Strengths and Needs Assessment of Children and Families in Carroll County

Key Stakeholder Report

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Center for Health Program Development and Management University of Maryland, Baltimore County





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I. BACKGROUND

The Partnership for a Healthier Carroll County (Partnership) on behalf of numerous local partners, contracted with the Center for Health Program Development and Management (Center) at the University of Maryland, Baltimore County for assistance in assessing the needs of children and families in Carroll County. The project consists of three components: a report on secondary data, a survey of households, and key stakeholder interviews. Key stakeholders are identified as individuals with extensive knowledge of the needs of children and families. The objective of these interviews was to ascertain what was viewed as the strengths and weaknesses of the community in providing a supportive environment for children and families.

II. EXECUTIVE SUMMARY

The majority of the respondents were very positive about the fact that, overall, Carroll County is a great place to raise a family. For the most part, the providers work very well together and have made that part of their culture. Their concern is for the minority families who have low incomes, perhaps with language issues, whose needs are becoming increasing difficult to meet. They also expressed concern for the more affluent residents who are so busy commuting to work that they may not have the time to pay attention to the needs of their own children and families. The providers are somewhat resigned to the fact that they will have to continue to apply for grants to obtain funding for some programs. There is some hope that the new people moving into the county will become more involved in volunteering and contributing to some of the service needs. Some optimism exists that maybe the tax base will have more commercial/industrial base and thus more local resources will become available for programs. Finally, despite sometimes expressing overwhelming odds, the respondents seem determined to find a way to continue to work together to help the vulnerable population of Carroll County.

The Respondents: Overall, the respondents proved to be very caring and dedicated to the well-being of children and families in Carroll County. They were very proud of this community for being "child friendly" and a place where people move to raise their families. Despite sometimes overwhelming odds, the respondents seemed determined to find a way to continue to work together to help people in need.

Collaboration: Respondents were proud of the existing positive collaboration. The respondents were pleased that the Local Management Board assumed the role of facilitating efforts to secure funding for services. They were also encouraged by the Partnership's approach to benchmarking and trending data shared for use in grant applications.- Respondents expressed a desire to simplify systems and make them more user-friendly for providers and consumers. They also want data and services to be readily available, perhaps on a website. Collaboration between two agencies, DSS and the CSA, was identified as being more difficult to accomplish.

Services: All respondents were frustrated that they did not always have all the resources they needed to help children and families achieve their potential. They were very concerned about the future for those whose needs may not be met. While this was especially true in relation to low-income and minority families, the stakeholders were also concerned about some higher-income families who seem to be in denial about the problems facing their children, such as substance abuse, mental health, and children and adolescent sexuality issues. The higher socio-economic families' problems seem to center around having long commutes and less time for family, volunteerism, and community involvement. Some believe that the community needs to develop more after school recreational and educational opportunities for all



children and youth. The respondents would like to see more emphasis on prevention and early intervention.

Funding: The most important issue for the respondents was the lack of funding for the programs that would assist children and families. They were upset and angry about the trickle down effect in which the federal government and then the state cut budgets. The reality is that local government cannot always pick up the programs, for two reasons. One, the county does not have the tax base as they have more residential development and insufficient commercial and industrial revenue base. Two, the elected officials are still influenced by the anti-tax sentiment in the county and reluctant to fund these services. Some of the respondents think that the influx of newcomers moving into the county is on the verge of changing this anti-tax sentiment, as the newcomers may be more interested in funding services. Others think that the newcomers are too busy traveling outside the county for their employment to pay much attention to what is happening in the county. The result is that the respondents feel very dependent on grants. While they believe that Governor Ehrlich wants to help Carroll County, they understand that the state has fewer resources available.

III. CENTER ANALYSIS

Carroll County has been known as a rural county where everyone knows their neighbors and unites to meet each other's needs. However, it is becoming a more urban location with a significant number of people residing there but working elsewhere. With increased urbanization, there may be an increased reliance on public services to meet individual and family needs. This has created a cultural conflict that is reflected in elected officials' and some residents' ambivalence toward funding social service programs.

