



CITY OF IRVINE

Strategic Plan for Children, Youth and Families

2008-2013

Prepared by
Gibson & Associates

City of Irvine

Strategic Plan for Children, Youth and Families 2008-2013



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I. EXECUTIVE SUMMARY

In September 2007 the City Council approved the development of a Strategic Plan for Children, Youth and Families to address priority programmatic goals identified in the Indicators Report.² The City sought to create a plan that reflected authentic community input, was responsive to the assets and needs of the City of Irvine and prioritized the effective allocation of resources. The resulting plan would allow the City to allocate funding in a more effective and coordinated way to meet the needs of children, youth and families in Irvine.

Between October 2007 and February 2008, the City implemented a community planning process, which involved five task forces, an advisory committee and participation of over 100 community members and stakeholders. The outcome of this process was the creation of a Strategic Plan for Children, Youth and Families, providing the City of Irvine with a vision, a set of strategies to address six priority areas of focus, and an implementation plan for 2008-2013.

The plan presented here outlines strategies for the following priority areas:

- ▶ Pre-kindergarten Child Care & School Readiness
- ▶ Health & Fitness
- ▶ Underage Drinking
- ▶ Support to Families in Need
- ▶ Children's Mental Health
- ▶ Voluntarism & Community Service

Early in the planning process a vision was developed and agreed upon by task force and advisory committee members to inform planning.



VISION

The City of Irvine strives to create a safe community where children, youth and families thrive emotionally, physically, academically and socially. Recognizing the important role that parents, families and community members play in the lives and development of young people, we strive to support policies and practices that strengthen families. The City is committed to strategies that are effective, build upon existing resources and promote the values of voluntarism and community service. The City believes in an asset-driven approach, one that builds upon community strengths and seeks to prevent rather than repair problems. In pursuing this vision, the City of Irvine will appeal to its residents as a livable and family-friendly community.

² The purpose of the Indicators Report was to develop a baseline of the overall well-being of children, youth and families in Irvine, to be used to measure future growth and progress.

GOALS

To achieve its vision, the City of Irvine strives to achieve the following goals for children, youth and families:

1. To reduce or eliminate poverty and the harmful effects of near-poverty status among families in Irvine
2. To enhance and expand community service by adults and youth in Irvine through both youth-oriented and intergenerational programs
3. To reduce underage drinking in Irvine
4. To expand early care and educational opportunities for the parents and children with the lowest levels of access to high quality child care programs
5. To improve health outcomes and fitness among children and youth in Irvine, including using the opportunities provided by the Great Park for healthy activities by children and families
6. To improve the health and well-being of children in Irvine through the early identification of mental health and behavior problems and by developing the capacity of parents, schools and child care programs to address those needs.

STRATEGIES

Through the community planning process, 14 strategies were developed to address the six priority goal areas outlined above. The strategy development process aimed to incorporate the vision and values of the City of Irvine. It was important that the voices of community stakeholders and youth, as well as the City's many assets and resources be recognized as key building blocks for proposed strategies. Task force and advisory committee members, who did the bulk of strategy development not only incorporated research and best practices but also sought to allocate resources effectively. The shifting fiscal climate resulted in a prioritization of strategies that utilized existing resources or were low-cost. The strategies are listed by priority area.

1. Child Care Capacity Expansion (*Child Care & School Readiness*)

The goal of this strategy is to expand the supply of high quality, affordable child care in Irvine. The strategy proposes that a team work with developers, the City, school district, university, faith community and any other potential partners in developing new high quality, affordable child care programs. Staff will have knowledge of child care regulations, city planning and policy development and potential funding streams, in addition to best practices in early childhood education.

2. Child Care Quality Enhancement (*Child Care & School Readiness*)

The goal of this strategy is to improve the quality of existing early care providers, at both centers and family day care programs, in addition to increasing the number of slots operated by NAEYC accredited

programs in Irvine. This strategy proposes funding to assign a staff or contract agent to the responsibility of developing professional development and on-site training programs for existing early child care providers. The team is responsible for delivering professional development at centers and family day cares to improve the quality of care. Staff will provide technical assistance in applying for NAEYC accreditation. This strategy includes funds for stipends and incentives to family day care and child care operators for participating in trainings and making facility improvements. With the goal of promoting school readiness among those who are least prepared when they enter kindergarten, the work group will explore opportunities to integrate parent education and early childhood/kindergarten readiness assessments throughout the child care system.

3. Health & Fitness Funder Engagement *(Health & Fitness)*

The goal of this strategy is to increase the level of coordination and engagement of key funders in Irvine who are concerned with the health and fitness of young people. Utilizing existing funds, community services staff will work with Irvine funders invested in health and fitness to adopt a uniform policy to fund programs and initiatives in Irvine that explicitly aim to improve the health and fitness of young people in Irvine. The strategy also aims to engage the business community and health care sector in making financial commitments to programs and initiatives that support the health of young people. The Public Health Ombudsman currently being recruited by the City of Irvine will be responsible for developing partnerships, drafting policy and promoting financial investment from community stakeholders.

4. Youth Wellness Advocacy *(Health & Fitness)*

The goal of the youth wellness advocacy strategy is to build support for environments that support healthy food choices and activity levels for communities throughout Irvine. Through advocacy efforts that support community norm change and the adoption of policies that promote the health and fitness of young people, the strategy aims to create long-term systems change in schools and the community. The strategy includes re-assignment of an existing coordinator position that will be responsible for several areas of focus, including forming and staffing the Youth Wellness Committee, a youth-led advocacy program, collaborating with the School Wellness Committees and Nutrition Services staff at Irvine Unified School District to promote healthy food offerings, identifying and promoting policies that strengthen healthy food offerings in the community and collaborating with key decision makers and institutional partners to promote healthy food offerings.

5. Physical Activity Policy & Program Development *(Health & Fitness)*

The purpose of the Physical Activity Policy & Program Development strategy is to expand the offerings and quality of physical education and fitness programs in the City of Irvine and other youth serving institutions, such as Irvine Unified School District (IUSD) and Tustin Unified School District (TUSD). The initiative focuses on developing and expanding partnership programs with key institutional partners and proposes funding for a coordinator position to be housed within the City or Irvine Unified School District. Additional partnership development will rely on existing funds. The coordinator will work with the objective of enhancing the physical education program within IUSD and develop partnerships to increase the offerings of fitness activities to young people in Irvine.

6. Standards for Public Facility Use (*Health & Fitness*)

The goal of the Standards for Public Facility Use strategy is to create consistent policies, practices and messaging between the City and its partners that utilize its facilities, particularly in regards to the provision of healthy and nutritious food at events. Using existing resources, the City will partner with the Irvine Sports Committee and Irvine Aquatics Advisory Board to define standards that link use of public facilities to the fulfillment health focused criteria. City staff will develop guidelines for healthy snacks for all sports leagues and contractors that provide community sports leagues (i.e. AYSO FB, Swimming, and snack bars), consistent with city and school policies.

7. Irvine Prevention Coalition (*Underage Drinking*)

The goal of this strategy is to reduce risky behavior among young people through the activities of the Prevention Coalition. The Irvine Prevention Coalition (IPC) serves as the vehicle for communication, collaboration, and action in Irvine. With over 60 member agencies, the partnership has created an environment where service providers work together to meet the needs of the community. This organization will continue to work together to coordinate services to reduce substance abuse, violence and related problems among Irvine's youth. In addition to sustaining current programming, this strategy would also incorporate the development of a sustainability plan to address the termination of the grant in 2009. A subcommittee would also be responsible for exploring the creation of a social hosting ordinance in Irvine. A separate subcommittee will oversee the Social Norms Marketing Campaign and develop strategic partnerships to enhance its implementation.

8. Youth Development Activities (*Underage Drinking*)

This strategy is designed to prevent risky behavior by building on youth assets and strengths and includes funding for existing youth development activities, including the Youth Action Teams and Youth Leadership Academy. The youth development organizations work collaboratively with community based organizations and institutions to foster healthy youth development, provide safe social-recreational activities and prevent youth substance use and abuse, while simultaneously teaching youth to become leaders in their communities. Student leaders emerge from these programs and encourage peer participation in healthy, productive activities and model exemplary behavior, teaching others by example to make wise decisions about things like alcohol and drug use. This strategy will include a part-time Youth Action Team Coordinator to begin in year 2 and support the Youth Leadership Academy.

9. Accountability and Enforcement (*Underage Drinking*)

The purpose of this strategy is to develop a set of consequences and a protocol for dealing with youth who are caught drinking or under the influence of alcohol. Currently there are few consequences for young people, as parents and school officials are not informed about the risky behavior young people are engaging in. It is believed that with a set of consequences attached to this behavior (e.g. citation, community service, and meeting with school counselor), youth will be further deterred from drinking. Additionally, this strategy will provide for a log/record of youth offenders who have received multiple citations for drinking and allow school and law enforcement authorities to identify youth who may be experiencing a problem with alcohol and make a referral to the appropriate intervention resource. This strategy proposes funding for enforcement in 2009-2010 with efforts in 2008-09 committed to investigating the extent of the problem and identifying alternative solutions.

10. Community Education & Outreach Campaign (*Support to Families in Need*)

The purpose of this strategy is to build collaborative efforts to increase access to health and wellness resources and services for Irvine children, youth and families. This strategy will continue to support and enhance existing community coalitions to increase access to, information sharing and utilization of community resources and services by children and families.

11. Comprehensive School-Linked Support (*Children's Mental Health & Underage Drinking*)

The goal of this strategy is to increase identification of and support for children and youth experiencing mental health issues. The strategy includes provision of a range of school or Family Resource Center-based individual, group and peer counseling and support services targeting youth with behavioral or developmental problems. Among those programs that would be funded:

- ▶ Project Success--middle and high school small group and short-term individual counseling and information, referral and case management
- ▶ Guidance Assistance Program provides paraprofessional counseling and support at all 22 elementary schools
- ▶ Family Resource Center, which provides a range of support to families. Funding would support case management for 100 families and parent education for 90 families.

12. Infant-Toddler Support Services (*Children's Mental Health*)

The goal of the Infant-Toddler Support Services strategy is to reduce the impact of social, emotional, behavioral and developmental conditions in infants and toddlers that are identified through the Visiting Nurse Program or other programs working with families and child care programs. Infant-Toddler Support Services would include the provision of mental health and parent training support for families, particularly focusing on pre-school age children. Infant-Toddler Support Services would fund a City staff person to develop a partnership with First Five, IUSD, School Readiness Project, and the Mental Health Department to provide mental health and parent training support to eligible families. This strategy may use internal and external funds for program operation beyond year one.

13. Community Service and Voluntarism Program (*Voluntarism*)

The goal of this program is to promote community service as a meaningful approach to community engagement, youth development and learning for Irvine's residents of all ages. Existing resources will be utilized to recruit, screen, train and place potential volunteers to efforts in each of the initiatives.

II. BACKGROUND

In September 2007 the City Council approved the development of a Strategic Plan for Children, Youth and Families to address priority programmatic goals identified in an Indicators Report developed by Children and Family Futures. The Indicators Report was developed through a review of public data sources, as well as surveys and focus groups with community members. The purpose of the Indicators Report was to develop a baseline of the overall well-being of children, youth and families in Irvine, to be used to measure future growth and progress. Five priority areas were identified in the 2007 Indicators Report to be addressed through a strategic plan. They included:

- ▶ Pre-kindergarten child care and school readiness
- ▶ Health and fitness among children and youth
- ▶ Underage drinking
- ▶ Voluntarism and community service by youth and adults
- ▶ Support to families in need³

Based on the findings from the Indicators Report, staff developed a 2007-2008 Base Year Implementation Plan, which outlines specific actions to address each priority area. The next step was to develop a five-year Strategic Plan for Children, Youth and Families to guide funding and program development in the City of Irvine, which would outline key strategies, an implementation plan and a budget. The City sought to create a plan that reflected authentic community input, was responsive to the assets and needs of the City of Irvine and prioritized the effective allocation of resources. The resulting plan would allow the City to allocate funding in a more effective and coordinated way to meet the needs of children, youth and families in Irvine. Gibson & Associates, a research and evaluation firm was retained to develop the five-year plan for the 2008-2013 period. In collaboration with the Community Services Department at the City of Irvine and community stakeholders representing a wide-range of community and government partners, Gibson & Associates implemented a participatory planning process between October 2007 and February 2008. The plan is designed to serve as a guide in program and policy development from 2008-2013. It includes:

- ▶ Vision, values & goals
- ▶ Strategies and outcomes for the five year period for each priority area: Child Care & School Readiness, Health & Fitness, Underage Drinking, Support to Families in Need, Children's Mental Health,⁴ and Voluntarism
- ▶ Implementation plan, including a governance structure and funding plan

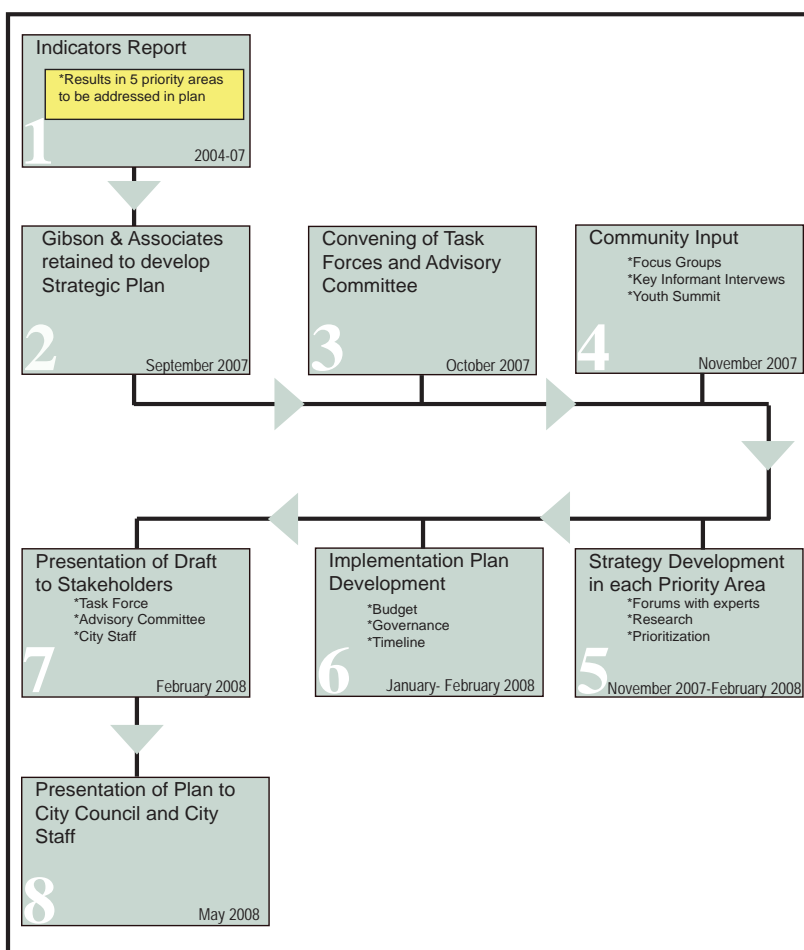
³ During the early weeks of the planning process, City leadership met with members of the community and determined that a sixth program area should be added to address the mental health needs of children and youth. As a result, a sixth program area, Children's Mental Health, was added. In addition, City leadership determined that the best way to focus the community's volunteer resources would be to not consider voluntarism as a separate activity, but rather to consider how volunteers could be utilized in all the plan strategies.

⁴ Voluntarism was a strategy that was incorporated throughout the other priority areas.

III. PLANNING PROCESS

This section includes an overview of the planning process that took place between October 2007 and February 2008. Gibson & Associates worked with City staff and community stakeholders to develop a strategic plan that reflects authentic community input, as well as the priorities of the City of Irvine. The vision and values, research into best and promising practices and a participatory and asset driven approach were all used to inform the process. The chart below outlines the key steps used to create the plan:

Timeline of Planning Activities



Gibson & Associates worked with the stakeholder groups, as well as City of Irvine staff to create the vision, values, goals and strategies for each priority area, in addition to an implementation plan and accompanying budget. The steps in developing the strategic plan are described in more detail below.

CONVENING OF TASK FORCES AND ADVISORY COMMITTEE

Task forces were created to develop strategies for each goal area, with the exception of voluntarism, which was woven into all other task forces. An advisory committee was created to provide guidance of the development of the plan. Community Services Staff from the City of Irvine staffed both the task forces and advisory committee. City staff selected task force and advisory committee members, who represented community-based organizations, local experts on the goal areas, and other government and institutional partners, such as the City of Irvine Police Department, Orange County United Way and the local school districts (IUSD/TUSD). Additional members were identified during the community input process and joined the process at different times.⁵ An informational meeting was held in October to review the planning process and the role of the task forces and advisory committee in the planning process.

Task forces met in the following priority areas:

- ▶ Child Care & School Readiness
- ▶ Health & Fitness
- ▶ Underage Drinking
- ▶ Support to Families in Need
- ▶ Children's Mental Health



The Children's Mental Health Task Force was added in November 2007 in response to stakeholder input and identified need. Voluntarism was addressed through each of the other five areas. Task forces met five times between October 2007 and February 2008 to identify and prioritize strategies for each of their respective areas.

The advisory committee, which was comprised of City staff and community stakeholders, provided guidance and input around planning activities. The advisory committee met four times throughout the planning period and was responsible for reviewing research, community input, strategies prioritized by the task forces and governance and implementation plans. The advisory committee further prioritized the strategies identified by task force members in each priority area.

COMMUNITY INPUT

In order to ensure a participatory process that reflected the voices of community members who do not traditionally participate in local planning processes, as well as those of youth and families served by the plan, a variety of forums were created to garner their perspectives. These forums included:

- ▶ *Key Informant Interviews:* Key informant interviews were conducted with community leaders and stakeholders to gather local expertise on each of the priority areas, as well as to help identify potential strategic partnerships.
- ▶ *Focus Groups:* The focus groups were held in the community with ethnic, cultural and socioeconomic groups that may not have been previously engaged in planning efforts.
- ▶ *Youth Summit:* Youth had the opportunity to provide authentic input into the

⁵ See Appendix A for a complete list of advisory committee and task force members.

strategies, assets and ideas around each of the priority areas. The summit targeted youth of diverse ethnic and socioeconomic backgrounds.

Gibson & Associates contacted agencies, community-based organizations and community stakeholders to elicit their participation in the above forums and facilitated all activities and summarized results. Through these forums, 90 Irvine residents and young people had the opportunity to share their perspectives and provide input into the plan. The results of the community input were shared with the task forces and advisory committee and used to inform the development of strategies. For a full report of findings, please view Appendix B.

Key Informant Interviews

Key informant interviews allowed community leaders to share their perspectives about needs within their community in each of the priority areas. Gibson & Associates conducted seven key informant interviews with representatives from cultural, religious and linguistic minority groups and organizations. Key informant interviews were conducted with the following schools and organizations:

1. The City of Irvine’s Child Care Committee
2. Irvine Global Village Planning Committee
3. Korean Parents Association
4. Merage Jewish Community Center of Orange County
5. Network of Iranian-Americans of Orange County
6. New Horizon (Islamic) Elementary School
7. South Coast Chinese Cultural Center

Focus Groups

Focus groups were designed to gain input from community members about their needs in relation to each goal area. Focus groups were conducted with ethnic and cultural groups not traditionally represented in planning processes, as well as with youth. Gibson & Associates conducted five focus groups. Below is a list of completed focus groups:

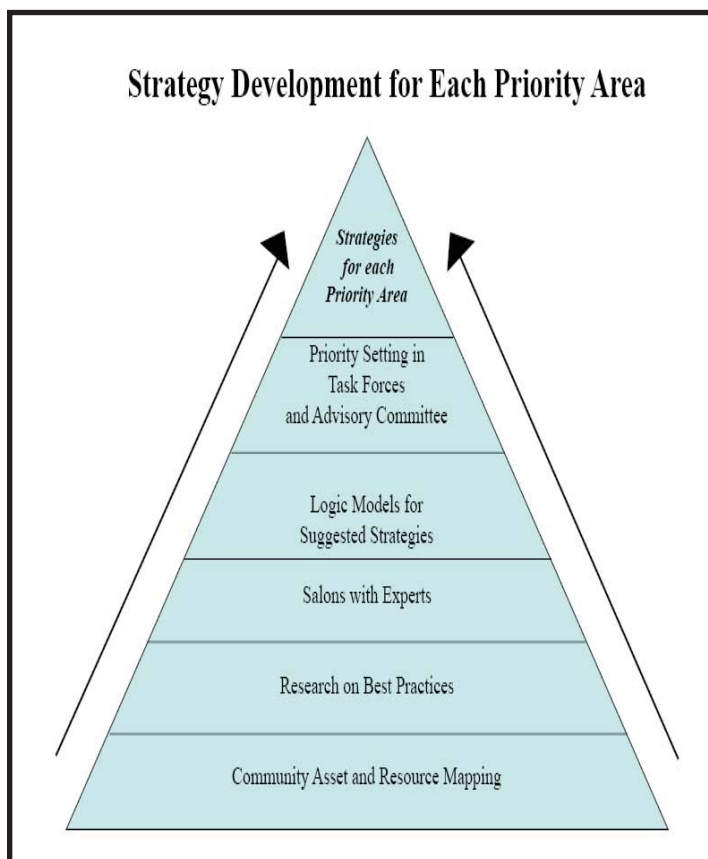
Collaborating Group	Number of Participants	Targeted Group
Chinese Cultural Center	8	Chinese Community
Creekside High School	12	High School Students
Jamboree Housing	15	Residents of Affordable Housing Complex
Korean Parents Association	10	Korean Community
Network of Iranian-Americans of Orange County (NIPOC)	7	Persian Community
Total	50	

Teen Youth Summit

The Teen Youth Summit was held on November 28, 2007 at the City of Irvine's Civic Center and was 1.5 hours in length. The purpose of the Teen Youth Summit was to elicit teen involvement and input about the plan's priority areas, specifically in regards to Health and Fitness and Underage Drinking priority areas. Participants were comprised of 31 high school students from five Irvine public schools, including Irvine High School, Northwood High School, San Joaquin High School, University High School and Woodbridge High School. The Teen Summit was organized by the City of Irvine's Community Services Department and was facilitated by Gibson & Associates.

STRATEGY DEVELOPMENT

The consultant team facilitated a multi-step process to develop a set of strategies that responds to each of the priority areas, addresses the relevant indicators for each priority area, and aligns with the vision and values of the City of Irvine. The work of strategy development took place primarily in the task force meetings. Advisory committee members reviewed and responded to the priorities identified by the task forces, but did not participate in the crafting of the strategies. The chart below outlines the process by which strategies were developed:



Brainstorm of Community Assets, Resources and Potential Strategies

Task force members met in each priority area to brainstorm community assets, discuss existing resources, and examine potential strategies. During this meeting, task force members reviewed the Indicators report that informed each priority area, discussed existing resources and assets and began the identification of priority strategies. In each task force, a set of focus areas emerged at this point.

Review of Relevant Research

Each task force identified several high priority strategies for consideration and the consultant team conducted best practice research on each strategy. Research summaries were drafted for each task force, summarizing model programs and approaches in other communities. Task force members reviewed relevant research,

discussed potential approaches and developed a set of more specific strategies out of these conversations.

Forums with Experts in Each Priority Area

Experts from each of the priority areas (Health & Fitness, Support to Families in Need, Child Care & School Readiness and Underage Drinking) gathered to share their expertise and research-based approaches in each priority area. The experts participated in a panel discussion, followed by consultation with individual task forces. The table below outlines the experts who participated in these conversations⁶:

Expert	Affiliation & Expertise	Task Force
Manal Aboelata, MPH	Prevention Institute Expert on community health planning and policy development	Health & Fitness
Caroline Nelson, MBA	Revolution Foods Expert on alternative lunch programs and shifting nutrition in the schools	Health & Fitness
Michael Sparks	Center for Community Action & Training Expert on Social Hosting Ordinances	Underage Drinking
Bonnie Benard	WestEd Expert on Prevention & Youth Development	Underage Drinking
Jim Kooler	Friday Night Live Expert of Prevention & Youth Development	Underage Drinking
Kristen Anderson	Child Care Coordinator, Redwood City Child Care Development and Quality	Child Care & School Readiness
Anne Broussard	Child Care Coordinator, Orange County	Support to Families in Need

Prioritization of Strategies

The consultant team created logic models for each strategy identified by the task force, outlining key elements, staffing, budget, outcomes, performance measures and connection to Irvine vision, values and principles. Due to a tightening fiscal climate, strategies that utilized existing resources were prioritized more highly. Task forces ranked their preferences and selected between three and five strategies to submit to the advisory committee for review. The advisory committee reviewed all strategies, ranked them in order of preference and assigned a budget to the most highly ranked strategies. The City Council and City staff also identified an additional strategy to include child health insurance.

Creation of a Final Set of Strategies

The consultant team drafted an initial plan, outlining key strategies ranked by both the task forces and the advisory committee. Strategies were reviewed by the advisory committee, task forces and City staff; modifications included opportunities to merge strategies with similar activities. Consultants drafted a final plan with the revised set of strategies.

⁶ The Children's Mental Health Task Force was developed after the meeting with experts and, as a result, did not participate in the salon with experts.

DEVELOPMENT OF IMPLEMENTATION PLAN

The implementation plan was developed by Gibson & Associates staff in consultation with Community Services Division staff from the City of Irvine. The plan includes an implementation plan, governance structure, funding plan and budget. The implementation plan was presented to the advisory committee and task forces for feedback in February and revised to address key issues raised at that meeting.

DRAFT OF PLAN TO KEY STAKEHOLDERS

A draft of the strategic plan, outlining prioritized strategies, the implementation plan and budget was presented in February for feedback and input from the advisory committee and task forces. Community Services Division staff also reviewed the plan and provided input around the feasibility of strategies and implementation. Revisions were incorporated into the final plan.

PRESENTATION OF PLAN TO CITY STAFF AND CITY COUNCIL

The plan will be presented to City Council and City of Irvine staff in May 2008.

IV. VISION, VALUE AND GOALS



vision was developed during the planning process to guide the development and implementation of the plan. The values and goals were developed during the development of the Indicators and used to inform planning.

IV.A. VISION

The City of Irvine strives to create a safe community where children, youth and families thrive emotionally, physically, academically and socially. Recognizing the important role that parents, families, and community members play in the lives and development of young people, we strive to support policies and practices that strengthen families. The City is committed to strategies that are effective, build upon existing resources and promote the values of voluntarism and community service. The City believes in an asset-driven approach, one that builds upon community strengths and seeks to prevent rather than repair problems. In pursuing this vision, the City of Irvine will appeal to its residents as a livable and family-friendly community.

IV.B. VALUES

Five broad values informed the development of indicators, the identification of priority goal areas and the strategic planning process:

1. **Family appeal:** Irvine should continue to make the City a place that attracts children and families based on a wide array of quality services, education and community health, in a safe and diverse setting.
2. **Parents' roles:** Programs and policies of the City, and supported by the City, should seek to mobilize and support parents in their vital roles as their children's first teachers, coaches and moral guides.
3. **Participation as a goal that mobilizes greater resources:** Programs and policies of the City, and supported by the City, should seek wider participation in community service and civic life by all residents and organizations, especially youth themselves as future leaders. Feedback from a broad array of diverse youth should be sought as a community asset. Broad participation from all segments of the private and voluntary sector should be sought: business, religious, ethnic, cultural, sports/recreational, educational, neighborhood associations and family services providers.
4. **Targeting:** Children, youth, and families with special needs due to income, disabilities or other status should be provided support by those public, private and voluntary programs that can help them move toward greater self-sufficiency.

5. **Effectiveness:** Irvine should continue to invest public and private resources to determine whether its investments in the futures of its children and youth are effective in achieving the goals these programs seek. In doing so, Irvine should measure progress against local needs rather than relying solely on comparisons with other communities.



IV.C. GOALS

To achieve its vision, the City of Irvine strives to achieve the following goals for children, youth and families:

1. To reduce or eliminate poverty and the harmful effects of near-poverty status among families in Irvine
2. To enhance and expand community service by adults and youth in Irvine through both youth-oriented and intergenerational programs
3. To reduce underage drinking in Irvine
4. To expand early care and educational opportunities for the parents and children with the lowest levels of access to high quality child care programs
5. To improve health outcomes and fitness among children and youth in Irvine, including using the opportunities provided by the Great Park for healthy activities by children and families
6. To improve the health and well-being of children in Irvine through the early identification of mental health and behavior problems and by developing the capacity of parents, schools and child care programs to address those needs.

V. STRATEGIES

This section outlines the strategies developed for each priority area, through the steps outlined above. The strategy development process aimed to incorporate the vision and values of the City of Irvine. It was important that the voices of community stakeholders and youth, as well as the City's many assets and resources, be recognized as key building blocks for proposed strategies. Task force and advisory committee members, who did the bulk of strategy development not only incorporated research and best practices but also sought to allocate resources effectively. The shifting fiscal climate resulted in a prioritization of strategies that utilized existing resources or were low-cost. In the first section the strategies are outlined by priority area, followed by a comprehensive list of selected strategies in the second section.

V.A. Strategies by Priority Area

This section includes an overview of the rationale behind each priority area, the strategy development process and the strategies selected for inclusion in the plan by each priority area. This section is organized as follows:

- ▶ Child Care & School Readiness
- ▶ Health & Fitness
- ▶ Underage Drinking
- ▶ Support to Families in Need
- ▶ Children's Mental Health
- ▶ Voluntarism & Community Service

V.A.1 STRATEGIES TO ENHANCE CHILD CARE & SCHOOL READINESS

The purpose of the Child Care & School Readiness Task Force was to develop a set of strategies to enhance early care and educational opportunities for parents and children with low levels of access to high quality care. Child Care & School Readiness was identified as a priority area in the 2007 Indicators Report, which found that despite the wide array of child care options in Irvine, families still experience significant barriers in accessing high quality and affordable child care. In the report, Sid Gardner and his colleagues reported the following data in identifying Child Care & School readiness as a priority area in the Indicators Report⁷:

“Of the licensed centers, 23 of the 38 are NAEYC-accredited programs.⁸ The 38 licensed centers have a total capacity of 4,580, which is up from 3,772 spaces in 2004. Despite this array of programs and centers, respondents to the phone survey indicated that a significant number of parents (43% of those seeking child care) had encountered some difficulty in finding programs for their children. The barriers mentioned included:

⁷ Gardner et.al “2007 Indicators Report: City of Irvine.”

⁸ The National Association of Education of Younger Children is the best-known accrediting program for child care centers; its standards require facilities and training of staff that only a minority of programs can meet. Its listing of accredited centers in Irvine is at http://www.naeyc.org/academy/web_ready/search/distance.asp This number includes after-school care; there are only 17 accredited centers for preschool-aged children.

- ▶ availability/waiting lists [38%],
- ▶ cost [33%],
- ▶ quality [13%], and
- ▶ hours of care [12%]

The City's November 2006 child care study found that 29 of the 38 preschool-aged centers had waiting lists. When all of these numbers are taken into account, it would appear that there remains a significant child care gap that is in the range of 700-800 slots.⁹

While the City has also commissioned a Child Care Study to further explore the policy and program options available to enhance child care quality and affordability, it was also included as a priority to be addressed in the strategic plan.

Strategy Development: Child Care & School Readiness

The task force used the process outlined in the Planning Process/Strategy Development Section above to create a set of prioritized strategies. As a first step, they reviewed the data and rationale outlined in the 2007 Indicators Report and discussed existing community assets, resources and potential strategies for improving access to school readiness and child care resources among those families with lowest levels of access.

Out of the initial brainstorm, the task force chose to focus on strategies to expand the quality and quantity of affordable child care in Irvine, through site and program development initiatives and an exploration of quality improvement efforts in other communities.



At the second meeting, the task force had the opportunity to meet with Kristin Anderson, Child Care Coordinator in Redwood City, CA and expert on child care development and expansion in mixed income communities. The task force grappled with financing strategies, local policies and specific barriers in the City of Irvine. The task force also reviewed relevant research on model programs in other communities, focusing on practices, policies and approaches in broad three areas, including:

1. Expanding Affordable Child Care
2. Improving Child Care Quality
3. Increasing School Readiness

Out of these two meetings, a set of four initial strategies to consider for inclusion in the plan emerged. Gibson & Associates staff developed logic models for each of the proposed strategies, outlining proposed program or policy, outcomes, impact on indicators, performance measures, staffing needs and associated costs. Task force members reviewed and discussed the list of strategies under consideration and began

⁹ If the total of children 0-5 is estimated at 11,881, and the resident survey's percentage of parents seeking child care of 46% is applied to this number, it can be estimated that 6,416 of these children are cared for in their own homes, with parents of an additional 5,465 children seeking a match with the 5,932 slots in licensed care outside their homes (the total of all centers' and licensed homes' potential capacity [448+904+4580]). If we subtract from this the 27% of center spaces that are taken by non-Irvine residents, the "gap" appears to be in the range of 700-800 slots. These figures should be modified based on the tendency of providers to keep their actual enrollments below their capacity

to identify high priority strategies. In a process facilitated by the consultant team, task forces spent the fourth meeting prioritizing proposed strategies, weighing the following criteria:

- ▶ Perceived impact on indicators and/or other positive impacts
- ▶ Cost effectiveness/use of existing resources
- ▶ Connection with City of Irvine’s vision and values
- ▶ Use of volunteers

The Child Care & School Readiness task force members ranked strategies requiring additional funds and selected those using existing resources separately. They developed a set of strategies to advance to the advisory committee for inclusion in the plan, including the following four strategies:

Child Care Capacity Expansion: A city staffed effort, the strategy proposes that a team work with developers, the City, school district, university, faith community and any other potential partners in developing new high quality, affordable child care programs.

Child Care Quality Enhancement: This strategy proposes to fund a staff member or contractual agent to expand professional development and on-site training programs for existing early child care providers, with the goal of improving the quality of existing programs.

Family Day Care Site-Based Training: The program would provide ongoing support to family day care operators based upon model in operation in Rochester, New York. Staff will visit family day care sites on a weekly basis, bringing learning materials, books and supplies and providing 1-1 support to help the operator implement age-appropriate literacy and child development activities.

Parent Education in Child Development and Child Literacy: Funding, which will support expansion/enhancement of the current School Readiness Program, delivers parent education in relation to literacy, child development and parenting.

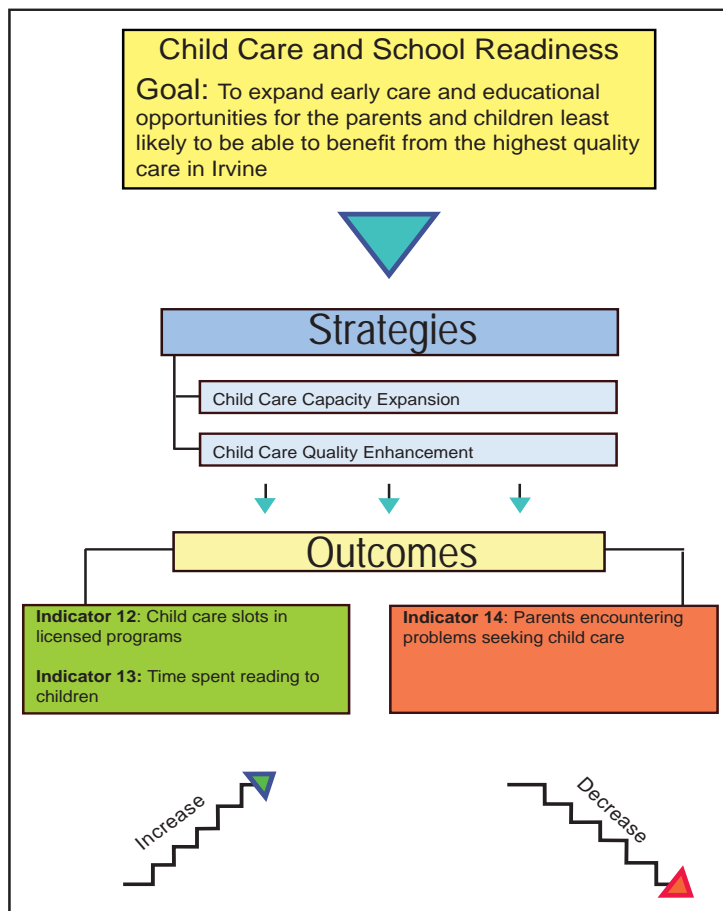
Child Care & School Readiness: Selected Strategies

Due to fiscal constraints, a limited number of strategies were selected by the advisory committee for inclusion in this plan.¹⁰ The advisory committee ranked strategies by preference, weighing cost effectiveness, impact on indicators and connection with the vision and values of the City of Irvine. Advisory committee members also allocated funding to selected strategies, seeking to maintain a balance across priority areas. Task force members had the opportunity to review selected strategies and make revisions and modifications to the scope and budget. The two strategies selected for inclusion in the plan to address the Child Care & School Readiness priority area were Child Care Capacity Expansion and Child Care Quality Enhancement. The logic model below outlines the relationship between the goal, selected strategies, and indicators related to the Child Care & School Readiness priority area; it is followed by detailed descriptions of each strategy.

¹⁰ Should fiscal constraints ease during the five-year period, the strategies recommended by the task forces, but not recommended for inclusion in this plan will be examined by the City as potential fundable initiatives.

CHILD CARE CAPACITY EXPANSION

The goal of this strategy is to expand the supply of high quality, affordable child care in Irvine. A city staffed effort, the strategy proposes that a team work with developers, the City, school district, university, faith community and any other potential partners in developing new high quality, affordable child care programs. Staff will have knowledge of child care regulations, city planning and policy development and potential funding streams, in addition to best practices in early childhood education. The team will provide technical assistance to family day care providers interested in moving from an 8-slot to a 14-slot program. The team will explore the development of a plan and partnership to facilitate a Model Early Child Care Program Lab, which may serve as a learning lab for existing and future child care staff.



Rationale

The Child Care Capacity Expansion strategy aims to increase the supply of high quality, affordable child care options available to Irvine residents, particularly residents with limited income. The increase of new quality child care options would likely increase the number of kindergarteners who enter school with the necessary pre-literacy skills, while also responding to an important community-identified need.

Outcomes

The increase in quality child care would result in long-term improvement in most of the child health and child development indicators. The project would have an immediate and focused impact upon the number of licensed child care slots available in the community. This strategy would result in reduced waiting lists for child care slots and an increased number of new child care programs opening in the community.

On an annual basis, the outcomes will be measured by:

- Number of new child care facilities
- Number of new slots at existing facilities
- Number of low to moderate income families accessing child care slots
- Number of new partnerships developed

Use of Volunteers

Volunteers could be trained to do minor improvements in family day care centers to help achieve approval of expansion plans. Volunteers could complete a variety of site improvement activities for new child care facilities, e.g. play structure construction, painting, landscaping, etc. Staff will work with the voluntarism and community service staff to identify potential opportunities to engage volunteers.

CHILD CARE QUALITY ENHANCEMENT

The goal of this strategy is to improve the quality of existing early care programs, at both centers and family day care, in addition to increasing the number of slots operated by NAEYC accredited programs in Irvine. A city staffed effort, this strategy proposes funding a staff or contract agent to expand professional development and on-site training programs for existing early child care providers. The team is responsible for delivering professional development at centers and family day cares to improve the quality of care and integrates many of the elements of the Family Day Care Site Training strategy originally ranked by the task force. Staff will provide technical assistance in applying for NAEYC accreditation. This strategy includes funds for stipends and incentives to family day care and child care operators for participating in trainings and making facility improvements. With the goal of promoting school readiness among those who are least prepared when they enter kindergarten, the team will explore opportunities to integrate parent education and early childhood/kindergarten readiness assessments throughout the child care system.



Rationale

This strategy strengthens the family-friendly environment of Irvine by improving the quality of child care programs in Irvine. It also recognizes the central role parents play in early childhood development by looking to integrate parent education and training into child care services.

Outcomes

By improving the quality of child care in Irvine, this strategy should result in an increase in the quality of existing family day care and early child care center programs and expanded parent education provided through child care programs. The quality improvement efforts should also create linkages with city and county resources, facilitating the assessment and referral of children for developmental disabilities and delays and other concerns.

On an annual basis, outcomes will be measured by:

- ▶ Number of site assessments
- ▶ Number of programs seeking and achieving NAYEC accreditation
- ▶ Number of program-sponsored adult education programs
- ▶ Parent satisfaction

Use of Volunteers

The team will also work with the community service and voluntarism coordinating organization to identify opportunities to use volunteers and to develop a system for recruiting, training and placing community volunteers in existing child care programs.

VA.2 STRATEGIES TO IMPROVE HEALTH & FITNESS AMONG CHILDREN & YOUTH

The purpose of the Health & Fitness Task Force was to develop a set of strategies to improve health outcomes and fitness among children and youth in Irvine. Improving the health and fitness among children and youth in Irvine was identified as a priority area in the 2007 Indicators Report. While the authors noted that considerable resources and strides had been made in addressing the health and fitness needs of young people, the recent data indicated that room for growth remains. Sid Gardner and his colleagues reported the following data related to the health and fitness of young people in Irvine¹¹:

“Meeting six of six fitness standards was achieved by only 42.3% of 5th graders, 55.6% of 7th graders, and 53.5% of 9th graders. In body composition, 17.4% of 5th graders, 13.8% of 7th graders, and 12.8% of 9th graders were unable to meet standards.¹² In assessing students’ leisure time activities, parents estimated that their school-aged children spent an average of 2 hours and 45 minutes a day playing video games, watching TV, on the Internet other than for homework, and talking on the phone. Parents estimated their children were physically active an average of 83 minutes a day and involved in sports 58 minutes a day. Time on the Internet was estimated as an average of 35 minutes a day; parents in households without an Internet connection still estimated that their teenagers spent 25 minutes a day on the Internet for non-homework purposes. Average time estimated on homework was 106 minutes a day.

