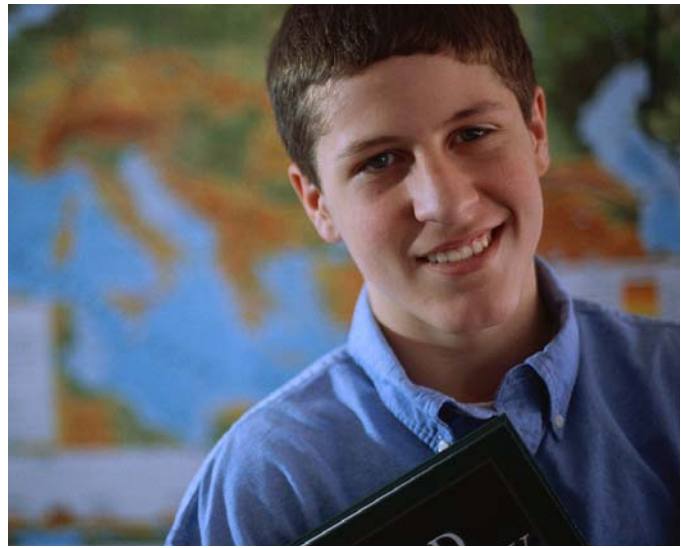




Los Angeles County Services for Transition Age Youth: Programs, Data and Recommendations



County Services for Transition Age Youth: Programs, Data and Recommendations

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I. Introduction

Overview This report provides an overview of the conditions of youth ages 11-25 in Los Angeles County, along with specific information on programs and services provided by County government. The age span is very broad, including the potentially challenging and turbulent developmental periods when children transition between elementary and middle school, when adolescents enter high school and make decisions about their futures, and when young adults seek higher education, find vocations and make initial steps toward adult independence and self-sufficiency. This report includes data from 15 County departments compiled by members of the Transition Age Youth Working Group led by CEO-Service Integration Branch (SIB) staff Lesley Blacher and Vani Dandillaya and consultants Jacquelyn McCroskey and Becki Nadybal. Taken together, these data demonstrate the range and scope of County government services for Los Angeles' preteen children, youth and young adults.

The importance of County services for youth During just one year, these 15 County departments provided essential services for over a million young people, or about half of the 2.2 million youth and young adults living in Los Angeles County. A few examples in the report demonstrate the range, scope and depth of County services, illustrating the potential impact that a more coordinated County strategy might have on outcomes for Los Angeles' youth. In calendar year 2006-2007, the Department of Public Social Services enrolled 523,042 youth in the Medi-Cal health insurance program; 122,350 youth received health care from Department of Health Services facilities; 125,870 youth received CalWORKs benefits; 189,794 youth received food stamps only (without other financial benefits); and 24,459 youth received child protective services. Although the number of youth served by each of these programs is tracked independently – and these data may therefore double count many of the same individuals – the large numbers involved illustrate the significant role that County government plays in supporting youth and their families.

While the County is known primarily for providing safety net services when things go awry, many departments, Commissions and related entities also provide preventive services and supports that contribute to positive youth development. For

example, in Fiscal Year (FY) 2006-07, the Music Center's arts education programs partnered with 238 public and 66 independent schools to provide arts education programs and sent artists to perform in 1,391 school assemblies. At the same time, the Arts Commission's Arts for All initiative worked with school districts to plan for local arts education programs, training teachers in curriculum standards, and developing an online directory of arts education providers. That same year, the County library provided 40,377 live homework help and tutoring sessions online.

While this first time analysis of youth-oriented services may not include all County services that touch young people, every effort was made to gather information from all of the major County departments that regularly serve youth and their families. This is the first report designed to help County decision-makers assess overall progress for this age group, rather than focusing on one department at a time or mixing youth in with younger children or adults. Age was thought to be a critical factor because Los Angeles' youth are facing such a complex world, with so many new challenges, that a population cohort approach would provide a different and useful lens for overall analysis.

It is apparent in most parts of Los Angeles County that historic boundaries between government jurisdictions, institutions and programs make it harder rather than easier for youth and families to find the help and support they need. The fact that many people don't understand the services offered by County government, or how the roles of cities and County differ, makes it even more difficult to address complex and challenging problems. For example, what happens when families are too poor to provide basic housing, food and clothing? Who can help when students are distracted by family problems or deteriorating conditions at home? What happens when youth who have physical, emotional and developmental challenges just can't make progress in school? What happens when youth get discouraged about employment opportunities or just don't see how their schoolwork will lead to a job with a living wage and a future? Clearly, it will take the combined efforts of families, communities, schools, cities, community-based agencies and faith groups to help our youth succeed in school and in life, and to help communities support families so that they can give their children the

best possible start in life. This report begins to map the many roles played by County government in this important collaborative enterprise.

Report outline The first section of the report highlights changes over time in the County's youth population. These demographic changes set the context for considering the potential impact of specific County services. Information on youth programs offered by County departments have been grouped into five clusters corresponding to the five County Strategic Plan areas that describe well-being for children and families: Good Health, Economic Well-Being, Safety and Survival, Social and Emotional Well-Being, and Educational/Workforce Readiness and each section includes data highlights from key programs that illustrate the range, scope and potential impact of County services. Where available, additional data from the Los Angeles Health Survey, the California Health Information Survey and other partner organizations have also been included to illustrate current trends and key results related to each service area.

The report also includes two appendices: Appendix A thanks the many County staff who contributed data and helped to shape this report. Appendix B includes descriptive information on 44 County programs administered by 15 County departments that touch the lives of youth and families on a regular basis. This report is also available online at SIB's website, [www.http://ceo.lacounty.gov/SIB/](http://ceo.lacounty.gov/SIB/).

This initial effort to highlight the youth-oriented services provided by County government has identified over 50 programs run by 15 County departments. Undoubtedly, other County departments and commissions that are not specifically named in this report also support youth and families. Taken together, these efforts represent a significant resource that should be better integrated and leveraged with the allied efforts of cities and school districts throughout the County. The conclusion of the report summarizes findings and makes recommendations for more effective integration of services and more strategic collaboration with cities, school districts and community partners.

II. The Youth Population in Los Angeles County

According to population estimates from the California Department of Finance, there were 2.2 million transition age youth (ages 11 to 25) living in Los Angeles County in 2006, accounting for 22 percent of the County's total population.¹ This group is projected to increase to 2.3 million by 2010, with the largest percent increases seen in the 14-15 and 16-18 age groups. Among

racial/ethnic groups, Hispanics² account for more than half of the population (55 percent), followed by non-Hispanic Whites at 22 percent, African Americans at almost 11 percent, and Asians at nine percent. Chart 1 shows changes in subgroups of youth between 1970 and 2010. Tables 1 and 2 provide specific data by age group and race/ethnicity.

Chart 1: Transitional Age Youth Population, 1970 to 2010

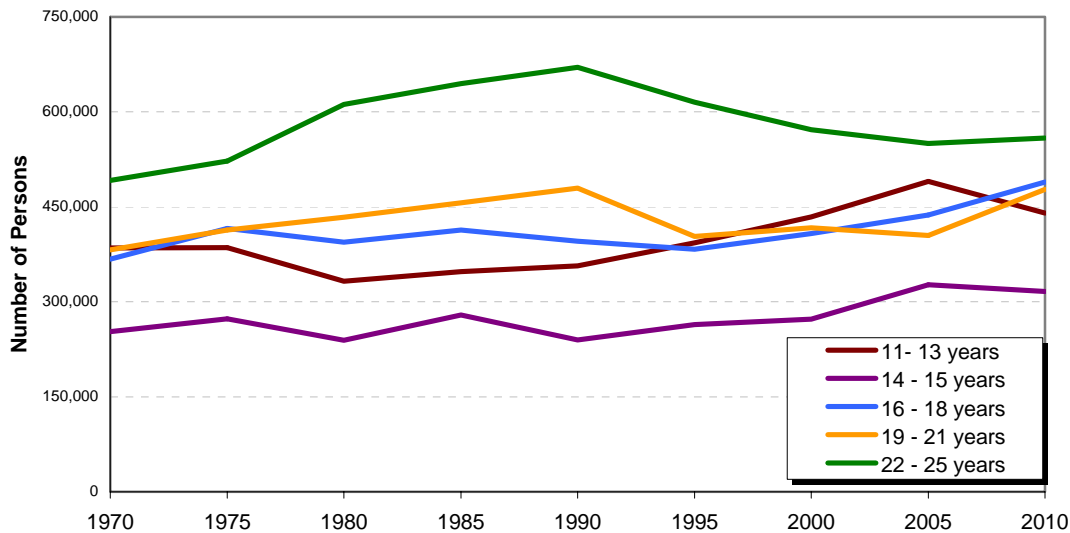


Table 1: Population Estimates by Age Group, 1970 - 2010

Age Group	1970	1975	1980	1985	1990	1995	2000	2005	2010
11-13 years	385,292	385,471	332,471	347,724	356,637	393,150	434,432	490,186	440,474
14-15 years	253,038	273,481	239,359	279,243	240,069	264,393	272,668	326,784	316,233
16-18 years	367,357	415,781	394,140	413,560	395,990	383,325	407,719	436,995	489,149
19-25 years	874,010	935,696	1,045,697	1,101,365	1,150,150	1,018,404	989,093	954,793	1,036,005
Total 11-25	1,879,697	2,010,429	2,011,667	2,141,892	2,142,846	2,059,272	2,103,912	2,208,758	2,281,861
11-13 years	20.5%	19.2%	16.5%	16.2%	16.6%	19.1%	20.6%	22.2%	19.3%
14-15 years	13.5%	13.6%	11.9%	13.0%	11.2%	12.8%	13.0%	14.8%	13.9%
16-18 years	19.5%	20.7%	19.6%	19.3%	18.5%	18.6%	19.4%	19.8%	21.4%
19-25 years	46.5%	46.5%	52.0%	51.4%	53.7%	49.5%	47.0%	43.2%	45.4%

¹ State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail: 1970–1989, 1990–1999, 2000–2050.

² Latinos and Hispanics are used interchangeably in the report depending on the source.

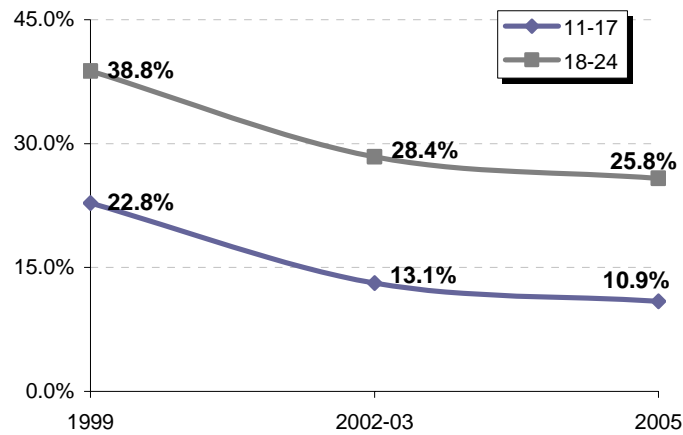
Table 2: Demographic Data

Race/Ethnicity	2001	2002	2003	2004	2005	2006
<i>Number of persons (ages 11-25)</i>						
African American	210,821	219,480	228,800	232,047	234,690	236,366
American Indian	6,089	6,370	6,432	6,605	6,805	7,029
Asian	222,881	210,093	195,859	198,270	200,291	201,573
Hispanic	1,152,206	1,166,220	1,185,808	1,200,539	1,218,905	1,237,238
Pacific Islander	6,314	6,232	6,083	6,229	6,354	6,442
White	477,099	485,249	496,440	499,316	501,118	500,114
Multi-racial	35,895	37,175	38,470	39,524	40,595	41,732
Total	2,111,305	2,130,819	2,157,892	2,182,530	2,208,758	2,230,494
<i>Percent of persons</i>						
African American	10.0%	10.3%	10.6%	10.6%	10.6%	10.6%
American Indian	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%
Asian	10.6%	9.9%	9.1%	9.1%	9.1%	9.0%
Hispanic	54.6%	54.7%	55.0%	55.0%	55.2%	55.5%
Pacific Islander	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%
White	22.6%	22.8%	23.0%	22.9%	22.7%	22.4%
Multi-racial	1.7%	1.7%	1.8%	1.8%	1.8%	1.9%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Age Groups	2001	2002	2003	2004	2005	2006
<i>Number of persons</i>						
11 to 13 years	456,513	478,002	494,410	495,786	490,186	484,394
14 to 15 years	277,994	286,115	298,063	312,326	326,784	331,623
16 to 18 years	404,337	406,086	413,302	423,408	436,995	457,827
19 to 25 years	972,461	960,616	952,117	951,010	954,793	956,650
Total	2,111,305	2,130,819	2,157,892	2,182,530	2,208,758	2,230,494
<i>Percent of persons</i>						
11 to 13 years	21.6%	22.4%	22.9%	22.7%	22.2%	21.7%
14 to 15 years	13.2%	13.4%	13.8%	14.3%	14.8%	14.9%
16 to 18 years	19.2%	19.1%	19.2%	19.4%	19.8%	20.5%
19 to 25 years	46.1%	45.1%	44.1%	43.6%	43.2%	42.9%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Source: California Department of Finance

III. Good Health

Chart A.1: Percent Uninsured by Age Group



While the percent of uninsured youth 11-24 years of age has declined significantly since 1999, almost 11 percent of younger youth (11-17) and 26 percent of older youth (18-24) still did not have health insurance in 2005 [Chart A.1].³

In comparison to youth less than 11 years of age, health insurance makes an even greater impact on older youth, because they are more likely to have delayed health needs, less care, or no care at all.⁴ Through health insurance, youth have greater access and they use health resources more, resulting in improved health outcomes. Moreover, regular health care provides opportunity for early intervention. For example, screenings and health education encourage youth to maintain a healthy diet and exercise program to

prevent such chronic conditions as cardiovascular diseases and diabetes. In addition, access to health care provides opportunities to educate youth about the risks of unprotected sex and drug use. At a critical time for growth and development, transition age youth make decisions that can have a lifelong impact on their health. Having access to a regular source of comprehensive health care can positively influence the behavior of youth. Although progress has been made, eliminating gaps in health coverage for these youth remains an extremely important goal.

The County invests in the health care for transition age youth through various programs. In this section, investments to enhance the overall health of Los Angeles County youth in this age group are featured with a focus on the following areas:

- **County Health System.** The Department of Health Services (DHS) served 122,350 transitional age youth during FY 2005-06.
- **Public health insurance.** Departments of Public Health (DPH) and Public Social Services (DPSS) increase access and utilization of care by enrolling youth into Medi-Cal and Healthy Families.
- **Substance abuse and tobacco programs.** DPH programs prevent and treat addiction.
- **Nutrition and physical activity programs.** DPH provides programs that improve overall health and well-being.
- **Reproductive/sexual health initiatives.** DPH prevents and treats STDs; a growing epidemic for transition age youth.

³ Source: 2005, 2002-03, 1999 Los Angeles County Health Surveys; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health. Estimates are based on self-reported data by a random, representative sample (95% confidence intervals).

U.S. Bureau of the Census (2000) found that the total number of uninsured Americans dropped by 8% (or approximately 3 percentage points) when a "verification" question was added for those who initially responded that they were without coverage. Initial LA County Health Surveys (1997 and 1999) did not include this verification and therefore may have overestimated the population of uninsured. The 2002 and 2005 estimates are lower than prior years-reflecting both real changes in coverage levels, particularly for children, but also better methods for assessing health insurance coverage.

⁴ Keane CR, Lave JR, Ricci EM, and LaVallee CP. The Impact of a Children's Health Insurance Program by Age. Pediatrics. Vol. 104, No. 5 November 1999, pp. 1051-1058.

