CSCMC 2021-2026 Strategic Plan Community-Based Quantitative Data and Related Research

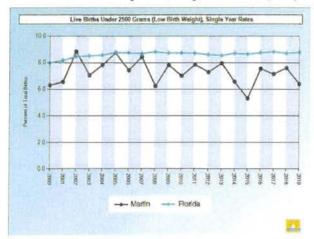
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Low Birth Weight (LBW) - <2,500 grams/5 lbs., 8 oz. at Birth

LBW is a leading cause of infant mortality, associated with a higher probability of short & long term developmental issues.

LOW BIRTH WEIGHT - MARTIN COUNTY

During 2017, the national mortality rate for infants with a (low) birth weight of 1,500-2,499 grams was 6.5 times the rate for infants with a birth weight of 2,500 grams or more. (Healthy People 2020)



BENCHMARK: Healthy People 2020 set a Low Birth Weight target of 7.8% among live births, all race and ethnicity categories.

Since 2000, Martin County low birth weight rates of newborns among mothers of all races and ethnicities have fluctuated between a high of 8.8% in 2002 and a low of 5.3% in 2015. The LBW rate for Martin County has been = to or < the comparative statewide rate for 19 of the prior 20 years (2000-19), with statistically significantly lower rates for eight (see left graph).

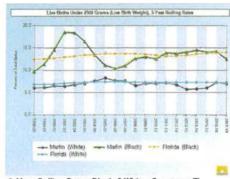
Low Birth Weight: Single Year Rates ALL Race/Ethnicity, Martin County vs FL

		L	ow Birth Weigl	nt (Single Yea	r Counts/Perc	entages) ALL R	ace/Ethnicity, N	Martin County	vs. FL		
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin	91(7.8%)	86(7.0%)*	93(7.8%)	82(7.3%)	93(8.0%)	83(6.6%)*	67(5.3%)*	96(7.5%)	91(7.2%)*	95(7.6%)	77(6.4%)
Florida%	8.7%	8.7%	8.7%	8.6%	8.5%	8.7%	8.6%	8.7%	8.8%	8.7%	8.8%

^{*} County rate is statistically significantly different than the statewide (FL) rate.

Low Birth Weight: Rate Disparities per Race/Ethnicity

Per the Centers for Disease Control and Prevention (CDC), critical determinants of racial and ethnic differences in infant mortality are Low Birth Weight (<2500 grams) and Very Low Birth Weight (<1500 grams). (Infant Mortality & Low Birth Weight Among Black & White Infants – U.S., 1980-2000)







3-Year Rolling Rates Hispanic & Non-Hispanic, County vs FL

(LEFT GRAPH) **Black & White Mothers. In 2019, 14 of 102 (13.7%) Black mothers residing in Martin County gave birth to babies of low birth weight vs. 57 of 920 (6.2%) of mothers self-identified as White. Since 2000, the (single-year) rates of LBW for newborns of Martin County mothers self-identified as Black varied between a low of 7.7% (2007) and a high of 21% (2003). With the presentation of 3-year rolling LBW data, the rate for Martin County newborns of Black mothers exceeds that of the newborns of Martin County White mothers from 1998-2000 through 2017-19 (see graph).

(RIGHT GRAPH) ** Hispanic & Non-Hispanic Mothers. In 2019, 25 of 405 (6.2%) Hispanic mothers residing in Martin County gave birth to low birth weight babies vs. 52 of 781 (6.7%) of mothers self-identified as Non-Hispanic. Since 2004, the (single-year) rates of Low Birth Weight newborns of Martin County mothers self-identified as Hispanic varied between a low of 3.6% (2015) and a high of 9.9% (2006). With the presentation of 3-year rolling LBW data for newborns of Hispanic and Non-Hispanic Martin County mothers, LBW rates for Non-Hispanic populations exceeds those of Hispanic populations from 2008-10 through 2007-19 (see graph).

** Use caution when interpreting rates and ratios based on a small denominator (population at risk). An erratic trend line illustrates the resulting instability of interpreting lower numbers, events, etc.

Sources: FLHealthCHARTS www.floridacharts.com Healthy People 2020 www.healthypeople.gov/2020 Kids Count Data Center www.datacenter.kidscount.org Morbidity and Mortality Weekly Report (MMWR), 7.12.2002/51(27); 589-592. Last updated 10.22.20

Infant Mortality

Death of live-birth infants within 364 days of birth and a sentinel indicator of a population's overall health.

Infant Mortality: All Race/Ethnicity Categories



BENCHMARK: Healthy People 2020 proposes an infant mortality benchmark rate of 6.0 per 1,000 live births.

As depicted (left), Martin County's lowest (3-year rolling) rates were 3.1 (2009-11) and 2.5 (2008-10) per 1,000 live births, both statistically significantly lower than comparative statewide measures. Since the 3-year rolling rate of 2009-11, Martin County's overall infant mortality rates (all race/ethnicity) ranged from 4.2 to 7.0 per 1,000 live births (see below).

Spanning the years of 2015 through 2019 (provisional), leading causes of infant death in Martin County included (descending order): other and nonranked (9); congenital malformation and chromosomal abnormalities (7); short gestation and low birth weight (3) and unintentional injury (3).

Infant Mortality: 3-Year Rolling Rates All Race/Ethnicity, 1998-2000 to 2017-19, Martin County vs. Florida

بالمماناة	1 1 3	1-	Martin Cou	nty Infant Mo	rtality (3-Yi	Rolling Ye	ar Counts/R	ates) All Ra	ce/Ethnicity	1		
Year	2006- 08	2007-09	2008-	2009-11	2010- 12	2011-	2012- 14	2013- 15	2014-	2015-	2016- 18	2017- 19
Martin	21(5.3)	18(4.8)*	9(2.5)*	11(3.1)*	15(4.2)	21(6.0)	25(7.0)	23(6.2)	24(6.3)	22(5.8)	21(5.5)	18(4.8)
Florida	7.2	7.1	6.9	6.6	6.3	6.2	6.1	6.1	6.1	6.1	6.1	6.0

^{*} Statistically significantly different from the statewide rate.

Infant Mortality: Rate Disparities per Race (Black/White)



Nationally, infant mortality rates among Black infants have historically significantly exceeded that of White newborns, primarily attributable to low birth weight and preterm birth. (*National Vital Statistics Reports, 2003 & 2007*)

In Martin County, the 2014-16 (3-year rolling) infant yielded a mortality rate for Black infants was *3.58 times greater* than that of White newborns - with higher rate disparity in prior periods of measure (see left).

The Black infant mortality rate for Martin County related to the 3-year rolling rate of 2017-19 was 0.0, as associated with zero (0) deaths of Black infants during the (single) years of 2017, 2018 and 2019.

Black vs. White Infant Mortality: 3-Year Rolling Rates, Martin County vs. Florida

	Martin County Infant	Mortality (3-Yr Ro	lling Counts/Rates)	Black & White Rac	e
Year	2013-15	2014-16	2015-17	2016-18	2017-19
Black	5 (16.7)	6 (19.7)	4 (14.0)	2 (7.1)	0 (0.0)
White	17 (5.4)	17 (5.5)	15 (5.1)	16 (5.5)	14 (4.8)

Infant Mortality: Rate Disparities per Ethnicity (Hispanic/Non-Hispanic)

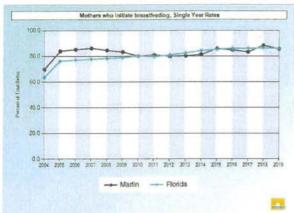
The 2017-19 infant mortality (3-year rolling) rate for Martin County births of mothers self-identified as Hispanic was 4.9 (6 deaths) versus the non-Hispanic infant mortality rate of 4.0 (10 deaths) - both rates less than the comparative Hispanic/non-Hispanic statewide rates. During the prior 3-year rolling period of 2016-18, the rate of infant mortality within Hispanic populations of Martin County was 7.4 per 1,000 live births.

Sources: FLHealthCHARTS <u>www.floridacharts.com</u> Healthy People 2020 <u>www.healthypeople.gov/2020</u> Last updated 8.31.20

Mothers who Initiate Breastfeeding

Breastfed babies have lower risk of Sudden Infant Death Syndrome (SIDS), asthma, diarrhea, vomiting, respiratory infection, Type 2 diabetes, leukemia & obesity (during childhood) and necrotizing enterocolitis (associated with preterm birth)+.

Mothers who Initiate Breastfeeding



BENCHMARK: *Healthy People 2020* set a target of 81.9% of infants ever breastfed, against the (national) 76.1% 2009 baseline.

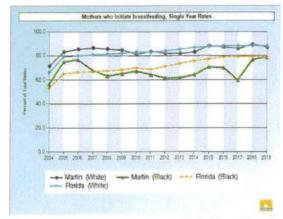
During 2018, Martin County had its highest rate (88.3%) since 2004 of mothers initiating breastfeeding (all race/ethnicity).

During the 5-year period of 2015-2019, the rate of breastfeeding initiation associated with Martin County exceeded the *Healthy People* target of 81.9%.

Initiation of Breastfeeding: Single Year Rates ALL Race/Ethnicity, Martin County vs. FL

			Mothers v	who Initiat	e Breastf	eeding (S	ingle Year	r Percenta	ages) ALL	Race/Eth	nicity, Ma	rtin Coun	ty vs. FL		U TON	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin%	69.8*	84*	85.3*	86.3*	84.7*	83.4*	80.1	81	79.9	80.3	81.3*	85.8	84.8	83.3*	88.3*	85.6
Florida%	63.5	76.1	77	77.6	78.2	78.8	80.1	79.6	81.0	82.5	84.2	85.2	86.0	86.0	86.2	86.0

* Martin County rate is statistically significantly different (+or-) than the statewide (FL) rate.



