

MEETING RESULTS

1 Next steps identified for advancing the housing strategy.

2 Progress indicator is chosen for financial security.

3 Population-level target statement is drafted for financial security.

4 Pathway for completion of the NSWG's Results Action Plan, with a timeline, is established
(Meeting w/ Director Garcia planned for Sept. 24)

5 Action Commitments made.

Indicators relevant to the Vision Council’s North Star Outcome (Structural Inequities)

“Iowa families and children are safe, secure, healthy and well in their communities.”

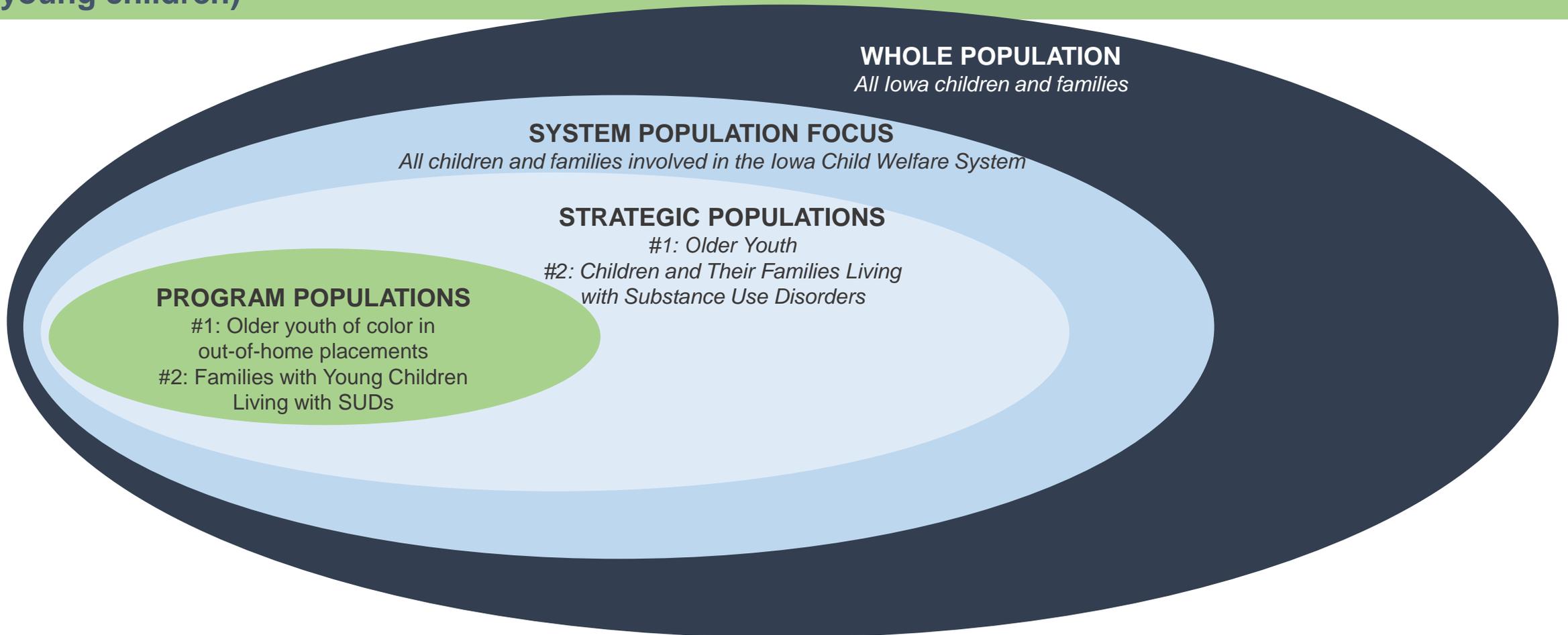
Indicators	Measure/Source	Note
Principal Issue: Concentrated Community Disadvantage (CCD)		
Financial Security	Child poverty or Children in Poverty Unemployment	Concentrated Community Disadvantage (CCD); correlated with child maltreatment
Housing Stability	Severe housing problems (county level)	CCD; Correlated with child maltreatment
Parental education attainment	Adults with a high school diploma (county level)	Correlated with child maltreatment
Food insecurity	Free/Reduced Lunch	Somewhat correlated with child maltreatment
Uninsurance	Uninsured under age 65 (CHR) Uninsured under age 19 (CHR)	Somewhat correlated with child maltreatment
Social Disorder	Excessive drinking (County Health Rankings) Substance Use in child maltreatment cases (Iowa DHS)	CCD; indicator of fewer resources overall; Social disorder is linked to child maltreatment

Whole Population to System Population to Strategic Populations to Program Populations ^[1]

STRATEGIC POPULATIONS

#1: Older Youth (Program Population: Older youth of color in out-of-home placements)

#2: Children and Their Families Living with Substance Use Disorders (Program Population: Families with young children)



^{1]} **Trying Hard is Not Good Enough**, Friedman, Trafford Publishing, 2005

Setting Targets for the Vision Council's North Star Outcome

“Iowa families and children are safe, secure, healthy and well in their communities.”