Department of Health Services (DHS) provides pediatric and adult care through hospital outpatient, inpatient, emergency department, psychiatric, and rehabilitation services. During FY 2005-06, a total of 122,350 youth (ages 11-25) received outpatient and inpatient services from the County's health system. Since over 80,000 (66 percent) of these youth lack health insurance,

the County's health system is an important safety net [Chart A.2]. Chart A.2 below indicates 28 percent (34,813) of youth receiving County health services were enrolled in Medi-Cal or Healthy Families. Table 1.1 indicates that two-thirds of these patients were Hispanic, and many lived in SPA 6 (23 percent) and SPA 8 (16 percent).

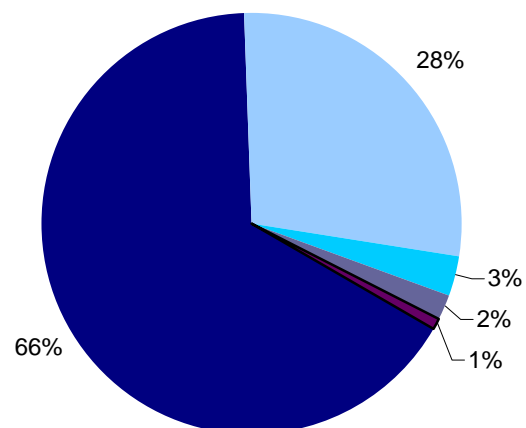
Table 1.1: Youth (ages 11-25) served by DHS facilities during FY 2005-06.

	Patients	Percent		Patients	Percent
Total DHS+PPP*	687,994	100%	TAY (11-25 years old)	122,350	18%
Gender			SPA of residence		
Female	64,213	52%	Antelope Valley (1)	9,718	8%
Male	58,133	48%	San Fernando Valley (2)	17,684	14%
Other/Unknown	4	0%	San Gabriel (3)	11,314	9%
Race/Ethnicity			Metro (4)	17,880	15%
Hispanic	80,314	66%	West (5)	2,741	2%
Black	16,918	14%	South (6)	27,950	23%
White	9,896	8%	East (7)	10,983	9%
Asian	3,539	3%	South Bay (8)	19,340	16%
Native American	1,253	1%	Other Co./ Unknown	4,740	4%
Other/ Unknown	10,430	8%			
Age			Patient Type		
11 -13	17,733	15%	Inpatient	3,530	3%
14 -17	29,305	24%	Outpatient	71,305	58%
18 -20	23,966	20%	PPP Patient*	22,497	18%
21 -25	51,346	46%	Emergency Room	25,018	20%

* Private Public Partnership (PPP) contracted clinics.

Chart A.2: Pay Source for Patients (ages 11-25)

Pay Source	Patients	Percent
Uninsured	80,607	66%
MediCal/ Healthy Families	34,813	28%
Private	3,433	3%
Mental Health	2,402	2%
Other/Unknown	1,095	1%



Indicators of health care access

Two indicators that measure health care access for youth in Los Angeles County are the number who currently have health insurance and have a usual source of care. To increase the number of youth with health insurance, the **Department of Public Health (DPH)** offers health insurance outreach and enrollment through the Children's

Health Outreach Initiative (CHOI), which is within the Maternal, Child, and Adolescent Health (MCAH) Program. By enrolling low-income youth and their families into Medi-Cal, the **Department of Public Social Services (DPSS)** increases access to care.

Table 1.2: Youth (ages 11-24) who are currently insured and have a usual source of care. 2005 Los Angeles County Health Survey⁵

Age	Currently insured ⁶		Have a usual source of care	
	Number	Percent	Number	Percent
11-13	439,000	90.4%	437,000	89.5%
14-17	545,000	88.0%	554,000	88.7%
18-24	691,000	74.2%	652,000	68.5%
11-24 (Total)	1,675,000	80.8%	1,643,000	79.3%

Chart A.3: Youth (ages 11-24) Who are Currently Insured and Have a Usual Source of Care by Race/Ethnicity

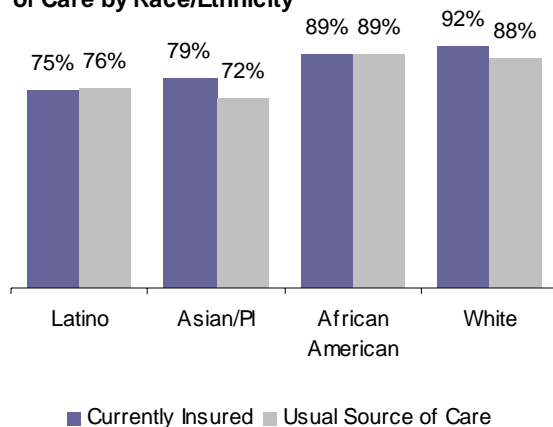


Table 1.2 shows that youth 18-24 years of age were less likely to be enrolled in health insurance (74 percent) and less likely to have a usual source of care (69 percent) than youth 11-17 years of age. In comparison to White and African American youth, Latino and Asian/Pacific Islander youth were less likely to be insured (75 percent and 79 percent) and less likely to have a usual source of care (76 percent and 72 percent) [Chart A.3].

⁵Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

⁶LACHS (2005). U.S. Bureau of the Census (2000) see footnote 3 for total number of uninsured calculation.

Department of Public Social Services (DPSS) administers the Medi-Cal program to provide free or low-cost health care coverage to low-income children, families, and adults who are elderly or disabled.

During May 2007, 523,042 youth ages 11-24 received Medi-Cal. Similar to Table 1.2 illustrating that youth above 18 years of age are less likely to have health insurance, Chart A.4 shows that Medi-Cal enrollment for youth 11-21 years declines with age. Specifically, the largest

decline in Medi-Cal enrollment for youth appears between 20 and 21 years of age, with 32,629 and 14,603 enrolled respectively. In contrast, 53,221 eleven-year-olds received Medi-Cal.

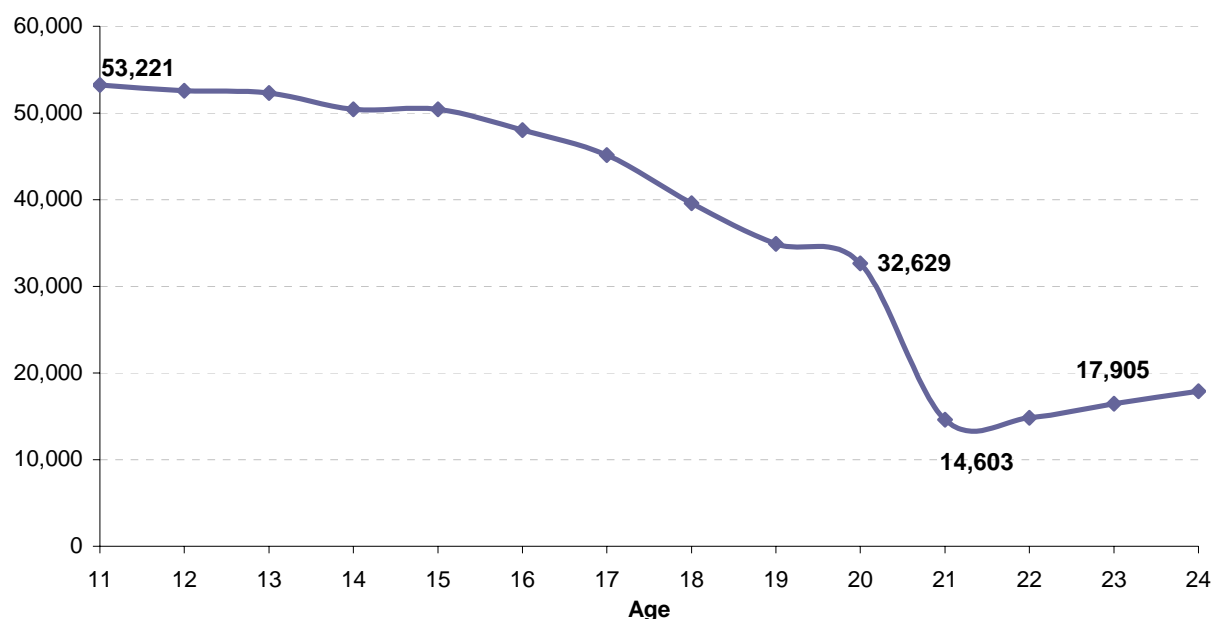
With 109,174 youth (ages 11-24) enrolled in Medi-Cal in SPA 6, this SPA had the largest percentage (21 percent) of Medi-Cal recipients for TAY in the County [Table 1.3]. In SPA 1, youth (ages 11-24) consist of 26 percent of the SPA's population, yet less than five percent of youth in this age group were enrolled in Medi-Cal.

Table 1.3: Youth (ages 11-24) Enrolled into Medi-Cal by SPA (May 2007)

SPA	Number Enrolled	Percent Enrolled	Youth in SPA	Percent of County Population
1	23,934	4.58	90,575	26.0%
2	81,288	15.54	424,346	19.8%
3	78,130	14.94	399,713	21.4%
4	68,186	13.04	224,260	17.8%
5	8,144	1.56	90,094	14.2%
6	109,174	20.87	260,726	25.0%
7	75,754	14.48	316,970	23.0%
8	78,432	14.96	326,211	20.3%
Total	523,042	100.00	2,132,895	20.7%

Note: Youth enrolled into Medi-Cal refers to those newly enrolled and actively receiving Medi-Cal. Percent of County population is from 2006 U.S. Census population of 10,285,805. Youth (ages 11-24) consist of 20.7% of population. Provided by Urban Research Unit of County Chief Executive Office, Service Integration Branch.

Chart A.4: Youth Enrolled into Medi-Cal by Age (11-24)
May 2007, Total Enrolled: 523,042



Substance abuse and tobacco indicators

The **DPH** Alcohol and Drug Program Administration (ADPA) administers the County's alcohol and drug programs, including the Adolescent Intervention, Treatment and Recovery Program (AITRP) and the Tobacco Control Program. Tables 1.4 and 1.5 use data from the Youth Risk Behavior Surveillance System (YRBSS) to show that high school youth and

young adults (18-24) were more likely to report binge drinking than smoking cigarettes. Nearly 28 percent of young adults reported binge drinking, about 20 percent reported illicit drug use, and 11 percent reported smoking cigarettes. A greater percentage of White youth (18-24) indicated binge drinking, illicit drug use, and smoking cigarettes.

Table 1.4: Percent of high school youth reported binge drinking, marijuana and methamphetamine use, and smoking cigarettes. 2005 YRBSS⁷ – Los Angeles High Schools

	Binge drinking (5+ drinks)	Marijuana use (1+ times in past 30 days)	Methamphetamine use ever	Smoke cigarettes
High school youth (14-18)	19.7%	18.1%	10.2%	11.8%
Gender				
Male	18.6%	18.9%	9.5%	13.2%
Female	20.6%	17.4%	10.9%	10.5%
Race				
Black	5.2%	14.8%	0.9%	2.4%
Latino	22.2%	18.9%	12.2%	13.5%
White	23.1%	20.4%	8.4%	12.5%

Table 1.5: Percent of 18-24 year olds reported binge drinking,⁸ illicit drug use,⁹ and smoking cigarettes. 2005 Los Angeles County Health Survey

	Binge drinking		Illicit drug use		Smoke cigarettes	
	Number	Percent	Number	Percent	Number	Percent
Ages 18-24	260,000	27.5%	189,000	19.8%	106,000	11.1%
Race						
Latino	127,000	25.6%	76,000	14.8%	50,000	9.8%
White	87,000	39.5%	81,000	36.6%	41,000	18.6%*
African American	23,000	22.2%*	23,000	22.1%*	9,000	9.3%*
Asian/Pacific Islander	18,000	17.0%*	8,000	7.7%*	-	-

*Estimate is statistically unstable (relative standard error >23%) and may not be appropriate to use for planning/policy.

-Results with cell sizes less than 5 are not reported.

⁷The Youth Risk Behavior Surveillance System (YRBSS) monitors six categories of priority health-risk behaviors among youth and young adults, including behaviors that contribute to unintentional injuries and violence; tobacco use; alcohol and other drug use; sexual behaviors that contribute to unintended pregnancy and STDs; unhealthy dietary behaviors; and physical inactivity. YRBSS includes a national school-based survey conducted by Center for Disease Control (CDC) and state and local school-based surveys conducted by state and local education and health agencies. In 2005, each state and local school-based survey employed a two-stage cluster sample design to produce a representative sample of public school students in grades 9–12 in their jurisdiction.

⁸Binge drinking for females is drinking 4 or more drinks on one occasion at least one time in the past month. Binge drinking for males is drinking 5 or more drinks on one occasion at least one time in the past month. "Chronic alcohol use" is consuming 60 or more drinks in the previous month. [REFERENCE: Eighth special report to the U.S. Congress on Alcohol and Health from the Secretary of Health and Human Services (1993)].

⁹Number reported use of at least one of the following: marijuana, cocaine, or methamphetamine use in the past year or injection drug use (not medically prescribed) ever.

Indicators of obesity and overweight youth

DPH also offers two programs to combat obesity, the Nutrition Program and Physical Activity Program. Nationally, the prevalence of overweight adolescents (12-19) increased from 6.1 percent in 1971-74 to 17.0 percent in 2001-04.¹¹ According to the American Heart Association, many risk factors for cardiovascular diseases are preventable, yet the rates of these risk factors are increasing for America's youth.

The most common risk factor for metabolic syndrome is being overweight, which increases the risk for type 2 diabetes. About 1 million 12-19-year olds in the United States (4.2 percent) have metabolic syndrome, and two-thirds of these youth are overweight.¹² Table 1.6 shows that 19 percent of Los Angeles County ninth graders are overweight, and Table 1.7 shows that 27 percent of youth ages 18-24 are overweight.¹³

Table 1.6: Prevalence of Childhood Obesity and Overweight Youth in Los Angeles County 2005 California Department of Education Physical Fitness Testing Program¹⁰

	Obese Children	Overweight Children
Grade 5 (ages 10-11)	27.4%	19.9%
Grade 7 (ages 12-13)	22.4%	19.8%
Grade 9 (ages 14-15)	19.1%	18.7%
Gender		
Male	19.7%	19.6%
Female	26.7%	19.4%
Race		
White	13.8%	16.5%
African American	21.4%	19.3%
Latino	27.9%	21.1%
Asian	13.1%	15.5%
Pacific Islander	37.5%	21.0%

Table 1.7: Number of Obese and Overweight Youth (Ages 18-24) by Gender and Race/Ethnicity 2005 Los Angeles County Health Survey

	Obese Young Adults		Overweight Young Adults	
	Number	Percent	Number	Percent
Ages 18-24	146,000	17.4%	228,000	27.2%
Gender				
Male	93,000	19.8%	156,000	33.4%
Female	53,000	14.3%	72,000	19.3%
Race				
Latino	98,000	23.6%	127,000	30.6%
White	21,000	10.0%*	45,000	21.0%
African American	21,000	21.4%*	31,000	31.8%*
Asian/Pacific Islander	-	-	24,000	23.7%*

¹⁰CA Dept. of Education: Includes students from grades 5, 7, and 9 enrolled in a CA public school at which the body mass index (BMI) measurement for body comparison was administered. Obese is defined by the American Medical Association Working Group on Managing Childhood Obesity as being in the 95th BMI percentile or greater, applying the 2000 CDC Growth Chart percentile curves; Overweight is defined as being within the 85th to < 95th BMI percentile.

¹¹National Health and Nutrition Examination Survey, NCHS (*Health, United States, 2006, NCHS. Unpublished data*)

*Statistically unstable (relative standard error >23%); therefore may not be appropriate for planning or policy purposes.

-Results with cell sizes less than 5 are not reported.

¹²American Heart Association News. *Cardiovascular statistics for 2005. New data on risk factors in America's youth.*

¹³2005 LACHS: Weight status is based on BMI calculated from self-reported weight and height. According to NHLBI clinical guidelines, a BMI < 18.5 is underweight, a BMI > 18.5 and < 25 is normal weight, a BMI > 25 and < 30 is overweight, and a BMI > 30 is obese. REFERENCE: National Heart, Lung, and Blood Institute (NHLBI)

Indicators of physical activity

The **DPH** Physical Activity Program is designed to reduce the risk of heart disease, help keep weight under control, and increase energy levels. Only 32 percent of high school youth (ages 14-18) in Los Angeles County state being physically active for a total of 60 minutes or more on at least 5 days during the past week in 2005 [Chart A.5].¹⁴ Forty-three percent of White students reported being physically active, along with 37 percent of Black youth, and 30 percent of Latino youth.

