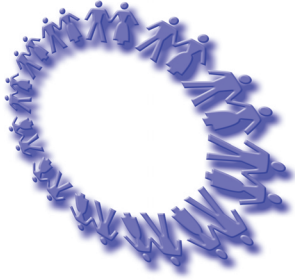


REPORT CARD 2004



KERN COUNTY
NETWORK FOR CHILDREN



KERN COUNTY NETWORK FOR CHILDREN

The Kern County Network for Children is pleased to present Report Card: 2004, our sixth community report card published to demonstrate the opportunities and challenges we all face as we strive to improve the conditions of children and families.

This year we are presenting the Report Card in a new format that will highlight Kern County's efforts to protect and enrich the lives of children. It's no secret that Kern County and other Central Valley communities in California share the state's worst child well-being statistics. However, we also share a passion for coming together to collectively solve issues facing Kern County residents.

The Kern County Network for Children's mission is:

"To protect and enrich the lives of children in Kern County through the commitment of all community partners by helping to build and sustain healthy families."

We take this commitment to improving lives seriously, and we encourage everyone in Kern County to look within to discover positive, proactive ways that they can contribute to improving the lives of children.

Report Card: 2004 highlights child well-being indicators with a focus on child abuse. The violence to and death of children in our community is horrific and often divisive. As indicated in the Network's mission statement, we believe wholeheartedly that only through a commitment to working together to make sure families are stable and self-sufficient will we be able to make strides in our ability to improve child well-being in Kern County.

For the first time, Report Card: 2004 contains community highlights that describe some of the successful strategies used in Kern County to care for at-risk children and youth. It is our hope that by raising awareness of the collective successes of these projects and the children they serve, we can galvanize our efforts to protect and enrich the lives of all children.

Thank you to everyone who advocates for children by coming together, understanding our strengths and weaknesses, and moving forward in our work.

Regards,

Stephen L. Sanders
Executive Director

**"COMING TOGETHER IS A BEGINNING,
KEEPING TOGETHER IS PROGRESS
WORKING TOGETHER IS SUCCESS."**

HENRY FORD

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What Impacts Neglect and Abuse?

Children

Children with significant physical, emotional, or educational needs have greater risk of neglect and abuse.

Children who are healthy, have positive self-esteem and avoid negative peer relationships have reduced risk.

Families

Families with less parent-child interaction, poor supervision of children and few social supports have greater risk.

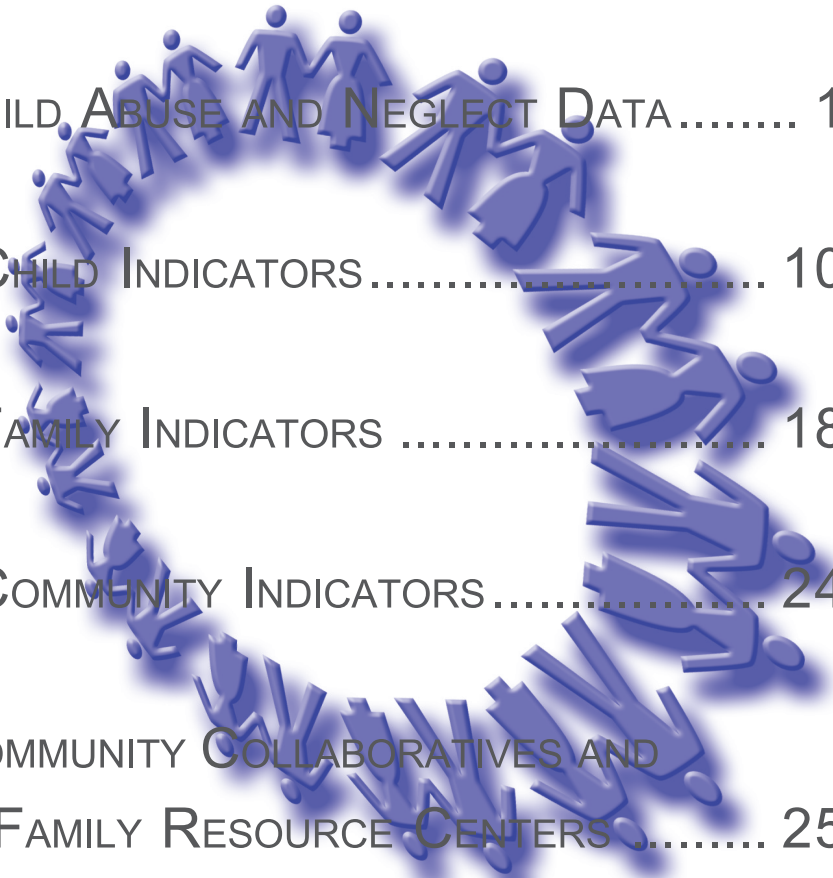
Families with a strong support network, healthy adult relationships and positive feelings about parenting have reduced risk.

Communities

Communities with multiple, ongoing social issues such as poverty, unemployment and violence have greater risk.

Communities that focus attention on children and families, provide accessible health and social services and work together to successfully address social issues have reduced risk.

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CHILD ABUSE AND NEGLECT DATA

GOALS & OUTCOMES

Kern County Department of Human Services' Child Protective Services (CPS) department is required by law to investigate reports of suspected abuse made by concerned individuals and mandated reporters.

The State of California has designated a set of core goals for all counties related to child safety, family well-being and home permanency. By using data compiled electronically through the *Child Welfare Services Case Management System*, each county must measure effectiveness in the following areas:

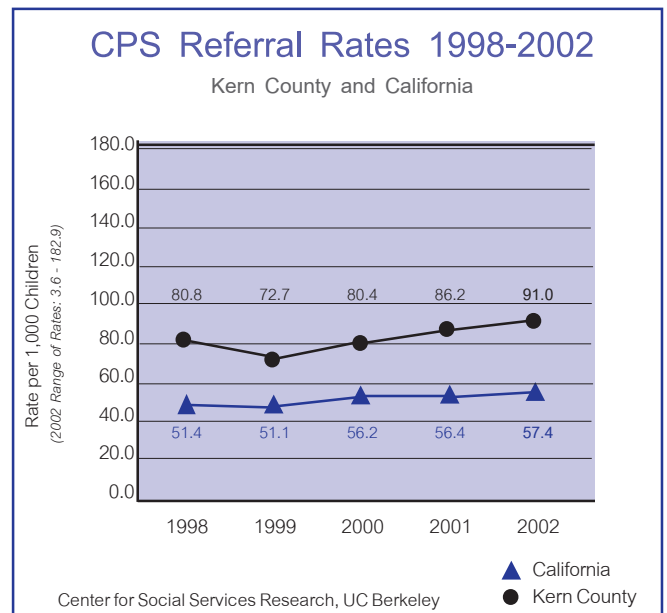
1. Children are, first and foremost, protected from abuse and neglect.
2. Children live safely in their homes whenever possible and appropriate.
3. Children have permanent and stable living situations without increased re-entries into foster care.
4. Family relationships and connections are preserved, as appropriate.
5. Children receive physical, emotional, and mental health services according to their needs.
6. Children receive appropriate educational services.
7. Families are better able to care for their own children's needs.
8. Foster youth transition successfully to adulthood.

To help measure effective progress toward these goals, outcome indicators and annual trends are presented in the following categories.

Safety from Abuse
Permanency and Stability
Preserved Relationships
Child Well-Being

INDICATORS OF SAFETY FROM ABUSE

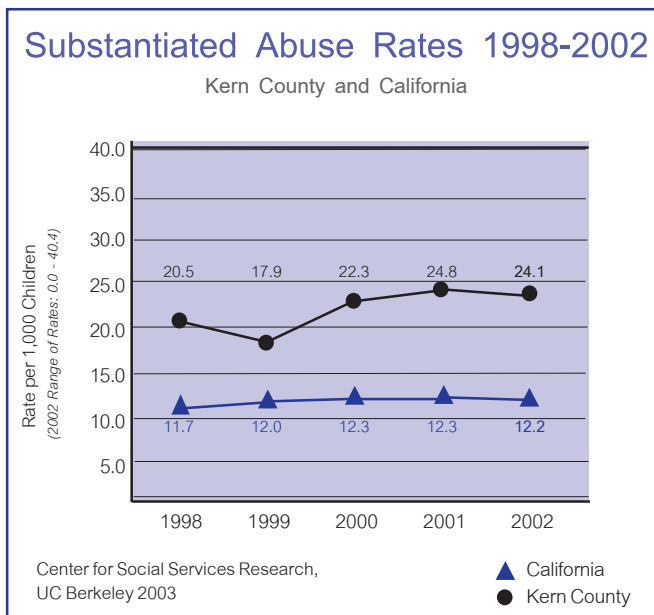
Mandated reporters and concerned community members report suspicious situations to Child Protective Services for investigation. Fortunately, about three of every four reports are unfounded or no serious threat is found to the child. However, the number of total reports to CPS can provide a general indication of how many children in the community are potentially at risk of abuse and neglect. Also, the number of reports can demonstrate community awareness and willingness to contact authorities when children are potentially in danger.



Child welfare rates are calculated for every 1,000 children under age 18 living in the community. In 2002, there were 19,836 children investigated as victims of abuse in Kern County, indicating a referral rate of 91.0.

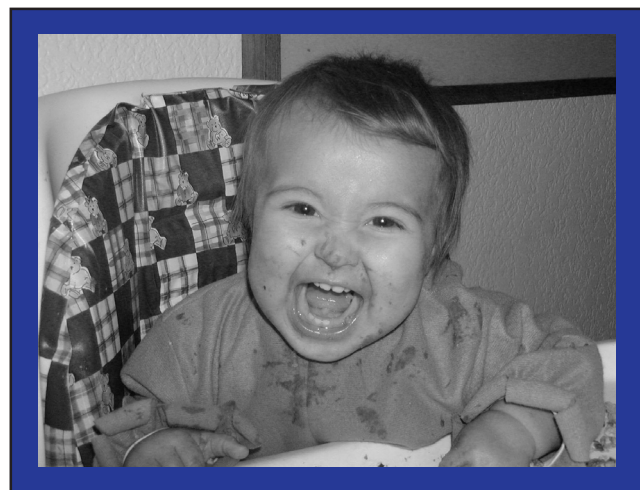
By comparison, California's referral rate was 57.4 and other county rates ranged from 3.6 to 182.9. Figures for both Kern and California have been on the rise since 1999.

