The Children of the Southwest
Demographic and Socioeconomic Characteristics Impacting the Future of the Southwest and the United States

by

**Steve H. Murdock**
Hobby Center for the Study of Texas and the Department of Sociology
Rice University

**Michael Cline**
Hobby Center for the Study of Texas
Rice University

**Mary Zey**
Department of Applied Demography, and Organizational Studies
University of Texas at San Antonio

August, 2012
Contents

Introduction 4
Brief Synopsis of Literature 4
Socioeconomic, Educational and Health Characteristics Associated with Minority Status 6
Income and Poverty Disparities 6
Education Disparities 7
Health Insurance and Disparities 7
Interrelationships among Race/Ethnicity and Poverty, Educational Attainment and Health Status 8
Inequalities at the Start 8
The Demographic Characteristics of the Children of the Southwest 9
The Socioeconomic Characteristics of the Children of the Southwest 15
Conclusions 17
References 20
Tables

Table 1  Population Change in the United States and Southwest 5
Table 2  Total Child Population 11
Table 3  Non-Hispanic White Children 12
Table 4  Hispanic Children 12
Table 5  Non-Hispanic Black Children 13
Table 6  Non-Hispanic Asian Children 13
Table 7  Non-Hispanic American Indian/Alaskan Native Children 14
Table 8  Non-Hispanic Other Race Children including Two or More Races 14
Table 9  Estimates of Children in Families with Incomes Less than 100 of the Federal Poverty Level in 2010 16
Table 10 Estimates of Children with No Health Insurance 16

Figures

Figure 1  Minority Children as a Percent of Total Childhood Population 10
Figure 2  Percent of Children in Families and Subfamilies with Incomes Less than 100% of the Federal Poverty Level, 2010 17
Figure 3  Percent of Children without Health Insurance Coverage in the Previous 12 Months, 2010 18
Introduction

The children of the Southwest (defined here as consisting of persons less than 18 years of age living in the States of Arizona, California, Colorado, Nevada, New Mexico, Texas, and Utah) represent a critical component of the child population of the United States. In fact, the southwestern states have disproportionately contributed to both the growth in the total and child populations for more than 40 years. From 1970 to 2010, the southwestern states accounted for 43,652,311 of the nation’s total population increase of 105,533,612 (41.4 percent) and while the total United States increased its total child population by only 6.5 percent (by 4,518,154) the southwestern states increased their child population by 61.4 percent (by 8,013,459) children. As of 2010 these states contained 26.3 percent of the total population of the United States in 2010 and were the states of residence for 21,070,194 (28.4 percent) of the children of the United States (see Table 1). Even more important the southwestern states are increasingly an important center of growth in the number of children, particularly minority children, in the United States. These states’ combined increase of 1,726,793 children is equivalent to 91.5 percent of the nation’s 1,887,655 increase from 2000 to 2010. This was a decade that witnessed slow growth for the population of the Nation as a whole (9.7 percent) and especially slow growth in its child population (2.6 percent). As is clearly shown below, demographically and socioeconomically no discussion of America’s children could be complete without an examination of the growth and impact of the children of the Southwest.

In this work we describe the child population in the Southwest in terms of both its demographic and socioeconomic characteristics. We begin by discussing selected literature on America’s children, particularly its minority children (which form a majority of the growth in the child population today). This literature examines the socioeconomic characteristics of the current generation of children including the human capital of the families with children. We then examine the demographic and socioeconomic characteristics of children of the Southwest. We end our discussion by discussing the challenges and the potential contributions to the regions’ and Nation’s long-term socioeconomic growth and development potential represented by the children of the Southwest.

Brief Synopsis of Important Literature

As the analysis below delineates in detail, the children of the United States and particularly the Southwest are rapidly changing demographically, economically and socially (see Murdock et al. 2010). Of these sources of change the demographic are among the most important, setting the basic characteristics of the population of children who will ultimately become the nation’s future adult population (Murdock et al., 1995; 2003; Johnson and Lichter 2010). Although their progression to adulthood is inevitable, their growth in the human capital which they will need to become competitive is not. Their socioeconomic, educational, and health characteristics will play major roles in determining their likelihood of social and financial success and their physical and mental health conditions as adults.

The state of America’s children is influenced by a number of closely interrelated factors. Economic conditions, educational achievement, children’s health status together with such demographic characteristics as age and race/ethnicity work interactively to determine the life chances of children, in socioeconomic, educational and health terms. However, it is essential to recognize that many of these are concomitant factors and are not necessarily causally related to one another. For example, minority status is found to be associated with lower incomes and higher rates of poverty, lower levels of educational attainment and increased incidence of obesity and shorter life expectancy (Duncan et. al, 2010) but that does not mean that being minority causes such conditions. Rather analyses suggest that being minority is related to or correlated with
Table 1: Population Change in the United States and Southwest Region, Population Change by Race/Ethnicity, 2000-2010, and Percent by Race/Ethnicity, 2000 and 2010

