

Philadelphia
Strong Families Coalition



# Philadelphia Leadership Foundation

2210 South 71st Street Philadelphia, PA 19142

Rev. Dr. W. Wilson Goode, Sr., Chair Dr. Joseph Meade, President

August 15, 2014

#### Dear Concerned Citizen:

It is my honor and privilege to champion the work of the **Philadelphia Strong Families Coalition** and to continue to stand with and for the children, families and fathers of the City of Philadelphia. Despite the ever transforming definition of "family" today or the changing norms attributed to family dynamics and stability, the significant affect a child's family life has on cognitive, physical, behavioral, spiritual and emotional development is one singular factor determining how that child will mature into adulthood and is a snapshot of who we are as a society in our neighborhood, city, nation and world.

The report "Child Well-Being in Philadelphia: Profiles of Children, Families & Fathers" is the culmination of collective expertise, research and findings that provides us with undisputable information about the state of children and families in our city. Moreover, it offers the opportunity to create the pathway to systemic, strategic, and provocative change to reverse the dismal statistical reality of brokenness, poverty, and social ills.

We often say "it takes a village"....... I would like to change that and say, "we must be the village" to raise a child. It is time for us to do what is needed for the transformation that must take place in our city. Children are our heritage.

I am indeed thankful for the foresight of Dr. Lynch, the funders and each individual who contributed to this effort. Together, we can create the future we seek. Together, we can effect positive change for the children, families and fathers of our City.

Sincerely

W. Wilson Goode, Sr.

Chairman

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Secretary/Treasurer: Anita Kulick anita@ecparenting.org

#### Dear Concerned Citizens of Philadelphia:

Thank you for your interest in this report and the work of the Philadelphia Strong Families Coalition. I am involved with this group of stakeholders because of my deep belief that strong families provide the best foundation for the healthy development of our children. Unfortunately, today's society for a variety of reasons has deviated from this tenet and as a result many of our communities have suffered and continue to do so.

While it is true that many individuals are able to overcome the difficulties and obstacles that are presented by the lack of strong parental involvement, it is obvious from the research outlined in this report that too many of our fellow citizens have been adversely effected by the negative aspects of being raised in single parent homes where paternal or maternal involvement is lacking. This is an issue that affects all facets of the population but it's most devastating effect is on low-income Latino and African-American families.

Let us be clear. This city is facing an existential crisis caused by the disintegration of the traditional family structure and its expectant consequences as expressed in this report of lower family incomes, higher percentages of income assistance, compromised childhood achievement in school, health disparities, poor housing, and precarious neighborhoods, risks for drug use, gang involvement and teen parenthood.

Philadelphia is not alone, in facing these challenges as most urban centers in the United States are also experiencing similar dysfunction. However, as a long-time resident of this great city and a community activist committed to improving the quality of life for Latinos and all other citizens and families who reside in Philadelphia, I know that this issue must be confronted and successfully overcome for Philadelphia to move forward as a place where all citizens are afforded the opportunity to reach their human potential.

Concerned Citizens of Philadelphia August 19, 2014 Page 3

The traditional family unit of a mother and father living together with their children is no longer the norm for a large percentage of families in this country and this trend appears to be permanent. But this does not mean that the new models cannot be as successful as generations past, if all parties involved are willing to do whatever it takes to ensure that the well-being of children are of paramount concern. In fact, the goal of the Philadelphia Strong Families Coalition is to improve out-comes for children and strong resilient families through advocacy and community partnerships.

I believe that this report and the implementation of the provided recommendations represent a solid starting point in laying the groundwork for the reintegration of the missing parent (too often the father) into the family unit and the revitalization of the family structure. I intend to be a strong advocate for achieving the mission of the Philadelphia Strong Families Coalition and I respectfully request your participation in this most important initiative.

Sincerely,

Nelson A. Diaz

Welson Weg

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# Philadelphia Strong Families Coalition

# Child Well-Being in Philadelphia: Profiles of Children, Families & Fathers

September 2014

Jacquelyn Mitchell, J.D., L.C.I.S.W., Editor

The Philadelphia Strong Families Coalition extends appreciation to the Administration for Children and Families, Region III, for support of this initiative.

# Acknowledgements

The *Child Well-Being in Philadelphia: Profiles of Families*, *Children*, *& Fathers* would have not been possible without the continuing support of the Administration for Children and Families, Region III, U.S. Department of Health and Human Services, and the dedication of members of the Philadelphia Strong Families Coalition Core Group.

Dr. Rufus Sylvester Lynch, Stoneleigh Foundation Fellow and Chair of the Core Group, provided the leadership essential to the realization of the completion of this landmark project that focuses attention on the inclusion of fathers in the well-being of Philadelphia's children.

Core Group Sub-Committee Chairs readily assumed the task of eliciting the stakeholder feedback that so richly comtributed to the Profile. Core Group members Ms. Anita Kulick, Ms. V. Chapman-Smith, and Mr. Carl Montoya contributed editing that helped shape the final version of the data analysis. Bryn Mawr Student Carolyn Shank served as researcher on the project.

Special Acknowledgement is extended to the Honorable W. Wilson Goode, Sr., former mayor of the City of Philadelphia and the Honorable Nelson A. Diaz for support and encouragement to pursue the formation of the Coalition, the development of this Profile, and the launch of a campaign to eliminate systemic barriers to the inclusion of fathers in the lives of their children.

# Philadelphia Strong Families Coalition

Core Group Chair: Dr. Rufus Sylvester Lynch, ACSW drrslynchpsfc@iawfpa.com

September, 2014

My Dear Fellow Philadelphians:

Please accept this open letter as an indication of my sense of shared community with you. I write to express the pleasure that I have experienced shepherding the report you are about to read, "Child Well-Being in Philadelphia: Profiles of Children, Families & Fathers."

During the last two and half years, I and my colleagues listed toward the end of this report have spent countless hours attempting to understand what is happening to Philadelphia's children, families, and communities. Interestingly enough, it did not seem to matter to us that we were from different academic disciplines, professional areas of expertise, or whether we were members of the for-profit or non-profit community.

However, what did seem to matter to us was that we were all concerned with the deluge of statistical reports informing us that families in Philadelphia were increasingly at risk of losing stability in employment, housing accommodations, and loss of family members to either the juvenile or criminal justice system, behavioral health system, and/or the child welfare system. For example, the 2010 census reported that more than half of Philadelphia's children do not have both parents "present" in their lives; and that 44% of the City's children live in households without an adult male or father. The Annie E. Casey Foundation Kids Count Report indicated that, between April 2012 and March 2013, the City served over 6,000 children in foster care.

As I think about our ability to release this report, I feel obligated to share with you that a special thank you must go out to retired senior administrator David J. Lett, from Region III, Administration for Children and Families, U.S. Department of Health and Human Services. It was Mr. Lett who hosted the initial meeting of six child and family stakeholders who were brought together specifically to consider the question of the value of increasing the involvement of fathers in the life of their children. Fatherhood literature seems to be of one opinion regarding this issue: "Father Involvement does Matter."

The original group of six stakeholders who came together for the first time in David's office has now grown into a twenty-one member citizen's group referred to as the Philadelphia Strong Families Coalition (PSFC), and a participating collection of stakeholders totaling 85 individuals from Metropolitan Philadelphia.

Although David's retirement was an unforeseen occurrence, leaving the group feeling ill-prepared to move forward, we all felt relieved that the new administrator, Essey Workie, brought the same interest, enthusiasm, and commitment to the work of the Coalition – advocating for strong healthy family relationships that improve child well-being for Philadelphia's children.

We cannot thank our Federal government enough for its continued support of this important initiative. At the same time, there are others who played an equal, but different role in PSFC's success to-date that should be mentioned in the context of major contributors; they include the Stoneleigh Foundation and Bryn Mawr College's Graduate School of Social Work and Social Research (GSSWSR).

Foremost, the Stoneleigh Foundation should be recognized for its willingness to support the development of PSFC through its award of a fellowship to support a project titled "The Integration of Responsible Fatherhood within Foster Care Service Delivery and Other Children and Youth Servicing Systems of Care." Early on it was clear that the sustainability of the fellowship project was compatible with the long term goal of PSFC. Consequently, after two years of integrated work, PSFC's mission has been shaped by the vision of the Foundation's Fellow. The work of the Fellow has been similarly strengthened by the integration of PSFC's ultimate goal of forming an independent city-wide advocacy vehicle to foster and monitor the City's child well-being perspective on the essentiality of involving Fathers in the promotion of strong and healthy children and families.

Secondly, the faculty at Bryn Mawr College Graduate School of Social Work and Social Research (GSSWSR) has, as an Institutional Quality Assurance Partner on the fellowship, been unselfishly helpful by providing counsel throughout the process of expanding and integrating the two initiatives. Dean Bailey has especially supported the mission and the independent work of the coalition since its conception. In fact, Dean Darlyne Bailey identified and supported two of the School's graduate students to assist with the work of both projects.

Like all successful campaigns, there is normally a face associated with the movement. We are fortunate in that we have two of Philadelphia's "more outstanding leaders" as the face of our campaign: former mayor the Honorable Dr. W. Wilson Goode, Sr., and former Common Pleas Judge the Honorable Nelson A. Diaz. Both Judge Diaz and Dr. Goode have been kind enough to share their own message to you directly in the following pages. However, let me say that these men are symbols of individual triumph, symbolizing the type of victory we hope to achieve for families through the work of the Coalition.

As we all know, none of what PSFC has been able to achieve thus far would have happened without the commitment of the "Core Group" membership of the Coalition, especially Anita Kulick, who was a strong voice of encouragement and a key recruiter of Core Group members who might have not otherwise agreed to participate. Nonetheless, this group of professional and civic minded individuals has contributed time, talent, and collective intellectual abilities to produce the resource base from which the report is pulled and framed. As you review this report, please remember your fellow citizens who worked tirelessly to see this initiative come to fruition.

Finally, I would like to thank my colleague and friend Dr. Jacquelyn Mitchell who edited this body of work. Dr. Mitchell has been a confidant and advisor since our days at the University of Pennsylvania many years ago. Together, we have spent decades pushing for social change, she in law and me in social work. Some battles we have won, others not. However, the issue of fathers becoming more involved in the life of their children is an issue we are not likely to give up on any time soon.

By way of ending, I thank all of you in advance for joining the Coalition's vision and mission, in the coming days, weeks, and months, with the goal of supporting children and youth servicing systems that are inclusive of fathers in their service delivery models.

Cordially,

# Rufus Sylvester Lynch

Dr. Rufus Sylvester Lynch, ACSW NASW Social Work Pioneer ® A Stoneleigh Foundation Social Change Fellow GSSWSR Research Associate, Bryn Mawr College

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# **Executive Summary**

# Philadelphia Strong Families Coalition (PSFC)

PSFC is a collection of Core Group Members who

- Reside and/or work within the City of Philadelphia
- Support strengthening families and improving child well-being for Philadelphia's children and youth
- Are committed to advocacy and community partnership
- Are volunteers and receive no financial compensation from PSFC
- Participate in face-to-face, as well as virtual meetings

<u>PSFC Vision</u>: Improved out-comes for children and strong resilient families

through advocacy and community partnerships.

*PSFC Mission*: Strengthen families and improve child well-being through advocacy

for effective policies and programs for leveraging resources, and for encouraging collaboration among Philadelphia's organizations that

are family focused and inclusive of fathers.

# Child Well-Being in Philadelphia: Profiles of Children, Families & Fathers

PSFC commissioned *Child Well-Being in Philadelphia: Profiles of Children, Families & Fathers* as an information and advocacy tool, for the Philadelphia community.

The project was developed using available data, feedback on that data, and stakeholder experience and expertise regarding Philadelphia's children and families. It specifically addresses the conditions and issues facing Philadelphia's children, youth, families and fathers.

The project report includes data from an analysis that profiles "Children in Philadelphia"; "Families in Philadelphia," and "Fathers and Adult Males in Philadelphia"; as well as the Stakeholder Process"; "Findings and Conclusions"; "Recommendations"; "References"; and an Appendix, that lists Philadelphia Strong Families Coalition Core Group Members and Campaign Co-Chairs.

## Data Analysis

The data analysis used population statistics, family structure, employment, education, income, physical and mental health, incarceration, social services involvement, and other important descriptive variables to develop a nuanced portrayal of children, families, and fathers in Philadelphia. Empirical research touching on questions of interest also informed the analysis.

The analysis does have limitations. For example, only public health data was available to inform conclusions about physical and mental health and drug and alcohol use. Additionally, comprehensive data on the implementation of the Affordable Care Act was not yet available.