The American Academy of Pediatrics recommends exclusive breastfeeding the first 6 months. Per the CDC, national breastfeeding initiation rates from 2011-2015 were significantly lower among Black vs. White infants in 23 states, with a difference of at least 15 percentage points in 14. (Racial & Geographic Differences in Breastfeeding-U.S., 2011-15)

(LEFT CHART) In Martin County, from 2011-15, breastfeeding initiation rates between Black and White infants yielded a percentage point difference of 17.7-20.7 percentage points. However, in 2019, the discrepancy for breastfeeding initiation between Black and White infants reduced to an 8.6 percentage point difference (78.4% vs. 87.0%).

Breastfeeding Initiation: Single Year Rates Black & White, Martin County

MARTIN COUNTY DATA - Breastfeeding Initiation - Area WIC Office

*For mothers served during 2019-20, an average of 87.8% of Martin County infants were "ever breastfed", the last Quarter (April-June, 2020) placing Martin County 4th highest ranked county statewide.

*For the mothers served during the same timeframe, an average of 83% of Non-Hispanic Black infants were "ever breastfed", the last Quarter (April-June, 2020) placing Martin County 6th highest ranked county statewide.

MARTIN COUNTY DATA - Continuance of Breastfeeding at Infant Age of 6 Months

BENCHMARK: The *Healthy People 2020* target to increase the proportion of infants breastfed at 6 months of age is 60.8%, against the 46.6% 2011-12 baseline.

*Martin Health Systems set a 2019-20 goal of 45% of mothers who breastfed in the hospital will be breastfeeding six (6) months post-delivery, via a telephone survey. **Result**: 80% 6-month breastfeeding rate among survey participants.

*For mothers served by WIC during 2019-20, an average of 48% were breastfeeding (partial or full) 6 months post-delivery, the last Quarter (April-June, 2020) placing Martin County 5th highest ranked county statewide, though less than the *Healthy People 2020 benchmark*.

Sources: FLHealthCHARTS www.floridacharts.com; Healthy People 2020 www.healthypeople.gov/2020;

+U.S. Dept. of Health & Human Services www.womenshealth.gov; Morbidity & Mortality Weekly Report (MMWR) 7.14.2017/66(27);723-727

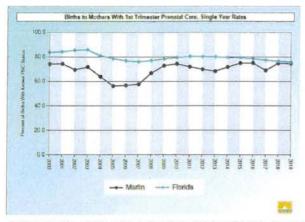
'Breastfeeding in Florida, 2013 PRAMS (Pregnancy Risk Assessment Monitoring System, FDOH www.floridaprams.org

**Last updated 10.28.20

Births to Mothers with First Trimester Prenatal Care

Babies of mothers who do not receive prenatal care are 3xs more likely to have low birth weight and 5xs more likely to die than those born to mothers who do get prenatal care. (Healthy People 2020)

Births to Mothers with First Trimester Prenatal Care: All Race/Ethnicity



BENCHMARK: Healthy People 2020 set a goal of **84.8%** births to females receiving 1st trimester prenatal care (all race/ethnicity) - representing a 10% improvement above the 77.1% 2016 baseline.

The percentage of Martin County births to females in receipt of early prenatal care has fallen statistically significantly below the statewide rate every year, from 2000-2017 (see left).

In 2019, St. John's County yielded the highest statewide percentage of mothers entering 1st trimester prenatal care, at 84.8% - with De Soto the lowest at 56.8%, with Martin County at 74.5%.

1st Trimester Prenatal Care: Single Year Rates ALL Race/Ethnicity, Martin County vs. FL

m RE	Bir	ths to Mo	ms with 1	st Trimest	er Care (Single Ye	ar Percer	ntiles) AL	L Race/E	thnicity, I	Martin Co	unty vs. F	L	THE S
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin	56.8*	57.7*	66.8*	72.9*	74.4*	71.9*	69.8*	68.3*	71.7*	74.9*	75.0°	69.0*	74.8	74.5
Florida	76.8	75.9	76.8	78.3	79.3	80.3	80.0	79.9	79.4	79.3	78.4	77.3	76.5	75.9

^{*} Martin County rate is statistically significantly different (lower) than the statewide (FL) rate.

Disparity in Prenatal Care Access to Mothers based upon Race/Ethnicity



The percentage of Martin County Black mothers that accessed 1st trimester prenatal services elevated to 56% in 2008, with a range of 55-77% through 2018. During the same time frame, the range of access for White females was 69-78%.

In Martin County, disparity in access to early prenatal care over the prior 10-year period has been as high as 19% greater for White mothers in comparison to Black mothers (2014). During 2018, this discrepancy diminished to 0.6%. The gap widened in 2019, as 78% of White mothers that gave birth accessed early prenatal care, compared to 67% of Black mothers - an 11% difference.

1st Trimester Prenatal Care: Single Year Rates Black & White, Martin County



The percentage of Martin County mothers self-identified as Hispanic entering 1st trimester prenatal care elevated to 70.9% in 2009, with a range of 51-65% in ensuing years. During this same time frame, the range for Martin County non-Hispanic mothers entering early care was 68-80%.

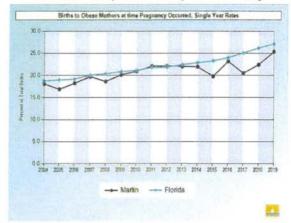
Since 2004, prenatal care entry rates for Hispanic Martin County mothers have been statistically significantly lower than comparative statewide rates for Hispanic mothers.

1st Trimester Prenatal Care: Single Year Rates Hispanic and Non-Hispanic, Martin County

Births to Obese Mothers at Time Pregnancy Occurred (Live Births)

1 in 5 women are obese at the beginning of their pregnancy, placing them at increased risk of complications, including high blood pressure and diabetes. Infants born to obese women are 2xs likely to be obese and develop type 2 diabetes later in life*.

MATERNAL OBESITY (Maternal obesity is a BMI >30 kg/m2; maternal overweight is 25-29.9 kg/m2.)



Maternal obesity is associated with heightened risk for preeclampsia and complications of labor and delivery, with increased incidence of cesarean births. The fetus is also at risk for preterm birth, stillbirth and congenital anomalies. (The Impact of Maternal Obesity on Maternal & Fetal Health; Leddy, Power & Schulkin; Reviews in Obstetrics & Gynecology, 2008 Fall; 1(4): 170-178.)

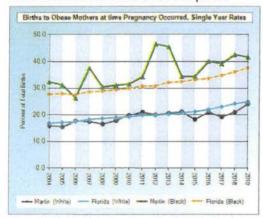
Per the *National Center for Health Statistics*, maternal obesity complicates up to 20% of pregnancies, nationally.

The Martin County rate of maternal obesity (all race/ethnicity) has been statistically significantly less than the statewide rate for three of the past five years (see below table). However, the Martin County 2019 rate of 25.4% exceeded all prior 16 years of local data.

Maternal Obesity: Single Year Rates ALL Race/Ethnicity, Martin County vs. FL

		Materr	al Obesity	(Single Yea	ar Counts/F	ercentage	s) ALL Race	Ethnicity, I	Martin Cour	nty vs. FL		
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin	233 18.6%	229 20.1%	252 20.9%	256 22.1%	237 22.1%	251 22%	272 22%	246 19.8%*	289 23.2%	254 20.5%*	273 22.4%*	302 25.4%
Florida	20.3	20.1%	21.1%	21.8%	21.8%	22.4%	22.8%	23.3%	24.0%	25.0%	26.2%	27.1%

MATERNAL OBESITY: Racial & Ethnic Disparities



Local maternal obesity rates of Black and White mothers is displayed left and below. Single-year rates of maternal obesity for Black and White mothers was 46.5% vs. 19.9% in 2012, and 45.5% vs. 20.4%. In 2019, maternal obesity impacted 41.6% of Martin County Black mothers, compared to 37.4% of Black mothers statewide.

The rate of maternal obesity among Martin County Hispanic mothers has been statistically significantly higher than the comparative statewide rate for six (6) of the 10 years between 2010 and 2019, with a range of 23.8%-31.4%. For 2019, 28.9% of Martin County Hispanic mothers met the criteria for maternal obesity (115 of 398). (No chart or table.)

Maternal Obesity: Single Year Rates Black & White Martin County

Maternal Obesity (Single Year Counts/Percentages) Black/White Disparity, Martin County													
	2012	2013	2014	2015	2016	2017	2018	2019					
White	19.9%	20.4%	21.1%	18.3%	21.0%	19.2%	21.0%	24.1%					
Black	46.5%	45.5%	34.3%	34.3%	40.0%	39.1%	42.6%	41.6%					

BENCHMARK: Births to Mothers with Healthy Weight *Healthy People 2020* set a target of **57.8%** for women with a healthy pre-pregnancy weight (meeting neither overweight nor obese classifications).

	All Race/All Ethnicity	Bla	ck/White	Hispanic/	Non-Hispanic
		Black	White	Hispanic	Non-Hispanio
Overweight + Obese	53.4%	73.3%	50.7%	61.8%	49.0%
Counts	636 of 1,191	74 of 101	461 of 909	246 of 398	380 of 775

Sources: FLHealthCHARTS www.floridacharts.com Healthy People 2020 www.healthypeople.gov *Division of Reproductive Health, Centers for Disease Control and Prevention. Obesity. Maternal and Infant Health Research: Pregnancy Complications. Last updated 10.23.20

Teen Birth & Repeat Births to Teen Mothers

Teen mothers are less likely to graduate from high school or attain a GED by the time they reach age 30. Early fatherhood is associated with lower educational attainment and lower income. (Healthy People 2020)

TEEN BIRTH RATE Ages 15-19



BENCHMARK: By 2017, the national (overall) teen birth rate declined to 19 per 1,000 female teens, with New Hampshire and Massachusetts sharing the lowest rate of 8 per 1,000. (Annie E. Casey Foundation).

