

Miles to Go: The Well-Being of PA's Rural Children

Picture a child in distress – impoverished, ill-nourished, poorly educated. Is this child in a peaceful green field, surrounded by wildflowers and rolling hills? Probably not. In the prevailing picture, at-risk children perch on front stoops of rundown row houses, deep in the heart of Pennsylvania's cities.

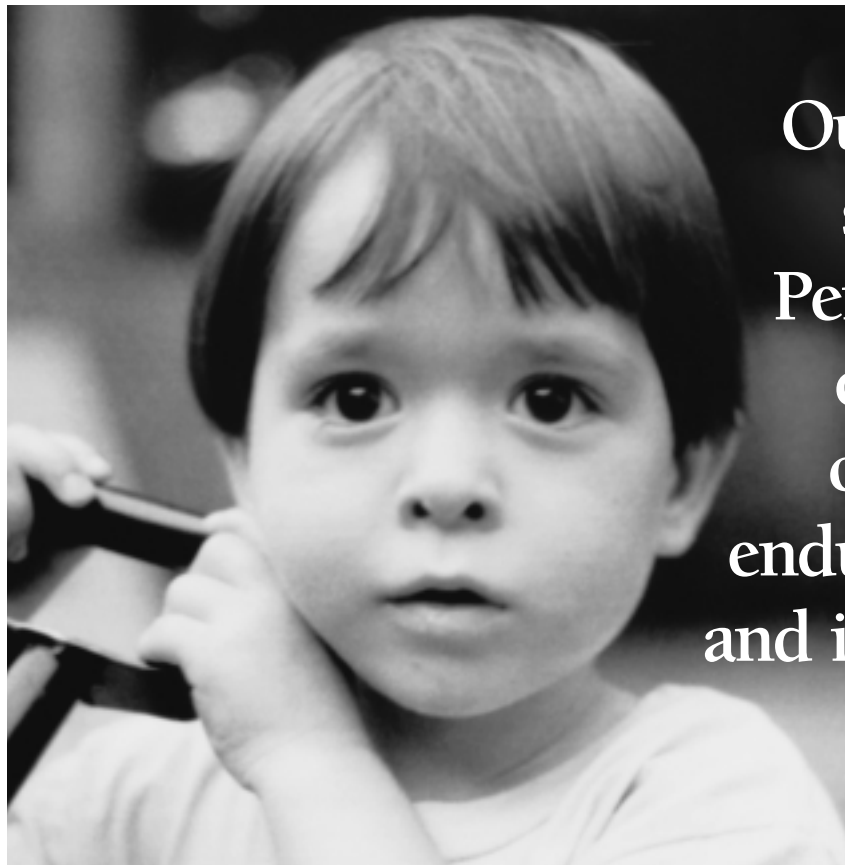
But expand that picture to include rural Pennsylvania, and there they are – children who are hurting. Sizable numbers of rural children share the same adversities that children endure in cities, where family income and education limits dictate a lifetime of hardship and dimmed prospects.

In Pennsylvania, one child in six lives in a rural county – nearly 500,000 kids leading lives that both sharply contrast and closely mirror those of their urban and suburban counterparts. Like all kids, rural children have basic needs that their families and communities must provide – food, shelter, education, and a learning-rich environment. For most kids, rural and otherwise, those needs are happily met.

But in Pennsylvania's rural communities, barriers of distance and scarce resources can challenge families and communities to provide those necessities. In these circumstances, Pennsylvania's rural children face unique hardships that can inhibit their healthy growth:

- ◆ One rural Pennsylvania child in six lives in poverty.
- ◆ School dropouts are less likely to get a job or plan on earning a GED than dropouts statewide.
- ◆ Doctors and dentists are scarce.
- ◆ Schools – strapped for funds and burdened by higher transportation costs – trail the state in spending on student instruction.

Understanding these circumstances is key to taking corrective policy action to enhance the health, education, and well-being of Pennsylvania's rural children.



Out of every
six rural
Pennsylvania
children,
one child
endures poverty
and its hardships.

Part I: Poverty and family makeup

The 2000 U.S. Census counted 494,434 children, ages birth to 18, in Pennsylvania's 33 rural counties. Every day, they wake up to an atmosphere shaped by family income and education. The extent of hardship in that atmosphere can diminish a child's chances of leading a successful life.

Even with the economic boom of recent years, 85,807 rural children – one in six – live in poverty, equaling the statewide average.