Based on what the key stakeholders had to say, as well as our researchers' independent observations, it appears that Carroll County is fortunate to have a core of health and human service professionals who: 1) are hard-working and passionate about residents receiving the services they need and 2) have found success in collaboration between programs and agencies. Areas that could use improvement include: 1) understanding and meeting the needs of the immigrant and non-English-speaking populations and 2) developing a strategic plan to address the need for leadership in mental health issues and the short- and long-term needs for mental health services.

Key Stakeholders as Individuals: Forty-six individuals were selected to provide depth and breadth in regard to the health and human service needs of Carroll County families and children. These key stakeholders were found to be both caring about and dedicated to those they serve. This group of individuals inevitably finds ways of helping those for whom they are responsible, even while sometimes facing overwhelming obstacles. We find their achievements and level of dedication impressive.

Every single one of the stakeholders interviewed showed sincere concern for the health of Carroll County residents. It appears that the majority of the residents are receiving exceptional value from these dedicated individuals who serve in both the public and private sectors. Of course, there are still some people who are not receiving the services they need. Fortunately, the key stakeholders are not going to give up until these needs are met.



Key Stakeholders' Collaborative Efforts: One individual can only do so much to help others, especially with limited resources. The respondents have learned that they can accomplish even more when collaborating with one another. This seems to be the operable culture. Many of the key stakeholders played a role in the formation of the Partnership, which is doing an excellent job of facilitating delivery of services without imposing undue requirements onto the other members. The membership consists of the usual entities (the hospital, health department, social service department, and juvenile justice service agencies), as well as atypical entities (the criminal justice system, recreation associations, faith community, and the library). Carroll County does not receive as much outside financial assistance for its health and human services as it needs, so this collaboration is essential to the strength of the community.

Next Steps: While more money is needed to address the emerging issues, the respondents exhibit strong leadership and a firm sense of their mission. We found two specific areas that require action. First, the increased population of immigrants and non-English-speaking individuals presents new challenges. There needs to be an assessment of their needs and a plan of action to meet those needs. Both populations should be involved in the process. Second, there is a lack of leadership in the area of mental health. A strategic plan should be developed and involve all affected persons. This plan should address goals, objectives, action steps, timelines, and the partners who will assist in its implementation.

IV. CHART OF FINDINGS

The following is a brief chart showing the strengths, weaknesses, opportunities, and threats (SWOT) to Carroll County based on the key stakeholders' comments. This chart is organized into four categories: Carroll County characteristics, providers, services, and funding. The respondents' comments were not subject to interpretation. Their responses were not necessarily backed by actual data in all cases, but rather were their impression based on their experiences with specific populations and issues.



	Strengths	Weaknesses	Opportunities	Threats
Carroll County Characteristics	Very family-oriented	Some sense of prejudice against:	Strong business community and more affluent people moving into the county may provide a source of financial contributions to programs	Opposition to locating social services in their neighborhood attitude exists with some residents
	A good place to raise children	A climate of anti-tax, anti- government, and anti-funding for social service programs	More new people moving into the county may provide a source of increased volunteerism.	At one point 49% of the children weren't ready for K.
	Rural quality of life	social service programs	increased volunteerism.	Housing costs are rapidly increasing and in some cases long term residents have had to move out of the county
	Low crime rate			CC has 400 complaints a year about child abuse and sexual abuse
	Above average church membership			State police data show that the #1 contact in cc is for domestic violence Concern that high income families
				are in denial about the problems facing their children
				Some of the people in the county have the attitude that people don't deserve a second chance.
				Needs of low income and minorities are increasingly becoming more difficult to meet



	Strengths	Weaknesses	Opportunities	Threats
	Providers believe the child is "the	A few providers feel left out of the	Provide staff with paid education and	Insufficient providers especially in
	reason for being"	planning process	training opportunities	the behavioral and dental areas
	Very dedicated, caring providers	Some agencies (CSA and DSS) are	Develop list of volunteers fluent in	Many programs are grant funded so
		viewed as not being as collaborative	Spanish to assist different agencies.	people are concerned that they may
Š		as others		not have a job when the grant ends
Providers	Attempt to do a lot with a little	Some providers (DSS and CATS	Work with the CSA and DSS to try	
Ĭ.Ž	resources	transportation system) appear to	and improve their functioning.	
Pr	Very innovative in securing grants	have a demeaning attitude toward	Opportunity for DSS to explore flex	
		clients	hours for their staff to better serve the	
			clients' needs	
	Low turnover of staff despite low	Lack of providers, especially in		
	salaries	mental health, dentistry, ESOL, and		
	Excellent collaboration among	literacy programs.		
	majority of the providers			
	Proud of their schools, hospital,			
	health department, courts, recreation			
	services, volunteer organizations,			
	etc.			

