KIDS COUNT IN DELAWARE FAMILIES COUNT IN DELAWARE

2017 Fact Book







KIDS COUNT









OFFICE OF THE GOVERNOR

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GOVERNOR

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Dear Friends,

As father of two and as your Governor, I fully understand the importance of advocating for our kids and making sure they have every resource available to ensure all their dreams can be fulfilled. We must nurture our youth so that regardless of where they come from, they have the means necessary to succeed.

It is imperative for our young children to grow and learn in an environment that is advantageous to their growth. The creation of these environments are encouraged through a focus on the child and family wellbeing – across the domains of health, education, economics and community. This collaborative effort brings Delawareans together to ensure a brighter future.

Being deliberate and focused on our children's progresses benefits our state in a myriad of ways. For parents who are considering where they want to settle down to companies planning to relocate or expand, seeing a state that is focused on its future provides the assurance necessary to make Delaware a top choice. Being a state that promotes efforts to bring in families and companies is vital to the longevity of Delaware.

Thanks to the common consideration of many, Delaware's children today are better equipped than at any time to live fulfilling lives and to thrive in our 21st century world. We would not have been able to achieve success without increased investments in all facets of life of Delawareans of all ages. We have invested in ensuring out youngest learners are prepared for the global economy, working to improve access to quality healthcare, consistent efforts to be more environmentally conscious, and increasing the already wide range of indoor, outdoor cultural and recreational resources.

While progress has been made, we also have much work to do. We must ensure that Delaware's economic growth continues to provide an environment that encourages success. We must continue to advocate for increased preventative care and encourage healthy lifestyles. And we must continue to look for new ways to invest in education and workforce development. The KIDS COUNT in Delaware Fact Book has become indispensable in the data it provides to state leaders. The key statistics provided by KIDS COUNT assist in gauging our youth and their growth over time which in turn helps guide policymakers, program providers, advocates, and funders in directing resources to areas where we can continue to embolden Delaware as a pioneer in serving all who live here. I am very appreciative of the work of the many partners, led by the University of Delaware, which make its work possible.

Sincerely,

John Carney, Governor

KIDS COUNT IN DELAWARE FAMILIES COUNT IN DELAWARE

Fact Book 2017



We sincerely thank the children and families who have shared their photos, and their lives.

We thank The Annie E. Casey Foundation, the University of Delaware, Highmark Blue Cross Blue Shield Delaware, and the State of Delaware, for funding the KIDS COUNT® in Delaware Project.

The findings and conclusions presented in this report, however, are solely those of KIDS COUNT in Delaware, as are any errors or omissions.



KIDS COUNT in Delaware

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Thanks for the data:

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- Center for Drug and Health Studies
- Center for Community Research and Service
- Children and Families First
- Delaware Department of Education
- Delaware Dept. of Health and Social Services
- Delaware Department of Labor
- Delaware Department of Public Safety
- Delaware Department of Services for Children, Youth and Their Families
- Delaware Division of Libraries
- Delaware Health Statistics Center
- Delaware Population Consortium
- Delaware State Housing Authority
- Domestic Violence Coordinating Council
- Nemours Health and Prevention ServicesStatistical Analysis Center

A special thank you to the Delaware children and families whose photos are featured throughout this book.



A Message from KIDS COUNT

Dear Friends,

While parents, families, and communities play key roles in nurturing the children in their care, state and federal policymakers enact the laws and allocate the resources that shape the environment in which children and their families live, learn, play, and grow. A rapidly-changing, fast-moving agenda at the federal level presents the possibility of remarkable change to our national policy landscape which will affect Delaware's children and their families. Further, continued fiscal pressures in our own state will impact priorities, programs, and policy decisions being made locally. With challenges such as these, it is easy to become off-balanced and overwhelmed.

In response, we are seeing Delawareans from many different walks of life who are becoming engaged and mobilized, providing a renewed opportunity to work together in order to make progress on some of our most entrenched problems. Data tell this story.

What we know- what data tell us- is that there are groups of children who are more likely to have poor outcomes across their life span. This year's Fact Book highlights adverse childhood experiences, commonly referred to as ACEs.



ACEs research demonstrates that the negative impact of child trauma doesn't end in childhood. ACEs often erode the foundations required for a person to have the best life he or she could have and impacts society in often undesirable, costly ways. Further, as the number of ACEs increases, so does the number of negative health outcomes. For example, the original Kaiser/CDC study of ACEs estimated that individuals with six or more adverse childhood experiences die 20 years earlier than individuals without these experiences. In addition to measuring the scope of a problem, data points to solutions as well.

The research is clear that protective factors such as safe, stable and nurturing relationships, can help to mitigate the long-term impact of ACEs by developing what researchers have deemed "resilience." As we build the next generation, we must target investments to have the largest impact. Strengthening families, building stronger communities and ensuring access to opportunity through ACE prevention, mitigation, and recovery will enhance the success of young Delawareans as they grow into tomorrow's citizens. It's in everyone's best interest to keep children, our most vulnerable asset, safe from harm.

Sincerely, Kim Gomes, President, Board Mary Joan McDuffie, Chair, Data Committee Janice Barlow, Director



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Kids Count in Delaware

elcome to the 2017 KIDS COUNT in Delaware Fact Book. This project is a collaborative effort of over forty organizations and is housed within the Center for Community Research & Service at the University of Delaware. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local and state discussion concerning ways to secure better lives for all children. Our mission is to provide up-to-date, accurate, objective, comprehensive data on the well-being of children, youth and their families in order to raise awareness and inform both policy and programmatic decisions throughout the state.

The 2017 Fact Book is the 22nd edition of KIDS COUNT in Delaware's signature publication and the 18th joint publication of KIDS COUNT in Delaware/FAMILIES COUNT in Delaware. Since 1995, KIDS COUNT in Delaware has been reporting on the status of children in the state. Working with the State of Delaware since 1998, KIDS COUNT has been monitoring the conditions of families, children and individuals in the community.



National KIDS COUNT project:

Nationally, the KIDS COUNT project uses an index of 16 indicators, to report on overall child well-being in four domains: (1) economic well-being, (2) education, (3) health, and (4) family and community.

In the quest to improve outcomes for our nation's children, the KIDS COUNT project has used the Data Book to highlight these critical building blocks of healthy child development. With special emphasis on: the importance of child well-being to our nation's future prosperity, global competitiveness and community strength; the variability in child well-being by income, race, ethnicity and geography; and evidence-based policies, programs and practices that work.

National KIDS COUNT domains and indicators:

Economic Well Being

- · Children in poverty
- Children whose parents lack secure employment
- Children living in households with a high housing cost burden
- Teens not in school and not working

Education

- Children not attending preschool
- Fourth graders not proficient in reading
- Eighth graders not proficient in math
- High school students not graduating on time

Health

- · Low-birthweight babies
- Children without health insurance
- Child and teen deaths per 100,000
- · Teens who abuse alcohol or drugs

Family and Community

- Children in single-parent families
- Children in families where the household head lacks a high school diploma
- Children living in high-poverty areas
- Teen births per 1,000

Online Data Tables:

http://datacenter.kidscount.org/data/bystate/chooseindicator.aspx?state=DE



Kids Count in Delaware

Indicators

While the National KIDS COUNT project uses a 16 indicator index, KIDS COUNT in Delaware has historically reported on a larger number of indicators. We will continue to report on featured indicators and noteworthy trends in addition to the variety of other indicators including early care and education, prenatal care, substance abuse, and student achievement. This year our featured indicators are:

- Low Birth Weight Babies
- Infant Mortality
- Children Without Health Insurance
- Graduation Rates
- 3rd Grade Reading Proficiency
- 8th Grade Math Proficiency
- Children in Poverty
- Median Family Income
- Economic Inclusion on Young People
- Teen Births
- Children in One Parent Families
- Child Abuse/Neglect

Making Sense of the Numbers

The information on each indicator is organized as follows:

- Description
 A description of the indicator and how it relates to child and family well-being
- Data
 Charts and graphs giving a visual representation of the data and, when available, showing trends over time and comparing Delaware data to U.S. data
- Related information
 Did you know, Data into Action, and

 For More Information sections

Sources of Data

The data are presented primarily in three ways:

- · Annual data
- Three-year and five-year averages to minimize fluctuations of single-year data and provide more realistic pictures
 - and provide more realistic pictures of children's outcomes
- Annual, three-year or five-year average data for a decade or longer to illustrate trends and permit longterm comparisons

The data has been gathered primarily from:

- Center for Applied Demography and Survey Research, University of Delaware
- Center for Drug and Health Studies, University of Delaware
- · Children and Families First
- Delaware Department of Education, State of Delaware
- Delaware Department of Health and Social Services, State of Delaware
- Delaware Department of Services for Children, Youth and Their Families, State of Delaware
- Delaware Health Statistics Center, Delaware Health and Social Services
- Delaware Population Consortium
- Division of State Police, Department of Public Safety, State of Delaware
- Domestic Violence Coordinating Council
- National Center for Health Statistics, U.S. Department of Health and Human Services
- Nemours Health and Prevention Services
- Statistical Analysis Center, Executive Department, State of Delaware
- U.S. Bureau of the Census



To improve the wellbeing of children, our elected leaders must address the economic obstacles facing workers at the bottom half of the income

Kids Count Overview

HEALTH AND HEALTH BEHAVIORS

LOW BIRTH WEIGHT BIRTHS

As a Percentage of All Births

2010-2014.....8.5%

IMPROVED

2005-2009.....9.0%

INFANT MORTALITY

DEATHS OF INFANTS LESS THAN 1 YEAR OLD PER 1,000 LIVE BIRTHS

2010-2014.....7.5

IMPROVED

2005-2009.....8.3

CHILDREN WITHOUT HEALTH INSURANCE

Percentage of Children (0-17)
without Health Insurance

2014-2016.....5.6%

IMPROVED

2009-2011.....8.0%



EDUCATIONAL INVOLVEMENT AND ACHIEVEMENT

GRADUATION RATES

PERCENTAGE OF JUNE GRADUATES COMPARED TO THE 9TH GRADE CLASS FOUR YEARS PREVIOUS

2015-2016.....84.7%

IMPROVED

2010-2011.....79.0%

3RD GRADE READING PROFICIENCY

Percentage of Delaware Third Graders

Meeting the Standard in Reading

2015-2016.....53.8%

*Delaware's "Smarter Balance" test was initiated in the 2014/15 school year. Because the performance measure has changed, historical data comparison data is not available.

8th Grade Math Proficiency

PERCENTAGE OF DELAWARE
EIGHTH GRADERS MEETING THE STANDARD IN MATH

2015-2016.....37.7%

*Delaware's "Smarter Balance" test was initiated in the 2014/15 school year. Because the performance measure has changed, comparison data is not available.



Kids Count Overview

ECONOMIC SECURITY

CHILDREN IN POVERTY

Percentage of Children (0-17) in Poverty 2014-2016......18.5%

WORSENED

2009-2011.....16.9%

MEDIAN FAMILY INCOME

MEDIAN INCOME IN THOUSANDS OF US DOLLARS OF HOUSEHOLDS WITH CHILDREN UNDER 18 BY FAMILY TYPE

2014-2016.....1-PARENT \$29,589 2-PARENT \$92,887

IMPROVED

2009-2011.....1-PARENT \$27,212 2-PARENT \$85,950

ECONOMIC INCLUSION OF YOUNG PEOPLE

Percentage of Teens (16-19) Not Attending School and Not Working

2014-2016.....8.8%

WORSENED

2009-2011.....8.4%



Family & Community

TEEN BIRTHS

LIVE BIRTHS TO 15-19 YEAR-OLD FEMALES PER 1,000 15-19 YEAR-OLD FEMALES

2010-2014.....27.6

IMPROVED

2005-2009.....41.1

CHILDREN IN ONE-PARENT FAMILIES

Percentage of Children (0-17) in One-Parent Families

2014-2016.....35.2%

IMPROVED

2009-2011.....36.6%

CHILD ABUSE/NEGLECT

CHILDREN WITH SUBSTANTIATED REPORTS OF ABUSE AND NEGLECT PER 1,000 CHILDREN AGES BIRTH TO 17

2016.....7.1

IMPROVED

2011.....11.1





ACEs are: ADVERSE CHILDHOOD EXPERIENCES

dverse Childhood Experiences, or "ACEs," are stressful or traumatic experiences that disrupt the safe, nurturing environments that children need to thrive. Exposure to ACEs can lead individuals toward the adoption of unhealthy habits and the onset of negative long-term health and economic issues. Adverse childhood experiences include events such as abuse, neglect, and family violence that occur in the first 18 years of life. ACEs often reflect the struggles that children's families are going through because of their own compromised

well-being. In other words, ACEs remind us that creating conditions for child well-being requires creating conditions for family well-being.

An extensive study by the Centers for Disease Control and Prevention begun in 1995, the Adverse Childhood Experience Study, revealed that almost two-thirds of study participants reported experiencing at least one type of trauma during their childhood. The CDC-Kaiser Permanente Adverse Childhood Experiences (ACEs) Study is one of the largest investigations of childhood abuse and neglect and laterlife health and well-being,

This study looked specifically at the impact of these events on health later in life and found that these adverse experiences are linked to the leading causes of adult illness and early death, as well as to poor quality of life in adulthood. The impact is particularly sharp when multiple adverse events



CDC-Kaiser ACES Identified:

ABUSE



Physical



Emotional



Sexual Abuse

NEGLECT



Physical



HOUSEHOLD DYSFUNCTION



Mental Illness



Incarcerated Relative



Mother Treated Violently



Substance Abuse



Divorce

Source: Robert Wood Johnson Foundation http://www.cdc.gov/ace/prevalence.htm rwif.org/aces

are experienced. These childhood experiences include:

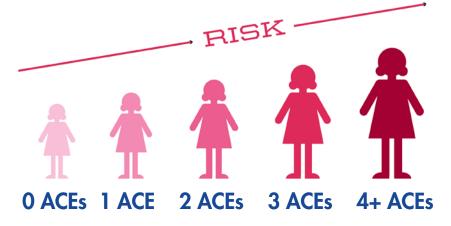
- emotional, physical, and sexual abuse;
- · emotional and physical neglect;
- witnessing domestic or community violence;
- substance abuse in the household;
- depression, mental illness, or suicidality in the household;
- incarceration of household member(s);
- stress due to parental separation or divorce.

Not every person who suffers an adverse experience will face chronic health issues or a poor quality of life, but the higher the total number of these events a child experiences, the higher the risk of obesity, chronic illness, substance abuse, smoking, and mental health problems. Early results from the original study estimated that individuals with six or more adverse childhood experiences die 20 years earlier than individuals without these experiences. A child who experiences one adverse event is very likely to experience additional events during childhood.

ACEs cause stress and challenges during childhood, adolescence, and into adulthood. Some adult outcomes associated with ACEs include the following: heart disease, diabetes, obesity, cancer, liver disease, intimate partner violence, depression, suicide attempts, poor anger control, smoking, substance abuse, multiple sexual partners, unintended pregnancies, or fetal death. The more exposure to ACEs a person has, the more his or her risk increases for the issues above.

To learn more about the original ACE Study and how ACEs impact adults and society, check out http://vetoviolence.cdc.gov/apps/phl/resource_center_infographic.html

As the number of ACEs increases, so does the number of negative health outcomes



Possible Risk Outcomes Behavior







Smoking



Alcoholism



Drug Use



Physical and Mental Health



Severe Obeisity



Diabetes



Depression



Suicide Attempts



STDs



Heart Disease



Cancer



Stroke



COPD



Broken Bones

Source: Robert Wood Johnson Foundation http://www.cdc.gov/ace/prevalence.htm rwjf.org/aces

Data Sources for Highlighted ACE Data

	Kaiser/CDC	National Survey of Children's Health (NSCH)	Delaware Household Health Survey (DHHS)
Data Collection Timeframe	1995-97	2011-12	2015
Number of Survey Participants	17,377	1,824	2,609
Survey Respondents & Measure	Asks adults about own experience as a child	Asks adults about experiences of children currently in household	Asks adults about own experience as a child
ACE Events Examined	-physical abuse -sexual abuse -emotional abuse -physical neglect -emotional neglect -divorce/separation -household mental illness -household substance use -incarceration -domestic violence	-divorce/separation -household mental illness -household substance use -incarceration -domestic violence -economic hardship -parental death -community violence -discrimination	-physical abuse -sexual abuse -emotional abuse -physical neglect -emotional neglect -divorce/separation -household mental illness -household substance use -incarceration -domestic violence -discrimination -bullying

In Delaware, The Delaware Household Health Survey (DE HHS) examines health status, and the social determinants that contribute to health outcomes statewide, and includes data on ACES. According to this study which surveyed adults, 24% reported experiencing 1 ACE, 20% experienced 2-3 ACES and 16% of adults responded that they experienced 4 or more ACEs during childhood. Some of the impacts of those ACES are illustrated in adult behavior including 35.6% of those who experienced 4 or more ACEs were smokers (compared to just 10.7% of people with no ACEs. Additionally, of



those with exposure to 4 or more ACES 38% were diagnosed with a mental health condition, where as 7.8% of people with no exposure to ACES had such a diagnosis.

The National Survey of Children's Health reports that 50.4% of Delaware children experience at least one ACE, and 22.8% experience two or more ACEs. 20.6% of Delaware kids experience family disorder leading to divorce/separation and 11.1% have lived with someone who had an alcohol or drug problem. Nearly ¼ of our state's children live in extreme economic hardship.

There is hope! Research shows that providing safe, stable and nurturing relationships early in life can buffer the damaging effects of childhood adversity. Delaware can do a number of things to both prevent and reduce ACEs across the state and to build protective factors in and around children so they can grow up to be healthy and happy.

Increase awareness of ACEs and their impact

- Develop and disseminate information about ACEs and their association to specific outcomes as a first step to reducing ACEs and de-stigmatizing early childhood trauma. Share this information with family, friends, neighbors and coworkers.
- Work with the state's education, child welfare, mental health, public health, health care, substance abuse, juvenile justice and public safety systems to further understand the impact of ACEs and the health, social and economic benefits of reducing and preventing ACEs.

Continue to collect and use Delaware-specific ACE data

- Increase the scope and utility of ACE data collection, analysis and dissemination in Delaware.
- Compile a statewide inventory of community initiatives that reduce ACEs to use as a strategic tool to inform decision-making and move from awareness to solutions.

Prevent and respond to ACEs in communities

• Ensure safe, stable, nurturing relationships and environments for children by supporting protective

factors including parental resilience, social connections, parenting education and concrete support in times of need.

• Enhance the capacity of communities to prevent and reduce ACEs by prioritizing investments toward evidence-based prevention and intervention programming that supports children and families, promote and fund the implementation and evaluation of promising approaches, and support community norms change where all share responsibility for the well-being of children.



Look for these icons, which highlight ACE indicators, ACE-related hardships, possible risk outcomes, and actions throughout the Fact Book:



ACEs highlighted in the Fact Book include:

- Abuse and neglect
- Household dysfunction like household substance use, domestic violence, and economic hardship
- Community dysfunction like community violence and bullying



Hardships

Additional ACE-related hardships are also highlighted in this year's Fact Book.

These include conditions such as foster care, children in one-parent families, poor academic outcomes, juvenile justice and unsafe built environments



Outcomes

Possible risk outcomes highlighted in the Fact Book include:

behaviors as well as physical & mental health.



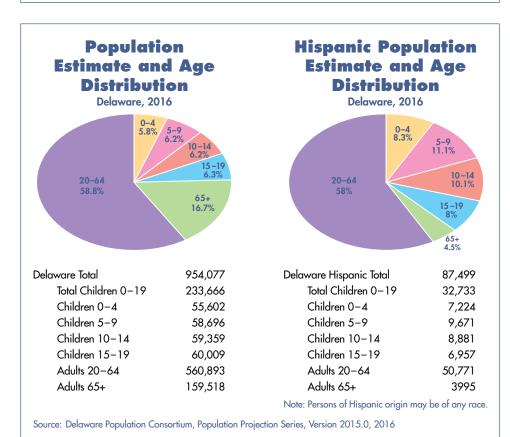
Data on programs which address ACE conditions are also highlighted in the Fact Book. These include programs ensuring food security, tax credits, quality early childhood education, and social safety net programs.

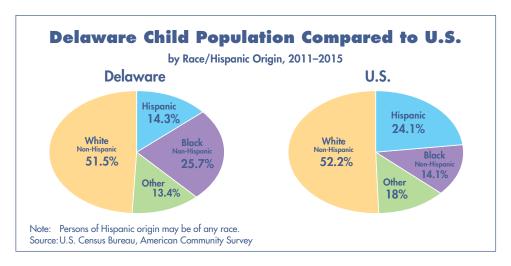
Data from the Census Bureau's American Community Survey and the Delaware Population Consortium provide a picture of the population of the state of Delaware, its counties and cities, and the nation. Demographically speaking, we are much less of a child centered society now than we were 100 years ago. In the United States, children accounted for 40% of the population in 1900, but only 24% in 2010. Similar trends are evident in Delaware.

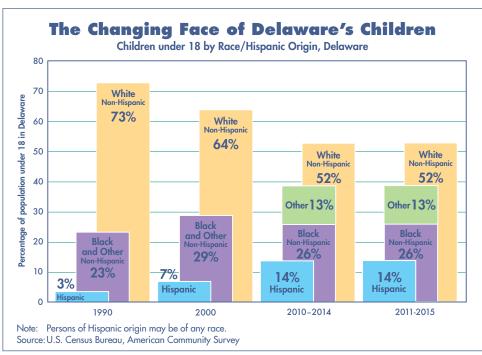
2010 Census data shows New Castle as the largest county with a population of 538,479 persons, though it grew by the smallest percent (7.6%) between 2000 and 2010. Sussex County had a 2010 population of 197,145 (25.9% increase). Kent County, though smallest in population (162,310 persons), had the largest percent increase (28.1%). Demographic information supplies valuable information about the population and provides a clear snapshot of society at a given time.



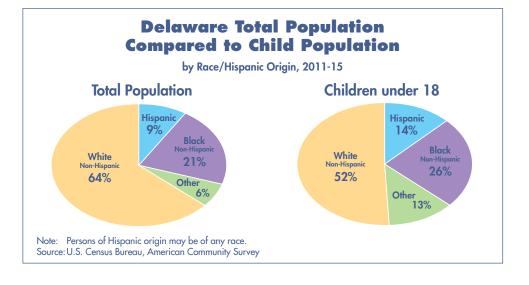
Population at a Glance Population Estimates by Age for Delaware, Wilmington and Counties, 2016				
	Population	Age 0-19	Age 20+	% 0-19
Delaware	954,077	233,666	720,411	24.5
New Castle	560,147	137,149	422,998	24.5
Wilmington	72,638	19,686	52,952	27.1
Kent	1 <i>75,</i> 110	49,974	125,136	29.0
Sussex	218,820	46,543	17,2277	21.3

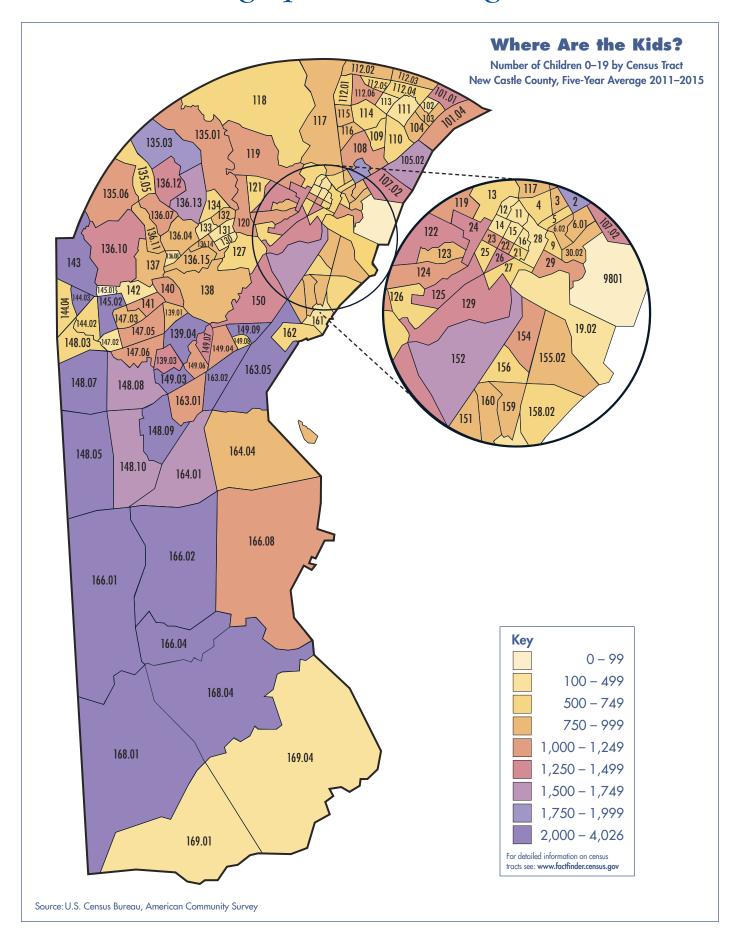




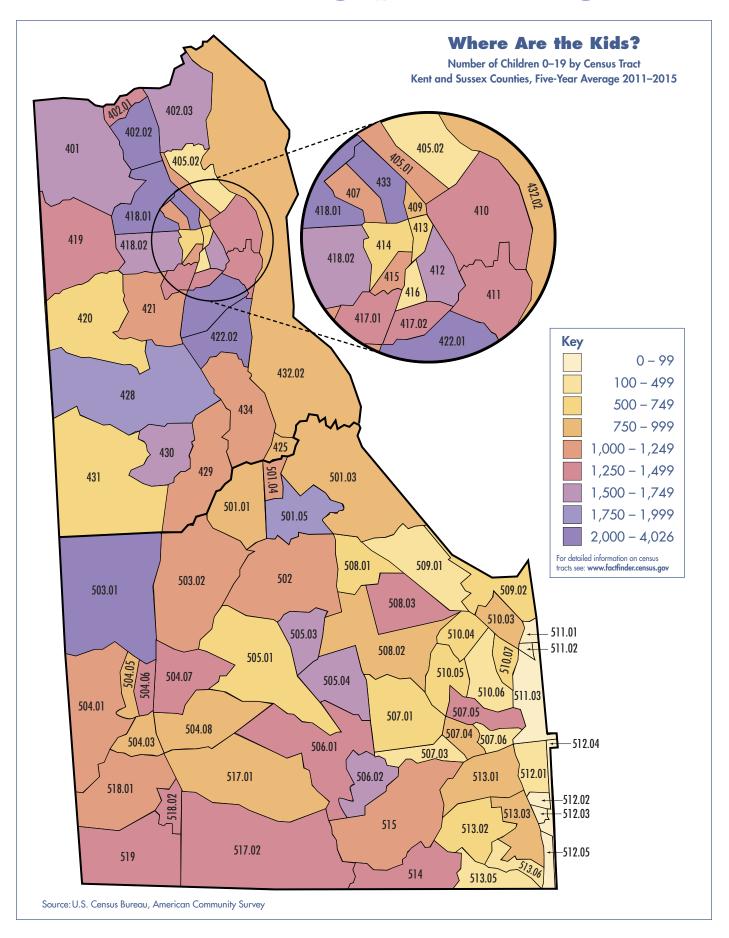


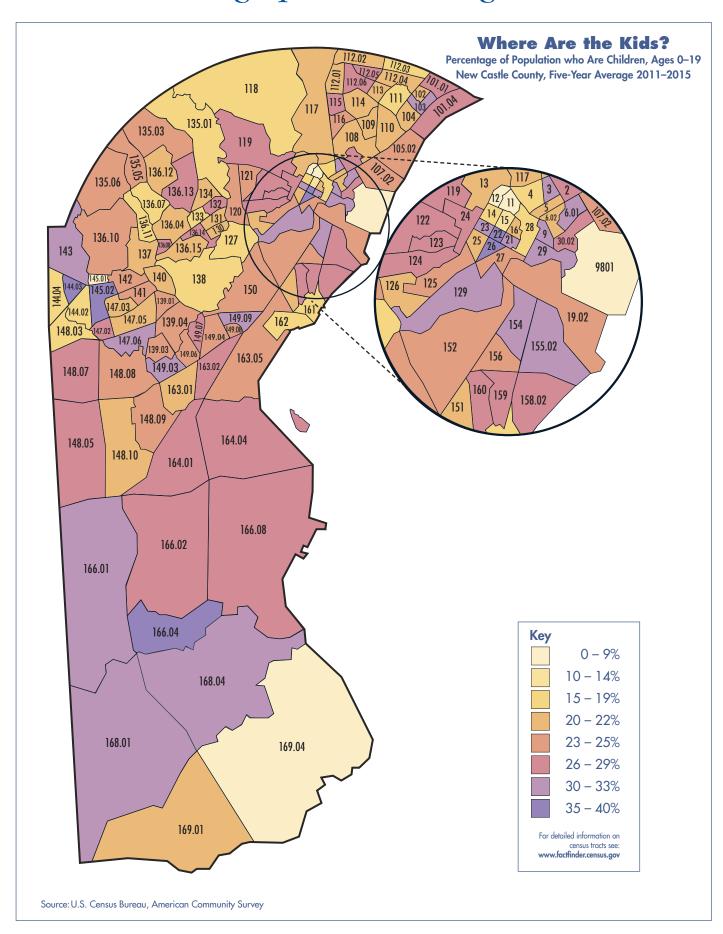


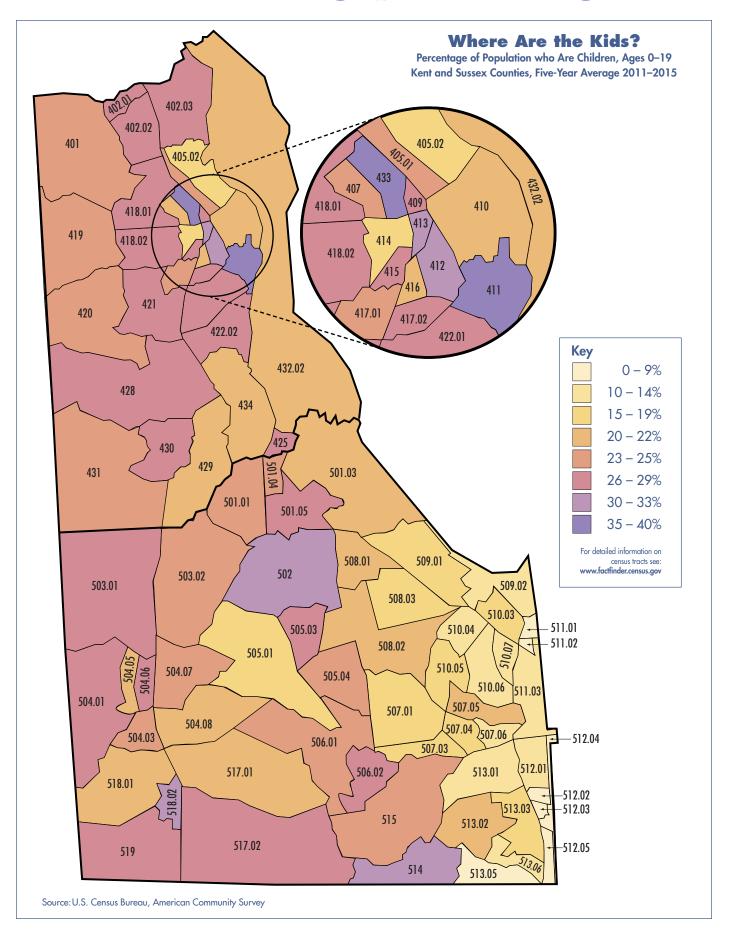




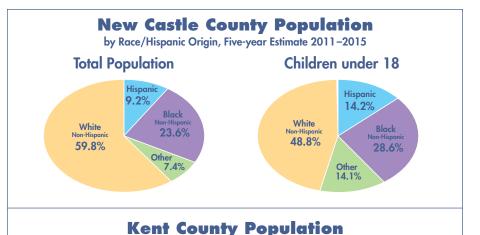


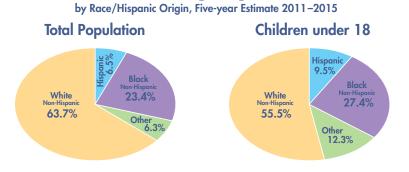


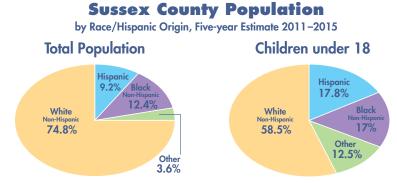


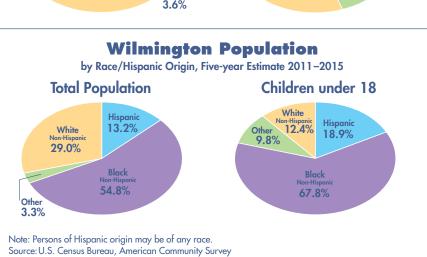








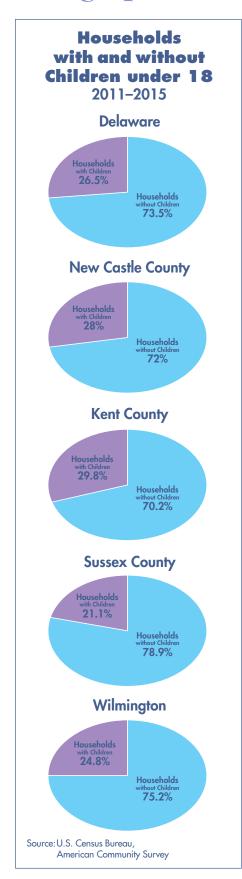




Families with Related Children by **Household Structure** 2011-2015 Delaware **Married Couple** 63.8% **New Castle County Married Couple** 26.5% 64.4% **Kent County Married Couple** 63.5% **Sussex County** Married Couple 28.6% 61.8% Wilmington Male Married Couple 13.6% **32.6**%

Source: U.S. Census Bureau,

American Community Survey





Household – A household consists of all the people who occupy a housing unit. It may be a family household or a non-family household. A non-family household consists of a householder living alone or where the householder shares the home exclusively with people to whom he/she is not related. A family household is a household maintained by a householder who is in a family and includes any unrelated people who may be residing there.

Family - A family is a group of two people or more related by birth, marriage, or adoption who are residing together.

In 2011 there were 919, 962 people in 333,192 households in Delaware. The average household size was 2.65; the average family size was 3.17. Families made up 68% of the households in Delaware. Most of the nonfamily households were people living alone (32% of all Delaware

Interpreting the Data



he KIDS COUNT in Delaware Fact Book uses the most current, and reliable data available. Data that is inadequate or unavailable is denoted by N/A.

Most indicators are presented as three or five year averages. The data is represented this way because it allows for a thorough look at trends, occurring over time, rather than dramatic point estimates or percentages that can vary drastically from year to year.

Accepted names for various racial and ethnic groups are constantly in flux and indicators differ in their terminology. KIDS COUNT has used the terminology reported by the data collection sources.

Fiscal Year Data: Most data presented here are for calendar years. Where data collected by state or federal authorities is available by school calendar year or fiscal year, the periods are from September to August or July 1 to June 30, respectively.

Notes: When necessary we have included technical or explanatory notes under the graphs or tables.

Counties and Cities: Where possible, data were delineated by counties and the City of Wilmington.

Numbers, Rates, and Percentages

Each statistic tells us something different about children. The numbers represent real individuals. The rates and percentages also represent real individuals but have the advantage of allowing for comparisons between the United States, Delaware, and counties.

In this publication, indicators are presented as either raw numbers (25), percentages (25%), or rates (25 per 1,000 or 25 per 100,000). The formula for percents or rates is the number of events divided by the population at risk of the event (county, state, U.S.) and multiplied by 100 for percent or 1,000 or 100,000 for rates.

A Caution About Drawing Conclusions

Caution should be exercised when attempting to draw conclusions from percentages or rates which are based on small numbers. Delaware and its counties can show very large or very small percentages as a result of only a few events. KIDS COUNT encourages you to look at overall trends.

The key in the evaluation of statistics is to examine everything in context. The data challenges stereotypes — pushing us to look beyond the surface for the less obvious reasons for the numbers. Individual indicators, like the rest of life's concerns, do not exist in a vacuum and cannot be reduced to a set of the best and worst in our state.

Where county level data are presented, readers can gain a better understanding of the needs in particular segments of the state. Delaware rankings within the National KIDS COUNT Data Book can fluctuate from year to year. Therefore, it is important to look at the trends within the state and over a significant period of time. Hopefully, the graphs help to clarify that picture.



he future prosperity of any society depends on its ability to foster the health and well-being of the next generation. Part of fostering that future success is acknowledging and rectifying the structural and institutional discrimination that has a dramatic impact on the health outcomes for children of color. People of color often receive a lower quality and intensity of health care, are more likely to be uninsured, live in medically underserved communities, experience cultural and linguistic barriers to care, and are more likely to be the victims of subtle bias and stereotyping.

Safeguarding a child's health, and in particular addressing the barriers facing children of color, is the first step to ensuring a child is able to grow, learn, and thrive. The conditions and environments in which children live affect their health and differ by race and

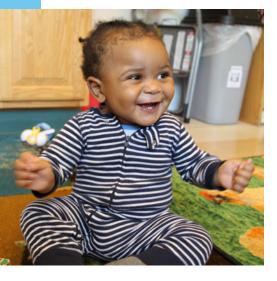
ethnicity. Our state can ensure health and wellness by reducing racial and ethnic disparities in food security, access to health insurance for children and parents and exposure to environmental risks.

A healthy start begins with the prenatal health and well-being of a child's mother, and includes a child's early months and years, when a child's brain is rapidly developing the knowledge and skills essential for future success in their relationships, school, and reaching their full potential in life. The economic security and stability of young families is critical during this time, as it reduces the risk of poverty and stress to parents and children—which can have lifelong impacts on the whole family's well-being, even when experienced for a short period of time. A high quality early learning system can support young families by providing children with

learning environments that support healthy development, and giving parents affordable options for child care so they can work if they need or wish to.

Due to policies which created and maintained unequal opportunities for families, disparities in child poverty exist across race, ethnicity and family type. Having a safe and stable house to sleep in each night, as well as having enough food, are fundamental to a child's social, emotional, and physical well-being. Compared to children with adequate nutrition and stable housing, children who experience homelessness and hunger are more likely to experience trauma, chaos, trouble in school, and poorer health. The unpredictability of homelessness and hunger puts a child's safety at risk as well, as the stress on families can reach toxic levels that may undermine relationships between parents and children.

Prenatal Care



Substance Exposed Infants

Number of Hospital Discharges with Drug-related Diagnoses. Delaware

Diagnosis	2012	2013
Suspected Damage to Fetusfrom drugs	<5	14
Neonatal Abstinence Syndrome (779.5, 760.72)	247	272
Pregnant (V22.2) with Drug related ICDs	0	<5

Note: The International Statistical Classification of Diseases and Related Health Problems (commonly known as the ICD) provides alpha-numeric codes to classify diseases and a wide variety of signs, symptoms, abnormal findings, complaints, social circumstances and external causes of injury or disease.

ICD 9-CM codes

655.5 Suspected damage to fetus from drugs
V22.20 Pregnant state, incidental
779.5 Drug withdrawal syndrome in newborn
(with dependent mothers)
Varcotics (760.7 Noxious influences
affecting fetus or newborn via placenta or
breast milk)

Drug-related ICDs

304 Drug Dependence 305.5 Opioid abuse 977.9 Unspecified drug or medicinal substance

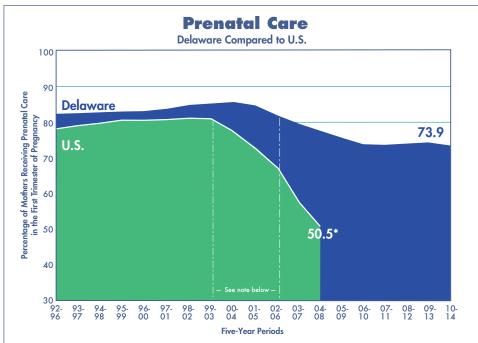
970.1 Unspecified drug or medicinal substant opiate antagonists

opiale anlagonisis

Source: Delaware Health Statistics Center

omprehensive prenatal care is essential to ensuring a baby's future well-being, and maximizes both infant and maternal health. Mothers who receive regular prenatal health care visits have better nutrition, participate in more regular physical activity, and tend to avoid exposing their babies to unhealthy substances such as alcohol, tobacco, or lead.

Mothers who receive inadequate prenatal care face the risks of serious consequences for both mother and baby. Mothers who do not get prenatal care are significantly more likely to have low birth weight babies or face infant mortality than their counterparts who do receive care. Early and adequate prenatal care is crucial for ensuring a healthy future for both the mother and the child.



* U.S. data is not available after the 2004-2008 period.

Note: A 2003 revision of the U.S. birth certificate introduced substantive changes to information on the timing of prenatal care. Each state has been revising their certificate according to their own schedule; Delaware began collecting data using the revised birth certificate with the 2006 data year. According to the National Center for Health Statistics, prenatal care data based on the revised certificate show a markedly less favorable picture of prenatal care utilization in the U.S. than data from the un-revised certificate. Most of the difference can be attributed to changes in reporting and not to changes in prenatal care utilization.

Source: Delaware Health Statistics Center, National Center for Health Statistics

Did You Know?

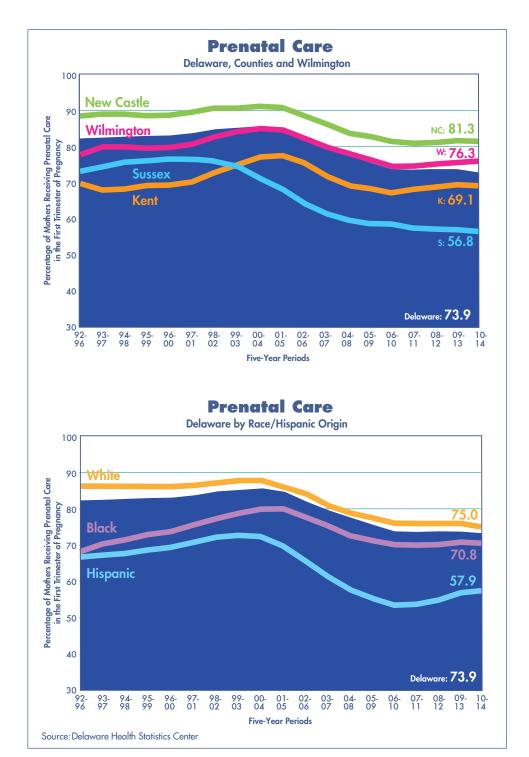
If a pregnant woman heavily uses opiates, such as heroin, codeine, oxycodone and even methadone or buprenorphine – which are used in drug treatment, those substances filter through the placenta. The baby is then born drug-dependent and soon suffers withdrawal. When an expecting mom drinks alcohol while the baby is developing in the womb, the baby can develop fetal alcohol syndrome disorders as well.

http://www.delawareonline.com/story/news/health/2016/01/17/newborn-addictions-rise-triggering-new-hospital-rules/78851632/

In 2016, the Division of Family Services investigated 431 reports of substance exposed infants. Source: Delaware Division of Family Services, Department of Children, Youth, and their Families



Prenatal Care



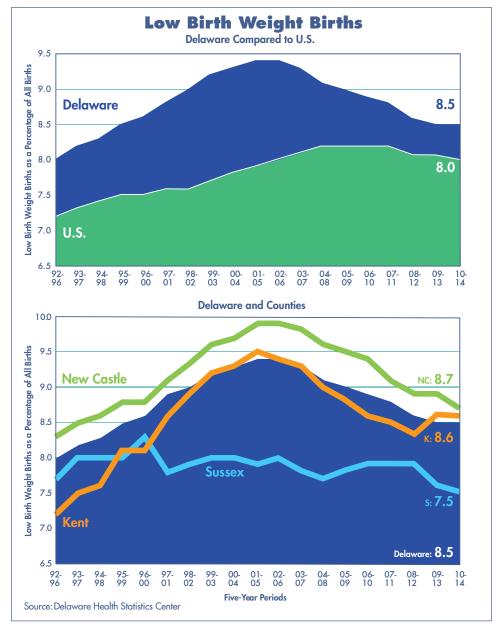


For more information see www.modimes.org/ www.kidshealth.org www.aafp.org/ www.cdc.gov/ncbddd/

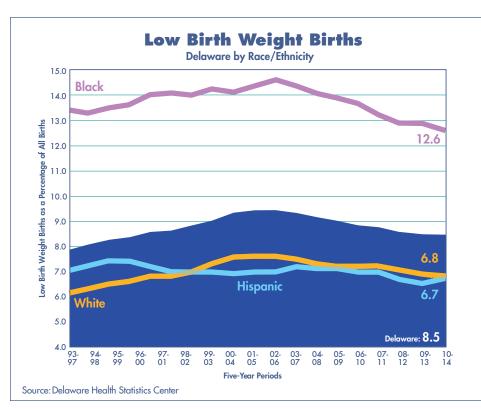
Low Birth Weight Births



An infant's weight at birth can be a decisive indicator of the newborn's chances for survival, growth, long term health and psychosocial development. Many causes of infant low birth weight can be linked to the mother's behavior or health during pregnancy. Factors linked with low birth weight include: tobacco, alcohol or drug use, poor nutrition, excessive stress and anxiety, inadequate prenatal care, chronic maternal illness, premature labor, low weight of mother, genetic disorders, or short interval between pregnancies. Babies who are born very low in birth weight can face a variety of negative outcomes including an increased risk of infant mortality, heightened risk for long term disability, and impaired development such as delayed motor and social development. Low birth weight among newborns is a serious issue and it can have an immense impact on the rest of their lives.



Low Birth Weight Births





Percentage of Babies with **Low Birth Weight** (weight less than 2500 grams) by Age and Race of Mother Five-year Average, 2010-2014 8.0% of U.S. babies have low birth weight 8.5% of Delaware babies have low birth weight Low birth weight babies in Delaware represent 9.9% of births to teenagers 8.9% of births to women 20-24 years old 8.3% of births to women 25-29 years old 8.1% of births to women 30+ years old 6.8% of births to White women 12.6% of births to Black women 6.7% of births to Hispanic women **Delaware Average 8.5%** Source: Delaware Health Statistics Center

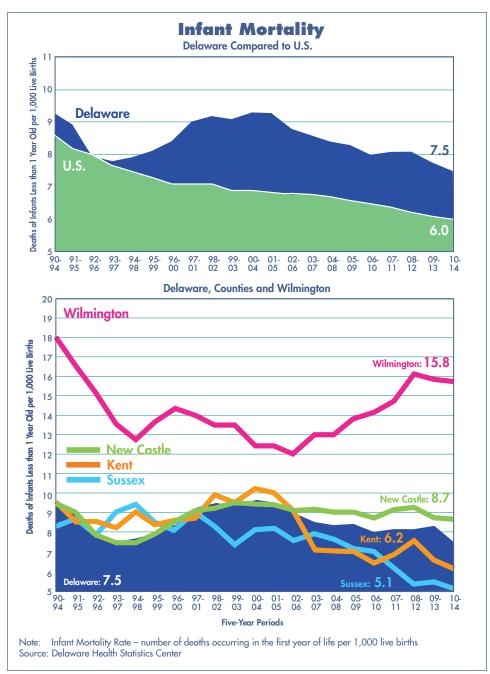
Percentage of Babies with **Very Low Birth Weight** (weight less than 1500 grams) by Age and Race of Mother Five-year Average, 2010–2014 1.4% of U.S. babies have low birth weight 1.8% of Delaware babies have low birth weight Low birth weight babies in Delaware represent 1.9% of births to teenagers 1.7% of births to women 20-24 years old 1.7% of births to women 25-29 years old 1.8% of births to women 30+ years old 1.2% of births to White women 3.2% of births to Black women 1.4% of births to Hispanic women **Delaware Average 1.8%**

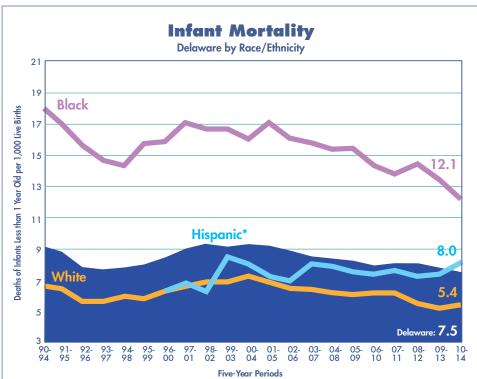
Source: Delaware Health Statistics Center

For more information see www.modimes.org www.kidshealth.org



Infant mortality rate is an important indicator of the overall well-being of a society. Infant mortality is related to the underlying health of the mother, public health practices, socioeconomic conditions, and availability and use of appropriate health care for infants and pregnant women. The primary causes of infant mortality are birth defects, disorders related to short gestation/low birth weight, Sudden Infant Death Syndrome (SIDS), and issues related to pregnancy and birth, including substance abuse. Since mothers and infants are among the most vulnerable members of society, infant mortality is a measure of a society's concern and investment in supporting community health. In addition, disparities in infant mortality by race/ethnicity and socioeconomic status are an important measure of the inequalities that exist within society. In the United States, about two-thirds of infant deaths occur in the first month after birth, and are mostly due to health problems of the infant or the pregnancy, such as pre-term delivery or birth defects. Proper prenatal care and well-baby preventive care offer opportunities to identify and lower some risk factors for infant mortality.

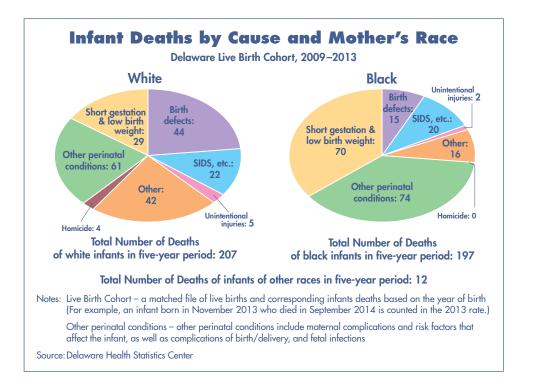




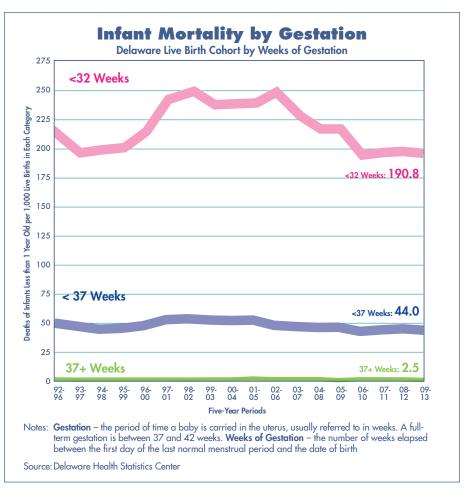


* Persons of Hispanic origin may be of any race. Hispanic rates prior to 1996–2000 do not meet standard of reliability or precision; based on fewer than 20 deaths in the numerator.

Source: Delaware Health Statistics Center



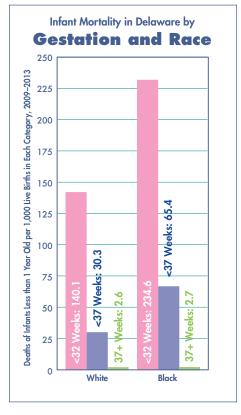


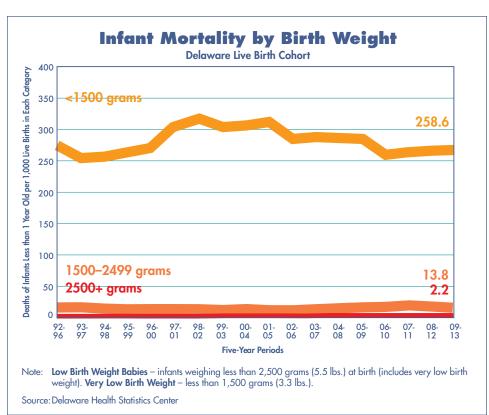


Did You Know?

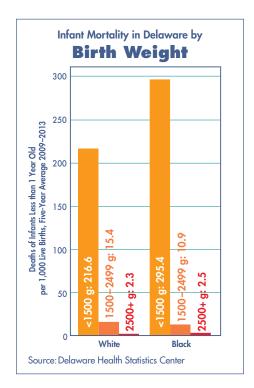
Despite the declines in infant mortality between 1999 and 2013, rates for Black, non-Hispanic and American Indian or Alaska Native, non-Hispanic infants remained higher than the rates for White, non-Hispanic; Hispanic; and Asian or Pacific Islander, non-Hispanic infants throughout the entire period.

Source: http://www.childstats.gov/americaschildren/health1.asp (Health)"





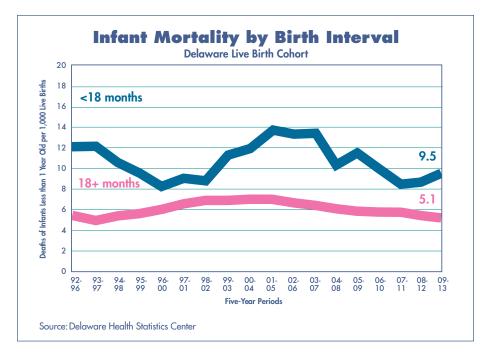




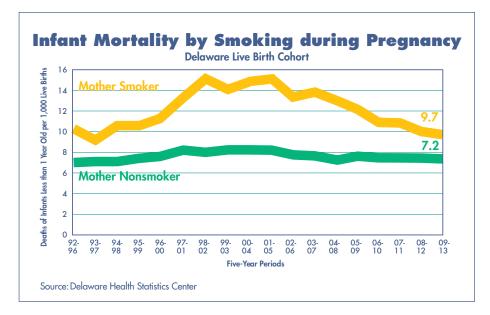
Did You Know?

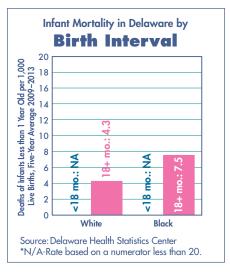
Sleep-related death is the number one cause of death for infants between the ages of 1 month to 1 year. The Long Live Dreams campaign was designed to help more families create safe sleep environments for their babies. The Safe Sleep Campaign in Delaware provides safe sleep education and works to reduce the social and economic barriers that some families face to creating safe sleep environments.

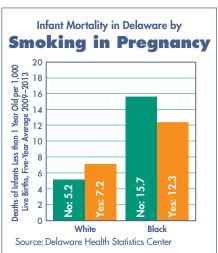
Source: http://dethrives.com/blog/safe-sleepdelawares-professionals-explain-how-wecan-reduce-infant-mortality-video and http:// dethrives.com/long-live-dreams



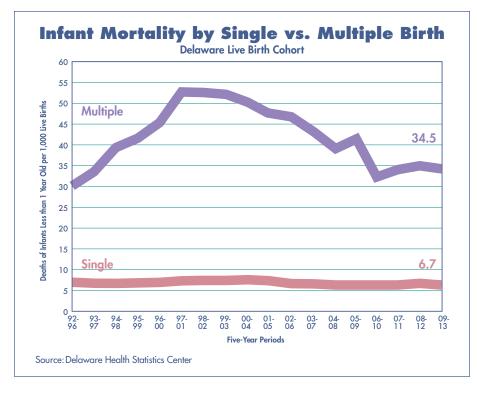


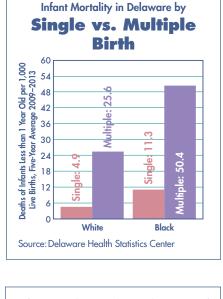


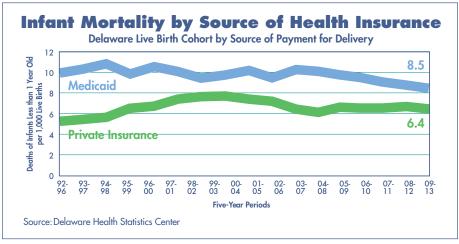


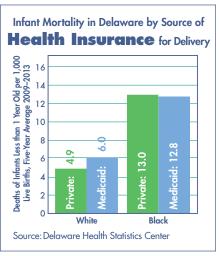


Infant Mortality



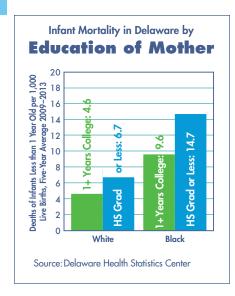


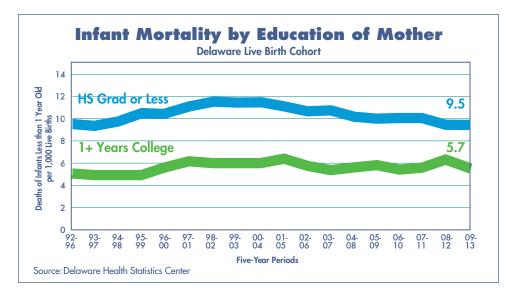






Infant Mortality







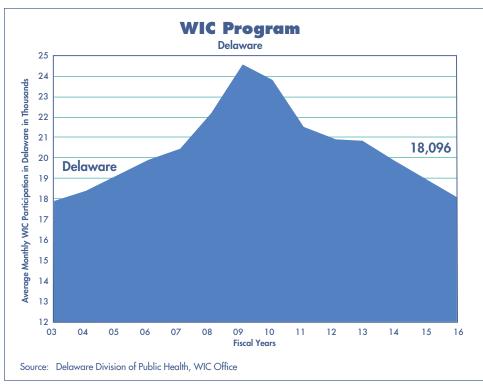
For more information see www.modimes.org www.hmhb.org www.cdc.gov/nccdphp/drh/index.htm



Women, Infants and Children Receiving WIC

omen and children across the United States face the effects of poor nutrition and food insecurity on a regular basis. Each month, millions of these low-income women and children who are at risk for inadequate nutrition receive support from the federally-funded Special Supplemental Program for Women, Infants and Children (WIC). This program provides those in need with nutritious foods, nutrition education, and referrals to health and other social service providers free of charge. WIC also supports low-income pregnant, postpartum and breastfeeding women, in addition to low-income infants and children under the age of five. The lasting positive impact of WIC can be seen both on present and future generations. The WIC program is correlated with positive outcomes such as lower Medicaid costs, longer gestation periods, higher birth weight, and lower rates of infant mortality.





WIC has very positive outcomes like fewer infant deaths, fewer premature births, less incidences of low birth weight infants, savings in health care costs within the first 60 days after birth, and improved rates of childhood immunizations.

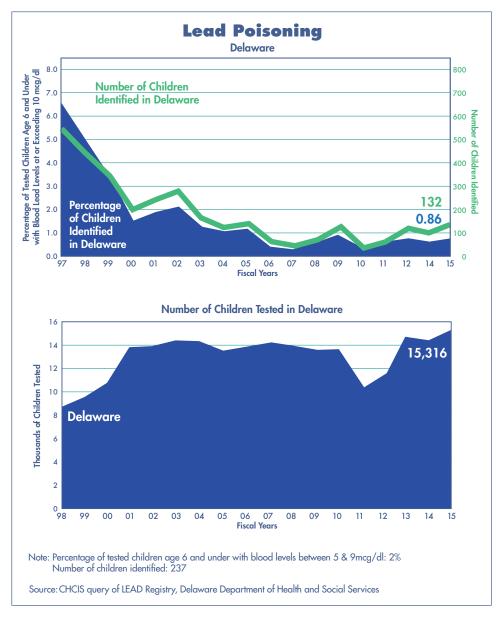
For more information see www.fns.usda.gov/wic

Lead Poisoning



In 2015 the percentage of children (aged 6 and under) that were identified with blood levels between 5 and 9m cg/dl was 2.34% and the number of children identified was 359.

ead is a toxin formerly found in gasoline, paint, and other household items. While lead is much less commonly found in home and work environments, lead poisoning still presents a major health concern and requires careful vigilance to prevent, because lead can't be seen, tasted, or smelled. Exposure to lead can result in reduced IQ, learning disabilities, Attention Deficit Hyperactivity Disorder (ADHD)., behavioral problems, stunted growth, impaired hearing, kidney damage, mental development delays, comas, and even death. Lead poisoning can affect anyone, but children are affected the most due to vulnerabilities in their developing brains and bodies.



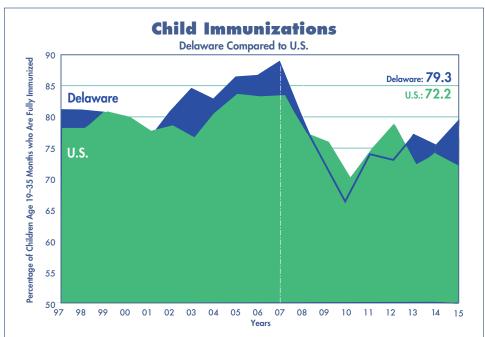




Immunizations

he health of the whole community is protected when we ensure that our children are immunized. Diseases that once spread quickly and affected thousands of children and adults are now largely contained by vaccines. Child vaccination is one of the most cost-effective preventative health measures. Vaccines are important because they not only protect individual children against dangerous diseases, they protect communities by slowing down or preventing disease outbreaks and protecting communities by helping to protect children who are not able to be vaccinated. In other words, vaccination protects not only the recipient of the vaccine, but everyone in the community. This helps to contain infectious diseases, including polio, measles, diptheria, and many other dangerous diseases.

While infectious diseases can affect everyone, children are especially susceptible. That's why the Centers for Disease Control and Prevention (CDC) recommend vaccinating children against most vaccine-preventable diseases by two years of age. Protecting children against preventable infectious diseases results in positive outcomes such as improved physical health, the ability to attend school more regularly, and lowered family stress.



Note: The CDC designation of "fully immunized" has changed from (4:3:1) — four doses of diphtheria, tetanus and Pertussis vaccine (DTaP); three doses of polio vaccine; one or more dose of measles, mumps and rubella vaccine (MMR) — to (4:3:1:3:3:1) — four doses of diphtheria, tetanus and Pertussis vaccine (DTaP); three doses of polio vaccine; one or more doses of measles, mumps and rubella vaccine (MMR); three doses of Haemophilus influenzae type b vaccine (Hib); three doses of hepatitis B vaccine; and one or more doses of Varicella or chickenpox vaccine. The change from 2006 to 2007 is due to the dosing change rather than from fewer vaccinations.

*2014 data margin of error: U.S. ±1.4; Delaware ±6.8

Source: National Immunization Survey, 2014; Centers For Disease Control and Prevention



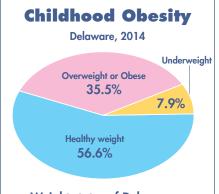
Did You Know?

There is no cure for HPV infections. For teens older than 14, a series of three shots is given over a six month period. For kids aged 9-14, 2 doses are recommended. The HPV vaccine offers the best protection to girls and young women and boys who receive all three doses so they can develop an immune reaction. In Delaware, only 51.7% of girls aged 13-15 have received the full 3 doses of the vaccine and just 18.1% of Delaware boys are vaccinated.

Source: https://www.healthydelaware. org/Individuals/Prevention/HPV-Vaccine

https://smhs.gwu.edu/cancercontroltap/ sites/cancercontroltap/files/Delaware.pdf

For more information see www.cdc.gov/vaccines/ www.kidshealth.org



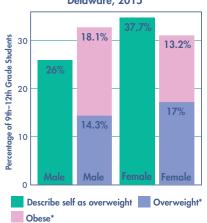
Weight status of Delaware children 2–17 based on Body Mass Index

Note: Body mass index (BMI) is a calculation that uses height and weight to estimate body fat. The KidsHealth BMI calculator also uses the child's age and calculates percentiles as well as BMI. It is available online at http://kidshealth.org/PageManager.jsp?dn=nemours&article_sel=22610&lic=437&cat_id=162

Source: Nemours Health & Prevention Services, Department of Policy, Evaluation and Research, 2014 Delaware Survey of Children's Health.

Individual Physique: Perception vs. Reality

Teens who describe themselves as slightly/very overweight compared to teens who are overweight or obese* Delaware, 2015



* Calculated body mass index from reported height and weight

Source: CDC Youth Risk Behavior Survey 2015, Center for Drug and Health Studies, University of Delaware mart states are those that pay attention to effective policies and programs that would get communities in good shape. Experts agree that being healthy and fit in adulthood is largely determined by communities that we live in as children. When schools serve nutritious foods and invest time in physical education, they become learning environments that shape strong minds and bodies. When parents don't have access to healthy food because they live in a neighborhood where access to fresh produce and other healthy foods is limited, this makes it almost impossible to offer healthy diets at home. Initiatives such as community gardens can help make healthy food available to everyone. Neighborhood amenities such as parks, recreation centers, sidewalks and libraries make it safer for children to engage in physical activity and serve as a vehicle for socializing, increased time outdoors and enhanced quality of life. Schools, parents, and communities statewide have the responsibility of promoting healthy lifestyles and encouraging positive habits to combat the crucial issue of childhood obesity.

