

Children's Unmet Needs: Celebrating Success and Creating Opportunities in Orange County

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Preface

We are pleased to contribute to the important discussion about the wellbeing of children in Orange County, Florida. This report was commissioned by advocates of the creation of a children’s services council in Orange County. The proposed children’s services council of Orange County is authorized under Florida Statutes 125.901 and 125.902. These statutory provisions allow a county to create an independent special district to provide funding for children's services. The funding for these services will be generated by a millage rate set by the district’s governing council after identifying services needed each year, but not to exceed 0.5 mills of assessed valuation of all properties within the county which are subject to ad valorem county taxes. The proposed council board of ten members would be comprised of the following (as required by statute):

1. The superintendent of schools;
2. A local school board member;
3. The district administrator from the appropriate district of the Department of Children and Family Services, or his or her designee;
4. One member of the county governing body (County Council);
5. A judge assigned to juvenile cases; and
6. Five members appointed by the Governor from a pool recommended by the County Council.

This report does not advocate nor oppose the creation of a children’s services council. Instead, the authors provide a summary of existing data collected over the past approximately five years, supplemented with information received from nonprofit leaders active in service delivery to children and families. We hope the report assists in the debate about the best way to coordinate and finance children’s services in the county.

Objective

To assess the current state of children’s needs in Orange County, in order to facilitate continued gains in the provision of services dedicated to the safety and well-being of Orange County youth.

Overview

A review of local, state, and national reports and data was completed to establish a “systems-level” view of the needs of Orange County’s Children. The information gathered reflects Orange County as a community invested in the needs and well-being of the most vulnerable of its citizens—children, through the establishment of commissions, workgroups and strategic programming devoted to their care. However, Orange County has not been able to benefit from integrated service delivery systems given potentially limited strategic allocation of resources, particularly in the areas of: poverty, health & wellness, social services, and education. To keep pace with the ever-expanding and diverse needs of youth in this community, Orange County would be advantaged by the dedication of additional resources in these critical areas.

Orange County Children

In 2016, children under the age of 18 accounted for 23.2% (296,548) of Orange County’s entire population. This number is projected to rise to 441,901 (approximately 50%) by the year 2045, reflecting children will continue to remain approximately ¼ of the County’s total population (The Annie E. Casey Foundation, 2018). While these numbers quantitatively describe the large impact youth have on Orange County, the overall safety, well-being, and quality of life of

Orange County youth most accurately reflects the health of the community as a whole. Additionally, the welfare of Orange County children is of import as thriving children are inclined to become productive adults, leading to a more professional workforce, and subsequently providing greater economic stability to the region (Florida Chamber Foundation, 2017).

Celebrating Success

Community in Action

A strong commitment to the well-being of Orange County youth was evident as early as 2013, when Orange County Mayor Teresa Jacobs convened a special commission comprised of judges, mental health professionals, social service providers, community leaders, law enforcement personnel, domestic violence advocates, and consumers, to address access to mental health care for Orange County youth (Orange County Government, 2013). Recognizing the need for both short and long-term improvements to the County's children's mental health care system, the Mayor's Youth Mental Health Commission took strategic action to implement several enhancements which have benefited the children and families of Orange County and their subsequent generations.

Orange County citizens invest significantly in providing for the care and safety of their youth. In 2016, Orange County expended \$48,236,441 on programming related to children (Orange County Children Related Programs, 2016). These monies are used to fund services such as: school readiness, early intervention and parenting programs, afterschool programs, parks and recreation, and centers for children and their families. The services being provided are evidenced-based, high in quality and reach thousands of citizens. For illustration, consider:

- During 2015-16, Orange County serviced approximately 13,000 infants, toddlers, preschoolers, and school aged children with early intervention and school readiness programs (Nolo Consulting, 2017).
- For the last 9 years, Healthy Families, a nationally accredited, evidence-based, home visiting program aimed at preventing child maltreatment and abuse, has maintained a 98% success rate in the prevention of harm to local children (Orlando Health, 2018; M. Martinez, business communication, February 21, 2018).
- Orange County Government is the single largest supplier of public services for the homeless in Central Florida (Orange County Government, FL, 1996-2018). The County has the only emergency shelter which houses more than half of the youth-targeted beds in the tri-county (Orange, Osceola, Seminole) area, and funds more than \$5 million annually in housing supportive services, including targeted family and homeless services (Chrisler, Horwitz, & Morton, 2018; Orange County Government, FL, 1996-2018).