The 2019 statewide teen birth rate was 16.2, compared to 13.0 for Martin County. During 2019, of 48 Martin County births to teens ages 15-19, below denotes number by age:

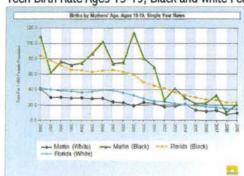
2019 Mar	tin Cou	nty # T	eens, Li	ve Birth b	y Age
Age	15	16	17	18	19
# of Teens	5	5	1	18	19

Teen Birth Single Year Rates Per 1,000 ALL Race/Ethnicity, Martin County vs. FL

		Teen Birth	Rate Ages	15-19 (Sin	gle-Year Co	unts/Rates	ALL Race	Ethnicity, M	artin Count	y vs. FL		
Year	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin	124(33.8*)	120(32.6)	101(27.4)	96(25.9)	70(19.2*)	77(21.5)	79(21.6)	55(15.1*)	67(18.2)	72(19.8)	43(11.6*)	48(13.0)
FL - Rate	40.7	37.2	32.4	28.7	27.6	24.6	22.5	21.0	19.5	18.5	16.7	16.2

^{*} Martin County rate is statistically significantly different than the statewide (FL) rate.

Teen Birth Rate Ages 15-19, Black and White Females

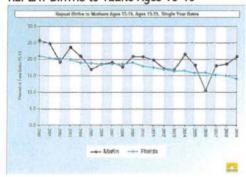


Teen Birth: Disparities per Race/Ethnicity

Of the 48 teens in Martin County, ages 15-19, that gave birth during 2019, 30 self-identified as White, six (6) as Black and nine (9) as Other (data unavailable on remaining three).

Te	en Birth Rate	, Ages 15-19	9, Single Year	Rates per 1	,000, White &	Black Fem	ales, Martin	County
Year	2012	2013	2014	2015	2016	2017	2018	2019
White	56(17.6)	58(18.4)	66(20.7)	42(13.3)	38(11.9)	41(13)	26(8.2)	30(9.6)
Black	7(26.1)	10(41.2)	8(29.2)	6(21.8)	6(22.1)	9(32.4)	3(10.5)	6(20.6)

REPEAT BIRTHS to TEENS Ages 15-19



DEFINITION: According to *Centers for Disease Control and Prevention* (CDC), repeat teen birth is the 2nd (or more) pregnancy ending in a live birth before age 20.

Per the CDC, nearly 1 in 5 (20%) of births to teen mothers ages 15-20 is a repeat birth. Though declining nationally, "infants born from a repeat teen birth are often *born too small or too soon*, which can lead to more health problems for the baby".

During 2019, of the 48 Martin County births to teens ages 15-19, 10 (21%) were repeat births to teens age 18 (3) and age 19 (7).

Repeat Teen Birth Rate: Single Year Rates ALL Race/Ethnicity, Martin County vs. FL

	E W. I. L.	Repeat Tee	en Birth Ages	15-19 (Single	-Year Counts	*/Percentiles	ALL Race/Et	hnicity Marti	n County vs. F	L	Y = 1 = 2 = 1
Year	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin	25(20.8%)	21(20.8%)	19(19.8%)	12(17.1%)	13(16.9%)	17(21.5%)	10(18.2%)	7(10.4%)	13(18.1%)	8 (18.6%)	10(20.8%)
FL- Rate	18.9%	17.8%	17.4%	16.9%	16.4%	16.5%	15.8%	15.9%	15.2%	15.0%	14.1%

^{*}Given low rates of occurrence, use caution when interpreting and comparing rates/ratios.

Teen Repeat Birth: Disparities per Race/Ethnicity

The CDC reports American Indian, Alaskan Natives, Hispanics and black teens are 1.5 times more likely to have a repeat birth, compared to White teens.

In Martin County, during 2019, of the 10 repeat births to teens ages 15-19, seven (7) females self-identified as White and two (2) self-identified as Black (data unavailable on the remaining one).

Sources: FLHealthCHARTS www.floridacharts.com Annie E. Casey Foundation www.dacacenter.kidscount.org Centers for Disease Control and Prevention www.cdc.gov **Births in a specified age group divided by females in same age group, per 1,000. Last updated 10.22.20

Childhood Obesity

Children and adolescents who are overweight or obese are at increased risk for developing diabetes and heart disease. They are also likely to maintain overweight or obese status into adulthood, placing them at increased risk for serious chronic diseases. Being overweight increases the risk for a number of medical conditions, including asthma, diabetes Type 2, heart disease (high cholesterol), high blood pressure, liver and menstrual problems and sleep apnea*

CHILDHOOD OBESITY

Childhood obesity has been deemed a major health problem. In 2015–2016, the proportion of U.S. youth that were obese reached a new high of 19%, more than triple the 5% proportion in 1971-74. Per *Child Trends*, the proportion of obesity in children and youth increases with age; 14% of 2- to 5-year-olds were obese in 2015-2016, compared with 18% of 6- to 11-year-olds and 21% of 12- to 17-year-olds. Additionally, a child with one obese parent has a 50% chance of being obese. When both parents are obese, their children have an 80% chance of obesity*.

BENCHMARK The Healthy People 2020 target for improvement in the rate of obesity among children and adolescents ages 2-19 years is 14.9%.

MARTIN COUNTY OVERWEIGHT and OBESITY RATES

Body mass index (BMI) is a measure used to determine childhood overweight and obesity. Per the CDC, the category of 'overweight' is defined as a BMI at or above the 85th percentile and below the 95th percentile for children and teens of the same age and sex. According to the CDC, 'obesity' is defined as a BMI at or above the 95th percentile for children and teens of the same age and sex.

From the 10 academic years of 2010-11 through 2019-20, *Indiantown Middle School* generated the highest percentage of 6th grade students with combined BMI measures that met the definition of overweight or obese (i.e. above 'normal') with a range across the years of 49% to nearly 65% of students tested.

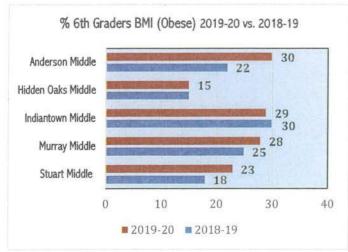
For five (5) of these academic years, with a range of 40% to 43.4%, *Murray Middle School*'s 6th graders generated the 2nd highest BMIs that were above 'normal'. *David L. Anderson Middle School's 6th grade* students had the 2nd highest above 'normal' BMI percentages for four (4) of the 10 years - with a range of 43% to 50.3% combined overweight and obese categories.

MARTIN COUNTY BMI HISTORY - 1st, 3rd & 6th Grade Students

See below the prior (14-year) history of the combined percentage of Martin County public school's 1st, 3rd and 6th graders in receipt of BMI testing that met the criteria of overweight or obese.

		Mar	tin County.	Students T	otal % Ove	erweight & (Obese by G	rade Level,	per BMI, 2	2006-07 th	rough 201	9-20		
	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20
1st Grade	31.8%	32.9%	28.8%	28.9%	28.7%	28.2%	27.9%	28.0%	29.2%	26.8%	27.6%	28.6%	30.0%	27.9%
3rd Grade	34.5%	37.9%	32.4%	33.6%	35.5%	33.9%	31.6%	33.9%	33.4%	36.7%	38.5%	36.3%	36.9%	37.4%
6 th Grade	38.4%	42.6%	35.1%	39.4%	37.4%	36.7%	35.7%	35.1%	37.3%	37.3%	39.8%	39.9%	41.7%	44.5%

Important to Note: From one academic year and/or grade level to the next, data is not necessarily attached to the same children.



Obesity: Body Mass Index [BMI] at or above the sex- and age-specific 95th percentile

(See left.) Upon comparing 2018-19 and 2019-20 percentages of Martin County 6th graders meeting the criteria of a BMI rating of obesity, Hidden Oaks Middle remained at 15% and Indiantown Middle had a 1% decrease. Anderson Middle, Stuart Middle and Murray Middle all had increases of 3%-8% in above 'normal' BMI scores.

In 2019-20, a total of 44.5% of tested 6th graders had BMI scores in the overweight or obese range, compared to 41.7% in 2018-19.

During this same year, a total of 37.4% 3^{rd} graders ranked as overweight or obese, an increase from the 2018-19 36.9% that exceeded 'normal' parameters.

Of 2019-20 BMI-tested 1st grade students, 27.9% exceeded 'normal' rankings, compared to 30% during 2018-19 (and 28.6% in 2017-18).

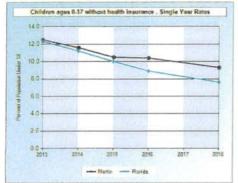
Sources: Healthy People 2020 www.healthypeople.gov Martin County School District BMI Results, 2006-7 through 2019-20.

*University of California San Francisco Benioff Children's Hospital. Child Trends Databank, Overweight Children and Youth www.childtrends.org
Last updated 8.31.20

Children Under 18 Without Health Insurance

Children without health insurance coverage are less likely to receive appropriate treatment for conditions like asthma or critical preventive services such as dental care, immunizations, and well-child visits that track developmental milestones. *

The Institute of Medicine (IOM)* concludes that being uninsured is hazardous to one's health and has recommended the national implementation of a strategy to achieve health insurance coverage for all.



