgun retention. The officer was shot with his own gun, which actually is not an uncommon incident in policing. But we thought we'd actually also look at this offender's life and what we could be doing.

So we wrote a grant. We hired a social worker inside the police department and we began to make referrals to her about kids we came across through a variety of things. The Public Health System came and gave some lectures to our officers. They provided them with information about prenatal care. We wanted our officers, if they were at the scene of a call of domestic violence and the woman was pregnant, to be able to ask her, are you getting health care? Are you going to a doctor?

We didn't see all of this as an incredible amount of really wonderful social service on behalf of the police department. We probably didn't even call it community policing. You know, what we saw it as was officer safety. We were preventing the death or the harm to a police officer ten and 15 and maybe even 20 years in advance by taking these kinds of steps, and that's the kinds of things that we're talking about.

There are two types of investments here. One, of course, is the short-term investments. We also have a saying, being somewhat cynical in this business, that with all this wonderful information, remember the forces of evil are gathering against us. So we see these downturns, and again, they're wonderful downturns, but the numbers were so high that to see this reduction, you have to again keep this into context. Sarah mentioned not turning off the spotlight or the heat on these kinds of issues, whether it's teen pregnancy or youth violence and victimization.

We've seen some wonderful programs that have made a huge difference, for instance, Operation Night Light in Boston, which through a comprehensive set of collaborations has made a difference, or did make a difference for a number of years in that city in the amount of youth violence, although now those numbers are clearly starting to tick up.

And right here, of course, you've read some of the articles in the Washington Post about Fairfax County. So here's a county with well over a million people, with a very high income, with wonderful schools, on and on and on, and when I was at the Department of Justice, we were Fairfax County residents a few years ago. But you also see the issues of gang violence.

You can pick up the Los Angeles Times on any day of the week and you can see the gang violence issues certainly on the West Coast. And that, we've seen a 50 percent increase since 1999 in gang homicides, and youth gang members have perpetrated a large percentage of all juvenile violent crimes.

But those short-term programs, such as the one in Boston and others, of course, also need to be sustained and we're not seeing that the amount of Federal funding for those kinds of programs has stayed steady and it does need to be sustained.

And in law enforcement right now, we're kind of—I'm sure everyone uses the "Perfect Storm" analogy way too many times, but we look at what we're doing in the areas of anti-terrorism on the local government perspective. That has drained some of our resources. We look at where the Federal Government has put a lot of money into counterterrorism issues and taken away some of those Federal resources that had been used for local crime problems. All of these things have made it particularly difficult on the local front.

Programs that provide close supervision of high-risk kids, programs that provide the quality after-school programs and mentors all make a huge difference.

But we also, actually in the very first part of mentioning this, we also really clearly recognize that everything from prenatal care to making sure that kids get the right start early on is absolutely critical. We're not concerned about working ourselves out of a job. I think we'll still have plenty of work in law enforcement.

One example, and I'll ask Sandy to put that first slide up, one example is the home parenting or coaching program. It provides coaching and support for first-time at-risk moms. Called the Nurse-Family Partnership, it's been proven to reduce child abuse by 80 percent. And so these are teen mothers at risk, and whether it's in a Visiting Nurses Program or this partnership in particular, when those mothers who are at risk actually get the kind of training and the kind of insight that's needed, it makes a significant arrest.

You could also go to slide two, Sandy. The arrests of these kids when they're in their teenage years, those that had been exposed to this program made a significant improvement. There was just a gross reduction in the number of children arrested for this. And, remember that these mothers are pretty at-risk individuals themselves. The arrests of the mothers over the number of years also was reduced as a result of this.

Pre-kindergarten programs, such as Head Start and others—I'll ask Sandy then to put up the third slide, which is about the High Scope Education Research Foundation, which—

[Break between recorded tapes.]

MR. KERLIKOWSKE: —certainly the Child Welfare League is intimately familiar with that, in Ypsilati, Michigan. It shows that kids left out of the program were five times more likely to become chronic law breakers compared to kids in the program.

So here you have this wonderful longitudinal study which actually has just been followed up within the last couple of years. Every bit of that data, those trend lines begin to show you that these are folks that have actually achieved more. They earn more. Their job classifications are at a higher level. And it goes on and on.

And what's so amazing to us in law enforcement is that these are really low level investments of time and money compared to jail. I mean, I think we're all smart enough to realize that it isn't going to be a jail solution to some of these kinds of issues. But you look at what quality preschool starts at right now, \$5,000, \$7,000. I mean, it's clear that the Federal Government needs to make and help to make investments for these families to get this kind of help.