<table>
<thead>
<tr>
<th>A. TOTAL POPULATION IN THE SOUTHWEST REGION</th>
<th>Population</th>
<th>Change 2000-2010</th>
<th>Percent of Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region</td>
<td>2000</td>
<td>2010</td>
<td>Numeric</td>
</tr>
<tr>
<td>NH White</td>
<td>37,248,002</td>
<td>30,808,648</td>
<td>839,646</td>
</tr>
<tr>
<td>Hispanic</td>
<td>21,028,355</td>
<td>28,430,720</td>
<td>7,408,365</td>
</tr>
<tr>
<td>NH Black</td>
<td>5,032,665</td>
<td>5,747,977</td>
<td>715,114</td>
</tr>
<tr>
<td>NH Am. Ind./AN</td>
<td>719,715</td>
<td>775,491</td>
<td>55,776</td>
</tr>
<tr>
<td>NH Asian</td>
<td>4,529,230</td>
<td>6,301,097</td>
<td>1,771,867</td>
</tr>
<tr>
<td>NH Other</td>
<td>1,647,666</td>
<td>2,013,410</td>
<td>365,744</td>
</tr>
<tr>
<td>Total</td>
<td>70,205,833</td>
<td>81,344,345</td>
<td>11,138,512</td>
</tr>
</tbody>
</table>

| B. CHILDHOOD POPULATION IN THE SOUTHWEST REGION | Population | Change 2000-2010 | Percent of Population |
| Region                                    | 2000       | 2010             | Numeric | Percent | 2000 | 2010 |
| NH White                                  | 8,171,262  | 7,313,084        | -857,178 | -10.5   | 42.2 | 34.7 |
| Hispanic                                  | 7,672,690  | 9,860,068        | 2,187,378 | 28.5    | 39.7 | 46.8 |
| NH Black                                  | 1,535,539  | 1,523,988        | -11,551  | -0.8    | 7.9   | 7.2  |
| NH Am. Ind./AN                            | 240,895    | 213,205          | -27,690  | -11.5   | 1.2   | 1.0  |
| NH Asian                                  | 1,069,167  | 1,322,105        | 252,938  | 23.7    | 5.5   | 6.3  |
| NH Other                                  | 633,828    | 836,854          | 183,026  | 28.0    | 3.4   | 4.0  |
| Total                                     | 19,343,401 | 21,070,194       | 1,726,793 | 8.9   | 100.0 | 100.0 |

| C. TOTAL POPULATION IN THE UNITED STATES | Population | Change 2000-2010 | Percent of Population |
| Region                                    | 2000       | 2010             | Numeric | Percent | 2000 | 2010 |
| NH White                                  | 194,552,774| 196,317,552      | 2,264,778 | 1.2    | 69.1 | 63.7 |
| Hispanic                                  | 35,305,818 | 50,477,594       | 13,971,386 | 43.0   | 12.5 | 16.3 |
| NH Black                                  | 33,947,837 | 37,685,848       | 3,738,011 | 11.0   | 12.1 | 12.2 |
| NH Am. Ind./AN                            | 2,068,683  | 2,247,098        | 178,215  | 8.6     | 0.7   | 0.7  |
| NH Asian                                  | 10,123,169 | 14,465,124       | 4,341,955 | 42.9   | 3.6   | 4.7  |
| NH Other                                  | 5,423,425  | 7,052,322        | 1,628,897 | 30.0   | 1.9   | 2.3  |
| Total                                     | 281,421,906| 308,745,538      | 27,323,632 | 9.7   | 100.0 | 100.0 |

| D. CHILDHOOD POPULATION IN THE UNITED STATES | Population | Change 2000-2010 | Percent of Population |
| Region                                    | 2000       | 2010             | Numeric | Percent | 2000 | 2010 |
| NH White                                  | 44,027,087 | 39,716,562       | -4,310,525 | -9.8   | 60.9 | 53.5 |
| Hispanic                                  | 12,342,259 | 17,130,891       | 4,788,632  | 38.8    | 17.1 | 23.1 |
| NH Black                                  | 10,610,264 | 10,362,183       | -248,081  | -2.3    | 14.7 | 14.0 |
| NH Am. Ind./AN                            | 685,911    | 647,321          | -38,590   | -5.6    | 0.9   | 0.9  |
| NH Asian                                  | 2,420,274  | 3,176,129        | 755,855   | 31.2    | 3.3   | 4.3  |
| NH Other                                  | 2,208,017  | 3,148,381        | 940,364   | 42.6    | 3.1   | 4.2  |
| Total                                     | 72,293,812 | 74,181,467       | 1,887,655 | 2.6    | 100.0 | 100.0 |

but does not cause lower incomes and higher rates of poverty and these in turn (are related to) to reduced levels of educational attainment and a higher incidence of negative health outcomes. That is, they are an interrelated set of items which often form a complex of conditions impacting children’s life chances (for a discussion of how such factors interact to affect children see Duncan et al., 2010).

**Socioeconomic, Educational and Health Characteristics Associated with Minority Status**

**Income and Poverty Disparities**

In 1997, during the height of economic prosperity in the United States, 13.4 million children (19.2% of all children) living in the United States were poor as measured by a comparison of total family income with a poverty threshold that varies by family size (see United States Census Bureau 2006).