BENCHMARK: *Healthy People 2020's* goal is to increase the proportion of children and youth aged 0-17 years with a specific source of ongoing care to 100%. (**Baseline**: *94.3%*)

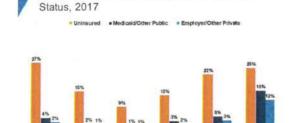
In 2018, Jefferson County had the lowest statewide rate of uninsured children ages 0-17, at 2.2% and Calhoun County the highest, at 17.5%, compared to Martin County's 9.3% uninsured.

See below 10-year history Martin County versus statewide rates of uninsured children ages 0-17.

Uninsured Children Ages 0-17 Single Year Rates ALL Race/Ethnicity, Martin County vs. FL

7.0	2008-201	8 Uninsured	Children Age	s 0-17 (Singl	e-Year Perce	ntages) ALL	Race/Ethnici	ty, Martin Co	unty vs. FL	
Year	2008	2009	2010	2011	2012	2013	2014	2015	2016	2018
Martin	15.6%	15.7%	16.8%	11%	11.6%	12.5%	11.6%	10.5%	10.4%	9.3%
Florida	18%	16%	15%	11.9%	11.4%	12.3%	11.2%	10.0%	8.9%	7.6%

Please note below the effect upon access to medical and dental care for uninsured children:



Children's Access to Care by Health Insurance

Due to Cost Due to Cost > 2 Years Ago to Cost

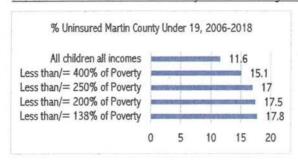
HOTE: Includes children ages 2 in 18. Includes barcera experienced in year 12, mentre. Respondents who paid study sware of the way be emirgency received the hotel small price and the hotel source of costs 18 differences between semisimal (COSEC). June 19 feet of Costs 18 differences between semisimal costs of COSEC, June 19 feet of Costs 18 differences between semisimal costs 18 costs 18 differences between semisimal costs 18 costs 18 differences in 18 differences

Uninsured children have considerable unmet need and delayed care that increases over time. Parents report considerable stress and worry associated with their children's lack of insurance coverage. ** Conversely, insured children are more likely to have improved outcomes related to education, as well as health. For example, specific to dental care, tooth pain is associated with significantly lower school attendance.

Recent decades have resulted in the expansion of health insurance coverage for U.S. children. The 2015 coverage rate brought record highs of 95% for *all* children and 93% for Latino children (whose rates have historically lagged behind those of White or Black children). *Child Trends*, 5.12.17, David Murphey

From 2014-18, Martin County had a ranking of '3' specific to health insurance status for children ages 0-17 ('1' Most Favorable, '4' Least Favorable). (School-aged Child and Adolescent Profile - 2018, FL Department of Health) Per Florida KIDS Count, the number of uninsured Martin County children under age 18 totaled 3,013 in 2018 and was 2,978 in 2016.

See below data re: status of Martin County children under age 19 per poverty level, 2006-2018, and overall rates, all income:



	2014	2015	2016	2017	2018
Martin	12.3%	9.6%	9.0%	10.5%	8.9% (+/- 1.8%)
FL	No.		The State		7.6% (+/- 0.4%)

Sources: FLHealthCHARTS www.floridacharts.com Healthy People 2020 www.healthypeople.gov/2020 US Census, Small Area Health Insurance Estimates (SAHIE) *Institute of Medicine (US) Committee on Health Insurance. America's uninsured crisis: consequences for health and health care. Washington (DC): National Academies Press (US); 2009. **The impact of lack of health insurance on children. Lave JR et al. J Health Soc Policy1998;10(2):57-73.

Last updated 10.26.20

Last updated 10.26.20

Last updated 10.26.20

The impact of lack of health insurance on children. Lave JR et al. J Last updated 10.26.20

Last updated 10.26.20

The impact of lack of health insurance on children. Lave JR et al. J Last updated 10.26.20

**Last updated

Access to Dental Care

Children with poor oral health are nearly **three times** more likely than their healthy counterparts to miss school as a result of dental pain. Absences due to oral pain are associated with poorer school performance. *

NATIONAL ORAL HEALTH: Healthy People 2020 established a goal to reduce the proportion of children & adolescents with dental caries or untreated dental decay, particularly among at-risk, uninsured populations.

	Healthy People	le 2020 Targe	ets for Rate	e of Dental Issue.	s per Uninsur	ed vs. Priva	ate Insured, 201	3-16		
Age Range	Manual Control	3-5 Years	LINE .	(6-9 Years	N. L.	13-15 Years			
Dental Caries	2020 Target	Uninsured	Private	2020 Target	Uninsured	Private	2020 Target	Uninsured	Private	
Dental Carles	30%	41.7%	19%	49%		- 12	48.3%			
Untreated	2020 Target	Uninsured	Private	2020 Target	Uninsured	Private	2020 Target	Uninsured	Private	
Dental Decay	21.4%	26.9%	7.4%	25.9%	32.5%	11.5%	15.3%	31.7%	7.9%	

Per the *National Health and Nutrition Examination Survey* (2013-16), per race/ethnicity disparity, Black or African American children ages 6-9 had the highest rates of untreated dental decay, followed by children of Mexican American heritage.

ORAL HEALTH: Florida's Children

According to the Florida Department of Health (FDOH), dental caries (tooth decay) remains the most common preventable chronic infectious disease among young children and adolescents in the United States. Across Florida, during the 2016-2017 school year, per a statewide oral health surveillance of 3rd graders:

- *Untreated decay highest for non-Hispanic Black children (34.6%) and for children without dental insurance (32.8%)
- *More than half children from schools with highest % of students enrolled in free/reduced lunch had caries experience (52.2%)
- *Dental sealant prevalence highest for children from schools with less than 25% students enrolled in free/reduced lunch (52.5%)
- *In 2014-2015, 5.4% of Early Head Start children ages 0-3 and 20.8% of Head Start children 3-5 years had untreated decay

Overall, children covered with private dental insurance had the lowest rate of each oral indicator of need and the highest rate of dental sealants, compared to children who had Medicaid or no dental insurance.

Interventions. Per the *Centers for Disease Control and Prevention* (CDC), dental sealants can prevent up to 80% of tooth decay and prevent costs of future dental services from untreated tooth decay. The CDC (*State Actions to Improve Oral Health Outcomes*,) strongly recommends evidence-based preventive interventions that include expanded sealant delivery within elementary and middle schools in which at least 50% of students qualify for the federal/state free-reduced meal program.

LOCAL ORAL HEALTH SERVICES for CHILDREN: Martin County

According to State of Florida statistics, during CY 2015, 141 youth ages 0-20 visited Emergency Departments for dental-related complaints, at a cost of \$197,501 (payer sources unavailable for this age category).

PROGRAM INTERVENTION	2018-19	2019-20	THE COURSE OF STREET
K, 2 nd & 3 rd Graders who received dental screenings, fluoride, sealants, education	2,242	1,665	
ELC children who received dental screenings, fluoride, sealants, education	684	631	
Total Children Served	2,926	2,296*	* Impacted by COVID
Parents who received education, follow-up, care coordination	400	424	
ELCs participating in Toothbrush Program	4	7	2019-20 80% had an improved Oral Health Index; 8.8% remained fair.

Light of the World

During 2019-20: The *Little Lights Dentistry Program* served 783 children during the 2019-20 contract year, 76 for acute dental emergencies. 'Little Lights' continues to work with children that have no insurance or Medicaid, whose family incomes fall below 200% of the Federal Poverty Level, and that have not graduated from high school (may go up to age 21).

Sources: FLHealthCHARTS www.floridacharts.com Centers for Disease Control and Prevention www.cdc.gov *FL DOH Florida's Burden of Oral Disease Surveillance Report 2016, 1.1; Oral Health Status of Florida's Third Grade Children 2016-17 http://www.floridahealth.gov/programs-and-services/community-health/reports/ documents/oral-health-third-grade-2016-2017.pdf Dental-Related ED Visits Florida CY 2015 by Patient County of Residence, Age, and Primary Payer www.oralhealthflorida.org Last updated 10.27.20

Alcohol, Tobacco and Drug Use Among Teens (2018 & 2020 Data)

Per *Healthy People 2020*, substance abuse is associated with effects upon teenage pregnancy; HIV/AIDS and other sexually transmitted diseases; domestic violence; child abuse; motor vehicle crashes; crime; homicide and suicide.

Substance abuse has a major impact on individuals, families, and communities, with effects that are cumulative, significantly contributing to costly social, physical, mental, and public health problems.

BENCHMARK: See below Healthy People 2020 goals specific to substance abuse measures, 2018 actuals, Martin County vs. FL.

Healthy People 2020 Target %	Martin%	Florida%	Substance Use/Abuse Indicator; Children & Adolescents (All Participant Ages)
16.0	3.8	2.5	Use of cigarettes in past 30 days.
0.0	36.8	27.1	Any use of use of smokeless tobacco products by children and adolescents.
12.8	27.1	22.0	Use of alcohol or any illicit drugs during past 30 days.
6.0	15.0	10.9	Use of marijuana during past 30 days.
5.2	10.1	6.8	Binge drinking during past 30 days.
No Target Yet	7.8	5.8	Proportion that use inhalants. (2015 Baseline: 2.7%)
25.5	16.2	14.3	Proportion that in past 30 days rode with driver that had drunk alcohol.
46.8	Middle 64.1 HS 53.6	Middle 62.1 HS 55	Proportion perceiving great risk associated with consuming 5 or more alcoholic drinks on a single occasion 1-2x weekly.
	11.6	9.0	Smoked marijuana to get high before or during school in past 12 months.

