

**How well are our children and youth doing? What does “success” look like?**

	<b>Early Childhood</b>	<b>School Age</b>	<b>Middle School Age</b>	<b>High School Age</b>	<b>Young Adults</b>
<b>Vocationally and Civically Contributing</b>	We lift the voices of even youngest children--commit to considering the impact of our decisions on young children and families	Understand community as group of people working together, their role too We lift the voices of children	Understanding of self and layers of identities  Opportunities to give back to their community	Understanding of history and systems  Opportunities to testify on public policy	Encouraged to bring their voice to public policy  Knowledgeable about self-governance and government
<b>Learning</b>	Age appropriate strategies Community allows them to ‘catch up’ after COVID -- no make it the child’s deficit  Eliminate disproportionalities in suspension and expulsion of children of color	Gaining knowledge of math, reading, and writing skills Achievement gap identified and closed  Understanding basics of how our “system” works and civil engagement (i.e.	Achievement gap is closed  Dedicated programming to teach SEL	Attending, engaged, relationships with positive adults. Happy with their education.	Prepared for adulthood, opportunities to contribute

	and boys from child care and early learning settings	“Schoolhouse Rock”)			
<b>Socially/ Emotionally Connected</b>	They are engaged in activities with peers/playing  Healthy parent-child relationships (parents prepared and supported to provide predictable, consistent and nurturing care and to delight in child)	See self as part of group, but also self as leader in their own life/decisions	Healthy friendships in and out of home.	Friendships, family, teams, organizations, activities Mentorship	Adapting to adult life with excitement  Enthusiastic about future
<b>Behaviorally Healthy</b>		Able to attend school daily Children are seen as contributing citizens	Healthy relationships, lower incidents of smoking/drug use, lower incidence of depression and anxiety	Lower suicide rates, lower incidence of depression and anxiety	Crime free lifestyle. Able to have outside relationships.

			Ability to manage conflict with peers and family		
<b>Physically Healthy</b>	Hitting milestones Healthy BMI	Knowledge of physical Needs (exercise, diet, mental-physical health connection)	health education, consent, sex Ed Healthy BMI	Taking part in healthy physical activities, healthy eating habits, etc.	
<b>Safe &amp; Basic Needs Met</b>	Housing stability  Families meeting basic needs -- enables families to better focus on young children's needs	Stable housing  Sufficient food	Stable housing  Nutritious meals available	Stable housing, Access to *healthy foods*	Have a home  Working or attending school, able to meet current and future needs independently

# Pierce County, Washington – Developmental Dashboard

	Early Childhood	School Age	Middle School Age	High School Age	Young Adults
<b>Vocationally &amp; Civically Contributing</b>					Disconnected Youth
<b>Learning</b>	Kindergarten Readiness	3 <sup>rd</sup> Grade Reading	9 <sup>th</sup> Graders Academically on track	Graduation Rate (4 year)	Bachelor's Degrees
<b>Socially/ Emotionally Connected</b>		SEL Skills			
		Bullying			
<b>Behaviorally Healthy</b>	ACES	Depression & Suicides			
<b>Physically Healthy</b>		Health Conditions e.g., asthma, obesity			
		Risk Behaviors e.g., marijuana, smoking, drinking, DUIs			
<b>Safe &amp; Basic Needs Met</b>		Food Security			
	Abuse // Out of Home Care				
	Homelessness & Stable Housing				

## Populations

Group 1:

### INITIAL THOUGHTS

Name	Focus Populations (e.g, adolescence, homeless)
Lauren & Beverly	Special needs parents/kids. Teachers and their view. (Beverly infants birth to 3).
Ralph	LGBTQ+ (Parents and Youth), Foster, Recently arrived immigrants, Special needs parents/kids
Tanya Durand	Children exp special needs, families exp foster system, families who are working poor (ALICE), first-time parents (especially those who experienced ACES themselves)
TJ	LGBTQ, Black, Youth of Color, Foster Care/Dependent children, Homeless, Poverty
Christine & Beverly	Children living in and aging out of foster care, Children of homeless parents, Children of incarcerated parents
Dylan	Mckinney Vento youth, youth who've lost contact with schools, english language learners, refugee youth, ALICE

