

## LEARNING TOUR BRIEF #7

## Barrio Logan: The Importance of Understanding Place, Culture, and Reality

## OVERVIEW AND LEARNING OBJECTIVES

Everyone benefits when the agencies and foundations that support children's development better coordinate their efforts and address children's needs more holistically. During this tour, you'll hear from and exchange ideas with state advocates and local organizations that promote and provide comprehensive, integrated services. See how [Monarch School](#) – a school that serves K-12 grade students impacted by homelessness – addresses the needs of the whole child and thus maximizes its programs impact and increases their return on investment. Experience the immersive culture of the Barrio Logan neighborhood as you visit [Chicano Park](#)'s internationally recognized urban art and murals. You will have an opportunity to embrace the undeniable sense of identity that permeates through the region while considering the importance of establishing such strength of character on the community level.

As you participate in this learning tour, you'll have a chance to:

- Understand the importance of using a holistic lens that focuses on integrated services and opportunities for children
- Increase your knowledge on how to access and use data to help create integrated strategies
- Become aware of the challenges of building strategies across silos and potential ways to address these challenges, both in the context of a community organization and funder
- Learn about the importance of the local and cultural context

## LEARNING TOUR AGENDA

- Part I: Tour of Chicano Park and its history
- Part II: Welcome Performance by Monarch School students
- Part III: National and State context on creating a Children's Movement
- Part IV: Discussion – What does a child-focused strategy look like locally?
- Part V: Lunch

## ISSUE STATEMENT

*"It is the poor policy maker that designs systems that deal only with discrete issues and fails to create environments that support creative interaction between different parts of the system."*

- Kurt C. Stange, MD, PhD, Editor

Although everyone may say that children are the future and the top priority, the reality is that children continue to be underrepresented and under-funded by state and federal policymakers. Their well-being is steadily declining because of a political system that is driven by interest groups. In fact, children are the nation's largest population without competitive representation in this system. They do not have lobbying dollars, are not able to make campaign contributions, nor able to organize a constituency of voters to demand attention. Consequently, children continue to lack access to quality health care, strong educational opportunities and other fundamental building blocks for a productive life.

In 2012, there were 73.7 million children ages 0–17, accounting for almost 24% of the population. By 2050, it is projected that half of the 0-17 population will be Latino, Asian, or of two or more races. Specifically, it is projected that 36% will be Latino and 6% will be Asian.