There are a plethora of studies relating poverty (particularly income) and various outcomes. However all outcomes are not equal. We are particularly interested in the outcomes for children of their family’s poverty. The study of children in poverty offers the ideal subjects for examining the effects of poverty on life outcomes since the poverty in which they find themselves has nothing to do with their own choices, abilities, or decisions. Thus the argument of reverse causation which is prevalent among those who wish to “blame the victim” is erroneous. Unfortunately such tendencies may be especially prevalent in the United States. Thus, in examining the issue of intergenerational wealth transfers Solon (2002) found that the United States had the lowest degree of income mobility across generations among the large number of countries studied.

Beginning at birth, low income and its covariates such as low maternal education and minority racial status lead to greater risks of low birth weight babies due to prematurity and intrauterine growth retardation (Cramer, 1995; Gortmaker, 1979; Starfield et al., 1991; Stockwell et al., 1995). High incidences of low birth weight among poor women partially, but not totally, accounts for the higher infant mortality among this group (Cramer, 1995; Gortmaker, 1979; Tresserras et al., 1992). When poor children survive the first year of life, they continue to face greater risk of childhood mortality through accidental death (Wise et al., 1985) and developmental risks as well (Wise and Meyers, 1988). Nutritional status is impaired by poverty. As a result they are likely to be shorter-and lighter-for-their ages than those who are not poor (Kornman and Miller 1997).

Poor children are more likely to have lower rates of school attendance (McGaughey et al., 1991) and suffer from acute illnesses (Starfield, 1991) and asthma (Ernst et al., 1995). Children from poor families tend to exhibit more behavioral problems, especially those in long-term poverty, than children not in poverty (Campbell, 1995; McLeod and Shanahan, 1993). Young children in poverty are more likely to exhibit aggression, tantrums, anxiety and moodiness and at older ages poor children are more likely to exhibit learning and attention disorders and dislike of learning and school.

Poverty is also related to cognitive development. For example, income has been found to be directly correlated with Peabody Individual Achievement Scores and the Peabody Picture Vocabulary Test scores (Chase-Lansdale et al., 1997; Duncan et al., 1994; Korenman et al., 1995). Furthermore analyses suggest that, between the ages of three and eight, relatively small increases in income have resulted in substantial changes in intellectual skills such as increases in verbal and math skills (Smith et al., 1997).
Education Disparities

Roughly one-half of African-Americans, Hispanics and American Indians graduate from high school, compared to three-fourths of non-Hispanic Whites (Swanson 2004). Only 76% of African Americans and 56% of Hispanic adults have basic English literacy, compared with 93% of non-Hispanic Whites (Kutner et al. 2007). In addition, poor and minority children are more likely to attend under-resourced schools in high poverty areas (Duncan et al., 2010).

Furthermore, the educational gap appears to occur even before formal education begins. Black and Hispanic children living in poverty lag behind Whites on standard measures of achievement (Carneiro and Heckman 2005; Brooks-Gunn, Klevanov, and Duncan 1996). Achievement gaps between African Americans and Hispanics relative to non-Hispanic Whites are “one standard deviation” apart (Brooks-Gunn et. al. 1996). This preschool gap is largely explained by poverty and differences in home environments. Among schools with more than 75% minority students, 43% of their students are failing to make adequate yearly progress (AYP), compared with only 16% of students failing to make progress among schools with less than 25% minority students (see United States Department of Education 2008).

Educational disparities are also clearly affected by poor English language skills. However, most studies of the social and academic disadvantages of children before entering kindergarten do not adequately measure differentials in language skills. The reason for this omission is the difficulty in testing students with a poor understanding of English. For example, the 1998 U.S. Department of Education analysis of this dimensions in a “nationally representative longitudinal study of young children,” The Early Childhood Longitudinal Study, Kindergarten Cohort Analysis (ECLS-K), studied 1000 private and public school students at the point of entering kindergarten and reported their sample as random. However, although the sample was “random,” the authors also reported eliminating children whose understanding of English (the language of testing) was below an established score on a brief language screener, the Oral Language Development Scale (OLDS) (Lee and Burkam, 2002: 11). Of those whose native language was Spanish, 71% failed the OLDS screening while of those whose native language was other than Spanish or English, 29% failed the OLDS screening (1999, Table 5.1). Thus, the data reported for the sample of Hispanic and Asian children is highly selective of the population from which they were drawn because only those who demonstrated English skills sufficient to pass the OLDS were allowed to participate in the study (Lee and Burkam (2002, footnote 3).

Although the above noted study’s participants may be seen as composed of selectively “high” OLDS Spanish and other non-English speaking children, it found that among all children with a low socioeconomic status, African American and Hispanic children’s test scores were below the national average on key learning dimensions. (African Americans were .68 standard deviations below the mean in math and .56 standard deviations below the mean in reading, while Hispanics children were .71 standard deviations below the mean in math and .69 standard deviations below the mean in reading). Most studies have been unable to separate the intertwined effects of low socioeconomic status from low English speaking abilities on achievement outcomes, such as obtaining low grades and repeating grade levels (Lee and Burkam, 2002:20). Despite this, although not adequately evaluated, the data generally document that those students with limited English language skills are more likely to perform poorly in school.

