

## Section VIII

### The Conclusion: A Means for Promoting the Well-Being of all Florida's Children.

The well-being of children and families is the highest priority in Florida, and public policies should be established to support this priority. The key indicators of **well-being** are:

- ❖ All of Florida's **children** are healthy, safe and ready to learn at every age.
- ❖ All of Florida's **families** are stable, nurturing and economically self-sufficient.
- ❖ All of Florida's **communities** are supportive of families raising children.

In order for the state to realize these outcomes, Floridians must implement the following key policies and practices'.

- ❖ All children and families have access to affordable, quality:
  - ✓ Health care;
  - ✓ Parenting support (e.g., home-visiting) services;
  - ✓ Early care and education; and
  - ✓ Integrated health, economic, and family support services.
- ❖ All communities, in partnership with the public and private sectors, have the capacity to provide a comprehensive, integrated continuum of natural, primary, and specialized supports.
- ❖ All public and private employers in Florida promote family-friendly employment practices and a livable wage.

This body of work focuses on promoting integrated service delivery of child health, early care and education, and parent skill-building for families with young children (birth to age five). This focus recognizes the diversity of families in Florida in terms of their economic status, ethnicity, health status, (i.e., physical, mental, and dental), education, political affiliation, religious beliefs, and personal priorities. It also acknowledges the preference by many families to utilize natural supports – family, friends, and neighbors – for assistance. The availability of natural supports differs across families. Whether natural supports are extensive or tenuous, most families supplement natural supports with community services (i.e., primary and specialized services).

Integrated service delivery is a process that takes place as families interact with prevention opportunities and primary and specialized service providers. It recognizes the efficacy of prevention and early intervention in ensuring the well-being of Florida's children and families, building on strengths and avoiding, or at least, reducing risks of negative health, education and parenting consequences. Integrated service delivery looks beyond narrow definitions of eligibility and service provision and seeks to eliminate fragmentation of services.

Initiatives that strive to integrate services and supports for children and families offer a promising approach to improving the quality and scope of service delivery. When well-planned, local efforts can meet the unique needs of diverse communities and build constituencies of support for child and family issues. Poorly planned efforts, however, can lower expectations and support and hurt families. Fortunately, there are elements of successful initiatives to guide future initiative development.<sup>380</sup>

Some of the most innovative services and programs begin during times of budget cuts; the time for seeking reform is now. Systems change will require **new funding** in order to address access and true integration of services. Even with increased efficiencies, initiatives will need additional dollars to create systems that will ensure access to all families in need, and ensuring quality and appropriateness of programs and services. New funding can also provide the **flexibility** that **communities** will need in order to integrate services and make systems decisions.

The importance of a strong **evaluation** plan is crucial. New initiatives are at greater risk of de-funding during changes in leadership without outcome data to validate the programs and services. Additionally, without a clear **vision** and **strong leadership**, efforts frequently lose support and funding. Although some tensions regarding individual programs and funding are natural, it is important that a **broad vision** bring people and their communities together as a constituency. Influential and articulate leadership can help bring partners to the table and build broader support among important allies. Many states utilized a cabinet-type body to bring together state agency and legislative leaders.

**Reasonable expectations** must be set from the beginning. Unreasonable expectations set initiatives up for early failure that can have lasting consequences for future efforts and investments. One aspect of reasonableness is the adequate provision of technical assistance to local entities in order to facilitate success. In several cases, extensive technical assistance was provided regarding coalition building, community assessment, and capacity building. Appropriately **measuring progress and effectively communicating results** is also essential for sustainability of the effort.

**Service delivery** systems best serve families' needs when they are based upon family assessments and respond appropriately to the array of presenting needs and issues. A **prevention orientation** serves to provide supports early on, potentially eliminating the need for more costly and intrusive supports in the long term.

Service integration can happen at many levels. Some elements of service integration can be found in federal programs (e.g., the Promoting Safe and Stable Families Act and Head Start). In other instances, states have attempted to integrate services across a wide array of service areas (e.g., Iowa's Child Welfare and Substance Abuse Collaboration and Pennsylvania's Child Welfare and Juvenile Justice Collaboration). Integrating services within a service area is another approach (e.g., California's Proposition 10 and North Carolina's Smart Start).

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<sup>380</sup> Miller et al., 2002

There are also local communities and specific agencies that have made service integration a goal. (e.g. Manatee County's Whole Child Project).

At whatever level service integration occurs, there must be core components that identify it. Indeed, one of the dangers of system reform movements is the lack of definitions, understanding, and processes to clearly identify the change process and success. Based upon research and the deliberations of the Fellows of The Policy Group for Florida's Families and Children, nine core criteria have been identified as critical elements of successful implementation.