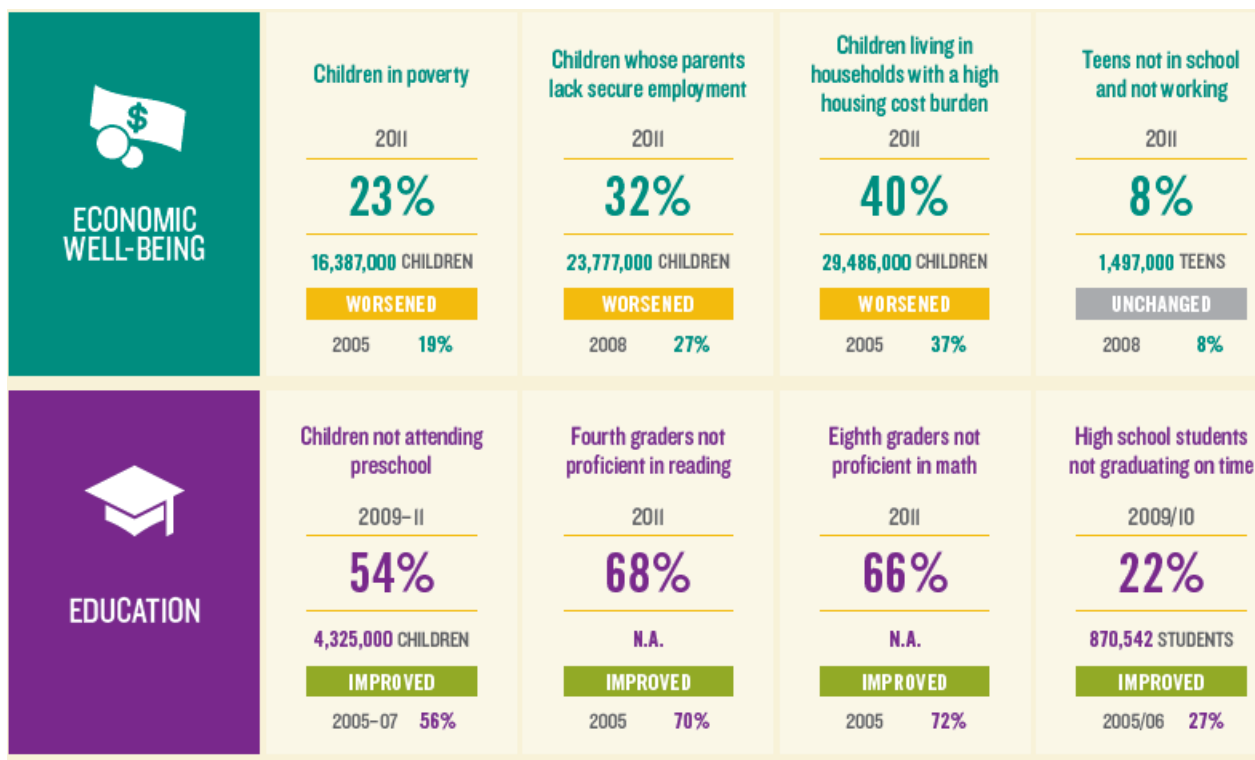


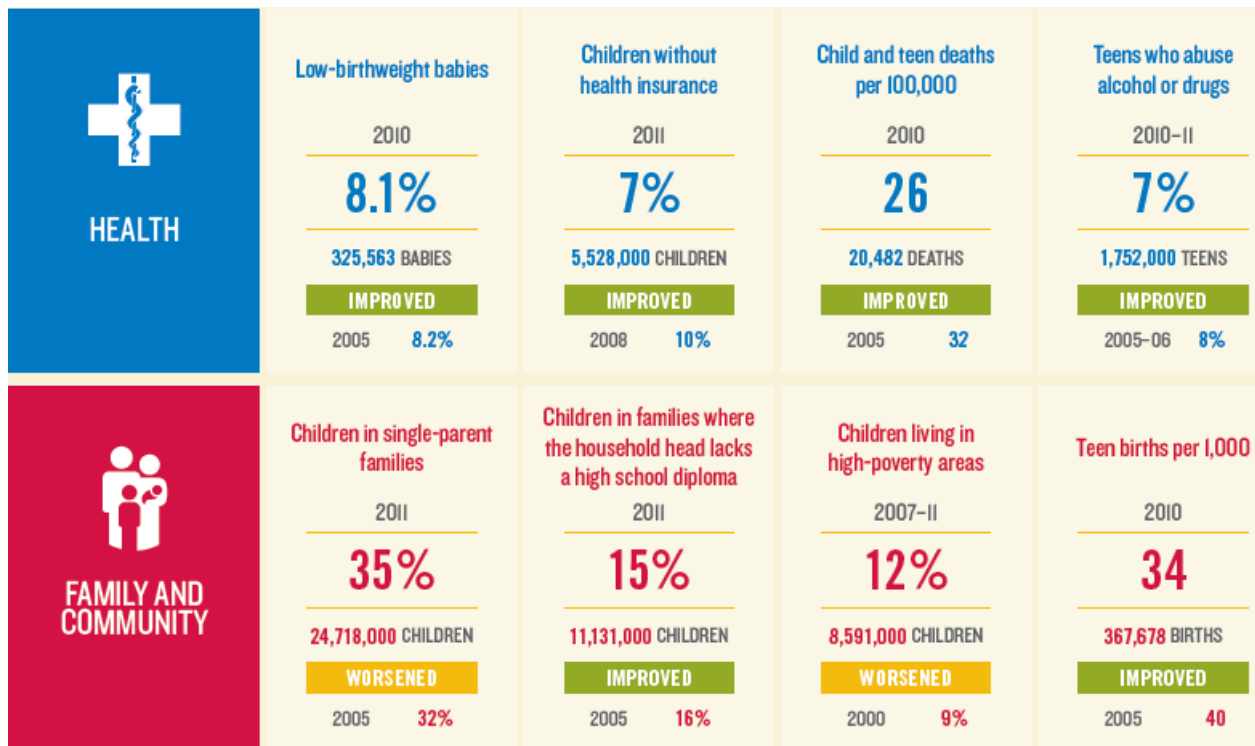
Given how highly interconnected children’s needs are, collaboration and coordination among agencies that support children’s development leads to better outcomes. The following are benefits of Integrated Services to children and families:

- Co-location of community and family resources in schools has effectively decreased student hospitalizations, increased attendance and improved parental involvement
- Providing mental health services in schools has shown to be critical to children’s well-being. Adolescents are ten to 21 times more likely to utilize a school-based health center for mental health services than a community health center or HMO.
- When programs that promote socio-emotional skills are incorporated into elementary and middle schools, test scores increase by 11% to 17% and expulsion rates decrease.
- Head Start and Early Head Start provide important cognitive and academic benefits through their integration of educational, health, nutritional and social services for low-income children.

## NATIONAL TRENDS

National Trends in 16 Key Indicators of Child Well-Being by Domain





[Kids Count 2013 Data Book](#)

### National Key Indicators by Race and Hispanic Origin

	National Average	African American	American Indian	Asian and Pacific Islander	Hispanic	Non-Hispanic White	Two or More Races
<b>ECONOMIC WELL-BEING</b>							
Children in poverty: 2011	23%	39%	37%	14%	34%	14%	24%
Children whose parents lack secure employment: 2011	32%	49%	51%	22%	39%	25%	37%
Children living in households with a high housing cost burden: 2011	40%	53%	36%	40%	52%	31%	43%
Teens not in school and not working: 2011	8%	13%	15%	4%	11%	7%	9%
<b>EDUCATION</b>							
Children not attending preschool: 2009-11	54%	51%	58%	48%	63%	50%	53%
Fourth graders not proficient in reading: 2011	68%	84%*	81%*	51%*	82%	58%	63%*
Eighth graders not proficient in math: 2011	66%	87%*	83%*	45%*	80%	57%	63%*
High school students not graduating on time: 2009/10+	22%	34%*	31%*	6%*	29%	17%	N.A.

## National Key Indicators by Race and Hispanic Origin

	National Average	African American	American Indian	Asian and Pacific Islander	Hispanic	Non-Hispanic White	Two or More Races
<b>HEALTH</b>							
Low-birthweight babies: 2010	8.1%	13.2%	7.6%	8.5%	7.0%	7.1%	N.A.
Children without health insurance: 2011	7%	6%	17%	8%	13%	5%	6%
Child and teen deaths per 100,000: 2010	26	36	30	14	21	25	N.A.
Teens who abuse alcohol or drugs: 2011 <sup>^</sup>	7%	6%*	13%*	3%**	7%	7%	9%
<b>FAMILY AND COMMUNITY</b>							
Children in single-parent families: 2011	35%	67%	53%	17%	42%	25%	42%
Children in families where the household head lacks a high school diploma: 2011	15%	14%	20%	12%	37%	6%	11%
Children living in high-poverty areas: 2007–11	12%	28%	27%	7%	21%	4%	10%
Teen births per 1,000: 2010	34	51	39	11	56	23	N.A.