Health Insurance and Disparities

The physical health results of poverty among minority populations are evident in a 1.7 times higher rate of low-birth-weight babies, 3.5 times higher levels of exposure to high levels of lead, and a 1.7 times higher rate of child mortality among minority compared to non-Hispanic White children (Duncan and Brooks-Gunn 1997).
Although academics have studied health and education separately, there is a recursive relationship between these two variables. Generally education has been treated as causal and disparities in education have been seen as leading to disparities in health. This causal relationship is generally through the mechanism of occupation status, income, residence in poor neighborhoods, and wealth (Backlund, Sorlie and Johnson 1999). The racial gaps in education and income are primary contributors to racial disparities in child mortality. Child poverty and lack of insurance explain many of the racial disparities in adult health with these effects being mediated through disparities in educational achievement (Jonson and Schoeni 2007). However, education also affects health independently of socioeconomic factors. Gaps in educational achievement represent key determinants of racial, ethnic and socioeconomic disparities in adult health (Cutler and Lleras-Muney, 2006). For example, less education is associated with earlier onsets of chronic diseases, disabilities and declining functional status.

**Interrelationships among Race/Ethnicity and Poverty, Educational Attainment, and Health Status**

Poverty has larger effects on poor children’s academic achievement relative to non-poor children such that poor children are 2.0 times more likely to repeat a grade, are twice as likely to drop out of school, and 1.4 times more likely to have a learning disability. Other negative consequences include the fact that poor children are 6.8 times more likely to experience child abuse and neglect, 3.1 times more likely to give birth out of wedlock, and 2.2 times more likely to experience violent crimes, including death (Blau 1999, Duncan and Brooks-Gunn 1997).

Parental income and education strongly affect general child development, particularly among the poorest of children. Findings from a natural experiment (Dahl and Lockner 2005) using the earned income tax credit and those from experiments involving random assignment to welfare show that increases in family income promote child achievement in preschool years. Dahl and Lockner (2005) note that a $3,000 increase in family income in early and middle childhood boosts reading and math achievement and work by Duncan et al. (2010) and Duncan and Brooks-Gunn (1997) show nonlinear effects indicating that changes in income effects matter more for lower income children than for higher income children (Duncan et al. 2010). Although such studies in the United States demonstrate that income is more predictive of some types of outcomes than others it remains a major factor impacting the economic, health and educational attainment characteristics of poor Americans, particularly children (Dahl and Lockner 2005; Rothstein 2006).

**Inequities at the Start**

It is clear that many of the inequalities with the most lasting effects on later educational achievement and socioeconomic status are those which appear in early childhood. In order to eliminate the lack of readiness to learn at age 6, analysts (e.g., Tarlov and Debbink, 2008) believe that it is imperative that children from minority and poor backgrounds be provided early childhood education between the ages of 3 and 5. A number of studies have shown that early intervention is far more effective than remediation (United States Census Bureau 2006; Lu and Halfon 2003; Love et al. 2005; Magnuson and Waldfogel 2005; Karoly et al. 2005; Carnero and Heckman 2006; Lynch 2007).

The extent and complexity of interactions among race/ethnicity, educational achievement, income and poverty, and health factors at different stages of the life cycle are illustrated in an excellent analysis by Duncan and associates (2010) in which they note that their analysis

> “shows striking differences in adult outcomes depending on whether childhood income prior to age 6 was below, close to, or well above the poverty line during their early childhood. Compared with children whose families had incomes of at
least twice the poverty line during their early childhood, poor children complete 2 fewer years of schooling, work 451 fewer hours per year, earn less than half as much, received $826 per year more in food stamps as adults, and are more than twice as likely to report poor overall health or high levels of psychological distress. Further, poor children have BMIs [Body Mass Indices] that are 4 points higher than those well above the poverty line, and are almost 50% more likely to be overweight as adults. Poor males are twice as likely to be arrested and for females, poverty is associated with a $200 annual increase in cash assistance, and a six fold increase in the likelihood of bearing a child out of wedlock prior to age 21. . . Children [from households] with average annual incomes below poverty in the earliest [age] period have lower average income for all three [adult] periods compared with the other two [more affluent] groups. Additionally, the poorest children are less likely to be White . . . have younger mothers, more siblings, household heads with lower test scores and educational attainment, homes rated dirtier by interviewers, lower parental expectations, and household heads who report less preference for challenge versus affiliation, less personal control, and less risk avoidance compared with their higher income counterparts.” (Duncan et. al., 2010: 323).

In sum, then, children who are poor and minority face substantial challenges in the United States. Their impact in the future is likely to be determined by what happens to them as children. Below we discuss the demographic and socioeconomic characteristics of the children of the Southwest that are likely to play major roles in determining their futures.

The Demographic Characteristics of the Children of the Southwest

In this section we provide a detailed discussion of the child population of the Southwest in the context of total population change for the Nation and the Southwest and national patterns of change in the child population. Because racial and ethnic diversity affects other demographic and socioeconomic differences we examine such patterns for the total child population and for the child population in each of several detailed racial and ethnic groups. Emphasis is placed on 2000-2010 Census data because it is the most recent and comprehensive data available. The intent of the discussion is to provide useful information for understanding both the diversity and complexity of factors impacting the children of the Southwest.