Proposed Indicator for Housing:

Severe Housing Problems ([County Health Rankings](#))

“Good health depends on having homes that are safe and free from physical hazards. When adequate housing protects individuals and families from harmful exposures and provides them with a sense of privacy, security, stability and control, it can make important contributions to health. In contrast, poor quality and inadequate housing contributes to health problems such as infectious and chronic diseases, injuries, and poor childhood development. Housing measures can also be considered proxy indicators of more general socioeconomic circumstances.[1] Households experiencing severe cost burden have to face difficult trade-offs in meeting other basic needs. When the majority of a paycheck goes toward the rent or mortgage, it makes it hard to afford health insurance, health care and medication, healthy foods, utility bills, or reliable transportation to work or school.[2-5] This, in turn, can lead to increased stress levels and emotional strain.[6,7]”

Draft Target for Housing: **By 2026, 94% of Iowa families with children are living in safe, affordable housing (race, economically disadvantaged, rural/urban)**

(Notes: 2026 selected due to American Rescue Plan funds; 94% selected as the inverse to the lowest percentage of severe housing problems in a county today (6% in 6 of 99 counties); “Iowans” may be the level of data that is available VS “Iowa families with children” – this is something to continue to look into; [IOWA COORDINATED ENTRY REGIONS](#))

Target population considerations

Integration into Vision Council's Program Population Work and Work Groups

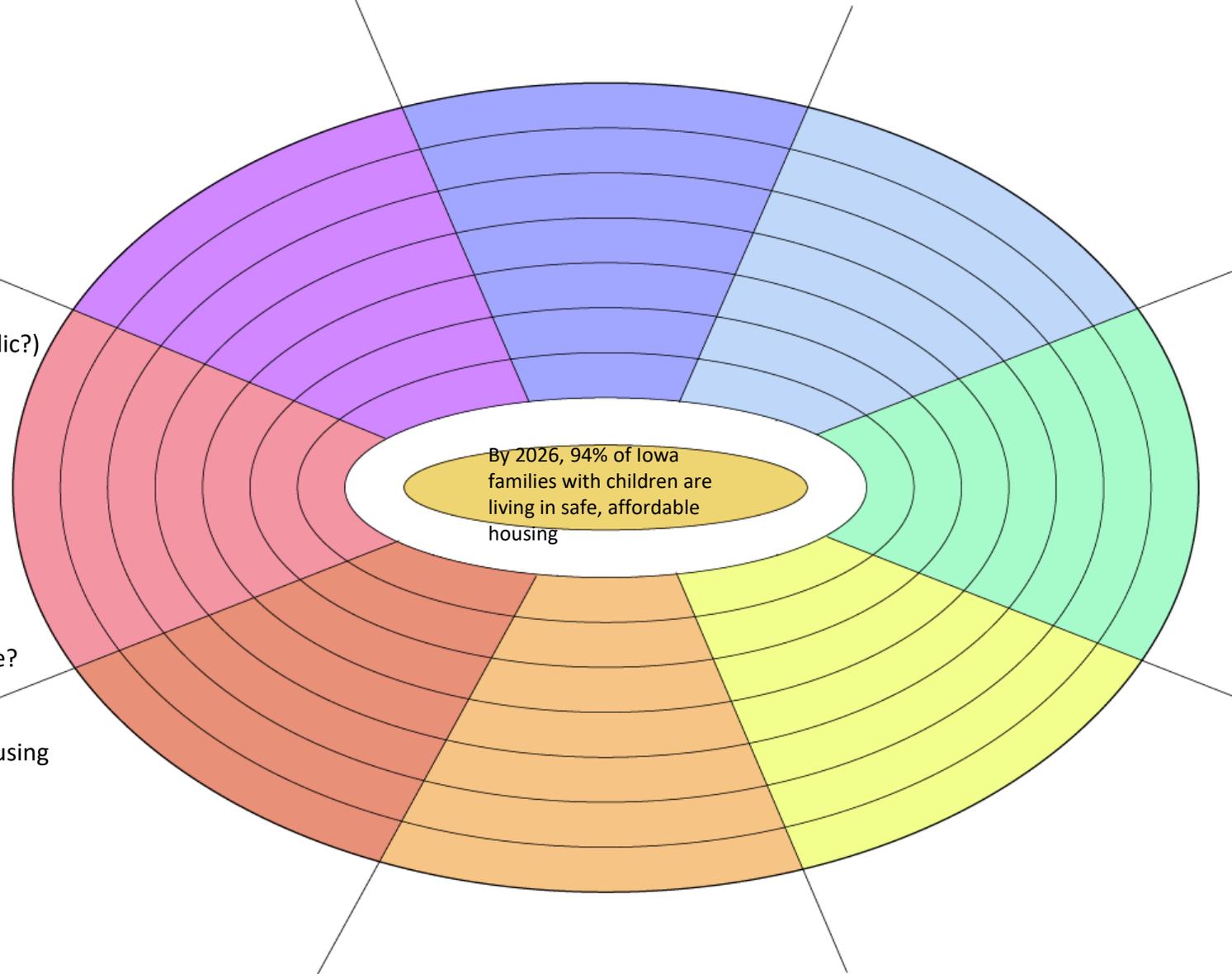
- Families in the behavioral health/SUD system (Program population)
- Families with youth of color at-risk of entering CWS or JJ? In CWS or JJ (Program population)