Such programs are fundamental to maintaining the safety and well-being of this vulnerable population and assist families in their times of crisis and/or need. While their successes are examples of the quality work being done on behalf of the children of Orange County, current national, state, and local rates of child maltreatment and worsening mental health provide a reminder that this is the time to remain diligent in efforts to protect and safeguard Orange County's most valuable assets, and to pursue avenues to ensure their continued growth and well-being.

Creating Opportunities

Avenues for Growth

Orange County is ranked 39th out of the 67 counties in Florida on the 2018 Florida Child Well-Being Index, a county by county snapshot of children’s well-being based upon four primary wellness indicators (University of South Florida, College of Behavioral and Community Services, 2018). This ranking is based upon Orange County’s performance in the areas of economic well-being, education, health, and family and community.

Economic: Orange County is positioned 46th in Florida counties in economic well-being (University of South Florida, College of Behavioral and Community Services, 2018). In 2016, 22.2% (65,087) of Orange County children under age 18 resided in poverty--nearly 1% above the overall State’s percentage (The Annie E. Casey Foundation, 2018; University of South Florida, 2018). Of the 199,826 households in Orange County, 43% live below the ALICE (Asset Limited, Income Constrained, Employed) threshold (United Way of Florida, 2017).¹

There are 64,750 Orange County children (1 out of 4) aged 18 and under who suffer from food insecurity (Second Harvest Food Bank of Central Florida, 2016; K. Broussard, business communication, April 10, 2018).² During the 2015-16 school year, 64.9% (127,871) of Orange County students were eligible to

¹ ALICE households have incomes above the Federal Poverty Level (FPL), yet have difficulty affording basic cost of living and necessities (ALICE Report, 2017).

² The United States Department of Agriculture defines food insecurity as a “household-level economic and social condition of limited or uncertain access to adequate food” or “consistent access to adequate food is limited by a lack of money and other resources at times during the year” (United States Department of Agriculture, 2017; Nolo Consulting, 2017).

receive free or reduced lunch (The Annie E. Casey Foundation, 2018; Diaz, Daniel, & Cabrera, 2018). The primary factors influencing food security were: educational attainment (39.1% of Orange County residents have a high school education or less³), median income (\$50,720 is the median household income for Orange County residents⁴), un/underemployment rate (11.5% as of 2015⁵), rent versus home ownership (41.2% of Orange County children reside in homes with a high housing cost burden, reflecting >30% income spent on housing⁶), and the health status of residents (5.51% of household income is spent on medical services⁷)(Second Harvest Food Bank of Central Florida, 2016; United Way of Florida, 2017; University of South Florida, 2018).

One in 17 children in Central Florida “will experience homelessness during the course of a year” (TriSect, 2015, p. 4). In the 2015-16 school year, 72,601 school children in Florida were identified as homeless (Shimberg Center for Housing Studies at UF and Miami Homes for All, 2017). Orange County accounts for nearly 10% (6,835) of this number (Chrisler, et al., 2018; Diaz, et al., 2018). This is 8 times the number of homeless children in Orange County less than 10 years ago (817 in 2006-2007) (Diaz, J., et al., 2018; Florida’s Department of Children and Families, Council of Homelessness, 2016). Approximately 1,642 of these students are living in hotels/motels (Chrisler et al., 2018). The interventions needed to assist these homeless youths become more expensive the longer the youth are without a home and the likelihood of the individual exiting homelessness also diminishes with time (Chrisler et al., 2018, p.20). Factors contributing to the presence of homelessness are the lack of affordable housing for low-income families and economic/health issues (i.e., un/underemployment, lack of education and employment skills, and lack of

³ Second Harvest Food Bank of Central Florida (2016)

⁴ United Way of Florida (2017). This is above the state average of \$49,426.