The seven southwestern states had a total population of 81,344,345 in 2010 accounting for 26.3 percent of the total United States population. Its total population increased by 11.1 million (15.9 percent) from 2000 to 2010 (see Table 1). This region accounted for 40.8 percent of population growth in the United States from 2000 to 2010. Several southwestern states were among the fastest growing in the nation. Texas with an increase of 4.3 million persons, California with an increase of nearly 3.4 million, Arizona with an increase of nearly 1.3 million, and Nevada with an increase of 702,000 were the first, second, sixth and tenth fastest growing states in the Nation from 2000 to 2010 in numerical terms and Nevada, Arizona, Utah, Texas, and Colorado were the first, second, third, fifth and ninth fastest growing states in percentage terms from 2000 to 2010. The Southwest Region is clearly a major center of national population growth.

There were 21,070,194 children in the southwest in 2010, 28.4 percent of the Nation’s children (see Table 1). The importance of growth in child populations in the southwest is evident in the fact that whereas the overall level of growth in the child population was 2.6 percent in the Nation it was 8.9 percent in the Southwest.
None of the southwestern states showed a decrease in their child populations from 2000 to 2010 while 23 of the 43 remaining states showed absolute numerical declines in child populations. In addition, four of the southwestern states were the four states with the largest percentage increases in children from 2000 to 2010 including Nevada with a 29.9 percent increase in its child population from 2000 to 2010, Utah with an increase of 21.2 percent, Arizona with an increase of 19.2 percent, and Texas with an increase of 16.6 percent.

The states of the Southwest are particularly important to the increase of the minority children in the United States. The Nation’s children in 2010 were 53.5 percent non-Hispanic White, 23.1 percent Hispanic, 14.0 percent non-Hispanic Black, 0.9 percent non-Hispanic American Indian and Alaskan Native, 4.3 percent non-Hispanic Asian, and 4.2 percent non-Hispanic Other and two or more race children. Children in the Southwest included 18.4 percent of the Nation’s non-Hispanic White children, 57.6 percent of its Hispanic children, 14.7 percent of non-Hispanic Black children, 32.9 percent of non-Hispanic American Indian and Alaskan Native children, 41.6 percent of non-Hispanic Asian children, and 26.6 percent of non-Hispanic Other and two or more race children (see Tables 2-8 and Figure 1).

Growth in the number of children varied widely across states and between different racial/ethnic groups. Thus the national decline in the number of non-Hispanic White Children was dramatic with a national decline from 2000 to 2010 of 4.3 million and with 46 of the 50 states showing absolute numerical declines in their number of non-Hispanic White children. The exceptions were Utah with an increase of 66,068, North Carolina with an increase of 31,201, Idaho with an increase of 21,967, and South Carolina an increase of 10,964. On the other hand many states showed substantial declines including California with a decline of 676,463; New York (357,041); Pennsylvania (303,042); Michigan, (269,881); Illinois (263,243); Florida (192,481), Texas (184,486); New Jersey (174,745); Massachusetts (173,450); and Maryland (with a 129,056 decline in the number of non-Hispanic White children). Within the Southwest in addition to the declines in the number of such children in California and Texas, and the growth in Utah, there was a decline of 922 non-Hispanic White children in Arizona, 18,740 in Colorado, 13,396 in Nevada, and a decline of 29,339 in New Mexico (see Table 3).

The most pervasive growth in child populations from 2000 to 2010 took place in the number of Hispanic children who increased in all 50 states with the largest increases of 931,012 children in Texas, 705,395 children in California, and 402,085 in Florida. Every State in the nation not only showed a numerical increase in the number of Hispanic children from 2000 to 2010 but only New York with an 8.9 percent increase, California with a 17.4 percent increase and New Mexico with an increase of 16.7 percent showed increases of less than 20 percent. In the Southwest (see Table 4) the increase in the number of Hispanic children was 28.5 percent (compared to 38.8 for the Nation as a whole) and, as Figure 1: Minority Children as a Percent of Total Childhood Population

![Figure 1: Minority Children as a Percent of Total Childhood Population](source: U.S. Census 2000 and 2010, P.L. 94-17)
shown in Table 4 Arizona increased its Hispanic population of children by 42.8 percent (210,803), California by 17.4 percent (705,395), Colorado by 44.6 percent (115,503), Nevada by 79.1 percent (115,733), New Mexico by 16.7 percent (43,271), Texas by 39.0 percent (931,012) and Utah by 84.0 percent (65,651).