				Ma	rtin County	2000 - 20	18				MARTIN	FL
SUBSTANCE	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018	2020 900 Youth	2020
Alcohol	43.7%	39.3%	37%	34.2%	37.8%	31.4%	27.2%	19.5%	21.4%	19.1%	16.0%	14.8%
Cigarettes	24.1%	16.6%	14.4%	10.6%	15.1%	11.2%	7%	6.7%	2.4%	3.8%	1.1%	1.8%
Marijuana	25.1%	19.7%	14.7%	16.8%	19.6%	16.6%	14.5%	15.6%	14.1%	15.0%	12.1%	10.7%
Pain Meds		5.5%	3%	2.6%	4.3%	3%	1.6%	1.5%	2.1%	1.0%	1.2%	1.1%
Inhalants		3.1%	4.4%	2.4%	2.7%	2.7%	1.8%	2.4%	1.6%	2.1%	2.1%	1.9%
Vaping Ggs	77			77.	777.	155	1(5%)		11.0%	23.5%	15.3%	11.4%
Alcohol or Any Illicit Drug	65.0%	42.5%	41.4%	37.4%	42.6%	57.3%	51.5%	48.7%	27.9%	27.1%	22.4%	22.3%

According to 'Inhalant Use in Florida Youth' (2008), the younger the age of 1st use of alcohol, cigarettes and marijuana, the higher the lifetime and current prevalence of inhalant use. Across a sample of 60,345 Florida students, grades 6th-12th, lifetime use was highest among children age 14 and current use among those 13. Inhalant users were found more likely to be depressed, acknowledge deviant behavior, skip school, make lower grades and have siblings/friends that use(d) illegal substances. The study concludes that because inhalant use may be a marker for adolescents with a high-risk profile for subsequent illegal drug use that prevention efforts should be directed to these students at an early age.

Per the *CSCMC Community Concerns Survey*, 2019, the community indicated that, of 30 child-specific indices, "children and youth understand the effects of drugs, alcohol, vaping/e-cigarettes, etc." as the <u>11th</u> highest need in Martin County.

SUBSTANCE USE - Martin County, 2020 Florida Youth Substance Abuse Survey

Details: 964 Martin County youth were included in this survey; 51.5% Male; 48.3% White, non-Hispanic. Of the total, 529 youth (55%) were 11-14* years of age; 371 youth were 15-17. *There were no 10 year-old Martin County participants in the survey.

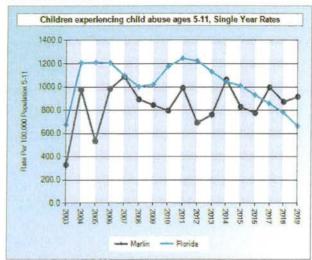
			Martin County	2020 Date	a, Past 30 Day	s, Ages 10-	14 vs. 15-1.	7			
	Vaping Nicotine	Vaping Marijuana	Inhalants	Alcohol	Marijuana or Hashish	Binge Drinking	Cigarettes	LSD, PCP	Heroin	Meth	Cocaine Crack
10-14 (529)	10.0% (53)	3.7% (19)	3.8% (20)	7.7% (41)	4.1% (9)	1.7% (9)	.5% (3)	.4% (2)	.2%	.2% (1)	.2% (1)
15-17 (371)	21.1% (78)	15.6% (58)	.5% (2)	25.2% (96)	19.1% (71)	11.7% (43)	.8% (3)	1.6% (6)	0 (0)	.4% (2)	.4%

Sources: Healthy People 2020 www.healthypeople.gov/2020 The Florida Youth Substance Abuse Surveys, 2000-2018; Lorena M. Siqueira MD, MSPH & Lee A. Crandall PhD (2007) Inhalant Use in Florida Youth, Substance Abuse, 27:4, 27-35, DOI: 10.1300/J465v27n04. 04 Last updated 10.26.20

Child Maltreatment Rate

Per *Child Trends*, rates of substantiated child maltreatment have shown little historical change, although national rates were 'remarkably' lower in 2017 compared to 1990, having fallen from 13 per 1,000 children to 9 per 1,000. Younger children continue to be maltreated at higher rates than older children, with the rate for children ages 0-3 three (3) times the rate of youth ages 16-17 (15 and 5 per 1,000 children in 2017, respectively).

CHILD MALTREATMENT



BENCHMARK: *Healthy People 2020's* target is a rate of 8.5 (per 1,000) re: persons <18 years reported and confirmed to be victims of nonfatal maltreatment by State child welfare agencies.

Per **Florida Kids Count**, the Martin County rate of at least one case of verified maltreatment per 1,000 (of the same age group) was as follows:

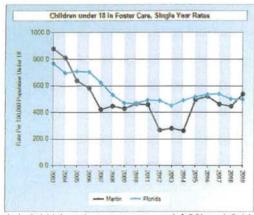
	2012-13 Baseline	2013-14 Baseline	2017-	2018-
Martin County # of Children			188	210
County Rate	5.9	7.2	7.6	8.4

Children experiencing abuse, ages 5-11, single year rate, Martin vs. Florida - see below table.

Year	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin Counts	89	82	79	99	69	76	105	81	76	97	86	91
MC Rate	893.8	844.1	796.2*	991.4*	692*	761.2*	1063	828.5*	775.7	996	872.4	915.4*
FL Rate	1000.9	1020.3	1175.1	1244.4	1223.1	1129.8	1043.9	1011.4	930.3	857.9	779.3	662.7

The 2019 Martin County rate of children ages 5-11 (per 100,000) that experienced <u>at least one case of verified maltreatment</u> statistically significantly exceeded the statewide rate, placing it 25th of 67 among Florida counties.

OUT of HOME PLACEMENT



Year	2012	2013	2014	2015	2016	2017	2018	2019
Martin #	69	72	67	126	132	117	115	139
MC Rate	267*	280*	262*	497	521	462	447	537
FL Rate	488	449	488	516	534	538	500	497

FOSTER CARE From 2012 through 2014, Martin County foster care rates were statistically significantly lower than State of FL rates. The 2019 rate of Martin County children <age 18 in foster care (per 100,00 of population <18) increased, exceeding the 2019 State rate. **Note:** Per the 2019 CSCMC Community Concerns Survey, respondents indicated "Children exposed to neglect and/or abuse, and those placed in foster care settings, receive services to support permanency" as

their 2nd highest important concern (of 30) and 2nd lowest in perceived availability of resources, both factors isolating child maltreatment as **the highest need** in Martin County.

LOCAL DATA - Out of Home Placement and Dependency Case Management

Denise Waninger, MC Director, *Communities Connected for Kids*, provided Martin County children out-of-home OOH care data (see table), that includes licensed (foster, group), relative and non-relative placement. Martin County currently has 27 licensed homes.

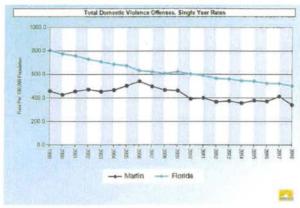
Age Range	00H# 102
0-5	48
6-12	36
13-17	18

The 'Board' rate to foster a child ages 0-5 is \$477 per month. Child care co-pay costs are the responsibility of the foster parent(s).

The number of Martin County children served via Dependency Case Management has historically been @160 per month. Inexplicably, this increased in 2019, with an average of 200 children in care per month from May 2019 on (up to 234), until a recent decline of 180.

Domestic Violence (DV) - Exposure of Children to Violence

Children in homes where one parent is abused may feel fearful and anxious. They may always be on guard, wondering when the next violent act will happen. Very young children that witness intimate partner violence may exhibit disrupted attachment and regressive behavior, e. g. bed-wetting, thumb-sucking, increased crying with difficulty falling or staying asleep, and may show signs of terror and separation anxiety. Children that witness or who are victims of emotional, physical or sexual abuse are at higher risk for health issues in adulthood, including depression and anxiety, diabetes, obesity and heart disease. Office of Women's Health www.womenshealth.gov



BENCHMARK: Against a 58.9% 2008 baseline, *Healthy People 2020* has set a target of 53.0% of children exposed to any form of violence, crime and abuse, representing 10% improvement.

Children that witness violence in the home and abused children display many similar psychologic effects, including being at greater risk for internalized behaviors such as anxiety and depression, and for externalized aggressive behavior. School-age children are more likely to have psychosomatic complaints and compromised social competence, interpersonal skills and school performance, including truancy. Latency-age children and adolescents may engage in risk-taking behavior, substance use/abuse and early sexual activity. Overall, youth that witness DV have unhealthy attitudes about violence as a means of resolving conflict and more likely use violence themselves.