Right now, the premier Federal pre-K program, Head Start, is not funded. I think only one in—it serves only about one in seven eligible children, and I think that's a disgrace.

When we talk about community policing, we really see that community policing is the involvement of police officers as a help and a support and a part of the faculty in schools, as a part of neighborhood organizing, sustaining many of these programs. But we also see our role as an opportunity to speak out on some of these issues which normally you wouldn't hear a police chief, a sheriff, or a prosecutor speak out about, because I think it makes sense to us.

I very much appreciate the opportunity to be on the panel. Thank you.

MR. NEWMAN: Thank you, Chief Kerlikowske. I'm Sandy Newman and I'm the President of Fight Crime: Invest in Kids. Chief Kerlikowske was one of our first members and is our Board Chair.

The story of Fight Crime: Invest in Kids actually starts long before we began as an organization, 21 years ago to be exact. My wife and I were asleep in bed with our newborn daughter in a crib at the foot of the bed and were awakened by an intruder crouching next to that crib. We were lucky, first lucky in that the fellow ran faster than I did when I gave chase and ran out of the house, and lucky in other more important ways. When I came back in the room and saw the crib empty, my heart stopped for a moment until I realized my wife had picked up my daughter and taken her into the next room.

The police had this guy in a squad car six minutes later. You can't ask for—in fact, we shouldn't ask for that kind of response time. It helps, though, to live between a 7-Eleven and a police station.

[Laughter.]

MR. NEWMAN: But it was pretty obvious to us that that could easily have turned out differently and that if the fellow had had a gun and had chosen to use it, all the police action in the world couldn't have undone the damage that would have been left.

So I began then to be interested in what really works to keep kids from becoming criminals in the first place, what could have kept that guy from showing up in our bedroom. And for many years, the answer to that wasn't so clear. You could look at research, but what you mostly got was ideology. We believe if you did this, it would make a difference, but not very much solid, particularly randomized trials, that really gave an answer.

When I took another look at this in 1995, it had changed. In fact, it was that last slide you saw, or the data behind it from the High Scope Perry Preschool Program [ph.], that showed kids left out of that program were five times more likely to become chronic lawbreakers with five or more arrests that made me think, you know, and I looked beyond that and saw some other data. We know some things that we can do. It's always hard to look at trend data and figure out, well, what exactly caused this trend? Frankly, it's a lot easier to say, what's proven to work that we know can make a difference in the future?

And so that's been our main focus. Our membership is 2,500 police chiefs and sheriffs and DAs and victims of violence. Most of the victims of violence are people who make my story look like a walk in the park. They're mostly people whose children have been murdered or who have been victims of brutal crimes themselves. So we're not about to advocate something because it sounds like it might be a good idea or it's part of somebody's dogma. We want to see the evidence that it really will make a difference in reducing crime.

Chief Kerlikowske has talked about a couple of the things that are best proven. I want to expand on those and talk briefly about one other area of intervention. On your way out, you'll see our Youth Violence Prevention Plan summarizes some of the most critical interventions.

As the Chief said, the Nurse-Family Partnership in-home parenting coaching program cut child abuse by 80 percent in the first two years, and that's now been replicated with similar results in other cities. It also cut crime by 50 percent and parents' arrests by two-thirds, as you saw on the slide.

Now, we know that most kids who are abused and neglected aren't going to go on to become criminals, violent criminals, and yet we also know that being abused and neglected greatly increases the risk that that will happen. We did some analysis in our report on preventing child abuse, which you'll find on our website, and we looked at the abuse of the—the results of the abuse of the 900,000 confirmed cases of child abuse and neglect in the year 2000—I'm sorry, in 2002.

Now, most people estimate that there are actually three times as many real cases of child abuse and neglect as these confirmed cases, but just looking at those confirmed cases, we found that it would be expected to produce 35,000 additional violent criminals from one year of abuse and neglect. If, in fact, abuse and neglect is triple that, then abuse and neglect alone is producing 100,000 violent criminals. This is controlling for other risk factors. That is a pretty enormous toll. And, of course, that's only the beginning of a cycle because the poor mother who's been abused, it turns out, is 13 times more likely to abuse her child than another mother.

Now, the good news is we know what to do about it. We know something that can dramatically get rid of most of the abuse, 80 percent of the abuse, perhaps, in families we identify as at risk. That intervention actually will save over \$17,000 for each family that gets it. The Rand Corporation says it pays for itself within the first three years and ultimately pays back four times its cost. It sounds like a pretty good investment to me.