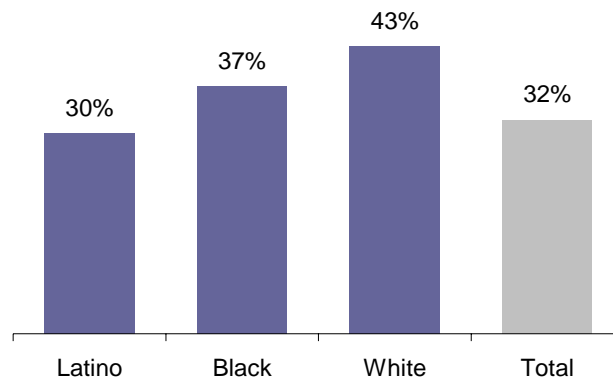
Table 1.8 shows 61 percent of older youth (ages 18-24) meet physical activity guidelines, as reported in the 2005 Los Angeles County Health Survey. Similar to younger Latino youth, older Latino youth were less likely to report frequent physical activity. Older Asian/Pacific Islander youth were also less physically active than their peers.¹⁵ With more youth indicating less frequent exercise and being overweight, Latinos face greater risk for cardiovascular diseases and type 2 diabetes.

Through health education, prevention, and positive encouragement, hopefully more youth can adopt an active lifestyle and healthier diet to reverse these trends.

Table 1.8: Number of Youth (Ages 18-24) that Meet Physical Activity Guidelines. 2005 Los Angeles County Health Survey

Meet physical activity guidelines		
	Number	Percent
Ages 18-24	583,000	61.3%
Race/Ethnicity		
Latino	306,000	60.5%
White	151,000	68.5%
African American	64,000	62.9%
Asian/Pacific Islander	53,000	51.0%*

Chart A.5: Percent of High School Youth (ages 14-18) Physically Active by Race/Ethnicity



¹⁴ YRBSS (2005).

¹⁵ To meet Physical Activity Guidelines at least one of the following criteria must be fulfilled: 1) Vigorous Activity - hard physical activity causing heavy sweating, large increases in breathing and heart rate - for 20+ minutes, > 3 days/wk, 2) Moderate Activity - cause light sweating, slight increases in breathing and heart rate - 30+ minutes, > 5 days/wk, 3) A combination of Vigorous and Moderate Activity meeting the time criteria for > 5 days/wk; [REFERENCES: Vigorous Activity: U.S. Department of Health and Human Services. Healthy People 2010: Understanding and Improving Health. 2nd ed. Washington, DC: U.S. Government Printing Office, November 2000. "Moderate Activity: Centers for Disease Control and Prevention/American College of Sports Medicine."

*The estimate is statistically unstable (relative standard error >23%) and therefore may not be appropriate to use for planning or policy purposes.

Reproductive/sexual health

Nearly a third (361,876) of all new cases of **sexually transmitted diseases (STDs)** affecting California's youth (ages 15-24) occur in Los Angeles County at an annual cost of \$390 million in treatment [Table 1.9].¹⁷ Educating youth about the risks of unprotected sex is critical, since we know the potentially serious complications of STDs; including human papillomavirus (HPV) association with cervical cancer and that other STDs can increase chances of contracting HIV. Screenings for STDs can lead to early intervention, education, and increase utilization of the HPV vaccine for females. According to Department of Public Health Director, Dr. Jonathan E. Fielding, HIV and HPV are the two STDs with the "biggest impacts" and he notes a

Table 1.9: Youth (ages 15-24) New STD Cases and Associated Medical Cost (2005)¹⁶

County	Population (15- 24)	Estimated new cases	Medical cost (\$)
Los Angeles	1,414,241	361,876	\$390 million

"hidden epidemic" of chlamydia and gonorrhea, which have the highest rates for young people. Since 1997, there has been an increase in the number of cases for both of these STDs in Los Angeles County. Table 1.10 shows that over two-thirds of all females diagnosed with chlamydia in Los Angeles County were between 15-24 years of age, while they made up less than 14 percent of the total female population.¹⁹

Table 1.10: Los Angeles County Youth (ages 15-24) Cases of Chlamydia and Gonorrhea (2006)

Gender	Age	Chlamydia Percent	Chlamydia Rate	Gonorrhea Percent	Gonorrhea Rate	Population Percent
Female	15-19	31.3%	2,501.1	32.6%	453.4	7.3%
	20-24	35.9%	3,268.5	32.1%	507.9	6.4%
Male	15-19	20.0%	651.8	13.5%	202.7	7.7%
	20-24	31.9%	1,160.7	23.6%	397.3	6.9%

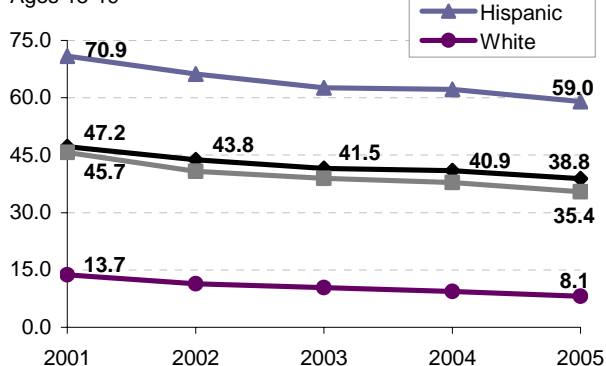
Rates are per 100,000 population.

Teenage birth rates in Los Angeles County for mothers 15-19 years of age have decreased from 47.2 in 2001 to 38.8 in 2005 [Chart A.6].¹⁸ The birth rate for teen mothers has declined for all race/ethnic groups. African American teen mothers have shown the greatest decline in birth rate from 45.7 in 2001 to 35.4 in 2005. Birth rates for Hispanic teens are still highest, although there were significant decreases from 70.9 in 2001 to 59.0 in 2005.

Chart A.6: Live Birth Rate* for Mothers

Ages 15-19, Los Angeles County

*Rate per 1,000 Female Population
Ages 15-19



¹⁶ *Estimated Number of New Cases and Total Direct Medical Cost of Eight Main STDs Among 15- to 24-Year-Olds.* California Counties, 2005. Public Health Institute Center for Research on Adolescent Health and Development.

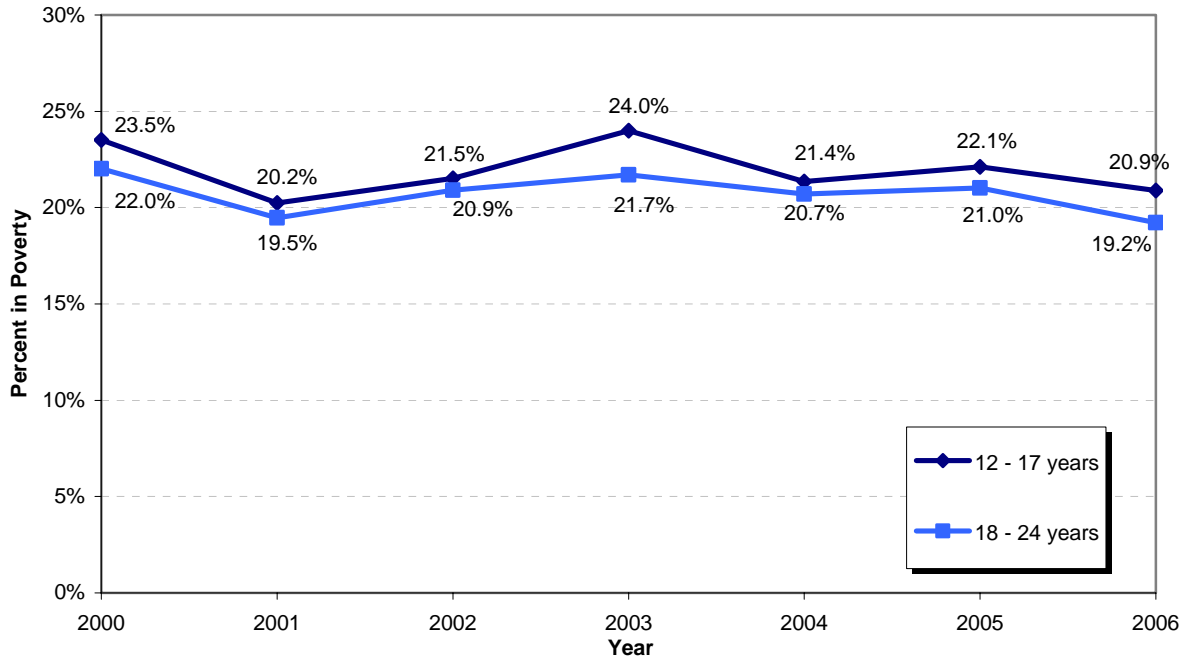
¹⁷ STDs strike 1 million California Youth. Daily News. October 9, 2007.

¹⁸ Los Angeles County 2001-2005. California Department of Health Services. Center for Health Statistics, Vital Statistics, 2001-2005.

¹⁹ California Department of Health Services, STD Control Branch. California Local Health Jurisdiction STD Data Summaries, 2006 Provisional Data (May 2007).

IV. Economic Well-Being

**Chart B.1: Los Angeles County Youth (12-18 years) in Poverty
2000 - 2006**



The number of Los Angeles County youth (12-24 years of age) living below the federal poverty level has slightly decreased since 2000, but the fact that about 1 in 5 of these youth live in households with very low incomes should still raise concern, especially given the cost of living in Los Angeles [Chart B.1].²⁰ In comparison to 18-24 year-olds, a slightly greater percentage of younger youth, ages 12-17 have lived in poverty during the entire period between 2000 and 2006.

In 2006, the federal poverty level for a family of four was \$20,444. However, the Self-Sufficiency Standard with a household income of \$48,590 sets a more realistic mark for a family of four [Table 2.1].²¹ According to the 2007 California Budget Project (CBP), a basic family budget for a two working parent family in the Los Angeles region is based on the cost of housing, food, child care, and other

**Table 2.1: Family Budget for a Family
Living in Los Angeles County**

Monthly Costs	Self-Sufficiency Standard, 2003	CA Budget Project, 2007
	2 Adults, 1 Preschooler, 1 Schoolage	2 Working Parents, 2 Children
Housing/Utilities	\$1,021	\$1,269
Child care	\$1,056	\$1,163
Food	\$565	\$731
Transportation	\$475	\$723
Health care	\$276	\$861
Miscellaneous	\$339	\$506
Taxes	\$583	\$917
Child Care/Child Tax Credit (-)	(\$266)	
Monthly Income	\$4,049	\$6,170
Annual income	\$48,590	\$74,044

²⁰ United States Census Bureau, Supplemental Survey and American Community Survey (2000-2006). Poverty is defined as children living in families with incomes below 100% of the federal poverty level.

²¹ The Self-Sufficiency Standard for California, 2003. National Economic Development Law Center.

essentials needed for a family without public or private assistance [Table 2.1].²² The CBP estimates that an hourly wage of \$17.80 or an annual income \$74,044 is needed for a family with two working parents to afford the basics needed to support a family. The Los Angeles Children's Planning Council (CPC) estimated that 950,000 households in the County were living at or below 300 percent of the federal poverty level in 2006 (\$63,000 annual income for family of four). With the rising cost of living, increases in health care and transportation, CPC suggests that 300 percent of the federal poverty level can realistically be used to estimate the population living at or below the threshold for self-sufficiency.

The County Departments of Public Social Services and Child Support work to ensure that child support payments and public benefits are provided to those who qualify, including food stamps, CalWORKs, General

Relief, and child support. The Departments of Community and Senior Services, Children and Family Services, and Internal Services provide employment training and internship opportunities. The County is also committed to working with communities to determine how best to direct resources that build upon local strengths and capacities. Working together with community to enhance their own capacity and better integrate services, the County is launching a new initiative – Healthier Communities, Stronger Families, and Thriving Children (HST). An important component of HST is the County's Family Economic Success (FES) Plan. Based on feedback from focus groups all over the County, the Family Economic Success Taskforce²³ developed a plan in 2007 with three strategies for achieving family economic success: 1) Asset Building and Leveraging, 2) Workforce and Self-employment Development, and 3) Tax Credits and Public Benefits.

Greater Los Angeles EITC Campaign Partnership

According to 2002 Individual Tax Return Summary Data published by the Internal Revenue Service, only 35 percent of low-income tax filers from Los Angeles County received the Earned Income Tax Credit (EITC). In response, Greater Los Angeles EITC Campaign Partnership provides no-cost tax preparation services through Volunteer Income Tax Preparation (VITA) sites to promote tax credits, and to develop asset-building products like Individual Development Accounts (IDA), affordable banking services, financial education, and foreclosure prevention. The *2006 Children's Planning Council Scorecard* shows that during the 2004 tax year, 804,292 returns (20.8 percent) were filed for an EITC in the County of Los Angeles.

During 2007, VITA sites supported families in claiming \$5.2 million in EITC and \$8 million in tax refunds. The Partnership supported and/or sponsored over 53 VITA sites, 10 of which were located within DPSS offices. From these 10 DPSS VITA sites alone, 770 tax forms were accepted by the IRS with an average EITC return of \$2,396 and a total EITC amount of \$1.6 million.

The Earned Income Tax Credit (EITC) is a federal tax credit for qualified low-income workers with a valid Social Security number. Eligibility is based on household income and the number of children in a household (www.eitc-la.com). The Children's Planning Council (CPC) is currently the fiscal agent of the Greater Los Angeles EITC Campaign Partnership, and the County of Los Angeles Department of Public Social Services (DPSS) is a significant partner of the Campaign.

²² Making Ends Meet: How Much Does it Cost to Raise a Family in California? California Budget Project. October 2007.

²³ Family Economic Success Taskforce consists of 32 members from 27 agencies and the SPA/AIC Councils.