Total DV Offenses, 1999 -2018, Single-Year Rates, Martin v Florida

	Per	FDLE: Total	Domestic \	/iolence Of	fenses, Rat	te Per 100	,000 Popula	ation, Single	e Year, Ma	tin County	vs. Florida		
Year	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
County Counts	719	678	674	575	587	541	555	530	569	562	628	530	524
County Rates	498*	467*	462*	393*	400*	367*	374*	356*	378*	372*	412*	340*	332*
Florida Rates	622	607	623	602	590	565	560	546	541	522	520	501	495

*Denotes county rate is statistically significant different from the statewide rate

The National Domestic Violence (DV) Hotline offers these statistics regarding: CHILDREN:

- A child witnessed violence in 22% (nearly 1 in 4) of intimate partner violence cases filed in state courts
- 30% to 60% of perpetrators of (adult) intimate partner violence also abuse children in the household
- The link between domestic violence and child abuse: among child abuse victims, 40% report DV in the home
- DV-exposed children are 15x more likely to be physically and/or sexually assaulted than the national average
- The U.S. Advisory Board on Child Abuse and Neglect suggests DV may be the single major precursor to child abuse and neglect fatalities in this country

TEENS:

- 9.4% of high school students that responded to a national survey reported being hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the prior 12 months
- 1/5 of women & 1/7 of men who stated prior sexual assault, physical violence and/or stalking by an intimate partner, first experienced some form of partner violence between 11 & 17 years of age
- 1 in 10 high school students has experienced physical violence from a dating partner during the past year
- 1 in 4 dating teens is abused or harassed online or through texts by their partners
- Nearly 1 in 10 teens in relationships report a partner tampering with their social networking account (the most frequent form of harassment or abuse)

COLLEGE STUDENTS:

- 43% of college women report violent, abusive dating behaviors including physical, sexual, tech, verbal or controlling abuse
- 52% of college women report knowing a friend who has experienced violent and abusive dating behaviors
- More than half of all college students (57%) say it is difficult for them to identify dating abuse

FLORIDA DATA

Per the 2019 Florida Youth Risk Behavior Survey Report, 10-Year Data Trends indicate from 2013-2019, per a randomized anonymous survey, the percentage of high school students that experienced physical dating violence decreased from 9.9% to 8.9%, and the percentage that experienced sexual dating violence decreased from 10.5% to 8.8%.

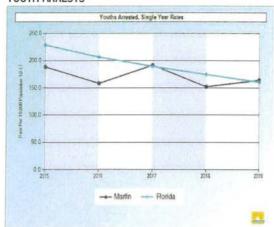
Nationally recognized DV primary prevention principles include: all levels of the social-ecological model; multiple teaching methods, with active skills-based learning; a minimum of 7-9 hours of program exposure; scientific-based prevention strategies; an emphasis on stable relationship-building; sociocultural relevance; systemic outcome evaluation; trained staff and timed for greatest impact.

Sources: FLHealthCHARTS www.tleridacharts.com Healthy People 2020 www.tleridacharts.com Healthy People

Juvenile Justice

Crime is a social determinant of health. Research has shown that risks associated with juvenile arrests are cognitive deficits, low school involvement, living in poverty, or being runaway or homeless. Monitoring arrest rates can help increase public safety and reduce juvenile delinquency through effective prevention, intervention and treatment services that strengthen families and improve the lives of youth.

YOUTH ARRESTS



Under age 18 Florida youth charged with a crime is referred to the Department of Juvenile Justice, which provides recommendations to the State Attorney & Court re: sanctions and services. Available options include Diversion - that provide alternatives to the formal juvenile justice system for youth charged with certain crimes.

NOTE: In 2019, although 205 Martin County juveniles were arrested, there was a total of 301 separate arrests across all offenses, for youths ages 10-17. The highest single-year number of arrests of report was 635 in 2012, with a declining trend since.

Youth Arrested, 2015-19, Rate per 10K, Martin County vs. FL

Year	2015	2016	2017	2018	2019
Martin County #	233	196	235	190	205
Martin County Rate	188.5*	158.6*	191.4	152.4*	164.3
Florida Rate	228.9	206.6	189.2	174.3	160.6

During 2019, Martin County ranked 21st of the 67 Florida Counties in the measure of youth arrests (per 10,000 population ages 10-17, with 205 arrests.

Additional Pertinent Juvenile Justice Data - Martin County **	2017-18	2018-19	2019-20
1st Time Offenders eligible for a Civil Citation	149	154	96
Youth issued a Civil Citation	73	77	45
Youth arrested instead of receiving a Civil Citation	76	77	51
Youth referred to the FI Department of Juvenile Justice	191	205	Not yet available
Youth transferred to Adult Court	122	227	12

^{**} Provided by Florida Kids Count

Civil Citation refers to prearrest diversion and gives misdemeanor offenders the opportunity to participate in intervention services. It is regarded as a diversion intervention that provides 'better' youth outcomes, saves money related to other alternatives, such as arrest, and is associated with lower recidivism rates. (FL Civil Citation, www.djj.state.fl.us)

LOCAL JUVENILE JUSTICE DATA (Number of New Arrests, CSCMC Programming)

The below table denotes percentage change across contract years, as compared to 'baseline' year of 2014-15, as a compilation of data provided by programs in which CSCMC has invested its support.

Year	2014-15	2015-16	2016-17	2017-18	2018-19
# Attendees	1,070	1,142	997	1,042	1,682
Any New DJJ Arrest	1.7%	0.4%	0.8%	0.3%	0.2%
% Change from Prior Year		-76.5%	+100%	-62.5%	-33.3%
% Change from 2014-15	0%	-76.5%	-52.9%	-82.3%	-88.2%

^{*}INCLUDES: Big Brothers Big Sisters, Boys and Girls Club of Martin County, City of Stuart Parks & Recreation, City of Stuart Community Services Police Intervention, Martin County Board of County Commission Afterschool/Out of School, Banner Lake After School Time (B.L.A.S.T.), YMCA of the Treasure Coast (Youth Men's Christian Association)

Child and Teen (Ages 1-19) Death Rates

Per *Healthy People 2020*, injuries resulting from motor vehicle accidents is the leading national cause of death for children ages 0 to 19. Suffocation is the leading cause of injury death for children ages birth to 1, with drowning the leading cause ages 1 to 4. Approximately 72% of all deaths among adolescents ages 10 to 24 are attributed to 4 causes: motor vehicle crashes (30%), all other unintentional injuries (15%), homicide (15%) and suicide (12%).

BENCHMARK With an overall 10% improvement goal for all ages, all causes of death, Healthy People 2020 publishes a 2007 baseline

rate (per 100,000) against age groupings.

Age Range	1-4	5-9	10-14	15-19
2007 National Baseline	29.4	13.8	16.5	60.3
Healthy People 2020 Target	26.5	12.4	14.8	54.3

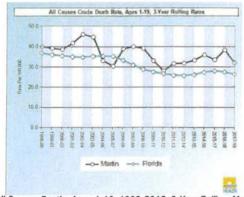
of DEATHS, AGES 1-19, ALL CAUSES, MARTIN COUNTY (Single-Year Counts)

2010	-2019	Death Co	unts, M	artin Cou	inty, All	Causes,	Ages 1	-19, Sin	gle Year	Counts
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020*
9	9	5	12	9	6	14	7	10	9	4

*Provisional Data as of 8.2.20

Of the five (5) 2019 deaths due to Unintentional Injury, one (1) was due to a vehicle crash (18 yr. old); one (1) due to injuries from a fall (19 yr. old); two (2) due to accidental drowning—the fifth could not be determined.

DEATH RATES, AGES 1-19, ALL CAUSES, MARTIN COUNTY (3-Yr Rolling)



	Death	Counts,	Ages 1	19, Mar	tin Coun	ty, All C	auses,	3-Year I	Rolling R	ates
THE PARTY NAMED IN	2012/1008		2010 - 12			DESCRIPTION OF THE PERSON NAMED IN	HOM HOSE		THE PERSON NAMED IN	2017- 19
#	32	27	23	26	26	27	29	27	31	26*

*Martin Count		26 Dea ear Rollin		ges 1-19
Age Range	1-4	5-9	10-14	15-19
All Causes	6	2	6	12

*Of the 26 deaths above, 20 children were white; 4 black; 2 other; 19 were male.

All Causes, Deaths Ages 1-19, 1998-2018, 3-Year Rolling, Martin v FL

Martin County was 38th of 67 Florida counties in count & rate (32.0) of deaths ages 1-19 during the (3-year rolling) period of 2017-19. From 2010-2019, unintentional injury was the most frequent cause of death for youth ages 1-19 in Martin County, which may include falls, poisoning, vehicle accidents, drowning, fire, sports/recreation-related injuries, etc.

Single -Year D	(C)	2 2 10	s by C	ESMINACE	STATE OF THE PARTY.	SEASON IN	THE REAL PROPERTY.	WHITE SAME	(1000 LOVE)	FIGURE STORY	State of the last
表上的是	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	10 Yr
Cerebrovascular Disease	0	0	0	ŧ	0	0	0	0	0	0	1
Congenital Malformations	1	1	0	2	0	0	1	1	1	0	7
Heart Diseases	1	0	0	ţ.	0	0	0	1	1	0	4
Hernia	0	0	0	0	0	1	0	0	0	0	1
Homicide	0	0	0	0	1	0	1	0	0	2	4
Cancer	0	0	1	0	1	0	0	1	0	1	4
Non-rankable Causes**	1	2	1	5	3	0	3	0	1	0	16
Pneumonitis	1	0	0	0	0	0	0	0	0	0	1
Septicemia	0	0	0	0	0	1	0	0	0	0	1
Suicide	1	0	1	2	1	2	0	2	1.	1	11
Unintentional Injury	4	6	2	1	3	2	9	2	6	5	40
TOTAL	9	9	5	12	9	6	14	7	10	9	90

FLORIDA DATA - Per the 2019 *Florida Youth Risk Behavior Survey Report*, 10-Year Data Trends indicate from 2013-2019, per a randomized, anonymous survey, the % of high school students who seriously considered attempting suicide increased from 11.6% to 15.6%, and the % that made a plan to attempt suicide increased from 9.4% to 11.8%, with attempts rising from 6.5% to 7.9%, all female gender prevalent.