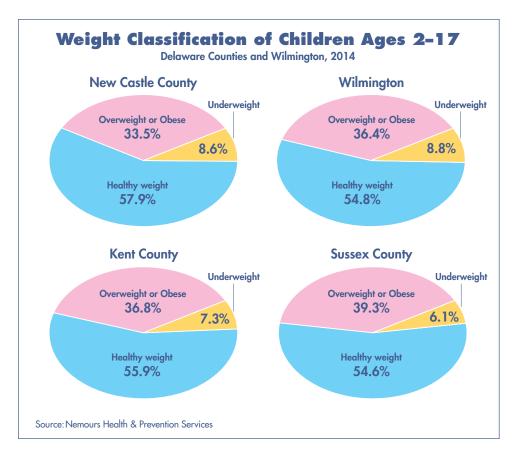


Did You Know?

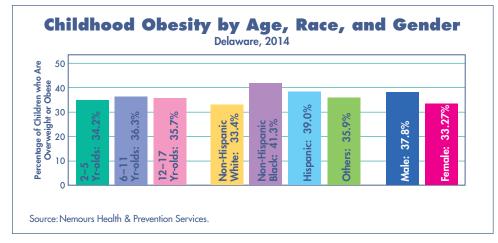
Compared to youth without disabilities, youth with disabilities were more likely to be overweight or obese (34.0% vs. 28.2%), and more likely to use harmful weight loss strategies such as

- fasting (17.8% vs. 8.3%),
- pills (8.0% vs. 4.1%),
- vomiting (7.0% vs. 3.1%),
- ate less (45.3% vs. 37.8%).

Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware







Did You Know?

The Delaware Survey of Children's Health (DSCH), sponsored by Nemours Children's Health System (Nemours) is one of the most comprehensive health surveillance instruments for Delaware children. This survey was developed by Nemours Health & Prevention Services (NHPS) to collect statewide, population-level data from parents of children birth through age 17. It provides valuable data on multiple aspects of children's health—including weight status (BMI), physical activity, healthy eating, health conditions, and children's family and neighborhood environments. The NHPS Datacenter (datacenter.nemours.org) makes the results from the survey easily accessible to anyone interested in making data-driven decisions to improve children's health.

Source: www.datacenter.nemours.org

For more information see www.letsmove.gov/ www.kidfitnesstv.com

For more information about the DSCH, please visit the NHPS Datacenter http://datacenter.nemours.org





Did You Know?

Compared to youth without disabilities, youth with disabilities were less likely to be physically active for at least one hour per day on previous seven days (17.6% vs. 26.5%).

Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware

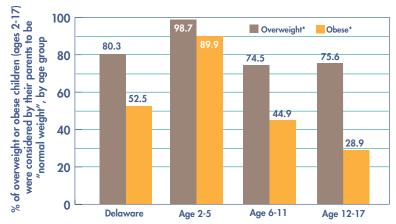
For more information about the DSCH, please visit the NHPS Datacenter

http://datacenter.nemours.org

Perception of Weight

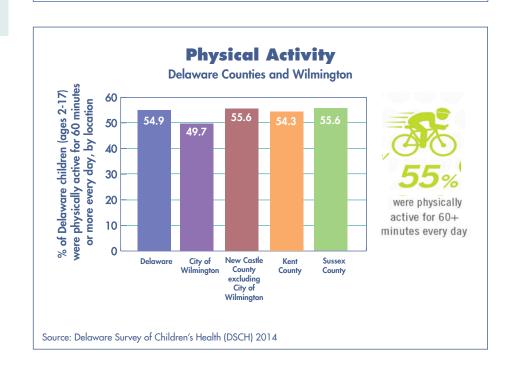
Delaware Counties and Wilmington

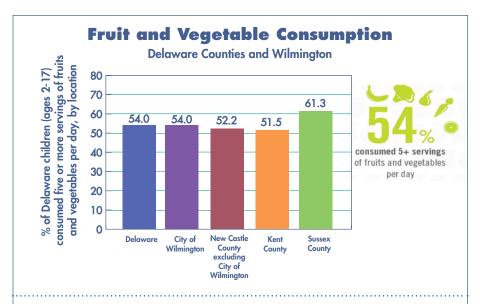




* Data show that parents' perceptions of their child's weight being normal are different for different age groups.

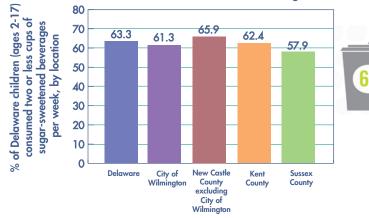
Source: Delaware Survey of Children's Health (DSCH) 2014

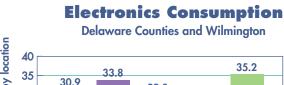


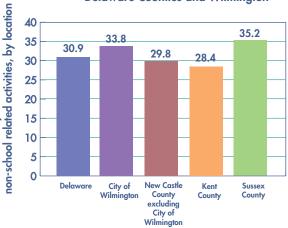


Sweetened Beverage Consumption

Delaware Counties and Wilmington









consumed 2 or less

sweetened beverages

per week

cups of sugar-

Source: Delaware Survey of Children's Health (DSCH) 2014

% of Delaware children (ages 2-17) spent two or less hours daily on electronic devices for



Did You Know?

Youth with disabilities were less likely to play on one or more sports teams in the past year (40.9% vs. 58.2%).

Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware

For more information about the DSCH, please visit the NHPS Datacenter

http://datacenter.nemours.org

Oral Health



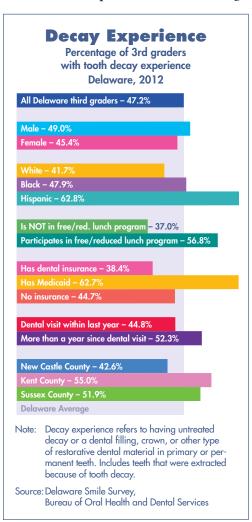
According to the American Dental Hygienists' Association (ADHA) your toothbrush should be replaced every two to three months, and after every illness such as the flu.

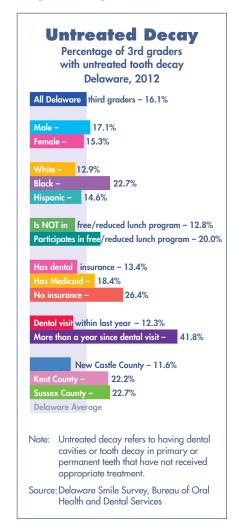
Did You Know?

Compared to children without special health care needs in Delaware, CSHCN in Delaware are less likely to have excellent/very good overall health status (71.8% vs. 87.6%) and oral health status (67.0% vs. 74.0%).

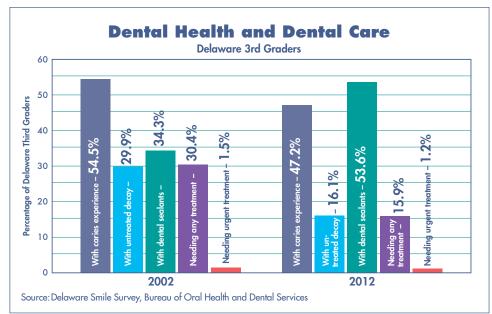
http://www1.udel.edu/cds/downloads/karalandscape.pdf

ral health is a critical component of a child's overall health and wellbeing, but many children nationwide do not receive adequate or comprehensive oral health care. While inadequate oral health is a widespread problem, dental disease is most likely to affect children from low-income communities, minority groups, or children with special health care needs. Strategies to help prevent oral health problems include increasing access to dental care services, expanding prevention education efforts and increasing the number of dental providers in underserved areas. In 2013, the Delaware Oral Health program conducted Delaware Smiles 2013, a statewide oral health survey of third grade children in Delaware's public schools. You can find resources on childhood oral health, as well as where to find a dentist by visiting Public Health's First Smile website. http://www.dhss.delaware.gov/dhss/dph/hsm/ohpfirstsmilede.html





Oral Health





Dental Sealants

Percentage of 3rd graders with dental sealants on their permanent teeth Delaware, 2012

All Delaware third graders – 53.6%

Is NOT in free/reduced lunch program – 51.0%

Participates in free/reduced lunch program – 57.1%

No insurance – 45.3%

Dental visit within last year - 57.2%

More than a year since dental visit - 26.2%

New Castle County – 54.5%

Delaware Average – 53.6%

Note: Dental sealants are plastic-like coatings that are applied to the chewing surfaces of back teeth. The applied sealant resin bonds into the grooves of teeth to form a protective physical barrier.

Source: Delaware Smile Survey, Bureau of Oral Health and Dental Services



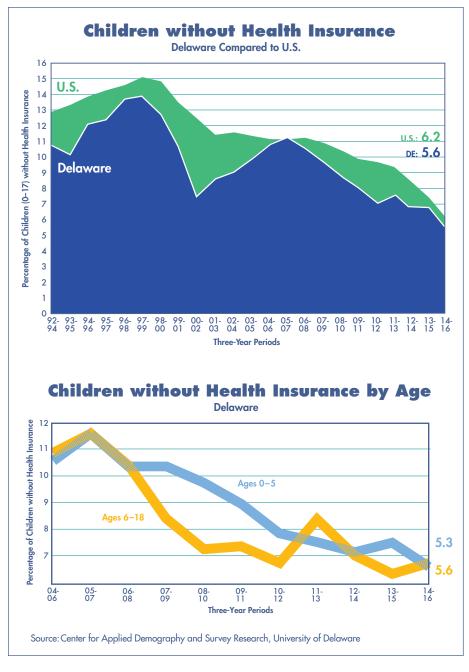
Children Without Health Insurance



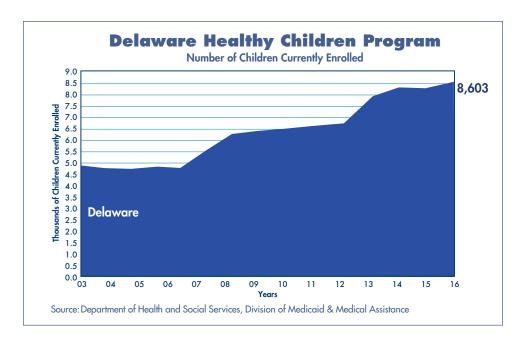
Approximately 74% of the respondents to the National Survey of Children with Special Health Care Needs (CSHCN) reported that no one discussed with them how to obtain or keep some type of health insurance coverage as their child becomes an adult. Additionally, more than one-fifth of families of CSHCN reported that they had paid \$1,000 or more in out-of-pocket medical costs for CSHCN (22.5%) and another one-fifth needed to cut back or stop working because of their child's health condition (21.6%).

 $Source: \ http://www1.udel.edu/cds/downloads/karalandscape.pdf$

t's a lot smarter to prevent a problem than to wait until it is a crisis. Health insurance plays a crucial role in children's health by making it possible for children to receive access to both preventative care and acute and chronic illness care. Improved access to effective health care means improvement to the health of children nationwide. Children with health insurance, whether public or private, are more likely than children without insurance to have a regular and accessible source of health care, yet a large number of children are without such insurance coverage. Medicaid and the State Children's Health Insurance Program (SCHIP) play a crucial role in providing coverage for uninsured youth; these programs provide coverage for more than one in four children. Solutions like these-that get everyone to participate in the health insurance system- make healthcare more efficient and affordable for us all.



Children Without Health Insurance

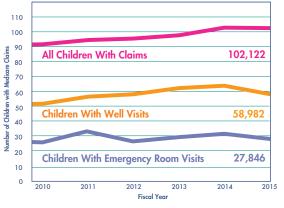




Medicaid/CHIP Claims Delaware Children with Medical Claims by Age, FY 2015 16-18 8.099 0-4 yrs. 34,056 10-15 yrs. 30,337 5-9 yrs. 29,630 Delaware Number of Children with Medicaid/ CHIP Medical Claims by County FY 2011-15 Number of Children in Thousands with Medicaid/CHIP Medical Claims 70 57,452 60 New Castle 50 40 19,429 30 Sussex 20 24,836 10 12 13 14 11 15 **Fiscal Years** Fiscal year is July 1 - June 30. Source: The Current Landscape for Disability and Health in Delaware 2015,

Center for Disabilities Studies, University of Delaware

Number of Children with Medicaid/CHIP Claims Delaware Children with Medical Claims by Age, FY 2010-15



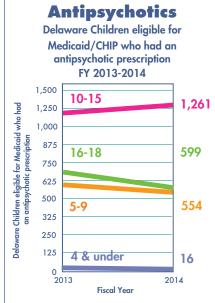
* 2015 presents preliminary numbers. Fiscal year is July 1 - June 30. Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware

Did You Know?

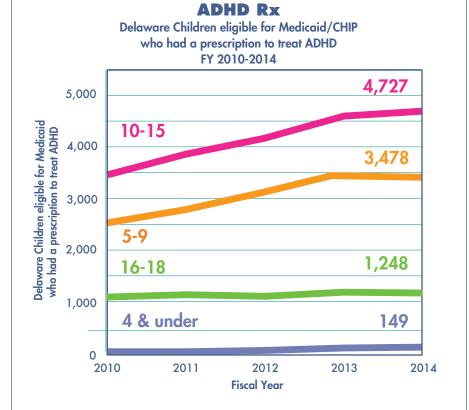
Delaware children with special health care needs (CSHCN) are more likely than other children without special needs to have health insurance and remain insured for all 12 months (92.6% vs. 88.9%), as well as more likely to have both medical and dental preventative visits in the past 12 months (82.7% vs. 68.4%).

Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware

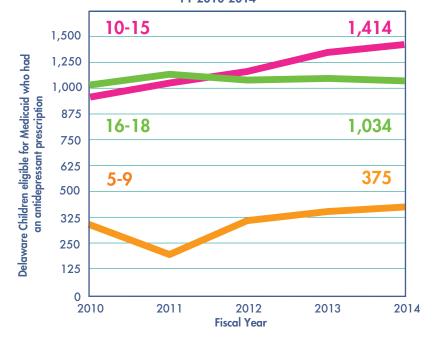
Medicaid Prescriptions



Source: Center for Community Research & Service, University of Delaware, 2017.
Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences. The National Drug Codes (NDC) associated with anti-psychotics (Table SSD-D, 2013-2014, Cerner Multum, Inc., Denver, CO: www.multum.com) were used with permission from the National Committee for Quality Assurance (NCQA). Prior to 2013, these NDC lists were incomplete.



Antidepressants Delaware Children eligible for Medicaid/CHIP who had an antidepressant prescription FY 2010-2014

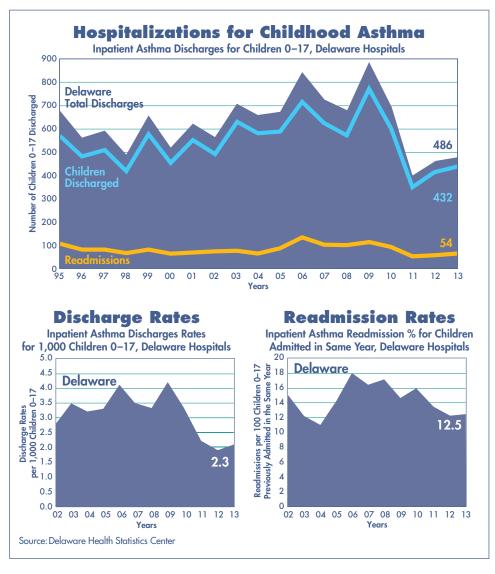


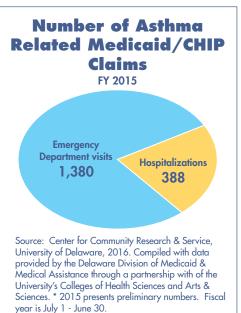
Source: Center for Community Research & Service, University of Delaware, 2017. Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences. The National Drug Codes (NDC) associated with the treatment of ADHD (Table ADD_A, 2009-2014, Cerner Multum, Inc, Denver, CO: www.multum. com) were used with permission from the National Committee for Quality Assurance (NCQA).

Childhood Asthma

sthma is a chronic inflammation of the airways with reversible episodes of obstruction, caused by an increased reaction of the airways to various stimuli. Asthma related breathing problems occur in episodes or attacks, but the underlying inflammation is continuous. While asthma can affect anyone of any age, asthma is the most common chronic illness affecting children and is more common among boys than it is among girls. The factors that may trigger asthma include: respiratory infections; colds; allergic reactions to allergens such as pollen, mold, animal dander, feathers, dust, food, and cockroaches; exposure to cold air or sudden temperature change; cigarette smoke (secondhand smoke); excitement or stress; and exercise. Environmental factors that might trigger an asthma attack include dampness and mold, cockroaches, and inadequate ventilation, which are more commonly found in poor urban settings. Children who live in these areas have a higher risk of asthma.

Many children with asthma miss out on school, sports, and other childhood activities. Asthma can be a life-threatening disease if not properly managed. It is important for family members to learn how to identify and avoid asthma triggers, recognize and prevent asthma attacks, understand medications, and help manage symptoms. With the proper treatment and care, most children with asthma can have active and healthy childhoods.





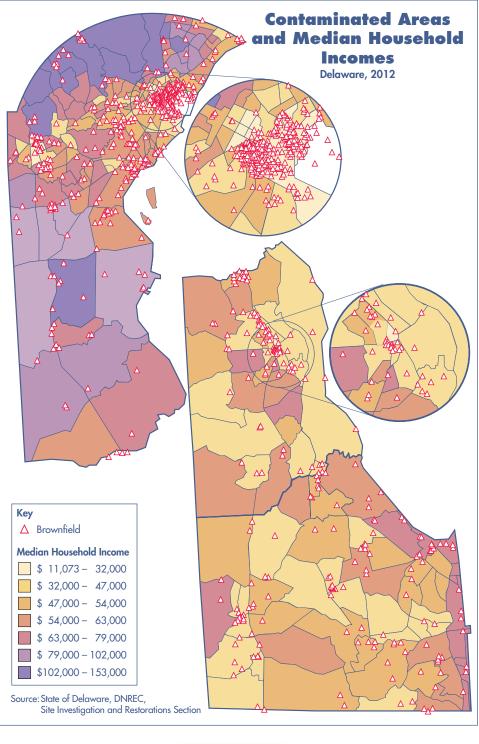
The Center for Community Research and Service produced an Asthma Brief which evaluates the Optimizing Outcomes for Delaware Children with Asthma project and can be found here:

https://www.sppa.udel.edu/ccrs/content-subsite/PublishingImages/ccrs/research-data/ Health%20Policy%20Research/recentpublications-presentations/briefs/Asthma%20 Brief%20Final%20December%202016.pdf

Brownsfields

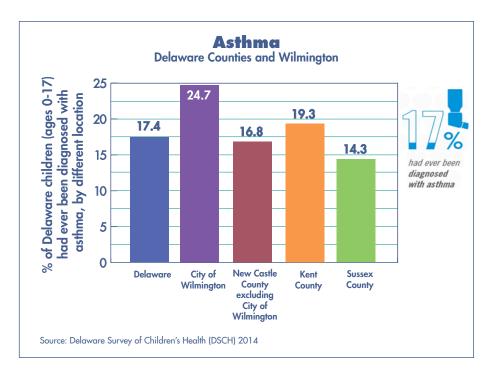
elawareans deserve healthy environments no matter where they live. The Department of Natural Resources and Environmental Control (DNREC) has certified more than 200 vacant, abandoned, or underutilized properties, called brownfields, in the State of Delaware. Because children's growing brains and bodies are more susceptible to toxins in the environment than adults', the presence of environmental hazards including brownfields can have a critical role in a child's educational, social, and health development. To protect all children, we need to improve the environmental health systems in all communities and give everyone the opportunity to live free from environmental threats.







Childhood Asthma





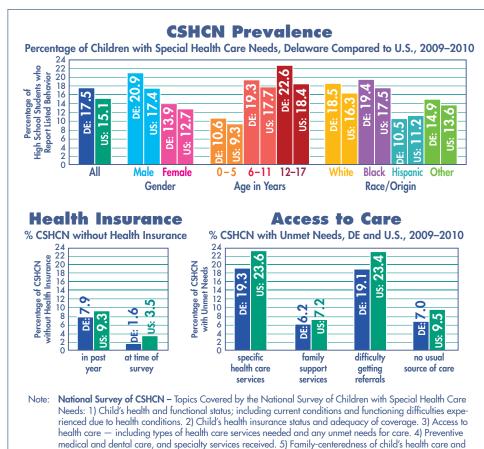


Children with Special Needs: Health Care



hildren across the country face unique challenges every day due to special health care needs. The federal Maternal and Child Health Bureau defines Children with Special Health Care Needs (CSHCN) as: "those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally." This definition is used to guide the development of family-centered, coordinated systems of care for children and families for children with special needs served by the state Title V block grants administered by the Maternal and Child Health Bureau.

All Children with Special Health Care Needs (CSHCN) experience at least one type of ongoing health condition that results in an increased need for health and related services. Across the list of 20 specific health issues asked about in the 2009/10 National Survey of Children with Special Health Care Needs (NS-CSHCN), the most common issues reported were experience of asthma and/or allergies, with nearly half of these children experiencing an additional health care problem from the list. Special health care needs in children are widespread and require extra attention care, and services.



care coordination. 6) Access to community-based services. 7) Transition to adulthood. 8) Impact of child's health on family. 9) Demographics of child and family, including age, sex, race/ethnicity, household income,

Source: Data Resource Center for Child and Adolescent Health, http://www.childhealthdata.org/browse/data-

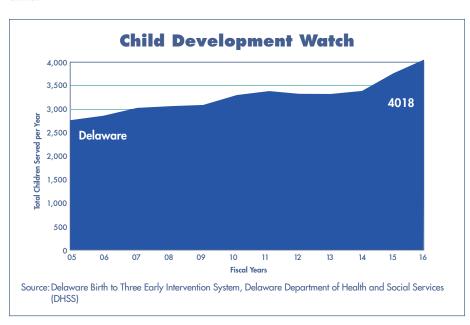
parental education, family structure, primary language spoken in the home

snapshots/cshcn-profiles?geo=&rpt=9



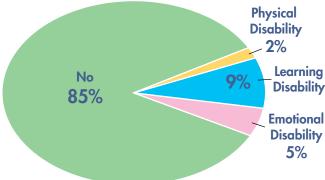
Children with Special Needs: Early Intervention

evelopmental problems affect children of all ages indiscriminately, and early intervention is key in mitigating existing developmental issues and preventing future problems from occurring. Early intervention programs are designed to improve the mental, verbal, social and emotional wellbeing of children who already have developmental disabilities, or who are vulnerable due to biological or environmental factors. These programs enhance a child's potential and development, while providing necessary support and assistance to their family. Early intervention has been proven to be cost-effective, to improve the functioning of affected families, and to increase developmental and educational gains for the child.





Identified with a Disability Delaware High School Students Grades 9-12 that say they have been identified by a doctor or health care professional as having difficulty concentrating, remembering, making decisions, or doing things because of a physical, learning, or emotional disability. 2015

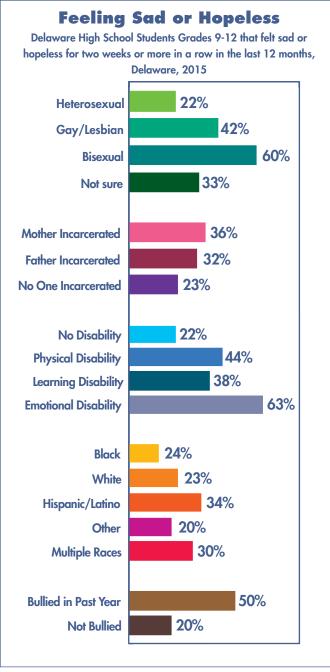


Mental Health

hildren's mental health affects how they socialize, how they learn and how well they meet their potential. Mental health is important at every stage in life. Certain kinds of stress in a child's environment can lead to mental health problems. Toxic stress in early childhood is caused by experiences such as extreme poverty, abuse and chronic or severe maternal depression, all of which can disrupt the developing brain, particularly when children lack supports to protect against these harmful experiences. So just like we need to limit the negative substances in our environments to avoid harm, we need to eliminate stressors in children's environments to avoid the toxic stress that will affect their mental health. Children with strong mental health are equipped to develop important skills and capacities, beginning at a very young age.

The mission of the Delaware Division of Prevention and Behavioral Health Services (DPBHS) is to develop and support family-driven, youth-guided, trauma-informed prevention and behavioral health care. DPBHS can answer questions about how to access mental health services (302-633-2571 or 1-800-722-7710).



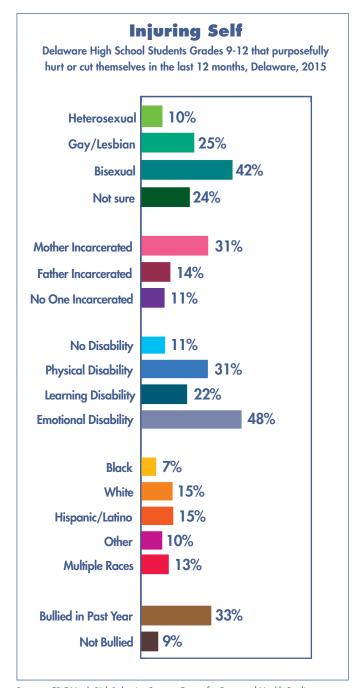


Source: CDC Youth Risk Behavior Survey, Center for Drug and Health Studies, University of Delaware

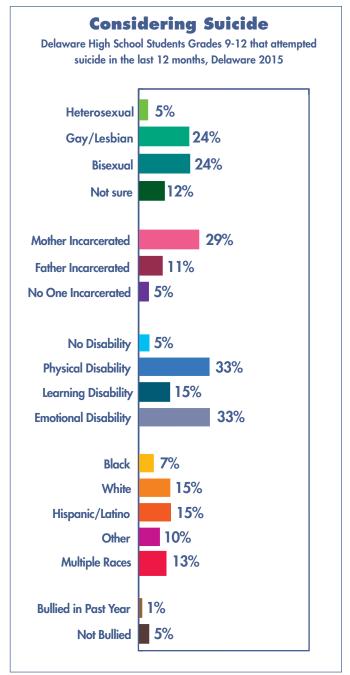


Mental health is a major concern among American children and teens. Nationally representative data has shown that about half of Americans experience a mental health concern at some point in their life, with the majority of these issues originating in childhood.

Mental Health





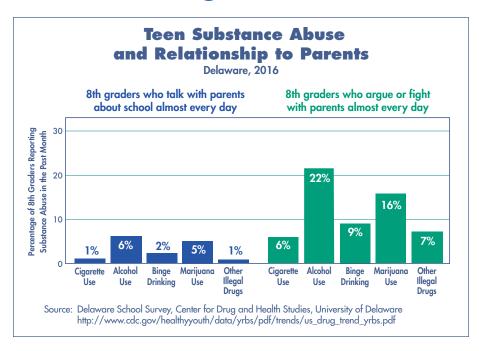


Source: CDC Youth Risk Behavior Survey, Center for Drug and Health Studies, University of Delaware



he health and well-being of adolescents and teenagers in communities nationwide is endangered by alcohol and drug use. Common social and environmental risk factors such as poor education, family-related stress, and exposure to drugs and drugabusing peers have been shown to contribute significantly to use of drugs and alcohol. Periods of transition, and the new challenges and environments that often come with these transitional times in young people's lives, are considered especially high risk periods for drug use. Young adolescents are likely to encounter drugs for the first time when they advance from middle school to high school, a transition that exposes them to a new environment, a variety of new academic and social situations, and various social, emotional and educational challenges. This new environment can lead adolescents to experience a greater availability of drugs, an increase in exposure to drug abusers, and more social activities involving drugs. Early drug abuse often begins with substances including tobacco, alcohol, inhalants, marijuana, in addition to prescription drugs such as sleeping pills and anti-anxiety medications. Drug abuse that continues into later adolescence typically escalates into the use of other drugs along with the continued use of tobacco and alcohol.

Every young person in danger of drug abuse has different needs, and drug abuse prevention strategies should be targeted to accommodate the specific needs of the individuals involved. Strategies may focus on psychological and emotional support, drug and alcohol education initiatives, or comprehensive intervention.



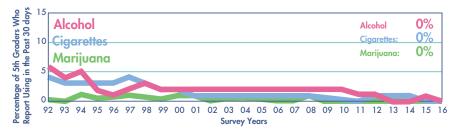




20.4% of Delaware high school students have ridden in a vehicle with a driver who was under the influence of alcohol

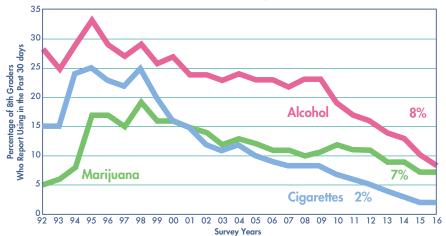
Trends in Cigarette, Alcohol, and Marijuana Use

Delaware 5th Graders, 2016



Trends in Cigarette, Alcohol, and Marijuana Use

Delaware 8th Graders, 2016



Trends in Cigarette, Alcohol, and Marijuana Use



Source: Delaware School Survey, Center for Drug and Health Studies, University of Delaware http://www.cdc.gov/healthyyouth/data/yrbs/pdf/trends/us_drug_trend_yrbs.pdf



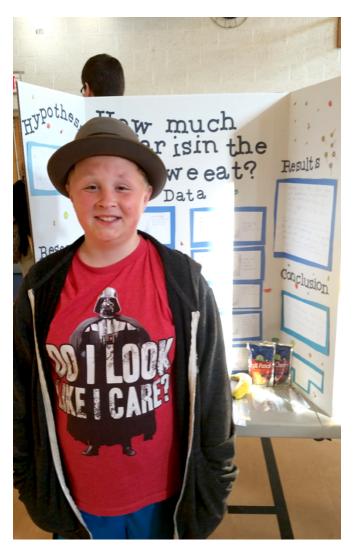
Compared to youth without disabilities, youth with disabilities were more likely to be current smokers (28.6% vs. 16.1%), more likely to engage in alcohol and other drug use behaviors during their lifetime, including:

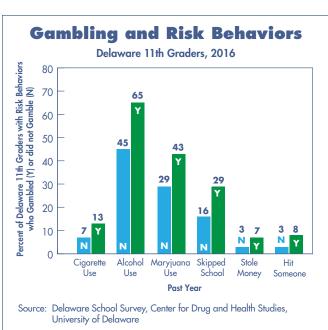
- ever drank alcohol (80.7% vs.70.1%),
- ever used marijuana(57.2% vs. 43.5%),
- ever used cocaine(10.4% vs. 4.2%).
- ever used heroin(7.6% vs. 2.1%),

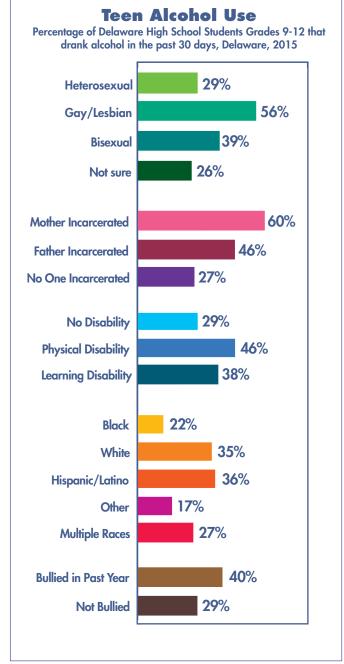
Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware







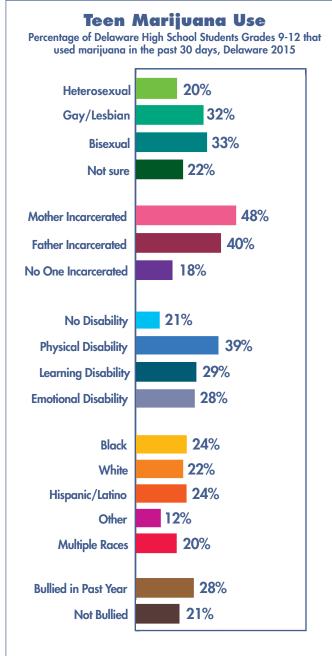




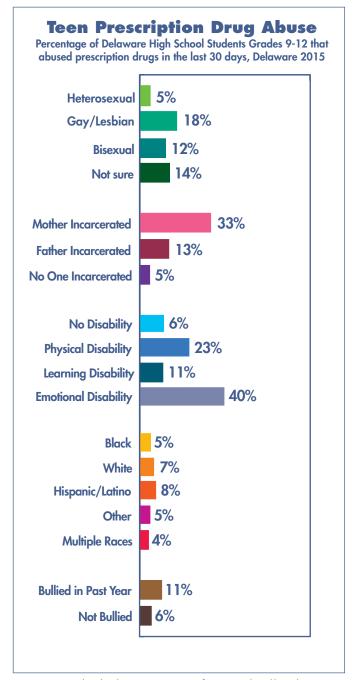
Source: CDC Youth Risk Behavior Survey, Center for Drug and Helath Studies, University of Delaware











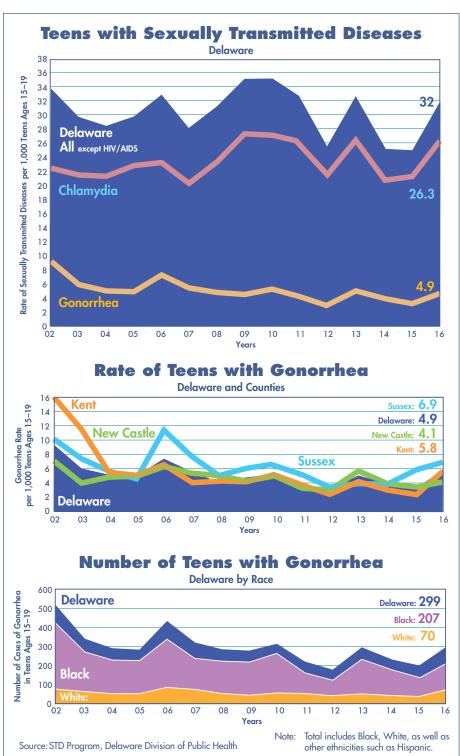
CDC Youth Risk Behavior Survey, Center for Drug and Health Studies, University of Delaware



Sexually Transmitted Diseases (STDs)

cexually transmitted diseases (STDs) are a widespread issue among youth.An estimated 19 million new infections occur each year, and almost half of them are occur in adolescents and young people. While some infections display signs, most STDs can be "silent", displaying no signs or symptoms, and can be diagnosed only through testing. Despite the common nature of STDs, testing for these infections is not widespread, leaving many infections undetected and undiagnosed. The social stigma, lack of public awareness, and inadequate education about STDs can severely inhibit discussions about risks, symptoms, transmission and the need for regular testing. As a result of the extensive number of STD cases and lack of public awareness, STDs remain a major public health challenge.

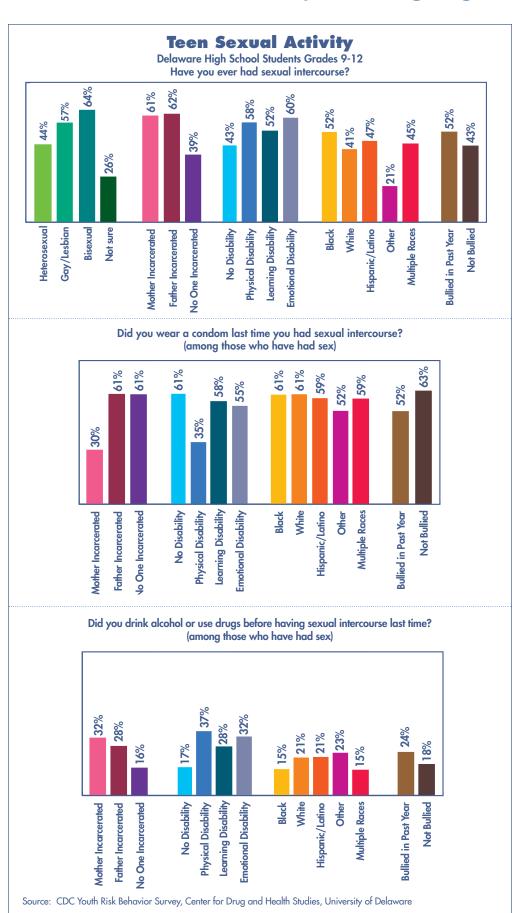


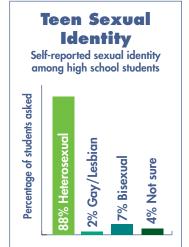




For more information see
www.thebody.com
www.plannedparenthood.org
www.cdc.gov/hiv/pubs/facts.htm

Sexual activity among high school students



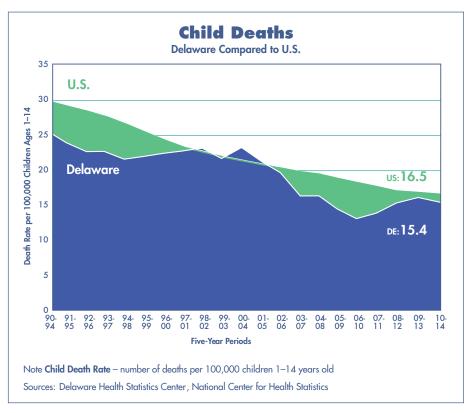


April is STD Awareness month, during which the Center for Disease Control and Prevention and other organizations focus on spreading awareness of the facts, and encouraging individuals to get tested.

Child Deaths, Children 1-14



orldwide, accidents kill one million children each year and injure or permanently disable many more. In the United States, injury is a leading cause of death for children, accounting for over one third of all deaths among children ages one to four, and over half of deaths among teens ages 15 to 19. Child death is a significant issue facing the U.S., as death rates among low-income children continue to rise.

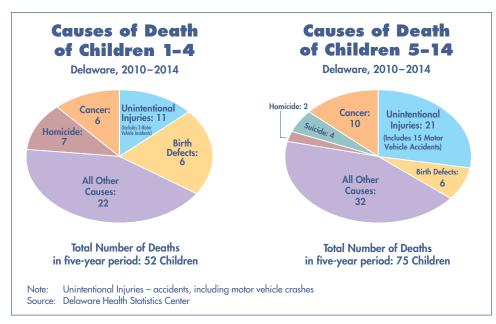


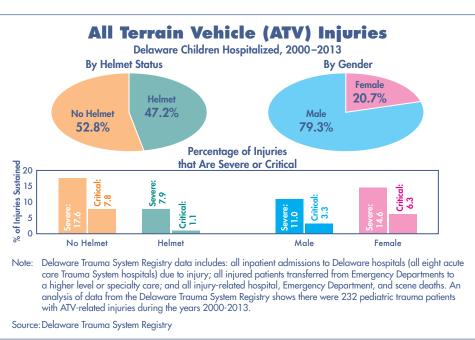
A concussion is a brain injury that causes temporary changes in the way the brain works. You might think they happen when someone is knocked unconscious while playing sports. But concussions can happen with any head injury, often without a loss of consciousness.

Concussions in children can happen at any age — it's just part of being an active kid. It might be a fall, a car crash, or a sports injury. Concussions in children require medical attention, lots of rest and a slow, careful return to daily routines under a doctor's care.

https://www.nemours.org/service/medical/concussion.html?tab=about&kidshealth=concussions

Child Deaths, Children 1-14





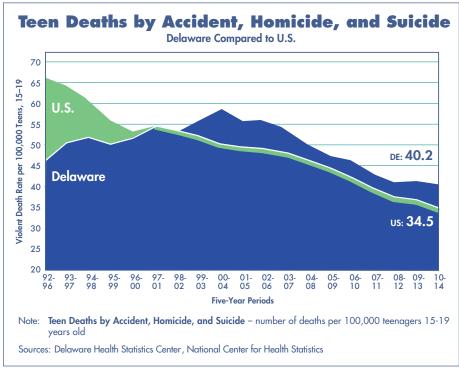


More children ages 5 to 14 are seen in emergency rooms for biking-related injuries than for injuries related to any other sport. Helmets are the single most effective safety precaution to reduce head injury and fatality from bicycle crashes, yet less than half of children ages 14 and under consistently wear a helmet.

For more information see www.kidshealth.org www.cdc.gov/ncipc/duip/duip.htm

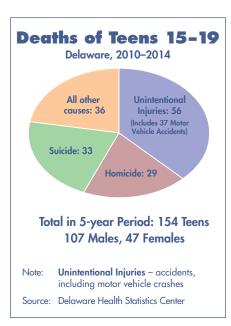


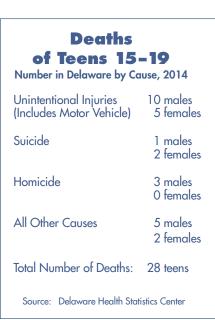
A schildren age, they encounter new environments and challenges that pose new risks to their safety. Teenagers are significantly more likely to die from injuries sustained in motor vehicle accidents and firearms than children of younger ages. Teenagers are a vulnerable population who encounter a variety of risk factors to their well-being.



Motor vehicle accidents are the leading cause of death among those ages 12-19, representing over one-third of all deaths to teenagers.

http://www.cdc.gov/nchs/data/databriefs/db37.pdf

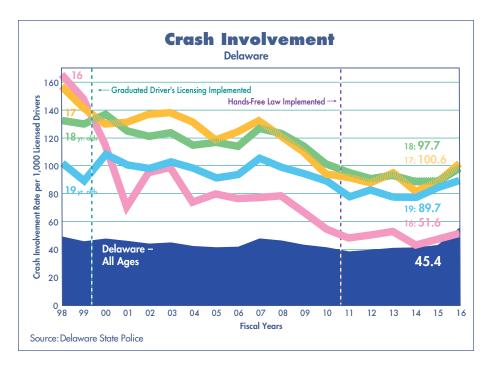


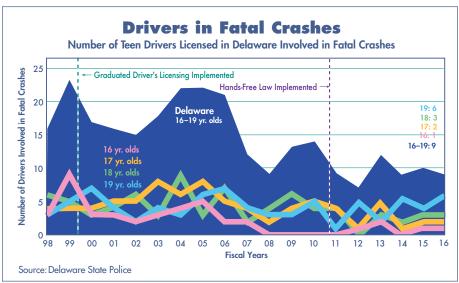


Impact of the Graduated Driver's License Program on 16-Year-Old Driver Crashes

Since enacting the Graduated Driver's Licensing Program on July 1, 1999, Delaware has experienced a significant decrease in the number of motor vehicle crashes involving teens ages 16 to 19. Delaware's GDL program includes all three levels recommended by the National Conference of State Legislatures, Energy and Transportation Program. Level 1 involves obtaining a learner's permit and requires supervised driving at all times for six months. Level 2, reached six months after the issuance of a Level 1 learner's permit, involves limited unsupervised driving and passenger restrictions. After twelve months of driving experience with a learner's permit, a Level 3 license, full licensure with unrestricted privileges, can be obtained.

Source: Delaware Division of Motor Vehicles. www.dmv.de.gov/services/driver_services/drivers_license/dr_lic_grad_dl.shtml





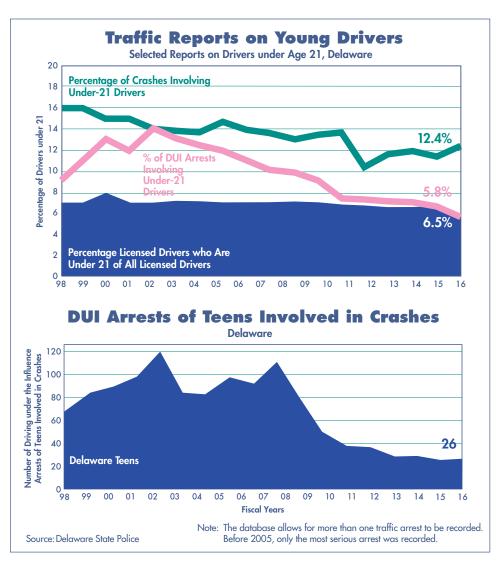


Distracted driving is a leading factor in most car crashes. Over 40% of Delaware high school students reported that they had texted or emailed while operating a car or other motor vehicle.

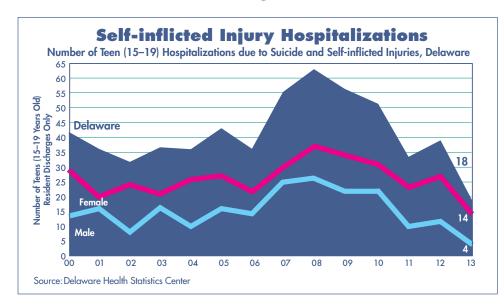
https://www.childtrends. org/?indicators=distracted-driving

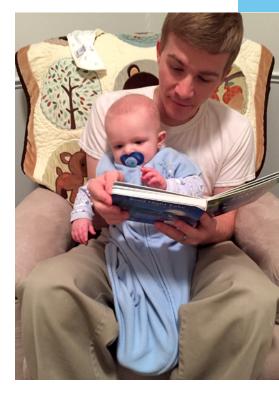
"Parents are the Key" is a campaign from the CDC to help parents, pediatricians and communities help teenage drivers stay safe on the road. The site gives parents and professionals tools and resources to educate teen drivers on driving safety, and offers a downloadable parent and teen driving agreement.

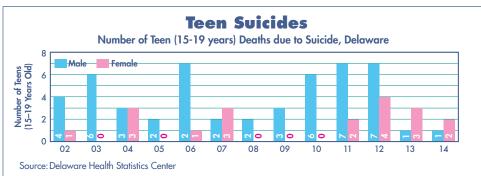
Visit http://www.cdc.gov/parentsarethekey/ for more information.

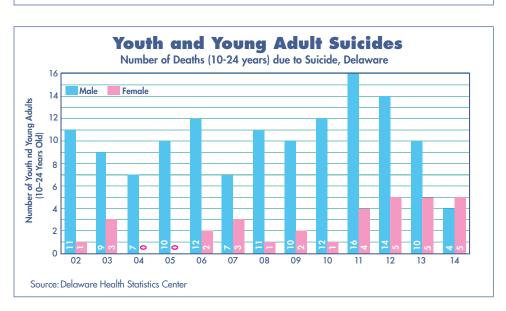












Suicide among youth is a widespread problem. It is the third leading cause of death for people between the ages of 10 and 24, and results in roughly 4,600 lives lost annually in the U.S.

Source: http://www.cdc.gov/violenceprevention/ pub/youth_suicide.html

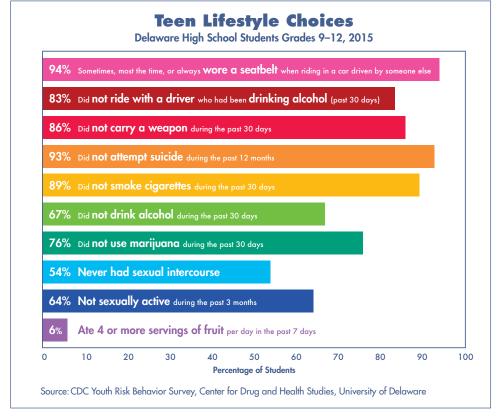


For more information see www.iihs.org www.talkingwithkids.org

Health and Health Behavior

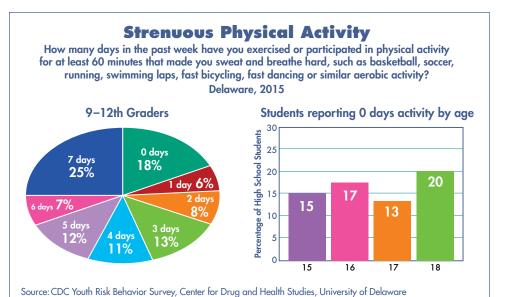


cince 1995, the Center for Drug and Health Studies at the University of Delaware has administered an annual survey to public school students about alcohol, tobacco, and drug use. The Delaware School Survey is an annual survey of 5th, 8th, and 11th grade public school students in Delaware. The surveys are administered at the public schools in Delaware. This study is the continuation of a survey that was first administered to Delaware students in Spring, 1989. Since 2004, the Delaware School Survey has been jointly sponsored by the Delaware Legislature through the Delaware Health Fund and by support from the Division of Substance Abuse and Mental Health through federal Prevention Block Grant funding. It has become a valuable tool in assessing trends of drug use among Delaware students. Over time, the survey has been adapted to include questions on school behavior, health habits, and parental interaction. In recent years, the study has shown an increased interest in safety, parental involvement, educational needs, and healthy lifestyles. The Center for Drug and Health Studies has provided KIDS COUNT in Delaware with a wealth of information detailing the issues which are included in each section as Delaware Children Speak. Read more about the Center for Drug and Health Studies at www.cdhs.udel.edu



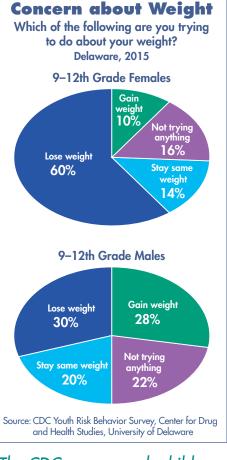
For more information see
www.udel.edu/delawaredata/
www.cdc.gov/HealthyYouth/yrbs/

Health and Health Behavior



Weight Control Step taken in the last 30 days to lose weight or keep from gaining weight Delaware, 2013 **Exercised** All: 61.4% Males: 59.3% Females: 63.5% Ate less food, fewer calories or low-fat food Males: Females: 48.1% Went without eating for 24 hours or more Males: Females: 14.4% Took diet pills, powders, or liquids without doctor 3.6% Vomited or took laxatives 4.3% 2.9% 5.5% Source: CDC Youth Risk Behavior Survey, Center for

Drug and Health Studies, University of Delaware



The CDC recommends children ages 6 to 17 do at least 60 minutes of physical activity a day.



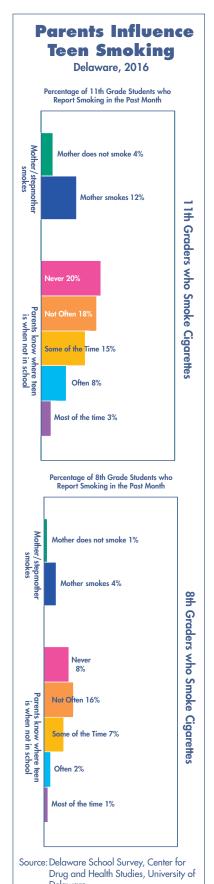
Healthy Fitness Zones (HFZ)*

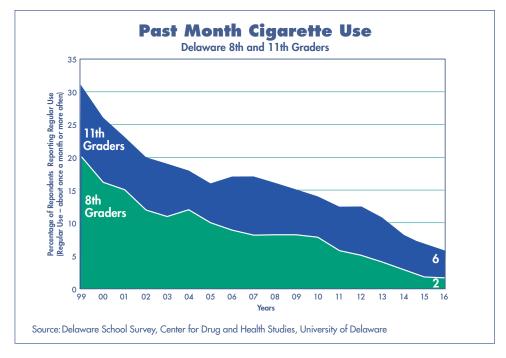


A 'Fit' student will score within the (HFZ)* for all the following five tests:

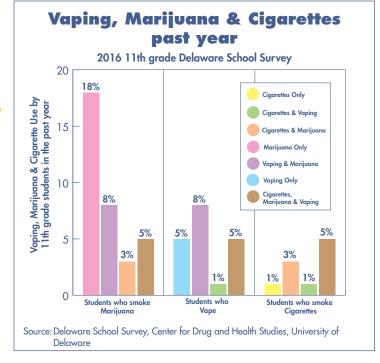
- 1) PACER (Aerobic capacity)
- 2) Curl-up (Abdominal strength and endurance)
- 3) Trunk Lift (Trunk extensor strength)
- 4) Push-up (Upper body strength)
- 5) Back Saver Sit and Reach (Flexibility)

Health and Health Behavior









Did You Know?

EVPs, also known as electronic nicotine delivery systems, include electronic cigarettes (e-cigarettes), electronic cigars, electronic pipes, vape pipes or pens, and electronic hookahs or hookah pens. EVPs are handheld devices that provide an aerosol that typically includes nicotine, additives, and other harmful and potentially harmful substances that are inhaled by the user. Data from the National Youth Tobacco Survey indicate that the percentage of US high school students who reported using an e-cigarette in the past 30 days increased from 1.5% to 16.0% during 2011-2015.

 $Source: http://pediatrics.aappublications.org/content/139/2/e20162921?utm_source=highwire\&utm_source=hig$ medium=email&utm_campaign=Pediatrics_etoc

Health and Health Behavior

Youth Cigarette Use

8th and 11th Graders, Delaware, 2016

Of all students

5% Smoked ever

4% Smoked in the past year

2% Smoked in the past month

15% Smoked ever

10% Smoked in the past year

6% Smoked in the past month

Of students who report smoking in the past month, # of cigarettes smoked per day

8% Smoke no cigarettes per day

33% Smoke less than one cigarette per day

47% Smoke 1-5 cigarettes per day

3% Smoke 1/2 pack of cigarettes per day

8% Smoke 1 or more packs of cigarettes per day

3% Smoke no cigarettes per day
28% Smoke less than one cigaret
53% Smoke 1–5 cigarettes per de

28% Smoke less than one cigarette per day

53% Smoke 1-5 cigarettes per day

13% Smoke 1/2 pack of cigarettes per day

4% Smoke 1 or more packs of cigarettes per day

Of students who ever smoke, where they get cigarettes

54% Friends

8# 8

1% Siblings/cousins

6% Parents with knowing

21% Parents without knowing

11% Other adults with knowing

16% Other adults without knowing

NA Vending machine

14% Store

61% Friends

19% Siblings/cousins

17% Parents with knowing

10% Parents without knowing

26% Other adults with knowing

7% Other adults without knowing

NA Vending machine

40% Store

Source: Delaware School Survey, Center for Drug and Health Studies, University of Delaware



There is a range of potential impacts, including risks and possible benefits, of EVPs on patterns of use of cigarettes and other combustible tobacco products among adults. However, among youth, any form of tobacco use, including EVPs, is unsafe. EVPs typically contain nicotine; nicotine exposure during adolescence can cause addiction, might harm brain development, and could lead to sustained tobacco product use. Furthermore, longitudinal studies suggest that youth who use EVPs are more likely to subsequently initiate cigarette smoking.

Source: http://pediatrics.aappublications.org/content/139/2/e20162921?utm_ source=highwire&utm_medium=email&utm_ campaign=Pediatrics_etoc

> For more information see www.udel.edu/cdas/ http://childnutrition.doe.k12.de.us/

Health and Health Behavior



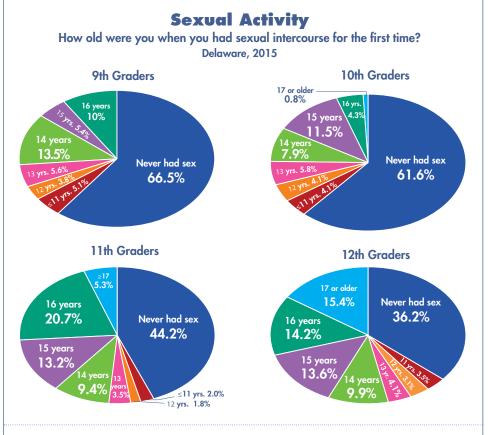
Did You Know?

Youth with disabilities were more likely than youth without disabilities to report having ever having been forced to have sex (20.6% vs. 5.8%].

Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware

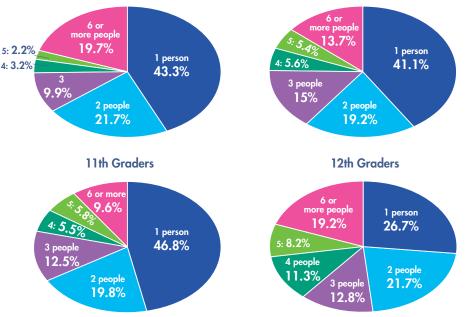


For more information see	
Sexually Transmitted Diseases	50
Births to Teens	. 92



Of those who are sexually active, with how many people have you had sexual intercourse? Delaware, 2015 10th Graders 9th Graders

Sexual Activity



Note: All students did not answer every question, causing percentages to vary Source: CDC Youth Risk Behavior Survey, Center for Drug and Health Studies, University of Delaware



The first five years of a child's life are an important time for growth and development, and lay out the foundations for language, academic ability, habits and socioemotional development. Research shows that access to high quality early care and education programs help young children grow up ready to succeed in school and life. However, there are large gaps in the quality of early care and childhood programs, and not all

children receive the maximum benefits from their program.

When we invent and replicate high quality programs for children and youth, we can solve these gaps in early childhood development and show significant long-term improvements for children. Investing in a system of high quality early care and education programs will benefit both young children and society. Early

investments reap dividends as child development translates into economic development later on.

In K-12, there is a race gap between white and nonwhite test scores, literacy rates, and graduation rates. These measures are good determinants of future success, and with an increasingly diverse population, addressing this gap will be key to ensuring the stability of our future workforce.

f our society is to prosper in the future, we need to make sure that all children have the opportunity to develop intellectually, socially and emotionally. The first five years of a child's life constitute a critical time in development, and lay the foundations for language, academic ability, habits, and socio-emotional development. Research has shown that access to high quality early care and childhood programs contribute to successful outcomes in young children, however there are large gaps in the quality of early care and childhood programs. Participating in a high caliber program decreases the likelihood of negative issues such as behavioral problems, delinquency, crime, smoking, and drug use later in life, and increases future employment, earning potential, and self-sufficiency. A child with a solid foundation becomes part of a solid community and contributes to our society.





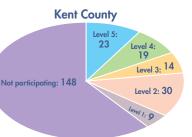
Delaware Stars for Early Success – Delaware Stars for Early Success is a product of the University of Delaware's Delaware Institute for Excellence in Early Education.

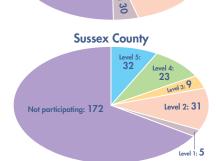


Delaware's Stars for Early Success

Delaware and Counties, January 2016







New Castle County

Level 5:

Level 2: 86

"Starting with Stars"

Level 1 - Programs at this first level of participation in Delaware Stars are in good standing with the Office of Child Care Licensing and are working on required steps for orientation.

Star Level 2 – Programs at Star Level 2 have begun their active pursuit of continuous quality improvement for their early care and education or school age program. Programs have completed all components required in "Starting with Stars" and are implementing a Quality Improvement Plan linked to the Delaware Stars for Early Success Standards.

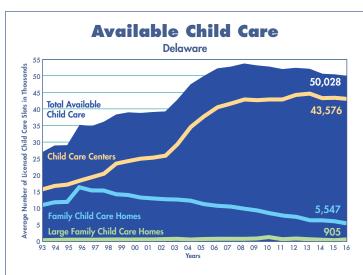
Star Level 3 – To reach a Star Level 3, a program must achieve a minimum of a 3.4 on each of the

ERS assessments for their program and earn at least 40 quality points through their verification of quality standards.

Star Level 4 – To reach a Star Level 4, a program must achieve a minimum of a 4.4 on each of the ERS assessments for their program and earn at least 60 quality points through the verification of quality standards

Star Level 5 – The highest level of achievement for programs in Delaware Stars. To reach a Star Level 5, a program must achieve a minimum of a 5.4 on each of the ERS assessments for their program and earn at least 80 quality points through the verification of quality standards.

Source: The Delaware Institute for Excellence in Early Childhood



Notes: Data for 2003 and after reflects the addition of child care centers providing part time care

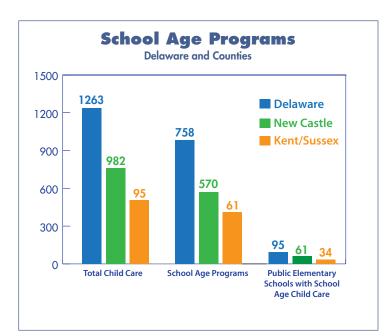
Available Child Care Capacity - the maximum possible slots within a licensed center which follows state guidelines for minimum staff/child ratios and maximum group sizes for each age group. Capacity does not necessarily reflect actual enrollment.

Child Care Center - 13 or more children. Increase in 2003 and 2004 reflects the addition of child care centers providing part time care.

Family Child Care Homes – 1 person caring for no more than 6 children.

Large Family Child Care Homes – 2 people caring for 7–12 children.

Source: Delaware Department of Services for Children, Youth and Their Families



hen we create and replicate high quality programs for children and youth, we can solve problems in early childhood development and show significant long-term improvements for children. The first five years of a child's life are an important time for growth and development, and lay out the foundations for language, academic ability, habits and socioemotional development. Research shows that access to high quality early care and education programs help young children grow up ready to succeed in school and life. However, there are large gaps in the quality of early care and childhood programs, and not all children receive the maximum benefits from their program. Participating in quality programs decreases the likelihood of issues such as behavioral problems, delinquency, crime, smoking, and drug use later in life. Furthermore, quality early care and childhood programs are shown to lead to positive outcomes such as an increase in employment, earning potential and self-sufficiency. Investing in a system of high quality early care and education programs will benefit both young children and society. Early investments reap dividends as child development translates into economic development later on.





Need for Child Care

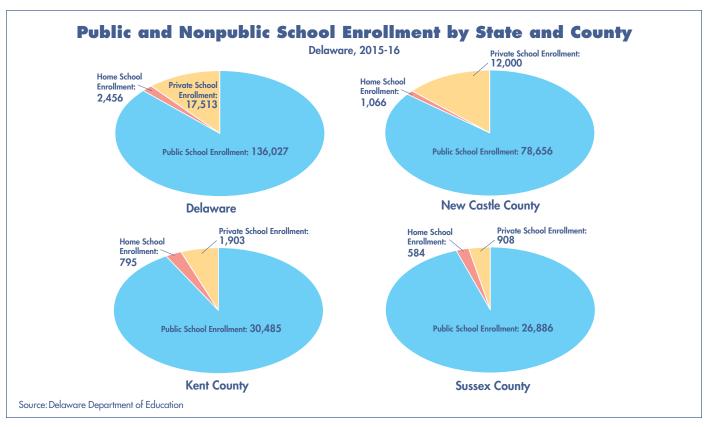
Delaware, 2016

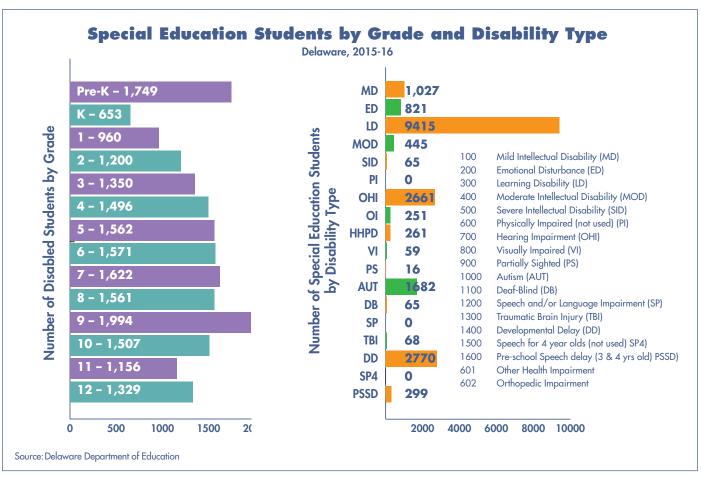
Population	Delaware	United States
Total residents	935,614	319,857,056
Children age birth to 4 years	56,010	19,757,997
Children age birth to 4 years		
living in poverty	11,278	4,658,187
Children age 5 to 11	79,978	28,761,402
Total families with children	89,738	33,106,587
Single parent families	33,333	10,993,697
Families in poverty	15,160	6,603,926

Children under age 6 potentially in need of child care	Delaware	United States
Children in two-parent families, both parents in labor force	25,004	8,441,764
Children in single-parent families, parent in labor force	21,700	6,360,521
Total children under age 6 potentially needing child care	46,704	14,802,385

Number of Working Mothers	Delaware	United States
With infants under one year	8,148	2,435,563
With any children under age 6	29,838	9,721,156
With children under age 6 only	16,437	5,422,464
With both children under age 6 AN	D	
children age 6 to 17	13,401	4,298,692
Married working mothers	42,716	15,306,983
Single working mothers	21,500	6,749,078

Source: http://childcareaware.org/wp-content/uploads/2016/08/Delaware.pdf





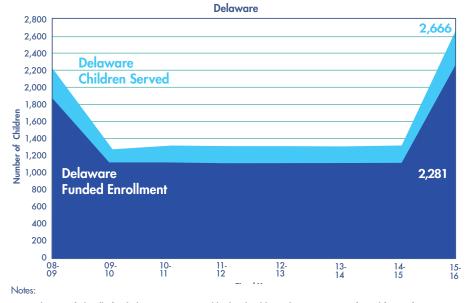
Head Start



The Head Start program provides comprehensive child development services to economically disadvantaged children and families, with a special focus on helping preschoolers develop the early reading and math skills they need to be successful in their future academic careers. The range of services offered are designed to be responsive to the developmental, ethnic, cultural, and linguistic experience for children and their families.