Department of Public Social Services (DPSS)

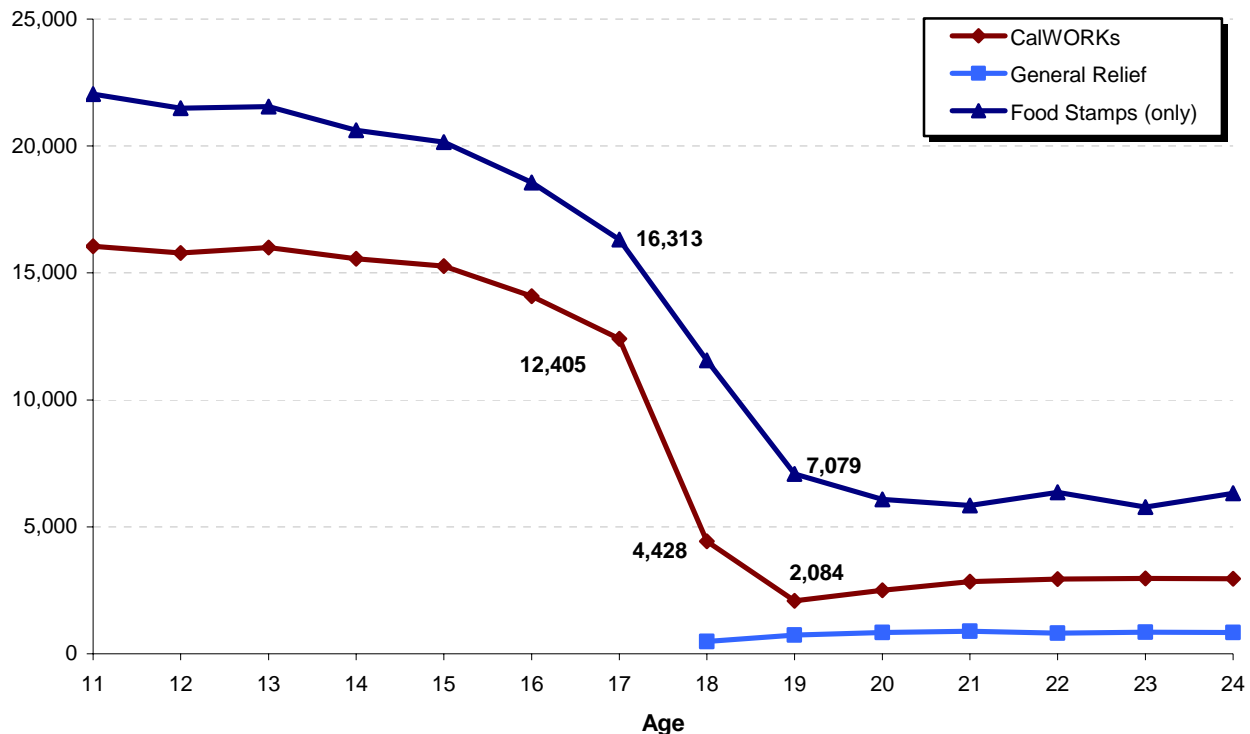
administers the California Work Opportunities and Responsibility to Kids (CalWORKs) Program, including CalWORKs Eligibility, Welfare-to-Work (WtW), Cal-Learn, and Child Care assistance for working families. These programs provide temporary assistance to children and families for basic needs and child care services, and help participants with a full range of training, education, employment, post-employment, and supportive services. General Relief (GR) is a County-funded program that provides temporary cash aid to indigent adults who are ineligible for State or federal assistance. During May 2007, 125,870 youth (ages 11-24) were living in households receiving CalWORKs benefits and 5,411 youth received GR benefits [Table 2.2]. Chart B.2 shows that the number of youth receiving CalWORKs services appears to decline with age, with the greatest decrease at 18 years of age. Individual youth who do not have jobs or support from families become eligible for GR at 18 years of age, as shown in Chart B.2.

Also administered by DPSS, the Food Stamp Program was established to improve nutrition for people in low-income households. By increasing

Table 2.2: Benefits Received Youth (ages 11-24), May 2007

Benefit	Number
CalWORKs	125,870
General Relief	5,411
Food Stamps (only)	189,794
Total	321,075

food-buying power, food stamps enable families to purchase nutritious foods. During May 2007, 189,794 households with youth (11-24 years of age) received food stamps without additional financial benefits (individuals only receiving food stamps are counted separately from those who received food stamps with CalWORKs or GR benefits) [Table 2.2]. Similar to CalWORKs and GR, Chart B.2 illustrates that the number of youth receiving food stamps generally declines with age, with a significant decrease between 17 and 19 years of age. This is not surprising since many of these older youth drop out of school or leave home as they graduate from high school, pursue higher education, military service, or employment.

Chart B.2: CalWORKs, General Relief, and Food Stamp Recipients (ages 11-24), May 2007

Child Support Services Department (CSSD) offers child support services and is responsible for establishing, modifying, and enforcing child and medical support obligations, enforcing existing spousal support orders, and determining parentage as required under federal and State law. Parents between the ages of 16-25 consist of 11 percent (52,814) of the active CSSD caseloads. Between August 1, 2006 and July 31,

2007, the amount of child support collected for these cases totaled \$8,770,664. Table 2.3 shows that 58,809 of the active child support cases include female parents between the ages of 16-25 and their minor children. Chart B.3 shows that the access to child support benefits generally increases with age, and the proportion of female parents steadily increases through age 25.

Chart B.3: Active child support cases by parent gender and age (July 31, 2007)

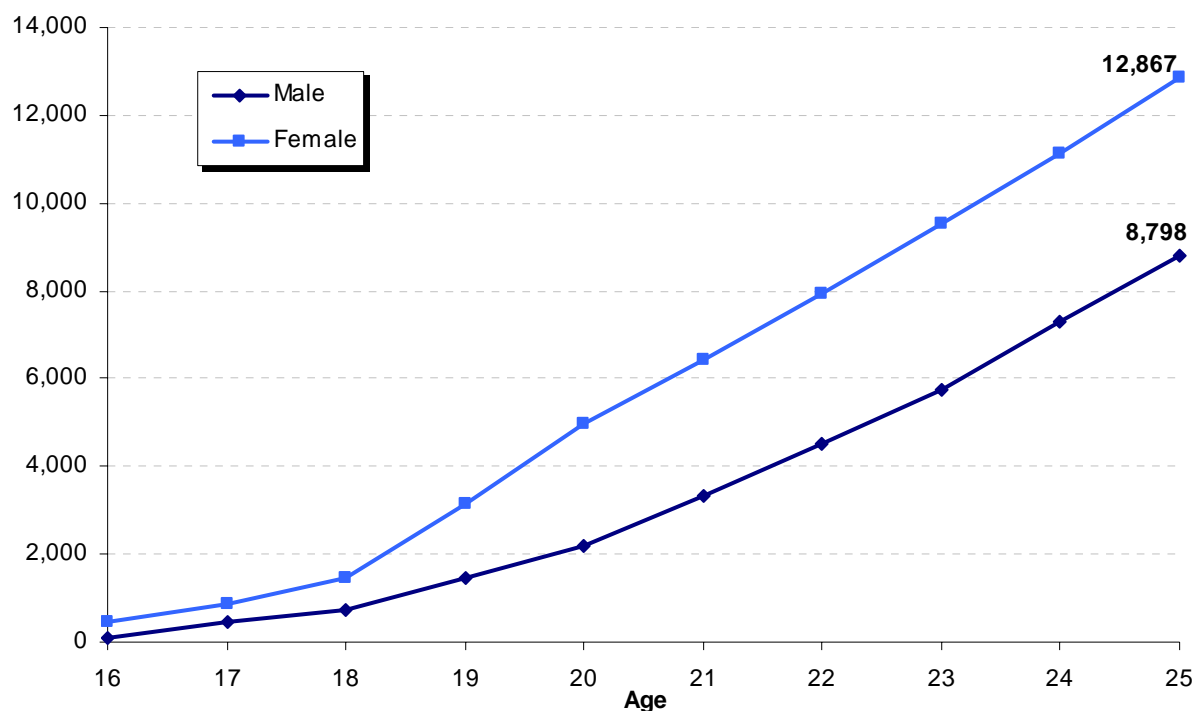


Table 2.3: Child support caseload characteristics as of July 31, 2007

• Total number of active child support cases:	472,116
• Number of active child support cases with one or both parents aged 16 – 25:	52,814
<i>Female parents (16–25)</i>	58,809
<i>Male parents (16–25)</i>	34,618
• Active cases with minor mothers (under 18) referred by DPSS when mother receives CalWORKs and/or Medi-Cal services for herself or her child:	1,643
• Active cases with minor mothers referred by DCFS due to their child being removed from the home and placed into custody of DCFS:	54
• Active cases with minor fathers who have been identified as absent parents:	551
• Participant race/ethnicity (when provided):	
Latino	57%
African American	26%
Caucasian	13%
Asian/Pacific Islander	3%
Native American or Other	1%

V. Safety and Survival

This section addresses the crucial issue of assuring the safety of Los Angeles County's youth so they can learn, grow and develop into productive adulthood. Population data on the leading causes of death for young people and on juvenile arrests are described first in order to set the stage for understanding the major threats to

youth safety and survival. County departments address safety from a number of different perspectives, and this section includes data from a representative sample of County programs that aim to prevent and intervene in juvenile delinquency, reduce child abuse and neglect, and prevent homelessness.

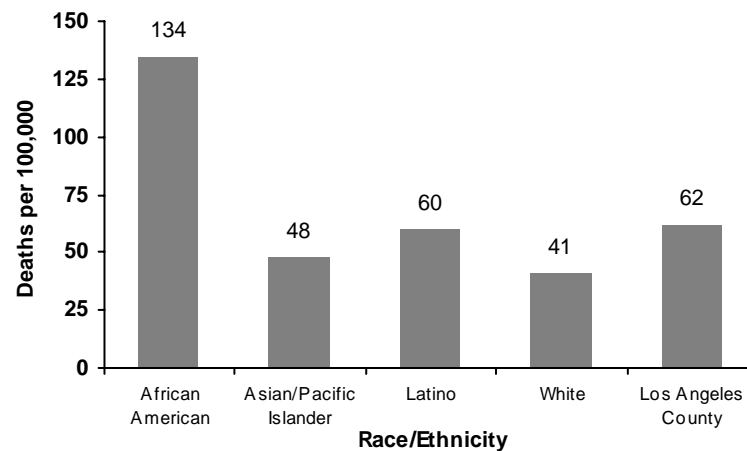
Indicators for mortality

Table 3.1 shows that the leading causes of death among younger (ages 11-14) and older youth (ages 15-19) in Los Angeles County in 2004 were strikingly different. For younger youth, unintentional injuries and cancer led the list with relatively low rates of 3.8 and 3.7 per 100,000 youth in the population. Homicide was by far the most significant cause of death among older youth, with a rate of 27.5 per 100,000. Older youth also had more unintentional injuries (a rate of 16.6) and suicides (a rate of 4.4) than did younger youth. Perhaps the most dramatic point underscored by the data in these tables is that there are substantial differences for youth from different racial and ethnic groups, with death rates of African American youth more than twice those of other groups. Chart C.1 shows that in 2004, African American youth (ages 15-19) had death rates of 134 per 100,000 compared with a Countywide overall average rate of 62 per 100,000.

Table 3.1: Leading Causes of Death among Los Angeles County Youth, 2004.²⁴

Ranked Causes of Death	Frequency	Rate (per 100,000)
Younger Youth (ages 11-14)		
1. Unintentional Injuries	25	3.8
2. Malignant Neoplasms (cancer)	24	3.7
3. Homicide	18	2.7
Older Youth (ages 15-19)		
1. Homicide	195	27.5
2. Unintentional Injuries	118	16.6
3. Suicide	31	4.4

Chart C1: Death Rate among Youth (ages 15-19) by Race/Ethnicity. Los Angeles County, 2004



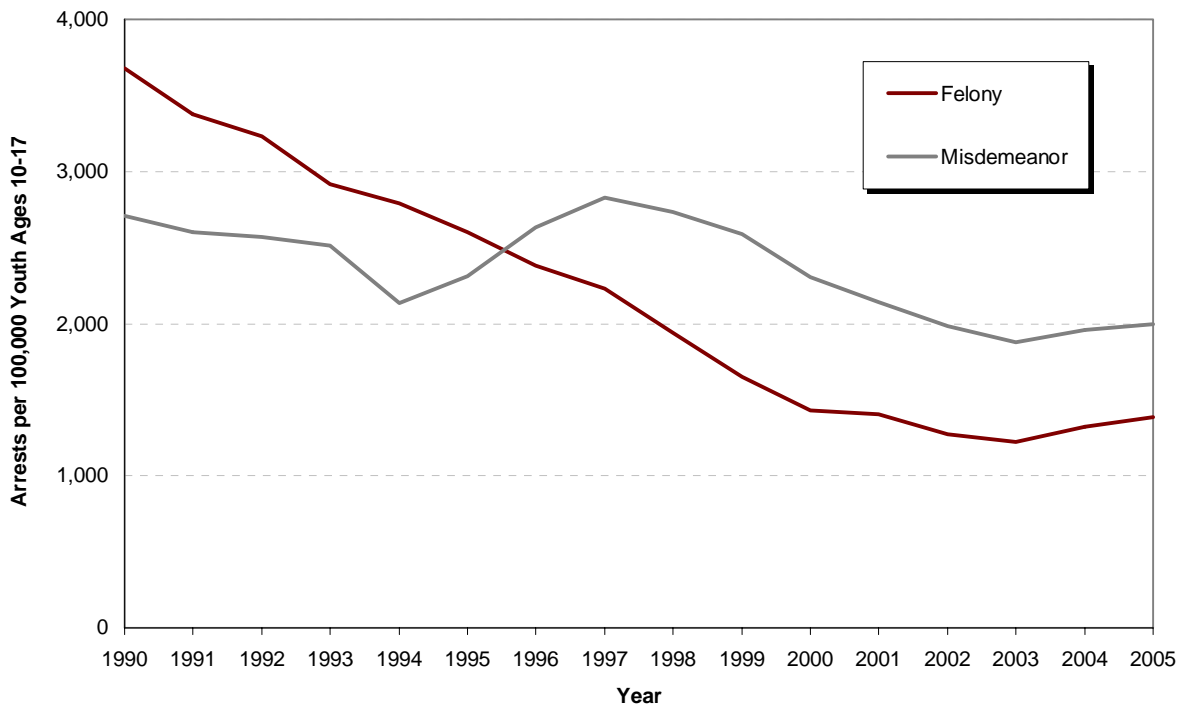
²⁴ California Department of Health Services, Center for Health Statistics, Vital Statistics, 2004. Los Angeles County, Department of Health Services, Data Collections and Analysis Unit, 2004. Population Estimate Projections, June 2005.

Juvenile arrests

Between 1990 and 2003, the number of youth arrests for both felony and misdemeanor crimes in Los Angeles County decreased significantly. Chart C.2 shows that juvenile misdemeanor arrests fluctuated more during this period, while felony arrests decreased steadily. This may be due in part to decreases in the population of older youth ages 19-25, or may be a result of changing law enforcement practices or economic conditions. Between 2003 and 2005, however, the number of arrests in both categories began to rise.²⁵

Many County departments play important roles in the Countywide juvenile justice system, including the Sheriff, District Attorney, Public Defender, Juvenile Courts and Probation Department. In addition to arresting and trying juveniles accused of crimes, County government programs also provide prevention, detention and rehabilitation services for youth who get caught up in the juvenile justice system. The following tables describe County programs offered by multiple departments to illustrate the breadth of County services in this arena.

Chart C.2: Juvenile Misdemeanor and Felony Arrests, 1990 to 2005



²⁵ California Department of Justice, Criminal Justice Statistics Center, Criminal Justice Profiles

Juvenile court services

**Chart C.3: Minors in Dependency Court
January 2006 - September 2007**

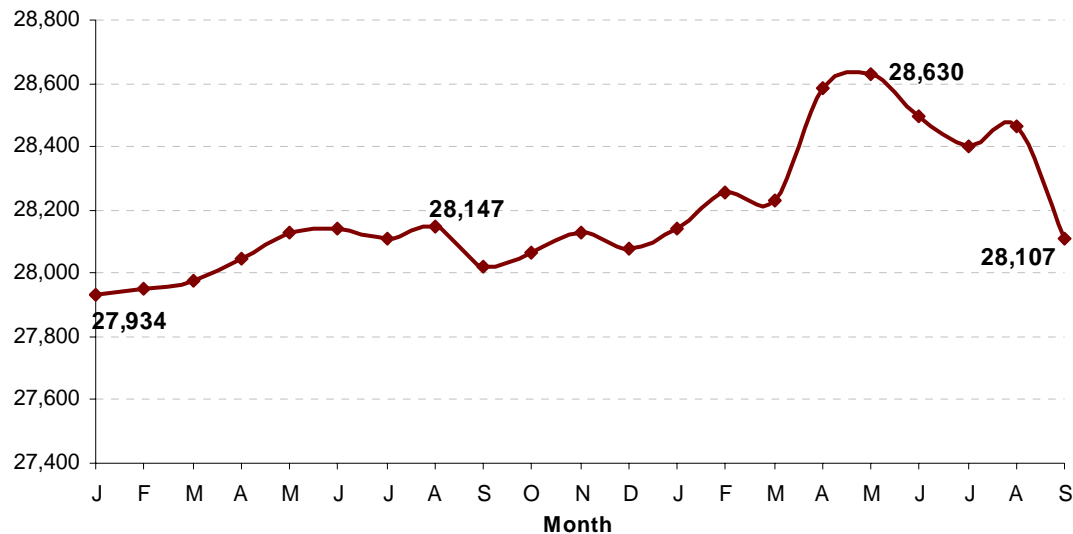


Chart C.3 shows the total number of active minors in **Juvenile Dependency Court** for allegations of abuse and neglect from January 2006 through September 2007. A total of 27,934 minors were active in January 2006, the least during this 21-month period. In May 2007, the number of minors in Dependency Court peaked at 28,630, following a steep increase in April. The number of minors decreased to 28,107 in September 2007.