Sources: FLHealthCHARTS www.floridacharts.com Healthy People 2020 www.healthypeople.gov **Certain residual or more detailed causes of death are not considered for ranking, when considered against a broader ranked cause of death category or established 'grouping'. Last updated 10.28.20

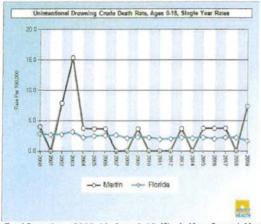
Unintentional Child/Youth Drowning and Nonfatal Submersion Injury

Every day in the U.S., 10 people typically die from unintentional drowning. About 1 in 5 who die from drowning are children age 14 and younger. For every child who dies from drowning, another five (5) receive emergency department care for nonfatal submersion injuries.

UNINTENTIONAL DROWNING - National Statistics

Children ages 1-4 have the highest drowning rates, with most drownings occurring in home swimming pools. In 2014, among children 1-4 years old who died from unintentional injury, 1/3 died from drowning. Drowning is responsible for more deaths among children 1-4 than any other cause, with the exception of congenital anomalies. Among those ages 1-14, fatal drowning remains the 2nd leading cause of unintentional injury-related death behind motor vehicle crashes. Between 1999-2010, the fatal unintentional drowning rate for Black/African American populations was significantly higher than that of whites across all ages, the widest disparity among children 5-18 years old.

MARTIN COUNTY UNINTENTIONAL (FATAL) DROWNING, AGES 0 - 18 (Single-Year Counts)



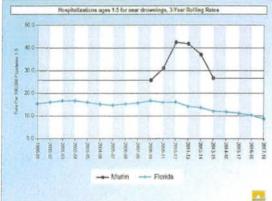
The graph (*left*) and table (*below*) represent the number of fatal, unintentional drownings of Martin County children ages 0-18, from 2000 through 2019.

Fatal Drownings, 2000-19, Ages 0-18 (Single-Year Counts) Martin vs. FL

MAUVI	2008-2019 Unintentional (Fatal) Drownings, Martin County, Ages 0-18, Single Year Counts																		
2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1	0	2	4	1	1	1	0	0	1	0	0	0	1	0	1	1	1	0	2

MARTIN COUNTY HOSPITALIZATIONS for NONFATAL WATER SUBMERSION INJURY, AGES 1-5 (Three-Year Rolling Rates)

National data indicates more than 50% of drowning victims treated in Emergency Departments (EDs) require hospitalization or transfer for further care (compared with a hospitalization rate of approximately 6% for <u>all</u> unintentional injuries).



NOTE: Per FL Administrative Code, single-year counts <5 (between 1 and 4) is suppressed per the number of emergency department visits and hospitalizations from non-fatal injury associated with water submersion (all ages).

Left and below. For water submersion injury of children ages 1-5, the rate (per 1000,000) of hospitalizations is displayed via three-year-rolling periods. Below, an asterisk (*) indicates a 3-year total count of between 1-4 hospitalizations for Martin County hospitalizations for 'near drownings' (ages 1-5 years), the exact count suppressed. Please note the rates of non-suppressed data per 100,000 population ages 1-5, for Martin County and the comparative statewide rates.

Non-fatal Hospitalizations, 2000-19, Ages 1-5 (3-Year Rolling Rate per 100,000) Martin vs. FL

Hospit	alizations	for Near Drown	ings, Ages 1	-5, 3-Year R	olling Count	& Rate per	100,000	-5 Рорц	lation, M	lartin Co	unty vs. FL
2006-08	2007-09	2008-10	2009-11	2010-12	2011-13	2012-14	2013-15	2014-16	2015-17	2016-18	2017-19
		Count: 5	6	8	8	7	5				
٠		Rate: 25.7 MC Rate: 16.5 FL	31.1 MC 15.8 FL	42.5 MC 15.9 FL	41.8 MC 14.0 FL	37.0 MC 13.4 FL	26.6 MC 11.9 FL	*	*	*	(one in 2017)

NOTE: * Indicates between 1 & 4 hospitalizations during each 3-year rolling period; County rates are no available for occurrences between 1 & 4.

Sources: FLHealthCHARTS Hospitalizations for Near Drownings, Unintentional Drownings, Young Child Profiles, Nonfatal Injury ED Visits & Nonfatal Injury Hospitalizations, Drowning/Submersions www.filhealthcharts.com CDC: A National Action Plan for Child Injury Prevention www.cdc.gov Last updated 10.27.20

Unintentional Child/Youth Drowning and Nonfatal Submersion Injury

Every day in the U.S., 10 people typically die from unintentional drowning. About 1 in 5 who die from drowning are children age 14 and younger. For every child who dies from drowning, another five (5) receive emergency department care for nonfatal submersion injuries.

Note below annual, single-year counts for hospitalizations of Martin County children ages 1-5 due to nonfatal water submersion injury. An asterisk (*) notes a count of between 1 and 4.

				1 2	2008-2	019 H	ospitali	zation	s, Mart	in Coun	ty, Age	s 1-5, S	Single Y	ear Co	unts		中侧	T.	
2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
0	*	0	0	*	*	*	0	*	*	*	*	*	*	*	*	0	*	0	0

INTERVENTIONS:

In the CDC's National Action Plan for Child Injury Prevention ('Plan'): 'Reducing Drowning Injuries in Children', the following is suggested:

- · Encourage universal 'learn to swim' initiatives among preschool and school-aged children, especially in minority communities
- · Encourage widespread CPR training for older children, parents, and pool owners

The Plan's recommendations for Policy are as follows:

- Support evidence-based practices and policies to provide environments and activities that reduce the risk of drowning. Examples include requiring pools to have surrounding barriers and promoting swimming lessons, CPR training and lifejacket use.
- Translate, implement and evaluate policies to make proven interventions (e.g. survival swimming classes) accessible to the public.

Kindergarten Readiness

Per the *Community Preventive Services Task Force* (2011), compensating for language (& other) developmental delays children have as they enter elementary grades can be critical to providing equal opportunities for lifelong employment, income, etc.

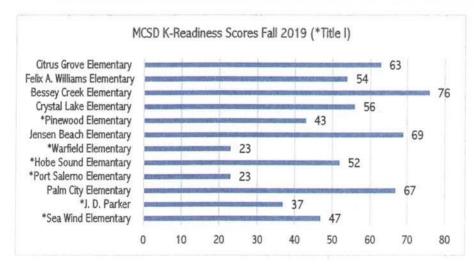
KINDERGARTEN READINESS

According to the most recent *National Outcome Measure for Kindergarten Readiness*, families' access to economic resources, such as **income and food security**, are consistently related to a preschooler's health and readiness to learn. These associations remain <u>statistically significant</u> when other socio-demographic factors are controlled, i.e. it was found that language spoken at home, and race and ethnicity, are not significantly related to children's health and readiness to learn.

School Readiness at Kindergarten Entry, Martin County School District, 2018-19, per 'Readiness Rate'

"Readiness Rate measures how well a VPK provider prepares 4-year-olds to be ready for kindergarten, based upon the Florida Early Learning and Developmental Standard." (*OEL*) FLKRS is administered in the 1st 30 days of K and, as of 2017-18, has consisted of the Star Early Literacy assessment.

Year	Fall 2017	Fall 2018	Fall 2019	HIGHEST
Martin County %	53.57%	50%	51%	St. Johns
Martin County #	592 of 1,105	579 of 1,148	661 of 1,293	County Fall
Florida % only	53.95%	53%	53%	2019: 72%



Kindergarten Readiness results per individual elementary school, based upon the percentage of students with scores determined to be ready for kindergarten.

"Kindergarten students must demonstrate a score of at least 500 on the Star Early Literacy assessment to be considered 'ready for kindergarten'. The 500 scale score was determined as a part of the State Board rulemaking process." (FDOE site, 2020)

CHILDREN NOT ENROLLED IN SCHOOL: Number and Geographic Location, Martin County

Please note below 2018 estimations, per the American Community Survey, of the number and percentage of three and four year old Martin County children that cannot be confirmed as enrolled in a public or private school environment.

	Male	Female	Totals
Public School Enrollment	417	269	686
Private School Enrollment	375	459	834
Total Martin County 3 & 4 Year Old Population	· · · · · · · · · · · · · · · · · · ·		2,715 Total Estimated 3 & 4 Yr Population
# Not Confirmed as Enrolled in School			1,195 or 44%
*Confirmed by Florida Kids COUNT	682	513	3 & 4-year old population 'not enrolled'

Sources: FLHealthCHARTS www.floridacharts.com Florida Kindergarten Readiness Screener www.floridacharts.com Florida Kindergarten Readiness Screener www.floridacharts.com (Pina et al, May 2020 www.fldoe.org (Pina et al, May 2020 www.fldoe.org (PK Program Provider Kindergarten Readiness Rate https://ypkrates.floridaearlylearning.com/home; (American Community Survey Data, 2018 Estimates Last updated 10.29.20

Kindergarten Readiness

Per the *Community Preventive Services Task Force* (2011), compensating for language (& other) developmental delays children have as they enter elementary grades can be critical to providing equal opportunities for lifelong employment, income, etc.

Page 2

Of the above 1,195 three and four year old Martin County children not enrolled in school (2018 ACS estimates), the geographic location with the highest concentration (largest numbers) per Census Tract are as follows:

Geographic L	ocation of 3 & 4	2018 Data I year old Martin County Children Not Enrolled in School
CENSUS TRACT	# Not Enrolled	Geographic Area
11.04	152	Stuart, W of US 1, N of SE Salerno Rd., 34997
18.01	95	Indiantown, 34956
5.01	88	Jensen, 34957
10	85	E Stuart, W of SE Dixie Hwy, 34994
17	82	W of Turnpike, S of Kanner Hwy., 34997
	502	

3RD GRADE READING SCORES and POVERTY RATE

Below 'Gap Map' data, provided by the Florida Chamber Foundation, denotes 3rd Grade Reading Assessment Scores (per school), the poverty rate associated with the geographic area surrounding the school and the number of children under the age of 18 deemed 'living in poverty'.

