

VERMONT'S CHILDREN 2015

Vermont's Children At a Glance¹

State Population ²	626,630	Poverty Rate, Children Under 18 ⁵	15.3%
Population, Children Under 18 ³	124,130	Poverty Rate, Children Ages 5–17 ⁶	13.1%
State Poverty Rate ⁴	12.3%	Poverty Rate, Children Under 5 ⁷	19.2%

CHILD ABUSE AND NEGLECT

- In 2013, Vermont had 15,769 total referrals for child abuse and neglect. Of those, 4,079 reports were referred for investigation.⁸
- In 2013, 746 children were victims of abuse or neglect in Vermont, a rate of 6.1 per 1,000 children, representing a 13.0% increase from 2012. Of these children, 3.5% were neglected, 42.8% were physically abused, and 67.8% were sexually abused.⁹
- The number of child victims has increased 7.2% in comparison to the number of victims in 2009.¹⁰
- Vermont responds to lower risk, higher safety reports through alternative response services to address family issues. 1,740 reports were responded to in this way in 2013.¹¹
- In 2013, 0 children in Vermont died as a result of abuse or neglect.¹²
- In 2013, 971 children in Vermont lived apart from their families in out-of-home care, compared with 1,062 children in 2009. In 2012, 269 of the children living apart from their families were age 5 or younger, and 265 were 16 or older.¹³
- The number of children living apart from their families in out-of-home care has decreased 8.6% in comparison to the number of children in out-of-home care in 2009.¹⁴
- Of Vermont children in out-of-home care in 2013, 96.6% were white, 0.6% black, 0.6% Hispanic, 0.0% American Indian/Alaskan Native, 0.0% Asian or Pacific Islander and 2.2% of more than one race or ethnicity.¹⁵

ADOPTION, KINSHIP CARE, AND PERMANENT FAMILIES FOR CHILDREN

- Of the 596 children exiting out-of-home care in Vermont in 2012, 46% were reunited with their parents or other family members.¹⁶
- In 2013, 179 children were legally adopted through the public child welfare agency in Vermont, a 4.1% increase from 172 in 2012.¹⁷
- Of the 971 children in out-of-home care in 2013, 213 or 21.9% were waiting to be adopted.¹⁸
- In 2013, approximately 3,773 Vermont grandparents had primary responsibility caring for their grandchildren.¹⁹
- Of the children in out-of-home care in 2012, 193 were living with relatives while in care.²⁰

CHILD POVERTY AND INCOME SUPPORT

- The total number of individuals receiving Temporary Assistance for Needy Families (TANF) in Vermont decreased from 91,281 in 2013 to 80,118 in 2014, a decrease of 12.2%. The number of families receiving TANF in 2014 was 36,500, a 10.2% decrease from 2013.²¹
- From 2012-2013, for every 100 Vermont families living in poverty, only 66 received TANF benefits.²²
- In 2013, \$78,522,552 was spent in Vermont on TANF assistance, including 26% on basic assistance, 0% on child care, 7% on transportation, and 64% on nonassistance.²³



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- In 2013, \$8,884,907 was spent on WIC (the Special Supplement Nutrition Program for Women, Infants, and Children) in Vermont, serving 14,914 participants.²⁴
- In 2013, Vermont distributed \$45,014,073 in child support funds, a 2.1% decrease from 2012.²⁵
- In 2013 in Vermont, 40,000 children lived in households with a high housing burden, where more than 30% of monthly income is spent on housing costs.²⁶

CHILD CARE AND HEAD START

- In 2013, Vermont had a monthly average of 4,400 children served by subsidized child care; 4,500 children received subsidized child care in 2012 and 4,500 in 2011.²⁷
- In 2014, to be eligible for subsidized child care in Vermont, a family of three could make no more than \$39,060, which is equivalent to 57% of the state's median income.²⁸
- In 2013, Head Start served 1,368 Vermont children, a 12.4% decrease from 2012.²⁹

HEALTH AND SUBSTANCE ABUSE

- In 2014, 54,200 children younger than 19 were enrolled in Medicaid in Vermont—54% of the total number of enrollees in the state.³⁰
- In 2012, Vermont had 7,570 children enrolled in its State Children's Health Insurance Program, a 7.3% increase from 2011, when 7,054 children were enrolled.³¹
- In 2013, Vermont had 3,882 uninsured children.³²
- In 2012, 370 babies were born weighing less than 2,500 grams in Vermont.³³
- In 2011, 30 infants under age 1 died in Vermont.³⁴
- In 2012, the birth rate for teens 15–17 in Vermont was 7 births per 1,000 girls; for teens 18–19, the rate was 26. This reflects a total rate of 16 births per 1,000 girls ages 15–19.³⁵
- Cumulative through 2013, 544 adults and adolescents, as well as 6 children younger than 13, were reported as having HIV/AIDS in Vermont.³⁶
- In 2013, an estimated 3,000 children ages 12–17 and 39,000 adults age 18 and older were dependent on or abusing illicit drugs or alcohol in Vermont.³⁷