	Strengths	Weakness	Opportunities	Threats	
Services	The stakeholders feel the services are very good for the most part	Some services are either inadequate or non-existent. Some examples of this include: • Affordable public	Create a model for a single point of entry for services so that the consumer is better informed and served. Print brochures in Spanish	No suicide hot line in Carroll Co./referrals are made to Frederick and Howard counties Consumers find the social	
	Proud of the Suspension Center	 transportation Affordable housing Behavioral health inputiont 	Create public information center for the Hispanic	service system confusing to access No reliable public	
	Medical community and hospital staff are helpful	 Behavioral health inpatient facilities Early childhood programs (0-5) Before and after school programs Spanish-speaking individuals in schools and service agencies Better programs in the schools for pregnant teenagers 	facilities • Early childhood programs (0-5)	facilities community like the ones in Prince Georges and Montgomery counties	transportation system
	Health Department provides good services like dental		Develop more educational outreach programs to deal with the stigma of mental illness and the denial of teen sexuality issues Explore a mobile van for literacy programs to reach out to people in the rural areas	NIMBY attitude toward locating social service facilities in "my" neighborhood	
	Excellent library outreach programs-discovery zone and training in early literacy and proud of the Purple Book	 Parenting and mentoring programs Affordable recreational programs 	Create a community health clinic to meet the health needs of those who don't have access to health care or are underinsured		
	Good recreation programs where they are available		Adopt the Anne Arundel school system of not charging for child care programs in elementary school		
	Hospital ER is the key to treatment for MH/SA		Create a time out shelter for children with behavioral problems which would also help their families		
	Good educational system for most children		Provide a mentoring program for children similar to the one in Harford County		
			Adopt Montgomery County program that focuses on sobriety, urine tests, and education for hardcore SA abusers referred by DJS		
			Create more teen recreational centers, especially in areas outside of Westminster		



	Strengths	Weakness	Opportunities	Threats
	Successfully secured many grants which have become an essential source for social service and other	County tax is dependent primarily on residential source. This, combined with anti-tax sentiment, makes it difficult to obtain money for human services.	Create a tax district to fund an independent social service agency	Unlike other counties," we don't have a lot of local or community dollars".
	The LMB's work in coordinating and securing many grants	The trickle down budget cuts from the federal and state government has resulted in less money for county services	Fund more literacy programs like in Frederick and Montgomery Counties	Dependence on grants puts stress on both the providers and the consumers
Funding	The Partnership for their program of trending data and benchmarking results	Need accurate and readily available data on website to be able to apply for grants	Secure funding for a community health clinic to serve the uninsured and the underinsured.	Carroll Co. is very dependent on the residential tax base They don't have a lot of local dollars to use towards social service/recreational programs
		Prevention and early intervention grants are not emphasized enough	Applying for grants is essential as Carroll Co. faces more federal and state budget cuts	Some respondents think that the newcomers may be too busy commuting to pay attention to the needs of those less fortunate.
		Grants are time-consuming for staff	Need to increase the commercial/industrial tax base in order to bring in more revenue	Carroll Co. will probably continue to receive less from the federal and state governments due to the formularies
		Grants have a short life, yet the clients' problems persist	Hope that newcomers will change the anti tax attitude in the county and thus more dollars will be available for prevention and treatment programs	



V. SUMMARY OF RESPONSES BY QUESTION

The following section of this report presents each of the five interview questions, followed by a summary of the answers, including some specific respondent comments. Most of the comments are paraphrased but verbatim quotes were used where appropriate to maintain the quality of the comments.

Question 1: Strengths/Assets

Based on your unique expertise and background, what do you think are the community's greatest strengths/assets in assuring the well-being of children and families?