Eler	nentary School Rea	ding Scores by Poverty Ra	te of Children,	Martin County 2018-19				
Elementary School	3rd Grade Reading Score of School*	# of Children Not Reading at Grade Level (< Level 3)	Zip Code	% of Under Age 18 Poverty Rate, Zip Code Surrounding School	# Under Age 18 Living in Poverty			
Bessey Creek El.	77	21	34990	7.9%	401			
Citrus Grove El.	74		Same data as Bessey Elementary					
Crystal Lake (Martin) El.	69	37	34997	14.2%	1,053			
Felix A. Williams El.	63	38	34993	22.1%	668			
Hobe Sound El.	Hobe Sound El. 44		33455	19.5%	605			
J. D. Parker El.	42	70	34996	8,5%	113			
Jensen Beach El.	65	30	34957	9.8%	266			
Palm City El.	83	17		Same data as Bessey Elemen	tary			
Pinewood El.	41	83	Sa	ame data as Crystal Lake Elem	entary			
Port Salerno El.	27	104	Sa	ame data as Crystal Lake Elem	entary			
Sea Wind El.	53	50	Sa	ame data as Hobe Sound Elem	entary			
Warfield El.	34	102	34956	42.5%	1,070			

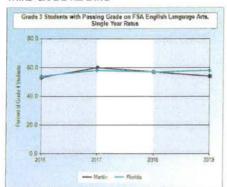
^{*}Percentage (%) of students who achieved Level 3 or higher, 3rd Grade Reading, Florida Standards Assessment

Sources: FLHealthCHARTS www.floridacharts.com Florida Kindergarten Readiness Screener www.floridacharts.com Florida Kindergarten Readiness Screener www.flode.org Child Trends, 'Being Healthy & Ready to Learn is Linked with Socioeconomic Conditions for Preschoolers', G. Pina et al, May 2020 www.childtrends.org VPK Program Provider Kindergarten Readiness Rate https://ypkrates.floridaeartylearning.com/home; American Community Survey Data, 2018 Estimates Last updated 10.29.20

Third Grade Reading Proficiency

Research has indicated that students' reading skill level by 3rd grade (e.g., proficient, basic, or below basic) can affect their long-term academic achievement, particularly their likelihood of graduating from high school.

THIRD GRADE READING



One study found that 23% of students with below-basic reading skill levels dropped out or failed to finish high school on time, compared to 9% of students with basic skill levels and 4% of students with proficient reading skills.

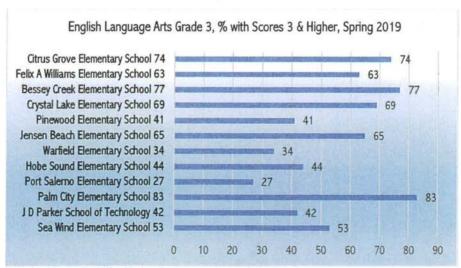
Additionally, 26% of students who were not reading proficiently in 3rd grade and who lived in poverty for at least a year between 2nd and 11th grade dropped out or did not finish high school on time - compared to 9% for students with basic or below-basic reading skills who had never lived in poverty. (Hernandez DJ, 2011)

BENCHMARK: For Spring 2019 FSA 3rd grade reading (overall) score results of '3' or higher, Martin County (54%) ranked 48th of the 67 counties comprising Florida, with a range of 34% to 78% (St. John's County).

3rd Grade FSA Language Arts Scores, 2014-2018, Martin County vs. Florida

THIRD GRADE READING MARTIN COUNTY VS. FLORIDA 2011-2019 NOTE: Spring 2020 testing cancelled due to statewide coronavirus-related school closures.

Year	2014-15	2015-16	2016-17	2017-18	2018-19
Instrument	FSA	FSA	FSA	FSA	FSA
FLORIDA % Score 3/3+	53%	54%	58%	57%	58%
MARTIN % Score 3/3+	54%	53%	60% 837 of 1,395	57% 786 of 1,379	54% 755 of 1,398
FLORIDA % Score 1	22%	22%	19%	20%	20%
MARTIN % Score 1	20%	19%	15% 209	20% 275	22% 308 2 (24%) 3 (28%) 4 (19%) 5 (6%



^{*} Riverbend Academy and Willoughby Learning Center results unavailable

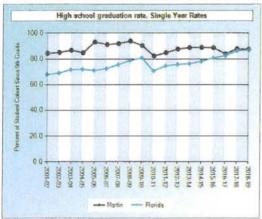
Per the Council of Chief School Officers, the readiness gap continues between birth and kindergarten due to differences in children's resources and opportunities for physical, linguistic, cognitive, social, emotional and behavioral development. Disparities in developmental outcomes "emerge in infancy and widen in toddlerhood. By the time children from low-income families enter kindergarten, they are typically 12-14 months below national norms in language and pre-reading skills".1

Sources: FLHealthCHARTS www.floridacharts.com Healthy People 2020 www.floridacharts.com Healthy People 2020 www.fldoe.org/accountability/assessments/k-12-student-assessment/fsa.stml Hernandez DJ. Double jeopardy: how third grade reading skills and poverty influence high school graduation. New York: The Annie E. Casey Foundation; 2011. Last updated 10.23.20

High School Graduation Rate

A high school diploma is a standard requirement for most jobs—and for higher education opportunities. Dropping out of high school is linked to a variety of negative impacts, including teen pregnancy, limited employment prospects, low wages, and poverty. Healthy People 2020

HIGH SCHOOL GRADUATION RATES



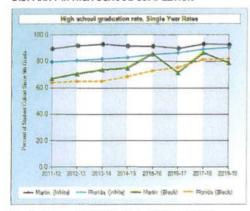
Florida's high school graduation rate is the % of students who graduated within 4 years of initial 9th grade enrollment, non-inclusive of transferred students to attend another public school system, a private school, a home education program, or an adult education program.

The 2018-19 87.4% graduation rate ranked Martin County as 31st of 67 among our state's counties, with Lafayette County yielding the highest rate of 98.8%.

High School Graduation 2001-02 through 2018-19 Martin County School District vs. Florida, All Gender, Race/Ethnicity

			High Sch	ool Gradu	ation Rati	e (Single-	Year, Pen	centage)	2006-7 th	rough 20	18-19 Ma	ertin Count	ty School	District vs	Florida			
Year	2002	2003	2004	2005	2006	2007	2009	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Martin %	84.4	85.1	86.8	84.9	93.2	91.2	91.9	93.9	90.4	82.4	84.9	87.7	88.8	88.9	88.7	83.9	87.9	87.4
Florida %	67.9	69.0	71.6	71.9	71.0	72.4	75.4	78.6	80.7	70.6	74.5	75.6	76.1	77.9	80.7	82.3	86.1	86.9

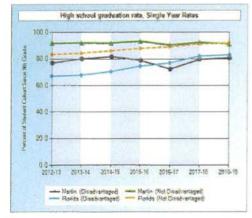
DISPARITY in HIGH SCHOOL COMPLETION



Disparities in high school completion rates exist among racial and ethnic groups in the U.S. According to 2013-14 data, 89% Asian/Pacific Islander, 87% White, 76% Hispanic, 73% Black and 70% American Indian/Alaskan Native public high school students graduated within 4 years of beginning the 9th grade. (Rumberger RW).

High Scho	ool Graduati	on Rate (Si	ingle-Year	%) per Bla	ck/White A	ace, Marti	n County v.	s. FL
Year	2011-	2012-	2013- 14	2014-	2015- 16	2016- 17	2017-	2018-
Martin White %	89.5	91.9	93.1	91.6	91.5	89.8	93.2	92.6
Martin Black %	67.0	70.4	73.5	74.8	85.6	71.1	86.4	78.6
FL White %	79.5	80.5	81.7	82.8	85.1	86.2	89.0	90.2
FL Black %	63.7	64.6	64.7	68.0	72.3	74.8	80.9	81.5

Graduation per Black/White Race, MCSD vs. Florida



In 2015, youth ages 16-24 in 'low-income' families were 4.1 times higher to not complete high school or not be enrolled, compared to those in 'high-income' families. (U.S. DOE; Nat'l. Center Ed. Stats)

Year	2012-	2013-	2014-	2015-	2016- 17	2017-	2018-
Martin % Disadvantaged	77.1	80.1	81.8	78.9	72.5	79.7	80.8
Martin % Not Disadvantaged	91.8	92.0	91.9	93.2	90.4	92.3	91.1
FL % Disadvantaged	67.0	67.7	70.4	74.4	76.8	82.0	82.9
FL% Not Disadvantaged	83.0	84.0	85.7	87.5	88.6	90.9	91.7

*Disadvantaged/Not Disadvantaged refers to economic status. Disadvantaged students are determined to be eligible for free/reduced meals National School Lunch Program.

In all above charts, no statically significant differences in rates (county v FL) were noted.

Graduation per Economic Status, MCSD vs. Florida

NOTE: When controlling for poverty, racial and ethnic graduation gaps disappear when students master reading by the end of 3rd grade.

Sources: Double Jeopardy: How Third-Grade Reading Skills and Poverty Influence High School Graduation, The Annie E. Casey Foundation, April 2011.

FLHealthCHARTS www.healthypeople.gov Rumberger RW. Why students drop out of school and what can be done. <a href="https://www.civirightsproject.ucla.edu/research/k-12-education/school-dropouts/why-students-drop-out-of-school-and-what-can-be-done/rumberger-why-students-dropout-2001.pdf

Last updated 10.26.20