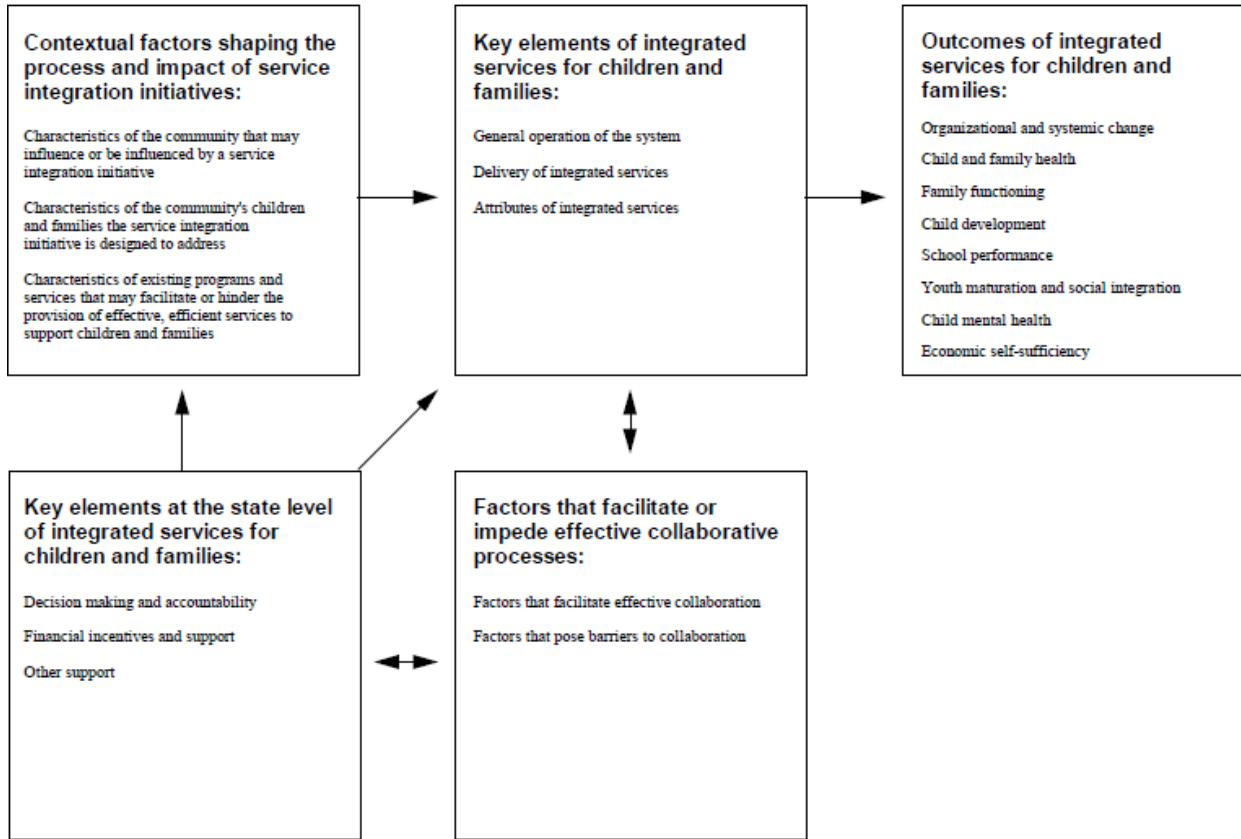
[Kids Count 2013 Data Book](#)

According to Kids Count, the national data masks great variation among states and regions. When looking at state-level data more closely, it becomes evident that a child's success is not only dependent on family and community, but also on the state in which s/he is raised.

Kids Count looked across four domains – economic well-being, education, health, and family/community to develop a single state-ranking for child well-being. The three highest-ranked states are New Hampshire, Vermont and Massachusetts; the three lowest ranked are Nevada, Mississippi and New Mexico. Distinct regional patterns emerge from the state rankings:

- Northeastern states rank in the top 15 in terms of overall child well-being, except for Pennsylvania, Rhode Island and New York, which fall in the middle.
- States Midwest rank in the middle on overall child well-being, although Minnesota, North Dakota, Iowa and Nebraska are in the top 10.
- States in the Southeast, Southwest and Appalachia are in the bottom, not surprisingly given some are the poorest states. In fact, the 17 lowest-ranked states were located in this region.
- New Mexico, Nevada and Arizona occupy three of the five lowest rankings for child well-being.