Poverty, where a four-person family earns \$17,650 a year, can severely diminish a child's chances for a well-rounded life. It predicts a young child's school readiness and a teen's life chances after graduation. The National Academy of Sciences reports that poverty weakens the critical elements of a strong educational foundation, including early childhood learning, academic achievement, and high school graduation.

One in every four rural households with children is headed by a single parent, and one Pennsylvania rural child in 12 is born to a single mother under 20.

Single parenthood is a clear indicator of current and future well-being, as single parents often struggle financially to provide the supports that help children grow and thrive. In rural Pennsylvania, one household with children in six is headed by a single woman, and one in 14 is headed by a single male. The rural rates of both single parenthood and teen births mirror statewide averages.

One rural Pennsylvania child in six is born to a mother with less than a high school education.

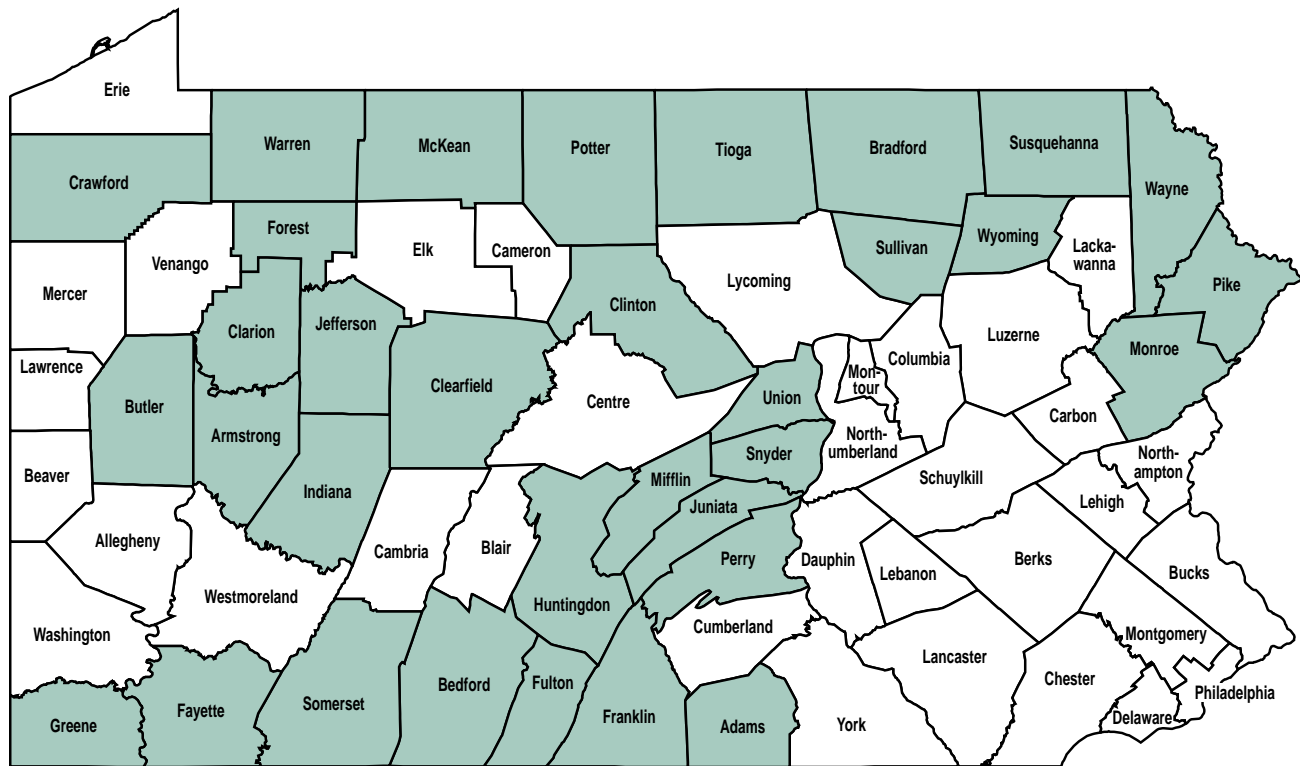
Without a high school education, parents are unlikely to find good jobs that support their families and keep children out of poverty. The National Academy of Sciences says they can also be less effective in



helping their children learn, diminishing the parent involvement factor that's widely acknowledged as critical to educational achievement. According to the Annie E. Casey Foundation's *Right Start* Report, pregnant women with less than 12 years of education are more likely to endanger their fetuses by smoking during pregnancy and receiving inadequate prenatal care.

