



Children's Services Council Martin County

2026-2031 Strategic Plan

October 1, 2026 - September 30, 2031

Children's Services Council Martin County 2026-2031 Strategic Plan

From the Executive Directors

Message from the Retiring Executive Director, David L. Heaton

The Children's Services Council of Martin County is an entity conceived over 35 years ago to carry out a mission to enhance the lives of the children of Martin County and to enable them to attain their full potential.

The Children's Services Council's work and investments over those years have long been guided by strategic planning. These plans are developed every five years using community assessment to establish funding priorities and support decision-making. The Children's Services Council relies on qualitative and quantitative research to implement effective funding strategies. This next chapter of the Council's work will place increased emphasis on implementing evidence-based, research-proven programs designed to improve the outcomes of the Council's long-term investments. This transition will ensure that the Council's resources are invested in programs that have endured rigorous evaluation, demonstrated success, and produced measurable results.

The Council's research is a combination of empirical methods and grassroots conversations with an informed provider community. Interviews with key community leaders and County residents have also been a vital component of maintaining a connection to the needs of our diverse County. We are pleased to present this results-driven Strategic Plan as an example of partnership and cooperation with a community that truly cares about our future—our children.

I want to acknowledge the contributions to this Strategic Plan by Michele Watson, CEO of the Florida Association of Children's Councils and Trusts, for her work with the Council Board, and the many committed participants in our survey process and focus groups. These contributions played a critical role in maintaining the Children's Services Council's connection to all the various interests in Martin County.

Finally, I want to thank the staff of the Children's Services Council of Martin County, in particular Chanda Narkiewicz and Laura Haase. It was their patient leadership and work that brought this project to fruition.

— David L. Heaton, Retiring Executive Director

Message from the Executive Director, Laura Haase

The 2026-2031 Strategic Plan reflects the Children's Services Council's continuing commitment to enhance the lives of children and support their success in school and in life. Through our community's investments, CSCMC focuses on five priority areas: Healthy Children, Strong and Nurturing Families, Safe and Stable Communities, Early Learning and Development, and Youth Development and Academic Support.

Throughout this plan, you will find the leading indicators that will guide our work, along with the research that supports their inclusion and connects each indicator to our priority areas.

As we move into implementation, our work will center on aligning programs with these priorities and ensuring that funded services produce meaningful, measurable outcomes. We will continue to rely on strong data, performance measures and ongoing communication with the community and funded partners to guide decisions. As we move forward, we remain mindful of the changing fiscal environment and are committed to planning responsibly so that CSCMC can continue to serve children and families effectively, regardless of future challenges.

This plan would not have been possible without the guidance of our Council members, whose commitment to our mission continues to shape our path forward. I would like to recognize our CSCMC staff for their continued dedication, particularly Chanda Narkiewicz, whose extensive research created the foundation of this plan. I also want to thank Michele Watson, CEO of Florida Association for Children's Councils and Trusts, for leading the SWOT analysis during our June Council workshop.

Together with our Council, partners, community and the work Dave Heaton championed for 35 years, CSCMC's strong foundation will continue to ensure that every child in Martin County will thrive.

— Laura Haase, Executive Director

The Mission of the Children's Services Council Martin County

To enhance the lives of the children of Martin County and to enable them to attain their full potential.

CSCMC Guiding Principles

These principles provide guidance in our approaches to the work of the Children's Services Council among and across the communities of Martin County, as follows:

- ⇒ The Children's Services Council Martin County (CSCMC) is ultimately accountable to the community's taxpayers to help improve the quality of life for all residents by supporting the children of Martin County to attain their full potential.
- ⇒ CSCMC strategically leverages local tax dollars by cultivating partnerships and encouraging the use of external funding. Agencies receiving CSCMC funding are expected to diversify their revenue sources to promote long-term sustainability and reduce reliance upon Council funds.
- ⇒ CSCMC fosters collaboration among provider agencies and encourages assessment of collective impact with community partners to build more integrated and supportive systems of care.
- ⇒ CSCMC's funding is informed by current qualitative and quantitative data that identifies essential areas for positively impacting children's well-being. CSCMC uses key indicators grounded in local data informed, when relevant, by state, national and other pertinent comparative data.
- ⇒ CSCMC gives funding preference to proven program models that are research-proven and evidence-based, have demonstrated positive impact, and have sustainable and replicable outcomes.
- ⇒ CSCMC targets early intervention and prevention services for our most vulnerable children, families, and neighborhoods, while advocating for and supporting the increased availability of needed services for all children and their families.
- ⇒ CSCMC holds itself to the highest standards of fiscal and operational accountability. CSCMC entrusts public funds to those agencies that seek increased efficiencies and economies of scale, demonstrate competence, and show evidence of fiscal and program accountability.
- ⇒ CSCMC strategically addresses emerging issues and service gaps where impact can be demonstrated and measured for efficiency and effectiveness.
- ⇒ CSCMC provides public education, advocacy on behalf of children and families, access to information, and research to guide strategic decision-making. CSCMC invests in strategic community communication as core infrastructure, not an optional activity.
- ⇒ The Council strives to maintain ongoing outreach to ensure taxpayers see the return on their investment, families know what services are available, and the community understands the connection between early intervention and long-term outcomes.

Cross-Cutting Strategies

CSCMC cross-cutting strategies will prevail regardless of funding priority area and type of programming:

Ensuring access to quality services and a community of opportunity for all children and families, with the intent to reduce disparities often associated with social determinants such as socioeconomics, poverty, geography, gender, race, ethnicity, etc.