Of these 19,836 reports, 5,265 (26.5 percent) were substantiated cases. The remaining reports were either inconclusive, unfounded, or assessed-out during the investigation process.



quickly reunited because they accept various voluntary services designed to improve family functioning. Other situations require more serious intervention and children must remain in care for longer periods of time.

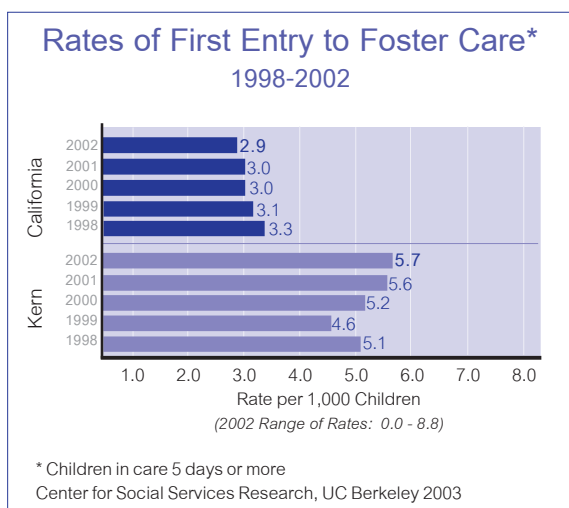
During 2002, 1,245 children were removed from their home for the first time and stayed in care five or more days. The rate of first entries into foster care in Kern County was calculated at 5.7 for every 1,000 children. In California, the rate during 2002 was 2.9. Among all counties, rates ranged from 0.0 to 8.8.



In 2002, 24.1 of every 1,000 children in Kern County were found to be victims of abuse. By comparison, 12.2 were victimized statewide. During the same year, the range of rates for all counties in California was 0.0 to 40.4. In both Kern County and California, the greatest percentage of cases primarily involved general neglect.

When a child is removed from the home, the amount of time spent in foster care falls into two categories: 1) Four days or less and 2) Five days or more. Those children in care less than five days are typically removed only until a full investigation is completed. Then, the family may be

Voluntary family maintenance services can successfully keep children at lowest risk in their own home. However, some children have additional reports of maltreatment and their living situation must be re-evaluated.



These recurrences are measured by taking all substantiated cases during a twelve month period and evaluating whether a second substantiated incident occurs to the same child during the next twelve months.

In Kern County between July 2001 and June 2002, 19.1 percent of abused children had additional substantiated reports during the next twelve month period. In California, 14.6 percent of abuse cases had evidence of recurrent maltreatment.



PROMOTING SAFE AND STABLE FAMILIES IN INDIAN WELLS VALLEY

Promoting Safe and Stable Families (PSSF) is a federal program that provides states with money to help build strong families. In California, the California Department of Social Services, Office of Child Abuse Prevention (OCAP) administers this program throughout the counties. In Kern County, the Board of Supervisors has charged the Network for Children with administering PSSF money in partnerships with direct service providers. Every three years a Request for Proposals is presented and many organizations compete for these dollars.

Primary PSSF goals include preventing child abuse and neglect, improving the quality of care and services to children and families, and ensuring permanency for children by reuniting them with their parents, by adoption or by another permanent living arrangement.

One of the 2002-2005 recipients of PSSF funds is the Indian Wells Valley Family Resource Center. Positive results are already being seen in the high desert communities.

"Since October 2002, PSSF dollars have served 201 families with 316 children. We have worked closely with Child Protective Services, the Department of Public Health, Juvenile Probation, schools, doctors, and others to best reach those families in greatest need.

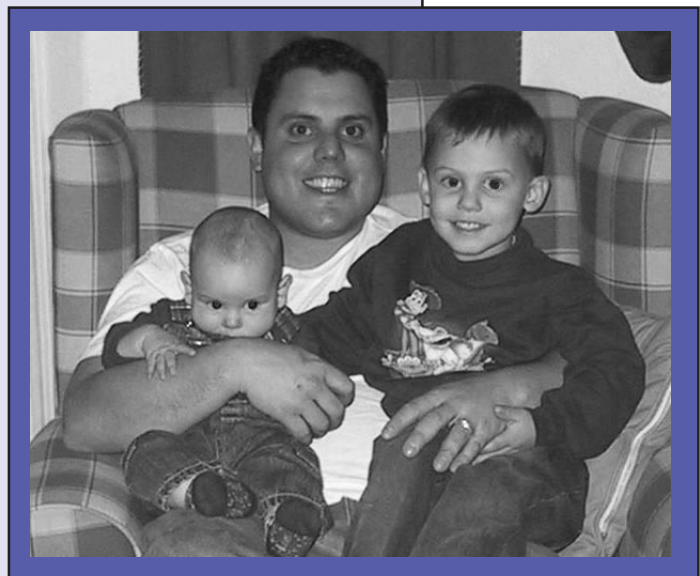
Case management services have helped families improve their functioning. Families working with an advocate for at least three months have averaged ten percent improvement and those working with us for at least six months have averaged 16 percent improvement. The following are some of our many successes that encourage us to continue the good work of Promoting Safe and Stable Families.

** We were able to assist a father with regaining custody and getting his four children back home after their mother abandoned them.*

** We helped a teen rape victim receive quality counseling.*

** We helped a mother of two enter a drug rehabilitation program. She is working on sobriety for the first time in 15 years.*

** We linked an anonymous donor with a mom who walks six miles every day to work, raises three children alone, and helps her mother who is very ill. The donor provided rent assistance and new clothes for the children of this struggling family. The next day we helped delivered a 'thank you' box of home made cookies and notes from each child to their special friend. Mom said it best, "Life doesn't get any better than this!"*



*- Cyndi Cavanaugh
Indian Wells Valley FRC Coordinator*

Age and Ethnic Disparity Among Children with CPS Referrals* Kern County 2002



* Children with non-missing ethnicity and age information

Center for Social Services Research, UC Berkeley 2003

AGE AND ETHNIC DISPARITY

Some populations of children are over-represented in the Child Welfare System. Age disparity can be measured by comparing the percentage of children in each age group and the percentage of each age group receiving referrals or substantiated reports. Comparisons can also be made between the percentage of each ethnicity in each age group and the percentage of those of each ethnicity receiving referrals or substantiated abuse reports.

The most vulnerable age groups, by far, are the youngest and smallest children. Infants under age one are the most likely group to be referred to Child Protective Services. In Kern County during 2002, 12.8 percent of all babies were referred to CPS and 5.9 percent were victims of substantiated abuse. By comparison, California referrals represented 6.6 percent of all babies and 2.4 percent were victims of abuse.

Toddlers are also a high risk population. Of all children in the county age one and two, 10.1 percent have referrals and 3.3 percent have substantiated abuse. State figures are 5.3 percent and 1.3 percent, respectively.

How Do I Read This Graph?

Use the following examples to help interpret data presented in the graph above.

“Among all African-American babies under age one in Kern County, 22.8 percent were referred to Child Protective Services during 2002.”

“During 2002, of all Hispanic children in Kern County age 11 to 15, 6.9 percent were referred to CPS.”

“Across all age groups, children of Asian/Pacific Islander descent have the fewest CPS referrals.”

Further disparities exist between ethnicities. During 2002, 22.8 percent of all African-American infants in Kern County were referred to Child Protective Services. Eleven percent of all African-American infants in the county have had substantiated reports of abuse.

Among African-American toddlers ages one to two, 18.0 percent are referred and 6.0 percent are substantiated victims of abuse. In fact, across all age groups, African-American children are more often referred than any other ethnicity. With the exception of the oldest age group, African-American children are also more likely to have substantiated abuse.

Caucasian and Native American children are also over represented in child abuse statistics in Kern County, although to a lesser degree than African-American children. Hispanic children are under-represented in Kern County's child abuse statistics.

How Do I Read This Graph?