#### **Portraits**

The "Portrait of Children in Philadelphia" was developed through the lens of data related to the following factors: Demographics and Family Structure; Employment and Income; Homelessness; Health Indicators; Child Involvement in Social Services; Juvenile Justice; and Public Education.

The "Portrait of Families in Philadelphia" advances data related to some of the factors that contribute to the insecurities too many Philadelphia families face, through consideration of data that address: Demographic and Family Structure; Employment, Education, and Income; Physical Health; Mental Health of Adults; Use of Social Services; and Housing and Homelessness.

The "Portrait of Fathers and Adult Males in Philadelphia" offers a description of fathers and adult males in Philadelphia. Father-specific data is of limited availability and is augmented by data on males generally. The resulting Portrait was developed through the lens of data related to the following factors: Demographics and Family Structure; Employment, Education & Income; Physical Health; Behavioral Health; Substance Abuse; and Justice-System Involvement and Incarceration.

#### Stakeholder Feedback Process

Between June 2014 and July 2014, Core Group Committee Chairs elicited stakeholder feedback, using Core Group-designed frames that emerged from the data analysis. The Sub-Committee Chairs used various methodologies to elicit comments, guided by the following frames: 1) "Breaking through Barriers"; 2) "Building Healthy Families"; 3) "Education, Training, and Life-Long Learning"; 4) "Expanding Financial Opportunities for Families"; 5) "Housing and Homelessness"; and 6) "Strengthening Services for Families." Methodologies employed by the Sub-Committee Chairs included survey, face-to-face group session, e-mail communication, telephone interview, and in-person individual interview.

Stakeholder feedback was outlined within the context of issues addressed by profiles developed by the data analysis. The feedback provided rich input regarding Philadelphia's children, contextualized in identified parameters of family and father wellbeing. Without a doubt, the feedback enriched the insight provided by the data analysis.

## Findings and Conclusion

PSFC embarked on an innovative effort to move toward generation of an integrated picture of child well-being in Philadelphia. By design, the undertaking reflects an appreciation for the quantitative data that drives policy and, ultimately, practice in systems that serve children, youth, and families in Philadelphia. Moreover, the project took the additional step of eliciting input from related practitioners on frames that emerged from the data. This duality approach has enriched the information cache upon which PSFC can pursue its vision of strengthening families and child well-being via

policies that support programmatic effectiveness and coordination that integrates fathers in the delivery of services to the City's children and families.

A central message that emerged from the project was that child well-being in Philadelphia is dependent on manifest interconnected factors. More specifically, the dual data pointed to the interplay between child well-being, the strength of families, and opportunities and resources that support involvement of parents, including fathers, in the lives of their children and family constellation. Therefore, it seems likely that child well-being in Philadelphia would be better served by integration of services for children, i.e. safety, and permanency; around a perspective that actively respects that interconnection.

Indeed, the data sources essentially raise a central question: If it is accepted that child well-being is intimately tied to strengthening families and that father involvement is important for children, why should fathers be excluded from that effort, whether or not the parents are married, separated or live apart? It seems logical that, as repeatedly posited by various sources, exclusion essentially thwarts the possibility of strong families in which child well-being can be realized.

The perils that potentially emerge from not unequivocally focusing on what is more authentically "family" can have both present and future significance. Not only does the dual data point to current deficits that emerge from lack of father involvement— e.g., lower family incomes, higher percentages of income assistance, compromised childhood achievement in school, health disparities, poor housing, and precarious neighborhoods, risks for drug use, gang involvement and teen parenthood—the literature suggest those deficits are more likely to color future outcome potential for children.

Clearly, leadership is needed to spearhead the integration of the application of resources to address the identified interconnection of dynamics that thwart realization of strengthening Philadelphia's families to ensure child well-being is a reality. Families can only be strengthened, if the total family unit is the unit of focus. Indeed, project data echo advisements contained in the literature—i.e., the welfare of children is only

preserved in strong families in which all components have the benefit of economic and social self-sufficiency, and the healthy involvement of *both* parents, whether or not they share a residence. That is the challenge for the welfare of the children of Philadelphia; that is the challenge for the City, in the interest of a stronger Philadelphia for generations to come.

### Recommendations

Based on project findings, as augmented by other empirical sources, and in the interest of the present and future well-being of Philadelphia children and families; the Philadelphia Strong Families Coalition respectfully issues a Consequential Call to the Philadelphia community, including City government, to:

- Support the PSFC mission to strengthen children and youth servicing systems
  that play a crucial role in child well-being, including the promotion of effective
  policies and programs, resources, and collaboration that champion the inclusion
  of fathers in the delivery of services to families;
- Acknowledge and support the launch of an independent city-wide advocacy alliance to foster and monitor child well-being in the City, and join the alliance to promote fathers as essential to strong, healthy children and families;
- Endorse the independent city-wide advocacy alliance as a public repository for information, data, and resources that contribute to building healthy families in which each child is entitled to a father-child relationship;
- Consider the inclusion of fathers and father well-being in all aspects of familybased programming;
- Join a City-wide campaign to make Philadelphia America's most "Father Friendly
  Urban City" in the United States by encouraging, supporting, and promoting the
  PSFC mission in all aspects touching on the present and future well-being of
  children and families, including fathers, in Philadelphia; and
- Position Philadelphia as a governmental model for elimination of systemic impediments to father involvement in child and family well-being initiatives,

including but no services and ho	rdable health o	care, educatio	n, employmen	t, social

# Child Well-Being in Philadelphia: Profiles of Children, Families & Fathers

## Introduction

Philadelphia Strong Families Coalition (PSFC) commissioned *Child Well-Being in Philadelphia: Profiles of Children, Families & Fathers,* as an information and advocacy tool for the Philadelphia community to better understand the social and economic conditions that foster or impede the well-being of children, families, and fathers in the City of Philadelphia.

## Philadelphia Strong Families Coalition (PSFC)

PSFC Vision: Improved outcomes for children and s

Improved outcomes for children and strong resilient families

through advocacy and community partnerships.

*PSFC Mission*: Strengthen families and improve child well-being through advocacy

for effective policies and programs for leveraging resources, and for encouraging collaboration among Philadelphia's organizations that

are family focused and inclusive of fathers.

### PSFC Core Group Members:

- Reside and/or work within the City of Philadelphia
- Support strengthening families and improving child well-being for Philadelphia's children and youth
- Are committed to advocacy and community partnership
- Are volunteers and receive no financial compensation from PSFC
- Participate in face-to-face, as well as virtual meetings

 Participate in the analysis and promotion of effective policies and programs that strengthen families, leverage resources to support family formation, and encourage coordination among Philadelphia organizations that serve fathers and families

(See Appendix A for a complete list of PSFC Core Group members)

#### **Profile Overview**

The Profile was developed using available data, feedback on that data, and stakeholder experience and expertise regarding Philadelphia's children and families. It addresses specifically the conditions and issues facing Philadelphia's children, youth, families and fathers.

#### The Profile includes:

- A data analysis that includes portraits of:
  - Children in Philadelphia
  - Families in Philadelphia
  - Fathers and Adult Males in Philadelphia
- Stakeholder Feedback Process
- Findings and Conclusions
- Recommendations
- References
- Appendix A: Philadelphia Strong Families Coalition Core Group Members and Campaign Co-Chairs

# Data Analysis

To provide a nuanced portrayal of children, families, and fathers in Philadelphia, the analysis relies on data on population statistics, family structure, employment, education, income, physical and mental health, incarceration, social services involvement, and other important descriptive variables. Primary information sources include the 2010 U.S. Census, the Annie E. Casey *Kids Count* data cache, the 2012 Philadelphia Health Management Corporation data sets, recent data from the School District of Philadelphia, statistics from the United States Department of Justice and the Board of Labor Statistics, and a variety of annual reports from City departments including the

Department of Public Health, the Philadelphia District Court, the Philadelphia Police Department, the Department of Human Services, and the Philadelphia Housing Authority. Empirical research touching on questions of interest also informed the analysis.

The analysis does have limitations. For example, only public health data was available to inform conclusions about physical and mental health and drug and alcohol use. Additionally, comprehensive data on the implementation of the Affordable Care Act was not yet available when the analysis was completed. Finally, in some instances, percentages in charts may not add up to 100%, due to rounding.

#### Stakeholder Feedback

Core Group Sub-Committee Chairs elicited stakeholder feedback, using Core Group-designed frames that emerged from the data analysis. The Sub-Committee Chairs used various methodologies to elicit comments, guided by the following frames: 1) "Breaking through Barriers"; 2) "Building Healthy Families"; 3) "Education, Training, and Life-Long Learning"; 4) "Expanding Financial Opportunities for Families"; 5) "Housing and Homelessness"; and 6) "Strengthening Services for Families."

# A Profile of CHILDREN in Philadelphia

This section offers a description of children in Philadelphia, through the lens of data related to the following factors:

- Demographics and Family Structure
- Employment and Income
- Homelessness
- Health Indicators
- Child Involvement in Social Services
- Juvenile Justice
- Public Education

# Demographics and Family Structure

Black male and female children make up the largest portion of Philadelphia's children. Asian children represented the smallest percentage of the ethnic segment of the City's population of children.

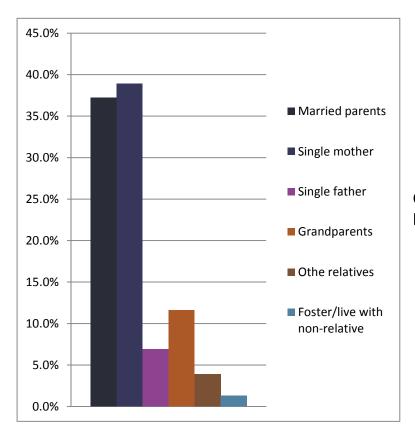


Chart 1-A: Family Structure of Philadelphia Children

Increasing numbers of Philadelphia's 344,268 children are growing up without the support of both parents in the home. For example, various indicators suggest the potential influence of ethnicity, among other factors, on family structures in which children grow and develop.

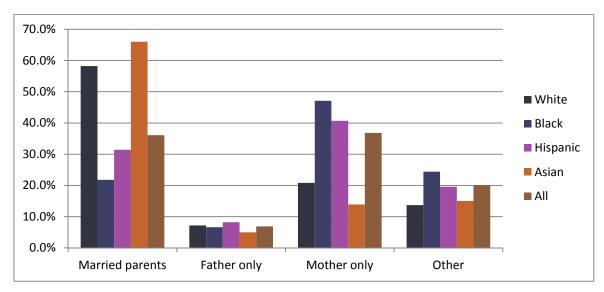


Chart 1-B: Family Structure of Philadelphia's Children by Race/Ethnicity

# Employment and Income

Income and poverty status also contribute to the environment within which Philadelphia's children grow and develop.

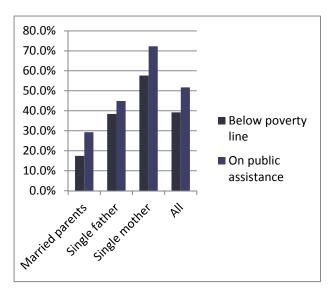


Chart 1-C: Income, Poverty, and Public Assistance by Family Structure

Table 1-D: Income, Poverty, and Public Assistance by Family Structure

	Married parents	Single father	Single mother	All
Median income	\$65,102	\$30,913	\$21,755	\$36,804
Below poverty line On public	17.4%	38.4%	57.6%	39.2%
assistance	29.3%	44.9%	72.3%	51.7%

The family structure that provides the most material support for children is a home with two married parents. Single parent homes are much more likely to exist below the poverty line and require the use of a variety of public assistance supports scores.<sup>1</sup>

#### **Homelessness**

In Philadelphia, children under the age of 18 comprise approximately one-third of the homeless shelter population on any given night. In a single year, over 3,500 children used shelter services at least once in Philadelphia.<sup>2</sup>

Almost half of the children in shelters are under the age of five. The resulting consequences for children can include increased likelihood to experience fair or poor health, more mental health problems including anxiety and depression, to experience hunger, and nearly four times as likely to experience delayed development.<sup>3</sup>

#### Health Indicators

The health of Philadelphia's children can be determined by several factors, some of which are evident before a child turns two. For example, child poverty and prenatal care are associated with lower than normal cognitive, motor, and behavioral skills.<sup>4</sup>

In Philadelphia, 64.6% of all births are to unmarried mothers. High rates of unmarried mothers persist across all racial and ethnic groups. Higher rates of childhood poverty, infant mortality, teen pregnancy, and incarceration are linked to father absence. <sup>5</sup> A 2008 study, "The One Hundred Billion Dollar Man," suggests that 20.1% of families

headed by single mothers would leave poverty if marriage rates returned to the higher rates seen in 1970.6

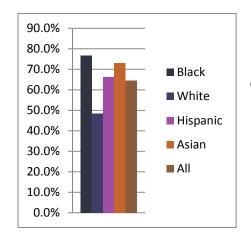


Chart 1-E: Births to Unmarried Women

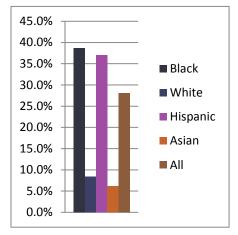


Chart 1-F: Percentage of Low-Weight Births by Race/Ethnicity

Philadelphia has the fourth highest infant mortality rate in U.S. cities, after Detroit, Baltimore, and Washington, D.C. Of all live births, 28.1% are to women under the age of 20. A 2006 study suggests that boys who are born to mothers under the age of 20 are at significantly elevated risk for drug use, unemployment, gang involvement, and teen fatherhood. The same study found that girls born to young mothers are much more likely to be teenage mothers themselves. These young mothers overwhelmingly tend to be unmarried. Mothers who give birth before the age of 20 are much less likely to complete college degrees, to marry the father of children, and much more likely to be economically marginal.