In 2006, the **Informal Juvenile and Traffic Court** handled a total of 172,961 cases of which 128,781 were classified as misdemeanors. Twelve branch courts are located throughout the County. During 2006, the 28 **Juvenile Delinquency Courts** throughout Los Angeles County processed a total of 23,537 petitions, which includes duplicated counts.

Child Advocates Office or Court Appointed Special Advocates (CASA) – Superior Court CASA of Los Angeles is a volunteer program of the Superior Court. The mission of the program is to improve the lives of children in foster-care by advocating on their behalf in Dependency Court and in the community. Toward this end, CASA of Los Angeles, recruits, trains and supports

volunteers from the community who are appointed by Dependency Court Judges to investigate the circumstances of a child's life, monitor compliance with court orders and facilitate delivery of court-ordered services. During 2006, there were 328 CASA participants (11-21 years of age) who had CASAs assigned to them. Over half were male, and half were African American [Table 3.2].

Table 3.2: CASA Participants (2006)

Youth	Number	Percent
Female	211	45%
Male	262	55%
Total	473	100%
African American	232	50%
Hispanic/Latino	134	30%
Caucasian	65	14%
Other	42	6%
Age 11-21 years	328	69%

Public Defender: Client Assessment Recommendation and Evaluation (CARE) Project teams psychiatric social workers and mental health/special education resource attorneys with juvenile court Deputy Defenders in ten court locations. The CARE Project assesses, identifies, and makes effective recommendations to the Juvenile Court to address children's mental health and special education needs at the earliest stages of the court process. During 2006, 1,208 youth received CARE services. Seventy-nine percent of these youth were male and 56 percent were Hispanic [Table 3.3].

The **Probation Department** provides community-based supervision to minors in the community who have been arrested for criminal or delinquent activity, as well as assessing and detaining minors in juvenile halls and camps. Minors, whose crimes require detention at the juvenile halls or in the camps, receive health, mental health, and educational assessments as part of their rehabilitative case plan to provide them with the life-skills needed to live productive and crime-free lives. As of June 22, 2007, there were 20,642 active cases where minors were under Probation supervision. Over 95 percent of all active minors were within the 14-19 age group. It should be noted that Table 3.4 provides point-in-time data on the number of active juvenile probation cases as of June 22, 2007. The total number of 20,642 cases on June 22, 2007 included 16,735 males (81 percent) and 3,907 females (19 percent).

The primary responsibility of the **Sheriff's Department** is law enforcement, but Sheriff's deputies also work hard to prevent crimes by providing alternative activities for youth through programs such as the **Youth Activity League (YAL)**. YALs provide educational tutoring, computer training, cultural field trips, sports activities, and character building for "at-risk" children ages 8-17. These youth experience positive relationships with deputies and find a sense of belonging with their age group in the afternoon between 3 and 7 pm (hours that most juvenile crime is committed). Youth participate in activities such as boxing, karate, and baseball. Table 3.5 includes duplicated counts for youth who may participate in multiple programs (2006). Industry, located in SPA 3, appears to have the greatest participation with 2,400 youth.

Table 3.3: CARE Participant Characteristics (2006)

	Number	Age	Number
Gender			
Male	955	11-13	111
Female	258	14-16	626
Total	1,213	17-19	465
		20-23	6
Race		Total	1,208*
Hispanic	56%		
Black	34%		
White	9%		
Asian/PI	1%		
American Indian	0.33%		

*Four children are under 11 and one child's age is unknown.

Table 3.4: Number of Minors under Active Probation Supervision²⁶ by Gender/Age (June 22, 2007)

Age	Female	Male	Total
9-13*	135	617	752
14-16	1,840	7,116	8,956
17-19	1,932	9,002	10,934
Total	3,907	16,735	20, 642

*Youngest female was 10 years of age.
Youngest male was 9 years of age.

Table 3.5: YAL Participants by Site (2006)

Site (SPA)	Number	Hispanic	African Amer.	White/ other
Avalon (8)	380	72%	2%	26%
Century (6)	1,540	95%	4%	1%
Compton(6)	1,680	80%	20%	-
East LA (7)	1,200	100%	-	-
Industry (3)	2,400	70%	5%	25%
Lennox (8)	1,855	60%	40%	-
Norwalk (7)	950	95%	5%	-
Palmdale (1)	1,350	50%	30%	20%
Santa Clarita (2)	1,150	80%	10%	10%
Temple (3)	1,780	80%	5%	15%
Walnut (3)	1,460	75%	10%	15%

²⁶ Probation supervision = minors with non-court and court ordered Probation.

The **Department of Children and Family Services (DCFS)** investigates cases of child abuse and neglect, and provides services to families in order to assure the safety of their children. When safety cannot be assured at home, DCFS removes children from their homes, places them into temporary foster care settings and searches for permanent alternatives as needed.

Tables 3.6 and 3.7 highlight two ways of thinking about the youth served by DCFS – the cases open at one point in time and those that “flow through” the County’s child welfare system during an entire calendar year. Table 3.6, based on all cases served during calendar year 2006, includes those that were opened in 2005 but remained open as of January 1, 2006, and those TAY that were opened any time during 2006. About 42 percent of the youth served by DCFS in 2006 were between ages 11-22. Many people are used to thinking about point in time data for DCFS, so it will be useful to remember that not all of the 58,572 cases were open at the same time. Rather, these data show the ongoing demands on the DCFS system over a 12 month period.

Table 3.7 shows how many children were served by DCFS at one point in time (December 31, 2006). The four main program categories are: 1) Early Intervention (Emergency Response or ER), 2) Crisis Intervention (Family Maintenance or FM and Family Reunification or FR), 3) Intensive Services (Family Maintenance or FM and Family Reunification or FR), and 4) Permanency (Permanent Placement or PP).

Table 3.7 shows that almost 60 percent of youth ages 11-22 were in the PP program. When DCFS has been unable to return children home or find permanent homes for them, they stay in foster care for longer time periods. Some of these youth have undoubtedly been in the system for a long duration of time, although in recent years the department has enhanced its efforts to locate family members willing to provide homes for these children.

Table 3.7 also shows that 30 percent of youth received in home care, while 70 percent were in out of home placement settings. Forty-four percent of these youth were Hispanic and 39 percent were African American. The majority of youth receiving DCFS services were from SPA 6 and SPA 3 (23 percent and 17 percent respectively). The data show a higher number of African American children than might be expected based on the overall populations, since African Americans only account

Table 3.6: DCFS Caseload during 2006

	Number	Percent
Total DCFS (entire 2006)	58,572	100%
TAY (ages 11-22+)	24,459	42%

**Table 3. 7: DCFS Point in Time
December 31, 2006**

	Number	Percent
Total DCFS	17,480	100%
Age		
11-13	6,101	35%
14-18	10,728	61%
19-22+	651	4%
In Home	5,203	30%
In Placement	12,277	70%
Court Specified Home	34	0%
FFA Certified Home	2,645	15%
Foster Family Home	1,087	6%
Group Home	1,448	8%
Guardian Home	2,359	13%
Medical Facility	1	0%
Relative/NREFM Home	4,499	26%
Small Family Home	92	1%
Non Foster Care Pl.	112	1%
Race/Ethnicity		
African American	6,859	39%
Am. Indian/Alaskan Native	101	1%
Asian/Pacific Islander	455	3%
Hispanic	7,687	44%
White	3,220	13%
Other/Unknown	39	0%
Service Planning Area		
SPA 1	1,408	8%
SPA 2	1,639	9%
SPA 3	2,957	17%
SPA 4	1,030	6%
SPA 5	571	3%
SPA 6	4,072	23%
SPA 7	1,904	11%
SPA 8	2,460	14%
Non-SPA specific	1,439	8%
Program Type		
Emergency Response (ER)	322	2%
Family Maintenance (FM)	3,911	22%
Family Reunification (FR)	2,870	16%
Permanent Placement (PP)	10,377	59%

for 9 percent of the youth population. The disproportionate number of African American youth who come to the attention of the child welfare system is the subject of concern not only in Los Angeles, but in jurisdictions throughout the country.

Assistance to homeless youth

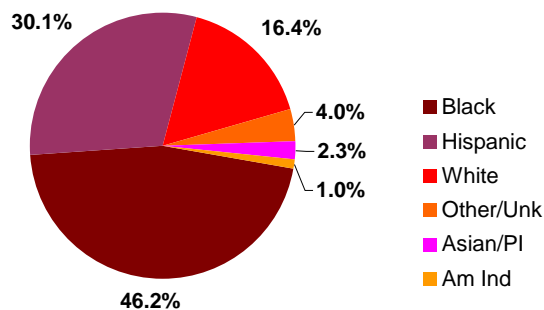
In addition, several other County departments play key roles in assuring the safety and survival of Los Angeles County youth. This section includes data on essential programs that address homelessness and help to house youth that emancipate from the child welfare system.

Table 3.8 : Number of Homeless Youth 18-24 by SPA (January 2007)

SPA	Point-in-Time		Annual Projections	
	2007	2005	2007	2005
SPA 1	183	276	796	555
SPA 2	292	955	1,179	2,291
SPA 3	861	495	2,345	1,336
SPA 4	1,919	1,932	3,173	5,110
SPA 5	505	823	1,003	1,785
SPA 6	762	1,536	1,701	4,792
SPA 7	443	524	1,162	1,341
SPA 8	367	133	417	426
Countywide*	5,264	6,659	10,875	17,911

*Due to missing SPA designations, the Countywide total doesn't calculate to the sum of the 8 SPAs.

Chart C.4: Race/Ethnicity of Homeless Youth (18-24), n=299



Community Development Commission/Housing Authority (CDC) administers the County's housing and community development block programs. The role of the CDC is to fund transitional or permanent housing developments either through loans or grants. During FY 1997-2007, CDC invested \$11.0 million for 11 housing sites and four special needs housing sites, for a total of 207 beds.

Los Angeles Homeless Services Authority (LAHSA) provides funding for agencies that offer homeless persons emergency shelter, transitional housing and/or supportive services and facilitates their entry into, and their progression through the Continuum of Care service system with the ultimate goal of obtaining and maintaining permanent housing. Table 3.8 shows that in 2007, over 11,000 homeless youth (ages 18-24) are projected as living in Los Angeles County. Most homeless youth live in SPAs 3 and 4. For January 2007, the point-in-time homeless count for youth 18-24 years of age in Los Angeles County was 5,264.²⁷

Chart C.4 shows that nearly half (46 percent) of homeless youth in Los Angeles County were Black, followed by Hispanic youth (30 percent). Forty-seven percent were male, 52 percent female, and one percent transgendered or unknown.

²⁷ In 2007, Applied Survey Research (ASR) the firm conducting the homeless count used the annualization formula by the Corporation for Supportive Housing to calculate an annual estimate of the number of homeless people in Los Angeles County (excluding the cities of Pasadena, Glendale, and Long Beach) over the course of a year. This approach is the HUD-approved method for calculating the annual estimate of homeless people based on the Point-in-Time (PIT) count. In 2005, ASR used an alternative method that computed an annual multiplier which was applied to the PIT count number; therefore, the different annualization numbers in 2005 and 2007 are not directly comparable. (Los Angeles Homeless Services Authority (LAHSA), "2007 Greater Los Angeles Homeless Count," October 2007.)

VI. Social and Emotional Well-Being

Table 4.1: Los Angeles County Teens (ages 12-17) at Risk for Depression, (CHIS 2005)

	Number	Percent
At risk	215,000	23.1%
Not at Risk	716,000	76.9%
Race		
Asian	39,000	36.8%
Latino	87,000	25.6%
African American	24,000	21.7%
Other	22,000	18.4%
White	43,000	17.7%

Chart D.1 shows that the percent of youth 18-24 years of age diagnosed with depression in Los Angeles County has increased slightly from 6.7 percent in 1999 to 9.7 percent in 2005.²⁸ With changes in employment, marital status, onset of parenthood, and financial responsibility, young adulthood is often a time of increased social stress, raising the risk for depression.²⁹ Table 4.1 shows 23 percent of Los Angeles County teenagers (12-17 years) are at risk for depression.³⁰ Thirty-seven percent of Asian teens are at risk for depression, followed by 26 percent of Latino youth, and 22 percent of African American youth. Data from the National Health Interview Survey show that young adults living in households at or below the federal poverty level are more likely to indicate two or more depressive symptoms than those with incomes above the poverty level. Moreover, youth in households with at least one family member receiving income from welfare/Temporary Assistance for Needy Families (CalWORKs in California) are more likely to experience depressive symptoms.³¹

Chart D.1: Los Angeles County Youth (18-24) Diagnosed with Depression

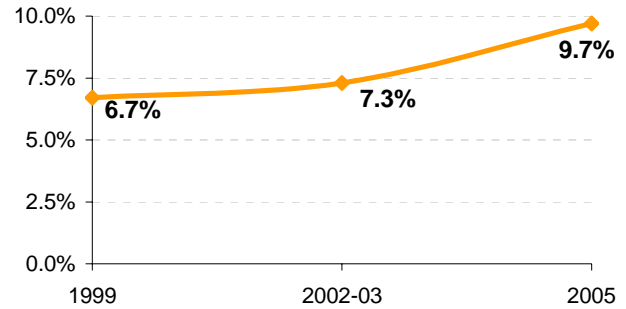
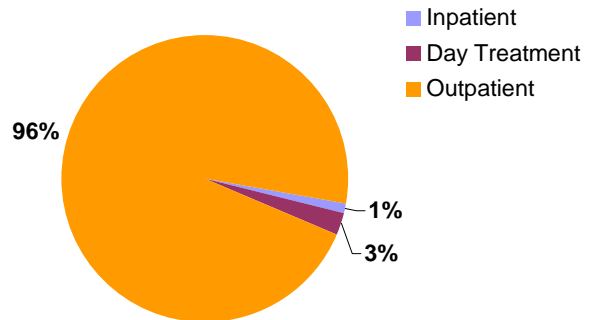


Chart D.2 shows that during FY 2006-07, the County Department of Mental Health (DMH) provided services to 36,273 youth between the ages 16-25.³² Ninety-six percent of these youth received outpatient services, three percent participated in day treatment, and one percent received inpatient services.

Chart D.2: DMH services provided to TAY (16-25) FY 2006-07, n=36,273



²⁸ Source: 2005, 2002-03, 1999 Los Angeles County Health Surveys; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

²⁹ Depressive Symptoms among Youth Adults. Child Trends Data Bank, www.childtrendsdatabank.org

³⁰ California Health Interview Survey (2005) is the largest state health survey and one of the largest health surveys in the U.S. The survey is conducted every two years.

³¹ Ibid, Child Trends Data Bank. From National Health Interview Survey data. Depressive symptoms include: felt sad, hopeless, worthless, restless, or that everything was an effort all or most of the time during the past 30 days.

³² Less than 0.5% of these youth received "other DMH services." Percentages were rounded to nearest whole number.

Arts education

The Arts Commission provides leadership for *Arts for All*, a ten year countywide initiative to change policies and to institutionalize arts education in dance, music, theatre, and the visual arts for all public school students from kindergarten through high school. Now active in 15 school districts throughout the County, key strategies include: 1) assisting school districts in planning for arts education; 2) training for arts educators in State curriculum standards; 3) developing an online directory of arts education providers for school

teachers; and 4) surveying school districts on key arts education success factors. A total of 123,169 sixth through twelfth grade students participated in the Arts Education programs in 2005-06 [Table 4.2].

In addition, the County's Music Center helps teachers partner with professional artists to provide access to a broad range of artistic events. In 2006, approximately 250,000 students participated in events or programs at the Center.

