

Safe and Nurturing Social Environment

Youth Wellness

Youth Wellness *(formerly entitled “Annual High School Dropout Rates”)*

What are the Most Important Goals?

- *Informed populace*
- *Visionary leaders*
- *Engaged institutions*
- *Accessible services*
- *Good health*
- *Creative economy*
- *Continuous education*
- *Valued ecosystems*
- *Integrated infrastructure*

What is this Indicator?

Since the 1999 Sustainability Indicators Report, this indicator has been expanded to include key predictors of children’s health, using four specific protective factors (positive aspects of a child’s environment) and risk factors (negative aspects of a child’s environment).

Protective factors include:

- seat belt use
- regular doctor and dentist checkups
- regular and vigorous exercise
- eating three nutritious, balanced meals per day

Risk factors include:

- appearing overly sad, discouraged or depressed
- seeming stressed out, nervous or worried
- fighting with or hurting siblings or adult household members
- being sick or complaining of being sick at school

This indicator also includes infant mortality rates, low birthweight rates and, for the purpose of establishing a trend from the 1999 indicator, high school dropout rates.

Why is this Indicator Important?

The protective and risk factors provide a measurement of the human environment encountered by the Cape’s children, and also measure the effect of parental and community attitudes and actions. Children with fewer mental, emotional and health problems are more likely to grow into healthy and well-adjusted adults. In turn, these adults are better able to contribute to the Cape’s economy and social fabric in meaningful ways. Infant mortality rate and low birthweight correlate with the risk factors of poverty, unemployment and violent crime in the community. Formal education is one of the building blocks of a successful future. It allows students to learn valuable skills and gather information that they will use throughout their lives, and it can open their minds to new opportunities.

What Can We Do?

■ **Individuals:**

- Read to children.
- Provide a home environment that is supportive and conducive to learning.
- Encourage children to take advantage of educational and recreational opportunities.
- Talk with our children's teachers.
- Ensure regular classroom attendance.
- Expect children to graduate from high school.
- Encourage children to attend college.
- Mentor children beyond our own families.
- Take children to the doctor and dentist for regular checkups.
- Use seat belts and employ other physical safety measures.
- Ensure regular and vigorous exercise.
- Provide regular and nutritious meals.

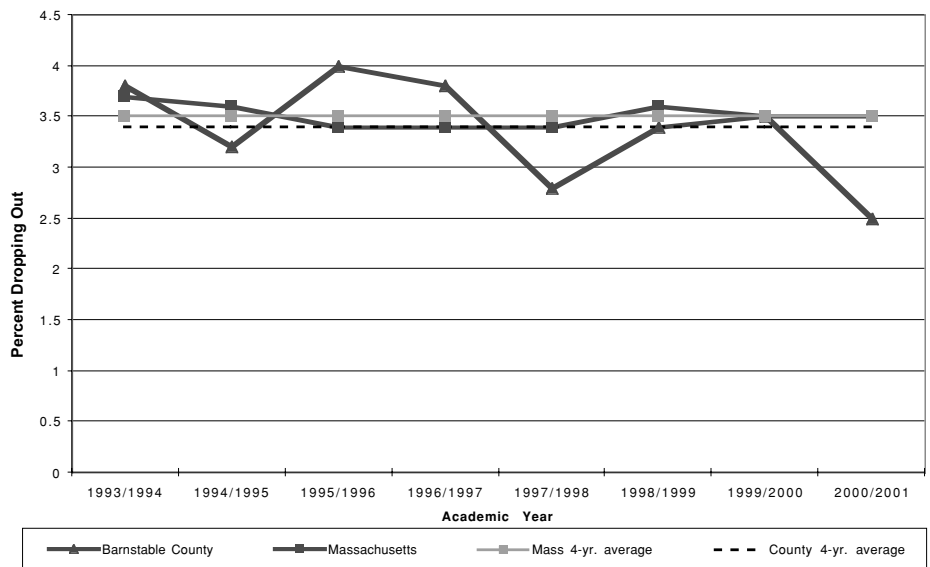
■ **Communities:**

- Recognize and support achievement in all areas of schooling.
- Support access to good prenatal care and early intervention for health issues.
- Support children's health programs and school-based health services.
- Support community educational and recreational programs that complement public education.
- Support mentoring programs.
- Support meaningful employment opportunities for youth.
- Support community-service opportunities for youth.