The majority of the responses fell into three topic areas:

- Quality of life
- Collaboration
- Programs

Quality of Life: An overwhelming number of the respondents are proud to live in Carroll County. Most respondents felt that their community takes pride in helping children and families. The community is viewed as very family-oriented, affluent, "homegrown," and safe. It has a strong business community and above average church membership. As someone put it, "people want to live here." Some who left as young adults have returned to raise their children. Some concern was raised about changes in the community with the influx of new residents who commute out of the county for employment and are not as involved in civic and human service issues. Also, it was noted that long-time residents now tend to be poorer. Some long-time residents have even had to leave the county because of the increased housing costs.

Collaboration: By far, the greatest community strengths mentioned were services/programs, and excellent collaboration/partnerships among the providers, both public and private. Respondents overwhelming expressed pride in their ability to collaborate and not duplicate effort. They gave numerous examples of how agencies work together, avoiding "turf battles." They often "see the kid as the reason for being." They praised the "unique" role of the Local Management Board in successfully bringing people together to apply for grants. They had positive feelings about the low turnover of the dedicated and skilled people who serve children and families, despite the relatively low wages. There was a real determination that this attitude and "way of doing business wasn't going to change." There was some concern that this does not always work around child/youth sexuality issues. Also, some respondents stated that "not everyone" is invited to contribute to the planning process. Anxiety was expressed that, as the county population grows, they might not be able to continue this outstanding collaboration. On the other hand, there was a sense of real pride that they had the best partnerships in the state. As one participant stated, "the federal agency is surprised by how much we work together."



Programs: The respondents are pleased with the work that their agencies and organizations are doing to help families and children achieve their potential. They gave many examples of this, including the hospital as the "point of entry," the "Purple Book," the charitable inclination of the churches, the benchmarking and trending of the Partnership, the work of the Health Department, the library literacy outreach program, and Head Start programs.

The Suspension Center was given as a good example of partnership. "In 30 to 45 days several agencies worked together to submit a grant and receive funding for the Suspension Center (½ day academic, ½ day counseling and community service)."

There was some concern that the families who need the services the most do not always utilize the programs, and that the funding for programs, especially those targeted at prevention, is being jeopardized. They are proud that they "do a lot with a little."

Question 2: Weaknesses

Based on your unique expertise and background, what do you think are the community's greatest **weaknesses in assuring the well-being of children and families**?

The majority of the responses fell into four topic areas:

- Exclusivity (low-income/minorities)
- Parental responsibility
- Agency's responsiveness
- Services

Exclusivity: Overall, there is some sense of prejudice or exclusivity throughout the community. There is great concern about the treatment of minorities and low-income people in Carroll County. Groups seem to be singled out from others and there seems to be a sense of not belonging on the part of some of the minorities. Racial minorities move to CC but return to their previous neighborhood for supports, like church services. The most prominent issue seems to be the language barrier. There are not enough services to support the increasing number of non-English speaking residents.

Parental Responsibility: In general, participants feel that parents are not spending the necessary time with their children, probably due to demanding careers, which often require them to travel outside the county. This lack of parental guidance directly affects children's behaviors. It also results in less - if any - time for adult volunteerism in human service/community activities.

Agency Responsiveness: Concerning the subject of agency responsiveness, many felt that social service agencies are not run efficiently as perhaps they could be. Overall, there is a reported lack of collaboration among some of the agencies. DSS and CSA were frequently mentioned as examples. Respondents noted a need for earlier intervention/prevention, more public support, and addressing issues that are being



ignored. Funding and regulations were emphasized as major barriers to increasing agency effectiveness.

There is concern about the lack of staff to help families and a lack of information about services as well. The increase of domestic violence, substance abuse, and especially mental health issues is seen as a severe problem. As one person said, "Mental heath is the biggest problem, but there is no public awareness." Finally, there is a real concern that the agencies will continue to deal with children and youth only when they are in serious trouble rather than concentrate more effort and funding on early intervention with both the child and the parent(s).

Services: Many feel that transportation services are too limited, housing is too expensive, and childcare is unattainable and unaffordable for low-income families. There is a real concern throughout the county that there is a negative attitude referred to as NIMBY ("Not In *My* Backyard"), which is the feeling that residents do not want certain services located in their neighborhoods that would help the children/families with behavioral problems. Part of the fear is that the service would also be available to children/adolescents outside of Carroll County.