How is the Target impacted when you look through the lenses of equity, trauma and resiliency, and neuroscience/brain development?

Report from meeting with Ashley Schwalm, Iowa Council on Homelessness (Iowa Finance Authority)/Family Resources, and Tim Wilson, Home Forward Iowa – Stephanie, Greg and Kristie

Results in the Center: Housing (work from NSWG's June 23 meeting)

- What sectors?
 - Construction
 - Public health/public sector
 - Economic development
 - County govts
 - municipalities (zoning)
 - Nonprofit housing orgs
- What stakeholders?
 - Landlords association
 - Families
 - Iowa Finance Authority (public?)
 - Employers
 - Nonprofit leaders
 - Child welfare
 - Behavioral survey
 - Law enforcement (resp. for evictions)
 - Schools?
- Who are the partners?
- What about American Rescue Plan?
- What next steps do you want to take?
 - e.g.
 - Questions to answer
 - Input on the target from housing experts
 - Related to ARP?
 - What else?



Next Steps – Housing (notes from NSWG June 23 meeting)

- What next steps do you want to take? e.g.
 - Questions to answer
 - Input on the target from housing experts
 - Related to ARP?
 - What else?
- Contact Habitat for Humanity – for ideas about who to involve/talk with – Anne by early next week
- United Way of Central Iowa – Dave Stone (the lobbyist) – Ana by this Friday
- Iowa Housing Authority – Anne by early next week
- Child welfare – start with Dawn – Greg by this Friday
- Behavioral health – start with Michele – Greg by this Friday
- Vision Council Meeting –
 - Short update – Kelli
 - Pose a discussion question to your colleagues?

Next Steps – Housing

- Result for Today's meeting (8/26/2021): **Next steps identified for advancing the housing strategy.**
- What next steps do you want to take? e.g.
 - Questions to answer
 - Input on the target from housing experts
 - Related to ARP?
 - What else?
- Resources
 - [Iowa Coordinated Entry Regions](#)
 - Institute for Community Alliances – [Iowa Page](#)
 - Institute for Community Alliances – [Iowa Point in Time Data](#)
- ~~Contact Habitat for Humanity – for ideas about who to involve/talk with – Anne by early next week~~
- ~~United Way of Central Iowa – Dave Stone (the lobbyist) – Ana by this Friday~~
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Setting Targets for the Vision Council's North Star Outcome

“Iowa families and children are safe, secure, healthy and well in their communities.”

Proposed Indicator for Financial Security:

Children in Poverty ([County Health Rankings](#))

Children in Poverty captures an upstream measure of poverty that assesses both current and future health risk. Poverty and other social factors contribute a number of deaths comparable to leading causes of death in the US like heart attacks, strokes, and lung cancer.[1] While repercussions resulting from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood. Children living in low-income households have an increased risk of injuries from accidents and physical abuse and are susceptible to more frequent and severe chronic conditions and their complications such as asthma, obesity, diabetes, ADHD, behavior disorders, cavities, and anxiety than children living in high income households.[2-4]

Need to set a Target for Financial Security: *How many individuals in the population (# or %) will be doing better by when?*

The target population could be:

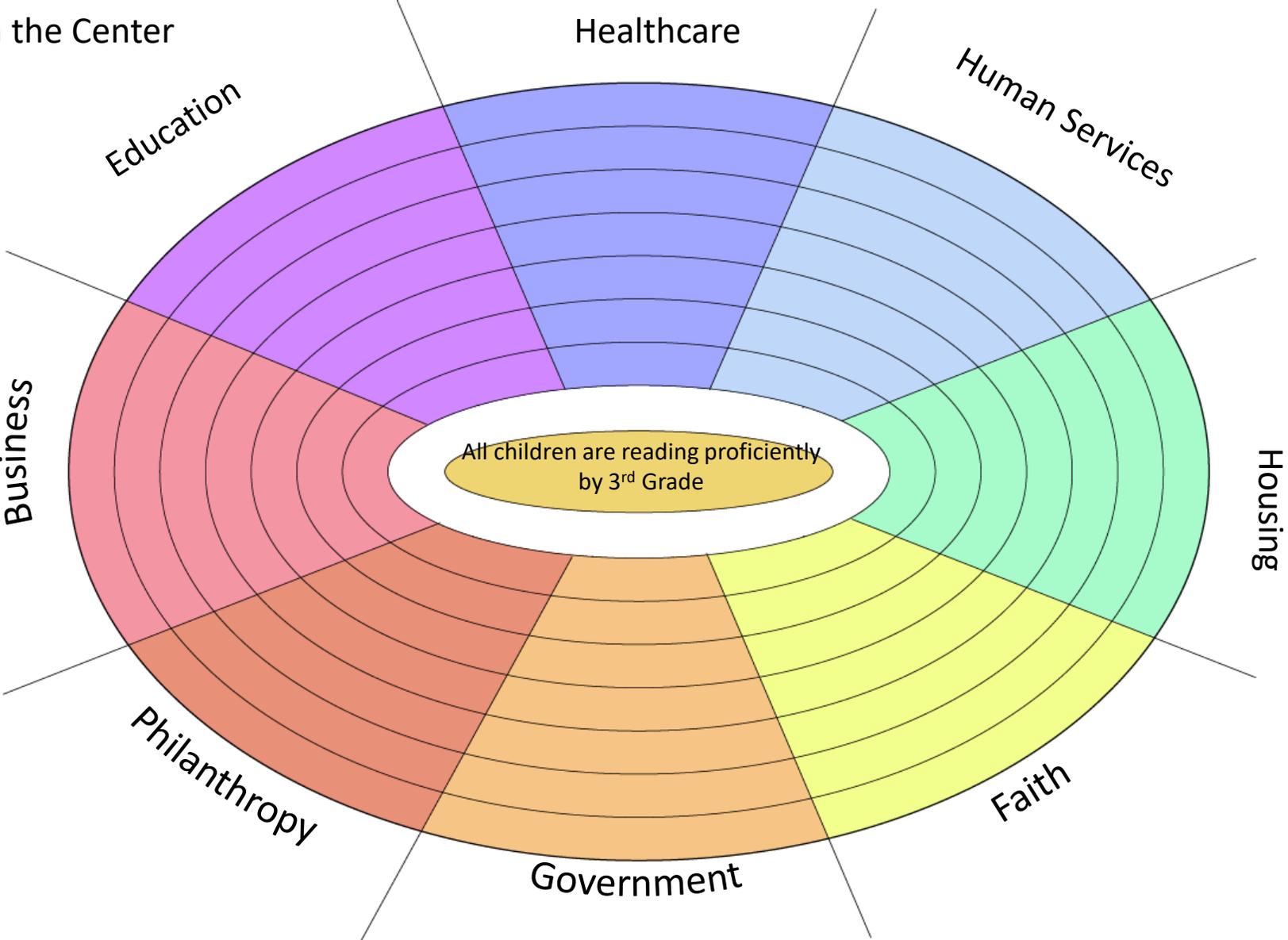
- All Iowans?
- All families and children in Iowa? (Whole population)
- Children and families in the child welfare system? (System population)
- At risk of entering the child welfare system? (?System population?)
- Families in the behavioral health/SUD system? (Program population)
- Families with youth of color at-risk of entering CWS or JJ? In CWS or JJ? In foster care? Aging out? (Program population)

How is the Target impacted when you look through the lenses of equity, trauma and resiliency, and neuroscience/brain development?

Draft Target: By 2026, 96% of Iowa's families with children have income and supports for a moderate, adequate level of income. (~300% of the federal poverty level in Iowa)

(Notes: 2026 selected due to American Rescue Plan funds; 96% selected as the inverse to the lowest percentage of children in poverty in the state by county (Dallas County is at 4%); “Iowa's families with children” is selected due to the ability to collect data using the “Children in Poverty” indicator. Useful resource from Economic Policy Institute: [Family Budget Calculator](#))

Example Results in the Center



Results in the Center: Financial Security

- What sectors?
- What stakeholders?
- Who are the partners?
- What about American Rescue Plan (ARP)?
- What next steps do you want to take? e.g.
 - Questions to answer
 - Input on the target from poverty experts?
 - Related to ARP?
 - What else?