First, a concern with poor nutrition in general was expressed—roughly one third of adolescents do not eat breakfast, for example.¹³ Second, a concern about obesity was expressed, with data on body mass indices suggesting that this begins at an early age, well before adolescence for some children.¹⁴”

While on the Healthy Kids Survey, Irvine performs well relative to other communities, research also shows that children who are physically active and have healthy diets achieve better social and academic outcomes. The need for policies and programs that enhance the health and fitness of young people is still evident in the findings outlined above.

Strategy Development: Health & Fitness

The task force used the process outlined in the Planning Process/Strategy Development Section above to create a set of prioritized strategies. As a first step, they reviewed the data and rationale outlined in the 2007 Indicators Report and discussed existing community assets, resources and potential strategies for improving the health and fitness of young people in Irvine. Most task force members concurred that the data outlined above was probably worse than reported. Out of the initial brainstorm, the task force chose to focus on strategies to improve nutrition within the schools, strategies to enhance the physical education programs within the schools, and policy change and partnership development strategies at a local level. At the second meeting, the Health & Fitness task force met with Manal



11 Gardner et. al. “2007 Indicators Report: City of Irvine.”

12 All data is from 2005 IUSD Healthy Kids survey.

13 79%, 70%, 68%—percentage of 7th, 9th, and 11th graders who “had breakfast this morning.”

14 In 2006, IUSD staff screened a total of 292 children at the Early Learning Center. Of these children, 33 were overweight and 40 were “At Risk of Overweight,” meaning that of the children tested, 25% were classified in one of those two categories

Aboelata of the Prevention Institute and Caroline Nelson of Revolution Foods to discuss policy changes that promote health and fitness at a local level and opportunities to improve nutrition in the public education system. The task force grappled with the role of the City in recommending changes to other institutions, financing healthy school lunches and policies and practices to create accessible services and programs. Task force members interested in developing strategies focused on physical activity requested the opportunity to hear from experts in physical education. At a subsequent meeting, Dr. Dan Cooper, a pediatric exercise researcher from the University of California at Irvine, as well as Scott Bowman and Monica Colunga, principals and Physical Education Coordinators from Irvine Unified School District, discussed current efforts to reshape physical education and potential strategies to build on existing reforms.

Subsequently, the task force reviewed relevant research on model programs in other communities, focusing on practices, policies and approaches in three broad areas, including:

1. Improving Nutrition in the Schools
2. Expanding Physical Education in the Schools
3. Policies and Practices to Enhance Health & Fitness at the Local Level

Out of these two meetings, a set of initial strategies to consider for inclusion in the plan emerged. Strategies fell into the above three categories, with 21 strategies initially identified. The list was narrowed to 11 strategies by eliminating those that were deemed unfeasible and combining related strategies. Gibson & Associates staff developed logic models for each of the proposed strategies, outlining proposed program or policy, outcomes, impact on indicators, performance measures, staffing needs and associated costs. Task force members reviewed and discussed the list of strategies under consideration and began to identify high priority strategies to advance. In a process facilitated by the consultant team, task



forces spent the fourth meeting prioritizing proposed strategies, weighing the following criteria:

- ▶ Perceived impact on indicators and/or other positive impacts
- ▶ Cost effectiveness/use of existing resources
- ▶ Connection with City of Irvine’s vision and values
- ▶ Use of volunteers

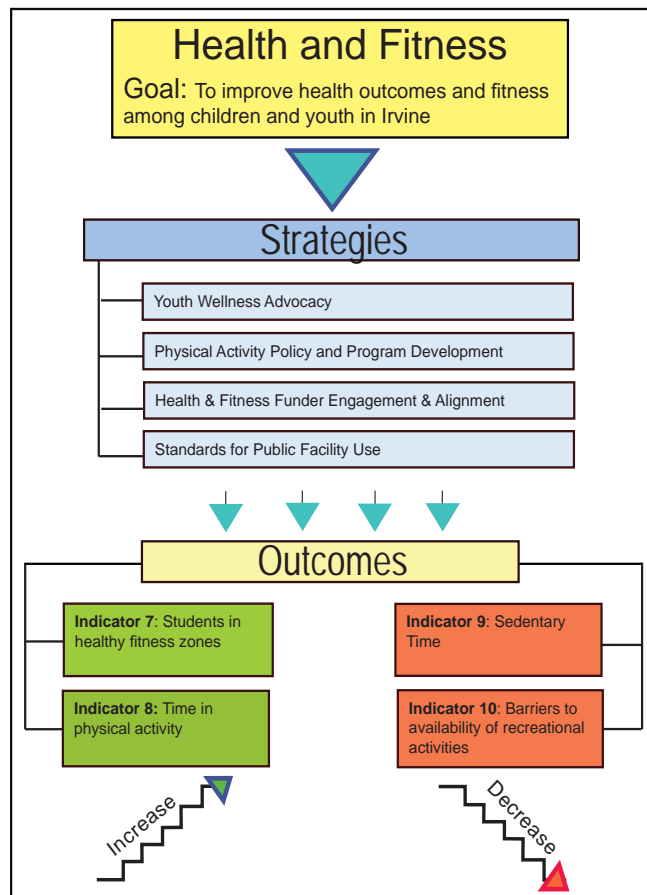
The Health & Fitness task force members ranked strategies requiring additional funds and those using existing resources separately. They developed a set of strategies to submit to the advisory committee for inclusion in the plan, advancing two strategies that required additional funds and two strategies that utilized existing resources. They included Youth Wellness Advocacy, Physical Activity Policy & Program Development, Health & Fitness Funder Engagement & Alignment, and Standards for Public facility use.

HEALTH & FITNESS: SELECTED STRATEGIES

Due to fiscal constraints, a limited number of strategies were selected by advisory committee for inclusion in this plan.¹⁵ The advisory committee ranked strategies by preference, weighing cost effectiveness, impact on indicators and connection with the vision and values of the City of Irvine. Advisory committee members also allocated funding to selected strategies, seeking to maintain a balance across priority areas. Task force members had the opportunity to review selected strategies and make revisions and modifications to the scope and budget. All proposed strategies were selected for the Health & Fitness Priority Area. The logic model below outlines the relationship between the goal, selected strategies, and indicators related to this priority area; it is followed by detailed descriptions of each strategy.

YOUTH WELLNESS ADVOCACY

The goal of the youth wellness advocacy strategy is to build support for environments that support healthy food choices and activity levels among children and youth. Through advocacy efforts that support community norm change and the adoption of policies that promote the health and fitness of young people, the strategy aims to create long-term system's change in schools and the community. The strategy includes a coordinator position that will be responsible for several areas of focus, including forming and staffing the Youth Wellness Committee, a youth-led advocacy program, collaborating with the School Wellness Committees and Nutrition Services staff at local school districts to promote healthy food offerings, identifying and promoting policies that strengthen healthy food offerings in the community and collaborating with key decision makers and institutional partners to promote healthy food offerings. This will include the exploration or conducting a walkability assessment to identify barriers that limit integration of physical activity into daily routines. It will also include the identification of 1-2 schools in Irvine and their surrounding communities to target in creating healthy food zones around the schools and communities (most likely high schools with open campuses).



The Youth Wellness Committee, a youth led team, aims to engage and empower young people as advocates for healthy communities, in addition to the promoting service learning. Students will receive training on advocacy techniques, policy change and decision-making bodies in the City of Irvine. Through a mini-

¹⁵ Should fiscal constraints ease during the five-year period, the strategies recommended by the task forces, but not recommended for inclusion in this plan will be examined by the City as potential fundable initiatives.

grant program, students will engage in one or more of the following activities:

- ▶ Building support for healthy food offerings in the schools by creating parental and student advocacy efforts that influence decision makers within the district and on the school board
- ▶ Strengthening the implementation of policies that support healthy nutrition in the schools through collaborations and support of the school wellness policy
- ▶ Social marketing and media literacy campaigns to increase young people's awareness of the fast food industry and to improve their selection of healthy food choices
- ▶ Influencing decision-making bodies in Irvine (i.e. school board, city council, PTA) and other groups through advocacy for policies and practices that support the healthy communities

The City may contract with a community-based organization with experience working with youth volunteers to administer the program or may choose to administer the program internally.



Rationale

The Youth Wellness Advocacy strategy focuses on improving collaboration among school, local government and local businesses to create healthy food environments in Irvine. By promoting healthy food environments through advocacy and policy change, as well as incorporating principles of youth development and prevention, this strategy effectively integrates the vision and values of the City of Irvine. By creating healthy food environments, this strategy would create neighborhoods that are livable and family friendly.

Outcomes

By changing community food environments, this strategy should impact the overall health of young people in Irvine. Over the long term, this indicator should have an impact on the following indicators:

- ▶ Indicator 7: Students in Healthy Fitness Zone (increase)
- ▶ Indicator 8: Time Spent in Physical Activity (increase)
- ▶ Indicator 9: Sedentary Time (decrease)
- ▶ Indicator 10: Barriers to Availability of Recreational Activities (decrease)

Because this strategy incorporates youth led components, building on the principles of youth development, ownership and resilience, this strategy will also be preventive against substance abuse and other risky behavior. While the indicators do not measure prevention, there would likely be a decrease in the Risky Behavior Indicators, including indicators 19-28.

On an annual basis, the effectiveness will be measured by the following:

- ▶ Number of young people engaged in the Youth Wellness Committee
- ▶ Number of changes adopted as a result of initiative activities

- ▶ Number of meetings and presentations with collaborative partners and decision-making bodies
- ▶ Number and amount of mini-grants distributed

Use of Volunteers

The youth wellness committee will be a youth led, volunteer-based program. Parents, family members, teachers and local business owners will also be engaged as advocates.

PHYSICAL ACTIVITY POLICY & PROGRAM DEVELOPMENT

The purpose of the Physical Activity Policy & Program Development strategy is to expand the offerings and quality of physical education and fitness programs in the City of Irvine and other youth serving institutions, such as Irvine Unified School District (IUSD). The initiative focuses on developing and expanding partnership programs with key institutional partners and provides funding for a coordinator position to be housed within the City or Irvine Unified School District.



Additional partnership development will rely on existing funds. The coordinator will work with the objective of enhancing the physical education program within IUSD and develop partnerships to increase the offerings of fitness activities to young people in Irvine. Potential partnerships include:

1. Developing a Community Services Division and Concordia College partnership to expand the delivery of the Lunch Time Activities Program at Irvine Unified School District campuses
2. Partnering with Irvine based healthcare agencies to enable physicians to encourage at-risk patient enrollment in Irvine Community Services Department-sponsored physical fitness activities
3. Partnering with Irvine Prevention Coalition, and Junior Youth Action Team organizations to conduct an annual Youth Health Expo
4. Partnering with Jamboree Housing Corporation and City of Irvine Housing Division to enable the delivery of onsite physical activity programs at apartment complexes for youth who may be unable to participate in traditional activity due to transportation and economic barriers
5. Partnering with Orange County in Motion (OCiM) to deliver programs and services in Irvine that impact the physical condition of youth
6. Partnering with Child Resources Center and IUSD Early Childhood Learning Center to develop, promote, distribute pre-school curricula for leading/teaching physical activities
7. Partnering with the with Irvine Ranch Conservancy to coordinate regularly scheduled hikes Open Space areas in Irvine, while utilizing youth and adult volunteers to lead hikes

The task force grappled with the potential organizational barriers in recommending a strategy to be implemented by another institution and agreed that the City and IUSD should work collaboratively to identify the best placement of this position.

Rationale

This strategy focuses on building the capacity of institutions that serve young people in Irvine. These strategies will improve the quality and level of physical activity programs available to young people. By building partnership with natural organizational and institutional partners such as IUSD and the Prevention Coalition, the City of Irvine will offer additional physical activity programs to better serve young people who have not accessed existing programs.



Outcomes

By building capacity of the PE department and instructors across the district and expanding the number of physical fitness programs available in the community through partnership development, the following indicators will be influenced over the long run:

- ▶ Indicator 7: Students in the Healthy Fitness Zone (should increase)
- ▶ Indicator 8: Time Spent in Physical Activity (should increase)
- ▶ Indicator 9: Sedentary Time (should decrease).

Additional outcomes include:

- ▶ Improved preparation among PE instructors and elementary educators providing PE.
- ▶ Improved physical activity levels during PE.
- ▶ Improved student perception of PE.

On an annual basis, program success will be measured by the following:

- ▶ Number of new partnerships performed
- ▶ Number of teachers accessing physical education curriculum & training in IUSD
- ▶ Number of young people participating in physical fitness activities in the schools and in the community.

Use of Volunteers

Volunteers will be used in partnership programs.

HEALTH & FITNESS FUNDER ENGAGEMENT

The goal of this strategy is to increase the level of coordination and engagement of key funders in Irvine who are concerned with the health & fitness of young people. The strategy also aims to increase the number of business community and health care sector partners who make financial commitments to programs and initiatives that support the health of young people. Utilizing existing funds, Community Services staff will work with Irvine funders to collaboratively develop and adopt a uniform funding policy

that prioritizes proposals that aim to improve the health and fitness of young people in Irvine. The Public Health Ombudsman will be responsible for developing partnerships, drafting policy and promoting financial investment from community stakeholders.

Rationale

This strategy uses existing resources and aims to leverage the City's investment in the health of young people in Irvine by obtaining greater investment and alignment from other community stakeholders. By aligning resources and investment strategies, the City will fund programs that improve the health of young people in Irvine over the long term.



Outcomes

This strategy is a policy change and aims to improve the level of coordination of among health and fitness funders and stakeholders in Irvine. In the short term, this strategy will have little impact on the indicators. However, it aims to develop funding practices among diverse stakeholders that are strategic, coordinated and designed to positively impact the health of young people over the long term. By directing funding to those initiatives with evidence of positive health outcomes, the strategy will improve the health of young people over time, resulting in the following outcomes:

- Increased investment by local businesses.
- Leveraging of resources
- Increased availability of physical activity and nutrition-focused programs and initiatives
- Improved collaboration

On an annual basis, the strategy will be measured by:

- Number of new financial commitments generated
- Number of new partnerships generated
- Development of policy identifying priorities
- Number of co-funded efforts and initiatives.

Use of Volunteers

Volunteers are not included in this strategy.

STANDARDS FOR PUBLIC FACILITY USE

The goal of the Standards for Public Facility Use strategy is to create consistent policies, practices and messaging between the City and its partners that utilize its facilities, particularly in regards to the provision of healthy and nutritious food at events. Using existing resources, the City will partner with the Irvine Sports Committee and Irvine Aquatics Advisory Board to define standards that link use of public facilities to the fulfillment of health-focused criteria. City staff will develop guidelines for healthy snacks for all sports leagues and contractors that provide community sports leagues (i.e. AYSO, Swimming, and snack bars), consistent with city and school policies.

Rationale

This strategy leverages existing resources, implements a policy change that will improve the quality of food available on city grounds and integrates health and fitness outcomes into standard City operations. By implementing such standards and creating uniformity with other public agencies, this strategy will improve collaboration and consistency of messaging across agencies.

Outcomes

Over the long term, this strategy should impact the following:

- ▶ Indicator 7: Students in Healthy Fitness Zone (increase)
- ▶ Indicator 8: Time Spent in Physical Activity (increase)
- ▶ Indicator 9: Sedentary Time (decrease)
- ▶ Increased awareness of healthy food choices
- ▶ Increased awareness of benefits of vigorous physical activity

On an annual basis, the progress will be measured through the following:

- ▶ Engagement of major public agencies and users of public facilities in Irvine
- ▶ Development of standards for use of public facilities
- ▶ Timeline for implementation
- ▶ Plan for program monitoring and reports of monitoring.

Use of Volunteers

Volunteers may be used to monitor implementation of standards.

VA.3 STRATEGIES TO REDUCE UNDERAGE DRINKING

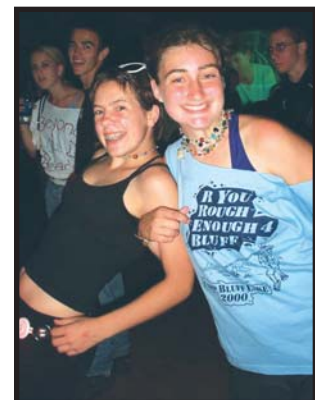
The purpose of the Underage Drinking Task Force was to develop a set of strategies to reduce underage drinking in Irvine. The problem of underage drinking in Irvine was identified in the 2007 Indicators Report and confirmed in the Teen Youth Summit and focus group conducted by Gibson & Associates. While data suggests that Irvine is ahead of communities with similar demographics, underage drinking remains a concern to parents, young people and community stakeholders. Irvine is home to a wide range of prevention and youth development programs that aim to build on youth assets and limit substance use and abuse. The City, local school districts and community-based partners have delivered numerous programs and initiatives to reduce underage drinking. Despite these efforts, the data suggests that young people in Irvine continue to consume alcohol at high rates. Sid Gardner and his colleagues reported the following in the 2007 Indicators Report:

“From 1600-1800 Irvine youth break the law regularly by using alcohol, based on the data from the 2005 Healthy Kids survey;¹⁶ 24% of 11th graders used alcohol in the past 30 days; From 700-800 high school students were involved in binge drinking more than five drinks at a time) within the past 30 days; From 700-800 high school students (9%) used alcohol while attending high school at some point; In a January 2007 survey, 75% of Irvine parents of adolescents agree with the statement “it is easy for teenagers to get alcohol or drugs if they want them.” Studies in other communities in California, based on the statewide Healthy Kids surveys, have indicated that students in affluent communities are more likely to abuse alcohol and other drugs than students from lower-income communities.”¹⁷

Consistent with Gardner’s report, findings from the Teen Youth Summit and focus group suggest that alcohol and drug use among adolescents is high in Irvine. Students expressed a perceived lack of available social and recreational activities, as well as social norms among young people and their parents that sanction alcohol use. Participants concurred that there is little consequence to being caught, which contributes to the problem of underage drinking.

Strategy Development: Underage Drinking

The task force used the process outlined in the Planning Process/Strategy Development Section above to create a set of prioritized strategies. As a first step, they reviewed the data and rationale outlined in the 2007 Indicators Report and discussed existing community assets, resources and potential strategies for reducing underage drinking in Irvine. The task force was comprised of many representatives from the Irvine Prevention Coalition and seemed to have a clear sense about the strategies they wanted to explore from the outset. Some noted that data outlined above may be worse than reported and also identified the challenge with measuring the effectiveness of prevention. After the first meeting, the task force was particularly interested in exploring the design and implementation of a social hosting ordinance.



¹⁶ The 2005 Healthy Kids survey had sampling issues regarding ethnicity, and drinking patterns are significantly different among different ethnic groups, so these figures are presented as a range, but it would appear that the higher side of the range is a more accurate figure.

¹⁷ “...disposable income, disconnected families, and pressure to succeed all contribute to drug use among upscale youth...parents in these communities add to the problem by denying that it occurs.” “Study Finds Rich Kids More likely to Use Drugs than Poor.” www.jointogether.org February 20, 2007.

City of Irvine
Strategic Plan for Children, Youth and Families

At the second meeting, the Underage Drinking Task Force met with Michael Sparks of Community Action & Training Coalition, Bonnie Benard of WestEd, and Jim Kooler of Friday Night Live to discuss social hosting ordinances and prevention strategies. The task force noted that while Irvine has made significant progress in implementing prevention and youth development activities, it was still important for those strategies to be considered for inclusion in the plan. Task force members were able to discuss the development and enforcement of social hosting ordinances and whether such a policy was suited to Irvine.

Subsequently, the task force reviewed relevant research on model programs in other communities, focusing on model programs, policies and strategies in three areas, including:

1. Existing Prevention Programs
2. Youth Development Activities
3. Accountability and Enforcement.

Out of these two meetings, a set of initial strategies to consider for inclusion in the plan emerged. Strategies fell into the above three categories, with seven strategies initially identified- 3 fell into the category of Accountability & Enforcement and the remainder fell into Youth Development and Prevention Activities. Gibson & Associates staff developed logic models for each of the proposed strategies, outlining proposed program or policy, outcomes, impact on indicators, performance measures, staffing needs and associated costs. Task force members reviewed and discussed the list of strategies under consideration and began to identify high priority strategies to advance. In a process facilitated by the consultant team, task forces spent the fourth meeting prioritizing proposed strategies, weighing the following criteria:

- ▶ Perceived impact on indicators and/or other positive impacts
- ▶ Cost effectiveness/use of existing resources
- ▶ Connection with City of Irvine's vision and values
- ▶ Use of volunteers.

The Underage Drinking Task Force ranked strategies requiring additional funds and those using existing resources separately. They developed a set of strategies to submit to the advisory committee for inclusion in the plan, advancing six strategies all together. They included:

Comprehensive School-Linked Supports: A strategy that emphasizes early intervention and support through counseling to youth and their families. Provides funding to maintain counselors at high schools and other resources provided through the Family Resource Center.

Irvine Prevention Coalition: The goal of this strategy is to reduce risky behavior among young people through the activities of the Prevention Coalition. The strategy includes funding for a social-norms marketing campaign and sustains existing programming.

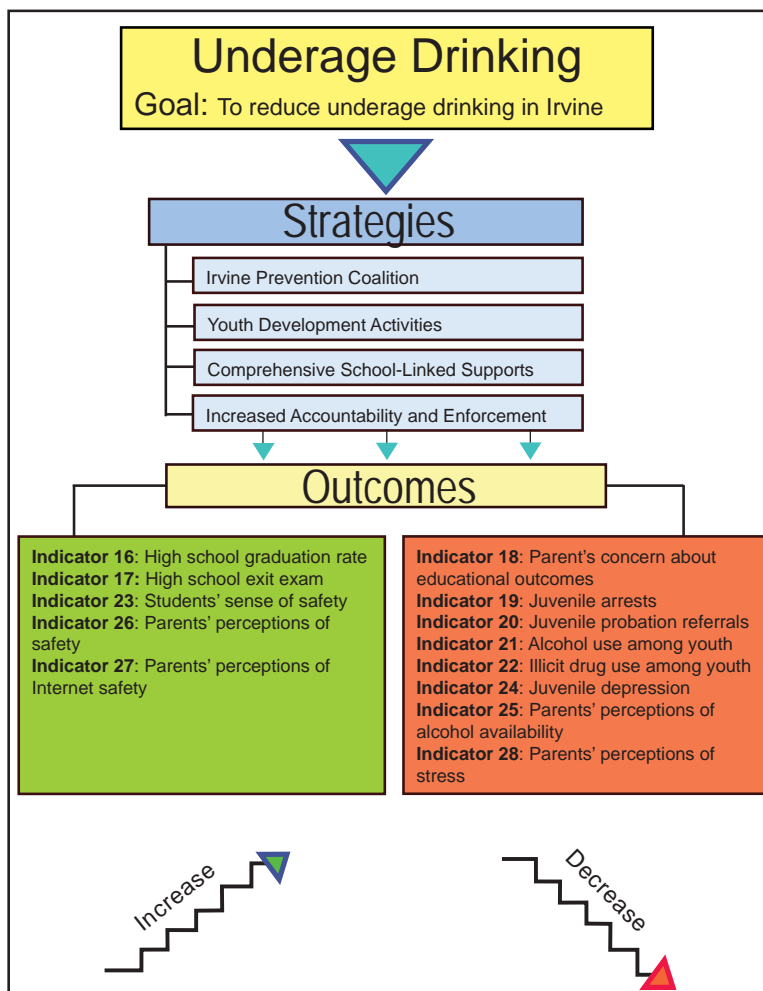
Youth Development Activities: This strategy is designed to prevent risky behavior by building on youth assets and strengths and includes funding for existing youth development activities, including the Youth Action Teams.

Pledge: This strategy provides for the development of a pledge to be promoted and signed by local government, law enforcement, parents, and young people to not engage in or condone underage drinking. It also includes exploration of a social hosting ordinance with an enforcement component.

Accountability & Enforcement: The strategy provides funding to develop a protocol outlining consequences for underage drinking and include a law enforcement officer to respond to party calls in order to develop a consistent level of enforcement.

Underage Drinking: Selected Strategies

Due to fiscal constraints, a limited number of strategies were selected by the advisory committee for inclusion in this plan.¹⁸ The advisory committee ranked strategies by preference, weighing cost effectiveness, impact on indicators and connection with the vision and values of the City of Irvine. Advisory committee members also allocated funding to selected strategies, seeking to maintain a balance across priority areas. Task force members had the opportunity to review selected strategies and make revisions and modifications to the scope and budget. The four strategies selected for the Underage Drinking priority area include: the Irvine Prevention Coalition, Youth Development Activities, Accountability and Enforcement and Comprehensive School-Linked Supports. The logic model above outlines the relationship between the goal, selected strategies and indicators related to the Underage Drinking priority area and is followed by detailed descriptions of each strategy.¹⁹



IRVINE PREVENTION COALITION

The goal of this strategy is to reduce risky behavior among young people through the activities of the Prevention Coalition. The Irvine Prevention Coalition (IPC) serves as the vehicle for communication, collaboration, and action in Irvine. With over 60 member agencies, the partnership has created

¹⁸ Should fiscal constraints ease during the five-year period, the strategies recommended by the task forces, but not recommended for inclusion in this plan will be examined by the City as potential fundable initiatives.

¹⁹ Comprehensive School-Linked Support is described under Children’s Mental Health.

an environment where service providers work together to meet the needs of the community. This organization will continue to collaborate and coordinate services to reduce substance abuse, violence and related problems among Irvine’s youth. In addition to sustaining current programming, this strategy would also incorporate the development of a sustainability plan to address the termination of the grant in 2009. A subcommittee will be responsible for exploring the creation of a social hosting ordinance in Irvine. A separate subcommittee will oversee the Social Norms Marketing Campaign and develop strategic partnerships to enhance its implementation.

Rationale

The IPC supports the vision of creating a safe community for children, youth and families through its extensive network and collaboration of agencies. Through this partnership, the IPC has been able to create an environment where service providers work together to meet the needs of the community, and subsequently contribute to a livable, family-friendly city.



Outcomes

The participating agencies will continue to benefit from a sharing of resources and expertise; families, youth and community members who participate in trainings and events will gain an increased awareness of services and resources. Through the Social Norms Marketing Campaign, the IPC will develop positive and accurate messages about the problem of underage drinking and promote positive and healthy behavior.

This strategy has an impact on the following “Risky Behavior” and “Academic Achievement” related indicators over the long term:

- Indicator 21– Alcohol use among youth (decrease)
- Indicator 22 – Illicit drug use among youth (decrease)
- Indicator 23 – Students’ sense of safety (Increase)
- Indicator 24 – Juvenile depression (decrease)
- Indicator 25 – Parents’ perceptions of alcohol availability

On an annual basis, outcomes will be measured by:

- Number of joint initiatives and activities sponsored by IPC
- Number of social marketing activities
- Number of youth served through planned activities

Use of Volunteers

The IPC will continue to seek youth volunteers through such vehicles as the IPC Student Board and through collaboration with the volunteer and community services organizations.

YOUTH DEVELOPMENT ACTIVITIES

This strategy is designed to prevent risky behavior by building on youth assets and strengths for existing youth development activities, including the Youth Action Teams and Youth Leadership Academy. The youth development organizations work collaboratively with community-based organizations and institutions to foster healthy youth development, to provide safe social-recreational activities and to prevent youth substance use and abuse, while simultaneously teaching youth to become leaders in their communities. Student leaders emerge from these programs and encourage peer participation in healthy activities, modeling exemplary behavior and teaching others to make healthy decisions



about things like alcohol and drug use. This strategy proposes the inclusion of a part-time Youth Action Team Coordinator to begin in Year 2, who will also support the Youth Leadership Academy.

Rationale

This strategy supports the value of “Participation as a goal that mobilizes greater resources”. Youth development organizations provide youth a meaningful role in making change throughout their community through activities that encourage them to participate in community service and civic life. This strategy seeks broad participation of youth from different religious, socio-economic, and ethnic backgrounds, to make a significant impact on a broad spectrum of youth in Irvine.

Outcomes

This strategy has an impact on the following “Risky Behavior” and “Academic Achievement” related indicators over the long term:

- Indicator 21 – Alcohol use among youth (decrease)
- Indicator 22 – Illicit drug use among youth (decrease)
- Indicator 23 – Students’ sense of safety (increase)

On an annual basis, outcomes will be measured by:

- Number of youth participating in volunteer activities
- Number of leadership development opportunities offered
- Number of participants in youth-led recreational activities
- Number of Youth Action Team members at Irvine high schools, middle schools and parks

Use of Volunteers

Youth volunteers are essential to the youth development organizations and activities. Continued opportunities and leveraging of youth volunteers are integral to the success of this strategy. The program will collaborate with voluntarism and community service organizations.

ACCOUNTABILITY AND ENFORCEMENT

The purpose of this strategy is to develop a set of consequences and a protocol for dealing with youth who are caught drinking or under the influence of alcohol. Currently there are limited consequences for these youth, as parents and school officials are not informed about the risky behavior young people are engaging in. It is believed that with a set of consequences attached to this behavior (e.g. citation, community service, and meeting with school counselor), youth will be further deterred from drinking. Additionally, this strategy will provide for a log/record of youth offenders who have received multiple citations for drinking and allow school and law enforcement authorities to identify youth who may be experiencing a problem with alcohol and make a referral to the appropriate intervention resource. This strategy provides one year of funding to better explore the extent of the problem and identify potential solutions.

Rationale

By developing a set of consequences related to underage drinking, this strategy will likely prevent youth from engaging in risky behavior. Furthermore, this strategy contributes to social norm change around drinking as an acceptable behavior.

Outcomes

This strategy will most likely have an impact on the following indicators:

- ▶ Indicator 17 – High School Exit Exam (increase)
- ▶ Indicator 19 – Juvenile arrests (decrease)
- ▶ Indicator 20 – Juvenile probation referrals (decrease)
- ▶ Indicator 22 – Illicit drug use among youth (decrease)
- ▶ Indicator 23 – Students’ sense of safety (increase)

On an annual basis, the effectiveness will be measured by:

- ▶ The creation of a protocol
- ▶ The engagement of law enforcement, parents, students and teachers in crafting consequences and protocol
- ▶ A work plan for next steps from year 2-5
- ▶ The number of citations and referrals made.

VA.4 STRATEGIES TO ENHANCE SUPPORT TO FAMILIES IN NEED

The purpose of the Support to Families in Need Task Force was to develop a set of strategies to reduce or eliminate poverty and the harmful effects of near-poverty status among families in Irvine. Support to Families in Need was identified as a priority in the 2007 Indicators Report. While Irvine is certainly more affluent than many surrounding communities in Orange County, the high cost of housing and child care make Irvine an increasingly difficult community for low-income families to thrive in. Sid Gardner and his colleagues reported the following findings from the 2007 Indicators Report:

“The resident survey indicated that lower-income families tend to have more difficulty accessing city recreational programs for youth. They had proportionately more problems finding child care, and agencies said that the affordability of housing makes up the largest single component of their caseloads. Lower-income parents were more than twice as concerned that their child might not be able to pass the high school exit exam, and they were significantly more concerned than other parents that their child might leave high school lacking the skills to go to college or earn a good wage. Lower-income parents indicated that their children sometimes had difficulty participating in recreation programs in the city, and were less actively involved in their neighborhoods than those with higher incomes.”

While the City has made strides in setting aside affordable housing for new developments, the need for improved access to housing, affordable child care, health insurance and care, and adequate recreation activities remains in Irvine. Low-income families in Irvine tend to be the working poor, rather than those living on public assistance. As a result, there is a need for strategies that effectively reach a population that tends to be well integrated.

Strategy Development: Support to Families in Need

The task force used the process outlined in the Planning Process/ Strategy Development Section above to create a set of prioritized strategies. As a first step, they reviewed the data and rationale outlined in the 2007 Indicators Report and discussed existing community assets, resources and potential strategies for better serving low income families in Irvine. The task force was comprised of many individuals representing community-based organizations in Irvine. At the first meeting, task force members concurred that the target population was the working poor and recent immigrants who may not be accustomed to seeking services or supports from the local government. Particular attention was paid to developing strategies that effectively engage these populations.



At the second meeting, the task force met with Anne Broussard, Child Care Coordinator in Orange County. Ms. Broussard confirmed the need for additional services and supports for families in Irvine, particularly in relation to child care, housing, and health care coverage. The task force members also discussed the need for increased community-based outreach and engagement to link families to existing services and programs. Subsequently, the task force reviewed relevant research on model programs in other communities, focusing on best practices, policies and strategies in three areas: increasing access to child care, affordable housing and wraparound services.

Out of these two meetings, a set of four initial strategies to consider for inclusion in the plan emerged. Gibson & Associates staff developed logic models for each of the proposed strategies, outlining proposed program or policy, outcomes, impact on indicators, performance measures, staffing needs and associated costs. Task force members reviewed and discussed the list of strategies under consideration and began to identify high priority strategies to advance. In a process facilitated by the consultant team, task forces spent the fourth meeting prioritizing proposed strategies, weighing the following criteria:

- Perceived impact on indicators and/or other positive impacts
- Cost effectiveness/use of existing resources
- Connection with City of Irvine’s vision and values
- Use of volunteers



The Assistance to Low-Income Families Task Force ranked strategies requiring additional funds and those using existing resources separately. They developed a set of strategies to submit to the advisory committee for inclusion in the plan, advancing three strategies all together. They included:

Mobile Recreation Services: The purpose of this strategy is to expand and implement a comprehensive-alternative intramural physical education and after-school enrichment program, providing access to team sports, and individual exercise programs and tutoring to low-income communities.

Community Outreach & Education Campaign: The purpose of this strategy is to build collaborative efforts to increase access to health and wellness resources and services for Irvine children, youth and families.

Housing Education: This strategy provides a city-sponsored housing education program to low-income families. The program focus will be to create a housing alternative for families/people with special needs such as senior citizens at risk of losing independence, a person with disabilities, single parents, AIDS patients and foster youth.

Support to Families in Need: Selected Strategies

Due to fiscal constraints, a limited number of strategies were selected by the advisory committee for inclusion in this plan.²⁰ The advisory committee ranked strategies by preference, weighing cost effectiveness, impact on indicators and connection with the vision and values of the City of Irvine. Task force members had the opportunity to review selected strategies and make revisions and modifications to the scope. Task force members selected the Community Outreach & Education campaign for inclusion. The logic model below outlines the relationship between the goal, selected strategies, and indicators related to the Support to Families in Need priority area and is followed by a detailed description of the strategy developed during the process.

²⁰ Should fiscal constraints ease during the five-year period, the strategies recommended by the task forces, but not recommended for inclusion in this plan will be examined by the City as potential fundable initiatives.

COMMUNITY EDUCATION & OUTREACH CAMPAIGN

The purpose of this strategy is to support and enhance existing community education campaigns in order to increase access, information and resources for low-income families. Through a collaboration between City of Irvine Community Services, FOR Families and various non-profit agencies, this program will raise awareness about available services and supports. In addition, this strategy will expand education and outreach at recreation centers throughout the City. This strategy will continue to support and enhance existing community coalitions to increase access, information sharing and utilization of community resources and services. The Campaign will include the following:

- ▶ FOR Families staff will train Community Services staff on opportunities to identify and refer low-income families through the recreation services provided at centers throughout Irvine.
- ▶ Community Services staff will have the capacity to receive and disseminate information and resources at community centers and provide referrals to non-profit agencies
- ▶ Develop partnerships with non-profit agencies providing services to Irvine residents.

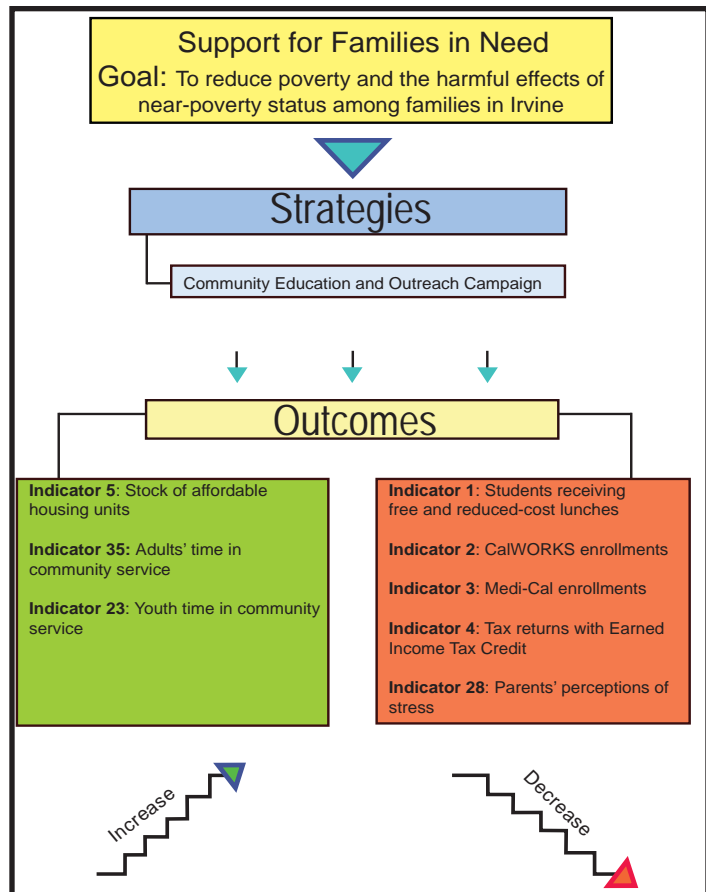
Rationale

This strategy increases effectiveness and outreach by aligning existing resources, policy and funding priorities to address prioritized community needs and concerns.

Outcomes

By increasing collaboration and outreach, this strategy should cause a change in the following indicators:

- ▶ Families with problems accessing health coverage
- ▶ CalWORKS
- ▶ Medi-Cal enrollments
- ▶ Tax returns with Earned Income Tax Credit
- ▶ Parents' perceptions of stress
- ▶ Adults' time in community service
- ▶ Youth time in community service.



On an annual basis, outcomes will be measured by:

- ▶ Number of community stakeholders involved
- ▶ Number of planning meetings per year
- ▶ Number of families served.

Use of Volunteers

Community service staff will recruit, train and support outreach volunteers to help disseminate information, develop community partnerships and lead educational and recreational activities (e.g. EITC presentations, financial literacy and life skills workshops, etc.) at centers.

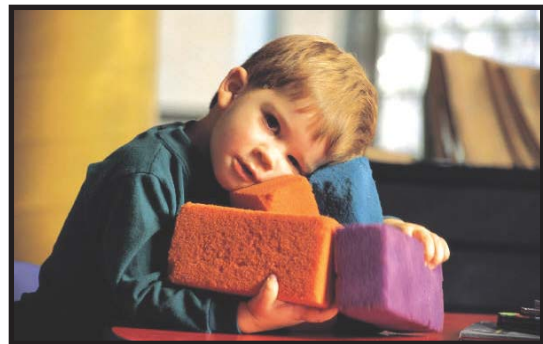
VA.5 STRATEGIES TO IMPROVE CHILDREN'S MENTAL HEALTH

The goal of the Children's Mental Health Task Force is to improve the health and wellness of Irvine children by identifying children with mental health needs early and by increasing the capacity of parents, schools and child care programs to address those needs. While data was not summarized specifically in relation to children's mental health, task force and advisory committee members concurred that there was a need for programs, services and supports that reduced parental and family stress and identified mental health needs in children at the earliest point possible. Through meetings with Community Services staff and leadership, the decision was made to add a sixth priority area- children's mental health. The Children's Mental Health Task Force was formed in November 2007 to address concerns about the need for initiatives that support the mental health of young people in Irvine.

Concerns expressed in the 2007 Indicators Report, as well as in focus groups during the strategic planning process highlighted the need for strategies that support early identification of mental health issues and build families' capacity to cope with stress and mental health issues. By identifying mental health issues early, families will be better equipped to support their children. In the focus groups, young people cited the intense drive for perfection and the sense of competition many of them experience, noting that eating disorders, depression and substance abuse are not uncommon among their peers.

Strategy Development: Children's Mental Health

The first task force meeting was held in December 2007. Due to logistics, the prioritization of strategies for this task force occurred in a condensed time frame. The task force used the process outlined in the Planning Process/ Strategy Development Section above to create a set of prioritized strategies. Due to the shortened time frame, the Children's Mental Health Task Force did not have the opportunity to meet with experts, though local expertise was certainly represented among task force members. The



task force members also discussed the need for supports across the age spectrum, though many emphasized the need for early interventions and supports during the first five years of life. Subsequently, the task force reviewed relevant research on model programs in other communities, focusing on best practices, policies and approaches. Conversations centered on early intervention and supports to promote positive coping among young people and their families.

Out of these meetings, a set of four initial strategies to consider for inclusion in the plan emerged. Gibson & Associates staff developed logic models for each of the proposed strategies, outlining proposed program or policy, outcomes, impact on indicators, performance measures, staffing needs and associated costs. Task force members reviewed and discussed the list of strategies under consideration and began to identify high priority strategies to advance. In a process facilitated by the consultant team, task forces spent the fourth meeting prioritizing proposed strategies, weighing the following criteria:

- Perceived impact on indicators and/or other positive impacts
- Cost effectiveness/use of existing resources

- ▶ Connection with City of Irvine’s vision and values
- ▶ Use of volunteers

The Children’s Mental Health Task Force ranked strategies requiring additional funds and those using existing resources separately. They developed a set of strategies to submit to the advisory committee for inclusion in the plan, advancing five strategies all together. They included:

Parent and Community Education: The Parent and Community Education project is designed to coordinate, focus and enhance current resources related to educating parents, teachers, faith community and youth leadership about the early warning signs of mental illness, eating disorders, depression and other relevant topics.



Youth Wellness Promotion: School and community-based strategies that promote child and youth wellness, through the delivery of health & nutrition, exercise, yoga and stress reducing activities, provided by volunteers. Project would promote youth development and reduce the number of preventable mental health conditions.

School-based Wellness Promotion: The goal is to provide ongoing assessment of school policies and school environment in relation to wellness promotion. The program would promote practices that support early intervention and positive coping with stress and mental health challenges among young people.

