Monitoring the Community

April 2003

Communities That Care

Prepared by: Oneida County Communities That Care Evaluation Committee

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Preface

The initiative to begin Oneida County Communities That Care began with the Funders Council and with a temporary task force convened by Oneida County Executive Ralph Eannace in response to acts of violence in schools across the country. The Funders Council, a group comprised of the United Way of Greater Utica, Utica National Foundation, The Community Foundation of Herkimer and Oneida Counties, Oneida-Herkimer-Madison BOCES and Madison-Oneida BOCES, in addition to the County government and the two cities of Rome and Utica, sponsored the effort initially until the Community Board first convened in April, 2001. Communities That Care is a national model of risk prevention for youth and families that was developed by two sociologists, Drs. David Hawkins and Richard Catalano, at the School of Social Work, University of Washington in Seattle. The State of New York has promoted, through training and technical assistance (OASAS), the adoption of CTC in approximately 50 communities across the state.

Monitoring the Community is a product of Oneida County Communities That Care. The evaluation committee worked to upgrade an earlier report, published in June of 2000, and to add objectives, baseline measurements, and standards for each of the four areas of risk prioritized by the community. The early support of the Funders Council, the tremendous support and leadership that has been given by our County Executive for this initiative, and the participation and collaboration of many community agencies, organizations, and individuals working together has gotten us to this point. But there is much more to do to ensure a quality of life for our youth, families, and neighborhoods in Oneida County as we formulate a plan for special initiatives in each of the priority areas.

Special acknowledgement is given to the United Way of Greater Utica, Scott Ferguson as the Executive Director, and his Board of Directors, which has housed Communities That Care as a community collaborative aligned with its own goal of community building. The Commissioner of Mental Health, Phil Endress, found money in his budget for training and support to start CTC and has chaired the Administrative Committee from its inception. Ed Paparella, Chair of the Community Board, together with our Director, Joseph Glaze, brings all of us together from service agencies to law enforcement, businesses, faith ministries, schools, health organizations, and government agencies to collaborate for the common good. Acknowledgement is also given to The Arthur Levitt Public Affairs Center, Hamilton College for support in producing and printing this report, and Hamilton College student Jeffrey H. Long for his contributions.

Collaboration is difficult, and the environment today, in April 2003, is more challenging than ever as local, state, and federal budgets tighten, particularly to "softer" services for youth and families. In an atmosphere that becomes more competitive and survival-oriented, the question, "Can we can afford to collaborate?" is answered, "We can't afford not to!" More than ever, we need a comprehensive community initiative and a community working together, hand-in-hand. We hope that Monitoring the Community will be of direct use to many in the community for planning, grant-writing, and perhaps, simply understanding more fully the profile of the community in which we live.

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"What is essential is invisible to the eye."

Antoine de Saint-Exupery, The Little Prince

Introduction

In recent years, communities across the nation have documented compelling reasons to promote broad community participation in addressing community problems. They have found that problems cannot be solved by any person, organization or sector working alone; problems are complex and interrelated; they affect diverse populations in different local contexts; and local context is dependent on state, national, & international policies (Lasker & Weiss, 2003). Comprehensive community initiatives have taken various forms, dependent upon the local setting, its access to information, technology, or training, and the leadership represented in the collaboration.

Community competence has been defined as the ability of community members to collaborate effectively in identifying problems and needs, to reach consensus on goals and strategies, to agree on ways and means to implement their agreed-upon goals, and to collaborate effectively in the required actions. More simply put, a competent community is one that is able to cope with the problems of its collective life (Lasker & Weiss, 2003). As our community struggles to "be competent" or "have competence" with the problems of our collective life together, we want to acknowledge the lessons learned by other comprehensive community initiatives. Other communities have found that for synergistic change, we need broad, multiple goals and complex interactions. We need to be flexible and responsive to local needs and conditions as they change. To be successful, we will want to empower members of the community and encourage participation with a focus on capacity building. And we need to build an acceptance of long time frames focused on fundamental change or transformation (Schorr, O'Connor, 1995).

Lasker and Weiss document, also, the frustrations (2003). Community engagement, partnership, and collaboration are not easy. They mean different things to different people, and since expectations vary, they often are not met. Many efforts are too short term or thinly resourced, and it is difficult to document that collaboration actually helps. And, finally, our evaluations often focus on the ultimate outcomes, ignoring proximal steps and the process of collaboration and community problem-solving that we are trying to build.

Communities That Care, briefly, is a model based on risk-focused prevention and a simple premise: to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks, at the same time enhancing protective or resiliency factors. Important messages regarding risk assessment given to us by the CTC model, are:

- Prevention is everybody's business. Community development, legislators, economic development, law enforcement, child welfare, juvenile justice, schools, the Faith community, businesses, and social service providers, including drug and alcohol services all must be involved.
- The more risk factors present, the greater the risk to the child and family to be unsuccessful educationally, economically, or in a social or behavioral realm.
- Protective factors buffer exposure to risk to individuals and promote resiliency.
- Risk and protective factors are present for youth in all areas of their lives: their peer groups, families, schools, and communities we can influence the kinds of opportunities, rewards, and bonding experiences that are available to them (DRP, 1997).

This report is divided into three parts. **Part I** provides statistical information on population and family characteristics to give a context for the discussion of community indicators. Who are the people in the community? How many children are there, what is the racial and ethnic makeup of the community, etc.?

Part II is based on the social indicators to monitor the four identified areas of risk:

- 1. Economic Deprivation How well are we doing in providing Economic Security for all of the families in Oneida County?
- 2. Family Management/Family Conflict How well are families in Oneida County doing in managing the upbringing of their children and managing conflict?
- 3. Early & Persistent Anti-Social Behavior What kind of a start are very young children getting in their adjustment socially, emotionally, and behaviorally?
- 4. Alienation or Rebelliousness Are our middle school and high school youth on track in their relationships with others and their educational plans? Are they bonded with their families, their peers, their school, and their community? Do they see opportunities for themselves?

At the end of each section in Part II, there are recommendations for further research or for the development of monitoring or tracking mechanisms. In addition, since the CTC model is based on behavioral outcomes of adolescents, **Part III** provides the current data on each negative behavioral outcome that we are ultimately trying to impact: Substance Abuse, Delinquency, Teenage Pregnancy, School Drop-Out, and Violence. Throughout the report, wherever possible, we have provided comparative data for similar counties or statewide or national statistics.

PART I POPULATION AND FAMILY CHARACTERISTICS

Following the lead of the Federal Interagency Forum on Child and Family Statistics, who each year produce a monitoring report, *America's Children: Key National Indicators of Well-Being*, Part I presents data on trends in the child population and the composition of their families. These background measures give us the context for understanding the social indicators viewed in Part II.

Child Populationⁱ

The number of children in the community determines the need for schools, health care services, recreation, and other facilities for private and public services that serve children and their families.

- In 2000, there were 62,791 children and youth ages 0-19 in Oneida County, over 8,000 fewer than in 1990, an 11.4% decline. Numbers were lower particularly in the western part of the County (Rome) and in the 0-9 age group.
- White children and youth have accounted for most of the drop in population of youth in Oneida County in the 1990s; numbers of Hispanic and Asian youth have risen, and the number of black youth ages 10-19 have increased, while the number of black children ages 0-9 has declined.
- Nationally the number of children is growing slowly, after a decline during the 1970s and
- 1980s, and beginning in 1990, the rate of growth in the number of children increased.ⁱⁱ



Data Source: U.S. Census Bureau, September 2000

Racial and Ethnic Compositionⁱⁱⁱ

The racial and ethnic diversity in communities has increased considerably in the last decades. We see that dramatically in our own communities, particularly in the city of Utica, which has become home to many different refugee groups, who speak over twenty different languages in the Utica City Schools.