Analysis of Data

Nationwide, studies have shown that young adults who drop out before high school graduation face a number of potential hardships. Compared with high school graduates, relatively more dropouts are unemployed, and those dropouts who succeed in finding work earn less money than do high school graduates. Data from the U.S. Census Bureau show that median earnings increase with the level of schooling. Historically in the U.S., with other factors being equal, high school graduates have earned nearly 20% more than dropouts. For full-time workers, median annual incomes of graduates have been shown to be as much as one-third higher. During the 2000-2001 school year, an estimated 96.5% of Cape Cod high school students stayed in school until the end of the 12th grade. However, in the latest five-year reporting period (1996 - 2000) more than 1,900 Cape Cod high school students left school before successfully completing their high school program. On average during those five years, the Barnstable County dropout rate was 3.3%.

Figure 1.
High School Dropout Rates



Other factors were added to create baseline data for this indicator. Through a series of planning meetings with Cape Cod youth and those who serve them, the Barnstable County Department of Human Services "Human Condition 2001 Project" selected and incorporated into its "Household Survey" questions identifying 21 protective factors and 31 risk factors youth may encounter in their day-to-day lives. More than 2,500 surveys were collected.¹

Following analysis of these data, the Department of Human Services published the "Initial Report of Research Findings" in 2002. From this report, the top four protective and risk factors were selected for this indicator.

■ Decision-makers

- Support excellence in the public schools and in public education; advocate for the funding necessary to sustain this excellence.
- Become informed about the data and statistics regarding education and health.
- Speak out publicly about the value of education.
- Support high-quality, organized educational and recreational programs outside the public school system.
- Be involved in political decisions that affect educational programs.
- Support children's health programs and initiatives.

Table 1.

Risk and Protective Factors at Work in Cape Cod Households

Children-Family Risk Factor	Percent of Cape Cod Households	
	Appears overly sad, discouraged, or depressed	42%
Seems stressed out, nervous, or worried	36%	
Fights with or hurts siblings or adult household members	34%	

Children-Family Protective Factor	Percent of Cape Cod Households	
	For youngest child	For oldest child
Wears seat belts while riding in your car	94%	91%
Gets regular doctor and dentist check-ups	91%	91%
Gets regular, vigorous exercise	88%	84%

Source: "The Human Condition 2001"

As Table 1 indicates, 42% of households with children reported that their children "appear overly sad, discouraged, or depressed;" 36% reported that their children "seem stressed out, nervous, or worried." These are risk factors that correlate with children's health. (For more information on this correlation, see "What Teens Need to Succeed" by Peter Benson, Ph.D. *et al.*). Children's violence, directed at parents or other household members, and illness at school were the other top two risk factors.

Further research into these risk factors conducted by the Human Condition 2001 Steering Committee and Barnstable County Human Services identified a strong correlation between children reporting these risk factors and other indicators of children's health.²

The Human Condition 2001 project also documented protective factors in Cape Cod children's environments. Seat belt use led the list of these factors, followed by regular medical and dental checkups, regular vigorous exercise, and the consumption of three balanced, nutritious meals a day.

Table 2.
Measuring Social Health

	1989	1991	1993	1995	1997	1999
Infant Mortality Rate	6.2	4.7	3.5	4.9	5.3	4.5
Low Birth Weight Rate	48.5	51.8	45	55.3	58.9	65.3

(Rates calculated per 1,000 live births)
Data from Barnstable County Index of Social Health: Years 1989-1999

Two additional indicators of youth wellness are infant mortality rate and low birthweight. As Table 2 indicates, the infant mortality rate in Barnstable County has fluctuated during the last decade from a high of 6.2 per 1,000 live births in 1989 to a low of 3.5 per 1,000 live births in 1993.