## A Theory of Action for Integrated Services



### [Collaborative Initiatives to Develop Integrated Services for Children and Families](#)

## ECONOMIC IMPACT

The cost of a fragmented social services network is significant. Lack of coordination and collaboration among agencies and non-profits leads to inefficiency, duplication of services, and inequality. All resulting in the unmet needs among the population seeking services. In an era of shrinking public dollars and charitable contributions, comprehensive, integrated services can maximize impact and increase return on investment as illustrated below:

- Head Start and Early Head Start provide early learning opportunities, health screenings and family support services. Every \$1 invested in Head Start and Early Head Start saves approximately \$9 in societal benefits, through increased personal earnings, family stability, and decreased welfare and crime costs. In 2009, more than 100,000 young children were served by these programs, and nearly all (96%) received dental examinations and medical screenings.
- A health home is a coordinated, continuous source of care that is accessible, comprehensive, family-centered and culturally competent. In addition to improving outcomes for children with special health care needs, they also save money. In one urban-based model, emergency room visits were cut by more than half (55%) when a health home was used to coordinate care for chronically ill children.
- The Alameda County Social Services Agency and Los Angeles County Department of Children and Families are piloting projects that involve collaborating with county probation departments to promote permanency for families at risk of separation. As a result of their efforts, the rate of children entering foster care has decreased in both counties. In 2008-09, they also generated savings of \$20 million (Alameda County) and \$59 million (Los Angeles County).

## HOW IS THE SAN DIEGO COMMUNITY DEALING WITH THIS ISSUE?

Barrio Logan is one of the oldest and most culturally-rich urban neighborhoods in San Diego. From historic beginnings in the latter part of the 19th century to the vibrant mix of uses and people who reside and work in Barrio Logan, the neighborhood has played a vital role in the City's development. The Barrio Logan community is a living example of the change and evolution that have continuously shaped the area's cultural heritage, development patterns, economic opportunities, and social fabric.

What makes working in Barrio Logan unique?

- [Monarch School](#)
  - Monarch School provides an excellent academic and supportive environment in which any student in San Diego County who is impacted by homelessness will receive a rigorous education and grow personally to become a highly motivated, contributing member of society.
- [Family Health Centers](#)
  - Family Health Centers of San Diego operates 35 locations throughout the County of San Diego, including 17 primary care clinics, 3 dental clinics, an HIV clinic, and 3 mobile medical units which provide healthcare services at approximately 70 community sites.
- [MAAC Project](#)
  - MAAC offers a wide range of programs throughout San Diego County based on four pillars of service: Education, Health & Wellness, Career Pathways, and Housing. The common thread weaving the programs together is the collective work as an organization and as a community partner to offer resources needed to achieve self-sufficiency.

## ARE THERE MORE RESOURCES I CAN ACCESS ON THIS?

- Gather information about your state at the [Kids Count Data Center](#)

New Federal Opportunities to Promote Integrated Services

- The Affordable Care Act (ACA) provides \$200 million over four years to support school-based health centers (SBHCs) nationwide. SBHCs have a positive impact on absences, dropout rates, disciplinary problems and other academic outcomes.
- The ACA requires states to develop one single, streamlined health coverage application form for children and families. Notable enrollment gains, such as those in Ohio when it simplified its children's health application, are anticipated for California's Medi-Cal program.
- Express Lane Eligibility, promoted in the Children's Health Insurance Program Reauthorization Act of 2009, allows state health insurance programs to synchronize eligibility determination information with other public programs. Through this approach, Louisiana was able to increase children's Medicaid enrollment by more than 10,000 in a single month.

## REFERENCES:

[Children Now - Childhood Issues](#)  
[Children Now - Integrated Services](#)  
[Children Statistics](#)  
[Child Well-being](#)

[Collaborative Initiatives to Develop Integrated Services for Children and Families](#)  
[Integrated Services](#)  
[Kids Count 2013 Data Book](#)  
[San Diego - Barrio Logan Community Planning](#)