Now, it's interesting that—there's been some talk about how these risk factors go together and things that affect one affect another. Well, it turns out if you look at pre-K programs, like the High Scope Perry Program we've talked about, similar to Head Start, there are benefits that go well beyond those crime impacts, as you'd expect.

One of them, by the way, is that the program cut teen pregnancy in half, and that's actually a finding not isolated to this program. If you look at the Abecedarian research, it shows that kids in the program, on average, had their first pregnancy two years later than kids left out. So it may actually be—I'll leave this to our—I'm not an expert on teen pregnancy prevention, but it may be that pre-K programs are not only among the most powerful weapons against crime, but the most powerful weapons against teen pregnancy. It also may be with the teen pregnancy declines are part of what's driving crime declines.

We also know that kids in the High Scope Perry Program were half as likely to need special ed, 50 percent more likely to graduate on time, had four times as—were four times as likely to be making over \$20,000 a year. If you want to know what the private sector thought of their productivity, their average salaries at age 40 were \$5,000 more than the kids who had been left out of the program. So the private sector apparently thought they were at least \$5,000 more productive each year.

We also know that intensive interventions for troubled kids can be very effective in helping get them on track. We tend to resort to juvenile detention as a first option. I'll tell you, we more than anybody will say people who are too dangerous to be on the street ought to be behind bars, but programs like the Multi-Systemic Therapy Program which intervenes with the kids to change their behavior, break their peer connections to bad influences, and with parents to equip them, and with school and community, have been shown to cut recidivism by 70 percent compared to more traditional interventions. Again, we know things that we need to do.

So if you look at all of these, you find the programs save money. I mentioned for the Nurse-Family Partnership, the evidence. The age 40 study that Chief Kerlikowske referred to at the High Scope Perry Preschool Project found \$17 in savings for every \$1 invested. The research on the Multi-Systemic Therapy says it saves \$28 for every \$1 invested.

And yet there are huge unmet needs—Head Start serving only about 60 percent of the kids who need it and the Child Care and Development Block Grant serving, as the Chief mentioned, one in six of the kids who Congress has found won't get decent child care, can't afford it without help. The Nurse-Family Partnership, serving a tiny fraction of the kids who are eligible even by the narrowest standards with virtually no Federal funding. The programs like MST, woefully under funded.

Now, it doesn't have to be that way. In fact, if one were saying, well, what will it take to be able to save Social Security, reduce the deficit, one might well say, well, a key place to start is making these investments that save so much money for taxpayers, and failing to do that is squandering billions of dollars in taxpayer dollars every—taxpayer funds every year.

We could, for instance, if in the budget that had just been introduced and the budget resolution that each House has adopted, if we had said, let's put \$2 billion into expanding the Nurse-Family Partnership or other in-home parent coaching programs, we could be serving all of the kids that are being left out and meet the eligibility criteria for Nurse-Family Partnership, only \$2 billion. If we were investing \$25 billion a year in pre-K programs, we could be making sure that every three- and four-year-old under 85 percent of median income had access to a pre-K program.

Those investments are tiny and they more than pay for themselves. Just to put that in perspective, the Senate budget calls for \$70 billion in additional tax cuts. Actually, it calls now for \$130 billion in additional tax cuts. The President's budget called for \$70 billion.

Now, don't get the wrong idea. This isn't a partisan agenda. In fact, two—in fact, the majority of Fight Crime: Invest in Kids members are not police chiefs. The police chiefs, we can't tell their partisan identity usually. Two-thirds of our members, of our sheriffs and DAs who are elected are Republican.

So this isn't about attacking anybody. It's about saying that when we know that pre-K programs dramatically reduce crime and that leaving kids out multiplies by five times the risk that they'll be chronic offenders, when we know that home visiting programs can so dramatically reduce child abuse and cut crime in half, when we know that programs like Multi-Systemic Therapy can so dramatically reduce recidivism, it's just common sense, not Republican common sense, Democratic common sense, just plain old common sense to make those investments.

And if we do that, we can win a stunning victory against crime. And we will win a stunning victory against crime when we are as ready to invest in a Head Start program today as we are to guarantee a prison cell tomorrow. Thank you.

MR. HASKINS: Jeffrey Butts of The Urban Institute.

MR. BUTTS: I'm going to say just a few things. It occurred to me as I was listening to the prior panel that most of my comments, you could just run back the transcript of Sarah Brown's comments and replace the word "teen pregnancy" with "juvenile crime," because it is striking how similar they are and how our ability to explain, understand, and intervene is striking that those two phenomenon, and other phenomenon included in the Child Well-Being Indicator Report.