- In Oneida County, from Census 2000 reporting for the year 1999, 86.6% of children and youth ages 0-19 are white, non-Hispanic; 4% are Hispanic; 7.6% are Black; 2% are Asian/Pacific Islander, and less than 1% are American Indian/Alaskan native.
- The Mohawk Valley Resource Center for Refugees, located in Utica, has been responsible for the resettlement of over 10,000 refugees from more than twenty countries, most of who live in Utica.
- The foreign born population in Utica has changed considerably over the last decade. From the 1990 Census to 2000 Census, the number of foreign-born went from 3,718 to 7,231 (U.S. Bureau of the Census). Of those census respondents, 2,596 reported Bosnia or Herzegovina as Country of Birth (35.9%), 1,335 were from Asia, primarily Vietnam (18.5%), and 18.1 percent were from Russia, Belarus, or the Ukraine (U.S. Bureau of the Census, 2000 Census Population, Summary File 3(SF3).
- Nationally, in 2000, 64% of U.S. Children were white, non-Hispanic; 16 percent were Hispanic; 15% were black, non-Hispanic; 4 percent were Asian/Pacific Islander; and 1 percent were American Indian/Alaskan native.
- Nationally, the percentage of children who are white, non-Hispanic has decreased from 74% in 1980 to 64% in 2000.
- Nationally, the number of Hispanic children has increased faster than that of any other racial and ethnic group (9%-16% from 1980-2000).
- Increases in Hispanic and Asian/Pacific Islander groups reflect more immigration, and much of the growth in the Hispanic population reflects higher fertility for Hispanic women.
 (Amorian's Children, 2002)

(America's Children, 2002)





The major populations resettled by the Refugee Center are Bosnian, Russian, and Vietnamese, but many other groups have contributed to the diversity of the community in smaller numbers.

Afghanistan	36
Amerasian (Vietnam)	1281
Vietnam	774
Bosnia	4427
Bulgaria	25
Cambodia	365
China	9
Congo (Zaire)	13
Cuba	63
Czechoslovakia	80
Ethiopia	8
Former Soviet Union	2163
Haiti	89
Hungary	29
Iran	35
Iraq	164
Kosovo	77
Laos	266
Liberia	4
Libya	6
Myan Mar (Burma)	84
Poland	146
Romania	28
Sierra Leone	17
Somalia	15
Sudan	102
Yugoslavia	5
Totals	10,311

Refugee Resettlement in Utica, New York through MVRCR by Country of Origin	
from 1979-2002	

Source: Mohawk Valley Resource Center for Refugees, Utica, NY

Family Structure

Children living in households with only one parent are much more likely to have families whose incomes fall below the poverty line. While two parents in a household may be biological, step, or adoptive, and their presence does not guarantee a child's success, it generally indicates a greater level of resources available to children and to their well-being (America's Children, 2002, p.7)

- Nearly one in five marriages (19%) from 1997 to 1999 ended in less than 5 years, and approximately half (48%) ended in less than 10 years, and well over half (57%) of divorces obtained between 1997 and 1999 involved one or more child(ren).
- Oneida County had a slightly higher divorce rate in 2000 than similar counties (exc. Schenectady) and than NYS as a whole (20/1,000).
- Oneida County reports 59,170 total Family households in the 2000 Census, and of those, 46.6 percent live with their own children under 18 years of age.
- 68% of these family households with children under 18 are two-parent households, and 24 % are with a single-parent female head of household.
- Oneida County has 36,367 non-family households, including 10,872 males living alone (over ¼ of whom are over 65 years of age 27.2%), and 15,810 females living alone (58.4 percent of whom are over 65 years of age.)
- Nationally, 69% of American children lived with two parents in 2001, a decline from 77% in 1980.
- Nationally, about 22% of children lived with only their mothers in 2001, 4% lived with only their fathers, and 4% lived with neither of their parents (#s have not increased substantially since 1996.)
- Nationally, 78% of white, non-Hispanic children lived with two parents in 2001, while only 38% of black children and 65% of children of Hispanic origin lived with two parents.

Divorce Rate in 2000 for Oneida County, Similar Upstate Counties & NYS iv

Divorce rate in 2000 for Onelda County, Similar Opstate Counties & 1115						
Oneida Cty.	Albany Cty.	Broome Cty.	Schenectady Cty.	New York State		
20/1,000	19/1,000	18.9/1,000	15.5/1,000	18.2/1,000		

Source: Vital statistics of New York State. NYS Dept. of Health, http://www.health.state.ny.us/nysdoh/vr/mainvs.htm U.S. Census 2000, Summary File 1(SF!) P19.

Average Divorces in Oneida County by Stated Length of Marraiges (1997-1999)



Average Divorces in Oneida County by Number of Children in Household (1997-1999)



Vital statistics of New York State. NYS Dept. of Health, http://www.health.state.ny.us/nysdoh/vr/mainvs.htm)

Ages of children	parents		
Children < 6 (n=15,495)	67.9% two parents	forceTwo parents - 59.0%Father only - 32.7%Mother only - 4.7%Neither parent- 3.4%	
	32% one parent Father (n=1,055) Mother (n=3,912)	Father working – 84.6% Mother working- 68.5%	
Children 6-17 (n=37,916)	71.4% two parents	Two parents -71.6%Father only -18.9%Mother only -3.7%Neither parent -3.0%	
	28.5% one parent Father (n=2,292) Mother (n=8,531)	Father working – 81.7% Mother working- 77.8%	

Number of children < 6 and 6-17 years of age and percentages living in two parent or one parent families with parents participating in labor force – Oneida County

(U.S. Census Bureau "American FactFinder", <u>http://factfinder.census.gov</u>.)

Births to Unmarried Women

Children being born to women who are unmarried is one of the changes that has affected family structure and the number of children in poverty. Statistically, children born to unmarried mothers have lower birth weights and higher infant mortality rates, in addition to being more likely to live in poverty.

- The rate of out of wedlock birth peaks in the 18-19 and 20-24 year-old age groups (56.3 and 57.9/1,000 respectively, but remains high (31.8/1,000) for 25-29 year-olds.
- Nationally, nearly two-thirds of women under age 25 having their first child were not married in 2000.
- Nationally, one-third of all births, including 4 in 10 first births, were to unmarried women in 2000.



(Source: NYS Department of Health, Info for Researchers, www.health.state.ny.us/nysdoh/vital_statistics/2000/table10).

Income

Family income or household income is significantly correlated with a number of family and childhood problems, and research has linked economic deprivation with negative adolescent behavioral outcome: pregnancy, delinquency, violence, school drop-out, and substance abuse.

- Median household income is substantially less than that of households in New York State as a whole or in the United States and lower than that of similar upstate counties.
- Greater percentages of households in Oneida County fall in the lowest two categories of under 10,000 and under 25,000 than households nationally, and fewer make over \$100,000 per year than most New York State and national comparisons reflected in the table.
- Median earnings for full-time, year-round female workers in Oneida County were 75% of those earned by male workers; 77% for NYS and 73% nationally.
- Unemployment has ranged considerably higher than other upstate New York counties throughout the last decade.

Local Area Unemployment Statistics

YEAR	ONEIDA	ALBANY	BROOME	SCHENECTADY
1990	5.0%	2.9%	4.1%	3.8%
1991	7.6%	4.8%	5.9%	6.0%
1992	7.9%	5.0%	6.8%	6.3%
1993	6.9%	4.2%	6.8%	5.1%
1994	6.0%	4.1%	6.7%	4.9%
1995	5.8%	4.2%	5.3%	5.3%
1996	5.4%	3.8%	4.4%	4.7%
1997	5.4%	3.4%	4.3%	4.5%
1998	4.7%	3.0%	4.0%	4.0%
1999	4.6%	2.9%	4.2%	3.6%
2000	4.3%	2.8%	3.4%	3.4%
2001	5.0%	2.6%	4.2%	3.0%
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SOURCE: http://www.labor.state.ny.us/labor_market/LMI_business/laus/laus.asp

Income levels in Oneida County compared to New York State and the United States

Income	<u>Oneida</u>	Albany	Broome	Schenectady	New	USA
Levels	County				York	
<\$10,000	11%	9.3%	11%	8.8%	11.5%	9.5%
<\$25,000	34.3%	27.7%	35.1%	29%	29.6%	28.6%
\$100,000+	6.8%	12.6%	7.8%	10.4%	12.3%	12.3%
Median	\$35,194	\$42,935	\$35,347	\$41,739	\$43,393	\$41,994
H.H.						
Income						
Median	\$32,194.00	\$39,838	\$34,426	\$38,840	\$40,236	\$37,057
Earnings						
(full-time,						
yr. Rd.						
workers) –						
MALE						
Median	\$24,295	\$30,127	\$24,542	\$27,339	\$31,099	\$27,194
Earnings						
(full-time,						
yr. Rd.						
workers) –						
FEMALE						
Per Capita	\$18,516	\$23,345	\$19,168	\$21,992	\$23,389	\$21,587
Income						

(U.S. Census Bureau "American FactFinder", <u>http://factfinder.census.gov</u>.)