Head Start and partnering organizations promote school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services. Head Start focuses on the child's overall development, and a hallmark of this program is its emphasis on engaging parents in the many activities that support their child development.

State Funded Pre-K



- Head Start federally funded program operated by local public and private non-profit and for-profit agencies
 to provide comprehensive child development services to children who are at or below the poverty level.
 Special focus is on helping preschoolers from 3 to school entry develop early reading and math skills. The
 number of programs has decreased from 4 in 2007 to 2 in 2011.
- 2. The Head Start program is permitted to serve up to 10% of their children who are above the poverty threshold to meet mandates to provide services to children with disabilities.
- 3. Funded Enrollment is the funded slots. Number of Children Served is the cumulative number of children that filled funded slots throughout the year. Number of Children Served exceeds the Fund Enrollment because some children leave the program during the year and other children re-fill their slots.
- 4. There was a large increase in funded enrollment and number of children served due to the corporate headquarters of one program residing in another state before 2016.

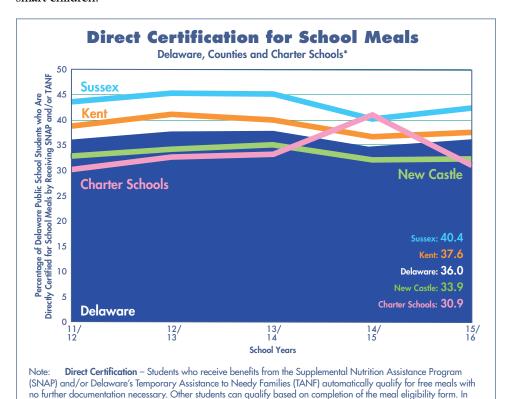
Source: Delaware Department of Education



For more information see
www.afterschoolalliance.org
www.afterschool.gov
www.childcareaware.org
www.familiesandwork.org
www.nncc.org/states/de.html

School Meal Programs

healthy diet is essential to the daily function for all people, especially the academic achievement of young people. For this reason, nutritious meals are now considered an integral part of a good education. When children are hungry, they cannot learn or grow at their highest potential. The National School Lunch Program (NLSP) is a federally assisted meal program that operates in public and nonprofit private schools and residential child care institutions to provide nutritionally balanced, low-cost or free lunches to children each school day. In the 2014/15 school year, a new lunch option was made available to Delaware schools participating in the National School Lunch and School Breakfast Programs called the Community Eligibility Provision (CEP). The CEP was enacted as part of the Healthy, Hunger-Free Kids Act 2010 and provides universal meal service to students in school districts with at least 40 percentage of students who are directly certified for free meals from July 1 - April 1. Programs like this- that support child development by ensuring that all children are well nourished- are a critical component in raising healthy, strong and smart children.







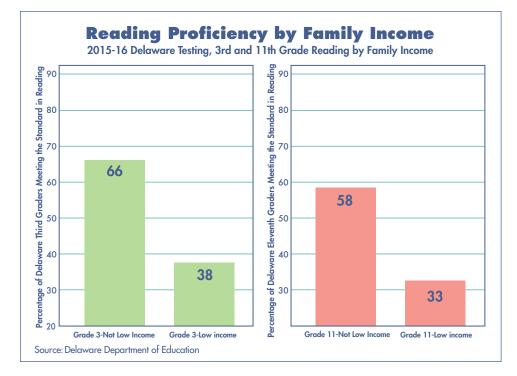
CEP schools, the basis for reimbursement is Direct Certification x 1.6, but all students receive free meals. Source: Delaware Department of Education



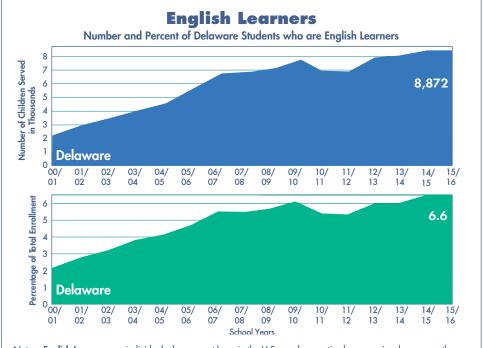
We need to be sure that future leaders have the skills required to tackle the problems of tomorrow. Future success in life is directly related to a person's breadth of knowledge and ability to think, learn, and communicate. Education plays a primary role in equipping young people with the necessary skills, knowledge, and experiences for achievement. Students have to know how to use information the way cooks use ingredients. This involves selecting, evaluating and combining the ingredients in a hands-on, exploratory way. School testing programs, such as math and reading assessments, are measures of a student's academic achievement. Just as we need many different gauges, windows and mirrors as drivers, education needs a dashboard approach to assessment to provide multiple ways of monitoring and improving.

Reading Proficiency 2015-16 Smarter Balanced Assessment Results 80 Percentage Meeting the Standard 60 54 54 **52** 30 20 Grade 3 Grade 5 Grade 8 Grade 11 **Math Proficiency** 2015-16 Smarter Balanced Assessment Results 80 70 Percentage Meeting the Standard 60 55 40 42 38 30 31 20 Grade 3 Grade 11 Grade 5 Grade 8 Source: Delaware Department of Education

In the 2014-15 school year, Delaware's assessment program was renamed the Delaware System of Student Assessments (DeSSA). DeSSA assessments include Smarter English Language Arts/Literacy (ELA) and Mathematics assessments. The Smarter assessments are designed to measure the progress of Delaware students in ELA/Literacy and Mathematics standards in grades 3-8, and 11. Beginning in the 2015-16 year, the SAT is the 11th grade accountability measure.





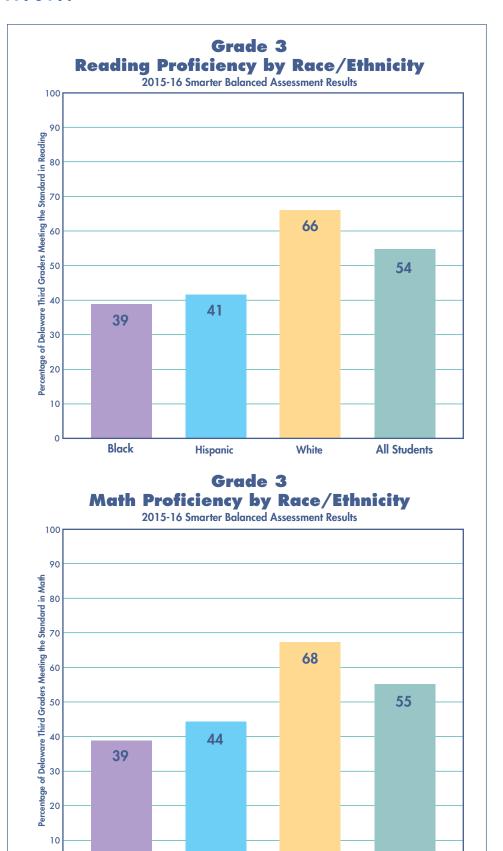


Notes: English Learner – an individual who was not born in the U.S. or whose native language is a language other than English; or is a Native American or Alaskan Native and comes from an environment where a language other than English has had a significant impact on such individual's level of English language proficiency; or an individual who has sufficient difficulty speaking, reading, writing, or understanding the English language and whose difficulties may deny such individual the opportunity to learn successfully in classrooms where the language of instruction is English.

Number served is the count of students enrolled on April 1. The total of children served per year is higher.

Source: Delaware Department of Education





White

All Students

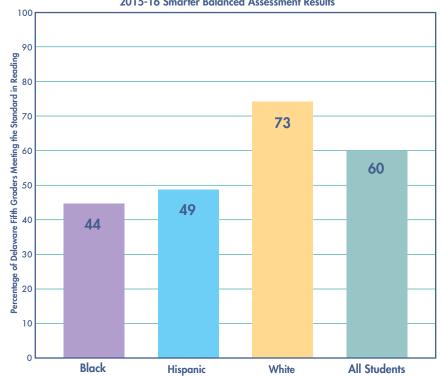
Black

Notes: "All" includes Native American and Asian. Source: Delaware Department of Education

Hispanic

Grade 5 Reading Proficiency by Race/Ethnicity

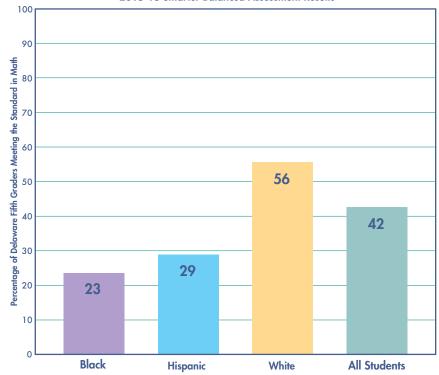
2015-16 Smarter Balanced Assessment Results





Grade 5 Math Proficiency by Race/Ethnicity

2015-16 Smarter Balanced Assessment Results



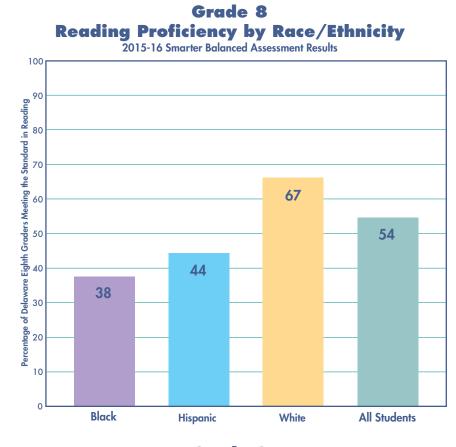
Notes: "All" includes Native American and Asian. Source: Delaware Department of Education

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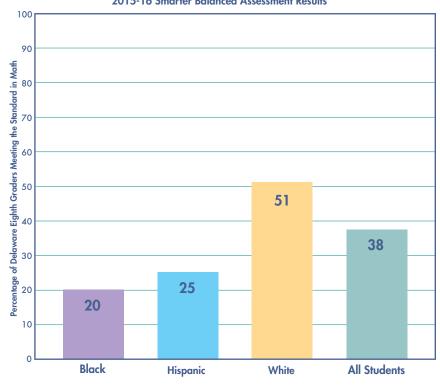
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was renamed the Delaware System of Student Assessments (DeSSA). DeSSA assessments



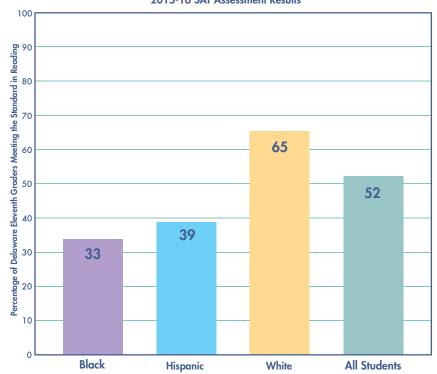


Grade 8 Math Proficiency by Race/Ethnicity 2015-16 Smarter Balanced Assessment Results

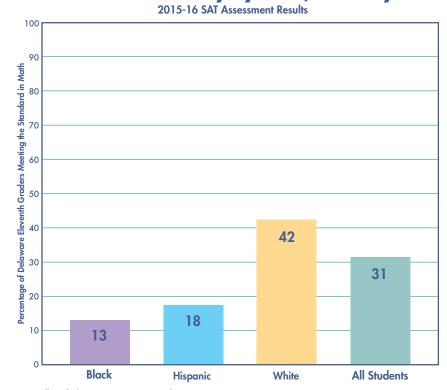


Grade 11 Reading Proficiency by Race/Ethnicity

2015-16 SAT Assessment Results



Grade 11 **Math Proficiency by Race/Ethnicity**



Notes: "All" includes Native American and Asian.
Beginning in the 2015-16 year, the SAT is the 11th grade accountability measure.
Source: Delaware Department of Education



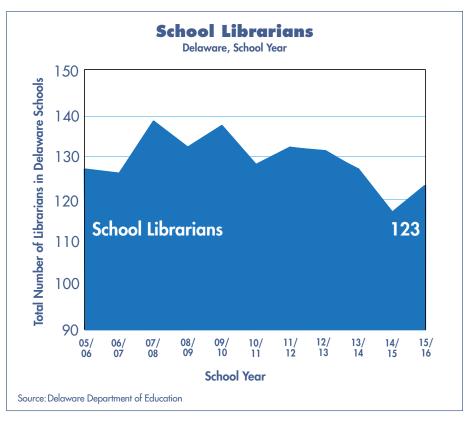
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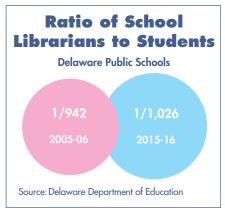


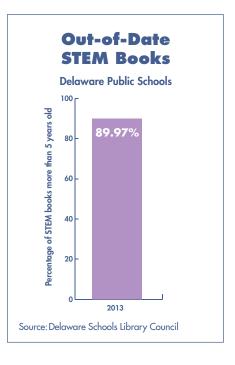
School Libraries

chool libraries are among the supports often provided to improve student success. Strong libraries become the "hub" of a school and are used by students in a variety of ways. Research has shown that quality school libraries are correlated with higher student achievement. However, in Delaware the "quality library gap" is growing so that access to resources and technology is not available for all students in the state. Dimension of quality include items such as staffing, funding, collections, technology, integration into curriculum and flexible scheduling.

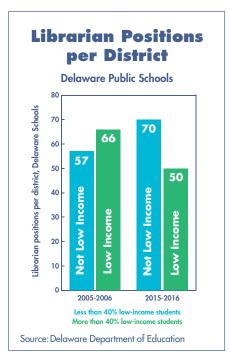


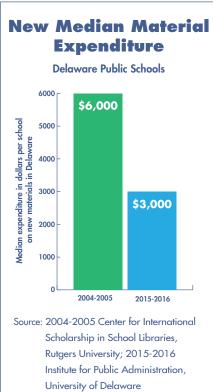


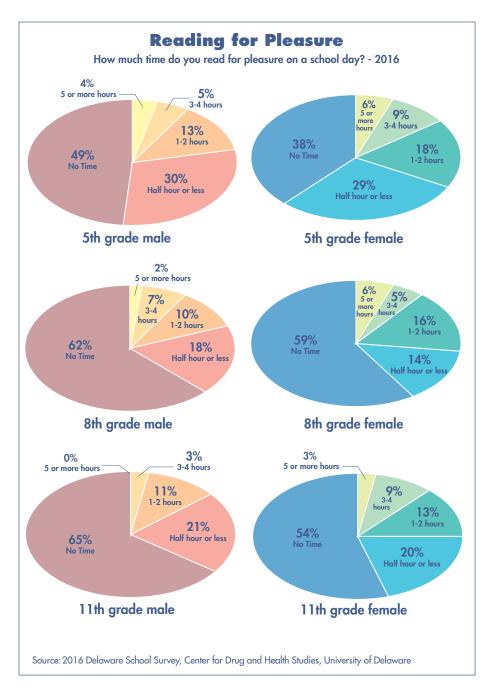




School Libraries





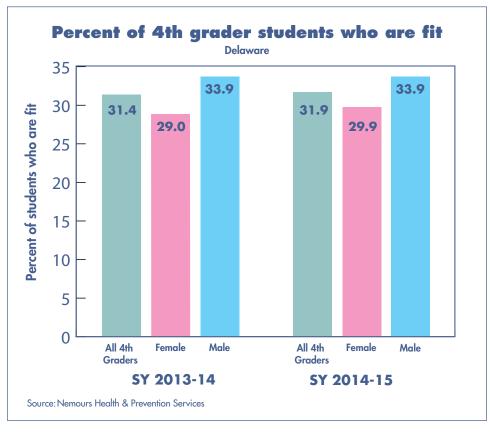


Healthy Habits

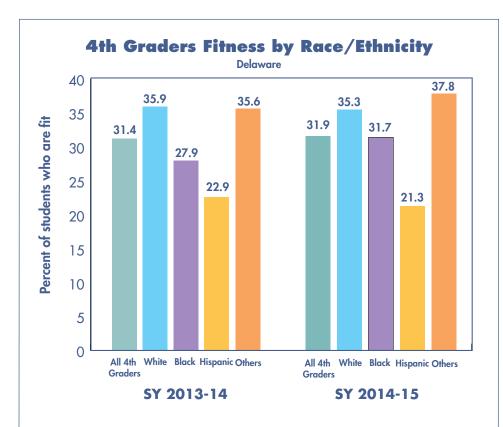


Where children live, play and go to school - or their food and fitness environment-has a large impact on whether they end up health or not. When children do not have access to a healthy environment, their health and quality of life are impaired. When we improve the food and fitness environment of a place, the health of the children who live there improves as well. Regular physical activity is a critical component of a child's overall health and well-being. Participating in regular activity helps improve overall health and fitness, and well as reduces risk for chronic disease. This can have immense implications for students, as newly implemented research has determined that there is a high correlation between physical fitness and academic success.

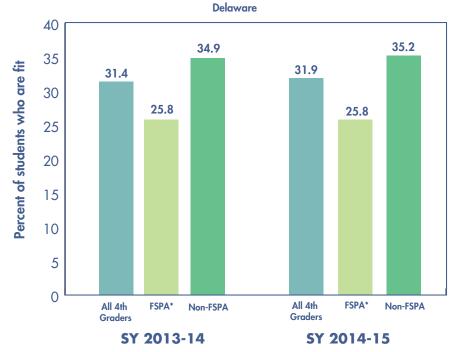
The Delaware Department of Education and Nemours Health & Prevention Services collaborated to analyze the relationships among Delaware student physical fitness levels, academic outcomes and student behaviors. Delaware schools utilize a fitness assessment tool called "FitnessGram," developed by the Cooper Institute, to measure aerobic capacity, strength, endurance and flexibility of students. Testing occurs in grades 4,7, and 9/10, and the ideal outcome is for students to be at or above standards in all five fitness tests.



Healthy Habits



4th Graders Fitness by Family Income



Source: Nemours Health & Prevention Services

* Note: FSPA-- since 2014, it has been defined as students receiving Food Stamps or Public Assistance sometime during that school year.



Healthy Fitness Zones (HFZ)*



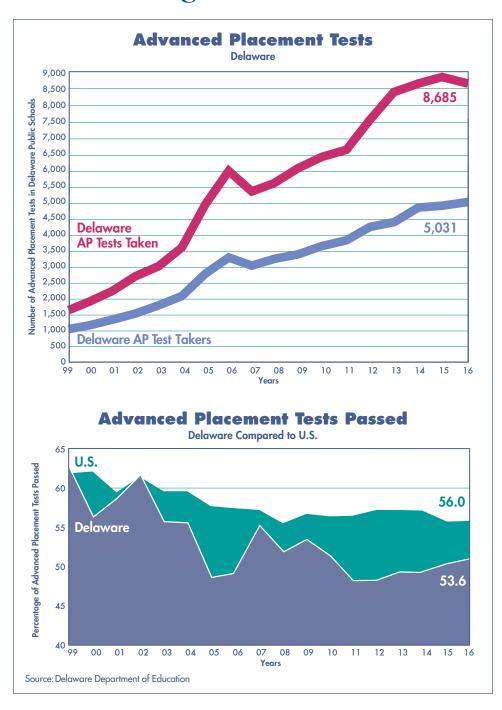
A 'Fit' student will score within the (HFZ)* for all the following five tests:

- 1) PACER (Aerobic capacity)
- 2) Curl-up (Abdominal strength and endurance)
- 3) Trunk Lift (Trunk extensor strength)
- 4) Push-up (Upper body strength)
- 5) Back Saver Sit and Reach (Flexibility)

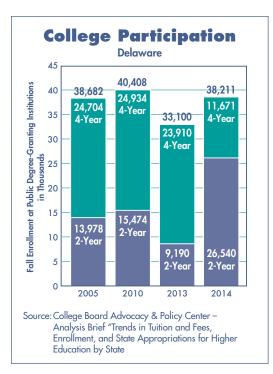
Advanced Placement and Higher Education

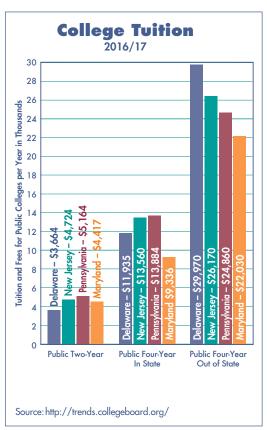
earning is like pollination, with ideas. Learners need access to a lot of pollination points in order to engage their attention and grow their motivation. The Advanced Placement (AP) Program gives students across the country the opportunity to discover knowledge and explore new subjects that might otherwise remain uncharted in high school curriculums. Based on a cooperative educational effort between secondary schools and colleges and universities across the U.S., the AP Program enables students to earn credit or advanced standing at many of the nation's colleges and universities by taking college-level courses in a high-school setting.

To participate in the program, students are only required to possess a strong curiosity for the subject they plan to study and the willingness to work hard. The AP program allows students to explore subjects in greater depth and broaden their intellectual horizons, preparing students for the rigor of college courses and enabling them to show their commitment to academic excellence.



Advanced Placement and Higher Education



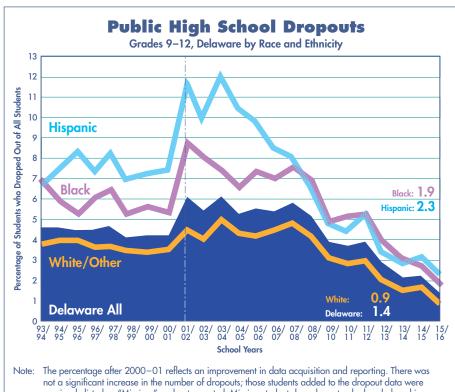




on	
416	9%
1,136	24%
1,136	24%
193	4%
215	5%
11	0%
1,614	34%
4721	100%
	1,136 193 215 11 1,614

For more information see www.collegeboard.org

le need the talents and contributions of all learners to be available to our communities. A student's graduation from high school is a direct predictor of future success, and dropping out of school can have immense costs for both the student and the community at large. Young high school dropouts are significantly more likely to face adverse outcomes such as unemployment, living in poverty, receiving public assistance, spending time in prison and being unhealthy. Dropping out of high school is also a cyclical process that affects future generations, as high school dropouts are at a higher risk of becoming single parents with children who drop out of high school themselves. As workplaces become progressively dependent on technology, dropouts will have an increasingly difficult time competing in the labor force, compounding negative effects that are felt across entire communities. Which means we must find innovative solutions for keeping students engaged in education. The changes we need to make to our education system are like remodeling a valuable by outdated house - keeping what works and updating what doesn't - to make it more functional for today's needs.

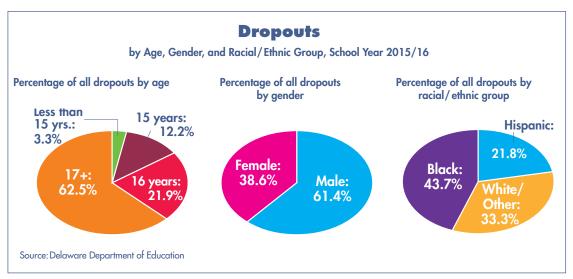


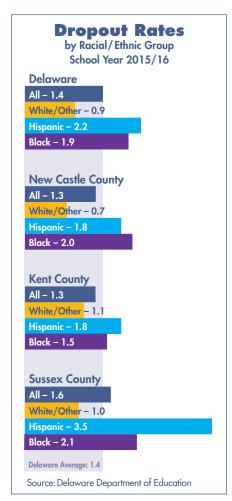
previously listed as "Missing," and not reported. Missing students have been tracked and placed in correct categories.

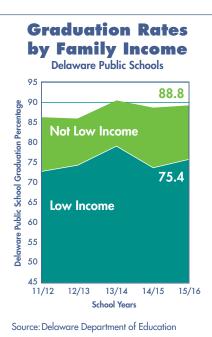
Note: Dropout - A 2014-15 dropout is an individual who was enrolled at the end of the 2013-14 school year; or at any time during the 2014-15 school year; and is no longer in school, has not graduated from high school or completed a state- or district-approved educational program; and does not meet any of the following exclusionary conditions:

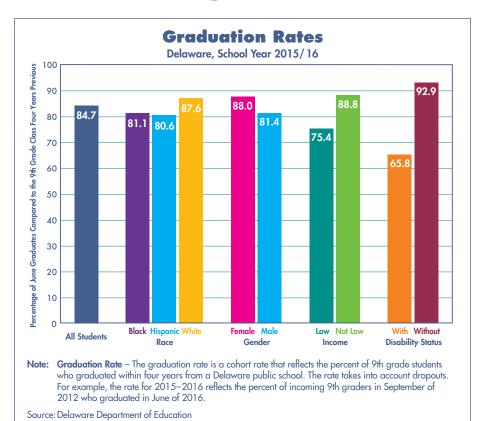
- Documentation proving transfer to another public school district, private school, or state- or districtapproved education program;
- Temporary absence due to suspension or school-approved illness; or
- Death.

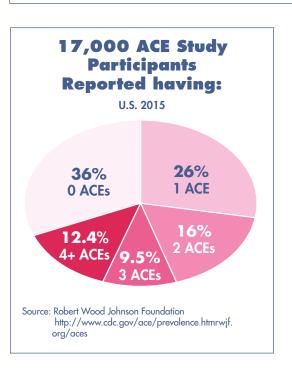






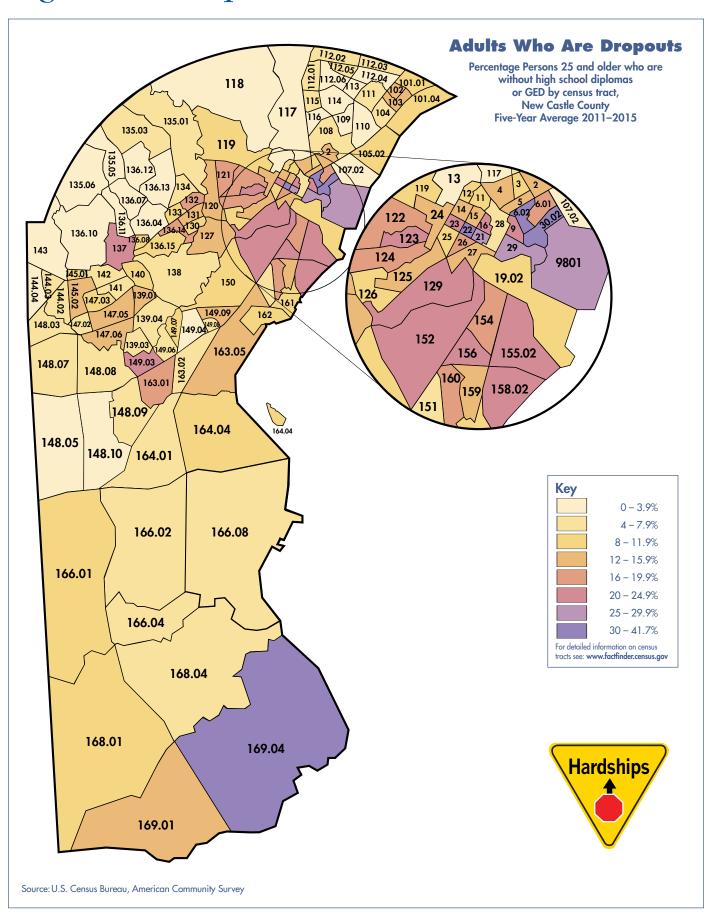


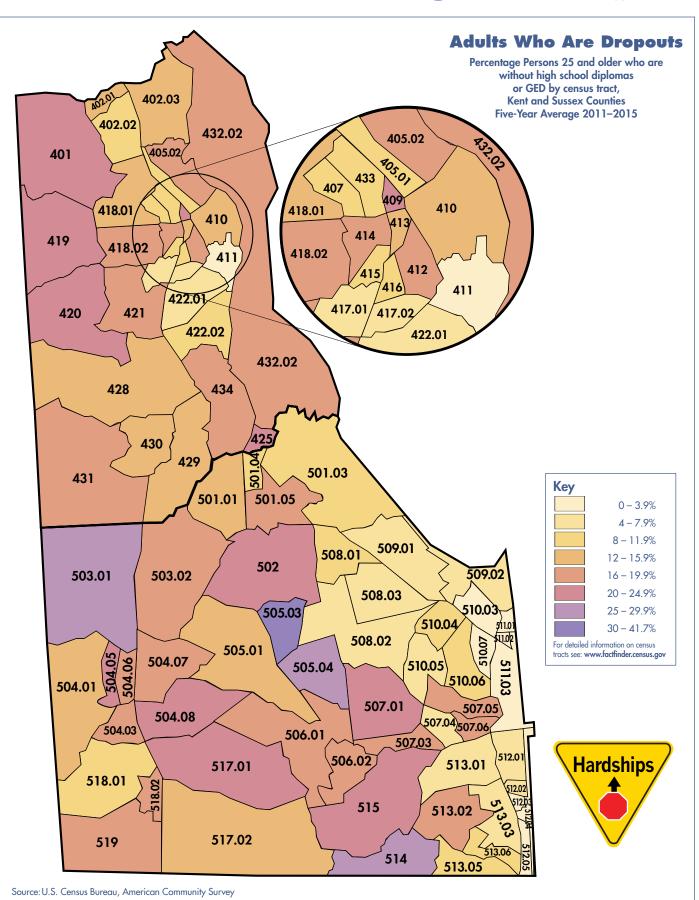






For more information see www.dropoutprevention.org www.jobcorps.doleta.gov





Expulsions and Suspensions



Compared to youth without disabilities, youth with disabilities were more likely to report having been bullied at school in the past 12 months (30.8% vs. 13.4%).

Source: The Current Landscape for Disability and Health in Delaware 2015, Center for Disabilities Studies, University of Delaware



For more information see www.dropoutprevention.org www.jobcorps.doleta.gov

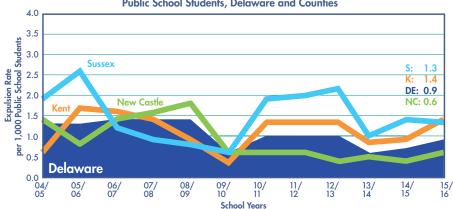
Expulsions and Suspensions

Delaware Public Schools, 2015/16 School Year Number of County **Enrollment** Number of Suspensions' **Expulsions** Out-of-School In-School Total Delaware 136,027 123 27,377 22,262 49,639 New Castle 78,656 18,843 10,526 29,369 9,949 30,485 4,410 5,539 Kent 44 26,886 4,124 6,197 10,321 Sussex

Note: Most frequent infractions resulting in Suspensions were Defiance of School Authority, Fighting, General Disruption. Most frequent infractions resulting in Expulsion were Drug Use or Possession, Assault/Battery.

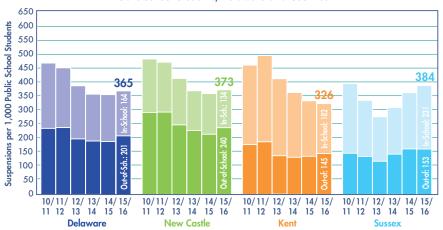
Expulsion Rates

Public School Students, Delaware and Counties



Suspension Rates

Public School Students, Delaware and Counties

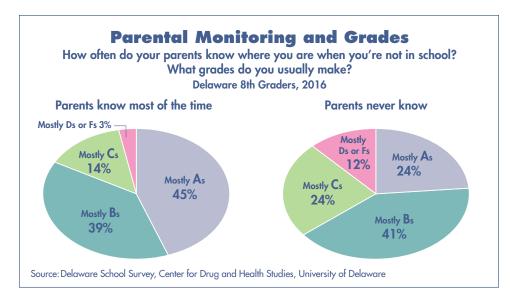


Note: The State of Delaware's Department of Education keeps track of out-of-school suspensions and expulsions in all regular, vocational/technical, and special public schools for each school year. The duration of out-of-school suspensions is influenced by district policy, district procedure, severity of the incident, frequency of a particular student's involvement in disciplinary actions, and the availability of disciplinary alternatives.

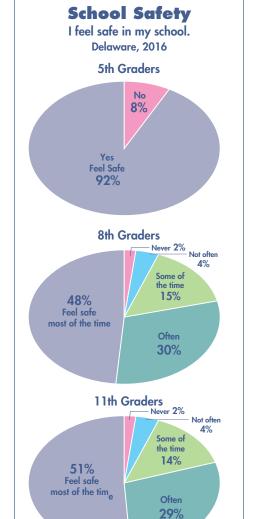
Source: Delaware Department of Education

^{*}Suspensions are total number of suspensions, not students suspended. A student may have multiple suspensions.

Education

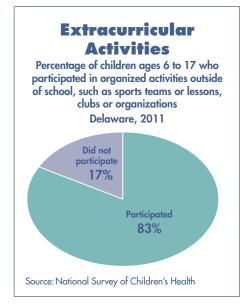


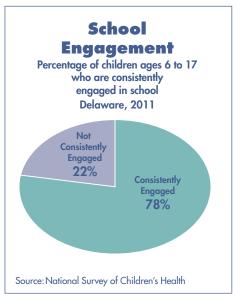




Source: Delaware School Survey, Center for Drug and

Health Studies, University of Delaware



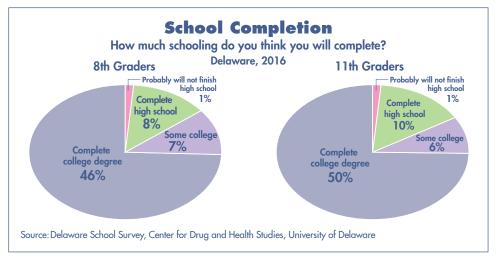


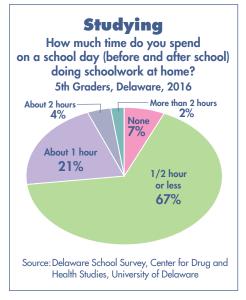
For more information see www.udel.edu/delawaredata/ www.vision2015delaware.org

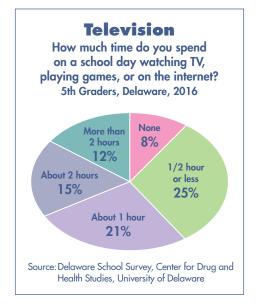
Education



ducation is the foundation for children to build a better future and achieve in all areas of life. In order to achieve at higher levels educationally, children need consistent support from their parents. Positive support such as providing literacy materials, holding high expectations, emphasizing effort over ability and encouraging autonomy can help parents positively impact their children's performance. Parents can actively participate in their children's education in several ways such as communicating with the child's school, monitoring homework, and attending school activities and meetings. Active and effective support from both parents and the community as a whole can create positive and productive educational outcomes for children.















s a state we need to ensure that families with children live in "high-opportunity" neighborhoods. Many strategies can help advance the goal of every child living in a neighborhood with abundant opportunities, including creating partnerships to invest in neighborhoods, removing barriers for families who want to move to different neighborhoods and pursuing policies to prevent racial and economic isolation. Effective strategies include creating partnerships between schools, colleges, workforce development programs and businesses to offer job-based training for youth and parents; investing state funds to support and expand early college high school programs; and coordinating workforce and early childhood programs.

Delaware should be a state where every child is financially secure. However, historical and current policies, laws and practices have

created and maintained deep divides in children's opportunities. Although no racial or ethnic group is unaffected by poverty, the likelihood of living in poverty is far higher if you are a Black or Latino child. Fighting child poverty and closing racial and ethnic gaps will require an "all-of-the above" approach: programs that boost incomes and provide safety nets for families who fall on hard times; greater opportunities for parents to increase their skills, education and access to family-supporting jobs; and policies that help every child have meaningful opportunities to reach their full potential, across race, ethnicity and place

Historical barriers created unequal situations for families, and current policies have not done enough to undo them. The availability of and access to jobs that pay familysustaining wages shapes parents' ability to provide financial security for their children, which affects

lack of access to health care, to increased risk of hunger, to higher risk of facing challenges in school. Living in poverty as a child is also predictive of worse employment outcomes as adults

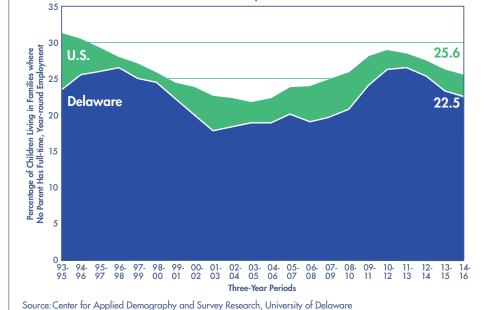
Reducing poverty, and the racial and ethnic disparities in poverty rates, must begin with a shared understanding of how opportunities and well-being are shaped by policy. For example, we have significantly reduced poverty for seniors with income support through Social Security. Conversely, the discriminatory private practices and public policies discussed earlier have created persistently higher poverty rates for Black and Latino families. Our policy choices matter.

No Parent with Full-time Employment



nemployment is a pervasive issue in the United States, and parental unemployment has a direct effect on a child's economic stability and overall well-being. Without full-time employment of at least one parent, a child's basic needs can be extremely difficult to meet. Many families across the nation full under the category of "working poor", a term that denotes families with working parents who live in poverty because their wages are not enough to cover basic needs including food, housing, and stable child care. Secure employment improves family life by providing stability and reducing the stress level generated by unemployment. A higher income is associated with numerous positive outcomes for children including better health, academic achievement, and financial well-being later in life, all of which generate a brighter future for the children involved.

Children with Underemployed Parents
Delaware Compared to U.S.





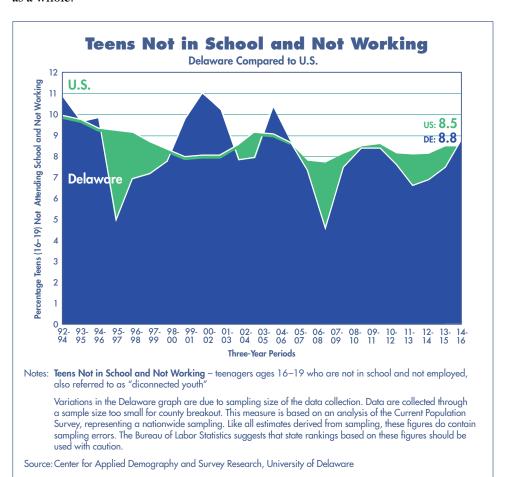
The U.S. is the only country among 41 nations that does not mandate any paid leave for new parents, according to data compiled by the Organization for Economic Cooperation and Development (OECD). The smallest amount of paid leave required in any of the other 40 nations is about two months.

Source: http://www.pewresearch.org/fact-tank/2016/09/26/u-s-lacks-mandated-paid-parental-leave/source. The properties of the properties

Economic Inclusion of Young People

oday, with millions of jobs lost and experienced workers scrambling for every available position, America's youth stand last in line for jobs. Teenagers, especially those who are neither in school or working, may face difficulties transitioning from youth to adult society. Such detachment puts youth at increased risk for having lower earnings and a less stable employment history than their peers who stayed in school or secured jobs.

Reconnecting youth to education and employment requires a multifaceted approach. Young people need multiple and flexible pathways to success that meet their varied needs – combining education, training and supportive services, and strong relationships with adults. In order to thrive during the transition to adulthood, young people need to develop self-management skills through positive work experiences and need a network of resources to tap into. By coordinating the initiatives of national policymakers with the resources of local communities, and by creating career pathways for youth by supporting public and private investment that produces new jobs, youth can be reconnected to the labor market and their needs of economic stability can be met. The economic inclusion of young people is beneficial to the youth themselves and society as a whole.

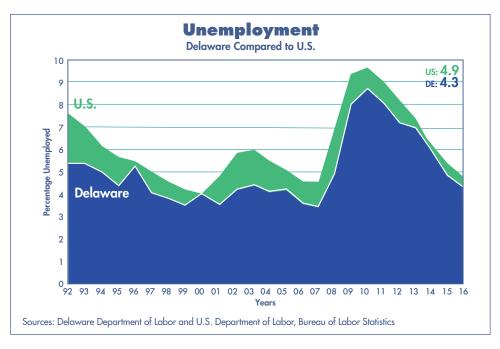


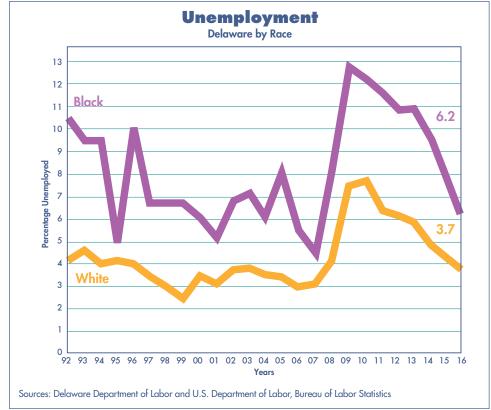


Unemployment

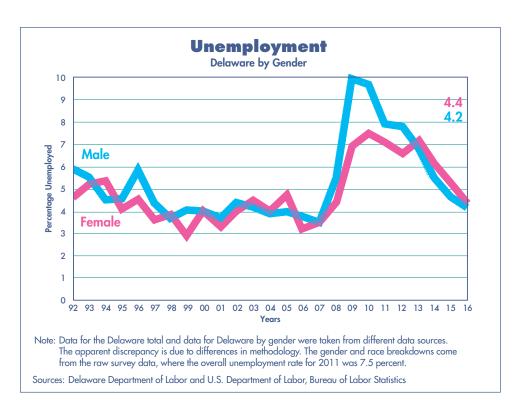
he foundation of our economy rests on the health and stability of our public systems and structures. Economic activity depends on transportation systems, energy and communications grids. It is supported by the courts, our postal system and educational institutions. When the investment is lacking and unemployment increases, children often face the direct effects. Secure employment of a caregiver can have positive impacts such as access to healthcare and financial stability, both of which improve a child's overall wellbeing. The stability the full-time employment provides is crucial to providing adequate financial, physical and emotional support to children.



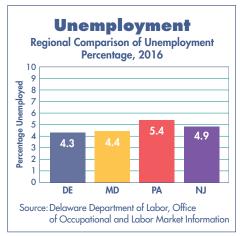


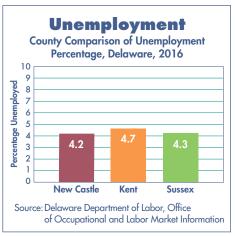


Unemployment









A new Pew Research Center survey conducted Sept. 15-Oct. 13, 2015, among 1,807 U.S. parents with children younger than 18 finds that for lower-income parents, financial instability can limit their children's access to a safe environment and to the kinds of enrichment activities that affluent parents may take for granted. For example, higher-income parents are nearly twice as likely as lower-income parents to rate their neighborhood as an "excellent" or "very good" place to raise kids (78% vs. 42%). On the flip side, a third of parents with annual family incomes less than \$30,000 say that their neighborhood is only a "fair" or "poor" place to raise kids; just 7% of parents with incomes in excess of \$75,000 give their neighborhood similarly low ratings.

Source: http://www.pewsocial trends.org/2015/12/17/parenting-in-america/

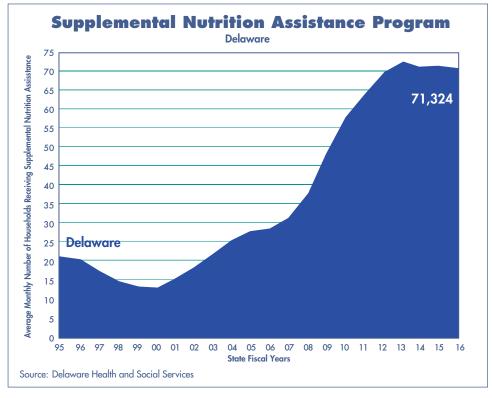


For more information see www.delawareworks.com

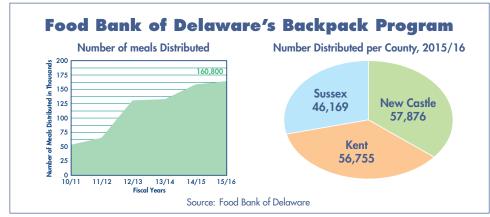
Supplemental Nutrition Assistance Program (SNAP)



The quality of life we all want in our community is directly connected to the public structures we build and maintain. Our parks, school, social services and infrastructure are what make our state a good place to live and work. The Supplemental Nutrition Assistance Program (SNAP) is one such public service designed to ensure adequate nutrition, of particular importance to children. Undernourished children are at risk for illness, cognitive delays, and poor social skills, the effects of which will continue to influence their development later in life. According to an analysis released by the Archives of Pediatrics and Adolescent Medicine, nearly 50% of all US children and 90% of black children will be on food benefits at some point during childhood. SNAP provides food benefits and nutrition assistance to eligible low-income families, enabling children to receive the nutrition they need to flourish.

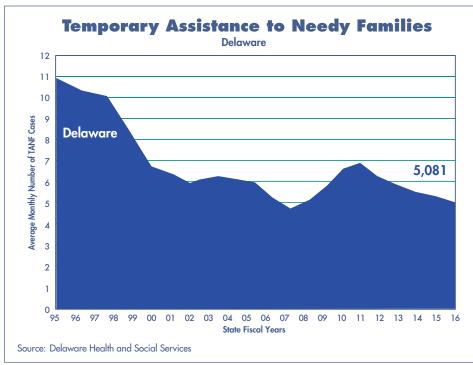






Temporary Assistance for Needy Families (TANF)





emporary Assistance for Needy Families (TANF) is a cash assistance program for families in Delaware jointly administered by the Delaware Division of Social Services (DSS), Department of Labor, Department of Transportation, and Economic Development Office. The program provides needy families and parents with the means needed to afford expenses, such as high energy bills and car repairs, maintain gainful employment, and receive basic assistance. TANF also makes sure that children in low-income families get the basic amenities, support, and services they need to develop.

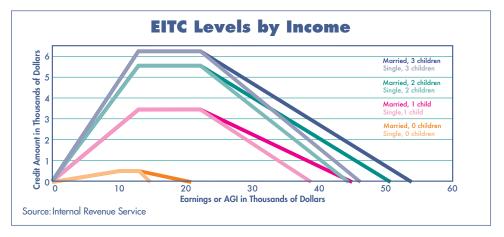


Tax Credits Benefiting Families

he tax system has a significant impact on financial security for all families in Delaware, both directly through its role in the distribution of society's resources and indirectly through its effects on the incentives for economic decisions such as working, spending, and saving. Many families benefit directly or indirectly from different tax credits in Delaware. Poverty has profound impacts on a child's development and tax credits are an effective anti-poverty measure with bipartisan support.

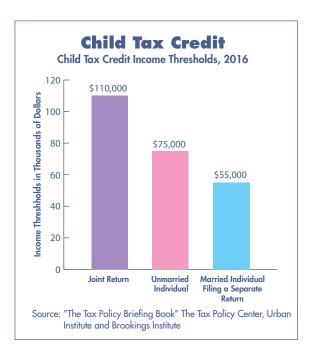
	meome Limis and Ma.	ximum Credit Amounts, 2016	,
# Qualifying Children	Single, Income must be less than	Married Filing Jointly, Income must be less than	Maximum Credit
0	\$14,880	\$20,430	\$ 506
1	\$39,296	\$44,846	\$3,373
2	\$44,648	\$50,198	\$5,572
3	\$47,955	\$53,505	\$6,269
		EITC Claims	
NI I I		Delaware, 2016	70.000
Number of federal EITC claims in Delaware:		73,000	
Total federal EITC claimed by DE residents:		\$176 Million	
Average federal EITC amount:		\$2,394	





Earned Income Tax Credit: The Earned Income Tax Credit (EITC) is the nation's most effective anti-poverty program for working families. The federal Earned Income Tax Credit was introduced in 1975 and was designed to offset federal income taxes, social security payroll taxes, and supplemental earnings while rewarding work. The EITC serves many public policy goals including: reduce child poverty, cut taxes for low-income families, increase incentive to work, stabilize income, and spur consumption. The federal EITC reduces the amount of taxes owed and refunds the difference if the credit is larger than the amount owed. EITC is the nation's most effective anti-poverty program for working families. Only 25 states, Delaware included, have state Earned Income Tax Credits. In Delaware the state EITC is non-refundable meaning it reduces the tax liability but does not provide a refund. Non-refundable EITC may offer substantial tax relief to families with state income tax liability, but it offers no benefit to working families that have income too low to owe any income taxes. Credits from the EITC program, are only available for those who apply for them. The IRS estimates that 20 to 25% of qualifying workers miss out on thousands of dollars every year.

Tax Credits Benefiting Families



Child Tax Credit: The Child Tax Credit is a powerful weapon against poverty. In 2010 it protected approximately 2.6 million people from poverty, including about 1.4 million children. In combination with the EITC, it lifts even larger numbers of families with children above poverty. Taxpayers with children under age 17 can get a tax credit of up to \$1,000 per child on their tax return. This tax credit reduces the amount owed in taxes, for example a family with three qualifying children can have their tax bill reduced by up to \$3,000. Biological children, stepchildren, adopted children, grandchildren, greatgrandchildren, siblings, step-siblings, half-siblings, and foster children placed in the home by a court that have lived with the tax payer for more than half of the year and are U.S. citizens or residents qualify. The child tax credit generally is non-refundable, meaning that it can reduce the tax bill zero, but any extra is not refunded to the tax payer. However under certain qualifications the tax payer may receive any extra back in a credit. The child tax credit is reduced or eliminated if the adjusted gross income is above certain thresholds. For each \$1,000 over the threshold the child tax credit is reduced by \$50, not by \$50 for each child claimed.



For more information see

www.taxpolicycenter.org/briefing-book/
key-elements/poor/credits.cfm

www.ncsl.org/issues-research/labor/
earned-income-tax-credits-for-working-families.aspx

www.taxpolicycenter.org/briefing-book/key-elements/
family/ctc.cfm

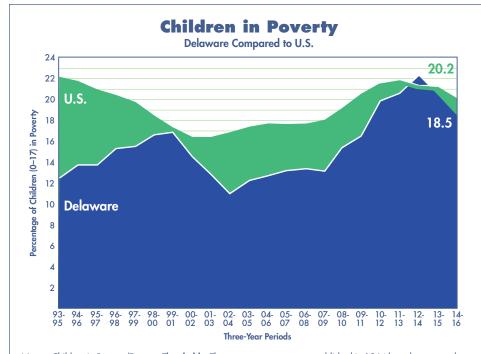
www.cbpp.org/files/policybasics-ctc.pdf



Delaware should be a place where a child's beginnings, however humble, do not limit life's paths. Poverty is the single greatest threat to children's well-being. Nearly 15 million children in the United States, over 20% of all children, live in families below the federal poverty level.

Low-income children suffer a disproportionate share of deprivation, hardship, and negative outcomes. The risks are greatest for children who experience poverty when they are younger and for those who live in deep and/or persistent poverty. Not only does this group of children have access to fewer material goods than upper or middle-class children, but they are also more likely to experience poor health and die during childhood, in addition to being more likely to end up poor as adults. In school, these children score lower on standardized test and are more likely to be retained in grade or to drop out. Low-income teens are more likely to have out-of-wedlock births and experience violent crime. Fewer children in poverty will mean increased positive outcomes such as more children entering school ready to learn, better child health, less strain on hospitals and public health systems, less stress on the juvenile justice system, and a decrease in child hunger and malnutrition.

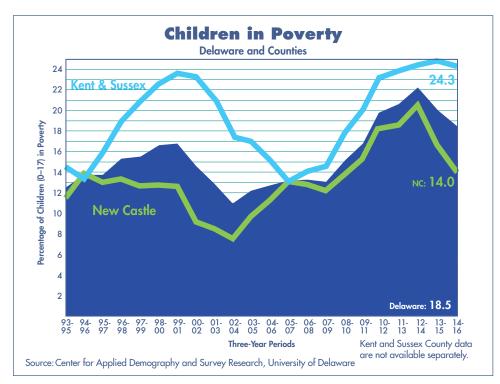


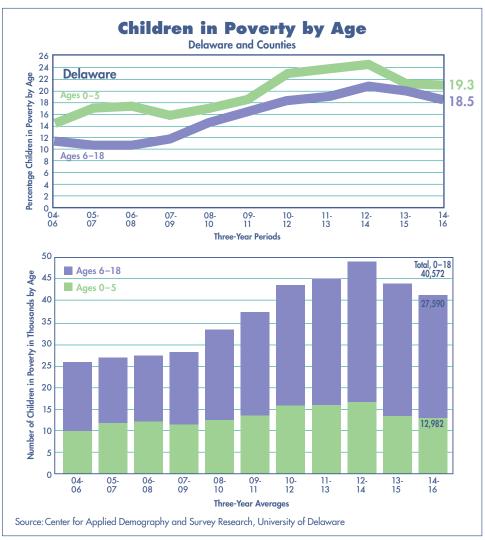


Note: Children in Poverty/Poverty Threshold – The poverty measure was established in 1964 based on research indicating that families spent about one-third of their incomes on food. A family is officially classified as poor if its cash income (wages, pensions, social security benefits, and all other forms of cash income) falls below the poverty threshold. For example, according to the federal poverty guidelines, in 2016 the poverty threshold for a one-parent, two-child family was \$19,337; for a family of four with two children, the threshold was \$24,339. While the thresholds are updated each year for inflation, the measure is widely acknowledged to be outdated because in today's society, food comprises a much lower percentage of an average family's expenses than it did in the sixties, while the costs of housing, child care, health care, and transportation have increased substantially. Many research organizations, including the U.S. Census Bureau, have concluded that the official poverty measure is an antiquated standard that is no longer capable of capturing true economic need or determining whether working families earn enough to get by.

Source: Center for Applied Demography and Survey Research, University of Delaware





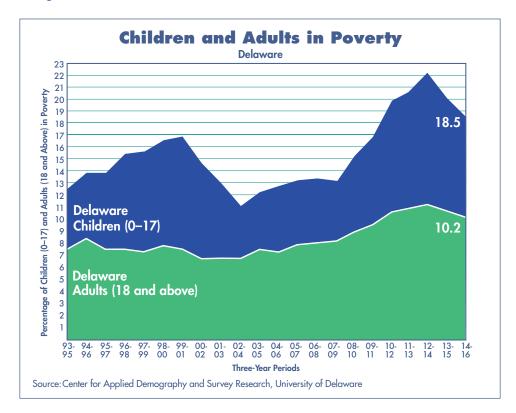


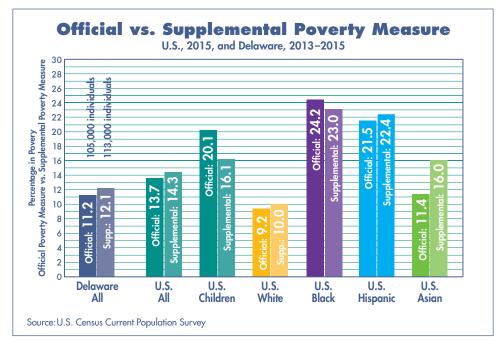


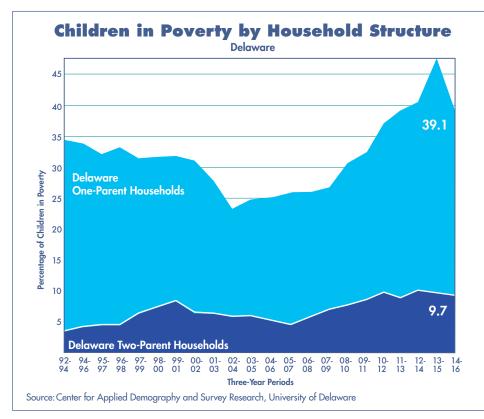


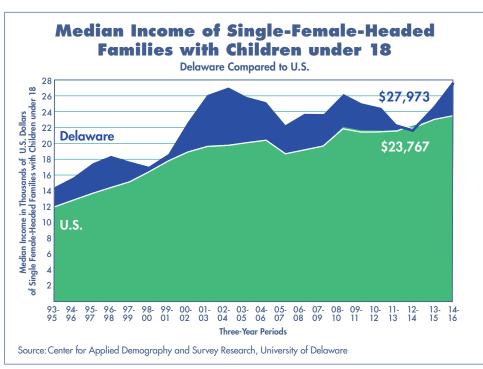






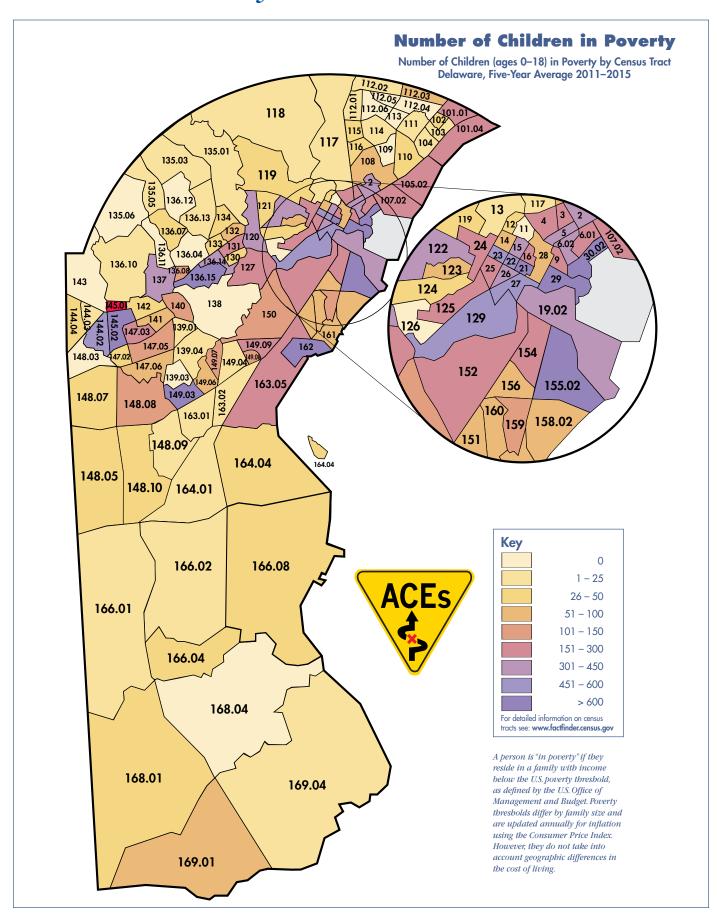


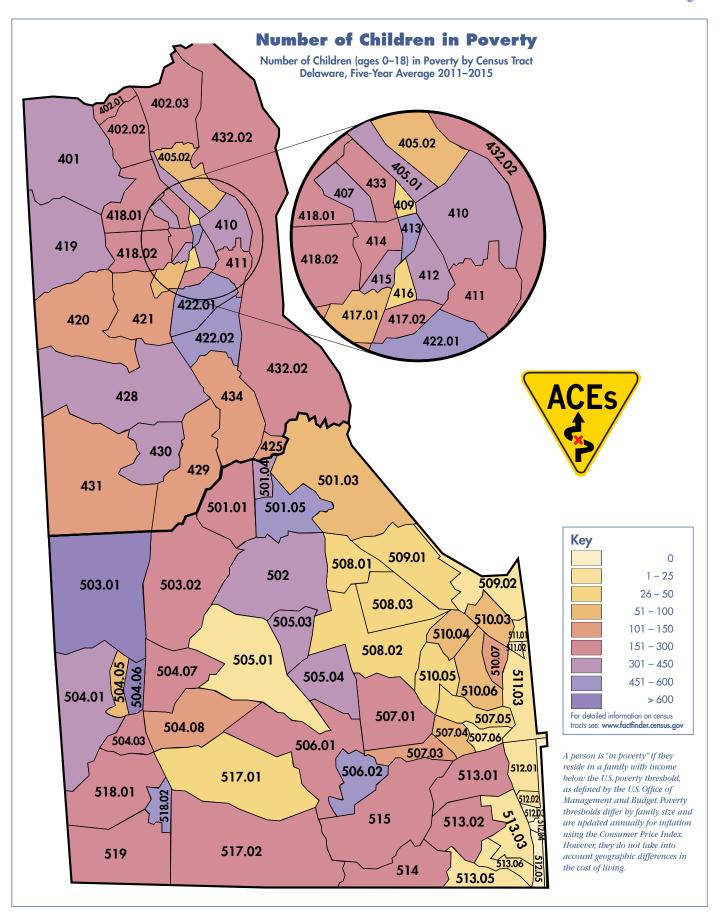


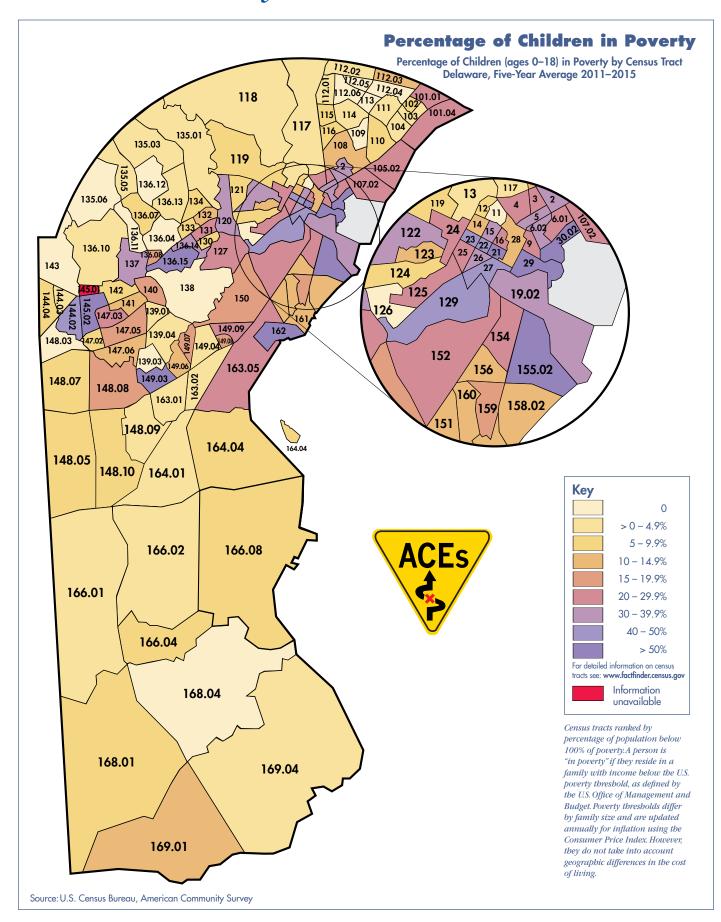


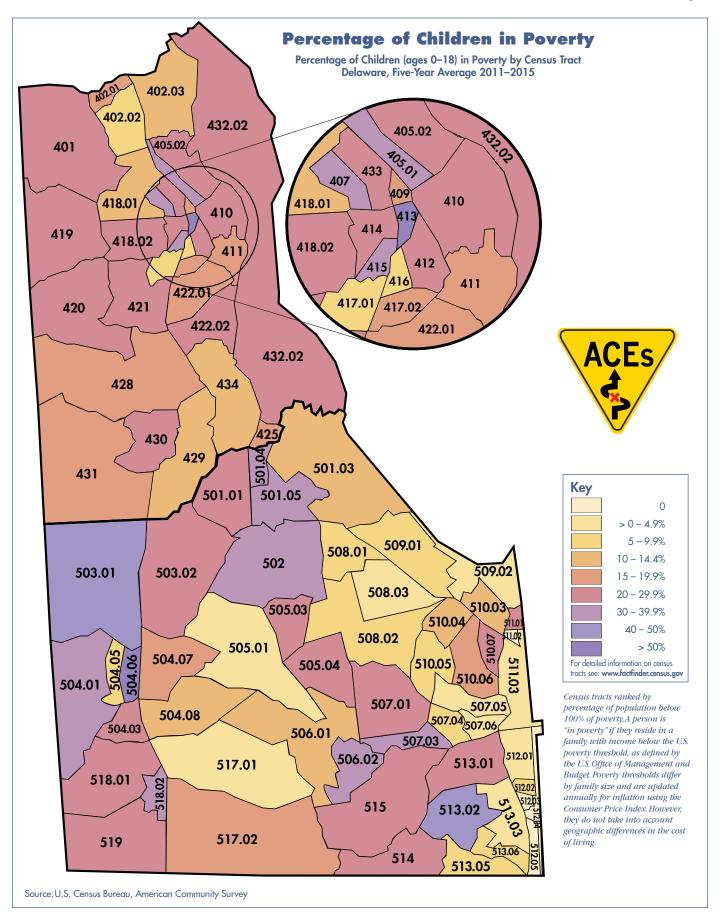












Female-Headed Families with Children under 5 years old in Poverty

2011-2015

U.S. 30.9%

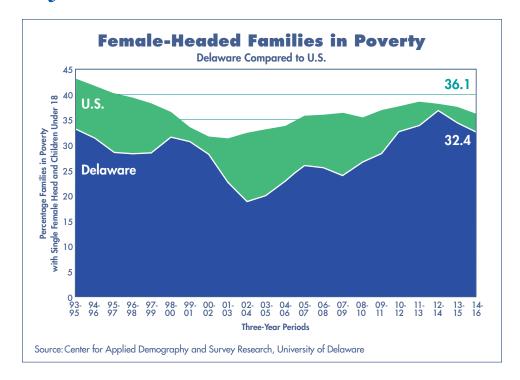
Delaware 32%

New Castle 27.6%

Kent 36.5%

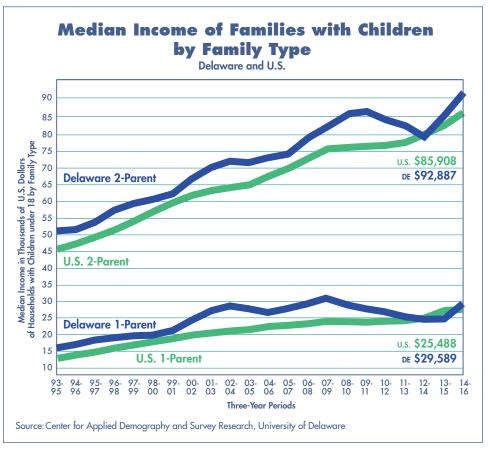
Sussex 38.4%

Source: American Community Survey, U.S. Census Bureau. 2011–2015 Averages. http://factfinder.census. gov/



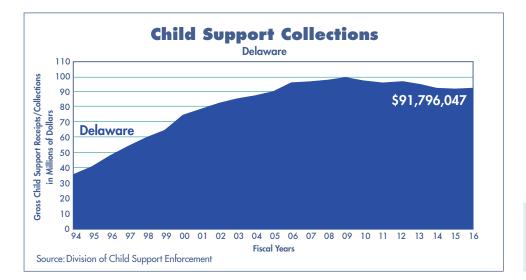


For more information see www.singlerose.com www.makinglemonade.com www.singlefather.org www.urban.org/publications/101308.html www.parentswithoutpartners.org www.promisingpractices.net www.nationalpartnership.org



or many children, especially those living in poverty, child support is an important resource to ensuring financial security. Research has indicated that children are more likely to receive the necessary financial support from their nonresident parent when an order is in place. The Child Support Enforcement Program is a federal, state and local partnership aimed at promoting self-sufficiency and child well-being through financial stability. In Delaware, the Division of Child Support Enforcement works to ensure that both parents meet their financial and legal obligations to their children. The child support program assures that assistance in obtaining financial and medical support is available to children through locating nonresident parents, establishing paternity and support obligations, and enforcing those obligations. Child support programs are crucial to ensuring that all children receive adequate financial support from their parents.