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>72,293,812</td>
<td>74,181,467</td>
<td>1,887,655</td>
<td>2.6</td>
<td>100</td>
</tr>
<tr>
<td>Southwest Region</td>
<td>19,343,401</td>
<td>21,070,194</td>
<td>1,726,793</td>
<td>8.9</td>
<td>100</td>
</tr>
<tr>
<td>Arizona</td>
<td>1,366,947</td>
<td>1,629,014</td>
<td>262,067</td>
<td>19.2</td>
<td>7.1</td>
</tr>
<tr>
<td>California</td>
<td>9,249,829</td>
<td>9,295,040</td>
<td>45,211</td>
<td>0.5</td>
<td>47.8</td>
</tr>
<tr>
<td>Colorado</td>
<td>1,100,795</td>
<td>1,225,609</td>
<td>124,814</td>
<td>11.3</td>
<td>5.7</td>
</tr>
<tr>
<td>Nevada</td>
<td>511,799</td>
<td>665,008</td>
<td>153,209</td>
<td>29.9</td>
<td>2.6</td>
</tr>
<tr>
<td>New Mexico</td>
<td>508,574</td>
<td>518,672</td>
<td>10,098</td>
<td>2.0</td>
<td>2.6</td>
</tr>
<tr>
<td>Texas</td>
<td>5,886,759</td>
<td>6,865,824</td>
<td>979,065</td>
<td>16.6</td>
<td>30.4</td>
</tr>
<tr>
<td>Utah</td>
<td>718,698</td>
<td>871,027</td>
<td>152,329</td>
<td>21.2</td>
<td>3.7</td>
</tr>
</tbody>
</table>


The non-Hispanic Black population increased by more than 3.7 million (11.0 percent) from 2000 to 2010 with the largest increases in Florida (586,832), Georgia (579,335), Texas (522,570), North Carolina (296,553), and Maryland (209,494). Declines occurred in only six states including New York (28,766), Illinois (23,228), Michigan (18,291), California (18,122), Louisiana (970), and Hawaii (925). In the southwestern states the total non-Hispanic Black population increased by 715,114 or 14.2 percent (see Table 5). Growth in the Black population occurred in all southwestern states except California with an increase of more than 522,000 occurring in Texas. Increases were also large in Arizona which increased its non-Hispanic Black population by 89,160 or 59.5 percent and in Nevada which increased its Black population by 76,549 or 58.2 percent. As for the population as a whole, the non-Hispanic Black population of the Southwest had a higher rate of increase than the non-Hispanic Black population in the Nation.

The change in the number of non-Hispanic Black children shows a very different picture than that for the total population. In twenty-eight states there were increases in the number of non-Hispanic Black children while in 22 there were declines. Overall, the Nation had 248,081 fewer non-Hispanic Black children in 2010 than in 2000. The largest declines in this child population were in New York (145,565), California (130,295), Illinois (83,466), Michigan (63,644), and Louisiana (60,930). The largest increases were in Georgia (97,810); Texas (77,736); and Florida (64,302). Overall the Southwest showed a modest decline in its population of non-Hispanic Black children of 11,551 or 0.8 percent.

Of the seven southwestern states (see Table 5), California and New Mexico both showed declines while all of the rest showed increases in their populations of non-Hispanic Black children. Especially large percentage increases were evident in Utah (70.7 percent), Arizona (43.2 percent) and Nevada (36.4 percent).
The non-Hispanic Asian population, although much smaller than any of the other populations examined so far, has increased rapidly with an increase from 2000 to 2010 of more than 4.3 million (42.9 percent) from 2000 to 2010. This population increased in all 50 states with the largest numerical increases in California (1,126,210), Texas (393,981) and New York (370,268) and the smallest increases in the states with generally small populations (e.g., Montana, North and South Dakota, Maine, Vermont, and Wyoming). Another indication of the extent of growth in this population is the fact that in 27 of the 50 states there was an increase in Asian populations of more than 50 percent. California’s increase of 1.1 million non-Hispanic Asians from 2000 to 2010 led that in all other southwestern states followed by a 393,981 increase in Texas and an increase of 102,454 in Nevada (see Table 6).
The increase in the number of non-Hispanic Asian children was from 1,069,187 to 1,322,105, an increase of 252,918 (23.7 percent) with California accounting for 14.6 percent of the increase in non-Hispanic Asian children in the Nation and 43.6 percent of the increase in the Southwest (see Table 6) occurring in California. Texas followed with a 92,232 increase accounting for 36.5 percent of the growth in this population in the Southwest. Arizona and Nevada each added more than 18,000 non-Hispanic Asian children with percentage increases of over 90 percent from 2000 to 2010 in both states. In all of the remaining states in this region there were increases of more than 29 percent in the number of non-Hispanic Asian children during the 2000 to 2010 time period.

The non-Hispanic American Indian and Alaskan Native population of the United States consisted of 2,247,098 people in 2010, an increase of 178,215 in the Nation and 37,776 in the Southwest since 2000. It
increased relatively slowly with an increase nationally of 8.6 percent and a Southwestern increase of 5.2 percent from 2000 to 2010. The largest populations in this group are in Oklahoma with a population of 308,733, Arizona with 257,426, New Mexico with 175,368, California with 162,250, North Carolina with 108,829, Alaska with 102,556, and Texas with 80,586. Thus four of the states with the largest non-Hispanic American Indian and Alaskan Native populations are in the Southwest (see Table 7).

The child population of non-Hispanic American Indians and Alaskan Natives consists of 647,321 children nationally in 2010, 213,205 (or 32.9%) of whom live in the southwestern states (see Table 7). As with the non-Hispanic White and the non-Hispanic Black population the non-Hispanic American Indian and Alaskan Native child population is decreasing with the national population decreasing by 38,590 (5.6%) and the population in the Southwest decreasing by 27,690 (11.5%). The only state with an increase of relatively
substantial size from 2000 to 2010 is Oklahoma with a 6,369 (6.7 percent) increase in its child population. The overall pattern of decline is evident as well in the Southwest with declines evident in every state except Texas which increased its population by 1,411 or 8.1 percent while the largest decrease occurred in California with a decrease of 11,882 or 24.2 percent, followed by Arizona with a decrease of 8,211 or 9.1 percent and New Mexico with a decrease in the number of children of 6,337 (10.6 percent).