Evidence-based and research-proven services, strategies, curricula, programming; validated measurement tools; research-linked outcomes and results; data-driven benchmarks and meaningful improvement.

Resiliency and social competence. Settings with a consistency of high emotional support positively contributes to a child's social competence and translates to a child's ability to understand and manage their emotions and behavior, feel empathy for others, develop healthy identities, build close relationships with peers, and practice cognitive flexibility. Social competencies refer to a range of prosocial behaviors associated with a child's future success across a wide range of contexts in adulthood (e.g., school, work, family life).

Trauma-informed, trauma-responsive culture. Practices and approaches that support a trauma-informed culture, across and including the entire organization, and that decrease the residual of adverse experiences, create welcoming and safe environments for children, and, ultimately, build community resiliency over time.

Unique learning needs. A system that provides the services and interventions necessary within an environment that supports all participants' unique learning needs, for maximum individual benefit.

Youth voice. As part of program culture, and preferably across the organization, youth are empowered to be part of shared decision-making processes and have the opportunity to learn from the expertise of adults. Youth voice supports young people to have a positive impact and affect change in their communities and is an empowering process, giving young people a sense of ownership within their communities and overall society.

Literacy focus. Children are given the foundation to build on the pillars of literacy - phonemic awareness, phonics, vocabulary, fluency and comprehension. The foundation is built from quality early learning experiences with a consistent caregiver trained in developmentally appropriate practices. The first several years of elementary school continues this positive momentum, utilizing science-based reading principles and literacy practices. Increasing attendance in school, as well as preventing summer learning loss and promoting positive health and developmental growth are among the strategies that support the achievement of grade level reading.

Parent-Child Relationships and Family Engagement. Secure, nurturing parent-child relationships are the foundation of a child's healthy development, well-being, and lifelong learning. Engaged and responsive caregivers foster a child's sense of safety, belonging, and confidence, supporting brain development, emotional regulation and school readiness. Programs and systems that promote meaningful parent and caregiver engagement - through consistent communication, partnership in goal setting and participation in decision-making - strengthen families and elevate outcomes for children.

CSCMC Funding and Investment Process

- Per each CSCMC funding priority area, a Request for Proposals (RFP) is released per Council approval to establish the competitive process for potential current or new applicant organizations. Each Council-approved RFP guides CSCMC investments in our communities and families with children. CSCMC staff conduct a customized needs assessment for each area before releasing a Request for Proposals (RFP) to identify crucial gaps in care and emerging trends.
 - ⇒ The needs assessment process includes qualitative input that may include interviews with subject matter experts; meetings with representatives of key systems of care; community-based focus groups; surveying parents/guardians and youth, as pertinent to each funding priority area, etc.
 - ⇒ Quantitative data is also reviewed at national, state and local levels to determine the scope of current issues, with research directing evidence-based interventions and desired impact.
 - ⇒ The Council may also choose to distribute an Invitation to Negotiate (ITN), seeking response to specified parameters of an identified urgent need.

- CSCMC offers ongoing funding opportunities beyond the RFP process as an opportunity for flexible, immediate Council response to critical and emerging issues and/or newly developed responses to unmet need. Organizations, whether currently funded or not, can pursue this avenue through a Letter of Inquiry (LOI) submission at any time during the fiscal year, regardless of the associated funding priority area.
- CSCMC capacity building funds may also be requested throughout the fiscal year, subject to availability. These funds are one-time investments designed to strengthen a local nonprofit's internal processes and long-term sustainability. These investments support specified organizational goals or finite needs to enhance their ability to serve the community with greater efficiency and immediacy.

2026-2031 CSCMC Strategic Planning

The 2026-2031 Children's Services Council Martin County strategic planning process included input from Council and staff members. As well, quantitative secondary data and foundational research contributed to the development of the strategic plan to direct investments and initiatives in promoting the development, well-being, safety, stability and success of children and families residing within Martin County.

CSCMC Council Member Survey

Council members participated in an individually distributed and submitted e-survey to elicit input regarding CSCMC's guiding principles, cross-cutting strategies, priority areas, etc. Council also offered guidance regarding the needs of Martin County families with children, providing vision per CSCMC's role in meeting critical needs and gaps in services.

CSCMC Council and Staff Strategic Planning Workshop

CSCMC Council and staff members participated in a workshop facilitated by Michele Watson, Chief Executive Officer of the Florida Alliance of Children's Councils and Trusts (FACCT). Ms. Watson shared key federal and statewide legislative issues, including proposals with significant impact upon the availability of resources for vulnerable populations. Attendees completed a SWOT analysis regarding local strengths, weaknesses, opportunities and threats, the latter including those with potential impact upon the funding base for essential services. (*See attached The Children's Services Council of Martin County Strengths, Weaknesses, Opportunities, Threats (SWOT) Summary*).

CSCMC Council Member Individual Interviews

CSCMC Council members participated in individual virtual meetings with Michele Watson, of FACCT.

CSCMC Council Strategic Plan Review Workshop

CSCMC Council held a workshop to participate in the final review of the CSCMC 2026-2031 Strategic Plan.

2026-2031 CSCMC Council Vision

Healthy Children

By 2031, Martin County children experience healthier beginnings, stronger preventive care, and seamless access to community providers and healthy resources.

Strong, Nurturing Families

By 2031, families in Martin County are more resilient, financially stable, and consistently supported by a connected network of community resources.

Safe, Stable Communities

By 2031, children and youth in Martin County are supported by safer communities, stronger school engagement and reduced exposure to preventable harm, with systems working together to prevent crises before they occur.