PART II

INDICATORS OF CHILDREN'S & FAMILY'S WELL-BEING IN A HEALTHY COMMUNITY

Criteria used to select indicators:

The number and variety of social indicators that communities are choosing to use in order to monitor progress on community goals precludes simply copying any one accepted model. Our decisions regarding criteria for indicators to choose *generally* followed recommendations of Marc Miringoff, who developed the Index of Social Health (ISH) at Fordham University^v:

- 1. They are measured reliably and consistently over time.
- 2. They represent a distribution over the age spectrum.
- 3. They reflect a balance between social and socioeconomic dimensions.
- 4. They address major issues of public concern or policy debate.
- 5. They have been studied in depth, over time.
- 6. They are indicators that can be seen as having international concern.
- 7. They are indicators which reflect change over time (Miringoff et. al, 1999, p.42)

In addition to those indicators that fit these criteria, though, we have searched for any that provide relevant data at the local level, even if they do not meet the above standards.

PRIORITY I: Economic Security and Stability for Families and Individuals.

Risk Factor: Extreme Economic & Social Deprivation

Overview: Children who live in a poor, deteriorating neighborhood where the community perceives little hope for the future are more likely to develop problems with delinquency, teen pregnancy, and drop out of school. Also, children who live in these areas and have behavior or adjustment problems early in life, are more likely to have problems with drugs later on (DRP, 1997)

Vision: Individual adults and heads of households have sufficient education and training to provide for themselves and their families, and they have protection - a buffer of services and supports that eligible community members have full access to in order to keep them from the edge of economic insecurity.

Indicators of Economic Security

1. Education

OBJECTIVE 1: County residents will complete high school.

Indicator A: Percentage of residents 25 years & older who have completed high school or its equivalency.

- Baseline: 79% of Oneida County residents completed high school or equivalency (Census 2000).
- **Standard**: 84% of county residents over age 25 will have a high school diploma or equivalency.

Indicator B: The number of youth in grades 9 through 12 that dropout of school during a school year.

- Baseline: 240 (rate: 2.1%) youth dropped out of high school during the 1998/99 school year. (NYS rate: 4.1% of enrollment in grades 9-12-2002 Kids Count Data Book)
- **Standard:** No more than 170 (rate: 1.5%) youth drop out of high school during a school year.

Educational attainment (25 years & older): Percentage of high school graduates or equivalency (GED)

Oneida County	New York State	United States
79%	79.1%	80.4%

Males With No HS Diplom a or Equivalency 18.1% U.S. 28.6% 25.0% 0 neida C ty 30.7% 🗖 Age 25-34 🗖 Age 18-24 19.8% Utica 26.6% 37.9% R om e 43.4% 80.0 10.0% 20.0% 30.0% 40.0% 50.0%

(U.S. Census Bureau "American FactFinder", http://factfinder.census.gov.)



(Sex by Age by Educational Attainment for the Population 18 years and over. Census 2000 Summary File 3, U.S. Census Bureau "American FactFinder", http://factfinder.census.gov.)

White	118,688/145,583	81.5%
Black	4060/8024	50.6%
American Indian/Alaskan	200/350	57.1%
Asian	903/1615	55.9%
Hawaiian/Pacific Islander	28/39	71.8%
Other	485/1351	35.9%
2 or more races	1201/1884	63.7%
Hispanic	1601/4051	39.5%
White, non-Hispanic	117,735/143,481	82.1%

High School or Equivalency Attainment by Race/Ethnicity for 25 Years & Older

(U.S. Census Bureau "American FactFinder", http://factfinder.census.gov.)



(New York State Education Dept., http://www.emsc.nysed.gov.)

OBJECTIVE 2: Students will transition to living wage employment or higher education following graduation.

Indicator A: Plans for year following high school graduation stated by high school students.

• Baseline: An average of 40.7% of students in their junior year of high school plan to attend a 4 year college, and 39.3% of students plan to attend a 2 year college (NYS Education Dept.)

• Standard: At least 45% of students will plan to attend a four year college and at least 85% will choose a four or two year college.

School	4Yr.	2 Yr.	Other Post	Military	Employment	Other
	College	College	Secondary			
Adirondack	32%	31%	4%	4%	11%	17%
Clinton	63%	21%	0%	3%	8%	5%
Camden	25%	45%	1%	3%	21%	5%
Holland	36%	42%	2%	2%	2%	18%
Patent						
New Hartford	59%	33%	1%	1%	5%	0%
N.Y. Mills	61%	29%	0%	0%	7%	2%
Oriskany	28%	47%	9%	6%	9%	0%
Utica	37%	45%	0%	7%	10%	2%
Remsen	47%	32%	0%	6%	15%	0%
Rome	43%	46%	0%	3%	4%	5%
Sauquoit	28%	49%	0%	0%	15%	8%
VVS	39%	35%	4%	6%	9%	8%
Whitesboro	43%	45%	0%	1%	4%	6%
Westmoreland	32%	46%	3%	10%	8%	0%
Waterville	38%	44%	0%	3%	6%	9%
Average	40.7%	39.3%	1.6%	3.7%	8.9%	5.7%

High School Juniors' Plans for Year Following High School Graduation

(Distribution of 2000-2001 Graduated (All Students), Comprehensive Information Report, New York State Public School Report Cards, New York State Education Dept., http://www.emsc.nysed.gov.)

- The percentage of high school graduates or equivalency for Oneida County residents 25 years or over is comparable to that of New York State and only slightly below the United States as a whole at 79%.
- However, discrepancies are apparent by geographical location, with higher rates of non-completion in the city of Utica and particularly the city of Rome.
- More analysis of geographical disparity and racial or ethnic disparity may help to fine-tune intervention efforts in this area. Racial and ethnic disparities mirror national findings of much lower completion rates for Black and Hispanic families.

2. Income

OBJECTIVE #3: Children and families will have income above the poverty threshold.

Indicator A: Percentage of families with children under 18 below poverty level.

• Baseline: 16.5% of families with children <18 and 23.8% of families with children under 5 had incomes under the poverty level in Oneida County in 1999,

compared to 16.9% NYS & 13.6% U.S < 18; 20.2% NYS & 17.0% <5. (Census 2000).

• Standard: No more than 15% of families with children < 18 and 20% of children < 5 will be under the poverty level in Oneida County.

Indicator B: Percentage of children and youth living below poverty (0-17 yrs.)

- Baseline: 23.3% (Oneida County) 23.3% (NYS) reported for 1998-Kids Count, 2002)
- Standard: No more than 20% of children and youth will be living below poverty.

Indicator C: Numbers of cases receiving TANF and Safety Net Assistance.

- Baseline: Family Assistance cases averaged 1455 per month in 2001, and Safety Net cases averaged 559 per month in 2001.
- Standard: Family Assistance and Safety Net Assistance cases will maintain their current levels, while providing service to anyone who needs it.



Families In Poverty	White	Black	American	Asian	Other	2 or More	Hispanic
			Indian			Races	
Total Families	8.0%	38.9%	23.0%	14.3%	45.2%	23.3%	43.0%
Married Couple	4.1%	15.7%	7.9%	9.4%	41.5%	16.0%	22.4%
Male H.H., no wife	13.6%	32.7%	0.0%	17.9%	25.4%	0.0%	44.5%
w/ children <18	21.0%	43.5%		24.0%	28.5%		45.4%
w/ children < 5	21.6%	21.6%					45.2%
Female H.H., no							
husband	25.6%	55.1%	62.5%	34.4%	57.6%	52.8%	67.8%
w/ children < 18	36.0%	61.6%	83.3%	47.0%	70.5%	57.6%	72.4%
w/ children < 5	46.5%	76.7%	66.7%	25.0%			85.3%