One rural high school student in 33 drops out of school every year, and of those, only one in 12 plans to get a GED.

Though better than the annual statewide showing of one dropout per 26 high school students, the rural dropout rate damages family and community stability because the consequences linger. Rural dropouts are likelier to be unemployed – 19 percent, compared to 15 percent statewide – and are less likely to plan on obtaining GEDs – 18 percent, compared to 24 percent statewide. Even among rural high school graduates, only 65 percent plan on higher education, compared to 71 percent of high school graduates statewide.



Many of Pennsylvania's rural children endure risks and hardships that restrict their potential for full and happy lives. In Pennsylvania, 33 counties are considered rural: Adams, Armstrong, Bedford, Bradford, Butler, Clarion, Clearfield, Clinton, Crawford, Fayette, Forest, Franklin, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, McKean, Mifflin, Monroe, Perry, Pike, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Warren, Wayne, and Wyoming.

Family supports: Stretching resources

The Information Age is about more than electronics. It's about information – that rapidly growing body of knowledge available to anyone who needs answers. Parents with access to reliable information can build a strong base of knowledge that facilitates wise decisions about their children's health, development, and education.

In rural Pennsylvania, advanced technology can put world-class learning in isolated homes, but the human touch still matters in a culture where community ties reach for miles.

Nurse home visiting programs and family centers can be valuable information resources, partnering with parents to surround children with enrichment. For first-time, at-risk parents, nurse home visiting programs offer

education about children's development and health, plus critical connections that help expectant and new mothers get health care and quit smoking. At family centers, struggling families can find parent education, job training, and academic help for kids.

But in rural Pennsylvania, these proven support programs are limited. Only three rural counties have nurse home visiting programs, while 23 of the state's 33 rural counties do not have family centers. A state approach that coordinates planning and allocates appropriate funding would infuse parent education and family supports into the corners of rural Pennsylvania, extending the benefits of the Information Age to Pennsylvania's rural families and their children.

Part II: Health care access and coverage

Health care for growing girls and boys is a must. Regular check-ups, immunizations, oral health, visual and hearing checks – all keep children focused on the important things in their lives, like learning and playing.



A striking contrast: One rural infant in five is born to a woman who used tobacco during pregnancy, but only one rural pregnant woman in 100 drank alcohol while she was expecting.

Substance abuse such as smoking and drinking during pregnancy can cause learning disabilities, fetal alcohol syndrome, and physical and mental disabilities in the baby. Most of Pennsylvania's rural women have heard the message about drinking, but the message about the dangers of smoking has yet to cut through the haze.

One rural infant in seven is born to a woman who did not receive prenatal care during the first trimester.

Children born to mothers who didn't get early prenatal care are at risk for disabilities and learning disorders.

One rural infant in 15 is born at a low birth weight.

Children born at low birth weights have trouble with social skills and show higher rates of depression, anxiety disorders, hyperactivity and aggression than their peers. Statewide, low birth weight babies have been rising due to lifesaving medical advances.

There is only one primary care doctor for every 358 rural children, compared to one per 184 children statewide, and one pediatrician for every 3,636 rural children, compared to one per 1,303 children statewide.

In rural Pennsylvania, health care providers are few and far between, making them hard to reach by distant families. Dentists are scattered, too, with one for every 584 children, compared to one per 371 children statewide. And for rural women's health and prenatal care, there is only one obstetrician-gynecologist for every 2,875 rural women, compared to one per 1,522 women statewide. Though some physicians may have satellite offices, the fact remains that traveling to health care providers can add to poor families' financial burdens and consume precious time.

The health care coverage challenge

In Pennsylvania's rural counties, 22 percent of all children under 21 – one child in four – are enrolled in Medicaid, and 3.5 percent are enrolled in the Children's Health Insurance Program (CHIP). Both programs provide quality health care coverage, and Pennsylvania is a consistent leader in enrolling eligible children.

Still, many Pennsylvania children are eligible for CHIP or Medicaid but not enrolled. Reasons vary among families, but in rural areas, Pennsylvania Partnerships for Children has found that the primary obstacles to enrollment include the stigma that many parents equate with public programs and language barriers, particularly for migrant farm workers. Carefully crafted outreach efforts, designed to break down barriers of language, culture, and geography, can extend CHIP and Medicaid coverage to more eligible children.