Table 4.2: Arts Education – Arts for All (FY 2005-06)

Grade	Number Enrolled	Ethnic Composition Grades 6-12	Percent
6	16,602	Hispanic or Latino	49%
7	16,829	White (not Hispanic)	21%
8	17,434	Asian	15%
9	18,230	African American	12%
10	18,722	Pacific Islander	3%
11	17,584	American Indian/Alaskan Native	0.2%
12	17,768		
Total	123,169	Total	100%

Voter registration

The County Registrar-Recorder registers voters and maintains voting records. Table 4.3 shows that a total of 457,983 young adults were registered to vote in July 2007. Although not often thought of as a service program, registering to vote demonstrates the desire to participate and “stand up to be counted in civic life.”

Young adults 18-25 who are registered to vote includes both active and pending files from the Registrar Recorder – a total of 3,901,998 registered voters. Some pending files may be found ineligible due to missing information in the voter registration application. Approximately five percent of the Registrar Recorder's files (active and pending) did not contain the age of the registered voter.

Table 4.3: 18-25 Year-olds Registered to Vote in Los Angeles County (July 2007)

Age	Number	Percent of all Active/Pending Voters
18	8,504	0.22%
19	40,665	1.04%
20	53,231	1.36%
21	68,548	1.76%
22	73,193	1.88%
23	71,598	1.83%
24	70,032	1.79%
25	72,212	1.85%
Total	457,983	11.7%

TV watching

Chart D.3: Percent of Youth (ages 11-17) Who Watch Three or More Hours of TV per Day by Race/Ethnicity.³³ 2005 LACHS³⁴

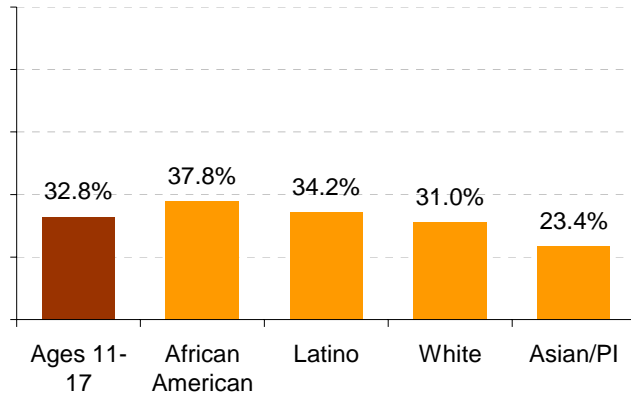


Chart D.3 shows that nearly one-third of youth ages 11-17 watched TV for more than three hours a day in 2005. Thirty-eight percent of African American youth and 34 percent of Latino youth watched TV for more than three hours a day, suggesting that they have less time for homework, recreation, and exercise.

Neighborhood support

Chart D.4: Young Adults (ages 18-24) Perceive Neighborhood is Safe from Crime. 2005 LACHS

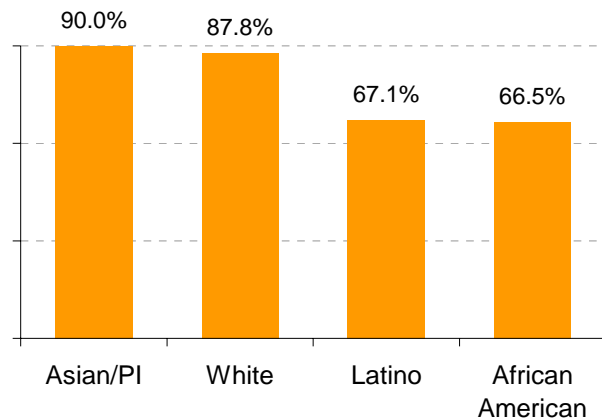


Chart D.4 shows the percent of young adults between ages 18-24 who perceived their neighborhood was safe from crime. Asian/Pacific Islander youth were most likely (90 percent) to perceive that their neighborhood was safe, followed by White young adults. African American and Latino young adults were less likely to perceive their neighborhood was safe, with two-thirds from each group reported feeling safe.

³³ According to the American Academy of Pediatrics, appropriate TV watching is defined as less than three hours per day for children 2 years and older.

³⁴ Los Angeles County Health Survey (LACHS 2005). Estimates are based on self-reported data by a random sample of 8,648 Los Angeles County adults, representative of the adult population in Los Angeles County. The percentages and numbers are the best estimates of the actual prevalence of each described characteristic in the population. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

VII. Educational/Workforce Readiness

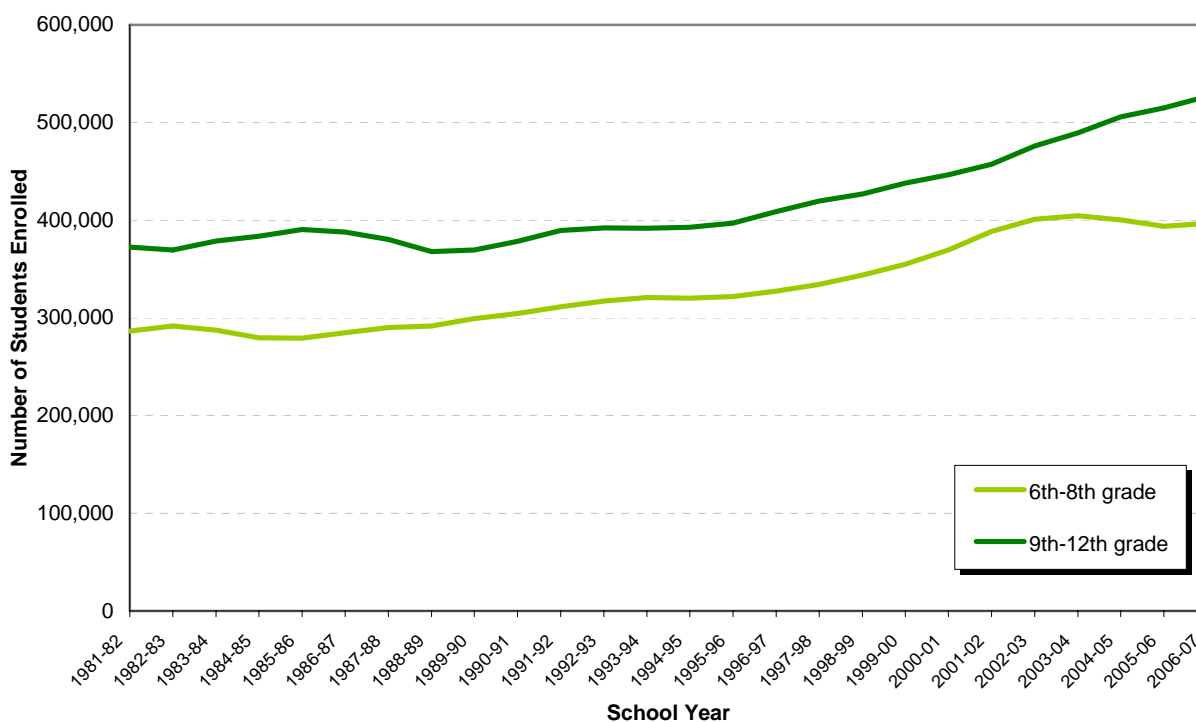
This section begins by describing enrollment and graduation from public schools in Los Angeles County during the period between 1981 and 2006. Enrollment in high school (grades 9-12) has increased steadily during this time, while middle (grades 6-8) school enrollments followed a similar pattern until recently. In 2003-04, middle school enrollments began to decline [Chart E.1].³⁵

Chart E.2 shows that after many years of up and down trends, there was a steady increase in the number of public high school graduates beginning in 1996 and continuing through 2005. A slight downward trend can be seen after 2005. Between 1996-2005, the number of graduates increased by 30 percent, from 67,000 to 87,000. However, the 87,000 youth that graduated from high school in 2005 represent only 61 percent of the ninth graders who entered high school four years earlier. While making progress, schools in Los Angeles County are still a long way toward

the goal of assuring that all youth have at least a high school education.

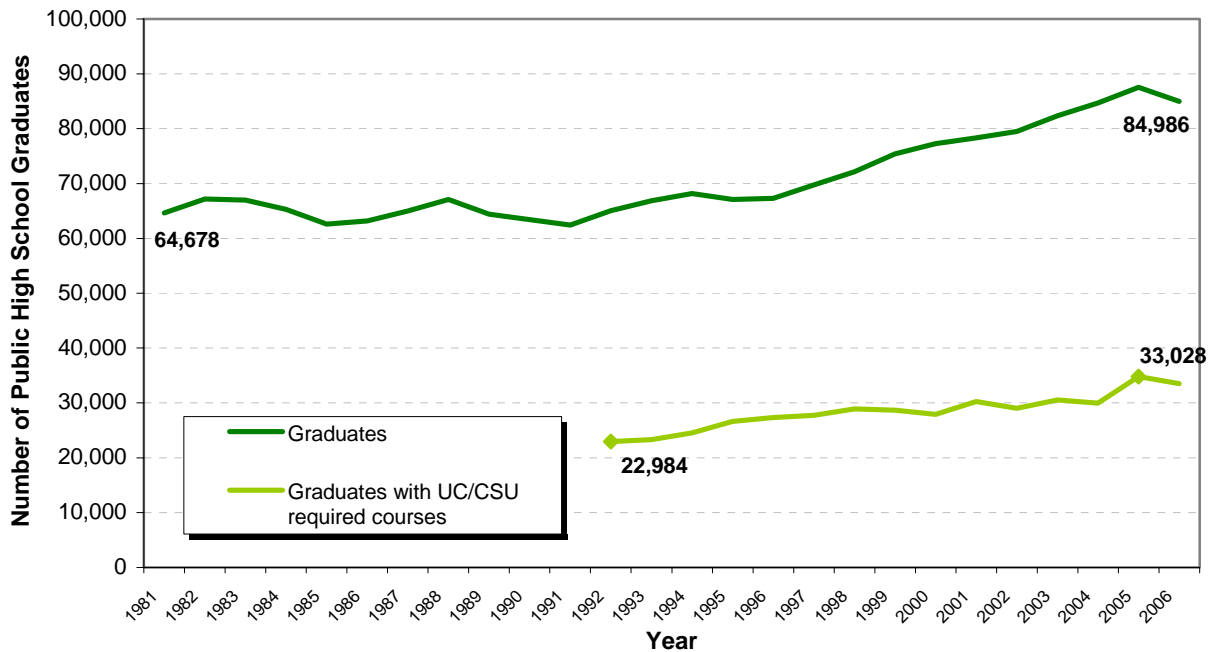
During this same time period, the number of graduates who completed and passed the coursework required for University of California and State University (UC/CSU) admission also increased, from a little over 27,000 in 1996 to a high of 33,028 in 2005. In 2006, however, there was a decline in both the number of graduates as well as those with UC/CSU coursework completed. Chart E.2 shows patterns in the number of high school graduates who have taken the academic courses required to qualify for enrollment in the UC/CSU systems. Comparison of the number of graduates in any single year with the number prepared to enter higher education is telling. Even at the highest point in 2005, only about 40 percent of Los Angeles County high school graduates had taken the courses necessary to enroll in college.

Chart E.1: Public School Grade Enrollment, 1981 to 2006



³⁵ California Department of Education, California Basic Educational Data System (CBEDS) aggregate data files

Chart E.2: Public High School Graduates 1981 to 2006



Contributions of County programs

Although the 81 school districts in Los Angeles have primary responsibility for education, several County departments offer supportive services designed to help at-risk youth improve their academic performance, stay in school, and graduate with skills that will enable them to find meaningful work. For example, the Department of Public Social Services' **Cal-Learn Program** provides educational support services for all CalWORKs participants who are under the age of 19, are pregnant or parenting, and have not completed their high school education. The program provides financial bonuses to participants who attend or return to school, show report cards reflecting satisfactory progress, and attain a high school diploma or its equivalent.

Table 5.1 shows that Cal-Learn served just over 3,000 youth during a four-month period in 2007. Ninety-six percent of participants are female and 92 percent are 16-19 years of age. Two-thirds of all participants are Hispanic and 26 percent are Black. Ninety-five percent report being unemployed.

Table 5.1: Cal-Learn Caseload Characteristics, March 2007- June 2007

	Number	Percent
Gender		
Male	135	4%
Female	2,963	96%
Total	3,098	100%
Age		
12-15	177	6%
16-17	1,130	36%
18-19	1,743	56%
20 & Over	48	2%
Ethnicity		
American Indian/Alaskan Native	2	*
Asian	65	2%
Black	791	26%
Hispanic	2,063	67%
White	149	5%
Other	28	*
Employment Status		
Employed	169	5%
Unemployed	2,929	95%

* Less than 0.1%

The County of Los Angeles Public Library (CoLAPL)

The County's Public Library system serves 51 cities and the many unincorporated areas throughout Los Angeles County by lending books and other reading materials, encouraging reading, and offering a number of special programs designed to help youth learn to love reading and to become more successful in school. For example, the library offers an annual summer reading program for school-age children. Research shows that young people who read through the summer vacation months have better skill retention when they return to school in the fall. During summer 2006, library staff reported that 9,493 middle school students (grades 5-8) took part in the program.

Young people in grades 4-12 (and first year college) can also get online tutoring and homework help in English, Math, Science and Social Studies [Tables 5.2 and 5.3]. To participate, young people need a County library card and Internet access. During FY 2006-07, the Library provided over 40,000 Live Homework Help sessions online! More than half of the requests (24,080) were for help with math.

Special programs offered by the Library include library cards for youth in Probation and Child and Family services. In February 2007, the County Library and Probation began a partnership to provide library cards for all youth who entered juvenile justice through one of the three juvenile halls (Central, Nidorf and Los Padrinos). During the period from February through June 2007, more than 5,000 library cards were issued.

Since October 2002, the County Library and the Department of Children and Family Services (DCFS) have collaborated to provide a "no-fault" library card for foster children, in which DCFS incurs responsibility for any fines or overdue materials checked out by foster

Table 5.2: Live Homework Help Sessions (July 2006- June 2007)

Sessions	Number
Total sessions Library provided	40,377
Sessions provided in Spanish	92
High School	19,231
Middle School	14,404
Grades 4 and 5	5,001
College Intro	2,256
Total requests by grade level	39,832*

*Grade level information was not provided for all requests.

Table 5.3: Live Homework Help Sessions by Topic, (July 2006- June 2007), in English only

Topic	Number
Math - <i>Elementary Math, Algebra II, Geometry, Calculus, and Algebra most requested.</i>	24,080
Science - <i>Biology, Chemistry, Physics, and Elementary Science most requested.</i>	6,184
English	6,165
Social Studies	3,854
Total requests by topic	40,283*

*Topic information was not provided for all requests.

children enrolled in the program. Currently, more than 1,300 children have received library cards through this program. During FY 2006-07, roughly 350 foster children received the no-fault library card.

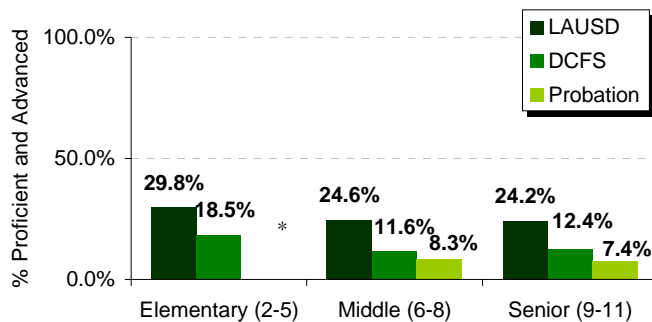
The County recently began investing in a cross-institutional Countywide partnership to improve the educational performance of youth in the Child Welfare and Juvenile Justice Systems. Created in 2004, the **Los Angeles County Education Coordinating Council (ECC)** is charged with coordinating systems and facilitating the efforts of many stakeholders to raise the educational achievement of these youth.