Oneida County Poverty Measures by Municipality:	% in Poverty of All Persons Under 5 Years Old:	% in Poverty of All Persons Under 18 Years Old:		
Oneida County	24.8%	19.4%		
Cities:				
Rome	31.5%	23.5%		
Sherrill	2.6%	2.6%		
Utica	44.5%	38.5%		
Towns:				
Annsville	17.3%	20.1%		
Augusta	21.6%	12.5%		
Ava	30.4%	28.8%		
Boonville	13.1%	13.5%		
Bridgewater	22.8%	12.1%		
Camden	17.7%	15%		
Deerfield	0.0%	.5%		
Florence	5.6%	10.1%		
Floyd	0.0%	5.6%		
Forestport	11%	11.4%		
Kirkland	15.3%	10%		
Lee	16.7%	13.3%		
Marcy	18%	9.8%		
Marshall	10.9%	15.3%		
New Hartford	3.6%	4.4%		
Paris	19.1%	10.3%		
Remsen	19%	10.9%		
Sangerfield	14.4%	11.3%		
Steuben	15.1%	10.7%		
Trenten	9.5%	8%		
Vernon	15.8%	15.7%		
Verona	8.9%	8.6%		
Vienna	12%	10.7%		
Western	11%	10.6%		
Westmoreland	7.3%	5.7%		
Whitestown	15%	15.1%		
Villages:				
Barneveld	0%	0%		
Boonville	8.3%	13.2%		
Bridgewater	28.3%	15.6%		
Camden	16.9%	17.8%		
Clark Mills (CDP)	16.3%	7.4%		
Clayville	22.2%	21%		
Clinton	10.2%	5.8%		
Holland Patent	6.1%	2.6%		
New Hartford	11.3%	6%		
New York Mills	30.5%	17.9%		
Oneida Castle	12.5%	13.2%		
Oriskany	13.8%	17.9%		
Oriskany Falls	46.7%	27.3%		
Prospect	0%	10.2%		
Remsen	35.6%	22.1%		
Sylvan Beach	16.9%	25.7%		
Vernon	12.7%	10.2%		
Waterville	25.2%	15.8%		
Whitesboro	17.3%	23.2%		
Yorkville	11.3%	26.5%		

(U.S. Census Bureau "American FactFinder", <u>http://factfinder.census.gov</u> Bold type indicates greater than county average as a whole)

- Family poverty rates are higher in all categories in Oneida County than for New York State as a whole or nationally. Especially of concern are single parent female-headed households with children under 5.
- Racial and ethnic disparities in poverty rates are of concern, with very high percentages of Black and Hispanic families, and therefore their children, living in poverty. Even Black and Hispanic married couple families have much higher rates of poverty than white families.
- Estimates for people under age 18 in poverty have shown a gradual rise in poverty for Oneida County, while nationally poverty rates were declining.
- National data also indicates disproportionate rates of poverty for Black and Hispanic youth.

3. Housing

OBJECTIVE #4: Housing stock is affordable.

Indicator A: Percentages of households in rental unit housing paying gross rent that is more than 35% of household income.

- Baseline: 32% of OC households pay more than 35% of their income for gross rent, compared to 33.4% of NYS & 29.5% of U.S. households.
- Standard: No more than 27% of households in Oneida County pay more than 35% of their gross income for gross rent.

Indicator B: Percentages of homeowners paying more than 35% of their household income for selected monthly costs with mortgage.

- Baseline: 13.4% of OC homeowners pay more than 35% of household income for selected monthly costs with mortgage (13.4% NYS; 15.8% U.S.).
- Standard: Maintain current percentage of homeowners who pay more than 35% of their household income for selected monthly costs with mortgage.



DP-4. Profile of Selected Housing Characteristics: 2000)
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GROSS RENT AS A PERCENTAGE OF HOUSEHOLD INCOME IN 1999				
	Rome	Utica	Oneida County	U.S.
Less than 15 percent	20.2	15.6	18.6	18.1
15 to 19 percent	15.6	11.4	13.1	14.3
20 to 24 percent	9.8	8.9	10.6	12.8
25 to 29 percent	11.6	9.8	10.5	10.4
30 to 34 percent	7.3	8.1	7.4	7.3
35 percent or more	30.7	39.2	32	29.5

Source: U.S. Census Bureau, Census 2000 Summary File 3.



(Source: U.S. Census Bureau, Census 2000 Summary File 3)

- Affordable housing is a strength of the area we live in, but 32% of renters in Oneida County still pay more than 35% of their household income for gross rent.
- Housing costs as a percentage of income are geographically disparate, with more attention needed for specific areas of the county and housing problems experienced in those neighborhoods.

4. Food

OBJECTIVE #5: Families will have sufficient food resources without assistance programs.

Indicator A: Percentage of child & youth population receiving Food Stamps.

- Baseline: 14.9% of OC youth received Food Stamps in 2000 (13% NYS, 11.5% Albany, 9.7% Broome, 11.2% Schenectady Kids Count 2002).
- Standard: No more than 12% of OC youth will receive Food Stamps, while serving anyone in need.

Indicator B: Numbers of individuals and families using Food Pantries.

- Baseline: Total meals given by food pantries with CNY Food Bank in 2001 were 341,190.
- Standard: No more than 340,000 total meals will be given by Food Pantries annually, while serving anyone in need.

Indicator C: Percentages of students receiving free & reduced price lunch.

- Baseline: 18.8% of OC students received free lunch in 00/01 school year, and 8.2% received reduced price lunch.
- Standard: 13.8% of students will receive free lunch, & 5% of students will receive reduced price lunch, while serving anyone who qualifies.



(District-wide public school summary comprehensive information reports. NYS Dept. of Education. www.emsc.nysed.gov/repcrd2002/c41_dist.html)

Meals given by Central New York Food Bank Member Food Pantries in Oneic	la
County ^{vi}	

Months	Children	Adults	Seniors	Total Ind.
Jan-June	25,271	102,158	13,042	140,471
Jul-Dec.	28,666	97,996	22,998	149,660
Total	53,937	200,154	36,040	290,131
Jan-June	32,328	102,930	16,835	152,093
Jul-Dec.	39,637	126,489	22,971	189,097
Total	71,965	229,419	39,806	341,190
Jan-June	30,991	116,619	18,656	166,260
	Jan-June Jul-Dec. Total Jan-June Jul-Dec. Total	Jan-June25,271Jul-Dec.28,666Total53,937Jan-June32,328Jul-Dec.39,637Total71,965	Jan-June25,271102,158Jul-Dec.28,66697,996Total53,937200,154Jan-June32,328102,930Jul-Dec.39,637126,489Total71,965229,419	Jan-June25,271102,15813,042Jul-Dec.28,66697,99622,998Total53,937200,15436,040Jan-June32,328102,93016,835Jul-Dec.39,637126,48922,971Total71,965229,41939,806

(CNY Food Bank Statistics)

• Meals given by food pantries rose from 2000 to 2001 by 15 percent and show every indication of rising again in 2002 by as much or more.

- Numbers of families receiving non-TANF Food Stamps rose 12% from 2000-2001.
- In two surveys completed at Food Bank sites in Rome and Utica, about ½ of the applicants lacked high school diplomas, nearly 40% reported a physical or mental disability, and nearly one-third indicated they were unemployed but desired employment.
- Free and reduced lunch rates in Oneida County indicate extremely high rates for the city of Utica, high rates in Rome and Sherrill, and equally high rates in some rural areas such as Adirondack, Camden, Remsen, and Waterville.

5. Health Care

OBJECTIVE #6: Adults and children will have health care insurance.

Indicator A: Percentage of uninsured children.

- Baseline: Estimates from the 1997 Census Population Survey indicated that 16% of children in Oneida County were uninsured or underinsured (n=10,026).
- Standard: No more than 5% of children will be uninsured or underinsured.

Indicator B: Percentage of uninsured adults.

- Baseline:
- Standard:

National statistics regarding insurance status for U.S. population

Age Group	Percentage of age group Insured
< 18	88.3%
18-24	71.9%
25-64	83.30%
65+	99.2%

Race/Ethnicity/Socioeconomic Status	Percentage of group uninsured
Poor	30.7%
Hispanic	33.2%
Non-Hispanic White	10%
Black	19%

(Health Insurance Coverage: 2001. Current Population Reports, U.S. Census, 2002)

Points to Consider:

• Statewide, the enrollment of children in Child Health Plus increased 11% from July '01-January '02 (n=55,123 children, 40,174 of whom were in NYC).

- Nationally, the estimate of the uninsured rose from 4% to 14.6% from 2000-2001 representing 41.2 million people. (est. based on 2002 Current Population Survey conducted by U.S. Census Bureau).
- Key demographic factors for uninsured status are age, race & Hispanic origin, nativity, and educational attainment.