Although these criteria are not unique to integrated systems, they are core to those that are successful. These nine criteria are:

- ❖ **Local Community Decision-making** — Improves opportunities for community support and program sustainability due to the ability of communities to identify service needs and for providers to be responsive to those needs.
- ❖ **Prevention Orientation** — Focuses proactively on front-end capacity-building, natural supports, and risk assessments that enable families, and ultimately the service system to reduce the need for preventable, long-term and costly interventions.
- ❖ **Holistic Service Delivery** — Views the family as the client and considers the broader ecological contexts in which families grow and develop.
- ❖ **Evidence-based Practice and Programs** — Builds on logic models and theories of change that are research supported and evidence based.
- ❖ **Supported Front-line Staff and Highly Skilled Staff at all Levels** — Ensures that highly skilled staff are supported in operating as system managers, bringing together the appropriate array of needs-based resources and services.
- ❖ **Flexible Fiscal Policies that Promote Integration and Quality** — Ensures adequate and stable funding to meet quality standards and provides the flexibility to align funding streams in order to provide better and tailored needs-based services.
- ❖ **Family Supportive Policies** — Facilitates ways home, school and community partnerships can balance the needs for stability and change for children and families; enabling families to shape and choose appropriate activities and services for their children and themselves.
- ❖ **Continuity and Ease of Transitions** — Ensures that families have consistent service providers within an organization and that services provided by one entity complement services provided now and at later points in development with other service providers.
- ❖ **Accountability** — Provides the evidence to determine the efficacy of decisions and their impacts for Florida's families and children.

The societal and fiscal benefits of beginning and living a healthy life are enormous and long lasting. The quality of life in our communities depends upon our being safe in our communities as well as our future generations growing up to become responsible, law-abiding and nurturing adults. Our best investment is to capitalize on the capacity for young children to learn in the early years and to teach our children how to live and work in our rapidly growing and complex world. For all Floridians to participate fully in society, families need to thrive, our children need to grow to full potential and elders need to feel secure and believe they are needed. It is in support of these reasons, this paper has been written. It is the objective of The Fellows of The Policy Group that the research and information provided will serve to improve and change current service delivery and systems through the integration of efforts, services and policies.

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## Glossary

**Accountability** — The concept of holding appropriate parties responsible for their actions or performance.

**Approaches toward Learning** — Children’s learning styles, motivations, task attentiveness, curiosity and creativity.

**Assessment** — The process of collecting data to measure the performance or capabilities of a person, group or system.

**Assets and Strengths** — A community’s assets are its tangible and intangible strengths and capabilities. Tangible assets include buildings, services and people. Intangible assets include skills, knowledge, contacts and individual capacities. Internal assets are within the control of the community such as cultural organizations, personal income, businesses, business associations, individual capacities, religious organizations, advocacy groups, citizen associations, home-based enterprises, etc. External assets may be located within a community, but are largely controlled externally for the community. These include law enforcement, parks, fire departments, libraries, public schools, hospitals, higher education institutions, energy/waste resources, social service agencies, and vacant buildings, land, etc. Additionally, there may be external assets and resources available to a community that originate outside of the community and are controlled by outsiders, such as public information, welfare expenditures, capital improvement expenditures, philanthropic organizations, etc.

**CDA (Child Development Associate) Credential** — The CDA is designed for employees in the field of early childhood education and certifies successful completion of courses in teaching methods in nursery schools and daycare centers. CDA credits may be applied to an associate degree program in Early Childhood Education.

**Child Development** — Growth or maturation that occurs primarily because of the emergence of underlying biological patterns, preconditions and environmental conditions.

**Cognitive Development and General Knowledge** — Basic knowledge about the self (e.g., name and address), the environment (e.g., basic science and community concepts), cognitive competencies (e.g., basic mathematical constructs of shape, size and sequencing) and basic problem solving skills (e.g., similarities and differences).

**Communication/Language Development** — The verbal and non-verbal skills necessary to convey and understand meaning via early literacy, speaking and print awareness.

**Community** — A community is any group of people brought together for a common purpose or compelling reason. This establishes its borders or parameters. It may be small, medium or large; a service area; a geographic area; a political division; an economic region; a combination of individuals, organizations, associations and institutions; a group of people with common characteristics or goals; etc. Sometimes, community membership is voluntary (e.g., neighborhood, club, advocacy group, church, Internet Listserv, etc.) and sometimes it is not (e.g., zip code, ethnicity, school district, etc.). The nature

and composition of a community change shape and membership. A community could be established based on an ideology or on interests. Therefore, an important step in any community work is identifying the borders (for example, immediate section or sub-section, bureau, department, street, block of homes; number of church families; etc.) of the community. Whatever its description, people within a community are bonded together around a common parameter or issue.