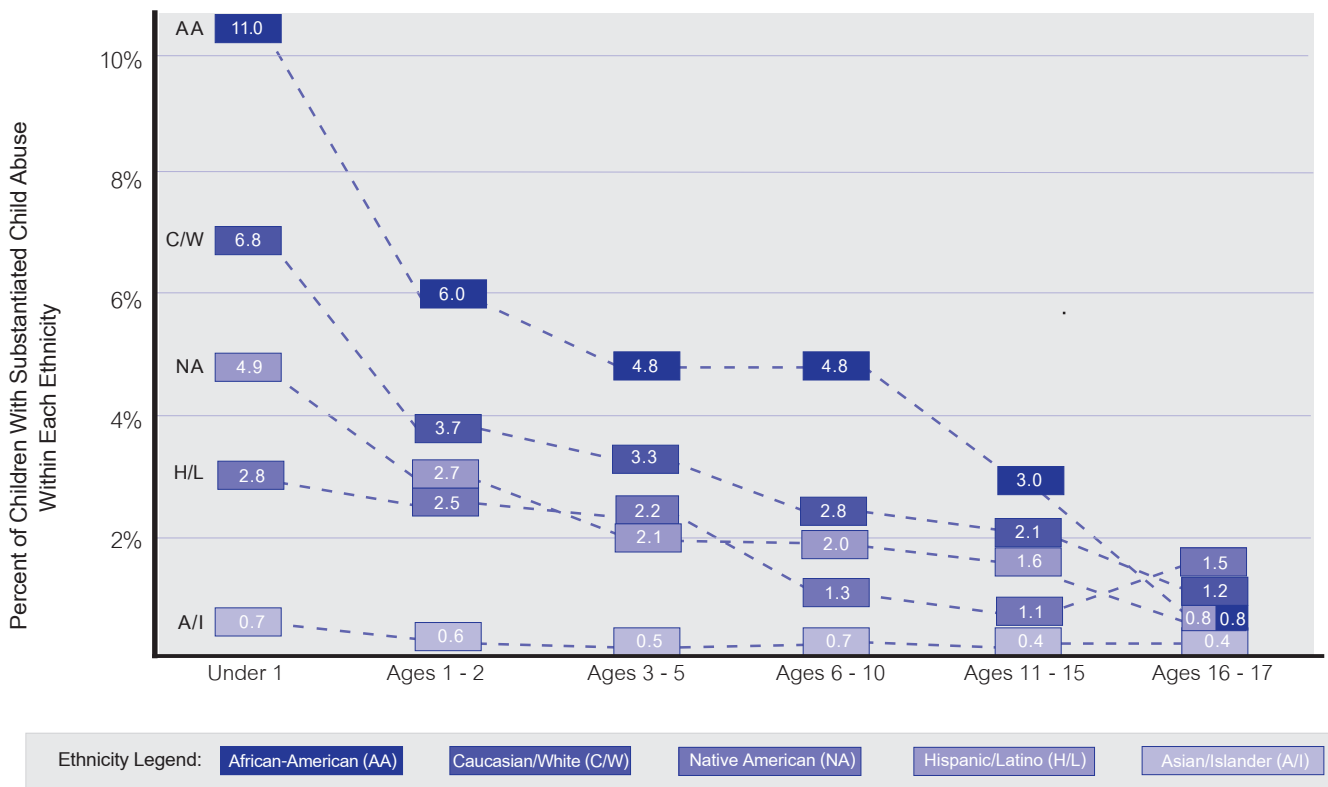
Use the following examples to help interpret data presented in the graph below.

“Among all African-American babies under age one in Kern County, 11 percent were found to have substantiated abuse during 2002.”

“During 2002, 3.7 percent of all Caucasian children ages one and two were abused.”

“Across all age groups, children of Asian/Pacific descent have the fewest reported cases of abuse.”

Age and Ethnic Disparity Among Children with Substantiated Child Abuse* Kern County 2002



* Children with non-missing ethnicity and age information



CHILD ABUSE PREVENTION INTERVENTION & TREATMENT

KERN CHILD ABUSE PREVENTION COUNCIL

Child Abuse Prevention, Intervention and Treatment (CAPIT) funding is overseen by the California Department of Social Services, Office of Child Abuse Prevention. In Kern County, CAPIT funding is a combination of federal, state, and local dollars. These funds, managed by the Network for Children, are awarded every three years to direct service providers throughout the County, including Kern's Child Abuse Prevention Council.

In addition to its community education and advocacy duties, the Kern Child Abuse Prevention Council (KCAPC) provides community-based services to families at-risk of abuse and neglect. Some of these services include:

Parenting Classes

KCAPC provides both court-mandated and voluntary classes for parents. Adults with special needs and Spanish-speaking parents are provided with specialized services.

Guided Visitation

One-on-one mentoring for parents is often essential to successful reunification of the family.

Group Therapy

Professional therapy is available for both children and adults

Case Management Services

Advocates are housed at various schools, churches, and family resource centers.

Other Supportive Services

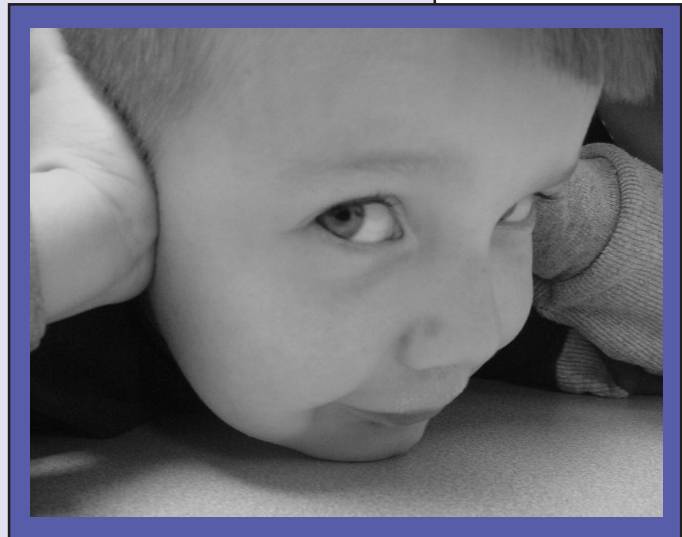
A domestic violence support group for deaf adults, anger management classes, and crisis intervention services are among the many supportive services provided by KCAPC.

Positive results are seen every year from the services provided by Kern Child Abuse Prevention Council.

"During the past year, more than 2,400 adults have received intensive services provided by CAPIT dollars. On average, families receiving Guided Visitation improve interaction with their children by 52 percent. Individuals completing our parenting classes average 31 percent improvement in parenting knowledge and skill level. Ninety-three percent of class participants complete the requirements for graduation from the program.

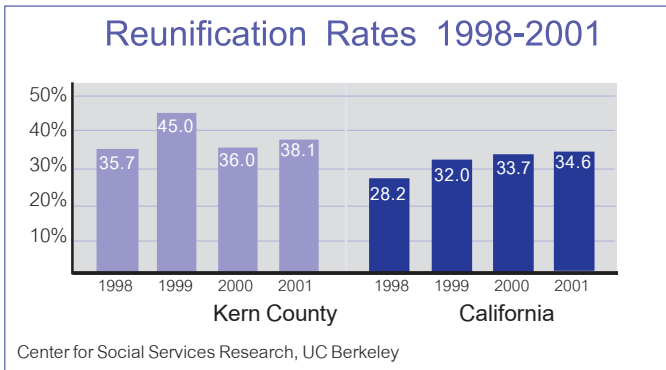
We see lots of wonderful written comments by parents who complete our courses. One of our favorites: "The classes gave me a lot more confidence as a parent. Now I can give that confidence back to my kids."

*- Karen Cooley, Executive Director
Kern Child Abuse Prevention Council*



INDICATORS OF PERMANENCY AND STABILITY

Some children cannot remain with their parents due to the serious nature of neglect or abuse in the home. These children are placed in foster care and parents must work closely with Child Protective Services to reunite the family. The primary goal is always to return a child permanently and safely home whenever possible.



The amount of time this reunification process takes is an outcome measure that reflects permanency and stability. In Kern County during 2001, 38.1 percent of first-time foster children staying five or more days were reunited within twelve months. By comparison, 34.6 percent of California's foster children returned home within twelve months.

Since 1998, Kern County has consistently had reunification rates higher than the state average.



Entries and Re-Entries to Foster Care* Kern County 1999-2002

Entries to Care	1999	2000	2001	2002
First Entries	976	1,093	1,209	1,247
Re-entries	225	322	319	276
Total Entries	1,201	1,415	1,528	1,523
Rate of re-entries to total entries				
Kern County	18.7%	22.8%	20.9%	18.1%
California	16.7%	18.5%	18.8%	19.4%

* Children with a stay five days or longer
Center for Social Services Research, UC Berkeley 2003

Even after family reunification, sometimes children re-enter the foster care system. During 2002, 276 re-entered foster care after previously exiting care and 1,247 were first entries for a total of 1,523 children entering care for more than 5 days.

During 2002, 18.1 percent of all children entering foster care were re-entries. By comparison, 19.4 percent of children entering care statewide were re-entering the system.

Unfortunately, sometimes reunification services fail altogether and adoption provides the best permanent placement option for children in care. In Kern County during 2000, 6.0 percent of first-time foster children staying five or more days were adopted within 24 months. By comparison, 4.9 percent of California's foster children were adopted within 24 months.

Some children remain in foster care for an extended period of time. It is important for these children to experience as much stability as possible while in care and the fewest number of placements are in their best interest.

In 2001, of the Kern County children still in care after 12 months, 57.6 percent were in the first or second foster care placement. Of all California children still in care after 12 months, 63.7 percent were in the first or second foster care placement.

Total Number of Unique Children In Foster Care 1998-2002

Kern County

Age Group	1998	1999	2000	2001	2002
Under 1	620	669	682	720	768
1-5	1,417	1,473	1,524	1,574	1,641
6-10	981	1,125	1,123	1,195	1,241
11-15	594	635	699	734	772
16-17	132	122	121	131	152
Unknown	6	5	3	3	3
Total All Ages	3,750	4,029	4,153	4,357	4,577

Center for Social Services Research, UC Berkeley 2003

INDICATORS OF CHILD WELL-BEING

Child well-being after leaving the foster care system is very important. The California Department of Social Services recently completed a study of women with a history of being removed from their birth family. These women are more likely than the general population to be:

- UNMARRIED
- LIVING IN POVERTY
- RECEIVING WELFARE
- SMOKING
- UNEMPLOYED
- FOOD INSECURE
- IN POOR PHYSICAL AND MENTAL HEALTH

INDICATORS OF PRESERVED RELATIONSHIPS

SIBLINGS PLACED TOGETHER

Relationships with siblings and other family members are especially important when children must be removed from parental custody.

On July 1, 2003, a total of 2,323 sibling groups were in foster care in Kern County. Of these, 912 were in placement with all siblings together (39.3 percent) and 1,553 (66.9 percent) were in placement with all or some of the siblings together.

In California on that same date, 61,365 sibling groups were in placement. Forty-two percent, or 25,760 children, were in placement with all siblings together and 66.4 percent (40,467 children) were placed with all or some siblings.

RELATIVE CARE

Some children entering foster care are placed with relatives. On July 1, 2003, a total of 3,079 children were in foster care. Of these, 1,132, or 36.8 percent, were placed with relatives. This percentage is greater in Kern County than California overall. The state average on July 1, 2003, was 33.7 percent.