When you start to see those trends co-occur like that, the best response as a policy analyst, a researcher, and hopefully even a lawmaker, is to be a little more cautious in terms of your ability to explain the world around you because we intervene in problem A and the trends in problem A go right along with problem B and C. We shouldn't hold on to our belief that we've affected problem A through our intervention. So what is it that's going on?

I guess I tend to be cynical about the assertions of policy solutions, and I guess that's captured—I have this little sign hanging in my office, and I was trying to sit here and remember the author. I can't remember her name, but she's a novelist from the 1920s and I have it printed up in my office and it's a line from a novel she wrote and it says, "Facts are like cows. If you stare them in the face long enough, they generally run away."

[Laughter.]

MR. BUTTS: But the road to juvenile justice reform and effectiveness is just littered with disappointments and confusion and solutions that seemed promising one year, and then five years later, everyone had discovered that they weren't as effective as they had hoped. And rather than repeat that litany to you or give you examples of it, because I'm sure most of you probably have some examples of your own, I just want to tell you a few things that I've concluded, having been in this work for now about—I've focused exclusively on juvenile justice for about 15 years, and there are three things.

One is that the level of punishment in society has a minor effect on preventing the basic level of crime and violence in the society. To understand why we continue to believe in the punishment response, I guess you'd have to read people like Fukow [ph.] and David Garland [ph.] and the historian David Rothman [ph.]. But we always instinctively turn back to punishment.

Now, punishment does work—criminologists talk about the various purposes of punishment. Punishment does work to contain known offenders, obviously, and we call that incapacitation. If you lock people up, you reduce their ability to inflict harm on everyone else. So obviously, the level of incarceration in society has had some relationship to all these trends. Twenty-five years ago, we had about 300,000 people in prison. Now, we have two million in prison. Now, most of those, obviously, are adults, but a lot of those people are locked up during the high-crime years. If you just quarantine all males between the ages of 15 and 25, you will wipe out much of the crime in society.

MR. HASKINS: That is not a good idea.

MR. BUTTS: No, it's not.

[Laughter.]

MR. HASKINS: Thanks for clarifying that.

[Laughter.]

MR. BUTTS: I don't think anyone has proposed that. But on the micro level, we still believe that punishment is the best and first response to all crime problems, and you saw it a couple of weeks ago. We had the horrible school shooting in Minnesota and all the voices come back, what we need is more punishments, longer this, more transfer that.

When you look into that—remember, facts are like cows—when people do research on all that business about sending kids into the adult court, there is no evidence that that has helped us in terms of the levels of public safety. It does affect those people. You are more likely to get a longer sentence in the adult system than you are in the juvenile system. But the people we send away to the adult system as kids, the numbers are so small that the contribution that makes to the overall crime problem is really negligible.

We also have—we know now from research that the deterrent effect of all these transfer policies and excessive punishment is also very minimum, because if you believe that tough punishment stops people from committing crime, you have to believe that a person who's about to commit a violent crime stops and ponders the question of what their sentence might be and then decides to proceed or not based upon their calculus of what that sentence might be. That is probably true for some people. People who are in the business of violence for economic gain, violence for power and neighborhood control, they may actually have that kind of calculus, but most violent crimes, the overwhelming majority is not committed in those circumstances.

So that's one. We know punishment will reduce crime among known offenders. It does very little for us in terms of preventing crime. The investment phrase, fight crime, invest in kids, latches on, too, I think is a sensible way to think about it, because if we have a certain amount of public policy resources, where do we invest at, and so far, we believe the only justifiable investment in crime policy is punishment, yet there's no evidence for it.

The second thing I want to tell you is that all of our current beliefs about what is effective, in terms of how do you reach kids and stop them, you know, the 12-year-old vandalizer, petty thief, minor problems at 12 and 13 years old, how do we stop them from becoming the horrible problem at age 18 and 25, and that's what we hear all the research about randomized controlled trials and testing one intervention versus another. And the second thing I want to tell you is, unfortunately, that whole world, that whole field of endeavor is also imperfect.

As I know from personal experience, it's very hard to design a well-constructed, effective evaluation project which will allow you to say with some confidence in being accurate that this program works better than that program, or the question very few people bother to ask, is this program better than doing nothing at all? So many of the interventions we have that we believe are effective don't stand up to that scrutiny, and the problem there is that—I'm sure you'll all be shocked to hear this—that that field of endeavor is affected by money, marketing, politics, ideology, personal ambition, careerism, and it's just difficult to stick in that field and do something that's useful, practical, and actually helps decision makers make decisions.