⁵ United Way of Florida (2017).

⁶ University of South Florida (2018).

⁷ Second Harvest Food Bank of Central Florida (2016).

transportation) (Shimberg Center for Housing Studies at UF and Miami Homes for All, 2017).

Education: Early academic interventions are key to creating successful students (Vaughn, Denton, & Fletcher, 2010). Orange County is ranked 32nd among Florida Counties for education well-being (University of South Florida, 2018). Currently, there are 16,893 (51.9%) of Orange County children between the ages of 3 and 4 who are not enrolled in school (University of South Florida, 2018). Failure to access early opportunities of learning causes the creation of gaps which prove difficult to overcome as the child ages (Vaughn, et al., 2010). Presently, there are 11,512-4th graders who have been deemed as not proficient in reading and understanding the English language (University of South Florida, 2018). Gaps continue into secondary education for Orange County youth as 6,487-8th grade students were classified as not proficient in fundamental mathematics (University of South Florida, 2018). Students who fall behind in school are more likely to not continue (Balfanz, Herzog, & Maclver, 2007). In the 2015-2016 school year, 4,342 of Orange County teens were not attending school nor were they working (University of South Florida, 2018). In the same school year, there were 2,549 high school students who did not graduate (University of South Florida, 2018).

Other issues impacting student performance are ADD/ADHD (12.9% of Orange County children have suffered from or been diagnosed with ADD/ADHD); learning disabilities (11.3% of Orange County parents have reported their child has been diagnosed or suffers from some type of learning disability); and developmental delays (8.8% of Orange County children have been diagnosed with some type of developmental delay affecting his/her ability to learn (Professional Research Consultants, Inc., 2016).

Health: Orange County has an abundance of children who are not accessing quality healthcare. Orange County ranks 22nd of the Florida counties in children's health and well-being (University of South Florida, 2018). The County has

several Health Professional Shortage Areas (HPSAs⁸). There are nine primary care, 10 dental health, and five mental health HPSAs in Orange County (Nolo Consulting, 2017). The County also has four areas/populations designated by the United States Department of Health and Human Services-Health Resources and Services Administration as Medically Underserved (MUA), with an additional three areas also receiving the designation through a Governor’s Exception (Nolo Consulting, 2017). These areas are classified as possessing “too few primary care providers, high infant mortality, high poverty or a high elderly population” (Nolo Consulting, 2017, p. 47). There are 21,681 uninsured children in Orange County (University of South Florida, 2018). This equates to more than one in ten children under the age six living without health insurance (Nolo Consulting, 2017).

Even with the presence of health insurance, 37.1% of parents in Orange County reported difficulties and delays in accessing healthcare services for their child (Professional Research Consultants, Inc., 2016). Difficulties accessing children’s healthcare included: costs of physician visits, lack of transportation, cost of prescriptions, culture/language differences, insurance instability, utilization of emergency room (ER), and children needing specialty care (Professional Research Consultants, Inc., 2016). Parents often had difficulty accessing care because of an unawareness of the resources in the community, particularly around mental health. Children’s mental health care data in Orange County reflects 6.4% of Orange County children ages 5-17 have been diagnosed with depression, 9% have suffered from or been diagnosed with anxiety and 9.1% of high school students reported attempting suicide (Professional Research Consultants, Inc., 2016). In Orange County, deaths from suicide rates among

⁸ HPSAs are regions designated by the Federal government as having a “shortage of health professionals” (Nolo Consulting, 2017).

adolescents (ages 12-18) increased in 2012-2014 (The Health Council of East Central Florida, Inc., 2015).