Improved support for young mothers and improved sex education and access to free and reliable birth control and reproductive care can contribute to reduced rates of teen motherhood, which may then contribute to substantial savings for a city in a variety of spheres.<sup>7</sup>

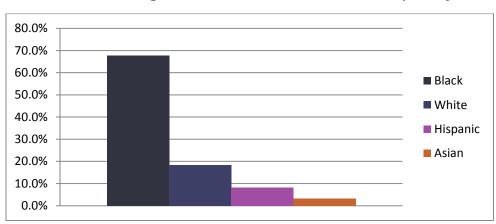


Chart 1-G: Percentage of Total Infant Deaths in Philadelphia by Race/Ethnicity

According to 2011 data from the Department of Health and Human Services low birth weights are a significant public health concern, rated as the primary determinant for infant mortality.<sup>8</sup>

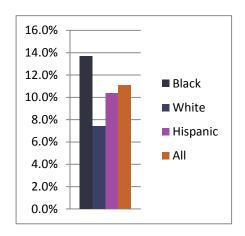


Chart 1-H: Low Birth Weight by Race/Ethnicity

Prenatal care is strongly correlated with higher birth weights.<sup>9</sup> In 2009, 39.0% of all women who gave birth accessed prenatal care during their first trimester. White

women accessed care at the highest rate, while Hispanic and Black women had the lowest rates of access. Only 5.1% of all women who gave birth did not access prenatal care until the third trimester. This rate was highest for Black women and lowest for White women.<sup>10</sup>

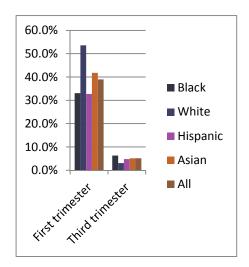


Chart 1-I: First Access to Prenatal Care by Race/Ethnicity

Table 1-I: First Access to Prenatal Care by Race/Ethnicity

	Black	White	Hispanic	Asian	All
First trimester	33.1%	53.6%	32.7%	41.8%	39.0%
Third trimester	6.3%	3.1%	4.8%	5.1%	5.1%

For adolescent mothers, prenatal care has been shown to play a role in reducing rates of low birth weight. Adolescent mothers who received prenatal care were also more likely to have continued their education throughout their pregnancy and postpartum year.

#### Child Involvement in Social Services

High rates of child abuse and neglect are a reality in Philadelphia. While the reported national rate of child abuse is 9.3 per 1,000 children, the Pennsylvania rate is 1.4 reports per 1,000 children, 11 and the 2011 Philadelphia rate is 13 per 1,000 children. Re-abuse account for 6.2% of Philadelphia reports. According to Annie E. Casey Foundation, *Kids Count*, the reduction in the number of substantiated reports of abuse in Philadelphia (from over 1000 in 2007, to 710 in 2011) represents a rate that is considered too high. In 2012-2013, 1.8% of Philadelphia's children lived in foster care, compared with the 2010 nationwide estimate of .6%. Philadelphia's rate is three times the national rate and more than three times the Pennsylvania state rate of children in foster care. 12

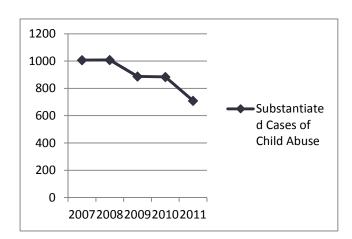


Chart 1-J: Substantiated Cases of Child Abuse in Philadelphia

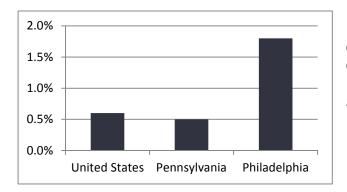


Chart 1-K: Percentage of All Children in Foster Care in Philadelphia: Comparison with State and National Percentages

Philadelphia represents 1.5% of foster care cases nationally, although only .5% of all of the nation's children live in Philadelphia.<sup>13</sup> Philadelphia is home to 12.6% of Pennsylvania's children. However, Philadelphia's children represent 26.5% of the Pennsylvania foster care population. Black children in Philadelphia are heavily overrepresented in the population of children in foster care (79.4% of all children in foster care). <sup>14</sup>

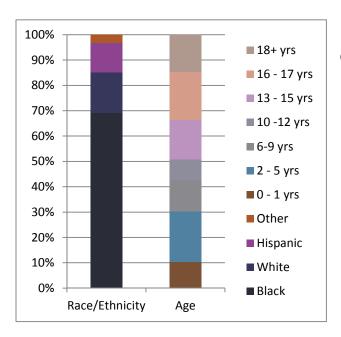
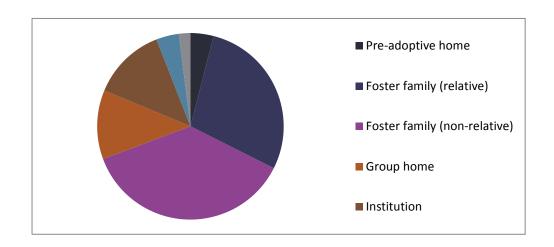


Chart 1-L: Characteristics of Philadelphia's Foster Care Population

From March 2012 to April 2013, the placement goal for 75% of children in foster care was reunification and, of the 2,987 children exiting placement over the course of the same one year period, 56.6% were reunified. Other than the April 2010 to March 2011 high of 65.9%, the 2012 -2013 percentage is the highest for the past five years. Additionally, of all children who were reunified during the March 2012 to April 2013 period, 46.8% re-entered the foster care system within 12 months and adoption was the second highest reason for exiting (17.7%).<sup>15</sup>

Chart 1-M: 2013-2012 Placement Settings for Philadelphia Children



The majority of placements were in non-relative foster care homes. The top five reasons for placement are parent drug abuse, child behavioral problems, neglect, physical abuse, and sexual abuse.<sup>16</sup>

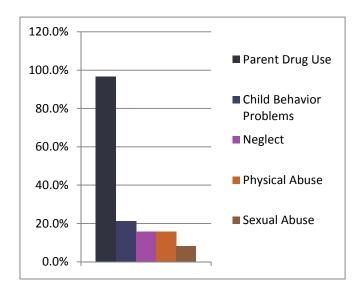


Chart 1-N Top Reasons for Child Placement in Philadelphia

In a national study of over 5,500 youths in foster care, 47.9% exhibited clinically significant mental health symptoms.<sup>17</sup> Black youth were significantly less likely to receive treatment.<sup>18</sup> Research suggests that children who were in three or more placements during their first year of foster care were much more likely to be in a group of high mental health care service users.<sup>19</sup>

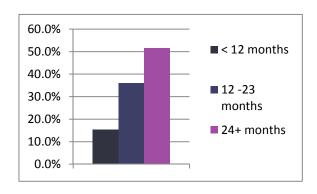


Chart 1-O: Children in 3 or More Placements

#### Juvenile Justice

Each year, thousands of Philadelphia's children and families experienced involvement with the juvenile justice system. In 2009, 7,755 dispositions (or juvenile court sentences) were recorded in the Philadelphia juvenile court. More dispositions were entered for male children (79.5%) than female children (20.5%). In the City's juvenile justice system, Black children, particularly Black males, are heavily overrepresented and Black children are overwhelmingly overrepresented in the juvenile justice population (78.9% of all dispositions). Black males accounted for 61.9% of that subset and 77.8% of all male dispositions. Black females were 16.9% of all dispositions, and 83.1% of all female dispositions.

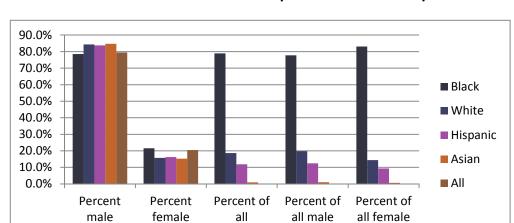


Chart 1-P: Juvenile Justice Dispositions in Philadelphia

Table 1-P: Juvenile Justice Populations in Philadelphia

dispositions dispositions

					Entire
	Black	White	Hispanic	Asian	Population
Percent male	78.5%	84.3%	83.8%	84.7%	79.5%
Percent female	21.5%	15.7%	16.2%	15.3%	20.5%
Percent of all dispositions	78.9%	18.6%	11.9%	0.9%	
Percent of all male					
dispositions	77.8%	19.8%	12.5%	1.0%	
Percent of all female					
dispositions	83.1%	14.4%	9.4%	0.7%	

Juvenile offending is routinely associated with a variety of negative life outcomes, including earlier mortality, high rates of re-offending, substance use, poor academic performance, and dropping out of high school. The relationship between academic factors and rates of criminal offending is often called the "school to prison pipeline."<sup>21</sup>

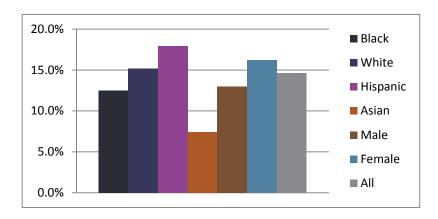


Chart 1-Q: Percentage of Philadelphia children who have a physical, emotional, or mental disability, by race/ethnicity and gender

#### Public Education

The Pew Charitable Trusts provides a wealth of data on public education in Philadelphia. The Trusts reports poor and non-white children make up the overwhelming majority of the School District's population. At the same time, the District experiences student performance, as well as budget and safety issues. Graduation rates and performance on state standardized tests do not speak well of the level of academic performance of District schools. On the positive side, six-year high school graduation rates continue to climb slowly in Philadelphia, as do on-time (within four years) graduation rates. Although this improvement is a positive sign, Philadelphia still lags far behind the rest of the nation and the Commonwealth of Pennsylvania in graduation rates.

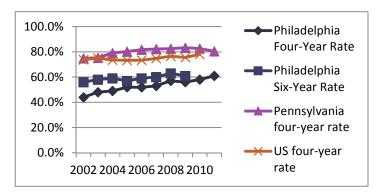


Chart 1-R: Philadelphia Four- and Six-Year Graduation Rates, 2002-2011

Table 1-S: Philadelphia Four- and Six-Year Graduation Rates, 2002-2011

				US
	Philadelphia	Philadelphia	Pennsylvania	four-
	Four-Year	Six-Year	four-year	year
	Rate	Rate	rate	rate
2002	44.0%	56.0%	74.9%	73.7%
2003	48.0%	58.0%	75.3%	75.0%
2004	49.0%	59.0%	79.0%	73.5%
2005	52.0%	57.0%	80.2%	73.2%
2006	52.0%	59.0%	81.7%	73.4%
2007	53.0%	60.0%	82.2%	74.8%
2008	57.0%	63.0%	82.5%	76.5%
2009	56.0%	61.0%	83.2%	75.5%
2010	58.0%	N/A	82.6%	78.0%
2011	61.0%	N/A	80.5%	N/A

Less than half of Philadelphia's third graders are receiving instruction that adequately prepares them to meet the basic knowledge and skills requirements for their grade level in math and reading. This trend of poor achievement continues at the eighth grade level. While the eighth grade scores show improvement, particularly in reading, too many students struggle to achieve basic levels of competency.

Moreover, any upward trend is not maintained at the 11th grade level. (See Chart 1-T)

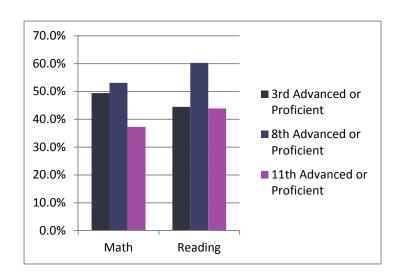


Chart 1-T: District-Wide PSSA Math and Reading Scores at 3<sup>rd</sup>, 8<sup>th</sup>, and 11<sup>th</sup> Grades

Table 1-U: District-Wide PSSA Math and Reading Scores at 3<sup>rd</sup>, 8<sup>th</sup>, and 11<sup>th</sup> Grades

	Math Advanced or Proficient	Reading Advanced or Proficient	
3rd grade	49.4%	44.5%	
8th grade	53.1%	60.3%	
11th grade	37.3%	43.9%	

Discipline issues are statistically more pronounced at schools with populations from lower income households and higher percentages of non-White students.