Recommendations for further research or development:

- We need more information on homelessness and the need for emergency housing.
- We need more information about the disparities of housing needs across the towns and villages of the County (Waiting list for Section 8 housing may be an appropriate indicator for City of Utica).
- TANF & Food Stamp usage should be reported as a *rate* to be able to make comparisons across geographical locations.
- Access to health care and needed medications need to be assessed, as well as the effects of chronic illnesses or conditions upon a family's resources.
- Local statistics on the numbers of insured and uninsured are needed.

PRIORITY II: POSITIVE FAMILY MANAGEMENT & SAFE RESOLUTION OF FAMILY CONFLICTS.

Risk Factor: Family Management/Family Conflict

Overview: Poor family management practices include a lack of clear expectations for behavior, failure of parents to monitor their children (knowing where they are and who they-re with), and excessively severe or inconsistent punishment. In addition, persistent, serious conflict between primary caregivers or between caregivers and children appears to enhance risk for children raised in these families. Whether the family is headed by two biological parents, a single parent, or some other primary care giver, children raised in these families are at higher risk of developing all of the health and behavior problems: substance abuse, delinquency, violence, teen pregnancy and school dropout. (DRP, 2000)

Vision: Families are knowledgeable about child development and appropriate, effective family management practices and have sufficient support from extended family, friends, and community. Conflicts, inevitable in family life, are resolved in a manner that provides safety for all family members and predictability and security for children and youth.

Indicators of Family Management/Family Conflict

OBJECTIVE #1: Parents provide clear expectations for the behavior of their children.

Indicator A: Percentage of youth who report parents set clear rules for them to follow on the TAP survey.

- Baseline: 58.9% of youth reported their parents often or always set clear rules for them to follow (TAP Survey 1999).
- Standard: 75% of youth will report that their parents often or always set clear rules for them to follow.

Indicator B: Percentage of youth who report parents talk with them about risky behaviors on the TAP survey.

- Baseline: 24.7% of youth report parents talk to them about the risks of being sexually active, and 32.9% report parents talk to them about the risks of alcohol and other drug use (TAP Survey 1999).
- Standard: 40% of youth will report that their parents talk to them about the risks of being sexually active and of drug and alcohol use.

OBJECTIVE #2: Parents monitor their children's activities in developmentally appropriate ways.

Indicator A: Percentage of youth who report their parents know where they are when they are not at home on the TAP Survey.

- Baseline: 70.6% of youth report their parents often or always know where they are when they are not at home (TAP Survey 1999).
- Standard: At least 75% of youth will report that their parents often or always know where they are when they are not at home.

Indicator B: Percentage of youth who report that their parents know their friends.

- Baseline: 71.3% of youth report that their parents often or always know their friends (TAP Survey 1999).
- Standard: At least 76% of youth will report that their parents often or always know their friends.

Indicator C: Percentage of youth who report their parents are interested and encourage them in their school and other activities.

- Baseline: 68.6% of youth report that their parents are interested and encourage them in activities.
- Standard: At least 74% of youth will report that their parents are interested and encourage them in activities.

OBJECTIVE #3: Parents physically care for and discipline their children in developmentally appropriate ways.

Indicator A: Percentage of youth who report that their parents discipline them or punish them when they break the rules.

- Baseline: 46.9% of youth report their parents often or always discipline or punish them when they break the rules (1999 TAP Survey).
- Standard: At least 60% of youth will report that their parents often or always discipline or punish them when they break the rules.

Indicator B: Number and rate of children and youth ages birth to 17 years in foster care.

- Baseline: 377 youth for a rate of 6.5/1,000 OC youth were in foster care in 2000 (8.5/1,000 NYS, 9/1,000 Albany, 7.2/1,000 Broome, 8.6/1,000 Schenectady -Kids Count, 2002).
- Standard: The rate of OC children and youth in foster care will be no more than 6.0/1,000, while serving everyone in need.

Indicator C: Percentage of youth reporting on the TAP Survey that they have not been physically hurt by an adult at home.

- Baseline: Over 90% of the youth indicated that they had not been physically hurt by an adult at home (1999 TAP Survey).
- Standard: 92% of the youth will indicate that they have not been physically hurt by an adult at home.

Indicator D: Rate of indicated reports of child abuse and maltreatment.

- Baseline: 33.8% of total reports received in 2000 were indicated (n=655) (32.7% NYS, 42.6% Albany, 25.4% Broome, 30.4% Schenectady Kids Count, 2000).
- Standard: No more than 30% of total reports will be indicated for child abuse and maltreatment, while maintaining standards of best practice.

OBJECTIVE #4: Parents manage conflicts and get along with each other, whether as marital partners or, when separated or divorced, as co-parenting partners.

Indicator A: Domestic Violence Orders of Protection.

- Baseline: 869 Temporary and Permanent Orders of Protection were given in the various Courts in 1999.
- Standard: No more than 850 Orders of Protection will be given, while still identifying and responding to anyone in need.

Indicator B: Number of domestic violence hotline calls received by YWCA of the Mohawk Valley

- Baseline: In 2001, 1578 calls were received.
- Standard: No more than 1500 calls for domestic violence assistance will be received, while still identifying and responding to anyone to need.

Indicator C: Shelter usage by women and children for domestic offenses.

- Baseline: 108 women and 128 children were provided shelter in Oneida County in 2001.
- Standard: No more than 90 women and 100 children will require shelter, while identifying and responding to anyone in need.

Indicator D: Contested custody cases in Family Court.

- Baseline:
- Standard:

Indicator E: Percentage of students who report they worry a fair amount to a lot about how well their parents get along with each other.

- Baseline: 31.2% of students worried a fair amount to a lot about their parents getting along (1999 TAP Survey).
- Standard: No more than 25% of students will report worrying a fair amount to a lot about their parents getting along.



Hotline calls for domestic violence



Shelter Usage by Women and Children 1991-2001^{vii}

Year	Women	Children
1991	146	162
1992	130	136
1993	109	105
1994	125	162
1995	114	142
1996	126	163
1997	92	96
1998	80	92
1999	86	92
2000	88	84
2001	108	128

(YWCA of the Mohawk Valley, Utica, New York.)

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Court Orders	1998	1999
Family Court	971	750
Lower Courts (Cities)	35	54
County Court	8	10
Supreme Court	7	15
Town & Village Courts	58	40
Total	1,079	869

Orders of Protection logged in the Domestic Violence Registry from Oneida County Courts

(Domestic Violence Registry, New York State Court System, Albany, N.Y.).

OBJECTIVE #5: Parents provide a healthy start to children by adequate care during pregnancy and birth.

Indicator A: Rate of births to women receiving early (first trimester) care.

- Baseline: Rate of Oneida County women having prenatal care during first trimester in 2000 is 75.7/1,000. (72.8/1,000 NYS, 79.3/1,000 Albany, 79.5/1,000 Broome, 79.2/1,000 Schenectady) (Source: http://www.health.state.ny.us/nysdoh/search/index.htm).
- Standard: The percentage of women having prenatal care during the first trimester will be no less than 84%.

Points to Consider:

- Orders of Protection provide one measure of severe conflict, but many cases of domestic assault are still undocumented.
- Domestic Incident Reports are only now beginning to be tracked reliably by local police (City, Sheriff's, State Police) due to improved monitoring and tracking capabilities.
- Use of Court Advocates in domestic violence cases may become a more reliable indicator of incidence over time.
- Mandatory arrest for domestic assault is a controversial policy nationally, because follow-up studies have shown *increased abuse* with men of lower socioeconomic status, and arrest results in a deterrent to further abuse more often with men who are employed and face social consequences that are meaningful to them.
- Few domestic calls or Orders of Protection in Court result in any mandated consequences for those who assault spouses or partners.

Recommendations:

- 1. Improve monitoring and tracking systems for better social indicators and meaningful data at the local level.
- 2. Research indicators and ability to provide data locally that will have meaningful comparisons at the state and national level.
- 3. Work with police agencies to establish a meaningful indicator and baseline information for Domestic Incident Reports (DIRS) from local, county, & state police agencies.
- 4. Need to track prenatal care throughout pregnancy as an indicator.
- 5. Follow developments nationally for tracking and monitoring family interactions.

6. Data needed for indicators of monitoring, discipline, and setting clear expectations for young children – all data from middle and high schoolers.

PRIORITY III: EARLY CHILDHOOD ADJUSTMENT

Risk Factor: Early & Persistent Anti-Social Behavior

Overview: A relationship has been found between male aggressiveness in kindergarten through second grade and delinquency and teenage drug abuse. The risk is especially significant when this aggressiveness is coupled with shyness and withdrawal. About 40% of boys with serious aggressive behavior problems in early elementary grades will develop delinquency and drug problems as teenagers. This also applies to aggressive behavior combined with hyperactivity or attention deficit disorder.