Family and Community: Orange County ranks 43rd out of the 67 Florida counties for the children's well-being indicator of family and community⁹ (University of South Florida, 2018). Single females with children under the age of 18 account for 39.2% of the families living in poverty (Nolo Consulting, 2017). The number of Orange County families receiving TANF (Temporary Assistance for Needy Families¹⁰) benefits increased by 1.4% from March 2015 (Nolo Consulting, 2017). In 2014, there were 9,435 Orange County children under the age of 18, who received Supplemental Security Income or SSI (Nolo Consulting, 2017). In February 2018, Heart of Florida United Way 2-1-1 handled 6,531 calls from Orange County residents seeking assistance. The top service requests were: housing and shelter, utilities, tax preparation, food, and mental health services (Heart of Florida United Way, February Report 2018).

According to the Florida Department of Children and Families, in 2017 there were 10,079 child investigations in Orange County. These investigations consisted of 22,651 children who were assessed for a determination of whether they could safely reside in their homes. At the end of 2017, 10% of these investigations required an intervention with services (Marmol, 2018). Service interventions involved: 1) out of home care; 2) in-home protective services; or 3) Family Support Services. Last year, there were 945 (4.2%) children who were placed in out of home care. 896 (4.0%) children were referred to in-home protective services (IHC); and 433 (1.9%) children received Family Support Services (Marmol, 2018). The reasons for removal and the requirement of

⁹ The family and community domain evaluates the number of children residing with single parent families, the number of children living in high poverty areas, children with verified maltreatments, and the number of youth contacts with the Juvenile Justice System (University of South Florida, 2018).

¹⁰ Temporary Cash Assistance to assist families in becoming self-supporting (Nolo Consulting, 2017).

services varied. However, the most verified maltreatments in Orange County 2017 are listed in Table 1 (Marmol, 2018).

Table 1: Verified Maltreatments

Verified Maltreatment	Number of Children	Percentage
Substance Misuse	464	24.3%
Inadequate Supervision	375	19.7%
Family Violence Threatens Child	322	16.9%
Physical Injury	166	8.7%
Environmental Hazards	160	8.4%
Threatened Harm	120	6.3%
Failure to Protect	95	5.0%

These findings reflect a need for crisis intervention services which can address substance misuse and addiction (particularly opioid), domestic violence¹¹, and mental health (counseling).

According to Central Florida Cares Health System data, in the 2014-2015 fiscal year, over \$1,497,839.94 was spent in Orange County in the provision of children’s substance abuse services (i.e., assessment, case management, intervention, medical services, outpatient, residential level 2, substance abuse detox, aftercare follow-up, TASC, outpatient (group), and intervention (group) (The Health Council of East Central Florida, Inc., 2015). For children’s mental health services during the same fiscal year, over \$1,426,585.85 was spent on services such as: assessment, case management, crisis stabilization, crisis

¹¹ The rates of domestic violence increased slightly in Orange County from 2013-2014 (The Health Council of East Central Florida, Inc., 2015).

support, in-home services, respite services, short-term residential, outpatient, and medical services) (The Health Council of East Central Florida, Inc., 2015).

Tri-fold Path

Such complex needs require immediate and robust solutions with an eye towards the future and long-term growth. There are three primary tools Orange County can use to continue to develop and refine its continuum of services for the children of Orange County.

- **Increased funding to established programs with proven effectiveness in the areas of: childcare, early intervention, and youth mental health.**
- **Increased investment in the establishment of evidence-based prevention programs in the areas of: afterschool programming, job skills training, and health initiatives.**
- **The provision of community-based programming aimed at crisis prevention without income restrictions.**

Forward to Future Growth

Expansion of investment in effective programs

As great strides already have been made towards the safety and well-being of Orange County youth, investing in the capacity of existing and demonstrated effective programs would ensure continued needs are met, especially in the areas of: education, healthcare, mental health care, and social services.