Table 5.4: DCFS and Probation Students Enrolled in LAUSD as of February 2006³⁶

	Number
DCFS Students	
In Home Care	3,084
Out of Home Care	4,943
Total	8,027
Probation	2,746
Students identified in both Probation and DCFS files	102

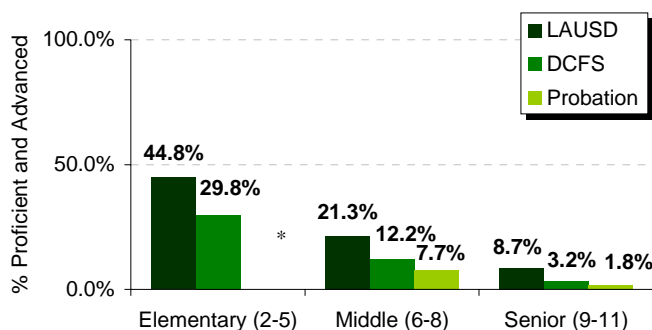
The ECC brings together, for the first time, the major stakeholders responsible for the educational performance of Foster and Probation youth. Its 24 members include leaders of school districts with significant numbers of system youth, County departments, the Juvenile Court, city and County Children's Commissions, advocacy and planning groups, community agencies, and youth and their caregivers. The purpose of the ECC is to coordinate efforts across organizations and jurisdictions, encouraging networks of people to work together to expand best practices and fill the gaps in communities where little help or support for families is available, so that children for whom the County serves as parents are not left behind.

Chart E.3 : 2004-05 CST English Language Arts Percent Proficient and Advanced



Information derived from a series of "data matches" that have aggregated data on achievement levels of Child Welfare and Probation youth have illustrated the depth of the education gap for these youth. For example, a data match conducted by the Los Angeles Unified School District in 2006 examined the records of 8,027 DCFS youth and 2,746 Probation youth who were enrolled in regular LAUSD classrooms during the 2004-05 school year [Table 5.4].

Chart E.4 : 2004-05 CST Mathematics Percent Proficient and Advanced



Charts E.3 and E.4 compare proficiency levels of all LAUSD youth with those scores of DCFS and Probation youth. The data underscore the urgency of improving school achievement overall since district performance averages were very low at all levels in both English and Math.

The significantly lower achievement levels reached by

³⁶ Data Match Los Angeles Unified School District (LAUSD), Los Angeles Department of Children and Family Services (DCFS), and Los Angeles County Probation Department. April 2006. Source: Education Coordinating Council.

*Results not shown where fewer than 20 students tested. CST is the California Standards Test.

DCFS and Probation youth in all of the data matches to date have been striking. Comparing the achievement levels of all other LAUSD youth with DCFS and Probation youth underscores just how much work will be needed to help these youth achieve their full potential. In English and Mathematics at every level of school, DCFS youth perform at significantly lower levels than the general student body [Charts E.3, E.4].

Across the board, Probation has the lowest percentage of students scoring proficient and advanced. More than twice as many LAUSD 6-8 graders (24.6 percent) scored proficient and advanced in English Language Arts than DCFS and Probation students in the same grades (11.6 percent and 8.3 percent). This is also true of the Mathematics results where 8.7 percent of LAUSD 9-11 graders scored proficient and advanced compared to only 3.2 percent of DCFS students and 1.8 percent of Probation students.

Table 5.5: Star Advantage Test Scores for Probation Youth in LACOE Programs. November 2005.³⁷

Program	Reading Score (average)	Math Score (average)
Juvenile Hall Schools		
Regular education (1,617, 79%)	4.9	5.7
Special education (430, 21%)	3.8	6.0
Camp Schools		
Regular education (1,650, 80%)	5.3	5.5
Special education (414, 20%)	4.0	4.4
Community Day Schools		
Regular education (585, 87%)	7.0	9.0
Special education (91, 13%)	4.1	4.6

Note: A score of 4.9 is almost at the 5th grade level.

Table 5.5 shows Star Advantage Test scores for youth entering Probation in 2005. Average reading scores at the fifth grade level and below indicate the urgency of the education problem facing these youth. As of November 2005, LACOE reported that 2,047 students were enrolled in juvenile hall schools. In August 2005, LACOE distributed 787 high school diplomas in regular education and 138 high school diplomas in special education.

Table 5.6: High School Exit Examination Results for Probation Youth³⁸

**State passing score is 350 or higher.*

Category	English Language Arts Portion			Math Portion		
	Total	Passed	Average*	Total	Passed	Average*
California	444,859	75%	376	447,110	74%	377
Los Angeles County	118,120	70%	372	118,339	68%	371
Los Angeles Unified School Dist.	43,449	62%	363	43,845	58%	361
Compton Unified School Dist.	1,465	51%	350	1,467	41%	347
Inglewood Unified School Dist.	960	59%	357	972	46%	351
Los Angeles County Office of Edu.	1,236	45%	347	1,266	35%	342
Juvenile Hall/Community Day Schl	492	26%	330	516	16%	325
Special Education	81	27%	328	80	17%	326

Table 5.6 shows the proportion of Probation youth who passed the California High School Exit Exam in 2005 in comparison to the other Statewide and local district passage rates. Forty-five percent of youth attending school in Probation camps passed the English portion of the exam, while 26 percent of those in Juvenile Hall/Community Day Schools passed. Scores on the math portion of the exam were even poorer.

³⁷ *Educational Status of Probation Youth Enrolled in Los Angeles County Office of Education Programs* (Discussion paper, April 2006). Source: Education Coordinating Council.

³⁸ California Department of Education, DataQuest, 2003-04 School Year.

County internship programs

Several County departments provide internship programs that enable youth to gain job experience and skills in areas of special interest at the same time that they are earning money to help support themselves and their families. Tables 5.7 – 5.9 highlight programs run by DCFS and Internal Services Department (ISD).

Department of Children and Family Services (DCFS) Career Development Intern (CDI) Program was created by the County Board of Supervisors to provide meaningful on-the-job training for youth that were formerly under DCFS or Probation supervision. CDI provides youth with up to 24-months of paid internship experience and classroom training. To qualify for the program, candidates must be a youth under DCFS or Probation supervision, be on a Department of Human Resources (DHR) certified list, be at least 17 years old, and a Los Angeles County resident.

CDI provides participants with on-the-job skills-building training and mentoring for potential permanent career opportunities within the County. Interns gain knowledge about DCFS programs and operations as well as building skills in conflict resolution and customer service. During 2007, 22 interns ranging from 19-25 years of age participated in the CDI program. Sixty-four percent of all CDI interns were African American and 23 percent were Latino youth [Table 5.7].

ISD: Youth Career Development Program (YCDP) is a 12-month paid internship. Interns are assigned to a position within ISD that provides work experience leading to a career path with the County of Los Angeles. In addition, each intern attends educational classes to enhance, develop, and improve their job skills and personal development. The goal of training is to help the interns upgrade their skills and increase their chances of successfully passing the

Table 5.7: CDI Participation (Sept. 2007)

Youth	Number	Percent
Female	16	73%
Male	6	27%
Total	22	100%
19-21 years	14	64%
22-25 years	8	36%
African American	14	64%
Latino	5	23%
White	2	9%
Other	1	
DCFS	22	100%
DCFS/Probation	1	4.5%

Table 5.8: Demographics of ISD Participants (ages 17-24, 2000-2007)

Youth	Number	Percent
Male	51	61%
Female	33	39%
White	6	7%
African American	49	58%
Hispanic	26	31%
Asian	3	4%

examination for an entry level position as a “permanent” Los Angeles County employee. DCFS and DHR established criteria to qualify as an intern in the YCDP, including emancipation from Los Angeles County Foster Care, minimum age of 17 years to apply (18 at the time of hire), current or past participant in the Independent Living Program, and pass an entrance interview. Sixty-one percent of participants were male and 58 percent were African American [Table 5.8]. Table 5.9 shows that during 2000-2007, 68 percent (57) ISD Youth Career Development interns graduated from the program and 41 were hired by ISD.

Table 5.9: ISD Youth Career Development Program Graduates and Work History

2000-2007	Percent Graduated	Number Hired by ISD	Other Employ.	Reasons Not Hired (Number)	College Terminated	Voluntary Withdrawal
Total	68% (57)	41	14	2	17	11

Federal **Workforce Investment Act (WIA)**, which superseded the Job Training Partnership Act, offers a comprehensive range of workforce development activities. The purpose of these activities is to promote an increase in employment, job retention, earnings, and to improve occupational skills of participants. Services for youth are authorized under Title I of WIA which requires that eligible youth be 14-21 years of age, low-income, and have at least one established barrier to employment (including, but not limited to, deficiencies in basic literacy skills, being a school dropout, pregnant/parenting, having a criminal record, being a foster child, and/or a homeless/runaway youth).

Table 5.10 shows data for 2006-07, when the majority of youth (66 percent) enrolled in WIA were between the ages of 14-17 and 56 percent of all enrollees in the program were female. Hispanic youth accounted for almost

Table 5.10: WIA Enrollments 7/06 – 6/07

Age	Gender		Grand Total
	Female	Male	
14 -17	1,118	810	1,928
18 -21	530	459	989
Grand Total	1,648	1,269	2,917

two-thirds of enrollments (63 percent), while roughly a quarter were Black [Chart E.5].

Chart E.6 shows enrollment characteristics of participating youth. The data indicate that for both older and younger age cohorts, the majority of youth are deficient in basic literacy skills (including reading and/or writing below a grade level of 8.9). Among the 14-17 year old age cohort, roughly 14 percent are foster youth and approximately one-fifth are receiving CalWORKs.

Chart E.5: WIA Participant Race/Ethnicity

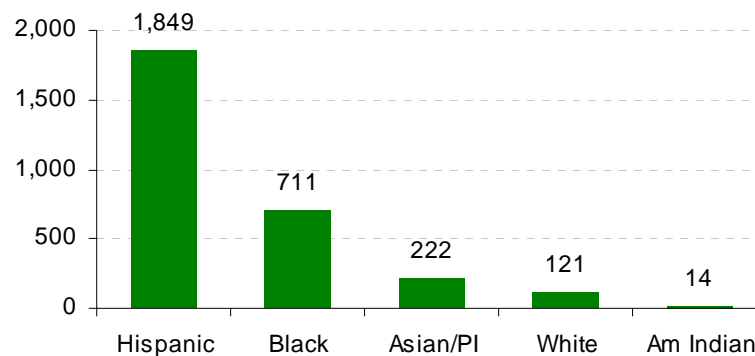
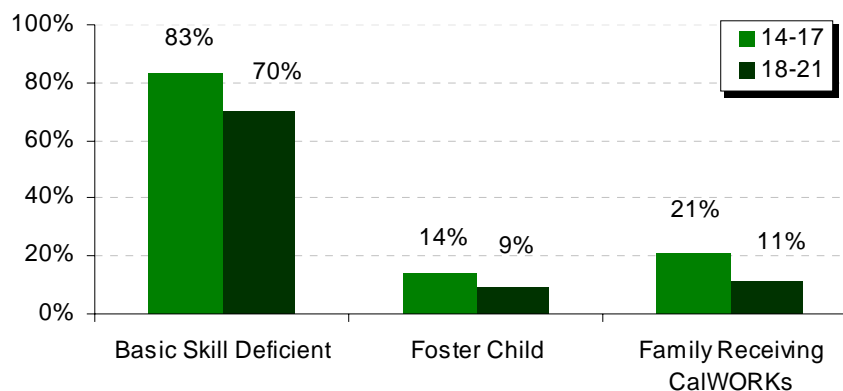


Chart E.6: WIA Characteristics by Age Cohort



VIII. Conclusion and Recommendations

The data in this report underscore the many roles that County government already plays in supporting youth and families. Taken together, these data also suggest additional opportunities for enhancing collaboration between County departments, cities, school districts, community- and faith-based organizations that play essential roles in the lives of children, youth, families and communities.

As described by Harvard University's Pathways Mapping Initiative, there are four key goal areas that pave the way for successful adulthood:³⁹

1. Youth are prepared for employment and higher education;
2. Youth have expanded labor market prospects;
3. Youth have increased prospects of thriving, belonging and engaging;
4. The highest risk youth receive effective services and supports.

Most of the County programs described in this report clearly fit into at least one of these four areas, but they aren't necessarily planned and operated this way. Using this framework would make it easier for County policy-makers and managers to more effectively coordinate programs across departments and to collaborate with key external partners who make essential contributions in each area.

The data in this report suggest an emerging vision that should be formally endorsed by the Board of Supervisors and shared across County departments. Such a shared vision would help to leverage the work of County contractors, Commissions and partners, especially those that serve the same geographic areas. Adoption of a shared vision would also help to strategically align the community organizing and capacity building efforts of the Children's Planning Council and other key community partners, and to enhance administration and delivery of direct services.

Perhaps most importantly, County government should provide leadership by working proactively to align its efforts with those of the many cities and school districts that also serve youth and families throughout Los Angeles County. Without

active efforts to promote a shared vision for youth and young adults -- and without active involvement of youth, parents and community residents in framing that vision -- Los Angeles County could miss important opportunities to support youth in shaping our common future. With a shared vision and mandate, leaders at all levels can more effectively coordinate, leverage and sustain important services and supports, building on existing efforts that are already underway throughout the County to create more opportunities for youth and young adults.

A shared vision for youth and young adults should build on the vision for children drafted by the Children's Planning Council and adopted by the Board of Supervisors in 1992:

"Los Angeles County children should reach adulthood having experienced a safe, healthy, and nurturing childhood, which prepares them to become responsible and contributing members of the community."

A shared vision for youth would emphasize the County's role in promoting positive youth development (thriving, belonging and engaging), as well as preparing youth for school success, higher education and employment. This shared vision could state:

"All Los Angeles County youth should be prepared for success in school, higher education and employment. Youth and their families should also have opportunities to access services and supports, develop skills and demonstrate leadership abilities."

A shared vision could pave the way for agreement on measures to track progress for the Transition Age Youth population. The County could then publish an annual report on its achievements, rather than each department developing individual performance measures for every program, related programs in different departments might share the same performance goals. Examples of shared measures might include:

1. **Increased numbers of youth prepared for employment and higher education.** For example, Probation and Department of Children and Family Services could measure grade level achievements and graduation rates among their

³⁹ L. B. Schorr & V. Marchand. (2007). Pathway to successful young adulthood. Washington DC: Project on Effective Interventions. www.pathwaystooutcomes.org

youth. The Departments of Public Social Services, Community and Senior Services and Public Library could track provision of information on tutoring, mentoring and library services to the youth who come through their programs.

2. Increased numbers of youth with expanded labor market prospects. While some departments already offer internship opportunities leading to employment, many more could follow suit. Partnerships between school districts and local government could speed development of vocational training programs that would help youth qualify for specific municipal service jobs. Partnerships might also build on existing workforce development opportunities offered through the community colleges or four-year universities in the County.

3. Increased numbers of youth who have opportunities to thrive, belong and engage. A number of County departments already offer opportunities for youth engagement such as youth councils, training and skill-building programs. Other departments offer literacy development, participation in arts programs and other positively-oriented experiences. Maintaining a centralized listing of these opportunities, tracking participation over time, and celebrating the achievements of youth participants would help maintain focus on the County's contributions to positive youth development, civic engagement and leadership.

4. Increased number of high risk youth who receive effective services and supports. Measures should include the impact of services and supports available through the Departments of Children and Family Services, Mental Health and Probation, as well as services provide by other departments for high-risk youth such as teen parents, runaways and homeless youth.