Part III: Public education in rural Pennsylvania

The quality of a school district's programs and resources can make or break the school experience for children, from kindergarten through graduation. In rural Pennsylvania, public schools face challenges made unique — and costly — by geography. Transportation costs are high, and opportunities for economies of scale are few — for example, every school district needs a superintendent, whether it educates 400 students or 213,000. Poverty and other detriments to well-being are relatively high, but some critical educational resources to help children overcome adversity are not readily available.

The availability of full-day kindergarten in rural districts has risen since 1998, paralleling the rest of the state, but rural Pennsylvania kindergartners remain less likely to get the advantages of full-day kindergarten.

One rural Pennsylvania kindergartner in four attends a full-day program, compared to one in three in suburban schools and 70 percent of urban kindergartners. In later grades, children from full-day kindergarten show higher test scores and grades, better attendance, fewer grade retentions, and reduced need for special education and academic interventions.



subsidies for small or sparsely populated districts, they are also more dependent on the state for financial support.

Expenditures and Revenue	Rural	Suburban	Urban	Average
Current expenditures per pupil	\$6,920	\$7,777	\$7,410	\$7,309
Instruction as percent of current expenditures	64.9%	65.1%	67.4%	65.2%
Transportation as percent of current expenditures	7.0%	5.6%	2.9%	5.4%
Percent of revenue from state sources	51.9%	30.3%	50.4%	42.8%

Pennsylvania's rural school districts spend \$6,920 per pupil, 5 percent below the state average of \$7,309, and less than both suburban and urban districts.

In a classroom of 25 students, this represents a gap of nearly \$10,000. With higher transportation costs, rural districts spend a smaller portion of their budgets on student instruction than either suburban or urban districts. Because they are relatively poor and many have qualified for special state

Rural schools are less likely to develop business partnerships than urban and suburban schools.

Many Pennsylvania schools turn to business partners for help with resources and program development. However, only 39 percent of rural elementary schools and 61 percent of rural high schools have business partners, compared to 51 percent and 64 percent statewide. The discrepancy between rural schools and others probably reflects the smaller size and scattered locations of Pennsylvania's rural businesses.

Schools With Business Partnerships	Rural	Suburban	Urban	Average
Elementary schools	39.2%	63.6%	68.8%	51.3%
Middle schools	35.0%	48.8%	65.6%	42.7%
High schools	61.2%	66.5%	75.0%	64.3%

Pennsylvania's rural schools outpace or keep up with their urban and suburban counterparts in availability of computers, Internet access, distance education, and library resources.

Learning Resources	Rural	Suburban	Urban	Average
Students per computer	5.0	5.1	7.7	5.5
Schools with Internet access	82.2%	88.2%	64.9%	80.9%
High schools with distance ed.	51.9%	31.6%	56.3%	43.7%
Library titles per student	107.0	99.1	82.2	99.1

In rural and suburban Pennsylvania, schools have five students per computer, and at least eight schools in every 10 have some type of Internet access, compared to nearly eight students for every computer and only six schools in 10 with Internet access in urban districts. About half of all rural high schools offer distance education to overcome the challenges of geography and limited resources.

In rural schools, one child in three is in a class with no more than 20 students – a figure slightly better than urban and suburban districts.

For economically disadvantaged students, research shows the academic value of smaller classes, especially with 17 students or fewer. Some rural districts strive for smaller classes, while some are forced to offer them because they have so few students overall. In any case, rural

schools are more likely than suburban and urban schools to offer classes of fewer than 20 students (the state Education Department's lowest data category).

Rural fifth-graders scored squarely at the state average on math and reading achievement tests.

The 44,118 rural fifth graders who took the state's Pennsylvania System of School

Assessment reading and math tests in 1999-2000 scored at virtually the statewide average, showing achievement between suburban students at the top and urban students at the bottom. An important note: PSSA results indicate how well students do in reading and mathematics compared with other students in the state. They do not indicate levels of student knowledge and skill. In the future, the state intends to begin reporting levels of proficiency (advanced, proficient, basic, and below basic), but the 1999-2000 PSSA tests were not scored this way.

5th Grade PSSA Test Results	Rural	Suburban	Urban	Average
Math scaled score	1312	1367	1193	1310
Reading scaled score	1323	1367	1194	1320
Percent in two lowest groups - math	47.3%	35.1%	73.8%	48.0%
Percent in two lowest groups - reading	42.6%	33.1%	71.4%	45.0%

Find further data on public schools in rural Pennsylvania at www.papartnerships.org.