Current Child Support Owed that Is Paid Delaware Compared to U.S. Delaware US: 65.2 Delaware US: 65.2 Delaware US: 65.2 Delaware Delaware Source: Division of Child Support Enforcement



Child Support

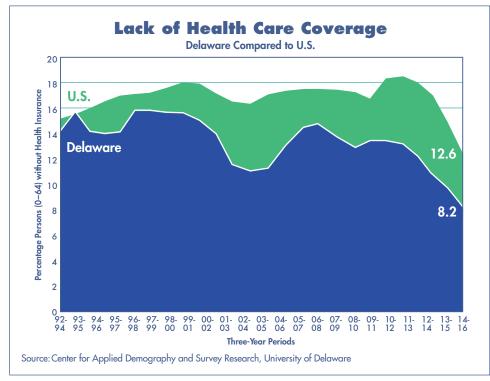


For more information see
http://www.dhss.delaware.gov/dhss/dcse/
www.adf.hhs.gov/programs/cse/

Health Care Coverage



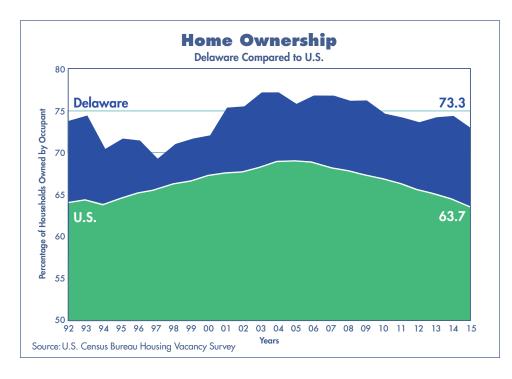
ccessible, reliable health care is an important aspect of child and family well-being, but due to the limits of public health care and gaps in employer coverage, there are thousands of people living in Delaware without adequate health care coverage. Families without health care coverage suffer from limited access to care, quality of care, and decreased financial security. Families with inadequate health care coverage receive less preventative care, typically lack a consistent source of care, delay care, and/or have other unmet medical needs. Uninsured children with common childhood illnesses and injuries do not receive the same level of care as their insured peers, and are consequently at a higher risk for preventable hospitalizations and for missed diagnoses of serious health conditions than those with health care coverage.



For more information see
www.cms.gov
www.familiesusa.org
http://dhcc.delaware.gov/
www.delawareuninsured.org/

Health Insurance Marketplace Delaware 2016				
Total number completed applications in Delaware	25,379			
Individuals eligible to enroll in a marketplace plan with financial assistance	21,467			
Number of individuals who have selected a marketplace plan	28,256			
People gaining coverage between 2010-2015	35,000			
Source: https://aspe.hhs.gov/health-insurance-m 2016-open-enrollment-period-january-enrollment-				

Home Ownership



ome ownership can be a key component to the strengthening of families, children and communities. Homeowners tend to be more involved in their communities and make more investments in the physical quality of their home and neighborhood which, in turn, fosters a better environment for children. Home ownership is an important step towards building assets and financial stability for a family, and research indicates that homeowners are more likely to make other savvy investments such as saving for their child's education. Home ownership creates stronger and more secure families, which in turn creates better communities for every individual.



Source: 2000-2005: The Reinvestment Fund, 2006. Mortgage Foreclosure Filings in Delaware; 2006-2007: Office of the State Bank Commissioner; 2008-2015: File & Serve Express, compiled by Counties and Delaware State Housing Authority.

Note on Foreclosures – The Delaware Automatic Residential Mortgage Foreclosure Mediation Program (Mediation Program) was created by H.B. 58 in September 2011 and implemented in January 2012. Modeled after successful programs in other states, this program made mediation between parties to a foreclosure action a mandatory part of the foreclosure process for owner-occupied, residential properties. Mediation offers homeowners in default the opportunity to meet face-to-face with their lender and attempt to find an alternative resolution to foreclosure, such as loan modification, repayment, forebearance, or short sale. The Delaware Department of Justice oversees mediations and homeowners work with a housing counselor through the process. As lenders adjusted to the program, filings initially dropped in early 2012 but rose again through late 2012 and 2013. The program was recently extended to continue through 2018.

Home Ownership

Cost of Housing, 2015

Delaware median monthly housing costs:

Mortgaged owners \$1,506 Renters \$1049

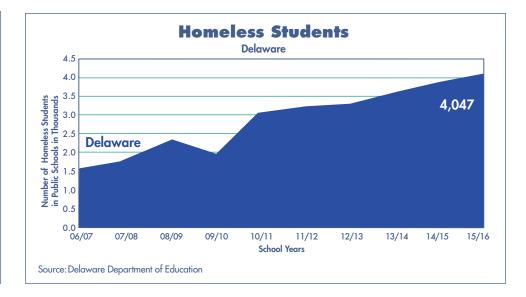
Delawareans spending >30% of income on housing:

Homeowners 30.8% Renters 48.4%

Median housing value:

Delaware \$240,200 U.S. \$194,500

Source: U.S. Census Bureau, American Community Survey – One year estimates: 2016







Rate of Homelessness Delaware 3.0 3.0 1.5 Delaware 0.5 Delaware 0.5 Delaware 0.5 School Years Source: Delaware Department of Education

Delinquent Loans Percentages, Third quarters, 2012–2016					
Foreclosures Inventory:	2012	2014	2015	2016	
All Loans, U.S.	4.1	2.4	1.9	1.6	
All Loans, Delaware	3.4	2.8	2.2	2.3	
Subprime Loans, U.S.	12.4	9.8	8.1	7.0	
Subprime Loans, DE	11.7	11.0	11.8	11.9	
Seriously Delinquent* Loans:	2012	2014	2015	2016	
All Loans, U.S.	7.2	4.7	3.6	3.0	
All Loans, Delaware	7.0	5.7	4.7	4.1	
Subprime Loans, U.S.	21.7	15.2	12.7	12.5	
Subprime Loans, DE	23.1	19.5	18.9	18.3	

^{*} The number of loans considered seriously delinquent is the number of loans in foreclosure plus the number of loans 90 or more days past due but not yet in foreclosure.

Source: Mortgage Bankers Association, National Delinquency Survey









The well-being of our children is a barometer for the future. In one short generation, they will be the parents, workers, volunteers, leaders, and changemakers determining the social and economic vitality of Delaware. If we want a better future for all of us, we need better results for kids now. Getting results means giving all kids what they need to reach their full potential. And it especially means investing in kids of color and those from families with low incomes, so they can overcome the barriers created by racism and poverty and can have equal opportunity to succeed. We must remove the exclusionary practices that undergird much of our country's public institutions and replace them with measures designed to let kids of all backgrounds succeed. Second, we must focus our public investments on the success of the whole family, with the understanding

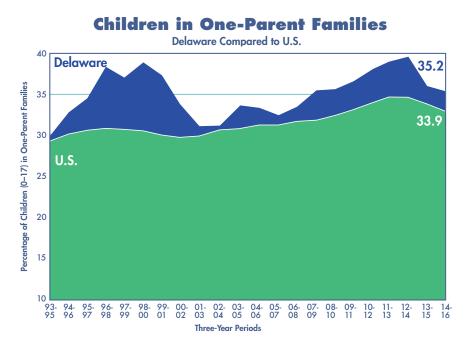
that the well-being of children is inextricably tied to the well-being of their parents.

The opportunity gap starts young, with children of color as much as 2.6 times more likely as their white peers to experience poverty. By fourth grade, Black and Latino children are more likely to be reading below grade level, a crucial milestone that predicts future success in school. As they progress through adolescence into young adulthood, children of color are more likely than their white peers to be diagnosed with asthma, be suspended from school, drop out of high school, and become involved with the criminal justice system. Young adults of color are less likely to graduate from college than their white peers, which has long-term implications for their job prospects, economic stability, and the future well-being of the children they will one day raise.

But we cannot raise the bar for all kids if we don't look specifically at how Delaware's children of color are faring. We can often trace racial and ethnic gaps in children's health, education and financial security to historical policies that created barriers for families and current policies that can perpetuate them. We must "close the gaps" by intentionally breaking down any obstacles to certain groups of children reaching their full potential.

We believe that raising the bar and closing the gaps in child well-being is the way forward for sustainable economic growth and prosperity. By creating abundant opportunities for Delaware kids, the state will build on its strengths: its diversity, capacity for growth and enterprising spirit.

The composition of families in America is constantly changing, and as a result, the type of primary caregiver in children's lives varies widely. Families may be headed by biological parents, step-parents, foster parents or other relatives. The number of caregivers in a household also varies widely, and increasingly, single parents have become primary caregivers in many families. Single parenting comes with a variety of unique challenges, and research indicates that children growing up in single parent households face an increased risk for cognitive, financial, social and emotional concerns. Children in these households can face numerous obstacles, and support from parents, schools, and communities can be key to helping them thrive.

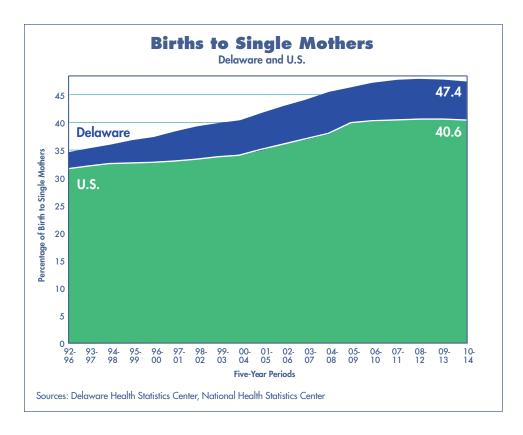


Note: Children in One-Parent Households – percentage of all families with "own children" under age 18 living in the household, who are headed by a person – male or female – without a spouse present in the home. "Own children" are never-married children under 18 who are related to the householder by birth, marriage, or adoption.

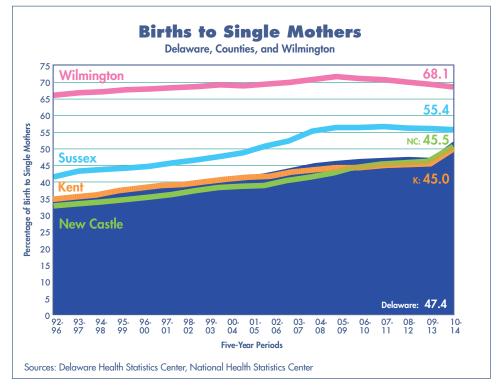
Source: Center for Applied Demography and Survey Research, University of Delaware



Households by Type Percentages, U.S., Delaware, and Counties, 2011–2015						
	US	DE	NC	Kent	Sussex	
Families (in households) With own children under 18 years	66.1% 43.7%	66.9% 39.6%	65.9% 43.6%	69.8% 42.6%	68.4% 31.2%	
Married-Couple Family With own children under 18 years	73.1% 40.2%	64.0% 35.1%	71.3% 40.1%	72.1% 37.6%	74.3% 25.4%	
Male householder family, no wife present With own children under 18 years	7.3% 47.9%	8.8% 47.1%	7.4% 49.8%	6.8% 46.4%	7.5% 43.5%	
Female householder family, no husband present With own children under 18 years	19.6% 55.1%	27.4% 52.5%	21.3% 53.0%	21.1% 58.7%	18.2% 49.4%	
Nonfamily households	33.9%	33.1%	34.1%	30.2%	31.6%	
Householder living alone	27.6%	26.7%	27.5%	23.8%	25.8%	
65 years and over	10.1%	10.6%	9.7%	9.9%	13.0%	
Households with one or more people <18 years	32.3%	30.7%	32.6%	33.9%	25.6%	
Households with one or more people 60+	36.4%	39.6%	34.4%	38.4%	50.9%	
Average household size	2.6%	2.6%	2.6%	2.7%	2.6%	
Average family size Source: American Community Survey, U.S. Census Burec	3.2%	3.2%	3.2%	3.2%	3.0%	

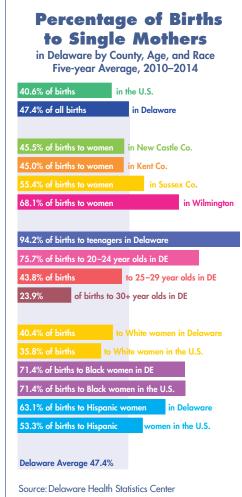








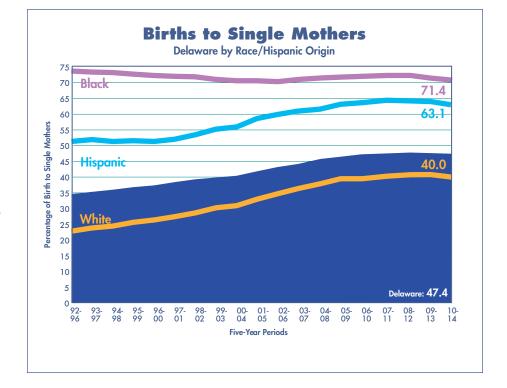


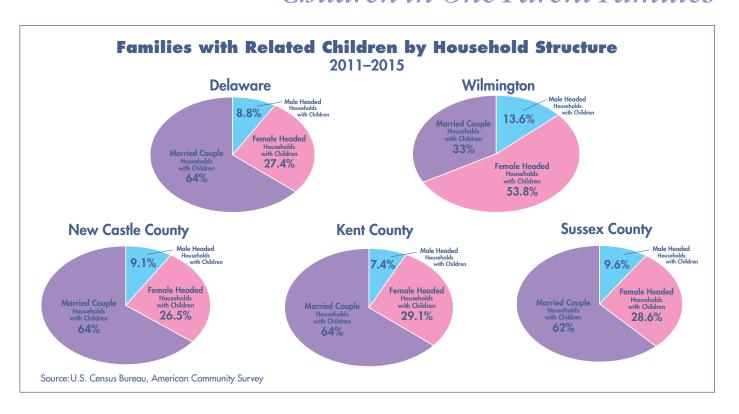


In the first 5 years of their child's life, Hispanic (foreign-born and U.S.-born) mothers are more likely to experience stable family life (i.e., stable residential relationship or stably single) than their black counterparts. Foreign-born Latina mothers are also less likely to re-partner than their low-income U.S.-born Hispanic, white, and black counterparts.

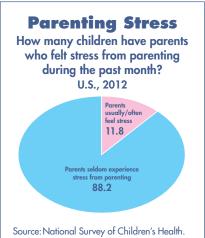
http://www.hispanicresearchcenter.org/wp-content/uploads/2017/02/Family-Stability-and-Instability.pdf



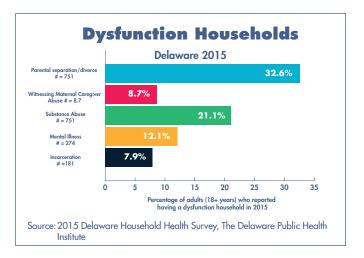


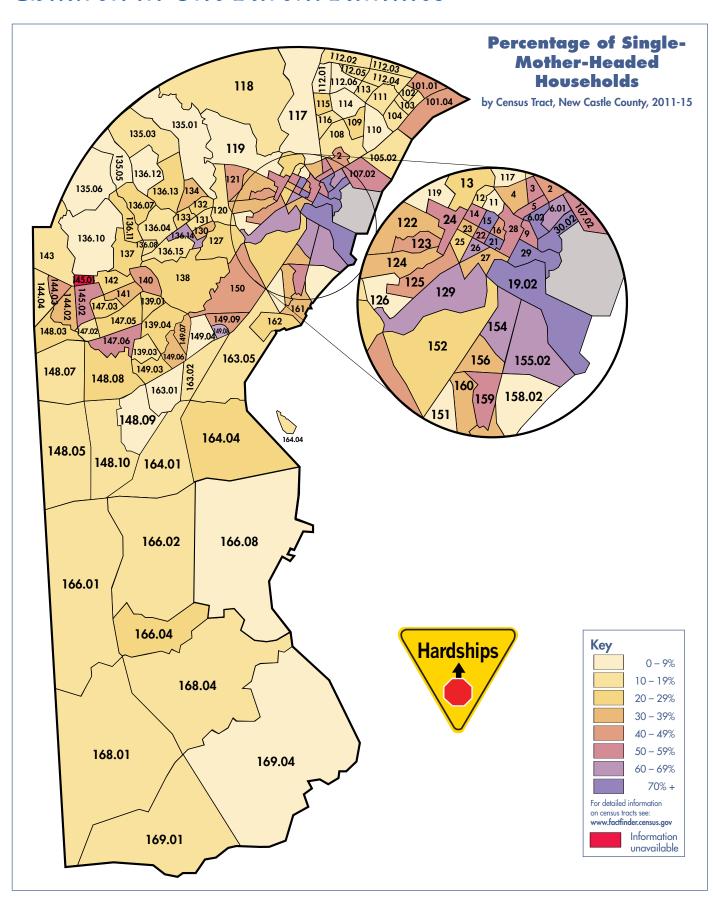


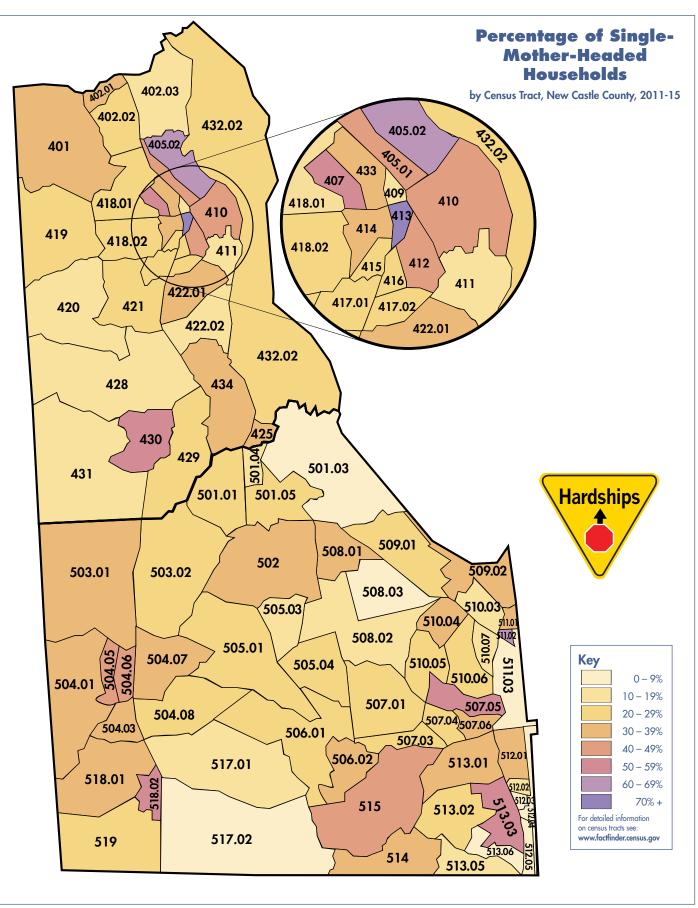








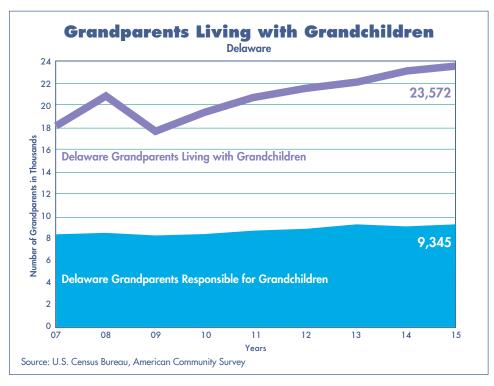




Children Living with Grandparents



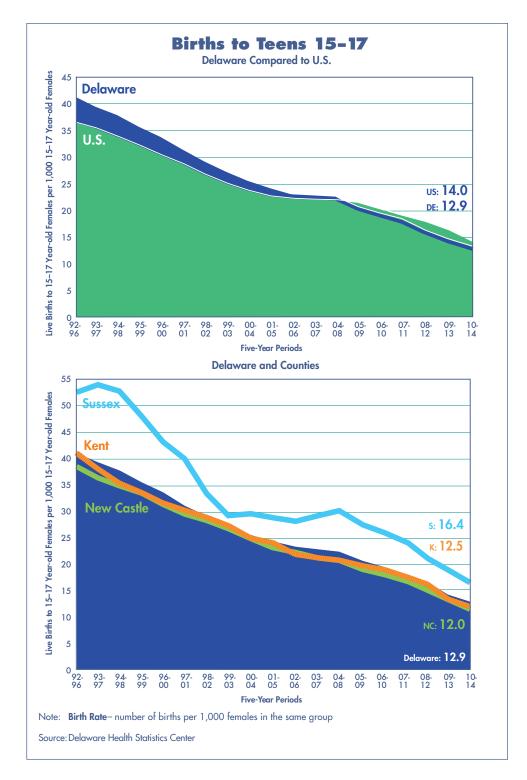
while the percentages of grandparents raising grandchildren remains low and steady, in the context of a growing youth population, they represent growing total numbers. As such, the phenomenon of children living with grandparents has received considerable attention in recent years. The relationship between grandparent and grandchild is often loving, but it can be challenging for grandparents to meet the needs of a child amidst their own potential health and stability concerns.



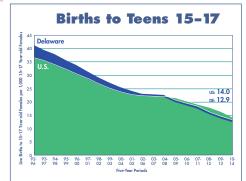
Grandparents Living with Grandchildren Delaware, Counties, and Wilmington, Five-year Estimate, 2011–2015					
Cranda aranta livina with	Delaware	New Castle	Kent	Sussex	Wilmington
Grandparents living with grandchildren under 18 years	23,572	13,959	4,832	5,145	1,840
Grandparents responsible for their grandchildren	9,345	5,219	1,793	2,333	891
Source: U.S. Census Bureau, American Community Survey					

For more information see
www.rand.org/pubs/research_briefs/RB5030/
index1.html
www.dhss.delaware.gov/dhss/dsaapd/

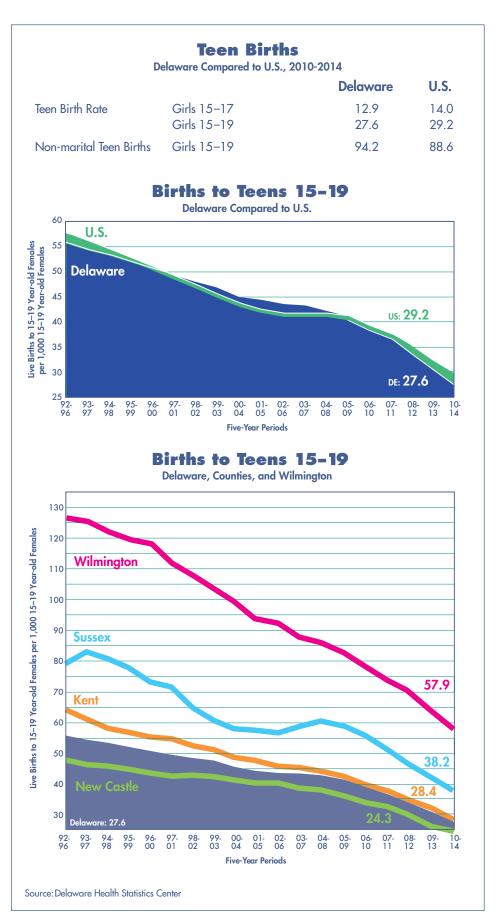


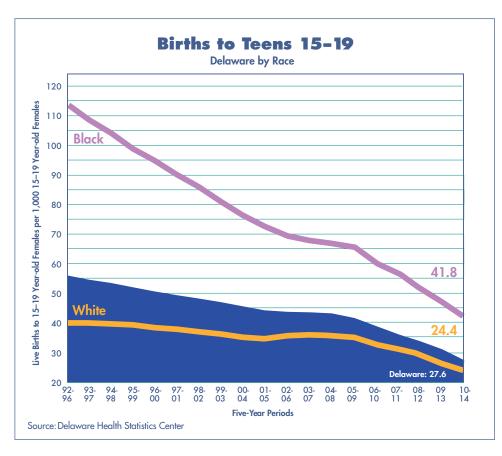


The impact of teen pregnancy is widespread and far reaching across individuals and communities. Teen mothers experience limited opportunities compared to their peers who delay childbearing, and as a result they are more likely to drop out of school, live in poverty, and rely on public assistance. Children born to teenage mothers are also likely to face numerous negative outcomes: they are more likely to have a low birth weight, experience health and developmental delays, have higher rates of infant mortality, and be at an increased risk for abuse and neglect. Teenage parenthood has immense impacts on the community at large, including placing a financial burden on society due to lost tax revenue, and increasing the costs of public assistance and child health care. Teen pregnancy and teenage parenthood are substantial issues for individuals, families, and communities.

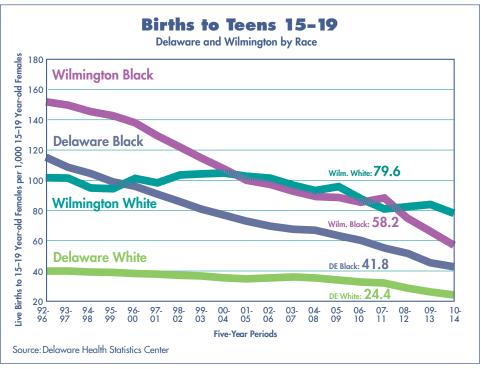


The overall birth rate for Delaware teens, both ages 15-17 and ages 15-19, is lower than the United States rate. Birth rates for teens in Sussex County, as well as in the City of Wilmington, are coming down but continue to be much higher than the Delaware rate.



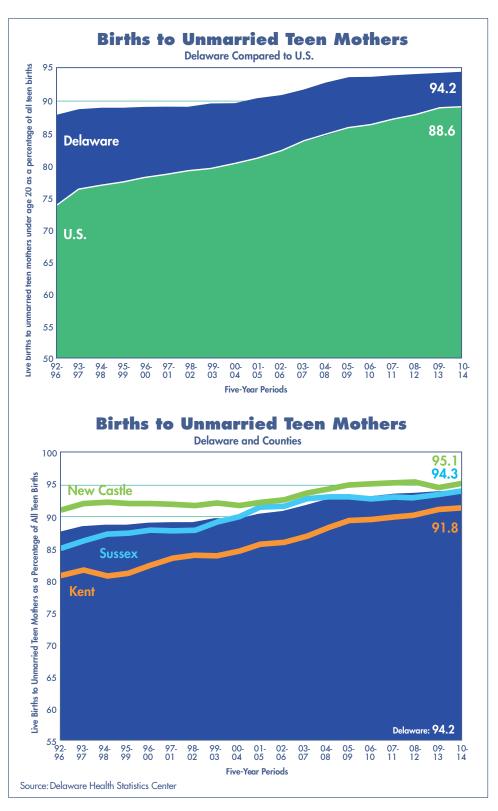




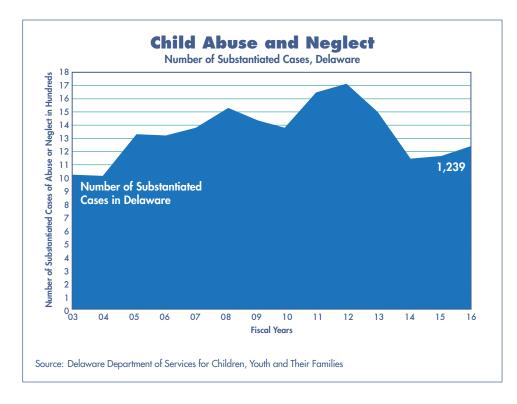


For more information see
www.teenpregnancy.org
www.plannedparenthood.org
www.guttmacher.org/sections/pregnancy.php

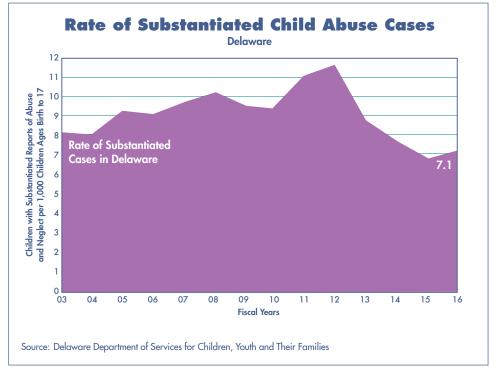




Child Abuse and Neglect



hild abuse is the maltreatment or neglect of a child that results in any non-accidental harm or injury. Abuse comes in a number of forms of maltreatment including physical and emotional abuse or neglect, verbal abuse, and sexual abuse. The long-term impacts can last a lifetime, especially if left untreated. Abuse and neglect have far-reaching physical, social, and emotional effects within a community and can cause problems in youth including depression, impaired growth, learning difficulties, low school achievement, juvenile delinquency, substance abuse, and sometimes suicide. States set their own legal abuse definitions of child abuse and neglect within existing federal legal standards.



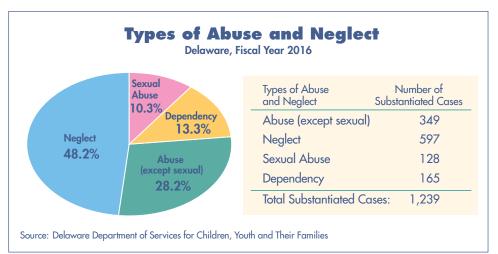
Substantiation:

As defined in 16 Del.C. means a finding by a preponderance of the evidence that child abuse or neglect has occurred. The finding is made after an investigation by the Division of Family Services. In addition, substantiation may occur through a civil child welfare proceeding, a criminal judicial proceeding, or failure to request an appeal of the Division's intent to substantiate within the specified time frame.



Child Abuse and Neglect





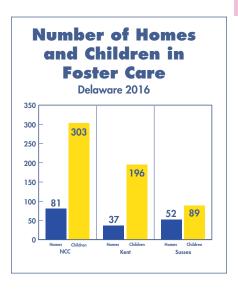


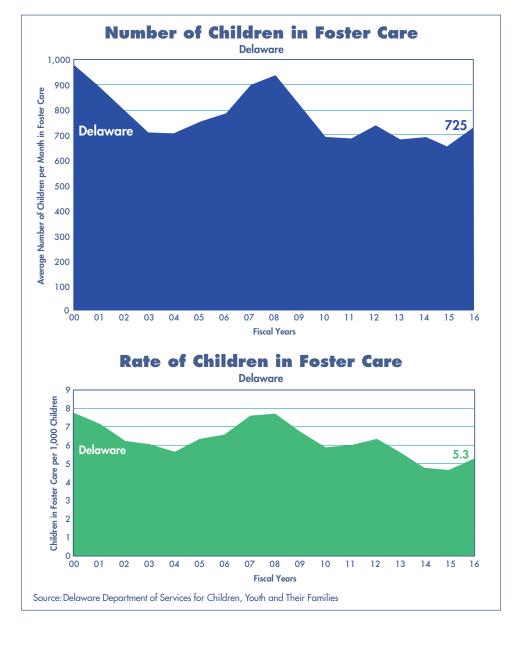


For more information see www.preventchildabuse.org To report suspected abuse or neglect: 1-800-292-9582

Foster Care

he parent-child relationship is one of the most fundamental relationships in a child's life. In most families, the parent-child relationship develops as a result of regular, ongoing interactions and this continuous contact serves as a stabilizing force that promotes children's healthy development, fostering their sense of belonging, security and self-assurance. While this scenario is common for many children, the ongoing relationship is disrupted for children placed in foster care. Children in foster care are presented with considerable challenges. Abuse, neglect, and unsuitable home environments are issues faced by children across the United States every day. Foster care provides temporary residential care in another home for children who have been removed from their own home due to physical, emotional or sexual abuse or neglect. The ultimate goal of foster care is for most foster children to return to their parent(s) when the circumstances that led them to be removed from their home have been resolved. When a return to their parents or caretaker is not possible, a permanent home for the child is sought through adoption.





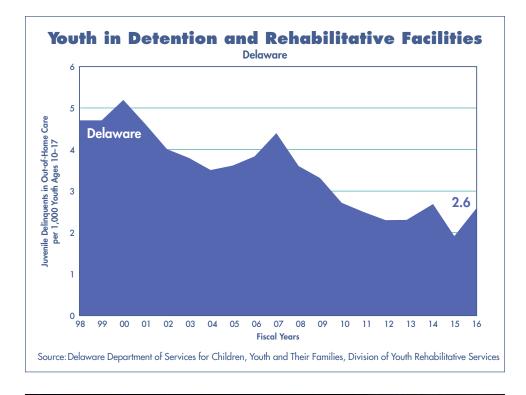




Juvenile Delinquents

ommunities across America are impacted by the negative effects of juvenile delinquency. Juvenile delinquency is a legal term that refers to any offense in violation of the state, federal, or local law by a person under the age of 18. There are a number of juvenile justice intervention programs designed to reduce delinquency, ease overcrowding in juvenile detention centers, and to reduce dependence on residential treatment programs by young people considered delinquent.

To address these issues, states establish divisions to provide services to youth who have been delinquent and ordered by the court system to receive special attention. In Delaware, the Division of Youth Rehabilitative Services provides secure detention in special care facilities, 24-hour custodial care, and treatment for incarcerated and adjudicated youth. The Division also provides, through secure care, appropriate education, treatment, counseling, recreation, vocational training, medical care, and family-focused case management for youth in secure residential facilities. All services are aimed at decreasing recidivism and increasing public safety in order to reduce juvenile delinquency and create more secure communities.





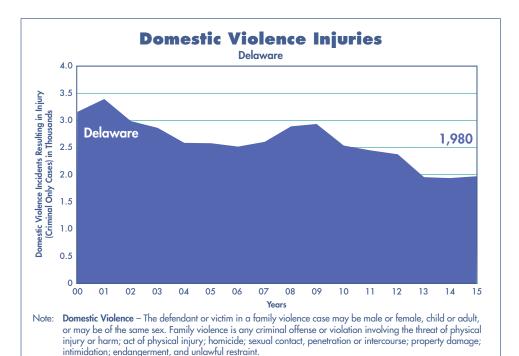
For more information see www.ediji.org http://kids.delaware.gov/yrs/yrs_MainPage/ yrs.shtml





Domestic Violence

Unfortunately for some, it can be a place of love, safety, security and shelter. Unfortunately for some, it can be a place of fear and violence. Witnessing or being the victim of domestic violence can have profound emotional, developmental, and physical consequences for children. The extreme to which the child experiences these consequences can be related to the frequency and severity of the violence, the time elapsed since the event, and the child's personality. According to the American bar Association, many children, victims and witnesses of domestic violence exhibit signs of post traumatic stress disorder. Symptoms may be directed outward and can include inability to sleep through the nights, bed wetting, and temper tantrums, or they may be directed inward and shown by the child being shy or withdrawn. School age-children who experience domestic violence tend to have poor academic performance, are absent frequently, and have health problems. Domestic violence is a serious issue that can have a severe impact on many aspects of a child's development.



Source: Domestic Violence Coordinating Council, Department of Public Safety, Division of State Police



Adverse Childhood Experiences Two or more odverse family experiences 22.8% One odverse family experiences 27.6% Source: National Survey of Children's Health, NSCH 2011/12, www.childhealthdata.org

Domestic Incident Reports
Delaware, 2015

Criminal only: 13,694

Combined criminal/non-criminal: 22,678

Deaths as a result of domestic violence in 2015: 8 deaths

Source: Delaware State Bureau of Identification

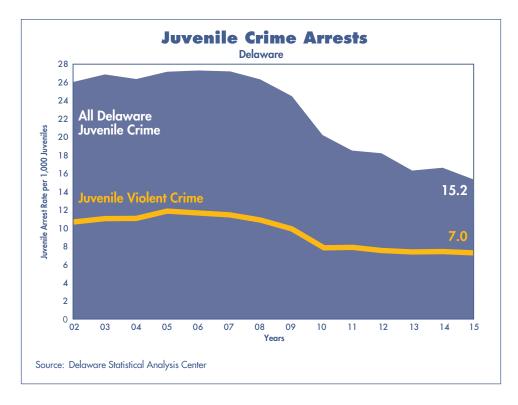


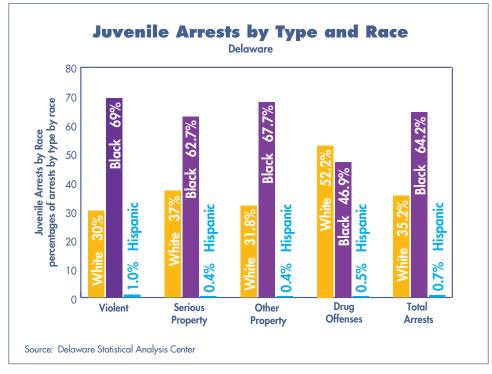
For more information see www.dvcc.delaware.gov www.stoptheviolence.org

Juvenile Violent Crime Arrests

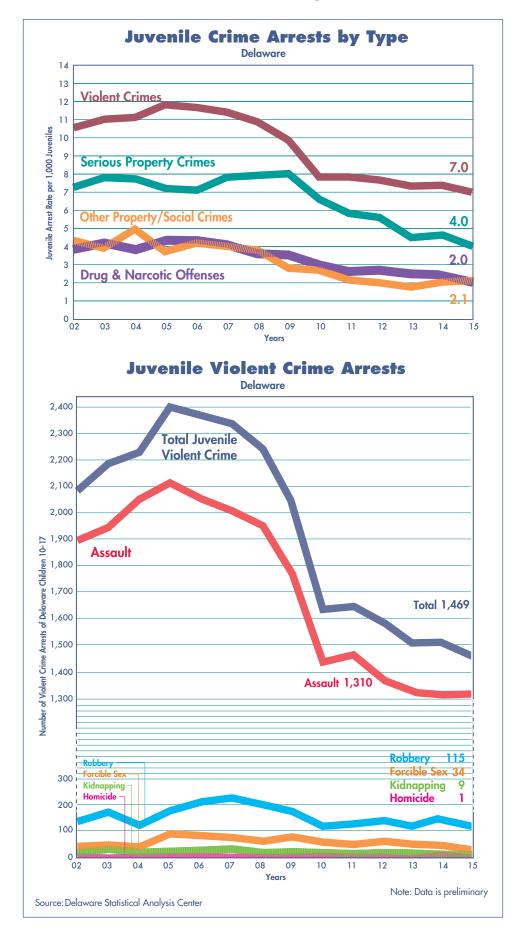
liolent crime among youth is a serious issue that affects both individuals and communities. The level of youth violence in a society can be a good indicator of the ability of young people to control their behavior, and also of the ability of the socializing agents such as families, peers, schools, and religious institutions to supervise and influence behavior. Participation in criminal behavior may have immediate negative effects on physical, social, emotional and academic development, in addition to lasting impacts into the child's adult life. Violent crime is classified into four offenses, all of which use the threat of force: murder, forcible rape, robbery and aggravated assault. Poor and minority children face risks and disadvantages that make them especially susceptible to criminal behavior. Advocates argue that in order to address youth violence, society should focus on pulling families out of poverty, providing children with adequate health care, improving access to quality education for all children, preventing child abuse and neglect, protecting children from domestic and community violence, and giving children support and guidance as needed. Focusing on these issues may be a step forward in reducing violent crime among juveniles.







Juvenile Violent Crime Arrests





In Delaware, 15,000 kids have had a parent in jail or prison at some point in their childhood. After accounting for effects associated with demographic variables such as race and income, we found that parental incarceration was associated with: a higher number of other major, potentially traumatic life events—stressors that are most damaging when they are cumulative; more emotional difficulties, low school engagement, and more problems in school, among children ages 6 to 11; and a greater likelihood of problems in school among older youth (12 to 17), as well as less parental monitoring.

Source: http://www.aecf.org/m/resourcedoc/aecf-asharedsentence-2016.pdf

https://www.childtrends.org/wp-content/uploads/2015/10/2015-42ParentsBehindBars.pdf

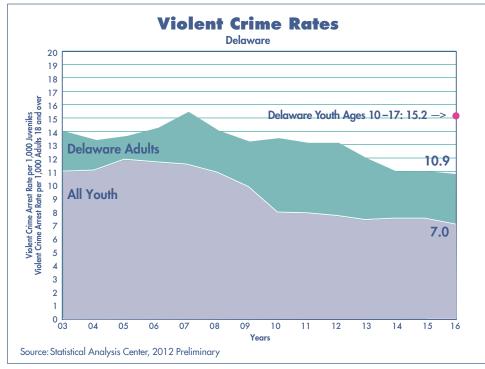


Adult Crime



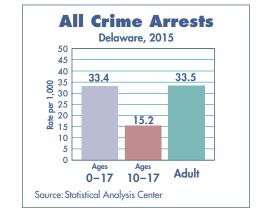
dult crime impacts individuals, families, and entire communities. Families of inmates face challenges such as lack of financial support and social alienation related to the stigma of having a family member in prison.

Children in particular may experience extreme difficulties during a period of parental incarceration. The psychological and emotional implications for these youth include trauma, anxiety, guilt, shame, and fear. Additionally, their behavior may change to include sadness, withdrawal, low self-esteem, decline in school performance, truancy, use of drugs or alcohol, and aggression. In some instances, changes in behavior may progress to a level of delinquency which can potentially lead to a cycle of inter-generational incarceration. Adult crime and incarceration can have great costs to the children and families involved, as well as have consequences for society at large.





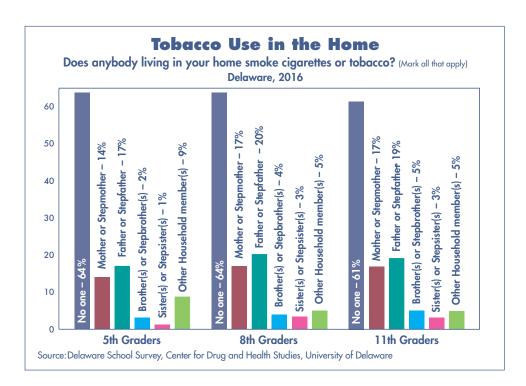
For more information see www.millionmommarch.com www.socialchangenow.org www.bbbsde.org





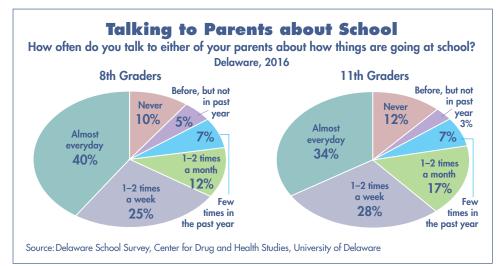
Family, Environment and Resources

hildren's long-term development and success can greatly depend on the support and care they receive at home from their family. A stable and family environment in which all family members care for and appreciate each other is the most beneficial to a child. In addition to meeting the basic needs of food, shelter, and clothing, an optimal family environment might include the following qualities: members with unconditional love for each other; parents spending time with their children; parents listening to their children; parents serving as good role models, understanding that children learn from what they see happening; and parents who value education. These values are key to creating an environment that is the most conducive to positive outcomes for the child.









Family, Environment and Resources

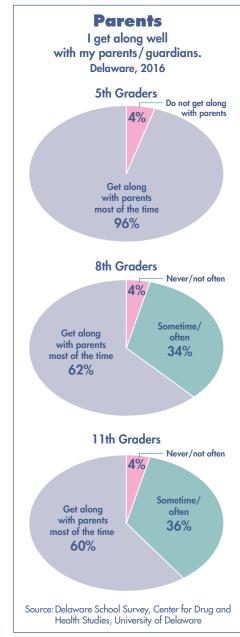


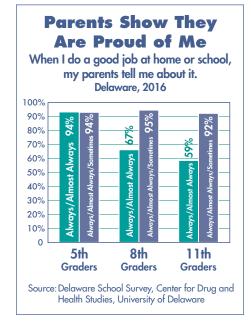
Parental Involvement and Alcohol Use

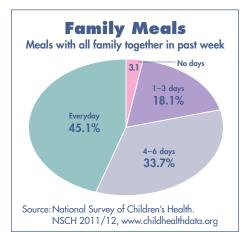
Past Year, Delaware 11th Graders, 2016

- **7%** Reported their parents asked parents hosting a party if alcohol would be served.
- 14% Reported parents asked parents hosting the party if they would be present at party.
- 16% Reported parents called other parents to check up on student.
- 45% Reported parents offered to pick them up if they needed a safe ride home.
- 57% Reported parents told them to call to let them know where they were.
- 37% of binge drinkers and 47% of heavy binge drinkers reported they had been to a party where parents bought alcohol for the kids, versus 5% of non-drinkers*.

^{*} In this section non drinkers are reported as student who did not drink Source: Delaware School Survey, Center for Drug and Health Studies, University of Delaware



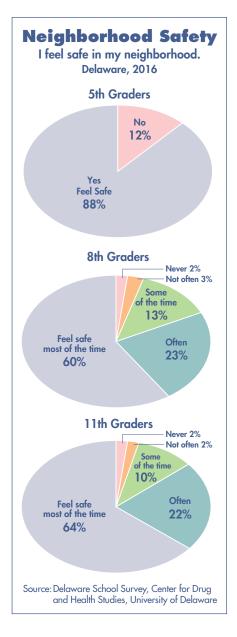




For more information see
www.udel.edu/cdas/
www.state.de.us/drugfree/dfd_data.html
www.udel.edu/delawaredata/



elaware's nonprofit sector is a vibrant social and economic force within in the state. The sector employs thousands and allows for many families, adults, and children to receive important services. Delaware's nonprofit sector also provides many opportunities for volunteers to become involved and make a difference within their communities.









Community Libraries



- 10. Elsmere Public Library 30 Spruce Ave., Elsmere, DE 19805
- 11. Frankford Public Library

8 Main St., Frankford, DE

- **12.** Garfield Park Library 26 Karlyn Drive, New Castle, DE 19720
- 13. Georgetown Public Library

123 W. Pine Street, Georgetown, DE 19947

14. Greenwood Public Library 100 Mill St., Greenwood,

Delaware 19950

15. Harrington Public Library

110 E. Center St., Harrington, DE 19952

16. Hockessin Public Library

1023 Valley Rd., Hockessin, DE 19707

17. Kent County Public **Library**

497 South Red Haven Lane, Dover, DE 19901

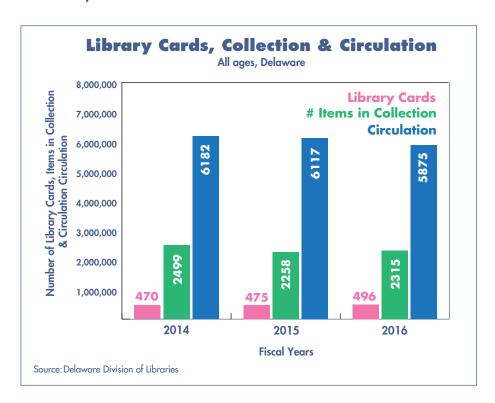
- **18.** Kirkwood Library 6000 Kirkwood Highway, Wilmington, DE 19808
- 19. Laurel Public Library 101 E. 4th St., Laurel, DE 19956
- **20.** Lewes Public Library 111 Adams St., Lewes, DE 19958
- **21.** Milford Public Library 11 S.E. Front St., Milford, DE 19963
- **22.** Millsboro Public Library

217 W. State St., Millsboro, DE 19966

- **23.** Milton Public Library 121 Union St., Milton, DE 19968
- **24.** New Castle Public Library 424 Delaware St., New Castle, DE 19720
- **25.** Newark Free Library 750 Library Ave., Newark, DE 19711
- 26. Rehoboth Beach **Public Library** 227 Rehoboth Ave, Rehoboth Beach, DE 19971
- 27. Seaford District Library 600 N. Market St. Ext., Seaford, DE 19973
- **28.** Selbyville Public Library 11 Main & McCabe St., P.O. Box 739, Selbyville, DE
- **29.** Smyrna Public Library 107 Main St., Smyrna, DE 19977
- **30.** South Coastal Public Library 43 Kent Avenue, Bethany Beach, DE 19930
- **31.** Wilmington Public Library 10 E 10th Street, Wilmington, DE 19801
- **32.** Wilmington Public Library- North Branch 3400 N. Market St., Wilmington, DE 19802
- 33. Woodlawn Public Library 2020 W. 9th St., Wilmington, DE 19805

Community Libraries

bublic libraries are essential components of the infrastructure in our state which reflect the diversity, character, needs and expectations of a community. They build & support community, promote arts, champion youth, are gathering places diverse populations and allow access to all the world's knowledge. Public libraries are unique and valuable resources. Yet, public libraries are often undervalued in an increasingly digital world. That said, Delaware Libraries single technology infrastructure was lauded as good government during the recession. The digital infrastructure supports statewide partnerships- currently more than 130 partner organizations work with libraries to serve the diverse community needs.

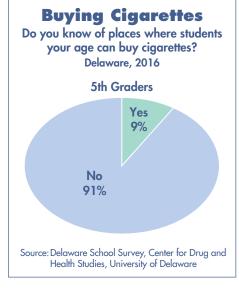


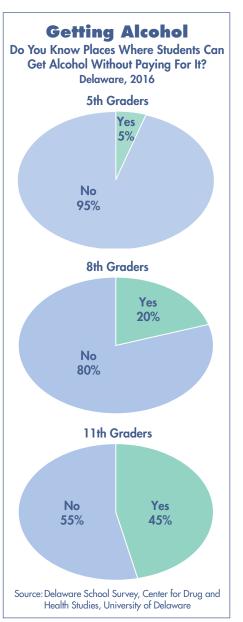


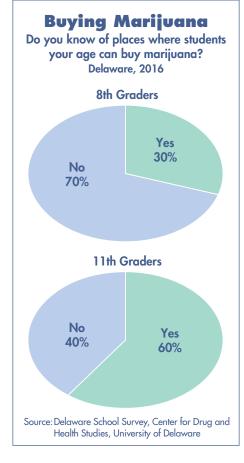


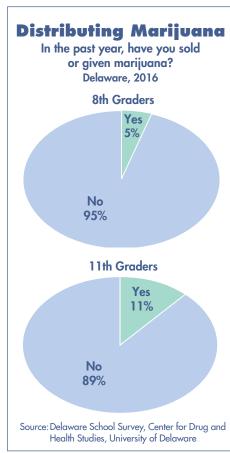






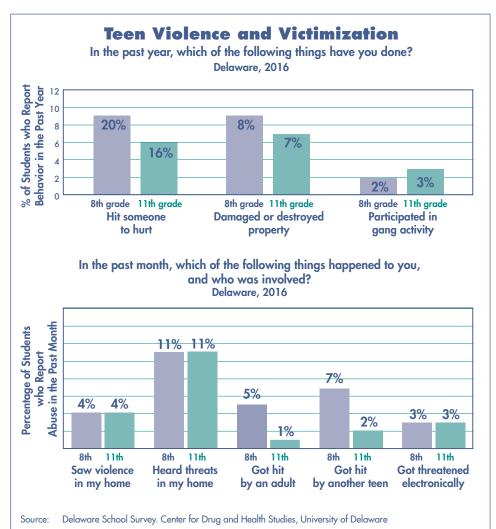












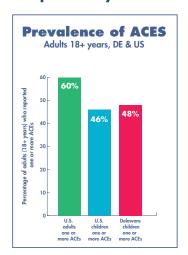


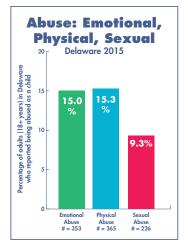


Teens Not Drinking Who/What had the most influence on your decision NOT to drink in the past year? Delaware 11th Graders, 2011 The media Other kishool Other dollars of the past year? Close Friends 7% 11% Adults at school 11% Source: CDC 2011 Youth Risk Behavior Survey, Center for Drug and Health Studies, University of Delaware

For more information see
www.udel.edu/cdas/
www.udel.edu/delawaredata/
www.state.de.us/drugfree/dfd_data.html

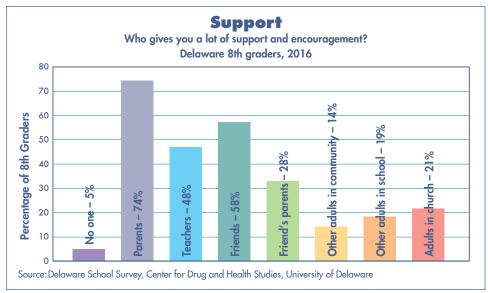
ACEs Reported by Adults18 + years in Delaware & U.S.