Comprehensive School Linked Supports: The goal of this strategy is to provide a range of school or Family Resource Center-based individual, group and peer counseling and support services targeting youth with behavioral or developmental problems.

Infant Toddler Support: Infant-Toddler Support Services would fund a City staff person or consultant to develop a partnership with First Five, IUSD, School Readiness Project, and the Mental Health Department to provide mental health and parent training support for families with pre-school age children identified through the Visiting Nurses Program as being at risk of emotional-behavioral problems.

Children’s Mental Health: Selected Strategies

Due to fiscal constraints, a limited number of strategies were selected by the advisory committee for inclusion in this plan.²¹ The advisory committee ranked strategies by preference, weighing cost effectiveness, impact on indicators and connection with the vision and values of the City of Irvine. Advisory committee members also allocated funding to selected strategies, seeking to maintain a balance across priority areas. Task force members had the opportunity to review selected strategies and make revisions and modifications to the scope and budget. The two strategies selected for inclusion in the plan

²¹ Should fiscal constraints ease during the five-year period, the strategies recommended by the task forces, but not recommended for inclusion in this plan will be examined by the City as potential fundable initiatives.

to address the Children’s Mental Health priority area include Comprehensive School Linked Support and Infant-Toddler Support. The logic model below outlines the relationship between the goal, selected strategies, and indicators related to the Children’s Mental Health priority area; it is followed by detailed descriptions of each strategy.

COMPREHENSIVE SCHOOL-LINKED SUPPORT

The goal of this strategy is to increase identification of and support for children and youth experiencing mental health issues and behavior challenges. The strategy includes provision of a range of school or Family Resource Center-based individual, group and peer counseling and support services targeting youth with behavioral or developmental problems. Among those programs that proposed to be funded:

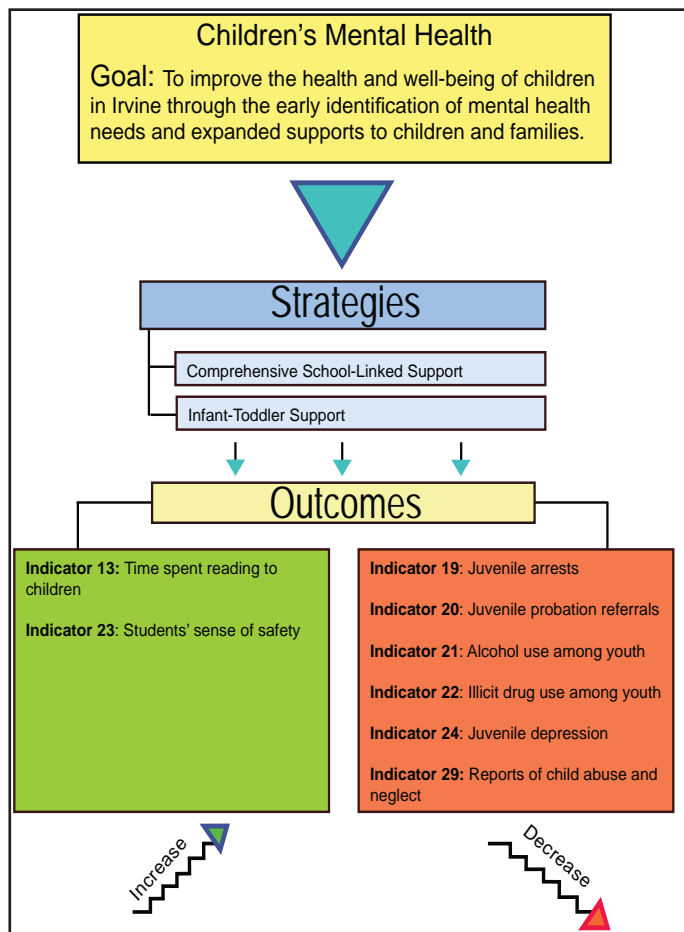
- ▶ Project Success--middle and high school small group and short-term individual counseling and information, referral and case management.
- ▶ Guidance Assistance Program provides paraprofessional counseling and support at all 22 elementary schools; and
- ▶ Family Resource Center and For Families Program, which provide a range of supports to families. Funding would support case management for 100 families and parent education for 90 families.

Services would be delivered in partnership with community-based providers of social, psychological and developmental services such as For Families, Families Forward and/or Human Options.

Rationale

Early intervention services have been shown to reduce the impact of or prevent more serious disorders. Early intervention promotes resiliency and healthy decision making and offers the necessary counseling and support to families and youth in need. This strategy is a collaborative effort of organizations and institutions whose collective missions serve to support the healthy social and emotional development of youth.

Two important values of the strategic plan are directing services to those who need them most and prioritizing strategies that promote prevention. This strategy accomplishes both of those objectives. By providing early and intensive interventions and supports,



this strategy will reduce the negative impacts of social and behavioral problems among young people in Irvine.

Outcomes

This strategy has an impact on the following “Risky Behavior” and “Academic Achievement” related indicators over the long term:

- Indicator 19 – Juvenile arrests (decrease)
- Indicator 20– Juvenile probation referrals (decrease)
- Indicator 21– Alcohol use among youth (decrease)
- Indicator 22 – Illicit drug use among youth (decrease)
- Indicator 23 – Students’ sense of safety (Increase)
- Indicator 24 – Juvenile depression (decrease)

On an annual basis, outcomes will be measured by:

- Number of young people served
- Number of referrals
- Number of families served

Use of Volunteers

There is a limited role for volunteers in this strategy, largely serving in coordination and administrative support functions. Staff will work with the voluntarism program to identify opportunities to use volunteers.

INFANT-TODDLER SUPPORT SERVICES

The goal of the Infant-Toddler Support Services strategy is to reduce the impact of social, emotional, behavioral and developmental conditions in infants and toddlers that are identified through the Visiting Nurse Program or other programs working with families and child care programs. Infant-Toddler Support Services would include the provision of mental health and parent training support, particularly for pre-school age children. The program proposed funds for a City staff person to develop a partnership with First Five, IUSD, School Readiness Project, and the Mental Health Department to provide mental health and parent training support for eligible families. This strategy may use internal and external funds for program operation beyond year one. In subsequent years, \$100,000 per year would represent about 1/3 the total cost of the program with funding also coming from First 5, Mental Health Services Act and other sources.



Rationale

This strategy would build the parents' capacity to be the primary teacher and service provider for their child(ren), one of the central tenets to the vision statement. It also would serve as an early intervention, preventing or reducing the impact of behavioral problems by intervening early.

Intended Outcomes

The program should result in an improvement in parenting skills, family functioning and parent understanding of child's condition as determined by assessment instruments used by the program to measure effectiveness and to help identify family needs. Family satisfaction as measured by a satisfaction survey will be administered by the program. In addition, the strategy should result in changes in:

- ▶ Reports of child abuse
- ▶ Parents perception of stress
- ▶ Time spent reading to child
- ▶ Reports of student depression [long-term]

On an annual basis, program will be measured by:

- ▶ Number of families served
- ▶ Number of partnerships with other institutional partners formed
- ▶ Number of education and training classes provided.

Use of Volunteers

Adult volunteers could function as respite providers if a good training program were developed. The program will work with voluntarism and community service organizations to identify additional opportunities.

VA.6 STRATEGIES TO ENHANCE VOLUNTARISM & COMMUNITY SERVICE

The identification of community service and voluntarism as a priority area occurred in the 2007 Indicators Report. The goal is to enhance and expand community service by adults and youth in Irvine, through both youth-oriented and intergenerational programs. While Irvine has many active volunteers, organizations that promote volunteers, and opportunities for young people to contribute through service learning, many stakeholders wanted community service to be elevated as a priority because it fills such an important role. Gardner and his colleagues reported the following data in the Indicator's Report:



“On the question of time devoted to voluntary activities, 52% of respondents had volunteered for an organization or cause within the last year; the bulk of this activity occurred in Irvine. The organization types that received the most volunteer time were those with a religious base [58%], those helping the poor or elderly [52%], and school or youth programs [49%]. An average of 82 hours was volunteered (if that figure is applied to the adult population of the city over 25, the value of this donated time [at \$15/hour] represents \$160 million.) Of those over 65, 43.5% had volunteered some time. A total of 39% of respondents said they would be very interested [12%] or somewhat interested [27%] in increasing the amount of time that they volunteer.”

A decision was made to incorporate the value of voluntarism and community service into all priority areas, instead of forming a task force to address this priority separately. The hope was that community service would be effectively integrated throughout the plan. The goal of this program is to promote community service as a meaningful means of community engagement, youth development and learning for Irvine's residents of all ages. The role of staff is to recruit, screen, train, and place potential volunteers to efforts in each of the other initiatives, as well as to promote community service throughout the Irvine community. The City will explore the feasibility of assigning this role to existing staff resources.

V.B. List of Strategies

The table below outlines the strategies selected for inclusion in the plan. They are listed by task force but are not ranked.

	Strategy	Priority Area
1.	<p>Child Care Capacity Expansion</p> <p>The goal of this strategy is to expand the supply of high quality, affordable child care in Irvine. The strategy proposes that a team work with developers, the City, school district, university, faith community and any other potential partners in developing new high quality, affordable child care programs. Staff will have knowledge of child care regulations, city planning and policy development and potential funding streams, in addition to best practices in early childhood education.</p>	Child Care & School Readiness
2.	<p>Child Care Quality Enhancement</p> <p>The goal of this strategy is to improve the quality of existing early care providers, at both centers and family day care programs, in addition to increasing the number of slots operated by NAEYC accredited programs in Irvine. This strategy proposes funding to assign a staff or contract agent to the responsibility of expanding professional development and on-site training programs for existing early child care providers. The work group is responsible for delivering professional development at centers and family day cares to improve the quality of care and integrates many of the elements of the Family Day Care Site Training strategy originally ranked by the task force. Staff will provide technical assistance in applying for NAEYC accreditation. This strategy includes funds for stipends and incentives to family day care and child care operators for participating in trainings and making facility improvements. With the goal of promoting school readiness among those who are least prepared when they enter kindergarten, the team will explore opportunities to integrate parent education and early childhood/kindergarten readiness assessments throughout the child care system.</p>	Child Care & School Readiness
3.	<p>Health & Fitness Funder Engagement</p> <p>The goal of this strategy is to increase the level of coordination and engagement of key funders in Irvine who are concerned with the health & fitness of young people. Utilizing existing funds, community services staff will work with Irvine funders invested in health and fitness to adopt a uniform policy to fund programs and initiatives in Irvine that explicitly aim to improve the health and fitness of young people in Irvine. The strategy also aims to engage the business community and health care sector in making financial commitments to programs and initiatives that support the health of young people. The Public Health Ombudsman currently being recruited by the City of Irvine will be responsible for developing partnerships, drafting policy and promoting financial investment from community stakeholders.</p>	Health & Fitness

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	Strategy	Priority Area
4.	<p>Youth Wellness Advocacy</p> <p>The goal of the youth wellness advocacy strategy is to build support for environments that support healthy food choices and activity levels for communities throughout Irvine. Through advocacy efforts that support community norm change and the adoption of policies that promote the health and fitness of young people, the strategy aims to create long-term system's change in schools and the community. The strategy includes re-assignment of an existing coordinator position that will be responsible for several areas of focus, including forming and staffing the Youth Wellness Committee, a youth-led advocacy program, collaborating with the School Wellness Committees and Nutrition Services staff to promote healthy food offerings, identifying and promoting policies that strengthen healthy food offerings in the community, and collaborating with key decision makers and institutional partners to promote healthy food offerings. This will include the exploration or conducting a walkability assessment to identify barriers that limit integration of physical activity into daily routines. It will also include the identification of 1-2 schools in Irvine and their surrounding communities to target in creating healthy food zones around the schools and communities (most likely high schools with open campuses).</p>	Health & Fitness
5.	<p>Physical Activity Policy & Program Development</p> <p>The purpose of the Physical Activity Policy & Program Development strategy is to expand the offerings and quality of physical education and fitness programs in the City of Irvine and other youth serving institutions, such as Irvine Unified School District (IUSD). The initiative focuses on developing and expanding partnership programs with key institutional partners and proposes funding for a coordinator position to be housed within the City or Irvine Unified School District. Additional partnership development will rely on existing funds. The coordinator will will work with the objective of enhancing physical education program within IUSD and develop partnerships to increase the offerings of fitness activities to young people in Irvine.</p>	Health & Fitness
6.	<p>Standards for Public Facility Use</p> <p>The goal of the Standards for Public Facility Use strategy is to create consistent policies, practices and messaging between the City and its partners that utilize its facilities, particularly in regards to the provision of healthy and nutritious food at events. Using existing resources, the City will partner with the Irvine Sports Committee and Irvine Aquatics Advisory Board to define standards that link use of public facilities to the fulfillment health focused criteria. City staff will develop guidelines for healthy snacks for all sports leagues and contractors that provide community sports leagues (i.e. AYSO FB, Swimming, and snack bars), consistent with city and school policies.</p>	Health & Fitness

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	Strategy	Priority Area
7.	<p>Irvine Prevention Coalition</p> <p>The goal of this strategy is to reduce risky behavior among young people through the activities of the Prevention Coalition. The Irvine Prevention Coalition (IPC) serves as the vehicle for communication, collaboration and action in Irvine. With over 60 member agencies, the partnership has created an environment where service providers work together to meet the needs of the community. This organization will continue to work together to coordinate services to reduce substance abuse, violence and related problems among Irvine’s youth. In addition to sustaining current programming, this strategy would also incorporate the development of a sustainability plan to address the termination of the grant in 2009. A subcommittee would also be responsible for exploring the creation of a social hosting ordinance in Irvine. A separate subcommittee will oversee the Social Norms Marketing Campaign and develop strategic partnerships to enhance its implementation.</p>	Underage Drinking
8.	<p>Youth Development Activities</p> <p>This strategy is designed to prevent risky behavior by building on youth assets and strengths and includes funding for existing youth development activities, including the Youth Action Teams and Youth Leadership Academy. The youth development organizations work collaboratively with community-based organizations and institutions to foster healthy youth development, provide safe social-recreational activities and prevent youth substance use and abuse, while simultaneously teaching youth to become leaders in their communities. Student leaders emerge from these programs and encourage peer participation in healthy, productive activities and model exemplary behavior, teaching others by example to make wise decisions about things like alcohol and drug use. This strategy proposes a part-time Youth Action Team Coordinator to begin in year 2 and support the Youth Leadership Academy.</p>	Underage Drinking
9.	<p>Accountability and Enforcement</p> <p>The purpose of this strategy is to develop a set of consequences and a protocol for dealing with youth who are caught drinking or under the influence of alcohol. Currently there are few consequences for young people, as parents and school officials are not informed about the risky behavior young people are engaging in. It is believed that with a set of consequences attached to this behavior (e.g. citation, community service, and meeting with school counselor), youth will be further deterred from drinking. Additionally, this strategy will provide for a log/record of youth offenders who have received multiple citations for drinking and allow school and law enforcement authorities to identify youth who may be experiencing a problem with alcohol and make a referral to the appropriate intervention resource. This strategy proposes funding for enforcement in 2009-2010 with efforts in 2008-09 committed to investigating the extent of the problem and identifying alternative solutions.</p>	Underage Drinking

City of Irvine
Strategic Plan for Children, Youth and Families

	Strategy	Priority Area
10.	<p>Community Education & Outreach Campaign</p> <p>The purpose of this strategy is to build collaborative efforts to increase access to health and wellness resources and services for Irvine children, youth and families. This strategy will continue to support and enhance existing community coalitions to increase access to, information sharing and utilization of community resources and services by children and families.</p>	Support to Families in Need
11.	<p>Comprehensive School-Linked Support</p> <p>The goal of this strategy is to increase identification of and support for children and youth experiencing mental health issues. The strategy includes provision of a range of school or Family Resource Center-based individual, group and peer counseling and support services targeting youth with behavioral or developmental problems. Among those programs that would be funded:</p> <ul style="list-style-type: none"> ▶ Project Success--middle and high school small group and short-term individual counseling and information, referral and case management. ▶ Guidance Assistance Program provides paraprofessional counseling and support at all 22 elementary schools; and ▶ Family Resource Center, which provides a range of support to families. Funding would support case management for 100 families and parent education for 90 families. <p>Services would be delivered in partnership with community-based providers of social, psychological and developmental services such as For Families, Families Forward and/or Human Options.</p>	Children's Mental Health Underage Drinking
12.	<p>Infant-Toddler Support Services</p> <p>The goal of the Infant-Toddler Support Services strategy is to reduce the impact of social, emotional, behavioral and developmental conditions in infants and toddlers that are identified through the Visiting Nurse Program or other programs working with families and child care programs. Infant-Toddler Support Services would include the provision of mental health and parent training support for families, particularly focusing on pre-school age children. Infant-Toddler Support Services would fund a City staff person to develop a partnership with First Five, IUSD, School Readiness Project and the Mental Health Department to provide mental health and parent training support to eligible families. This strategy may use internal and external funds for program operation beyond year one. In subsequent years, \$100K per year would represent about 1/3 the total cost of the program with funding also coming from First 5, Mental Health Services Act and other sources.</p>	Children's Mental Health

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	Strategy	Priority Area
13.	Community Service and Voluntarism Program The goal of this program is to promote community service as a meaningful means of community engagement, youth development and learning for Irvine’s residents of all ages. Existing resources will be utilized to recruit, screen, train and place potential volunteers to efforts in each of the initiatives.	Voluntarism

VI. IMPLEMENTATION PLAN

Developing an implementation plan for this initiative was limited by the absence of a clear funding plan for the first or future years. Depending upon the nature of how the City Council responds to this plan, the implementation plan could change considerably. What is presented here is a plan for how the plan could be implemented in Year 1 when most of the activities will be implemented through the redirection of existing resources while City staff and the City Council clarify the long-term funding and monitoring plan.

The Irvine Children & Youth Strategic Plan will prioritize and focus the efforts of the City and its partners in serving the needs of Irvine's youth. Since the plan covers a five-year period, the implementation plan must address the demands of each stage of implementation, as varying levels and types of management, oversight and administrative support will be necessary. In Irvine, for example, during the first year of implementation more emphasis will be placed upon using redirected City and partner resources to implement Year 1 strategies. As a result, there will not be a need for significant staffing support for procurement, contracting and contract monitoring processes. However, in Years 2 and beyond, the City may fund more community-based initiatives, which will require the coordination and oversight of a request for proposal process, followed by contracting and monitoring processes. Significantly different types of staffing will be required for each phase of the plan. The implementation plan will outline recommendations for staffing and community oversight over the five years and at various stages of the strategic plan.

VI.A. Realignment of Existing Resources & Staffing

Irvine began its strategic planning process with a recent history of annual budget surpluses and with an intent to use anticipated surplus funds to support a range of high priority initiatives identified through the strategic planning process. However, as the year and the planning process unfolded, national, state and local fiscal conditions deteriorated significantly resulting in budget constraints not only for the City of Irvine, but for all of its planning partners. In Spring 2008, City staff will still submit the plan to the City Council and may seek funds for some components of the plan. Prior to making that request, staff will conduct internal planning to identify ways in which the strategic plan can be used to organize and align existing City staff and funding resources to the strategic plan priorities. Through that process, a team of staff will discuss current priorities and job responsibilities and identify ways in which shifting fiscal and human resources could better focus City resources on strategic plan priorities.

Through this realignment process, the City will reorganize its staffing and fiscal resources focusing upon high priority strategies identified in the strategic planning process. For each strategy it will also identify a very specific City staff designee who will be responsible for the oversight of that strategy and who will be held accountable to the performance measures and outcomes identified with that strategy.

VI.B. Administration, Governance & Monitoring

The administration, governance and monitoring framework requires both staffing to oversee the plan, coordinate collaboration and planning among City staff and with community stakeholders and partners. It requires a volunteer body to monitor progress in plan implementation and to update plan priorities and approach. This section will describe the staffing plan and the volunteer framework for overseeing the plan's implementation.

Staffing for Plan Implementation

At minimum in Year 1, a senior staff person within the Community Services Department will be responsible for:

- ▶ Managing the strategic plan process
- ▶ Communicating with the City Manager, City Council and City partners and stakeholders
- ▶ Overseeing staff assigned to the implementation of prioritized strategies
- ▶ Working with key partners and stakeholders to expand the scope of the plan and integrate the use of other resources and funding sources to support the plan's strategies
- ▶ Coordinating the recruitment, screening and orientation of members of the Advisory Committee
- ▶ Staffing the advisory Committee and its task forces
- ▶ Managing contracts with outside consultants responsible for facilitating ongoing research, planning and evaluation.

Additional city staffing needs may be identified during planning conducted during the Spring 2008. Likely one staff person will be assigned to each of the six high priority goal areas. Their responsibility will be to staff a task force for one of the high priority goal areas and to oversee the implementation of strategies funded in Year 1. In addition some City staff will be assigned to oversee volunteer recruitment. This will be determined during planning conducted during the spring. The resulting realignment of staff will enable the City to staff the task forces and advisory committee, as well as to drive the implementation of some of the high priority strategies identified in the plan.

In Year 2 and beyond, plan staffing needs will change depending upon the scope of the plan, the amount of funding allocated annually, and the degree to which plan strategies are implemented by City staff or through contracts with community-based agencies. In the event that the majority of plan strategies funded by the City would be implemented through contracts with community-based agencies, then there would need for staff to perform the following functions:

- ▶ Develop Request for Proposals (RFP), facilitate bidders conferences and oversee an annual proposal review and selection process
- ▶ Staff the advisory committee and volunteer/staff review panels that are responsible for reviewing and selecting proposals submitted in response to the RFP process
- ▶ Develop an annual written Program and Funding Plan to the City Council summarizing the various strategies and funding levels recommended by the advisory committee.

GOVERNANCE: THE ROLE OF THE ADVISORY COMMITTEE

The creation of a strong advisory committee serves the purpose of providing a framework for community stakeholders a structure. It establishes a process for reviewing plan progress, conducting annual indicators studies, monitoring funded activities, and integrating community input on an ongoing basis. The advisory committee also will insulate the City Council against pressure from constituents and interest groups, allowing for an apolitical process to guide the governance of the initiative. This preserves the City Council's role as setting the overall scope, vision, values, and principles that guide the plan while allowing stakeholders to determine the plan's details.

Throughout the strategic planning process an advisory committee comprised of city staff and community stakeholders has met to oversee the process, to integrate the findings of each task force, and to prioritize strategies recommended by those task forces. The recent planning process did not include formal selection criteria or a process for recruiting members for this advisory committee. However, as the plan moves toward implementation it will be important that a formal structure be put in place that ensures a clear, transparent membership to this important committee. As the plan unfolds, the advisory committee will be responsible for approving annual plans and for forwarding funding recommendations to the City Council. Given the importance of these recommendations it is important that the selection process for advisory committee members is transparent and ensures that the committee is representative of the diverse community it serves.

NOMINATION PROCESS

The advisory committee nomination process will allow for the Mayor and each member of the City Council to nominate 1 member from the community to serve on the advisory committee. In addition, except where noted otherwise, the following groups will be asked to nominate one person to represent the interests of their constituency. The Youth and At-Large Community Member positions on the advisory committee would be selected through interviews with the Community Services Commission meaning that the Community Services Commission would appoint four members total.

- City of Irvine Community Services Commissioners (2)
- Irvine Unified School District
- Tustin Unified School District
- Irvine Prevention Coalition
- Irvine Child Care Committee
- Irvine Public Safety (Ex-Officio)
- Youth Members (2)
- At-Large Community Members (2)

Terms would be for two years with the opportunity for each member to be re-nominated and re-elected for a second term. During the first year one half of the members would be selected to serve an initial one-year term. This will ensure that each year only one half of the membership will be up for re-election.

ADVISORY COMMITTEE ROLES AND RESPONSIBILITIES

The advisory committee's responsibilities will be to:

- ▶ Determine the scope of ongoing planning activities
- ▶ Review annual performance data on strategic plan projects
- ▶ Oversee the procurement process utilized to identify organizations to receive funds to implement plan strategies
- ▶ Approve the annual update of the strategic plan
- ▶ Submit to the City Council an annual Program and Funding Plan for Council review and approval.

The annual Program and Funding Plan would be submitted to the City Council each spring. The plan would identify the specific programs recommended for funding, the agencies selected for funding and the funding level. The City Council must approve the plan for contracts to be developed by City staff. The City Council will have the authority to either approve the plan, modify it, or send it back to the advisory committee to make changes and resubmit. The annual updating of the strategic plan would be designed to identify strategic partnerships, create integrated funding plans to support high priority strategies, and create a system of children and youth services. The plan would be constructed by City staff and community stakeholders who would have reviewed data, research and performance reports on projects funded in prior years in determining which strategies to advance to the City Council.

VI.C. Partnership & Strategy Development

A key activity for Year 1 implementation of the strategic plan will be the exploration and development of partnerships with key stakeholders and funders. This will involve ongoing meetings with planning partners to explore ways to maximize existing resources, how to access new funding streams and how to integrate these efforts to take maximum advantage of current and potential resources. Convening partners to explore these options requires a dedicated staff person with sufficient logistical support to facilitate scheduling, development of shared documents and budgets and communication and coordination. While it will be the task forces that will oversee these partnership development efforts, staffing support to their work will be essential. As Section VI.B. describes, each task force would benefit from one City staff person who is responsible for directing the planning and partnership development strategies falling under the aegis of that task force. The level of effort involved in staffing that process will differ by priority area and will be determined during planning sessions in Spring 2008.

Below is a summary of a few of the partnership opportunities unearthed during this planning process.

Child Care Development Partnerships:

This project will require extensive research of a wide range of funding options both for the creation of child care programs and to support their operation. In addition, the development coordinator will be

responsible for working with businesses, corporations, churches, family day care operators and others to identify ways to develop new or expand existing child care facilities. Multiple projects could be in development at any given time and the person coordinating these efforts will need expertise in child care regulations, funding, facilities and program operations.

Model Child Care Lab:

The development of a model child care program that could serve both as a model child care program for low-income children and a training site for students and existing child care staff will require planning among developers, university/colleges and the child care community.

Infant Toddler Support Services:

The Children's Mental Health Task Force identified two projects that will benefit from planning and partnership development. The Mobile Infant-Toddler-Pre-School Assessment and Early Intervention Services could be funded through a partnership with Orange County Children & Families Commission. The Comprehensive School-Linked Support Services is losing its Safe Schools funding and may be able to develop funding from the Mental Health Services Act via a partnership with Orange County Behavioral Health Services. Both of these strategies will require clarifying conditions under which the projects can develop funding and to integrate strategies with existing services and systems.

Other strategies identified by other task forces will also require this kind of coordination and partnership formation and it will be the responsibility of the City staff person assigned to each task force to coordinate that planning.

Strategic Partnerships and Planning with Youth-Serving Institutions in Irvine

Advisory committee and task force members concurred on the need for greater collaboration between the City of Irvine and other major youth serving institutions in Irvine. Of particular interest is the need for alignment of organizational priorities with Irvine Unified School District, given that as an institution it serves the majority of young people in Irvine on a daily basis. During Year 1, City staff will develop forums to conduct inter-agency/institutional planning and policy development with IUSD and other major youth serving institutions, as well as a forum for reviewing individual programs and initiatives within each priority area. Through increased collaboration and alignment, community partners will more effectively reach children, youth and families throughout the city.

VI.D. Funding Plan

Year 1 of the strategic plan will be devoted to realigning existing city funding and personnel resources, in addition to forging new partnerships. As such, in Year 1 (2008-09) City staff will submit a budget to the City Council seeking one-year of funding for a range of strategies identified in the community planning process. Most of the strategies advanced by City staff will be ones that involve developing new partnerships or redirecting existing programmatic strategies. However, as part of ongoing planning during Year 2, the City will work with the advisory committee to develop a long-term funding plan that ensures stable support for high priority strategies and partnerships.

Research conducted by Gibson & Associates in support of this initiative identified a number of communities in which dedicated funding was set aside for the purpose of funding strategies and programs that were identified through planning processes such as the one the City of Irvine has just completed. Generally, funding plans provide a predictable level of funding that is long-term for at least a period of ten years. Funding that is at a specific, predictable level and extends into the future allows stakeholders to build stable programs that become a part of the infrastructure of child and family services. Furthermore, it allows City leadership to use the funding strategically, encouraging and leveraging partner contributions and demonstrating local commitments of resources for grant applications.

In some cases, communities create ballot initiatives seeking community approval and thus create a mandate for the initiative. In others a vote of the County Board of Supervisors or of the City Council can create such a fund and define the length of the initiative, the conditions under which funding will be allocated and the level and source of funding. Determining if the City wants to create its long-term funding and governance framework will be reviewed by the City Council and City Manager.

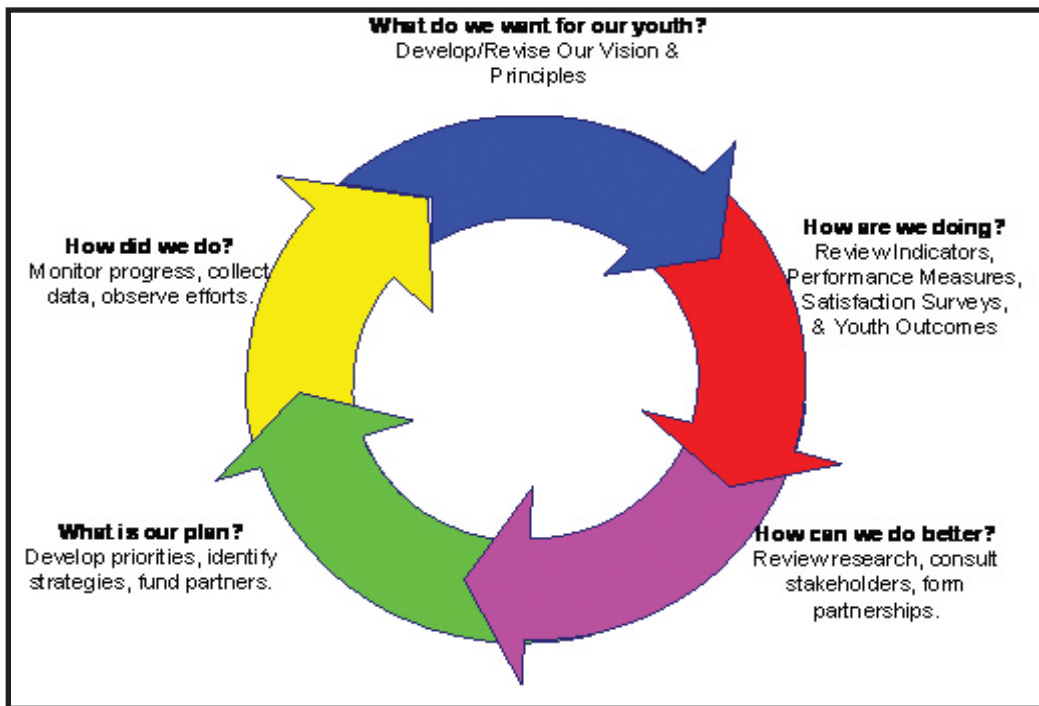
VI.E. Timeline

Here we outline the steps for advancing the plan to the council, seeking funding, distribution of funding, monitoring of programmatic initiatives and reassessing the plan. A conversation with Children & Family Futures is needed to determine the best time frame for incorporating the advisory committee's annual review of the Indicators Study. This annual analysis of local data related to plan strategies will be an important element of the annual planning process and will inform the funding priorities established each year. Likely as the plan becomes established an annual calendar will include the following key cyclical planning steps:

- Review most recent indicator data
- Review performance data on individual projects
- Conduct community surveys, youth surveys and/or focus groups
- Review and update research
- Convene task force meetings to share findings from all of the above and to consider recommendations to the advisory committee
- Determine funding priorities for the year
- Issue RFP
- Conduct review of proposals
- Develop Program and Funding Plan
- Obtain community input
- Submit for approval to City Council
- Issue contracts for approved activities
- Conduct ongoing program monitoring activities

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The chart below depicts a cycle of research and planning that would be part of the annual planning process conducted by City staff, the advisory committee and the task forces.



The timeline below represents how City staff, the task forces, the advisory committee, the Community Services Commission and the City Council will collaborate in moving the initiative through Year 1 and preparing the City to implement a more structured funding, administration, oversight and planning framework to govern the plan in future years.

Lead	Approve	Action Step	Implementation Benchmark	Target
DL-G&A	City Mgr.	Conduct staff planning process to identify how to realign staff and funding resources	Realignment and budget plan for 2008-09 submitted to City Council	3-3-08
DL-G&A	AC	Finalize governance and monitoring framework	Approved advisory committee operating procedures relating to nomination and election of members and roles and responsibilities	5-13-08
DL G&A	AC City Council	Final plan submitted to City Council for approval	Approved plan	5-13-08
DL G&	AC City Council	Finalize strategic plan and submit to City Council for approval	Written strategic plan with staffing and funding plan and oversight and monitoring system delineated	6-15-08

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Lead	Approve	Action Step	Implementation Benchmark	Target
AC	City Council	Advisory committee Retreat to review plan, confirm meeting protocols and norms, performance measures for each strategy and program and for the initiative	Confirmed schedule of meetings Meeting norms and protocols Officers Committee structure Calendar for year Funding priorities	9-10-08
Staff G&A	AC	Draft plan for conducting RFPs to fund strategic plan activities	Draft RFP Review process, protocols and tools Schedule for RFP and review process Plan for developing and monitoring contracts	9-15-08
Staff	AC City Council	Draft proposal for long-term funding plan submitted to City Council	Written plan outlining long-term plan for funding initiative strategies	9-15-08
Staff	AC	RFP issued for 2009-10 program activities	Published RFP	10-30-08
Staff		RFP responses due		11-20-08
Staff		Proposal review process		12-23-08
Staff	AC	Review ratings from review process and create Program & Funding Plan for 2009-10	Draft Funding Plan available for AC for review	1-20-09
Staff	AC	Revisions to Program & Funding Plan incorporating AC input	Plan available for public comment and presentation to the Community Services Commission	2-20-09
Staff	AC	Incorporate input from community input	Draft to City Council	3-15-09
Staff		Contract preparation & conference with funded agencies to review contract and monitoring process	Shared understanding of contract requirements, data collection protocols and schedules, and contract deliverables	4-30-09
Staff	City Council	Contracts developed and approved, submitted to Council for approval	Slate of contracts supporting 2009-10 program activities passed by City Council	7-10-09

VI.F. Ongoing Monitoring, Evaluation & Planning

The strategic plan establishes a set of high priority strategy areas designed to positively impact community indicators relevant to the health and wellness of children and youth. Throughout the implementation of the plan, the City and its partners will be operating programs and projects selected by the advisory committee and recommended for funding to the City Council. To ensure accountability, a framework and system of ongoing monitoring, evaluation and planning will need to be created.

The monitoring of project activities will be conducted through collaboration between City staff and priority area task forces, the advisory committee, funded program operators and community-based organizations. The task forces will establish and update annually a set of goals and objectives for their task force. In conference with funded agencies, they will also generate more specific performance measures for each project. Funded agencies will then work with City staff to develop data collection tools, protocols and procedures to ensure that sufficient data is collected to verify that program activities occurred as planned and that they were having the desired impact. City staff will be responsible for reviewing quarterly and annual data reports provided by the funded programs and producing summaries for review by each task force, the advisory committee, the Community Services Commission and the City Council.

Monitoring data could include attendance data, staff, youth, parent and community satisfaction data, as well as reports on independent observations of program operations conducted by City staff and/or community volunteers trained to observe specific kinds of program operations and other data identified by program staff. While program-generated data and staff/volunteer observations will provide the City a measure of assurance that City funds are being used effectively, periodic independent evaluations should be used to deepen the understanding of program operations, to identify program strengths and areas for improvement and to identify other means of developing and using data for ongoing program improvement. Results will be used to create more informative reports to the task forces, Commission and City Council. Evaluation can be conducted annually or every two or three years.

As the timeline above indicates and as the chart above depicts, monitoring and evaluation data, community indicators, research, community surveys, forum and other input strategies will be used by the task forces on an ongoing basis, as they perform a cyclical planning process designed to monitor and revitalize the strategic plan. Ongoing deliberations of the task force will also be used to initiate and track the development of new partnerships that are responsive to changing conditions, review new funding opportunities, and weigh input from youth, families and stakeholders. In this way, the plan will remain an organic, living document responsive to local conditions and reflective of community priorities.

VI.G. Budget

The Strategic Plan for Children, Youth and Families began in fiscal Year 2007-08 with the delivery of the Base Year Implementation Plan. The funding source of the Base-Year Plan was the City of Irvine General Fund Budget.

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The implementation of the Strategic Plan for Children Youth and Families in fiscal Year 2008-09 (and beyond) is contingent upon funding from a variety of sources. For the 2008-09 Fiscal Year, the City of Irvine's Community Services Department has committed to re-aligning staff resources to provide short-term labor and leadership to initiate action in the defined strategies.

The long-term approach to funding the execution of the strategies contained in the Strategic Plan for Children, Youth and Families will require the involvement of community partners, to include both funding agents and service providers. Throughout its implementation, partners will be identified and funding and grant sources will be explored for inclusive elements of the Strategic Plan.

APPENDIX A: Task Force & Advisory Committee Members

CHILD CARE & SCHOOL READINESS TASK FORCE

NAME	TITLE & ORGANIZATION
Roseanne Andrus	United Way of Orange County
Fataneh Barbod	Childcare Committee Member
Roberta Bulalacau	Program Specialist, Kindercare Westpark
Sheila Driscoll	Community Services Superintendent, City of Irvine
Wendy Garcia	Board Member Irvine Child Development Center
Natalie Hill	Parent Representative to Child Care Committee
Merri Jo Hooven	IUSD School Readiness Coordinator
Wen-Li Gau Lin	Director, Verano Preschool UCI Child Care Services
Marty Mance	Program Director Child Development Centers, Inc
Susan McClintic	City of Irvine Child Care Supervisor
Nancy Moss	City of Irvine City Planner
Tejal Patel	Director Greentree Rainbow Rising
Richard Ruszat	Owner, Montessori Schools of Irvine
Sharon Seidman	Professor CSU Fullerton, Child & Adolescent Studies
Adelle Yeaton	Principal, University Park Elementary School

HEALTH & FITNESS TASK FORCE

NAME	TITLE & ORGANIZATION
Suzanne Baldwin	Irvine Resident and Irvine Unified Teacher Food Education Consultant
Wendy Brown	Supervisor City of Irvine Community Services
Shoana Chau	UC Irvine Undergraduate Public and Community Service
Rhonda DeVaux	Director IUSD Nutrition Services
Dennis Gibbs	Director Elementary Education IUSD
Allan Hodgert	Professor, Concordia University
Julie Hudash	Chief Executive Officer, Team Kids
Cathy Killaly	Research Coordinator UCI Pediatric Exercise Research Center
Ryan Painter	Program Coordinator, City of Irvine
Barbara Shipnuck	Director of Public Affairs, Kaiser Permanente

UNDERAGE DRINKING TASK FORCE

NAME	TITLE & ORGANIZATION
Debbie Bianchi	Executive Director Irvine Community Drug Prevention
Adam Buchanan	Community Services Supervisor, City of Irvine
Nancy Colocino	Coordinator IUSD Guidance Resources
Gwen Drenick, MPH, CHES	Director Community Alliance Network
Margo Finlayson	Program Manager NCADD-OC/Community Alliance Network
Kathy Kendrick	County of Orange – ADEPT (Drug and Alcohol Prevention and Treatment)
Steve Knollmiller	Community Service Program Coordinator City of Irvine
Paul Mills	Principal, Creekside High School
Laura Muesse	Program Manager NCADD-OC Community Alliance Network
Jeff Noble	Commander, Irvine Public Safety City of Irvine
Lisa Peasley	School Resource Officer Irvine Public Safety
Leigh Poirier	Associate Director, Health Education Center University of California, Irvine
Ellen Reibling	University of California, Irvine – Health Education
Stacey Zapanta	County of Orange – ADEPT (Drug and Alcohol Prevention and Treatment)

SUPPORT TO FAMILIES IN NEED

NAME	TITLE & ORGANIZATION
Deborah Brunn, MS, MFT (Liaison)	FOR Families Program Supervisor City of Irvine
Jeanne Flint	Executive Director Women Helping Women
Susan Holt	Irvine Unified School District – Guidance Resources Irvine Family Resource Center
Michelle Khzouz	City of Irvine, Community Services Supervisor
Natasha Layne	Jamboree Housing Housing with a Heart
Margie Wakeham	Executive Director Families Forward
Isabelle Krasney	Corporate Relations Executive, Orange County One-Stop Center
Sam Mistrano	Jamboree Housing
Taube Levitt	Human Options

CHILDREN'S MENTAL HEALTH TASK FORCE

NAME	TITLE/ORGANIZATION
Alan Albright	Division Manager Children & Youth Services O.C. Health Care Agency Behavioral Health Services
Rose Anderson (Liaison)	Senior Management Analyst, City of Irvine
Shirin B. Ansari, Ph.D	Center for Learning and Behavioral Solutions
Kika Friend	Director, California Alliance for Minority Participation
Dennis Herzog	Psychologist Supervisor, Irvine Unified School District
Adele Heuer	Principal, Beckman High School – Tustin Unified School District
Susan Holt	Elementary Prevention Coordinator IUSD Guidance Resources
Christine Honeyman-Fazio	Former Director of Guidance Resources, IUSD
Karen Klinek	Assistant Principal Creekside High School
Anne Kranz	Director of Programs Families Forward
Donna Pollard	Children, Youth and Family National Association for Mentally Ill
Dr. Shida Saam	Doctor Family Care Center of Irvine
Sharon Wallin	Board of Education Member Irvine Unified School District
Meghan Wright	Sr Leader City of Irvine-Youth Action Team

ADVISORY COMMITTEE

NAME	TITLE & ORGANIZATION
Nancy Colocino	Director of Guidance Resources Irvine Unified School District
Shiva Farivar	City of Irvine Community Services Commission
Allan Hodgert	Professor, Concordia University
Merri Jo Hooven	IUSD School Readiness Coordinator
Julie Hudash	CEO-Team Kids
Mariam Khosravani	City of Irvine Community Services Commission
Jeff Noble	Commander, Public Safety City of Irvine
Julie Tapp	Community Resident
Sharon Wallin	IUSD Board of Education Irvine Unified School District
Kathy White	Director of Childcare Services, UCI

APPENDIX B: Community Input Report

From October through December 2007, Gibson & Associates contacted agencies, community-based organizations and community stakeholders to elicit their participation in the City of Irvine's Strategic Plan for Children, Youth and Families Community Input Process. Community stakeholders representing diverse ethnic groups, constituencies or community-based organizations were asked to provide input through a key informant interview or focus group. Young people were also invited to share their experiences and perspectives at a youth summit or at a focus group at a local high school.