Early Learning and Development

Martin County's early childhood system is characterized by high-quality, accessible, affordable care; widespread early developmental support; and strong school readiness outcomes.

Youth Development and Academic Success

By 2031, youth in Martin County are equipped with the academic, social, vocational and life skills needed to transition successfully into adulthood.

Funding Priorities Areas

The 2026-2031 CSCMC Strategic Plan includes core Funding Priority Areas of the Council, identified as:

- ⇒ Healthy Children
- ⇒ Strong, Nurturing Families
- ⇒ Safe, Stable Communities
- ⇒ Early Learning and Development
- ⇒ Youth Development and Academic Support

In total, the CSCMC Funding Priority Areas represent domains of child well-being that have significant influence over a child's life and recognize that children are impacted by the environment in which they live and interact. The interrelationship among these overarching priorities demonstrates that children are more likely to succeed in school and life when they are healthy, have strong families, live in safe communities and have access to early developmental support, with ongoing learning opportunities throughout their youth.

Children's Services Council of Martin County FUNDING PRIORITY AREAS



Investments by Funding Priority Area

Priority Area: Healthy Children

Last Distributed FY 2025-26 Allocation \$4,200,000 Next Anticipated Distribution FY 2029-30 See pg. 4 re: additional CSCMC funding opportunities.

Leading Indicators

- ⇒ Maternal and Infant Healthcare: Positive Birth Outcomes
- ⇒ Access to Medical/Dental Care for Children
- ⇒ Healthy Practices for Children/Youth
- ⇒ Integrated Mental Health/Behavioral Health Care
- ⇒ Education and Prevention re: Use of Alcohol and Illicit Substances

Initiatives and strategies to promote the health of children

Children are born healthy and thrive during the first year of life.

- Local high quality maternal prenatal and postpartum healthcare with equitable access for all Martin County birthing individuals, including those with medically complex, high-risk pregnancies.
- Care that supports the receipt of early and sufficient prenatal care and improving positive outcomes as related to full-term gestation, healthy birthweight and breastfeeding initiation/continuation, with lowered rates of infant mortality, maternal mortality and morbidity, etc., and that provides prenatal and postnatal depression screening and monitoring.

Families have access to health care for their children.

- Navigation and care management to ensure access to consistent, sufficient medical and dental health care for preschool and school-aged children and youth.

Children practice healthy behaviors.

- Evidence-based curricula and interventions to help children learn behaviors that support life-long health.

Children/youth and their families have access to educational, preventative and treatment services.

- Support an integrated, seamless and accessible network of services for children and families in need of affordable, comprehensive health, mental health and wellness initiatives.
- Provide mental and behavioral health services for children and their families to increase emotional well-being and promote positive behavioral health outcomes.
- Evidence-based curricula to prevent and reduce the use by youth of alcohol and illicit substances as consistent with current trends of use.
- Evidence-based curricula and strategies to prevent and reduce bullying and support anti-victimization skill-building.

Investment in the health of children

Maternal and Infant Healthcare. In 2022, the United States had the highest maternal and infant mortality rates among high-income nations, with approximately 22 maternal deaths per 100,000 live births and 5.6 infant deaths per 1,000 live births. Leading causes of infant death included preterm birth, low birth weight, SIDS, birth defects, and unintentional injuries. (*The Commonwealth Fund*)

Importantly, more than 80% of pregnancy-associated deaths are considered preventable. A strong maternal infant health system is built on timely equitable access to high-quality person-centered response across preconception,

prenatal and postnatal stages. Coordinated care models routinize the integration of behavioral and maternal mental health screenings, etc., within ongoing maternal health clinical appointments, to better identify depression and substance use and, additionally, promote general health and manage chronic conditions. Through the lens of community-based support, it is also important to address social and economic factors that negatively affect birth and health outcomes, such as access to stable housing, nutrition and transportation. Home visiting programs, which may include doulas and community health workers, especially those place-based among high-risk populations and/or in underserved communities, can ensure seamless transitions of care and also mitigate disparities in outcomes. The implementation of implicit bias training and evidence-based practices including patient safety ‘bundles’ has been found important in addressing maternal mortality and severe morbidity. Overall, the investment in the maternal/infant healthcare system with a diversity of interventions and approaches contributes significantly to the immediate well-being of communities’ birthing individuals and their babies - and yields improved long-term health outcomes.

Affordability and Access to Health Care for Children. Per the most recent year-over-year U.S. Census Bureau data, the 2024 national rate of uninsured children was 6.0%, representative of approximately 4.6 million children, and an increase from 5.4% in 2023. The rate is qualified as the highest in a decade, with additional findings of an 18% increase between 2022 and 2024. Florida’s 2024 rate of uninsured children exceeded the national at 8.5% and represented approximately 403,007 young individuals. (*stateline.org*)

Compared to their insured peers, uninsured children are less likely to have a consistent primary care provider; to receive preventative care and timely treatment for injuries, illnesses and chronic health conditions; and to receive recommended dental care, immunizations and routine well-child visits. With cost often the barrier, resulting unmet health needs typically exacerbate over time, leading to lower long-term well-being and even death. Even for a short term, lack of insurance can negatively impact a child’s school performance and result in financial hardships for families. Conversely, gaining health insurance significantly improves access to health care for children, leading to a more appropriate use of services with greater participation in preventative care, with improved long-term health outcomes.