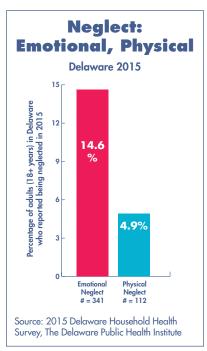


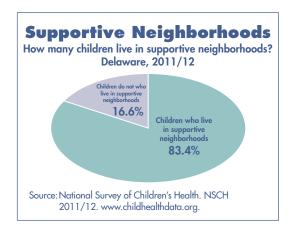


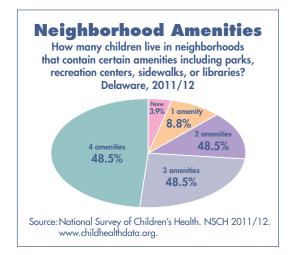
Source: 2015 Delaware Household Health Survey, The Delaware Public Health Institute















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Table 1:

Population of Children

Population Estimates for Ages 0 to 21 by Sex and Race/Ethnicity, Delaware, July 1, 2016

Gender/ Age	White Non-Hispanic	Black Non-Hispanic	Other Non-Hispanic	Hispanic	Total	Gender/ Age	White Non-Hispanic	Black Non-Hispanic	Other Non-Hispanic	Hispanic	Total
Femal	e					Male					
0	3093	1408	336	738	5575	0	3158	1435	343	759	5695
1	2893	1397	340	736	5366	1	2950	1418	350	756	5474
2	2879	1472	339	677	5367	2	2936	1494	348	696	5474
3	3065	1461	342	700	5568	3	3125	1482	352	719	5678
4	3065	1520	349	712	5646	4	3126	1543	359	731	5759
5	2631	1346	710	902	5589	5	2808	1403	642	975	5828
6	2718	1329	716	853	5616	6	2868	1433	634	999	5934
7	2785	1444	701	959	5889	7	2885	1439	615	1034	5973
8	2810	1371	697	991	5869	8	2967	1425	629	979	6000
9	2950	1360	661	941	5912	9	3028	1387	633	1038	6086
10	2912	1352	655	947	5866	10	2955	1405	622	994	5976
11	2910	1410	682	879	5881	11	3112	1412	584	950	6058
12	2972	1329	592	911	5804	12	3031	1420	585	960	5996
13	2883	1381	599	771	5634	13	3098	1455	586	895	6034
14	3132	1488	604	737	5961	14	3298	1453	561	837	6149
15	3070	1514	603	779	5966	15	3291	1561	557	827	6236
16	3147	1504	556	713	5920	16	3284	1554	463	695	5996
17	3209	1497	520	638	5864	17	3345	1564	514	744	6167
18	3251	1490	517	614	5872	18	3253	1512	453	671	5889
19	3345	1488	502	601	5936	19	3444	1562	482	675	6163
20	3330	1497	438	584	5849	20	3345	1558	499	680	6082
21	3362	1602	481	644	6089	21	3478	1627	437	673	6215

Note: 1. Estimates for ages 0-21 for the Counties and the City of Wilmington are available at http://stateplanning.delaware.gov/information/dpc_projections.shtml Source: Delaware Population Consortium, Population Projection Series, Version 2016.0

Table 2:

Delaware Population

Population Estimates by Sex and Race/Ethnicity for Delaware and Counties, 2016

Area/Sex/Race	0-4	5-9	10-14	15-19	20-64	65+	Total	% 0-19	% 20-64	% 65 +	% Total
Delaware	55,602	58,696	59,359	60,009	560,893	159,518	954,077	24.5%	58.8%	16.7%	100.0%
Male	28,000	29,821	30,213	30,451	273,992	69,896	462,453	12.4%	28.7%	7.3%	48.5%5
White Non-Hispanic	15,295	14,556	15,494	16,617	172,239	56,044	290,245	6.5%	18.1%	5.9%	30.4%
Black Non-Hispanic	7,372	7,087	7,145	7,753	58,015	9,613	96,985	3.1%	6.1%	1.0%	10.2%
Other Non-Hispanic	1,752	3,153	2,938	2,469	16,336	2,354	29,002	1.1%	1.7%	0.2%	3.0%
Hispanic	3,661	5,025	4,636	3,612	27,402	1,885	46,221	1.8%	2.9%	0.2%	4.8%
Female	27,522	28,875	29,146	29,558	286,901	89,622	491,624	12.1%	30.1%	9.4%	51.5%
White Non-Hispanic	14,995	13,894	14,809	16,022	179,242	70,588	309,550	6.3%	18.8%	7.4%	32.4%
Black Non-Hispanic	7,258	6,850	6,960	7,493	65,659	13,687	107,907	3.0%	6.9%	1.4%	11.3%
Other Non-Hispanic	1,706	3,485	3,132	2,698	18,631	3,237	32,889	1.2%	2.0%	0.3%	3.4%
Hispanic	3,661	5,025	4,636	3,612	27,402	1,885	46,221	1.8%	2.9%	0.2%	4.8%
New Castle	32,989	34,021	34,603	35,536	341,044	81,954	560,147	14.4%	35.7%	8.6%	58.7%
Male	16,689	17,312	17,669	18,163	166,966	35,232	272,031	7.3%	17.5%	3.7%	28.5%
White Non-Hispani	c 8,516	7,727	8,205	9,057	98,569	26,416	159,490	3.5%	10.3%	2.8%	16.7%
Black Non-Hispanic	4,814	4,566	4,683	5,143	38,677	6,010	63,893	2.0%	4.1%	0.6%	6.7%
Other Non-Hispani	c 1,424	2,069	1,939	1,555	12,268	1,612	20,867	0.7%	1.3%	0.2%	2.2%
Hispanic	1,935	2,950	2,842	2,408	17,452	1,194	28,781	1.1%	1.8%	0.1%	3.0%
Female	16,300	16,709	16,934	17,373	174,078	46,722	288,116	7.1%	18.2%	4.9%	30.2%
White Non-Hispani	c 8,314	7,366	7,888	8,634	101,877	34,659	168,738	3.4%	10.7%	3.6%	17.7%
Black Non-Hispania	4,720	4,478	4,472	4,993	43,971	8,792	71,426	2.0%	4.6%	0.9%	7.5%
Other Non-Hispani	c 1,380	2,247	2,004	1,662	13,348	2,006	22,647	0.8%	1.4%	0.2%	2.4%
Hispanic	1,886	2,618	2,570	2,084	14,882	1,265	25,305	1.0%	1.6%	0.1%	2.7%
Kent	11,218	12,439	13,038	13,279	102,636	22,500	175,110	5.2%	10.8%	2.4%	18.4
Male	5,609	6,288	6,549	6,647	49,311	9,439	83,843	2.6%	5.2%	1.0%	8.8%
White Non-Hispani	c 3,450	3,485	3,860	4,003	31,587	6,577	52,962	1.6%	3.3%	0.7%	5.6%
Black Non-Hispania	1,486	1,517	1,482	1,641	11,857	2,189	20,172	0.6%	1.2%	0.2%	2.1%
Other Non-Hispani	c 197	574	541	515	2,348	369	4,544	0.2%	0.2%	0.0%	0.5%
Hispanic	476	712	666	488	3,519	304	6,165	0.2%	0.4%	0.0%	0.6%
Female	5,609	6,151	6,489	6,632	53,325	13,061	91,267	2.6%	5.6%	1.4%	9.6%
White Non-Hispani	c 3,451	3,361	3,676	3,959	32,857	8,906	56,210	1.5%	3.4%	0.9%	5.9%
Black Non-Hispania	1,497	1,393	1,552	1,559	13,767	2,964	22,732	0.6%	1.4%	0.3%	2.4%
Other Non-Hispani	c 198	669	594	566	3,255	733	6,015	0.2%	0.3%	0.1%	0.6%
Hispanic	463	728	667	548	3,446	458	6,310	0.3%	0.4%	0.0%	0.7%
Sussex	11,395	12,236	11,718	11,194	117,213	55,064	218,820	4.9%	12.3%	5.8%	22.9%
Male	5,782	6,221	5,995	5,641	57,715	25,225	106,579	2.5%	6.0%	2.6%	11.2%
White Non-Hispani	ic 3,329	3,344	3,429	3,557	42,083	23,051	78,793	1.4%	4.4%	2.4%	8.3%
Black Non-Hispanic	1,072	1,004	980	969	7,481	1,414	12,920	0.4%	0.8%	0.1%	1.4%
Other Non-Hispani	c 131	510	458	399	1,720	373	3,591	0.2%	0.2%	0.0%	0.4%
Hispanic	1,250	1,363	1,128	716	6,431	387	11,275	0.5%	0.7%	0.0%	1.2%
Female	5,613	6,015	5,723	5,553	59,498	29,839	112,241	2.4%	6.2%	3.1%	11.8%
White Non-Hispani		3,167	3,245	3,429	44,508	27,023	84,602	1.4%	4.7%	2.8%	8.9%
Black Non-Hispania		979	936	941	7,921	1,931	13,749	0.4%	0.8%	0.2%	1.4%
Other Non-Hispani		569	534	470	2,028	498	4,227	0.2%	0.2%	0.1%	0.4%
Hispanic	1,214	1,300	1,008	713	5,041	387	9,663	0.4%	0.5%	0.0%	1.0%
B	1 1		and the second								

Table 3:

Number of Children by Age in Census Tracts in New Castle County

Number of Children and Total Population by Census Tract New Castle County, Five-year Average Estimates, 2011–2015

	New Cu	sile Coully, I iv	ve-yeur Average	E Laminules, 20	11-2013	
Census Tract	Under 5 years	5 to 9 years	10 to 14 years	15 to 19 years	Total under 19 years	Total Pop.
2	405	649	559	350	1963	6581
3	280	223	224	174	901	2949
4	120	93	111	184	508	2901
5	160	93	210	224	687	3040
6.01	208	210	335	237	990	3076
6.02	282	169	132	183	766	3386
9	24	92	206	75	597	1921
11	146	9	57	17	229	3151
12	66	19	0	26	111	1627
13	223	127	185	192	727	3617
14	31	127	184	118	460	2390
15	09	46	34	98	287	1932
16	119	94	99	119	431	2154
19.02	129	127	57	95	408	1772
21	214	149	152	152	667	2054
22	416	249	206	196	1067	2931
23	317	188	206	344	1055	3273
24	313	217	439	354	1323	4871
25	144	251	167	102	664	3014
26,	422	390	294	288	1394	4040
27	160	177	121	113	571	2449
28	96	53	66	51	266	1643
29	523	354	216	112	1205	3616
30.02	280	304	167	159	910	3161
101.01	286	448	322	195	1251	4365
101.04	449	295	190	130	1064	3859
102	68	66	150	157	441	2014
103	266	310	204	203	983	3174
104	344	289	169	196	998	4592
105.02	462	493	325	246	1526	6308
107.02	413	265	293	432	1403	5451
108		0.55	0.50	200	1120	5025
100	317	255	250	308	1130	5025

kids count

Source: American Community Survey

continued next page

Table 3, continued (page 2 of 4):

Number of Children and Total Population by Census Tract New Castle County, Five-year Average Estimates, 2011–2015

Census Tract	Under 5 years	5 to 9 years	10 to 14 years	15 to 19 years	Total under 19 years	Total Pop.
110	110	279	92	187	668	3139
111	82	74	170	173	499	2789
112.01	168	115	91	127	501	2321
112.02	285	267	153	267	972	4329
112.03	272	177	132	236	817	4513
112.04	62	220	227	210	719	3257
112.05	54	175	118	180	527	2026
112.06	265	378	237	275	1155	4360
113	92	156	90	142	480	2192
114	187	194	210	132	723	3277
115	236	143	137	254	770	2946
116	281	235	208	153	877	3461
117	279	195	239	128	841	3916
118	207	167	192	142	708	3949
119	152	273	327	253	1005	3473
120	210	360	249	381	1200	4737
121	135	143	98	317	693	2771
122	261	287	257	501	1306	4659
123	168	248	148	196	760	2896
124	302	341	317	255	1215	4438
125	477	274	342	169	1262	5446
126	236	182	31	123	572	2622
127	161	146	233	200	740	4144
129	454	446	284	302	1486	4668
130	89	93	100	83	365	1790
131	114	108	107	102	431	2118
132	234	148	177	196	755	2723
133	134	60	70	64	328	1747
134	83	177	128	156	544	2552
135.01	185	406	256	309	1156	6354
135.03	432	463	463	509	1867	7221
135.05	78	123	273	242	716	2993
135.06	193	215	348	359	1115	4603
136.04,	268	268	195	177	908	4075
136.07	172	384	303	157	1016	5227

Source: American Community Survey

Table 3, continued (page 3 of 4):

Number of Children and Total Population by Census Tract New Castle County, Five-year Average Estimates, 2011–2015

		isine coomy, in	,	•		
Census Tract	Under 5 years	5 to 9 years	10 to 14 years	15 to 19 years	Total under 19 years	Total Pop.
136.08	198	95	172	77	542	2067
136.10	310	288	395	470	1463	6017
136.11	156	221	260	215	852	5435
136.12	197	406	541	267	1411	6257
136.13	268	420	394	442	1524	5873
136.14	168	189	397	188	942	3360
136.15	309	206	162	203	880	3855
137	247	268	151	139	805	3777
138	174	266	185	215	840	5056
139.01	211	198	215	227	851	3320
139.03	285	289	279	432	1285	4993
139.04	604	461	571	376	2012	8373
140	307	244	327	267	1145	5372
141	353	323	212	332	1220	4742
142	140	121	141	78	480	2057
143	143	139	188	1642	2112	6715
144.02	228	139	105	133	605	3667
144.03	180	156	251	1742	2329	6073
144.04	156	132	200	157	645	3819
145.01	0	0	0	98	98	2219
145.02	7	20	48	2658	2733	5742
147.02	139	119	106	134	498	1909
147.03	288	1 <i>7</i> 7	220	299	984	4830
147.05	225	253	356	278	1112	4910
147.06	128	328	274	318	1048	3167
148.03	98	186	134	154	572	3817
148.05	398	845	784	662	2689	9710
148.07	495	511	575	763	2344	8748
148.08	244	346	634	325	1549	6274
148.09	701	471	506	342	2020	7985
148.10	377	471	332	473	1653	7385
149.03	500	713	574	651	2438	7253
149.04	273	334	125	418	1150	4788
149.06	364	370	265	193	1192	4606
149.07	376	365	370	339	1450	5007

kids

Source: American Community Survey continued next page

Table 3, continued (page 4 of 4):

Number of Children and Total Population by Census Tract New Castle County, Five-year Average Estimates, 2011–2015

Census Tract	Under 5 years	5 to 9 years	10 to 14 years	15 to 19 years	Total under 19 years	Total Pop.
149.08	214	160	139	44	557	2193
149.09	656	712	512	248	2128	6539
150	470	383	275	301	1429	5724
151	158	158	290	168	774	3478
152	560	365	408	236	1569	6054
154	141	311	305	251	1008	3065
155.02	205	259	195	262	921	2940
156	129	218	177	182	706	2746
158.02	148	150	137	164	599	2157
159	265	235	313	167	980	3668
160	230	178	171	241	820	3086
161	87	78	39	79	283	1748
162	115	83	89	230	517	2842
163.01	477	212	139	244	1072	5205
163.02	488	429	729	605	2251	7553
163.05	520	375	608	568	2071	8198
164.01	330	411	552	449	1742	6610
164.04	227	251	250	195	923	3390
166.01	800	972	935	946	3653	11981
166.02	435	569	723	417	2144	7537
166.04	640	1309	1363	1236	4548	12586
166.08	297	247	368	300	1212	4642
168.01	525	645	406	460	2036	6168
168.04	454	570	727	661	2412	7417
169.01	92	75	118	180	465	2097
169.04	63	61	64	1 <i>7</i> 5	363	4215

Source: American Community Survey

Table 4:

Number of Children by Age in Census Tracts in Kent County

Number of Children and Total Population by Census Tract Sussex County, Five-year Average Estimates, 2011–2015

Census Tract	Under 5	5 to 9	10 to 14	15 to 19	Total under	Total Pop.
censos naci	years	years	years	years	19 years	ioidi i op.
401	62	483	607	434	1586	6492
402.01	328	415	390	240	1373	5203
402.02	928	1259	975	1090	4252	14528
402.03	523	421	413	256	1613	5796
405.01	115	317	428	224	1084	4692
405.02	71	93	142	81	387	2026
407	379	151	290	263	1083	4478
409	58	77	45	628	808	2804
410	393	549	346	173	1461	6595
411	656	303	217	196	1372	3820
412	426	350	407	363	1546	4734
413	271	285	23	97	676	2247
414	378	136	82	107	703	3622
415	343	171	249	379	1142	4255
416	93	100	132	123	448	1989
417.01	246	291	526	311	1374	5981
417.02	393	341	389	286	1409	5014
418.01	562	711	602	876	2751	10086
418.02	480	281	448	390	1599	5407
419	290	273	331	382	1276	5186
420	84	211	173	263	731	2953
421	238	227	337	312	1114	4035
422.01	521	1002	871	549	2943	10556
422.02	726	716	636	594	2672	9243
425	326	180	210	146	862	3201
428	542	428	513	404	1887	7156
429	196	276	398	239	1109	4888
430	388	427	548	297	1660	5632
431	154	116	210	169	649	2783
432.02	234	170	200	182	786	3551
433	240	180	155	1672	2247	5926
434	398	222	293	121	1034	4630

Source: American Community Survey



Table 5:

Number of Children by Age in Census Tracts in Sussex County

Number of Children and Total Population by Census Tract Sussex County, Five-year Average Estimates, 2011–2015

Census Tract	Under 5 years	5 to 9 years	10 to 14 years	15 to 19 years	Total under 19 years	Total Pop.
501.01	156	195	232	279	862	3610
501.03	239	202	236	218	895	4408
501.04	340	262	381	184	1167	4553
501.05	417	497	522	425	1861	6222
502	245	273	293	331	1142	3661
503.01	574	639	394	546	2153	8103
503.02	187	358	325	355	1225	4797
504.01	263	320	239	276	1098	3844
504.03	242	284	253	131	910	3565
504.05	229	228	249	147	853	3819
504.06	500	403	150	310	1363	4692
504.07	249	295	474	241	1259	5081
504.08	276	162	271	175	884	4373
505.01	227	183	137	186	733	3708
505.03	601	308	447	262	1618	5755
505.04	528	310	410	314	1562	6191
506.01	324	340	215	394	1273	4991
506.02	222	435	678	311	1646	6073
507.01	275	229	154	118	776	4146
507.03	112	82	72	98	364	2111
507.04	146	160	343	118	767	4156
507.05	640	247	133	125	1145	5149
507.06	9	39	62	47	157	1471
508.01	167	160	219	146	692	3304
508.02	284	201	187	262	934	4671
508.03	418	317	276	373	1384	7527
509.01	107	114	78	89	388	2342
509.02	27	152	239	178	596	4687
510.03	80	148	240	273	741	4861
510.04	111	221	162	187	681	4574
510.05	167	148	189	206	710	4568
510.06	80	151	64	66	361	3006

Source: American Community Survey

continued next page

Table 5, continued (page 2 of 2):

Number of Children and Total Population by Census Tract Sussex County, Five-year Average Estimates, 2011–2015

Census Tract	Under 5 years	5 to 9 years	10 to 14 years	15 to 19 years	Total under 19 years	Total Pop.
510.07	113	123	86	201	523	4944
511.01	10	7	7	7	31	666
511.02	5	5	3	14	27	912
511.03	9	20	32	38	99	911
512.01	70	52	12	52	186	1361
512.02	5	10	26	35	76	784
512.03	13	18	15	0	46	668
512.04	0	1	5	8	14	637
512.05	3	5	1	4	13	683
513.01	159	240	277	127	803	5748
513.02	221	172	137	187	717	3163
513.03	159	291	260	249	959	5392
513.05	67	59	49	69	244	2476
513.06	67	88	78	40	273	2622
514	415	425	246	248	1334	4339
515	395	228	402	192	1217	5099
517.01	219	266	223	207	915	4162
517.02	307	439	335	291	1372	5275
518.01	175	272	229	393	1069	4233
518.02	435	417	294	321	1467	4725
519	257	290	343	382	1272	4483

Source: American Community Survey

Table 6:

Population Who Are Children by Census Tract in New Castle County

Percentage of Population Who Are Children by Census Tract New Castle County, Five-year Average Estimates, 2011–2015

Census Tract	Percent under 5 years	Percent 5-9 years	Percent 10-14 years	Percent 15-19 years	Total Percentage 0-19 years
2	6.2	9.9	8.5	5.3	29.9
3	9.5	7.6	7.6	5.9	30.6
4	4.1	3.2	3.8	6.3	17.4
5	5.3	3.1	6.9	7.4	22.7
6.01	6.8	6.8	10.9	7.7	32.2
6.02	8.3	5	3.9	5.4	22.6
9	11.7	4.8	10.7	3.9	31.1
11	4.6	0.3	1.8	0.5	7.2
12	4.1	1.2	0	1.6	6.9
13	6.2	3.5	5.1	5.3	20.1
14	1.3	5.3	7.7	4.9	19.2
15	5.6	2.4	1.8	5.1	14.9
16	5.5	4.4	4.6	5.5	20
19.02	7.3	7.2	3.2	5.4	23.1
21	10.4	7.3	7.4	7.4	32.5
22	14.2	8.5	7	6.7	36.4
23	9.7	5.7	6.3	10.5	32.2
24	6.4	4.5	9	7.3	27.2
25	4.8	8.3	5.5	3.4	22
26	10.4	9.7	7.3	7.1	34.5
27	6.5	7.2	4.9	4.6	23.2
28	5.8	3.2	4	3.1	16.1
29	14.5	9.8	6	3.1	33.4
30.02	8.9	9.6	5.3	5	28.8
101.01	6.6	10.3	7.4	4.5	28.8
101.04	11.6	7.6	4.9	3.4	27.5
102	3.4	3.3	7.4	7.8	21.9
103	8.4	9.8	6.4	6.4	31
104	7.5	6.3	3.7	4.3	21.8
105.02	7.3	7.8	5.2	3.9	24.2
107.02	7.6	4.9	5.4	7.9	25.8
108	6.3	5.1	5	6.1	22.5

Source: American Community Survey

continued next page

Table 6, continued (page 2 of 4):

Percentage of Population Who Are Children by Census Tract New Castle County, Five-year Average Estimates, 2011–2015

Census Tract	Percent under 5 years	Percent 5-9 years	Percent 10-14 years	Percent 15-19 years	Total Percentage 0-19 years
109	5.5	2.7	7.2	5.9	21.3
110	3.5	8.9	2.9	6	21.3
111	2.9	2.7	6.1	6.2	17.9
112.01	7.2	5	3.9	5.5	21.6
112.02	6.6	6.2	3.5	6.2	22.5
112.03	6	3.9	2.9	5.2	18
112.04	1.9	6.8	7	6.4	22.1
112.05	2.7	8.6	5.8	8.9	26
112.06	6.1	8.7	5.4	6.3	26.5
113	4.2	7.1	4.1	6.5	21.9
114	5.7	5.9	6.4	4	22
115	8	4.9	4.7	8.6	26.2
116	8.1	6.8	6	4.4	25.3
117	7.1	5	6.1	3.3	21.5
118	5.2	4.2	4.9	3.6	17.9
119	4.4	7.9	9.4	7.3	29
120	4.4	7.6	5.3	8	25.3
121	4.9	5.2	3.5	11.4	25
122	5.6	6.2	5.5	10.8	28.1
123	5.8	8.6	5.1	6.8	26.3
124	6.8	7.7	7.1	5.7	27.3
125	8.8	5	6.3	3.1	23.2
126	9	6.9	1.2	4.7	21.8
127	3.9	3.5	5.6	4.8	17.8
129	9.7	9.6	6.1	6.5	31.9
130	5	5.2	5.6	4.6	20.4
131	5.4	5.1	5.1	4.8	20.4
132	8.6	5.4	6.5	7.2	27.7
133	7.7	3.4	4	3.7	18.8
134	3.3	6.9	5	6.1	21.3
135.01	2.9	6.4	4	4.9	18.2
135.03,	6	6.4	6.4	7	25.8
135.05	2.6	4.1	9.1	8.1	23.9
135.06	4.2	4.7	7.6	7.8	24.3
136.04	6.6	6.6	4.8	4.3	22.3

kids

Source: American Community Survey

continued next page

Table 6, continued (page 3 of 4):

Percentage of Population Who Are Children by Census Tract

New Castle County, Five-year Average Estimates, 2011–2015 Percent Percent **Census Tract Percent Total Percentage** under 5 years 5-9 years 10-14 years 15-19 years 0-19 years 136.07 3.3 7.3 5.8 3 19.4 136.08 9.6 8.3 3.7 26.2 4.6 136.10 5.2 4.8 6.6 7.8 24.4 2.9 136.11 4.8 15.8 4.1 4 22.5 136.12 3.1 6.5 8.6 4.3 136.13 4.6 7.2 6.7 7.5 26 136.14 5 5.6 11.8 5.6 28 136.15 8 5.3 4.2 5.3 22.8 137 6.5 7.1 3.7 21.3 4 5.3 3.7 4.3 16.7 138 3.4 139.01 25.7 6.4 6 6.5 6.8 139.03 5.7 5.6 8.7 25.8 5.8 139.04 7.2 5.5 6.8 4.5 24 5.7 5 21.3 140 4.5 6.1 7 141 7.4 6.8 4.5 25.7 142 6.8 5.9 6.9 3.8 23.4 143 2.1 2.1 2.8 24.5 31.5 2.9 144.02 6.2 3.8 3.6 16.5 3 144.03 2.6 4.1 28.7 38.4 144.04 4.1 3.5 5.2 4.1 16.9

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Source: American Community Survey continued next page

Table 6, continued (page 4 of 4):

Percentage of Population Who Are Children by Census Tract New Castle County, Five-year Average Estimates, 2011–2015

Census Tract	Percent under 5 years	Percent 5-9 years	Percent 10-14 years	Percent 15-19 years	Total Percentage 0-19 years
149.07	7.5	7.3	7.4	6.8	29
149.08	9.8	7.3	6.3	2	25.4
149.09	10	10.9	7.8	3.8	32.5
150	8.2	6.7	4.8	5.3	25
151	4.5	4.5	8.3	4.8	22.1
152	9.3	6	6.7	3.9	25.9
154	4.6	10.1	10	8.2	32.9
155.02	7	8.8	6.6	8.9	31.3
156	4.7	7.9	6.4	6.6	25.6
158.02	6.9	7	6.4	7.6	27.9
159	7.2	6.4	8.5	4.6	26.7
160	7.5	5.8	5.5	7.8	26.6
161	5	4.5	2.2	4.5	16.2
162	4	2.9	3.1	8.1	18.1
163.01	9.2	4.1	2.7	4.7	20.7
163.02	6.5	5.7	9.7	8	29.9
163.05	6.3	4.6	7.4	6.9	25.2
164.01	5	6.2	8.4	6.8	26.4
164.04	6.7	7.4	7.4	5.8	27.3
166.01	6.7	8.1	7.8	7.9	30.5
166.02	5.8	7.5	9.6	5.5	28.4
166.04	5.1	10.4	10.8	9.8	36.1
166.08	6.4	5.3	7.9	6.5	26.1
168.01	8.5	10.5	6.6	7.5	33.1
168.04	6.1	7.7	9.8	8.9	32.5
169.01	4.4	3.6	5.6	8.6	22.2
169.04	1.5	1.4	1.5	4.2	8.6

Source: American Community Survey

Table 7:

Population Who Are Children by Census Tract in Kent County

Percentage of Population Who Are Children by Census Tract Kent County, Five-year Average Estimates, 2011–2015

Census Tract	Percent under 5 years	Percent 5-9 years	Percent 10-14 years	Percent 15-19 years	Total Percentage 0-19 years
401	1	7.4	9.3	6.7	24.4
402.01	6.3	8	7.5	4.6	26.4
402.02	6.4	8.7	6.7	7.5	29.3
402.03	9	7.3	7.1	4.4	27.8
405.01	2.5	6.8	9.1	4.8	23.2
405.02	3.5	4.6	7	4	19.1
407	8.5	3.4	6.5	5.9	24.3
409	2.1	2.7	1.6	22.4	28.8
410	6	8.3	5.2	2.6	22.1
411	17.2	7.9	5.7	5.1	35.9
412	9	7.4	8.6	7.7	32.7
413	12.1	12.7	1	4.3	30.1
414	10.4	3.8	2.3	3	19.5
415	8.1	4	5.9	8.9	26.9
416	4.7	5	6.6	6.2	22.5
417.01	4.1	4.9	8.8	5.2	23
417.02	7.8	6.8	7.8	5.7	28.1
418.01	5.6	7	6	8.7	27.3
418.02	8.9	5.2	8.3	7.2	29.6
419	5.6	5.3	6.4	7.4	24.7
420	2.8	7.1	5.9	8.9	24.7
421	5.9	5.6	8.4	7.7	27.6
422.01	4.9	9.5	8.3	5.2	27.9
422.02	7.9	7.7	6.9	6.4	28.9
425	10.2	5.6	6.6	4.6	27
428	7.6	6	7.2	5.6	26.4
429	4	5.6	8.1	4.9	22.6
430	6.9	7.6	9.7	5.3	29.5
431	5.5	4.2	7.5	6.1	23.3
432.02	6.6	4.8	5.6	5.1	22.1
433	4	3	2.6	28.2	37.8
434	8.6	4.8	6.3	2.6	22.3

Table 8:

Population Who Are Children by Census Tract in Sussex County

Percentage of Population Who Are Children by Census Tract Sussex County, Five-year Average Estimates, 2011–2015

Census Tract	Percent under 5 years	Percent 5-9 years	Percent 10-14 years	Percent 15-19 years	Total Percentage 0-19 years
501.01	4.3	5.4	6.4	7.7	23.8
501.03	5.4	4.6	5.4	4.9	20.3
501.04	7.5	5.8	8.4	4	25.7
501.05	6.7	8	8.4	6.8	29.9
502	6.7	7.5	8	9	31.2
503.01	7.1	7.9	4.9	6.7	26.6
503.02	3.9	7.5	6.8	7.4	25.6
504.01	6.8	8.3	6.2	7.2	28.5
504.03	6.8	8	7.1	3.7	25.6
504.05	6	6	6.5	3.8	22.3
504.06	10.7	8.6	3.2	6.6	29.1
504.07	4.9	5.8	9.3	4.7	24.7
504.08	6.3	3.7	6.2	4	20.2
505.01	6.1	4.9	3.7	5	19.7
505.03	10.4	5.4	7.8	4.6	28.2
505.04	8.5	5	6.6	5.1	25.2
506.01	6.5	6.8	4.3	7.9	25.5
506.02	3.7	7.2	11.2	5.1	27.2
507.01	6.6	5.5	3.7	2.8	18.6
507.03	5.3	3.9	3.4	4.6	17.2
507.04	3.5	3.8	8.3	2.8	18.4
507.05	12.4	4.8	2.6	2.4	22.2
507.06	0.6	2.7	4.2	3.2	10.7
508.01	5.1	4.8	6.6	4.4	20.9
508.02	6.1	4.3	4	5.6	20
508.03	5.6	4.2	3.7	5	18.5
509.01	4.6	4.9	3.3	3.8	16.6
509.02	0.6	3.2	5.1	3.8	12.7
510.03	1.6	3	4.9	5.6	15.1
510.04	2.4	4.8	3.5	4.1	14.8
510.05	3.7	3.2	4.1	4.5	15.5

Source: American Community Survey

continued next page



Table 8, continued (page 2 of 2):

Percentage of Population Who Are Children by Census Tract Sussex County, Five-year Average Estimates, 2011–2015

Census Tract	Percent under 5 years	Percent 5-9 years	Percent 10-14 years	Percent 15-19 years	Total Percentage 0-19 years
510.06	2.7	5	2.1	2.2	12
510.07	2.3	2.5	1.7	4.1	10.6
511.01	1.5	1.1	1.1	1.1	4.8
511.02	0.5	0.5	0.3	1.5	2.8
511.03	1	2.2	3.5	4.2	10.9
512.01	5.1	3.8	0.9	3.8	13.6
512.02	0.6	1.3	3.3	4.5	9.7
512.03	1.9	2.7	2.2	0	6.8
512.04	0	0.2	0.8	1.3	2.3
512.05	0.4	0.7	0.1	0.6	1.8
513.01	2.8	4.2	4.8	2.2	14
513.02	7	5.4	4.3	5.9	22.6
513.03	2.9	5.4	4.8	4.6	17.7
513.05	2.7	2.4	2	2.8	9.9
513.06	2.6	3.4	3	1.5	10.5
514	9.6	9.8	5.7	5.7	30.8
515	7.7	4.5	7.9	3.8	23.9
517.01	5.3	6.4	5.4	5	22.1
517.02	5.8	8.3	6.4	5.5	26
518.01	4.1	6.4	5.4	9.3	25.2
518.02	9.2	8.8	6.2	6.8	31
519	5.7	6.5	7.7	8.5	28.4

Source: American Community Survey

Table 9:

Population of Delaware Cities

Population Estimates by Sex and Race/Ethnicity Newark, Wilmington, and Dover, 2016

Area/Sex/Race	0-4	5-9	10-14	15-19	20-64	65+	Total	%0-19%	20-64	% 65 + ⁹	% Total
Newark*	778	1,055	1,022	6,702	21,684	3,276	34,718	1.0	2.3	0.3	3.7
Male	471	535	500	2,876	10,500	1,325	16,208	0.5%	1.1%	0.1%	1.7%
Female	507	520	522	3,826	11,184	1,952	18,510	0.6%	1.2%	0.2%	1.9%
Wilmington	5,464	5,164	4,680	4,378	43,660	9,292	72,638	2.1%	4.6%	1.0%	7.6%
Male	2,729	2,587	2,360	2,211	21,212	3,638	34,737	1.0%	2.2%	0.4%	3.6%
White Non-Hispar	nic 501	468	309	258	7,085	1,672	10,293	0.2%	0.7%	0.2%	1.1%
Black Non-Hispani	ic 1,556	1,505	1,445	1,460	10,719	1,597	18,282	0.6%	1.1%	0.2%	1.9%
Other Non-Hispan	ic 128	103	101	69	526	84	1,011	0.0%	0.1%	0.0%	0.1%
Hispanic	544	511	505	424	2,882	285	5,151	0.2%	0.3%	0.0%	0.5%
Female	2,735	2,577	2,320	2,167	22,448	5,654	37,901	1.0%	2.4%	0.6%	4.0%
White Non-Hispar	nic 502	451	322	283	6,395	2,452	10,405	0.2%	0.7%	0.3%	1.1%
Black Non-Hispani	ic 1,574	1,513	1,422	1,415	12,714	2,766	21,404	0.6%	1.3%	0.3%	2.2%
Other Non-Hispan	ic 128	119	75	83	631	121	1,157	0.0%	0.1%	0.0%	0.1%
Hispanic	531	494	501	386	2,708	315	4,935	0.2%	0.3%	0.0%	0.5%
Dover*	2,474	2,298	2,066	3,596	21,710	5,424	37,569	1.1%	2.3%	0.6%	3.9%
Male	1,279	1,118	1,056	1,717	10,226	2,063	17,459	0.5%	1.1%	0.2%	1.8%
Female	1,195	1,180	1,010	1,879	10,503	4,343	20,110	0.6%	1.1%	0.5%	2.1%

Percentages are calculated based on total state population (see Table 2)

Source: Delaware Population Consortium, Population Projection Series, Version 2016.0

Table 10:

Population by Race and Hispanic Origin

Population Percentages by Race/Ethnicity, Counties Five -Year Averages, 2011–2015

		Total Pa	opulation		Chil	Children		
County	White	Hispanic	Black	Other	White	Hispanic	Black	Other
New Castle	59.8%	9.2%	23.6%	7.4%	48.8%	14.2%	28.6%	14.1%
Kent	63.7%	6.5%	23.4%	6.3%	55.5%	9.5%	27.4%	12.3%
Sussex	74.8%	9.2%	12.4%	3.6%	58.5%	17.8%	17.0%	12.5%
Wilmington	29.0%	13.2%	54.8%	3.3%	12.4%	18.9%	67.8%	9.8%
Delaware	63.9%	8.7%	21.1%	6.3%	51.5%	14.3%	25.7%	13.5%

*Note: Persons of Hispanic origin may be of any race Source: U.S. Census Bureau, American Community Survey:



^{*} Race/Ethnicity estimates not available for Newark and Dover.

Table 11:

Families with Children

Number and Percentage of Families with Children by Marital Status of Parents Delaware and Counties, Five-year Estimates, 2011–2015

Type of Family	Delo	Delaware		Castle	K	Cent	Sussex		
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
One parent	33,060	26.6	19,954	26.2%	6,571	26.7%	6,535	27.6%	
Male Head	78,051	8.8%	5,083	9.1%	1,330	7.4%	1,638	9.6%	
Female head	25,009	27.4%	14,871	26.5%	5,241	29.1%	4,897	28.6%	
Married	58,205	63.8%	36,168	64.4%	11,455	63.5%	10,582	61.8%	
Total	124,325	1.0%	76,076	100.0%	24,597	100.000%	23,652	100.0%	

Source: U.S. Census Bureau, American Community Survey

Table 12:

Children and Their Living Arrangements

Number of Children by Age Groups in Households Delaware, Five-year Estimates, 2011–2015

Living Arrangement	Total Under Age 18	Under 6 Years	6 to 11 Years	12 to 17 Years
Children Living in Households	203,494	67,153	67,764	68,577
Children in Families				
Children in Married Couple Families	124,478	41,451	41,451	41,576
Children in Female-Headed Families	60,055	19,458	19,758	20,779
Children in Male-Headed Families	17,505	6,039	5,829	5,637

* Data for Children Living in Group Quarters is not available dis-aggregated by age. Source: U.S. Census Bureau, American Community Survey

Table 13:

Prenatal Care

Percentage of Mothers Beginning Prenatal Care in the First Trimester of Pregnancy by Race/Hispanic Origin U.S., Delaware, Counties, and City of Wilmington; Five-year Averages

Area/Race- Hispanic Orig.	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	2009- 2013	2010- 2014
U.S.	80.2	80.5	80.8	81.1	80.6	77.6	72.7	66.7	57.4	50.5	N/A	N/A	N/A	N/A	N/A	N/A
White	82.5	82.7	83.0	83.2	82.5	79.3	74.1	67.8	58.6	51.8	N/A	N/A	N/A	N/A	N/A	N/A
Black	69.6	70.4	70.7	71.5	71.7	68.9	64.8	59.8	49.5	41.9	N/A	N/A	N/A	N/A	N/A	N/A
Hispanic*	70.8	71.4	72.1	72.9	73.3	72.0	67.4	62.4	55.4	50.1	N/A	N/A	N/A	N/A	N/A	N/A
Delaware	83.0	83.1	83.9	84.9	85.1	85.4	84.7	82.3	79.4	77.2	75.3	74.0	73.8	74.0	74.4	73.9
White	86.4	86.5	87.1	87.8	87.9	87.9	86.7	84.3	81.7	79.3	77.4	76.0	75.6	75.3	75.6	75
Black	72.9	73.6	75.5	77.5	78.6	79.9	79.9	78.0	75.1	73.1	71.2	70.2	70.0	70.6	71.0	70.8
Hispanic*	68.7	69.4	70.8	72.2	72.6	72.1	69.8	65.9	61.4	57.6	55.2	53.9	54.2	55.1	56.9	57.9
New Castle	88.6	88.7	89.5	90.6	90.6	91.1	90.6	88.7	86.4	84.5	82.6	81.1	80.7	80.9	81.4	81.3
White	91.8	91.9	92.4	93.1	92.9	93.3	92.5	90.7	88.6	87.0	85.1	83.7	83.4	83.5	83.9	83.6
Black	79.3	79.4	81.1	83.5	84.2	85.2	85.3	83.6	80.8	79.0	77.0	75.8	75.5	76.1	76.8	76.9
Hispanic*	79.7	81.3	82.2	84.2	84.9	86.2	85.6	82.2	79.2	75.9	73.2	71.0	71.9	72.2	74.7	75.4
Wilmington	79.6	79.8	80.8	82.8	83.7	84.8	84.7	82.8	79.9	77.9	75.9	74.5	74.6	75.0	75.9	76.3
White	87.0	87.1	87.6	88.4	89.1	89.9	89.4	87.4	85.3	83.4	80.9	79.3	79.2	79.4	79.9	81.2
Black	75.6	75.8	77.0	79.7	80.6	81.7	81.8	80.1	76.8	74.9	73.2	72.1	72.2	72.8	73.7	73.5
Hispanic*	78.2	79.7	80.4	81.5	83.1	84.3	84.0	80.7	78.1	75.6	72.4	69.7	70.4	69.7	71.9	72.8
Kent	69.3	69.4	71.1	72.8	74.8	76.6	77.7	75.2	71.9	69.8	68.7	67.2	67.8	69.1	69.9	69.1
White	72.5	72.5	74.0	75.6	77.5	79.1	80.2	78.1	75.2	73.1	72.1	70.6	71.0	71.9	72.7	71.9
Black	59.7	60.6	63.3	65.4	67.8	70.3	71.3	68.4	64.5	62.3	61.0	59.8	60.9	62.8	63.9	63.4
Hispanic*	61.3	60.1	62.1	63.1	67.2	68.7	69.4	66.4	60.7	56.9	56.4	54.4	55.1	58.3	60.1	59.6
Sussex	75.7	76.1	76.7	76.4	75.9	74.4	71.7	68.0	64.5	61.7	59.8	59.2	58.9	58.0	57.9	56.8
White	80.8	80.9	81.6	81.6	81.1	78.6	74.8	71.2	67.9	64.1	62.1	61.4	60.5	58.7	58.7	57.7
Black	61.7	64.2	65.7	66.0	67.6	68.2	67.0	65.1	63.6	61.4	58.8	58.4	57.0	55.7	54.4	53.5
Hispanic*	47.1	45.7	47.2	47.6	46.7	42.7	37.6	32.7	27.3	24.6	23.2	24.8	25.6	27.2	27.9	29.2

Note: An indication of N/A means data was not available for that group or time period.

* Persons of Hispanic origin may be of any race.
Source: Delaware Health Statistics Center, National Center for Health Statistics

Table 14:

Births by Birth Weight, Race/Hispanic Origin of Mother, and Prenatal Care

Number and Percentage of Live Births by Race/Hispanic Origin of Mother, Birth Weight in Grams and Trimester Prenatal Care Began (Percentages Calculated by Birth Weight Category)

Delaware, 2010–2014 Averages

Race/Hisp. Origin* Birth Wt (g)	To Number	otal Percent	First Tri Number		Second T Number		Third Tri Number		No Number	Care Percent	Unki Number	nown Percent
Total	55,236	100	40,815	73.9	9,132	16.5	2,500	4.5	1,380	2.5	1,409	2.6
<2500	4,681	100	3,349	71.5	750	16	151	3.2	220	4.7	211	4.5
<1500	968	100	736	76	87	9	8	0.8	70	7.2	67	6.9
1500-2499	3,713	100	2,613	70.4	663	17.9	143	3.9	150	4	144	3.9
2500+	50,520	100	37,462	74.2	8,382	16.6	2,348	4.6	1,157	2.3	1,171	2.3
Unknown	35	100	4	11.4	0	0	1	2.9	3	8.6	27	77.1
White	36,669	100	27,519	75	5,870	16	1,662	4.5	765	2.1	853	2.3
<2500	2,482	100	1,774	71.5	402	16.2	91	3.7	113	4.6	102	4.1
<1500	432	100	330	76.4	48	11.1	3	0.7	30	6.9	21	4.9
1500-2499	2,050	100	1,444	70.4	354	17.3	88	4.3	83	4	81	4
2500+	34,178	100	25,741	75.3	5,468	16	1,571	4.6	651	1.9	747	2.2
Unknown	9	100	4	44.4	0	0	0	0	1	11.1	4	44.4
Black	15,091	100	10,687	70.8	2,821	18.7	733	4.9	463	3.1	387	2.6
<2500	1,907	100	1,360	71.3	309	16.2	52	2.7	93	4.9	93	4.9
<1500	483	100	369	76.4	35	7.2	5	1	36	7.5	38	7.9
1500-2499	1,424	100	991	69.6	274	19.2	47	3.3	57	4	55	3.9
2500+	13,180	100	9,327	70.8	2,512	19.1	680	5.2	369	2.8	292	2.2
Unknown	4	100	0	0	0	0	1	25	1	25	2	50
Other	3,387	100	2,575	76	434	12.8	103	3	150	4.4	125	3.7
<2500	274	100	204	74.5	37	13.5	6	2.2	14	5.1	13	4.7
<1500	44	100	31	70.5	4	9.1	0	0	4	9.1	5	11.4
1500-2499	230	100	173	75.2	33	14.3	6	2.6	10	4.3	8	3.5
2500+	3,109	100	2,371	76.3	397	12.8	97	3.1	135	4.3	109	3.5
Unknown	4	100	0	0	0	0	0	0	1	25	3	75
Hispanic*	7,164	100	4,146	57.9	1,969	27.5	781	10.9	137	1.9	131	1.8
<2500	477	100	313	65.6	97	20.3	31	6.5	23	4.8	13	2.7
<1500	98	100	77	78.6	14	14.3	0	0	5	5.1	2	2
1500-2499	379	100	236	62.3	83	21.9	31	8.2	18	4.7	11	2.9
2500+	6,673	100	3,833	57.4	1,872	28.1	750	11.2	113	1.7	105	1.6
Unknown	14	100	0	0	0	0	0	0	1	7.1	13	92.9

^{*} Persons of Hispanic origin may be of any race. Source: Delaware Health Statistics Center

Table 15:

Births by Birth Weight, Age of Mother, and Prenatal Care

Number and Percentage of Live Births by Age of Mother, Birth Weight in Grams, and Trimester Prenatal Care Began (Percentages Calculated By Birth Weight Category), Delaware, 2010–2014 Averages

	5 .		•		,		•	,	•			•
Mother's Age/ Infant's Birth Wt.		otal Percent	First Trin Number		Second Tr Number		Third Tri		No C Number		Unkr Number	
Total	55,236	100	40,815	73.9	9,132	16.5	2,500	4.5	1,380	2.5	1,409	2.6
<2500	4,681	100	3,349	71.5	750	16	151	3.2	220	4.7	211	4.5
<1500	968	100	736	76	87	9	8	0.8	70	7.2	67	6.9
1500-2499	3,713	100	2,613	70.4	663	17.9	143	3.9	150	4	144	3.9
2500+	50,520	100	37,462	74.2	8,382	16.6	2,348	4.6	1,157	2.3	1,171	2.3
Unknown	35	100	4	11.4	0	0	1	2.9	3	8.6	27	77.1
Less than 20 yrs.	4,011	100	2,460	61.3	1,052	26.2	261	6.5	136	3.4	102	2.5
<2500	396	100	239	60.4	103	26	14	3.5	26	6.6	14	3.5
<1500	77	100	50	64.9	13	16.9	0	0	7	9.1	7	9.1
1500-2499	319	100	189	59.2	90	28.2	14	4.4	19	6	7	2.2
2500+	3,614	100	2,221	61.5	949	26.3	246	6.8	110	3	88	2.4
Unknown	1	100	0	0	0	0	1	100	0	0	0	0
20-24 Years	12,612	100	8,473	67.2	2,681	21.3	812	6.4	358	2.8	288	2.3
<2500	1,119	100	762	68.1	218	19.5	42	3.8	52	4.6	45	4
<1500	216	100	166	76.9	24	11.1	3	1.4	10	4.6	13	6
1500-2499	903	100	596	66	194	21.5	39	4.3	42	4.7	32	3.5
2500+	11,482	100	7,709	67.1	2,463	21.5	770	6.7	305	2.7	235	2
Unknown	11	100	2	18.2	0	0	0	0	1	9.1	8	72.7
25-29 Years	16,177	100	12,172	75.2	2,446	15.1	723	4.5	424	2.6	412	2.5
<2500	1,339	100	963	71.9	195	14.6	57	4.3	69	5.2	55	4.1
<1500	282	100	220	78	17	6	3	1.1	22	7.8	20	7.1
1500-2499	1,057	100	743	70.3	178	16.8	54	5.1	47	4.4	35	3.3
2500+	14,828	100	11,209	75.6	2,251	15.2	666	4.5	354	2.4	348	2.3
Unknown	10	100	0	0	0	0	0	0	1	10	9	90
30-34 Years	14,526	100	11,509	79.2	1,893	13	460	3.2	305	2.1	359	2.5
<2500	1,076	100	822	76.4	145	13.5	23	2.1	42	3.9	44	4.1
<1500	230	100	174	75.7	24	10.4	2	0.9	20	8.7	10	4.3
1500-2499	846	100	648	76.6	121	14.3	21	2.5	22	2.6	34	4
2500+	13,446	100	10,686	79.5	1,748	13	437	3.3	263	2	312	2.3
Unknown	4	100	1	25	0	0	0	0	0	0	3	75
35+ Years	7,910	100	6,201	78.4	1,060	13.4	244	3.1	157	2	248	3.1
<2500	<i>7</i> 51	100	563	75	89	11.9	15	2	31	4.1	53	7.1
<1500	163	100	126	77.3	9	5.5	0	0	11	6.7	17	10.4
1500-2499	588	100	437	74.3	80	13.6	15	2.6	20	3.4	36	6.1
2500+	7,150	100	5,637	78.8	971	13.6	229	3.2	125	1.7	188	2.6
Unknown	9	100	1	11.1	0	0	0	0	1	11.1	7	77.8

Source: Delaware Health Statistics Center

Table 16:

Births by Birth Weight, Marital Status, and Prenatal Care

Number and Percentage of Live Births by Marital Status of Mother, Birth Weight in Grams, and Trimester Prenatal Care Began (Percentages Calculated by Birth Weight Category)

Delaware, 2010–2014 Averages

Mother's Marital Status / Infant's Birth Wt. (g)		Total Number Percent		First Trimester Number Percent		Second Trimester Number Percent		mester Percent	No (Number		Unknown Number Percent		
Married	29,070	100	23,395	80.5	3,457	11.9	872	3	570	2	776	2.7	
<2500	1,949	100	1,490	76.4	241	12.4	47	2.4	69	3.5	102	5.2	
<1500	381	100	301	79	25	6.6	2	0.5	27	7.1	26	6.8	
1500-2499	1,568	100	1,189	75.8	216	13.8	45	2.9	42	2.7	76	4.8	
2500+	27,097	100	21,902	80.8	3,216	11.9	825	3	500	1.8	654	2.4	
Unknown	24	100	3	12.5	0	0	0	0	1	4.2	20	83.3	
Single	26,166	100	17,420	66.6	5,675	21.7	1,628	6.2	810	3.1	633	2.4	
<2500	2,732	100	1,859	68	509	18.6	104	3.8	151	5.5	109	4	
<1500	587	100	435	74.1	62	10.6	6	1	43	7.3	41	7	
1500-2499	2,145	100	1,424	66.4	447	20.8	98	4.6	108	5	68	3.2	
2500+	23,423	100	15,560	66.4	5,166	22.1	1,523	6.5	657	2.8	517	2.2	
Unknown	11	100	1	9.1	0	0	1	9.1	2	18.2	7	63.6	

Source: Delaware Health Statistics Center

Table 17

Percentage of Low Birth Weight Births

Percentage of All Births that Are Low Birth Weight Births (<2500 grams) U.S., Delaware, Counties, and City of Wilmington; Five-year Averages

													2006- 2010				2010- 2014
U.S.	7.4	7.5	7.5	7.6	7.6	7.7	7.8	7.9	8.0	8.1	8.2	8.2	8.2	8.2	8.1	8.1	8
Delaware	8.3	8.5	8.6	8.8	9.0	9.2	9.3	9.4	9.4	9.3	9.1	9.0	8.9	8.8	8.6	8.5	8.5
New Castle	8.6	8.8	8.8	9.1	9.3	9.6	9.7	9.9	9.9	9.8	9.6	9.5	9.4	9.1	8.9	8.9	8.7
Wilmington	12.3	12.6	13.1	13.5	14.2	14.1	14.0	14.4	13.9	13.6	13.4	13.5	13.2	12.6	12.3	12.3	11.8
Kent	7.7	8.1	8.1	8.6	8.9	9.2	9.3	9.5	9.3	9.3	9.0	8.8	8.6	8.5	8.3	8.5	8.6
Sussex	8.0	8.0	8.3	7.8	7.9	8.0	8.0	7.8	8.0	7.8	7.7	7.8	7.9	7.9	7.9	7.6	7.5

Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 18:

Percentage of Very Low Birth Weight Births

Percentage of All Births that Are Very Low Birth Weight Births (< 1500 grams) U.S., Delaware, Counties, and City of Wilmington; Five-year Averages

																2009- 2013	
U.S.	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.5	1.5	1.5	1.5	1.5	1.5	1.5	1.4	1.4	1.4
Delaware	1.7	1.8	1.9	1.8	1.9	1.9	1.9	1.9	2.0	1.9	1.8	1.9	1.8	1.8	1.8	1.8	1.8
New Castle	1.8	1.9	1.9	1.9	1.9	2.0	1.9	2.0	2.1	2.0	2.0	2.1	2.0	2.0	2.0	2.0	2.0
Wilmington	2.8	2.9	3.0	3.0	3.1	3.1	2.9	3.0	3.1	3.0	2.8	3.1	3.1	2.8	2.9	2.8	2.6
Kent	1.7	1.8	1.8	1.8	1.8	1.9	2.0	1.9	1.8	1.8	1.7	1.7	1.5	1.5	1.5	1.5	1.5
Sussex	1.6	1.6	1.7	1.6	1.7	1.6	1.6	1.6	1.7	1.5	1.5	1.5	1.4	1.4	1.4	1.4	1.4

Note: Very Low Birth Weight (<1500 grams) is a subdivision of Low Birth Weight (<2500 grams). Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 19:

Low Birth Weight Births by Age, Race/Hispanic Origin of Mother

Percentage of Low Birth Weight Births by Age, Race/Hispanic Origin of Mother U.S., Delaware, Counties, and Wilmington; Five-year Averages

Area/ Mother's Age	ΔII		7–201 Black		ΔΙΙ		3–2012 Black		All	2009- White		Hisn *	ΔΙΙ	2010- White	2014 Black	Hisn *
U.S.			N/A				N/A		8.1		N/A	7.0	8		N/A	
Less than 20			N/A				N/A		9.5		N/A	7.9			N/A	
20-24			N/A				N/A		8.3		N/A	6.6			N/A	
25-29	7.4	N/A	N/A	6.2			N/A		7.3		N/A	6.3			N/A	
30+	8.3	N/A	N/A	7.5	8.2	N/A	N/A	7.5	8.2	N/A	N/A	7.5	8.2	N/A	N/A	7.5
Delaware	8.8	7.0	13.2	7.0	8.6	6.9	12.9	6.8	8.5	6.8	12.9	6.5	8.5	6.8	12.6	6.7
Less than 20	10.4	7.5	14.4	7.0	10.1	7.5	13.8	7.0	9.8	7.3	13.2	7.3	9.9	7.6	12.9	7.8
20-24	9.0	7.2	12.4	6.8	8.7	6.8	12.2	5.9	8.8	6.7	12.5	5.5	8.9	6.7	12.4	6.0
25-29	8.1	6.4	13.1	6.1	8.1	6.4	12.8	6.1	8.2	6.5	13.0	5.8	8.3	6.6	12.9	6.1
30+	8.7	7.2	13.8	8.2	8.5	7.1	13.2	8.4	8.4	7.0	13.0	7.9	8.1	6.8	12.5	7.3
New Castle	9.1	7.0	13.8	7.9	8.9	6.9	13.3	7.7	8.9	6.8	13.4	7.4	8.7	6.7	13.1	7.5
Less than 20	11.0	7.9	14.4	8.5	10.3	7.6	13.1	7.6	10.1	7.6	12.7	8.6	10.2	7.8	12.8	8.4
20-24	9.8	7.5	13.2	7.4	9.7	7.3	13.0	6.8	9.8	7.3	13.0	6.0	9.7	7.3	12.7	6.6
25-29	8.5	6.5	13.7	6.6	8.4	6.4	13.4	6.9	8.5	6.3	13.8	6.1	8.4	6.2	13.5	6.6
30+	8.7	7.0	14.2	9.3	8.5	6.8	13.6	9.2	8.4	6.8	13.6	9.3	8.3	6.7	13.2	8.5
Wilmington	12.6	7.6	15.7	8.8	12.3	8.2	14.8	10.2	 12.3	8.3	15.1	9.2	11.8	8	14.5	8.8
Less than 20	12.7	8.1	13.8	7.9	12.1	9.1	12.7	9.7	13.2	10.6	14.0	9.8	12.7	8.7	14.1	8.4
20-24	13.0	7.9	15.1	7.1	13.6	9.8	15.1	9.7	14.1	10.8	15.3	8.9	13.6	11.2	14.4	10.0
25-29	12.8	6.3	17.2	8.1	11.9	6.7	15.5	8.3	11.4	5.6	15.3	6.6	10.7	5.5	14.2	5.6
30+	12.0	8.1	16.7	12.7	11.5	8.3	15.3	14.0	11.4	8.4	15.3	12.5	11.1	8	15.4	10.9
Kent	8.5	7.2	11.7	8.2	8.3	7.1	11.2	8.1	8.5	7.2	11.5	7.3	8.6	7.4	11.4	7.4
Less than 20	10.4	8.0	13.9	6.5	9.8	7.3	13.4	7.5	10.4	7.3	14.3	7.9	10.9	8.7	13.4	8.1
20-24	8.2	6.8	11.0	8.3	7.7	6.4	10.5	7.8	7.9	6.2	11.5	6.4	8.6	6.6	12.3	6.4
25-29	8.0	6.8	10.3	9.3	8.2	7.1	10.5	8.9	8.2	7.3	10.5	8.5	8.4	7.3	11.1	7.3
30+	8.9	7.7	12.9	7.9	8.7	7.7	11.7	7.8	8.8	8.0	11.1	6.8	8.4	7.8	9.9	8.3
Sussex	7.9	6.8	12.9	5.3	7.9	6.6	13.2	5.1	7.6	6.4	12.5	4.9	7.5	6.3	12.4	5.1
Less than 20	9.0	6.7	14.9	4.3	10.0	7.6	16.6	5.5	8.7	6.8	13.8	4.1	8.4	6.7	12.8	6.3
20-24	8.0	7.0	11.3	5.5	7.6	6.3	11.6	4.0	7.6	6.1	11.9	4.4	7.4	5.8	11.7	4.6
25-29	7.1	5.7	14.3	4.4	7.1	5.8	13.7	4.0	7.2	6.0	13.2	4.4	7.8	6.8	13	5.0
30+	8.2	7.6	12.3	6.5	8.3	7.5	13.0	7.2	7.7	6.8	12.0	6.0	7.2	6.1	12.7	5.4

^{*} Persons of Hispanic origin may be of any race.

Source: Delaware Health Statistics Center

Table 20:

Very Low Birth Weight Births by Age, Race/Hispanic Origin of Mother

Percentage of Very Low Birth Weight Births by Age, Race/Hispanic Origin of Mother U.S., Delaware, Counties, and Wilmington; Five-year Averages

Area/ Mother's Age	All		7–201 Black				3-2012	2	All	2009-		Hisp.*	All	2010- White		Hisp.*
U.S.	1.5		N/A			N/A			1.4	N/A		•		N/A		
Less than 20	1.8		N/A		1.7		N/A		1.7		N/A	1.3	1.7		N/A	1.3
20-24	1.4	N/A	N/A	1.0	1.4	N/A	N/A	1.0	1.4	N/A	N/A	1.0	1.4	N/A	N/A	1.1
25-29	1.3	N/A	N/A	1.0	1.3	N/A	N/A	1.0	1.3	N/A	N/A	1.0	1.3	N/A	N/A	1.1
30+	1.5	N/A	N/A	1.4	1.5	N/A	N/A	1.4	1.5	N/A	N/A	1.4	1.5	N/A	N/A	1.4
Delaware	1.8	1.2	3.4	1.3	1.8	1.2	3.3	1.3	1.8	1.2	3.3	1.3	1.8	1.2	3.2	1.4
Less than 20	2.3	1.4	3.5	1.2	2.3	1.5	3.3	1.5	2.2	1.4	3.2	1.5	1.9	1.3	2.8	1.5
20-24	1.7	1.2	2.7	1.0	1.8	1.2	2.8	0.9	1.7	1.1	2.9	0.9	1.7	1.0	2.8	0.9
25-29	1.6	1.1	3.3	1.1	1.7	1.1	3.3	1.1	1.6	1.1	3.1	1.1	1.7	1.2	3.2	1.4
30+	1.8	1.2	4.1	1.8	1.8	1.3	3.8	1.9	1.8	1.2	3.8	1.7	1.8	1.2	3.7	1.7
New Castle	2.0	1.3	3.7	1.5	2.0	1.3	3.6	1.6	2.0	1.2	3.6	1.6	2.0	1.2	3.6	1.6
Less than 20	2.3	1.4	3.3	1.7	2.4	1.7	3.2	2.2	2.3	1.4	3.2	2.1	2.0	1.3	2.8	1.7
20-24	2.1	1.3	3.2	0.9	2.1	1.2	3.2	0.8	2.0	1.1	3.2	0.9	2.0	1.1	3.1	0.9
25-29	2.0	1.3	3.9	1.6	2.1	1.3	4.1	1.7	2.0	1.2	3.8	1.6	2.1	1.2	4.0	2.0
30+	1.9	1.3	4.2	2.0	1.9	1.3	3.8	2.2	1.9	1.3	4.0	2.2	1.9	1.3	3.9	1.9
Wilmington	2.8	1.2	3.8	1.6	2.9	1.6	3.6	2.2	2.8	1.6	3.6	1.9	2.6	1.4	3.4	1.8
Less than 20	2.3	0.9	2.7	1.2	2.7	2.0	2.9	2.8	2.2	1.1	2.7	1.5	2.0	1.2	2.3	1.7
20-24	2.4	0.6	3.1	1.3	2.7	0.7	3.4	1.2	2.9	1.2	3.5	1.7	2.9	1.1	3.5	1.3
25-29	3.1	1.0	4.6	1.2	2.9	1.2	4.2	1.7	2.7	0.9	3.8	1.3	2.5	0.9	3.6	0.9
30+	3.1	1.7	4.8	2.9	3.1	2.3	4.0	3.9	3.1	2.3	4.1	3.3	2.6	1.9	3.5	3.2
Kent	1.5	1.1	2.4	1.7	1.5	1.2	2.3	1.7	1.5	1.1	2.3	1.5	1.5	1.2	2.3	1.8
Less than 20	2.1	1.0	3.5	0.0	1.6	0.7	2.8	0.0	1.8	0.6	3.3	0.0	1.6	0.5	3.1	0
20-24	1.3	1.0	1.9	1.7	1.4	1.2	1.9	2.0	1.4	1.1	2.1	1.7	1.5	1.3	2.2	2.0
25-29	1.2	1.1	1.4	1.5	1.3	1.3	1.3	1.2	1.2	1.2	1.2	1.6	1.3	1.2	1.5	1.1
30+	1.8	1.3	3.6	2.8	1.7	1.1	3.5	2.6	1.7	1.1	3.3	1.8	1.5	1.1	2.6	3.0
Sussex	1.4	1.0	3.0	0.7	1.4	1.0	3.2	0.7	1.4	1.1	2.9	0.7	1.4	1.1	2.8	0.8
Less than 20	2.3	1.6	3.9	0.6	2.5	1.7	4.4	0.7	2.2	1.8	3.1	0.9	1.9	1.8	2.2	1.5
20-24	1.4	1.1	2.2	0.9	1.5	1.2	2.6	0.7	1.5	1.0	2.8	0.7	1.3	8.0	2.9	0.5
25-29	1.0	0.7	2.8	0.2	0.8	0.4	2.8	0.1	1.1	8.0	2.6	0.3	1.3	1.1	2.2	0.5
30+	1.5	1.1	4.2	1.1	1.6	1.2	4.1	1.3	1.5	1.2	3.4	1.0	1.4	1.0	3.8	1.0

Note: Very Low Birth Weight (<1500 grams) is a subdivision of Low Birth Weight (<2500 grams).

* Persons of Hispanic origin may be of any race. Source: Delaware Health Statistics Center



Table 21:

Infant Mortality Rates by Race/Hispanic Origin

Infant Mortality Rates per 1,000 Live Births by Race/Hispanic Origin U.S., Delaware, Counties, and City of Wilmington; Five-year Averages

Area Race	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	2009- 2013	2010- 2024
U.S.	7.1	7.0	7.0	6.9	6.9	6.9	6.8	6.8	6.7	6.7	6.5	6.4	6.2	6.1	6.0
White	5.9	5.8	5.8	5.7	5.7	5.7	5.7	5.7	5.6	5.6	5.5	5.4	5.3	5.2	5.1
Black	14.4	14.2	14.3	14.2	14.0	14.0	13.8	13.6	13.3	13.1	12.7	12.4	11.9	11.6	11.2
Delaware	8.4	9.0	9.2	9.1	9.3	9.3	8.8	8.6	8.4	8.3	8.0	8.1	8.1	7.7	7.5
White	6.2	6.6	6.9	6.9	7.3	6.9	6.5	6.4	6.2	5.7	5.8	5.8	5.5	5.1	5.4
Black	15.9	17.1	16.7	16.7	16.1	17.1	16.1	15.7	15.3	15.6	14.2	13.8	14.4	13.4	12.1
Hispanic*	6.3	6.9	6.3	8.3	7.9	7.5	7.2	8.2	7.7	7.6	7.4	7.7	7.2	7.3	8.0
New Castle	8.5	9.1	9.2	9.5	9.4	9.4	9.2	9.2	9.0	9.0	8.8	9.1	9.3	8.8	8.7
White	5.6	6.2	6.4	6.8	7.3	7.1	6.8	7.0	6.9	6.4	6.1	6.2	5.9	5.4	5.7
Black	17.7	18.2	18.0	18.0	16.5	16.7	16.3	16.3	15.7	16.1	15.8	15.6	16.1	15.3	14.3
Wilmington	14.4	14.0	13.5	13.5	12.4	12.8	12.3	13.0	13.0	13.8	14.1	14.8	16.1	15.9	15.8
White													9.8		10.1
Black	18.7	18.0	17.9	17.6	15.9	17.0	16.3	17.3	16.3	18.0	18.0	19.1	19.3	20.3	19.2
Balance of New Castle Co	o. 7.2	8.1	8.3	8.6	8.8	8.7	8.5	8.5	8.2	8.0	7.7	7.9	7.9	7.5	7.3
White	5.4	6.1	6.4	6.8	7.3	7.2	6.9	7.0	6.8	6.4	6.0	6.0	5.5	5.1	5.2
Black	16.8	18.5	18.1	18.2	17.0	16.6	16.3	15.8	15.3	14.9	14.5	13.8	14.4	13.0	12.2
Kent	8.6	8.7	9.9	9.5	10.2	10.0	9.1	7.1	7.1	7.1	6.5	6.9	7.6	6.6	6.2
White	7.0	6.9	9.5	8.6	9.2	7.6	7.0	4.4	4.6	4.3	5.1	5.9	6.3	5.7	6.2
Black	14.3	15.2	12.7	13.4	13.9	17.0	14.9	13.6	13.2	14.0	10.2	9.4	11.5	9.2	6.7
Sussex	8.1	9.0	8.3	7.4	8.1	8.2	7.5	7.9	7.6	7.2	7.0	6.2	5.2	5.4	5.1
White	7.5	7.6	6.5	5.5	5.9	5.5	5.1	6.2	5.7	5.2	5.6	5.0	3.6	3.8	4.0
Black	10.4	14.4	15.9	15.4	16.9	19.0	16.9	15.7	16.0	15.6	12.6	11.2	11.1	10.7	9.5

The infant mortality rates is calculated as deaths per 1,000 live births.

Sources: Delaware Health Statistics Center; National Center for Health Statistics

^{*} Persons of Hispanic origin may be of any race.

Note: Rates for Hispanics prior to the 1996–2000 period are based on fewer than 20 deaths during the period and does not meet the standard of reliability or precision as defined by the National Center for Health Statistics.

^{**} Rates for Wilmingfon Whites after the 1991–1995 period are based on fewer than 20 deaths during the period and does not meet the standard of reliability or precision as defined by the National Center for Health Statistics.

Table 22:

Infant, Neonatal, and Postneonatal Mortality Rates

Infant Mortality Rates per 1,000 Live Births, Neonatal and Postneonatal Mortality Rates, U.S. and Delaware, Five-year Averages

	2	2007–20	11	2	008-20	12	2	009-201	3	20	10-20	14
Area/ Mother's Race	Infant	Neo- natal	Post- neonatal									
U.S.	6.4	4.2	2.2	6.2	4.1	2.1	6.1	4.1	2.0	6.0	4.0	2.0
White	5.4	3.5	1.8	5.3	3.5	1.8	5.2	3.5	1.7	5.1	3.4	1.7
Black	12.4	8.0	4.4	11.9	7.7	4.1	11.6	7.5	4.0	11.2	7.4	3.9
Delaware	8.1	5.7	2.4	8.1	5.8	2.3	7.7	5.6	2.1	7.5	5.4	2.0
White	5.8	3.7	2.1	5.5	3.5	2.0	5.1	3.2	1.9	5.4	3.5	1.9
Black	13.8	10.4	3.3	14.4	11.1	3.3	13.4	10.5	2.9	12.1	9.4	2.7

Neonatal – the period from birth to 27 days; Postneonatal – the period from 28 days to one year; Infant – the period from birth to one year;

The infant mortality rates is calculated as deaths per 1,000 live births.

Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 23:

Infant Deaths by Causes of Death and Race of Mother

Number and Percentage of Infant Deaths by Selected Leading Causes of Death by Race of Mother Total Number All Birth Weights, Live Birth Cohorts, Delaware, 2009–2013 Averages

Cause of Death	All R	aces	W	hite	Bla	ck	Other &	Unknown
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
All Causes	422	100	207	100	197	100	18	100
Birth defects	64	0.15	44	0.21	15	0.08	5	0.28
Certain conditions originating in the perinatal period	245	0.58	90	0.43	144	0.73	11	0.61
Disorders relating to short gestation, low birthweight	106	0.25	29	0.14	70	0.36	7	0.39
Symptoms, signs, and ill defined conditions	50	0.12	27	0.13	22	0.11	1	0.06
Infectious and parasitic diseases	13	0.03	8	0.04	5	0.03	0	0.00
Unintentional injuries	7	0.02	5	0.02	2	0.01	0	0.00
Diseases of the respiratory system	8	0.02	7	0.03	1	0.01	0	0.00
Homicide	4	0.01	4	0.09	0	0.00	0	0.00
All other causes	31	0.07	22	0.11	8	0.04	1	0.06

Infant deaths are deaths that occur between live birth and one year of age.

Percentages are based upon the total number of infant deaths in each race group. Percentages may not add up to 100% due to rounding.

Live Birth Cohort - All persons born during a given period of time.



Table 24:

Infant Deaths by Detailed Cause of Death Category and Race

Number of Infant Deaths by Selected Leading Causes of Death by Race of Mother Live Birth Cohort, Delaware, 2009–2013

Categories Specific causes of death within categories		White	Black	Other	Unknown Toto
Diarrhea and gastroenteritis of infectious origin	5	4	0	0	9
Septicemia	3	0	0	0	3
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	1	1	0	0	2
Volume depletion, disorders of fluid, electrolyte and acid-base balance	1	1	0	0	2
Meningitis	1	0	0	0	1
Diseases of the circulatory system	10	2	1	0	13
Influenza and pneumonia	3	1	0	0	4
Gastritis, duodenitis, and noninfective enteritis and colitis	1	0	0	0	1
Renal failure and other disorders of kidney	0	1	0	0	1
Newborn affected by maternal hypertensive disorders	0	1	0	0	1
Newborn affected by maternal complications of pregnancy	14	26	1	1	42
Newborn affected by complications of placenta, cord, and membranes	10	10	1	0	21
Newborn affected by other complications of labor and delivery	4	0	0	0	4
Slow fetal growth and fetal malnutrition	0	2	0	0	2
Disorders related to short gestation and low birth weight, not elsewhere classified	29	70	4	3	106
Intrauterine hypoxia and birth asphyxia	3	3	0	1	7
Respiratory distress of newborn	7	8	0	0	15
Congenital pneumonia	0	1	0	0	1
Interstitial emphysema and related conditions originating in the perinatal period	1	1	0	0	2
Pulmonary hemorrhage originating in the perinatal period	0	2	0	0	2
Atelectasis	0	3	0	0	3
Bacterial sepsis of newborn	5	2	0	0	7
Neonatal hemorrhage	2	1	0	0	3
Hemolytic disease of newborn due to isoimmunization and other perinatal jaundice	1	0	0	0	1
Hematological disorders	0	2	0	0	2
Necrotizing enterocolitis of newborn	0	1	0	0	1
Hydrops fetalis not due to hemolytic disease	1	2	0	0	3
Congenital malformations, deformations, and chromosomal abnormalities	44	15	4	1	64
Sudden infant death syndrome	22	20	1	0	43
Accidents (unintentional injuries)	5	2	0	0	7
Assault (homicide)	4	0	0	0	4
Complications of medical and surgical care	0	1	0	0	1
All other causes	30	14	0	0	44

Note: Infant deaths are deaths that occur between live birth and one year of age. Live Birth Cohort - All persons born during a given period of time.