School lunch eligibility: Snapshot of hardship

Within a school district, the extent of children eligible for school lunches is a strong indicator of family hardship, because income eligibility is 130 percent of poverty – \$20,865 for a family of four – for free school lunches, and 185 percent of poverty – \$32,653 for a family of four – for reduced-price lunches. Though they live above the traditional poverty line, these families still struggle to meet basic needs on limited budgets.

Of the nearly 260,000 elementary school students in rural districts, one in three qualified for free or reduced-price lunch, similar to the statewide average but lower than the urban rate of 71 percent.

One nutritional benefit that rural schoolchildren are likelier to receive is breakfast. More than three-quarters of Pennsylvania's rural elementary schools serve a morning meal, exceeding the statewide average of 68 percent.

Part IV: Policy Directions

Like all kids, Pennsylvania's rural children need positive supports and encouragement to overcome adversity, avoid delinquency, and reach their potential. For the sake of rural kids, especially those at risk, Pennsylvania Partnerships for Children recommends a school readiness and school success approach, with prevention-focused policies that ensure children's health, education, and well-being.

For school readiness, Pennsylvania's rural children need:

Parent education: All parents have questions about their children's development, but parents constrained by low incomes and low educational attainments might stumble when seeking answers. Nurse home visiting, family centers, and other family support programs help parents find answers and engage more effectively in their children's healthy growth. State support for nurse home visiting is growing, expanding the information pool for first-time, at-risk parents, but the need far exceeds the investment.

Quality preschool: Pennsylvania remains one of nine states that fails to fund preschool. In later school years, children from quality preschool programs perform better on language and math tests and have better social skills – all critical elements in the success of disadvantaged rural children. Kids who start behind stay behind, while a state preschool investment would help young rural children – and urban and suburban kids, too – get ready for learning.

Connections to health: Pennsylvania's rural families remain among the hardest-to-reach with the message of health coverage for children through CHIP and Medicaid. Health coverage is critical in ensuring that children get check-ups, immunizations, and preventive care, and it gives kids a "medical home" — a provider who can build a strong relationship with parents and monitor the children's health. The state should further extend its CHIP and Medicaid outreach programs to reach families isolated by language, culture, and geography.



For school success, Pennsylvania's rural children need a smooth transition into kindergarten and the early grades through:

Full-day kindergarten: Full-day kindergarten prepares at-risk children for the school

years to come by improving academic prospects and social skills for at-risk children – a potential benefit for children in rural Pennsylvania, where poverty is relatively high and school resources relatively scarce. The state should offer fiscal incentives that encourage rural schools, especially those with large low-income populations, to offer full-day kindergarten.

Smaller classes: Research shows that classes of 17 or fewer students, especially in the early grades and for low-income children, yield the greatest educational gains. Though Pennsylvania's rural school districts edge out urban and suburban districts in offering smaller classes, the fact remains that two rural schoolchildren out of three are in classes of 20 or more students.

Pennsylvania's rural children are vulnerable to the same afflictions shared by children in cities and suburbs, but thankfully, those risks are not one-way tickets to failure.

The true picture of life for Pennsylvania's rural children reveals opportunities to create hope through prevention-focused policies that promise stability, health, and learning.

Notes

DEFINITIONS

Urban county: Two-thirds of the county lives in an area that includes a central city and the surrounding closely settled fringe that together have a population of 50,000 or more with population density generally exceeding 1,000 people per square mile. Persons living in urbanized areas and in places of 2,500 or more population outside of urbanized areas are considered urban.

Rural county: Two-thirds of the county population lives in a rural area.

Mixed county: Two-thirds of the population doesn't live in an urban or rural area.

SOURCES

Age, race, and Hispanic origin: U.S. Census of Population and Housing, Summary File 1.

Education: Pennsylvania Department of Education: School Profile Database; Bureau of Budget and Fiscal Management; Bureau of Information Systems, Division of Data Services.

Family Supports: Pennsylvania Partnerships for Children, survey of Communities That

Care, family centers, blueprint grants, and nurse home visiting programs, 2001.

Health care access and coverage:

- Pennsylvania Department of Health, Division of Health Statistics and Research; Pennsylvania Vital Statistics annual report and unpublished data. The Pennsylvania Department of Health specifically disclaims responsibility for any analyses, interpretations or conclusions.
- CHIP: Children's Health Insurance Program, Pennsylvania Department of Insurance.
- Medicaid: Pennsylvania Department of Public Welfare.
- Physicians: Pennsylvania Office of Rural Health, Provider Atlas 2000.