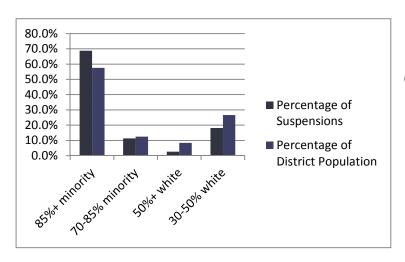


Chart 1-V: Percentage of Total District Suspensions by Racial/Ethnic Makeup of School

Table 1-W: Percentage of Total District Suspensions by Racial/Ethnic Makeup of School

		Percentage of
	Percentage of	District
	Suspensions	Population
85%+ non-White	68.8%	57.5%
70-85% non-White	11.3%	12.5%
50%+ white	2.6%	8.4%
30-50% white	18.1%	26.6%

School attendance is also a significant challenge in many of the City's low-income zip codes. In many neighborhoods of North Philadelphia (19121,19132, 19133, 19140) Northeast Philadelphia (19134, 19124), and West and Southwest Philadelphia (19139, 19143, 19146); at least 60% of all public school students have been absent or

unexcused eight or more times in a single school year. On the other hand, in the highest-income zip codes of the City (Chestnut Hill and Center City), only 10-19% of all students have eight or more unexcused absences in an academic year.<sup>22</sup>

# A Profile of FAMILIES in Philadelphia

A significant portion of Philadelphia's children live in fragile families that experience complex and interconnected marginality associated with factors such as financial deficiencies, housing, nutrition, physical and mental well-being, inadequate educational and employment resources, and unstable familial relationships.

This section advances data related to some of the factors that contribute to the insecurities too many Philadelphia families face, through consideration of data that address:

- Demographic and Family Structure
- Employment, Education, and Income
- Physical Health
- Mental Health of Adults
- Use of Social Services
- Housing and Homelessness

## Demographics and Family Structure

As is the case across the nation, the structure of families in Philadelphia continues to transform. The growth and development of children within such an environment can be precarious, especially for children of Color and those living in poverty. Black children are almost twice as likely as White and Hispanic children to be living with neither parent.<sup>23</sup> Rates of single motherhood are highest among Blacks and Hispanics, and the White rate is trending upward.

Significant differences are apparent between contemporary and 1980 data on rates of children living with only one parent. In 1980, 87% of all children lived with both parents, including 90% of White children, 47% of Black children, and 71% of Hispanic children.<sup>24</sup> Current rates are notably different and the rates of single-parent families in Philadelphia

are much higher than the national trends for that group. Of all Philadelphia families with their own children living in the household (136,499 total families), 45.3% are headed by a husband-wife couple, 10.3% are headed by a single father, and 44.5% are headed by a single mother.<sup>25</sup> Consequently, Philadelphia has more children living with the many challenges single parent households face.

Table 2-A: Demographics of Philadelphia Families

Tura magninad	Black	White	Hispanic	Asian	All
Two married parents	24.2%	61.5%	30.4%	77.2%	45.3%
Father only	9.4%	14.6%	12.2%	4.3%	10.7%
Mother only	66.4%	23.9%	58.4%	18.5%	44.5%

Single parenthood is associated with a variety of negative outcomes for children, including mental health and behavioral problems, academic difficulties, more conflict with parents, and increased rates of incarceration and teen pregnancy.<sup>26</sup> Single-parent families are also much more likely to live below the poverty line.

#### Employment, Education, and Income

Based on 2010 Census data, children living in a single parent household are more likely to be living in poverty. The pattern in Philadelphia is similar: The 48.9% of families with children headed by a female alone live below the poverty line. Comparatively, 11.2% of families headed by a married couple live below the poverty line.

The Children's Defense Fund's 2011 report, *The State of America's Children*, provides a less-than-encouraging picture of families across the United States. The report outlines several indicators of the growth of family poverty and racial and economic disparity. For example, by 2010, 1 in 5 children were living in poverty. Almost half of this number, 6.9 million, lives in extreme poverty or with income of less than 50% of the poverty line.

While White children make up the majority of the child population and those in poverty in America, Hispanic and Black children are proportionately much more likely to live in poverty than White children. More than one in three Black children and one in three Hispanic children lived in poverty in 2009, while one in ten White children was similarly situated. Almost 60% of children living in poverty are in single-parent families.<sup>27</sup>

National disparity trends regarding family poverty and racial and economic disparity are evident in Philadelphia; Over 39% of the City's children live below the poverty line. The median 2010 household income in Philadelphia was \$34,207, well below the national median household income of \$50,054. According to the Pew Charitable Trusts 2013 *State of the City* report, 51% of Philadelphia households have incomes less than \$35,000 and 28% of the City is living *below* the poverty line (\$15,510). In March 2013, the *Philadelphia Inquirer* reported that the City has the highest level of residents living in deep poverty of all large American cities. This is significant, because "while many people who live just below the poverty line often move out of poverty, those in deep poverty are in such a profoundly disadvantaged state that they're more likely to stay mired in it. Poverty becomes a long-term experience."<sup>29</sup>

The median Philadelphia household income for a family does not meet the "Self-Sufficiency Standard" for Pennsylvania (a more comprehensive measure of living costs). It is not sufficient to house, feed, and clothe four people in an urban environment with a high cost of living. The median female headed household incomes are several thousand dollars lower than overall median in the City, so a single mother is much more likely to need additional income assistance. The situation is also problematic for families of Color, considering that 39.8% of Black residents, 38.1% of Asian residents, and 47.5% of Hispanic residents earn 125% below the poverty level (\$27,646 for a family of four). If a primary breadwinner in a home is disabled, the family is even more likely to live in poverty. In Philadelphia, 15.4% of the population is disabled, with higher percentages for disabled People of Color and 47.7% of the disabled population lives at less than 125 percent of the poverty line.

Poverty levels are particularly concentrated in specific zip codes and neighborhoods. Three North Philadelphia zip codes (19132, 19121, and 19133) report median

household incomes below \$30,000. The zip code of 19133, North Philadelphia-East, reports a median household income of less than \$21,000.<sup>33</sup>

Although Philadelphia has become a diverse city with no group in the majority, household earnings vary considerably, based on ethnicity and family structure. White households have median annual earnings of \$45,067. Family households with a married couple have the highest median annual earnings of all family types (\$64,591), whereas single-mother households have the lowest (\$26,257).<sup>34</sup>

Poverty rates for Black and Hispanic families are the highest in Philadelphia. For all families, the combination of low head-of-household educational attainment level and a single parent family structure increases the likelihood of higher levels of poverty. If a young couple is married and neither parent has a high school diploma, the chances of being in poverty are 48.8%. In young Black families, a single mother with a high school diploma has a 58.6% chance of living in poverty with her children.<sup>35</sup> More than 40% of families live below the federal poverty line in several North and West Philadelphia neighborhoods (zip codes 19104, 19121, 19122, 19133, and 19134).<sup>36</sup>

Level of educational attainment also impacts employment and income potential. Notably, completion of higher levels of education increases the probability of avoiding poverty. Higher education levels can also enable families living just below the poverty line to move out of poverty. The following percentages represent adults living at or below 125% of the poverty line: 47.2% of Philadelphians who have less than a high school education, 30.4% of Philadelphians who have a high school degree, 26.4% of Philadelphians who have completed some college, and 10.5% of Philadelphians who have earned at least a bachelor degree.<sup>37</sup>

Table 2-B: Employment and Poverty Level by Educational Attainment

	Less than high school	High school	Some college	BA or higher
Below 125% poverty	47.2%	30.4%	26.4%	10.5%
Not in labor force	51.1%	32.0%	26.2%	13.1%

Unemployed 13.0% 12.0% 12.0% 5.2%

Philadelphia does not compare favorably with national statistics in educational attainment: 18.2% of Philadelphia's adults have not graduated from high school, 34.3% have high school degrees only, 23.0% have completed some college, and only 23.6% have completed at least a B.A. degree.<sup>38</sup> On the national level, 14.1% of all Americans have not graduated from high school, 28.4% have a high school degree, 29.0% have completed some college, and 28.5% have completed at least a B.A. degree. These education rates could account for disparities in Philadelphia's income rankings. Less than 10% of residents of zip codes 19121, 19131, 19132, and 19140 in North Philadelphia, 19134 and 19135 in Northeast Philadelphia, and 19142 in Southwest Philadelphia have college degrees. Not coincidentally, these are also zip codes with some of the lowest household incomes in the City.<sup>39</sup>

Low levels of educational attainment are linked with higher levels of unemployment or job fragility. Significantly, the link between educational attainment and employment stability is apparent for all Philadelphia residents between the ages of 25 and 64: 51.1% who have less than a high school degree are not in the labor force and 13% are unemployed; 32% with a high school degree as their terminal degree are not in the labor force and 12% are unemployed; 26.2% who have completed some college are not in the labor force and 9.2% are unemployed; and only 5.2% of those who have completed a B.A. or higher are unemployed and 13.1% are not in the labor force.

Table 2-C: Labor Force Non-participation and Unemployment by Education Level

	Not in labor	
	force	Unemployed
Less than high school	51.1%	13.0%
High school	32.0%	12.0%
Some college	26.2%	9.2%
BA or higher	13.1%	5.2%

A description of the types of jobs available and the levels of education required to be eligible for application are significant indicators in the employment picture for family wage earners in Philadelphia. Although Philadelphia has had tepid job growth recently, its position as one of the nation's largest metropolitan regions and world markets and a growing population suggests a positive future for the region, unlike Detroit or other depressed communities. Nonetheless, the region's economic potential might offer few opportunities for individuals who have not completed high school.

As of the beginning of January 2013, 66.75% of jobs posted in the Philadelphia area that specified a required level of educational attainment required at least a bachelor degree. Eight of the top 10 employers in the Philadelphia area are either medical or educational institutions that tend to require higher levels of education for most jobs. Clearly, finding work—particularly well-paid, full-time work with benefits--with just a high school diploma is a difficult task in Philadelphia.<sup>40</sup> A fact sheet published by the Philadelphia Workforce Development Corporation states that over 50% of Philadelphians are lacking the basic "workplace literacy" they need to compete for many of the jobs on the market. More than two-thirds of the available jobs require more skills specifically, at least a bachelor degree - than 50% of Philadelphians currently have, leaving the majority of residents lacking sufficient education and job skills competing for a very small pool of employment opportunities.<sup>41</sup>

#### Physical Health

Access to health insurance is not only vital to physical and mental health and well-being, but also to family security. Before the Affordable Care Act was passed in 2010, many Philadelphians, however, were uninsured: 14.5% of the civilian population in Philadelphia did not have health insurance; 7.2% of those between the ages of 17 and 64 who were employed had no insurance; 44.5% of those who were unemployed have no insurance; and 17% of those not in the labor force had no insurance. Prior to passage of the Affordable Care Act,<sup>42</sup> Philadelphians between the ages of 18-24 were most likely to be uninsured (23.9%), including11.7% of Whites, 14.8% of Blacks, 21.4% of Asians, and 20.3% of Hispanics. <sup>43</sup>

Philadelphia is a center for medical innovation and part of a region in which the healthcare industry is a vibrant economic force. However, health issues in Philadelphia are not minimal and are exacerbated among the poor and uninsured. The City has significant rates of certain chronic diseases, compared to major metropolitan areas in the United States. The top five causes of death for Philadelphians are heart disease, cancer, stroke, accidents, and chronic lower respiratory diseases, including bronchitis, emphysema, and asthma. City population groups living in poverty face the most serious health challenges.

According to 2009 public health data, nearly 17% of all deaths in Philadelphia were attributable to smoking-related causes, including cardiovascular disease, cancers, and respiratory diseases. In addition to smoking-related diseases, Philadelphia residents exhibit high rates of high blood pressure and obesity, with propensity for heart disease, cancer, diabetes, and strokes. In Philadelphia, 35.8% of all residents have had high blood pressure and 13.3% have had diabetes. Among Black residents, 43.7% have had high blood pressure and 17.2% have had diabetes, while White percentages are much lower for both. Among Hispanic residents, 24.2% have had high blood pressure and 10.3% have had diabetes. The incidences of these conditions are much higher, upwards to 41.5% of those populations living in poverty.