Table 25:

Infant Mortality Rates by Risk Factor

Infant Mortality Rates per 1,000 Live Births by Selected Risk Factors and Race of Mother Live Birth Cohorts, Delaware, Five-year Averages

	_	2005-20		_	2006-20			007-20		_	2008-20			2009-20	
Risk Factor	All	White	Black	All	White	Black	All	White	Black	All	White	Black	All	White	Black
Birth Weight in	grams														
<1500	279.3	262.0	298.9	260.3	241.2	283.9	264.7	233.3	295.1	267.6	222.0	309.2	258.6	216.6	295.4
1500 -2499	15.2	13.9	17.5	15.8	17.5	13.7	16.3	18.2	14.7	15.3	16.3	13.4	13.8	15.4	10.9
2500+	1.9	1.7	2.8	2.2	2.1	2.7	2.2	2.3	2.3	2.2	2.2	2.5	64.6	50.1	83.1
Age of Mother															
<20	11.8	8.6	16.5	11.5	7.8	16.1	10.2	6.6	14.5	9.6	6.8	13.2	9.6	8.1	11.5
20-24	8.9	6.5	13.9	8.2	6.1	12.4	8.9	6.5	13.6	8.8	6.5	12.7	8.3	6.2	11.7
25-29	7.9	5.8	14.6	8.1	6.6	13.2	7.5	6.0	12.4	7.5	5.2	14.4	7.2	5.3	12.5
30+	6.8	4.8	15.3	6.6	5.0	13.6	7.0	5.6	13.5	7.2	5.5	14.2	7	5	14.9
Marital Status	of Moth	er													
Married	5.6	4.2	13.9	5.5	4.6	11.6	5.9	5.1	12.0	6.0	4.9	12.9	5.5	4.7	10.2
Single	11.2	8.4	15.2	10.6	8.0	14.3	10.1	7.4	13.9	9.9	6.9	13.9	9.9	6.9	13.9
Education of N	Nother														
<12 years	10.5	8.0	17.1	9.7	6.9	16.4	9.1	6.8	15.1	7.5	5.4	13.2	7.1	5.4	11.7
H.S. diploma	a 9.7	7.1	14.3	10.4	8.5	13.6	10.8	8.5	14.6	11.2	8.0	16.3	11.3	7.8	16.5
1+ yrs colleg	ge 5.9	4.1	13.1	5.6	4.3	11.2	5.8	4.6	10.8	6.2	4.9	11.0	5.7	4.6	9.6
Interval in Mor	nths Sind	ce Last L	ive Birth												
<18	11.5	*	20.6	9.9	*	15.9	8.3	*	12.9	8.4		13.4	9.5		14.1
18+	6.0	4.2	10.9	5.8	4.7	9.1	5.7	4.8	8.3	5.4	4.5	8.1	5.1	4.3	7.5

^{*} Defined as receiving no care or care in the third trimester.

Table 26:

Infant Mortality Rates by Birth Interval

Infant Mortality Rates per 1,000 Live Births by Birth Interval Live Birth Cohorts, Delaware, Five-year Averages

							,	Year of I	Birth							
Birth Interval	1994- 1998											2005- 2009				
<18 months	10.7	9.7	8.4	9.2	8.9	11.5	12.1	13.8	13.4	13.5	10.3	11.5	9.9	8.3	8.4	9.5
18+ months	5.6	5.8	6.2	6.9	7.0	7.0	7.2	7.1	6.6	6.5	6.2	6.0	5.8	5.7	5.4	5.1



^{*} Rate based on numerator less than 20.

^{--*} Rate based on a numerator less than 20.
Source: Delaware Health Statistics Center

Table 27:

Infant Mortality Rates by Gestation

Infant Mortality Rates per 1,000 Live Births by Gestation Weeks and Race of Mother Live Birth Cohorts, Delaware, Five-year Averages

							Year	of Birth							
Gestation weeks	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	
37+ weeks															
All Races	2.6	2.5	2.5	2.3	2.3	2.4	2.2	2.1	2.2	2.0	2.0	2.4	2.6	2.6	2.5
White	2.6	2.4	2.3	2.1	1.9	2.0	1.7	1.7	1.9	1.8	1.8	2.4	2.7	2.7	2.6
Black	2.7	2.8	3.1	2.9	3.7	4.0	3.4	3.2	3.3	2.7	2.7	2.8	2.7	2.8	2.7
<37 weeks															
All Races	45.9	48.2	53.0	54.3	52.8	52.6	53.5	48.3	46.3	46.2	47.3	43.6	44.3	45.5	44
White	33.6	35.7	41.8	45.5	45.1	46.5	45.2	39.2	36.5	35.4	34.9	33.0	32.3	30.9	30.3
Black	69.6	70.5	73.5	72.5	70.5	67.7	72.7	67.8	66.5	67.9	71.1	64.0	66.3	69.7	65.4
<32 weeks															
All Races	201.3	214.9	238.1	249.6	238.7	239.4	249.1	228.9	216.9	216.9	216.9	194.7	195.7	198.7	190.8
White	174.0	191.5	228.4	249.2	238.2	244.0	248.3	215.8	196.8	187.7	184.8	159.7	153.0	144.2	140.1
Black	235.6	238.7	250.4	255.4	246.3	239.8	259.4	248.4	244.9	253.6	258.8	237.0	240.9	250.4	234.6

Source: Delaware Health Statistics Center

Table 28:

Infant Mortality Rates by Birth Weight

Infant Mortality Rates per 1,000 Live Births by Birth Weight and Race of Mother Live Birth Cohorts, Delaware, Five-year Averages

							Year	of Birth							
Birth Weight	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	
2500+															
All Races	2.4	2.4	2.5	2.3	2.4	2.5	2.2	2.1	2.2	1.9	1.9	2.2	2.2	2.2	2.2
White	2.4	2.3	2.4	2.1	2.0	2.1	1.9	1.7	1.9	1.7	1.7	2.1	2.3	2.2	2.3
Black	2.8	2.8	3.0	3.0	3.6	3.9	3.5	3.4	3.3	2.7	2.8	2.7	2.3	2.5	2.5
<2500															
All Races	66.5	69.5	75.2	76.4	74.2	73.1	74.5	68.8	67.7	68.1	70.6	65.4	67.1	68.2	64.6
White	53.9	55.9	63.2	68.7	67.4	68.8	68.4	62.3	59.6	59.1	58.5	55.5	54.9	52.8	50.1
Black	86.0	88.2	93.7	90.5	88.3	83.0	88.0	80.4	81.7	83.4	89.5	81.6	85.9	89.1	83.1
<1500															
All Races	262.7	270.9	304.8	316.2	302.4	306.2	313.9	285.0	281.3	282.2	279.3	260.3	264.7	267.6	258.6
White	219.3	231.5	281.9	303.4	297.2	316.8	321.2	287.7	284.9	276.9	262.0	241.2	233.3	222.0	216.6
Black	315.8	312.1	329.8	335.5	317.0	301.5	315.7	287.4	284.1	289.5	298.9	283.9	295.1	309.2	295.4

Table 29:

Infant Mortality Rates by Payment for Delivery

Infant Mortality Rates per 1,000 Live Births by Source of Payment for Delivery and Race of Mother Live Birth Cohorts, Delaware, Five-year Averages

								of Birth								
Payment for Delivery Race	1994- 1998	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008		2006- 2010	2007- 2011		2009- 2013
Medicaid																
All Races	10.3	10.9	9.9	10.6	10.1	9.5	9.8	10.2	9.5	10.3	10.1	9.9	9.5	9.3	8.8	8.5
White	8.8	9.1	7.7	8.6	8.3	7.1	7.5	7.7	7.0	8.0	8.0	7.5	7.5	7.0	6.3	6
Black	12.7	13.6	13.1	13.8	13.0	13.3	13.7	14.7	13.8	14.2	13.8	14.1	13.0	13.3	13.3	12.8
Private Insurance																
All Races	5.5	5.7	6.5	6.8	7.4	7.7	7.8	7.5	7.2	6.5	6.1	6.6	6.4	6.4	6.6	6.4
White	4.2	4.3	4.9	5.2	5.7	5.9	6.1	5.7	5.3	4.7	4.4	4.5	4.7	5.0	4.9	4.9
Black	12.8	13.7	14.8	15.6	16.5	17.1	16.9	17.0	16.4	15.2	14.8	16.4	14.8	13.7	14.6	13

Source: Delaware Health Statistics Center

Table 30:

Infant Mortality Rates by Single or Multiple Birth

Infant Mortality Rates per 1,000 Live Births by Single or Multiple Birth and Race of Mother Live Birth Cohorts, Delaware, Five-year Averages

							Ye	ar of Bii	rth							
Single vs. Multiple Race	1994- 1998	1995- 1999	1996- 2000	1997- 2001	1998- 2002		2000- 2004				2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	
Single Birth																
All Races	6.7	6.8	6.9	7.3	7.3	7.3	7.5	7.4	6.9	7.0	6.9	7.0	7.0	7.0	6.9	6.7
White	5.1	5.1	4.9	5.2	5.4	5.2	5.6	5.4	4.9	5.2	5.2	4.9	5.4	5.4	5.1	4.9
Black	11.5	12.2	12.9	13.4	13.4	13.8	13.5	13.6	12.8	12.6	12.0	12.7	11.8	11.6	11.7	11.3
Plural																
All Races	39.3	41.6	45.4	53.1	52.9	52.3	50.3	52.0	46.1	43.0	39.3	41.0	32.6	34.2	35.01	34.5
White	30.4	28.6	35.1	43.4	48.0	50.3	49.2	49.9	42.6	35.8	28.8	30.6	23.0	23.5	23.2	25.6
Black	68.7	84.6	73.0	80.7	68.5	8.00	54.1	64.6	59.1	63.5	67.7	69.5	54.4	55.5	60.4	50.4

Table 31:

Infant Mortality Rates by Mothers' Smoking

Infant Mortality Rates per 1,000 Live Births by Smoking during Pregnancy and Race of Mother Live Birth Cohorts, Delaware, Five-year Averages

	,		 	. 1
Y	ACI	r 0	 tır	tt

Smoking																
Status Race	1994- 1998	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	2009- 2013
Mother Does Not Smoke																
All Races	7.1	7.4	7.6	8.1	8.0	8.2	8.2	8.2	7.8	7.5	7.3	7.6	7.4	7.4	7.4	7.2
White	5.2	5.3	5.3	5.7	5.8	5.9	6.2	6.1	5.8	5.6	5.3	5.3	5.6	5.5	5.4	5.2
Black	12.7	14.0	14.3	15.3	14.8	15.0	14.3	14.7	13.5	13.3	13.1	13.9	12.9	12.9	13.2	12.3
Mother Smok	es															
All Races	10.6	10.6	11.3	13.4	15.1	14.1	14.8	15.1	13.1	13.6	13.0	12.1	10.7	10.8	10.0	9.7
White	9.4	9.3	9.8	12.2	14.2	12.7	13.3	13.0	9.9	10.5	10.5	8.9	8.2	8.9	7.6	7.2
Black	15.3	16.3	17.3	18.0	18.9	19.4	19.5	22.0	23.2	23.2	20.6	21.5	17.5	15.8	15.9	15.7

Source: Delaware Health Statistics Center

Table 32:

Lead Poisoning

Percentage of Children Under Age 6 with Blood Lead Levels at or Exceeding 10 mcg/dL, Delaware

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Number Tested	10,740	13,793	13,942	14,302	14,203	13,401	13,773	14,179	13,944	13,540	13,583	10,319	11,518	14,617	14,386	15,316
Number Identified	366	208	260	296	178	140	164	64	48	81	129	42	64	112	100	132
% Identified	43.4%	1.5%	1.9%	2.1%	1.3%	1.0%	1.2%	0.5%	0.%	0.6%	0.9%	0.4%	0.6%	0.8%	0.7%	0.86%

Note: Prior to 2011, the Centers for Disease Control and Prevention set the threshold for diagnosing lead poisoning in children under 6 years old to 10 micrograms of led per deciliter of blood. For the first time in twenty years the CDC has lowered the threshold to 5 micrograms of lead per deciliter of blood. Nationally, this is expected to add 200,000 children to those believed to have unsafe lead levels in their blood.

Source: Delaware Department of Health and Social Services, Division of Public Health, Childhood Lead Poisoning Prevention Program

Table 33:

Child Immunizations

Percentage of Children Age 19–35 Months Who Are Fully Immunized U.S. and Delaware

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013*	2014	2015*
U.S.	78.0	80.6	79.9	77.6	78.6	76.5	80.7	83.5	83.1	83.2	77.4	76.1	69.9	74.9	77.6	71.9	77.7	74.6	72.2
Delaware	81.0	80.6	80.0	76.2	81.0	84.8	82.9	86.4	86.7	88.0	80.3	72.0	65.3	72.9	72.1	77.0	79.3	76.1	79.3

Note: The CDC designation of "fully immunized" has changed from (4:3:1) — four doses of diphtheria, tetanus and Pertussis vaccine (DTaP); three doses of polio vaccine; one or more dose of measles, mumps and rubella vaccine (MMR) — to (4:3:1:3:3:1) — four doses of diphtheria, tetanus and Pertussis vaccine (DTaP); three doses of polio vaccine; one or more doses of measles, mumps and rubella vaccine (MMR); three doses of Haemophilus influenzae type b vaccine (Hib); three doses of hepatitis B vaccine; and one or more doses of Varicella or chickenpox vaccine. The change from 2006 to 2007 is due to the dosing change rather than from fewer vaccinations.

*2015 data margin of error: U.S. ±1.4; Delaware ±6.1

Source: National Immunization Survey, 2014; Centers For Disease Control and Prevention

Table 34:

Persons without Health Insurance

Percentage of Persons (0–64) Not Covered by Health Insurance U.S. and Delaware, Three-year Averages

1996- 1997- 1998- 1999- 2000- 2001- 2002- 2003- 2004- 2005- 2006- 2007- 2008- 2009- 2010- 2011- 2012- 2013- 2014-1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 U.S. 17.7 18.1 18.0 17.2 16.6 16.5 17.1 17.4 17.7 17.7 17.6 17.4 17.7 18.2 18.4 18.0 17.0 15 12.6 Delaware 15.7 15.7 15.0 13.9 11.7 11.2 11.4 13.2 14.4 14.8 13.8 13.0 13.5 13.5 13.2 12.3 10.9 8.2

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 35:

Children without Health Insurance

Percentage of Children Not Covered by Health Insurance U.S. and Delaware, Three-year Averages

1996- 1997- 1998- 1999- 2000- 2001- 2002- 2003- 2004- 2005- 2006- 2007- 2008- 2009- 2010- 2011- 2012- 2013- 2014-1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 U.S. 14.5 15.1 14.8 13.6 12.4 11.6 11.6 11.3 11.1 11.2 11.3 10.9 10.3 9.7 8.5 7.4 6.2 9.4 9.8 Delaware 13.7 14.9 12.8 10.5 7.5 8.5 9.0 10.7 11.7 10.5 7.1 7.5 8.5 8.0 6.9 6.7 5.6

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 36:

Children without Health Insurance by Age

Number and Percentage of Children Not Covered by Health Insurance, Ages 0–5 and 6–18 Delaware, Three-year Averages

	2004-	2005-	2006-	2007-	2008-	2009-	2010-	2011-	2012-	2013-	2014
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Ages 0-5	7,372	7,996	7,242	6,011	5,311	5,409	4,784	5,614	4,598	4,930	3565
%	10.8	11.6	10.4	8.4	7.2	7.3	6.8	8.3	6.9	7.5	5.3
Ages 6-18	14,636	16,163	14,805	15,048	14,266	13,083	11,856	11,406	10,928	9,611	8181
%	10.0	11.5	10.3	10.3	9.7	8.9	7.8	7.5	7.1	6.3	5.6

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 37:

Medicaid/CHIP Claims

Number of Children, Delaware and Counties, Fiscal Years

		012 of all claims		013 6 of all claims		14 of all claims		015 of all claims
Delaware	96,747	100.0	98,854	100.0	102,955	100.0	102,122	100
Well Visits	58,911	60.9	62,031	62.8	63,850	62.0	58,982	57.8
Emergency Room	28,387	29.3	29,987	30.3	30,830	29.9	27,846	27.3
New Castle County	54,756	56.6	55,765	56.4	57,986	56.3	57,452	56.3
Kent County	18,331	18.9	18,922	19.1	19,744	19.2	19,429	19.0
Sussex County	23,435	24.2	23,928	24.2	24,914	24.2	24,836	24.3

Note: Fiscal year is July 1 - June 30.

Source: Center for Community Research & Service, University of Delaware, 2017. Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences

Table 38:

Medicaid/CHIP Medical Claims by Age Group

Number of Claims by Age Group, Delaware, Fiscal Years

Age groups		012 of all claims	20 # %	13 of all claims	20 # %	14 of all claims	20 # %	15 of all claims
Four and under	36,551	38%	36,556	37%	35,602	35%	34,056	33%
Five to Nine	26,724	28%	27,807	28%	29,736	29%	29,630	29%
Ten to Fifteen	26,203	27%	27,127	27%	29,556	29%	30,337	30%
Sixteen to Eighteen	7,269	8%	7,364	7%	8,061	8%	8,099	8%
Total	96,747	100%	98,854	100%	102,955	100%	102,122	100%

Note: Fiscal year is July 1 - June 30.

Source: Center for Community Research & Service, University of Delaware, 2017. Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences

Table 39:

Delaware Number of Medicaid/CHIP Children with Asthma Related ED Visits and Hospitalizations

	All C	Claims	Asthma	- ED Visits	Ashma H	ospitalizations
Fiscal Year	#	% of all children with claims	#	% of all children with claims	#	% of all children with claims
2010	90,383	100.0%	1,469	1.6%	391	0.4%
2011	94,999	100.0%	1,310	1.4%	302	0.3%
2012	96,747	100.0%	1,333	1.4%	322	0.3%
2013	98,854	100.0%	1,503	1.5%	374	0.4%
2014	102,955	100.0%	1,452	1.4%	401	0.4%
2015	102,122	100.0%	1,380	1.4%	388	0.4%

Note: Fiscal year is July 1 - June 30.

Source: Center for Community Research & Service, University of Delaware, 2016. Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences

Table 40:

Number of Children on Medicaid/CHIP with Anti-Psychotic Drug Prescription Claims

Antipsychotics Age groups	#	FY2013 % of all claims	_	Y2014 % of all claims
Four and under	24	0.10%	16	0.00%
Five to Nine	584	1.40%	554	1.40%
Ten to Fifteen	1,239	2.70%	1,261	2.70%
Sixteen to Eighteen	652	3.00%	599	2.70%
Total	2,499	1.70%	2,430	1.60%

Note: Fiscal year is July 1 - June 30.

Source: Center for Community Research & Service, University of Delaware, 2017. Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences. The National Drug Codes (NDC) associated with anti-psychotics (Table SSD-D, 2013-2014, Cerner Multum, Inc., Denver, CO: www.multum.com) were used with permission from the National Committee for Quality Assurance (NCQA). Prior to 2013, these NDC lists were incomplete.

Table 41:

Delaware Children eligible for Medicaid/CHIP who had a prescription to treat ADHD (N & %)

By Fiscal Years

ADHD Age groups	#	2010 % of all claims	#	2011 % of all claims)12 % of all claims)13 of all claims)14 of all claims
Four and under	99	0.30%	81	0.20%	87	0.20%	180	0.50%	149	0.40%
Five to Nine	2,507	6.70%	2,748	7.20%	3,154	8.00%	3,498	8.70%	3,478	8.50%
Ten to Fifteen	3,484	8.30%	3,820	8.80%	4,272	9.60%	4,623	10.10%	4,727	10.10%
Sixteen to Eighteen	1,163	5.70%	1,234	5.80%	1,188	5.40%	1,276	5.80%	1,248	5.70%
Total	7,253	5.20%	7,883	5.50%	8,701	6.00%	9,577	6.50%	9,602	6.50%

Note: Fiscal year is July 1 - June 30.

Source: Center for Community Research & Service, University of Delaware, 2017. Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences. The National Drug Codes (NDC) associated with the treatment of ADHD (Table ADD_A, 2010-2014, Cerner Multum, Inc., Denver, CO: www.multum.com) were used with permission from the National Committee for Quality Assurance (NCQA).

Table 42:

Delaware Children eligible for Medicaid/CHIP who had an antidepressant prescription (N & %)

By Fiscal Years

Antidepressants Age groups	#	2010 % of all claims	#	2011 % of all claims	_	012 % of all claims	20 # %	13 of all claims	20 # % d	14 of all claims
Five to Nine	283	0.80%	238	0.60%	290	0.70%	332	0.80%	375	0.90%
Ten to Fifteen	975	2.30%	1,089	2.50%	1,236	2.80%	1,340	2.90%	1,414	3.00%
Sixteen to Eighteen	1,016	5.00%	1,129	5.30%	1,037	4.80%	1,059	4.80%	1,034	4.70%
Total	2,274	1.60%	2,456	1.70%	2,563	1.80%	2,731	1.90%	2,823	1.90%

Note: Fiscal year is July 1 - June 30.

Source: Center for Community Research & Service, University of Delaware, 2017. Compiled with data provided by the Delaware Division of Medicaid & Medical Assistance through a partnership with the University's Colleges of Health Sciences and Arts & Sciences. The National Drug Codes (NDC) associated with anti-depressants (Table AMM-C, 2010-2014 Cerner Multum, Inc, Denver, CO: www.multum.com) were used with permission from the National Committee for Quality Assurance (NCQA).

Table 43:

Substance Abuse by High School Students

In the Past 30 Days, 2016

Students	Alcohol	Cigarettes	Marijuana	Prescription Drugs
Heterosexual	29%	8%	20%	5%
Gay/Lesbian	56%	20%	32%	18%
Bisexual	39%	20%	33%	12%
Not sure	26%	16%	22%	14%
Mother Incarcerated	60%	39%	48%	33%
Father Incarcerated	46%	23%	40%	13%
No one incarcerated	27%	7%	18%	5%
No disability	29%	8%	21%	6%
Physical Disability	46%	26%	39%	23%
Learning Disability	38%	19%	29%	11%
Emotional Disability	47%	47%	28%	40%
Black	22%	8%	24%	5%
White	35%	12%	22%	7%
Hispanic/Latino	36%	9%	24%	8%
Other	17%	6%	12%	5%
Multiple Races	27%	9%	20%	4%
Bullied in past year	40%	17%	28%	11%
Not Bullied	29%	9%	6%	6%

Source: CDC Youth Risk Behavior Survey, Center for Drug and Health Studies, University of Delaware

Table 44:

Sexually Transmitted Diseases

Number of Cases of Chlamydia, Gonorrhea and Syphilis for 15–19 Year Olds
Delaware and Counties

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Delaware Chlamydia	1,244	1,212	1,214	1,315	1,370	1,235	1,392	1,648	1,609	1,561	1,294	1,535	1,198	1270	1576
Gonorrhea	517	335	288	283	431	320	289	271	314	220	179	292	229	194	299
Primary/ Secondary Syphilis	2	3	1	2	1	0	1	2	1	3	6	1	3	2	0
New Castle Chlamydia	683	623	670	749	731	678	814	900	908	915	819	924	695	715	891
Gonorrhea	256	144	172	182	237	193	191	158	183	122	114	201	140	97	144
Primary/ Secondary Syphilis	2	2	1	1	0	0	0	1	0	0	6	0	3	2	0
Kent Chlamydia	330	330	313	311	312	281	331	380	373	395	254	339	289	262	413
Gonorrhea	160	115	57	53	74	45	48	48	61	43	26	46	47	31	77
Primary/ Secondary Syphilis	0	0	0	1	1	0	0	1	1	2	0	1	0	0	0
Sussex Chlamydia	231	259	231	255	327	276	247	368	328	251	221	272	214	293	272
Gonorrhea	101	76	59	48	120	82	50	65	70	55	39	45	42	66	78
Primary/ Secondary Syphilis	0	1	0	0	0	0	1	0	0	1	0	0	0	0	0

Source: HIV/STD/HCV Program, Delaware Division of Public Health

Table 45:

Sexually Transmitted Diseases by Age and Gender

Number of Cases of Chlamydia and Gonorrhea by Age, Delaware, 2016

		0-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-54	55-64	65 up
Chlamydia	Female	1	42	1214	1416	587	249	94	37	33	9	0
	Male	1	11	362	647	345	121	77	38	68	12	5
Gonorrhea	Female	0	5	196	252	153	107	50	22	11	4	2
	Male	0	2	103	216	223	126	88	45	64	32	4

Source: HIV/STD/HCV Program, Delaware Division of Public Health

Table 46:

Sexually Transmitted Diseases by Race

Number of Cases of Chlamydia and Gonorrhea for 15–19 Year Olds by Race/Hispanic Origin* **Delaware**

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Delaware															
Chlamydia	1,244	1,212	1,214	1,315	1,370	1,235	1,392	1,648	1,609	1,561	1,294	1,535	1,198	1271	1576
Gonorrhea	517	335	288	283	431	320	289	271	314	220	179	292	229	194	299
All except HIV/AIDS**	1,879	1,666	1,618	1,719	1,938	1,683	1,882	2,128	2,094	1,935	1,538	1902	1,492	1491	1928
White															
Chlamydia	343	328	343	369	376	402	408	469	417	428	366	445	399	436	425
Gonorrhea	76	61	51	52	84	75	55	41	51	52	47	50	44	411	70
All except HIV/AIDS**	452	442	435	467	516	545	547	614	548	550	439	516	469	486	504
Black															
Chlamydia	832	827	804	873	927	762	905	1,089	1,098	1,024	857	980	694	735	1013
Gonorrhea	417	268	225	225	336	233	226	222	261	160	124	230	179	142	207
All except HIV/AIDS**	1,322	1,151	1,090	1,160	1,328	1,038	1,227	1,389	1,422	1,251	1,017	1,257	907	893	1260
Hispanic*															
Chlamydia	59	78	47	86	90	80	101	106	103	121	98	100	98	95	122
Gonorrhea	17	9	6	15	16	12	4	7	13	12	11	7	11	5	22
All except HIV/AIDS**	83	57	99	106	115	101	121	129	134	142	109	113	111	101	140
American Indian															
Chlamydia	1	1	2	0	0	1	0	0	1	0	0	0	0	0	(
Gonorrhea	1	0	0	0	0	0	0	0	0	0	0	0	0	0	(
All except HIV/AIDS**	2	1	2	0	0	1	0	0	1	0	0	0	0	0	(
Asian/Pacific Islander															
Chlamydia	5	1	2	3	8	4	3	3	2	6	5	4	4	6	4
Gonorrhea	1	1	1	1	1	1	1	0	0	0	0	0	0	1	(
All except HIV/AIDS**	8	2	3	4	10	6	5	3	2	6	5	4	5	7	4
Other/Unknown															
Chlamydia	63	55	63	70	59	66	70	82	87	95	66	106	101	91	128
Gonorrhea	22	5	11	5	10	11	6	7	2	7	8	12	6	10	2
All except HIV/AIDS**	95	70	88	86	84	93	103	116	117	119	77	125	111	102	153

^{*} Persons of Hispanic origin may be of any race. Hispanic cases are duplicated in the table as they are also listed by race.
**This data represents all STDs reported (including gonorrhea, chlamydia, herpes, syphilis, herpes, genital warts, bacterial vaginosis, etc.) excluding HIV/AIDS. Source: HIV/STD/HCV Program, Delaware Division of Public Health

Table 47:

Child Death Rates

Death Rates per 100,000 Children 1–14 Years of Age U.S. and Delaware, Five-year Averages

														2006- 2010				
U.S.	27.5	26.4	25.4	24.2	23.2	22.5	21.8	21.2	20.8	20.3	19.9	19.4	18.8	18.2	17.7	17.2	16.8	16.5
Delaware	22.2	21.1	21.6	22.1	22.5	22.9	21.5	23.1	21.0	19.5	16.3	16.4	14.2	12.8	13.7	15.5	16.1	15.4

Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 48:

Causes of Deaths of Children by Age

Leading Causes of Deaths of Children 1–19 Years Old by Age, Delaware, 2010-2014

Age 1-4	# of Deaths	Percent
Nontransport accidents	8	15.4
Assault (Homicide)	7	13.5
Malignant Neoplasms	6	11.5
Congenital malformations	6	11.5
Motor vehicle accidents	3	5.8
Diseases of the Heart	2	3.8
Chronic Lower Respiratory Disec	ises 2	3.8
Influenza and pneumonia	1	1.9
Nephritis, nephrotic syndrome, and nephrosis	1	1.9
All other causes	16	30.8
Total	52	100

Age 5-14	# of Deaths	Percent	
Motor vehicle accidents	15	20	
Malignant Neoplasms	10	13.3	
Congenital malformations	6	8	
Nontransport accidents	6	8	
Diseases of the Heart	4	5.3	
Intentional self-harm (suicide)	4	5.3	
Chronic Lower Respiratory Disea	ses 3	4	
Assault (Homicide)	2	2.7	
Cerebrovascular Diseases	1	1.3	
Diabetes mellitus	1	1.3	
Certain conditions originating in the perinatal period	1	1.3	
All other causes	22	29.3	
Total	75	100	

Age 15-19	# of Deaths	Percent
Motor vehicle accidents	37	24
Intentional self-harm (suicide)	33	21.4
Assault (Homicide)	29	18.8
Nontransport accidents	21	12.3
Malignant Neoplasms	8	5.2
Diseases of the Heart	7	4.5
Congenital malformations	2	1.3
Chronic Lower Respiratory Disea	ses 1	0.6
Septicemia	1	0.6
All other causes	15	11
Total	154	100

Table 49:

Teen Death Rates

Teen Death Rates by Accident, Homicide, and Suicide per 100,000 Teens 15–19 Years of Age, U.S. and Delaware, Five-year Averages

															2008- 2012		
U.S.	61.4	56.0	53.2	54.4	53.2	52.2	50.0	49.4	49.1	48.1	46.7	44.3	42.0	39.6	37.3	35.4	34.5
Delaware	51.7	50.0	51.6	54.4	53.1	55.7	59.1	55.1	55.9	54.4	49.9	47.1	46.3	42.3	41.6	41.7	40.5

Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 50:

Teen Deaths from Crashes

Deaths of 15–19 Year Olds from Motor Vehicle Accidents by Year and Gender, Delaware

Sex of decedent	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	
Male	8	10	12	14	10	9	9	5	5	6	3	4	7	4	
Female	5	3	8	8	6	8	4	2	5	5	2	2	2	2	
Total	13	13	20	22	16	17	13	7	10	11	5	6	9	6	

Source: Delaware Health Statistics Center

Table 51:

Teen Deaths from Suicides

Deaths of 15-19 Year Olds from Suicide by Year and Gender, Delaware

Sex of decedent	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Male	4	6	3	2	2	7	2	2	3	6	7	7	1	1
Female	1	0	3	0	0	1	3	0	0	0	2	4	3	2
Total	5	6	6	2	2	8	5	2	3	6	9	11	4	3

Source: Delaware Health Statistics Center

Table 52:

Teen Hospitalizations from Self-Inflected Injuries

Number of Teen (15-19) Hospitalizations due to Suicide and Self-inflicted Injuries (Resident discharges and all discharges including non-residents), Delaware

Sex of decedent	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
Resident Males	11	18	16	26	26	22	22	10	12	4	
Resident Females	31	29	29	32	37	34	31	23	27	14	
Total Resident Discharges	42	47	45	58	63	56	53	33	39	18	
All Males	14	19	24	31	30	24	29	16	18	11	
All Females	39	33	36	43	54	48	45	43	41	26	
Total Discharges	53	52	60	74	84	72	74	59	59	37	



Table 53:

Crash Involvement Rate

Crash Involvement Rate per 1,000 Licensed Drivers by Age, Delaware, Fiscal Years

Age of Licensed Driver	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
16 years old	115.6	70.8	94.5	98.8	74.3	79.5	76.6	77.3	78.6	67.6	54.5	49.3	50.5	54.8	42.2	48.5	51.6
17 years old	130.2	131.0	136.9	138.0	131.6	118.3	124.4	132.4	121.4	111.1	93.9	90.7	87.6	93.3	80.5	89.0	100.6
18 years old	137.0	124.1	120.7	123.4	114.4	116.3	113.8	126.8	123.1	113.4	102.0	94.6	90.2	91.7	88.3	89.3	97.7
19 years old	108.6	100.9	98.2	102.8	98.7	91.1	93.7	105.6	99.1	94.7	89.2	77.6	82.4	77.6	77.1	85.3	89.7
All Ages	48.3	46.4	44.7	45.5	42.4	41.7	42.2	48.1	46.6	43.6	41.4	39.5	39.8	40.8	40.9	42.9	45.4

Source: Delaware State Police

Table 54:

Teen Crash Involvement by Hour

16-, 17-, 18-, and 19-year-old Drivers Licensed in Delaware Involved in Crashes by Hour Delaware, Fiscal Years, Graduated Licensing Enacted 07/01/99

Driver Age	Hour	98	99	00	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16
16 years old	2200-2259	45	48	23	15	15	10	13	16	7	15	17	10	7	12	11	14	10	3	8
	2300-2359	25	39	21	10	7	11	8	9	10	10	7	8	5	4	2	6	6	8	4
	0000-0059	7	15	15	10	6	10	2	4	6	1	4	6	7	9	4	7	3	7	6
	0100-0159	9	11	6	7	3	1	2	3	7	2	3	2	1	2	1	2	1	0	4
	0200-0259	5	2	3	1	3	1	4	2	3	1	2	4	1	1	1	2	1	0	2
17 years old	2200-2259	48	56	40	44	32	50	32	30	41	49	36	31	36	26	16	33	20	18	29
	2300-2359	30	27	29	25	24	34	29	32	27	24	24	14	22	17	14	13	12	11	20
	0000-0059	28	20	30	16	16	19	16	17	12	15	14	15	11	33	21	16	12	15	18
	0100-0159	14	8	14	9	7	16	11	4	13	10	12	10	4	11	9	8	10	5	9
	0200-0259	9	4	6	8	7	11	6	6	6	8	5	3	4	4	6	2	2	2	6
18 years old	2200-2259	39	61	56	37	46	46	42	28	46	51	31	28	26	43	27	25	34	23	25
	2300-2359	48	36	33	27	40	35	37	40	29	30	38	39	22	19	19	18	19	14	22
	0000-0059	20	24	34	29	30	19	24	13	14	28	17	28	26	39	24	19	12	19	27
	0100-0159	11	18	24	26	32	13	13	20	14	27	17	23	13	16	8	15	10	13	11
	0200-0259	18	14	13	18	14	18	14	11	11	10	13	17	4	6	8	7	4	12	7
19 years old	2200-2259	42	33	38	47	30	33	46	23	31	40	37	43	35	33	33	37	31	47	28
	2300-2359	28	21	34	35	31	33	26	28	25	34	27	32	29	30	33	20	21	24	16
	0000-0059	31	25	31	23	22	21	31	23	16	16	15	18	24	31	26	25	17	19	30
	0100-0159	15	15	18	25	28	14	20	13	23	15	20	21	17	16	18	15	14	21	20
	0200-0259	9	10	12	12	17	14	19	17	11	10	10	9	16	9	12	13	11	5	6

* GDL – Graduated Driver's License implemented July 1, 1999

Source: Delaware State Police

Table 55:

Traffic Arrests of Teens Involved in Crashes

Number of Arrests for Teens Involved in Crashes by Violation, Delaware

Title 21 \	Violation Description	2003	2004	2005*	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
2118	No insurance	33	30	269	393	498	452	309	335	369	326	338	349	332	347
4107	Disobey traffic control device	e 16	19	14	20	31	20	10	19	14	13	13	14	14	18
4122 U	Unsafe lane change	63	78	95	113	109	96	73	81	103	101	140	141	126	143
4123 F	Following too closely	277	262	276	316	300	280	230	219	260	273	230	232	280	322
4132 U	Unsafe left turn	124	110	115	128	127	126	196	76	98	87	63	64	85	88
4133 E	Entering roadway unsafe	ly 58	47	58	43	59	52	43	42	17	19	13	13	14	20
4164a&b S	Stop sign violations	165	149	155	123	112	81	62	92	93	82	105	108	92	109
4168 U	Unsafe speed	199	198	181	215	225	160	109	115	107	116	86	90	86	120
4176a (Careless driving	410	291	362	315	340	254	166	224	254	223	207	215	225	246
4176b li	nattentive driving	684	677	745	761	731	566	362	483	495	499	442	451	469	545
4177	Driving under the influence	e 84	83	98	92	111	81	51	38	37	26	28	28	23	26
	Other traffic arrests	451	335	802	1,088	1,473	1,631	838	645	728	639	644	655	617	739
T	Total Traffic Arrests	2,564	2,279	3,170	3,607	4,116	3,799	2,446	2,369	2,575	2,404	2,309	2360	2363	2723

^{*} In 2005, the database changed to allow for more than one traffic arrest to be recorded. In previous years, only one traffic arrest was recorded for each driver—the most serious charge.

Source: Delaware State Police

Table 56:

Drivers in Fatal Crashes

Drivers (Licensed in Delaware) Involved in Fatal Crashes by Age, Delaware, Fiscal Years

Age of Licensed Driver	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
16 years old	9	3	3	2	3	4	5	2	2	0	0	0	0	1	2	0	1	1
17 years old	5	3	4	6	3	9	3	7	2	4	6	4	4	0	3	1	2	2
18 years old	4	4	5	5	8	6	8	5	4	2	4	5	4	1	5	2	3	3
19 years old	5	7	4	2	4	3	6	7	4	3	3	5	7	5	2	5	4	6
All Ages	140	108	138	139	156	156	158	142	139	111	110	114	112	102	126	133	132	174

Source: Delaware State Police

Table 57:

Available Child Care

Number of Licensed Child Care Slots, Delaware

	2005*	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Child Care Centers	37,878	40,440	41,101	42,819	42,732	43,204	43,158	44,090	44,681	43,643	43,768	43,576
Family Child Care Homes	11,406	10,844	10,308	9,929	9,418	8,501	7,905	7,300	6,684	6,214	5,945	5,547
Large Family Child Care Homes	777	819	891	942	987	1,023	938	974	940	898	855	905
Totals	50,061	52,103	52,300	53,690	53,137	52,728	52,001	52,364	52,305	50,755	50,568	50,028

^{*} Beginning in 2005, counts include part-time day care. Note: Child Care Center – 13 or more children.

Family Child Care Homes – 1 person carring for no more than 6 children Large Family Child Care Homes – 2 people caring for a group of 7–12 children Source:Delaware Department of Services for Children, Youth and Their Families

Table 58:

Licensed Child Care Facilities

Number of Facilities and Capacity, Delaware and Counties, January 2016

	Delaware	New Castle Co.	Kent Co.	Sussex Co.
Licensed Day Care Center	453	291	82	80
Licensed Family Child Care	695	397	135	163
Licensed Large Family Child Care	71	42	10	19
Total	1,219	730	227	262

Source: The Delaware Institute for Excellence in Early Childhood

Table 59:

Child Care by Zip Code

Number of Licensed Child Care Sites and Slots, Delaware, 2016

County	Zip Code	Sites	Sum of Capacity	County	Zip Code	Sites	Sum of Capacity
New Castle	19701	62	2769	Kent	19946	6	176
New Castle	19702	57	2461	Kent	19950	1	12
New Castle	19703	17	789	Kent	19952	13	485
New Castle	19706	1	9	Kent	19953	5	231
New Castle	19707	17	1673	Kent	19955	1	9
New Castle	19709	57	2387	Kent	19962	11	177
New Castle	19711	40	2789	Kent	19963	11	705
New Castle	19713	46	1891	Kent	19977	26	1377
New Castle	19716	1	102	Kent	19979	2	15
New Castle	19720	98	2227	Sussex	19930	1	9
New Castle	19730	1	178	Sussex	19933	19	221
New Castle	19734	11	421	Sussex	19939	4	261
New Castle	19801	41	2589	Sussex	19940	9	280
New Castle	19802	70	2784	Sussex	19941	5	167
New Castle	19803	27	2199	Sussex	19945	9	244
New Castle	19804	22	929	Sussex	19947	33	740
New Castle	19805	70	3698	Sussex	19950	8	171
New Castle	19806	6	315	Sussex	19951	2	83
New Castle	19807	3	215	Sussex	19956	21	415
New Castle	19808	39	2212	Sussex	19958	11	828
New Castle	19809	10	519	Sussex	19960	9	148
New Castle	19810	21	1323	Sussex	19963	13	303
New Castle	19977	4	33	Sussex	19966	24	698
Kent	19901	43	1894	Sussex	19968	9	320
Kent	19904	57	2152	Sussex	19970	2	60
Kent	19931	1	9	Sussex	19971	8	504
Kent	19934	17	647	Sussex	19973	55	1126
Kent	19938	10	141	Sussex	19975	7	402
Kent	19943	18	506				

Source: Delaware Department of Services for Children, Youth and Their Families

Table 60:

Delaware's Stars for Early Success

Quality Rating and Improvement System (QRIS), Delaware and Counties, January 2016

Star Level:	Starting with Stars (Level 1)	Level 2	Level 3	Level 4	Level 5	Not Participating
Delaware	44	147	67	163	144	687
New Castle County	30	86	44	121	89	372
Kent County	9	30	14	19	23	143
Sussex County	5	31	9	23	32	172

Source: The Delaware Institute for Excellence in Early Childhood

Table 61:

Child Care Costs

Average Monthly Cost in Dollars to Families for Child Care by Child's Age Delaware, Wilmington and Counties, 2015

Age	Delaware	New Castle County	Wilmington	Kent County	Sussex County
0-12 months	\$668	\$712	\$652	\$560	\$552
12-23 months	\$556	\$668	\$604	\$540	\$520
2 years	\$708	\$640	\$576	\$512	\$432
3 years	\$560	\$616	\$552	\$496	\$456
4 years	\$548	\$604	\$540	\$480	\$452
5 / Kindergarten	\$452	\$508	\$464	\$440	\$380
School-age	\$428	\$468	\$444	\$396	\$360

Source: Children & Families First

Table 62:

Purchase of Care

Monthly Market Rate Used to Determine Purchase of Care Reimbursement Delaware Counties, 2014

Age		Infant	Toddler (age 1)	Preschool (2-5)	School Age (6+)
New Castle County	Licensed Family Care	\$660	\$640	\$621	\$600
	Center Care	\$990	\$868	\$800	\$766
Kent County	Licensed Family Care	\$520	\$520	\$500	\$480
	Center Care	\$700	\$625	\$605	\$600
Sussex County	Licensed Family Care	\$520	\$500	\$480	\$480
	Center Care	\$700	\$600	\$540	\$600

Note: Programs accepting POC are reimbursed at 65% of the 75th percentile of market rate plus \$.50 for each eligible child. The tiered reimbursement incentive payment then is the difference between the 65% already being received by the program and the amount the Star 3 program would be eligible to receive for 80% of market rate. Beginning July 1, 2014 Early Childhood programs, including Family and Large Family Child Care, at Star Level 4 and Star Level 5 will receive increased tiered reimbursement percentages. The increase will be only for infants, toddlers and preschool children with POC. The increase does not include school-age children with POC. The increases will be 93% of the 2011 market rate for Star 4 programs and 102% of the 2011 market rate for Star 5 programs. School age children with POC will continue to be reimbursed at 90% in Star 4 programs and 100% in Star 5 programs. All programs at Star 3 will continue to receive 80% reimbursement for all children with POC regardless of the child's age.

Source: Delaware Department of Health and Social Services, Division of Social Services

Table 63:

School Age Programs

Number of Before- or After-School Programs and Total Programs Delaware and Counties, 2015

Type of care	Delaware		New Cast	New Castle County		ounty	Sussex County		
	School Age	Total	School Age	Total	School Age	Total	School Age	Total	
Child Care Centers	262	1263	167	758	49	237	46	268	
Family Child Care	386	577	250	317	68	111	68	149	
School Age Only*	143	734	86	422	30	139	27	173	

*Includes Family Child Care that are School Age only programs and Exempt Programs

Source: Children & Families First

Table 64:

Site-Based Public School Age Programs

Number and Percent of School Age Child Care Located at Schools, Delaware and Counties, School Years

	TOTAL Site Perced Total # of		Elementary Schools	- 14	Middle Schools		
	Site-Based Programs	Total # of School *	Site-Based Programs	Total # of School *	Site-Based Programs	Total # of School *	
Delaware	95	142	86	110	9	32	
New Castle County	61	80	53	63	8	17	
Kent County	20	35	19	28	1	7	
Sussex County	14	27	14	19	0	8	

Note: 100% of elementary and middle school charters have site-based programs.

Source: Children & Families First

Table 65:

State Funded Pre-K

Four-year-old Children Served in Head Start/Early Childhood Assistance Delaware, School Years

	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	
Head Start Funded Enrollment	1,115	1,115	1,115	1,115	1,115	1,115	2,281	
Number of Children Served	1,243	1,265	1,265	1,269	1,292	1,309	2,666	

Head Start – federally funded program operated by local public and private non-profit and for-profit agencies to provide comprehensive child development services to children who are at or below the poverty level. Special focus is on helping preschoolers from 3 to school entry develop early reading and math skills. The number of programs decreased from 4 in 2007 to 2 in 2011. The Head Start program is permitted to serve up to 10% of their children who are above the poverty threshold to meet mandates to provide services to children with disabilities.

^{*} Data source: State of Delaware K12 website for 2015-16 Public Schools (2016-17 not listed yet)

Table 66:

Direct Certification

Number and Percentage of Students who Receive TANF or SNAP Benefits and therefore Qualify for School Meals through Direct Certification Delaware, Counties, and Charter Schools by School Years

		2011/12 Number Percent	2012/13 NumberPercent	2013/14 NumberPercent	2014/15 Number Percent	2015/16 Number Percent
Delaware	Enrollment	130,610	131,514	133,369	134,932	136,027
	Direct Certification	46,918	49,593	50,468	47,193	48,996
	Percent Direct Cert.	35.9%	37.7%	37.8%	35.0%	36.1%
New Castle	Enrollment	67,799	68,002	68,336	78,008	78,656
	Direct Certification	22,182	23,484	24,010	25,338	26,662
	Percent Direct Cert.	32.7%	34.5%	35.1%	32.5%	33.9%
Kent	Enrollment	28,264	28,460	28,718	30,527	30,485
	Direct Certification	11,035	11,602	11,485	11,264	11,460
	Percent Direct Cert.	39.0%	40.8%	40.0%	36.9%	39.6%
Sussex	Enrollment	24,225	24,614	25,237	26,397	26,886
	Direct Certification	10,592	11,113	11,342	10,591	10,864
	Percent Direct Cert.	43.7%	45.1%	44.9%	40.1%	40.4
Charter	Enrollment	10,322	10,438	11,078	12,521	14,112
	Direct Certification	3,109	3,394	3,631	3,655	4,359
	Percent Direct Cert.	30.1%	32.5%	32.8%	29.2%	30.9

Table 67:

Students in Special Programs

Number and Percentage of Students in Regular Education, in Special Education, Are English Learners, and Are Receiving Free and Reduced Lunches, School Year 2015/16

Grade Level		ular ation Percent		ecial ation Percent	Limited Profi Number	English cient Percent		rect cation Percent	Total Students Number
Pre-K	302	17.30%	1447	83%	0	0%	454	26%	1749
K	9255	91.60%	853	8%	83	1%	4545	45%	10108
1	9722	91.00%	960	9%	1763	17%	4732	44%	10682
2	9593	88.90%	1200	11%	1728	16%	4658	43%	10793
3	9182	87.20%	1350	13%	1315	12%	4448	42%	10532
4	9037	85.80%	1496	14%	1020	10%	4121	39%	10533
5	8870	85.00%	1561	15%	595	6%	4032	39%	10431
6	8752	84.80%	1571	15%	354	3%	3829	37%	10323
7	8781	84.40%	1621	16%	299	3%	3647	35%	10402
8	8626	84.70%	1561	15%	348	3%	3363	33%	10187
9	9564	82.70%	1994	17%	396	3%	3911	34%	11558
10	9213	85.90%	1507	14%	376	4%	3078	29%	10720
11	8028	87.40%	1156	13%	229	2%	2195	24%	9184
12	7496	84.90%	1329	15%	200	2%	1983	22%	8825
Total	116421	85.60%	19606	14%	8706	6%	48996	36%	136027

Source: Delaware Department of Education

Table 68:

English Learners

Number and Percentage of English Learners* Delaware, School Years

	04/05	05/06	05/06	07/08	08/09	09/10	10/11	11/12	13/13	13/14	14/15	15/16
Number Served**	4,651	5,710	6,738	6,881	7,184	7,685	6,955	6,921	7,949	8,057	8,872	10,242
Total Enrollment	119,882	121,555	122,563	124,578	125,430	126,801	129,395	130,610	131,514	133,369	134,932	136,027
% Total Enrollment	3.9%	4.7%	5.5%	5.5%	5.7%	6.1%	5.4%	5.3%	6.0%	6.0%	6.6	7.5

^{*} English Learner – an individual who was not born in the U.S. or whose native language is a language other than English; or is a Native American or Alaskan Native and comes from an environment where a language other than English has had a significant impact on such individual's level of English proficiency; or an individual who has sufficient difficulty speaking, reading, writing, or understanding English and whose difficulties may deny such individual the opportunity to learn successfully in classrooms where the language of instruction is English.

^{**} Number Served is the count of students enrolled on April 1. The total number of children served per year is higher.

Table 69:

Delaware Student Testing Program (DSTP), Delaware Comprehensive Assessment System (DCAS) and Smarter Balanced 2015 and 2016

Percentage of Delaware Students Meeting the Standard in Reading and Math on DSTP 1998–2010, DCAS 2011–2014 and Smarter Balanced 2016 — by Race/Hispanic Origin*

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Grade 3 Reading	76.8	75.1	79.3	79.3	82.5	84.6	84.1	81.5	81.8	81.5	77.3	62.8	75.5	70.5	70.3	54.0	53.8
Black	62.4	58.8	64.9	65.3	70.2	74.1	72.3	68.3	69.3	67.9	64.1	48.2	64.0	57.2	57.4	39.0	39.4
Hispanic	62.7	57.4	72.3	73.2	74.6	78.9	81.4	83.1	80.0	79.5	74.4	47.8	64.0	58.0	59.8	41.0	41.0
White	84.9	85.3	87.8	87.6	89.9	90.8	90.8	89.0	89.4	89.7	86.2	69.9	85.4	82.3	81.8	66.0	66.4
Grade 3 Math	72.7	73.4	72.0	73.6	77.9	79.2	78.6	77.9	77.9	78.9	78.5	67.1	76.8	72.9	71.9	53.0	55.1
Black	53.2	53.6	53.7	55.9	61.2	65.8	63.3	62.0	63.1	63.6	63.6	50.2	64.4	57.4	56.0	36.0	38.6
Hispanic	60.9	62.7	62.8	67.0	74.5	71.9	73.4	75.7	76.4	77.6	75.5	57.8	67.7	64.7	64.5	41.0	44.3
White	83.1	84.6	82.9	84.1	87.4	87.6	88.1	88.2	87.2	88.6	88.2	74.8	86.6	84.5	83.9	67.0	68.0
Grade 5 Reading	69.3	68.7	78.0	78.5	84.8	85.4	84.7	84.9	86.2	85.3	81.3	64.9	78.5	76.7	76.4	56.0	60.3
Black	48.1	48.4	46.4	64.3	72.7	75.3	74.6	73.7	75.7	74.3	69.5	51.4	67.5	65.0	65.7	39.0	44.3
Hispanic	54.6	49.7	61.5	68.6	84.2	79.8	82.0	81.8	83.5	84.3	81.4	53.0	69.0	67.9	65.1	44.0	49.2
White	79.9	79.9	86.7	87.0	91.5	91.4	90.6	91.1	92.4	92.0	88.2	71.2	87.0	85.9	85.6	68.0	73.0
Grade 5 Math	62.1	65.0	67.2	71.0	75.8	77.4	77.3	76.8	77.0	77.7	76.4	64.9	74.3	70.5	70.6	38.0	41.5
Black	36.6	41.9	46.3	51.6	58.5	62.4	62.5	62.2	62.6	63.4	62.3	50.5	59.2	54.8	55.5	21.0	23.0
Hispanic	54.1	50.7	52.6	61.9	73.1	72.3	75.9	72.6	74.0	78.9	74.4	53.6	68.5	63.1	61.1	27.0	29.4
White	74.2	77.3	79.5	82.6	85.9	86.2	85.9	85.1	85.5	86.4	85.2	71.8	84.1	81.7	81.6	50.0	56.0
Grade 8 Reading	67.4	68.0	71.5	69.8	71.4	79.1	84.1	82.4	81.3	81.5	78.6	61.2	73.7	72.6	71.3	49.0	54.2
Black	47.3	49.9	54.4	54.6	54.7	67.8	73.6	70.8	68.7	69.7	66.3	46.1	60.4	58.7	58.1	33.0	38.3
Hispanic	48.8	49.4	57.6	55.3	55.4	67.2	78.0	73.2	76.2	79.4	73.4	49.0	62.4	65.3	65.1	38.0	43.6
White	77.0	77.4	79.9	78.7	82.2	86.9	90.6	90.3	89.3	89.2	86.2	68.5	84.1	82.2	80.8	60.0	66.6
Grade 8 Math	41.2	40.2	48.1	47.2	50.8	53.3	62.8	61.7	65.6	66.3	68.8	61.7	74.1	71.3	68.5	35.0	37.7
Black	18.4	17.8	24.6	25.6	28.1	32.7	42.3	41.4	47.2	47.0	50.7	45.4	60.1	55.7	52.8	17.0	20.0
Hispanic	20.2	21.7	31.1	33.2	33.2	40.4	50.5	48.4	57.2	64.1	63.8	51.1	66.5	66.4	62.8	27.0	25.0
White	51.6	51.4	59.3	59.0	64.8	66.6	76.1	75.6	77.5	78.2	79.6	69.3	84.1	81.0	79.4	47.0	51.2
Grade 11 Reading	61.3	61.2	66.4	66.6	71.9	70.8	71.2	73.1	71.6	71.8	65.5	63.4	71.2	73.3	75.1	52.0	52.4
Black	39.8	39.8	45.4	46.3	51.9	51.9	54.0	56.9	55.7	54.3	49.7	48.2	56.1	60.5	62.7	40.0	32.5
Hispanic	42.0	37.0	47.6	43.9	55.3	55.0											
White	70.8	70.6	76.2	76.5	79.9	80.1	80.1	82.4	80.4	81.7	74.8	70.5	81.4	82.2	84.3	60.0	64.9
Grade 11 Math	41.2	42.9	48.1	47.2	53.7	52.7	59.5	57.4	58.9	57.3	57.9	58.7	71.2	69.2	68.5	23.0	31.3
Black	18.4	19.6	24.6	25.6	27.9	29.7	36.2	36.6	37.9	35.1	37.4	40.1	54.9	54.0	51.5	10.0	13.4
Hispanic																	17.5
White	51.6	54.0	59.3	59.0	63.7	63.0	70.7	68.8	69.3	69.2	69.1	66.7	80.6	79.3	79.6	31.0	42.4

^{*} Persons of Hispanic origin may be of any race. All includes Native American and Asian. Please see note on DSTP and DCAS on next page. Note: See note on the next page.





Table 70:

DSTP, DCAS and Smarter Balanced by Family Income

Percentage Meeting the Standard in Reading and Math on DSTP 1998–2010, on DCAS 2011–2014 and Smarter Balanced 2016

Delaware by Race/Hispanic Origin*

		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
3rd Grad																		
Reading	Low Income	62.8	59.2	65.9	68.0	73.5	76.4	73.9	71.7	71.9	71.8	67.8	52.0	67.2	61.3	59.6	37.5	38.0
	Not Low	84.6	82.9	87.5	87.2	88.0	89.7	91.3	88.3	89.2	89.5	86.3	77.8	87.5	85.3	85.9	66.0	65.5
Math	Low Income	56.9	55.7	57.3	61.6	66.9	69.6	66.4	66.0	66.8	68.4	68.4	57.4	69.2	64.2	61.0	36.7	35.9
	Not Low	81.6	80.8	81.3	82.6	84.7	85.6	87.8	86.4	86.4	87.5	87.9	80.8	87.9	86.9	87.7	64.7	66.4
5th Grad																		
Reading	Low Income	52.0	48.8	63.6	65.1	75.2	76.4	75.9	75.0	77.6	77.3	72.5	53.9	70.3	68.1	67.1	39.1	44.4
	Not Low	79.0	76.3	86.0	87.2	90.3	90.6	90.4	91.2	92.1	91.0	89.3	79.4	89.5	88.7	88.3	65.9	70.3
Math	Low Income	2.9	42.6	49.2	54.9	61.8	65.2	65.6	65.1	65.1	66.6	66.3	54.5	65.6	61.0	60.1	22.6	26.5
	Not Low	72.9	72.9	77.7	82.2	84.5	84.9	85.3	84.7	85.4	85.9	85.6	78.8	86.1	84.1	84.2	47.7	51.1
8th Grad																		
Reading	Low Income	46.9	47.1	54.2	53.8	54.5	65.3	73.7	70.7	69.4	71.6	66.8	48.4	63.4	61.6	60.6	17.8	36.5
	Not Low	75.6	74.6	79.6	79.0	79.7	85.7	89.6	88.5	88.0	87.9	87.1	75.0	86.0	86.2	83.9	43.6	62.4
Math	Low Income	20.3	19.6	27.2	27.4	30.4	33.8	45.4	44.6	49.2	51.5	54.1	48.6	64.1	61.2	56.8	17.8	23.0
	Not Low	49.5	49.4	58.0	59.0	61.4	63.8	73.4	71.9	75.5	76.5	80.0	76.0	86.0	84.0	82.3	43.6	46.4
11th Gra	ders																	
Reading	Low Income	38.9	37.3	44.1	43.0	50.0	51.2	52.4	55.6	53.8	55.5	49.6	50.6	58.5	62.7	63.7	30.1	32.7
	Not Low	67.1	65.5	72.4	74.8	77.9	76.6	77.0	79.0	77.5	78.0	73.4	74.2	82.6	83.9	85.5	58.3	58.3
Math	Low Income	15.4	13.9	21.7	22.4	30.8	32.1	38.7	38.4	39.5	39.2	41.8	45.5	59.6	57.7	56.3	9.7	13.7
	Not Low	40.8	40.4	48.8	53.1	60.1	59.2	66.8	64.1	65.6	64.8	65.9	69.9	81.7	80.8	79.8	27.7	36.5

^{*} Writing was not assessed.

Note: In the 2014-15 school year, Delaware's assessment program was renamed the Delaware System of Student Assessments (DeSSA). DeSSA assessments include Smarter English Language Arts/Literacy (ELA) and Mathematics assessments. The Smarter assessments are designed to measure the progress of Delaware students in ELA/Literacy and Mathematics standards in grades 3-8. Beginning in the 2015-16 year, the SAT is the 11th grade accountability measure.

^{*} Persons of Hispanic origin may be of any race. All includes Native American and Asian

Table 71:

Advanced Placement (AP) Tests

Advanced Placement (AP) Tests Taken by Delaware Public School (PS) Students and Percentage AP Tests Passed in U.S. and Delaware

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
AP Test Takers, DE (#)	1,533	1,802	2,092	2,769	3,284	3,023	3,246	3,371	3,630	3,718	4,252	4,593	4,833	4,881	5,031
AP Tests Taken, DE (#)	2,719	3,046	3,624	4,916	6,000	5,360	5,607	6,069	6,436	6,591	7,572	8,391	8,606	8,736	8,685
AP Tests Passed, DE (%)	61.8	3 55.9	55.6	48.7	49.1	55.1	51.8	53.5	51.3	48.0	48.0	48.9	49.1	50.5	53.6
AP Tests Passed, U.S. (%)	61.4	4 59.7	59.7	57.6	57.5	57.2	55.6	56.6	55.7	55.8	57.0	56.9	57.1	55.9	56.0

Sources: College Board, Delaware Department of Education

Table 72:

College Enrollment

Fall Enrollment at Two-Year and Four-Year Public Degree-Granting Institutions and Percentage Change, Delaware

	2000	2005	2009	2010	2013	2014
Delaware Public Two-Year	12,019	13,978	15,681	15,474	9,190	26,540
Delaware Public Four-Year	22,175	24,704	24,747	24,934	23,910	11.671
Delaware Total	34,194	38,682	40,428	40,408	33,100	38,211

Source: College Board Advocacy and Policy Center – Analysis Brief, "Trends in Tuition and Fees, Enrollment, and State Appropriations for Higher Education by State, July 2012

Table 73:

College Costs

Public Two-Year and Four-Year In-State Tuition and Fees Delaware and Surrounding States

	11/12	12/13	13/14	14/15	15/16	16/17
Delaware Public Two-Year	3,086	3,274	NA	3,471	3,568	3,664
New Jersey Public Two-Year	4,111	4,274	NA	4,434	4,596	4,724
Pennsylvania Public Two-Year	3,663	4,407	NA	4,695	4,927	5,164
Maryland Public Two-Year	3,700	3,988	NA	4,122	4,274	4,417
Delaware Public Four-Year	10,496	11,261	NA	11,448	11,676	11,935
New Jersey Public Four-Year	12,041	12,715	NA	13,002	13,303	13,560
Pennsylvania Public Four-Year	12,079	12,802	NA	13,246	13,395	13,884
Maryland Public Four-Year	7,993	8,475	NA	8,724	9,163	9,336

Source: College Board Advocacy and Policy Center - Analysis Brief, "Trends in Tuition and Fees, Enrollment, and State Appropriations for Higher Education by State, July 2012



Table 74:

Dropout Rate by Race/Ethnicity

Dropout Rate per 100 Public School Students by Race/Ethnicity, Grades 9–12 Delaware, School Years

Race/ Ethnicity																					
Black	5.3	6.1	6.4	5.2	5.6	5.3	8.7	8.0	7.3	6.6	7.3	7.1	7.5	6.9	4.9	5.1	5.2	4.0	3.0	2.8	1.9
Hispanic	8.3	7.3	8.2	6.9	7.2	7.4	11.7	9.8	12.0	10.5	9.8	8.4	8.0	6.6	4.8	4.4	5.2	3.4	2.8	3.2	2.25
White	4.0	3.7	3.8	3.4	3.4	3.6	4.5	4.0	4.9	4.3	4.2	4.4	4.7	4.1	3.1	2.8	3.0	2.1	1.5	1.7	0.9
All	4.5	4.5	4.7	4.1	4.2	4.2	6.1	5.4	6.1	5.3	5.5	5.4	5.8	5.1	3.9	3.7	3.9	2.9	2.1	2.2	1.4

Source: Delaware Department of Education

Table 75:

Dropout Rates

Dropouts by Gender, Race/Ethnicity, and Age Summary Statistics for Delaware Public School Students Grades 9–12, School Years Percentage per Year, Delaware

	Annua %	09/10 Il % of All Propouts	Annua %	10/11 I % of All Propouts	Annua %	11/12 I % of All Propouts	Annua %	12/13 I % of All Propouts	Annua %	13/14 I % of All Propouts	Annuc %		Annua %	15/16 I % of All Propouts
Total	3.9	100.0	3.7	100.0	3.9	100.0	2.9	100.0	2.1	100.0	2.2	100.0	1.4	100
Gender														
Male	4.4	57.6	4.3	59.1	4.6	59.3	3.4	60.5	2.4	58.8	2.6	58.5	1.7	61.4
Female	3.3	42.4	3.1	40.9	3.2	40.7	2.3	39.5	1.8	41.2	1.8	41.5	1.0	38.6
Race/Ethnicity														
American Indian	9.6	0.9	4.4	0.5	3.9	0.4	3.2	0.5	1.9	0.4	4.0	0.7	2.7	0.7
African American	4.9	41.6	5.1	45.4	5.2	43.2	4.0	44.8	3.0	45.5	2.8	41.2	1.9	43.7
Asian/Pacific Islander	3.2	2.8	2.7	2.4	3.2	2.8	1.4	1.6	1.3	2.1	0.3	0.5	0.2	0.5
Hispanic	4.8	10.6	4.4	11.4	5.2	13.4	3.4	12.7	2.8	15.2	3.2	18.2	2.2	21.8
White	3.1	44.1	2.8	40.4	2.9	40.3	2.2	40.4	1.5	36.8	1.7	37.6	0.9	33.3
Age														
Less than 15	0.5	2.6	0.3	1.7	0.4	2.4	0.1	0.9	0.4	4.5	0.5	5.6	0.2	3.3
Age 15	1.4	9.1	1.2	8.0	1.8	11.0	1.2	9.9	0.6	7.2	0.9	10.3	0.7	12.2
Age 16	3.7	24.4	3.8	25.7	4.0	25.1	2.6	22.4	1.7	20.2	2.0	22.4	1.2	21.9
1 <i>7</i> +	8.5	63.9	8.0	64.5	8.1	61.5	6.5	66.7	5.0	68.1	5.6	61.8	3.5	62.5

Table 76:

Enrollment and Dropouts by County

Number of Dropouts and Student Enrollment by Race and Ethnicity, Public School Students Grades 9–12, Delaware and Counties, School Years

School Yea Area	r	Number (Black	of Enrolled S Hispanic	tudents, Grac White/Oth		Number Black		outs, Grade White/Ot	
2006/07	Delaware	11,761	2,638	22,853	37,252	828	224	974	2,02
	New Castle	7,905	1,815	12,450	22,170	578	166	536	1,28
	Kent	2,384	383	5,463	8,230	133	28	238	39
	Sussex	1,472	440	4,940	6,852	117	30	200	34
2007/08	Delaware	12,179	2,885	22,880	37,944	913	232	1,062	2,20
	New Castle	8,004	1,981	12,316	22,301	623	175	586	1,38
	Kent	2,623	432	5,401	8,456	184	20	265	46
	Sussex	1,552	472	5,163	7,187	106	37	211	35
2008/09	Delaware	12,623	3,098	22,898	38,619	868	204	916	1,98
	New Castle	8,288	2,124	12,285	22,697	619	161	519	1,29
	Kent	2,720	437	5,434	8,591	154	25	216	39
	Sussex	1,615	537	5,179	7,331	95	18	181	29
2009/10	Delaware	12,825	3,386	22,880	39,091	630	161	722	1,51
	New Castle	8,364	2,285	12,208	22,857	389	111	352	85
	Kent	2,758	470	5,480	8,708	152	25	174	35
	Sussex	1,703	631	5,192	7,526	89	25	196	31
2010/11	Delaware	12,721	3,724	22,679	39,124	654	164	624	1,44
	New Castle	8,250	2,487	12,119	22,856	448	127	304	87
	Kent	2,801	525	5,460	8,786	135	18	186	33
	Sussex	1,670	712	5,100	7,482	71	19	134	22
2011/12	Delaware	12,610	3,919	22,371	38,900	659	204	664	1,52
	New Castle	8,167	2,609	11,997	22,773	449	163	368	98
	Kent	2,772	544	5,367	8,683	111	16	162	28
	Sussex	1,671	766	5,007	7,444	99	25	134	25
2012/13	Delaware	12,551	4,169	21,893	38,613	496	140	470	1,10
	New Castle	8,148	2,714	11,696	22,558	343	109	222	67
	Kent	2,833	582	5,238	8,653	96	15	142	25
	Sussex	1,570	873	4,959	7,402	57	16	106	17
2013/14	Delaware	12,503	4,487	21,959	38,949	372	124	321	81
	New Castle	8,107	2,875	11,782	22,764	257	83	175	51
	Kent	2,854	619	5,191	8,664	68	12	79	15
	Sussex	1,542	993	4,986	7,521	47	29	67	14
2014/15	Delaware	12,773	4,986	21,891	39,650	358	158	352	86
	New Castle	8,304	3,126	11,579	23,009	250	89	177	51
	Kent	2,935	690	5,245	8,870	70	13	100	18
	Sussex	1,534	1,170	5,067	7,771	38	56	75	16
2015/16	Delaware	12,869	5,390	22,028	40,287	239	119	189	54
	New Castle	8,335	3,347	11,518	23,200	163	60	81	30
	Kent	3,027	734	5,288	9,049	44	13	57	11
	Sussex	1,507	1,309	5,222	8,038	32	46	51	12

Table 77:

Dropout Rate and Percentage by Race/Ethnicity

Dropout Rate per 100 Students and Percentage of All Dropouts by Race Public School Students Grades 9–12, Delaware and Counties, School Years

School Year	Area	Black	Annual Dro Hispanic	opout Rate White/Other	All	Pe Black	rcentage of Hispanic	All Dropo White/Ot	
2006/07	Delaware	7.0	8.5	4.3	5.4	40.9	11.1	48.1	100.0
	New Castle	7.3	9.1	4.3	5.8	28.5	8.2	26.5	63.2
	Kent	5.6	7.3	4.4	4.8	6.6	1.4	11.7	19.7
	Sussex	7.9	6.8	4.0	5.1	5.8	1.5	9.9	17.1
2007/08	Delaware	7.5	8.0	4.6	5.8	41.4	10.5	48.1	100.0
	New Castle	7.8	8.8	4.8	6.2	28.2	7.9	26.6	62.7
	Kent	7.0	4.6	4.9	5.5	8.3	0.9	12.0	21.3
	Sussex	6.8	7.8	4.1	4.9	4.8	1.7	9.6	16.0
2008/09	Delaware	6.9	6.6	4.0	5.1	43.7	10.3	46.1	100.0
	New Castle	7.5	7.6	4.2	5.7	31.1	8.1	26.1	65.
	Kent	5.7	5.7	4.0	4.6	7.7	1.3	10.9	19.9
	Sussex	5.9	3.4	3.5	4.0	4.8	0.9	9.1	14.8
2009/10	Delaware	4.9	4.8	3.2	3.9	41.6	10.6	47.7	100.0
	New Castle	4.7	4.9	2.9	3.7	25.7	7.3	23.3	56.
	Kent	5.5	5.3	3.2	4.0	10.0	1.7	11.5	23.
	Sussex	5.2	4.0	3.8	4.1	5.9	1.7	13.0	20.
2010/11	Delaware	5.1	4.4	2.8	3.7	45.4	11.4	43.3	100.
	New Castle	5.4	5.1	2.5	3.8	31.1	8.8	21.1	61.
	Kent	4.8	3.4	3.4	3.9	9.4	1.2	12.9	23.
	Sussex	4.3	2.7	2.6	3.0	4.9	1.3	9.3	15.
2011/12	Delaware	5.2	5.2	3.0	3.9	43.2	13.4	43.5	100.0
	New Castle	5.5	6.2	3.1	4.3	29.4	10.7	24.1	64.
	Kent	4.0	2.9	3.0	3.3	7.3	1.0	10.6	18.
	Sussex	5.9	3.3	2.7	3.5	6.5	1.6	8.8	16.
2012/13	Delaware	4.0	3.4	2.1	2.9	44.8	12.7	42.5	100.
	New Castle	4.2	4.0	1.9	3.0	31.0	9.9	20.1	60.
	Kent	3.4	2.6	2.7	2.9	8.7	1.4	12.8	22.
	Sussex	3.6	1.8	2.1	2.4	5.2	1.4	9.6	16.
2013/14	Delaware	3.0	2.8	1.5	2.1	45.5	15.2	39.3	100.
	New Castle	3.2	2.9	1.5	2.3	31.5	10.2	21.4	63.
	Kent	2.4	1.9	1.5	1.8	8.3	1.5	9.7	19.
	Sussex	3.0	2.9	1.3	1.9	5.8	3.5	8.2	17.
2014/15	Delaware	2.8	3.2	1.6	2.2	41.2	18.2	40.6	100.
	New Castle	3.0	2.8	1.5	2.2	28.8	10.3	20.4	59.
	Kent	2.4	1.9	1.9	2.1	8.1	1.5	11.5	21.
	Sussex	2.5	4.8	1.5	2.2	4.4	6.5	8.6	19.
2015/16	Delaware	1.9	2.2	0.9	1.4	43.7	21.8	34.6	100.
	New Castle	2.0	1.8	0.7	1.3	53.6	19.7	26.6	55.
	Kent	1.5	1.8	1.1	1.3	38.6	11.4	50.0	20.
	Sussex	2.1	3.5	1.0	1.6	24.8	35.7	39.5	23.