One way to help prevent negative outcomes for children involved in the foster care system is planned transition at emancipation. Since 1998, 373 young adults have been emancipated directly from placement.

When a foster youth is identified as lacking supportive resources and will soon be emancipated from foster care, the county's Urgent Action Team is convened. Team members from many different agencies help plan an appropriate transition for each young adult without a natural support system.

One of the most important aspects of this transition period is making sure each youth will have adequate housing. For those without family support or other housing options, a Transitional Living Unit known as "Building Blocks" was designed by the Kern County Housing Authority in cooperation with the Department of Human Services. Since opening in February 2001, 46 young people have been housed in these unique transitional living apartments.

DATA SOURCES:

Center for Social Services Research, UC Berkeley
<http://cssr.berkeley.edu/cwscmsreports/>

Kern County Housing Authority
<http://www.kernha.org>



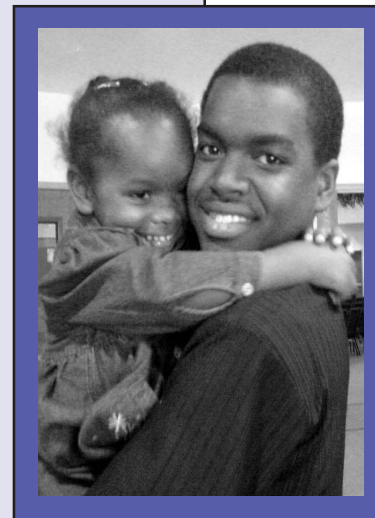
FOSTER CARE HEALTH UNIT KERN COUNTY DEPARTMENT OF PUBLIC HEALTH

Health care needs are generally greater for children in foster care due to a history of neglect, abuse, or a lack of understanding about the importance of preventive health care. Some foster children have also been exposed to dangerous, harmful, and illegal substances.

In response to this special need, Kern County's Department of Public Health and Department of Human Services formed a collaborative endeavor four years ago. The Health Unit, physically located at the Department of Human Services, links the expertise of public health nurses with social workers to improve health outcomes of children in the foster care system.

Some of the most significant impacts on the health care of this vulnerable population include:

- Increased number of children receiving a completed Health and Education Passport, an important document that contains vital health information that follows the child to each placement and ultimately back to their parents if the family is reunified
- Decreased time to obtain proof of Medi-Cal eligibility, ensuring more timely access to health care for pre-existing problems
- Easily accessible educational information for foster parents and social workers, increasing their awareness and understanding of medical issues.
- Quick linkages for high risk foster children to existing health services within the community. Children and their foster parents are linked to California Children Services, Kern Regional Center, Kern County Mental Health, and other service providers.



Approximately 300 children each month benefit from this unique partnership. The following is an especially poignant success story:

A 15 year-old young lady was referred to the Health Unit by a social worker. She had many serious medical health problems including spina bifida with bladder dysfunction, seizures, a deficient heart valve, and mental delay. She had previously had a shunt and a pacemaker placed and she required medical procedures about every three hours. Unfortunately, she had not received adequate care and had been removed from her mother's home by Child Protective Services due to medical neglect.

When her case was reviewed by social workers, they found that the teen's grandmother was willing to take the child immediately. However, in order for this to happen, the grandmother had to fully understand all the medical diagnoses, medications and treatment needs. The Health Unit was ready to act quickly and a Public Health Nurse began education services and coordination of immediate medical care. All of the teen's medication dosages were reviewed immediately by a local physician. Within one week she was seen by Children's Hospital of Los Angeles to have a full assessment of her shunt, pacemaker, and other medical conditions.

Within three weeks the teen had received immediate medical care, an order for braces and crutches to aid her in learning to walk, and a fully informed caregiver. Because of the Health Unit's intervention and coordination, the young lady was successfully placed in relative care, preserving an important connection to her family.

- Frances L. Wilson, RN, MSN, PHN
Health Care for Children in Foster Care

CHILD INDICATORS

HEALTH & WELLNESS

Children with physical and emotional health issues are at greater risk of neglect and abuse. Babies born with special health needs such as prematurity and low birth weight and babies born to young mothers are particularly vulnerable.

PREMATURITY

Prematurity is defined as birth prior to 37 weeks gestation. During 2002, 12,211 babies were born in Kern County. Of those with reported gestation weeks (10,279), 11.5 percent were born prematurely. In California during 2002, 10.5 percent of babies were premature.

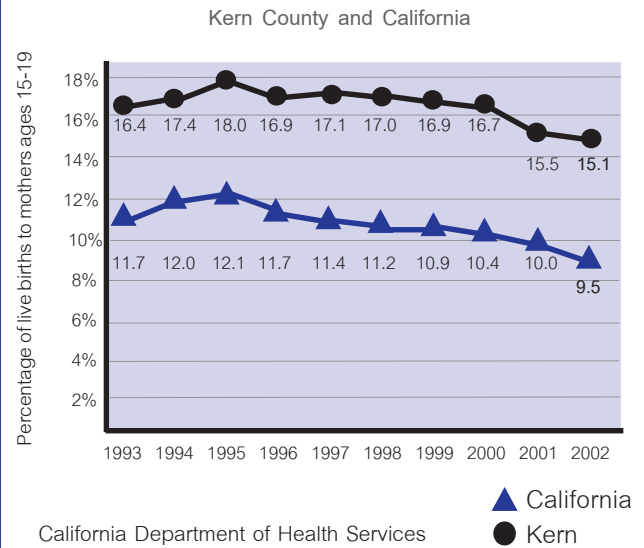
BIRTH WEIGHT

Newborns weighing less than 5.5 pounds are considered to be low in birth weight. These children have increased risk of ongoing health complications.

In Kern County during 2002, 6.5 percent of all babies were born below optimal birth weight. A high of 6.9 percent was recorded in 1993. California's percentage of low birth weight babies has risen slightly over the same time period from 6.0 in 1993 to 6.4 in 2001.



Births to Young Mothers 1993-2002



BIRTHS TO YOUNG MOTHERS

In Kern County during 2002, 1,873 babies were born to young women under age 20. This accounts for 15.1 percent of all live births. Of these babies, 666 were born to girls under age 18, or 5.5 percent of all births.

In California during the same year, 9.5 percent of all live births were to young women under age 20. Of these, 3.3 percent were born to girls under age 18. Births to young mothers for both the county and state have fallen substantially since the mid-1990s.

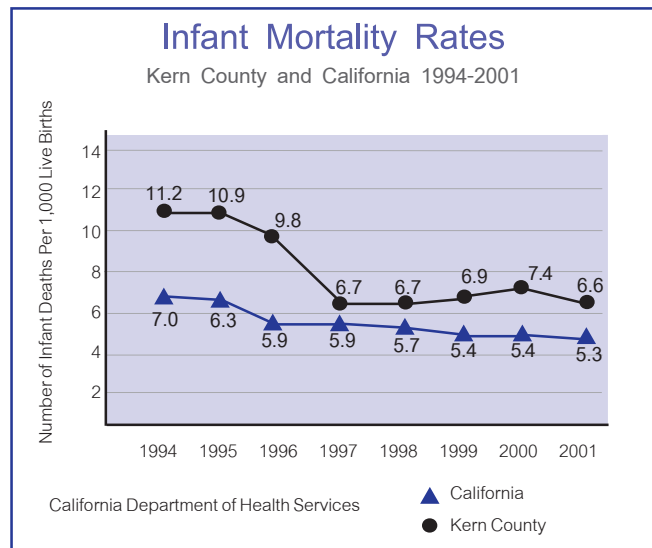
SEXUALLY TRANSMITTED DISEASES

Chlamydia remains the most prevalent form of sexually transmitted diseases among youth and adults. This is an important concern because girls and women having unprotected sex are at greater risk of pregnancy.

Babies exposed to the chlamydia virus during birth often have serious eye infections (evident within 10 days) and pneumonia (evident within three to six weeks.) Both conditions compromise infant health.

Kern County had the second highest female chlamydia rate among California counties. During 2002, Kern's rate was 643.5 per 100,000 population. By comparison, California's overall rate was 456.1. Additionally, rates in both the county and state have climbed steadily since 1998.

Statewide, the highest rate of all gender and age groups is found among African-American teen girls ages 15-19. The rate of 4,958.5 per 100,000 is more than double the rate of any other ethnic group.



INFANT MORTALITY

The infant mortality rate is the ratio of infant deaths during the first year of life for every 1,000 live births. During 2001, Kern County's infant mortality rate was 6.6. California's rate was 5.3.

Infant mortality can also be examined by death records and compared to population size. A race-specific rate can be calculated to determine the populations of greatest concern. The following chart contains race-specific death rates for all children including infants under age one. These deaths may have had any cause.

CHILD DEATHS

The Kern County Child Death Review Team is required to review the deaths of all children under age 18 that are reported by the Coroner's Office. Representatives from 15 different agencies and organizations are a part of this multi-

Race-Specific Death Rates by Age *

Kern County and California 2001

Ethnicity:	Kern County			California		
	<1	1-4	5-14	<1	1-4	5-14
African-American	1,213.6	32.3	63.6	1,116.7	50.0	23.0
Hispanic/Latino	609.6	35.1	12.9	482.7	22.0	12.6
Caucasian/White	494.5	26.3	26.8	459.4	23.8	13.8
Other	369.7	49.9	0.0	359.5	17.9	11.7
All ethnicities	594.9	32.2	22.0	501.8	23.9	13.7

* Rate is the number of deaths per 100,000 population within each age/ethnicity
California Department of Health Services, Vital Statistics

disciplinary team. The Team reports statistical information and makes recommendations to help improve the safety of children in Kern County.

Of the 144 child deaths in the county during 2002, 77 met the review criteria. Thirty-one of the reviewed deaths, or 40 percent of the cases, were children under the age of two. Among these children, three were killed in auto related accidents, three were murdered, and two were co-sleeping with adults. Nine of the children died by what is presumed to be Sudden Infant Death Syndrome, which by definition implies that the true cause is unknown.