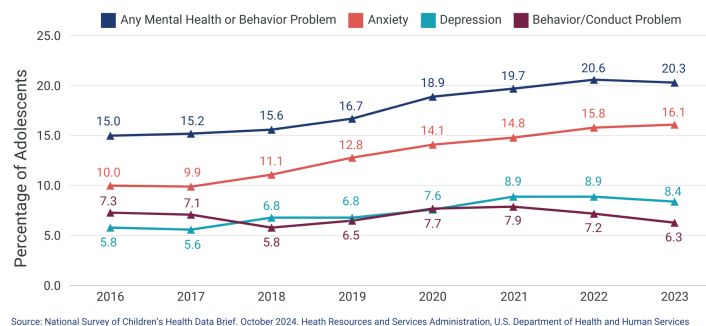
Healthy Practices for Children and Youth. According to the 2022-23 National Survey of Children’s Health, 17%, or roughly one in six U.S. children ages 6-17 met obesity criteria, with a significantly lower Florida rate of 13.8%. Nationally, there were significant differences based on family income to poverty ratio, with children in the lowest income group (<100% of the poverty level) with the highest rate of 24.1%, versus children in the highest income group (≥400% of the poverty level) yielding the lowest obesity rate of 10.4%. (*stateofchildhoodobesity.org*)

Children and adolescents with unhealthy weight face significantly higher risks for developing serious health problems such as type 2 diabetes, high blood pressure, heart disease, and certain cancers - that can persist into adulthood. Childhood obesity is considered a public health concern due to associated physical, psychological, and social health impacts. Proven strategies are critical to prevent and respond to this issue, inclusive of education, prevention and sustainable interventions related to healthy nutrition practices, physical activity promotion and parent/guardian engagement in services versus only involvement.

Integrated Mental Health and Behavioral Health Care Systems. Specific to very young children, estimates are that approximately 16% of children under age six have ‘clinically significant’ mental health problems that require response early in life. Most present with emotional or behavioral patterns that interfere with their ability to participate in family activities and community settings. According to the American Academy of Pediatrics, infant and early childhood mental health can be promoted for all families through developmentally specific anticipatory guidance that promotes safe, effective parenting practices. Families can be strengthened, with greater protection against child maltreatment, through approaches that support the parents’ resilience, impart child development knowledge, provide concrete support and resources in times of need and expand the social connections of the family.

Regarding older youth, adolescent depression has been a serious and increasing concern in the U.S., with recent data showing 1 in 5 teens (5.3 million) have a diagnosed mental or behavioral health condition - with anxiety as the most common condition (16.1%), followed by depression (8.4%). Between 2016 and 2023 the prevalence of adolescent depression increased by 45% (*see below chart*) and, more recently, according to 2023 data, 40% of U.S. high school students reported persistent feelings of sadness or hopelessness.

TRENDS IN DIAGNOSIS OF ANXIETY, DEPRESSION, AND BEHAVIOR/CONDUCT PROBLEMS AMONG ADOLESCENTS 12-17 YEARS OF AGE, 2016-2023



According to a 2024 survey conducted by the Substance Abuse and Mental Health Services Administration, 2.6 million adolescents aged 12 to 17 years (10.1%) reported having serious thoughts of suicide during the prior year. During the same time frame, approximately 1.2 million (4.6 %) indicated they had made a plan for intentional self-harm and 700,000 (2.7%) had made an actual attempt. (*2024 National Survey on Drug Use and Health*) Though the data specific to both serious suicidal thoughts and attempts represent slight decreases from 2021, it is important to note that, overall, suicide remains the second leading cause of death for those ages 10 to 14 and the third leading cause of death for ages 15 to 24.

Identifying youth's risk of mental health problems may include systematic screening approaches and follow-up. However, for all ages of children and youth, specific problems may resolve only through interventions that initiate with an evaluation with treatment that includes select evidence-based therapy(ies), along with family support, involvement and engagement. During 2023, nationwide, 'under-treatment' was a significant issue, with parents or guardians of 61% of adolescents who needed treatment or counseling stating they had difficulty obtaining care. Many community-based mental health organizations and clinics rely on federal grants, Medicaid reimbursement, etc., and are greatly compromised in meeting the level of need when disinvestments occur.

Bullying and Anti-Victimization Strategies. Nationally, 20% of students ages 12-18 are reported to have experienced bullying, with 1 in 7 students in grades K-12 being either a bully or a victim. Recent data indicates that 19% of high school students experienced bullying on school property. Specific to cyberbullying, overall, about 1 in 3 students will be cyberbullied, affecting about 16% of high schoolers. The most common type of bullying includes students as the subject of rumors and lies, or being made fun of, called names, or insulted. It is critical to note that bullying rates vary widely by demographics, e.g., gender, race/ethnicity, disability status and sexual orientation. Unfortunately, bullying aligns with underreporting, with a recent report of 64% of children not confiding their experiences. (FL State University) Research suggests that youth, bullied over time, are more likely than those not bullied to experience depression, anxiety and low self-esteem, be 'lonely' and resist going to school. Adolescents with current mental health or behavioral health issues are more than twice as likely to be a victim of bullying, compared to those with no current diagnosis. This is important, as a child predisposed to depression is likely to experience bullying with greater negative effect that includes a higher risk of suicidal ideation and suicide attempt. Research and empirical literature supports the creation of a systemic framework of universal prevention, with specified responses for all forms of bullying, including cyberbullying, both for those that engage in bullying actions as well as those impacted. Additionally, having an overall

network of healthy friendships and positive relationships (both peer and adult) protects one against being bullied and helps reduce its negative effects.