Vision: Children are successful academically and socially during their early childhood and elementary school years. Any developmental delays or problems are intercepted, and early intervention facilitates positive adjustment in family, school, peer, and community environments.

Indicators of Early Childhood Adjustment

OBJECTIVE #1: Developmental delays or behavior problems are identified and addressed as early as possible.

Indicator A:

- Baseline
- Standard

Indicator B:

- Baseline
- Standard

OBJECTIVE #2: Children will be developmentally ready for school.

Indicator A:

- Baseline
- Standard

Indicator B:

- Baseline
- Standard

OBJECTIVE #3: Elementary school age children will have positive academic and social adjustments.

Indicator A: Percentage of 4th grade Language Arts students testing at or above Level 3.

Baseline: 69.2% of students tested at or above Level 3 in 1999-00 – (NYS, 58.9% - Kids Count 2002).

• Standard: At least 70% of students will test at or above Level 3 in Language Arts.

Indicator B: Percentage of 4th grade Mathematics students testing at or above Level 3.

- Baseline: 78.5% of students tested at or above Level 3 in 1999-00 (NYS, 65.1%-Kids Count, 2002).
- Standard: At least 80% of students will test at or above Level 3 in Mathematics.

OBJECTIVE #4: Children will have safe places for recreational, educational, and social opportunities after school.

Indicator A:

- Baseline
- Standard

Indicator B:

- Baseline
- Standard

Points to consider (from discussions with key informants for this age group):

- Schools currently screen elementary-aged children in kindergarten screening, Child Study Teams, and Committees on Special Education.
- Schools do these in idiosyncratic ways and also track and report their information in different ways.
- Indicators that are routinely kept are: In-school suspensions, out of school suspensions, and truancy/attendance.
- Schools have different information systems ranged from sophisticated to pencil and paper and uses range from reporting only by mandate to making information available to teachers/counselors on individual children for intervention.
- Behaviors that might be useful to track in elementary school are:
 - * Disrespect/Lack of concern for peers * Highly impulsive behaviors *Physical aggression *Verbal aggression
 - *Self-harm (including cutting, excessive hair pulling, picking at skin) *Sexually suggestive behaviors *Disregard for authority

Recommendations:

- 1. Develop a system to track social indicators over time for intervention planning and noting progress and to screen in a preventive fashion for problems showing up early on in preschool and elementary-aged school children.
- 2. Adopt a simple primary screening tool that could be used by parents & teachers in all schools in Oneida County (CANS adopted by Dept. of Mental Health)
- 3. How many schools have maintained a Primary Project in their elementary school, and how many students do they reach? Should this be a focus for intervention?
- 4. Work with elementary school principals and superintendents to implement a uniform strategy and tracking system that will help us to identify baseline and standard measures.

PRIORITY IV: OPPORTUNITES FOR BONDING AND CONNECTION FOR CHILDREN AND YOUTH.

Risk Factor: Alienation and Rebellion

Overview: Young people who feel they are not part of society, are not bound by rules, don't believe in trying to be successful or responsible, or who take an active rebellious stance toward society, are at higher risk of drug abuse, delinquency, and school dropout. In middle or junior high school, those students who rebel against authority, particularly their parents and school officials, and who do not attend church tend to be at higher risk for abuse problems than those who are bonded to the primary social groups of family, school, church and community (DRP, 1997).

Vision: Children & youth will bond with and be connected in positive ways to their families, schools, peers, communities and have a healthy sense of their own well-being.

Indicators of Bonding & Connection for Children & Youth

OBJECTIVE 1: Youth will bond with their families.

Indicator A: To increase the percentage of youth that report on the TAP Survey that they are not worried or concerned about getting along with their parents.

- Baseline (1999 TAP Survey): 23% of the youth indicated that they were not at all worried or concerned about getting along with their parents.
- Standard: 25% of the youth will indicate that they are not at all worried or concerned about getting along with their parents.

Indicator B: To increase the percentage of youth that report on the TAP Survey that they are not at all concerned that no one loves or cares about them.

- Baseline (1999 TAP Survey): 65% of the youth indicated that they were not at all concerned that no one loved or cared about them.
- Standard: 70% of the youth will indicate that they are not at all concerned that no one loved or cared about them.

Indicator C: To decrease the percentage of youth that report on the TAP Survey that they have seriously thought about running away from home during the past year.

- Baseline (1999 TAP Survey): 38% of the youth indicated that they had seriously thought about running away from home during the past year.
- Standard: 35% of the youth will indicate that they have seriously thought about running away from home during the past year.

OBJECTIVE 2: Youth will bond with their schools.

Indicator A: To increase the percentage of youth that report on the TAP Survey that they agree that they enjoy going to school.

- Baseline (1999 TAP Survey): 67% of the youth indicated that they agree that they enjoy going to school.
- Standard: 70% of the youth will indicate that they agree that they enjoy going to school.

Indicator B: To decrease the percentage of youth that report on the TAP Survey that they agree that they will probably drop out before they complete high school.

- Baseline (1999 TAP Survey): 7% of the youth indicated that they agree that they will probably drop out before they complete high school.
- Standard: No more than 5% of the youth will indicate that they agree that they will probably drop out before they complete high school.

Indicator C: To increase the percentage of youth that report on the TAP Survey that they agree that they feel safe in their school.

- Baseline (1999 TAP Survey): 82% of the youth indicated that they agree that they feel safe in their school.
- Standard: 85% of the youth will indicate that they agree that they feel safe in their school.

OBJECTIVE 3: Youth will have positive peer relations.

Indicator A: To increase the percentage of youth that report on the TAP Survey that they agree that they are happy with the number of friends that they have and the quality/strength of their friendships.

- Baseline (1999 TAP Survey): 87% of the youth indicated that they agree that they are happy with the number of friends that they have and the quality/ strength of their friendships.
- Standard: 90% of the youth will indicate that they agree that they are happy with the number of friends that they have and the quality/ strength of their friendships.

Indicator B: To increase the percentage of youth that report on the TAP Survey that they are not worried or concerned about not fitting in with the other kids at school.

- Baseline (1999 TAP Survey): 77% of the youth indicated that they were not at all worried or concerned about not fitting in with the other kids at school.
- Standard: 80% of the youth will indicate that they are not at all worried or concerned about not fitting in with the other kids at school.

Indicator C: To increase the percentage of youth that report on the TAP Survey that they are not worried or concerned about getting along with people of other races.

- Baseline (1999 TAP Survey): 79% of the youth indicated that they were not at all worried or concerned about getting along with people of other races.
- Standard: 82% of the youth will indicate that they are not at all worried or concerned about getting along with people of other races.

OBJECTIVE 4: Youth will bond with their communities and follow community norms.

Indicator A: To increase the percentage of youth that report on the TAP Survey that they agree that they feel safe in their community.

- Baseline (1999 TAP Survey): 83% of the youth indicated that they agree that they feel safe in their community.
- Standard: 85% of the youth will indicate that they agree that they feel safe in their community.

Indicator B: To increase the percentage of youth that report on the TAP Survey that they agree that there are many fun things for kids their age to do in their community.

- Baseline (1999 TAP Survey): 43% of the youth indicated that they agree that that there are many fun things for kids their age to do in their community.
- Standard: 50% of the youth will indicate that they agree that there are many fun things for kids their age to do in their community.

Indicator C: To increase the percentage of youth that report on the TAP Survey that they never have gotten in trouble with police in the community.

- Baseline (1999 TAP Survey): 75% of the youth indicated that they had never gotten in trouble with police in the community.
- Standard: 80% of the youth will indicate that they have never gotten in trouble with police in the community.

Indicator D: To decrease the number of youth adjudicated PINS as reported by the Oneida County Probation Department.

- Baseline (2001): 142 youth were adjudicated PINS.
- Standard: 140 youth will be adjudicated PINS, holding numbers steady even with increase to age 18 for PINS.

OBJECTIVE 5: Youth will have healthy beliefs in their own competency and well-being.

Indicator A: To decrease the percentage of youth that report on the TAP Survey that they agree that they are not able to do things as well as most other people.