Among the 46 older children who died during 2002, 19 were killed in auto related accidents. Of these, nine were unrestrained in cars and seven were on bikes or motorcycles. Six children died by drowning, three by fire, three were murdered, and three committed suicide. Other cases were generally related to medical conditions or other accidents.

The Review Team specifically noted in the 2002 annual report that inadequate supervision of children and lack of child and adolescent auto restraints were contributing factors in most of the County's child deaths.

Data SOURCES:

CA Department of Health Services, Vital Statistics
<http://www.dhs.ca.gov/hisp/chs/OHIR/vssdata/2002EX.htm>

CA Department of Health Services, STD Control Branch
<http://www.dhs.ca.gov/ps/dcdc/STD/stdindex.htm>

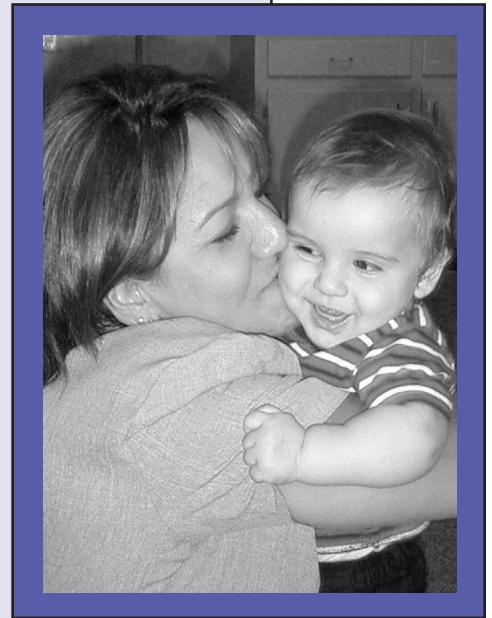


ADOLESCENT FAMILY LIFE PROGRAM CAL-LEARN PROGRAM CLINICA SIERRA VISTA

In the past ten years, over 20,000 children have been born to mothers under the age of 20 in our county. The consequences of teenage pregnancy and parenting can include inadequate prenatal care, higher rates of prematurity and low birth weights, lack of high school graduation, long-term dependency on public assistance and poor health, educational and psychosocial outcomes for the children of teen mothers. The cost to taxpayers for teen births in this county has been estimated at over \$51 million per year.

Since 1986, Clinica Sierra Vista's Adolescent Family Life Program (AFLP) has been addressing these issues through a comprehensive model of case management and home visiting services for pregnant and parenting teens and their children. Kern County's AFLP is part of a state and federally funded program operated by the Maternal and Child Health Branch of the California Department of Health Services. In 2003, 705 teens were served.

AFLP is a voluntary program that focuses primarily on pregnant and parenting females and their children, though teen fathers are also eligible for services. Females must enter AFLP prior to their 19th birthday and they may remain in the program until age 20. Males can enter through age 20 and remain until age 21. There are no fees for services and there are no income or residency restrictions. Case managers work with their clients to assess, plan, educate, and link teens and their children to any needed services or program. Prenatal care, well baby exams and immunizations, family planning and high school are the largest number of linkages made by case managers. Case managers also assist their clients with information, education, referrals and support for child birth preparation, parenting skills, child development, nutrition, health, and other psychosocial needs. Our staff includes a full time Public Health Nurse and Marriage and Family Therapist Intern.



In 1994, California implemented a new program specifically designed for pregnant teens and custodial teen parents that were receiving cash assistance through CalWORKs (formerly AFDC) and that had not graduated from high school. Cal-Learn is funded primarily through federal TANF dollars that are distributed to each county by the California Department of Social Services. Clinica Sierra Vista has been contracted by the Kern County Department of Human Services since August 1994 to provide Cal-Learn case management services. This program is mandatory for all eligible teens under the age of 19 until earning a high school diploma or the equivalent. After turning 19, teens may continue to volunteer for Cal-Learn as long as they are attending school and making adequate progress toward high school graduation or passing the GED. After Cal-Learn, clients are transitioned into the county's welfare-to-work program.

In addition to providing clients with case management services through the AFLP model and standards, Cal-Learn provides supportive services and financial incentives and disincentives to encourage satisfactory school performance and high school graduation. Since its inception, nearly 1,100 teens have earned a high school diploma or GED through Cal-Learn. This is remarkable in light of an 80% dropout rate for pregnant and parenting teens nationwide. High School graduation is a key step in helping teen parents avoid long-term welfare dependency. In 2003, Cal-Learn served 855 teens in Kern County. These programs are countywide with over 43% of AFLP/Cal-Learn caseload occurring outside of metropolitan Bakersfield. In 1993, the up-to-date immunization rate was 88% for both programs combined. The incidence of repeat pregnancies was 6.81% for a total unduplicated caseload of 1,410 teens. This is significantly less than the annual target repeat pregnancy rate of less than 10% of the total caseload.

- Bill Phelps, Program Coordinator
Clinica Sierra Vista

SPECIAL EDUCATION

Children with special education needs are at greater risk of abuse and neglect. Some researchers believe abuse in this population is under-reported due to communication issues. Families caring for children with special needs can easily feel overwhelmed and stretched to the limit in time and money. Additionally, social supports are often lacking for families raising children with serious needs.

During the 2002/03 school year, Kern County's Special Education system served 15,365 children and young adults from newborn to age 22. Of these, 1,521 were under the age of six. Special Education provided services to 13,375 children between the ages of six and 17. This figure represents 8.6 percent of the children enrolled in school during that year. Additionally, 469 students continued to receive educational and transitional services after the age of 18.

Of all Special Education students in Kern County:

- 53 percent had specific learning disabilities
- 27 percent had speech and language disorders
- 11 percent were developmentally delayed
- 8 percent had physical disabilities and other health related conditions
- 1 percent had emotional difficulties

DATA SOURCE:

California Department of Education
<http://data1.cde.ca.gov/dataquest>

MENTAL HEALTH

Kern County Mental Health Children's System of Care is responsible for providing mental health services to eligible children and families throughout Kern County. In 1996, the Department divided the county into 11 service regions. Of these regions, Kern County Mental Health staff provide services in two of the areas (Taft and East Bakersfield) and contracts with other agencies to provide mental health services in the nine remaining geographic areas.

During the 1999/00 fiscal year, the Kern County Mental Health System of Care provided mental health services for



6,387 children under age 18, or about three percent of Kern County's children. These services can include hospitalization, therapy, medication, crisis intervention, and other important services for children with emotional needs.

DATA SOURCES:

CA Department of Mental Health
<http://www.dmh.cahwnet.gov/>

Kern County Mental Health System of Care
<http://www.co.kern.ca.us/KCMH/>

Friday Night Live

Friday Night Live is a teen prevention program managed by the Children's System of Care. It began in 1984 as a pilot program dedicated to reducing teen deaths caused by driving under the influence of alcohol and other drugs. The program is youth-driven and youth-led. It is designed to build partnerships for positive and healthy youth development and engage youth as active leaders in their own communities. Friday Night Live provides positive, high-energy alternative activities, promotes alcohol and drug-free lifestyles, and develops leadership skills among teenagers.



MULTI-AGENCY INTEGRATED SERVICES TEAM AND PRIDE ACADEMY

KERN COUNTY DEPARTMENT OF MENTAL HEALTH

The Multi-Agency Integrated Services Team (MIST) is a collaborative effort between Kern County's Departments of Mental Health, Public Health, Human Services, and Probation. MIST is designed to provide intensive, integrated service delivery to families at risk of having children removed from their home. This program provides assessment, linkages, case management, and regular monitoring of children and their families. Important goals of MIST include:

- IMPROVE FAMILY FUNCTIONING
- DECREASE TRUANCY
- DECREASE OUT-OF-HOME PLACEMENT
- PROVIDE SUBSTANCE ABUSE INTERVENTION, WHEN APPROPRIATE
- PROVIDE INTENSIVE COUNSELING AND SUPPORT SERVICES FOR EMOTIONALLY DISTURBED YOUTH

Of the 16 children receiving MIST services during a 2002 study period, mental health diagnoses included Attention Deficit/Hyperactivity Disorder, Depressive Disorder, Post Traumatic Stress Disorder and Disruptive Behavior Disorder. School attendance was a significant problem for every student. Eleven of the students were at serious risk of being removed from their homes or detained in a juvenile justice facility. Decreased truancy was the best achievement; 14 of the 16 students had improved school attendance. Additionally, average attendance scores increased from 1.75 to 3.69 during the study period, an increase of 111 percent.

A second collaborative effort between the Department of Mental Health, Kern County Superintendent of Schools, Kern County Probation Department and the Juvenile Court system is Pride Academy. The Academy is an alternative to incarceration for middle and high school students. The primary goal of this unique program is to reduce youth recidivism through intensive mental health and other intervention services.

During 2002, 30 participants, 21 male and 9 female, were enrolled in Pride Academy. During the year these students committed fewer criminal infractions and significantly improved their school attendance. Forty percent experienced positive changes in living arrangements with many spending less or no time in juvenile hall and more time in their own home.



Kern County Department of Mental Health Services
2002-03 Program Evaluation Report

EDUCATION INDICATORS

DROPOUT RATES

Abuse and neglect of children is significantly impacted by the education levels of their parents. Additionally, the academic success of children is improved when parents complete more grade levels. High school dropout rates can indicate if students are less prepared to raise children and financially support families as adults.

During the 2001/02 school year, 3.9 percent of Kern County high school students dropped out of school. The previous year, only 2.8 percent of students dropped out. This is the first increase seen in the county since 1993/94. However, the annual rate is significantly reduced from that year's rate of 7.2 percent.

Statewide during 2001/02, 2.7 percent of students dropped out of high school. This figure is slightly lower than the previous year at 2.8 percent.

In Kern County, the following ethnic and gender groups had higher than average dropout rates during the 2001/02 school year.