Subsidized Childcare

According to the United Way of Florida's Asset Limited, Income Constrained, Employed (ALICE) analysis, childcare is often the greatest cost impediment to economic stability for families with young children (Florida Chamber Foundation, 2017). Currently, there are 3,400 children on the waitlist for subsidized childcare in Orange County (K. Willis, business communication, February 16, 2018). According to Karen Willis, Chief Executive Officer of the Early Learning Coalition, the cost to provide quality childcare for each of these waitlisted children would average approximately \$5,000 a year (K. Willis, business communication, February 16, 2018). Therefore, the cost to place currently waitlisted children into quality childcare would be an estimated \$17 million. Local dollars spent on subsidized childcare receive a \$15.67 federal match. However, these funds are capped and are not unlimited (D. Wilson, business communication, April 17, 2018). High quality childcare places children on a solid positive trajectory. It also has the proven benefit of increasing productivity and attendance for employees, as employees are freed from anxiety regarding their children's care during workhours (Florida Chamber Foundation, 2017).

Early Intervention Programs

The Healthy Start Coalition of Orange County was formed in 1992 to establish coalitions to assess and meet local community needs. The organization provides several proven effective programs which would benefit from additional funding to expand their current outreach. The Coalition provides parenting education to eligible pregnant women for free (Healthy Start Coalition, 2018). While the budget for this program is \$4 million annually, this amount is only sufficient to meet half the need within Orange County (L. Sutherland, business communication, April 10, 2018). Orange County has approximately 17,000 births a year (The Annie E. Casey Foundation, 2018). According to Linda Sutherland, Executive Director, Healthy Start Coalition of Orange County, this coupled with

the County's low wage economy, its large number of uninsured and underinsured citizens makes the currently available funding unable to keep pace with the need (L. Sutherland, business communication, April 10, 2018).

Another successful program run by the Healthy Start Coalition is the Nurse Family Partnership (NFP). This program is for first-time, low-income pregnant women, and follows these ladies for two years after birth, providing intensive home visitation by licensed nurses (Healthy Start Coalition, 2018; L. Sutherland, business communication, April 10, 2018). NFP is the most researched and well-documented maternal child health program in the nation (Nurse-Family Partnership, 2018). It has been proven effective in reducing juvenile justice involvement, increasing economic self-sufficiency, better bonding and parenting skills, and reducing the onset of developmental delays (Nurse-Family Partnership, 2018; L. Sutherland, business communication, April 10, 2018). The program also produces an effective return on investment as "every dollar invested in NFP can yield more than five dollars in return" (Healthy Start Coalition, 2018a). The Program is only available in Orange County in high-risk zip codes (32808 and 32818) (Healthy Start Coalition, 2018). Funding for this program after July 1, 2018 will be supported by Coalition reserves until they are depleted. The cost of this program involves a 4-nurse team [each nurse-\$115,000, including salary/fringe benefits, required training (in Denver) on the NFP model, needed supplies and curricula materials, mileage] totaling: \$460,000. An additional \$50,000 would be needed for a part-time supervisor for each team of 4 nurses [grand total: over \$1/2 million] (L. Sutherland, business communication, April 10, 2018).

Additionally, the Healthy Start Coalition provides mental health counseling to support women struggling with perinatal depression, psychosocial/physical trauma, and bonding/parenting concerns. This program has two full-time therapists through a contract with Aspire Health Partners for \$86,000 to provide

short-term therapy in-home (L. Sutherland, business communication, April 10, 2018). This program has limited availability due to funding.