And a lot of the programs we have now that have the reputation of being effective—remember, facts are like cows—if you actually go and read their literature, which very few people do, read the research literature which has led to this reputation, it doesn't take you long to find chinks in the armor. The problem is that a lot of the programs that we have that we believe are effective have been evaluated and promoted by—so the people doing the research are actually the people who created the intervention.

So I create the "reduce crime through oboe lessons" and I go out and write lots of articles about how oboe lessons may help kids attach to pro-social institutions. They may commit less crime. And if I stick with that for 20 years, eventually, people start thinking oboe lessons might be something we could really contribute to crime.

So you have to read the literature, read the research designs, or have someone else do it. Few of us have the patience to read all that research. But every time you pursue that question, what is the basis for this reputation, very few programs survive the scrutiny.

Now, the Perry Preschool Project that was just mentioned is one of those which has survived scrutiny for—30 years?

MR. LYNCH: The age 40 study just came out, so—

MR. BUTTS: So there are some that manage to maintain and manage to survive, but most don't. So that's the cynical negative stuff. So where do we go from here? Well, what do we do?

And the third thing I want to tell you is that after having spent 20 years doing this, I've come to the remarkable conclusion that kids are people, too, and they basically behave and respond to the same incentives the rest of us do. When I confront people who have this fervent belief in a particular approach to reducing crime, usually, it's because of our—we have a punishment proclivity in this society. We also have a proclivity to see social problems as responding best to psychological solutions. I don't know why. I don't know why it's all we think internal troubles are what we need to focus on to reduce crime.

I always ask people, what makes your kids keep going to school and want to go to college? Is it the fact they've been attached to a counselor, or is it because of where they grew up and who they're around? Obviously, kids respond just like we do. You need some sense of hope, some sense of belonging, some sense of self-confidence that you can affect the world around you and you can accomplish something if you try, that the world will return rewards to you if you believe in the rules and invest in those rules and play the game the way you're supposed to, and then a sense of fun and engagement.

Well, all those things are wrapped up in the concept of positive youth development and my personal conclusion, after doing this for now 20 years, is that the solution to juvenile crime is to focus less on the scale, the scope, and the targeting of punishment and the more trying to replicate that environment for kids who don't have it on their own.

If you take a kid who grows up in a neighborhood where there are opportunities to participate in recreation, people care about them, people check up on them, if we have kids in neighborhoods that don't provide that on their own, then all the programs around them should focus on trying to replicate those conditions for that kid, and that means starting early. It means having a primary prevention approach rather than waiting around until kids reveal themselves to

have—there's a switch that goes off when kids start to commit serious crime and we can't wait for that switch to be flipped because it's awful hard to un-flip it.

So that is my conclusion after doing this that long, that we really need to invest in these basic sense notions of positive youth development and not wait around for the criminal justice system to solve our problems, because it wasn't designed to. It was designed to investigate, find offenders, punish them, but that's not a way to keep the crime rate down and keep it going down.

MR. HASKINS: Thank you very much. Janice Sullivan from the District of Columbia, welcome.

MS. SULLIVAN: Good morning. As you said, I'm the Director, Office of Youth Violence Prevention in the District of Columbia. My role is somewhat different because I am involved on a day-to-day basis with the youth we're trying to change.

Specifically, let me give you a little overview of my office. I have a—my staff is centrally located in headquarters and we cover the entire city. We target youth and young adults between the ages of 14 and 24. The reason the unit was established is because we realize that you have a lot of young adults that still associate and/or do participate in activities with juveniles as young as 14, 12 and 14 years old, so there really isn't a distinction in their behavior, it's just on their birth certificate that indicates that they should be doing something different.

We provide—we collaborate with a lot of grassroots organizations to provide services to the community. What I'd like to do is give you some stats on what we deal with—what we dealt with in 2004.

Total number of juvenile homicides in 2004 were 24 youths. All victims were black. There was a 23 percent increase in the number of female victims that were homicide victims in 2004. There's been a drastic increase in the number of females that are involved in violent incidents.