GENDER	ETHNICITY	DROPOUT RATE
Male	Hispanic/Latino	5.0%
Female	American Indian	5.0%
Male	African-American	4.5%
Female	Hispanic/Latino	4.2%
Female	African-American	4.1%

It is important to remember that even though Kern County had a dropout rate of 3.9 percent, nearly 96 percent of Kern students remained in school during 2001/02.

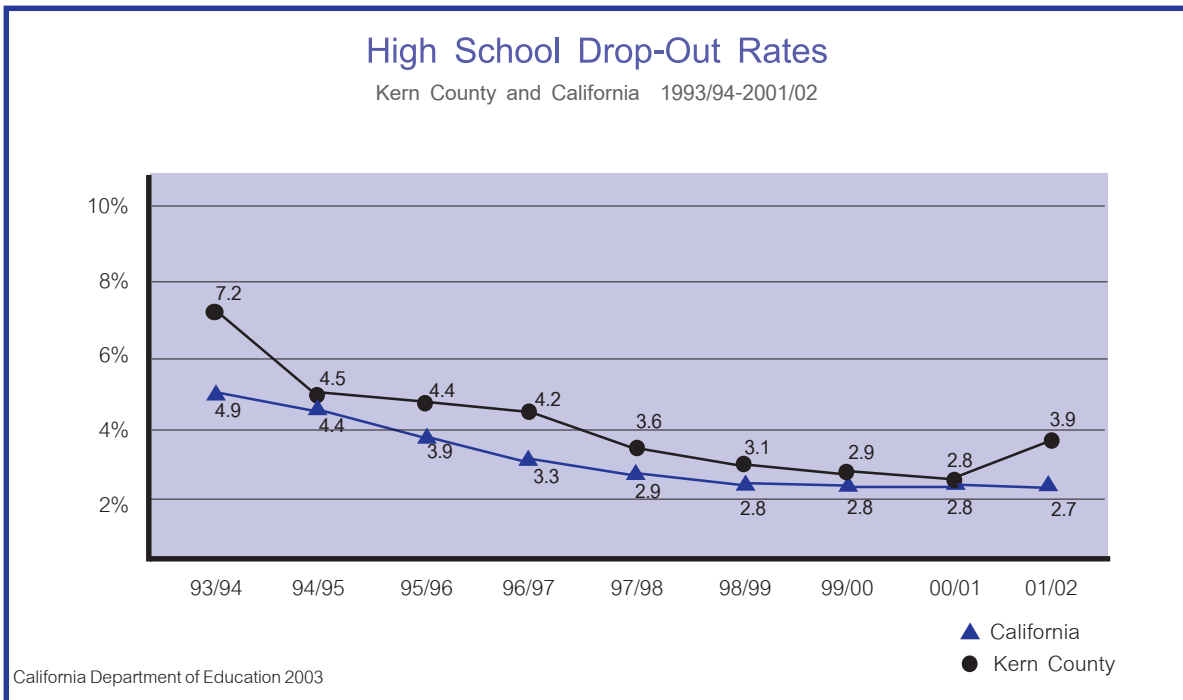
OTHER EDUCATION DATA

The table to the right includes many other education indicators including STAR scores for various grade levels and the rate of SAT testing among Kern's 12 graders. The SAT information can help measure those who expect to attend a university as this test is required for entrance to many colleges. As noted in the table, significant differences in SAT participation occur between ethnic groups.

DATA SOURCE:

California Department of Education

<http://data1.cde.ca.gov/dataquest>



EDUCATION DATA

1998/99 1999/00 2000/01 2001/02

Student Population Count

Total Student Population	est 149,871	152,379	154,286	157,045
Public Schools	143,671	146,097	147,988	150,790
Private Schools	est 6,200	6,282	6,298	6,255

Math Proficiency

Percent scoring at or above 50th national percentile on STAR math tests

2nd Grade - Kern	44%	54%	54%	56%
2nd Grade - California	49%	57%	58%	62%
5th Grade - Kern	38%	44%	48%	48%
5th Grade - California	45%	50%	54%	57%
8th Grade - Kern	40%	44%	46%	46%
8th Grade - California	45%	48%	49%	50%
11th Grade - Kern	34%	37%	36%	36%
11th Grade - California	45%	47%	46%	47%

Reading Proficiency

Percent scoring at or above 50th national percentile on STAR reading tests

2nd Grade - Kern	39%	45%	45%	46%
2nd Grade - California	44%	49%	51%	53%
5th Grade - Kern	36%	37%	38%	38%
5th Grade - California	42%	44%	45%	46%
8th Grade - Kern	42%	45%	46%	46%
8th Grade - California	47%	49%	50%	49%
11th Grade - Kern	27%	26%	28%	27%
11th Grade - California	35%	36%	37%	37%

Expectation of University Enrollment

Percent of total 12th graders taking SAT test

Kern	27%	26%	26%
California	37%	37%	37%

Percent of 12th graders taking SAT test by ethnicity

American Indian - Kern	46%	39%	46%
American Indian - California	30%	26%	25%
Asian - Kern	47%	49%	36%
Asian - California	54%	55%	53%
Hispanic/Latino - Kern	17%	17%	15%
Hispanic/Latino - California	20%	20%	20%
African-American - Kern	24%	24%	17%
African-American - California	29%	28%	28%
White - Kern	26%	25%	24%
White - California	30%	30%	29%



FAMILY RESOURCE CENTERS COMMUNITY-BASED SERVICES

Family Resource Centers (FRCs) in Kern County provide community-based health and social services for families. Multiple services are offered including child development assessments, parenting classes, nutrition and safety courses, insurance application assistance, translation services, and voluntary case management. Family Resource Centers can be found in all four regions of the county, with several serving Metro Bakersfield.

These easily accessible centers, most funded by multiple grants, house para-professionals known as Family Advocates and outstationed employees of partner agencies. Advocates work closely with families to help determine their unique strengths and challenges. Then, Advocates assist families in using those strengths to overcome difficulties they are facing. Over 5,000 families have received case management services through the Family Resource Centers since January 2001.

Advocates in Kern County use a tool known as the Social Condition Matrix to track changes over time in families who begin case management services. Family functioning is measured on a monthly basis in twelve different categories:

Income/Budget	Employment
Housing	Food/Nutrition
Health Care	Transportation
Adult Education	Family Relations
Community Involvement	Child Care
Condition of Children	Substance Abuse

The data collected throughout the county using this tool helps measure the success of case management and supportive services provided by the Advocates and Family Resource Centers.

"The Network for Children analyzed data for 1,200 families from all over Kern County that have received case management services. It's exciting to report that statistically significant improvement was seen in all twelve areas of family functioning. The greatest improvements were seen in Income/Budget, Employment, Food/Nutrition, and Health Care.

The Social Condition Matrix has proven very important in measuring the great work done by Advocates and Family Resource Centers in Kern County. In fact, several agencies in other counties have heard about the Matrix and have started using it for their own programs and resource centers."

*- Stephen L. Sanders, Executive Director
Kern County Network for Children*



FAMILY INDICATORS

PER CAPITA INCOME

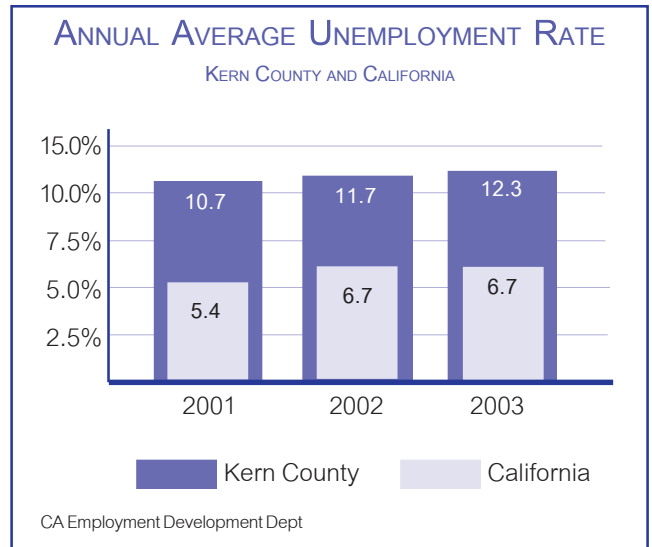
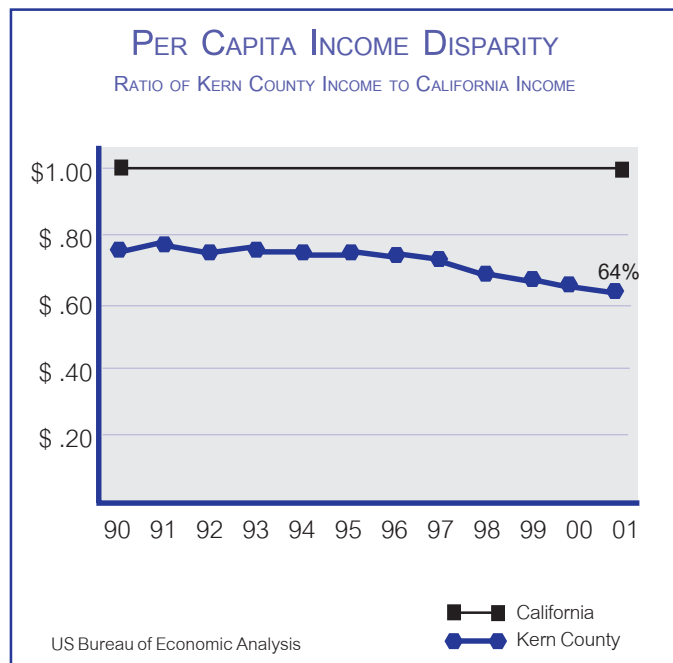
Per capita income is defined as the total of all personal income divided by population. When using this income measurement, during 2001 Kern County was among the poorest 13 metropolitan regions in the nation and the poorest 11 counties in the state.