The last population group to be examined here consists of children classified as in the non-Hispanic Other racial group or who are non-Hispanic and identified with two or more racial groups. This group although relatively small (only 7,052,322 [5,966,481 who claim 2 or more races and 1,085,841 the Other racial identity] and 3,148,381 children [2,789,571 who claim membership in two or more races and 358,810 who claim the Other racial category] in 2010) is increasing at a faster percentage rate than any other racial/ethnic groups except Hispanics and Asians.

The largest increase in the total population in this population group is occurring in such diverse states as Texas (110,176) and California (104,328) with the overall increase in this group in the child population in the Southwest being 183,026 with the largest individual state increases occurring in the number of non-Hispanic Other and Two or more race children in Texas (61,160), California (48,215), and Arizona (22,021) (see Table 8). Only 19.5 percent of the population in this group is in the Southwest, a substantially lower proportion than the 28.4 percent that the Southwest makes up of the total child population. Nevertheless this group, particularly its two or more race component, merits attention in the coming decades.

Overall, then when the detailed racial/ethnic categories are examined, it is evident that the Southwest is an area of substantial growth and diversification. Its 2000 to 2010 increase in its child population was equivalent to 91.5 percent of the total growth in the child population in the United States during the decade and it is the area of residence for a majority of Hispanic children and for disproportionate shares of non-Hispanic Asians, and non-Hispanic American Indians and Alaskan Native children. As shown below being members of these groups is related (due to a variety of historical, discriminatory and other factors) to substantial differences in socioeconomic characteristics.

The Socioeconomic Characteristics of the Children of the Southwest

The children of the Southwest have high levels of socioeconomic need. This is evident in the data in this section of our report. Here we discuss these differentials needs relative both to national levels and relative to differences among the states within the Southwest.

Table 9 and Figure 2 shows the percent of children in poverty obtained from analysis of the 2010 American Community Survey data. These are single year estimates and thus the potential for sampling error is greater than that for larger multi-year samples. However given the use of state-sized units in this analysis and the desire to have data more directly comparable to the 2010 Census year the data set selected for analysis is clearly appropriate.

These data show substantial levels of need for the children in the region. In five of the seven states in the Southwest the percentage of children in poverty is greater than the percentage in the Nation as a whole with both Texas and New Mexico showing more than one-in-four children living in poverty. The data also indicate that three of every ten children living in poverty in the Nation resided in the seven southwestern states.
Table 9: Estimates of Children in Families and Subfamilies with Incomes Less Than 100% of the Federal Poverty Level in 2010

<table>
<thead>
<tr>
<th>Region</th>
<th>Number</th>
<th>Percent</th>
<th>Southwest</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>14,784,994</td>
<td>20.9</td>
<td>...</td>
<td>100</td>
</tr>
<tr>
<td>Southwest Region</td>
<td>4,524,245</td>
<td>22.5</td>
<td>100</td>
<td>30.6</td>
</tr>
<tr>
<td>Arizona</td>
<td>363,438</td>
<td>23.6</td>
<td>8</td>
<td>2.5</td>
</tr>
<tr>
<td>California</td>
<td>1,897,234</td>
<td>21.4</td>
<td>41.9</td>
<td>12.8</td>
</tr>
<tr>
<td>Colorado</td>
<td>198,147</td>
<td>16.8</td>
<td>4.4</td>
<td>1.3</td>
</tr>
<tr>
<td>Nevada</td>
<td>136,058</td>
<td>21.5</td>
<td>3.0</td>
<td>0.9</td>
</tr>
<tr>
<td>New Mexico</td>
<td>145,437</td>
<td>29.6</td>
<td>3.2</td>
<td>1.0</td>
</tr>
<tr>
<td>Texas</td>
<td>1,652,737</td>
<td>25.2</td>
<td>36.5</td>
<td>11.2</td>
</tr>
<tr>
<td>Utah</td>
<td>131,194</td>
<td>15.5</td>
<td>2.9</td>
<td>0.9</td>
</tr>
</tbody>
</table>

*Population for whom poverty is determined.
Source: American Community Survey, 2010 1-Year Estimates

Table 10: Estimates of Children with No Health Insurance During the Previous 12 Months (2010)