Poverty: U.S. Department of Census, 1997 Small Area Income and Poverty Estimates, www.census.gov.

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Children in Rural Pennsylvania

Population

	0-2	3-4	5-8	9-12	13-18	0-18	Total Pop.	% White	% Black or African American	% AIAN/ HawOPI/ Asian/ other*	% two or more races	% Hispanic or Latino
PA	428,274	299,530	652,897	697,394	1,017,067	3,095,162	12,281,054	80.1%	13.0%	4.6%	2.3%	5.1%
Adams	3,114	2,291	5,082	5,591	8,075	24,153	91,292	92.7%	1.7%	3.6%	1.9%	6.2%
Armstrong	2,313	1,600	3,662	3,839	6,141	17,555	72,392	97.3%	1.1%	0.6%	1.0%	0.6%
Bedford	1,783	1,221	2,534	2,803	4,007	12,348	49,984	97.6%	0.6%	0.9%	0.9%	0.8%
Bradford	2,207	1,597	3,497	3,868	5,690	16,859	62,761	96.7%	0.7%	1.3%	1.3%	1.0%
Butler	6,571	4,570	9,706	9,834	14,710	45,391	174,083	96.8%	1.2%	0.9%	1.1%	0.9%
Clarion	1,301	966	2,003	2,102	3,563	9,935	41,765	98.0%	0.7%	0.5%	0.9%	0.7%
Clearfield	2,598	1,965	4,143	4,484	6,818	20,008	83,382	98.3%	0.3%	0.5%	0.8%	0.6%
Clinton	1,179	876	1,774	1,867	3,152	8,848	37,914	98.0%	0.5%	0.7%	0.8%	0.5%
Crawford	3,196	2,170	4,911	5,173	8,322	23,772	90,366	95.9%	1.8%	0.7%	1.6%	0.8%
Fayette	4,904	3,550	7,405	7,952	11,802	35,613	148,644	92.6%	4.9%	0.7%	1.7%	0.6%
Forest	88	90	196	241	616	1,231	4,946	89.8%	6.5%	2.5%	1.2%	2.9%
Franklin	4,867	3,220	6,875	7,179	10,606	32,747	129,313	92.7%	3.2%	2.1%	2.0%	2.9%
Fulton	524	374	761	830	1,198	3,687	14,261	97.1%	0.9%	0.6%	1.4%	0.6%
Greene	1,197	901	2,049	2,123	3,244	9,514	40,672	97.8%	0.6%	0.5%	1.0%	0.6%
Huntingdon	1,460	1,021	2,070	2,314	3,648	10,513	45,586	96.2%	1.8%	0.7%	1.3%	0.9%
Indiana	2,604	1,820	4,079	4,365	7,925	20,793	89,605	96.6%	1.3%	1.0%	1.1%	0.6%
Jefferson	1,503	1,039	2,277	2,566	4,105	11,490	45,932	98.5%	0.2%	0.6%	0.7%	0.5%
Juniata	886	605	1,270	1,327	1,910	5,998	22,821	96.8%	0.9%	1.5%	0.8%	2.2%
McKean	1,552	1,068	2,377	2,552	3,911	11,460	45,936	97.9%	0.3%	0.9%	0.9%	1.0%
Mifflin	1,734	1,192	2,512	2,779	3,765	11,982	46,486	97.2%	0.9%	0.9%	1.0%	1.0%
Monroe	4,683	3,597	8,344	9,376	13,184	39,184	138,687	83.1%	8.1%	5.2%	3.5%	10.0%
Perry	1,544	1,120	2,442	2,633	3,972	11,711	43,602	97.2%	1.0%	0.8%	1.0%	1.2%
Pike	1,522	1,201	2,860	3,258	4,018	12,859	46,302	91.4%	3.6%	2.6%	2.4%	7.2%
Potter	642	470	1,019	1,112	1,697	4,940	18,080	97.2%	0.4%	1.3%	1.0%	1.1%
Snyder	1,212	886	1,948	2,244	3,370	9,660	37,546	97.1%	0.9%	1.0%	0.9%	1.5%
Somerset	2,452	1,749	3,805	4,252	6,562	18,820	80,023	98.6%	0.3%	0.5%	0.7%	0.6%
Sullivan	150	131	263	276	681	1,501	6,556	90.0%	5.7%	2.6%	1.6%	2.6%
Susquehanna	1,400	1,000	2,286	2,677	3,961	11,324	42,238	98.1%	0.5%	0.6%	0.8%	1.0%
Tioga	1,304	930	2,069	2,338	3,907	10,548	41,373	97.3%	0.8%	0.8%	1.1%	0.9%
Union	1,176	829	1,809	1,997	3,412	9,223	41,624	95.4%	1.5%	1.6%	1.5%	1.9%
Warren	1,451	1,029	2,235	2,549	3,923	11,187	43,863	98.1%	0.3%	0.7%	0.9%	0.4%
Wayne	1,522	1,155	2,481	2,738	4,108	12,004	47,722	96.6%	1.3%	0.9%	1.1%	2.4%
Wyoming	987	640	1,618	1,628	2,703	7,576	28,080	97.3%	1.0%	0.8%	0.9%	1.0%
Urban Counties	231,911	160,741	350,886	372,943	532,583	1,649,064	6,523,566	70.0%	21.4%	6.0%	2.6%	6.0%
Rural Counties	65,626	46,873	102,362	110,867	168,706	494,434	1,953,837	95.1%	2.1%	1.4%	1.4%	2.2%
Mixed Counties	130,737	91,916	199,649	213,584	315,778	951,664	3,803,651	90.1%	4.1%	3.7%	2.1%	4.9%

