

## COMMUNITY DATA COLLECTION SOURCES

- Ready By 21 Task Force
- Youth Behavior Surveys
- Harford County's Juvenile Justice Council
- Harford County Runway Study
- "Uniting for Youth" Child Welfare Leadership Conference

### Babies Born Healthy



	Harford County	Maryland
<b>Infant Mortality</b> Deaths per 1,000 live births	3.2	7.2
<b>Low Birth Weight</b> Babies weighing less than 2,500 grams	7.6%	9.2%
<b>Births to Adolescents</b> Births per 1,000 women ages 15-19	19.7	31.2

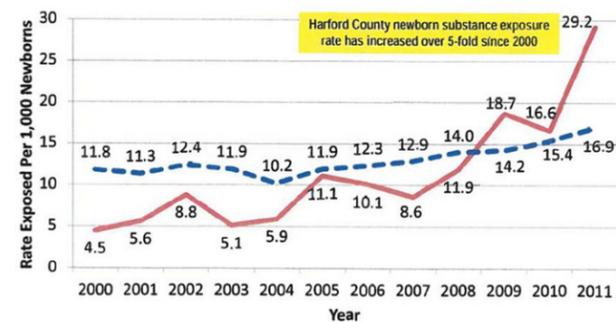
Source: Vital Statistics (2009)

### Healthy Children

	Harford County	Maryland
<b>Lack of Health Insurance Coverage</b> Percent of the population	7.6%	9.5%
<b>Hospitalization - Unintentional</b> Injuries per 100,000 youth	5.2	4.2
<b>Hospitalization - Self-inflicted</b> Injuries per 100,000 youth	0.3	0.4
<b>Substance Abuse</b> High school senior reporting use in past 30 days	Alcohol - 21% Binge Drinking - 39% Marijuana - 27% Cigarettes - 26% Narcotics - 8%	Alcohol - 21% Binge Drinking - 39% Marijuana - 21% Cigarettes - 16% Narcotics - 8%
<b>Deaths</b> All causes	19.1	25.3

Sources: Census Bureau (2007), DHMH (2009), Maryland Adolescent Survey (2007), Vital Statistics (2009)

### Newborns with Maternal Drug/Alcohol Exposure Rate in Harford County and Maryland, 2000-2011\*



\*ICD Codes: 760.70, 760.71, 760.72, 760.73, 760.75, 760.77, 779.5 Source: HSCRC Hospital Data, 2000-11, Maryland resident births only. Compiled by HCHD and DHMH MCH Programs

### School Readiness

	Harford County	Maryland
<b>Maryland Model for School Readiness</b> Students entering kindergarten fully ready to learn	85%	81%

Source: MSDE (2011)

Harford County  
**EARLY CHILDHOOD  
ROUNDTABLE SERIES**

**EXPO 2012**  
**The EARLY Years**

## RESULTS

The work of interagency planning groups culminated in the following collective goals of all involved agencies:

- The need for expanded interventions for youth with high intensity needs
- The integration of mental health and substance abuse services
- Creating more opportunities for teens to have a safe, structured after school environment
- Developing community-based alternatives to juvenile detention
- Addressing truancy, bullying and gang involvement
- Education of new and young parents on how to care for a child

### School Success

	Harford County	Maryland
<b>Academic Performance</b> Performing proficient or advanced on the Maryland School Assessment (MSA), elementary and middle school	Grade 3 Reading - 87.3% Grade 3 Math - 88.2% Grade 8 Reading - 88.5% Grade 8 Math - 72.7%	Grade 3 Reading - 85.1% Grade 3 Math - 86.3% Grade 8 Reading - 82.7% Grade 8 Math - 66.1%
<b>CINS Prevention</b>		
<b>Academic Performance</b> Performing proficient or advanced on the MSA, high school	Algebra - 89% Biology - 86% English - 84%	Algebra - 84% Biology - 81% English - 82%
<b>CINS Diversion</b>		

Source: Maryland Report Card (2011)