In 2001, Kern's per capita income was \$21,021. California and the United States had significantly higher per capita incomes at \$32,655 and \$30,413, respectively.

For every \$1.00 that the average Californian had in their pocket during 2001, Kern County residents had only \$.64. This ratio has fallen steadily since 1991 when county residents had \$.77 for every \$1.00.

DATA SOURCE:

US Bureau of Economic Analysis
<http://www.bea.gov/bea/regional/reis/>



UNEMPLOYMENT

KERN COUNTY AND CALIFORNIA

Unemployment rates are the ratio of unemployed job seekers to total labor force. Due to fluctuations during the year, annual average unemployment rates are the best for comparing regional economies.

Kern County's annual average unemployment rate continued a steady climb since 2001. California's rate, however, has remained consistent over the past two years.

During 2003, Kern County's annual average unemployment rate was 12.3 percent. This rate remains nearly double the California rate of 6.7 percent which is unchanged from 2002.

Counties in the Central Valley usually have very high unemployment rates. This is primarily due to the large percentage of agricultural workers in the workforce and the seasonal nature of that work.

DATA SOURCE:

California Employment Development Department
<http://www.calmis.ca.gov/htmlfile/county/coshtm.htm>



CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO KIDS (CALWORKS)

KERN COUNTY DEPARTMENT OF HUMAN SERVICES

The CalWORKs Service Delivery Model continues to utilize the strength and expertise of multiple agencies known as the "Kern Works Partnership." This partnership provides an holistic approach to the individual and family by identifying and removing barriers to employment, assessing personal goals, and coaching participants to engage in workforce development activities that will lead to economic independence and self-sufficiency. Crucial partners represent economic development, business, schools, colleges, housing, faith-based, non-profit, private for-profit organizations, state and local governments, workforce investment, and other community-based organizations. The members of the Kern Works Partnership providing core services for the CalWORKs Service Delivery Model include:

- Kern County Department of Human Services
- Employers' Training Resource
- California Employment Development Department
- Kern County Mental Health System of Care
- Kern County Superintendent of Schools - Community Connection for Child Care

Each partner continues to be co-located in the nine Career Service Centers located in Delano, Lake Isabella, Lamont, Mojave, Ridgecrest, Shafter, Taft, Southeast Bakersfield, and Southwest Bakersfield.

The following is a Kern County success story that highlights how many agencies working together can better serve children and families.

Donna was a 20-year-old mother recently separated from her husband. She was unemployed and caring for her 17-month-old daughter and turned to CalWORKs for help.

Donna had graduated from North High School and had some limited work experience. She began by attending our "Road to Self-Sufficiency" workshop and with help from her Social Service Worker quickly obtained seasonal work at a local bookstore.

Donna soon expressed interest in a clerical career. She was referred to the Mexican American Opportunity Foundation to participate in clerical training. Employers' Training Resource provided job placement services for her when the seasonal employment ended. She was soon hired by a large local employer as a full-time Customer Service Representative.

Donna successfully juggled employment, single-parenthood, and on-going training and was able to request that her cash aid be discontinued. Her dedication and hard work has made her a positive, working role model for her daughter.

*- Beverly Beasley-Johnson, JD, Director
Kern County Department of Human Services
CalWORKs Annual Report, Fall 2003*



CALWORKS

According to the 2003 Kern County Department of Human Services' Annual CalWORKs Report, more than 5,721 participants have obtained employment and left cash aid since January 1998. This has contributed to an overall caseload reduction of nearly 20 percent. In June 2003, 16,586 cases remained open with approximately 37 percent of those being child-only cases.

Of those participants remaining on cash assistance, 44 percent are working and receiving a reduced cash grant. As a result, Kern County has realized an estimated annual grant reduction/termination savings of \$30.8 million.

The average wage earned by CalWORKs participants is above minimum wage at \$7.46 or \$1,194 per month. However, this is far below what the Department considers a self-sufficiency wage of \$13.10 per hour or \$2,096 per month for a family of three.

Each county is allowed by law to exempt up to 20 percent of the adult CalWORKs population from work activity. As of June 2003, 1,529 adults have been exempted in Kern County or 18.3 percent of adult participants. Sixty-four percent of those exempted are disabled. The Department recently added a Disability Advocate to assist this population with special needs.

DATA SOURCE:

Kern County Department of Human Services
<http://www.co.kern.ca.us/dhs/>

CHILDREN IN POVERTY

According to the 2000 US Census, approximately 58,000 children live in poverty in Kern County or about 28 percent of all children. By comparison, 19 percent of children statewide live in poverty.

The US Department of Health and Human Services uses an annual poverty guideline to determine eligibility for federal



assistance programs, such as free/reduced school meals and childcare subsidy. The 2004 poverty guideline is \$18,850 for a family of four living in California.

A common socioeconomic indicator for children living near poverty is the percentage of students participating in free and reduced meals at school. During the 2002/03 school year, 93,221 school children or 60.2 percent of all Kern County students were enrolled in this program. This figure is up substantially from 53.6 percent during the 1997/98 school year.

By comparison, 48.7 percent of students statewide during 2002/03 were enrolled in free and reduced meal programs. During 1997/98, the statewide figure was 47.4 percent.

DATA SOURCES:

US Census Bureau, American Fact Finder
<http://factfinder.census.gov>

US Department of Health and Human Services
<http://aspe.hhs.gov/poverty/04poverty.shtml>

California Department of Education, DataQuest
<http://data1.cde.ca.gov/dataquest/>

CHILD SUPPORT

Child support is an important issue for many families, especially when it is not being paid properly. Children who do not receive timely child support payments often live in poverty and make up a large percentage of those receiving public assistance. Families receiving public assistance, including Medi-Cal, are automatically referred to the Kern County Department of Child Support Services by the Department of Human Services.



During the 2002/03 federal fiscal year, Kern County Department of Child Support Services had 58,229 open support cases representing 67,934 children. Seventy-nine percent of these cases had formal support orders established for the noncustodial parent.

Of the \$82.6 million owed to Kern County children, \$33.9 million, or 41 percent, was collected and distributed as current support. Many factors hinder the collection of child support in Kern County including high unemployment and poverty rates, low per capita income, large prison populations and a large migrant/seasonal workforce.

DATA SOURCE:

Kern County Department of Child Support Services
<http://www.co.kern.ca.us/childsupport>

PARENT AGE AND EDUCATION

Although neglect and abuse can occur in any family, research has shown that younger parents and those with less education are more likely to be involved with Child Protective Services.

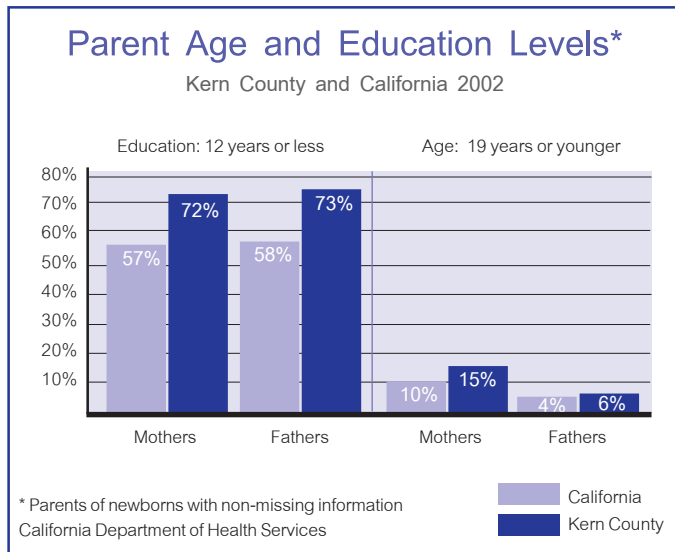
Information about parents' age and education levels is gathered by hospital staff at the time of birth and reported to the California Department of Health Services.

Of all new parents in Kern County during 2002, 72 percent of mothers and 73 percent of fathers had twelve years or less education. These figures are significantly lower than California with 57 percent of mothers and 58 percent of fathers with twelve years or less education.

During the same year, 15 percent of all new mothers were under age 20 compared to 10 percent in California. Six percent of new Kern County fathers were under age 20 compared to 4 percent statewide.

Data SOURCE:

California Department of Health Services, Vital Statistics
<http://dhs.ca.gov/hisp/chs/OHIR/vssdata/2002EX.htm>



HOUSING

COST BURDEN

Many home owners and renters throughout the county struggle to meet housing costs. Experts recommend that housing costs represent no more than 30 percent of family income. “Cost burden” is defined as spending more than 30 percent of family income on housing and “severe cost burden” is defined as spending more than 50 percent on housing.

Kern County’s 2001-2005 Consolidated Housing Plan reports that low-income families have the largest cost burden. Of those in the lowest income brackets, 69 percent have a cost burden and 56 percent have a severe cost burden. Thirty-one percent of middle-income households have a housing cost burden as well.

Low-income families tend to rent rather than own homes. During the five year period covered by the Consolidated Plan, nearly 10,000 low-income renting households are expected to spend more than one-half of their income on housing alone.

HOUSING WAGE

“Housing Wage” is the amount one full-time worker must earn per hour in order to afford a two-bedroom unit at local Fair Market Rent. (The US Department of Housing and Urban Development determines Fair Market Rents annually.)

In 2003, the Housing Wage for Kern County was \$11.44. This figure is 70 percent higher than the state’s current minimum wage of \$6.75 and is 3.4 percent higher than the 2002 Housing Wage. In other words, one full-time, minimum wage employee in Kern County would have to work 68 hours per week to afford a two-bedroom housing unit.

DATA SOURCES:

California Budget Project
www.cbp.org/housing.htm

National Low Income Housing Coalition
www.nlihc.org/oor2003/

HOMELESSNESS

Homelessness is a growing problem throughout Kern County. Many issues, including cost and availability of housing, substance abuse, legal barriers, mental illness, and family violence impact the number of individuals in our community without a home. The Kern County Homeless Collaborative conducted its first census of the homeless population on January 30, 2003. The following information was gathered about those without a home on that night.