- Baseline (1999 TAP Survey): 36% of the youth indicated that they agree that they are not able to do things as well as most other people.
- Standard: 30% of the youth will indicate that they agree that they are not able to do things as well as most other people.

Indicator B: To increase the percentage of youth that report on the TAP Survey that they did not feel depressed, helpless, hopeless or very sad for a period of two weeks or longer during the past six months.

• Baseline (1999 TAP Survey): 60% of the youth indicated that they had not felt depressed, helpless, hopeless or very sad for a period of two weeks or longer during the past six months.

• Standard: 65% of the youth will indicate that they had not felt depressed, helpless, hopeless or very sad for a period of two weeks or longer during the past six months.

Indicator C: To decrease the percentage of youth that report on the TAP Survey that they had ever seriously considered suicide during the past 12 months.

- Baseline (1999 TAP Survey): 24% of the youth indicated that they had ever seriously considered suicide during the past 12 months.
- Standard: 22% of the youth will indicate that they had ever seriously considered suicide during the past 12 months.

Indicator D: To decrease the percentage of youth that report on the TAP Survey that they had actually attempted suicide during the past 12 months.

- Baseline (1999 TAP Survey): 9% of the youth indicated that they had actually attempted suicide during the past 12 months.
- Standard: 7% of the youth will indicate that they had actually attempted suicide during the past 12 months.

Indicator E: To decrease the number of youth ages 15-19 years that are hospitalized due to self-inflicted injuries as reported in the New York State Kids Count Data Book as a three year average.

- Baseline: Based on a three average for 1998-2000, 19 youth (Rate: 112.9) were hospitalized due to self-inflicted injuries. (NYS rate: 95.7 per 100,000, Albany rate: 83.7 per 100,000, Broome rate: 93.1 per 100,000, Schenectady rate: 124.7 per 100,000 2002 Kids Count Data Book)
- Standard: Based on the three year for 2000-2002, 15 youth (Rate: 90) will be hospitalized due to self-inflicted injuries.

Points to Consider:

- 1. Students in middle and high school report worry about conflict with their families and concerns that no one loves or cares about them. In addition, nearly 40 percent of students said they seriously considered running away.
- 2. Below half of youth agreed there were fun things to do in the community, and only 75% of youth indicated they had never been in trouble with police.
- 3. Percentages of youth reporting depression, suicidal ideation, or suicide attempts were high and higher than national averages.

Recommendations:

- 1. To target interventions, further analysis for relevant variables such as geographical location, family structure, race/ethnicity, age and gender would be helpful.
- 2. Improve tracking and monitoring of youth through the school system and linkages to mental health services and alcohol/substance abuse services.
- 3. Monitor increase in PINS to age 18 and needed interventions for youth and families.

PART III

BEHAVIORAL OUTCOMES TARGETED FOR IMPACT IN CTC MODEL

Problem Behavior: Substance Abuse

Indicator A: Percentage of youth that report on the TAP Survey that they have not smoked cigarettes during the past 30 days.

- Baseline (1999 TAP Survey): 75% of youth indicated that they had not smoked cigarettes during the past 30 days.
- Standard: At least 80% of youth will report that they have not smoked cigarettes during the past 30 days.

Indicator B: Percentage of youth that report on the TAP Survey that they have had 5 or more alcoholic drinks within a two or three hour period during the past month.

- Baseline (1999 TAP Survey): 33% of youth indicated that they have had 5 or more alcoholic drinks within a two or three hour period during the past month.
- Standard: No more than 28% of youth will indicate that they have had 5 or more alcoholic drinks within a two or three hour period during the past month.

Indicator C: Percentage of youth that report on the TAP Survey that they use marijuana at least a few times per month.

- Baseline (1999 TAP Survey): 12.5% of youth indicated that they use marijuana at least a few times per month.
- Standard: No more than 10% of youth will indicate that they use marijuana at least a few times per month.

Indicator D: Number of intoxicated youth that are involved in auto accidents as reported in the New York State Kids Count Data Book.^{viii}

- Baseline: 27 (rate: 16.7/10,000) intoxicated youth were involved in auto accidents in 1999. (NYS rate: 8.3/10,000 in 1999, Albany rate: 14.2/10,000 in 1999, Broome rate: 19.4/10,000 in 1999, Schenectady rate: 14.7/10,000 in 1999 2002 Kids Count Data Book)
- Standard: The rate of intoxicated youth involved in auto accidents in OC will be no greater than 11.7/1,000.

Problem Behavior: Delinquency

Indicator A: Percentage of youth that report on the TAP Survey that they have gotten in trouble with police in the community in the past year.

• Baseline (1999 TAP Survey): 25% of youth indicated that they have gotten in trouble with police in the community in the past year.

• Standard: No more than 20% of youth will report getting into trouble with police in the past year.

Indicator B: Number and rate of youth (ages 13-15) that are arrested for property index crimes as reported in the New York State Kids Count Data Book.

- Baseline: 209 (rate: 22.3/1000) OC youth were arrested for property index crimes in 1999. (NYS rate: 13.4/1000 in 1999, Albany rate: 43.5/1000 in 1999, Broome rate: 28.1/1000 in 1999, Schenectady rate: 32.9/1000 in 1999 Kids Count Data Book, 2002)
- Standard: The rate for youth arrested for property index crimes in Oneida County will be no more than 17.3/1000.

Indicator C: Number of youth that are adjudicated as juvenile delinquents as reported by the Oneida County Probation Department.

- Baseline: 142 youth were adjudicated as juvenile delinquents in 2001 (Oneida County Probation Department).
- Standard: [Create a standard after review of comparative data]

Indicator D: To decrease the number of youth ages 13 through 15 that are arrested for violent crimes as reported in the New York State Kids Count Data Book.

- Baseline: In 1999, 29 (Rate: 3.1) youth were arrested for violent crimes (NYS rate: 7.5 per 1000, Albany rate: 3.8 per 1000, Broome rate: 1.9 per 1000, Schenectady rate: 3.9 per 1000 2002 Kids Count Data Book).
- Standard: No more than 23 (Rate: 2.5) youth will be arrested for violent crimes.

Problem Behavior: Teen Pregnancy

Indicator A: Percentage of youth that report on the TAP Survey that they have ever had sexual intercourse.

- Baseline (1999 TAP Survey): 30% of youth indicated that they have ever had sexual intercourse.
- Standard: No more than 25% of youth will indicate that they have ever had sexual intercourse.

Indicator B: Percentage of female youth that report on the TAP Survey that they have ever been pregnant.

- Baseline (1999 TAP Survey): 4.4% of female youth indicated that they have ever been pregnant.
- Standard: No more than 3% of female youth will indicate that they have ever been pregnant.

Indicator C: Number of youth (age 10-14) that have pregnancies as reported by the New York State Department of Health in their County Health Indicator Profiles.

• Baseline (County Health Indicator Profiles: 1996-2000): 13 youth ages 10-14 (rate: 1.6/1,000) have had pregnancies in 2000. (NYS-NYC rate: 1.0/1,000 in 2000,

1.6/1,000 for Albany in 2000, 1,3/1,000 for Broome in 2000, 1.4/1,000 for Schenectady in 2000 – Source: County Health Indicator Profiles: 1996-2000)

• Standard: The rate for pregnancy in 10-14 year-olds will be no more than 1.0/1,000.

Indicator D: Number of youth (age 15-19) that have pregnancies as reported by the New York State Department of Health in their County Health Indicator Profiles.

- Baseline: 473 youth ages 15-19 (rate: 59.5/1000) have had pregnancies in 2000. (NYS-NYC rate: 49.7/1000 in 2000, 49.7/1,000 for Albany in 2000, 53.4/1,000 for Broome in 2000, 79.6 for Schenectady in 2000 – Source: County Health Indicator Profiles: 1996-2000).
- Standard: The rate for pregnancies for 15-19 year-olds will be no more than 54.5/1,000.



Indicator E: Percentage of youth who are sexually active and report using some form of birth control, such as condoms, birth control pills, or a diaphragm.

- Baseline: 72.9% of students reported they never had sexual intercourse, 16.4% always or almost always used birth control, and 10.6% never or only sometimes used birth control.
- Standard: Less than 7% of students will report that they never or only sometimes use birth control.

Problem Behavior: School Drop-Out

Indicator A: To decrease the number of youth that annually drop-out of school as reported in the New York State Kids Count Data Book.