VULNERABLE YOUTH

- In 2011, 68 children aged out of out-of-home care—exited foster care to emancipation—in Vermont.³⁸
- In 2013, 2,000 Vermont teens ages 16–19 were not enrolled in school and were not working.³⁹
- In 2013, 7,000 young adults ages 18–24 were not enrolled in school, were not working, and had no degree beyond high school.⁴⁰
- In 2013, approximately 2,000 children ages 12–17 in Vermont needed but had not received treatment for illicit drug use in the past year.⁴¹
- In 2013, approximately 2,000 children ages 12–17 needed but had not received treatment for alcohol use in the past year.⁴²
- In 2013, less than 10 Vermont children younger than 20 committed suicide.⁴³

JUVENILE JUSTICE AND DELINQUENCY PREVENTION

- In 2013, less than 10 children under age 19 were killed by a firearm in Vermont, similar to less than 10 in 2012.⁴⁴

- In 2013, 779 children younger than 18 were arrested in Vermont, a 25% decrease from 1,036 arrests in 2012. Of the arrests in 2013, 34 were for violent crimes.⁴⁵
- In 2013, 36 children lived in juvenile correction facilities in Vermont.⁴⁶

CHILD WELFARE WORKFORCE⁴⁷

- A 2003 General Accounting Office (GAO) report documented that staff shortages, high caseloads, high worker turnover and low salaries impinge on delivering services to achieve safety, permanence, and well being for children. In Children's Rights 2009, A Long Road Home report, similar challenges to the child welfare caseworkers were identified, in addition to no standard training or consistent background requirements, need for meaningful supervision, and lack of private workspace, technology and other resources.⁴⁸
- The federal Child and Family Service Reviews have clearly demonstrated that the more time a caseworker spends with a child and family, the better the outcomes for those children and families.⁴⁹
- According to the 2003 GAO report, the average caseload for child welfare/foster care caseworkers is 24–31 children; these high caseloads contribute to high worker turnover and insufficient services being provided to children and families. CWLA recommends that foster care caseworkers have caseloads of 12–15 children.⁵⁰
- The National Association of Social Workers 2012 Document to the Obama Administration called for full funding of the Child Abuse Prevention and Treatment Act (CAPTA) and Promoting Safe and Stable Families (PSSF), protection of the Social Security Block Grant (SSBG) from budget cuts and elimination, a variety of child maltreatment prevention services to be available through programs serving children and families (e.g., TANF, Head Start, etc.), maximization of collaboration amongst different systems (e.g., Child Welfare, Public Health, Juvenile Justice, etc.) to improve integration, culturally and linguistically appropriate delivery of services, identification and implementation of evidence-based practices, and incentivization of BSW and MSW students to join the child welfare workforce.⁵¹

FUNDING CHILD WELFARE SERVICES FOR VERMONT'S CHILDREN

- In 2012, Vermont spent \$87,811,555 for child welfare services. Child welfare services are all direct and administrative services the state agency provides to children and families. Of this amount, \$51,035,921 was from federal funds, \$36,775,634 from state funds, and \$0 from local funds.⁵²
- In 2012, of the \$51,035,921 in federal funds received for child welfare, 33.2% was from Title IV-E Foster Care and Adoption Assistance, 1.8% came from Title IV-B Child Welfare Services and Promoting Safe and Stable Families, 47.4% was from Medicaid, 9.9% came from Social Services Block Grant, 4.7% was from TANF, and 2.9% came from other federal sources.⁵³
- Vermont received \$8,824,671 in federal funds for IV-E foster care expenditures in 2012, including \$5,048,343 for maintenance payments and \$3,776,328 for administration, child placement, the statewide automated child welfare information system, and training.⁵⁴

NOTES AND REFERENCES

¹ “At A Glance” statistics are from 2013.

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Note: The percentage difference is a CWLA calculation.