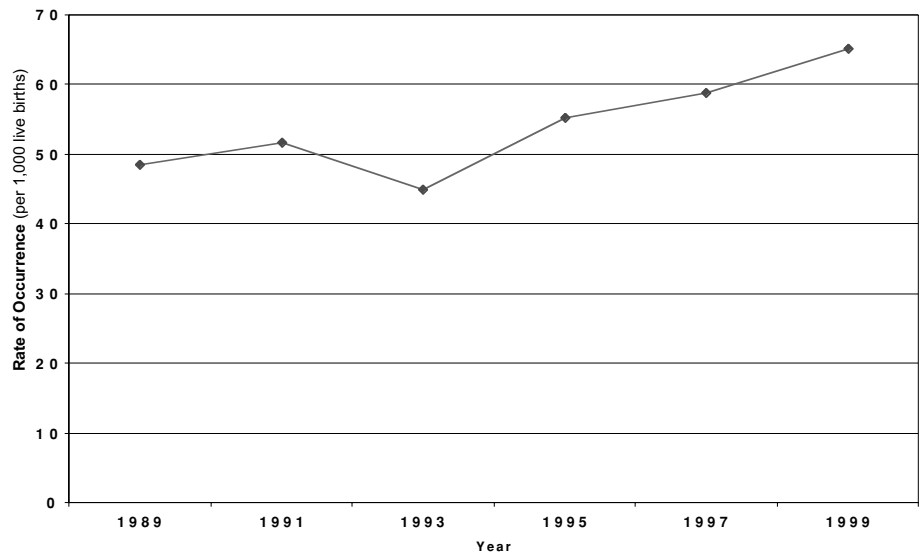
*No man is an island,
entire of itself; every
man is a piece of the
continent. —John Donne*

*We live very close
together. So, our prime
purpose in this life is to
help others. And if you
can't help them, at least
don't hurt them.*

—Dalai Lama

*An improvement in the
physical, emotional and
educational health of our
children means they will
be more likely to be good
citizens today and role
models for the next
generation, which in turn
will strengthen the fabric
of society.*

Figure 2.
Low Birth Weight Rate



As shown in Table 2 and Figure 2, the Barnstable County low birthweight rate has shown a steady upward trend from 48.5 per 1,000 live births in 1989 to 65.3 per 1,000 live births in 1999, an increase of 36%. Low birthweight rate is one of the key indicators of social health employed in the Barnstable County Department of Human Services' "Index of Social Health."³

Barnstable County's "Index of Social Health" tracks ten counties in Massachusetts during the past decade. This county's index has remained the same while the indices of five of the other counties (Norfolk, Hampshire, Plymouth, Berkshire, Worcester) improved, and four (Essex, Bristol, Suffolk, Hamden) declined.⁴

What Connections Does this Indicator Have?

■ Economic

When healthy, well-adjusted and well-educated children become adults, they are very likely to be able to provide economic security for themselves and their families by holding productive jobs and contributing to the workforce and the overall economy.

An increase in youth wellness correlates with a decrease in the dropout rate. This means the community has more adolescents graduating from high school, thus forming a population better prepared to meet the growing demands of the workplace. A lower dropout rate means more graduates with employable skills who would have a higher income and purchasing potential. As incomes increase, residents are better able to afford first-time homeownership on Cape Cod. A better educated population will be an incentive for industry to relocate on Cape Cod, providing regional and town planners an additional tool to attract well-paying, year-round jobs to the Cape. An increase in the dropout rate reflects a population less prepared to join the workforce.



*What its children
become, that will the
community become.*

—Suzanne Lafollett

■ ***Environmental***

An improvement in children’s health and a higher graduation rate would mean that Cape Cod residents would have a higher workforce potential and would be better able to support efforts by the public, private, and private non-profit sectors to protect and preserve the environment. Statistics indicate that a better educated population is more supportive of philanthropic efforts to sustain a healthy environment. An educated and healthy population is more likely to participate in civic and volunteer activities that would reduce the potential for environmental degradation.

■ ***Social***

There is a demonstrated correlation between children’s health and the rate of children’s anger, anxiety, and depression. An improvement in the physical, emotional and educational health of our children means they will be more likely to be good citizens today and role models for the next generation, which in turn will strengthen the fabric of society.