Sources:

2000 SF1 Census of Population and Housing

* Percent American Indian and Alaskan Native, Native Hawaiian and other Pacific Islander, Asian, some other race

Children in Rural Pennsylvania

Poverty and Family Makeup

	Children age 0-17 in poverty	Single male heads household with children†	Single female heads household with children‡	Babies born to single mothers under age 20	Babies born to mothers with less than a high school education
PA	16.6%	6.6%	22.6%	9.3%	15.1%
Adams	9.9%	7.5%	15.8%	8.2%	18.2%
Armstrong	18.7%	7.3%	16.8%	9.3%	13.3%
Bedford	17.8%	7.0%	13.9%	9.8%	16.5%
Bradford	19.1%	8.8%	17.7%	10.4%	17.1%
Butler	12.1%	5.2%	14.6%	5.4%	8.2%
Clarion	18.7%	6.4%	17.9%	7.1%	15.3%
Clearfield	19.3%	7.5%	17.4%	8.6%	13.5%
Clinton	20.8%	7.9%	21.8%	9.8%	22.3%
Crawford	19.6%	7.9%	18.7%	9.0%	24.8%
Fayette	29.8%	7.5%	24.0%	13.4%	20.8%
Forest	29.6%	8.5%	13.5%	8.1%	16.5%
Franklin	12.6%	7.6%	16.5%	9.6%	17.7%
Fulton	15.9%	9.6%	16.0%	9.1%	13.0%
Greene	25.6%	7.4%	20.3%	9.5%	18.7%
Huntingdon	17.8%	8.2%	16.8%	10.5%	13.4%
Indiana	21.5%	6.4%	16.3%	6.9%	19.0%
Jefferson	19.0%	7.0%	17.1%	8.7%	17.3%
Juniata	13.6%	8.3%	11.0%	6.5%	25.1%
McKean	19.4%	9.4%	20.9%	10.7%	14.6%
Mifflin	20.5%	7.8%	16.2%	10.0%	31.3%
Monroe	13.4%	6.8%	15.5%	7.3%	10.9%
Perry	12.0%	8.0%	14.4%	10.5%	18.2%
Pike	12.7%	6.0%	14.8%	5.7%	10.7%
Potter	22.3%	8.9%	14.5%	9.3%	16.9%
Snyder	14.3%	7.0%	13.4%	5.5%	28.7%
Somerset	19.5%	7.0%	15.3%	7.1%	16.7%
Sullivan	16.7%	9.7%	16.8%	10.7%	11.4%
Susquehanna	18.9%	9.3%	16.7%	9.2%	14.1%
Tioga	19.2%	7.7%	18.4%	7.8%	14.1%
Union	14.8%	6.1%	15.1%	4.8%	23.2%
Warren	16.0%	8.4%	17.8%	7.8%	15.9%
Wayne	18.8%	8.1%	18.0%	8.0%	12.5%
Wyoming	15.8%	7.2%	17.0%	8.3%	12.2%
Urban Counties	15.5%	6.4%	26.9%	10.2%	14.0%
Rural Counties	18.1%	7.3%	17.0%	8.6%	16.7%
Mixed Counties	15.0%	6.5%	17.9%	7.9%	16.2%

Sources: 1997 SAIPE Poverty | 2000 Census | PA Department of Health 1997-99, 3-year average