**Connections** — Community building is at first accomplished one-on-one and these relationships are then connected. Connection is the process by which local strengths are not only identified but also mobilized to meet the goals desired by the community. It is central to community facilitation and capacity development. This process of identification and mobilization means:

- ❖ discovering those people in the community who are actively doing things behind the scenes and offer them support
- ❖ involvement of community residents and members
- ❖ communication among individuals and groups
- ❖ recognition, acceptance and use of human and resource potential within the community
- ❖ a focus on talents, skills, capabilities, desires and vision of all members
- ❖ working one-to-one with community people and linking individuals to each other so that small groups form to achieve manageable projects
- ❖ sharing information about local strengths
- ❖ linking people and groups with other people, local associations, local businesses, local institutions, capital and credit.

**Continuity of Care** — Continuity of care and consistency help the infant and toddler extract internal models of care and -- if the care is sensitive and responsive -- build multiple secure attachment relationships. It is provided by a community of stable, emotionally invested caregivers, all of whom a child can trust, where child-caregiver relationships are able to build without disruption, until multiple attachment relationships are secure.

**Developmental Assessment** — Measurement of a child's cognitive, language, knowledge and psychomotor skills in order to evaluate development in comparison to children of the same chronological age.

**Developmentally Appropriate** — Teaching based on a knowledge of how children learn, specifically through opportunities for direct experience, and of synthesizing this experience through activities.

**Early Childhood** — The stage of life from birth through age five.

**Early Care and Education** (AKA Quality Child Care) — A program that makes the healthy development and education of children its first objective and accomplishes this objective.

**Family Friendly** - An employer that acknowledges that its employees are human beings with important personal responsibilities, and supports them in their efforts to handle those responsibilities.

**Home Visiting Program** — A professional or para-professional visits families in the home to accomplish a variety of goals such as: promotion of good parenting skills, prevention of child abuse and neglect, promotion of healthy child development and school readiness, linkages to other needed family supports

and resources and sometimes the improvement of mothers' lives (e.g., deferral of subsequent pregnancies and promotion of maternal education and employment). The overarching belief is that parents play a pivotal role in shaping children's lives and one of the best ways to reach families with young children is to take the services to them rather than expecting those families to seek assistance in the community.

**Indicators** — Quantitative or numerical measures that show whether outcomes are improving, holding steady or worsening. A social indicator is a statistic used to report on a societal condition, such as the rate of infant mortality.

**Learning** — Acquisition of knowledge, skills, ways of thinking, attitudes and values as a result of experience.

**Motor Development** — Children's abilities to engage in gross motor (e.g., catching a ball, walking a balance beam) and fine motor (e.g., cutting with scissors) activities.

**Natural Supports** — Familiar people and resources that individuals would naturally approach when seeking help; self, family, friends, neighbors, etc.

**Neighborhood** — Geographically bounded territory within which people live, a locality recognized by local government and distinguishable on plat maps that can provide a shared frame of reference growing from a dynamic pattern of interactions, a shared history and common interests.

**Outcomes** — Statements that communicate desired conditions of well-being for children, adults, families or communities

**Physical Health** — Children's physical development (e.g., growth rates), health status (e.g., immunizations, dental vision and hearing) and physical abilities.

**Primary Supports and Services** — Voluntary activities, facilities and events provided by organizations and groups that are part of families' familiar social world. They offer opportunities for participation, avenues for contributing to the well being of others and sources of personal support.

**Quality Child Care** (AKA Early Care and Education) — A program that makes the healthy development and education of children its first objective and accomplishes this objective.

**School Readiness** — The match between the range of developmental accomplishments (e.g., emerging literacy and numeracy skills, such as pretending to read stories or counting to 20, and small-motor skills, such as buttoning clothes and holding a pencil properly) and difficulties (e.g., such as restlessness and inattention, speech difficulties, and less than optimal health) that children bring with them when they arrive at kindergarten and the capacity of schools to educate all children regardless of the abilities, interests and talents they bring to school.

**Specialized Supports and Services** — Interventions aimed at reducing or resolving the difficulties that children or parents may have in physical, cognitive, emotional or behavioral arenas. These supports and services are usually provided by individuals whose disciplinary perspectives, training and skills are geared to understanding and developing remedies for particular child or parent difficulties.

**Social/Emotional Development** — Children's feelings about themselves and others and the ways in which they form and maintain positive relationships and get along in group settings.

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The Policy Group is an independent, non-partisan policy research organization composed of local and state leaders who are working together to enhance the well-being of Florida's families and children. The vision of the Policy Group for Florida's Families & Children is that, together, we will ensure a generation of young people who grow up to be responsible adults — ready, willing and able to contribute to self, to family and to their community. For additional information about The Policy Group, this paper or other products, please visit our web site at **[www.policygroup.org](http://www.policygroup.org)**.

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