Table 78:

Enrollments and Dropouts by Gender and Race/Ethnicity

Student Enrollment and Dropouts by Race/Ethnicity and Gender Public School Students Grades 9–12, Delaware and Counties, School Years

School Year	Gender	Black	Number of Enr Hispanic	olled Students White/Other		Black	Number o Hispanic	f Dropout White/Ot	
2004/05	Delaware	10,627	2,124	22,731	35,482	703	222	956	1,881
	Male	5,304	1,096	11,729	18,129	379	125	575	1,079
	Female	5,323	1,028	11,002	17,353	324	97	381	802
2005/06	Delaware	11,098	2,390	22,804	36,292	809	235	950	1,994
	Male	5,607	1,201	11,886	18,694	475	135	568	1,178
	Female	5,491	1,189	10,918	17,598	334	100	382	816
2006/07	Delaware	11,761	2,638	22,853	37,252	828	224	974	2,026
	Male	5,913	1,339	11,808	19,060	501	127	580	1,208
	Female	5,848	1,299	11,045	18,192	327	97	394	818
2007/08	Delaware	12,179	2,885	22,880	37,944	913	232	1,062	2,207
	Male	6,092	1,464	11,895	19,451	551	129	626	1,30
	Female	6,087	1,421	10,985	18,493	362	103	436	901
2008/09	Delaware	12,623	3,098	22,898	38,619	868	204	916	1,988
	Male	6,308	•	11,784	19,674	529	126	562	1,217
	Female	6,315	1,516	11,114	18,945	339	78	354	77
2009/10	Delaware	12,825	3,386	22,880	39,091	630	161	722	1,513
	Male	6,435	1,696	11,685	19,816	381	87	404	87
	Female	6,390	1,690	11,195	19,275	249	74	318	641
2010/11	Delaware	12,721	3,724	22,679	39,124	654	164	624	1,442
	Male	6,444	1,854	11,598	19,896	392	90	370	852
	Female	6,277	1,870	11,081	19,228	262	74	254	590
2011/12	Delaware	12,610	3,919	22,371	38,900	659	204	664	1,527
	Male	6,390	•	11,353	19,685	403	111	392	900
	Female	6,220	1,977	11,018	19,215	256	93	272	62
2012/13	Delaware	12,551	4,169	21,893	38,613	496	140	470	1,10
	Male	6,337	•	11,158	19,580	313	79	277	669
	Female	6,214	2,084	10,735	19,033	183	61	193	437
2013/14	Delaware	12,503		21,959	38,949	372	124	321	817
	Male	6,287	•	11,226	19,761	207	79	194	480
	Female	6,216		10,733	19,188	165	45	127	337
2014/15	Delaware	12773		21891	39650	358	158	352	868
•	Male	6487		11267	20252	200	105	203	508
	Female	6286		10624	19398	158	53	149	360
2015/16	Delaware	12869		22028	40287	239	119	189	547
2.2/.0	Male	6505		11413	20648	150	72	114	33
	Female	6364	2/30	11410	20040	130	47	114	550

Table 79:

Dropout Rate and Percentage by Gender and Race/Ethnicity

Dropout Rate per 100 Students and Percentage of all Dropouts by Race and Gender Public School Students Grades 9–12, Delaware, School Years

School Year	Gender	Black	Annual Dro Hispanic	pout Rate White/Other	All	Pe Black	rcentage of Hispanic	All Dropo White/Otl	outs her All
2005/06	Delaware	7.3	9.8	4.2	5.5	40.6	11.8	47.6	100.0
	Male	8.5	11.2	4.8	6.3	23.8	6.8	28.5	59.
	Female	6.1	8.4	3.5	4.6	16.8	5.0	19.2	40.9
2006/07	Delaware	7.0	8.5	4.3	5.4	40.9	11.1	48.1	100.0
	Male	8.5	9.5	4.9	6.3	24.7	6.3	28.6	59.6
	Female	5.6	7.5	3.6	4.5	16.1	4.8	19.4	40.4
2007/08	Delaware	7.5	8.0	4.6	5.8	41.4	10.5	48.1	100.0
	Male	9.0	8.8	5.3	6.7	25.0	5.8	28.4	59.2
	Female	5.9	7.2	4.0	4.9	16.4	4.7	19.8	40.8
2008/09	Delaware	6.9	6.6	4.0	5.1	43.7	10.3	46.1	100.0
	Male	8.4	8.0	4.8	6.2	26.6	6.3	28.3	61.
	Female	5.4	5.1	3.2	4.1	17.1	3.9	17.8	38.8
2009/10	Delaware	4.9	4.8	3.2	3.9	41.6	10.6	47.7	100.0
	Male	5.9	5.1	3.5	4.4	25.2	5.8	26.7	57.
	Female	3.9	4.4	2.8	3.3	16.5	4.9	21.0	42.
2010/11	Delaware	5.1	4.4	2.8	3.7	45.4	11.4	43.3	100.0
	Male	6.1	4.9	3.2	4.3	27.2	6.2	25.7	59.
	Female	4.2	4.0	2.3	3.1	18.2	5.1	17.6	40.
2011/12	Delaware	5.2	5.2	3.0	3.9	43.2	13.4	43.5	100.0
	Male	6.3	5.7	3.5	4.6	26.4	7.3	25.7	59.
	Female	4.1	4.7	2.5	3.2	16.8	6.1	17.8	40.7
2012/13	Delaware	4.0	3.4	2.1	2.9	44.8	12.7	42.5	100.0
	Male	4.9	3.8	2.5	3.4	28.3	7.1	25.0	60.
	Female	2.9	2.9	1.8	2.3	16.5	5.5	17.5	39.
2013/14	Delaware	3.0	2.8	1.5	2.1	45.5	15.2	39.3	100.0
	Male	3.3	3.5	1.7	2.4	25.3	9.7	23.7	58.
	Female	2.7	2.0	1.2	1.8	20.2	5.5	15.5	41.
2014/15	Delaware	2.8	3.2	1.6	2.2	41.2	18.2	40.5	100.0
	Male	3.1	4.2	1.8	2.5	23.0	12.1	23.4	58.
	Female	2.5	2.1	1.4	1.9	18.2	6.1	17.2	41.
2015/16	Delaware	1.9	2.2	0.9	1.4	43.7	21.8	34.6	100.
	Male	2.3	2.6	1.0	1.6	27.4	13.2	20.8	61.
	Female	1.4	1.8	0.7	1.1	16.3	8.6	13.7	38.

Table 80:

Adults 25+ Who Are Dropouts by Census Tract

Percentage of Adults 25+ without GED or High School Diploma by Census Tract Delaware, 5-Year Estimates, 2011–2015

Census Tract	Est. 25+ Population	% Less than 9th Grade	% ≥9th Gr. No Diploma	% No Diploma No GED	Census Tract	Est. 25+	% Less than	% ≥9th Gr. No Diploma	% No Diploma No GED
New Castle	County				112.01	1604	2.9	1.6	4.5
2	4397	4.7	10.9	15.6	112.02	3204	3.5	3.7	7.2
3	1942	2.9	8.2	11.1	112.03	3430	0.8	4.8	5.6
4	2198	7.2	7.8	15	112.04	2407	1.7	1.5	3.2
5	1979	5.8	8	13.8	112.05	1436	2.6	2.6	5.2
6.01	1900	3.4	13.2	16.6	112.06	3071	0.7	1.4	2.1
6.02	2319	2.9	28.4	31.3	113	1638	0	1	1
9	1208	3.7	20	23.7	114	2479	1.4	2.5	3.9
11	2684	2.5	5.7	8.2	115	2068	3.5	1.6	5.1
12	1341	3.7	4.4	8.1	116	2518	1.5	1.4	2.9
13	2831	1.4	0.6	2	117	2984	0.3	0.3	0.6
14	1754	5.3	8.1	13.4	118	3073	0	0.9	0.9
15	1568	4	8.2	12.2	119	2391	4.1	4	8.1
16	1498	4.3	16	20.3	120	3299	3.7	12	15.7
19.02	1309	3.8	7	10.8	121	1960	5.3	11.2	16.5
21	1202	9.2	16.1	25.3	122	3078	5.9	10.8	16.7
22	1618	18.6	18.9	37.5	123	1951	13.8	10.5	24.3
23	2049	10.8	10.6	21.4	124	2885	9.5	10.4	19.9
24	3393	9.1	5.5	14.6	125	3555	4.6	7.5	12.1
25	2232	4.1	6.9	11	126	1878	5.8	3.9	9.7
26	2178	7.3	10.1	17.4	127	3077	3.6	10.3	13.9
27	1683	3.6	11.6	15.2	129	2944	11	13.3	24.3
28	1261	1.8	5.4	7.2	130	1340	1.1	9	10.1
29	2050	5.4	20.4	25.8	131	1543	5	10.1	15.1
30.02	1859	5	33.5	38.5	132	1789	8.3	9.9	18.2
101.01	2792	4.1	7.8	11.9	133	1364	2.8	5.7	8.5
101.04	2584	2.5	9.4	11.9	134	1835	1.8	5.5	7.3
102	1443	1.7	11.2	12.9	135.01	4804	1.2	2.8	4
103	2033	4.8	8.2	13	135.03	4869	3.6	2.4	6
104	3331	1.3	2.7	4	135.05	2147	0	0.4	0.4
105.02	4331	3.3	6	9.3	135.06	3332	1	1.8	2.8
107.02	3567	0.4	2.9	3.3	136.04	2973	0.9	1.2	2.1
108	3696	2.1	3.3	5.4	136.07	3988	1.2	2.2	3.4
109	1944	0.3	1.2	1.5	136.08	1390	3.5	7.5	11
110	2351	0.2	0.4	0.6	136.10	4059	0.6	1	1.6
111	2156	2.4	2.9	5.3	136.11	4154	0.8	3.1	3.9



Source: American Community Survey continued next page

Table 80, continued (page 2 of 3):

Percentage of Adults 25+ without GED or High School Diploma by Census Tract Delaware, 5-Year Estimates, 2011-2015

Census Tract	Est. 25+ Population	% Less than 9th Grade	% ≥9th Gr. No Diploma	% No Diploma No GED	Censi Trac	US		% Less than 9th Grade	% ≥9th Gr. No Diploma	% No Diploma No GED
136.12	4644	0.8	1.9	2.7	1	154	192	2 5.7	12.3	18
136.13	3909	0.4	2.4	2.8	1	155.0	2 187	4.8	16.1	20.9
136.14	2116	12.8	5.6	18.4	1	156	179	7.7	15	22.7
136.15	2720	2.5	9.2	11.7	1	158.0	2 145	4 10	13.8	23.8
137	2643	11.6	8.7	20.3	1	159	248	5 4.8	11.1	15.9
138	3971	1.8	5.1	6.9	1	160	202	7.9	10	17.9
139.01	2177	10	4.5	14.5	1	161	134	9 3.9	7	10.9
139.03	3279	2.4	3.2	5.6	1	162	214	9 3.4	7.4	10.8
139.04	5783	2.7	1.8	4.5	1	163.0	381	6.1	10.5	16.6
140	3677	3.5	6.8	10.3	1	163.0	2 498	3 4	3	7
141	3131	3.4	4.3	7.7	1	163.0	550	7 2.6	9.6	12.2
142	1501	0.8	4.1	4.9	1	164.0	1 456	3.2	3.8	7
143	3234	0.8	0.6	1.4	1	164.0	231	3 2.2	8.1	10.3
144.02	2124	1.1	3.5	4.6	1	166.0	750	2 2.8	5.5	8.3
144.03	2751	1.7	4.7	6.4	1	166.0	2 490	3 2.4	2.4	4.8
144.04	2886	1.1	1.4	2.5	1	166.0	740	4 1	3.8	4.8
145.01	518	0	11.4	11.4	1	166.0	309	3.7	3.8	7.5
145.02	553	6.7	8.3	15	1	168.0	1 389	5.2	5.9	11.1
147.02	1339	1.5	5.1	6.6	1	168.0	479	0.7	6.8	7.5
147.03	3638	3.2	7.6	10.8	1	169.0	1 152	5.9	6.2	12.1
147.05	3519	3.7	8.4	12.1	1	169.0	338	6.8	26.4	33.2
147.06	1792	5	8.8	13.8	Ke	ent Co	ounty			
148.03	2901	2.6	4.3	6.9	4	401	451	9.4	11.8	21.2
148.05	6347	0.4	2.1	2.5	4	402.0	356	3 2	10.9	12.9
148.07	5797	2.5	5	7.5	4	402.0	984	7 2.9	8.2	11.1
148.08	4074	3.1	4.3	7.4	4	402.0	377	7 2	10.7	12.7
148.09	5457	2	4.6	6.6	4	405.0	316	3 1.9	8.9	10.8
148.10	4955	0.6	1.5	2.1	4	405.0	2 161	1.4	16.2	17.6
149.03	4272	6.7	15	21.7	4	407	323	1 2.6	7.1	9.7
149.04	3467	0.1	2.6	2.7	4	409	146	5.3	15.5	20.8
149.06	2996	2.8	2.7	5.5		410	444		12.1	14.5
149.07	3220	2	8.1	10.1		411	162		1.6	3.2
149.08	1437	0	6.3	6.3		412	302		9.8	
149.09	4061	8.7	5.1	13.8						16
150	3838	2.7	8.5	11.2		413	133		12.2	
151	2446	0.8	7	7.8		414	232		6.4	13.3
152	3977	9	15.2	24.2	4	415	272	2 2.9	5.4	8.3

Source: American Community Survey

Table 80, continued (page 3 of 3):

Percentage of Adults 25+ without GED or High School Diploma by Census Tract Delaware, 5-Year Estimates, 2011–2015

Census Tract	Est. 25+ Population	% Less than 9th Grade	% ≥9th Gr. No Diploma	% No Diploma No GED	Census Tract	Est. 25+ Population	% Less than	% ≥9th Gr. No Diploma	% No Diploma No GED
416	1455	3.4	5.4	8.8	506.01	3492	7.9	10.7	18.6
417.01	4213	1.8	5.5	7.3	506.02	4219	7.9	8.8	16.7
417.02	3318	1.3	4.9	6.2	507.01	3202	7.6	12.4	20
418.01	6556	6.1	9.6	15.7	507.03	1625	7.3	9.4	16.7
418.02	3347	10.1	9.5	19.6	507.04	3318	2	4.9	6.9
419	3560	8.5	12.9	21.4	507.05	3649	3	16.2	19.2
					507.06	1254	3.6	12.4	16
420	2082	7.7	13.9	21.6	508.01	2450	4.1	7.2	11.3
421	2650	4.1	13.3	17.4	508.02	3583	2.3	5.5	7.8
422.01	6620	2.9	4.7	7.6	508.03	5810	4.4	3.3	7.7
422.02	5928	2.6	7.4	10	509.01	1916	0.5	5.6	6.1
425	2055	8.2	15.3	23.5	509.02	3940	2.7	3.7	6.4
428	4818	2	11.6	13.6	510.03	3965	8.0	2.8	3.6
429	3546	2.1	13.6	15.7	510.04	3668	1.7	9.2	10.9
430	3541	3.8	9.6	13.4	510.05	3693	1.4	4.8	6.2
431	1916	6.5	9.7	16.2	510.06	2531	1.1	8.6	9.7
432.02	2507	3.7	16	19.7	510.07	4208	1	2.2	3.2
433	2456	4.2	7.2	11.4	511.01	630	0	0.5	0.5
					511.02	864	0.6	0.5	1.1
434	3253	5.5	10.9	16.4	511.03	789	2	0.4	2.4
SussexCou	•	4.7	0.1	10.0	512.01	1154	1.4	2.7	4.1
501.01	2503	4.7	8.1	12.8	512.02	708	3.7	1	4.7
501.03	3301	3.7	6.5	10.2	512.03	602	0	1.2	1.2
501.04	3114	4.9	6.7	11.6	512.04	611	0	0.7	0.7
501.05 502	3867 2285	6.7 4.5	12.6 18.6	19.3 23.1	512.05 513.01	644 4608	0.5 1.8	1.4 2.2	1.9
503.01	5428	5.8	19.7	25.5	513.01	2341	4.9	11.7	4 16.6
503.01	3362	4.7	13.8	18.5	513.03	4043	1.7	4.1	5.8
504.01	2600	2.4	11.1	13.5	513.05	2162	0.4	9.3	9.7
504.03	2401	6	12.9	18.9	513.06	2265	3.5	6.8	10.3
504.05	2660	4	17.7	21.7	514	2736	15	10.4	25.4
504.06	3037	3.9	12.4	16.3	515	3556	9.3	11.1	20.4
504.07	3536	3.2	15.1	18.3	517.01	2810	2.6	17.5	20.1
504.08	3227	6.5	18.2	24.7	517.02	3774	4.1	10.9	15
505.01	2594	8.3	7.4	15.7	518.01	2905	3.1	7.9	11
505.03	3620	27.7	11.3	39	518.02	2940	7.7	12.2	19.9
505.04	4317	16.7	11.6	28.3	519	3032	4.9	13.1	18
				l					

Source: American Community Survey

Table 81:

Adults 18–24 Who Are Dropouts by Census Tract

Number and Percentage of Adults 18–24 without GED or High School Diploma by Census Tract Delaware, 5-Year Estimates, 2011–2015

Census Tract	# 18-14 yr. olds	Percent Dropouts	Census Tract	# 18-14 yr. olds	Percent Dropouts	Census Tract	# 18-14 yr. olds	Percent Dropouts
New Castle Coun	ty		112.01	277	2.5%	136.12	236	3.4%
2	391	20.2%	112.02	264	27.7%	136.13	602	12.3%
3	219	14.2%	112.03	293	4.1%	136.14	395	20%
4	320	22.2%	112.04	187	3.7%	136.15	306	2.3%
5	428	29.2%	112.05	99	11.1%	137	422	12.6%
6.01	311	33.8%	112.06	269	19.3%	138	357	14.8%
6.02	355	33%	113	120	15%	139.01	366	22.4%
9	144	18.8%	114	143	21.7%	139.03	588	14.6%
11	238	0%	115	185	56.8%	139.04	595	5.7%
12	189	0%	116	79	0%	140	691	18.1%
13	124	33.1%	117	99	0%	141	536	18.3%
14	212	7.1%	118	168	0%	142	122	4.1%
15	100	0%	119	144	43.1%	143	2886	0.8%
16	287	19.9%	120	392	10.7%	144.02	1014	3.6%
19.02	72	15.3%	121	149	20.8%	144.03	2581	3.9%
21	246	24.4%	122	453	37.7%	144.04	336	11.9%
22	304	34.9%	123	264	22%	145.01	1701	0.6%
23	252	23.8%	124	437	22.4%	145.02	5062	0.4%
24	314	12.4%	125	733	12.8%	147.02	108	16.7%
25	128	15.6%	126	188	59.6%	147.03	332	26.8%
26	545	20.9%	127	419	17.9%	147.05	382	6.3%
27	244	32.4%	129	360	44.2%	147.06	468	30.8%
28	144	4.9%	130	114	15.8%	148.03	364	12.1%
29	388	13.7%	131	194	20.1%	148.05	898	0%
30.02	478	42.7%	132	266	19.2%	148.07	886	20%
101.01	376	0%	133	65	0%	148.08	798	14.3%
101.04	279	9.7%	134	252	24.6%	148.09	595	6.7%
102	209	20.6%	135.01	452	9.7%	148.10	958	9.8%
103	215	1.9%	135.03	543	9.6%	149.03	824	26.5%
104	323	4.3%	135.05	200	11%	149.04	285	41.1%
105.02	534	19.7%	135.06	252	20.2%	149.06	478	10%
107.02	550	18%	136.04	275	18.9%	149.07	441	13.2%
108	327	21.1%	136.07	343	13.1%	149.08	210	5.2%
109	106	8.5%	136.08	181	29.3%	149.09	481	26.8%
110	191	0.5%	136.10	648	9.1%	150	597	30.3%
111	170	19.4%	136.11	458	2.4%	151	294	8.8%

Source: American Community Survey

Table 81, continued (page 2 of 2):

Number and Percentage of Adults 18–24 without GED or High School Diploma by Census Tract

Delaware, 5-Year Estimates, 2011–2015

Census Tract	# 18-14 yr. olds	Percent Dropouts	Census Tract	# 18-14 yr. olds	Percent Dropouts	Census Tract	# 18-14 yr. olds	Percent Dropouts
152	594	29.3%	416	104	8.7%	507.01	237	23.6%
154	233	16.7%	417.01	520	14.8%	507.03	170	10.6%
155.02	243	46.1%	417.02	361	26.6%	507.04	77	0%
156	292	24.3%	418.01	968	14.8%	507.05	440	16.1%
158.02	157	20.4%	418.02	618	42.6%	507.06	77	33.8%
159	212	14.6%	419	495	33.5%	508.01	235	14.5%
160	339	22.1%	420	252	31%	508.02	227	22.5%
161	134	12.7%	421	355	20%	508.03	586	22%
162	265	14.3%	422.01	1152	13.5%	509.01	75	10.7%
163.01	471	30.4%	422.02	848	27.5%	509.02	236	18.6%
163.02	594	40.1%	425	322	12.4%	510.03	245	33.5%
163.05	831	3.7%	428	560	9.5%	510.04	292	23.3%
164.01	485	18.1%	429	294	17.7%	510.05	244	25.4%
164.04	202	26.2%	430	549	13.8%	510.06	124	0%
166.01	1143	13.2%	431	257	14.4%	510.07	275	8%
166.02	623	5.9%	432.02	308	4.2%	511.01	5	0%
166.04	1081	19.5%	433	2745	2.3%	511.02	26	7.7%
166.08	478	4.2%	434	376	8.8%	511.03	34	2.9%
168.01	417	12.5%	Sussex County			512.01	36	0%
168.04	376	17.8%	501.01	308	16.9%	512.02	7	14.3%
169.01	195	22.6%	501.03	303	17.8%	512.03	20	0%
169.04	574	49.7%	501.04	329	0%	512.04	14	0%
Kent County			501.05	598	5.2%	512.05	26	0%
401	615	32.8%	502	318	33%	513.01	362	4.4%
402.01	319	21.9%	503.01	810	12.1%	513.02	166	12%
402.02	636	25.2%	503.02	301	24.9%	513.03	415	2.2%
402.03	503	21.9%	504.01	244	35.2%	513.05	108	26.9%
405.01	514	24.7%	504.03	264	23.1%	513.06	97	0%
405.02	64	20.3%	504.05	338	13.3%	514	403	36%
407	221	16.3%	504.06	379	42.7%	515	380	3.4%
409	1087	1.3%	504.07	372	24.5%	517.01	533	11.8%
410	796	10.8%	504.08	299	6%	517.02	251	40.2%
411	959	2.5%	505.01	465	7.7%	518.01	468	16.5%
412	321	39.9%	505.03	612	30.6%	518.02	434	23.3%
413	283	7.4%	505.04	459	34.9%	519	329	11.2%
414	629	15.4%	506.01	374	9.1%			
415	563	22.4%	506.02	349	12%			

kids count

Source: American Community Survey

Table 82:

Graduation Rates

Percentage of June Graduates Compared to the 9th Grade Class Four Years Previous According to the No Child Left Behind Definition, Public School Students in Delaware, School Years

		04/05	05/06	06/07	07/08	08/09	09/10	10/11	11/12	12/13	13/14	14/15	15/16
All Students		82.2	81.4	81.2	83.7	85.3	86.7	87.5	80.0	79.9	84.41	84.3	84.7
Race	African American	75.8	76.8	75.3	77.3	81.4	80.9	82.3	74.6	75.7	80.1	81.1	81.1
	Hispanic	65.6	64.5	65.9	67.3	73.7	80.9	84.3	73.9	77.4	80.9	79.8	80.6
	White	86.3	84.2	84.9	87.8	88.5	90.0	90.3	83.6	82.5	87.3	87.0	87.6
Gender	Female	85.3	83.9	84.2	86.9	87.7	89.9	89.5	84.4	83.3	87.7	87.9	88.0
	Male	79.0	78.9	78.1	80.4	82.9	83.3	85.4	75.8	76.6	81.2	80.9	81.4
Income	Low-Income	71.2	69.5	69.7	73.0	76.8	79.2	81.3	72.7	73.7	77.8	73.7	75.4
	Not Low-Income	88.0	87.2	87.5	89.3	90.3	91.3	91.9	86.3	76.6	90.6	88.6	88.88
,	With Disabilities	69.2	65.4	65.6	71.5	71.0	75.4	75.8	56.9	59.6	64.1	63.7	65.8
Status	Without Disabilities	84.4	83.5	83.4	85.8	87.2	88.2	89.0	83.9	83.5	87.6	88.9	92.9

Note: Delaware began calculating the graduation rate using a new method in 2009/10 to comply with federal requirements. Rates for years 2008/09 and before are not comparable.

Source: Delaware Department of Education

Table 83:

Suspensions and Expulsions

Number of Public School Students Enrolled, Expelled, Suspended, and Rate per 1,000 Students Delaware and Counties, School Years

		DCI	uware c	and Cou	illics, s	ciiooi i	cuis				
	05/06	06/07	07/08	08/09	09/10	10/11	11/12	12/13	13/14	14/15	15/1
Delaware											
Enrollment	120,890	122,240	124,010	125,430	126,801	129,395	130,610	131,514	133,369	134,932	136,02
Expulsions Rate	163 1.3	172 1.4	178 1.4	172 1.4	71 0.6	132 1.0	130 1.0	125 1.0	86 0.6	94 0.7	12 0.
Out-of-School Suspensions Rate	33,798 279.6	37,235 304.6	37,443 301.9	38,953 310.6	32,147 253.5	29,743 229.9	30,182 231.1	26,034 198.0	24,886 186.6	25,057 185.7	27,37 201
In-School Suspensions Rate	N/A	N/A	N/A	32,005	32,101 253.2	30,201 233.4	28,880 221.1	24,923 189.5	21,833 163.7	22,257 164.9	22,26 163
Total Suspensions Rate					64,248 506.7	59,944 463.3	59,062 452.2	50,957 387.5	46,719 350.3	47,314 350.7	49,63 364
New Castle											
Enrollment	71,305	71,744	72,444	73,305	73,858	75,287	76,135	76,571	77,466	78,008	78,65
Expulsions Rate	59 0.8	99 1.4	117 1.6	129 1.8	47 0.6	46 0.6	43 0.6	32 0.4	36 0.5	31 0.4	0
Out-of-School Suspensions Rate	24,680 346.1	27,900 388.9	27,573 380.6	28,383 387.2	23,240 314.7	21,291 282.8	21,658 284.5	18,977 247.8	17,321 223.6	16,918 185.7	18,84 239
In-School Suspensions Rate	N/A	N/A	N/A	17,854	19,056 258.0	15,356 204.0	14,487 190.3	12,698 165.8	10,780 139.2	10,731 137.6	10,52 133
Total Suspensions Rate					42,296 572.7	36,647 486.8	36,145 474.7	31,675 413.7	28,101 362.8	27,649 354.4	29,36 373
Kent											
Enrollment	27,367	28,023	28,499	28,873	29,278	29,903	29,915	29,989	30,254	30,527	30,48
Expulsions Rate	46 1.7	46 1.6	40 1.4	25 0.9	10 0.3	39 1.3	39 1.3	38 1.3	25 0.8	27 0.9	1
Out-of-School Suspensions Rate	4,791 175.1	5,117 182.6	5,438 190.8	6,237 216.0	5,155 176.1	4,944 165.3	5,324 178.0	4,097 136.6	3,945 130.4	4,094 134.1	4,41 144
In-School Suspensions Rate	N/A	N/A	N/A	7,747	7,426 253.6	8,878 296.9	9,468 316.5	8,248 275.0	6,863 226.8	6,169 202.1	5,53 181
Total Suspensions Rate					12,581 429.7	13,822 462.2	14,792 474.7	12,345 411.7	10,808 357.2	10,263 336.2	9,94 326
Sussex											
Enrollment	22,218	22,473	23,067	23,252	23,665	24,205	24,560	24,954	25,649	26,397	26,88
Expulsions Rate	58 2.6	27 1.2	21 0.9	18 0.8	14 0.6	<i>4</i> 7 1.9	48 2.0	55 2.2	25 1.0	36 1.4	1
Out-of-School Suspensions Rate	4,327 194.6	4,218 187.7	4,432 192.1	4,333 186.3	3,752 158.5	3,508 144.9	3,200 130.3	2,960 118.6	3,620 141.1	4,045 153.2	4,12 153
In-School Suspensions Rate	N/A	N/A	N/A	6,404	5,619 237.4	5,967 246.5	4,925 200.5	3,977 159.4	4,190 163.4	5,357 202.9	6,19 230
Total Suspensions Rate					9,371 396.0	9,475 391.4	8,125 330.8	6,937 278.0	7,810 304.5	9,402 356.2	10,32 383

kids count

Source: Delaware Department of Education

Table 84:

Teens Not in School and Not in the Labor Force

Number of Teens (15–19 Yrs.) Not in School and Not in the Labor Force Delaware and Counties, Five-year Estimates 2011–2015

Area	Total population 16–19 years	Total	Total Non-Hispanic White Population 16–19 years	Non- Hispanic White	Total Black Population 16–19 years	Black	Total Hispanic Origin Population 16–19 years	Hispanic Origin
Delaware	48686	4.1%	27412	3.8%	12844	5.4%	5597	3.3%
New Castle	31276	4%	17422	3.5%	7858	5.6%	3833	3.9%
Kent	9340	2.1%	4669	2.6%	3427	1.7%	680	2.5%
Sussex	8252	6.7%	5321	5.7%	1559	12.5%	1084	1.3%

^{*} Persons of Hispanic Origin can be of any race. Source: U.S. Census Bureau, American Community Survey

Table 85:

Teens Not Graduated, Not Enrolled, and Not Working

Percentage of 16–19 Year Olds Who Are Not Graduated, Not Enrolled, and Not Employed U.S. and Delaware, Three-year Averages

																	2012- 2014		
U.S.	8.6	8.3	7.9	8.0	8.0	8.5	9.2	9.0	8.6	7.8	7.7	8.1	8.5	8.6	8.2	8.1	8.1	8.5	8.5
Delaware	7.1	7.8	9.8	11.0	10.2	7.8	7.9	10.3	8.8	7.4	4.6	7.5	8.4	8.4	7.6	6.6	6.9	7.5	8.8

Table 86:

Unemployment

Percentage of Labor Force Unemployed by Race and Gender, U.S. and Delaware

	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	5.6	5.4	4.9	4.5	4.2	4.0	4.8	5.8	6.0	5.5	5.1	4.6	4.6	5.8	9.3	9.5	8.9	8.1	7.4	6.2	5.3	4.9
Male	5.6	5.4	4.9	4.4	4.1	3.9	4.8	5.9	6.3	5.6	5.1	4.6	4.7	6.1	10.3	10.5	9.4	8.2	7.6	6.3	5.4	4.9
Female	5.6	5.4	4.9	4.6	4.3	4.1	4.7	5.6	5.7	5.4	5.1	4.0	4.5	5.4	8.1	8.6	8.5	7.9	7.1	6.1	5.2	4.8
White	4.9	4.7	4.2	3.9	3.7	3.5	4.2	5.1	5.2	4.8	4.4	4.0	4.1	5.2	8.5	8.7	7.2	7.2	6.5	5.3	4.6	4.3
Black	10.4	10.5	10.0	8.9	8.0	7.6	8.7	10.2	10.8	10.4	10.0	8.9	8.3	10.1	14.8	16.0	15.9	13.8	13.1	11.3	9.6	7.8
Delaware	4.3	5.2	4.0	3.8	3.5	4.0	3.5	4.2	4.4	4.1	4.2	3.6	3.4	4.8	8.0	8.6	8.0	7.1	6.7	6.1	4.8	4.3
Male*	4.6	5.8	4.4	3.7	4.1	4.0	3.7	4.4	4.2	3.9*	4.0	3.8	3.5	5.5	10.1	9.7	7.9	7.8	6.9	5.5	4.7	4.2
Female	* 4.1	4.5	3.6	3.9	2.9	4.0	3.3	4.0	4.5	4.0*	4.7	3.2	3.5	4.4	6.9	7.4	7.1	6.6	7.1	6.1	5.3	4.4
White	4.1	3.9	3.3	2.9	2.6	3.4	3.1	3.7	3.8	3.5	3.4	3.0	3.2	4.1	7.5	7.7	6.4	6.2	5.9	4.8	4.3	3.7
Black	4.9	10.1	6.7	6.7	6.7	6.0	5.1	6.8	7.2	6.1	8.1	5.6	4.5	8.1	12.7	12.0	11.6	10.8	10.9	9.5	8.0	6.2

^{*} Data for the Delaware total and data for Delaware by gender and by race were taken from different data sources. The apparent discrepancy is due to differences in methodology.

Source: Delaware Department of Labor and U.S. Dept. of Labor, Bureau of Labor Statistics

Table 87:

Children with No Parent Working Full-time

Percentage of Children Living in Families Where No Parent Has Full-Time, Year-Round Employment U.S. and Delaware, Three-year Averages

1995- 1996- 1997- 1998- 1999- 2000- 2001- 2002- 2003- 2004- 2005- 2006- 2007- 2008- 2009- 2010- 2011- 2012- 2013- 2015- 2016- 1997- 1998- 1999- 2000- 2001- 2002- 2003- 2004- 2005- 2006- 2007- 2008- 2009- 2010- 2011- 2012- 2013- 2014- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016- 2015- 2016-

Table 88:

Children in Poverty

Percentage of Children (0–17) in Poverty, U.S., Delaware, and Counties, Three-year Averages

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 89:

Adults in Poverty

Percentage of Adults (18+) in Poverty, U.S., Delaware, and Counties, Three-year Averages

												2012- 2014		
U.S.	10.0	10.4	10.7	10.9	10.8	10.7	10.8	11.4	12.2	12.7	12.8	12.8	12.8	12.4
Delaware	6.	6.7	7.4	7.2	7.9	8.0	8.2	8.9	9.6	10.5	10.8	11.2	10.7	10.2

Table 90:

Poverty Thresholds

Poverty Thresholds by Size of Family and Number of Related Children Under 18 Years Annual Income in Dollars, U.S., 2016

			Re	ated Childr	en under 1	8 years old	l		
Size of Family Unit	None	One	Two	Three	Four	Five	Six	Seven	Eight +
One person (unrelated individual)									
Under 65 years	12,486								
65 years and over	11,511								
Two people									
Householder under 65 years	16,072	16,543							
Householder 65 years and over	14,507	16,480							
Three people	18,774	19,318	19,337						
Four people	24,755	25,160	24,339	24,424					
Five people	29,854	30,288	29,360	28,643	28,205				
Six people	34,337	34,473	33,763	33,082	32,070	31,470			
Seven people	39,509	39,756	38,905	38,313	37,208	35,920	34,507		
Eight people	44,188	44,578	43,776	43,072	42,075	40,809	39,491	39,156	
Nine people or more	53,155	53,413	52,702	52,106	51,127	49,779	48,561	48,259	46,400

Source: U.S. Census Bureau

Table 91:

Number of Children in Poverty by Age

Number of Children in Poverty, Ages 0–5 and 6–18
Delaware, Three-year Averages

	2004– 2006	2005– 2007	2006– 2008	2007– 2009	2008- 2010	2009– 2011	2010– 2012	2011- 2013	2012- 2014	2013- 2015	2014- 2016
Ages 0-5	9,831	11,770	12,172	11,428	12,481	13,530	16,070	16,202	16,417	30,962	12,982
Ages 6-18	16,004	15,142	15,377	17,009	21,081	23,950	27,508	28,865	32,521	13,346	27,590

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 92:

Percentage of Children in Poverty by Age

Percentage of Children in Poverty, Ages 0–5 and 6–18

Delaware Three-year Averages

			L	elaware	, illiee-y	redi Ave	ruges				
	2004– 2006	2005– 2007	2006– 2008	2007– 2009		2009– 2011	2010– 2012	2011– 2013	2012- 2014	2013- 2015	2014- 2016
Ages 0-5	14.4	17.1	17.4	15.9	17.0	18.5	23.0	23.8	24.7	20.4	19.3
Ages 6-18	11.4	10.8	10.8	11.7	14.4	16.1	18.2	18.9	21.1	20.1	18.5

Table 93:

Number of Children and Population in Poverty by Census Tract

Number of Persons and Children (Ages 0–18) in Poverty by Census Tract Delaware, 5-Year Estimates, 2011–2015

Census Tract	Population in Poverty	Children in Poverty	Census Tract	Population in Poverty	children in Poverty	Census Tract	Population in Poverty	Children in Poverty
2	1350	566	112.01	134	39	136.11	148	0
3	552	197	112.02	216	37	136.12	42	0
4	615	78	112.03	214	100	136.13	157	14
5	613	225	112.04	66	0	136.14	555	297
6.01	508	242	112.05	25	0	136.15	770	424
6.02	1155	332	112.06	41	0	137	736	254
9	435	135	113	42	0	138	170	0
11	442	0	114	78	21	139.01	115	28
12	109	6	115	223	61	139.03	136	0
13	105	8	116	162	61	139.04	424	83
14	258	63	117	86	11	140	691	193
15	410	96	118	172	10	141	479	136
16	724	88	119	317	92	142	150	39
19.02	425	121	120	777	408	143	572	0
21	862	331	121	168	33	144.02	1292	227
22	1020	435	122	1009	436	144.03	678	23
23	847	409	123	394	86	144.04	240	31
24	968	346	124	381	84	145.01	1624	0
25	471	143	125,	719	254	145.02	1767	61
26	1269	418	126	222	0	147.02	122	26
27	610	261	127	718	167	147.03	515	167
8	327	34	129	1208	597	147.05	461	113
29	2159	757	130	115	19	147.06	483	192
30.02	754	412	131	225	86	148.03	236	0
101.01	831	314	132	288	72	148.05	478	163
101.04	591	214	133	121	28	148.07	611	145
102	129	25	134	133	35	148.08	566	222
103	230	35	135.01	138	29	148.09	450	63
104,	255	39	135.03	235	47	148.10	457	97
105.02	711	303	135.05	58	7	149.03	2203	1082
107.02	544	292	135.06	20	0	149.04	158	16
108	260	102	136.04	257	0	149.06	514	146
109	72	0	136.07	297	70	149.07	514	219
110	155	38	136.08	204	90	149.08	274	98
111	80	4	136.10	204	37	149.09	1053	573

Source: American Community Survey

Table 93, continued (page 2 of 2):

Number of Persons and Children (Ages 0–18) in Poverty by Census Tract Delaware, 5-Year Estimates, 2011–2015

Census Tract	Population in Poverty	Children in Poverty	Census Tract	Population in Poverty	Children in Poverty	Census Tract	Population in Poverty	Children in Poverty
150	621	250	414	725	159	506.01	688	153
151	251	77	415	884	384	506.02	1219	509
152	918	381	416	136	40	507.01	564	162
154	762	220	417.01	374	72	507.03	307	105
155.02	1006	533	417.02	524	228	507.04	346	7
156	422	92	418.01	1159	297	507.05	446	43
158.02	233	70	418.02	697	296	507.06	89	5
159	456	171	419	753	312	508.01	347	37
160	480	88	420	451	141	508.02	298	43
161	137	27	421	517	207	508.03	633	46
162	563	233	422.01	1603	499	509.01	195	31
163.01	370	9	422.02	968	518	509.02	243	25
163.02	204	19	425	589	149	510.0	401	83
163.05	914	407	428	1053	308	510.04	398	61
164.01	281	57	429	497	110	510.05	306	38
164.04	272	56	430	909	393	510.06	248	57
166.01	419	105	431	358	106	510.07	493	137
166.02	182	83	432.02	490	176	511.01	71	8
166.04	765	395	433	698	184	511.02	52	0
166.08	139	60	434	495	120	511.03	60	4
168.01	294	100	9900	0	0	512.01	70	5
168.04	221	0	501.01	372	171	512.02	30	4
169.01	134	40	501.03	319	84	512.03	42	0
169.04	89	6	501.04	731	341	512.04	37	0
Kent Count		0	501.05	1042	498	512.05	19	0
401	863	320	502	818	358	513.01	432	164
402.01	611	213	503.01	1760	762	513.02	554	276
402.01	765	230	503.02	658	253	513.03	259	17
402.02	619	168	504.01	693	321	513.05	219	12
405.01	701	307	504.03	532	252	513.06	211	15
405.01	188	72	504.05	312	81	514	762	293
405.02	704	402	504.06	1300	646	515	644	249
407	396	27	504.07	789	197	517.01	223	35
410		310	504.08	576	116	517.02	583	187
	1147		505.01	164	14	518.01		204
411	385	231	505.03	1057	359	518.02		500
412	853 962	343 481	505.04	770	407	519	597	244

Source: American Community Survey

Table 94:

Percentage of Children and Population in Poverty by Census Tract

Population of Persons and Children (Ages 0–18) in Poverty by Census Tract Delaware, 5-Year Estimates, 2011–2015

Census Tract	Population in Poverty	Children in Poverty	Census Tract	Population in Poverty	Children in Poverty	Census Tract	Population in Poverty	Children in Poverty
New Castle Co			112.01	6.2%	9%	136.11	2.7%	0%
2	20.7%	32.5%	112.02	5.0%	4.3%	136.12	0.7%	0%
3	18.8%	25.5%	112.03	4.7%	12.7%	136.13	2.8%	1%
4	21.2%	20.4%	112.04	2%	0%	136.14	16.6%	35.3%
5	20.2%	35.5%	112.05	1.2%	0%	136.15	20.1%	52.3%
6.01	17.7%	28.1%	112.06	1.0%	0%	137	19.7%	38%
6.02	34.1%	46.6%	113	1.9%	0%	138	3.5%	0%
9	22.6%	23.7%	114	2.4%	3.2%	139.01	3.5%	3.6%
11	14.5%	0%	115	7.6%	8.9%	139.03	2.7%	0%
12	7.2%	6.2%	116	4.8%	7.1%	139.04	5.1%	4.2%
13	2.9%	1.2%	117	2.2%	1.3%	140	12.9%	19.2%
14	11.3%	14.9%	118	4.4%	1.4%	141	10.1%	12.7%
15	21.2%	36.4%	119	9.2%	9.9%	142	7.3%	9.0%
16	33.6%	23.8%	120	16.7%	39.3%	143	12.9%	0%
19.02	24	30.9%	121	6.6	6.8%	144.02	35.2	42.9%
21	42.3	56%	122	22	39.5%	144.03	15.7	3.35
22	35.6	45.9%	123	13.8	13.3%	144.04	6.3	5.2%
23	25.9	42.1%	124	8.6	7.7%	145.01	73.2	J.276
2	20.5	25%	125	13.2	21.9%	145.02	65.8	61%
15	21.2	36.4%	126	8.7	0%	147.02	6.4	5.6%
26	32.3	31.9%	27	17.3	25.8%	147.02	10.8	20.4%
27	24.9	50%	129	25.9	43.8%	147.05	9.5	11.3%
28	19.9	14.3%	130	6.5	5.9%	147.06	15.3	21.2%
29	59.8	64.6%	131	10.6	22.6%	148.03	6.2	0%
30.02	41.7	52.2%	132	10.6	10.8%	148.05	4.9	6.6%
101.01	19.1	26.2%	133	6.9	8.8%	148.07		
101.04	15.5	22.4%	134	5.4	7.5%		<i>7</i> 9.1	7.2%
102	6.4	7.1%	135.01	2.3	2.6%	148.08 148.09	5.7	16.6% 3.5%
103	7.2	3.8%	135.01	3.3	2.6%	148.10		
104	5.6	4.4%	135.05	1.9	1.1%		6.2	6.9%
105.02	11.5	21.5%			0%	149.03	30.4	50.2%
107.02	10	21.9%	135.06 136.04	0.4		149.04	3.3	1.5%
108	5.4	10.2%		6.3	0% 7.0%	149.06	11.2	13.2%
109	2.8	0%	136.07	5.8	7.8%	149.07	10.3	16.3%
110	4.9	6.4%	136.08	9.9	18.1%	149.08	12.5	17.9%
111	2.9	0.9%	136.10	3.5	2.8%	149.09	16.1	28.7%

Source: American Community Survey

continued next page

Table 95, continued (page 2 of 2):

Percentage of Persons and Children (Ages 0–18) in Poverty by Census Tract Delaware, 5-Year Estimates, 2011–2015

Census Tract	Population in Poverty	Children in Poverty	Census Tract	Population in Poverty	Children in Poverty	Census Tract	Population in Poverty	Children in Poverty
150	10.8%	19.4%	414	20.8%	24.2%	506.01	145	13.7%
151	7.2%	10.4%	415	20.8%	39.6%	506.02	20.5%	33.8%
152	16.9%	26.2%	416	6.8%	9.3%	507.01	14.2%	24.8%
154	24.9%	24.2%	417.01	6.3%	5.8%	507.03	14.7%	35.1%
155.02	34.2%	64.8%	417.02	10.5%	17.6%	507.04	8.3%	9.7%
156	15.6%	14.7%	418.01	11.7%	12.5%	507.05	8.8%	4.5%
158.02	10.8%	12.8%	418.02	12.9%	20.5%	507.06	6.1%	3.6%
159	12.4%	17.6%	419	14.5%	27.8%	508.01	10.5%	6%
160	15.6%	12.4%	420	15.35	22.8%	508.02	6.4%	5%
161	7.8%	10.2%	421	12.8%	20.3%	508.03	8.5%	4.4%
162	19.9%	55.5%	422.01	15.2%	18.1%	509.01	8.3%	8.8%
163.01	7.1%	1%	422.02	10.5%	21.1%	509.02	5.4%	4.9%
163.02	2.7%	1%	425	18.6%	18.8%	510.03	8.2%	12.7%
163.05	11.2%	22.1%	428	14.8%	17.8%	510.04	8.7%	10%
164.01	4.3%	3.7%	429	10.2%	10.5%	510.05	6.7%	6.2%
164.04	8.2%	6.4%	430	16.3%	26.4%	510.06	8.3%	16.2%
166.01	3.5%	3.1%	431	12.9%	17.4%	510.07	10%	29.7%
166.02	2.4%	4.2%	432.02	13.8%	24.1%	511.01	10.7%	25.8%
166.04	6.1%	9.7%	433	20.8%	28.4%	511.02	5.7%	0%
166.08	3%	5.7%	434	11%	12.1%	511.03	6.6%	4.5%
168.01	4.8%	5.4%	Sussex County			512.01	5.1%	2.9%
168.04	3%	0%	501.01	10.3%	21.4%	512.02	3.8%	5.8%
169.01	6.4%	10.5%	501.03	7.2%	10.4%	512.03	6.3%	0%
169.04	6.5%	2.4%	501.04	16.6%	30.7%	512.04	5.8%	0%
Kent County			501.05	17%	30.2%	512.05	2.8%	0%
401	13.3%	23.95	502	22.3%	33.8%	513.01	7.5%	21.1%
402.01	11.8%	16.7%	503.01	21.9%	40.9%	513.02	17.7%	44.6%
402.02	5.4%	5.7%	503.02	13.7%	22.3%	513.03	4.8%	1.8%
402.03	10.7%	11.2%	504.01	18.2%	33.4%	513.05	8.8%	5.8%
405.01	15%	30.6%	504.03	15%	28.4%	513.06	8%	5.85
405.02	9.3%	20.9%	504.05	8.2%	9.9%	514	17.6%	24.6%
407	16.2%	39.2%	504.06	29.5%	50.6%	515	12.6%	21.5%
409	22.3%	15.3%	504.07	15.9%	18.5%	517.01	5.4%	4.3%
410	17.6%	23%	504.08	13.2%	13.7%	517.02	11.1%	15%
411	11.3%	18.7%	505.01	4.4%	2.2%	518.01	13.3%	23.7%
412	18.15	25.3%	505.03	19.1%	24.9%	518.02	25.8%	37.6%
413	43.1%	78.1%	505.04	16.1%	29.3%	519	13.8%	22.7%

Source: American Community Survey

Table 95:

Children in Poverty by Household Structure

Percentage of Children (0–17) in Poverty by Household Structure, Delaware, Three-year Averages

																		2013- 2015	2014- 2016
One Parent	33.2	31.4	31.7	31.9	31.1	28.0	23.2	24.9	25.1	26.1	26.1	26.7	30.9	32.4	37.1	39.2	40.9	41.6	39.1
Two Parents	4.3	6.3	7.1	8.2	6.4	6.3	5.8	6.0	4.6	5.0	5.7	6.9	7.8	8.2	9.6	8.9	10.0	9.9	9.7

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 96:

Income of Families with Children by Family Type

Median Income in U.S. Dollars of Households with Children under 18 by Family Type U.S. and Delaware, Three-year Averages

	2001- 2003	2002- 2004	2003- 2005	2004- 2006	2005- 2007	2006- 2008	2007- 2009	2008- 2010	2009- 2011	2010- 2012	2011- 2013	2012- 2014	2013- 2015	2014- 2016
U.S.														
1-Parent	20,602	20,780	21,512	22,365	23,521	24,187	24,616	24,616	23,974	24,011	24,277	25,137	25,421	25,488
2-Parent	63,844	64,747	65,578	67,428	70,000	72,900	75,100	75,800	75,900	76,033	77,667	79,971	82,930	85,908
Delaware														
1-Parent	27,346	28,681	27,715	26,369	27,493	29,547	30,259	28,599	27,212	26,334	25,201	24,834	24,897	29,589
2-Parent	70,000	71,612	70,748	72,904	74,959	79,266	82,776	85,393	85,950	83,950	82,058	79,724	85,088	92,887

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 97:

Public Assistance by Household Structure

Children living in households with Supplemental Security Income (SSI), cash public assistance income, or Food Stamp/TANF benefits in the past 12 months, Delaware and U.S., Five-year estimates, 2011–2015

	Delaware	U.S.	
Total	30.2%	28.0%	
Married Couple Family Household	33.2%	39.7%	
Male householder, no wife present family household	10.5%	9.5%	
Female householder, no husband present family household	55.5%	49.9%	

Source: U.S. Census Bureau , American Community Survey

Table 98:

Poverty Rates for One-Parent Families

Number and Percentage in Poverty for One-Parent Female (FHH) and Male (MHH)
Householder Families With Related Children Under 18 Years of Age
Delaware and Counties, 2010 Census

Area	One-Parent FHH Families		amilies poverty	One-Parent MHH Families		amilies Poverty	Risk of Poverty Ratio
		Number	Percent		Number	Percent	(FHH vs. MHH)*
Delaware	31,316	9,509	30.3	8,311	1,744	20.9	1.4
New Castle	19,761	5,858	29.6	4,282	655	15.2	1.9
Kent	5,756	1,783	30.9	1,596	453	28.3	1.1
Sussex	5,799	1,868	32.2	2,433	636	26.1	1.2

^{*} Female-headed one-parent families are 2.1 times more likely to be in poverty than male-headed one-parent families . Source: 2010 Census, U.S. Bureau of the Census

Table 99:

Poverty Rates for Female-Householder Families

Number and Percentage in Poverty for One-Parent Female-Householder (FHH) Families With Related Children Under 18 Years of Age, Delaware and Counties

	1990) Census		200	0 Census		2010) Census	
Area	One-Parent FHH Families		amilies poverty Percent	One-Paren FHH Families	t FHH Fo below I Number		One-Parent FHH Families		amilies Poverty Percent
Delaware	17,625	5,609	31.8	26,419	6,950	26.3	31,316	9,509	30.3
New Castle	11,625	3,202	27.5	16,777	3,991	23.8	19,761	5,858	29.6
Kent	3,193	1,257	39.4	4,832	1,461	30.2	5,756	1,783	30.9
Sussex	2,807	1,150	41.0	4,810	1,498	31.1	5,799	1,868	32.2

Source: U.S. Bureau of the Census

Table 100:

Median Income of Female-Headed Families

Percentage Median Income of Families with Children Under 18 and Single Female Head U.S. and Delaware, Three-year Averages

													2012- 2014		
U.S.	19,067	19,712	19,812	20,091	20,445	18,759	19,227	19,560	22,012	21,599	21,599	21,667	22,333	22,767	23,761
Delaware	22,633	26,047	27,022	25,797	25,383	22,242	23,737	23,735	26,202	25,132	24,500	22,300	21,940	22,573	27,973



Table 101:

Female-Headed Families in Poverty

Percentage Families in Poverty with Single Female Head and Children Under 18
U.S. and Delaware, Three-year Averages

995- 1996- 1997- 1998- 1999- 2000- 2001- 2002- 2003- 2004- 2005- 2006- 2007- 2008- 2009- 2010- 2011 2012- 2013 2014- 2015 2016

U.S. 40.2 39.3 38.3 36.4 33.5 31.8 31.2 32.3 33.1 33.9 35.7 35.9 36.3 35.4 36.7 37.8 38.5 38.1 37.5 36.1

Delaware 28.2 28.0 28.1 31.3 30.8 28.3 22.8 18.8 20.0 22.7 26.0 25.6 24.3 26.7 28.4 32.5 33.8 36.7 34.4 32.4

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 102:

U.S.

Child Support

Percentage of Current Child Support Owed that Is Paid, U.S. and Delaware, Fiscal Years

1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 52.0 54.0 50.8 53.1 56.1 57.0 57.6 58.0 59.0 59.9 60.4 61.2 61.9 61.8 62.0 62.4 63.0 N/A 64.0 65.0 65.0

Delaware 61.4 60.2 61.0 55.3 58.7 59.8 60.7 60.7 60.3 60.5 60.5 60.2 60.0 59.0 60.0 59.8 59.7 59.4 58.2 59.1 60.1

Note: U.S. data is not yet available for 2013.