Right now, there are over 100 gangs in the city with over 2,000 membership. That's not including female crews. Female crews, for lack of a better term, are those that have not committed the level of crimes that the male gangs have. The District uses the same standard, definition for a gang as the FBI uses, two or more individuals involved in continuing criminal activity. Because there is not, for lack of a better word, a structured gang definition, a lot of the females that are becoming involved, have been involved in incidents of assault, intimidation, minor theft, and a lot of Part 1 offenses. We're finding that you have gangs in elementary schools all the way up through adults that are in their 30s and 40s. So trying to come up with programs that address this whole group, because they all overlap, has been very difficult.

Let me back up and give you some more data. The average time that the crimes occur are between 9:00 p.m. and midnight. The standard method for violent weapon use is a gun. May is the highest crime month, on average. The lowest months are July and August.

Additionally, let me see, the average age of the victims have been between 15 and 17, and for females, as young as 12. Now, we're not going to include children that have been victims as a result of parental incidents, so they're not included in those numbers. And females have increased as offenders and victims in their role in juvenile crime.

In 2004—2003, I'm sorry, we had a female gang conference. We didn't publicize it as that, but we decided we needed to bring these young girls in to have some dialogue on why

they're getting involved in gang activities. We had anticipated having 98 participants. We ended up with 150, and they were from gangs city-wide. Of course, we had sufficient law enforcement there to ensure that nothing happened.

[Laughter.]

MS. SULLIVAN: And what we found out, we found out that these are the individuals that most organizations don't want to be bothered with. Nobody wants you to have any kind of event with that group in their facility. They want to make sure you have, if there are going to be 100 participants, they want you to have 200 officers. And they assume that they're going to see what you see on the news as it relates to the gang.

I could have probably brought a group of 50 kids in here and you all would have thought that they went to an Ivy League school when they sat in this school and you would have never known that they would have been involved in this kind of activity. So they're not a group that you can see walking up and down the street and say, oh, she looks like she's involved in a gang.

Our problem is trying to address what their specific needs are, and they vary according to age, income, and all the factors that have been named on this stage, and it's hard to come up with something that's going to draw in all of these groups.

What we find are the most effective programs are these grassroots organizations where there are people involved that experienced the same things that these youth are experiencing. We have youth that will commit a crime and say, well, going to Oak Hill is like going on a vacation for them. They're never taken out of their community. If you take them to a trip to Six Flags, which from this District is 20 minutes, it's equivalent to taking them to Florida to Disney World for a lot of them. So it's all in your perspective of what goes on around you.

We find groups like East Capitol Center for Change, they have numerous programs which are designed to target the needs of the individual child, not as a group. I guess I look at it in the context of when you go to a grocery store. Three people may go in the store and each will come out with different items, and so one thing is not necessarily what everybody needs, and a lot of programs are designed for groups. You bring a group in and you give them workshops or you work with them on mediation or anger management. Well, you can work with me about anger management, but I don't think I have an anger problem, because in my household, everybody screams and rants and throws things.

[Laughter.]

MS. SULLIVAN: So we look at it in the context of when you're dealing with the—

MR. HASKINS: Do you work at Brookings?

[Laughter.]

MS. SULLIVAN: When you're dealing with the individual child, you need to look at their whole family. You need to look at their environment.

And so we're kind of stretched out because we receive what we call referrals. We do intakes, where parents will call and say, "My kid's out of control. Just come get him." And you go up there and the child will stand there and call the mother all kinds of names, but they'll respect the officer. And if the officer says, "Look, apologize to your mother," they'll apologize. He takes him outside, and when he talks to him, he'll say, "Well, I just needed \$5 to go to the

movies and my mom didn't have it." And so to them, that's a big thing, but the fact that the officer took the time to talk to him, "Well, maybe you shouldn't have done it that way."

And so it's part of dealing with the parent, because you have children parenting parents, and you also have grandparents parenting kids that don't really see the signs. I can pretty much guarantee that out of all the individual gang members that I've encountered, if you ask their parent, 80 percent of them would say, "My child's not in a gang." All the signs may be there, but they just don't realize that those are the signs that you need to be more involved with the children.

Programmatically, we do gang mediation, where we bring the kids in and try and work out what the issue is, and the issues are a lot of times relationships, lack of finances, he said/she said. "Well, I really don't know why we're warring. We've just been doing this for the last ten years, and so we just picked up on it to continue it." After some dialogue, well, you know, he's kind of nice. Well, maybe he is all right. But we spend so much time and money studying the problem instead of addressing the fundamental issues.