Key Informant Interview Outreach

Key informant interviews are designed to elicit information from key stakeholders in the community about how best the Strategic Plan can support their community. Gibson and Associates conducted nine key informant interviews with representatives from cultural, religious and linguistic minority groups and organizations. Key informant interviews were conducted with the following schools and organizations:

1. The City of Irvine's Childcare Committee
2. Irvine Global Village Planning Committee
3. Korean Parents Association
4. Merage Jewish Community Center of Orange County
5. Network of Iranian-Americans of Orange County
6. New Horizon (Islamic) Elementary School
7. South Coast Chinese Cultural Center

Key Informant Interview Preliminary Results:

1. Irvine's cultural diversity was viewed as an asset by many people interviewed. Participants identified the following assets in the immigrant and first generation communities in Irvine:
 - Many immigrants highly value education as a priority for their children; programs and services that improve educational opportunity and attainment resonate strongly among cultural and linguistic groups;
 - Many culturally and linguistically diverse families have moved to Irvine because they have achieved a high level of financial and professional success;
 - The Global Village Festival was viewed as a positive forum for families of diverse backgrounds to get together and learn about each other;
 - A variety of organizations within Irvine provide cultural and linguistic communities an opportunity to gather with those who share their cultural background;

- Elders are viewed as a symbol of strength in many communities and command respect from the younger generations; this was viewed as an untapped resource.
2. According to interviews with members of diverse cultural and linguistic groups, many people within their community are less engaged in civic processes and less likely to access services sponsored by the city for a variety of reasons, including:
- Lack of time; many working families do not have time to engage in civic activities, because they are pre-occupied with building their careers and financial success;
 - Immigrants are sometimes unfamiliar with the forums for engaging in civic life and do not know how to engage in the community;
 - The events sponsored by the city do not conform with the cultural values of some cultural and religious groups;
 - Social service providers and educators may not be sensitive or familiar with the values and priorities of children and families of diverse cultural and linguistic backgrounds;
3. In regards to the needs of youth and families in Irvine, the following needs were identified in relation to diverse cultural and linguistic populations:
- Services and information available in the predominant languages spoken in Irvine other than English (Farsi, Chinese, Korean etc.)
 - Supports to families that address the generation gap and acculturation issues for foreign-born parents and their American born children, especially in regards to adolescence
 - Additional services, education and outreach to address domestic violence and abuse within immigrant communities
 - Expanded child care slots (especially affordable), with an emphasis on English Language Development among low income families
 - Among Asian ethnicities, elders were identified as an untapped resource who could serve as “promotoras” about health education, city resources, and acculturation/parenting issues to their respective communities (as volunteers)
 - Ethnic media needs to be included in all outreach and engagement efforts
 - Additional opportunities for inter-cultural engagement were identified by many as a need
 - Low income families exist within Irvine, but are very hidden; among some cultural groups, cultural norms against airing a family’s problems keep people from seeking help
 - Underage drinking was not viewed as a major problem or relevant issue among cultural and linguistic groups that were interviewed
 - Programs and services that support the educational achievement and attainment of young people were likely to resonate with the

cultural values of many diverse groups in Irvine, according to participants.

Focus Group Outreach

Focus groups are designed to gain input from community members about the Strategic Plan’s priority areas. Gibson and Associates conducted five focus groups. Below is a list of all completed focus groups:

Collaborating Group	Number of Participants	Targeted Group	Date Completed
Chinese Cultural Center	8	Chinese Community	11/28/07
Creekside High School	12	High School Students	11/27/07
Jamboree Housing	15	Residents of Affordable Housing Complex	11/27/07
Korean Parents Association	10	Korean Community	11/27/07
Network of Iranian-Americans of Orange County (NIPOC)	7	Persian Community	11/15/07

Focus Group Results:

The following summary points were drawn from the focus groups noted above.

Assistance for Low-Income Families

1. According to participants, there is a lack of resources for families who do not meet the low-income bracket in Irvine but still need assistance.
2. There was a perception by family members that sports uniforms and school supplies are too expensive for low-income families and may prevent some young people from engaging in team sports and other educational activities.
3. According to participants, families do not know where to start looking for services and resources. It is perceived that the system is confusing and community members would like the City of Irvine to do more outreach and marketing to promote available services.

Health and Fitness for Children and Youth

1. Participants identified a need for affordable fitness centers that are accessible to both youth and adults.
2. With the recent increase in price of school lunches and decreased portions, both parents and youth perceived that students often skip lunch

- and arrive home hungry. High school students reported that they purchase food at fast food chains off campus.
3. Participants perceived that there are ample amenities in the City, but they are not necessarily accessible to these amenities on foot. Community members would like the city to do a walking tour of the city to ensure that Irvine has adequate sidewalks for pedestrians.
 4. According to participants, teens want healthier and better tasting options in schools.

Pre-Kindergarten Child Care and School Readiness

1. There is a perceived lack of pre-school, school readiness, and after school childcare programs. According to participants, there are long waiting lists and most facilities are not affordable.
2. Parent participants identified a need for more structure and more inclusion of academic and enrichment activities such as music or language arts. According to participants, the quality of school readiness and after school programs should be standardized.

Youth Access to Alcohol and Underage Drinking

1. There was a perception that there are few activities for youth in Irvine. According to students, boredom was as one of the reasons why there is underage drinking in Irvine.
2. Participants perceived that underage drinking is a social norm in Irvine.
3. According to participants, there is little accountability for underage drinking by law enforcement, parents, and youth.

Additional Findings:

1. Participants perceived that there is a need for cultural competency and sensitivity. According to participants, it is difficult to access resources and services regarding any of the priority areas because of language barriers. For example, the City of Irvine website is only available in English. Also, it was suggested that it would be beneficial to include cultural holidays, customs, and food in childcare and schools.
2. Parents identified affordable mental health services as a need in the community.
3. Participants perceived that there is judgment and barriers between youth and law enforcement. They identified a need for the City to promote better understanding between these two groups, and youth perceived to be targeted by the police.
4. Participants identified the need for better ESL programs to address the language barriers of the increasingly diverse communities in Irvine.
5. Community members identified the need for translators in schools for families who do not understand English well.

Teen Youth Summit:

The Teen Youth Summit was held on November 28, 2007 at the City of Irvine's City Hall and was 1.5 hours in length. The purpose of the Teen Youth Summit was to elicit teen involvement and input about the City's Strategic Plan, specifically with Health and Fitness Among Children and Youth and Youth Access to Alcohol and Underage Drinking. Participants were comprised of 31 high school students from five Irvine public schools, including: Irvine High School, Northwood High School, San Joaquin High School, University High School and Woodbridge High School. The Teen Summit was organized by the City of Irvine's Community Services Department and was facilitated by Gibson and Associates.

Teen Youth Summit Results:

The following summary points were drawn from the Teen Youth Summit.

Health and Fitness for Children and Youth:

1. According to the students, the schools' fitness facilities are usually small and sports teams have priority to the equipment after school. Youth identified the need for weight rooms to be open during lunch to all students.
2. According to participants, most students live near parks but do not patronize them because there is no one to play with. Youth perceived fitness centers as an attractive alternative because they can be physically active without the need to have other people join them. Participants suggested that student discounts should be offered to all high school – aged youth (regardless of whether they are on a sports team & especially to students who are not on a sports team) to encourage students to exercise.
3. There is a perception that the cost to participate in organized sports is too high. It is perceived that joining a sports team is cost prohibitive; participants said that some sports cost upwards of \$500-\$600, when everything is considered (uniforms, traveling costs, camps, etc.).
4. There is a perception that students do not have access to healthy food in school and lunch lines are long. According to the participants, students usually buy fast food because the lunch period is limited to 30 minutes. Students identified a need to have salad bars and healthy deli meats offered at a reasonable price (i.e. the salad bar at one high school is a popular lunchtime item because it is 'fairly' priced).
5. One group cited "Expanding P.E. Activities" as the most effective strategy in addressing health and fitness concerns. Participants perceived the current curriculum as boring and would like to see sports such as ultimate frisbee, soccer, skating and basketball.
6. Participants suggested a need to have more opportunities to play sports during school.

7. Students said that they wanted to be a part of the decision-making process for deciding what would be offered for school lunch. They suggested that the school district could distribute surveys to all students that would allow the district to select lunches based on student choice.
8. The participants suggested adding a cooking class to the school curriculum because students are told what is 'good ' for them to eat but they do not know how to fix the food. They suggested that having a class, such as the ROP Cooking class (with course credits), for students to take would be helpful in changing habits.
9. The participants suggested that the school district should contract with other food distributors, ones who do not deliver frozen foods that need to be reheated. Youth suggested that the school district should buy food from companies that deliver the food fresh and ready to serve because it is healthier and tastier.
10. According to participants, unless you have been participating in a sport for a long time, you may not be skilled enough to join a team at school. It is perceived that there are many students who may want to join a sport but are turned off from it because they do not possess the skills. Students suggested that there should be intramural teams, which would encourage students of varying ability levels to join.

Youth Access to Alcohol and Underage Drinking:

1. Students cited stress as one of the factors in teen drinking in Irvine. Students said that they feel like they are under a great deal of academic pressure at home and school, and that drinking is one way to relieve the stress.
2. It is perceived that the police take away alcohol when they find teens drinking; however, there is little punishment beyond confiscation.
3. Teens believed there should be greater consequences for their peers when they are caught drinking by law enforcement, such as mandatory community service.
4. Students described drinking as "something to do." They would like to see more citywide social and sports related activities such as dances, sports tournaments and trips to amusement parks.
5. Students noted Tustin's Tiller Days as an example of an event they would like to see in Irvine.
6. According to the participants, drugs affect Irvine youth more than drinking; furthermore, youth in Irvine have money and can easily access drugs through a quick phone call.
7. According to the participants, DARE and health class are not effective in preventing underage drinking because the students say they already know the information and do not internalize the important messages.
8. There was mixed reaction to the Social Hosting Ordinance. Students in two groups thought that social hosting laws that criminalize parents would lead to more underground and unsupervised teen drinking. In this case, students perceived that underage drinking would continue outside of the

home more dangerously. Alternately in another group, students thought this would be a good idea to shift some of the focus on parents, as well as the youth, but that parents who are not at home or not aware of what is going on should not get in trouble.

9. The Every15-minute program was cited as the most effective preventative program in deterring teen drinking. Students are walked through a false drunk driving accident.

APPENDIX C: Research Summaries

The following research summaries were used to deliberate planning strategies in each of the six priority areas.

Child Care & School Readiness Task Force

Task Force Research Summary

CHILD CARE AND SCHOOL READINESS TASK FORCE	
Strategy	POLICIES & STRATEGIES FOR INCREASING THE NUMBER OF AFFORDABLE, QUALITY CHILD CARE PROGRAMS
Indicate Target	While not explicitly targeting high need, low-income families, the expansion of child care slots makes child care more broadly available and easier to access. It does not necessarily make child care appreciatively less costly, however. Strategies for improving the quality of child care can, however improve the quality of the less expensive and generally lower-quality child care. Thus, together these policies and strategies can result in increased access to relatively affordable, higher-quality child care. This matrix focuses upon increasing the number of high-quality affordable child care programs. The second matrix examines strategies for improving the quality of child care programs and the final matrix examines non-child care based strategies for improving school readiness.
Description of Approach & Program Elements:	<p>Strategies for increasing the number of high quality child care programs include:</p> <p>Variety of local tax appropriations, user fees, and developer fees:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Creating special taxing districts, e.g. school districts, park districts, or water districts. Pinellas County in Florida was the first county to create a special district for children’s services. Generally districts require approval by the voters and a district board that oversees the funds, which are generated by assessments to property taxes. In some cases, the initial referendum authorizes the district to levy additional assessments within specified limits. A benefit to a taxing district is that once in place, they are difficult to eliminate and so provide reliable funding, plus since the funding source is reliable it can be used to leverage other foundation, corporate and state and federal grant sources. <input type="checkbox"/> Special tax levies, special tax levies are added to existing tax structures like property, sales,

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Strategy

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or personal income taxes. It is best to be mindful of the choice of levies as taxes such as sales tax are *regressive* in that those who are least able to pay wind up paying a disproportionate share of the cost.

- Guaranteed Expenditure Minimums** are referendums that require local cities or counties to spend a minimum percent each year on children’s services, child care, parks or other purposes. Oakland passed Measure K in 1996 requiring the City to spend a minimum of 2.5% of its unrestricted budget on children’s services and requires a governing board to oversee those expenditures. While initially the amount generated was only \$5.2 million, this guaranteed minimum is now generating over \$10 million annually. San Francisco passed a similar measure, Proposition J that generates over \$44 million annually.
- Children’s Trust Funds** are separate designated accounts that have special rules governing their use. A local jurisdiction or a large donor can ‘seed’ the fund and then community donations over time build the account. When a trust fund achieves a high balance, it can generate a reliable ongoing source of funds, however, to generate a significant level of funding requires a large trust. Generally there is a board that determines the use of funds and allocates them. The state of Kansas created such an account in 1999 using funds from the national tobacco settlement to endow the trust.
- Fees or Narrowly-Based Taxes** are typically ‘user’ fees charged for the use of parks, recreation facilities or to obtain licenses (child care, business, marriage, drivers) or for the right to conduct specific activities, like developing housing or business sites. A San Francisco developer fee tax has generated close to \$2 million for its affordable child care fund which provides grants to small child care programs to repair or expand facilities and to provide business expertise and management support. Since these sources of funds do not generate large amounts of funding, they are best used for narrow purposes like providing training programs or small scale facility improvements.
- Special funding sources.** 1) In Watsonville a large child care center was placed at a transportation hub downtown using federal Congestion Mitigation and Air Quality Improvement Program funds administered by the state Department of Parks and Recreation. 2) The City of

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South San Francisco built a 100-child center in the Gateway business cluster to help retain and grow its emerging biotech industry using \$2.7 million in bond funds to supplement developer costs. 3) Use of CDBG and other locally controlled funds to provide child care subsidies has been done in many cities, e.g. Palo Alto, Santa Monica.

Public-Private Partnerships

- In 1994 Chicago’s low-income communities only had five accredited child care programs. With the Creation of the Chicago Accreditation Partnership the city created a public private partnership of local foundations that created teams to work with child care providers and Head Start providers to seek accreditation. Now Chicago low-income communities have 136 early child care programs that are accredited.
- Redwood City formed a public private partnership between child care developers and the city with the city providing land and development financing to create a 156 child center within a planned neighborhood, reducing transit costs and providing a large child care facility within the neighborhood.
- In Irvine, partnerships between the school district and the Irvine CDC have provided land at very low cost to reduce the cost of affordable quality child care. Use of local park land to locate child care facilities might be considered as another strategy for creating more affordable quality care facilities.
- Corporate child care facilities. By developing new corporate child care facilities dedicated to employees of the company will reduce the demand on other Irvine-based child care programs and increase the stock of child care generally. Children’s Home Society has developed a business of helping corporations and other community organizations develop child care facilities, a model worth considering in Irvine. The benefits to corporations of site-based child care are well-documented:
 - o Greater employee recruitment
 - o Increase in employee retention

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Strategy	POLICIES & STRATEGIES FOR INCREASING THE NUMBER OF AFFORDABLE, QUALITY CHILD CARE PROGRAMS
	<ul style="list-style-type: none">○ Employees available to work more hours○ Increased work/life integration○ Increased rating of companies regarding commitment to employees○ Volunteer opportunities for employees○ Overall therapeutic environment effect on corporate culture. <p>Maximizing Federal and State Revenues</p> <ul style="list-style-type: none">□ There are over 100 federal funding streams that can support child care programs, far too many to describe in this document. But a potential strategy would be to develop an office of child care development for the City or to contract this out and develop a local expertise in maximizing these and other resources and advancing the development of child care throughout the City. <p>Ordinances that require developers to set aside land or, better, fully develop child care facilities within new housing and office developments</p> <ul style="list-style-type: none">□ While many jurisdictions require the set aside of land for future child care development, in Irvine the costs of that development have prohibited development of child care and have resulted in the set asides eventually being used to develop retail facilities like small markets. The Task Force might consider recommending to the City Council an ordinance that requires developers to fully develop the child care site rather than to just set aside the land.□ Developing new housing-childcare finance programs can be crafted to include funds for developing child care facilities and even for operating subsidies that can make the care more sustainable and/or more affordable. California's Family Housing Demonstration Program provides financing for child care facilities as part of the financing available for low-income family housing. (Teri Bressler, Program Manager, California Department of Housing and Community Development (916) 327-2896□ Research summarized in a paper published by the National Economic Development & Law

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Strategy	POLICIES & STRATEGIES FOR INCREASING THE NUMBER OF AFFORDABLE, QUALITY CHILD CARE PROGRAMS
	<p>Center identifies about six development partnership models, including the two below.</p> <ul style="list-style-type: none"> ○ In Morgan Hill, Depot Commons, includes three buildings with 12 co-housing units and a fourth unit that includes a 2-bedroom unit with an 1175 sf bottom floor designed to serve as a family day care program serving the Depot. Developed by a non-profit housing provider with housing finance resources and technical assistance from a child care resource specialist. For information: Marie Junker, Executive Director, South County Housing, 408 842-9181. ○ Willow Springs Condominiums is a ten unit development with one unit designed and reserved for a family day care program. For more information: Alexander Pratt, President, Drew Economic Development Corporation. 310-632-3290
Relevance to Task Force	One of the most important contributors to school readiness is for children to experience at least 2 ½ hours per day of high quality child care. The absence of sufficient child care slots drives the cost up and/or makes accessing child care more difficult. The development of more high quality child care facilities will provide more opportunities for young children to access these programs.
Outcomes	<ul style="list-style-type: none"> <input type="checkbox"/> Smaller waiting lists for affordable child care <input type="checkbox"/> More child care facilities. <input type="checkbox"/> More accredited child care facilities providing more high quality child care slots <input type="checkbox"/> Higher proportion of children entering child care settings ready to learn
Staffing:	To implement any of the strategies identified above requires a focused effort and narrow expertise in child care regulations, funding streams, finance strategies, and corporate culture. Children's Home Society has developed one model for creating a team dedicated to providing leadership and technical assistance in developing corporate and other forms of child care. Creating a small local team of individuals with expertise in child care development or contracting with an entity with that expertise could result in ongoing efforts to expand the child care system and to monitor its quality.
Cost Factors:	A dedicated, reliable funding source to support an office and two or three individuals would be required to create a child care development team or support a contract for those services. Over time, one 'deliverable' for the team could be the development of a funding stream that supports both ongoing child care development and the team itself.

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Strategy	POLICIES & STRATEGIES FOR INCREASING THE NUMBER OF AFFORDABLE, QUALITY CHILD CARE PROGRAMS
Challenges:	<p>Irvine does not have a track record of passing special tax bonds Corporate community is tied to the Irvine Public Schools Foundation and competing for corporate funds with IPSF might not be viewed favorably. Might it be possible to advocate with the IPSF to expand its focus to early child care given the importance of early child care to school readiness, school success and life outcomes?</p>
Local / Regional Expertise or Places where practice is in operation:	<ul style="list-style-type: none"> <input type="checkbox"/> Irvine Child Care Project operates child care programs at 22 elementary sites. This model could be applied to early child care using corporate, park, faith-based, new development, and other sites. <input type="checkbox"/> Child Care Development, Inc. has successfully developed child care partnerships in conjunction with the Irvine Child Care Project and could expand this effort to developing sites at parks, faith-based sites, vacant schools, and corporate sites. <input type="checkbox"/> Children and Family Futures and City-funded Child Care Study could be a resource for information to support the need for additional child care. <input type="checkbox"/> Funded by First 5, the Child Care Committee-School Readiness Initiative (IUSD) and Child Care Study: The city has an infrastructure of collaborative partners focused upon child care who are committed to creating a broader range of high quality, affordable child care options for residents and employees of Irvine companies. <input type="checkbox"/> Child Resource Center (CRC): The CRC is a program run through the Child Care Coordination Office. It is housed in ½ of a portable building at Heritage Park (between the Fine Arts Center and the Public Library. The other half of the building is leased by the City to the Irvine Community Nursery School (a co-op preschool). The CRC is intended as a place for parents, teachers, students and child care providers to expand their knowledge of child development, gain ideas for children's activities, and enhance their creativity with on-site tools and equipment. <input type="checkbox"/> First Five of Orange County is a permanent source of funding and technical support. It might be possible to obtain funds to seed the development team or for the development team to seek funds from First 5 for child care development activities <input type="checkbox"/> The Great Park affords an opportunity to partner with a developer to create a model child care

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	<p>program (see Mills Lab in the next matrix) or simply to develop new child care programs within that development.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Three vacant elementary schools are potential sites for child care development and Cal. St. Fullerton also could be a site for child care modeled after the UC Irvine child care programs or the Mills Lab described in the next matrix.
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>“Creating Dedicated Local Revenue Sources for Early Care and Education” Carnegie Corporation of New York. The Finance Project. Summarizes six strategies for generating local revenue streams to support local child care systems. http://www.carnegie.org/starting_points/orderform.html. This URL is a link to the Carnegie Corporation’s <i>Starting Points</i> initiative that has published numerous articles in a wide range of early child care areas, including using mental health strategies to improve school readiness, financing family resource centers, and a tool-kit for creating a local child care development fund.</p> <p>“Financing Strategies to Support Comprehensive, Community-Based Services for Children and Families,” National Child Welfare Resource Center for Organizational Development. Mostly relates to state strategies.</p> <p>“Thinking Broadly, Finance Strategies for Comprehensive Child and Family Initiatives.” A comprehensive summary of a variety of strategies for making better use of existing funds, maximizing federal and state revenue, creating more flexibility in the use of existing funds, building public-private partnerships, and creating new dedicated revenue streams.</p> <p>Benefits of Corporate Child Care, Children’s Home Society. Outlines benefits and provides examples of corporate day care programs. Children’s Home Society has created a development team that focuses upon helping businesses develop child care programs. http://www.chsfs.org/Corporate_Locations_and_Services.html</p> <p><i>Linking Child Care Development and Housing Development: Tools for Child Care Providers</i></p>

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Strategy	POLICIES & STRATEGIES FOR INCREASING THE NUMBER OF AFFORDABLE, QUALITY CHILD CARE PROGRAMS
	<p>and Advocates. National Economic Development & Law Center. This is an excellent primer on a range of policy and practices that foster expanded child care development as part of housing and community development strategies. The site below houses numerous studies and tool kits for child care development. http://www.nedlc.org/Publications/publications_childcare.htm</p> <p>Strategies for City Involvement in Child Care and Early Education, Kirsten Anderson. An article outlining specific strategies to help cities maximize a range of policies and funding streams to expand child care systems. Ms. Anderson will be participating in our November 15th planning session. http://www.cacities.org/index.jsp?zone=wcm&previewStory=26852</p>

CHILD CARE AND SCHOOL READINESS TASK FORCE

Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
Indicate Target	Improvement in all child care programs, with a focus on family day care and unaccredited child care center providers.
Description of Approach & Program Elements:	<p>Four kinds of strategies have been identified in the Task Force and in the literature as having potential for improving the quality of child care programs. Research indicates that low child-adult ratios, highly trained staff, parent training, bridges to elementary school, and intensive service delivery are key elements to high quality child care that are most important to school readiness (Gallinsky 2006). Research also indicates that the largest ‘return on public investment’ is in targeting low-income, high risk families (Barnett, numerous studies) as an investment in early quality care results in sizable gains in test scores, less grade retention, fewer placements in special education, higher educational attainment, reductions in crime and increases in other indicators of life success. All three of the model programs identified below achieved impressive gains in all of these outcomes.</p> <p>Model Early Child Care Program/Lab: Develop a local model of exemplary practice for children ages 0-4 that can be used as a training facility and to help child care operators observe exemplary practices that can be incorporated into their programs. Program could include all the components of effective early childcare and school readiness strategies identified above and gleaned from programs like those below. Ideally this program would enroll low-income, high risk families and provide the care at reduced or no cost. It might be good to identify a facility within or near one of the low-income housing developments (Jambouree housing) to facilitate engaging these families. Research shows that the biggest impact on school readiness is achieved by working with families where the home environment is less likely to be enriched with healthy child development activities.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Mills College in Oakland has a child care school that serves as a lab for its child development students. Linkages with UC Irvine and Cal State Fullerton, Irvine could result in their child development students being placed at the center, lowering the cost and providing valuable experience. Child care and family day care staff from throughout Irvine could visit, observe evidence-based pedagogy and rich literacy and child development environments, and debrief.

CHILD CARE AND SCHOOL READINESS TASK FORCE

Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
	<ul style="list-style-type: none"><li data-bbox="611 321 1976 532">□ Perry Pre-School Model is a part-day early care program for three and four-year olds that utilized a High Scope curriculum that emphasized creating opportunities for child choice and decision-making. 5.7-1 child to teacher ratio and no more than 25 children per class, typically 20. Weekly home visits with strong parent education component focusing on child development and home environment, helping caregiver to assume role as primary teacher of child.<li data-bbox="611 540 1976 938">□ Abecedarian Model: This full-day, 50 week a year program was based at Chapel Hill, North Carolina at the Frank Porter Child Development Center at the University of North Carolina. It is extremely rich in staffing and family support as it targeted extremely high risk families using 13 factors for selection, including: below 50% of the poverty line and with maternal IQ below 80. Children were enrolled at 6 weeks of age with care groups of 6 with two adults until the children reached one year then the care group expanded to eight with two adults. In the third year, the ratio was 10 preschoolers to two adults and in the fourth year it was 14 preschoolers to 2 adults. The program included a “bridge” program called the Home School Resource Program. This program utilized PhD level teachers with five years experience working with high-risk families. They worked with a 12-family caseload and worked with teachers and families to help address the individual needs of each child.<li data-bbox="611 946 1976 1344">□ Chicago Child-Parent Centers: Developed by Lorraine Sullivan in 1967, these centers were funded by Title 1 federal program. The model was replicated in Madison, Wisconsin with similar results. The program focused upon building child literacy skills and a strong, positive attitude toward school while fostering a strong parent involvement component. Child to adult ratio was somewhat higher than Perry and Abecedarian, 8.5-1, with parent volunteers used extensively. The program blended teacher-directed activities with play groups that fostered child initiated activities, much like Perry. Paraprofessional parent liaisons (typically former parents) conducted limited home visits and helped parents access community resources. Parent education occurred mostly at the centers. One innovation was that children from the early care program matriculated to kindergarten as a group all being in the same classroom and since the child care was at the elementary school, there was a seamless transition.

CHILD CARE AND SCHOOL READINESS TASK FORCE

Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
	<p>Child care / Family Day Care Operator/Staff Training: Develop a range of training opportunities for current child care operators. Research indicates that this is one of the most effective means of improving childcare quality and hence improving school readiness.</p> <ul style="list-style-type: none"><input type="checkbox"/> Rochester Family Child Care Satellite System is an excellent model for improving the quality of family day care. Curriculum development specialists meet weekly at family day care settings to provide lesson planning support, offering suggestions, providing curriculum and materials, and observing, modeling techniques and coaching the provider. Through this support, the Satellite system promotes ongoing science, math, technology, and literacy development strategies in the centers. The system now provides support to over 550 family day care providers. Beyond coaching support, the visiting specialists help providers identify field trips, provides early screening assessments.<input type="checkbox"/> The Mills Lab above offers one model for providing a site that models exemplary practices while doubling as a venue for training students entering the child development/child care field. This approach could be used to train existing child care and family day care providers.<input type="checkbox"/> Model programs such as those above utilize a range of curriculum and instructional strategies that could be incorporated into training for early care providers, thereby enabling local programs to more closely mirror the approaches implemented by these programs while building the understanding and expertise of early care staff. <p>Programs that ‘bridge’ existing child care and family day care programs by augmenting them with additional staffing and services to raise the quality of the programs. One such Preschool Bridging Model program exists in Sacramento within the Elk Grove Unified School District. Credentialed teachers are placed in existing child care or family day care programs along with professional development coaches who rotate from site to site. The program serves 10 sites (3 family day care, 2 faith-based sites, one Montessori site and four private child care centers) 216 children, reducing child-adult ratio, increasing the qualifications and expertise of the child care staff, intensifying the level of instruction, and infusing the program with evidence-based instructional approaches. The program also provides early screening and assessments (using Desired Results</p>

CHILD CARE AND SCHOOL READINESS TASK FORCE

Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
	<p>Developmental Profile, ECERS and FDCERS), parent leadership and family support services, and health and social services integrated into the program. It costs \$1.5 million to operate or approximately \$7000 per child.</p> <p>Use of Volunteers to improve quality. Utilize interns and volunteers strategically in family day care and child care settings to reduce child-adult ratio, to introduce and model developmentally appropriate classroom activities that stimulate healthy child development, and to introduce and model literacy development classroom strategies. Research indicates that a low child-adult ratio is one key factor in providing the kind of intensive program necessary for preparing students for kindergarten. Another quality is that the staff be highly skilled and well-trained. With a high percentage of Irvine teachers and others in the helping fields approaching retirement, this represents a pool of highly skilled, experienced individuals who could be recruited and placed in early care centers to provide small group math, literacy, art, music and other developmentally appropriate activities. In child care settings with 12-1 student to adult ratios, the placement of just one adult would reduce the ratio to what is offered in the best practice models described above. Trained volunteers could also provide parent training in dialogic reading (see below under school readiness strategies), an approach to reading that nurtures a young child’s love of reading and builds literacy and inquiry skills. Taken together, volunteers could be used to augment direct service staff in early care centers, to assess early care centers (below), and to provide parent education and training to parents enrolled in early care programs. Essentially, through the use of highly skilled volunteers, high student-adult ratios can be transformed into low student-adult ratios and programs that have low-skilled, poorly trained teachers can be infused with more experienced and better trained volunteers.</p> <ul style="list-style-type: none"><input type="checkbox"/> Jumpstart is a national non-profit organization whose goal is for every child in America to enter school prepared to succeed. Jumpstart was founded in 1993 at Yale University at the intersections of two national trends: the public need for quality early childhood programs and the emerging national service movement recruiting thousands of college students to community service. During the first year of the program, 15 college students worked one-on-one with 15 preschoolers at New Haven Head Start. The national Jumpstart office chooses

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Strategy

STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:

colleges and universities across the nation to pair college students who care about early education with at-risk preschool aged children. Jumpstart programs provide college students with the opportunity for one-on-one adult-child interactions and relationships in order to encourage the development of language, literacy, social-emotional, and initiative skills that will promote a positive attitude towards learning and lead to future school success. For information on this federal program, go to <http://www.jstart.org>.

- City Year is a National Service Corps program through which young adults ages 17-24 devote a year to volunteer for one year in communities across the country. City Year Boston is a City Year project developed through National Service Corps funding, however, some variation on this approach could be developed locally with local funding to support stipends and supervision. A City Year Irvine could be developed for youth who take a year to participate in City Year Irvine community service before entering college. The City Year Irvine program could use the same framework and structure as other City Year programs, but focus volunteers on early child care, providing child development training prior to placing students in centers. <http://www.cityyear.org/>

Use of trained volunteers to assess child care programs. Utilize trained graduate level field workers, interns and volunteers to conduct site assessments of child care and family day care providers to help identify programs that would benefit from training, facility improvements, curriculum enrichment, an infusion of trained volunteers, and other elements of high quality child care. If volunteers could also be trained to conduct site assessments using standardized tools like Early Childhood Environmental Rating Scale (ECERS) and Family Daycare Environmental Rating Scale (FDCERS) sites that would benefit from volunteers could be identified. Site assessments could also collect information on families enrolled in the center and a scale could be developed to identify early care programs that are serving high-risk, low-income families so that resources could be targeted to those sites. More research is needed in this area, as no exemplary practice has been identified.

Elective child development courses in IUSD high schools. Semester or year-long course in child development courses that offer a blend of classroom instruction and placement in child development

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Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
	<p>settings for 'internships' where students apply child development theory. Research indicates that such courses both improve student understanding of child development and attitudes toward children. High school students as volunteers have been used extensively as tutors and activity leaders in elementary after school programs. Chabot Science and Space Center trains students to conduct science experiments in after school programs throughout Oakland. More research is needed in this area, as no exemplary practice has been identified.</p> <p>Implementation of uniform school readiness assessment for entering kindergartners. By implementing the administration of a standardized school readiness assessment across child care settings and by asking parents for information about where their child received early care (family, center, or home-based), the district will be able to provide valuable information about the quality of care in the community and those programs whose children consistently arrive at kindergarten ready to learn. This will facilitate targeting training and volunteer support to programs in greatest need. There are a wide array of assessment instruments available for this purpose, many of which can be conducted through surveys of parents in combination with classroom-based observations. See</p>
Relevance to Task Force	Child care strategies outlined above will increase the expertise of child care workers (training), reduce the child-adult ratio (volunteers), increase the intensity of services (volunteers) and help identify programs in need of training, improvements in the child care environment, and / or an infusion of volunteers to reduce child / adult ratio. All of these program enhancements are identified with improved school readiness.
Outcomes	<ul style="list-style-type: none"> <input type="checkbox"/> Improved ECERS and FDCERS ratings of early care providers across system <input type="checkbox"/> Reduced child-adult ratio <input type="checkbox"/> Increased implementation of effective literacy instructional strategies <input type="checkbox"/> Improved early care environments more conducive to healthy child development <input type="checkbox"/> Increased volunteerism in early care settings
Staffing:	Model Early Care Program. Child-adult ratio of 6-1 for at least 2 ½ hours per day to allow for intensive program with rich literacy and math component. Staff should be well-trained and comfortable with being observed and sharing observations about how their program operates. Staff

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Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
	<p>must be articulate in describing how the program implements research-based practice.</p> <p>Training for Early Care Providers. Training team with clear understanding of child development, early care facility environments, site assessments (ECERS, FDCERS, etc.), use of research based curriculum and pedagogy, literacy acquisition, and evidence-based exemplary program models. Also utilize existing resources at UCI and CSF/Irvine.</p> <p>Volunteers / interns / high school students. Recruitment, placement and training team to engage, orient, train, place, and supervise volunteers in a variety of roles from facility improvement, reading to children, facilitating small groups, assessing site operations/environments, training parents.</p>
Cost Factors:	<p>The estimated cost of operating model program is approximately \$12,000 per year per child using fully paid staff, this includes operating an intensive three hour program at a 6-1 ratio with wraparound day care for the remainder of the day. If the City operated a single 'model' program for 30 children, costs would run approximately \$400,000 per year if you include additional resources to facilitate using the program as a training program.</p> <p>Costs for developing an intensive volunteer/intern/student recruitment, training, placement and supervision system would be significantly smaller and could be conducted in combination with the strategy for facility development, essentially creating a team that is expert in early care program design, facility development, and program operations that can work with businesses, faith-community, the school district, university/colleges, parks, and the city to develop sites and then coach them in implementing research-based classroom strategies and in utilizing volunteers. An effective and systematic use of skilled, trained volunteers could have an especially large impact upon the lower quality, inexpensive early care providers as at no cost to them, as additional adults are available to read to children, introduce structured activities, and otherwise enrich the program.</p>
Challenges:	<p>Cost of model program.</p> <p>Investment in time and funding to hire training team and to get system of volunteer recruitment, placement and training operational.</p> <p>Availability of providers most in need to participate in training and planning activities</p> <p>Identification of early care sites most in need of support</p>
Local / Regional	The Child Developmental Lab at UC Irvine is supervised by Dr. Jodi Quas, an Associate Professor

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<p>Expertise or Places where practice is in operation:</p>	<p>in the Department of Psychology and Social Behavior at UCI. She has been conducting research for over 15 years and is recognized as a leading researcher and significant contributor to the field of child development. Dr. Quas works with several dedicated graduate students on many of the projects. The lab could play a role in evaluation of the child care system or a consultant role in developing a model program.</p> <p>UC Irvine Vanguard Center. University of California, Irvine, has received \$25.9 million from the National Institutes of Health to expand the National Children’s Study – a long-term study assessing environmental and genetic factors on child health – to San Diego and San Bernardino counties. This award adds to the initial \$14.6 million received by UC Irvine in 2005 to establish the Orange County, California, Vanguard Center of the NCS. The NCS eventually will follow a representative sample of 105,000 children nationwide from before birth to age 21, seeking information to identify the underlying genetic and environmental causes of the nation’s most pressing child health problems, including premature birth, obesity, diabetes, asthma, autism and ADHD. This research could be of value to the childcare and nutrition and fitness Task Forces.</p> <p>UC Irvine Child Development Center. Over the past two decades, The University of California, Irvine Child Development Center has developed many programs to provide service to the community. These programs provide children with developmental disabilities the chance to overcome these problems and succeed in society. The center could provide training to child care providers to better and earlier identify child developmental disabilities and to help them work better with these children. It could also train a mobile assessment team to conduct assessments at early care centers.</p> <p>UC Irvine. Professor Deborah Lowe Vandell is the principal investigator for several large multi-site studies. The NICHD Study of Early Child Care and Youth Development is a national collaborative study examining child care, school, and family issues regarding children's development. Professor Vandell could provide expertise in the design of model early care sites.</p> <p align="center">Chen, Chuansheng, Ph.D., University of Michigan</p>

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The effect of cultural beliefs and practices on children's cognitive and social development; the influence of family environment on motivation and academic achievement; acculturation and Asian-American adolescents' psycho-social development; and methodological issues in cross-cultural research.

Clarke-Stewart, Alison, Ph.D., Yale University

How young children's skills and psychological well-being are affected by their social environments and the people in these environments; outcomes of children in different custodial arrangements following parental divorce; effects of infant daycare on development; parental knowledge and behavior, and children's eyewitness testimony.

Goldberg, Wendy A., Ph.D., University of Michigan

The family context of infant and child development; parental work, family relations, and child development; parental school involvement; marital quality, gender roles, and parent-child relations; role of the father in child development, and adults' transition to parenthood. A recent collaborative venture focuses on the early development of children who later are diagnosed with autism.

Sarnecka, Barbara W., Ph.D. University of Michigan

Cognitive development, language development, number concepts, conceptual change, parallels between individual cognitive development and the historical development of science & mathematics.

Vandell, Deborah L., Ed.M, Harvard University, Ph.D. Boston University

Human and developmental psychology, child care and youth development, work and family, and social and personality psychology. Dr. Vandell is the principal investigator on the NICHD study identified above.