Next Steps – Financial Security

- What next steps do you want to take? e.g.
 - Questions to answer
 - Input on the target from ?????
 - Related to ARP?
 - What else?

PATHWAY FOR RESULTS ACTION PLAN DEVELOPMENT

- By when do you want to complete the Results Action Plan?
- Is the Strategy Template a useful tool?
- What next steps do you want to take?
- How frequently do you want to meet?
- Do you need to add members to the NSWG?
- What are the other questions you have/need to answer?

The Iowa Change Leadership Vision Council

Iowans are supportive of strong families and communities. It shows in data about our state. Iowa's rank as #3 in a national Opportunity Index suggests that most Iowans can rely on the foundational building blocks of employment, education and learning opportunities, physical, mental and behavioral health care, homes in thriving neighborhoods, enough food for an active, healthy life, and vibrant communities.

The Iowa Change Leadership Vision Council, sponsored by the Mid-Iowa Health Foundation as a project of the Coalition of Family and Children's Services in Iowa, seeks to align the collective efforts of organizations, government, and communities to help Iowa do even better for families and children. A public-private partnership of leaders working every day with the families who collide with structural inequities in their lives and where they live, the Vision Council studied how to build up the right kinds of supports so that more of our children and families thrive. Our vision is that "all Iowa children and families are safe, secure, healthy and well in their communities."

We know that when a foundational building block is missing or crumbling out from under a family, stress levels rise. Most families live with supports that equip them to recover from mild pressures, like temporary job loss or a recoverable illness. But overwhelming stress from limited access to an adequate array and availability of jobs, insufficient or incomplete education, unsafe living conditions, disconnection from health care coverage and access, and weakened neighborhoods, can keep children and families from achieving their full potential.

Because we are a community of leaders interacting daily with Iowa's children and families who are living with shaky foundations, we can see that there are pressures that cause stressful situations, which can lead to child maltreatment. In most cases, we observe that children who have experienced maltreatment are in situations where multiple pressures are co-occurring. After a deep review of data and research, the Vision Council believes that too many Iowa families are living and working within structural inequities that actively build up pressure in their homes. When it builds too high, children can become the victims of harm that will impact their development and opportunities for the rest of their lives. These high-pressure situations, and the harm that can result, are often preventable.

Structural inequities occur when situations and systems, and the decisions and policies that impact them, are not designed to ensure success. The Vision Council is focusing our strategies and advocacy on addressing structural inequities, ensuring instrumental supports are there when families need them to rebuild their strength, and cultivating protective factors in individuals, families, communities and systems. We know our work builds on Iowa's strong commitment to child, family and community well-being.

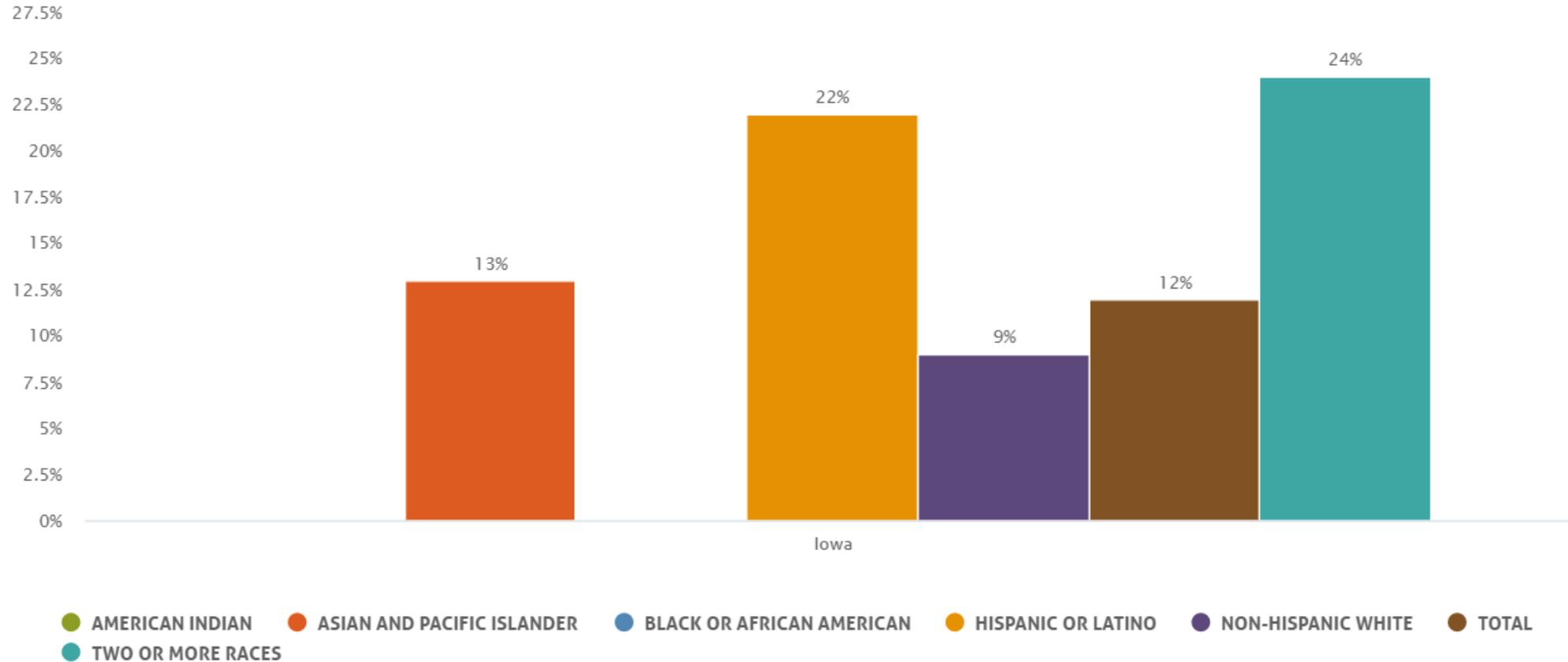
Possible Progress Indicators based on Protective/Promotive Factors