My issue is, since I have a podium, continuance of services. People don't want to fund basketball leagues, field trips, those kinds of what they call touchy-feely things. They lose the idea that the purpose of having those kind of activities is what draws a kid in. You're not going to—forced participation, you're not going to make a difference to that child. You can sit them in the room and you can talk until you are blue in the face and they are still going to have the same perspective when they walk out because they haven't heard a word you've said. But if you bring them in and provide an activity that is of interest to them, dialogue with them, and then structure programs or involve them in programs that spark their interest, you end up having better outcomes.

What we are doing—one of the areas we are looking at, out of the 24 homicide victims in 2004, ten had been released from Oak Hill less than a year. We're looking at how to fill those kinds of gaps, how to address issues such as last year we had one of our major homicides a young lady, I believe she was about 12 or 14, and there was a big public outcry about what government wasn't doing. Well, unofficially, my question was what's the parent not doing that a 14-year-old is out 2:00 in the morning on a weekday?

Okay. So there are a lot of things that can be done, but I guess from my perspective, continuance of services, supporting those organizations that are actually in touch with the youth is the most effective way.

MR. HASKINS: Thank you very much.

QUESTIONS AND ANSWERS

MR. HASKINS: Well, we certainly heard a range of ideas about causes and solutions. Let's see if we have questions from the audience about any member of the panel. Right up here.

MS. POOLE: Hi. Thanks. My name's Mary Poole [ph.], and I actually have a question about—I guess this is really directed to anyone—the role of Federal funding to the States and its implications on prevention of delinquency or intervention with juveniles.

MR. HASKINS: Sandy?

MR. NEWMAN: Well, if you take a view of looking at the programs that have been proven to work, and I don't know, Jeff, you may disagree with this, but Jeff pointed out the Perry

Preschool Program has now been studied for 40 years. There's very vigorous research of the program, it served 100,000 kids in Chicago, called the Chicago Child-Parent Center that's been studied for over 20 years now. The Nurse-Family Partnership is in its 25th year and has been replicated in other cities. I think that Multi-Systemic Therapy and Treatment Foster Care, these programs for kids who are already in the JJ system which have now been studied in randomized controlled trials in multiple cities would survive the most rigorous look at research.

If you look at that, yes, the Federal Government is a key source of support. Head Start is the premier pre-kindergarten program for children in poverty. There are States increasingly, and we hope there will be more, that are also stepping up to that plate. But the government's role is critical. The cost of a pre-kindergarten program for one year is typically, for a decent program, is typically in the neighborhood of \$7,000. Now, if you can figure out how a parent working full-time at minimum wage, making \$10,000 a year, can pay for that without somebody's help any more than they could pay for public school without somebody's help, you're doing better than I can.

So you look at what the government should be doing, which is providing really principal support for this, and I think most of us don't care whether it comes from the Federal or State level, although at times like this when the Federal Government has the capacity to make an investment because it can deficit spend and the States have less capacity because they're not permitted to deficit spend, it sure seems to make sense for the Federal Government—

MR. HASKINS: Let me redirect your question a little bit. One of the best-known programs that the Federal Government has funded in recent years under the Clinton administration was variously called Community Policing. It was supposed to put 100,000 cops on the beat. I don't think it ever actually made it that far, but that is a program that may be in some jeopardy at this point. Would it have an impact if those funds were cut, Chief?

MR. KERLIKOWSKA: Well, it has been cut, and actually, I served as the Deputy Director for a couple years of that program here in D.C. I think it was a good program at the time and it put some additional resources, and as even, Ken you talked about, whether community-oriented policing. But I think the long-term benefit of COPS was that it provided a real sense of training, technology, the understanding of data, problem solving for police officers, a whole range of skills and knowledge.

Right now, adding more officers, especially with Federal funds, is probably not the wisest move. What I do see as the wisest move for the Federal Government is to continue to invest in those areas of training and technology for local law enforcement.

If you listened to the 9/11 Commission report and you listened to Secretary Lehman, John Lehman just really chastised the New York City Police and Fire. He said, oh, this is awful. You should have had a much, much better system. John Lehman was Secretary of the Navy. The Navy had more money in research and development in one day than every police department and fire department in this country put together for an entire year.

The Federal Government investing not in paying the salaries of police officers but investing in the training and technology for those systems and the ones Sandy mentioned, I think is the best move.

MR. HASKINS: Bill O'Hare?

MR. O'HARE: That was my question.

MR. HASKINS: Oh, okay.

MR. O'HARE: Is that program in jeopardy?

MR. KERLIKOWSKE: It's pretty well decimated. I think from a \$6 billion program, it's down to less than, I think between \$90 and \$130 million.