Sharon Shadwell	<p>Zip code specific populations identified by Tacoma-Pierce Co. Public Health - <a href="https://www.tpchd.org/healthy-places/public-health-data/maps">https://www.tpchd.org/healthy-places/public-health-data/maps</a></p> <p>Also related may be Department of Children Youth and Families (DCYF) data about locales with greatest risk for child welfare involvement (I believe this includes zip code(s) in Pierce Co.)</p> <p>Neurodiverse children, youth, and parents</p> <p>Military families with children/adolescents</p> <p>Direct-service providers (e.g., behavioral health professionals, ECE and K12 teachers, etc.)</p>
Kyle Paskewitz	Single parent homes, kids living in foster care, kids living in joint/split custody, kids living with relatives (kinship care),

	adoptees, homeless/street kids/couch surfers, CPS involved populations
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## GROUP SUMMARY

Populations of Focus:

LGBTQ youth

Special Needs

Foster Care

Black

Children and Youth of Color

Immigrant / Second Language

Homeless Youth

Children of Homeless Parents/Caregivers

Children of families who are ALICE (Asset Limited Income Constrained Employed) or below the Federal Poverty Level

Young people in specific geographies --

Sharon Hanek - Don't forget there are families that would like guidance but do not want to be involved in programs they view to be "government" that will survey and collect data from them.

#1

The number of disconnected young adults, ages 16-24, who are neither working or in school was 15,300 in 2017.

PART A: FULL GROUP -- ROOT CAUSE:

1. I suspect young people are not finding success and lack hope in the current school environments. Special needs or "different" learners than the traditional format also contributes.
2. No social-emotional connection with adults in school.
3. Foster care transitions.
4. Criminal system involvement + inability to achieve potential after minor offenses (can't get education, job, lease..keeping them in cycle of poverty and crime).
5. Behavioral health symptoms (e.g., depression, anxiety, substance use disorder) impacting ability to function in academic and/or vocational settings.
6. Not an online learner--therefore NO academic answers right now.
7. Unsafe or unstable home environment.
8. Kids are re-learning material or doing busy work, not progressing.
9. Civil/political unrest. No hope in the future / fear of the future.
10. Parents/peers aren't working or placing emphasis on education/future.
11. Dysfunctional families / relationships / custodial conflict.

PART B: SMALL GROUP – LOCAL CONDITIONS

*Pick one "root cause" from the list above and ask: Why is it this way in Pierce County? Dig deep. Ask "why" four or five times. Then, pick another Root Cause and do the same.*

	Fill in root cause from list above	Fill in root cause from list above	Fill in root cause from list above
Root Cause:	Dysfunctional families / relationships / custodial conflict		
Why here?	Family court outcomes not appropriate for family		
Why Here?	Lack of services for fathers / non-custodial parents		
Why here?	Lack of protection for parental rights / equal treatment in court		
Why here?			
Why here?			

#2

Kindergarteners demonstrating school readiness in 6 of 6 areas

38.9% (Clover Park)

55% (Tacoma)

PART A: FULL GROUP -- ROOT CAUSE:

1. Are expectations reasonable/ideal?
2. Poverty higher in clover park
3. Fewer preschoolers
4. Poverty concentration and increased mobility of students (due to poverty and JBLM)
5. Not enough access to high quality early learning programs
6. We should be supporting parents pre-birth with parenting information about age appropriate development and play-based strategies. Where are the parenting groups and classes (example: Love and Logic)
7. Lack of intergenerational educational success / ability to support education at home
8. Lack of access to good nutrition
9. Lack of universal pre-k that is QUALITY
10. Need to connect childcare providers with schools to help smooth and successful transitions
11. Exclusionary discipline practices (e.g., suspension, expulsion, isolation, restraint) in child care and early learning settings

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	Fill in root cause from list above	Fill in root cause from list above	Fill in root cause from list above
Root Cause:	Parenting information/classes	Lack of quality Pre-K programming/preschool	Lack of good nutrition
Why here?	No in-person	Need public funding for pre-K	Fewer food banks + transportation issues to get to food banks + food desserts
Why Here?	Online resources available, no need for-in person	Not enough high quality childcare--not a desirable business	Lack of community concern
Why here?	Practitioners using online to reach more people	Expensive to provide - not enough subsidy for lower-income families	
Why here?			
Why here?			

#3

1 in 4 Pierce County middle school youth report depressive symptoms. Pierce County high school students reported depression at a rate of 36.9%.

Suicidal ideation (21.6% of youth reporting) is more common among Multiracial youth (29.3%), American Indian or Alaska Native and Native Hawaiian or Pacific Islander (25.3%) youth, and higher in girls (28.6%).