(Instrumental Supports in Times of Need (versus the term “Concrete Supports”))

Key:
Red = correlates w/ child maltreatment
Blue = Family First Prevention Services Act helps with
Purple = financial strategies proven to reduce entries into CWS

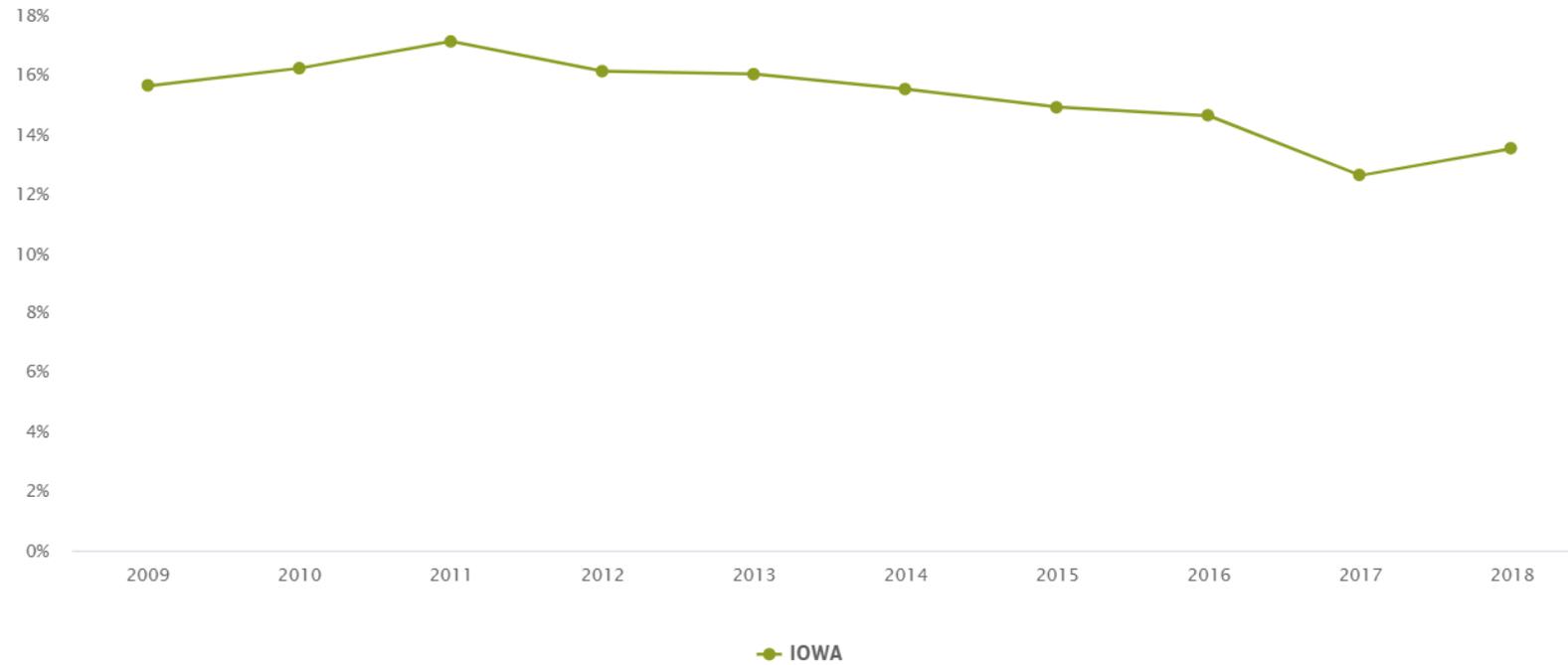
	Type of Support	Progress Measures	Strategies	Notes
Safe - Feeling nurtured and protected.	Housing		<ul style="list-style-type: none"> Prioritize housing Identify and meet with housing leaders/stakeholders Advocate for housing to be a part of IDPH/DHS alignment Partner with DHS to conduct in-depth Family Wellness Assessment (use WI instrument) 	<p>Correlation with child maltreatment</p> <p>*Differential response with concrete supports</p> <p>*Housing</p>
Secure - Having enough resources for a quality of life.	Financial assistance Employment Transportation		FPF	<p>Correlation with child maltreatment</p> <p>*EITC</p> <p>*Minimum wage increase</p>
Healthy - Enjoying good health and expecting to live a full life.	Health care access Food security SUD and MH treatment	Uninsured (CHR – under age 65) Uninsured children (CHR - % under age 19) Food Environment Index (CHR) Access to MH Care (CHR)	FPF	<p>Some correlation with child maltreatment</p> <p>*Medicaid Expansion</p> <p>Some correlation with child maltreatment</p> <p>FFPSA helps address</p>
Well - Thriving and resilient with a strong economy and opportunities to learn.	Parental education opportunity Child care Services to address special needs			<p>Correlation with child maltreatment</p> <p>Correlation to child maltreatment</p>
In their communities - Living among family and social	Parent skill building Supportive communities and relationships		FPF FPF	<p>FFPSA helps address</p> <p>*Home visiting with concrete supports</p>