Dr. Howard Phillips Center for Children and Adults also provides several high-quality services for Orange County residents. The Healthy Families program, which has a 98% effective rate in the prevention of child abuse, currently serves 8 Orange County zip codes [844 Families in Orange Zip Codes: 32703, 32801, 32805, 32808, 32811, 32818, 32835, 32839] (Healthy Families Florida, 2017). A trained family support worker assists children and their families from birth to age 5. The Healthy Families program helps navigate parents through parent-bonding support; nutrition and child development education; developmental screening and health supervision support (Orlando Health, 2018). Extending the program to eight additional zip codes would place services in 16 of the 79 Orange County zip codes (M. Martinez, business communication, February 21, 2018). This would double the capacity of the program. The cost of such an expansion, and to include a therapist on each team to take the complex issues of domestic violence, substance abuse, and mental health would be \$2.6 million annually (M. Martinez, business communication, February 21, 2018).

Youth Mental Health Programs

Bullying, suicidal ideations, poor family functioning, and other mental health issues are areas in which youth mental health programs, such as the CHILL Program, the Healing Tree program, and Wrap Around Orange can assist Orange County youth in obtaining better mental well-being and health. Currently, the Healing Tree program through Dr. Howard Phillips Center for Children and Adults, which provides counseling services for abused children serves 350 children in Orange and Osceola counties. The Healing Tree program offers specialized therapy for both physically and sexually abused kids from preschool to 17, in the form of crisis counseling, educational programs, individual, group and family therapy (Orlando Health, 2018a). To double this program to serve 350

more children and their families would cost approximately \$1 million annually (M. Martinez, business communication, February 21, 2018).

Housing

During a Point in Time Study, conducted on October 16, 2017, there were 268 homeless youth (ages 13-24) in the tri-county (Orange, Osceola, and Seminole) area. At the time, there are 104 spaces (beds at shelters, half-way houses, etc.) available. This left a gap of 164 spaces, or more accurately 164 young individuals without shelter. Stable housing is not only critical to a child's emotional and physical well-being, it is also key to a child's educational success (Shimberg Center for Housing Studies, University of Florida and Miami Homes for All, 2017a). Children without secure housing are at increased risk for absenteeism (missing the equivalent of 3 full weeks of class a school year), truancy, poor academic performance in core subject areas, and school disciplinary actions (such as suspensions and expulsions) (Shimberg Center for Housing Studies, University of Florida and Miami Homes for All, 2017a).

An increase in the number of youth-specific emergency shelter programs in Orange County, as well as the allowance of more flexible shelter stays would require additional resources but would assist in eliminating the number gaps observed (Shimberg Center for Housing Studies at UF and Miami Homes for All, 2017, p. 3). In addition, services such as: youth navigators, coordinated online resources, and school-and college-based screening, would work well with the continued development of local coordinated entry systems to reduce impacts on unstably housed youth (Shimberg Center for Housing Studies at UF and Miami Homes for All, 2017, p. iii). Increased allocations to coordinated entry systems for households experiencing homelessness would ensure that: individuals are promptly matched with the appropriate providers; rapid rehousing services are readily available; and more permanent supportive housing can be made available for children and their families (Shimberg Center for Housing Studies at UF and Miami Homes for All, 2017, p. 3).

Youth Development Programs

In 2016-2017, there were 2,718 youth contacts with the juvenile justice system in Orange County (University of South Florida, 2018). The use of quality youth development programs such as: afterschool programs, summer camps, mentoring, tutoring, and college prep can have the ability to reduce negative behaviors leading to juvenile justice system involvement. Most middle schools in Orange County have before and after-school programs which are available through community partnerships (Orange County Public Schools, 2018). Elementary schools have extended day enrichment programs offered by the Orange County Public School System (Orange County Public Schools, 2018). However, in Orange County, there are 40 elementary schools with no after-school programs.

Quality youth development programs coupled with job skills training for youth and their families can impact other critical areas, such as: poverty and homelessness. Underemployment, lack of education, and work skills are root causes of housing instability (Shimberg Center for Housing Studies at UF and Miami Homes for All, 2017, p.3). In Orange County, employment challenges are increasing for parents with minimal education attainment as “statistics show that the county is relying on new economic opportunities to attract companies and jobs that require highly skilled, highly educated talent” (Nolo Consulting, 2017, p. 93, 96). Providing additional opportunities for job skills training for Orange County residents living in poverty would assist in bettering their economic status but also benefit the county with a more professional workforce and stabilized economy.