Note: This Federal performance measure is based on the ratio of Current Child Support Collected/Current Child Support Due. Source: Office of Child Support Enforcement – 157 Report: Child Support Enforcement Annual Report to Congress

Table 103:

Single-Parent Households by Census Tract

Number and Percentage of Single-Parent Householder Families with No Spouse Present (SHF) by Census Tract, Delaware, 5-Year Estimates, 2011–2015

Census	Total #	Male	Female	Total		Female	Total	Census		Male	Female	Total	Male	Female	Total
Tract	Families	SHF #	SHF #	SHF #	SHF %	SHF %	SHF %	Tract	Families	SHF #	SHF #	SHF#	SHF %	SHF %	SHF %
New Cast	le County							111	692	23	108	131	0.18	0.82	0.19
2	1778	278	596	874	0.32	0.68	0.49	112.01	537	28	48	76	0.37	0.63	0.14
3	719	52	348	400	0.13	0.87	0.56	112.02	1195	49	113	162	0.30	0.70	0.14
4	616	54	262	316	0.17	0.83	0.51	112.03	1117	117	194	311	0.38	0.62	0.28
5	686	46	386	432	0.11	0.89	0.63	112.04	815	24	105	129	0.19	0.81	0.16
6.01	664	103	366	469	0.22	0.78	0.71	112.05	565	33	43	76	0.43	0.57	0.13
6.02	755	101	398	499	0.20	0.80	0.66	112.06	1217	30	90	120	0.25	0.75	0.10
9	461	91	255	346	0.26	0.74	0.75	113	609	14	74	88	0.16	0.84	0.14
11	470	62	18	80	0.78	0.23	0.17	114	925	29	25	54	0.54	0.46	0.06
12	247	18	19	37	0.49	0.51	0.15	115	783	24	136	160	0.15	0.85	0.20
13	1017	116	154	270	0.43	0.57	0.27	116	955	64	122	186	0.34	0.66	0.19
14	409	14	171	185	0.08	0.92	0.45	117	1214	33	49	82	0.40	0.60	0.07
15	271	4	192	196	0.02	0.98	0.72	118	1081	63	78	141	0.45	0.55	0.13
16	399	68	190	258	0.26	0.74	0.65	119	978	50	48	98	0.51	0.49	0.10
19.02	362	18	193	211	0.09	0.91	0.58	120	1212	116	274	390	0.30	0.70	0.32
21	437	28	292	320	0.09	0.91	0.73	121	699	53	219	272	0.19	0.81	0.39
22	565	114	266	380	0.30	0.70	0.67	122	1167	105	312	417	0.25	0.75	0.36
23	815	41	352	393	0.10	0.90	0.48	123	573	59	186	245	0.24	0.76	0.43
24	1020	39	505	544	0.07	0.93	0.53	124	1088	86	304	390	0.22	0.78	0.36
25	726	153	255	408	0.38	0.63	0.56	125	1251	131	370	501	0.26	0.74	0.40
26	942	116	533	649	0.18	0.82	0.69	126	616	87	130	217	0.40	0.60	0.35
27	539	94	224	318	0.30	0.70	0.59	127	950	77	236	313	0.25	0.75	0.33
28	235	32	102	134	0.24	0.76	0.57	129	1033	80	399	479	0.17	0.83	0.46
29	773	131	593	724	0.18	0.82	0.94	130	447	33	99	132	0.25	0.75	0.30
30.02	409	43	316	359	0.12	0.88	0.88	131	544	44	78	122	0.36	0.64	0.22
101.01	988	59	293	352	0.17	0.83	0.36	132	732	102	152	254	0.40	0.60	0.35
101.04	838	76	320	396	0.19	0.81	0.47	133	510	7	80	87	0.08	0.92	0.17
102	499	41	77	118	0.35	0.65	0.24	134	655	21	137	158	0.13	0.87	0.24
103	787	143	168	311	0.46	0.54	0.40	135.01	1725	45	198	243	0.19	0.81	0.14
104	1176	61	149	210	0.29	0.71	0.18	135.03	2143	346	219	565	0.61	0.39	0.26
105.02	1395	186	284	470	0.40	0.60	0.34	135.05	947	32	9	41	0.78	0.22	0.04
107.02	1306	198	543	741	0.27	0.73	0.57	135.06	1414	17	58	75	0.23	0.77	0.05
108	1299	31	161	192	0.16	0.84	0.15	136.04	1135	92	165	257	0.36	0.64	0.23
109	686	0	109	109	0.00	1.00	0.16	136.07	1157	41	211	252	0.16	0.84	0.22
110	868	12	80	92	0.13	0.87	0.11	136.08	545	36	80	116	0.31	0.69	0.21

Table 103, continued (page 2 of 3):

Number and Percentage of Single-Parent Householder Families with No Spouse Present (SHF) by Census Tract, Delaware, 5-Year Estimates, 2011–2015

			٠,	CCIIS		,	iwaic, 5	icai Esii							
Census Tract	Total # Families		Female SHF #	Total SHF #	Male SHF %	Female SHF %	Total SHF %	Census Tract	Total # Families		Female SHF #	Total SHF #	Male SHF %	Female SHF %	Total SHF %
136.10	1598	36	107	143	0.25	0.75	0.09	151	934	63	121	184	0.34	0.66	0.20
136.11	1354	54	221	275	0.20	0.80	0.20	152	1286	124	344	468	0.26	0.74	0.36
136.12	1807	37	95	132	0.28	0.72	0.07	154	827	106	398	504	0.21	0.79	0.61
136.13,	1576	160	229	389	0.41	0.59	0.25	155.02	662	121	300	421	0.29	0.71	0.64
136.14,	695	27	299	326	0.08	0.92	0.47	156	636	101	180	281	0.36	0.64	0.44
136.15	945	90	185	275	0.33	0.67	0.29	158.02	521	80	102	182	0.44	0.56	0.35
137	940	53	151	204	0.26	0.74	0.22	159	850	53	314	367	0.14	0.86	0.43
138	1111	48	256	304	0.16	0.84	0.27	160	691	16	202	218	0.07	0.93	0.32
139.01	803	19	172	191	0.10	0.90	0.24	161	497	47	109	156	0.30	0.70	0.31
139.03	1166	115	230	345	0.33	0.67	0.30	162	675	83	143	226	0.37	0.63	0.33
139.04	2187	118	401	519	0.23	0.77	0.24	163.01	1421	182	225	407	0.45	0.55	0.29
140	1285	99	433	532	0.19	0.81	0.41	163.02	1849	141	315	456	0.31	0.69	0.25
141	1108	176	261	437	0.40	0.60	0.39	163.05	1959	269	275	544	0.49	0.51	0.28
142	524	36	82	118	0.31	0.69	0.23	164.01	1609	96	241	337	0.28	0.72	0.21
143	1165	55	171	226	0.24	0.76	0.19	164.04	831	80	157	237	0.34	0.66	0.29
144.02	706	20	143	163	0.12	0.88	0.23	166.01	3140	149	499	648	0.23	0.77	0.21
144.03	899	39	175	214	0.18	0.82	0.24	166.02	2054	55	233	288	0.19	0.81	0.14
144.04	919	36	108	144	0.25	0.75	0.16	166.04	3225	130	794	924	0.14	0.86	0.29
145.01	62	0	4	4	0.00	1.00	0.06	166.08	1273	69	118	187	0.37	0.63	0.15
145.02	133	7	29	36	0.19	0.81	0.27	168.01	1493	143	207	350	0.41	0.59	0.23
147.02	489	52	76	128	0.41	0.59	0.26	168.04	2002	25	261	286	0.09	0.91	0.14
147.03	1117	147	173	320	0.46	0.54	0.29	169.01	649	49	60	109	0.45	0.55	0.17
147.05	1317	112	368	480	0.23	0.77	0.36	169.04	360	21	15	36	0.58	0.42	0.10
147.06,	729	58	281	339	0.17	0.83	0.47	Kent Coun	ity						
148.03	934	23	123	146	0.16	0.84	0.16	401	1860	155	395	550	0.28	0.72	0.30
148.05	2819	110	242	352	0.31	0.69	0.12	402.01	1383	128	399	527	0.24	0.76	0.38
148.07	2216	85	373	458	0.19	0.81	0.21	402.02	3736	105	667	772	0.14	0.86	0.21
148.08	1684	140	406	546	0.26	0.74	0.32	402.03,	1451	116	237	353	0.33	0.67	0.24
148.09	1979	170	186	356	0.48	0.52	0.18	405.01	1206	83	279	362	0.23	0.77	0.30
148.10	1891	119	216	335	0.36	0.64	0.18	405.02	525	5	202	207	0.02	0.98	0.39
149.03	1761	251	513	764	0.33	0.67	0.43	407	1136	57	283	340	0.17	0.83	0.30
149.04	1298	84	61	145	0.58	0.42	0.11	409	320	30	83	113	0.27	0.73	0.35
149.06	1089	103	338	441	0.23	0.77	0.40	410	1391	70	538	608	0.12	0.88	0.44
149.07	1190	246	347	593	0.41	0.59	0.50	411	969	0	86	86	0.00	1.00	0.09
149.08	546	46	341	387	0.12	0.88	0.71	412,	1200	65	446	511	0.13	0.87	0.43
149.09	1611	122	564	686	0.18	0.82	0.43	413	489	62	276	338	0.18	0.82	0.69
150	1498	181	440	621	0.29	0.71	0.41	414	681	103	215	318	0.32	0.68	0.47

Source: American Community Survey

Table 103, continued (page 3 of 3):

Number and Percentage of Single-Parent Householder Families with No Spouse Present (SHF) by Census Tract, Delaware, 5-Year Estimates, 2011–2015

			٠,	-		, _ 0	awaic, 5	icai Esii			_0.0				
Census Tract	Total # Families		Female SHF #	Total SHF #		Female SHF %		Census Tract	Total # Families		Female SHF #	Total SHF #	Male SHF %	Female SHF %	Total SHF %
415	980	116	200	316	0.37	0.63	0.32	506.02	1504	154	373	527	0.29	0.71	0.35
416	495	23	95	118	0.19	0.81	0.24	507.01	1099	52	197	249	0.21	0.79	0.23
417.01	1651	107	197	304	0.35	0.65	0.18	507.03	596	58	98	156	0.37	0.63	0.26
417.02	1291	58	213	271	0.21	0.79	0.21	507.04	1151	74	239	313	0.24	0.76	0.27
418.01	2650	164	598	762	0.22	0.78	0.29	507.05	1306	103	353	456	0.23	0.77	0.35
418.02	1427	117	228	345	0.34	0.66	0.24	507.06	459	36	72	108	0.33	0.67	0.24
419	1289	108	173	281	0.38	0.62	0.22	508.01	825	67	204	271	0.25	0.75	0.33
420	779	112	80	192	0.58	0.42	0.25	508.02	1267	20	191	211	0.09	0.91	0.17
421	1066	57	182	239	0.24	0.76	0.22	508.03	2052	128	72	200	0.64	0.36	0.10
422.01	2698	197	571	768	0.26	0.74	0.28	509.01	711	22	101	123	0.18	0.82	0.17
422.02	2471	182	352	534	0.34	0.66	0.22	509.02	1244	26	209	235	0.11	0.89	0.19
425	760	103	235	338	0.30	0.70	0.44	510.03	1331	83	155	238	0.35	0.65	0.18
428	1915	191	297	488	0.39	0.61	0.25	510.04	1274	78	228	306	0.25	0.75	0.24
429	1340	29	279	308	0.09	0.91	0.23	510.05	1395	46	132	178	0.26	0.74	0.13
430	1469	83	410	493	0.17	0.83	0.34	510.06	953	30	136	166	0.18	0.82	0.17
431	737	59	111	170	0.35	0.65	0.23	510.07	1309	132	173	305	0.43	0.57	0.23
432.02	927	57	191	248	0.23	0.77	0.27	511.01	192	21	12	33	0.64	0.36	0.17
433	793	57	182	239	0.24	0.76	0.30	511.02	263	35	26	61	0.57	0.43	0.23
434	1192	67	235	302	0.22	0.78	0.25	511.03	265	12	8	20	0.60	0.40	0.08
Sussex Co	ounty							512.01	445	19	74	93	0.20	0.80	0.21
501.01	941	61	130	191	0.32	0.68	0.20	512.02	242	0	13	13	0.00	1.00	0.05
501.03	1201	22	72	94	0.23	0.77	0.08	512.03	234	3	18	21	0.14	0.86	0.09
501.04	1239	71	243	314	0.23	0.77	0.25	512.04	202	2	10	12	0.17	0.83	0.06
501.05	1436	216	310	526	0.41	0.59	0.37	512.05	240	9	46	55	0.16	0.84	0.23
502	894	124	236	360	0.34	0.66	0.40	513.01	1791	63	233	296	0.21	0.79	0.17
503.01	1955	120	540	660	0.18	0.82	0.34	513.02	829	65	105	170	0.38	0.62	0.21
503.02	1328	98	274	372	0.26	0.74	0.28	513.03	1623	112	280	392	0.29	0.71	0.24
504.01	1034	27	246	273	0.10	0.90	0.26	513.05	854	45	49	94	0.48	0.52	0.11
504.03	935	133	234	367	0.36	0.64	0.39	513.06	839	37	68	105	0.35	0.65	0.13
504.05	932	69	196	265	0.26	0.74	0.28	514	1028	94	265	359	0.26	0.74	0.35
504.06	1004	24	329	353	0.07	0.93	0.35	515	1345	150	281	431	0.35	0.65	0.32
504.07	1368	130	384	514	0.25	0.75	0.38	517.01	1139	110	133	243	0.45	0.55	0.21
504.08	1215	116	309	425	0.27	0.73	0.35	517.02	1403	130	112	242	0.54	0.46	0.17
505.01	1005	114	181	295	0.39	0.61	0.29	518.01	1197	129	223	352	0.37	0.63	0.29
505.03	983	82	212	294	0.28	0.72	0.30	518.02	1244	101	458	559	0.18	0.82	0.45
505.04,	1332	106	258	364	0.29	0.71	0.27	519	1117	83	248	331	0.25	0.75	0.30
506.01	1282	89	196	285	0.31	0.69	0.22								



Source: American Community Survey

Table 104:

Home Ownership

Percentage of Home Ownership, U.S. and Delaware

1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015

U.S. 64.7 65.4 65.7 66.3 66.8 67.4 67.8 67.9 68.3 69.0 68.9 68.8 68.1 67.8 67.4 66.9 66.1 65.4 65.1 64.5 63.7

Delaware 71.7 71.5 69.2 71.0 71.6 72.0 75.4 75.6 77.2 77.3 75.8 76.8 76.8 76.2 76.5 74.7 74.2 73.4 74.1 74.3 73.3

Source: U.S. Census Bureau Housing Vacancy Survey

Table 105:

Housing Foreclosures

Number of Foreclosure Filings by Year, Delaware

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Delaware	2,121	2,204	2,121	2,174	2,962	3,853	4,478	6,157	6,457	5,112	1,276	2,592	2,877	2200	3015

Source: 2000-2005: The Reinvestment Fund, 2006. Mortgage Foreclosure Filings in Delaware; 2006-2007: Office of the State Bank Commissioner; 2008+: File & Serve Express, compiled by Counties and Delaware State Housing Authority.

Table 106:

Homeless Students

Number and Percentage of Public School Students Who Are Homeless Delaware, School Years

	06/07	07/08	08/09	09/10	10/11	11/12	12/13	13/14	14/15	15/16
Number of Homeless Students	1,599	1,778	2,314	1,946	3,056	3,212	3,280	3,645	3,847	4,047
Number of Homeless Students per 100 Students Enrolled	1.3	1.4	1.8	1.5	2.4	2.5	2.5	2.7	2.9	3

Note: According to the federal McKinney-Vento Act students are considered to be homeless if they are living with or without their parents in a shelter (e.g. temporary family shelter, domestic violence shelter, runaway shelter), transitional housing, hotel or motel, campground, cars, or on the street. Also included are those children and youth temporarily living with relatives or friends (with or without their parents) because they do not have fixed, regular, safe and adequate residence, and children in foster care. Source: Delaware Department of Education

Family & Community

Table 107:

Children in One-Parent Households

Percentage of Children (0-17) in One-Parent Households, U.S. and Delaware, Three-year Averages

 1995- 1996- 1997- 1998- 1999- 2000- 2001- 2002- 2003- 2004- 2005- 2006- 2007- 2008- 2009- 2010- 2011- 2012- 2013- 2014- 2015- 2016

 U.S.
 30.5
 30.8
 30.7
 30.4
 29.9
 29.7
 29.9
 30.6
 30.9
 31.2
 31.2
 31.6
 31.8
 32.4
 32.9
 33.8
 34.4
 34.3
 34.0
 33.7

 Delaware
 34.4
 38.3
 37.0
 38.9
 37.5
 33.7
 31.0
 31.1
 33.6
 33.1
 32.5
 33.4
 35.6
 36.6
 37.9
 39.1
 39.5
 36.8
 35.2

Source: Center for Applied Demography and Survey Research, University of Delaware

Table 108:

Pre- and Young Teen Birth Rates (10–14 year olds)

Live Birth Rates (births per 1,000) for Females Ages 10–14 by Race U.S., Delaware, Counties, and City of Wilmington, Five-year Averages

Area/Race	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	2009- 2013	2010- 2014
U.S.	1.1	1.0	0.9	0.9	8.0	0.7	0.7	0.7	0.6	0.6	0.6	0.6	0.5	0.5	0.4	0.4
White	0.7	0.7	0.6	0.6	0.5	0.5	0.5	0.5	0.5	0.5	0.4	0.4	0.4	0.4	0.3	0.3
Black	3.3	2.9	2.6	2.3	2.1	1.9	1.7	1.6	1.6	1.5	1.4	1.3	1.1	1.0	0.9	0.8
Delaware	1.7	1.5	1.3	1.2	1.0	0.9	0.8	0.8	0.7	0.7	0.7	0.7	0.6	0.6	0.4	0.4
White	0.8	0.7	0.6	0.6	0.6	0.5	0.4	0.5	0.4	0.4	0.4	0.4	0.3	0.3	0.3	0.2
Black	4.5	3.9	3.3	2.9	2.3	2.1	1.7	1.6	1.4	1.5	1.4	1.5	1.4	1.3	1.0	0.9
New Castle	1.6	1.4	1.2	1.0	0.9	0.8	0.6	0.6	0.6	0.6	0.7	0.7	0.6	0.6	0.5	0.4
White	0.6	0.5	0.5	0.5	0.5	0.4	0.4	0.4	0.4	0.4	0.5	0.5	0.4	0.4	0.3	0.2
Black	4.4	3.9	3.1	2.6	2.1	1.8	1.3	1.2	1.2	1.2	1.3	1.4	1.3	1.3	0.9	0.9
Wilmington	5.9	5.4	4.3	3.8	3.1	2.6	1.9	2.1	2.1	2.5	2.7	3.0	2.5	2.4	1.5	1.4
White	1.8	1.8	1.9	2.0	2.5	2.1	2.6	3.2	3.3	3.9	4.5	5.1	4.0	4.5	3.1	2.5
Black	7.8	7.0	5.4	4.7	3.7	3.1	2.0	2.1	2.1	2.5	2.7	2.9	2.4	2.1	1.2	1.2
Kent	1.6	1.5	1.2	1.2	1.0	0.9	1.0	0.9	8.0	8.0	0.6	0.4	0.4	0.3	0.3	0.2
White	0.9	0.9	0.6	0.5	0.5	0.5	0.5	0.4	0.4	0.4	0.3	0.3	0.3	0.3	0.3	0.2
Black	3.5	3.3	3.0	3.1	2.2	2.1	2.5	2.2	2.0	1.9	1.3	8.0	0.8	0.4	0.3	0.4
Sussex	2.3	2.0	1.8	1.7	1.4	1.3	1.1	1.1	1.0	1.0	1.0	0.9	0.8	0.6	0.5	0.4
White	1.3	1.1	1.1	1.1	0.9	0.6	0.6	0.6	0.5	0.4	0.4	0.4	0.3	0.2	0.2	0.1
Black	5.6	4.5	4.4	3.7	3.0	3.2	2.7	2.4	2.1	2.3	2.3	2.6	2.8	2.4	2.2	2.0

Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 109:

Teen Birth Rates (15–17 year olds)

Live Birth Rates (births per 1,000) for Females Ages 15–17 by Race U.S., Delaware and Counties, Five-year Averages

Area/Race	1995- 1999	1996- 2000			1999- 2003											
U.S.	32.1	30.3	28.4	26.7	25.0	23.7	22.5	21.9	21.7	21.5	21.0	20.3	19.1	17.6	15.8	14.0
Delaware	35.8	33.8	31.6	29.3	27.5	25.9	24.5	23.3	22.8	22.2	20.8	19.6	18.2	16.2	14.5	12.9
New Castle	33.3	31.8	29.6	28.4	27.0	25.1	23.3	22.4	21.4	20.5	19.1	18.1	16.7	14.9	13.4	12.0
Kent	33.4	31.8	30.3	28.7	27.5	25.0	24.2	21.6	21.1	20.6	19.8	18.8	17.4	16.0	14.3	12.5
Sussex	48.0	43.2	40.1	33.2	29.3	29.6	28.7	28.1	29.4	30.2	27.6	26.1	24.3	21.2	18.4	16.4

Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 110:

Teen Birth Rates (15–19 year olds)

Live Birth Rates (births per 1,000) for Females Ages 15–19 by Race U.S., Delaware, Counties, and City of Wilmington, Five-year Averages

Area/Race	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	2009- 2013	2010- 2014
U.S.	51.9	50.2	48.5	46.8	45.0	43.3	41.8	41.0	40.8	40.6	40.1	39.0	37.1	34.7	32.0	29.2
White	46.2	45.0	43.7	42.4	41.1	39.7	38.5	37.9	37.7	37.6	37.1	36.2	34.5	32.3	29.8	27.3
Black	86.0	82.6	79.4	75.3	71.0	67.5	64.1	62.4	61.7	61.2	60.2	58.4	55.5	51.9	47.8	43.5
Delaware	52.0	50.7	49.6	48.4	47.3	45.7	44.8	44.1	43.3	42.6	41.1	39.1	36.6	33.6	30.5	27.6
White	38.4	37.7	37.2	36.6	36.5	35.7	35.6	35.9	35.5	35.3	34.5	32.8	31.0	29.1	26.4	24.4
Black	98.8	94.9	90.4	86.5	81.6	77.5	73.4	69.9	67.2	65.6	62.9	60.0	56.4	51.4	47.1	41.8
New Castle	44.9	44.1	42.7	43.0	42.4	41.3	40.2	40.0	38.3	37.2	35.9	34.3	32.3	29.8	27.1	24.3
White	30.4	29.9	29.6	30.9	31.5	31.4	31.5	32.2	31.1	30.1	29.3	27.6	26.0	24.1	22.0	19.9
Black	100.9	98.5	91.6	86.7	80.3	74.6	68.3	65.3	61.4	59.7	57.2	55.3	52.5	48.1	43.8	39.1
Wilmington	119.3	118.5	111.2	107.4	103.1	98.5	92.4	91.3	86.6	85.5	82.8	78.2	74.1	68.9	64.0	57.9
White	93.9	100.6	98.9	105.4	108.2	110.2	109.8	107.6	101.8	98.7	95.6	87.2	88.4	84.5	84.6	79.6
Black	141.4	138.2	129.0	122.0	115.3	108.2	99.9	97.9	92.6	92.0	89.2	85.0	79.7	73.2	65.8	58.2
Kent	56.7	55.2	54.7	52.4	51.6	48.7	47.7	45.2	44.9	43.6	42.1	39.6	37.4	34.4	31.1	28.4
White	50.5	50.6	49.8	46.2	44.5	40.3	38.2	35.8	36.3	35.2	34.5	32.4	31.3	28.1	24.9	23.6
Black	70.2	66.4	67.5	69.8	73.1	75.3	77.0	74.8	71.7	69.7	65.6	63.5	58.2	55.6	50.8	44.5
Sussex	77.8	73.8	72.0	64.8	60.7	58.0	57.3	56.4	58.5	60.0	58.6	55.5	51.1	46.1	41.5	38.2
White	61.4	58.4	55.7	48.5	45.8	45.1	45.3	46.9	48.0	51.3	50.3	49.2	46.1	45.1	40.6	38.4
Black	134.0	124.5	119.6	108.3	97.6	91.5	90.3	83.7	87.6	87.3	86.5	78.3	73.8	61.9	58.5	51.5

Sources: Delaware Health Statistics Center; National Center for Health Statistics

Family & Community

Table 111:

Births to Single Teens

Percentage of Births to Females Under 20 Years of Age Who Are Single By Race/Hispanic Origin* of Mother U.S., Delaware, Counties, and City of Wilmington, Five-year Averages

Area/Race Hisp. Org.	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	2009- 2013	2010- 2014
U.S.	77.6	78.3	78.9	79.3	79.8	80.5	81.4	82.5	83.6	84.7	85.6	86.4	87.2	87.9	88.3	88.6
White	70.7	71.8	72.6	73.3	74.1	75.1	76.3	77.7	79.1	80.4	81.5	82.6	83.7	84.5	85.1	85.6
Black	96.1	96.2	95.7	95.7	95.8	95.9	96.0	96.2	96.4	96.6	96.8	97.0	97.2	97.3	97.3	97.3
Hispanic	71.0	72.0	72.9	73.3	73.9	74.9	76.2	78.0	79.7	81.2	82.6	83.9	85.1	86.0	86.7	87.2
Delaware	89.3	89.5	89.6	89.6	90.0	90.1	90.8	91.4	92.1	92.8	93.2	93.3	93.7	93.9	94.0	94.2
White	81.9	82.5	83.1	83.3	84.3	84.8	86.1	87.3	88.2	89.3	90.1	90.3	90.8	91.2	91.4	91.9
Black	97.9	97.8	97.7	97.6	97.6	97.4	97.3	97.2	97.6	97.9	97.9	97.8	98.0	97.8	97.8	97.9
Hispanic	80.9	80.3	80.2	80.2	80.7	81.1	83.5	85.3	86.4	88.4	89.4	89.0	89.4	89.5	89.2	90.2
New Castle	92.5	92.5	92.4	92.0	92.3	92.0	92.4	93.0	93.5	94.3	94.9	95.1	95.3	95.4	94.9	95.1
White	86.6	86.6	86.8	86.5	87.1	86.6	87.5	88.5	89.3	90.4	91.5	92.1	92.6	93.1	92.5	93.1
Black	98.6	98.5	98.4	98.3	98.2	98.4	98.3	98.2	98.4	98.6	98.9	98.9	98.8	98.4	98.1	98.1
Hispanic	80.5	79.0	78.1	78.6	79.9	79.3	81.3	83.4	84.3	86.8	88.7	89.5	90.7	91.4	90.6	92.1
Wilmington	96.8	96.6	96.5	96.2	96.0	95.8	96.0	96.4	97.0	97.6	98.1	97.9	97.9	97.7	97.5	96.9
White	87.1	86.4	87.5	86.1	85.4	85.9	87.4	87.9	89.9	92.2	93.4	93.6	94.8	93.4	93.7	92.4
Black	99.0	99.0	98.7	98.9	99.0	98.9	98.9	99.2	99.3	99.3	99.4	99.0	98.8	98.9	98.9	99.1
Hispanic	84.6	83.2	82.9	81.9	81.8	82.2	84.5	86.0	88.1	91.5	93.6	94.4	95.1	93.8	93.2	89.9
Kent	81.6	82.6	83.8	84.1	84.0	84.8	85.8	86.1	87.3	88.6	89.0	89.1	90.0	90.3	91.4	91.8
White	71.4	73.4	75.5	76.0	76.7	78.1	79.8	81.1	82.8	84.2	84.9	85.0	85.4	85.8	87.3	88.0
Black	96.0	96.4	96.2	96.0	95.4	94.7	94.0	93.2	93.7	94.4	94.8	94.9	96.0	95.9	96.5	96.3
Hispanic	79.1	76.2	81.3	76.9	71.6	70.8	76.6	77.3	80.8	84.4	85.7	82.6	81.3	79.4	81.2	84.9
Sussex	87.9	88.1	87.9	88.1	89.3	90.1	91.6	92.0	92.8	93.0	93.0	92.6	93.3	93.2	93.8	94.3
White	80.7	81.7	81.9	82.5	84.9	86.4	88.4	89.4	90.3	90.9	91.1	90.7	91.3	91.4	91.9	92.4
Black	97.6	97.2	97.0	97.0	97.1	97.1	97.9	97.7	98.2	98.2	97.8	97.8	98.1	97.7	98.1	98.9
Hispanic	83.1	85.9	85.7	86.0	86.1	89.6	91.3	92.7	92.8	92.8	92.2	90.3	89.9	89.4	89.6	88.3

* Persons of Hispanic origin may be of any race Sources: Delaware Health Statistics Center; National Center for Health Statistics

Table 112:

Births to Single Mothers by Age

Percentage of Live Births to Single Mothers by Age, Race, and Hispanic Origin U.S., Delaware, Counties, and Wilmington; Five-year Averages

Area Age		All Race 09-13	s 10-14	08-12	White 09-13	10-14	08-12	Black 09-13	10-14		Hispanio 09-13	* 10-14
U.S.	40.8	40.8	40.6	35.9	35.9	35.8	71.9	71.8	71.4	53.2	53.3	53.3
<20	87.9	88.3	88.6	84.5	85.1	85.6	97.3	97.3	97.3	86.0	86.7	87.2
20-24	62.9	63.8	64.6	56.6	57.5	58.3	86.6	87.1	87.4	65.0	65.8	66.4
25-29	34.1	34.6	35.2	29.2	29.7	30.2	66.1	66.7	67.2	46.9	47.4	47.8
30+	20.7	21.2	21.6	18.0	18.5	19.0	46.8	47.3	47.6	35.6	36.1	36.5
Delaware	47.7	47.6	47.4	40.5	40.4	40.4	72.1	71.8	71.4	64.6	64.1	63.1
<20	93.9	94.0	94.2	91.2	91.4	91.9	97.8	97.8	97.9	89.5	89.2	90.2
20-24	74.5	75.0	75.7	67.5	67.9	68.7	89.2	89.3	89.8	75.1	75.4	74.7
25-29	42.7	43.6	43.8	36.1	37.1	37.4	69.3	69.5	69.7	60.4	60.4	60.2
30+	24.0	24.8	25.7	19.8	20.5	21.6	44.1	45.0	45.9	47.5	47.7	47.6
Kent	45.1	45.0	45.5	35.7	35.7	36.2	69.4	68.9	68.1	54.8	54.8	53.7
<20	90.3	91.4	95.1	85.8	87.3	88.0	95.9	96.5	96.3	79.4	81.2	84.9
20-24	64.2	64.9	79.8	54.5	55.2	56.6	83.5	83.9	84.9	67.3	67.1	64.7
25-29	36.9	37.0	43.9	27.4	28.2	29.3	64.8	63.4	63.9	45.5	46.9	46.5
30+	22.9	23.8	23.9	18.0	18.5	19.3	41.0	42.5	42.0	37.2	35.5	36.5
New Castle	45.7	45.8	45.5	37.8	37.9	37.9	71.2	71.0	70.9	62.7	62.6	62.2
<20	95.4	94.9	95.1	93.1	92.5	93.1	98.4	98.1	98.1	91.4	90.6	92.1
20-24	78.5	79.1	79.8	72.4	72.9	73.7	90.6	90.7	91.2	75.2	77.5	78.0
25-29	42.6	43.7	43.9	36.1	37.4	37.8	69.1	69.6	69.8	56.8	57.1	58.0
30+	22.3	23.1	23.9	17.3	18.1	19.0	44.3	45.3	46.4	43.0	42.4	42.3
Wilmington	70.1	69.3	68.1	48.1	47.1	45.2	 84.7	84.7	84.9	72.0	71.5	69.3
<20	97.7	97.5	96.9	93.4	93.7	92.4	98.9	98.9	99.1	93.8	93.2	89.9
20-24	90.5	90.8	90.9	80.0	80.5	81.4	94.8	94.9	94.9	82.2	83.1	82.2
25-29	67.9	69.7	68.0	50.4	52.2	49.0	81.5	82.7	82.0	64.5	67.3	66.8
30+	40.9	40.2	41.2	21.8	20,4	21.6	63.3	64.4	67.5	49.7	46.2	47.3
Balance of NC County	40.8	41.2	41.2	36.6	36.8	37.1	 64.3	64.4	64.6	60.4	60.4	60.4
<20	94.4	93.8	94.3	93.0	92.3	93.3	98.0	97.3	97.3	90.6	89.8	92.8
20-24	75.1	76.0	76.9	71.4	72.0	72.8	88.1	88.3	89.3	73.2	75.9	76.8
25-29	38.0	39.1	39.8	34.6	35.8	36.7	63.1	63.5	64.5	54.9	54.5	55.9
30+	19.7	20.7	21.4	16.9	17.8	18.7	37.9	39.0	39.9	41.9	41.8	41.3
Sussex	56.1	55.8	55.4	50.8	50.4	50.0	80.2	79.6	79.1	70.7	69.7	68.0
<20	93.2	93.8	94.3	91.4	91.9	92.4	97.7	98.1	98.9	89.4	89.6	88.3
20-24	75.9	76.0	76.3	70.8	70.9	71.0	91.4	91.5	91.3	77.7	75.8	74.0
25-29	48.8	50.0	49.6	43.8	44.5	43.9	77.3	78.8	78.5	70.4	69.6	68.6
30+	31.7	32.2	33.7	29.4	30.1	31.5	48.5	47.7	49.4	57.4	58.9	58.3

* Persons of Hispanic origin may be of any race. Source: Delaware Health Statistics Center; National Center for Health Statistics

Family & Community

Table 113:

Births to Single Mothers by Race/Hispanic Origin

Percentage of Live Births to Single Mothers by Race/Hispanic Origin* U.S., Delaware, Counties, and Wilmington; Five-year Averages

Area/Race- Hispanic Origin	1995- 1999	1996- 2000	1997- 2001	1998- 2002	1999- 2003	2000- 2004	2001- 2005	2002- 2006	2003- 2007	2004- 2008	2005- 2009	2006- 2010	2007- 2011	2008- 2012	2009- 2013	2010- 2014
U.S.	32.6	32.8	33.0	33.3	33.7	34.2	35.0	36.0	37.1	38.3	39.4	40.1	40.6	40.8	40.8	40.6
White	26.0	26.4	26.8	27.3	27.9	28.6	29.6	30.7	32.0	33.2	34.3	35.1	35.6	35.9	35.9	35.8
Black	69.8	69.5	68.8	68.6	68.5	68.4	68.6	69.0	69.6	70.3	71.0	71.5	71.8	71.9	71.8	71.4
Hispanic*	41.3	41.6	42.0	42.5	43.2	44.1	45.2	46.7	48.3	49.7	51.0	52.0	52.7	53.2	53.3	53.3
Delaware	36.5	37.1	38.0	38.9	39.8	40.5	41.8	42.9	44.1	45.4	46.4	47.0	47.6	47.7	47.6	47.4
White	25.4	26.2	27.2	28.5	30.0	31.1	32.9	34.5	35.7	37.3	38.6	39.2	40.1	40.5	40.4	40.4
Black	72.4	72.2	72.0	71.8	71.1	70.7	70.7	70.6	70.9	71.5	71.7	72.0	72.1	72.1	71.8	71.4
Hispanic*	51.1	50.8	51.6	52.9	55.0	56.3	58.5	59.6	61.1	62.3	63.5	63.8	64.8	64.6	64.1	63.1
New Castle	34.2	34.8	35.6	36.7	37.6	38.1	39.2	40.4	41.4	42.6	44.0	44.8	45.4	45.7	45.8	45.5
White	22.7	23.4	24.5	26.0	27.6	28.5	30.0	31.5	32.6	33.9	35.5	36.3	37.2	37.8	37.9	37.9
Black	71.8	71.6	71.1	70.8	70.2	69.6	69.4	69.6	70.1	70.7	71.0	71.3	71.4	71.2	71.0	70.9
Hispanic*	47.5	47.0	48.0	49.5	52.3	52.7	54.3	55.6	56.3	57.4	59.1	60.0	61.4	62.7	62.6	62.2
Wilmington	67.5	67.7	68.1	68.5	69.0	68.9	69.7	69.9	70.3	71.0	71.6	71.1	70.6	70.1	69.3	68.1
White	37.6	38.5	39.6	40.9	42.7	43.6	45.5	46.3	47.3	48.1	49.0	48.3	48.6	48.1	47.1	45.2
Black	84.5	84.6	84.8	85.0	85.3	84.9	85.4	85.3	85.3	85.5	85.7	85.4	84.9	84.7	84.7	84.9
Hispanic*	61.2	60.1	60.1	61.1	63.3	63.5	65.6	67.8	67.8	68.8	70.6	71.0	70.8	72.0	71.5	69.3
Kent	37.3	38.0	38.8	39.2	40.0	40.6	41.5	41.8	42.8	43.6	43.9	44.0	45.0	45.1	45.0	45.0
White	26.8	27.6	28.6	29.0	30.1	30.9	31.9	32.5	33.7	34.4	34.6	34.7	35.7	35.7	35.7	36.2
Black	70.1	70.5	70.1	70.3	69.6	69.2	68.6	68.3	67.8	68.2	68.5	68.2	68.3	69.4	68.9	68.1
Hispanic*	46.7	44.9	42.2	41.3	41.1	44.5	47.8	48.4	51.9	54.4	55.0	55.0	56.5	54.8	54.8	53.7
Sussex	44.1	44.7	45.7	46.6	47.6	48.8	51.0	52.4	53.9	55.3	56.1	56.2	56.6	56.1	55.8	55.4
White	33.6	34.7	35.4	36.7	37.9	39.7	42.7	45.0	46.5	48.7	50.0	50.0	50.7	50.8	50.4	50.0
Black	77.3	76.4	77.6	77.5	76.9	77.7	78.6	78.1	78.3	79.3	79.3	80.5	80.5	80.2	79.6	79.1
Hispanic*	60.5	61.4	63.1	64.7	65.6	67.7	70.3	71.3	73.1	73.6	73.9	72.8	72.8	70.7	69.7	68.0

* Persons of Hispanic origin may be of any race. Source: Delaware Health Statistics Center; National Center for Health Statistics

Table 114:

Child Abuse and Neglect

Number of Reports, Number and Rate of Children in Accepted Cases, and Number and Rate of Children in Substantiated Cases of Child Abuse/Neglect, Delaware, Fiscal Years

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
All Reports	8,035	7,548	7,273	8,512	9,527	11,222	14,010	16,678	17,333	18,054	19,058	20,778
Accepted Cases	5,797	5,819	5,566	6,122	5,929	6,533	7,358	8,782	7,999	8,222	8,909	8,951
Children in Accepted Cases	10,256	10,294	11,237	11,849	11,251	12,154	13,031	13,217	12,037	11,449	12,022	11,571
Rate per 1,000 Children	50.6	50.5	55.0	57.6	55.1	58.9	62.9	64.3	58.4	55.7	58.5	55.2
Substantiated Cases	1,325	1,319	1,390	1,520	1,429	1,3861	1,651	1,718	1,503	1,147	1,178	1,239
Children in Substantiated Cases	1,876	1,846	2,017	2,109	1,958	1,938	2,303	2,414	1,812	1,555	1,446	1,493
Rate per 1,000 Children	9.3	9.1	9.9	10.2	9.6	9.4	11.1	11.7	8.8	7.6	6.8	7.1

Source: Delaware Department of Services for Children, Youth and Their Families

Table 115:

Foster Care

Children in Out-of-Home Care Delaware, Fiscal Years

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Average number of children per month	900	811	714	708	754	789	902	934	816	692	684	739	687	694	653	725
Total number in year	1,403	1,252	1,214	1,141	1,293	1,347	1,553	1,576	1,372	1,210	1,251	1,298	1,156	995	972	1,104
Rate per 1,000 children	n 7.2	6.3	6.1	5.7	6.4	6.6	7.6	7.7	6.7	5.9	6.0	6.3	5.6	4.8	4.6	5.3

Note: An indication of N/A means data was not available for that group or time period. Source: Delaware Department of Services for Children, Youth and Their Families

Table 116:

Juveniles in Rehabilitative Facilities

Number and Rate of Juvenile Delinquents in Out-of-Home Care per 1,000 Youth 10–17 Delaware, Fiscal Years

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Number of youths	407	332	298	245	221	217	209	248	186	248
Rate per 1,000 youths	4.4	3.6	3.3	2.7	2.5	2.3	2.3	2.7	1.95	2.6

Source: Delaware Department of Services for Children, Youth and Their Families

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Table 117:

SNAP Recipients by Zip Code

Number of Cases and Clients by Zip Code who Receive Food Assistance through Delaware's Supplemental Nutrition Assistance Program (SNAP), All through Early November, 2016

	• • •				_	i (314A1), A1		Larry			
Zip Code	Cases	Children	Adults	Total	Clients/case	Zip Code	Cases	Children	Adults	Total	Clients/case
19701	2336	2199	2807	5,006	2.1	19933	1374	1396	1600	2,996	2.2
19702	4378	4895	5196	10,091	2.3	19934	973	840	1248	2,088	2.1
19703	1846	1734	2197	3,931	2.1	19936	83	104	105	209	2.5
19706	246	237	308	545	2.2	19938	713	642	887	1,529	2.1
19707	216	149	260	409	1.9	19939	494	430	631	1,061	2.1
19708	3	2	4	6	2	19940	643	571	830	1,401	2.2
19709	1798	1915	2193	4,108	2.3	19941	439	401	543	944	2.2
19711	2535	2010	2924	4,934	1.9	19943	1363	1108	1733	2,841	2.1
19713	3089	2939	3604	6,543	2.1	19944	12	1	12	13	1.1
19714	21	20	24	44	2.1	19945	704	704	809	1,513	2.1
19715	1		1	1	1	19946	601	549	741	1,290	2.1
19716	2		2	2	1	19947	2463	2764	2352	5,116	2.1
19717	1		1	1	1	19950	720	658	945	1,603	2.2
19720	7422	7018	8781	15,799	2.1	19951	122	86	146	232	1.9
19730	30	15	35	50	1.7	19952	1332	1337	1702	3,039	2.3
19731	15	23	18	41	2.7	19953	430	361	571	932	2.2
19732	1		2	2	2	19954	210	168	263	431	2.1
19733	31	30	32	62	2	19955	42	44	53	97	2.3
19734	610	565	739	1,304	2.1	19956	2415	2375	2954	5,329	2.2
19735	1	4	2	6	6	19958	1422	855	1677	2,532	1.8
19736	2		3	3	1.5	19960	983	1002	1162	2,164	2.2
19801	5890	4207	6507	10,714	1.8	19961	3	2	4	6	2
19802	6393	5058	7288	12,346	1.9	19962	1175	1105	1489	2,594	2.2
19803	435	326	540	866	2	19963	2497	2284	2819	5,103	2
19804	1932	1703	2189	3,892	2	19964	148	145	192	337	2.3
19805	8212	8176	9222	17,398	2.1	19966	3080	2663	3717	6,380	2.1
19806	576	176	636	812	1.4	19967	35	30	50	80	2.3
19807	50	32	57	89	1.8	19968	904	634	1097	1,731	1.9
19808	2213	2014	2470	4,484	2	19969	8	1	8	9	1.1
19809	1312	1243	1562	2,805	2.1	19970	352	277	427	704	2
19810	812	632	995	1,627	2	19971	773	506	878	1,384	1.8
19850	8	4	8	12	1.5	19973	3654	3527	4293	7,820	2.1
19899	25	3	26	29	1.2	19975	586	543	670	1,213	2.1
19901	5492	4847	6451	11,298	2.1	19977	2149	1905	2673	4,578	2.1
19903	32	23	35	58	1.8	19979	57	57	77	134	2.4
19904	4058	3757	4837	8,594	2.1	19980	23	19	24	43	1.9
17704			70	101	1.8						
19930	55	29	72	101	1.0						

Table 118:

Snapshot of SNAP Recipients by Zip Code

Number of Cases and Clients by Zip Code who Receive Food Assistance through Delaware's Supplemental Nutrition Assistance Program (SNAP), Snapshot November 5, 2016

Zip Code	Cases	Children	Adults	Total	Clients/case	Zip Code	Cases	Children	Adults	Total	Clients/case
19701	1697	1574	1971	3,545	2.1	19936	59	79	69	148	2.5
19702	3264	3764	3765	7,529	2.3	19938	516	468	613	1,081	2.1
19703	1395	1340	1618	2,958	2.1	19939	371	349	448	797	2.1
19706	157	167	193	360	2.3	19940	463	385	573	958	2.1
19707	162	122	187	309	1.9	19941	325	300	386	686	2.1
19708	3	1	4	5	1.7	19943	985	797	1204	2,001	2
19709	1267	1310	1496	2,806	2.2	19944	9	1	9	10	1.1
19711	1846	1535	2079	3,614	2	19945	535	545	587	1,132	2.1
19713	2256	2200	2552	4,752	2.1	19946	433	412	518	930	2.1
19714	17	16	19	35	2.1	19947	1773	2149	1608	3,757	2.1
19715	1		1	1	1	19950	543	443	671	1,114	2.1
19716	1		1	1	1	19951	85	66	97	163	1.9
19720	5437	5296	6236	11,532	2.1	19952	1043	1021	1307	2,328	2.2
19730	22	9	23	32	1.5	19953	338	278	432	710	2.1
19731	12	16	15	31	2.6	19954	162	127	196	323	2
19732	1		1	1	1	19955	31	38	37	75	2.4
19733	22	19	20	39	1.8	19956	1758	1770	2089	3,859	2.2
19734	437	413	531	944	2.2	19958	1036	631	1173	1,804	1.7
19735	1	4	2	6	6	19960	737	801	823	1,624	2.2
19801	4469	3348	4858	8,206	1.8	19961	3	2	4	6	2
19802	4733	3889	5287	9,176	1.9	19962	885	837	1081	1,918	2.2
19803	324	246	394	640	2	19963	1903	1795	2058	3,853	2
19804	1455	1299	1570	2,869	2	19964	108	106	136	242	2.2
19805	6161	6429	6690	13,119	2.1	19966	2196	1912	2556	4,468	2
19806	407	118	440	558	1.4	19967	23	10	29	39	1.7
19807	31	20	36	56	1.8	19968	660	447	778	1,225	1.9
19808	1658	1540	1759	3,299	2	19969	5	1	5	6	1.2
19809	964	971	1125	2,096	2.2	19970	250	209	296	505	2
19810	603	481	721	1,202	2	19971	534	353	594	947	1.8
19850	4		4	4	1	19973	2636	2524	2968	5,492	2.1
19899	14	3	14	17	1.2	19975	432	418	460	878	2
19901	4030	3702	4619	8,321	2.1	19977	1540	1380	1841	3,221	2.1
19903	22	8	21	29	1.3	19979	45	41	57	98	2.2
19904	2917	2741	3351	6,092	2.1	19980	14	14	15	29	2.1
19930	36	17	42	59	1.6						
19931	11	9	11	20	1.8	Total	70,001	64,983	79,389	144,372	2.0
19933	1010	1044	1130	2,174	2.2						
19934	718	623	885	1,508	2.1						

Source: Delaware Health and Social Service

Family & Community

Table 119:

TANF Program Recipients by Zip Code

Number of Cases and Clients by Zip Code who Receive Cash Assistance through Delaware's Temporary Assistance to Needy Families (TANF) Program, All through Early November, 2016

						_					
Zip Code	Cases	Children	Adults	Total	Clients/case	Zip Code	Cases	Children	Adults	Total	Clients/case
19701	163	265	77	342	2.1	19940	40	63	27	90	2.3
19702	347	612	189	801	2.3	19941	43	85	20	105	2.4
19703	128	247	83	330	2.6	19943	113	190	49	239	2.1
19706	14	23	3	26	1.9	19945	42	69	11	80	1.9
19707	15	21	9	30	2	19946	39	59	12	71	1.8
19708	1	1		1	1	19947	168	326	67	393	2.3
19709	122	206	51	257	2.1	19950	39	67	12	79	2
19711	156	255	102	357	2.3	19951	11	21	4	25	2.3
19713	181	325	109	434	2.4	19952	111	226	51	277	2.5
19720	549	948	295	1,243	2.3	19953	28	49	7	56	2
19731	1	2		2	2	19954	21	35	7	42	2
19733	3	9	3	12	4	19955	5	12	2	14	2.8
19734	46	79	23	102	2.2	19956	216	426	125	551	2.6
19801	485	922	345	1,267	2.6	19958	54	103	21	124	2.3
19802	600	1045	349	1,394	2.3	19960	69	130	34	164	2.4
19803	17	27	10	37	2.2	19962	95	158	46	204	2.1
19804	116	201	67	268	2.3	19963	199	368	101	469	2.4
19805	732	1388	430	1,818	2.5	19964	16	32	11	43	2.7
19806	16	29	11	40	2.5	19966	182	318	91	409	2.2
19807	1	2		2	2	19967	1	2	1	3	3
19808	115	211	56	267	2.3	19968	46	64	18	82	1.8
19809	113	198	54	252	2.2	19970	9	13	4	17	1.9
19810	38	51	20	71	1.9	19971	24	36	14	50	2.1
19850	1	1		1	1	19973	250	477	112	589	2.4
19901	387	723	217	940	2.4	19975	28	63	13	76	2.7
19903	3	7	1	8	2.7	19977	166	281	75	356	2.1
19904	323	577	185	762	2.4	19979	2	2	1	3	1.5
19933	105	200	38	238	2.3	19980	3	3		3	1
19934	79	138	32	170	2.2	Total	6,979	17,555	3,736	16,291	2.2
19936	6	17	3	20	3.3						
19938	67	96	25	121	1.8						
19939	29	51	13	64	2.2						

Delaware's Temporary Assistance to Needy Families (TANF) program offers time limited cash assistance to families with work and personal responsibility requirements. Source: Delaware Health and Social Service

Table 120:

Snapshot of TANF Program Recipients by Zip Code

Number of Cases and Clients by Zip Code who Receive Cash Assistance through Delaware's Temporary Assistance to Needy Families (TANF) Program, Snapshot: November 14, 2016

				•	-		•				
Zip Code	Cases	Children	Adults	Total	Clients/case	Zip Code	Cases	Children	Adults	Total	Clients/case
19701	112	173	36	209	1.9	19940	19	27	5	32	1.7
19702	222	366	87	453	2	19941	31	59	8	67	2.2
19703	74	143	38	181	2.4	19943	75	123	22	145	1.9
19706	9	16	1	17	1.9	19945	28	43	2	45	1.6
19707	8	12	4	16	2	19946	31	42	5	47	1.5
19708	1	1		1	1	19947	90	175	28	203	2.3
19709	82	131	24	155	1.9	19950	22	31	3	34	1.5
19711	98	152	53	205	2.1	19951	6	10	2	12	2
19713	107	178	48	226	2.1	19952	79	155	30	185	2.3
19720	357	574	132	706	2	19953	23	40	4	44	1.9
19731	1	1		1	1	19954	15	22	3	25	1.7
19733	2	5	2	7	3.5	19955	3	6	1	7	2.3
19734	33	50	14	64	1.9	19956	132	253	57	310	2.3
19801	252	437	148	585	2.3	19958	40	68	15	83	2.1
19802	360	567	156	723	2	19960	45	78	20	98	2.2
19803	10	15	3	18	1.8	19962	56	82	14	96	1.7
19804	88	153	39	192	2.2	19963	122	231	41	272	2.2
19805	418	745	184	929	2.2	19964	12	26	8	34	2.8
19806	9	14	4	18	2	19966	121	201	46	247	2
19807	1	1		1	1	19968	31	39	10	49	1.6
19808	72	108	26	134	1.9	19970	6	10	1	11	1.8
19809	79	136	26	162	2.1	19971	17	25	6	31	1.8
19810	18	23	5	28	1.6	19973	156	281	40	321	2.1
19850	1	1		1	1	19975	15	26	3	29	1.9
19901	219	384	93	477	2.2	19977	113	175	33	208	1.8
19903	1	1		1	1	19979	1	1		1	1
19904	203	340	85	425	2.1	19980	2	2		2	1
19933	78	148	22	170	2.2						
19934	53	83	15	98	1.8	Total	4,332	7,299	1,674	8,973	1.9
19936	4	12	2	14	3.5						
19938	47	65	13	78	1.7						
19939	22	33	7	40	1.8						

Delaware's Temporary Assistance to Needy Families (TANF) program offers time limited cash assistance to families with work and personal responsibility requirements. Source: Delaware Health and Social Service

Family & Community

Table 121:

Juvenile Crime Arrests

Number of Statewide Juvenile Arrests, National Incident Based Crime (NIBRS) and Rate per 1,000 Juveniles, Delaware

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Juvenile Violent Crimes Arrest Rate	11.0	11.1	11.8	11.6	11.4	10.9	9.9	7.9	7.9	7.7	7.3	7.4	7
Criminal Homicide	0	3	5	5	3	4	3	4	2	1	0	4	1
Kidnapping / Abduction	29	17	21	22	27	16	18	14	10	13	15	11	9
Sex Offenses, Forcible**	47	40	89*	84	76	67	76	64	53	61	54	42	34
Robbery	169	120	175	211	224	197	180	109	120	138	114	149	115
Assault	1,941	2,042	2,105	2,046	2,002	1,946	1,766	1,440	1,459	1,366	1,320	1,307	1,310
Total Violent Crime Arrests	2,186	2,222	2,395	2,368	2,332	2,230	2,043	1,631	1,644	1,579	1,503	1,513	1,469
Drug and Narcotic Offenses Arrest Rate	4.2	3.8	4.3	4.3	4.1	3.6	3.5	3.0	2.6	2.7	2.6	2.5	2
Drug and Narcotic Offenses	826	760	880	873	842	748	717	629	544	554	533	521	429
Serious Property Crimes Arrest Rate	7.8	7.7	7.2	7.1	7.8	7.9	8.0	6.6	5.8	5.6	4.5	4.7	4
Arson	32	33	59	65	34	37	31	11	18	20	12	12	17
Extortion / Blackmail	0	2	2	0	0	0	0	0	0	0	1	0	3
Burglary	320	357	314	356	318	306	295	292	158	224	140	199	182
Larceny / Theft	1,106	1,071	1,028	979	1,189	1,243	1,296	1,026	1,001	874	758	725	606
Motor Vehicle Theft	99	80	60	50	49	37	44	43	33	32	21	25	28
Total Serious Property Crimes	1,557	1,543	1,463	1,450	1,590	1,623	1,666	1,372	1,210	1,150	932	961	836
Other Property and Social Crimes Arrest Rate	e 3.9	4.9	3.7	4.2	4.0	3.8	3.3	2.6	2.1	2.0	1.8	2.0	2.1
Counterfeiting / Forgery	10	18	16	9	19	8	5	4	10	3	2	4	6
Fraud	127	107	98	114	117	130	106	64	67	90	55	59	55
Embezzlement	20	13	28	21	20	13	4	96	3	3	0	1	3
Stolen Property	169	120	107	130	118	149	83	96	75	53	53	59	79
Property Destruction / Vandalism	296	342	348	403	399	329	334	244	183	183	179	157	216
Sex Offenses	5	3	7	2	2	3	1	2	2	0	1	2	2
Pornography/ Obscene Material	1	1	0	3	2	0	1	5	4	1	0	0	1
Gambling Offenses	1	4	3	2	1	1	1	0	1	0	0	1	0
Prostitution	0	1	0	0	0	2	0	0	0	1	0	0	0
Bribery	0	0	0	0	1	0	0	0	0	1	1	0	0
Weapons Law Violations***	145	155	145	164	137	153	117	119	92	67	80	120	87
Total Other Property and Social Crimes	774	986	752	848	816	788	673	537	437	402	371	403	449
Total Arrests for Group A Offenses****	5,343	5,289	5,490	5,539	5,580	5,389	5,099	4,169	3,835	3,685	3,339	3,399	3.183
Juvenile Arrest Rate per 1,000 population	26.8	26.4	27.1	26.3	27.2	26.2	24.6	20.2	18.5	17.9	16.3	16.5	15.2

^{**} In 2005, Sexual Contact statutes (fondling and unlawful sexual contact) were added to forcible sex crimes. Prior to that rape type offenses were the only forcible sex *** Prior to 2010, Weapons Law Violations were listed as Violent Crimes. Rates have been recalculated for past years based on this category change.

This accounts for changes from previous editions of the KIDS COUNT in Delaware Fact Book.

**** Arrest information is only provided for Group A NIBRS crimes which are shown above.

Source: Delaware Statistical Analysis Center/SBI 11/18/2011



Table 122:

School Conduct Report

Offenses required to be reported under Title 14, Delaware Code §4112 and/or DOE Policy, Delaware

Offenses required to be reported one	ici iiii	, 17, 0	ciawai	e coue	State	Totals		- i Olicy	, Dela	vare
	06/07	07/08	08/09	09/10	10/11		12/13	13/14	14/15	15/16
School Crimes (Title 14, Delaware Code, §4112)	1,160	1,194	1,291	1,056	1,014	957	584	624	678	800
Violent Felonies (Title 11, Delaware Code §4201(c))	20	73	101	75	92	59	51	78	69	68
Gun-Free School Offenses (Handgun, Rifle, Shotgun Starter Gun, Explosives/Incendiary Device)	6	9	10	8	6	2	3	7	4	8
Weapon Offenses Destructive Weapon, Dangerous W. Pellet Gun, BB Gun, Knife, Razor Blade / Box Cutter,	eapon, Dan	gerous Instru	ıment,							
Brass Knuckles, Bat, Club, Martial Arts Throwing Star	202	224	273	177	177	199	164	174	182	220
Drug Offenses (Title 16, Delaware Code)	268	288	304	284	306	296	246	242	278	291
Assault III (Title 11, Delaware Code §611)	190	141	141	143	138	100	108	114	132	185
Unlawful Sexual Contact (Title 11, Delaware Code §	767) 14	19	12	20	9	19	12	9	13	28
Offensive Touching Employee Victim (reported as DOE offense starting 2012-13)	330	306	327	233	213	183	*	*	*	0
Terroristic Threatening Employee Victim (reported as DOE offense starting 2012-13)	130	134	123	116	73	99	*	*	*	0
Department of Education (DOE) Offenses	9,400	9,663	10,790	9,116	9,717	10,291	10,765	9,583	10,432	13,010
Pornography: Possession and Production	19	18	25	16	4	8	14	13	11	25
Bomb Threats	21	*	*	0	0	0	0	0	0	0
Criminal Mischief (Vandalism)	169	236	305	223	219	221	198	154	158	217
Tampering with Public Records	16	2	2	2	0	0	0	0	0	0
Alcohol, Possession and Use Drug Use/Influence**	94	75	101	71	77	100	116 <i>7</i> 7	<i>77</i> 110	89 1 <i>4</i> 7	92 156
Felony Theft Offenses (\$1,000 or More)	2	11	2	9	1	9	3	7	5	2
Bullying	570	578	577	556	698	662	846	750	660	628
Offensive Touching of a Student	3,609	3,127	3,318	2,585	2,853	3,085	3,307	2,853	3,067	4,078
Terroristic Threatening of a Student	308	294	275	194	258	246	291	265	280	377
Sexual Harassment (Title 11, Delaware Code § 763)	114	131	118	118	78	125	131	101	123	136
Fighting / Disorderly Conduct	4,406	5,153	5,424	4,752	4,810	4,957	4,534	4,106	4,340	5,223
Inhalants	0	1	0	2	7	4	0	2	1	5
Drug Paraphernalia	72	37	47	44	41	51	50	52	74	88
Tobacco Possession and/or use**			561	504	417	391	353	268	391	343
Medications (Inappropriate Possession and/or use)**			35	40	25	51	30	28	28	29
Under 12: Assault III Student Victim**					20	39	25	4	11	33
Under 12: Assault III Employee Victim**					11	11	4	7	11	11
< 12: Unlawful Sexual Contact III Student Viction	m**				5	5	5	2	3	9
< 12: Unlawful Sexual Contact III Employee Vi	ctim**				0	1	0	0	0	1
Offensive Touching Employee Victim**					151	261	597	617	797	1,214
Terroristic Threatening Employee Victim**					42	64	179	167	229	334
Teen Dating Violence**							5	0	7	5

^{*} Reported as "Terroristic Threatening of an Employee/Volunteer" starting 2007-08
** New reporting category starting 2008-09
*** New reporting category starting 2010-11

Family & Community

Table 123:

Adult Crime Arrest Rates

Adult Arrest Rates per 1,000 Adults 18 and Over, National Incident Based Crime (NIBRS), Delaware

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Total Arrest Rates	32.9	33.9	32.7	34.2	35.9	38.2	37.8	35.2	35.7	35.9	36.5	36.3	35.8	33.5
Violent Crimes	14.3	14.1	13.4	13.7	14.3	15.5	14.1	13.3	13.6	13.1	13.1	12.0	11.1	10.9
Drug and Narcotic Offenses	6.1	7.4	7.2	8.5	8.9	9.1	9.1	8.1	8.0	7.9	8.2	9.5	9.5	8.9
Serious Property Crimes	5.9	6.1	6.1	5.9	7.9	7.1	7.6	8.4	8.5	9.3	9.7	9.4	9.9	8.9
Other Property / Social Crimes	6.5	6.3	6.1	6.1	6.3	6.5	6.2	5.5	5.5	5.7	5.5	5.4	5.2	4.8

Source: Delaware Statistical Analysis Center

Kids Count Network



Table 124:

Juvenile Arrest Rates by Sex and Race

Delaware 2015

R GROUP A OFFENSES	Cates-All Juveniles 2015 (prelim)	Sex %Male	%White	Race %Black	% Other	Ethnicity Hispanic
Juvenile Violent Crime Arrest Rate	7					
CRIMINAL HOMICIDE	1	100.0%	0.0%	100.0%	0.0%	0.0%
KIDNAPPING AND ABDUCTION	9	88.9%	22.2%	77.8%	0.0%	0.0%
SEXUAL OFFENSES, FORCIBLE	34	97.1%	41.2%	58.8%	0.0%	8.8%
ROBBERY	115	93.9%	18.3%	79.1%	2.6%	7.0%
ASSAULT	1,310	66.1%	30.8%	68.2%	0.9%	6.7%
Total Violent Crime Arrests	1,469	69.2%	30.0%	69.0%	1.0%	7.5%
Juvenile Serious Property Crime Arrest Rate	4					
ARSON	17	82.4%	58.8%	41.2%	0.0%	0.0%
EXTORTION/BLACKMAIL	3	100.0%	66.7%	33.3%	0.0%	0.0%
BURGLARY	182	90.1%	30.2%	69.8%	0.0%	7.1%
LARCENY - THEFT	606	57.4%	38.4%	61.1%	0.5%	6.3%
MOTOR VEHICLE THEFT	28	85.7%	32.1%	67.9%	0.0%	3.6%
Total Serious Property Crime Arrests	836	66.1%	37.0%	62.7%	0.4%	6.2%
luvenile Drug Offense Arrest Rate	2					
DRUG/NARCOTIC OFFENSES	429	80.4%	52.7%	46.9%	0.5%	7.5%
Juvenile Other Property and Social Crime Arrest Rate	2.1					
COUNTERFEIT/FORGERY	6	83.3%	50.0%	50.0%	0.0%	0.0%
FRAUD	55	65.5%	36.4%	63.6%	0.0%	10.9%
EMBEZZLEMENT	3	33.3%	33.3%	66.7%	0.0%	0.0%
STOLEN PROPERTY	79	89.9%	16.5%	83.5%	0.0%	5.1%
DESTRUCTION, DAMAGE, VANDALISM OF PROPERTY	216	80.6%	40.7%	58.3%	0.9%	8.3%
SEXUAL OFFENSES, NONFORCIBLE	2	100.0%	50.0%	50.0%	0.0%	0.0%
PORNOGRAPHY/OBSCENE MATERIAL	1	100.0%	0.0%	100.0%	0.0%	0.0%
GAMBLING OFFENSES	0	N/A	N/A	N/A	N/A	N/A
PROSTITUTION	0	N/A	N/A	N/A	N/A	N/A
BRIBERY	0	N/A	N/A	N/A	N/A	N/A
WEAPON LAW VIOLATIONS	87	82.8%	19.5%	80.5%	0.0%	3.4%
Total Other Property and Social Crime Arrests	449	80.6%	31.8%	67.7%	0.4%	6.9%
TOTAL ARRESTS FOR GROUP A OFFENSES	3,183	71.5%	35.2%	64.2%	0.7%	7.1%
Juvenile Arrest Rate per 1,000 Juveniles	15.2					
Population Figures	209,499					

Source: Delaware Statistical Analysis Center

Student Enrollment

Table 125:

Public and Nonpublic School Enrollment

Delaware, 2015-16

	Public School Enrollment	Home Schools	Private Schools	Total by County	Percent NonPublic
Kent	30,485	795	1,903	33,183	8%
New Castle	78,656	1,066	12,000	91,722	14%
Sussex	26,886	584	908	28,378	5%
Total	136,027	2,456	17,513	155,996	13%
Percentage	87%	2%	11%	100%	
Out of State		11	2,702	2,713	100%

Source: Delaware Department of Education

Table 126:

Special Education Students by Disability Type

Delaware, 2015-16

Grade	MD	ED	LD	MOD	SID	PI	OHI	OI	HHPD	VI	PS	AUT	DB	SP	TBI	DD	SP4	PSSD	Total
	100	200	300	400	500	600	601	602	700	800	900	1000	1100	1200	1300	1400	1500	1600	
Pre-Kindergarten	-	-	-	-	-	-	53	26	46	-	-	163	-	-	-	1122	-	299	1749
Kindergarten	-	-	-	-	-	-	42	15	-	-	-	110	-	-	-	646	-	-	653
Grade 1	16	16	134	-	-	-	69	22	16	-	-	125	-	-	-	537	-	-	960
Grade 2	36	30	447	15	-	-	134	20	16	-	-	138	-	-	-	342	-	-	1200
Grade 3	59	41	762	15	-	-	177	17	25	-	-	120	-	-	-	123	-	-	1350
Grade 4	83	60	913	22	-	-	245	22	-	-	-	126	-	-	-	-	-	-	1496
Grade 5	104	78	939	27	-	-	235	15	18	-	-	133	-	-	-	-	-	-	1562
Grade 6	97	66	975	30	-	-	242	16	-	-	-	116	-		-	-	-	-	1571
Grade 7	97	76	966	38	-	-	254	-	22	-	-	112	-	-	-	-	-	-	1622
Grade 8	89	69	937	52	-	-	261	17	-	-	-	112	-	-	-	-	-	-	1561
Grade 9	113	163	1166	33	-	-	353	18	15	-	-	110	-	-	-	-	-	-	1994
Grade 10	92	123	858	36	-	-	264	-	26	-	-	77	-	-	-	-	-	-	1507
Grade 11	92	51	680	37	-	-	160	16	-	-	-	84	-	-	-	-	-	-	1156
Grade 12	140	46	607	113	23	-	172	30	-	-	-	156	-	-	-	-	-	-	1329
Total	1027	821	9415	445	65	-	2661	251	261	59	16	1682	65	-	68	2770	-	299	19910

100	Mild Intellectual Disability	700	Hearing Impairment	1300	Traumatic Brain Injury
200	Emotional Disturbance	800	Visually Impaired	1400	Developmental Delay
300	Learning Disability	900	Partially Sighted	1500	Speech for 4 year olds (not used)
400	Moderate Intellectual Disability	1000	Autism	1600	Pre-school Speech delay (3 & 4 yrs old)
500	Severe Intellectual Disability	1100	Deaf-Blind	601	Other Health Impairment
600	Physically Impaired (not used)	1200	Speech and/or Language Impairment	602	Orthopedic Impairment

Source: Delaware Department of Education

Kids Count Data Center and Contact Information



Several national reports are available under "Data Resources" on the left at www.dekidscount.org or by going to http://datacenter.kidscount.org



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It allows the ability to create and download different visualizations or spreadsheets of all of our data. Whether you share this report with others, go online for the full digital version, or utilize the Data Center to discover even more ways to customize the data, please join us in using this data to make informed program and policy decisions by investing in Delaware's biggest asset, our kids.

KIDS COUNT® in Delaware

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2017 Resource Guide

KIDS COUNT in Delaware: www.dekidscount.org

Delaware Information Helpline

State of Delaware Web Site

2-1-1

www.delaware.gov

Volunteer Link

New Castle County 577-7378 Kent and Sussex Counties 739-4456 Statewide 1-800-815-5465

Delaware Department of Education 302-735-4000 www.doe.k12.de.us

Delaware Department of Labor 302-761-8000 www.delawareworks.com

Delaware Department of Health and Social Services www.dhss.delaware.gov

> Division of Public Health 302-744-4700

Division of Social Services 800-372-2022

Division of State Service Centers 302-255-9675

Division of Substance Abuse and Mental Health 302-255-9399 Delaware Department of Safety and Homeland Security 302-744-2680

Delaware Department of Services for Children, Youth and Their Families 302-633-2500 www.state.de.us/kids

Delaware State Housing Authority 302-739-4263 (Dover) 302-577-5001 (Wilmington) www.destatehousing.com

Drug Free Delaware www.state.de.us/drugfree

Office of the Governor, Dover Office 302-744-4101 Wilmington Office 302-577-3210 Statewide 1-800-292-9570