Education and Prevention re: Use of Alcohol and Illicit Substances. Alcohol results in teen death more than all other drugs combined. Alcohol consumption in adolescents leads to increased risk-taking behaviors associated with the three leading causes of death for 15 to 24-year-olds: accidents, homicides and suicides. (*Centers for Disease Control and Prevention*) Those who start drinking early in life, e.g., before age 15, are more likely to be injured while intoxicated and to report academic issues, substance use and behavioral problems within their schools and communities, with a higher risk of developing alcoholism later in life. Though 2023 data associates illicit drugs with stabilized or declining overall trends, use by young persons is simultaneously becoming more dangerous and deadly, primarily attributable to fentanyl. (*National Institute on Drug Abuse*) Research indicates that between ages 13 to 21, the risk of developing a substance use disorder (SUD) and other psychosocial problems later in life decreases by approximately 4-5% for each year that the initiation of substance use is delayed or avoided. (*Addiction Policy Forum*)

According to the 2024 National Youth Tobacco Survey (NYTS), over 1.6 million U.S. youth were current e-cigarette users in 2024. Over 40% of surveyed high school e-cigarette users vaped on at least 20 days a month and nearly 30% reported vaping every day. Research confirms that youth who use e-cigarettes are significantly more likely to become traditional cigarette smokers. This risk is particularly high for youth who are not susceptible to trying cigarettes in the first place, suggesting a gateway effect of e-cigarettes for low-risk populations. Because nicotine is a highly addictive drug, use by youth in any form is determined unsafe, negatively affecting brain development, learning, mood state and concentration, while potentially increasing risk of future addiction to other substances. (*U.S. Surgeon General*)

Per the use of alcohol and drugs, data indicates that prevention activities can help determine the depth or lack of awareness and understanding of the issue, which then informs selected program intervention - and the populations at greatest risk. School-based programs can reach large audiences and be instrumental in presenting targeted curricula concentrated with the intent of the prevention of alcohol and illicit drug use, utilizing awareness-building and refusal techniques strategies. Additionally, screening and evidence-based early intervention programs, even brief, can reduce and thwart substance use disorder in adolescents.

Priority Area: Strong, Nurturing Families

Last Distributed FY 2022-2023 Allocation \$916,556 Next Anticipated Distribution FY 2026-27 See pg. 4 re: additional CSCMC funding opportunities.

Leading Indicators

- ⇒ Child Maltreatment and Parent Engagement
- ⇒ Children Living in Economic Hardship and Poverty

Initiatives and strategies to promote the strengthening of families

Families are connected with community resources and support systems.

- County-wide resource and referral navigation and case management that establishes a gateway to services among community providers and partners.

Families with children are resilient and able to cope with adversity.

- Evidence-based curricula and interventions to promote healthy parent engagement, family resilience and protective factors, to reduce the risk and occurrence of child maltreatment.

Families with children will overcome economic hardship and poverty, to achieve self-sufficiency.

- Targeted resource-building and/or coaching to support economic stability and ensure that basic needs are met or, optimally, exceeded.
- Individualized strategy-building to stabilize families toward self-sufficiency and economic mobility.

Investment in the resiliency of families

Child Maltreatment and Parent/Guardian Engagement. Child maltreatment includes all types of abuse and neglect that cause actual or potential harm to a child's health, development, survival, or dignity. Defined by federal law, it occurs within a relationship of responsibility, trust, or power. Young children, particularly infants, face disproportionately high rates of child maltreatment compared to older children and adolescents. Data shows that children under age 1 have a maltreatment rate more than twice that of other age groups, with 2021 national rates for children under one year of age to be 25.3 per 1,000 children.

Children that are victims of neglect, abuse and maltreatment (physical, emotional, sexual, witnessing domestic violence, medical neglect) may display many psychological effects, including being at greater risk of developmental delay and anxiety, depression and externalized aggression. School-age children are more likely to have psychosomatic complaints and compromised social competence, interpersonal skills and overall school performance, including truancy. Latency age children and adolescents may engage in risk-taking behavior, including substance use/abuse. Certain types and effects of maltreatment can follow into adulthood, resulting in long-term physical, social, and emotional issues.

Adverse childhood experiences (ACEs) are potentially traumatic events that occur in childhood, ages 0-17. These events typically fall within the broad categories of: abuse (physical, emotional, sexual), neglect (physical, emotional), and household dysfunction (witnessing domestic violence, substance abuse, mental illness, a household member being incarcerated, or parental separation/divorce). These circumstances, over which the child has no control, can cause 'toxic stress' with negative effect upon the architecture of the forming brain. Hardships and difficult circumstances faced by parents, such as financial stress, eviction, displacements due to disaster, etc., can also manifest as increased risk for emotional and behavioral effect upon children. Prolonged activation of stress response systems can derail a young person's overall development, with effects of emotional dysregulation, stunted behavioral and social development, relationship instability, learning difficulties, substance use and long-term chronic diseases.

Though estimates vary by study, data from the National Survey of Children's Health indicates that approximately 45% of children experienced at least one ACE, when economic hardship is indicated. As they are dose-dependent, risk increases upon each ACE exposure, with four or more linked to significantly higher risk of negative health and behavioral outcomes in adulthood. However, having a protective relationship with even one caring adult, e.g., a parent, teacher, coach, community member, can be a crucial factor in building resilience over a lifetime and can provide the emotional well-being, that helps a child 'buffer' the effects of trauma and 'toxic' stress, and foster a sense of safety and trust.