Even without a shared framework to shape and direct their efforts across departments, the County's extended network of employees, contractors, and partners already make a significant difference in the daily lives of youth and families. This report is the first attempt to describe the combination of programs and services that touch the lives of pre-teen children, youth and young adults ages 11 to 25. While these programs are fragmented, and often uncoordinated, they touch the lives of about half of the young people who live in Los Angeles County. A concerted and unified effort to invest in these youth could accomplish much more. What

might be achieved if everyone working for and with County government shared a vision for youth, invited youth and families to participate in achieving that vision, purposefully aligned efforts, and systematically tracked achievements? Los Angeles County has already invested enough time and resources in collaborative ventures to know that the work is hard, but the potential results could be life-changing for many of our County's youth and their families. By strategically investing in building our mutual capacity and leveraging our efforts, we stand a much better chance of significantly improving high school graduation rates, creating new jobs, and developing a new generation of civic leaders. Collectively the four key objectives outlined by Harvard University's Pathways Mapping Initiative form a working framework to achieve better outcomes for the County's youth and young adults, and will be incorporated in the County's Strategic Plan under Goal 5 – Children and Families Well-being. By working collaboratively County departments and their partners can help transition age youth reach their full potential, and positively influence their difficult, and at times tumultuous, passage to successful adulthood.

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DEPARTMENT	PROGRAM DESCRIPTION
ARTS COMMISSION	http://lacountyarts.co.la.ca.us/
Arts for All	<ul style="list-style-type: none"> Provides leadership for the 2002 Board-adopted Arts for All, a ten-year Countywide initiative that provides policy changes and educational initiatives to institutionalize arts education in dance, music, theatre, and the visual arts for all public school students in grades K-12.
Ford Amphitheatre Big!World!Fun! Family Performing Arts Series	<ul style="list-style-type: none"> Provides an outstanding series of music, dance, theatre, and storytelling performances for children and their families. The series is presented throughout the summer at the John Anson Ford Amphitheatre and features performers representing the diverse cultural landscape of Southern California.
Holiday Celebration	<ul style="list-style-type: none"> The Los Angeles County Holiday Celebration honors the diverse cultures and holiday traditions of County residents with a six hour music and dance production at the Music Center's Dorothy Chandler Pavilion that is broadcast live every December 24th on KCET.
Internship Program	<ul style="list-style-type: none"> The Arts Internship Program provides more than a 120 paid ten-week summer internships for undergraduate college students at more than 75 performing and literary arts non-profits and municipal arts agencies.
CHIEF EXECUTIVE OFFICE	http://www.ceo.lacounty.gov/ccp
Child Care Development	<ul style="list-style-type: none"> Provides collaborative policy development and implementation support on issues related to child care and development services in the County. Key initiatives include the implementation of the Investing in Early Educators (Assembly Bill 212) Program, Centralized Eligibility List (CEL) Project, and the administration of funding for family enhancements at County-sponsored child care centers.
CHILDREN AND FAMILY SERVICES	http://www.lacdcfs.org/
Early Intervention	<ul style="list-style-type: none"> Matches the unique needs of children and family with available services and resources in their community. Services are provided through Family Support, Alternative Response Program, and Child Care. The services are a proactive approach toward the prevention of family conflict that may lead to child abuse or neglect.
Crisis Intervention	<ul style="list-style-type: none"> Responsible for assessing and investigating allegations of child abuse and neglect; initiating legal action (when appropriate) to petition for court dependency status; and coordinating the departmental response to child abduction cases. The Child Protection Hotline receives calls of alleged abuse and neglect and determines whether to refer the allegations for investigation. When a decision is made to seek court supervision for a child, Juvenile Court Services takes action to establish court dependency status and functions as the liaison between the Department and the court.
Intensive Services	<ul style="list-style-type: none"> Provide services to children and families at risk for abuse, neglect, abandonment, or exploitation. Services include: Case Management and Support, Wraparound, Youth Development Services, Respite Care, Health, Mental Health, Substance Abuse Treatment, and Educational Development. These services are provided to children and families when a child remains in the home of a parent/guardian or when they have been placed in out-of-home care.
Permanency	<ul style="list-style-type: none"> Provide a continuum of services to promote permanency for children. These services include Family Reunification, Legal Guardianship, and Adoption. Family Reunification is the preferred permanency plan since it preserves family connections.
CHILD SUPPORT SERVICES	http://childsupport.co.la.ca.us/
Child Support Services Enforcement	<ul style="list-style-type: none"> The Child Support Services Department is responsible for establishing, modifying and enforcing child and medical support obligations, enforcing existing spousal support orders, and determining parentage for children as required under federal and State law.
COMMUNITY AND SENIOR SERVICES	http://www.ladcass.org/
Domestic Violence (DV) Programs	<ul style="list-style-type: none"> Funds emergency shelters that provide crisis counseling, food, clothing, and transportation. The overall objective of the DV program is to assist victims of domestic violence become safe and stable, both emotionally and physically, and able to access supportive services including information/referral, education, work-related activities and/or successfully transition to self-sufficiency.
Workforce Investment Act (WIA)	<ul style="list-style-type: none"> The WIA program goal is to increase the self-sufficiency of persons in Los Angeles County. The program provides services that lead to successful transition into the workforce, continued training, or education.

DEPARTMENT	PROGRAM DESCRIPTION
HEALTH SERVICES	http://www.ladhs.org/
Emergency Department	<ul style="list-style-type: none"> Emergency services consist of provision of emergency treatment to the ill and injured that require immediate medical or surgical care on an unscheduled basis. Also included are patients treated at emergency service facilities of the hospital for non-emergency medical care.
Hospital Outpatient (Pediatric and Adult)	<ul style="list-style-type: none"> Clinic services for ambulatory patients provide diagnostic, preventive, curative, and educational services on a scheduled basis, excluding walk-in or urgent care clinics. Services include physical examinations, diagnosis, and treatment of ambulatory patients with illnesses or other medical conditions.
Juvenile Court Health Services	<ul style="list-style-type: none"> Provides health care and dental services to children and youth in the Probation Department's detention and residential facilities.
Obstetrics	<ul style="list-style-type: none"> Obstetrics service provided to the mother prior to and including delivery, to include perinatal care during labor, assistance in delivery, postnatal care in recovery, minor gynecologic procedures, and nursing care following delivery.
Pediatric Inpatient Services	<ul style="list-style-type: none"> Pediatric acute inpatient services is the provision of care to pediatric patients, including neonatal patients who require services not available or appropriately given in the newborn nursery.
Psychiatric Services	<ul style="list-style-type: none"> Psychiatric acute care is provision of care to adult, adolescent and child patients with mental illness, mental disorders, or other mentally incompetent persons. The services can also be of a more intensive nature, requiring isolation or a locked unit. These services are staffed with specially trained personnel and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or threatening conditions, require intensified, comprehensive observation and care.
Rehabilitation	<ul style="list-style-type: none"> Rehabilitation services at Rancho Los Amigos National Rehabilitation Center (RLANRC) include both acute inpatient and outpatient services. Rehabilitation care is provided to patients needing physical or corrective treatment of bodily conditions on the basis of physicians' orders and approved rehabilitation care plans.
INTERNAL SERVICES	http://isd.lacounty.gov/
Career Youth Development Program	<ul style="list-style-type: none"> 12-month paid Internship program for five to seven young adults emancipated from the Los Angeles County Foster Youth Program. The CYDP provides on-the-job training in entry level positions in ISD including information technology, purchasing and contracting, crafts, and clerical support. In addition, interns receive life skills and academic training. Upon completion and graduation of the program, the Intern is offered a full-time permanent position with ISD.
MENTAL HEALTH	http://dmh.lacounty.gov/
Outpatient Mental Health	<ul style="list-style-type: none"> Provides, through a network of County operated and contracted licensed agencies, an array of outpatient mental health services to individuals with severe and persistent mental illnesses and to severely emotionally disturbed children and adolescents and their families.
Psychiatric Hospitalization Services 24-hour Facilities	<ul style="list-style-type: none"> Provides inpatient services to clients who are in need of 24-hour care due to grave disability through a network of County operated and contracted licensed hospitals and Institute for Mental Disease (IMD) programs.
MUSEUM OF ART	http://www.lacma.org/
Education	<ul style="list-style-type: none"> Present educational, outreach, and access programs that extend the museum experience in the fullest possible way to the widest possible current and future audiences.
PARKS AND RECREATION	http://parks.lacounty.gov/
Community Services	<ul style="list-style-type: none"> Community services consist of recreation programs and local park facilities designed to provide community members of all ages the opportunity to participate in activities and programs that promote physical health, community enrichment, and personal growth. Physical health programs include competitive athletics, aquatics, and exercise and fitness classes. Enrichment programs include afterschool computer clubs, day camps, senior programs, cultural programs and special events.
Environmental Stewardship	<ul style="list-style-type: none"> Environmental stewardship consists of activities and programs for which the main goal is to restore, protect, preserve the natural environment, including endangered animal and plant species, and to promote environmentally friendly behavior and practices by providing

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DEPARTMENT	PROGRAM DESCRIPTION
Regional Services	<p>environmental education programs and exhibits, at natural areas, parks and schools.</p> <ul style="list-style-type: none"> Regional Services consist of facilities and programs at large boating and fishing lakes, large sports complexes that attract residents on a regional basis, including arboreta and botanical gardens, and golf courses.
PROBATION	http://probation.co.la.ca.us/
Detention Services	<ul style="list-style-type: none"> Provides, through juvenile halls, temporary housing for youth who have been arrested for criminal or delinquent activity. The juvenile halls staff assess the youth as to the risk they pose to the community. Those who pose a significant threat to the community are then detained pending the court process. While in juvenile hall, minors are provided physical health, mental health, and educational assessments and are also required to attend school daily.
Juvenile Suitable Placement	<ul style="list-style-type: none"> Provides, through suitable placement, a dispositional option for the Juvenile Court for minors whose delinquent behavior may be explained by a contributory family environment and/or emotional/psychiatric problems. Most suitable placement minors are removed from their homes and placed in a safe environment (group home, psychiatric hospital, Dorothy Kirby Center, etc.) pending resolution of the minor's issues. Through monitoring the minor's progress, the Deputy Probation Officer (DPO) is able to determine what long-term living arrangement would be in the best interest of the minor and develop/implement a permanency plan to return the minor to a safe and stable environment, such as reunification with family, emancipation, placement in a relative/non-relative home, or long-term foster care.
Residential Treatment	<ul style="list-style-type: none"> Aids in reducing, through the camp program, the incidence and impact of crime in the community by providing a residential experience that introduces effective life skills to each ward. The program provides intensive intervention in a residential setting over an average stay of six months for youth committed by the Juvenile Court. Each minor receives health, educational, and family assessments that allow for treatment to be tailored to meet individual needs. The goal of the program is to reunify the minor and family, to reintegrate the minor into the community, and to assist the minor in achieving a productive, crime-free life.
PUBLIC DEFENDER	http://pd.co.la.ca.us/
Client Assessment, Referral, Evaluation (CARE) Program	<ul style="list-style-type: none"> Teams psychiatric social workers and mental health/special education resource attorneys with juvenile court deputy defenders in 10 courts to assess and make effective recommendations to the Juvenile Court to address children's mental health and special education needs.
Juvenile Representation	<ul style="list-style-type: none"> Juvenile representation is undertaken for all minors facing criminal charges who qualify for Public Defender representation, and for whom there is no conflict of interest. This program also provides post-disposition services mandated by Senate Bill 459 and Rule of Court 1479.
PUBLIC HEALTH	http://www.lapublichealth.org/
Alcohol and Drugs Program Administration (ADPA)	<ul style="list-style-type: none"> ADPA administers the County's alcohol and drug programs through contracts with over 300 community-based agencies. These agencies provide a wide array of prevention, intervention, treatment and recovery services for Los Angeles County residents. Programs include: Adolescent Intervention, Treatment and Recovery Program (AITRP) Services - Provides comprehensive age-specific services to substance abusing adolescents, including outreach, intervention, residential, and non-residential services. Perinatal Alcohol and Drug Program Services - Provides alcohol and other drug (AOD) abuse services to pregnant women who are either at risk for abuse or who are addicted, comprehensive and culturally sensitive systems of family support and treatment services. Women and Children's Residential Treatment Services - Provides 24-hour alcohol and drug residential services with recovery services for pregnant and parenting women and their children including, but not limited to, homeless persons who have alcohol and/or drug problems.
Children's Medical Services	<ul style="list-style-type: none"> Children's Medical Services administers the Child Health and Disability Prevention (CHDP) program and the California Children's Services (CCS) program. CHDP provides children with Medi-Cal (birth to age 21) or children without Medi-Cal (birth to age 19) in low- to moderate income families with free immunizations and health check-ups. Services include regular and complete health check-ups, certain screening tests, and

DEPARTMENT	PROGRAM DESCRIPTION
Chronic Disease Program	immunizations, as well as referrals for diagnosis and treatment. CCS provides defined medically necessary benefits to persons under 21 years of age with physically disabling conditions who meet medical, financial, and residential eligibility requirements of the program. CCS provides administrative case management in the coordination of care and benefits for families and children with special health care needs.
Communicable Disease Control and Prevention	<ul style="list-style-type: none"> • Focuses on prevention through Injury and Violence Prevention Program (IVPP), Nutrition program, Physical Activity and Cardiovascular Health program, and Tobacco Control program. • Includes the Immunization program (IP) to prevent disease and Sexually Transmitted Disease (STD) Control Program to prevent and treat STDs.
Maternal, Child and Adolescent Health	<ul style="list-style-type: none"> • Maternal and Child Health (MCAH) programs include the Childhood Lead Poisoning Prevention program (CLPPP) and Children's Health Initiatives, including Children's Health Outreach Initiative (CHOI).
PUBLIC LIBRARY	http://www.colapublib.org/
Foster Child Library Card	<ul style="list-style-type: none"> • No fault library cards available for foster children in out-of-home care. To encourage foster parents to register their children for library cards without fear of fines or fees. Supports school and educational success.
Live Homework Help	<ul style="list-style-type: none"> • Free On-line tutoring program which provides one-on-one assistance to students in English, Math Science and Social Studies. Students must have a County Library card and have access to an Internet connected computer. For Students in grades 4 – 1st year College.
Probation Library Card	<ul style="list-style-type: none"> • All young people who enter the juvenile justice systems via the 3 Juvenile Halls will be registered for a County Library card and will receive information, support and encouragement to use that card when they return to their communities.
Summer Reading Program	<ul style="list-style-type: none"> • Specially designed and selected materials and incentives are provided for teens to encourage reading during the summer months. Programs such as free performances, book clubs and video gaming tournaments are also available.
PUBLIC SOCIAL SERVICES	http://www.ladpss.org/
California Work Opportunities and Responsibility to Kids (CalWORKs)	<ul style="list-style-type: none"> • Programs included are CalWORKs Eligibility, Welfare-to-Work (WtW), Cal-Learn, and Child Care. Programs provide temporary assistance to children and families for basic needs and child care services, and help participants with a full range of training, educational, employment, post-employment, and supportive services.
Food Stamp	<ul style="list-style-type: none"> • The Food Stamp program was established to improve the nutrition of people in low-income households. It does that by increasing their food-buying power, so they are able to purchase the amount of food their household needs.
General Relief (GR)	<ul style="list-style-type: none"> • General Relief is a County-funded program that provides temporary cash aid to indigent adults who are ineligible for State or federal assistance.
Medi-Cal	<ul style="list-style-type: none"> • The Medi-Cal program provides free or low-cost health care coverage to low-income children, families, and adults who are elderly or disabled.
Community Service Block Grant (CSBG) Program	<ul style="list-style-type: none"> • The CSBG program assists low-income individuals and families transition from crisis situations to stable living situations through the provision of community-based services or referrals to other programs. Services include "before" or "after" school programs, employment training/support, education, temporary shelter, food, health care, domestic violence intervention, youth, family development, and legal assistance.
SHERIFF	http://www.lasd.org/
Success Through Awareness and Resistance (STAR)	<ul style="list-style-type: none"> • Provides drug, gang, and violence prevention education to students throughout Los Angeles County. The curriculum is targeted to prevent tobacco, alcohol, and other drug use, along with violent behavior.
Vital Intervention Directional Alternative (VIDA)	<ul style="list-style-type: none"> • VIDA is a 16-week program for at-risk youth, overseen by deputy personnel and community volunteers, which alters negative behavior and directs young people away from criminal influences. VIDA has a family guidance component and offers parenting classes, family and youth counseling.