Establishment of Evidence-Based Programs for Critical Areas of Need

In addition to increased allocations to previously established programming, Orange County may seek to invest in the establishment of evidence-based prevention programs in the area of health and well-being. In 2016, there were

16,753 children in Orange County that did not have health insurance (D. Steward, business communication, April 2, 2018). Accounting for a large percentage of this number is the growing Hispanic population in the County. Out of the five most populous counties in Florida, Orange County ranks 3rd in the highest percentage of Hispanic residents (30.5%) (Pérez, 2018). This population is disproportionately affected by issues such as access to healthy food and health care, unemployment and maternal death (Miller, 2018). In addition, 29% of Orange County Hispanic population is limited English proficient (Miller, 2018). The expanding Hispanic population within Orange County desires access to **translation services**, and **cultural competencies** within service organizations (Miller, 2018).

A dedicated source of funding to tailor outreach activities to this population and the other diversities in Orange County would assist in implementing innovative health initiatives such as: school-based healthcare and other intervention services specially tailored to children with special needs; children of incarcerated parents, and LGBTQQAP [lesbian, gay, bisexual, transgender, genderqueer, gender nonconforming, non-binary, questioning, asexual, or pansexual] youth. Research has indicated that students who can access school-based healthcare have reduced episodes of absenteeism and tardiness (Orlando Health, 2018b). An example of this is Teen Xpress, a free mobile health clinic serving un- or underinsured teens at select school-based locations. Children receive physical examinations, vision screenings, dental care, mental health care, nutrition education, immunizations, and are also referred to physicians for more complicated medical issues (Orlando Health, 2018b).

Revising eligibility policies for social services to eliminate the “cliff effect.”

Even with Orange County’s tremendous investment in the safety and well-being of children, there remain children and households who are unable to

benefit from services due to accessibility and eligibility determinations. Currently to access services in Orange County a family would have to be suffering from a crisis event or be living at poverty level. Consequentially, residents with young children residing in poverty, making efforts to improve their financial situation, making marginal increases in earnings, face the reality of losing access to substantial program benefits (Florida Chamber Foundation, 2017).

Homelessness is an area where this deleterious cause and effect relationship can most often be observed. The eligibility guidelines of some services limit their criteria to subpopulations of unstably housed youth, eliminating youth in need of assistance. Revisiting income eligibility guidelines for housing programs would open opportunities for families previously excluded due to income restrictions but who remain on the precipice of housing instability.

Summary

Continued and rigorous investment in the needs of children now would prove to be sound economic policy, as for every \$1 invested in youth and early intervention programming, the community saves between \$1.40 to \$12.90 in the provision of services, such as: police, prosecution for crime, prison, and remedial education (Welsh, Farrington, Raffan Gowar, 2015). Orange County citizens have invested financially in their youth and have reaped successes with evidence-based services for their children and families. However, gaps remain, particularly in the integration of service delivery systems due to potentially limited strategic allocation of resources, in the areas of poverty, health & wellness, social services, and education.

Present funding models for several successful Orange County programs do not keep pace with growth. A potential consequence of failure to develop and provide additional supplementation to the continuum of services would be

increasing gaps and the exacerbation of problems currently faced. Orange County is bettered from strategic planning and long-term strategies regarding services dedicated to the well-being of its children. This is accomplished through: the prevention of child maltreatment, decreasing the involvement of children within the juvenile justice system, better healthcare access, subsidized childcare, and the elimination or reduction of the “cliff effect” in social services programming. Resultingly, the gains Orange County has experienced in child welfare can be maintained and strengthened, creating a bright path for Orange County’s children and their future.

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