### School Completion & Transition

	Harford County	Maryland
<b>Absences</b> High school student absent 20 or more days of school	15.5%	18.2%
<b>School Dropout</b> 9-12 graders withdrew from school	2.13%	2.5%
<b>High School Program Completion</b> Met requirements to enter UMD system and/or Career & Technology Program	83%	74%
<b>Graduation</b> Received a MD high school diploma	89.7%	87%
<b>Post-Graduation Plans to Attend College</b> Plans of high school seniors	83%	83%

Source: Maryland Report Card (2010 & 2011)

### Safety

	Harford County	Maryland
<b>Child Maltreatment</b> Indicated cases per 1,000 children birth to 18	7.8	8.5
<b>Juvenile Offense Arrests</b>	1,394	

Sources: DHR (2008), Harford County DIS (2010)

HARFORD COUNTY  
**TEEN COURT**

CINS Prevention

CINS Diversion



### Stability

	Harford County	Maryland
<b>Free and Reduced Price Meals</b>	Elementary - 32.6% Middle - 27.8% High - 23.4%	Elementary - 46.8% Middle - 41.2% High - 34%
<b>Out-of-Home Placements</b> New placements per 1,000 youth birth to 19, all agencies	8.2	11.2
<b>Foster Care Placements</b>	125	
<b>Mental Health Support Services</b> Percent of population birth - 21 accessing public mental health system	3%	3%

Sources: Maryland Report Card (2011), GOC (2011), Harford County DSS (2010), Office on Mental Health (2010)

## FUTURE INNOVATIONS AND RECOMMENDATIONS

- Create prevention and early intervention programming reflective of Harford County's prioritized state goals.
- Implement "next steps" established at Harford County's 2011 Child Welfare Leadership Conference. This includes seeking grant funds to support inter-agency collaboration and regularly evaluating progress on unified goals.
- Continue to seek opportunities to increase mental health and substance abuse resources for children and adolescents in the County.
- Continue efforts to best identify the needs of runaways and those at risk of running away in the county.
- Grow programming for truancy.
- Expand opportunities and outreach to youth regarding extra-curricular activities, as well as programming to address bullying and drug abuse.
- Emphasize "Healthy Children" as a goal for Harford County.

## TRANSITIONING YOUTH

- Improve transition planning for programs that serve adolescents approaching adulthood.
- Better prepare students for middle-skill level occupations.
- Develop creative employment situations for youth, particularly youth with disabilities.

## ADDRESSING DISPARITIES

- Continue to address significant disparities in highest performing schools and lowest performing schools.
- Continue to narrow the gap in school readiness outcomes with targeted populations.
- The Disproportionate Minority Contact Committee of the Juvenile Justice Council should continue its work targeting special populations and using diversion programs.

## CONCLUSION

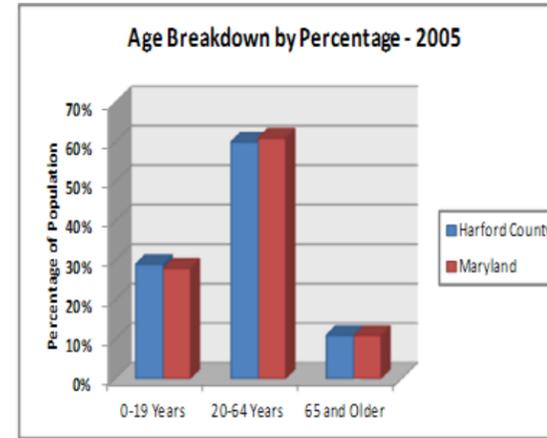
The Harford County Department of Community Services Local Management Board has used this Needs Assessment Process to evaluate our successes, understand the service gaps and needs, and create a strategic framework for moving forward.

All of our data collection efforts sought diverse and comprehensive inclusion throughout the community. For example, our Ready by 21 Taskforce was made up of over 200 representatives from youth-serving agencies. We are fortunate to have some institutional and multi-disciplinary leadership efforts such as the Juvenile Justice Council to make progress toward our shared community goals for youth. We have strong community partnerships to carry forward what was learned from the "Uniting for Youth" Conference, the Youth Behavior Survey, the Ready by 21 Taskforce and the Runaway Study. While many of our local problems and needs are specific to Harford County, most of the over-riding themes are universal. Our data collection efforts have helped us create an individualized plan addressing established problems that need collaborative solutions.