Child Resource Center (CRC): The CRC is a program run through the Child Care Coordination

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	<p>Office. It is housed in ½ of a portable building at Heritage Park (between the Fine Arts Center and the Public Library. The other half of the building is leased by the City to the Irvine Community Nursery School (a co-op preschool). The CRC is intended as a place for parents, teachers, students and child care providers to expand their knowledge of child development, gain ideas for children's activities, and enhance their creativity with on-site tools and equipment.</p> <p>Cal. State Fullerton, Irvine Child & Adolescent Studies Department. The department that houses Sharon Seidman, one of our Task Force members. As with UCI academics, CSF could inform design of programs designed to improve quality.</p> <p>Merage Foundation offers grants to harness retired volunteers (early care is one of their foci). Grants range from \$10,000 to \$20,000 but must target low-income families. Could be used to conduct site improvement projects at child care / family day care facilities identified as in need of enrichment or improvements. http://www.meragefoundations.com/childrenfirst_grantawards.html</p> <p>In addition to the above, local organizations or programs identified in the matrix for Increasing the number of affordable childcare programs could play key roles in strategies designed to improve childcare program quality.</p>
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>The Next Generation of Antipoverty Policies, Reducing Poverty through Preschool Interventions, The Children of the Future. An excellent examination of the cost-benefit to society and individuals of quality early child care. Provides description of four high quality program models that have been studied longitudinally and then proposes a practical model based upon these four. Excellent resourc. http://www.futureofchildren.org/pubs-info2825/pubs-info_show.htm?doc_id=521579</p> <p>Increasing the Effectiveness of Preschool Programs, Debra J. Ackerman and W. Steven Barnett. Brief article that outlines the factors that contribute to high quality child care (well educated teachers,</p>

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Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
	<p>low child-adult ratios, ongoing professional development). Points to importance of clear standards defining program quality and describes Deming's model of Plan, Do, Study, and Act as a model of ongoing reflection and continuous quality improvement. Excellent short article. The URL below is to the National Institute for Early Education Research at Rutgers which provides a link to this article as well as links to many other relevant studies and resources. http://nieer.org/docs/index.php?DocID=149</p> <p>Early Child Development in Social Context: A Chartbook, The Commonwealth Fund. Excellent resource for developing outcomes and linking them to specific goals and strategies. Provides indicators for: socio-emotional development, intellectual development, child health, family functioning, parental health, health care receipt, community/neighborhood factors, and child care. In addition to a variety of indicators for each of these domains, the article provides practical implications for policy makers and practitioners. Excellent. http://www.commonwealthfund.org/publications/publications_show.htm?doc_id=237483</p> <p>The Preschool Bridging Model. Brief description of the Elk Grove program described above. Available in pdf by googling Preschool Bridging Model Elk Grove. It is the first item listed.</p> <p>Closing the Achievement Gaps, Haskins and Rouse. Children of the Future. Excellent short article highlighting the importance of training parents to be the primary teacher of their children and describing the family literacy program developed by Grover Whitehurst, Director of the Institute of Education Studies. It also references the work at Perry and Chicago Child-Parent Centers for their work with parents. Article also cites the FACES study that shows that poor children who graduate from Head Start programs still tend to begin Kindergarten behind peers who from higher income families. Haskins and Rouse recommend involving parents to the maximum degree, coordinating pre-school with kindergarten programs, developing and maintaining high standards, providing professional development, and conducting external evaluation of child care sites. http://www.aecf.org/KnowledgeCenter/Publications.aspx?pubguid=%7B9A41F191-8F12-47B7-81DA-A60535F0C0AB%7D</p>

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National Association for the Education of Young Children. The NAEYC web-site has an extensive range of research and resources in virtually every aspect of early childhood development with special resources for parents, providers, policy makers and the broader community.
<http://www.naeyc.org/resources/research/>

The Economic Benefits of High Quality Early Childhood Programs: What Makes a Difference, Ellen Galinsky, Families and Work Institute. A very well-researched summary of the economic benefits to the public and private sector of specific kinds of early childhood programs and an analysis of the program components that contributed to improved outcomes for children attending the Perry, Abecedarian, and Chicago Child Parent Centers. The URL houses this study and several others of value, including one link to The Learning Modules are a 12-part facilitated learning process that bridges the gap between research and practice for teachers in center and home-based early childhood settings for children from birth through school-entry. They have been enthusiastically received by the early childhood field, and, to date, they have been field tested in seven states: Florida, Illinois, New Mexico, North Carolina, Oklahoma, Pennsylvania and Rhode Island. Their design is based on the research-based premise that teaching practice improves when teachers are engaged in understanding their own and children's learning; when they have a better grasp of the best knowledge in child development; and when they become more intentional about their own practice. <http://familiesandwork.org/site/work/earlychildhood/main.html>

Child Care & Early Education Research Connections, National Center for Children in Poverty, Columbia University. Article that identifies key factors in high quality early care and describes how families in poverty are more likely to utilize family day care and presents research showing that family day care is less likely to be of high quality. Pinpoints the critical importance of reading as a core component of early care. URL is to the National Center which has many other articles relevant to early care policy and practice. <http://www.childcareresearch.org/discover/index.jsp>

Early Childhood Curriculum Resources: The following curriculum has been used in a variety

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Strategy	STRATEGIES FOR IMPROVING THE QUALITY OF CHILD CARE:
	<p>of model early care programs:</p> <ul style="list-style-type: none"><input type="checkbox"/> High/Scope Curriculum http://www.highscope.org/<input type="checkbox"/> Bank Street College http://www.bnkst.edu/<input type="checkbox"/> Direction Instruction Activities: http://www.lessonplanspage.com/<input type="checkbox"/> Peabody Development Kits; http://ags.pearsonassessments.com/group.asp?nGroupInfoID=a8550

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Strategy	STRATEGIES FOR INCREASING SCHOOL READINESS
Indicate Target	<p>Children who have not experienced quality child care or who despite this are not fully ready for school upon entry into kindergarten. Home visiting and parent education programs are appropriate to any family, however, have the greatest impact if targeted to families who are low-income, low literacy, and where a language other than English is spoken in the home.</p>
Description of Approach & Program Elements:	<p>There are a number of strategies identified in the literature as being particularly effective in improving school readiness of children and of the schools receiving them:</p> <p>High quality child care programs that deliver a range of instructional strategies designed to build social competence and literacy (see previous matrix)</p> <p>Home visiting parents, especially for families at risk of not providing a home environment that is not rich in opportunities for developing child social, emotional and literacy competency. Home visiting programs have become commonplace in California with the creation of First 5 which is a major funder of these activities with some counties providing universal home visiting programs that are used to identify high-risk families. Other counties target these programs. Often home visit staff bring child development kits, conduct child and home environment assessments and continue visits or make referrals as indicated by these assessments.</p> <p>Parent education programs that build the capacity of parents/caregivers to provide a rich home environment. There are a myriad of parent training programs available to help parents improve the home environment, read in a way that inspires child interest and builds literacy and oral language development (e.g. “Let’s Read”, Dialogic Reading). Edgewood Kinship Center and Hawaii’s Play+ Learn Groups use informal play groups as opportunities to help caregivers learn developmental appropriate strategies to foster healthy child development. (p. 28 Village Building and School Readiness) expanded the definition of caregiver and trained extended family members, neighbors and friends who are involved with raising children. In low-income communities and especially within many cultural groups, kinship extends well beyond biological parents and this approach empowers kinship networks and exposes children to more enriched development</p>

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Strategy	STRATEGIES FOR INCREASING SCHOOL READINESS
	<p>opportunities. Middle County Public Library in Centereach, New York is an excellent model for how a public library can promote family and early childhood literacy providing parent workshops, outreach to families and caregivers, providing multimedia child development and parenting collections and providing a welcoming public environment for family reading activities (p. 42 Village Building and School Readiness).</p> <p>Programs that give children who have not been enrolled in child care programs an opportunity to experience a structured classroom environment. In Hayward, California, kindergarten sites are utilized during the summer, staffed by kindergarten teachers and child development specialists and a three-week kindergarten readiness class is provided for children entering kindergarten in the fall who have not been in formal child care or family day care settings. The program is designed to help students adjust to classroom procedures and to working with other children. Similar programs are operated in many counties, generally funded with First 5 funds. In Oakland, the city of Oakland and Alameda County First 5 have partnered to expand these programs. While programs such as this have been demonstrated to ease the transition to a structured classroom setting, quite obviously no three week program can overcome significant delays in development or literacy acquisition resulting from insufficient healthy child development activities in the first five years. However, for children who have been home pre-schooled or otherwise have had a nurturing early care but have lacked opportunities for working in structured group settings, this kind of program can be extremely beneficial.</p> <p>Systematic use of school readiness instruments by kindergartens throughout a district. An excellent example of the use of district wide standardized school readiness assessments is in Baltimore (p. 29 & 41 Village Building and School Readiness) where assessment results were used to identify neighborhoods and child care centers that had high proportions of students that were not 'ready to learn'. The disappointing results in the first year of assessments galvanized the community and in just one year resulted in a 28% improvement in school readiness. In Irvine, the use of a standardized assessment could help develop a profile of the early child care situations of children entering kindergarten not ready to learn and facilitate targeting resources. Assessing Kindergarten</p>

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	<p>Children: What Schools Needs to Know p. 30 (below) outlines how a district can implement a district wide testing system. The state of Maryland (and other states) have developed mandatory statewide school readiness assessment systems.</p> <p>Systematic early assessment of children to identify developmental disabilities and delays. The Parents Evaluation of Development Status is a validated 10-question tool worded in everyday language that has been used to identify mild to moderate developmental delay. It also facilitates conversation between child care provider and parent/caregiver about developmental issues. Dissemination of a tool such as this would be a low cost step toward identifying developmental delays and to generate healthy conversations between parents and child care providers.</p> <p>Programs that form strong relationships between early care providers and public kindergartens. There are numerous models for developing linkages between early care and kindergarten one of which operates in Irvine. A common component is providing coaches or specialists who engage high risk children while in early care and then ‘transition’ care to kindergarten (and often into grade 1-3) by meeting with teachers and child development specialists at the school site. Other components can be to provide field trips for children to the school, and fostering ‘buddy’ systems where older children at the school adopt entering kindergartners. Fruit Valley School Readiness Transition Plan utilizes mainly volunteers to create year-round transition activities. In one community (I will have to find this resource if it is of interest) actually structures kindergarten class composition so that classes are comprised of students who have been in early care together. This creates a cadre of children who are familiar with each other. Since many children are in small family day care settings , these settings are paired up and play groups are established for these children so they and their parents have formed bonds that are in place when they enter kindergarten.</p>
Relevance to Work Group	<p>While quality affordable child care is certainly one of the most important strategies for preparing young children for school, it is by no means the only one. While many of the strategies outlined below are adjuncts of child care programs, some are programs designed to prepare children who have not experienced child care at all. While home care by parents can certainly provide children with</p>

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	<p>positive child development and literacy skills and provide a strong, secure base to develop social-emotional competencies. It is more difficult for parents to re-create the kind of large and small group dynamics typical in kindergarten. Some of the programs outlined below are designed to address this need.</p>
Outcomes	<ul style="list-style-type: none"> <input type="checkbox"/> Improved book knowledge <input type="checkbox"/> Improved oral language development <input type="checkbox"/> Improved phonemic and phonological awareness <input type="checkbox"/> Improved social-emotional development <input type="checkbox"/> Earlier identification of children with developmental delays or disabilities <input type="checkbox"/> Improved child-parent attachment <input type="checkbox"/> Improved school readiness <input type="checkbox"/> Improved home environment <input type="checkbox"/> Improved parenting skills, parent understanding of their role in early childhood development and literacy development. <p>The article referenced below: Assessing Kindergarten Readiness: What School Systems Need to Know describes a range of tools that can be used to measure specifically these kinds of outcomes.</p>
Staffing:	<p>Staffing for the kinds of strategies outlined above varies significantly and as the Task Force focuses upon specific strategies, staffing will be considered. But generally, many of these school readiness promotion activities are relatively low-cost and many could be implemented with skilled, trained volunteers.</p>
Cost Factors:	<p>Cost factors vary according to the strategy or program, but many, even most are low-cost.</p>
Challenges:	<p>Logistics and connecting the dots are the primary challenges. Most often school readiness programs require collaboration across systems, information sharing and an investment of time and resources that are scarce.</p> <p>Implementing a district wide school readiness assessment system would require district cooperation and training of kindergarten staff conducting the assessments.</p>

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Strategy	STRATEGIES FOR INCREASING SCHOOL READINESS
<p>Local / Regional Expertise or Places where practice is in operation:</p>	<p>The Early Childhood Learning Center’s School Readiness Program works with both parents and professionals to provide an array of services to families with children from 0-5 years old. Services are offered to strengthen and enable families & early childcare providers in developing skills that build strong families with healthy children who are learning & ready for school. These goals are accomplished through parent education, provider education, parent & child interactive programs, along with health support services. Services are offered on-site at the ECLC, as well as in outreach to the community. The project is funding by Orange County First 5.</p> <p>Orange County Public Library Heritage Park Regional Library. Public library is an excellent and often under-utilized resource to promote family and early childhood literacy. Multnomah Library is a model for using the library to encourage evidence-based home literacy strategies.</p> <p>Other resources identified in the prior two matrices are not repeated, but are relevant to school readiness strategies.</p>
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>School Readiness: Australian Research Alliance for Children & Youth. Dr. Estelle Farrar, Dr. Sharon Gottfield, Dr. Tim Moore, Center for Community Child Health. Aside from summarizing the Perry program, this article also describes a number of non-child care strategies including “Let’s Read” an Australian program that trains parents to read with children in ways that builds their interest and motivation and understanding of literacy fundamentals. It also provides a description of the Positive Parenting Program which helps parents maintain discipline in the home in an appropriate manner. The first three pages provides an excellent summary appropriate to stakeholders and policy makers who are not family with early care as an issue. The site below has numerous excellent articles in early care and school readiness, including:</p> <ul style="list-style-type: none"> <input type="checkbox"/> More Than My Child’s Disability: A Comprehensive Review of Family-Centred Practice and Family Experiences of Early Childhood Intervention Services. <input type="checkbox"/> Linking Schools and Early Years Services, a report on strategies to bridge early care programs to elementary schools. This is an extraordinarily detailed study and worthy of close

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Strategy

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review as we move toward implementation.

http://www.rch.org.au/ccch/resources.cfm?doc_id=10544

The following four articles can all be found at: <http://www.finebynine.org/pub.html>

Beyond the Usual Suspects: Developing New Allies to Invest in School Readiness, Charles Bruner, State Early Childhood Policy Technical Assistance Network. This is an excellent tool for framing marketing pitches to different constituencies to engage their support for child readiness initiatives. The report provides brief rationales justifying support from legislators, corporate leaders, small business owners, semi- and newly-retired people, school superintendents, law enforcement, health care professionals. It also outlines how each of these constituencies can help.

Village Building and School Readiness: Closing Opportunity Gaps in a Diverse Society by Charles Bruner with Michelle Stover Wright, Syed Noor Tirmizi, and the School Readiness, Culture, and Language Working Group of the Annie E. Casey Foundation. This resource brief is a compilation of articles providing the rationale for placing a major emphasis upon investing in poor, immigrant, and minority neighborhoods and incorporating community-building strategies into early childhood programs and services. Separate chapters of Village Building provide descriptions of exemplary programs and offer recommendations for building an early childhood workforce that reflects the race, culture, and language backgrounds of those living in those neighborhoods.

7 Things Seven Things Policy Makers Need to Know about School Readiness. Revised and Expanded Toolkit by Charles Bruner, with Sheri Floyd and Abby Copeman, 2005, 40 pp. This toolkit provides easy-to-use materials that can be used to explain the importance of school readiness to legislators and other policy makers.

Health Care and School Readiness: The Health Community's Role in Supporting Child

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Development - New Approaches and Model Legislation. With the continued policy focus in many states upon school readiness there is an opportunity to focus attention on the health community's role in child development and school readiness -- and what policies and supports states might provide to help health practitioners fulfill this role. This resource brief is a compilation of several different documents that provide an introduction to this topic and suggest possible policy actions, as well as highlight promising practices.

The Impact of Participation in Project Family Read and Kinder Camp on Children's Readiness for School, 2002-2003. David J. Irvine. This evaluation study examined changes in school readiness among 35 children who participated during the 2002-2003 fiscal year in two programs: (1) Project Family Read, an educational and parent education program operating during the school year for families of children not enrolled in regulated child care in Granville County, North Carolina; and (2) Kinder Camp, a more focused summer readiness program for children from Project Family Read who entered kindergarten in August. Both programs are supported through Smart Start funds. The measure of school readiness was the Cognitive/Language Profile of the Early Screening Profiles. The study demonstrated that both programs contributed to improving school readiness among participants.

Assessing Kindergarten Readiness: What School Systems Need to Know, Catherine Scott-Little, Ph.D., SERVE, University of North Carolina, Greensboro. An excellent summary of the various uses of school readiness assessment tools and the various kinds available.

Multnomah County Library. This site has a brief description of Dialogic Reading techniques as well as other articles about early childhood literacy development. The language level is appropriate to those with a 8-9th grade reading level but could easily be adapted for families with lower literacy levels. The site is an example of how a local public library system can promote <http://www.multcolib.org/birthtosix/elitdialogic.html>

Health & Fitness Task Force

Task Force Research Summary

Task Force	Health and Fitness
Strategy	Improving Health and Physical Activity in the Community
Indicate Target	These strategies are designed to improve the opportunities for physical activity and healthy eating throughout the community by capitalizing on existing resources and assets.
Description of Approach & Program Elements:	<p>Strategies to improve the nutrition and physical activity within a community can fall into a couple of categories. Advocates for nutrition and physical activity maintain that strategies to shift the food and activity levels in communities should focus on long term, policy oriented changes and or those strategies that build on existing resources and assets.</p> <p>Behavioral and social approaches <i>Physical Activity:</i> 1. Maintain and develop programming for active play and recreation Neighborhood support for these activities is of great importance and can include funding programs that provide classes and organize sports teams reflecting a variety of activity options for children, youth, and adults. Existing recreation programs should be encouraged to implement physical activity into their programming. A sliding scale for publicly financed or private facilities that require an entry fee and community-based services can improve access for low income residents.</p> <p>Environmental and policy approaches</p> <p>A variety of urban planning strategies may be implemented at a local level to increase the level of physical activity residents engage in. The Strategic Alliance/ENACT recommends the following strategies: <i>Physical Activity:</i> 1. Create walkable and bikeable neighborhoods A network of safe and well-designed sidewalks and streets can facilitate physical activity in the form of walking and biking. Most streets are incomplete—designed with only automobiles in mind. Complete streets reclaim the roads for users of all ages and abilities including pedestrians, bicyclists, transit riders and motorists by incorporating infrastructure such as wide sidewalks, medians, bike lanes, lighting, plants, and inviting destinations. A complete streets policy seeks to ensure that roadways are planned, constructed, and maintained and/or rehabilitated for all modes of transportation and pedestrians. Every transportation project should improve access, convenience, and safety for all users.</p>

2. Promote overall community aesthetic and atmosphere of safety to encourage outdoor physical activity and recreation

In order to encourage physical activity and the use of outdoor recreation areas, outdoor environments need to be pleasant and safe. Community safety efforts can reduce barriers to outdoor activity through monitoring or patrolling programs, including resident-led Neighborhood Watch programs or by city officials such as police officers. Aesthetic improvements to the community atmosphere can encourage the use of outdoor recreation areas by creating a more appealing and inviting environment.

Access to Healthy Food:

1. Provide training and incentives to small store owners to carry healthier food items, such as fresh produce and work with neighborhood food stores and supermarkets to adopt family-friendly policies limiting displays of unhealthy foods aimed at children:

Families living may rely on small neighborhood stores for much of their daily food needs. These stores often do not have the space, staff expertise, or equipment to properly carry fresh produce. As a result, the quality and selection of produce offered in small neighborhood stores is often poor. Improving the product quality and availability in small neighborhood stores is an important strategy for providing more nutritious food options in underserved areas. Providing training and incentives to store owners can impact the variety of products offered in their stores and, therefore, influence consumption patterns.

2. Improve transportation options to supermarkets and other large food outlets

The location and accessibility of supermarkets and other large food outlets impact the eating patterns of a community. Transportation issues remain a top barrier of accessibility to healthy foods. By improving transportation options to and from supermarkets, a community's access to healthy foods can be greatly improved. Transportation enhancements can include public transit improvements as well as initiating supermarket shuttle services. Supermarket shuttle services in particular have been shown to be feasible in low-income and transit dependent areas, and the stores offering shuttle services have boasted increased revenues as a result.

3. Establish accessible Farmers' Markets or farm stand programs

	<p>Farmers' markets and farm stands are increasingly popular and serve as a valuable source of fresh produce and other goods. Underserved areas in particular benefit from the presence of accessible sources of fresh fruits and vegetables. Farmers' markets in these areas increase fruit and vegetable consumption among neighborhood residents. A focus on accessibility is key to establishing a successful farmers' market or farm stand program. Accessibility considerations include the type and variety of produce offered, language compatibility, community support and buy-in and affordability. In addition to supplying fresh produce, Farmers' markets and farm stands may offer job training and professional development opportunities as well as a community space to gather and build linkages.</p> <p>4. Promote and establish community gardening initiatives: Community gardens are places where two or more people can garden together. They provide individuals and families with many benefits, including an alternative source of fresh produce, improved life satisfaction, and a way to preserve cultural identity and traditions. Most importantly, community gardening has the potential to provide a supplemental source of fruits and vegetables. The gardening may be done on land owned by a community group, institution, municipality, land trust, or some other entity. Food grown on these plots can be kept for personal consumption or used to procure supplemental income. Community gardening initiatives may also address issues beyond food provision, such as building job skills, improving self-esteem, and contributing to community revitalization.</p> <p>5. Reduce the negative impact of fast food restaurant chains on community health: Community's can enforce policies and strategies to reduce the negative impact of the fast food industry on children and families, including:</p> <ul style="list-style-type: none"> • Reduce or eliminate permits that allow new fast food chain restaurants to open; Limit their location near schools • Require fast food chains to prominently display nutrient information on their menu boards, providing consumers with the information necessary to make informed choices; • Remove fast food restaurants and products from schools, health-care facilities, and public buildings; and • Eliminate in-store displays or promotions (e.g., "Happy Meal" toys) that use cartoon characters to market unhealthy foods to children.
Relevance to Work Group	Policy oriented strategies and those that build on existing resources are consistent with the City of Irvine's focus on asset-focused planning.
Outcomes	Policy changes to create communities that support healthy eating and physical activity can improve the overall health of the community and reduce the incidence of disease, obesity and negative health outcomes.
Staffing:	Staffing varies by approach; using existing resources, programs and innovative collaborations.

Cost Factors:	Cost varies by strategy
Local / Regional Expertise or Places where practice is in operation:	
Community Gardening Successes	<p>The San Francisco League of Urban Gardeners (SLUG) Billed as one of the nation's largest urban-gardening programs and arguably one of its most creative, SLUG is not only responsible for some 100 neighborhood gardens all over San Francisco, but it has also added on strong economic-development and job-training components and is rapidly coming up with more.</p> <p>The City of Oakland's Community Gardening Program provides residents of all ages, cultures, and backgrounds with a means to improve their lives through gardening.</p> <p>Garden Patch Program at Berkeley Youth Alternatives This program is a unique opportunity for underserved youth to learn valuable life skills. The program introduces participants to organic farming while also teaching them about responsibility, community pride, and running a business.</p>
Policies	<p>Local Food Purchase Policy</p> <p>The Local Food Purchase Policy in Woodbury County, Iowa requires purchase of locally produced organic food by County Departments that regularly serve food.</p> <p>Public Vending Machines in City Facilities</p> <p>The Chula Vista Public Vending Machine Policy passed by the City Council requires that 100% of food and beverages sold in city facilities (including community centers, office buildings, and gymnasiums) meet the established nutrition standards.</p>
Relevant Research	
Logic Model on Improving Community Nutrition	<p>http://www.thecommunityguide.org/nutrition/nutr-logic-frame.pdf</p> <p>This chart outlines the strategies and outcomes that will improve community nutrition, based on a review of relevant literature.</p>
Community Garden Association	Resources on developing community gardening programs. http://www.communitygarden.org/

Local Government Commission	http://www.lgc.org/healthycommunities/ The Local Government Commission provides technical assistance around creating walkable and livable communities.
Healthy Communities	http://www.leadershipforhealthycommunities.org/uploads/healthyeatingweb.pdf This publication outlines key policies communities can implement to support healthy eating. http://www.leadershipforhealthycommunities.org/uploads/activelivingweb.pdf This publication outline key policies communities can implement to support an active lifestyle

Task Force Research Summary

Task Force	Health and Fitness
Strategy	Improving the Nutrition in the Public Schools
Indicate Target	Efforts to improve the nutrition in the public schools are intended to reach the majority of school-aged children and youth in the public schools. This strategy can be particularly effective at improving the availability of high quality and nutritious food available within the schools and represents a system's level intervention. This approach to improving the overall health and fitness of young people involves the commitment of multiple stakeholders, including district leadership, nutrition staff, parents, students and community leaders.
Description of Approach & Program Elements:	<p>The Prevention Institute and the Strategic Alliance have developed a tool entitled ENACT (Environmental Nutrition and Activity Community Tool) to help communities work at a local level to promote access to nutritious food and healthy activity levels. The strategic alliance outlines several strategies to improve access and consumption of nutritious food within the school settings, with models from other communities, implementation tips, and a rating system to determine the effectiveness of the proposed strategy. The options in terms of improving the nutrition in the public schools include:</p> <ol style="list-style-type: none"> 1. Increasing Student Participation in the National School Lunch Program 2. Practices to Expand Healthy Offerings in the Public Schools 3. Supporting Food Service Through Nutrition Policies and Innovative Collaborations <p>A description of each strategy is included below, with specific action items (or correlated strategies) that contribute to this overall goal area.</p>

Increasing Student Participation in the National School Lunch Program

The National School Lunch Program (NSLP) was developed to alleviate hunger, especially among the nation's poorest children. Advocates for reform of the food offered through the NSLP argue that the program offers foods of little nutritional value and has contributed to the growing obesity epidemic. The NSLP also provides an opportunity to reach a large number of children daily by providing them with healthy and nutritious food choices. Several school districts have implemented innovative strategies to increase the number of students participating in the NSLP, including:

- **Offering more choices while limiting competitive food sales:** Some districts have eliminated the availability of competitive foods (soda, junk and ala carte foods) in their food service divisions and begun to offer a range of healthy lunch meals that have attracted students who qualify for free and reduced lunch, as well as those who don't. By eliminating the availability of high fat/high sugar options and simultaneously presenting nutritious and attractive food options, food service divisions have attracted more customers, and as a result (more revenue).
- **Creating attractive eating environments and eliminating co-payments:** Recognizing the role that the environment in which the food is consumed affects student interest in available food options, many school districts have begun to reform the physical environments of their school cafeterias. For example, one school used the increased revenue from its enhanced and revamped menu to finance a renovation of the school cafeteria, creating a food court similar to those found in malls (with nutritious food available). Another district that had a high number of students who qualified for reduced lunch found that those students were not participating in the program. Eliminating the co-payment increased participation among this group, offsetting the loss of income.
- **On-site preparation of homemade foods:** Some school districts have eliminated vendor contracts that supplied frozen and packaged food and begun to prepare foods in house, allowing greater control of food offerings. In some districts relationships with local farmers have ensured a steady supply of fresh and nutritious fruits and vegetables. In order for this to be successful, districts must provide training and support to foodservice and other relevant staff to meet nutrition standards and prepare healthier meals
- **Controlling Vending Contracts:** Maintaining control over vendors that sell food outside the

cafeteria (often an issue in schools and districts with low free and reduced lunch eligible students) has been an effective strategy for improving the availability of healthy and nutritious food choices. The individual who controls these contracts is in a position to advocate for healthy food choices in vending machines and snack carts. Many districts have leveraged this position, assigning all district contracts to the single vendor who offers the greatest array of healthy food options. Others have eliminated exclusive beverage contracts (i.e. with Pepsi or Coca Cola). Increased revenues from these contracts have provided food services divisions with greater funding to improve the quality of food they provide in house.

Practices to Expand Healthy Offerings

There are a number of strategies schools and districts have implemented to expand the availability of healthy food options available while students are in school. There are many barriers to changing the quality of food available within the public schools. However, many districts across California have implemented successful strategies to expand the availability of health offerings and reduce the availability of unhealthy ones, including:

- Improve the nutritional quality and appeal of school meals by offering entrée bars, salad bars, and/or identification of alternative vendors (i.e. revolution foods)
- Adopt nutrition standards for snacks, vending machine, and a la carte food and beverages; expand the offering of healthy options at Point of Service (POS) locations, which account for a significant portion of food consumed at schools with a high number of paying students.
- Develop guidelines for fundraising that promote healthy foods or non-food methods
- Institute a farm-to-school program to incorporate fresh, local produce into school meals while teaching children about local agriculture
- Incorporate a parent, student, staff and community education piece around health and nutrition that promotes making healthy food choices
- Serve water to drink; have clean sources of tap water and/or working water fountains, offer bottled water in vending machines
- Eliminate marketing of unhealthy foods on school grounds
- Provide enough time and space to eat in a relaxed environment

	<p>Supporting Food Service Through Nutrition Policies and Innovative Collaborations: Shifting the quality of foods available in the schools requires a shift in organizational culture, in student expectations, and family behaviors. An important strategy for implementing change within the public school system is the implementation and enforcement of policy changes and developing collaboratives to improve the impact of system’s changes. Strategies may include:</p> <ul style="list-style-type: none"> ○ Developing a district-wide food policy ○ Encouraging student involvement in food services (this may be especially relevant to the middle and high school levels) ○ Integrating Nutrition into the curriculum ○ Eliminating candy and soda on campus ○ Developing partnerships with local organizations, the PTA, and advocacy groups to push for policies and practices that support healthy choices within the schools. ○ Establish a school wellness committee responsible for monitoring the implementation of the district wide food policy ○ Use innovative scheduling options, including a recess before lunch so that students can work up an appetite ○ Offer mini-farmers markets at the school site after school <p><i>Sources: “School Wellness Policy and Practice” by Food Research and Action Center; “Improving Meal Quality in California’s Schools: A Best Practices Guide for Healthy School Food Service” California Food Policy Advocates; “ENACT” Strategic Alliance.</i></p>
<p>Relevance to Work Group</p>	<p>These strategies may be implemented at a school district level. A community may choose one or more areas to work on. Leadership within the community and in the school district is essential to implement this type of strategy. Irvine would need to assess the feasibility and community support for any of the above options, as well as the existing resources that are working on each of these areas.</p>
<p>Outcomes</p>	<p>The benefits of improving the availability of healthy and nutritious foods choices in the school are well documented:</p> <ul style="list-style-type: none"> - Increased participation in National School Lunch Program - Better nutrition and physical health among students - Better ability to concentrate among students and improved academic performance - Long term savings (in terms of future health issues) when students develop lifelong

	<p>habits of healthy eating</p> <ul style="list-style-type: none"> - Improved understanding of science, health and nutrition when linked with an educational component - Attitude changes in students, staff, parents, and leadership around healthy food choices
Staffing:	<p>Most strategies do not require additional staffing, but do require the commitment of district staff, parents, teachers, students and community leaders. Most projects do require professional development for nutrition staff and education to parents, students and teachers. Some activities, such as the farmers markets in the schools and school garden may require additional staffing, but volunteers may also cover some of these responsibilities.</p>
Cost Factors:	<p>A major barrier to revamping the food choices within the public schools is the lack of financing available to Food Services Divisions. A move away from frozen and pre-packaged foods (laden with government-subsidized commodities will most likely require an increase in labor costs and often requires an increase in short term costs overall. The Rethinking School Lunch Guide includes a chapter on financing healthy lunch programs: http://www.ecoliteracy.org/programs/pdf/rethinking_finances.pdf</p> <p>In the Best Practices Guide by California Food Policy Advocates, several examples of ways that school districts have developed effective business models to break even and even generate profits are outlined. http://www.cfpa.net/obesity/MealQualityReport_May2003.pdf</p>
Challenges:	<p>The challenges to implementing change are many. School districts that have been successful at improving the availability of healthy choices emphasize that change takes time and that gaining the buy in of key stakeholders is essential to any reform effort. Challenges include:</p> <ul style="list-style-type: none"> - Financing - Resistance to change among staff - Securing alternative vendors - Eating habits and social norms among students, parents and teachers - Marketing of unhealthy foods in the schools - Widespread availability of competitive foods, often sold by PTAs, Student Stores and contracted vendors - Lack of leadership, advocacy or other individual or organization to drive change

Local / Regional Expertise or Places where practice is in operation:	
ENACT	<p>ENACT has a wealth of resources, a tool kit, and examples of communities that have successfully improved the availability of healthy and nutritious food choices within their schools. Here are a few examples outlined on the ENACT website:</p> <p>California Project LEAN's Bright Ideas: Bright Ideas is a web page designed to showcase successful or promising examples of schools and communities taking action on nutrition and physical activity by addressing policy and environmental change. Learn about successful strategies and programs that have made it easier for youth to eat healthy food and/or be physically active at school or in the community. http://www.californiaprojectlean.org/brightideas/</p> <p>Improving School Meal Quality in California's Schools (PDF): California Food Policy Advocates authored this best practices guide for a healthy school food services program, which highlights innovative approaches to increasing participation in the National School Lunch Program and School Breakfast Program, by expanding healthy offerings, and supporting food service staff with policy and collaborations. A 2003 revised version is now available. This document outlines many of the successes of schools in California working to improve meal quality. http://www.cfpa.net/obesity/MealQualityReport_May2003.pdf</p> <p>Education, Community Health Departments Lead Michigan Schools in Healthier Direction: Michigan awarded 47 schools with federally funded mini-grants from 1999-2004 to develop positive changes in their school health environments. The mini-grants were a result of an innovative school collaborative with the Michigan departments of Education (MDE) and Community Health (MDCH). This article details the success of mini-grant recipient schools in forming a coordinated school health team (CSHT), completing the Healthy School Action Tool (HSAT), and making healthy changes to their school environment.</p> <p>Making it Happen! Success Story Approach 3: Make More Healthful Foods and Beverages Available: Developed by the Centers for Disease Control and Prevention, Making It Happen!</p>

	<p>Describes six specific approaches for improving the nutritional quality of “competitive foods,” the foods and beverages schools offer other than the meals served through the USDA’s school meal programs. Success Story gives examples of states that have been successful making more healthy foods and beverages available. Approach 3 (PDF) describes how schools can add more nutrient-rich items to à la carte lines, vending machines, snack bars, and student stores to allow children to make more healthful choices.</p> <p>Source: http://www.preventioninstitute.org/sa/enact/school/school_meals_1b.php</p>
<p>Berkeley, CA</p>	<p>The Center for Ecoliteracy has provided technical assistance and grant-making to Berkeley Unified School District’s School Lunch Initiative. A major grantmaking strategy for the Center focuses on the School Lunch Initiative at Berkeley, a project begun in 2004 to design and implement curriculum and food service innovations in a public school setting. This project is a partnership of the Chez Panisse Foundation and the Berkeley Unified School District, in collaboration with the Center for Ecoliteracy and Children’s Hospital Oakland Research Institute.</p> <p>The School Lunch Initiative at Berkeley includes innovations in food service and curriculum across the Berkeley Unified School District and in individual schools throughout the district. The project will apply a planning framework from the Center’s Rethinking School Lunch online guide. To support this Initiative, the Center has awarded grants to the Berkeley Unified School District for professional development. The Center is providing technical assistance to support policy development and dissemination for the Initiative. Additionally, the Center is articulating a scope and sequence of learning objectives based on linking California grade-level standards and benchmarks of Project 2061 of the American Association for the Advancement of Science.</p> <p>Rethinking School Lunch applies a holistic approach to system’s change, one that relies on changes, education and advocacy on multiple levels, including:</p> <ul style="list-style-type: none"> - Food Policy - Food and Health - Curriculum Integration - Financing - The Dining Experience - Professional Development

	<ul style="list-style-type: none"> - Facility Design - Procurement - Waste Management - Marketing and Communication <p>Read more at: http://www.ecoliteracy.org/programs/rsl-guide.html</p>
Relevant Research and Resources	
Ecoliteracy Rethinking School Lunch	Rethinking School Lunch Program: http://www.ecoliteracy.org/programs/rsl.html ; presents a model for creating a healthy and nutritious school lunch program. Includes information on Alice Waters efforts in Berkeley, California, as well as a guide to integrating school gardens into school lunch reform initiatives.
Policy Guide on Nutrition and Physical Activity	A policy guide developed for Washington State, but includes many useful resources for integrating nutrition and physical activity policies and practices into the public education system: "Nutrition and Physical Activity: A Policy Resource Guide" http://www.doh.wa.gov/cfh/steps/publications/nutrition_activity_policy_guide_final.pdf
CDC Guidelines to Promote Healthy Eating	Guidelines for School Health Programs to Promote Lifelong Healthy Eating: http://www.cdc.gov/mmwr/PDF/RR/RR4509.pdf A publication of the CDC, this document outlines specific outcomes of school nutrition education programs and makes the case for incorporating a nutrition education component in any campaign to improve the nutrition of food in the schools.
Model Policy on Nutrition and Physical Activity	This is a model policy that outlines one school district's commitment to providing students with access to nutritious food and physical activity within school hours. Santa Monica-Malibu Unified School District Nutrition and Physical Activity Policy: http://www.nojunkfood.org/policy/santamonica.html
Food Research and Action Center	This resource guide outlines specific practices and policies to improve the availability of healthy and nutritious food within schools. "School Wellness Policy and Practice: Meeting the Needs of Low-Income Students." http://www.frac.org/pdf/wellness_guide2006.pdf www.frac.org

ENACT/Strategic Alliance	An online toolkit to help communities prioritize strategies around improving nutrition and physical activity. http://www.preventioninstitute.org/sa/enact/members/index.php
Project LEAN	California Project LEAN (Leaders Encouraging Activity and Nutrition) (CPL) is a joint program of the California Department of Health Services and the Public Health Institute focusing on youth empowerment, policy and environmental change strategies, and community-based solutions. CPL's mission is to increase healthy eating and physical activity to reduce the prevalence of obesity and chronic diseases such as heart disease, cancer, stroke, osteoporosis, and diabetes. A website with extensive resources and examples of success stories in communities across California: http://www.californiaprojectlean.org Also publishes a guide to eliminating soda contracts in the school: http://www.californiaprojectlean.org/Assets/1019/files/sodareport.pdf
Lunch Lessons	An advocacy organization that encourages parents, community members and students to reform school lunch programs: http://www.lunchlessons.org/ Chef Ann's newest book, "Lunch Lessons: Changing the Way We Feed Our Children" (Harper Collins, Sept. 2006), is overflowing with strategies for parents and school administrators to become engaged with issues around school food - from public policy to corporate interest. It includes successful case studies of school food reform, resources that can help make a difference and healthy, kid-friendly recipes that can be made at home, or by the thousands for a public school cafeteria.
Revolution Foods	A company that provides healthy and nutritious foods to schools in the Bay Area: http://www.revfoods.com/
Healthy Eating Active Communities	A wealth of resources to guide communities who want to improve the nutrition available in their schools: http://healthyeatingactivecommunities.org/resources.php

Task Force Research Summary

Task Force	Health and Fitness
Strategy	Increasing Physical Activity in the Schools
Indicate Target	School Districts or Individual Schools: target may adopt one or more of the strategies outlined to increase physical activity in the school environments. Schools represent an opportunity to reach a large number of young people, especially those who may not be physically fit and active
Description of Approach & Program Elements:	<p>There are a number of strategies to increase the amount of physical activity that students engage in at the schools, ranging to expanding the number of minutes dedicated to physical education to improving access to recreational activities on the school sites. ENACT and the Strategic Alliance have developed a tool with local strategy options that communities may consider. The strategies for increasing physical activity within the schools include:</p> <p>1. Provide equipment and safe playground facilities for active play A safe and inviting environment that encourages children to get active can help them burn calories and excess energy while they play on school grounds. Play structures to climb and swing on, and accessible sports equipment such as balls, jump ropes, and hula hoops offer opportunities for group or individual active play. It is important that schools design playgrounds that are safe and developmentally appropriate, so that students are able to focus on having fun and challenging themselves to develop new physical skills. Another strategy is to provide funding to enhance existing physical activity facilities at schools, such as adding bike racks, improving lighting, or adding equipment for informal play. Resources and activities include:</p> <p>How to Organize a Playday The America Association for the Child’s Right to Play has information on how to plan, organize and implement a playday. “A PlayDay is fun! It is a day designed to draw attention to a range and diversity of play activities. A PlayDay will encompass everything from massive park events for thousands of children and adults to small picnics for little ones. It is an opportunity for children, schools, day cares, individuals, families, or communities to share in physical and mental challenges without the pressure of winning or losing “the game.”</p> <p>Sports4Kids “We are pleased to be able to offer the Sports4Kids Curriculum free of charge. The curriculum units each give an overview of why the subject matter is relevant, a vocabulary list to help focus planning and discussion and a set of games or activities</p>

to teach the subject. Additionally, the curriculum offers suggestions and sample documents that will help with the program's successful implementation."

[Peaceful Playgrounds](#)

"Designing a Playground that Works! The purpose of the Peaceful Playground Program is to introduce children and school staff to the many choices of activities available on playgrounds and field areas. Each [Blueprint](#) is designed to assist with measurements, layout, spacing and game placement, as well as provide an overall picture of the final design outcome of a Peaceful Playground."

Source: ENACT http://www.preventioninstitute.org/sa/enact/school/playground_equipment_1a.php

2. Provide daily recess breaks for unstructured play

Unstructured playtime gives children the opportunity to engage in imaginative play or work off stress by running around the playground with friends, and it helps children focus when they return to the classroom. The increased attention given to standardized testing has resulted in the reduction or elimination of recess in an estimated 40 percent of elementary schools. Parents and advocacy groups are fighting to protect children's right to play. Michigan and Virginia are two states that have led the way by instituting policies that mandate daily recess. Many advocates recommend adopting a board policy that mandates at least 30 minutes of recess daily.

3. Meet or exceed requirements for minimum minutes of physical education

Schools are increasingly focused on preparing students for academic testing, but quality physical education is also a vital part of a child's education and development. The benefits of being physically active are far-reaching, and the risks of inactivity are considerable; schools need to prioritize the current and future health of their students by including quality physical education in the school day. Unfortunately, for many children gym class is the only physical activity they will engage in all day before getting a ride home in a bus or car and then plugging into their television or computer at home. Quality physical education provides an opportunity for students to be active during the day, and also helps students develop the skills and confidence needed to continue to be active throughout their lives. Some districts have adopted board policies increasing the number of required minutes dedicated to PE, making 4 years of PE a requirement for graduation, and /or contracting with community based organizations to provide physical education to their students on a daily or weekly basis. Some districts have adopted policies mandating daily physical education classes.

4. Recruit the expertise of trained physical educators, or provide training to teachers, to lead high quality physical activity sessions

Qualified and trained physical education teachers are essential ingredients of a quality physical education program. Schools that are facing budget crunches often have to slash physical education budgets which makes it difficult to hire qualified instructors. A positive move is that California recently included in the 2006-07 California Budget Act, \$40 million in new ongoing incentive grant funding for schools to hire additional credentialed physical education teachers at the elementary and middle school levels. For schools where students don't have sufficient time in physical education, there are programs and trainings available for teachers on how to incorporate physical activity into the academic curriculum. Advocates also emphasize the importance of incorporating a PE curriculum that includes moderate to intense physical activity and providing ongoing professional development to educators.

The SPARK Program: SPARK provides a comprehensive physical education curricula and training for K-12 PE instructors and classroom teachers. Each SPARK program is an all-inclusive package that includes:

Assessment/Evaluation: Extensive needs assessments, inservice evaluation, program evaluation, teacher assessment tools and more, assure SPARK meets the specific needs of a particular school or agency.

Curricula: The SPARK Programs books are easy to read and understand, simple to teach, and the lessons are inclusive, active and fun!

Staff Development: The SPARK Programs workshops are "hands on." Teachers/leaders learn by doing, become motivated by our dynamic staff of trainers and feel more comfortable teaching movement concepts. Workshops are conducted on dates and at times convenient for participants. Trainers travel worldwide to "share their SPARK."

Equipment: SPARK has complete equipment packages available from our exclusive corporate sponsor, Sportime.

Follow-up/Consultation: The SPARK Programs is committed to institutionalizing concepts and methods. SPARK maintains an 800 number (800 SPARK PE) and e-mail address (spark@sparkpe.org) for multiple layers of support and lifetime consultation. And ask our SPARK representative about our unique and effective "Facilitator Training Model."

