

# EXECUTIVE SUMMARY

## Together For Children Comprehensive Community Plan 2008-2014



***Together***, we are building a county and a community where each person takes the time to support, mentor, lead and listen to children, youth and families. We are working *together*, to build a community where every child and family reaches full potential through active involvement of all members of our Washington County community.

Washington County is a microcosm of the changing world economy: at the forefront of the technological revolution, it houses an array of cutting edge companies, from small biotech start-ups to Intel's largest world campus. This prosperous economic environment has seen parallel human development.

Historically, Washington County has been a quiet suburban and rural, highly agricultural community, yet the County's population has more than tripled since 1970 (from 157,920 in 1970 to 514,296 in 2006). The county population has grown by over 15% since 2000. Diversity is growing even more rapidly than the population as a whole. Latinos now comprise the largest minority in the county, representing 14.5% of the total population, with an

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estimated 74,372 residents. This reflects more than a five fold increase since 1990 (518%) when there were an estimated 14,210 Latinos in the county. Similarly there has been significant growth in the Asian and Pacific Islander populations, growing from 12,891 in 1990 to 44,009 in 2006, an increase of just over 341% since 1990.

Children under age 18 comprise 26.9% of the county's population in 2006 (134,862), and accounted for more than 15% of the state's 0-17 population. At the current rate of growth, the county's youth population will be the largest in the state by 2014 if not sooner.

The county enjoys a state and national profile for its success in creating a positive economic environment for high tech companies.



Per capita income and education levels are among the highest in the state. However, another increasingly visible community also shapes the county. As the population has continued to grow, and the county has become increasingly urban, much of the recent economic growth has been in the service sector, with low-wage

jobs. This segment of the population does not share in the wealth generated by the tech economy; in fact, the poverty rate in Washington County is growing at a faster rate than other large counties, up by 34% since 2000 and more than 50% since 1990. The county profiles the national trend toward divergent incomes; we are a county increasingly defined as “haves” and “have nots”.

The population expansion accompanying the economic boom over the past several decades has had a profound and almost hidden impact on human services. As the county has developed, local government has had to focus on infrastructure development, assuring roads, transportation and regulations surrounding land use and development. But, with population growth, comes increased human needs that have not generally been accompanied by increased re-

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sources committed to social services. In fact, with the economic downturn in the first part of this decade, resources for social services have declined, while population growth has continued unabated.



The result is that the county is losing ground. The data validates declining trends in many outcomes for children and families in Washington County. While indicators of social well being for the county's children and families still generally compare favorably with other counties across the state, the trends give us reason for concern.

The Comprehensive Community Plan for Children and Families documents the work of more than 250 individuals and organizations who gathered in small and large groups over the past year and a half to develop the plan. Washington County Commission on Children and Families worked to assure that the planning process was broad-based and inclusive.

The Strategies Committee, convened by the Commission on Children and Families to guide the planning process, was composed of representatives from major partner agencies and constituencies. People from diverse sectors of the community shared their perspectives about the status of children, youth and families, their needs and issues, existing services and delivery systems, what strategies could be effective in a variety of settings and communities to address concerns, and how to strengthen our capacity as citizens, schools, and community organizations to support the positive development of all our children and families.

We talked with a range of organizations such as Optimist clubs and community booster clubs, culturally specific community coalitions, as well as service planning and prevention coalitions.

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The following five questions were posed with every community group that the Strategies Committee members met with, an 18 month effort, to learn about communities and gain multiple perspectives and insights about our children and families, their needs and issues and our capacities to support them:

- How has the community changed in recent years?
- What are the major issues/ concerns facing children and families?
- What are some strategies that could help resolve these concerns?
- What has been going well, what are your community's strengths?
- Who is working on these issues in your community?



The Strategies Committee has worked to create a plan that reflects the diversity of the unique geographic communities of Washington County, and through this community-driven approach identify the countywide concerns and areas of focus. The Strategies Committee reviewed the results of the community discussions to identify themes and trends in the issues facing children and families. They compiled strategies that could help resolve concerns, and strengths and successes in communities. Data related to the changing face of Washington County, high level outcomes and benchmarks, and key social indicators were also reviewed by the Strategies Committee.

The primary issues and concerns that emerged for children and families include:

## ***Access to Health Care***

- Increasing number of children, youth and families who are uninsured or under-insured who have very limited access to health, mental health and substance abuse prevention and

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treatment services

- Increasing ethnic and cultural diversity in the uninsured and under-insured populations who need culturally and linguistically appropriate and specialized services

## ***Parenting and Family Support***

- Increasing numbers of economically insecure families who struggle to get their basic needs met, including: food, shelter, housing, child care, health care, employment and training, etc.
- Growing numbers of parents needing education, training and family support services, including: family communications and problem solving; cross-cultural and cross-generational issues; supporting their children's success in school and community; family coaching and family mentoring; and culturally and linguistically specific parenting and family support services.
- Concern about child safety. Increasing numbers of children and youth who need foster care, shelter care, respite care and other supports to maintain, strengthen and build connections with family related to child and/or parental involvement in child welfare, justice, mental health, substance abuse and other systems.