- Baseline: 313 (rate: 2.9% of those in grades 9-12) youth dropped-out of school during the school year 1998/99. (NYS rate: 4.1%, Albany rate: 2.2%, Broome rate: 2.9%, Schenectady rate: 3% 2002 Kids Count Data Book).
- Standard: Maintain an overall dropout rate of 2.9%.

Problem Behavior: Violence

Indicator A: Percentage of youth that report on the TAP Survey that they have been physically hurt by another teen in the past year.

- Baseline: 18% of youth indicated that they have been physically hurt by another teen in the past year (1999 TAP Survey).
- Standard: No more than 13% of youth will indicate that they have been physically hurt by another teen in the past year.

Indicator B: Percentage of female youth that report on the TAP Survey that another teen has ever had sexual intercourse with them when unwanted.

- Baseline: 2.7% of female youth indicated that another teen has ever had sexual intercourse with them when unwanted (1999 TAP Survey).
- Standard: No more than 2% of female youth will indicate that another teen has had sexual intercourse with them when unwanted.

Indicator C: Number of youth (ages 13-15) that are arrested for violent index crimes as reported in the New York State Kids Count Data Book.

- Baseline: 29 (rate: 3.1/1000) youth were arrested for violent index crimes in 1999. (NYS rate: 7.5/1000 in 1999, Albany rate: 3.8/1000 in 1999, Broome rate: 1.9/1000 in 1999, Schenectady rate: 3.9/1000 in 1999 2002 Kids Count Data Book).
- Standard: [Set standard by comparison with similar counties]

Indicator D: Number of youth (ages 10-19) that are hospitalized due to assaults (three year average) as reported in the New York State Kids Count Data Book.

- Baseline: 9 (rate: 25.3/100,000) youth were hospitalized due to assaults as an annual average 1998-2000. (NYS rate: 63.4/100,000 for 1998-2000, Albany rate: 27.5/100,000 for 1998-2000, Broome rate: 21/100,000 for 1998-2000, Schenectady rate: 31.7/100,000 for 1998-2000 2002 Kids Count Data Book).
- Standard: [Set standard by comparison with similar counties]

APPENDIX A: Data Worksheets

District	Free (98/99)	Free (99/00)	Free (00/01)	Reduced (98/99)	Reduced (99/00)	Reduced (00/01)
Adirondack	24.1	24.8	21.9	7.7	10.8	11.7
Camden	34.0	28.5	25.0	11.6	11.2	12.0
Clinton	10.1	8.5	7.9	4.5	3.1	2.8
Holland Patent	17.8	16.7	15.0	10.0	10.5	9.7
New Hartford	5.3	4.5	4.1	2.4	2.2	1.8
New York Mills	21.4	13.7	14.0	8.2	10.0	7.0
Oriskany	20.1	17.2	11.2	7.0	7.5	7.3
Remsen	21.3	25.4	18.1	11.4	11.6	14.5
Rome	33.0	34.3	28.6	7.1	9.3	7.2
Saquoit Valley	17.3	17.3	15.5	9.0	10.4	5.2
Sherrill	20.7	20.3	20.9	9.9	11.5	10.1
Utica	57.3	59.6	58.5	7.7	8.5	8.4
Waterville	25.5	19.7	19.0	7.7	6.5	8.7
Westmoreland	18.1	14.0	14.5	11.3	8.6	10.7
Whitesboro	7.6	9.6	8.4	2.0	3.2	3.4
Average			19			8.3

FREE/REDUCED PRICE LUNCH STATISTICS

SOURCE: New York State Department of Education. District-wide Public School Summary Comprehensive Information Reports. http://www.emsc.nysed.gov/repcrd2002/c41_dist.html

Marriage Dissolutions in Oneida County by Year and Type

	Total	Divorces	Annulments		
1997	782	782	0		
1998	824	822	2		
1999	883	877	6		
2000	893	891	2		
Divorces in Oneida County by Length of Marriage					

	Total	Under 5 Yrs.	5 to 9 yrs.	10 to 14 yrs.	15 to 19 yrs.	20 to 29 yrs.	30 or more yrs.	Not Stated
1997 1998	782 822	150 158	231 231	170 176	87 98	101 126	37 29	6 4
1999	877	154	245	187	142	105	44	0

Divorces in Oneida County by Legal Grounds

	Total	Cruelty	Abandonment	Imprisonment	Adultery	After Legal Separation	After Separation by Agreement	Not Stated
1997 1998	782 822	578 549	91 148	1	0	3	81 86	28 32
1998	877	558	167	3	10	4	94	41

Divorces in Oneida County by Number of Children Under 18

_	Total	No Children	1 Child	2 Children	3 Children	4 Children	5+ Children	Not Stated
1997	782	296	188	176	64	18	5	35
1998	822	323	185	202	61	16	3	32
1999	877	336	219	204	80	15	2	21

SOURCE:

New York State Department of Health. Vital Statistics of New York State. http://www.health.state.ny.us/nysdoh/vr/mainvs.htm

Females with no high school diploma or GED

	Rome	Utica	Oneida Cty	U.S.
Age 18-24	29.6%	26.6%	23.0%	21.8%
Age 25-34	14.7%	19.6%	12.3%	14.1%

Males with no high school diploma or

GŁ	=D	

Rome	Utica	Oneida Cty	U.S.
43.4%	26.6%	30.7%	28.6%
37.9%	19.8%	25.0%	18.1%

	Oneida	New York	U.S.	Albany	Broome	Schenectady
Poverty Status	County	State				
Families w/	16.5%	16.9%	13.6%	11.7%	14.4%	12.8%
children <18						
Families w/	23.8%	20.2%	17.0%	16.8%	19.8%	18.7%
children < 5						
Fam. w/ female H.H.						
children <18	41.3%	38.8%	34.3%	32.7%	36.5%	35.5%
children <5	57.8%	49.8%	46.4%	49.1%	52.5%	53.2%

PCT25. SEX BY AGE BY EDUCATIONAL ATTAINMENT FOR THE POPULATION 18 YEARS AND OVER [83] - Uni over

Data Set: Census 2000 Summary File 3 (SF 3) - Sample Data

Numbers of arrests for driving while intoxicated (DWI) in Oneida County by age group and sex 1999-2002

Age Group	2002	2001	2000	1999
18 & under	26	36	28	43
19	27	16	22	31
20	24	35	33	33
21-29	292	256	262	297
30-39	233	279	277	295
40-49	229	204	205	176
50-59	89	64	84	69
60-69	22	28	18	20
70 & over	6	9	7	10
Totals	948	927	936	974
	770M	796M	771M	824M
	178F	131F	165F	150F

Data Sources

America's children: Key national indicators of well-being, 2000. Interagency Forum on Child and Family Statistics (2002) (www.childstats.gov/ac2000.)

Central New York Food Bank, Syracuse, New York

Domestic Violence Registry, New York State Court System, Albany, New York.

Kids Count 2002 Data Book

NYS Department of Education,

NYS Dept. of Health, Vital statistics of New York State. http://www.health.state.ny.us/nysdoh/vr/mainvs.htm)

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ⁱ Data regarding youth population changes in Oneida County are taken from a report prepared by Steve Darman and Angela Cline, Children and youth population change in Oneida County, NY: 1990-2000, and published by the Arthur Levitt Public Affairs Center as a *Communities That Care Research Bulletin*, 1, 1, 2002.

ⁱⁱ America's Children 2000, <u>www.childstats.gov</u>.

ⁱⁱⁱ Data regarding race and ethnicity for Oneida County youth are taken from a report prepared by Steve Darman and Angela Cline, Children and youth population change in Oneida County, NY: 1990-2000, and published by the Arthur Levitt Public Affairs Center as a *Communities That Care Research Bulletin*, 1, 1, 2002.

^{iv} Divorce rate was calculated from number of divorces that occurred in the year 2000 reported through NYS Health Department and number of married couple families reported in the 2000 census x 1000. ^v See Miringoff & Miringoff, 1999, *Social Health of a Nation*.

^{vi} All food pantries do not report through CNY Food Bank, and the meals given, therefore, are an underrepresentation of need. Meals prepared and served at places such as Hope House and the Rescue Mission are also not included.

^{vii} Increases in 2001 were due to the addition of Lucy's House in Rome, a new shelter that provides greater access to services for women and children in the western part of the County.

^{viii} Local statistics for DWI arrests are provided in Appendix A for years 1999-2002. Further analysis of rates of arrest per age group and comparisons with other counties will be helpful in the future.