5. Provide various physical activity options that reflect the interests and diversity of program attendees (from team sports to dancing and in-between)

Most adults can remember traditional physical education classes which focused on team sports with winners and losers, and lots of students standing around while a few participated. Many schools are taking a new approach to physical education by emphasizing movement over team sports skills, and designing activities so that all kids can participate. Exposing children to the incredible variety of ways to be physically active can inspire them to make it a habit not just for

	<p>gym class but for life. Many schools have integrated non-competitive physical activity into their enrichment offerings and after school programs, offering dance, martial arts, games etc. Other schools have completely revamped their physical education programs, offering rock climbing, kick boxing, and obstacle courses and requiring active participation from all students.</p> <p>6. Open school facilities before and after school for use by students, staff and neighborhood Schools often have recreation infrastructure, but not the resources to staff programs and assume liability outside of regular school hours. Meanwhile, community residents often rely on schools as the sole place in a community to engage in recreation and active play. Joint use agreements allow for school districts and local governments to pool resources and share the responsibility of operating and maintaining recreational facilities. Opening school facilities to the broader community during non-school hours increases physical activity opportunities for community residents. Participating in regular physical activity is protective against a range of illnesses including type 2 diabetes, cardiovascular disease, hypertension, osteoporosis, colon cancer and depression. Communities can explore fiscal incentives that make the space sharing an attractive option for all parties.</p> <p>7. Support safe walks to school and alternative transportation options to schools Incorporating opportunities for physical activity into the daily lives of young people and their families can increase the community's physical activity levels. The Safe Routes to School Program (described below) can facilitate the development of walkable communities. Schools can support this objective by adding bike racks at school grounds and working with city planning departments to create walkable and bikeable communities.</p>
Relevance to Work Group	
Outcomes	<p>The physical benefits of increased physical activity and physical education in the schools are well documented. The CDC provides a brief overview of research on the benefits of additional minutes of Physical Education: http://www.thecommunityguide.org/pa/pa-int-school-pe.pdf</p> <p>The RAND institute found that increased minutes of PE decreased obesity rates among first graders: http://www.rand.org/news/press.04/08.27.html</p> <p>Benefits of Additional PE Time include:</p> <ul style="list-style-type: none"> • Increased levels of physical activity for students

	<ul style="list-style-type: none"> • Improved fitness levels and physical and mental health of students • Encouragement of life long patterns of healthy behavior <p>Benefits of Recess are outlined in this article: http://www.ericdigests.org/2003-2/recess.html</p> <p>The Community Guide provides summaries of research on evidence based practices that improve health outcomes; a summary can be viewed at: http://www.thecommunityguide.org/pa/pa.pdf</p>
Staffing:	Staffing options vary by strategy.
Cost Factors:	Most strategies require additional funds, but innovative collaborations with teacher education programs, community based organizations, public, and private sectors can facilitate cost effective initiatives.
Challenges:	<p>Challenges may include:</p> <ul style="list-style-type: none"> - Cost - Lack of leadership, institution or individual to drive change - Institutional politics that limit collaboration - No Child Left Behind and high stakes testing that have resulted in a decrease of minutes dedicated to PE
Local / Regional Expertise or Places where practice is in operation:	
State of Michigan Policy on Recess	http://www.michigan.gov/documents/bdpolicy001214_16470_7.pdf Outlines the State Board of Education's Policy mandating recess.
PE Requirement for Graduation from Clovis Unified	Clovis Unified PE Requirement for Graduation Uses local authority to go beyond the state graduation requirements of two years of high school physical education and requires all high school students to complete eight semesters (four years) of physical education in order to graduate.
Seattle Schools Reform of PE	Gym Class Renaissance: In the "New PE" Every Kid Can Succeed, Not Just The Jocks "Seattle Public Schools is far ahead much of the rest of the country in reforming its physical education curriculum, and test scores show them to be some of the fittest young people in the nation. At a time when American youth are less fit and more fat then ever before, educators make no apologies for using fun to motivate kids to get up and get moving – not just for gym class, but for a lifetime."
Safe Walks to School	Kids Walk to School "To support the national goal of better health through physical activity, CDC's Nutrition and Physical Activity Program has

	developed KidsWalk-to-School. This is a community-based program that aims to increase opportunities for daily physical activity by encouraging children to walk to and from school in groups accompanied by adults.”
Joint Use Agreements	<p>Cooperative Development and Use of a Swimming Pool Agreement The Town of Danville, the local school district, concerned citizens, and the county of Contra Costa came together to jointly develop, finance, operate, and maintain a new swimming pool located at the local high school.</p> <p>Joint Use Agreement and Covenant Santa Ana Unified School District and the City of Santa Ana entered into a Joint Use of Property agreement to make high school facilities available for community and city purposes after school hours.</p>
Relevant Research	
Prevention Institute/ENACT	<p>“Improving Physical Activity and Nutrition Promotion to Reach Low Income Californians” http://www.preventioninstitute.org/pdf/StrategiesforAction.pdf Strategies to improve physical activity in the school: http://www.preventioninstitute.org/sa/enact/school/playground_equipment_1a.php</p>
Grant Opportunities	<p>Peaceful Playground Grant Opportunities “The U.S. Department of Education will award grants under this competition to local educational agencies and community-based organizations to initiate, expand, or improve physical education programs, including after-school programs, for students in one or more grades from kindergarten through 12th grade in order to help students make progress toward meeting state standards for physical education.”</p>
CDC Guidelines	<p>Guidelines to promote lifelong physical activity in the schools: published by the CDC: http://www.cdc.gov/mmwr/PDF/RR/RR4606.pdf</p>
PE Links 4 U	<p>Provides resources and tools to physical education programs and promotes innovative design of PE programs in the schools. http://www.pelinks4u.org/</p>

Source: ENACT/Strategic Alliance; Nutrition and Physical Activity: A Policy Resource Guide, Washington State Department of Health

Underage Drinking Task Force

Task Force Research Summary

Work Group	Underage Drinking
Strategy	Social Host and Teen Party Ordinances and Social Liability Laws as effective policies to deter underage drinking.
Indicate Target	<p>Since 2000, social host ordinances and social host liability laws have become an emerging policy trend affecting county and city-level systems change. Both social liability laws and social ordinances have been passed in communities and cities in response to the escalating problem of underage drinking. As of 2002, 32 states in the U.S had social host liability laws in place. In 2004, 18 cities in San Diego County in California passed social host and teen party ordinances. These laws make underage drinking an adult problem (University of Minnesota Social Epidemiology Program, 2007).</p>
Description of Approach & Program Elements:	<p><u>Social Hosting Liability Laws:</u></p> <p>Social hosting liability laws make persons over the age of 21 criminally liable for providing youth with alcohol. Adults who serve or provide alcohol to minors or persons who are intoxicated can be held liable if the minor who was provided alcohol gets killed or injured as a result. Adults can also be held liable, if an intoxicated youth they provided alcohol to kills or injures a third party. Social hosting liability laws are similar to dram shop laws for institutions. Dram shop laws place financial liability on a particular establishment's potential to serve alcohol to an intoxicated or underage person who later causes injury to a third party. However, unlike most social ordinance laws, dram shop law often only carries legal jurisdiction over commercial institutions rather than private parties (University of Minnesota Social Epidemiology Program, 2007).</p> <p><u>Social Hosting Ordinances and Teen Party Ordinances:</u></p> <p>In contrast to social liability laws, social hosting or teen party ordinances specifically make it illegal to host a party where underage youth are drinking. Under this law, the punishable offense is hosting the party at all. Adult family members may be held liable simply for allowing a party with underage drinking to occur in their home. Some social hosting ordinances only hold parents accountable who "knowingly" suspected underage drinking. Other laws, however, state that a parent's ability to prevent underage drinking in the home is an "act of negligence (The Marin Institute, 2007)."</p> <p>Social hosting ordinances make the following assumptions about social change outcomes for under-aged drinking:</p>

	<ul style="list-style-type: none"> • An unsupervised party on private property where minors consume alcohol is harmful to the minors themselves and to the communities where such parties are held. • Police activity to abate gatherings where minors on private property consume alcohol will result in a decrease in abuse of alcohol by minors, physical altercations and injuries, neighborhood vandalism, and excessive noise disturbance thereby improving public safety. • Control of large parties, gatherings or events on private property where minors are consuming alcohol is necessary when such activity is determined to be a threat to the peace, health, safety, or general welfare of the public.
Relevance to Work Group	<p>County and City governments across the country have adopted social hosting laws in order to curb the prevalence of underage drinking. Community based advocacy organizations, health organizations, schools, and local politicians have been instrumental in promoting and implementing effective policy change on the local level.</p>
Intended Outcomes	<p>The intended outcomes of social hosting ordinances are to:</p> <ul style="list-style-type: none"> • To protect public health, safety and general welfare; • To enforce laws prohibiting the consumption of alcohol by minors; and • To reduce the costs of providing police services to parties, gatherings, or events requiring a response by requiring party hosts to ensure minors are not consuming alcoholic beverages.
Considerations for passing social hosting laws:	<p><u>Considerations:</u></p> <p>A. Youth surveys have shown that the most common sources of youth access to alcohol are:</p> <ul style="list-style-type: none"> • The minor's own home; and • Persons over the age of 21 who purchase alcohol for them (University of Minnesota Social Epidemiology Program, 2007). <p><u>Deterrence factor:</u></p> <p>Social hosting laws target these sources of youth access to alcohol by deterring parents and other adults from hosting underage parties or from purchasing or providing alcohol to minors. Many providers of alcohol may be deterred from selling to minors because they will fear a lawsuit or criminal penalty for providing an obviously intoxicated person with alcohol or a minor.</p> <p>B. Some adults believe underage drinking and providing alcohol to minors is acceptable because it is just a part of</p>

	<p>growing up.</p> <p><u>Social norm and cultural change factor:</u> Social hosting laws send a message to parents and adults that underage drinking is not acceptable. It forces parents to rethink what is safe, appropriate, and normal functional behavior for youth. This policy change can help transform societal, family and community social norms that may enable the underage drinking of minors.</p> <p><u>Challenges to passing social hosting laws:</u></p> <p>Parents may feel that such laws impose on the privacy of the home and their right to regulate the norms and behaviors of their own household. Many social hosting laws, however, do not penalize parents for providing alcohol to their own children. Some social hosting laws, however, do penalize parents for giving alcohol to children other than their own (University of Minnesota Social Epidemiology Program, 2007).</p> <p>Parents may also see the law as unfair because the law would penalize parents for underage drinking parties that occurred without their knowledge in the home. Some social hosting ordinances only hold parents accountable who “knowingly” suspected underage drinking. Other laws, however, state that a parent’s ability to prevent underage drinking in the home is an “act of negligence.”</p>
Cost Factors:	
Implementation and Enforcement Considerations:	<p>The enforcement of underage drinking prevention is the most difficult aspect of the legislation to enforce. According to the University of Minnesota Alcohol Epidemiology Program, most cases are prosecuted after a third party has been injured or killed due to an intoxicated minor who received alcohol from an adult. Community codes of conduct and policing strategies are necessary to intervene and break up gatherings where minors are consuming alcohol before a tragedy occurs. The University of Minnesota Alcohol Epidemiology Program recommends that police intervene at alcohol outlet locations where the transfer of alcohol from adults to minors is likely. Flyering and media campaigns in alcohol establishments are also important to change social norms and attitudes around the underage consumption of alcohol (University of Minnesota Social Epidemiology Program, 2007).</p> <p>Community education and public media campaigns that highlight and raise awareness about a tragedy related to youth alcohol consumption and parent responsibility have been very successful in creating a political environment that supports the</p>

	<p>implementation of social hosting laws. For example, in 1997 on New Years Eve, in St. Paul Minnesota, the tragic death of Kevin Brockway, laid the groundwork for social hosting liability laws in Minnesota. Kevin was killed in a drunk driving accident, because he had received and consumed alcohol that was provided to him by his friend's father. A local coalition, Join Together, effectively used this tragedy to promote awareness and legislative advocacy, eventually passing a social hosting liability law in 1999.</p>
<p>Local / Regional Expertise or Places where practice is in operation:</p>	<p>San Diego County in California, and Connecticut are two states that are leading the nation in adopting city social hosting ordinances (The Marin Institute, 2007).</p> <p><u>San Diego County Social Host Ordinance:</u> On June 17, 2003, the Board of Supervisors unanimously approved the Social Host Ordinance, which imposes civil and criminal liability on adults who own or control private residences or private premises and fail to properly supervise or stop minors from obtaining, possessing, or consuming alcoholic beverages (County of San Diego, 2006).</p> <p>The County of San Diego has criminalized the following adult behaviors as they pertain to underage drinking as exemplified in the social hosting ordinance adopted by the County of San Diego Board of Supervisors:</p> <p>"The Board of Supervisors finds and determines that minors often obtain, possess, or consume alcoholic beverages at parties held at private residences or private premises that are under the control of an adult who knows or should know of the illegal conduct but fails to stop the conduct. The Board of Supervisors further finds that underage drinking results in an increase in alcohol abuse by minors, physical altercations, violent crimes including rape and other sexual offenses, accidental injury, neighborhood vandalism, and excessive noise disturbance, all of which may require intervention by law enforcement. This ordinance imposes civil and criminal liability on adults who own or control the private residence or private premises and fail to properly supervise or stop minors from obtaining, possessing, or consuming alcoholic beverages. It further requires reimbursement for the costs associated with enforcement including reasonable attorneys' fees in the event of litigation (San Diego Social Host Ordinance, 2007)."</p> <p><u>Enforcement:</u></p> <p>The Board of Supervisors of San Diego County is purposing the following recommendations in order to strengthen the impact and enforcement of the Social Host Ordinance:</p>

1. Direct the Chief Administrative Officer to amend the Social Host Ordinance to allow its application to hosts who are under 21.
2. Direct the Chief Administrative Officer to amend the Social Host Ordinance's "Knowledge Requirement," by imposing duties upon the party's host including, but not limited to: (1) verification of the age of guests; (2) control of access to alcohol; (3) control of the quantity of alcohol at the gathering; and (4) supervision of minors.
3. Direct the Chief Administrative Officer to amend the Ordinance to eliminate any doubt that the violation is a misdemeanor (County of San Diego, 2006).

Challenges to Enforcement:

According to the North County Times, city social host ordinance laws are rarely enforced because the laws are not made a priority in law enforcement activities or are taken seriously by local communities. According to the Times, officers lack awareness in or training in how to apply social host laws. Furthermore, manpower shortages in law enforcement and the department's dependence on community reporting make it difficult for police officers to intervene before an underage drinking injury or death occurs. The city of Escondido in San Diego County has been the most successful city in enforcing the Social Host Ordinance because enforcement of the law is a priority. The Escondido Police Department has developed "Party Patrols," a group of officers that are regularly committed to surveying party scenes and enforcing the Social Host Ordinance (NC Times, 2007).

Connecticut Social Host Act:

On June 2, 2006, Governor Jodi Rell signed a social hosting act that makes underage drinking on private property illegal. The law went into effect on October 1st 2006. The law prohibits any person from knowingly allowing anyone under the age of 21 to possess or drink alcohol on private property unless accompanied by his or her own parent, guardian or spouse who is over 21 years of age. The law also holds the "host" of the party responsible even if they did not directly provide alcohol to minors. The Connecticut Coalition to Stop Underage Drinking (CCSUD), a statewide coalition of volunteers, worked for 5 years in advocacy and education in order to pass the law (OJJDP: Connecticut News, 2006).

Implementation:

	<p>The CCSUD effectively was able to create a political and cultural environment that enabled the passage and implementation of the law, by working with local municipalities and towns to pass local ordinances. This ground up approach, changed local attitudes and perceptions surrounding underage drinking. Pressure from the local level built momentum and pressed for statewide policy change that would apply to all 169 towns in Connecticut. Strategic media and public education campaigns geared towards legislators and members of the public also created a strong push for action around underage drinking (OJJDP: Connecticut News, 2006).</p>
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>Toomey TL, Fabian LEA, Erickson DJ, Wagenaar AC, Fletcher L, Lenk, KM. Influencing alcohol control policies and practices at community festivals. <i>Journal of Drug Education</i>, 36(1):15-32, 2006. Publication available in PDF: http://www.epi.umn.edu/alcohol/pubs/index.shtm</p> <p>Harwood EM, Witson JC, Fan DP, Wagenaar AC. Media advocacy and underage drinking policies: A study of the Louisiana news media from 1994 through 2003. <i>Health Promotion Practice</i>, 6(3):246-257, 2005. Publication available in PDF: http://www.epi.umn.edu/alcohol/pubs/index.shtm</p> <p>Harwood EM, Erickson DJ, Fabian LE, Jones-Webb R, Slater S, Chaloupka FJ. Effects of communities, neighborhoods, and stores on retail pricing and promotion of beer. <i>Journal of Studies on Alcohol</i>, 64:720-726, 2003. Publication available in PDF: http://www.epi.umn.edu/alcohol/pubs/index.shtm</p> <p>Lenk, K.M., Toomey, T.L., Wagenaar, A.C., Bosma, L.M., Vessey, J. Can neighborhood associations be allies in health policy efforts? Political activity among neighborhood associations. <i>Journal of Community Psychology</i>, 30(1):57-68, 2002. Publication available in PDF: http://www.epi.umn.edu/alcohol/pubs/index.shtm</p> <p>Provides links to publications and research on community organizing against underage drinking: http://www.epi.umn.edu/alcohol/pubs/cmca.shtm</p> <p>Provides links to research reports about alcohol policies in the U.S: http://www.epi.umn.edu/alcohol/uspolicy/index.shtm</p>

Research Summary References	<p>OJJDP: Connecticut News (2006). Online Resource: http://www.udetc.org/documents/success_stories/CT0706.pdf</p> <p>NC Times: Social host ordinances rarely enforced; Escondido only city actively using law that targets party givers. (2007). Online Resource: http://www.nctimes.com/articles/2007/08/07/news/top_stories/1_01_458_6_07.txt</p> <p>San Diego Social Host Ordinance: (2007) Online Resource: http://www.alcoholpolicypanel.org/SD%20County%20SH%20Ordinance.htm</p> <p>County of San Diego: Legislation. <i>Strengthening of the Social Host Ordinance in San Diego County</i>. (2006). Online Resource: http://www.sdcounty.ca.gov/cnty/bos/sup2/legislation/leg060613.html</p> <p>The Marin Institute: <i>Policies to Combat Underage Drinking Policies</i>: (2007) Online Resource: http://www.marininstitute.org/print/alcohol_policy/socialhost_teenparties.htm</p> <p>University of Minnesota Social Epidemiology Program. (2007). Online Resource: http://www.epi.umn.edu/alcohol/policy/hostliab.shtm</p>
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Task Force Research Summary

Work Group	Underage Drinking
Strategy	Youth Development and Resilience Based Prevention Model
Indicate Target	Youth development and resilience-based prevention programs are aimed at youth who are at risk. Schools, community-based organizations, and juvenile justice departments are utilizing many resilience based youth development prevention models in order to deter substance abuse among at-risk youth.
Relevance to Work Group	To identify effective strategies to curb the growing trend of underage drinking in the City of Irvine. Many community based agencies, juvenile justice departments, and schools utilize youth development and resilience based prevention models to reduce the prevalence of underage drinking and substance abuse.
Description of Approach & Program Elements:	<p><u>Building Youth Resilience: High Risk Behavior Prevention: A Youth Development Model.</u></p> <p>The youth development resilience based prevention model relies on increasing the resiliency of youth by helping them to</p>

develop “protective” factors that will promote healthy development and prevent high-risk behavior such as alcohol consumption or substance abuse. This process of building resiliency focuses on meeting the basic developmental needs of youth. These developmental needs are identified as:

- Safety
- Belonging
- Respect/self-worth
- Autonomy/Identity
- Mastery/Power
- Meaning

The underlying assumption here is that if these basic needs are met youth will foster feelings of competence, confidence, and caring that in turn will result in healthy behavior outcomes. According to researcher Bonnie Benard, this youth development and resilience model, builds upon previous youth development and prevention models because the focus of prevention shifts away from “fixing the kid” to creating an environment that provides supports and opportunities. Resilience based youth development and prevention models also link specific developmental outcomes or “resiliency traits” with healthy behavioral outcomes. Healthy behavioral outcomes may include; social competence, problem solving skills, autonomy/identity, and sense of purpose and future. This model is assets based and recognizes that the person exists within a broader environment and context (Benard, 1998).

Examples of youth development and substance abuse prevention strategies that are particularly grounded in this approach:

- *Media Advocacy and Literacy* that helps young people develop a critical consciousness about being targeted by the media and corporate industries that promote underage consumption of alcohol. Developing a critical consciousness is essential for developing ways for youth to fight back.
- *Cross-age Mentoring* that gives youth adult role models, while they in turn, they mentor younger youth.
- *Youth Driven Community Service Learning* in which young people are given leadership opportunities to serve their schools and communities (Benard, 1998).

<p>Intended Outcomes</p>	<p>The youth development resilience based approach predicts the following developmental outcomes that correlate with a reduction in high-risk behavior such as alcohol and substance abuse:</p> <p><u>External Assets Outcomes:</u> Youth achieve environmental supports and opportunities through the development of “protective factors.” These include: caring relationships, high expectations, and opportunities to participate/contribute.</p> <p><u>Internal Assets Outcomes:</u> Youth develop resilience traits. These include; social competence, problem-solving skills, autonomy/identity and a sense of purpose and future.</p> <p>These intermediary internal and external developmental outcomes lead to long-term positive developmental outcomes in the reduction of high-risk behavior such as alcohol and substance abuse (Benard, 1998).</p>
<p>Model Prevention Programs Grounded in this Approach: Local / Regional Expertise or Places where practice is in operation:</p>	<p>Early Prevention: Resilience Based Preschool Programs:</p> <p>According to the University of Minnesota National Resilience Resource Center, the two years a child spends in preschool with a resilience-based curriculum can be key to preventing drug abuse and high-risk behaviors. For example, a two-year evaluation of the Perry Preschool Program serving low-income African American youth in Ypsilanti, Michigan showed that preschoolers exposed to a resilience-based curriculum showed significant gains in youth development later in life. Eighty-four percent that entered the program at age 3 and 4 reported that at age 27 they “rarely to never” drank alcohol. This statistic was 28 percentage points higher than other preschool programs such as students enrolled in nursery schools or direct institutions. The Perry Preschools resilience based curriculum includes the following elements: child initiated learning, problem solving, decision making, planning, and a high degree of interaction between children and adults that correlates with a significant reduced risk in substance abuse later in life (Benard, Opportunities for Learning, 2001).</p> <p>Adventure Based Programs: Outward Bound</p> <p>According to the University of Minnesota National Resilience Resource Center, adventure-based programs and out of class</p>

experiences such as Outward Bound can be a powerful prevention strategy for youth in danger of high-risk behavior. Adventure-based programming helps to foster resilience and healthy developmental behavior in youth. These programs have been most effective in reducing alcohol and other drug use by focusing on a holistic approach to emotional, social, physical, intellectual, and spiritual needs. Adventure resilience based programs address developmental needs for safety, love, belonging, respect, autonomy, challenge/mastery, power, and meaning. Prevention programs are effective to the extent that they meet these needs (Benard & Marshall, Adventure Education, 2001).

Outward Bound, a non-profit group is the largest of the outdoor adventure-based programs for at risk youth. The core of the program teaches at risk youth to have confidence, mastery over challenging tasks, and the ability to work collaboratively in pressurized situations by leading a group of youth out into the wilderness for two to four weeks. These facilitated trips, require youth to engage in intense group problem solving and decision-making allowing them to master stressful situations. Many school and community prevention programs have included adventure-based wilderness programming to seek out positive outcomes for at-risk youth clients (Benard & Marshall, Adventure Education, 2001).

Outcomes:

According to evaluations of the Outward Bound Program, youth development outcomes are comprehensive and foster general well being. No mention was made of specific alcohol and other drug abuse outcomes; however, most of the 40 outcome measures examined constitute mediating variables commonly correlated with reducing incidences of substance abuse in youth (Benard & Marshall, Adventure Education, 2001).

Big Brothers/Big Sisters Mentoring Program of America:

The core operating philosophy of the Big Brother/Big Sister Mentoring Program relies on the assumption that fostering caring relationships between peers and across generations is a powerful tool in preventing at risk behavior for youth. The most notable outcomes from the program have been the deterrence of drug and alcohol use among youth and improved academic performance. An evaluation of the oldest youth mentoring program of Big Brothers and Big Sisters showed that youth were 46 percent less likely to use illegal drugs, 27% less likely to drink, 33% less likely to hit, and 50% less likely to skip school (Benard & Marshall, Big Brothers/Big Sisters, 2001).

Peer and adult mentors support an interpersonal dynamic whereby the mentor believes in the innate ability of the youth to

	<p>solve problems on their own. This mutual support, and guidance is empowering for the youth, and helps them build protective factors against environments that put them at risk (Benard & Marshall, Big Brothers/Big Sisters, 2001).</p>
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>Marshall, K. <i>Bridging the Resilience Gap: Research to Practice</i>. In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.</p> <p>Benard, B. & Marshall, K. <i>Competence and Resilience Research</i>. In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.</p> <p>Benard, B. From Risk to Resilience: Inside Out Prevention: In the AOD Prevention Extension. The EMT Group for the California Department of Alcohol and Drug Programs, California.</p> <p><i>Provides an overview of the Youth Development and Resilience Model with related links to publications:</i> http://www.wested.org/cs/chks/print/docs/hks_resilience.html</p> <p>Link to a publication that discusses research and evaluation outcomes for recreation, resilience based youth development programs: http://findarticles.com/p/articles/mi_qa3903/is_200110/ai_n8955928/pg_1</p> <p><i>Provides an explanation of the Perry Preschool Study and contains other helpful links about the long-term assessment of the Perry Preschool Program:</i> http://www.highscope.org/Content.asp?ContentId=3</p> <p><i>Provides resources about the history, philosophy, and research and evaluation of Outward Bound Programs:</i> http://wilderdom.com/obmain.html</p> <p><i>Provides an overview of the Santa Fe Mountain Center youth development resiliency based model:</i> http://www.sf-mc.com/about/eam.shtml</p> <p><i>Provides links with information about the Big Brothers Big Sisters Program of America:</i> http://www.bbbs.org/site/c.diJKKYPLJvH/b.1539751/k.BDB6/Home.htm</p>

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	Benard, B. <i>Prevention from the Inside Out: Tapping Resilience in Youth</i> . In Prevention Tactics 2:3 1998.
	Benard, B. & Marshall. K, <i>Adventure Education: Making a Lasting Difference</i> . In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.
	Benard, B. & Marshall. K, <i>Opportunities for Child Initiated Learning: Long-Term Follow Up Studies of Preschool Programs</i> . In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.

Support to Families in Need Task Force

Task Force Research Summary

Work Group	Assistance to Needy Families
Strategy	Mixed Income Housing Development
Indicate Target	Low- and moderate-income families. The City of Irvine may choose to work with independent developers to create mixed income housing developments or pass a citywide mixed income housing ordinance.
Description of Approach & Program Elements:	<p>Mixed income housing development can be defined as a development that is comprised of housing units with differing levels of affordability, typically with some market-rate housing and some housing that is available to low-income occupants below market-rate. The “mix” of affordable and market-rate units that comprise mixed-income developments differ from community to community, and can depend, in part, on the local housing market and marketability of the units themselves. Today, Federal, state and local governments employ a wide variety of methods to support the development of mixed income housing. Participating jurisdictions (pjs) and their housing partners can design approaches that take maximum advantage of many previously established government incentive programs.</p> <p>Participating jurisdictions can design mixed-income housing in a number of ways to meet a range of housing needs, such as:</p> <ul style="list-style-type: none"> • Develop a section of smaller, affordable units within a complex of larger market-rate units. This design supports buyers who might eventually “graduate” into the larger units in the same subdivision. • Subsidize some number of low-income families with second mortgages in an otherwise market-rate development • Mandate a set-aside of certain number (typically 20-60 percent) of units for low- and moderate-income households in market-rate developments.

- Develop units in accordance with inclusionary zoning requirements.

Some state and local governments offer a variety of tools and incentives to encourage or require mixed-income housing development, such as:

- 1.) Favorable and inclusionary zoning policies and land use regulations
- 2.) Financing incentives such as:
 - Density bonuses, which allow developers of mixed-income housing to build more units per acre than is normally permitted
 - Preference in proposal ranking for mixed-income housing developments, when making financial assistance available through competition
 - Providing public financial assistance only to projects that are designed as mixed-income housing
- 3.) Tax incentives such as local tax abatements or tax increment financing for projects that are mixed-income developments

Marketability is important for the success of mixed income housing:

- Location
- Amenities
- Proximity to services such as transportation, shopping, employment opportunities
- Development design, landscaping and attractiveness
- Proper maintenance
- Stay competitive with nearby housing opportunities

Source: <http://www.hud.gov/offices/cpd/affordablehousing/library/modelguides/2004/200315.pdf>

In one report by the Fair Housing Justice Center, a program of HELP USA, four primary factors causing developers to incorporate housing units targeted to different income tiers in a low-poverty area include:

	<ul style="list-style-type: none"> • Local and/or state policy supported mixed-income housing • Opportunity to acquire land in a low-poverty neighborhood inspired income mix • Mixed income housing as a successful community strategy • Mixed income housing as a fair housing remedy <p>Source: http://www.helpusa.org/site/DocServer/Executive_Summary.pdf?docID=1441</p>
<p>Relevance to Work Group:</p>	<p>Mixed income housing developments is an option to provide affordable housing to the low-income residents of the City of Irvine.</p>
<p>Outcomes:</p>	<ol style="list-style-type: none"> 1.) Educational Benefits – Both academic performance and life opportunities of low-income pupils improve significantly when they are surrounded by middle class classmates. Also, diversity in the classroom leads to early preparedness for diversity in the workforce later in life. 2.) Economic Benefits - Effective mixed-income housing contributes to the long-term sustainability of affordable housing. 3.) Mixed-Income Homes is a Safe Investment - One study of mixed-income housing neighborhoods in suburban Washington, DC showed no adverse effect on the rate of increase in resale values of market-rate homes. 4.) Minimizing Political Opposition – Identifiable subsidized housing projects invariably draws strong, heated public opposition but can be easily dispelled by utilizing mixed-income housing strategies, such as creating mandatory inclusionary zoning laws. <p>Source: http://www.hud.gov/offices/cpd/affordablehousing/library/modelguides/2004/200315.pdf</p> <ol style="list-style-type: none"> 5.) Creation of social networks and social capital for low-income residents that help them find jobs 6.) Implementation of informal social control by higher income residents, especially homeowners, who will insist on accountability to norms and rules, thereby increasing order and safety for all residents

	<p>Source: http://www.hlpronline.com/Leslie.pdf</p> <p>7.) Low-income households will have the benefit of better schools, access to jobs, and enhanced safety, enabling them to move themselves and their children beyond their current economic condition.</p> <p>Source: http://www.huduser.org/periodicals/cityscpe/vol3num2/success.pdf</p>
Staffing:	
Cost Factors:	<p><u>Development Cost:</u></p> <ol style="list-style-type: none"> 1.) Rehabilitation and new construction costs 2.) Time-related costs including staff time, interest expense, inflation, and the possibility of new competition entering the market place prior to, or shortly after completion of, the development 3.) Opportunity cost must be considered because a developer will weigh the benefits of pursuing the proposed project rather than another, in order to know which will be the best investment. <p><u>Financing Mixed Income Housing:</u></p> <ol style="list-style-type: none"> 1.) Low-Income Housing Tax Credits 2.) Community Development Block Grant Program 3.) Section 108 Program 4.) Historic Tax Credits 5.) State and Local Homeownership and Rental Initiatives 6.) Tax Exempt Bonds 7.) Private Debt 8.) Private Equity <p>Source: http://www.hud.gov/offices/cpd/affordablehousing/library/modelguides/2004/200315.pdf</p>
Challenges:	<p>The Innovative Housing Institute published the House Next Door, a study of the impact of subsidized housing on property values of private market rate housing in mixed-income environments in</p>

	<p>Montgomery County, Maryland and Fairfax County, Virginia. They found that if the presence or proximity of subsidized housing had a negative effect on values, price trends in the context of a dynamic market would reflect this fact in the following ways:</p> <ol style="list-style-type: none"> 1. The prices of the market rate (non-subsidized) homes sold in each of these subdivisions would generally gain less in a rising market, or would lose more in a falling market, than would all units sold in the zip codes in which they were located during the same time period. 2. The combined prices of the dwellings sold in all the tested subdivisions of each county would rise less or decrease more than those of all houses sold within that county during the same year. 3. The sales prices of the non-subsidized homes located close to the subsidized units would gain less or decline more than those of units located farther away. 4. Market rate dwellings located immediately adjacent to subsidized housing would receive the least favorable market treatment of all. <p>Source: http://www.inhousing.org/ - Urban Research</p> <p>One of the challenges in developing mixed-income housing is determining a mix of incomes that can be sustained over time. In practice, there is no single formula, or standard definition, of mixed-income housing. Communities and developers must evaluate local market conditions and develop locally supported concepts and characteristics of the mixed-income development.</p> <p>Source: http://www.hud.gov/offices/cpd/affordablehousing/library/modelguides/2004/200315.pdf</p>
<p>Local / Regional Expertise or Places where practice is in operation:</p>	<p>Montgomery County, Maryland</p> <p>Up to 15% of any new housing development with fifty or more units must be made available to low- and moderate-income households</p> <p>Source: http://www.hud.gov/offices/cpd/affordablehousing/library/modelguides/2004/200315.pdf</p>

Montgomery County's Moderately Priced Dwelling Unit (MPDU) program is believed to be the nation's first mandatory, inclusionary zoning law that specified a density bonus allowance to builders for providing affordable housing. The density bonus was designed to preclude developers from losing opportunities to build market-rate units and to help offset some of the production costs of the MPDUs. The program's implementation involves both the public and private sectors, with the local government performing regulatory and administrative functions and the building industry producing the housing. Some highlights of the MPDU program are as follows:

- Between 12.5 and 15 percent of the total number of units in every subdivision or high-rise building of 20 or more units be moderately priced.
- The zoning ordinance allows a density increase of up to 22 percent above the normal density permitted under the zone.
- The ordinance also allows some attached housing in single-family zoning classifications so that optimum development of the property can be achieved and less costly housing can be constructed. (The density bonus, in effect, creates free lots upon which the MPDUs are constructed. The builder normally obtains some additional market rate units equal to the difference between the density bonus and the MPDU requirement.)
- The County imposes certain resale and occupancy restrictions on the MPDUs when the completed units are sold.
- Three agencies within Montgomery County, Maryland, are key to the implementation of the MPDU program.

Click on the link below to learn more about the different roles of these agencies in the MPDU program:

- [Montgomery County Maryland-National Capital Park & Planning Commission \(M-NCPPC\)](#)
- [Montgomery County Department of Housing and Community Affairs \(DHCA\)](#)
- [Montgomery County HOC](#)

Source: <http://www.mc-mncppc.org/research/analysis/housing/affordable/mpdu.shtm>

	<p>City of Sacramento</p> <p>In October of 2000, the Sacramento City Council adopted City Code 17.190 establishing a Mixed Income Housing Ordinance for New Growth Areas within the City limits.</p> <p>This ordinance requires that any new residential development of ten units or more include an affordable component. The ordinance allows developers choices in how to comply with this requirement. Some choose to build an affordable rental apartment complex, and some choose to build for-sale units. Those units built as rental units are owned and operated by private companies, and Sacramento Housing and Redevelopment Agency (SHRA) cannot provide information on unit availability or rental rates. All affordable, private apartment complexes financed by SHRA can be found on our Multi-family Rental Resource site. Those units developed as for sale units are sold through a lottery administered by SHRA.</p> <p>Source: http://www.shra.org/Content/Housing/HousingDevelopment/IHCity/MixedOrdinance.htm</p> <p>Not less than fifteen percent of the development project’s residential units shall be inclusionary units developed for, offered to, and leased or sold at an affordable rent or housing price to very low and low income households as follows: ten percent of the dwelling units shall be affordable to and occupied by very low income households and five percent of the dwelling units shall be affordable to and occupied by low income households.</p> <p>Source http://www.qcode.us/codes/sacramento/view.php?topic=17-vi-17_190-17_190_030&frames=on</p>
<p>Relevant Research – Provide title and brief description of</p>	<p>Myths and Facts About Affordable and High Density Housing A Report by California Planning Roundtable http://www.hcd.ca.gov/hpd/mythsnfacts.pdf</p>

<p>publication in addition to URL:</p>	<p>Mixed-Income Housing Developments: Promise and Reality http://www.jchs.harvard.edu/publications/W02-10_Smith.pdf</p> <p>ANDP – Building, investing in and advocating for mixed income communities http://www.andpi.org/mici.htm</p> <p>How Does Inclusionary Housing Work? A Profile of Seven Southern California Cities – Southern California Association of NonProfit Housing http://www.pacificpropertiesllc.com/node/83</p> <p>Mixed-income housing: A new direction in state and federal programs http://findarticles.com/p/articles/mi_qa3681/is_199508/ai_n8718940/pg_2</p> <p>Ordinance No. __ Adopted By The Sacramento City Council http://www.lsnc.net/housing/Sac_city_ordinance.pdf</p> <p>Irvine Web – City plan http://www.cityofirvine.org/depts/cd/planningactivities/affordablehse/default.asp</p> <p>Finding Affordable Housing in Irvine http://www.cityofirvine.org/civica/filebank/blobdload.asp?BlobID=8402</p> <p>City of Irvine Housing Strategy & Implementation Plan – March 14, 2006 http://www.cityofirvine.org/civica/filebank/blobdload.asp?BlobID=8842</p>
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Task Force Research Summary

<p>Work Group</p>	<p>Assistance to Needy Families</p>
<p>Strategy</p>	<p>Earned Income Tax Credit (EITC) also known as Earned Income Credit (EIC)</p>

<p>Indicate Target</p>	<p>Low-income families. The City of Irvine may choose to use outreach strategies in order to educate the public about the Earned Income Tax Credit. Low-income working families who qualify receive refundable federal income tax credit for up to \$4,500. The City of Irvine may also choose to enact EITC on a city level.</p>
<p>Description of Approach & Program Elements:</p>	<p>GENERAL OVERVIEW:</p> <p>The Earned Income Tax Credit (EITC), sometimes called the Earned Income Credit (EIC), is a refundable federal income tax credit for low-income working individuals and families. Congress originally approved the tax credit legislation in 1975 in part to offset the burden of social security taxes and to provide an incentive to work. When the EITC exceeds the amount of taxes owed, it results in a tax refund to those who claim and qualify for the credit.</p> <p>To qualify, taxpayers must meet certain requirements and file a tax return, even if they did not earn enough money to be obligated to file a tax return.</p> <p>The EITC has no effect on certain welfare benefits. In most cases, EITC payments will not be used to determine eligibility for Medicaid, Supplemental Security Income (SSI), food stamps, low-income housing or most Temporary Assistance for Needy Families (TANF) payments.</p> <p>The earned income credit (EITC) is a tax credit for certain people who work and have earned income in tax year 2006 under \$38,348. A tax credit usually means more money in your pocket. It reduces the amount of tax you owe. The EITC may also give you a refund.</p> <p>To claim the EITC on your tax return, you must meet all of the following rules:</p> <ul style="list-style-type: none"> • Must have a valid Social Security Number • You must have earned income from employment or from self-employment. • Your filing status cannot be married, filing separately. • You must be a U.S. citizen or resident alien all year, or a nonresident alien married to a U.S. citizen or resident alien and filing a joint return.

- You **cannot** be a qualifying child of another person.
- If you do not have a qualifying child, you must:
 - be age 25 but under 65 at the end of the year,
 - live in the United States for more than half the year, and
 - not qualify as a dependent of another person
- Cannot file Form 2555 or 2555-EZ (related to [foreign earn income](#))
- [EITC Thresholds and Limitations](#)

Your child is a qualifying child if your child meets three tests. The three tests are:

1. Relationship
2. Age
3. Residency

Relationship

To be your qualifying child, a child must be your:

- Son, daughter, stepchild, eligible foster child, or a descendant (for example, your grandchild) of any of them, or
- Brother, sister, half brother, half sister, stepbrother, stepsister, or a descendant of any of them (for example, your niece or nephew).

Definitions to clarify the relationship test.

Adopted child. An adopted child is always treated as your own child. The term "adopted child" includes a child who was lawfully placed with you for legal adoption.

Eligible Foster Child. A person is your eligible foster child if the child is placed with you by an authorized placement agency or by judgment, decree, or other order of any court of competent jurisdiction.

Age

Your child must be:

1. Under age 19 at the end of 2006,
2. A full-time student under age 24 at the end of 2006, or
3. Permanently and totally disabled at any time during 2006, regardless of age.

Residency Test

Your child must have lived with you in the United States for more than half of 2006.

Source: <http://www.irs.gov/individuals/article/0,,id=96406,00.html>

'MAKE TAX TIME PAY' OUTREACH CAMPAIGN FOR WORKING FAMILIES AND INDIVIDUALS**BY THE CENTER ON BUDGET AND POLICY PRIORITIES' TAX CREDIT OUTREACH TEAM:**

The Campaign is a broad nationwide network of community organizations, employers, social service programs and government agencies that promotes the Earned Income Credit (EIC) and the Child Tax Credit (CTC) to help low- and moderate-income workers take advantage of the tax benefits they've earned. This year (2006) the EIC is worth more than ever – over \$4,500 for some families. Many families also may qualify for the CTC, worth up to \$1,000 for each child. Last year over 22 million workers claimed more than \$41 billion in Earned Income Credits alone. Over six million of those workers also received an extra boost from the Child Tax Credit.

Each year, however, millions of eligible workers risk missing out on these important federal tax benefits because they do not know they qualify, do not know how to claim the credits, or do not know where to find free tax filing assistance.