Homeless on 1/30/03	Number	Percent
Single Men	1,005	62.1
Single Women	321	19.8
Adults in Families	113	7.0
Youth (under age 18)	179	11.1
Total Persons	1,618	100.0
Family Units	78	---

In total, 1,618 were identified as homeless. Most of the families with children were headed by single women.

Homeless children are especially vulnerable. The California Housing and Community Development Department has compiled research-based statistics about these children. An estimated 43 percent are molested and 66 percent are violently abused. Homeless children are 12 times more likely to be placed in foster care. More than 20 percent do not attend school and when they do, homeless children are twice as likely to repeat a grade or be suspended.

DATA SOURCE:

California Housing & Community Development Department
<http://www.hcd.ca.gov/hpd/homeless.pdf>

BAKERSFIELD HOMELESS CENTER

Bakersfield Homeless Center is the only shelter located between North Hollywood and Salinas, California that is equipped to house whole families. The Center also houses the state’s only on-site licensed childcare center for homeless children. Last year, 710 families with 2,373 children received services through the Bakersfield Homeless Center. Of these children, 44 percent were ages 0 to 5, 30 percent were 6 to 10, 19 percent were 11 to 15, and seven percent were 16 and 17.



EARLY INTERVENTION PROGRAM KERN COUNTY PROBATION DEPARTMENT

The Early Intervention Program (EIP) operates in metropolitan Bakersfield, Delano, McFarland, Shafter, and Wasco. This collaborative effort between Kern County Departments of Probation and Mental Health and community-based Family Advocates is intended to prevent children ages eight to 14 from ever entering the justice system.

Nearly 1,300 students have been referred to the EIP since 2001. Of these, 550 met the eligibility requirements. The program utilizes a child-specific, strength-based approach. Intervention activities include community service, counseling, tutoring, anger management, and various after-school programs.

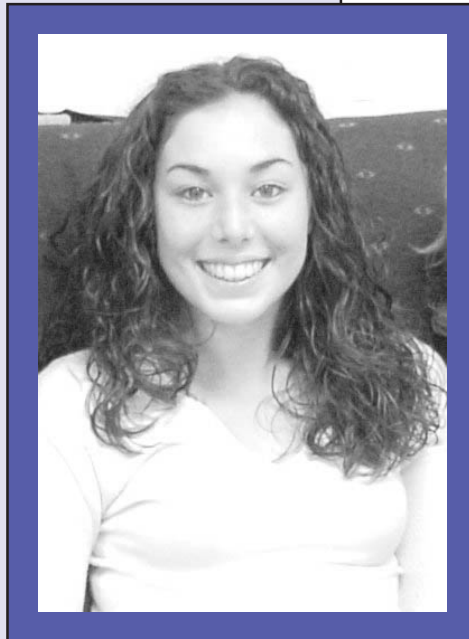
Over 75 percent of the 2002-03 participants successfully completed the 180-day program. Approximately 19 percent of the students moved while enrolled and 6 percent did not complete the program.

Program data show significant differences between those who completed the program and those who did not. Predictors of successful program completion included stronger character and self-motivation. Pre-delinquency behaviors declined substantially with "Steal and Theft Patterns" and "Runaway Patterns" decreasing by half. Dramatic improvements were also seen in academic and behavioral problems.

Kern County has invested many resources in prevention activities for at-risk and first-time offenders. The Probation Department provides many services that give young people choices outside of criminal activity.

When students participate in programs that address gang affiliation, school failure, substance abuse, and family dysfunction, positive changes happen among our most at-risk children and youth.

*- Jeanie L. Lopez
Juvenile Division Director
Kern County Probation Department*



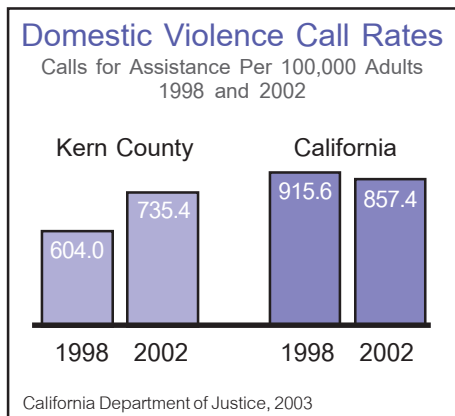
COMMUNITY INDICATORS

DOMESTIC VIOLENCE

Domestic violence is one of the most significant predictors of physical child abuse. A child witnessing abusive behavior between adults in the home is more likely to experience neglect or abuse.

During 2002, Kern County law enforcement agencies recorded 3,196 calls for assistance in domestic violence situations. Adult population estimates can be used to calculate rates for these types of calls. In 2002, Kern County had a rate of 735.4 calls per 100,000 adults. This number is 22 percent higher than in 1998, when officers received 604.0 calls per 100,000 adults.

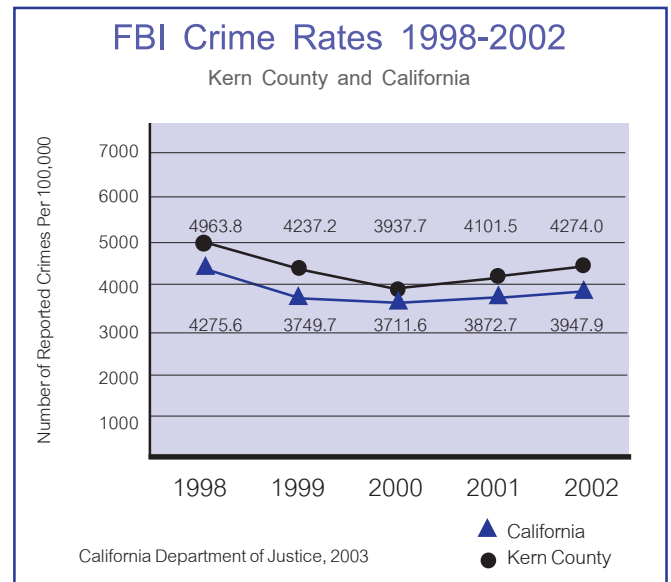
By comparison, California had a call rate during 2002 of 857.4. The statewide figure is lower than the 1998 rate of 915.6 per 100,000 adults.



In both California and Kern County, eleven percent of calls for assistance involved the use of firearms, knives, or other dangerous weapons.

Of all the calls for assistance in Kern County during 2002, nearly one-half (1,577) generated arrests for spousal abuse. Eighty-five percent of those arrested were men; 15 percent were women.

Since 1998, 19 adults in Kern County have been killed in domestic violence episodes. Six of the victims were husbands or boyfriends and 13 of the victims were wives or girlfriends.



CRIME RATES

FBI crime rates reflect how many serious crimes occur per 100,000 population. This index includes crimes of homicide, robbery, assault, larceny-theft, burglary, motor vehicle theft, and arson. By calculating rates, comparisons are easily made across all states and counties.

In 2002, the California Department of Justice reported an FBI crime index of 4274.0 in Kern County. By comparison, California's crime index was 3947.9 and the United States' index was 4118.8.

DATA SOURCE:

California Department of Justice

<http://caag.state.ca.us/cjsc/index.htm>

Think Prevention Is Expensive?

A recent study by Prevent Child Abuse America estimates child abuse costs approximately \$94 billion every year. Direct costs (\$24 billion) include medical and mental health expenses, law enforcement, judicial system and child welfare programs. Indirect costs (\$69 billion) include special education, mental health and health care, juvenile delinquency, adult criminality, and lost productivity.

COMMUNITY COLLABORATIVES AND FAMILY RESOURCE CENTERS

Since 1992 Kern County communities have partnered together to better care for children and families. The Community Collaboratives are where this interaction takes place - people talking and working together.

A common need in many communities is the availability of local direct services. Many Community Collaboratives have addressed this need by hosting Family Resource Centers (FRCs) that house multiple services for families. These “one-stop” centers provide multiple resources (including information, basic needs, referral and linking services, home visitation, case management, and educational classes) in a location that is easily accessible to community residents.

Arvin Collaborative - South Valley Neighborhood Partnership

Arvin Family Resource Center (661-854-6525)

Bakersfield Collaboratives (East Bakersfield, Greenfield, Oildale, South Chester, Southeast, 34th Street)

East Bakersfield Family Resource Center (661-868-1501)

Greenfield Family Resource Center (661-837-3720)

Oildale Family Resource Centers:

Standard Family Resource Center (661-392-2163)

Neighborhood Place - Norris Rd (661-392-2029)

Neighborhood Place - Galaxy Dr (661-392-2054)

South Chester Family Resource Center (661-398-0203)

Southeast Bakersfield Family Resource Center (661-322-3276)

Buttonwillow Collaborative

Buttonwillow Family Resource Center (661-764-9405)

Delano Neighborhood Partnership

Delano Community Connections Center (661-721-5000)

East Kern Collaborative (Mojave)

East Kern Family Resource Center (661-824-4118)

Greater Westside Collaborative (Taft)

Greater Westside Family Resource Center (661-765-7281)

Indian Wells Valley Collaborative (Ridgecrest)

Indian Wells Valley Family Resource Center (760-375-4357)

Kern River Valley Collaborative

Kern River Valley Family Resource Center (760-379-3254)

Lamont/Weedpatch Collaborative - South Valley Neighborhood Partnership

Lamont Family Resource Center (661-845-2724)

Lost Hills Collaborative

Lost Hills Family Resource Center (661-797-3042)

McFarland Community Collaborative

McFarland Family Resource Center (661-792-5524)

Mountain Communities Collaborative (Frazier Park)

Mountain Family Resource Center (661-245-3312)

Shafter Collaborative

Shafter Family Resource Center (661-746-8690)

Tehachapi Collaborative

Tehachapi Family Resource Center (661-822-2240)

Collaborative for Special Needs Children

Richardson Family Resource Center (661-336-5482)



Local Communities . . .



. . . Working in Collaboration