Children Living in Economic Hardship per Basics, and Child Poverty. In 2022, 50% of U.S. children under age 18 were reported to be living in households that could not afford 'the basics'. While 16% of these children lived in poverty, 34% were growing up in financially insecure households. (*United for ALICE*) Consistent access to basic needs, such as food, housing, utilities, child care, and health care contributes to a stable home environment and supports the healthy development of children and families. However, low access to basic needs can negatively impact families and children in numerous ways. For example, low or inconsistent access to nutritious food can impact a child's overall development, concentration and academic performance. The lack of stable housing can have negative impacts on children's education achievement due to possible school changes and missed class time, with increased emotional consequences associated with evictions.

Poverty is typically associated with creating a cyclical pattern of deprivation. Overall, higher-income parents are more able to invest resources in their children's education, such as quality child care, which can lead to later advantages for their children, in that higher educational success is associated with future higher earning potential. Sustained financial insecurity can create a state of chronic stress among the family, which can impact children's ability to learn and negatively affect overall mental wellness. Significant differences in vocabulary and cognitive skills can develop

between children across varying socioeconomic backgrounds, with achievement gaps manifesting as early as 18 months and discrepancies widening over time, even before children begin formal schooling. Poverty trends toward intergenerational endurance, with children growing up in poverty being significantly more likely to experience poverty in adulthood as well as chronic health conditions.

The Annie E. Casey Foundation states that child poverty in the U.S. nearly tripled since 2021, increasing for every racial and ethnic group between 2021 and 2024. According to the 2023 official poverty measure, 16.6% or 220,358 of Florida's children under age 6 were living in households that met poverty guidelines. Nationwide, in 2024 alone, public investments and basic needs programs kept 8.5 million children above the poverty threshold, as well as keeping the supplemental poverty measure from nearly doubling.

Priority Area: Safe, Stable Communities

Last Distributed FY 2022-2023 Allocation \$275,901 Next Anticipated Distribution FY 2026-27 See pg. 4 re: additional CSCMC funding opportunities.

Leading Indicators

- ⇒ Intimate Partner and Family Violence
- ⇒ Juvenile Justice Involvement
- ⇒ Out-of-School Suspension
- ⇒ Unintentional Injury and Death

Initiatives and strategies to promote the safety and stability of communities

Children and youth are engaged with their schools and communities.

- Evidence-based preventative education and community outreach to increase empathy, healthy communication and conflict resolution skills that are developmentally appropriate for children and youth of all ages.
- Evidence-based diversion interventions and truancy prevention strategies to reduce involvement with the juvenile justice system and reduce recidivism.
- Evidence-based interventions that reduce out-of-school suspensions and increase school engagement.

Children and youth are free from unintentional injury and death.

- Access to water safety swimming lessons for eligible children and parent/guardian education, to reduce occurrence of drowning and nonfatal submersion injury.
- Promote community messaging and/or evidence-based interventions that help protect children from preventable injury and unintentional death and that support safe communities.

Investment in the safety and stability of communities

Intimate Partner and Family Violence. Research has conservatively estimated that, nationwide, at least 10-20% of children are exposed to intimate partner violence annually, translating to between with as many as 3.3 and 10 million children. Additionally, one-third exposed at some point during childhood or adolescence. Exposure of a child or adolescent to any incident of violent or threatening behavior or abuse between intimate partners, family members, etc. is a form of child maltreatment with related physical, emotional and psychological harm. Children may quickly exhibit symptoms such as headaches, stomachaches, fear, sleep problems and behavioral changes. Longer term effects may include chronic mental health issues like depression, anxiety and post-traumatic stress disorder with specific physical conditions in adulthood related to toxic stress.

Importantly, witnessing violence between parents or caretakers is the strongest risk factor of transmitting violent behavior from one generation to the next, including becoming the aggressor in relationships. (*The Wright Initiative*) As

there are negative effects upon emotional learning, it is important to teach about safe and healthy relationships, with an emphasis upon empowerment, communication and conflict resolution.

Juvenile Justice Involvement. In the U.S., offending rates among juveniles aged 15-17 was roughly 23% lower in 2022 than in 2016. However, those offending among juveniles aged 10 to 14 was nearly 9% higher over the same period. (*Council on Criminal Justice*) Juvenile delinquency rates and recidivism can be lowered through effective prevention and early intervention strategies that both involve families and address the youth's individual needs, such as education, social and communication skills, appropriate peer identification, etc., through evidence-based therapies that support rehabilitation. Community-based sanctions and diversion programs may also serve as an effective alternative to formal juvenile justice system involvement, per specific offenses. (*Office of Juvenile Justice and Delinquency Prevention*)

Out-of-School Suspension. Research indicates a complex correlation between increased juvenile justice system involvement and negative educational outcomes, though family dysfunction and mental health issues can contribute toward both. With regard to specific in-school behavioral issues, evidence-based alternative strategies using restorative practices that address underlying root causes and establish ways to amend conflict and repair relationships are effective in reducing suspensions and maintaining student engagement; and parent involvement is also critical in building a consistent support system. (*Learning Policy Institute*)

Water Safety. Every year in the U.S., there are over 4,000 unintentional drowning deaths. The national annual age-adjusted drowning death rate during 2018-2021 was 1.31 deaths per 100,000 people, compared to the (higher) Florida rate of 2.07. For children ages 1-4, more die from drowning than any other cause, and drowning is the second leading cause of unintentional injury death for children ages 5-14. For every child under 15 who dies from drowning approximately five other children require emergency department care for nonfatal submersion injuries, some leading to serious, long-term consequences, including brain injury. (*Centers for Disease Control and Prevention*) Drowning prevention programs focus on layers of protection, including swim lessons and preparedness through education that includes parents/guardians.