## ***Early Childhood***

- Lack of quality, availability and affordable child care options for parents seeking specific types of care, including: infant/toddler, special needs care, non-traditional hours, culturally/linguistically specific care, after school care, etc.
- A significant percentage of entering kindergartners lack the requisite early literacy skills needed for school success, particularly in high need lower income communities.
- Lack of mental health supports for young children and their families and caregivers, including specialized early childhood

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focused prevention, early intervention, consultation, and treatment services.

- Growing numbers of lower income families with young children who lack access to specialized early childhood programs and services, including individualized child development, parenting and family support services for at risk families using home visitation and other home-based models.

## ***Youth Development***

- Increasing numbers of school age youngsters, particularly upper elementary and middle school aged youth, who lack adequate supervision and activities to participate in during after school hours and school breaks.
- Growing numbers of secondary students who struggle to be successful in traditional school environments; need for expanded options and alternatives.
- Growing numbers of youth engaging in risky behaviors, including: substance use/abuse, delinquency, violence, early sexual behavior, truancy and poor school performance, etc.
- Growing runaway and homeless youth population.



## ***Access to Services***

- Lack of awareness of the services and resources available to support children, youth and families among schools, service providers and residents, as well as ways for individuals and organizations to become involved.
- Limited public transportation options. Reduces access to services and community supports for lower income and rural children, youth and families.

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## ***Professional Development for Child and Family Service Providers***

- Lack of service providers and treatment services with trained staff and specialized capacity to work with diverse needs and populations: cultural competency, differing child rearing and health practices among diverse cultural/ethnic communities, youth with dual-diagnosis or co-occurring disorders, attachment disorders, effects of trauma, brain development, evidence based practices and program models, etc.
- Lack of child care providers, home visitors, parent educators and other early childhood program staff with specific training and/or professional degrees in early childhood development, childhood care and education, and other related fields.

Based on the review of the trends and issues, which emerged from community discussions and related social indicator data, the Strategies Committee identified four key focus areas:

- *Expand access to and availability of health care, mental health and substance abuse treatment.*
- *Enhance and build parenting and family support systems*
- *Enhance and strengthen supports for youth to be successful in school and productively engaged during non-school hours*
- *Expand efforts to improve school readiness*

A Community Forum was held in the fall of 2007 to identify long term outcomes, intermediate outcomes and key strategies in the four focus areas for county-wide work. At the forum there was a review of benchmark and social indicator data relevant to each of the four areas, related concerns and issues that emerged from the community discussions, a review of the existing services and supports in the county, along with a brief strategy



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analysis. The Strategies Committee received consistent feedback throughout the planning process that this new plan should build on the existing Comprehensive Community Plan and continue to build our infrastructure of service and support systems, and increase our capacity to broadly engage all sectors in the community to improve conditions for our children and families. Forum participants identified two areas of strategic focus for immediate action and impact analysis:

## ***STRATEGIC FOCUS I: Increasing community awareness of and involvement in addressing issues facing children and families***

This issue emerged in each of the four focus areas, and has three elements identified for work:

- 1) Increasing service provider awareness of services and resources available for children and families, and increasing access to services
- 2) Increasing resident and consumer awareness of services and resources available for children and families, and increasing access to services.
- 3) Increasing community awareness of the needs and issues facing children and families, increasing awareness of services and resources available, and increasing awareness of what individuals and organizations can do to help.



### ***Findings***

One of the seven goals underlying the Comprehensive Community Plan for Children and Families states that individuals and public and private organizations in the county are responsible for and actively engaged in recognizing and building strengths of our children, youth and families.

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- In every community group we met with, a lack of awareness of services and resources among residents as well as service providers was identified as a need.
- In each of the four focus areas identified through the planning process, and discussed at the fall Community Forum, a priority area emerged from each focus area related to increasing awareness of service providers and residents of services available, as well as increasing awareness of how individuals and organizations can become involved.
- Oregonians volunteer at a higher rate than their peers nationally in every age group. Among young people ages 16 – 24, 26.2% volunteered an average of 30 hours in 2006, compared to 23.4% nationally. Among baby boomers, 36.5% volunteered an average of 56 hours, compared to 32.2% nationally.
- Hands On Portland, following an extensive community planning process undertaken in the mid-2000's opened a branch office in Washington County to provide volunteer recruitment and matching services to community agencies and residents.
- I Give Where I Live, an initiative to promote philanthropic giving to organizations serving Washington County residents, was initiated in the late 2000's.