PART A: FULL GROUP -- ROOT CAUSE:

1. Lack of investment in positive youth development programs including mentoring. No public policy that prioritizes investment in these programs.
2. Bullying, racial tensions, disconnect from teachers
3. Access to drugs to self-medicate
4. Conflicting home life/parent stressors
5. Kids want to go back to school (COVID closings)
6. Cyberbullying
7. Lack of positive caring adults in a child's life
8. Kids are impacted by media / social media / politics / civil unrest
9. Parents are struggling with depression or other issues
10. Historical trauma
11. Lack of access to mental health services from professionals who are representative of the communities/families being served
*** I want to know where the data came from that says that suicidal ideation is higher in girls, and if it's actually higher in Pierce County, why - as nationally numbers for boys and men are much higher almost universally across the board

PART B: SMALL GROUP – LOCAL CONDITIONS

*Pick one “root cause” from the list above and ask: Why is it this way in Pierce County? Dig deep. Ask “why” four or five times. Then, pick another Root Cause and do the same.*

	Fill in root cause from list above	Fill in root cause from list above	Fill in root cause from list above
Root Cause:	Lack of access to culturally relevant mental health services for adults and youth	Lack of investment in positive youth development initiatives/programs	
Why here?	Mental health services do not have sufficient diversity in their staff	Lack of agreement of political leadership to establish policy that supports an investment in prevention	
Why Here?	Funding does not prioritize communities of color that must be served	Too much focus on treatment and not enough on prevention and education	
Why here?	LGBTQ communities are often not included		
Why here?	Insufficient training for service providers to provide culturally relevant services		
Why here?			

## Engagement Strategy for “Communities Within” Pierce County

FEEL FREE TO ADD IN.

Name	Communities/Geographies “within” Pierce County
	By School District... (Superintendents group)
	By Towns (Mayors group, Police Chiefs, Pierce County Cities and Towns Association (PCCTA))
	RURAL (District 1, 2, 3, 7) - unincorporated
	Black families/youth (Tacoma Urban League (trusted messenger to engage Black families/youth)
	Asia Pacific Islander community (I would break this out even further, e.g., Native Hawaiian and Other Pacific Islander, Korean, Cambodian, etc.)
	Latinx community
	American Indian/Alaska Native families
	Youth/families who have accessed behavioral health services (e.g., FYSPRT)
	Russian immigrants (Eastern European/Slavic - Polish, Ukraine, German, etc)
	Low-income, low SES neighborhoods/communities
	Business districts
	Legislative Districts, City Council Districts, Neighborhood Councils

**Links to Existing Networks, Initiatives, etc.**



**Big Picture planning is undertaken by groups at many levels.**

Overarching Leadership	Legislative Districts, Council Districts, City Councils, School Boards, Mayor’s Youth Task Force, Project PEACE (Tacoma), Economic Development Board, Chamber of Commerce, the ‘big orgs’ convened by City (UWT, UPS, THA, etc)
Population Focused	Asia Pacific Cultural Center, Urban League, Centro Latino, NAACP, DCYF, educational groups, Puyallup Tribe, JBLM (military families), Non-Custodial Parents/Split Families, Homeless/At-Risk Youth, Child welfare involved families (e.g., foster care agencies, dependency court - Best for Babies, Parents for Parents, etc.)
Provider Network	Behavioral Health Network for BIPOC communities, black infant health, Parentalink of Washington, Kids Mental Health Pierce County, Pierce County Counselors Association, Child care aware, FYSPRT (Family Youth Systems Partner Round Table), WCAAP (Washington Chapter of American Academy of Pediatrics), South Sound Military and Communities Partnership, PC Arts and Culture Execs-
Issue Coalition	WA Interagency Fatherhood Council, Health Equity Network, Project Child Success & Help Me Grow,

	<p>Graduate Tacoma/Fdtn for Tac Students, Harvest PIERCE county, Youth Serving Agencies Network (YSAN), CPWI Coalitions, Community Based Coalitions - Opioid Prevention, Drug Free Communities, Child Care Strategies, Parent Advisory Group for Pierce County Juvenile Court, group--convened by project child success, Homeless Coalition, black infant mental health</p>
<p>Neighborhood</p>	<p>Neighborhood Councils, business districts, Safe Streets organized groups in unincorporated Pierce County, Tacoma, Bonney Lake, Gig Harbor, Lakewood, Family Support Partnership/Centers, Social media groups (Facebook, Nextdoor), Health Dept's Communities of Focus, <i>First Five Fundamentals/Project Success</i></p>