Unintentional Injury and Death. Between 2019 and 2023, unintentional injuries caused the death of 23,510 U.S. children ages 1-17, resulting in a national fatal injury rate of 6.74 per 100,000; and a higher statewide rate of 7.67. Typically, about 1 in 5 child deaths is a result of unintentional injury. The leading causes of unintentional injury that causes death vary by age, with suffocation the primary cause of unintentional injury death for infants (birth to 1); drowning for children ages 1-4; and motor vehicle traffic incidents for children and youth ages 5-19 years. Leading causes of nonfatal childhood injury vary by developmental stage and age and are typically associated with falls as the most frequent cause for children ages 0-19. Additional reasons include being struck by or against objects, motor vehicle accidents, cuts/puncture wounds, bites and stings, ingested foreign objects and burns. Overall, states with the lowest injury and fatality rates have shown that consistent investment in public safety campaigns, age-specific injury prevention programs, and legislative support can support effective strategies and save lives. (*Centers for Disease Control and Prevention*)

Priority Area: Early Learning and Development

Last Distributed FY 2023-24 Allocation \$1,197,901 Next Anticipated Distribution FY 2027-28 See pg. 4 re: additional CSCMC funding opportunities.

Leading Indicators

- ⇒ Affordability of and Access to High Quality Child Care
- ⇒ Children's Developmental Growth
- ⇒ Early Language, Literacy and Kindergarten Readiness

Initiatives and strategies to promote early development of young children

Children have access to a high quality childcare system.

- An integrated, accessible system of care to serve birth to five children with comprehensive early learning care.
- Support a quality rating system that promotes 100% of the county's early care and education sites are Gold Seal accredited.
- Continuity of care and affordable childcare services for eligible families, including families in crisis, e.g., experiencing vocational instability and/or pursuing educational goals.
- Programming for preschool age children and families to receive support that promotes positive learning behavior, adjustment and continuance of services in childcare settings.

Children are supported in their developmental growth.

- Programming that identifies children with potential developmental delays and refers resources for and/or provides assessment and treatment services to the child and family.
- Developmental screenings are offered as early as possible before age and as recommended for early identification and access to appropriate intervention services.

Children are ready for kindergarten and future educational growth.

- Access to evidence-based early language and literacy programming.
- Support of county-wide initiative to establish increased screenings for the 0-5 population and to implement literacy-specific interventions associated with elevated rates of attendance, kindergarten-readiness and grade-level English Language Arts skills for pre-school and school-age children, through third grade.
- Support early learning programming for three and four-year old children not currently enrolled in early childhood education.
- Campaign strategies to increase community awareness regarding the value of early childhood education.

Investment in the early years of children

Affordability of High Quality Accessible Child Care. The quality of childcare has a long-term effect on children's cognitive, social and emotional growth through kindergarten and beyond, with the child-teacher interactions and relationships the most important factor in achieving positive developmental outcomes for children. High quality childcare has a substantial and lasting positive impact on children's development, leading to better academic outcomes, such as graduation from high school and reduced needs for special education or grade repetition, by fostering cognitive, social, and emotional skills from a young age. For families meeting poverty guidelines the cost of high-quality early learning can be as high as 30% of their income; as well, single parents can spend over a third of their income. Increased access to high quality birth-to-five early learning and care programs generates significant short- and long-term returns for both individuals and society. Investments in high quality early childhood education result in a return that includes better education, health, economic and social mobility outcomes as an adult.

The elements present in early childhood education programs that demonstrate the strongest and most persistent impacts on children include sufficient learning time and small class sizes with low student-teacher ratios; well-prepared teachers who provide engaging interactions and classroom environments that support learning; ongoing support for teachers, including coaching and mentoring, with program assessments that measure the quality of classroom interactions and provide actionable feedback for teachers to improve instruction; research-based, developmentally appropriate early learning standards and curricula; assessments that consider children's academic, social and physical progress that contribute to instructional and program planning; and meaningful family engagement. (*Center on the Developing Child, Harvard University*)

Children’s Developmental Growth. The first few years in the life of a child are critical in promoting healthy physical, emotional, social, and intellectual development. Early childhood assessments are crucial for identifying developmental delays, which can significantly impede a child’s physical, emotional, social, and intellectual growth before school. Early intervention can help children reach their full potential by allowing for timely support, specific therapies, and adjustments to educational activities, while delays that go unaddressed may worsen and lead to greater challenges later on. The first few years of life are a critical window for development due to the brain’s high malleability, making early detection and support particularly effective.

Early Language, Literacy and Kindergarten Readiness. Early language skills begin at birth and are built during the first years of life as the foundation for reading ability and later school readiness. Early language begins with exposure to everyday communication and serve and return interactions that shape the architecture of the brain. Children who are exposed to reading and literacy activities in their early years are more likely to learn to read on schedule and perform better in school. These activities build a foundation for literacy, with research showing a strong link between early experiences and later reading skills.

The 2024-25 Kindergarten Readiness Report indicates that 43% of Florida’s kindergarteners entered school with the foundational skills they need to succeed, adding that ‘75% of children who start behind never catch up, impacting long-term educational and workforce outcomes’. Children that demonstrate age-appropriate skills upon kindergarten entry have a greater likelihood of thriving academically throughout their educational trajectory. Conversely, children who enter kindergarten academically ‘behind’ their peers are more likely to stay - or fall further behind. Preparing children for kindergarten begins at birth and is influenced by quality early experiences that support physical well-being and motor development; social and emotional development; cognitive skills; language and developing literacy, and the ability to concentrate and follow directions. Notably, children who complete Voluntary Prekindergarten Education Program (VPK) are significantly more likely to be kindergarten ready, yet access and quality remain uneven statewide. Poverty remains a critical factor, with readiness rates dropping sharply in high-poverty areas - unless strong programs intervene.