The Tax Credit Outreach Kit includes materials organizations and agencies can use to help workers get the tax

credits they've earned:

1. Facts: About Tax Credits for Working Families. Includes fact sheets explaining the basics about who is eligible for the EIC and the CTC and how to claim these credits.
2. Outreach Strategies: Promoting Tax Credits for Working Families. Presents key strategies for Tax Credit Outreach Campaigns and illustrates how effective outreach techniques are being implemented across the country.
3. Free Tax Help and Asset Development. Highlights the importance of directing workers to places they can get their tax returns filed for free, including IRS-sponsored Volunteer Income Tax Assistance (VITA) sites, as well as linking workers to asset development programs.
4. Outreach Campaign Tools Envelope. Includes posters, flyers and envelope stuffers, in English and Spanish, which encourage workers to claim all the tax credits they've earned.

Tax Credit Outreach Kit available in 19 additional languages.

Source: http://www.cbpp.org/eic2007/11_Cover_letter.pdf

Why Promote Free Tax Preparation Sites?

1. Workers may be unaware of the credits
2. Workers may not have experience filing taxes
3. Workers may be unaware that free tax filing assistance is available.

Ways to Promote through Outreach Partnerships:

1. Community organizations and institutions
2. Nonprofit health and human services providers
3. Child care and foster care agencies
4. Civic and service organizations
5. State and local government agencies
6. Community Development Corporations
7. National employers and local businesses

	<ul style="list-style-type: none"> 8. Labor unions 9. Utility companies 10. Food banks and homeless shelters 11. United Ways 12. Legal assistance programs 13. Faith-based groups <p>ASSISTANCE IN STARTING A FREE TAX FILING ASSISTANCE SITE</p> <p>The National Community Tax Coalition (NCTC) is a project of the Center for Economic Progress in Chicago, one of the nation’s largest free statewide tax preparation services for working families. NCTC brings together the expertise of community-based organizations from around the country that provide free tax preparation and conduct tax credit outreach. NCTC offers affiliates trainings, conferences, technical assistance, a listserv to exchange information on best practices and new tax policies, and an advocacy network promoting the interests of low-income taxpayers. For more information on NCTC visit www.tax-coalition.org or contact Jackie Lynn Coleman, Coordinator, NCTC, 312-630-0261 or jcoleman@centerforprogress.org</p> <p>Source: http://www.cbpp.org/eic2007/strategy_guide.pdf</p>
Relevance to Work Group	Provides a tool for assisting low-income families in receiving tax credit through legislation that already exists and provides a platform/model for the City of Irvine to adapt in city policy.
Outcomes	
Staffing:	
Cost Factors:	
Challenges:	Does the Program Work?

The original goal of the EITC was to relieve the burden on low-income workers of paying the Social Security tax. Today, however, at least two other goals for the program are commonly discussed:

* Providing an Incentive to Work. Individuals not employed (for example, nonworking welfare recipients) will experience additional benefits from work due to the EITC. As a result, work is made relatively more attractive compared to welfare. In addition, the very lowest income workers are encouraged to work more hours because the amount of their credit increases as their earnings increase.

* Redistributing Income to Low-Income Workers. Unlike the welfare system, which primarily redistributes income to individuals with little or no labor force attachment, the EITC provides additional income to low-income workers through tax incentives.

Beyond the subsidy range, however, the EITC may discourage additional work effort by decreasing the returns to additional work. Because the credit is phased out, each additional dollar of earnings reduces the amount of the credit that a worker receives. The EITC may therefore have the effect of causing workers to work less than they otherwise would.

What Does the Research Say?

While empirical research on the subject is somewhat contradictory, and no study has documented the effects of the federal EITC after it was expanded to its current level in 1996, in general the research confirms what theory predicts: The EITC does result in an increase in the number of people working and an increase in the hours of work for workers in the subsidy range. For those already working and earning more than about \$750 per month, however, the EITC discourages additional work effort for some workers, causing them to reduce their hours of work.

The extent of these labor force effects--how much more likely a person is to work and how much less existing workers will work--is not clearly established. Most studies, however, have concluded that the effects are stronger in the subsidy range relative to the flat and phase-out ranges. (About 75 percent of eligible workers are in the flat and phase-out ranges, while only 25 percent are in the subsidy range.)

Finally, it is important to note that the incentives created by the EITC must be considered in the context of the

	<p>complicated set of incentives that a low-income family faces. The decision to work, or to work more, is affected by a variety of other state and federal policies, and a broad range of personal considerations. The impact of the EITC, therefore, depends to a large extent on other factors beyond the scope of the program.</p> <p>Source: http://www.policyalmanac.org/social_welfare/archive/eitc.shtml</p>
<p>Local / Regional Expertise or Places where practice is in operation:</p>	<p>The federal government administers an EITC through the income tax. So do many states. States that enact EITCs can reduce child poverty, increase effective wages, and cut taxes for families struggling to make ends meet.</p> <p>Rising Number of States Offer EITCs</p> <p>In 2006, two states — Michigan and Nebraska — enacted new EITCs. New York created an enhanced state EITC for certain non-custodial working parents. Two other states — Delaware and Virginia — are implementing new EITCs enacted in previous legislative sessions. These additions bring the total number of states with EITCs (counting the District of Columbia as a state) to 20. Other states that enacted EITCs are the District of Columbia, Illinois, Indiana, Kansas, Maryland, Massachusetts, Minnesota, New Jersey, Oklahoma, Oregon, Rhode Island, Vermont, Wisconsin, Iowa and Maine. In addition, three local governments — New York City, San Francisco, and Montgomery County, Maryland — offer local EITCs.</p> <p>When the new EITCs are fully implemented, roughly one-third of recipients of the federal EITC will live in a state with an EITC. Annual state EITC benefits will exceed \$1.5 billion.</p> <p>State EITCs have received broad support. EITCs have been enacted in states led by Republicans, in states led by Democrats, and in states with bipartisan leadership. The credits are supported by business groups as well as by social service advocates.</p> <p>Source: http://www.cbpp.org/10-12-06sfp.htm#_ftn1</p> <p><u>San Francisco's Working Families Credit:</u></p>

The San Francisco Working Families Credit (WFC) gives \$100 to qualified low-income working families in San Francisco. WFC recipients can also get benefits such as [discounted MUNI passes](#).

The Working Families Credit program also raises awareness of the other money and benefits for San Francisco working families including:

1. Up to \$4,500 through the [Earned Income Tax Credit*](#)

The EITC gives working families a federal tax credit of up to \$4,500. You apply for the EITC when you file your federal income taxes.

Who Can Apply?

To be eligible for the EITC, your household income must be less than the amount listed below.

Filing Status	Single	Married Filing Jointly
More than 1 qualifying child and income less than:	\$36,348	\$38,348
1 qualifying child and income less than:	\$32,001	\$34,001
No qualifying child and income less than:	\$12,120	\$14,120

Note: You may earn up to \$2,800 in additional investment income and still qualify.

2. Up to \$300 per month off grocery bills through the [Golden State Advantage card*](#)

The Golden State Advantage card is used to purchase groceries. It's available to many working families and can be worth several hundred dollars per month, depending on income and household size. The card works just like any other debit card.

Who Can Apply?

To be eligible for the Golden State Advantage card, your household income must be the same or less than the amount listed below.

Household Size (Members)	2	3	4	5
Maximum Annual Income	\$17,160	\$21,588	\$26,004	\$30,420

3. Free and low-cost [health coverage](#) for children and many parents*

All children and many low-income adults living in San Francisco may be eligible for free or low-cost health insurance through the Medi-Cal, Healthy Families or Healthy Kids & Young Adults programs. San Francisco Health Plan can help determine if you are eligible for one of these programs, and can assist with the application process.

In San Francisco, the Following Groups May Be Eligible:

- All children
- Many low-income young adults aged 19-24
- Many low-income adults with children

4. Free [job search and career services](#)*

Free Career Assistance

Get help finding a new job or developing new skills to advance your career at One Stop San Francisco career centers.

These centers offer free workshops on job searches and resumé writing. They also offer job listings, training,

employer visits, Internet access, phones, fax and copy services and more.

Visit a One Stop Career Center at...

- **Mission Career Link:**
3120 Mission Street @ Cesar Chavez, 415-401-4800
Hours: Mon, Tues, Wed, Fri 8:00am-5:00pm; Thurs 8:00am-8:00pm
- **Civic Center Career Link:**
801 Turk Street, 415-749-7503
Hours: Mon-Fri 8:00am-5:00pm
- **Southeast Career Link:**
1800 Oakdale Avenue, 415-970-7762
Hours: Mon-Fri 8:00am-5:00pm
- www.onestopsf.org

5. Free or low-cost [checking accounts](#)*

Bank on San Francisco can help you to open a bank account with a suitable bank or credit union.

6. Other [services](#) for working families*

Childcare Advice and Help with Childcare Costs

Free resource and referral information to San Francisco families seeking childcare is available from the Children's Council of San Francisco and from Wu Yee Children's Services. Both organizations also offer help paying for childcare for some low-income working families.

- **Children's Council**
(information in English, Spanish and Chinese)
415-276-2900, www.childrenscouncil.org
- **Wu Yee Children's Services**
(information in English and Chinese)

415-391-4721, www.wuyee.org

Nutritional Support for Pregnant Women, Mothers and Young Children

Checks to buy healthy food, advice on breastfeeding and other advice on eating well and staying healthy are available from the Women, Infants and Children (WIC) nutrition program. Many low-income working mothers and their families qualify.

- **Women, Infants and Children Program**
(415) 575-5788

Energy Bill Reductions

Most families who receive the Working Families Credit are also eligible for rate reductions through PG&E's financial assistance programs.

- **Pacific Gas & Electric**
(866) 743-2273, www.pge.com

2-1-1 Helplink in San Francisco

2-1-1 is a free, confidential, 24-hour multilingual service provided by United Way of the Bay Area. A trained information and referral specialist will help you find information about community resources, employment, housing, substance abuse treatment and more.

- **2-1-1**
or from cell phones (415) 808-HELP (4357), www.211bayarea.org

Source: <http://sfgov.org/site/frame.asp?u=http://www.workingfamiliescredit.org>

New York City-Earned Income Tax Credit Coalition:

New York City's Department of Consumer Affairs heads a coalition of organizations that promote awareness of the Earned Income Tax Credit (EITC). The coalition also provides free tax preparation at coalition affiliated sites.

We also promote the use of low cost banking options. Our financial institution partners conduct financial education programs targeting consumers. The Citywide Earned Income Tax Credit (EITC) Coalition includes community, civic, media, and business groups, educating potential EITC recipients and filing taxes at free tax preparation centers. Some examples include The Legal Aid Society, Bank of America, New York Language Center, and YMCA of Greater New York. For a complete list of the coalition go to <http://www.nyc.gov/html/dca/html/initiatives/eitcsponsors.shtml>.

Source: <http://www.banking.state.ny.us/fec/clnyceit.htm> , <http://www.nyc.gov/html/dca/html/initiatives/eitc.shtml>

Greater Los Angeles Campaign Partnership – EITC and Child Tax Credit (CTC) outreach campaign in LA County to provide education and resources to low-income families. They provide:

1. Free tax preparation services
2. Partner with 35 sites throughout the county offering many other services for low to moderate-income families
 - Electronic filing
 - Preparation of prior year returns and amendments
 - Free or low-cost bank accounts
 - Application to have your refund on a “store valued card,” which works like a debit/ATM card.”
 - Access to other benefits such as credit management workshops, financial planning, low-cost health insurance programs, and food stamps.
 - Telephone appointment scheduling

Assistance is available in English, Spanish, and other languages.

Trained volunteers are ready to help you fill out your return and process it online. Refunds are received by mail within 10-15 days.

3. Child Tax Credit (CTC)
4. Retroactive EITC
5. Advanced Earned Income Tax Credit

	<p>Source: http://www.childpc.org/eitc/index.php, http://www.childpc.org/eitc/docs/EITC-BrochureUpdate.pdf</p>
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>2006 EITC – Should I Apply? Tips and Guidance for Determining Eligibility – Questionnaire http://apps.irs.gov/app/eitc2006/Forward_Eligibility.do;jsessionid=InL8HyYKLcb24wHLFhmxT1TKhgkVSvDJs52nfg9xqDNWvvjshJQs!-545103429!1228199851</p> <p>2006 EITC – How Much is My Credit? Tips and Guidance for Estimating Credit Amount – Questionnaire http://apps.irs.gov/app/eitc2006/Forward_2006_Calc.do;jsessionid=InL8HyYKLcb24wHLFhmxT1TKhgkVSvDJs52nfg9xqDNWvvjshJQs!-545103429!1228199851</p> <p>2006 EITC – Does My Child Qualify? Tips and Guidance for Determining Qualifying Children for EITC – Questionnaire http://apps.irs.gov/app/eitc2006/Forward_Qualifying_Child.do;jsessionid=InL8HyYKLcb24wHLFhmxT1TKhgkVSvDJs52nfg9xqDNWvvjshJQs!-545103429!1228199851</p> <p>2007 Earned Income Tax Credit Estimator http://www.cbpp.org/eic2007/calculator/eitcchoose.htm</p> <p>Comparing the Eligibility Requirements for the EIC and the CTC http://www.cbpp.org/eic2007/Comparison%20Chart.pdf</p> <p>Earned Income Tax Credit Could Pay Off By Kay Bell http://www.bankrate.com/brm/itax/tips/20010130a.asp?caret=1</p> <p>The 2007 Earned Income Tax Credit Outreach Kit http://www.cbpp.org/eic2007/</p> <p>Center on Budget and Policy Priorities A Hand Up: How State Earned Income Tax Credits Help Working Families Escape Poverty in 2006</p>

	<p>http://www.cbpp.org/3-8-06sfp.pdf</p> <p>Delivering a Local EITC: Lessons from the San Francisco Working Families Credit by Tim Flacke and Tiana Wertheim http://www.brookings.edu/~media/Files/rc/reports/2006/05childrenfamilies_flacke/20060516_SFWorks.pdf</p> <p>City of San Francisco Working Families Credit Website http://sfgov.org/site/frame.asp?u=http://www.workingfamiliescredit.org</p> <p>Article: San Francisco Delivers a Local Earned Income Tax Credit http://www.brookings.edu/opinions/2006/0626childrenfamilies_berube.aspx</p> <p>Relevant Articles Related to EITC through the Center on Budget and Policy Priorities http://www.cbpp.org/pubs/eitc07.htm</p> <p>United Way of New York City Promoting Earned Income Tax Credit for Working Poor – Press Release http://www.unitedwaynyc.org/?id=68&pg=010807</p> <p>Relevant Articles Related to EITC http://www.policyalmanac.org/social_welfare/eitc.shtml</p> <p>Disability Benefits 101: Working with a Disability in California – Earned Income Tax Credit FAQs http://www.disabilitybenefits101.org/ca/programs/work_benefits/eitc/index.htm</p>
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Task Force Research Summary

Work Group	Assistance to Needy Families
Strategy	One-Stop Center
Indicate	Individuals seeking to receive services and resources on a variety of areas (ie career, social services, childcare,

<p>Target</p>	<p>legal, medical) at one single location. The City of Irvine may want to collaborate with the One Stop Center implemented in Orange County and add other services to work force training that is already being implemented. Currently, there is a One Stop Center in Irvine.</p> <p>The City of Irvine may also choose to support the implementation of a citywide Coordinated School Health Program, a one-stop center model for providing health resources, education, and services in schools.</p>
<p>Description of Approach & Program Elements:</p>	<p>Orange County currently implements a One Stop Center through the federal Workforce Investment Act.</p> <p>Introduction</p> <p>The federal Workforce Investment Act (WIA), which superseded the Job Training Partnership Act, offers a comprehensive range of workforce development activities through statewide and local organizations. Available workforce development activities provided in local communities can benefit job seekers, laid off workers, youth, incumbent workers, new entrants to the workforce, veterans, persons with disabilities, and employers.</p> <p>The purpose of these activities is to promote an increase in the employment, job retention, earnings, and occupational skills improvement by participants. This, in turn, improves the quality of the workforce, reduces welfare dependency, and improves the productivity and competitiveness of the nation. California will receive approximately \$454 million from the federal government this year to provide services for adults, laid-off workers, and youth.</p> <p>Available Services</p> <p>Title I of the WIA authorizes services for youth, adults, and laid-off workers. Eligible youth must be 14 to 21 years of age, low income, and meet at least one of six specific barriers to employment. A year-round youth program emphasizes attainment of basic skills competencies, enhances opportunities for academic and occupational training, and provides exposure to the job market and employment. Activities may include instruction leading to completion of secondary school, tutoring, internships, job shadowing, work experience, adult mentoring, and comprehensive guidance and counseling. The program emphasizes services for out-of-</p>

school youth.

Eligible adults must be age 18 or older. While eligible laid-off workers are generally individuals who have been terminated from their last employment and are unlikely to return to their previous industry or occupation, displaced homemakers and self-employed individuals also may qualify for these services. Adult and laid-off worker services are provided through locally based One-Stop Career Centers. Comprehensive One-Stop centers provide access to a full range of services pertaining to employment, training and education, employer assistance, and guidance for obtaining other assistance. While WIA requires One-Stop centers to provide specific services, local areas may design programs and provide services that reflect the unique needs of their area.

One-Stop centers use varied strategies in providing the appropriate services to meet the needs of their customers:

- **Core Services** are available and include, in part, labor market information, initial assessment of skill levels, and job search and placement assistance.
- **Intensive Services** are available to eligible unemployed individuals who have completed at least one core service, but have not been able to obtain employment, or employed individuals needing additional services to obtain or keep employment that will lead to personal self-sufficiency.
- **Training Services** are available to eligible individuals who have met the requirements for intensive services and have not been able to obtain or keep employment. Individual Training Accounts are established to finance training based upon the individual's choice of selected training programs.

Administration of WIA

The Governor has appointed a State Workforce Investment Board (WIB) consisting primarily of representatives from businesses, labor organizations, educational institutions, and community organizations. The State WIB assists the Governor in designing a statewide plan and establishing appropriate program policy.

The 50 [Local Workforce Investment Areas \(LWIAs\)](#) administer WIA services as designated by the Governor. Factors that are considered in designating these LWIAs include geographic location, population, and

commonality of labor market areas. The Chief Elected Official (CEO) of each LWIA appoints a Local WIB with a local membership similar to the State WIB. The Local WIB develops and submits a local area plan to the Governor, appoints local One-Stop operators, and selects eligible organizations to provide services for youth and adults. In cooperation with the CEO, the Local WIB appoints a Youth Council that will help establish youth policy for local education and job training.

Benefits of WIA

The activities provided by WIA at the local level offer a variety of benefits to both program participants and the communities in which they reside:

- Job Seekers
 - Universal access to job search and labor market information
 - Advice, counseling, and support
 - Education and skills training
 - Individual choice of service
- Youth
 - Basic skills assessment
 - Resources and guidance help to attain educational goals
 - Leadership development opportunities
 - Exposure to work environment through training and adult mentoring
- Employers
 - Influence over local area employment policy
 - Improved and trained employee pool
 - Development of on-the-job and customized training opportunities
 - Assistance for laid-off workers
- Community
 - Access to local area job market information
 - Improved workforce quality
 - Services designed for local area needs

- Reduced need for welfare

California's Eligible Training Provider List (ETPL)

The [ETPL](#) was established in compliance with the Workforce Investment Act (WIA) of 1998. The purpose of the [ETPL](#) is to provide customer-focused employment training for adults and dislocated workers. Training providers who are eligible to receive Individual Training Accounts (ITAs) through WIA Title I-B funds are listed on the [ETPL](#)

Other Information

[Job Seekers and Training Services](#)

- Am I eligible?
- What services are available?
- Where can I get services?

[Information for Employers](#)

- What services are available?
- Where can I get services?
- Worker Adjustment and Retraining Notification (WARN) Act Information
- Closing Your Business

Source: <http://www.edd.ca.gov/wiarep/wiaind.htm#AvailableServices>

ORANGE COUNTY ONE-STOP CENTER

Through the collaborative efforts of federal, state, county, local agencies, and business the Orange County One-Stop Centers were designed to meet the needs of the employer and job seeker. These Centers are intended to provide a more coordinated, customer-friendly, locally driven workforce development system.

Most of the services and resources are free due to federal funding; however, some services could be offered on a fee basis.

The One-Stop planning and development process was initiated in November 1994 with funding from the U.S. Department of Labor due to the following reasons:

- The average employee will change jobs six times during their lifetime. This has led to a national need to focus on employability since workers are no longer staying in their jobs with one company for their lifetime.
- Workers are required to take on a greater variety of tasks with the advent of more businesses becoming "high performance" workplaces. This leads to their need for improved basic skills and literacy, English language, computational, work readiness, and flexibility training.
- Since we are in an era of high-tech, global, and increasing competitiveness, jobs are increasingly requiring rapidly changing skill sets leading to life-long learning for all workers.

The Workforce Investment Act (WIA) legislation of 1998 further defines the vision of the One-Stop Centers to provide the following:

- Universal Services - To offer employer, job seeker, and education/training seekers a wide array of useful information, as well as widespread and easy access to needed services.
- Integrated Systems - To provide as many job seeking and employment retention skills, education, or occupational skill training services as possible for unified customer service.
- Customer Choice - To consider the needs and interests of customers in all aspects of service delivery and support informed choices by providing a means for customers to judge quality of services.
- Performance Driven/Outcome Based - To meet and exceed clearly identified and measurable outcomes.

Source: <http://www.oconestop.com>

One report date October 18, 2007 revealed that California One-Stop Centers were built around four processes:

- A universal services process, where a person can walk in to One-Stop and use services to find a job or

training opportunities

- An enrolled services process, eligible clients formally enroll in programs such as the WIA Adult program, the Trade Adjustment Assistance Act program or CalWorks
- A business services process, services to business ranging from workshops on writing a business plan to rapid response services for companies facing a layoff or closure
- A youth services process, services to eligible youth that range academic support to case management, to help finding a summer job

Source: http://www.calwia.org/doc_files/California%20One-Stop%20System%20Cost%20Study%20Report_Exec%20Summary%20w%20Cover%20Page.pdf , <http://www.calwia.org/>

COORDINATED SCHOOL HEALTH PROGRAM (CSHP) MODEL:

What is a CSHP?

A coordinated school health program (CSHP) model consists of eight interactive components. Schools by themselves cannot—and should not be expected to—solve the nation’s most serious health and social problems. Families, health care workers, the media, religious organizations, community organizations that serve youth, and young people themselves also must be systematically involved. However, schools could provide a critical facility in which many agencies might work together to maintain the well-being of young people.

Eight Component Model:

1. **Health Education:** A planned, sequential, K-12 curriculum that addresses the physical, mental, emotional and social dimensions of health. The curriculum is designed to motivate and assist students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors. It allows students to develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices. The [comprehensive health education curriculum](#) includes a variety of topics such as personal health, family health, community health, consumer health, environmental health, sexuality education, mental and emotional health, injury prevention and safety, nutrition, prevention and control of

disease, and substance use and abuse. Qualified, trained teachers provide health education.

2. **Physical Education:** A planned, sequential K-12 curriculum that provides cognitive content and learning experiences in a variety of activity areas such as basic movement skills; physical fitness; rhythms and dance; games; team, dual, and individual sports; tumbling and gymnastics; and aquatics. Quality physical education should promote, through a variety of planned physical activities, each student's optimum physical, mental, emotional, and social development, and should promote activities and sports that all students enjoy and can pursue throughout their lives. Qualified, trained teachers teach physical activity.

3. **Promote Health:** These services are designed to ensure access or referral to primary health care services or both, foster appropriate use of primary health care services, prevent and control communicable disease and other health problems, provide emergency care for illness or injury, promote and provide optimum sanitary conditions for a safe school facility and school environment, and provide educational and counseling opportunities for promoting and maintaining individual, family, and community health. Qualified professionals such as physicians, nurses, dentists, health educators, and other allied health personnel provide these services.

4. **Nutrition Services:** Access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students. School nutrition programs reflect the U.S. Dietary Guidelines for Americans and other criteria to achieve nutrition integrity. The school nutrition services offer students a learning laboratory for classroom nutrition and health education, and serve as a resource for linkages with nutrition-related community services. Qualified child nutrition professionals provide these services.

5. **Counseling and Psychological Services:** Services provided to improve students' mental, emotional,

	<p>and social health. These services include individual and group assessments, interventions, and referrals. Organizational assessment and consultation skills of counselors and psychologists contribute not only to the health of students but also to the health of the school environment. Professionals such as certified school counselors, psychologists, and social workers provide these services.</p> <p>6. Healthy School Environment: The physical and aesthetic surroundings and the psychosocial climate and culture of the school. Factors that influence the physical environment include the school building and the area surrounding it, any biological or chemical agents that are detrimental to health, and physical conditions such as temperature, noise, and lighting. The psychological environment includes the physical, emotional, and social conditions that affect the well-being of students and staff.</p> <p>7. Health Promotion for Staff: Opportunities for school staff to improve their health status through activities such as health assessments, health education and health-related fitness activities. These opportunities encourage school staff to pursue a healthy lifestyle that contributes to their improved health status, improved morale, and a greater personal commitment to the school's overall coordinated health program. This personal commitment often transfers into greater commitment to the health of students and creates positive role modeling. Health promotion activities have improved productivity, decreased absenteeism, and reduced health insurance costs.</p> <p>8. Family/Community Involvement: An integrated school, parent, and community approach for enhancing the health and well-being of students. School health advisory councils, coalitions, and broadly based constituencies for school health can build support for school health program efforts. Schools actively solicit parent involvement and engage community resources and services to respond more effectively to the health-related needs of students.</p> <p>Source: http://www.cdc.gov/HealthyYouth/CSHP/</p>
Relevance to Work Group	The City of Irvine may want to collaborate with the existing One Stop Center in Irvine and provide additional services for low-income families.
Outcomes	

Staffing:	
Cost Factors:	<p>In one study dated October 18, 2007 the 22 sites studied had annual costs of \$66.5 million, with an average cost of about \$3 million, but a median cost (the point at which half the sites were above and half below) of \$2.4 million. Costs ranged from a low of \$900,000 to a high of \$10 million. The activities that took place in the One-Stops could be placed within four processes: “universal services process,” “enrolled services process,” “business services process,” and “youth services process.” We then estimated the percentage of total costs generated by each process. Summing across all 22 sites, the “enrolled services process” accounted for the largest amount of costs at 48% followed by “universal services,” “business services,” and “youth services” (which were present in about half the One-Stops). Across all 22 sites partners’ costs accounted for about 34% or \$22.4 million of total costs for the One-Stops studied. Contributions tended to be largest in the universal process and smallest in business services.</p> <p>Source: http://www.calwia.org/doc_files/California%20One-Stop%20System%20Cost%20Study%20Report_Exec%20Summary%20w%20Cover%20Page.pdf , http://www.calwia.org/</p>
Challenges:	
Local / Regional Expertise or Places where practice is in operation:	<p>Orange County Workforce Investment Board - Investment Area <i>Mr. Andrew Munoz, Executive Director</i> <i>Orange County Housing & Community Services Department/Community Investment Division</i> <i>1300 South Grand Avenue, Building B, 3rd Floor</i> <i>Santa Ana, CA 92705-4407</i> <i>(714) 567-7370</i> <i>FAX (714) 834-7132</i> www.ocwib.org/</p> <p><u>Orange County One-Stop – Irvine</u></p>

125 Technology Way
Suite 200
Irvine, CA 92618
Phone: (949) 341-8000
Hours: Monday - Friday (8am - 5pm)
<http://www.oconestop.com/welcome.htm>

THE STATE OF VIRGINIA:

The state of Virginia, and other states across the country, uses the Workforce Investment Act to implement a One Stop Center.

The Virginia Workforce Center, in coordination with our partners, can assist in accessing a wide variety of employment-related services and programs, including Earned Income Tax Credit (EITC) support. Several of these services are tied to eligibility criteria and dependent upon available funding.

Support Services Available

- Get Assistance with Day Care
- Get Help Preparing for the GED
- Get Assistance with Medical Insurance for Children and Pregnant Women

Online Services

- Find A Job Online
- Business Listings
- Employment Links
- Business News
- Unemployment Information and Claim Form

Employee Services

- Resource Room

- Core Services
- Intensive Services
- Training Services

Employer/Business Services

- Job Order and Referral Services
- Core Services
- Resource Room
- Intensive Services
- Training Services

Earned Income Tax Credit (EITC) Support

- General information about EITC is provided on their website
- They provide links to the EITC website
- They refer people to a person at Virginia Community Action Partnership for free income tax preparation
- They refer people to the Virginia CASH Campaign (Creating Assets, Savings and Hope). It was created to help low- and moderate-income workers move toward greater self-sufficiency (a) by receiving the federal EITC and (b) through financial literacy and other asset-building activities.

Current Partner Agencies Providing Services to Center:

- [Charlotte County Industrial Development Authority](#)
- [Charlotte County Department of Economic Development](#)
- [Virginia Employment Commission](#)
- [Longwood Small Business Development Center](#)
- [Charlotte County Public Schools](#)
- [Charlotte County Learning Center](#)
- [Southside Virginia Community College Office of Adult Education](#)
- [Charlotte County Library](#)

- [Virginia Department of Rehabilitative Services](#)
- [Experience Works, Inc.](#)
- [Division of Child Support Enforcement](#)
- [Charlotte County Department of Social Services](#)
- [Tri-County Community Action Group](#)
- [Telamon Corporation](#)
- [Crossroads Community Services Board](#)
- [Workforce Investment Board, SCSEP-Title V Program](#)

Source: <http://www.charlottejobs.org/index.php>, <http://www.charlottejobs.org/eitc.php>,
<http://www.virtualcap.org/cmsSpecialApps/innovprog/showProgram.asp?progid=209&category=&subcategory=0>

FLORIDA'S COORDINATED SCHOOL HEALTH PROGRAM

The Florida Department of Education, in cooperation with the Department of Health, administers the Centers for Disease Control and Prevention (CDC) funded Coordinated School Health Program (CSHP) to assist in the development and enhancement of state, district and school-based infrastructures that protect and maintain student health and support academic achievement. The Coordinated School Health approach provides a strategy for improving the health and learning of Florida's school age children.

Experts in the eight components of the Coordinated School Health model focus primarily on six risk behaviors that have been identified to be most detrimental to youth:

- inadequate physical activity
- poor nutrition
- tobacco use
- alcohol and other drugs
- intentional and unintentional injury
- risky sexual behavior

[Florida Healthy Schools Newsletter:](#) Published quarterly to share information about programs and services in

the State of Florida that support healthy schools. Effective school and community programs are highlighted, as well as state level policy changes.

District School Health Advisory Committees (SHAC), which are required by Florida statute to contain membership from the eight component areas of Coordinated School Health, provide advocacy for school health and identify needs and opportunities to maximize community resources.

Florida School Health Advisory Committee Manual: This document is the Florida Department of Health approved guide to developing and conducting school health advisory committees.

- [Manual - 320 KB pdf](#)
- [Companion document - 70 KB pdf](#)

Florida Healthy School Program: CSHP provides resources and technical support to schools to assist in the establishment of Healthy School Teams. Information and resources on how to start a Healthy School Team are available at: <http://www.fldoe.org/bii/instruct/health/h-pilot.asp>.

The School Health and Education Consortium (SHEC) sponsored by the Coordinated School Health Program (CSHP) has been in existence for over ten years. Membership is comprised of representatives from the eight components of the Coordinated School Health model drawn from business, medical, insurance, higher education, health foundations, professional organizations, school boards and the private sector. Members are advocates for school health and wellness who combine their expertise, influence and resources to advocate for policy and environmental changes to create healthy, positive learning environments that ultimately lead to academic success.

- [Consortium Fact Sheet - 63 KB pdf](#)

Safe and Healthy Students Resource Center: The Coordinated School Health Resource Center maintains a collection of K-12 health education materials for use by parents, educators, school health services professionals, and community personnel who work with students. Materials are available for loan and include books, curriculum guides, videotapes, CD ROMs, charts, and models. This service is free of charge and

includes free return postage. [Additional information](#) about the Safe and Healthy Students Resource Center.

Youth Risk Behavior Survey (YRBS): The Florida Department of Health and the Florida Department of Education provide organizational structure and processes for the survey and collection of information from the YRBS. The information obtained from this survey supports schools and other local community agencies and organizations serving Florida's youth. The data is then utilized to appropriately design and implement programs that prevent drug use, provide healthy environments and support a delivery of educational services to youth. Florida now has three years of weighted data from 2001, 2003 and 2005. [More Information](#) about the Florida YRBS Reports.

HIV/AIDS Prevention Education Project: The goal of this project is to strengthen the provision of effective HIV/AIDS prevention education and school health education in Florida. This goal will be accomplished through:

- Technical assistance to districts regarding updating and creating HIV/STD and pregnancy prevention policy and curriculum
- Training and professional development opportunities for parents, students, educators, school nurses, psychologists, social workers, and Department of Juvenile Justice staff offered through training tracks at various statewide conferences
- Development and promotion of partnerships between state and local departments of health, school districts, and community-based organizations

More information can be found at: http://www.fldoe.org/bii/instruct/health/hiv_std_prevention.asp

"Healthy Bodies for Healthy Brains; a Resource for Florida's Schools": Provides an overview of a Coordinated School Health approach to child health and academic success.

- [Healthy Bodies for Healthy Brains - 1,936 KB pdf](#)

Coordinated School Health Program (CSHP) Information:

	<ul style="list-style-type: none"> • Department of Education Coordinated School Health Website <p>Preventing Sexual Violence: The Florida Department of Health Sexual Violence Prevention Program (SVPP) works in partnership with rape crisis centers, mental health and public health agencies, universities, faith based initiatives, and other organizations throughout the state to provide cultural and age specific education for the primary prevention of sexual violence. Presentations include 50 minute minimum public and professional trainings for parents, teachers, law enforcement, and advocates; or education for fourth and fifth grade, middle, high school, and college students and other at-risk populations. Education curricula includes (but is not limited to): identifying and avoiding dating violence and un/healthy relationships, drug/alcohol facilitated rape, sexual harrassment, bystander behavior, predator internet dangers, and cyber bullying.</p> <p>Source: http://www.doh.state.fl.us/Family/CSHP/index.html</p>
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>Orange County Workforce Investment Board – Investment Area www.ocwib.org/</p> <p>Virginia Workforce Network http://www.vwn.virginia.gov/</p> <p>Clermont County One Stop Operations Guide http://www.ohioworkforce411.gov/docs/jobseekers/OneStopPartnerOperationsGuide.pdf</p> <p>Arkansas State Unified Plan – One Stop Center Development and Certification Instrument http://awib.arkansas.gov/plan_2001/attachment_b_2%201.pdf</p> <p>Coordinated School Health Program (CSHP) Guidelines for Coordination (including Best Practices) http://www.maineeshp.com/guidelines.html</p> <p>Promoting Health and Academic Success Through Collaboration and Partnership A Guide for Florida’s School Health Advisory Committee Utilizing A Coordinated School Health Approach - manual</p>

http://www.doh.state.fl.us/Family/CSHP/FL_SHAC_Manual.pdf

Task Force Research Summary

Work Group	Assistance to Needy Families
Strategy	Self-Sufficiency Standard
Indicate Target	Tool used nationally for low-income families. The City of Irvine may choose to use this tool as the standard for families to qualify for citywide programs and services intended to improve the lives of needy families.
Description of Approach & Program Elements:	<p>GENERAL OVERVIEW:</p> <p>The Self-Sufficiency Standard is a calculation of basic costs required for working parents to support their families, on a county-by-county basis. It is calculated for 70 different family types, ranging from a single person with no children to single parents and two-parent families with 1,2 and 3 children of varying ages (infant, preschool, school age and teenager).</p> <p>The Self-Sufficiency Standard is a more accurate measure of need than the often-used Federal Poverty Line (FPL). The FPL is calculated only using the cost of food times three and does not vary according to where one lives or the ages of children in the household. The Standard includes the costs not only of food but also housing, child care, health care, transportation, miscellaneous costs, taxes and tax credits - all the basic costs required for a family to enter and remain in the workforce.</p> <p>Dr. Diana Pearce developed the concept of the Self-Sufficiency Standard in the mid-1990s, when she was working with Wider Opportunities for Women (WOW). Since its inception, the Standard has been calculated for 35 states by WOW and Dr. Pearce. Under WOW's guidance, the Self-Sufficiency Standard is part of national network of state coalitions, called Family Economic Self-Sufficiency (FESS) projects. In California, the Self-Sufficiency Standard is published by the National Economic Development and Law Center, home of Californians for Family Economic Self-Sufficiency (CFSS).</p>

Source: <http://www.insightcced.org/uploads/publications/wd/UsingtheCASSSinPractice.pdf>

The components of the Self-Sufficiency Standard for California and the assumptions included in the calculations are described below.

1. **Housing:** The Standard uses the Fiscal Year Fair Market Rents for housing costs, which are calculated annually by the U.S. Department of Housing and Urban Development for every metropolitan housing market and non-metropolitan county
2. **Child Care:** The Standard uses the most accurate information available that is recent, geographically specific, and age- and setting- specific. In most states, this is the survey of child care costs originally mandated by the Family Support Act, which provides the cost of child care at the 75th percentile, by age of child and setting.
3. **Food:** The Standard uses the Low-Cost Food Plan for food costs. The Low-Cost Food Plan is based on more realistic assumptions about food preparation time and consumption patterns when compared to the Thrifty Food Plan.
4. **Transportation:** If there is an adequate public transportation system in a given area, it is assumed that workers use public transportation to get to and from work. A public transportation system is considered “adequate” if it is used by a substantial percentage of the population to get to work. The San Francisco metropolitan area is the only area in California in which substantial numbers of workers use public transportation to get to and from work. Elsewhere in the state, the proportion using public transportation is much less, and therefore it is not a reasonable assumption that workers would be able to get to work by public transportation. Data for private transportation is used for the remainder of the state and is based on the costs of owning and operating an average car.
5. **Health Care:** Health care costs in the Standard include both the employee’s share of insurance premiums plus additional out-of-pocket expenses, such as co-payments, uncovered expenses, and insurance deductibles.
6. **Miscellaneous:** It includes all other essentials such as clothing, shoes, cleaning products, etc.
7. **Taxes:** It includes state sales tax, federal and state income taxes, and payroll taxes.
8. **Earned Income Tax Credit (EITC):** Federal tax refund intended to offset the loss of income

from payroll taxes owed by working-poor and near-poor families. The EITC is a “refundable” tax credit; that is, working adults may receive the tax credit whether or not they own any federal taxes, adding to overall income.

9. **Child Care Tax Credit (CCTC):** Allows working parents to deduct a percentage of their childcare costs from the federal income taxes they owe.
10. **Child Tax Credit (CTC):** Allows parents to deduct up to \$500 per child (for children less than 17 years old) from the federal income taxes they owe.

HOW THE SELF-SUFFICIENCY STANDARD CAN BE USED:

I. As a Policy Tool:

1. **Targeted Jobs Strategy:** This strategy uses the Standard to assess the ability of various jobs, occupations, and sectors to provide self-sufficient wages for workers. The Standard is used together with analysis of the current local labor market supply and demand, an assessment of the available job training and education infrastructure, and an evaluation of the skills and location of current/potential workers. Through such analysis, it is possible to assess the jobs and sectors on which to target training and counseling resources.
2. **Evaluate Development Proposals:** By using the Standard to determine if the wages paid by new businesses seeking tax breaks and other government supports are at or above self-sufficiency, it can be determined if these proposed enterprises will require subsidies to the workers as well.
3. **Evaluate the Impact of Proposed Policy Changes:** The Standard can be used to evaluate the impact of restructuring subsidy programs, changing co-payment schedules, or implementing tax reforms of various kinds. With the Standard it is possible not only to show the direct impact on family incomes, but to model the effects of the interaction of taxes, tax credits, and where applicable, subsidies. It can similarly be used to look at the impact of changing program rules on both individual families and state budgets.
4. **Target Education and Job Training Investments:** The Standard can help to make the case for investing in various types of post-secondary education, and training including in non-traditional occupations for women and minorities, which provide access to a wide range of jobs pays Self-Sufficiency Wages.

II. **As a Guide for Wage-Setting:** By determining the wages necessary to meet basic needs, the Standard provides information for setting minimum wage standard

III. **As a Benchmark for Evaluation:** By evaluating outcomes in terms of self-sufficiency, programs are using a measure of true effectiveness. That is, for each participant, the question asked is how close are the wages achieved to the family's Self-Sufficiency Wage and thus how does the program impact on the ability of these adults to meet their families' needs adequately. Such evaluations can help redirect resources to the types of approaches that result in improved outcomes for participants.

IV. **As a Counseling Tool:** To help participants in work and training programs make choices among various occupations and jobs. The Standard has also been used to develop the Self-Sufficiency Standard Budget Worksheet, which is a tool that counselors and clients can use to "test" the ability of various wages to meet a family's self-sufficiency needs. With the information provided by the Standard, clients can make informed decisions about what kinds of training would most likely lead to Self-Sufficiency Wages and/or which jobs would best provide the resources they need.

V. **As a Public Education Tool:** It helps the public at large understand what is involved in making the transition to self-sufficiency. For employers, it shows the importance of providing benefits, especially health care, that help families meet their needs and protect against health crises becoming economic crises. By demonstrating how the various components fit together, it helps facilitate the coordination of various providers of services and supports, both public and private, such as Food Stamps, childcare providers, and education and training organizations.