Until recently falling to second place, Philadelphia ranked as the fattest city in America. Over 32% of the City's population is obese, 34.2% is overweight, and 66.3% is overweight or obese. Disparity related to these rates is evident along race/ethnicity lines. Being overweight is prevalent across ethnic groups, but is higher among People of Color. Of all White residents, 26.8% are obese, 34.9% are overweight, and 61.7% are overweight or obese. Of all Black residents, 38.4% are obese, 33.5% are overweight, and 72.0% are overweight or obese. Of all Hispanic residents, 35.9% are obese, 35.0% are overweight, and 71.0% are overweight or obese.

#### Mental Health of Adults

In Southeastern Pennsylvania, nearly 19% of adults living in poverty have been diagnosed with a mental illness, compared to almost 9% of adults who are not living in poverty.<sup>47</sup>

Table 2-D: Gender and Poverty Status of Adults With/Without a Mental Health Condition

	With Mental Health Condition	Without Mental Health Condition
Male	32.7%	49.0%
Female	67.3%	51.0%
Poor	18.9%	81.1%
Not Poor	8.9%	91.1%

Hispanic and White adults (14.3% and 14.2%, respectively), have the highest rates of diagnosed mental illness, while Black and Asian adults (11.9% and 2.5%, respectively) have lower rates. Hispanic and White adults (63.7% and 60%, respectively) are more likely to seek treatment than Black adults (50%). Economically marginal adults are slightly more likely than non-poor adults to receive treatment (61.5% and 57.6%, respectively). This may be partially attributable to the fact that many poor adults receive public benefits that include access to mental health services. In fact, according to a report from the Public Health Management Corporation (PHMC), a leading southeastern Pennsylvania non-profit provider of public health resources, 61.6% of adults with mental illness who have insurance seek treatment, while only 19.7% of those who are not insured seek treatment. The same PHMC report also reveals that adults with a regular source of care are more likely to have a diagnosed mental illness (14.1%) than adults without a regular source of care (9.9%).<sup>48</sup>

#### Use of Social Services

After the massive welfare reform bill passed in 1996 that abolished Aid for Families with Dependent Children (AFDC) and established Temporary Aid for Needy Families (TANF), much stricter eligibility rules were established. Subsequently, rates of TANF

receipt dropped precipitously. Over 25% of all Philadelphia households receive food stamps, also known as the Supplemental Nutrition Assistance Program (SNAP), and 1.5% of Philadelphia families receive TANF. Presently, the majority of TANF recipients in Pennsylvania are in Philadelphia. Over twenty-six percent of these were child-only cases, 5.23% were adult-only cases, and 95.27% were female-headed household cases. Nearly 92% of these TANF recipients were households also receiving SNAP.<sup>49</sup>

Most food stamp recipients are families of Color (79%) and contain children under 18.<sup>50</sup> The largest household type receiving food stamps are single parent households. Children living with only one parent, particularly with a mother only, are more likely to be on food stamps. The total recipient pools includes 38.6% of all families with children under 18, 23.6% of married couples with children, 56.6% of single mothers, and 32.6% of single fathers receive food stamps.<sup>51</sup>

Little data is available to show how families dropped from government programs are really faring. We do know that organizations like Philabundance, which, according to its website, is "the region's largest hunger relief organization, providing emergency food and access to services to approximately 900,000 people at risk of food insecurity in the Delaware Valley and beyond," are trying to fill a void for the working poor and families who do not qualify for food stamps.<sup>52</sup>

## Housing and Homelessness

Half of Philadelphia's housing stock was built before 1956 and much of this aging stock is in need of repair. Many Philadelphians who are already spending more than 30% of their income on rent or mortgage costs cannot afford the additional costs of upkeep. Although People of Color are less likely than Whites to live in owner-occupied homes and spend a larger percentage of their incomes on housing costs,<sup>53</sup> there is a dearth of affordable rental and for-sale housing stock or housing in poor neighborhoods in good repair. Families who find themselves homeless stay in shelters for an average of two years because of the lack of permanent affordable housing.<sup>54</sup>

The housing expenses for a substantial number Philadelphians and for almost all lower-income Philadelphians exceed the recommended percentage of income to spend on housing. Project HOME estimates that, in Philadelphia, the demand for affordable housing exceeds the supply by at least 60,000 units.<sup>55</sup> An October 2013 *Philadelphia City Paper* article reported that "28,076 low-income people [were] waiting in line for a Philadelphia Housing Authority (PHA) unit; 54,368 want[ed] Section 8 vouchers, which subsidize rent in the private market; and 26,382 wait[ed] on a third list for tax-credit subsidized housing."<sup>56</sup>

Table 2-E: Owner-occupied and Renter-occupied Households by Race and Ethnicity

	Black	White	Hispanic	Asian	All
Owner-occupied	50.3%	60.3%	45.6%	51.7%	54.1% 45.9%
Renter-occupied	49.7%	39.7%	54.1%	48.3%	10.070

Just over a third of the homeless population in Philadelphia (14,986 individuals served by the City's Office of Emergency Shelter and Services in 2005) were either heads of households or children. In 2005 (the most recent year for which Project HOME has available data), 80% of the shelter population was Black, 13% was White, and 6% was Hispanic.<sup>57</sup> Chronically homeless families—i.e., those homeless for one year or longer or experienced four episodes of homelessness in three years—accounted for 13% of homeless families.<sup>58</sup>

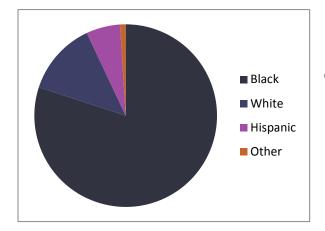


Chart 2-F: Homelessness by Race and Ethnicity

## A Profile of FATHERS and ADULT MALES in Philadelphia

This section offers a description of fathers and adult males in Philadelphia, through the lens of data related to the following factors:

- Demographics and Family Structure
- Employment, Education and Income
- Physical Health
- Behavioral Health
- Substance Abuse
- Justice-System Involvement and Incarceration

## Demographics and Family Structure

Although ample data is available on children and mothers in Philadelphia, the same is not the case regarding fathers, particularly fathers who do not live with their children. Nonetheless, this section examines available data that provide insight into that population.

In 1990, the City's population was over 50% White. Twenty-four years later, we are a much more diverse City.<sup>59</sup> That diversity is also evident in the male population. Males of Color now represent 60.8% of Philadelphia's male population: Blacks, 42.2%; Hispanics, 12.3%; and Asians, 6.3%. Whites represent 36.9%, while "other" races account for 2.5%.

Table 3-A: Racial/Ethnic Distribution of Philadelphia in 1990 and 2010, in percentages

	White	Black	Hispanic	Asian	Other
1990	52.1%	39.3%	5.6%	2.7%	0.3%
2010	36.9%	42.2%	12.3%	6.3%	2.3%

The majority of Philadelphia adult males (53.6%) have never married; 29.3% have married and live with their spouses. More than 60% of Black and Hispanic males have never married, while Asian males (45.0%) are most likely to be married. Black and Hispanic men also have the highest divorce status at 7.6% and 8.0% respectively.<sup>60</sup>

Table 3-B: Marital Status of Adult Males

	White	Black	Hispanic	Asian	All
Never Married	51.1%	60.4%	61.2%	47.3%	53.6%
Currently Married	36.6%	24.5%	26.9%	45.0%	29.3%
Separated	1.9%	3.9%	2.5%	1.9%	6.5%
Divorced	6.6%	7.6%	8.0%	4.1%	7.3%
Widowed	3.9%	3.6%	1.4%	1.7%	3.3%

Of the 56% of all children in the City who live with their fathers, 45.3% live in two-parent households and 10.3% live in single-male households. Over 30% of Black children (33.6%) live with their fathers in two-parent households; 24.2% live with their fathers in single male households (9.4%). A higher percentage of Hispanic children (42.6%) live with their fathers, 30.4% in two-parent, and 12.2% in single male households. By comparison, the overall rates for Asian and White children living in either two-parent or single male parent households are 81.5% and 76.1%, respectively. For children in father-headed households, the rate is highest for White single male households (14.6%), while 9.4% of Black families with children and 12.2% of Hispanic families with children are headed by fathers only.<sup>61</sup>

Table 3-C: Household Status of Fathers

	Black	White	Hispanic	Asian	All
Husband and wife with			-		
children	24.2%	61.5%	30.4%	77.2%	45.3%
Male alone with children	9.4%	14.6%	12.2%	4.3%	10.7%

## Employment, Education, and Income

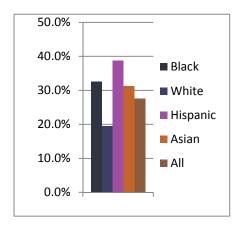


Chart 3-D: Philadelphia Males Living in Poverty, By Ethnicity

Nearly 28% of Philadelphia's adult males live in poverty. The rates are highest for Hispanics (38.8%) and Blacks (32.6%).<sup>62</sup> Male family households with no wife present earn \$36,109, as compared to married men with families who report a median household income of \$64,591.

Data related to the relationship between educational attainment, employment, income potential, and levels of unemployment indicate:

- 47.2% of Philadelphians who have less than a high school education live at or below 125% of the poverty line, as compared with only 10.5% of Philadelphians who have earned at least a B.A. degree
- 51% of Philadelphia residents between the ages of 25 and 64 have less than a high school education and are not in the labor force (i.e., not looking for work), and 13% are unemployed.
- For those residents with a bachelor degree or higher, only 13.1% are not in the labor force and just 5.2% are unemployed.

Data regarding the race and ethnicity-based variances associated with the highest level of education completed for adult males above age 25 in Philadelphia indicate:

- 39.2% of Hispanics, 30.9% of Asians and 21.8% of Blacks do not graduate from high school, compared to 13.0% of Whites.
- 10.7% of Blacks and Hispanics earned a bachelor degree or higher, compared to 34.5% of Whites, and 33.8% of Asians.

Table 3-E: Highest Level of Education of Adult Males

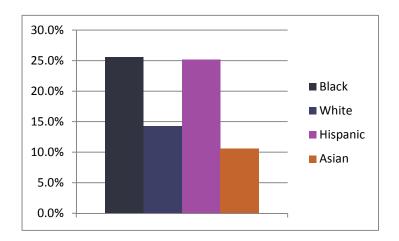
	White	Black	Hispanic	Asian	All
No high school	40.00/	04.00/	00.00/	20.00/	10.00/
degree	13.0%	21.8%	32.9%	30.9%	19.3%
High school degree	32.7%	43.3%	31.8%	22.3%	30.6%
Some college	19.7%	24.2%	18.2%	13.1%	21.2%
BA degree or					
higher	34.5%	10.7%	10.7%	33.8%	23.6%

Black, Hispanic, and Asian men have median incomes (based on a 12-month period) of \$36,412, \$32,687 and \$33,649 respectively, as compared to a significantly higher level of income of \$51,504 for White males.<sup>64</sup>

Table 3-F: Median Income of Adult Males

	White	Black	Hispanic	Asian
Median income all	\$35,959	\$26,641	\$25,877	\$23,991
Median income worked 12 months	\$51,504	\$36,412	\$32,687	\$33,649

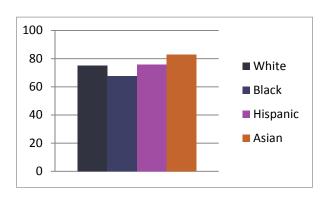
Chart 3-H: Unemployment Levels for Adult Males



Black and Hispanic men experience persistently high unemployment rates at 25.6% and 25.2%, respectively; while the rates for Asian and White males are 10.6% and 14.3%. 65 According to the Philadelphia City Controller's January 2012 Economic Report, the number of manufacturing jobs has dropped 17.6% since 2007, which has had an impact on male employment in the City, especially for males Of Color.

## Physical Health

Chart 3-I: Life Expectancy of Adult Males, in years



For adult males, physical health and access to health insurance make a difference in the life expectancy and quality of life. Before the passage of the

Affordable Care Act, 23.2% of Hispanic and 16.7% of Black males lacked access to health insurance, as compared to 12.7% of White males. <sup>66</sup>

Other significant indicators of the physical health of adult males include the following:

- Life expectancy for adult males (72.14) is nearly eight years less than that of women (79.77). Black men have the shortest life expectancy (67.47) and Asian men have the longest (83).<sup>67</sup>
- Heart disease (approximately 26%) and cancer (approximately 24%) represent the two highest causes of death for Philadelphia males. These percentages are generally consistent for White and males of Color.
- Public health studies suggest marriage has positive benefits, particularly for men.
   Married men reportedly live longer;<sup>68</sup> have lower rates of accidents, and a lower incidence of serious psychiatric illnesses, including schizophrenia.<sup>69</sup>

#### Behavioral Health

In Philadelphia, 13.5% of males have been diagnosed with a mental illness: 14.5% of Whites, 15.1% of Blacks, 13.7% of Hispanics and 5.7% of Asians. For those diagnosed, 57% receive treatment for their mental illness, although rates of treatment for Blacks (65.2%) and Hispanics (84.6%) are reportedly higher than for Whites (61.5%) and Asians (50%).