We have a strong foundation in our community. Our results-accountability measures reflect growth in our LMB-funded programs and surpass State performance measures. However, we still have some work ahead of us to address disparities in the well-being of our youth across the county. It is up to our community now to learn from this document, garner or grow existing resources, identify potential new resources, and meet the goals developed as a result of this process.



# Local Management Board Needs Assessment 2013 FACT SHEET



Source: U.S. Census Bureau, American Community Survey, 2005 and 2006-2010

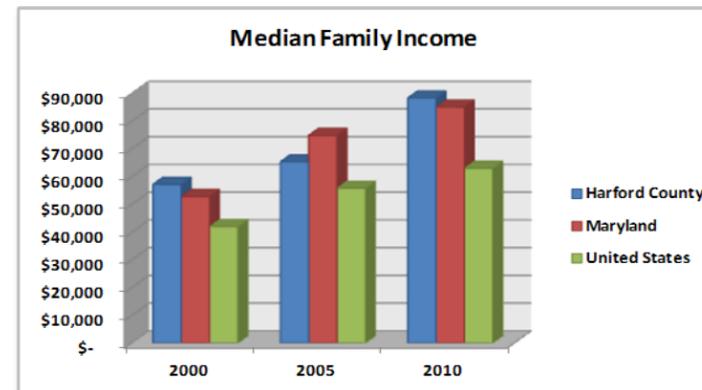
## LOCAL MANAGEMENT BOARD VISION AND MISSION

The vision of the LMB is for Harford County to be a community where all families share opportunities equally and all children are safe, healthy, valued, cared for, and respected.

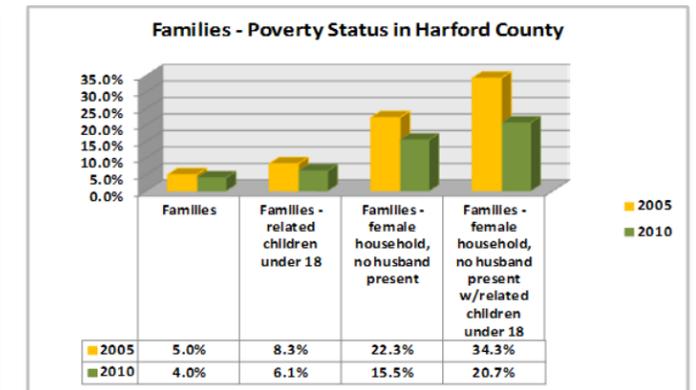
The mission of the Harford County LMB is to assess community assets and needs, facilitate the development of services, and to monitor, evaluate, and continually improve outcomes for children, youth, and families.

## SNAPSHOT OF HARFORD COUNTY YOUTH

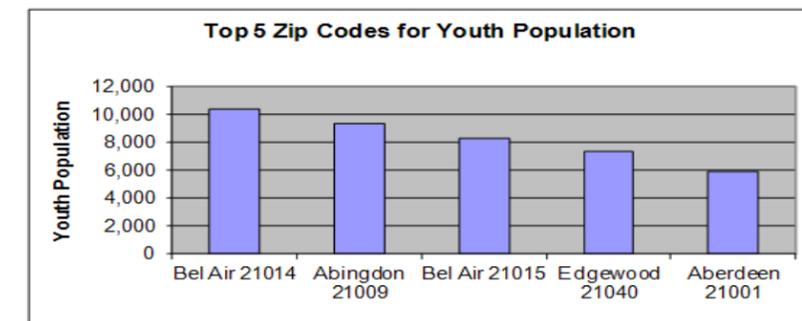
- 27% of the Harford County population are youth
- Harford County's population boomed between 1990-2000
- The growth is expected to slow down between 2020- 2030
- Most youth live in Bel Air, Abingdon and Edgewood
- Local Resources are Invested for All Children



Source: U.S. Census Bureau, American Community Survey, 2005 and 2006-2010



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