Question 3: Opportunities—Existing or Potential

What **opportunities** exist to address these issues? (Include other local or national initiatives that you may have heard about and feel might work locally).

Eleven of the 46 responders had no suggestions when asked this question.

The following are programs or services that the responding key stakeholders felt would be beneficial to the families and children in Carroll County. Some of these are expansions of existing services, while others are model programs from other counties.

The majority of the comments fell into two categories:

- System change
- Program needs (funding existing and new programs)

System Change: Key stakeholders proposed streamlining the existing system to make it more user-friendly. Suggestions include having accessible data, developing a website for information, developing a single-point-of-entry for the consumer to access services, and "creating a tax district to fund an independent social service agency."

Program Needs: Respondents emphasized program needs for prevention and early intervention services. Suggestions included: early childhood (birth to 5 years) programs that would include parenting skills, parental support and mentoring, before and after school programs, community health and recreational centers, minority outreach, and transportation to the services.

When discussing program needs, respondents showed an overwhelming concern for the topic of behavioral health. The expressed needs include more public awareness and education about



mental health issues, single-point-of-entry for services, and adequate funding for existing mental health and substance abuse programs.

Additional services were strongly advocated for, such as group homes, halfway houses, mentoring, suicide hotline, time out shelter, intermediate support programs (something between charging the juvenile or in-school suspension), and wrap-around services. Several respondents expressed "frustration of kids coming home not having received treatment for himself or his family." They feel that "children are not prepared to re-enter the community because they had to go out of the county for inpatient services and thus the family usually wasn't involved in the treatment."

Question 4: Inside Barriers/Threats/Challenges

Are you aware of any threats/barriers/challenges <u>inside</u> the county/community to the strengths or opportunities mentioned above?

The majority of the responses fell into two topic areas:

- Funding
- Attitudes

The respondents were frustrated with the barriers inside the community, especially the lack of funding and the negative attitude expressed by some toward spending on programs for those in need. Many people in the community also do not seem to be willing to support the programs. They "need a subtle reminder ... of the cost of the children in the long run who don't get help."

Respondents were especially concerned about the need for services such as health/dental care, behavioral health, early childhood education and child care, wrap-around services and literacy programs. There are also concerns about affordable housing, shelter, transportation, and recreation services. There was an emphasis that attention should be paid to language and other outreach difficulties.

The behavioral health concerns were expressed as an overwhelming challenge due to lack of funding, parental denial, "lack of leadership on the part of the CSA," and community opposition to continuum of care facilities (group homes, shelters, etc.).

The biggest challenge seemed to be funding, especially since Carroll County is very dependent on its residential tax base. Also contributing to the funding issue is the relative wealth of its residents and the small number of low-income residents, which causes them to receive less money from the formulary than poorer jurisdictions receive. In addition, the cutbacks in support from outside the county, including United Way and the federal/state governments, have decreased or eliminated the aid to some programs. Now there is more pressure on the local government to pick up the costs, but the anti-tax sentiment of the residents makes it very difficult for the county commissioners to fund social services. "The result is that those in need of services may be worse off in Carroll County than those in poorer jurisdictions."



Question 5: Outside Barriers/Threats/Challenges

Are you aware of any threats/barriers/challenges <u>outside</u> the county/community (state or federal) to the strengths or opportunities mentioned above?

The respondents felt that there were many barriers, threats, and challenges from both the state and federal governments that were preventing them from providing essential services to children and families.

The concerns fell into four categories:

- Elected officials' responsiveness
- Laws and regulations
- Program needs
- Funding/grants

Elected Officials: As one of the respondents said, "People don't think they are affected in this beautiful county." "Neither the state nor federal elected officials seem to see the need for social service programs or are unable to deliver the worthwhile programs to Carroll County."

Laws and Regulations: Respondents expressed frustration with federal and state laws and regulations that do not deal with the reality of what is needed to help children and families achieve their potential. Opinions expressed include: "Another law passed, pieces of papers, regulations ... becomes unbelievable" and "Mounds of paperwork while the core services must be done. Direct service workers then don't have the time to do their job."