VI. **In Research:** Because the Self-Sufficiency Standard provides an accurate and specific (both geographically, and in terms of the age of children) measure of income adequacy, it is finding increasing use in research on income adequacy and poverty. Since it has long been known that living costs differ greatly between different localities, the Self-Sufficiency Standard provides a means of estimating the true level of "poverty," or income inadequacy, and how this differs from place to place, and among different family types. In addition, the Standard provides a means to measure the adequacy of various supports and subsidies, such as child support or child care subsidies – given a

	<p>family's income, place of residence, and composition.</p> <p>Source: http://www.sixstrategies.org/files/ACF1A7.pdf</p>
Relevance to Work Group	<p>Calculation of the minimum income levels required for individuals and working families to meet their basic needs without public or private assistance on a county-by-county basis.</p> <p>Source: http://www.unitedwayoc.org/orangecountydata/orangecountydatalink.asp?id=11</p>
Outcomes	<p>Outcomes in using the Self-Sufficiency Standard as a benchmarking and evaluation tool: the ability to measure outcomes in relation to client needs.</p> <p>Outcomes of using Self-Sufficiency Standard as a policymaking tool for public agencies and legislative bodies: useful tool in making job training accessible to more people.</p> <p>Outcomes of using Self-Sufficiency Standard as a planning tool: the ability to realign program planning to meet needs of clients</p> <p>Source: http://www.insightcced.org/uploads/publications/wd/UsingtheCASSSinPractice.pdf</p>
Staffing:	
Cost Factors:	<p>In one study, costs for incorporating the Standard into a counseling or case management program only incurred minimal costs of staff training or staff time to develop materials. One organization estimated spending \$1000 for staff time to develop curricula to introduce the concept to clients in a classroom setting.</p> <p>Costs in using the Self-Sufficiency Standard as a benchmarking and evaluation tool: the costs involved in using the Standard as a benchmarking tool primarily involved paying staff/consultant time to develop the evaluation tool and then implementing it at the client level. United Way estimated \$50,000 to develop their benchmarking tool and evaluate client outcomes. The costs for nonprofits to</p>

	<p>track and record client information are unknown but would include staff time to collect and submit the data.</p> <p>There may be defensiveness in bringing the Self-Sufficiency Standard into a public agency where the Federal Poverty Line is the established eligibility standard.</p> <p>Source: http://www.insightcced.org/uploads/publications/wd/UsingtheCASSSinPractice.pdf</p>
<p>Challenges:</p>	<p>The Standard does not allow for longer-term needs, such as retirement, purchase of major items such as a car, or emergency expenses (except possibly under the “miscellaneous” cost category).</p> <p>Nothing about the Self-Sufficiency Standard should be taken to mean that such efforts to help each other should be discouraged. Nor should the Standard be understood as endorsing an ideal of self-dependence in complete isolation. Likewise, community, societal, and governmental response to families struggling to achieve family sustaining wages should be encouraged as supportive of the goal of self-sufficiency.</p> <p>Source: http://www.sixstrategies.org/files/ACF1A7.pdf</p> <p>Challenges in using the Self-Sufficiency Standard as a counseling and evaluation tool:</p> <ol style="list-style-type: none"> 1. Discouraging to Clients – May be discouraging to clients, especially if they have multiple barriers, low skills or have been unemployed for an extended period of time. 2. Online Calculator Needed – Some organizations may not have access to the web-based calculator to perform automatic calculations of what the family income needs are. <p>Challenges in using the Self-Sufficiency Standard as a benchmarking and evaluation tool: not enough family types. If the family type is not included in the 70 provided in the Standard, it is difficult to assess what their Standard should be.</p> <p>Challenges of using Self-Sufficiency Standard as a policymaking tool for public agencies and</p>

	<p>legislative bodies: lack of annual Standard updates</p> <p>Source: http://www.insightcced.org/uploads/publications/wd/UsingtheCASSSinPractice.pdf</p>
<p>Local / Regional Expertise or Places where practice is in operation:</p>	<p>Examples of using Self-Sufficiency Standard as a guideline for wage-setting</p> <ol style="list-style-type: none"> 1. Center for the Child care Workforce – developed specific guidelines for each county/school district in California for child care workers’ salaries 2. Community Action Agencies – evaluated the adequacy of their own salary schedules 3. Has been used in California communities and elsewhere to advocate for higher wages through living wage campaigns and in negotiating labor union agreements. <p>Source: http://www.sixstrategies.org/files/ACF1A7.pdf</p> <p>Examples of using Self-Sufficiency Standard as a counseling and educational tool:</p> <ol style="list-style-type: none"> 1. Women’s Initiative for Self-Employment 2. Santa Clara County CalWORKs 3. The Housing Authority of the City of Napa 4. Oakland Army Base Workforce Development Collaborative 5. Women in Nontraditional Employment Roles (WINTER) 6. Cuesta College CalWORKs 7. Santa Cruz County Human Resources Agency/CalWORKs 8. Women At Work – Pasadena, CA 9. Asian Perinatal Advocates (APA) <p>Examples of using Self-Sufficiency Standard as a benchmarking and evaluation tool:</p> <ol style="list-style-type: none"> 1. Oakland Army Base Workforce Development Collaborative, the Housing Authority of the City of Napa, ACCION San Diego, Jefferson Economic Development Institute - Income Tracking 2. United Way of the Bay Area - Benchmarking Client Progress 3. Women’s Initiative for Self-Employment, Women at Work - Outcome Evaluation <p>Examples of using Self-Sufficiency Standard as a policymaking tool for public agencies and</p>

legislative bodies:

1. Sacramento Employment and Training Agency (SETA)
2. Santa Cruz County Workforce Investment Board – use the Self-Sufficiency Standard to define “self-sufficiency”
3. Foothill Workforce Investment Board - use the Self-Sufficiency Standard to define “self-sufficiency”
4. Oakland Workforce Investment Board - use the Self-Sufficiency Standard to define “self-sufficiency”
5. City of Long Beach Workforce Development Bureau – Eligibility for Incumbent Worker Training (job training for people who are already working)
6. The San Francisco Workforce Investment Board – Eligibility for Incumbent Worker Training (job training for people who are already working)
7. Workforce Investment Network of Silicon Valley – Eligibility for Incumbent Worker Training (job training for people who are already working)
8. Verdugo Workforce Investment Board and Sacramento Employment & Training Agency – Use the Self-Sufficiency Standard to create their definition of “low-income”
9. City of Long Beach Workforce Development Bureau – Eligibility for Dislocated Worker Training
10. Foothill Workforce Investment Board - Eligibility for Dislocated Worker Training
11. California State Legislature adopted a resolution in 2004 (SJR 15) that encouraged the federal government to reexamine its use of the Federal Poverty Line and instead use a self-sufficiency index similar to the Standard.
12. In 2000, the California Department of Social Services released an All County Information Notice (No. I-123_00) about the Self-Sufficiency Standard. The notice went to all county welfare offices along with a copy of the 2000 Standard.
13. In 1997 the Sonoma County Board of Supervisors adopted a plan to implement welfare reform in their county. One of their goals included, “Provide the assistance needed to lift families and individuals out of poverty and into self-sufficiency.”

Examples in using Self-Sufficiency Standard as a planning tool:

1. Jewish Vocational Services
2. Blue Cross of California State Sponsored Programs

	<ol style="list-style-type: none"> 3. Girls Inc. 4. Santa Clara County Social Services Agency 5. United Way of the Bay Area 6. National Economic Development and Law Center 7. Sierra Economic Development District 8. Starting Points Initiative in the San Francisco Citywide Strategic Plan for Supporting Families <p>Examples in using Self-Sufficiency Standard as a persuasive tool:</p> <ol style="list-style-type: none"> 1. Catholic Charities San Bernardino/Riverside and ACCION San Diego – Grant writing 2. Honoring Emancipated Youth (HEY) – Public Education 3. California Department of Education – Public Education 4. Community Action Partnership of Orange County – Public Education 5. San Francisco Living Wage Coalition – Worker Advocacy 6. Northern California Carpenters Regional Council in Sonoma County – Worker Advocacy 7. Hotel Employees and Restaurant Employees Union (HERE) Local 11 – Worker Advocacy <p>Source: http://www.insightcced.org/uploads/publications/wd/UsingtheCASSSinPractice.pdf</p>
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>The Self-Sufficiency Standard for Orange County, CA, 2003 http://www.insightcced.org/uploads///cfess/Orange.pdf</p> <p>The Self-Sufficiency Calculator http://www.nedlc.org/cfess/calcba.htm</p> <p>Research Articles on Self-Sufficiency in California http://www.nedlc.org/Publications/publications_sss.htm</p> <p>Labor Workforce and Self-Sufficiency http://www.calaborfed.org/pdfs_wed/Self-Sufficiency.pdf</p> <p>Workforce Investment Board Overview</p>

<http://www.edd.ca.gov/wiarep/wiaind.htm>

Workforce Investment Act Laws and Regulations

<http://www.doleta.gov/usworkforce/wia/act.cfm>

SB 293 - signed by the Governor on September 29, 2006, replaces the Family Economic Security Act in the California Unemployment Insurance Code with provisions that generally implement the Workforce Investment Act (WIA) of 1998 in California.

<http://www.calwia.org/sb293/index.cfm>

Reality Check: Promoting Self-Sufficiency in the Public Workforce System: A Promising Practices Guide to Workforce Boards

<http://www.wowonline.org/wow/summary/default.asp>

Californians for Economic Self-Sufficiency Coalition (CFESS) Listserv

<http://workforcedev.typepad.com/workforcedev/2006/07/selfsufficiency.html>

Orange County United Way

<http://www.unitedwayoc.org/orangecountydata/orangecountydatalink.asp?id=11>

Ford Foundation The Real Cost of Living: 'Self-Sufficiency' may be the next frontier for U.S. Welfare Reform

http://www.fordfound.org/publications/ff_report/view_ff_report_detail.cfm?report_index=261

Six Strategies for Family Economic Self-Sufficiency - Setting the Standard for American Working Families

<http://www.sixstrategies.org/>

Task Force Research Summary

Work Group

Underage Drinking

Strategy	Youth Development and Resilience Based Prevention Model
Indicate Target	Youth development and resilience-based prevention programs are aimed at youth who are at risk. Schools, community-based organizations, and juvenile justice departments are utilizing many resilience based youth development prevention models in order to deter substance abuse among at-risk youth.
Relevance to Work Group	To identify effective strategies to curb the growing trend of underage drinking in the City of Irvine. Many community based agencies, juvenile justice departments, and schools utilize youth development and resilience based prevention models to reduce the prevalence of underage drinking and substance abuse.
Description of Approach & Program Elements:	<p><u>Building Youth Resilience: High Risk Behavior Prevention: A Youth Development Model.</u></p> <p>The youth development resilience based prevention model relies on increasing the resiliency of youth by helping them to develop “protective” factors that will promote healthy development and prevent high-risk behavior such as alcohol consumption or substance abuse. This process of building resiliency focuses on meeting the basic developmental needs of youth. These developmental needs are identified as:</p> <ul style="list-style-type: none"> • Safety • Belonging • Respect/self-worth • Autonomy/Identity • Mastery/Power • Meaning <p>The underlying assumption here is that if these basic needs are met youth will foster feelings of competence, confidence, and caring that in turn will result in healthy behavior outcomes. According to researcher Bonnie Benard, this youth development and resilience model, builds upon previous youth development and prevention models because the focus of prevention shifts away from “fixing the kid” to creating an environment that provides supports and opportunities. Resilience based youth</p>

	<p>development and prevention models also link specific developmental outcomes or “resiliency traits” with healthy behavioral outcomes. Healthy behavioral outcomes may include; social competence, problem solving skills, autonomy/identity, and sense of purpose and future. This model is assets based and recognizes that the person exists within a broader environment and context (Benard, 1998).</p> <p><u>Examples of youth development and substance abuse prevention strategies that are particularly grounded in this approach:</u></p> <ul style="list-style-type: none"> • <i>Media Advocacy and Literacy</i> that helps young people develop a critical consciousness about being targeted by the media and corporate industries that promote underage consumption of alcohol. Developing a critical consciousness is essential for developing ways for youth to fight back. • <i>Cross- age Mentoring</i> that gives youth adult role models, while they in turn, they mentor younger youth. • <i>Youth Driven Community Service Learning</i> in which young people are given leadership opportunities to serve their schools and communities (Benard, 1998).
Intended Outcomes	<p>The youth development resilience based approach predicts the following developmental outcomes that correlate with a reduction in high-risk behavior such as alcohol and substance abuse:</p> <p><u>External Assets Outcomes:</u> Youth achieve environmental supports and opportunities through the development of “protective factors.” These include: caring relationships, high expectations, and opportunities to participate/contribute.</p> <p><u>Internal Assets Outcomes:</u> Youth develop resilience traits. These include; social competence, problem-solving skills,</p>

	<p>autonomy/identity and a sense of purpose and future.</p> <p>These intermediary internal and external developmental outcomes lead to long-term positive developmental outcomes in the reduction of high-risk behavior such as alcohol and substance abuse (Benard, 1998).</p>
<p>Model Prevention Programs Grounded in this Approach: Local / Regional Expertise or Places where practice is in operation:</p>	<p>Early Prevention: Resilience Based Preschool Programs:</p> <p>According to the University of Minnesota National Resilience Resource Center, the two years a child spends in preschool with a resilience-based curriculum can be key to preventing drug abuse and high-risk behaviors. For example, a two-year evaluation of the Perry Preschool Program serving low-income African American youth in Ypsilanti, Michigan showed that preschoolers exposed to a resilience-based curriculum showed significant gains in youth development later in life. Eighty-four percent that entered the program at age 3 and 4 reported that at age 27 they “rarely to never” drank alcohol. This statistic was 28 percentage points higher than other preschool programs such as students enrolled in nursery schools or direct institutions. The Perry Preschools resilience based curriculum includes the following elements; child initiated learning, problem solving, decision making, planning, and a high degree of interaction between children and adults that correlates with a significant reduced risk in substance abuse later in life (Benard, Opportunities for Learning, 2001).</p> <p>Adventure Based Programs: Outward Bound</p> <p>According to the University of Minnesota National Resilience Resource Center, adventure-based programs and out of class experiences such as Outward Bound can be a powerful prevention strategy for youth in danger of high-risk behavior. Adventure-based programming helps to foster resilience and healthy developmental behavior in youth. These programs have been most effective in reducing alcohol and other drug use by focusing on a holistic approach to emotional, social, physical, intellectual, and spiritual needs. Adventure resilience based programs address developmental needs for safety, love, belonging, respect, autonomy, challenge/mastery, power, and meaning. Prevention programs are effective to the extent that they meet these needs (Benard & Marshall, Adventure</p>

Education, 2001).

Outward Bound, a non-profit group is the largest of the outdoor adventure-based programs for at risk youth. The core of the program teaches at risk youth to have confidence, mastery over challenging tasks, and the ability to work collaboratively in pressurized situations by leading a group of youth out into the wilderness for two to four weeks. These facilitated trips, require youth to engage in intense group problem solving and decision-making allowing them to master stressful situations. Many school and community prevention programs have included adventure-based wilderness programming to seek out positive outcomes for at-risk youth clients (Benard & Marshall, Adventure Education, 2001).

Outcomes:

According to evaluations of the Outward Bound Program, youth development outcomes are comprehensive and foster general well being. No mention was made of specific alcohol and other drug abuse outcomes; however, most of the 40 outcome measures examined constitute mediating variables commonly correlated with reducing incidences of substance abuse in youth (Benard & Marshall, Adventure Education, 2001).

Big Brothers/Big Sisters Mentoring Program of America:

The core operating philosophy of the Big Brother/Big Sister Mentoring Program relies on the assumption that fostering caring relationships between peers and across generations is a powerful tool in preventing at risk behavior for youth. The most notable outcomes from the program have been the deterrence of drug and alcohol use among youth and improved academic performance. An evaluation of the oldest youth mentoring program of Big Brothers and Big Sisters showed that youth were 46 percent less likely to use illegal drugs, 27% less likely to drink, 33% less likely to hit, and 50% less likely to skip school (Benard & Marshall, Big Brothers/Big Sisters, 2001).

Peer and adult mentors support an interpersonal dynamic whereby the mentor believes in the innate ability of the youth to solve problems on their own. This mutual support, and guidance is empowering for the youth, and helps them build protective factors against environments that put them at risk

	(Benard & Marshall, Big Brothers/Big Sisters, 2001).
<p>Relevant Research – Provide title and brief description of publication in addition to URL:</p>	<p>Marshall, K. <i>Bridging the Resilience Gap: Research to Practice</i>. In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.</p> <p>Benard, B. & Marshall, K. <i>Competence and Resilience Research</i>. In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.</p> <p>Benard, B. From Risk to Resilience: Inside Out Prevention: In the AOD Prevention Extension. The EMT Group for the California Department of Alcohol and Drug Programs, California.</p> <p><i>Provides an overview of the Youth Development and Resilience Model with related links to publications:</i> http://www.wested.org/cs/chks/print/docs/hks_resilience.html</p> <p>Link to a publication that discusses research and evaluation outcomes for recreation, resilience based youth development programs: http://findarticles.com/p/articles/mi_qa3903/is_200110/ai_n8955928/pg_1</p> <p><i>Provides an explanation of the Perry Preschool Study and contains other helpful links about the long-term assessment of the Perry Preschool Program:</i> http://www.highscope.org/Content.asp?ContentId=3</p> <p><i>Provides resources about the history, philosophy, and research and evaluation of Outward Bound Programs:</i> http://wilderdom.com/obmain.html</p> <p><i>Provides an overview of the Santa Fe Mountain Center youth development resiliency based model:</i></p>

	<p>http://www.sf-mc.com/about/eam.shtml</p> <p><i>Provides links with information about the Big Brothers Big Sisters Program of America:</i> http://www.bbbs.org/site/c.diJKKYPLJvH/b.1539751/k.BDB6/Home.htm</p>
Research Summary References	Benard, B. & Marshall. K, <i>Big Brothers/Big Sisters Mentoring: The Power of Developmental Relationships</i> . In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.
	Benard, B. <i>Prevention from the Inside Out: Tapping Resilience in Youth</i> . In Prevention Tactics 2:3 1998.
	Benard, B. & Marshall. K, <i>Adventure Education: Making a Lasting Difference</i> . In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.
	Benard, B. & Marshall. K, <i>Opportunities for Child Initiated Learning: Long-Term Follow Up Studies of Preschool Programs</i> . In Resilience Research for Prevention Programs. University of Minnesota National Resilience Resource Center, Minneapolis, 2001.

Children’s Mental Health Task Force

Task Force Research Summary

Work Group	CHILDREN’S MENTAL HEALTH
Strategy	Prevention Strategies aimed at preventing student stress, depression, or other mental health issues.
Indicate Target	Prevention strategies do not target populations, but are efforts to inoculate large segments of the population. Assessment and early intervention strategies and secondary prevention strategies would target students who are at risk of mental health issues or who have been identified as potentially developing mental health problems. Intervention and secondary prevention strategies will be summarized in a separate table following this one.
Description of Approach & Program Elements:	<p>Assessing School Culture and Wellness Promotion Strategies: A range of research-based and promising practices are available to help schools prevent some mental health problems, particularly stress-related and stress-induced conditions. But in order to understand what kind of program is most appropriate to a school community, an assessment of the school’s current practices is worthwhile. An excellent resource for assessing a school environment is called <i>Creating an Environment for Social and Emotional Wellbeing</i>. (EDC, 2003) (cited below). The implementation of this kind of assessment at schools could be an excellent launching pad for future discussion and planning.</p> <p>Parent Education: Parent education programs aimed at helping parents better understand how to set high expectations while providing support for students and not punishment or criticism for failure to always meet those expectations. There is significant research suggesting that student stress and depression is more closely related to how parents set expectations for their children. A number of effective parent training/education programs are identified in the <i>Search for Programs to Help Youth</i> or <i>The Promising Practices Network</i> described below under research resources. Among them:</p> <ul style="list-style-type: none"> <input type="checkbox"/> <i>Guiding Good Choices</i>, a five week multimedia training family competency training program that reduces risk of substance abuse, but in doing so fosters positive parenting practices that could contribute to increasing child resiliency and promotes parents behaviors related to

reductions in stress, anxiety and depression. The program is designed for middle school children.

Student Education @ Personal Mental Health: There is substantial evidence that students can learn self-regulating behaviors that contribute to improved physical and mental health. There are a wide variety of such programs to choose from many of which can be implemented reasonably cheaply. A barrier to implementing these programs, however, is that most require class time to be implemented and in the high-stakes testing environment, schools are reluctant to devote time to non-academic activities. One model is Teenage Health Teaching Modules (THTM) which has been used nationally and independently evaluated with the evaluation showing significant positive effects on students' health knowledge, attitudes and self-reported behaviors. Another model is the *Positive Youth Development Program* a 121 page curriculum delivered to 6th and 7th grade students over 20 sessions of 50 minute sessions. An expanded curriculum now includes 45 sessions. Initial research shows positive reductions in self-reported delinquency and antisocial behavior.

Student Exercise, Meditation, Martial Arts: There is substantial evidence that various forms of exercise and meditation can reduce hypertension, stress, anxiety and depression. A variety of models exist that can be implemented either as part of a physical education program, after school program or parks and recreation-sponsored activity. In addition, students identified as exhibiting signs of anxiety, stress, and depression could be referred for an after school program that targets these students.

- Needham High School in Massachusetts, has established a Stress Reduction Committee that has implemented a wide range of school policy changes ranging from eliminating homework from weekends and tests or major assignments due after vacations and implementing a required yoga class for all seniors and starting classes later so teens can get more sleep. <http://www.nytimes.com/2007/10/29/education/29stress.html?pagewanted=1>

Other Wellness Promotion Strategies. There are a wide variety of school wide wellness promotion strategies and programs that have been researched. Three are highlight below, but others are available by using the Promising Practices Network site identified in the research and resources section.

	<ul style="list-style-type: none"> ❑ <i>Promoting Alternative Thinking Strategies (PATHS)</i> is a comprehensive program for promoting emotional and social competencies and reducing aggression and acting-out behavior in children ages 5 to 12, while simultaneously enhancing The educational process in the classroom. This innovative curriculum for kindergarten through sixth grade is used by educators and counselors as a multiyear prevention model. The PATHS curriculum provides teachers with systematic and developmentally based lessons, materials, and instructions for teaching their students emotional literacy, self control, social competence, positive peer relations, and interpersonal problem-solving skills. ❑ <i>Olweus Bullying Prevention</i> is a multilevel, multicomponent school-based program designed to prevent or reduce bullying in elementary, middle, and junior high schools (students ages 6 to 15 years). The program attempts to restructure the existing school environment to reduce opportunities and rewards for bullying. School staff members primarily are responsible for introducing and implementing the program. Their efforts are directed toward improving peer relations and making the school a safe and positive place for students to learn and develop. ❑ <i>Second Step</i> is a classroom-based social skills program for preschool through junior high students (ages 4 to 14). It is designed to reduce impulsive, high-risk, and aggressive behaviors, and to increase children’s social-emotional competence and other protective factors. Group discussion, modeling, coaching, and practice are used to increase students’ social competence, risk assessment, decision-making ability, self-regulation, and positive goal setting. The program’s lesson content varies by grade level and is organized into skill-building units covering empathy, impulse control, problem solving, and anger management.
Relevance to Work Group	Strategies outlined above would reduce the number and scope of preventable mental health problems, freeing clinical resources to address the needs of children with more serious disorders.
Outcomes	<ul style="list-style-type: none"> ❑ Reduction in indicators identified in Teen Screen assessments identifying children with suicidal ideation ❑ Reduction in specific stress, eating disorder, and depression indicators incorporated into Healthy Kids Survey ❑ Changes in attitudes of parents and students about the importance of achievement and the relationship between parental pressure and student depression and stress. A community survey would need to be developed to get at these two outcomes, but this would be a good

	<p>indicator of the impact of strategies attempting to influence community norms.</p> <p><input type="checkbox"/> Reduction in suicide attempts and 5150 are more likely to be influenced by secondary prevention and/or intervention and treatment services.</p>
Staffing:	Staffing varies depending upon the program, but most school-wide wellness promotion strategies are usually staffed by a prevention or health promotion specialist and do not generally require an individual with clinical licensure.
Cost Factors:	Cost factors vary significantly, but research demonstrates that investments in wellness promotion and prevention are cost-effective.
Challenges:	By definition, school-based strategies occur at the school site and require collaboration and cooperation from schools that have other competing/complimentary priorities. Especially in the era of high-stakes testing, schools are reluctant to dedicate classroom time to activities that are not directly tied to academic standards.
Local / Regional Expertise or Places where practice is in operation:	Local and regional expertise is identified in the meeting summary attached separately. The relevance of each potential resource depends upon the specific strategy.
Relevant Research – Provide title and brief description of publication in addition to URL:	<p><i>Extracurricular Involvement Among Affluent Youth: A Scapegoat for “Ubiquitous Achievement Pressures”?</i> Luthar, Shoum, and Brown (May 2006). Article provides compelling evidence that there is little to no correlation between the level of extracurricular activity and student stress or depression. Far more implicated was perceived parental criticism and the absence of after school supervision. The research describes how while setting high expectations is fine, parents who over-emphasize achievement in comparison to character development and effort or who are harshly critical of children who fail to meet achievement-related expectations correlates very highly with student stress and depression. Especially highly correlated to maladjustments are parents who denigrate or punish their child for failure to meet expectation. Other factors cited were failure of parents to have dinner with their child and the absence of after school supervision. The study does not recommend specific parent training or education programs, but suggests that such programs would be beneficial.</p> <p><i>Stress Management Curriculum for At Risk Youth</i>, Rollin, Arnold, Solomon, Rubin, and Holland, March, 2003. Study from the Journal of Humanistic Counseling, Education, and Development points to the relationship between high levels of stress and withdrawal, anxiety, aggression, poor coping</p>

skills and onset of alcohol and drug abuse. Research also ties stress to asthma, cardiovascular disease, and hypertension. Research describes *The Stress Management* curriculum developed for Project KICK that incorporates exercise from different disciplines including yoga and Tai Chi. Tai Chi has been shown to reduce total mood disturbance, tension, stress, depression, anger and fatigue (Jin, 1989). Yoga has also been shown to reduce stress and to significantly reduce hypertension and increase well-being (Pandaya, Vyas, & Vyas, 1999; and Scott, 1999). Incorporating these kinds of strategies into Physical Education or into after school programs would be a low-cost prevention strategy.

School-Based Mental Health: An Empirical Guide for Decision-Makers, Kutash, Duchnowski, and Lynn. The Research and Training Center, Florida Mental Health Institute. University of South Florida. An excellent compilation of research about child and youth mental health and school based strategies for addressing the issue. Includes definitions, conceptual models, resources for further study, articles on research related to a variety of effective strategies, and financing strategies. A very comprehensive resource. <http://rtckids.fmhi.usf.edu/rtcpubs/study04/>

Search for Programs to Help Youth, A Community Guide. This website houses an inventory of research-based prevention programs with each program identified by age of youth targeted and the level of prevention. A key-word search function makes searching for specific programs quite simple. This would be an excellent tool for school and community providers to identify programs appropriate to specific age groups and/or targeting specific issues. <http://guide.helpingamericasyouth.gov/programtool.cfm>

TeenHelp.com, a web-site with brief articles on signs of depression, stress, and other forms of mental health problems and strategies for preventing and/or reducing them. The articles are short and very appropriate for parents, teachers of students. www.TeenHelp.com.

Create a Personal Stress Management Guide. A self-guided, web-based tool designed explicitly for teens. Teens can input current behaviors and then develop their own plan for managing stress. The guide provides suggestions for simple solutions to managing stress and addressing problems and a guided process for developing a sustainable plan. The website was developed by the American

Academy of Pediatrics. <http://www.aap.org/stress/teen1-a.cfm>. A related link provides basic information for teens to help them manage stress. <http://www.aap.org/stress/buildresstress-teen.htm>.

Depression in Childhood and Adolescence, Revolutionhealth.com. This web site has an excellent article with easily marked topics related to causes, signs, and strategies related to depression in teens. It has Frequently Asked Questions linked to answers and is a good resource for parents. <http://www.revolutionhealth.com/conditions/mental-behavioral-health/depression/children/depression>.

International Handbook of Student Experience of Elementary and Secondary School. *Stressed Out Students-- SOS: Youth Perspectives on Changing School Climates, Galloway, Pope, et al 2007.* An excellent article on how school policies and parent practices foment student stress.

Less Stress, More Success: A New Approach to Guiding Your Teen Through College Admissions and Beyond. American Academy of Pediatrics. Elk Grove Villiage, Ill.

Promotion and Prevention in Mental Health: Strengthening Parenting and Enhancing Child Resilience. The report begins by describing the public health context for the promotion of mental health and the prevention of mental disorders in children. It then describes opportunities for implementing evidence-based programs to reach families in need and summarizes the evidence base that shows that the programs do indeed strengthen the caretaking skills of parents and other caregivers and enhance child resilience. Next, it presents current knowledge about the economics of these programs, suggests how to reach families with interventions, and concludes with recommendations for further dissemination of these programs. <http://mentalhealth.samhsa.gov/publications/allpubs/svp-0186/>

Creating an Environment for Social and Emotional Wellbeing. (EDC, 2003) A Psychosocial Environment assessment tool for schools to determine how supportive schools are to girls and boys. Tool can be used by teachers, administrators or other staff to assess 7 "quality areas":

- * Providing a friendly, rewarding and supportive atmosphere;
- * Supporting cooperation and active learning;
- * Valuing the development of creative activities;

	<ul style="list-style-type: none"> * Forbidding physical punishment and violence; * Not tolerating bullying, harassment and discrimination; Valuing the development of creative activities; * Connecting school and homelife through involving parents; * Promoting equal opportunities and participation in decision-making. <p>http://www.who.int/school_youth_health/media/en/sch_childfriendly_03.pdf Includes tools for discussion of results with parents and other community members.</p> <p>National Center for Mental Health Promotion and Youth Violence Prevention. This website provides resources and publication on various aspects of mental health prevention. Each Resource Page contains links to selected publications, websites, online events, and other resources that were selected for their value to grantees. Resources focus on either a specific activity (such as funding, evaluation, or social marketing) or on an issue (such as mental health, suicide, or gangs). http://www.promoteprevent.org</p> <p>The Promising Practices Network (PPN) is dedicated to providing quality evidence-based information about what works to improve the lives of children, youth, and families. The PPN site features summaries of programs and practices that are proven to improve outcomes for children. All of the information on the site has been screened for scientific rigor, relevance, and clarity. Good resource for identifying parent education and school wide strategies as well as targeted interventions for students exhibiting signs of mental health problems. The site is easily searchable and research-based resources can be found by a variety of topic areas including type of problem, type of program or service, site where program is based, or age of the child. http://www.promisingpractices.net/programs_topic.asp.</p>
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Task Force Research Summary	
Work Group	CHILDREN'S MENTAL HEALTH
Strategy	Assessment and Early Intervention /Secondary Prevention.
Indicate Target	Prevention strategies do not target populations, but are efforts to inoculate large segments of the population. Assessment and early intervention strategies and secondary prevention strategies would target students who are at risk of mental health issues or who have been identified as potentially developing mental health problems. Intervention and secondary prevention strategies will be

	summarized in a separate summary.
Description of Approach & Program Elements:	<p>Parent/School Education: Education and training programs aimed at reducing stigma and helping families and the school community better understand and identify early signs of mental health problems and how best to intervene to help ensure that children access needed services and supports. Examples include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> National Alliance on Mental Illness' (NAMI) <i>Parents and Teachers as Allies</i>, a two- hour in-service program for parents and school professionals. <p>Assessment for Early Identification. Research indicates that the earlier children with developing mental health problems are identified, the better the impact of interventions. One research-based assessment tool is <i>TeachScreen Program</i>, an early identification program that asks teens a series of short questions regarding symptoms common to depressed or suicidal youth. Based upon these responses, students with a high number of affirmative responses are referred for a mental health consultation. IUSD is already utilizing this program. There is considerable debate about the merits of conducting screening and assessments with entire school populations with good arguments for and against conducting early assessments. These issues and a references to resources for tools and further discussion of the issue are covered in an excellent short article published by the School of Psychiatry at UCLA. http://smhp.psych.ucla.edu/dbsimple.aspx?Primary=2301&Number=9993</p> <p>Wraparound Services for Students with Serious Emotional Disturbances: There are innumerable forms of school-based support programs available for schools. Most involve some form of child-family counseling component for children with an identified mental health diagnosis confirmed by a formal assessment. For most communities, children receive treatment through the County mental health program, however, a number of models are available that can be implemented independently of the County, but most often County involvement is found.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Wraparound Milwaukee is a system of care for children with serious emotional, behavioral, and mental health needs, and for their families. Its approach emphasizes developing services and delivering them to families who are strength based, highly individualized, and community oriented. Managed through the Child and Adolescent Services Branch of the Milwaukee County Mental Health Division in Wisconsin, Wraparound Milwaukee attempts to meet the

mental health, substance abuse, social service, and other supportive needs of the most complex youths in the Milwaukee community.

- Adolescent Transitions Program*, a multilevel, family centered intervention targeting children at risk of problem behavior. The curriculum focuses upon family management skills such as rule and reward setting, monitoring, and reasonable consequences. Strategies explicitly address coercive parental strategies and setting realistic expectations. Evaluation of this program showed significant improvement in positive parenting strategies and reductions in antisocial behaviors and child adjustment problems.
- Families and Schools Together (FAST)* is a multifamily group intervention designed to build protective factors and reduce the risk factors associated with substance abuse and related problem behaviors for 4- to 12-year-old children and their parents and caregivers. FAST systematically applies research on family stress theory, family systems theory, social ecological theory, and community development strategies to achieve its four goals:
 - Enhanced family functioning
 - Prevention of school failure by the targeted child
 - Prevention of substance abuse by the child and other family members
 - Reduced stress from daily life situations for parents and caregivers and children.
- Brief Strategic Family Therapy* is a problem-focused and practical approach to eliminating substance use risk factors by reducing problem behaviors in children and adolescents, ages 6 to 17 years, and by strengthening their families. The program fosters parental leadership, appropriate parental involvement, mutual support among parenting figures, family communication, problem solving, clear rules and consequences, nurturing, and shared responsibility for family problems. In addition, the program provides specialized outreach strategies to bring families into therapy. Focused interventions target:
 - Conduct problems
 - Associations with antisocial peers
 - Early substance use
 - Problematic family relations.
- Parenting Wisely* is a self-administered, computer-based program that teaches parents and caregivers and their 9- to 18-year-old children important skills for combating risk factors for substance use and abuse. The Parenting Wisely program uses a risk-focused approach to

reduce family conflict and child behavior problems, including stealing, vandalism, defiance of authority, bullying, and poor hygiene. The highly interactive and nonjudgmental format accelerates learning. Parents and caregivers can use new skills immediately. (Semi-illiterate parents and caregivers can access the program through a feature that enables the computer to read text portions aloud. Program materials also are available in Spanish.) The goals of the Parenting Wisely program are to:

- Reduce children's aggressive and disruptive behaviors
- Improve parenting skills
- Enhance family communication
- Develop mutual support
- Increase parental supervision and appropriate discipline of their children.

Services for Youth with Mental Health and Co-Occurring Juvenile Justice Involvement: In treating serious offending delinquents, research has found two treatment models successful.

- One is **multi-systemic therapy** (MST), in which specially trained therapists work with the youth and family in their home, with a particular focus on changing the peers with whom the young people associate. MST therapists identify strengths in the family and use these strengths to develop natural support systems and to improve parenting
- The other model is **Therapeutic Foster Care**. This model offers a community-based intervention for serious and chronic offending delinquents. Therapeutic foster parents are carefully selected and supported with research-based procedures for working with serious and chronic delinquents in their homes.

Services for Infants, Toddlers and Young Children. Two research-based programs for toddlers and children are summarized below.

- o **The Incredible Years** (Universal, selective, indicated) features three comprehensive, multi-faceted, and developmentally based curricula for parents and caregivers, teachers, and children. The program is designed to promote emotional and social competence and to prevent, reduce, and treat emotional and behavior problems in young children (2 to 8 years

	<p>old). Young children with high rates of aggressive behavior problems have been shown to be at great risk for developing substance use problems, becoming involved with deviant peer groups, dropping out of school, and engaging in delinquency and violence. Ultimately, the aim of the teacher-, parent-, and child-training programs is to prevent and reduce the occurrence of aggressive and oppositional behavior in children, thus reducing their chance of developing later delinquent behaviors.</p> <ul style="list-style-type: none"> ○ Nurse–Family Partnership (NFP) (Selective) provides first-time, low-income mothers of any age with home visitation services from public health nurses. NFP nurses begin making home visits while the mother is still pregnant (before the 28th week, and ideally between the 12th and 20th week) and continue through the first 2 years of the child’s life. The nurses work intensively with these mothers to improve maternal, prenatal, and early childhood health and well-being, with the expectation that this intervention will help achieve long-term improvements in the lives of at-risk families. Starting with expectant mothers, the program addresses substance abuse and other behaviors that contribute to family poverty, subsequent pregnancies, poor maternal and infant outcomes, suboptimal childcare, and a lack of opportunities for the children. The intervention process is effective because it focuses on developing therapeutic relationships with the family and is designed to improve five broad domains of family functioning: <ul style="list-style-type: none"> ○ Health (physical and mental) ○ Home and neighborhood environment ○ Family and friend support ○ Parental roles ○ Major life events (e.g., pregnancy planning, education, employment).
Relevance to Work Group	Strategies outlined above would reduce the number and scope of preventable mental health problems, freeing clinical resources to address the needs of children with more serious disorders.
Outcomes	<ul style="list-style-type: none"> <input type="checkbox"/> Reduction in indicators identified in Teen Screen assessments identifying children with suicidal ideation <input type="checkbox"/> Reduction in specific stress, eating disorder, and depression indicators incorporated into Healthy Kids Survey <input type="checkbox"/> Changes in attitudes of parents and students about the importance of achievement and the

	<p>relationship between parental pressure and student depression and stress. A community survey would need to be developed to get at these two outcomes, but this would be a good indicator of the impact of strategies attempting to influence community norms.</p> <p><input type="checkbox"/> Reduction in suicide attempts and 5150 are more likely to be influenced by secondary prevention and/or intervention and treatment services.</p>
Staffing:	Varies by program, but in most instances require someone with clinical licensure and often are best implemented by a team of specialists and paraprofessionals.
Cost Factors:	Ranges by program.
Challenges:	Cost, confidentiality, absence of resources for children from families with financial resources.
Local / Regional Expertise or Places where practice is in operation:	Local and regional expertise is identified in the meeting summary attached separately. The relevance of each potential resource depends upon the specific strategy.
Relevant Research – Provide title and brief description of publication in addition to URL:	<p><i>Extracurricular Involvement Among Affluent Youth: A Scapegoat for “Ubiquitous Achievement Pressures”?</i> Luthar, Shoum, and Brown (May 2006). Article provides compelling evidence that there is little to no correlation between the level of extracurricular activity and student stress or depression. Far more implicated was perceived parental criticism and the absence of after school supervision. The research describes how while setting high expectations is fine, parents who over-emphasize achievement in comparison to character development and effort or who are harshly critical of children who fail to meet achievement-related expectations correlates very highly with student stress and depression. Especially highly correlated to maladjustments are parents who denigrate or punish their child for failure to meet expectation. Other factors cited were failure of parents to have dinner with their child and the absence of after school supervision. The study does not recommend specific parent training or education programs, but suggests that such programs would be beneficial.</p> <p><i>Voices from the Field: A Blueprint for Schools to Increase the Involvement of Families who have Children with Emotional Disturbances</i> Duchnowski, Kutash, and Romney from the Florida Mental Health Institute at the University of South Florida, June 2006. This is an excellent primer for schools and communities planning secondary prevention or early intervention strategies. The article six different forms of parent involvement and their relative benefits. The article demonstrates how children with physical disabilities receive services and supports significantly earlier than do children</p>

with mental health disorders. Article also outlines strategies for encouraging parent involvement, a significant factor in successfully addressing student mental health needs.

Promotion and Prevention in Mental Health: Strengthening Parenting and Enhancing Child Resilience, National Institute of Mental Health, Provides an excellent, well-researched summary of school-base mental health promotion, prevention, and intervention strategies. Includes a cost-benefit analysis of several major strategies. <http://mentalhealth.samhsa.gov/publications/allpubs/svp-0186/>

The Promising Practices Network (PPN) is dedicated to providing quality evidence-based information about what works to improve the lives of children, youth, and families. The PPN site features summaries of programs and practices that are proven to improve outcomes for children. All of the information on the site has been screened for scientific rigor, relevance, and clarity. Good resource for identifying parent education and school wide strategies as well as targeted interventions for students exhibiting signs of mental health problems. The site is easily searchable and research-based resources can be found by a variety of topic areas including type of problem, type of program or service, site where program is based, or age of the child.

http://www.promisingpractices.net/programs_topic.asp.

International Alliance for Child and Adolescent Mental Health and Schools. An excellent web site provides short synopses of articles about effective school-based mental health programs, most targeting students with serious emotional disturbances, but some promoting general wellness. The articles summarized below, can all be found at this site. The Url below takes you to this web site. To find any of the articles below, scroll until you find the title.

<http://www.intercamhs.org/html/resources.htm>

Building Capacity for System-Level Change in Schools: Lessons from the Gatehouse Project (Bond, L., Glover, S., Godfrey, C., and Patton, G., 2001) The Gatehouse Project is an innovative, comprehensive approach to mental health promotion in secondary schools. It sets out to promote student engagement and school connectedness as the way to improve emotional well-being and learning outcomes. The key elements of the whole-school intervention are the establishment and support of a school-based adolescent health team; the

identification of risk and protective factors in each school's social and learning environment from student surveys; and, through the use of these data, the identification and implementation of effective strategies to address these issues. This article describes and accounts for how system-level changes have been made in schools through a process of capacity building.

MindMatters, a Whole-School Approach Promoting Mental Health and Wellbeing (Wyn, J., Cahill, H., Holdsworth, R., Rowling, L. and Carson, S., 2000) Educational interventions that have a multi-disciplinary base that aim to capture the elements of whole school change require evaluation designs and methods that can capture and provide evidence of change, not only in the elements but also their interaction. In the dynamic environment of schools, evaluation designs that engage participants and are respectful of school conditions can support and enhance desired outcomes. Evaluation of school mental health promotion needs to provide evidence of both mental health outcomes and educational outcomes. The challenge is how to focus on what evidence is valued – evidence based practice and/or practice evidence. This presentation will describe how the multiple approaches employed in the evaluation of MindMatters addressed these challenges, and provide some recommendations for future practice.