Some data indicate that stress is a consideration in the behavioral health of Philadelphia males. One study explored the stress experienced by Philadelphia males on a day- to-day basis, on a scale of 3-10 (i.e., 1 indicated "no stress" and 10 indicated "extreme stress"). Although the data reported involved adult males generally, and not fathers specifically, the results indicate:

- 19.4% of respondents reported high amounts of stress (levels 8-10)
- 46.4% of respondents reported moderate amounts of stress (levels 4-7); and
- 33.2% of respondents reported low stress (levels 0-3)<sup>70</sup>

Table 3-J: Mental Health Indicators for Philadelphia Males by Race/Ethnicity

	Black	White	Hispanic	Asian	All
Diagnosed Mental Illness	15.1%	14.5%	13.7%	5.7%	13.5%
Receiving Treatment	65.2%	61.5%	84.6%	50.0%	57.0%
Stress level low	36.5%	31.2%	31.3%	24.3%	33.2%
Stress level medium	40.7%	51.5%	45.6%	54.1%	46.4%
Stress level high	22.8%	17.3%	23.3%	10.4%	23.3%

In 2012, 10.9% (or 79,263) of adult males in the City accessed at least one of the available public mental health services. These numbers do not reflect the City residents who accessed mental health services through providers other than public health providers.

The following access data is instructive:

- The Behavioral Health Special Initiative (BHSI) provided substance abuse treatment for 8,591 uninsured or underinsured, approximately 77% (or 6,639) of whom were males.
- Community Behavioral Health (CBH) provided services to 116,687 adults
   Medicaid recipients: 51.09% of whom were male.
- Of the 28,676 adults who accessed Office of Mental Health (OMH) services,
   56.06% were male.

As reflected on Table 3-K, Black adult males were the highest users of public mental health services (42.45%), followed by Hispanics at 18.06%, Whites at 17.04% and Asians at 1.08%.

Table 3-K: Percentage of Adult Males Accessing Mental Health Services in Philadelphia, by Race/Ethnicity

	Black adult male	White adult male	Hispanic adult male	Asian adult male	Total adult males
Any public mental health					
service	42.45%	17.04%	18.06%	1.08%	55.25%
BHSI	38.55%	26.29%	7.95%	0.17%	75.81%
СВН	18.85%	10.37%	9.43%	0.49%	36.55%

## Drug/Alcohol Use

Research suggests a relationship between male adult substance abuse and dependence and adult males' ability to adequately care for their children. Earlier research from 1999 indicates that alcoholic fathers are more likely to exhibit negative parenting behaviors, including lower paternal sensitivity, higher negative affect, and lower infant responsiveness;<sup>71</sup> while a 2003 study found that fathers who were more involved with their children reported lower rates of severity of their substance abuse when compared with less-involved fathers.<sup>72</sup> In that regard, one source reports that, of the 17.4% of Philadelphia males who report that they have at one time had an alcohol or drug problem, 24.8% are Black, 16.7% are Hispanics, 11.8% are Whites, and 8.1% are Asians.<sup>73</sup>

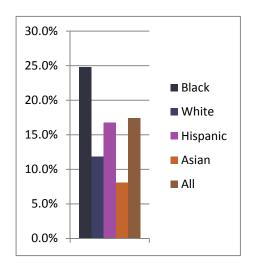


Chart 3-L: Philadelphia Males With Past Alcohol or Drug Problems, by Race/Ethnicity

Philadelphia males represent 57.4% of drug abuse treatment admissions for addiction, including Whites (47.1%), Blacks (9. 2%) and Hispanics (1.1%). Estimates for those who have substance abuse disorders and do not seek treatment can be as high as 90%. These estimates tend to trend higher in non-White populations. However, these estimates also preceded the implementation of the Affordable Care Act.

Table 3-M: Treatment Admissions in Philadelphia by Race and Gender

	All Treatment Admissions	Male Treatment Admissions
White	76.0%	47.1%
Black	16.0%	9.2%
Latino	6.0%	1.1%

#### Justice-Involved/Incarcerated Males

Philadelphia residents comprise almost 30% of the population of the Pennsylvania state prison system, with males equaling about one half of the total. In 2011, there were nearly 15,000 Philadelphia males incarcerated in local, state, and federal institutions. In Philadelphia, seven (7) cents of every dollar, a larger share of the budget than for any other City responsibility, with the exception of police and human services expenditures.<sup>74</sup>

According to recent data, incarcerated persons are likely to be Black, male, unmarried, and have children or other dependents. Blacks tend to be overrepresented in state and federal incarceration rates (49%), with Whites and Hispanics representing 39% and 11%, respectively. Of all incarcerated persons in Philadelphia, 83.5% are unmarried, 60% are parents, and 39.8% do not have any dependents. For incarcerated adults who have dependents: 20.5% have one dependent, 16.6% have two dependents, 19.4% have three to five dependents, and 3.7% have more than five dependents.

Chart 3-N: Philadelphia Prison Population By Age

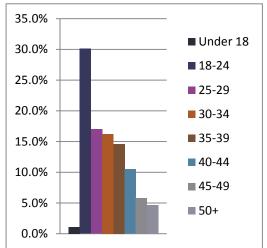
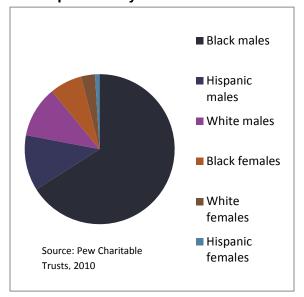


Chart 3-O: Philadelphia Prison Population By Race and Gender<sup>76</sup>



Philadelphia's jail population is young, with approximately 30% in the 18-24 age range; and nearly 80% in the 18-39 range. Black males represent 66% of all Philadelphia jail inmates, while 12% are Hispanic males and 11% are White males. Black females comprise 7% of the incarcerated population in the City.<sup>77</sup>

The U.S. Department of Health and Human Services report, *Incarceration and the Family,* indicates that fathers who lived with their children before incarceration are significantly less likely to do so upon their release.<sup>78</sup> Caregivers/mothers may prevent the father from living with his children, structural factors may intervene (e.g., a housing project that does not allow residents who have convictions), or a "new father figure" (e.g., a boyfriend, uncle, friend) may have surfaced during the father's absence.

However, the strongest predictor of the quality of a father's relationship with his child upon release is the strength of their connection during his incarceration.<sup>79</sup> In Philadelphia, the types of offenses resulting in jail time differ significantly by race: Hispanics (57.5%) are most likely to be jailed for drug offenses; Blacks (31.4%) are more likely than Whites or Hispanics to be incarcerated for violent offenses; and Whites

(18.8%) are more likely than Blacks or Hispanics to be incarcerated for property offenses.<sup>80</sup>

Table 3-O: Offense Type by Race in Philadelphia in 2003

	Black	White	Hispanic	Other	Total
Drug	38.1%	34.3%	57.5%	24.2%	39.1%
Violent	31.4%	24.7%	19.8%	36.5%	28.9%
Property	16.1%	18.8%	8.8%	16.4%	15.9%
Other	14.5%	22.3%	14.0%	23.0%	16.1%

## The Stakeholder Feedback Process

Sub-Committee Chairs elicited feedback on established frames of reference, between June 2014 and July 2014. Methodologies employed by the Sub-Committee Chairs included survey, face-to-face group session, e-mail communication, telephone interview, and in-person individual interview.

All feedback from stakeholders related to all frames developed by the Core Group have been collated in relationship to project profile categories—i.e., "A Portrait of Children In Philadelphia"; "A Portrait of Families in Philadelphia"; and A Portrait of Fathers and Adult Males in Philadelphia."

Sub-Committee	Chair(s)/Co-Chairs
"Breaking through Barriers"	George D. Mosee, Jr.
"Building Healthy Families"	Anselm I. Sauter & Brenda Shelton-Dunston (Health) Patricia L. Erwin-Blue & Asher Kemp, Jr. (Behavioral Health)
Education, Training and Life-Long Learning"	Kevin Golembiewski & Sandra Dungee Glenn (Interim Co-Chairs)
"Expanding Financial Opportunities for Families"	Richard Greenwald & Cheryl G. Feldman
"Housing and Homelessness"	Malkia Singleton
"Strengthening Services for Families	Rufus Sylvester Lynch

## **Respondent Pools**

Sub-Committees reported the following descriptions of frame respondent pools:

Breaking Through Barriers" Frame
 Organizational Type: Juvenile justice provider (1), local public entity (7)
 Organizational Position Represented: Executive/administration (3), supervisory
 staff (2), other (attorney) (3)

## "Building Healthy Families" Frame

Organizational Type: behavioral health services (10), local public entity (8), health providers (12), business organization (1), social services (5), non-profit (6) Organizational Position Represented: Executive/administration (9), administrative (2), supervisory staff (4), front line staff (6), and unidentified (1)

## "Education, Training, and Life Long Learning" Frame

Organizational Type: legislature (1), law firm (4)

Organization Position Represented: education attorney (4); legislative aid (1)

## Expanding Financial Opportunities for Families Frame

Organizational Type: union (1), city government (1)
Organizational Position Represented: executive (2)

## "Housing and Homelessness" Frame

Organizational Type: Eight (8) stakeholders representing providers of services to homeless families

Organizational Position Represented: Executive/administration (2), administrative staff (1), supervisory staff (4), and housing case manager (1)

## • <u>"Strengthening Services for Families" Frame</u>

Organizational Type: Twelve (12) stakeholders from local public (9) and state public (3) entities representing providers of foster care (6), juvenile justice (1), behavioral health (1), homeless families (1), and responsible fatherhood (2) services.

<u>Organizational Positions Represented</u>. Executive/administration (7), front-line staff (4), and supervisory staff (1)

## **Summary of Stakeholder Feedback**

## A Portrait of Children In Philadelphia

Coincidentally and perhaps not unexpectedly, feedback narratives on all assigned frames address the central issue of child well-being in Philadelphia through lens of issues that shape the families and fathers in Philadelphia, echoing the PSFC vision and mission. The importance of families and fathers to the present and future well-being of children is confirmed and, indeed, underscored.

Within that context, stakeholder feedback on all frames provided rich input regarding Philadelphia's children, contextualized in family and father well-being. The feedback enriched the portraits that emerged from the data analysis.

## A Profile of Family in Philadelphia

Demographics and Family Structure:

Stakeholder feedback did not specifically address this component of the data analysis.