Program Needs: As one respondent stated, "DSS 'welfare-to-work' program expects a parent to work but doesn't give her support." There was an overwhelming concern for the budget climate in Maryland and the negative impact it would have on the services. One impact is that "kids of poor parents who have literacy problems start school without these skills and are seen as failures when they step in the door." They also expressed frustration with the lack of flexibility with the administration of some of the programs.

Funding/Grants: "No money for programs that make a difference" is the impression of the respondents to the trickle down budget effect from the feds, state, and United Way to the county. In addition, some agencies use "creative funding," such as Maryland Medicaid's approach to cutting reimbursement for providers. They are tired of hearing about all the dollars going to Baltimore City and Montgomery and Anne Arundel Counties because "our poor are just as needy." In an attempt to fund the programs, the agencies resort to grants but feel that "politicians don't want to fund the previous politician's project, so we have to get creative on how we write the grant." They realize that Carroll County doesn't have the tax base to fund many of the programs cut by other sources but are frustrated because of the reality that the grant is only a temporary solution, and in some cases not flexible and may take administrative time away from direct services.



VI. METHODOLOGY

The Steering Committee selected organizations from the following areas of interest:

Substance Abuse

Education

Literacy and Libraries

Early Childhood Development

Child Care

Social Services

Mental Health

Healthcare

Sexuality

Environmental Health

Recreation

Elected Officials

Faith Community

Business and Employment

Diversity

Disabilities

Law Enforcement and Courts

Juvenile Justice

A total of 56 potential respondents from the above areas of interest were sent a letter (Appendix A) explaining the purpose of the interview and inviting their participation.

The Center followed up by securing appointments with the potential respondents. Of the 56 key stakeholders, 46 agreed to be interviewed.

The interviews were conducted by phone between March 8 and April 1, 2004. The average interview took approximately 34 minutes. The Center guaranteed respondents that their comments would be confidential and not directly attributed to them or their organization.

The Center and the project Steering Committee developed five questions for the respondents, utilizing the **SWOT** (strengths, weaknesses, opportunities, and threats) approach. The **SWOT** framework was selected to provide a comprehensive perspective of the community's strengths and weaknesses.



Each stakeholder was asked five questions:

S	Based on your unique expertise and background, what do you think are the community's greatest strengths/assets in assuring the well-being of children and
	families?
W	Based on your unique expertise and background, what do you think are the
	community's greatest weaknesses in assuring the well-being of children and
	families?
О	What opportunities exist addressing these areas? (Include other local or national
	initiatives that you may have heard about and feel might work locally.)
	Are you aware of any threats/barriers/challenges inside the county/community to
T	the strengths or opportunities mentioned above?
	Are you aware of any threats/barriers/challenges outside the county/community
	(state or federal) to the strengths or opportunities mentioned above?

APPENDIX A: SAMPLE LETTER

Dear:

The Carroll County Local Management Board and The Partnership for a Healthier Carroll County are spearheading a comprehensive process to evaluate the needs of children and families. This endeavor includes secondary data analysis, conducting focus groups, implementing a household survey, and interviewing key stakeholders. This project is designed to give us the information we need to promote the well-being of children and families, in our community, through the development of a continuum of interagency community based resources and supports. With your help we can assist children and families in our community achieve their potential.

We believe that you, as a leader in the community, have significant knowledge/experience in this area. You have been chosen to be a key stakeholder. We would appreciate your giving us an opportunity to interview you as to your opinion on the following:

Based on your unique expertise and background, what do you think are your community's greatest strengths/assets in assuring the well-being of children and families? Prioritize these.

Based on your unique expertise and background, what do you think are your community's greatest weaknesses in assuring the well-being of children and families? Prioritize these.

What opportunities exist to address these areas? (Include other local or national initiatives that you may have heard about and feel might work in Carroll County.)

Are there internal threats/barriers/challenges to the strengths or opportunities mentioned above?

Are there external threats/barriers/challenges to the strengths or opportunities mentioned above?

Virginia M. Thomas, from the Center for Health Program Development and Management at the University of Maryland, Baltimore County, will contact you to determine a mutually agreeable time to solicit your ideas. The interviews will be conducted by phone and should be completed in 15 – 20 minutes. Your responses will be kept confidential. A summary of the responses from everyone will be the only product shared with the partnership

We hope that you will be willing to assist us in this very worthwhile endeavor.

Sincerely,