† Family type by presence and age of related children: Male householder, no wife present, with related children under 18 years

‡ Family type by presence and age of related children: Female householder, no husband present, with related children under 18 years

Children in Rural Pennsylvania

Health

	Babies born to mothers who used tobacco during pregnancy	Babies born to mothers who used alcohol during pregnancy	Babies born lacking early prenatal care	Babies born at low birth weight	Total number of primary care doctors	Total number of ob-gyns	Children enrolled in Medicaid	Children enrolled in CHIP
PA	17.6%	1.7%	15.2%	7.7%	16,838	2,033	23.1%	2.8%
Adams	13.8%	2.2%	10.8%	6.6%	67	11	13.4%	2.4%
Armstrong	25.0%	0.8%	11.9%	7.2%	35	3	26.6%	4.4%
Bedford	21.0%	0.6%	14.9%	6.2%	29	3	22.8%	4.7%
Bradford	23.7%	1.4%	14.0%	5.3%	103	9	23.3%	2.6%
Butler	18.1%	0.6%	9.9%	6.8%	100	9	14.0%	3.1%
Clarion	21.4%	0.9%	12.2%	8.3%	42	5	27.1%	4.5%
Clearfield	23.9%	0.9%	11.9%	6.6%	64	10	31.5%	4.6%
Clinton	23.9%	0.9%	18.6%	5.7%	24	1	25.6%	1.9%
Crawford	22.5%	1.3%	22.9%	6.2%	72	7	25.2%	3.5%
Fayette	30.7%	2.3%	11.6%	8.3%	65	9	41.5%	4.5%
Forest	34.7%	2.0%	17.2%	10.1%	0	0	29.1%	5.2%
Franklin	17.2%	0.5%	15.8%	6.3%	91	11	15.4%	2.4%
Fulton	23.1%	0.2%	15.4%	4.8%	7	0	19.5%	3.6%
Greene	26.1%	0.8%	18.3%	9.5%	23	1	33.7%	4.5%
Huntingdon	20.5%	1.3%	9.3%	6.5%	26	2	26.2%	3.4%
Indiana	18.8%	0.5%	17.1%	8.2%	77	8	24.6%	4.8%
Jefferson	22.8%	0.6%	12.5%	7.1%	40	4	27.5%	4.7%
Juniata	13.1%	0.8%	21.4%	6.3%	10	0	12.9%	2.7%
McKean	29.4%	2.0%	10.7%	7.7%	34	5	29.8%	2.9%
Mifflin	20.1%	0.3%	24.2%	4.7%	38	4	21.3%	1.9%
Monroe	21.8%	1.0%	16.8%	7.2%	91	10	17.0%	3.0%
Perry	18.6%	2.3%	15.7%	6.8%	27	0	14.0%	1.9%
Pike	26.0%	0.3%	15.1%	5.7%	19	2	16.4%	4.1%
Potter	29.8%	1.0%	14.6%	5.3%	12	1	28.4%	4.0%
Snyder	13.9%	0.6%	24.9%	7.1%	32	1	15.7%	1.8%
Somerset	17.3%	0.8%	13.7%	6.7%	48	6	24.8%	5.4%
Sullivan	22.8%	1.3%	16.3%	7.4%	2	0	21.4%	2.9%
Susquehanna	29.0%	0.6%	16.6%	5.1%	25	2	24.5%	2.6%
Tioga	25.0%	1.0%	11.6%	5.0%	33	1	23.1%	3.1%
Union	13.8%	0.2%	24.0%	6.3%	44	7	16.0%	1.9%
Warren	25.1%	0.7%	18.5%	5.7%	30	4	22.8%	3.6%
Wayne	25.1%	0.8%	15.0%	6.4%	36	1	23.9%	4.4%
Wyoming	27.0%	0.8%	14.5%	5.7%	34	0	18.5%	2.3%
Urban Counties	16.3%	1.6%	15.1%	8.6%	11,675	1,452	26.9%	2.9%
Rural Counties	21.6%	1.0%	14.9%	6.7%	1,380	137	22.8%	3.5%
Mixed Counties	18.0%	2.1%	15.3%	6.7%	3,783	444	17.0%	2.5%

Sources:

PA Department of Health 1997-99, 3-year average	PA Office of Rural Health 1999	PA DPW 1998-99—2000-01, 3-year average	PA DOI
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In rural Pennsylvania,
one family in four
is headed by a
single parent —
someone who
often struggles
to provide for
the children.



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