Strategies to be undertaken to address the issues include, but are not limited to:

- Sponsor issue specific cross-system forums to discuss needs facing children and families, and discussion of resources and services to address needs
- Develop a press campaign to inform community of specific



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issues, resources and services, and ways to become involved

- Conduct a multi-media marketing campaign for families, including under-served populations, about services and resources to address specific issues, and how to access them
- Produce a series of DVDs for families about critical service delivery systems (e.g. schools, DHS) and other services and resources

### ***Benchmark addressed:***

Increase volunteerism, measured by the percent of Oregonians over age 16 who volunteer time to civic, community or non-profit activities in the last 12 months.

### ***Intermediate outcomes:***

Increase the number of people who contribute financial resources to Washington County agencies, measured by the number of people and the amount of money contributed to Washington County agencies through the I Give Where I Live initiative.

Increase the number of people who volunteer in Washington County agencies and projects, measured by the number of people and the number of hours volunteered at Washington County agencies through the Hands On Portland volunteer system.



Increase utilization of services and programs that are under-utilized, using utilization data from major program areas such as Mental Health, Substance Abuse, Health, Commission on Children and Families.

The Commission on Children and Families will expand part-

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nerships with Vision Action Network, Hands on Portland, I Give Where I Live, and other community organizations and service providers to initiate the strategies identified, and track our progress.



## ***STRATEGIC FOCUS II: Expand access to health care***

This issue has two areas of focus:

- 1) Increasing enrollment of eligible children and families in the Oregon Health Plan
- 2) Increasing access to and availability of health care: primary health care and mental health and substance abuse prevention and treatment services

### ***Findings***

In every community group, participants identified a lack of access to and availability of health care (including mental health and substance abuse) as a major concern.

- Almost 15% of Washington County residents and 11% of our children are uninsured.
- Almost 50% of youth surveyed in the Oregon Healthy Teens Survey report they have not seen a doctor in the past year.
- The teen pregnancy rate in 2005 rose higher than the rate for the state for the first time in well over a decade.
- The number of low birth weight babies has increased, and the number of women getting adequate prenatal care has begun to decline in recent years.



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Strategies to be undertaken to address the issues identified include but are not limited to:

*Outreach and provision of application materials to children and families through:*

- *Schools:* school nurses, counselors and child development specialists, family resource centers, school based community resource staff, etc.
- *Home visitation programs* such as New Parent Network/Healthy Start, Babies First, HIPPIY, Head Start, Promotora Programs, etc.
- *School-based health resources*



*Outreach to and education of faith community leaders about Oregon Health Plan and eligibility processes, and engagement of their assistance in outreach to families*

*Continue cross-system collaborative initiatives:*

- to establish school-based and school-linked health centers for students with access methods for students from all seven school districts.
- to develop structures and protocols for school based and school linked mental health services.

***Benchmarks addressed:***

Decreasing teen pregnancy rate, as measured by the pregnancy rate per 1000 females age fifteen to seventeen

Increasing the childhood immunization rate, as measured by the % of two year olds who are adequately immunized

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Increasing the healthy birth weight rate, as measured by the % of babies born at a healthy birth weight

Increasing the percent of children who are insured, as measured by the % of children insured reported by the Oregon Office of Health Policy

***Intermediate outcomes:***

Increasing the number and percent of Washington County children who are enrolled in the Oregon Health Plan

Increasing the percent of Washington County youth who report, on the Oregon Healthy Teen Survey, that they have visited a health care professional in the past year



Washington County has several strong collaborative initiatives initiated in the past year that will provide leadership to efforts to improve access to health care.

The School Based Health Center Initiative, the School Mental Health Integration project, and Project Access all have extensive involvement from the public and private sectors to increase availability and access to health care services.

Each of the other focus areas had emergent strategic priorities that require additional discussion to identify specific strategies to be undertaken and develop appropriate intermediate outcomes to target.

- *School Readiness* had two emergent strategic focus areas: Expanding access to and developing strategies to address early childhood mental health supports, and expanding early literacy supports for parents and other caregivers.

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- *Parenting and Family Support* also had two emergent strategic focus areas: Strengthening families – assuring family safety; and strengthening communities – assuring basic needs are met.
- The *Positive Youth Development* focus area had one key strategic focus which emerged: Development and implementation of a community schools approach, to include incorporating supports for children of incarcerated parents and gang prevention activities as part of the approach.

Those who attended the community forum as well as other community partners will be invited to re-convene early in 2008 to finalize action plans in all priority areas that include benchmarks to be addressed, intermediate outcomes and a measurement plan, and key strategies to be implemented to achieve outcomes.

The comprehensive community planning process has been broad-based and inclusive, building on the successes and initiatives undertaken through the previous planning cycle. There is significant interest in and commitment to supporting communities in identifying and implementing strategies to improve conditions at the community level, as well as in continuing to expand and strengthen our partnerships at the county level.