<table>
<thead>
<tr>
<th>Region</th>
<th>Number</th>
<th>Percent</th>
<th>Southwest</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>5,918,388</td>
<td>8.0</td>
<td>...</td>
<td>100</td>
</tr>
<tr>
<td>Southwest Region</td>
<td>2,424,261</td>
<td>11.5</td>
<td>100</td>
<td>41.0</td>
</tr>
<tr>
<td>Arizona</td>
<td>207,967</td>
<td>12.8</td>
<td>8.6</td>
<td>3.5</td>
</tr>
<tr>
<td>California</td>
<td>832,752</td>
<td>9.0</td>
<td>34.4</td>
<td>14.1</td>
</tr>
<tr>
<td>Colorado</td>
<td>124,128</td>
<td>10.1</td>
<td>5.1</td>
<td>2.1</td>
</tr>
<tr>
<td>Nevada</td>
<td>115,339</td>
<td>17.4</td>
<td>4.8</td>
<td>1.9</td>
</tr>
<tr>
<td>New Mexico</td>
<td>52,891</td>
<td>10.2</td>
<td>2.2</td>
<td>0.9</td>
</tr>
<tr>
<td>Texas</td>
<td>996,493</td>
<td>14.5</td>
<td>41.1</td>
<td>16.8</td>
</tr>
<tr>
<td>Utah</td>
<td>94,691</td>
<td>10.9</td>
<td>3.9</td>
<td>1.6</td>
</tr>
</tbody>
</table>

*Non institutionalized civilian population less than age 18 only.
Source: American Community Survey, 2010 1-Year Estimates

Table 10 and Figure 3 shows data on another factor often associated with more positive outcomes for children; their likelihood of having health insurance. These data show greater levels of disadvantage for minority children in the Southwest. More than 1 in 9 children (11.5 percent) lacked health insurance with every state in the region having a higher percentage of children without health insurance than the Nation as a whole. Equally startling is the fact that although the region had 28.4 percent of all the children in the Nation, the region contained 41 percent of all the uninsured children in the Nation. In Nevada more than one-in-six, in Texas more than one-in-seven and in Arizona more than one-in-eight had no health insurance. Such data point to the socioeconomic disadvantages faced by many children in the Southwest.
The data in the demographic section of this report indicated that the children of the Southwest are disproportionately from minority racial and ethnic groups. The data in this section show that they are also disproportionately disadvantaged in terms of the poverty levels and health insurance coverage. It is evident then that the unfortunate outcomes associated with such characteristics (as delineated in the literature discussed above) are also likely to disproportionately impact the children of the Southwest.

**Conclusions**

In 2008, the Census Bureau projected that racial and ethnic minorities, everyone but non-Hispanic single-race Whites, will become the majority of the total population by 2042 (United States Census Bureau 2008a). What the Census Bureau did not report was that today’s diverse young people, whose growth resulted from increased immigration, high fertility and (in the Southwest) from interregional patterns of internal migration, are also increasingly poorer and less well-educated than past generations.

Our research has documented that the rapid increase of Hispanic and other minority youth, accounted for nearly all growth in the population under the age of 18 in the United States since 2000, because there was an absolute decline in the number of non-Hispanic White children. Data from the 2010 Census show that the number of minority children increased by nearly 6.2 million from 2000 to 2010 with the percentage of minority children increasing from 39.0 percent of all children in 2000 to 46.5 percent of all children in the United States by 2010.
The data shown above also show that the children of the southwestern United States are also poorer with higher levels of poverty, lower incomes and lower rates of health insurance coverage than children in the United States as a whole. They are particularly disadvantaged and likely to be negatively impacted by the type of impacts delineated in the literature review.

What is also evident is that the children of today will not be successful without substantial assistance from an older population that now and in the future is likely to possess superior socioeconomic resources. However, Samuel Preston (1984) argued, nearly three decades ago, argued that the United States’ declining fertility rates, increasing longevity and consequent aging of the United States’ population had effectively shifted the resources and wealth of the Nation from its youth to the elderly. We find that for some areas of the United States this shift is already evident, as we find that the social (as demonstrated by educational attainment) and economic (as demonstrated by income and poverty levels) realities experienced by minority children and youths have deteriorated with each subsequent generation while that of the majority elderly have improved.

The major question raised by such statistics is: Will the United States’ adult population (through elections, taxes and other factors) support the youth who are racially and culturally different from themselves and their children or will they perpetuate a dual class education and economic structure which has dominated many areas in the United States, including many areas in the Southwest? The concerns by Preston nearly three decades ago were that, “Americans have never had any strong sense of collective responsibility for other people’s children, only private responsibility for their own (1984:448).” This effect has been exacerbated over
the past three decades for youths who are minority, disproportionately poor and live in spatially separate communities. This concern is verified by findings from Poterba (1997) and others who have found that in communities with large proportions of elderly residents there was significantly lower per-child educational spending, especially when the children were of a different race from that of their elders. The future of areas such as the Southwest, and of the Nation as a whole, may be markedly affected by the extent to which its older populations are willing to step forward to support its increasingly diverse youth.

What is clearly evident is that the future of the Southwest and the United States as a whole in increasingly tied to the future of its minority populations. They are currently disproportionately poor with poorer levels of health and educational levels which promise to make them less competitive as adults both nationally and internationally. Whether the nation prospers or struggles to maintains its current standard of living and whether it can compete internationally will depend on how well the diverse children such as those in the Southwest do. Ultimately, how well these children do will be how well America will do.
References


Braveman, Paula. 2009. “A health disparities perspective on obesity research.” Preventing Chronic Disease: Public Health Research, Policy, and Practice. 6(3).


United States Center for Disease Control. 2009. America’s Children in Brief: Key National Indicators of Well-Being. Atlanta, Ga.: United States Center for Disease Control