MR. O'HARE: Do you think that had any impact on the trends that Ken identified—

MR. KERLIKOWSKE: You should ask Dr. Lynch.

MR. LYNCH: Well, actually, GAO is having a meeting on that evaluation—

MR. KERLIKOWSKE: Right.

MR. LYNCH: —that NIJ commissioned, I think April 15. I don't think they've released their report yet, but the initial evaluation that NIJ funded—

MR. HASKINS: NIJ—National Institute of Justice.

MR. LYNCH: —National Institute of Justice, did show an effect on crime.

MR. KERLIKOWSKE: And there was a significant study by Jeff Roth at Urban funded by NIJ to look at—and I think there were a tremendous number of positive benefits—

MR. : And also Zalsworth [ph.] was consistent with that, which shows that it did have an effect.

MR. HASKINS: And what is it, Chief, that produces the effect? It's the technology and training and so forth? It's not putting additional police on the beat?

MR. KERLIKOWSKE: Right. I think that the issue of—and it's not actually—there isn't a police department I know, including our own, and a mayor that I—you know, every mayor that I know would like to put more officers on the beat. The question is, one, is that really the Federal Government's role, to pay for the salary and benefits of local police officers?

But number two, I think it is the Federal—and that's debatable—it is the Federal Government's role to provide for these kinds of—you know, the operation that took place in Boston that I mentioned, Operation Night Light, the Federal Government can actually help to replicate that by sending the trainers, the train-the-trainer programs and teaching those kinds of successful models in other parts of the country. I think that is the best investment for the Federal Government in law enforcement.

MR. NEWMAN: I'd just add on the Federal budget and what's happening to these programs, 80 percent cut proposed this year in the COPS program, basically wiping out what's called the Juvenile Accountability Block Grant, which supports interventions like Multi-Systemic Therapy. The budget would push—instead of meeting the unmet need on Head Start, would push out of the program over five years one out of eight of the kids now being served. It would push out of child care support one out of eight of the kids now being served. It would push out—

MR. HASKINS: This is primarily because of inflation. They're not programmed increases, and so the dollars that we—they're not cuts in the way most people think of a cut.

MR. NEWMAN: Well, they're not cuts in what I would call nominal or illusionary dollars. I mean, I think, actually, most people—

MR. HASKINS: No, but it is inflation. It's—

MR. NEWMAN: Right. In other words, usually, when you talk about whether there's a cut in a program, at least the way I talk about it, is there a cut in services, and to do that, you have to look at what economists call real dollars, right. I think if you look at real dollars, there are real cuts. If you look at nominal or, I would say, illusionary dollars—what's the opposite of real, unreal dollars—they are not real.

MR. HASKINS: Another question from the audience? One more question. Yes, this gentleman right here.

MR. BATES: I'm going to have to ask your name again from The Urban Institute.

MR. BUTTS: Jeff.

MR. BATES: Jeff. To what extent can programs replace sort of the natural, you know, introduced programs actually replace the natural conditions that are inherent in a community? I mean, how much can you really—in a community that really does not support its youth, how much can you really introduce that will have a significant effect and how much will that require from any sort of government, local or Federal?

MR. BUTTS: Replace, no. Leverage, support, enhance, strengthen, yes. Actually, the answer to your question and the prior question, for me, I do a lot of work in State and local governments with juvenile justice systems and increasingly substance abuse treatment systems, and from what I've seen over the past few years with the decline in Federal funding, it basically reduces innovation, experimentation, and new ideas.

What agencies do at the local level when there's a Federal grant available, even if it's a block grant or a competitive grant, they use that money to do something new and different, and sometimes they take their more experienced staff and move them into a grant-funded position to try something new. They try to restructure their system. They try a new intervention technique. They form a community liaison group or a youth advisory panel. And what happens when that funding goes away or it's feared to go away is those skilled, experience staff bump back down into the line positions because no one wants to be on a grant-funded project because those get laid off.

So you expand the agencies and do new ideas with Federal funding. When that restricts, you go back to just maintaining the base. And whether you believe that that innovation and experimentation is a good thing or not, of course, is an empirical question. But I think we did see a lot of new ideas that are very interesting and productive that emerged during the boom years of the 1990s and now we're losing some of those.

MR. HASKINS: Well, in conclusion, I think it's safe to say that our ability to measure and track these problems changes over time immensely, exceeds our ability to treat them effectively, and that's where the real effort needs to come in the future.

Please join me in thanking the panel, and thank you for coming.

[Applause.]

[Whereupon, the proceedings were adjourned.]