#### Employment, Education, and Income:

- ➤ Employment and Income: Issues/needs identified by Stakeholders that represent the "biggest challenges" included:
  - Encouraging smart, coordinated employment and training strategies that address:1) more unemployed than there are jobs; 2) 25% of jobs are low-skilled, while 50% of population is seeking low-skilled jobs; and 3) ensuring that summer and yearlong opportunities are available for 18-24 year olds
  - The need for "energetic leadership" and a "coordinated effort...driven by the Mayor's Office ad Philly Works"
  - The need for a "continuum of services... supports and programs that consist of transitional jobs; on-the-job training; fatherhood classes; and placement and retention services

 The need for alignment and coordination between the public workforce system and the City human and social services strategy, "especially the Shared Prosperity Initiative"

#### Education:

- Stakeholders identified several issues and needs related to education and Philadelphia families. For example, Stakeholders identified:
  - The need for "practical educational programming," such as "computer programming classes, automotive repair classes, and nursing classes" for both children and their parents
  - Limited awareness and utilization of schools' adult education resources
  - "...[A] culture of bias against parents with respect to education policy" based on a perception that parents, especially fathers, lack "the expertise/knowledge to contribute to education policy in a meaningful way," including input into IEP's for special education students

#### Health:

- Stakeholders identified:
  - The biggest challenges as 1) access to and knowledge of "nutritional, affordable and healthy foods" and 2) access to and the high cost of health care
  - Lack of adequate knowledge of available resources, high health care expenses, and limited employer-provided health insurance due to high unemployment
  - Lack of coordination between social services and medical intervention, "unmet social needs [that] result in poor health outcomes, and difficulty with obtaining services other than outpatient services

- The best sources for improvement were identified as:
  - ✓ Increased access to nutritionists/education, affordable fruits and vegetables
  - ✓ More SNAP funds
  - ✓ "Stricter regulation of harmful/unhealthy food choices"
  - ✓ Increased employment and employer-provided health care coverage, including for part-time workers
  - ✓ More healthcare options
  - ✓ Reduced tobacco use

#### Behavioral Health:

- Stakeholders identified the need for:
  - "[O]utreach and promotion" to increase awareness via "media, schools, sporting events, community forums, focus groups, town hall meetings, wellness and health fairs"
  - Reductions in "[m]oney spent on infrastructure, rather than direct care"
  - Reduction in "Micro management of resources," service disparities';
     and "historical, cultural and societal issues that impact communities of color"
  - Transportation that increases accessibility of services
  - Elimination of the "poor use of family intervention points, i.e. doctor office visits, emergency room visits, schools and religious affiliations

## Housing and Homelessness.

- Stakeholders identified the following challenges:
  - "Employment and healthcare needs as the top needs"
  - Resource limitations, such as "shortage of emergency, transitional and permanent housing that serve men as singles or attached to

- their family"; "multiple co-occurring issues associated with homelessness" for women with children"
- "Domestic Violence and related safety concerns"
- The "Homeless Provider System" that "in general was not built to serve the needs of fathers"; "The Office of Supporting Housing currently funds 11family shelters...3 accommodate men-headed households or couples with their children"
- "When garnering feedback from fathers attached to various programs they stated their strongest desire was to have a safe place and time to have visits with their loved ones that may be living in shelter"

## A Profile of Males and Fathers in Philadelphia

## Demographics and Family Structure

Stakeholders identified "Domestic Violence and related safety concerns" as challenges related to this analysis category, including:

- "...[M]any physical and emotional safety concerns in an emergency housing setting"
- "The belief that just because someone is an abuser they can still be a good father/parent is less prevalent"
- ➤ The assumption that "...the men are the abusers," although "...[t]his is not always the case
- The fact that "services to support men who are being abused are almost nonexistent."
- "...the influence of past social services practices where women have been denied welfare benefits if the father is involve in the family structure makes women in need of social serves apprehensive about mentioning a father's involvement"

## Employment, Education, and Income

Challenges identified by Stakeholders included:

- ➤ The "Philadelphia... unemployment rate [that] in some of its districts...is as high as 22%...[that] will take energetic leadership...[a] coordinated effort... driven by the Mayor's Office and Philly Works"
- The need to "[a]ssure ...the public workforce system efforts for men are aligned with the" City's strategies in this area. "
- [Identification] of resources and services that have the most potential to support diverse programming targeted at men and boys"
- Increased funding from Pennsylvania Departments of Labor, Welfare, and Corrections, augmented by private sources
- ➤ The strengthening of "...existing relationships among entities that serve men not connected to the labor market, including local educational institutions like the community college, universities, and secondary and career and technical education institutions..."
- "...[A]greements among literacy, re-entry, youth services and other human capital programming to the workforce and the public welfare systems"
- "...[I]ncrease[d] system wide coordination, enhance[d] efficiency and minimiz[ation] [of] duplication of efforts in human capital service delivery"

## Physical Health

The Stakeholders did not identify issues or opportunities specifically related to this data analysis category

### Behavioral Health

The Stakeholders did not identify issues or opportunities specifically related to this data analysis category

## Drug/Alcohol Use

The Stakeholders did not identify issues or opportunities specifically related to this data analysis category

Justice Involved/Incarcerated Males

Stakeholder identified the following opportunity:

➤ "The balanced approach to restorative justice (BARJ), ...the predominate philosophy in Pennsylvania...to developing strong families, [with] competency development and victim restoration [as] critical components"

## **Findings and Conclusions**

PSFC embarked on an innovative effort to move toward generation of an integrated picture of child well-being in Philadelphia. By design, the undertaking reflects an appreciation for the quantitative data that drives policy and, ultimately, practice in systems that serve children, youth, and families in Philadelphia. Moreover, the project took the additional step of eliciting input from related practitioners on frames that emerged from the data. This duality approach has enriched the information cache upon which PSFC can pursue its vision of strengthening families and child well-being via policies that support programmatic effectiveness and coordination that integrates fathers in the delivery of services to the City's children and families.

This section is focused on consideration of implications for the well-being of children in Philadelphia that emerged from the combined data sources. The discussion is appropriately framed in the direction evoked by the totality of the data—i.e., on the multifaceted systems on which we rely to fortify the well-being of Philadelphia's children, families and fathers. Although, as earlier noted, the data analysis was constrained by limitations; the imperfection of those constraints did not unduly thwart project goals. Indeed, the data driven profiles and feedback richly contribute to overall project goals.

It is important to note that PSFC's work and this project is based on an assumption that child well-being is significantly contingent on two important factors: 1) integration of systems of care; and 2) the context provided by the totality of the environment in which Philadelphia's children must exist. In that regard, the project encompassed a variety of related factors, including the PSCF mission of including fathers in the child well-being effort as an important adjunct.

Child Well-Being in Philadelphia: Collaborations and Interconnections

A central message that emerged from the project was that child well-being in Philadelphia is dependent on manifest interconnected factors. More specifically, the dual data pointed to the interplay between child well-being, the strength of families, and opportunities and resources that support involvement of parents, including fathers, in the lives of their children and family constellation. Therefore, it seems likely that child well-being in Philadelphia would be better served by integration of services for children around a perspective that actively respects that interconnection.

There is growing appreciation that role models contributed by both parental genders, including those emanating from family, friends, and the social environment, are important to the development of strong and healthy children and, ultimately, communities. In that regard, it is significant that the American Bar Association Center on Children and the Law echoes the findings and conclusions reached by the project. Its publication *Courts Works* unequivocally embraces the importance of a healthy, positive, and ongoing father-child relationship to every child's development. Specifically noted is the positive link of father involvement to physical and mental health, self-esteem, gender identity, responsible sexuality, and financial security for children. Poverty at an early age, school suspension or drop-out, violence propensity and even adolescent suicide are identified as potentially resulting from father absence. Barriers similar to those that emerged from the project are also identified—e.g., personal social and economic circumstances, gender biases, personal and societal issues related to mothers, institutional barriers, and lack of interagency cooperation.

#### The following examples are instructive:

- Philadelphia educational systems are charged with serving children. However, project data suggest the need to also include parents as resources and service recipients. The relationship between levels of educational achievement, income stability, employment, and parental involvement recurs in consideration of data and feedback related to family welfare, generally, and, therefore, child well-being specifically.
- Concurrence is evident in data analysis and stakeholder feedback regarding the
  provision of homelessness services. In addition to dealing with housing, these
  service providers also face challenges related to issues such as employment and

income issues, parental relationships, and father involvement, housing stock issues, and disproportionately high housing expenses, in Philadelphia. For example, stakeholders specifically noted "multiple co-occurring" issues and the data analysis identified income and education as impacting homelessness. Significantly, minimal resources are available to provide homelessness services to entire families and fathers (even those who head families).

- The data analysis and stakeholder feedback suggest children might coincidentally be helped or harmed along with the fathers and mothers who directly receive workforce services. Identified markers of this dynamic included consideration that employment security and income self-sufficiency are determinants in whether children live in households that can meet their needs, have their fathers as participants in their well-being, live in households that are reliant on public benefits, and live in a neighborhood with adequate housing stock and an adequately performing school. Significantly, stakeholders specifically noted the need for a "coordinated effort" among City, Commonwealth, educational entities and private sources to address the substantial unemployment in Philadelphia. The need was identified as especially critical to supporting men and boys, especially considering the data analysis finding that males in Philadelphia, especially males of Color experience, persistently high unemployment rates and poverty.
- Moreover, the data counsel that youth and adults involved in the juvenile and criminal justice systems are not actually solitary clients; child and family well-being are also involved. For example, the data analysis and feedback advance child well-being associations of youth justice system involvement and single parent households, continuation of child-father relationship during father incarceration, and post-incarceration father-child relationships. Stakeholders also called for collaboration between literacy, re-entry, youth services, and other related programming to the workforce and the public assistance systems.
- Family compositions have evolved beyond older nuclear family (mother, father, and 2.3 children) notions. Indeed, the data create a different notion of what constitutes "family" in 21st century Philadelphia. While more families than one

might guess are headed by father only, there are indications that father absence might be attributed to factors beyond the control of fathers themselves. Early life marginality, low educational attainment and related reduced employment opportunities, health issues, and disproportionate representation in populations that significantly curtail economic and social well-being.

## Toward Enhancing Child Well-Being in Philadelphia

Some of the clear associations noted above suggest directions that have the potential of enhancing the general welfare of Philadelphia's children. Indeed, the data sources essentially raise a central question: If it is accepted that child well-being is intimately tied to strengthening families and that father involvement is important for children, why should fathers be excluded from that effort, whether or not the parents are married, separated or live apart? It seems logical that, as repeatedly posited by various source, exclusion essentially thwarts the possibility of strong families in which child well-being can be realized.

The perils that potentially emerge from not unequivocally focusing on what is more authentically "family" can have both present and future significance. Not only does the dual data point to current deficits that emerge from lack of father involvement— e.g., lower family incomes, higher percentages of income assistance, compromised childhood achievement in school, health disparities, poor housing, and precarious neighborhoods, risks for drug use, gang involvement and teen parenthood—the literature suggest those deficits are more likely to color future outcome potential for children.

Clearly, leadership is needed to spearhead the integration of the application of resources to address the identified interconnection of dynamics that thwart realization of strengthening Philadelphia's families to ensure child well-being is a reality. Families can only be strengthened, if the total family unit is the unit of focus. Indeed, project data echo advisements contained in the literature—i.e., the welfare of children is only preserved in strong families in which all components have the benefit of economic and social self-sufficiency, and the healthy involvement of *both* parents, whether resident or

not. That is the chall challenge for the City,	of the children of Phi onger Philadelphia for g	

## Recommendations

Based on project findings, as augmented by other empirical sources, and in the interest of the present and future well-being of Philadelphia children and families; the Philadelphia Strong Families Coalition respectfully issues a **Consequential Call** to the Philadelphia community, including City government, to:

- Support the PSFC mission to strengthen children and youth servicing systems
  that play a crucial role in child well-being, including the promotion of effective
  policies and programs, resources, and collaboration that champion the inclusion
  of fathers in the delivery of services to families;
- Acknowledge and support the launch of an independent city-wide advocacy alliance to foster and monitor child well-being in the City, and join the alliance to promote fathers as essential to strong, healthy children and families;
- Endorse the independent city-wide advocacy alliance as a public repository for information, data, and resources that contribute to building healthy families in which each child is entitled to a father-child relationship;
- Consider the inclusion of fathers and father well-being in all aspects of familybased programming;
- Join a City-wide campaign to make Philadelphia America's most "Father Friendly
  Urban City" in the United States by encouraging, supporting, and promoting the
  PSFC mission in all aspects touching on the present and future well-being of
  children and families, including fathers, in Philadelphia; and
- Position Philadelphia as a governmental model for elimination of systemic impediments to father involvement in child and family well-being initiatives, including but not limited to affordable health care, education, employment, social services and housing.

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# Appendix A: Philadelphia Strong Families Coalition Core Group Members, Campaign Co-Chairs, and Editor

## **Core Group Members**

Malkia Singleton Ofori-Agyekum holds a Master's degree in Early Childhood Education and has 15 years of experience as a program designer and manager in the fields of early childhood education and homeless services. Throughout her career, she has dedicated her time and talent to serving underserved communities in both Baltimore, Maryland and Philadelphia, Pennsylvania. Currently, Ms. Singleton Ofori - Agyekum serves as the Director of Residential and Client Services at Episcopal Community Services, St. Barnabas Housing, where she works with women and children experiencing homelessness.

**Pat Erwin-Blue** has been a social service professional for over 30 years with experience in the following areas: Child Protection, Adoption, Juvenile Justice, Family Court, and Prevention Services.

**Edwin Desamour**, Executive Director, Men in Motion In The Community.

Frances Dover holds a Master's Degree in Education from the University of Pennsylvania, with a focus on Interdisciplinary Studies in Human Development, and has many years of experience within the realm of psychology. For nearly the past decade, Ms. Dover has devoted her professional career to promoting the safety and well-being of children and strengthening of families in the North Philadelphia community. Ms. Dover's passion for social justice and for improving outcomes for children compelled her to join in the efforts of the PSFC.

Brenda Shelton-Dunston, Executive Director, Black Women's Health Alliance in Philadelphia. In her prior role as Principal Investigator/Project Director of Steps to a Healthier Philadelphia she effectively functioned as a "Boundary-Spanner" for development and implementation of numerous partnerships between community and faith-based organizations and health care institutions. In addition, Ms. Shelton-Dunston managed the operations of various Federally Qualified Community Health Centers, Maternal and Child Health Programs and Nursing Homes. She received a MPH from the University of Pittsburgh Graduate School of Public Health, Pittsburgh, PA; a BS Degree in Medical Technology from Central State University, Wilberforce, OH and was previously licensed as a Nursing Home Administrator in NC and Pa. She is Chairperson of the Health Commission of Mother Bethel African Methodist Episcopal Church, Secretary of the Board of Directors of Rudolphy/Mercy-Douglass Human Services Affiliate, Inc, .and a member of Alpha Kappa Sorority.