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⁴⁴ Centers for Disease Control and Prevention, National Center for Injury Prevention and Control: Data & Statistics (WISQARS). (2015). *NCHS Vital Statistics System for numbers of deaths: Bureau of Census for population estimates. Fatal Injury Reports 1999-2013, for National, Regional and States (RESTRICTED), 2012-2013, United States, Firearm Deaths and Rates per 100,000: All Races, Both Sexes, Ages 0 to 19, Outgroups: Year and State*.

Retrieved March 31, 2015 from http://www.cdc.gov/injury/wisqars/fatal_injury_reports.html.

Note: The percent difference is a CWLA calculation.

⁴⁵ U.S. Department of Justice, Federal Bureau of Investigation. (2014). *Crime in the United States 2013: Table 69: Arrests by State, 2013*. Retrieved March 24, 2015 from http://www.fbi.gov/about-us/cjis/ucr/crime-in-the-u.s/2013/crime-in-the-u.s.-2013/tables/table-69/table_69_arrest_by_state_2013.xls.

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Note: The percent difference is a CWLA calculation.

⁴⁶ Sickmund, M., Sladky, T.J., Kang, W., & Puzanchera, C. (2013). *OJJDP's Easy Access to the Census of Juveniles in Residential Placement:1997-2011: Table: Type of Placement Facility by State, 2011 (Count)*. Retrieved March 24, 2015 from http://ojjdp.gov/ojstatbb/ezacjrp/asp/State_Facility.asp.

⁴⁷ Note: The dearth in current state-by-state workforce data makes clear the need for critical data on compensation, working conditions including safety issues, academic degrees held, education and training received, and factors contributing to turnover. To address this, CWLA is calling for Congress to authorize the National Academy of Sciences (NAS) to conduct an updated study on the child welfare workforce. It would make recommendations regarding caseloads and workloads, education levels, and training requirements. In addition, the study would examine data reporting and collection and make recommendations on how states might improve these efforts.

⁴⁸ U.S. General Accounting Office. (2003). *Child Welfare: HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff*. Retrieved January 19, 2012 from www.gao.gov/new.items/d03357.pdf.

National Association of Social Workers. (2012). *2012 Document to the Obama Administration, Building on Progressive Priorities: Sustaining Our Nation's Safety Net*. Retrieved March 31, 2015 from http://www.naswdc.org/advocacy/documents/nasw-2012-building_progressive_priorities.pdf

⁴⁹ U.S. General Accounting Office. (2003). *Child Welfare: HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff*. Retrieved January 19, 2012 from www.gao.gov/new.items/d03357.pdf.

⁵⁰ Ibid.

⁵¹ Children's Rights.(2009).*The Long Road Home: A Study of Children Stranded in New York City Foster Care*. Retrieved March 31, 2015 from http://www.childrensrights.org/wp-content/uploads/2009/11/2009-11-02_long_road_home_full_report_final.pdf.

⁵² DeVooght, K., Allen, T., & Geen, R. (2014). *Child Trends:Federal, State, and Local Spending to Address Child Abuse and Neglect in SFY 2012: Appendix A:SFY 2012 State-by-State Data.2008/2010 Casey Child Welfare Financing Survey and 2012 Casey Child Welfare Financing Survey*. Washington, DC. Retrieved April 2, 2015 from <http://www.childtrends.org/wp-content/uploads/2014/09/2014-61ChildWelfareSpending-2012-2nd-revision-march.pdf>.

Note: Examples of direct services include child abuse/neglect investigations, foster care, community-based programs, case management, and all such services required for the safety, permanency, and well-being of children. Examples of administrative services include management information systems, training programs, eligibility determination processes, and all services that provide the infrastructure supports for the public agency. Current information is also needed in regards to state and local spending on child welfare programs. Particularly, in light of financing reform efforts, it would be helpful to know how state and local budgets have changed in the wake of American Recovery and Reinvestment Act (P.L. 111-5) investments and the ongoing effects of the recession.

Note: The percentage is a CWLA calculation.

⁵³ Ibid.

⁵⁴ DeVooght, K., Allen, T., & Geen, R. (2014). *Child Trends:Federal, State, and Local Spending to Address Child Abuse and Neglect in SFY 2012: Appendix B:SFY 2012 State-by-State Data.2008/2010 Casey Child Welfare Financing Survey and 2012 Casey Child Welfare Financing Survey*. Washington, DC. Retrieved April 2, 2015 from <http://www.childtrends.org/wp-content/uploads/2014/09/2014-61ChildWelfareSpending-2012-2nd-revision-march.pdf>.

Note: The component funding streams may not equal the total, depending on additional child support and demonstration funds for this state.