Priority Area: Youth Development and Academic Success

Last Distributed FY 2024-25 Allocation \$2,463,860 Next Anticipated Distribution FY 2028-29 See pg. 4 re: additional CSCMC funding opportunities.

Leading Indicators

- ⇒ Grade Level Reading Proficiency
- ⇒ Affordability and Access to High Quality Out-of-School Opportunities
- ⇒ Youth Mentoring and Vocational Opportunities
- ⇒ On-Time High School Completion/Graduation

Initiatives and strategies to promote future success of youth as emerging adults

Youth develop the skills essential for academic and vocational success.

- Programming with a focus on achieving and maintaining grade-level reading and preventing out-of-school learning loss.
- High quality affordable out-of-school opportunities that employ evidence-based strategies to promote academic advancement, graduation, social communication skills and drug-refusal skill building.

Youth have access to affordable high quality enriching out-of-school opportunities.

- Support a quality rating system for out-of-school programming.
- Additional access to high quality out-of-school programming for middle school students.

Youth develop the skills essential for success in life.

- Youth mentoring programming connecting youth with a caring mentor and/or coach supporting resiliency and positive outcomes that include increased school engagement/attendance and reduced high-risk behaviors.
- Vocational opportunities that offer experiential learning, leadership development and life-skills training that support youth pathways toward a secure future.

Investment in the future of youth

Grade Level Reading and High School Completion. Students' academic success is strongly linked to their skill levels in reading by third grade and math by eighth grade. These early indicators are significant predictors of future academic achievement, including high school graduation rates and preparedness for college and high-skilled careers. The percentage of U.S. students on grade-level varies by grade, but a significant portion is not. The 2024 Nation's Report Card produced a national proficiency of 35% of twelfth graders at or above grade-level reading (GLR) proficiency. Research using a sample of two million i-Ready students' assessment results, grades 1-8, yielded a Spring 2022 rate of 67% attributable to GLR third graders, with the largest gaps in proficiency occurring in grades 1-3. The study states these as critical years to establish the foundational reading skills necessary for long-term academic success, emphasizing the benefits of 'explicit and systemic phonics instruction' as foundational for early elementary skill-building. (*Curriculum Associates*) Importantly, children that are not reading proficiently by the third grade are four times more likely to not graduate high school on time, with this rate climbing higher for 'below-basic' readers. Additionally, a 'double jeopardy' of poverty combined with lower reading skills significantly increases the risk of dropping out.

Both the national and statewide high school graduation rates reached 87% as associated with the 2021-22 school year, a 7-percentage-point increase from a decade prior. The highest 2021-22 rate of graduation, within four years of starting 9th grade, was 91%; the lowest was 76%. (*National Center for Education Statistics*) Strategies that support increased graduation rates include: enhanced student engagement; increased academic support; heightened positive school climate that includes anti-bullying messaging, policy and response; promotion of mental health resources; implementation of early 'warning systems', reacting quickly, per data, to the factors affecting absenteeism, grades and behavior, especially during freshman year; differentiated, customized learning paths to meet learning styles; and the fostering of career and college readiness pathways. Finally, strengthened parent and community engagement is a critical part in ensuring students have the support they need in working toward graduation. (*Talkspace*)

Affordability of High Quality Accessible Out-of-School Opportunities. Research consistently demonstrates that high quality out-of-school programs can impact on students' educational outcomes, school attendance and social learning, with effect as well upon their engagement in classroom activities. Regular participation in these programs, that includes after school, before-school, summer learning opportunities, etc., has been linked to lower dropout rates and a narrowing of achievement gaps, most especially for participants in vulnerable, underserved populations - when they are positive, responsive, developmentally appropriate and organized environments with well-trained staff. Additionally, strong partnerships with local school districts and maintained engagement with participants' parents/guardians is indicated. For older youth, afterschool programs can also contribute to a reduction in risky behaviors and the development of college and career-readiness skills, with exposure to mentoring, coaching and specific vocational training. Unfortunately, the '2020 America After 3PM' report revealed a nationwide persistent unmet demand for out-of-school programming, with three children waiting for every one enrolled. This translates to approximately 25 million children being unable to access these services, due to barriers such as cost, availability and transportation challenges. (*National Conference of State Legislatures*)

Evidence-based practices for use in out-of-school learning include aligning the program academically with the school day; maximizing student participation and attendance; adapting instruction to individual and small group needs; providing engaging learning experiences; and assessing program performance and the use of results to improve program quality. (*What Works Clearinghouse's Structuring Out-of-School Time to Improve Academic Achievement Practice*)

Youth Mentoring and Vocational Opportunities. The research is clear: relationships play a powerful role in youth development and success. Per the Annie E. Casey Foundation, young people need caring adults, stability and real-world opportunities in order to reach their full potential. Mentoring can provide this crucial support, with benefits that include higher graduation and lower dropout rates, increased self-esteem and communication skills, along with a reduced likelihood of engaging in risky behaviors, such as substance abuse. Mentors offer guidance and support as well as new perspectives that help young people develop essential life skills and navigate their path to a healthier, more successful future. (*The Up Center*) As with high quality out-of-school programming, participants in receipt of mentoring that represent vulnerable populations are especially likely to gain from mentoring as an intervention.

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