John L. Farrell heads the PhillyRising Team, which coordinates the actions of City agencies to help neighbors realize their vision for their community through sustainable, responsive, and cost-effective solutions. Farrell is a veteran of the United States Marine Corps (Staff Sergeant), and served one tour in Operation Iraqi Freedom. He holds an MPA and BA from Villanova University, and an MA in Security Studies (Homeland Defense & Security) from the Naval Postgraduate School.

**Cheryl G. Feldman** is respected nationally as a workforce development expert and educator. She has helped to develop and sustain a 39-year old labor management partnership that addresses the talent needs of the health and human service industry by helping Delaware Valley employers recruit and retain a high-skilled workforce, while providing access to family sustaining careers for thousands of low wage and unemployed Philadelphians.

Sandra Dungee Glenn's career spans over 30 years in public policy, electoral politics, education, and community organizing. She has worked to mobilize business and civic leaders, elected officials, clergy, and the educational community in pursuit of opportunities and improved life outcomes, particularly for the disadvantaged segment of this region. Ms. Dungee Glenn has served as the Chair of the School Reform Commission and currently serves on the Pennsylvania State Board of Education.

Kevin Golembriewski, Esquire, Associate of David J. Berney, Law Offices, P.C.

**Richard Greenwald,** Chara Cooper Hass Violence Prevention Fellow/Stoneleigh Foundation, has expertise in the fields of workforce development, prisoner reentry, and youth violence prevention with extensive experience leading nonprofit social services organizations. He has spent over twenty years addressing the complex economic development and human services issues facing unemployed people in the United States including at-risk youth, ex-offenders, and welfare recipients.

**Tiffany Harris**, licensed social worker at the Philadelphia Veterans Administration Medical Center, servicing the homeless population.

Alan Hunter's area of professional interest and expertise is in corporate-community restorative justice, which works to divert some of the fines incurred by corporations to community improvement projects and social change initiatives.

**Asher Kemp**, Jr., Founder, Multi-Therapy Services, Inc.

**Anita Kulick**, is committed to providing parents and families with the education and support services necessary to ensure they are better able to care for themselves, their families, and their communities. She is president and CEO of Educating Communities for Parenting and a founding member of the Pennsylvania Parenting Coalition.

**Rufus Sylvester Lynch**, Coalition Chair, ACSW, NASW Social Work Pioneer ®, former Dean and Professor of social work at Clark Atlanta University, Whitney M. Young, Jr. School of Social Work, has lectured at over a dozen colleges and universities; authored or co-authored over 22 published manuscripts in professional books and/or scholarly journals; and actively participated in over 60 professional conferences, workshops, and training institutes.

**George D. Mosee, J.D.** has been a prosecutor for over 25 years, specializing in juvenile justice work. Mr. Mosee serves on several boards and committees and has been the Chair of the Juvenile Prosecutor's Network of Pennsylvania since 2003.

**Bilal Qayyum** specializes in providing support and services to youth, fathers, and men in the African American community in Philadelphia. Mr.Qayyum has over forty years of experience in developing programs and initiatives in government, the non-profit sector, and the broader community.

**Tomas Sanchez, J.D.**, a lifelong Philadelphian, grew up in the shadow of Temple University and attended Central High School and the University of Pennsylvania Law School. Mr. Sanchez has a wide range of experience in various sectors including the corporate, non-profit, and public arenas. He was raised in a business family and has owned/operated business enterprises in the past. Mr. Sanchez is a resident of Norris Square, is married to Maria Quinones Sanchez and is the proud parent of two children, Edgar and Tomasito.

**Anselm I. Sauter** has spent his career promoting policies that support regional economic growth. He is actively involved in initiatives that make Greater Philadelphia the ideal location to live, work, and visit.

Ann Schwartzman specializes in advocacy for a humane, just, and restorative criminal justice system. She has designed and facilitated strategic planning and training sessions for several county Criminal Justice Advisory Boards and conducted trainings for Weed and Seed members with the Pennsylvania Commission on Crime and Delinguency.

V. Chapman-Smith has over 25 years of executive leadership experience in organizational capacity building and community work in both the private and public sectors. Throughout her career, she has built a professional Humanities practice that is defined by embracing and using coalitions and partnerships to achieve success and by building service models that reach into under-served communities. She has received national and regional recognition for her leadership work.

**Gerald David Wright** is an involved father who advocates for inclusion of fathers and parents in decision making processes, especially regarding public education. He is married and is the father of two daughters who attend Philadelphia public schools.

## **Campaign Honorary Co-Chairs**

Honorable Reverend Dr. Wilson S. Goode, Sr. was the City of Philadelphia's first African American Mayor for two terms. He subsequently spent 7 years as Deputy Assistant Secretary of Education under the Clinton Administration. He left that position in 2000 to help organize the Amachi Program, which is now his ministry and life's work. He and his wife of over 50 years have one son, two daughters, and two granddaughters.

The Honorable Nelson A. Diaz has been recognized as both an outstanding Hispanic Leader and a skilled manager working in the areas of public policy, law, international affairs, and the judiciary for over 30 years. Nelson has distinguished himself as City Solicitor of Philadelphia, General Counsel of the U.S. Department of Housing and Urban Development ("HUD") and a Judge and Administrative Judge of the Court of Common Pleas of Philadelphia.

#### **Public Relations Coordinator**

**Barbara Chavous**, MSW, CEO, Crisis Management Associates, LLC, is known for her work and advocacy to address quality of life issues working with elected officials at all levels of government as well as corporations, foundations, non-profits and the community to achieve the results sought. She provides comprehensive leadership and hands-on guidance to successfully achieve focused solutions in the complex arenas of community engagement and strategic planning around a litany of today's most daunting and challenging issues. She has an entrepreneurial approach to solving problems.

#### **Editor**

**Jacquelyn Mitchell, J.D., L.C.I.SW.**, is a policy and program specialist, systems mediator, and accreditation consultant. She is a member of the Georgia, Pennsylvania, and District of Columbia bars and a licensed social worker in Pennsylvania and the U. S. Virgin Islands. For more than a decade, responsible fatherhood has been an area of her professional engagement, including empirical research, juried authorships, and program administration. She holds a J. D. degree from the University of Pennsylvania Law School and an M.S.W. degree from Atlanta University, in addition to other certifications.

## **Endnotes**

<sup>1</sup> Campbell, Pungello, Miller-Johnson, Burchinal, & Ramey, 2001.

- <sup>2</sup> Project HOME, 2013.
- <sup>3</sup> National Coalition for the Homeless, 2009.
- <sup>4</sup> Black, Hess, & Berenson-Howard, 2000, 661-662.
- <sup>5</sup> National Fatherhood Initiative, "The Father Factor." <a href="http://www.fatherhood.org/media/consequences-of-father-absence-statistics">http://www.fatherhood.org/media/consequences-of-father-absence-statistics</a>.
- <sup>6</sup>Nock, S.L. & Einolf, C.J., 2008, p. 8.
- <sup>7</sup> Philadelphia Department of Public Health, Commissioner's Grand Rounds, 2009.
- <sup>8</sup> Children's Defense Fund. 2011
- <sup>9</sup>Alexander & Korebrot, 1995.
- <sup>10</sup> Philadelphia Vital Statistics Report, 2009.
- <sup>11</sup> Children's Defense Fund, 2011.
- <sup>12</sup> Annie E. Casey Foundation KidsCount, Philadelphia Indicators.
- <sup>13</sup> Child Welfare information Gateway, 2012.
- <sup>14</sup> Annie E. Casey Foundation KidsCount, Philadelphia Indicators.
- <sup>15</sup> Burns et al., 2004.
- <sup>16</sup> Ibid.
- <sup>17</sup> Burns et al., 2004.
- <sup>18</sup> Annie E. Casey Foundation KidsCount, Philadelphia Indicators.
- <sup>19</sup> Ibid.
- <sup>20</sup> Ibid.
- <sup>21</sup> Sander, 2010.
- <sup>22</sup> Pew Charitable Trusts, 2011a.
- <sup>23</sup> Children's Defense Fund, 2011.
- <sup>24</sup> Hernandez, 1994.
- <sup>25</sup> U.S. Census 2010, American Community Survey.
- <sup>26</sup> Murry, Bynum, Brody, Willert, & Stephens, 2001.
- <sup>27</sup> Children's Defense Fund, 2011.
- <sup>28</sup> U.S. Census 2010, American Community Survey.
- <sup>29</sup> Judith Levine, Temple University sociologist quoted in Inquirer article *of big cities, Philadelphia worst for people in deep poverty*, March 20, 2013.
- <sup>30</sup> This study defines the Self-Sufficiency Standard as "answer[ing] the question as to how much income is needed to meet families' basic needs at a minimally adequate level, including the essential costs of working, and then applies it to determine how many—and which—households lack enough to cover the basics. Unlike the federal poverty measure, the Standard is varied both geographically and by family composition, reflecting the

higher costs facing some families (especially child care for families with young children)." Pearce, 2013, n. 8

- <sup>31</sup> U.S. Census 2010, American Community Survey.
- 32 Ibid.
- 33 Pew Charitable Trusts, 2011a.
- <sup>34</sup> Ibid.
- <sup>35</sup> Children's Defense Fund, 2011.
- <sup>36</sup> Pew Charitable Trusts, 2011a.
- <sup>37</sup> U.S. Census 2010, American Community Survey.
- 38 Ihid
- <sup>39</sup> Pew Charitable Trusts, 2011a.
- <sup>40</sup> Pennsylvania Work Stats, 2013.
- <sup>41</sup> Philadelphia Works, 2014.
- <sup>42</sup> U.S. Census 2010, American Community Survey.

- <sup>43</sup> Annie E. Casey Foundation, 2010.
- <sup>44</sup> Philadelphia Department of Public Health, 2011.
- <sup>45</sup> Philadelphia Vital Health Statistics Report, 2009.
- <sup>46</sup> Ihid
- <sup>47</sup> This analysis is based on data from the Philadelphia Health Management Corporation's Southeastern Pennsylvania database from 2011. The sample size for some of these groups (ethnicities broken down by gender in Philadelphia) is small, so caution must be exerted when applying these findings more broadly.
- <sup>48</sup> Public Health Management Corporation, 2007.
- <sup>49</sup> Pennsylvania Department of Public Welfare, TANF data, December 2012.
- <sup>50</sup> U.S. Census 2010, American Community Survey.
- <sup>51</sup> Annie E. Casey KidsCount Data Center, 2010.
- <sup>52</sup> Philabundance, 2014.
- <sup>53</sup> Ibid.
- <sup>54</sup> Housing Trusts Fund Project, 2011.
- <sup>55</sup> Project HOME, 2005.
- <sup>56</sup> Denvir. 2013.
- <sup>57</sup> Project HOME, 2013.
- <sup>58</sup> Ibid.
- <sup>59</sup> Pew Charitable Trusts, 2011.
- <sup>60</sup> U.S. Census 2010, American Community Survey.
- <sup>61</sup> Ibid.
- 62 Ibid.
- 63 Ibid.
- 64 Ibid.
- 65 Ibid.
- <sup>66</sup> U.S. Census 2010, American Community Survey.
- <sup>67</sup> City of Philadelphia Vital Statistics Report, 2009.
- 68 Kaplan and Kronick, 2006.
- 69 House, Landis, & Umberson, 1988.
- <sup>70</sup> Public Health Management Corporation, 2011. This analysis is based on data from the Public Health Management Corporation's Southeastern Pennsylvania database. The sample size for some of these groups (ethnicities broken down by gender in Philadelphia) is small, so caution must be exerted when applying these findings more broadly.
- <sup>71</sup> Eiden, Chavez, & Leonard, 1999.
- 72 Collins et al., 2003.
- <sup>73</sup> Substance Abuse and Mental Health Service Administration (SAMHSA), 2010.
- <sup>74</sup> Pew Charitable Trusts, 2010, p. 15.
- 75 Lategan, O'Neill, & Santore, 2012, p. 13.
- <sup>76</sup> Pew Charitable Trusts, 2010, p. 11.
- 77 Ihid
- <sup>78</sup> Herman-Stahl, Kahn, & McKay, p. 6-1.
- <sup>79</sup> Ibid, p. 6-3.
- 80 Roman et al., 2006, p. 20.