Children in Poverty by Race & Ethnicity in Iowa



Children In Poverty By Race And Ethnicity (Percent) - 2017

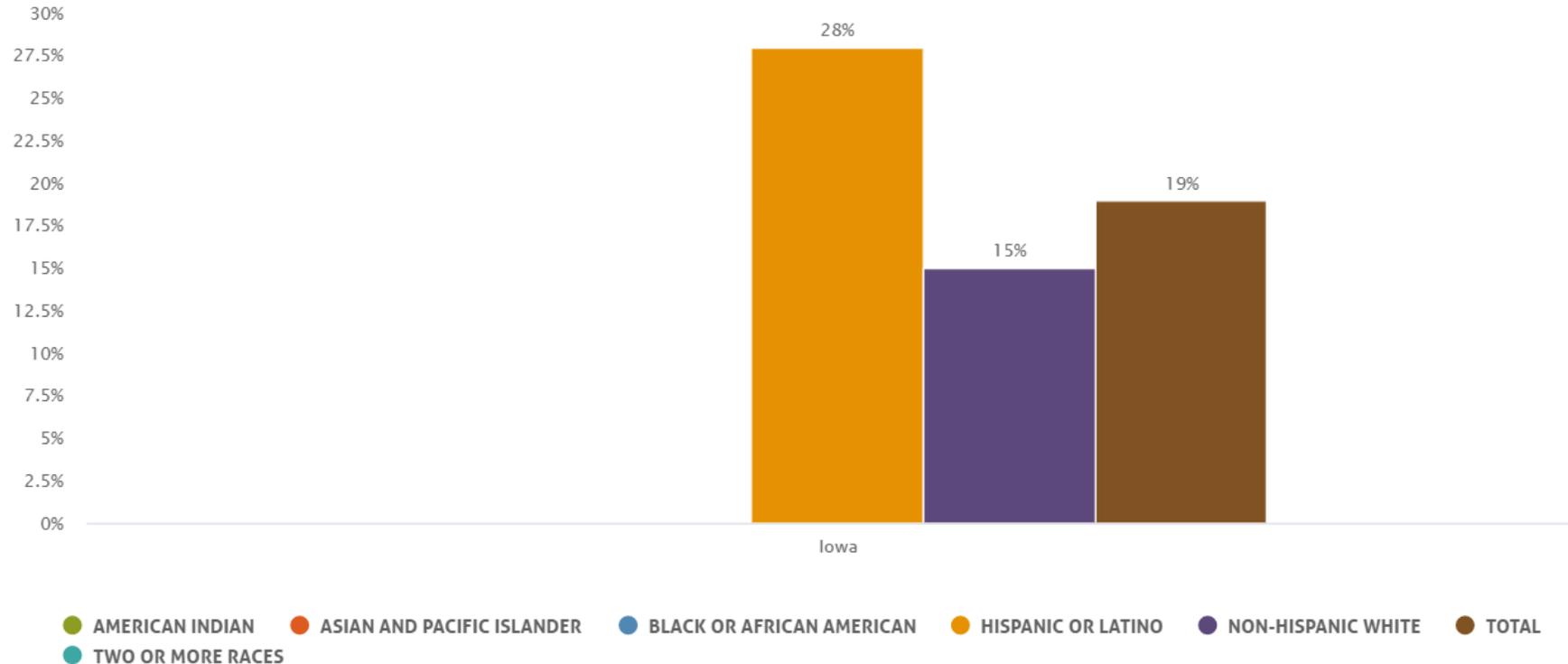
National KIDS COUNT
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation



Child Poverty (Percent) - 2009-2018

Common Good Iowa
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation

Children Living In Households with a High Housing Cost Burden by Race in Iowa

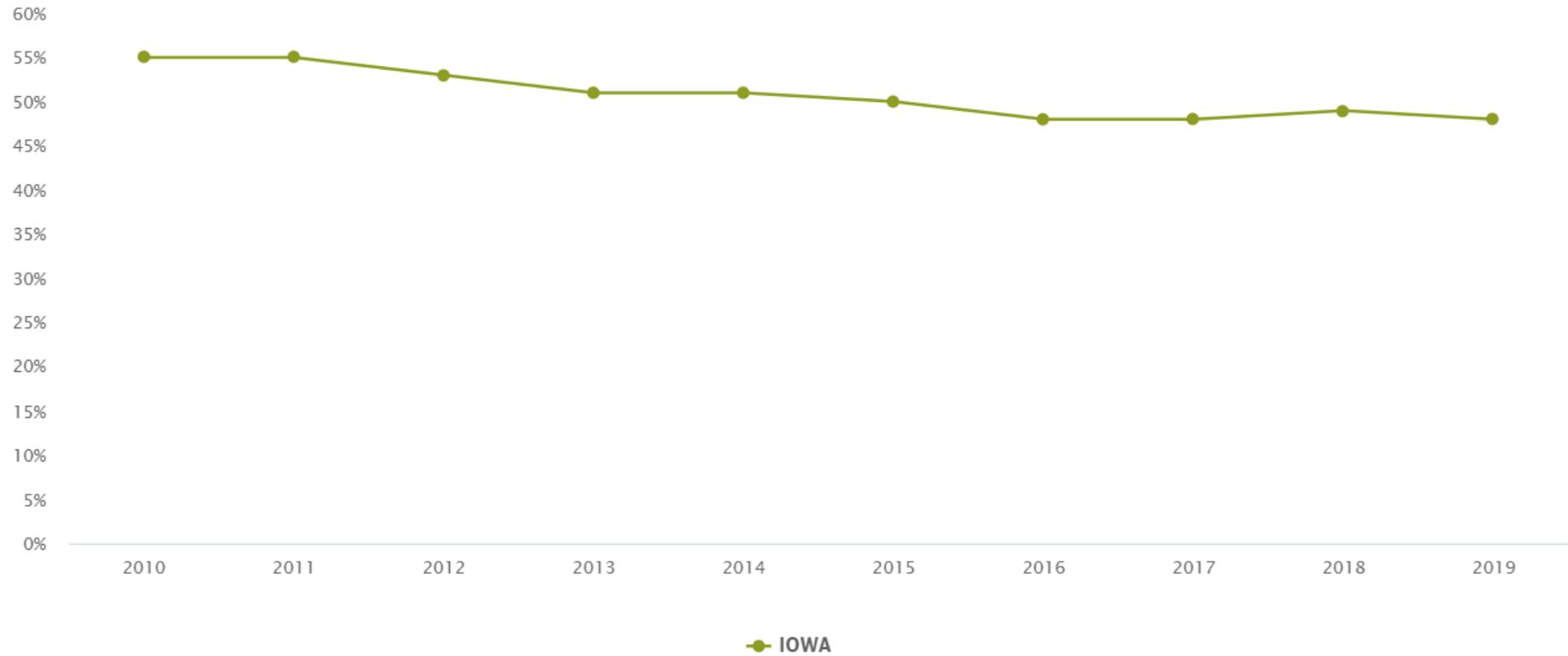


Definitions:

Children living in households with a high housing cost burden is the percent of children under age 18 who live in households where more than 30 percent of monthly household pretax income is spent on housing-related expenses, including rent, mortgage payments, taxes and insurance by the child's race and ethnicity.

Children Living In Households With A High Housing Cost Burden By Race (Percent) - 2017

National KIDS COUNT
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation



Children In Low-Income Households With A High Housing Cost Burden (Percent) - 2010-2019

National KIDS COUNT

KIDS COUNT Data Center, datacenter.kidscount.org

A project of the Annie E. Casey Foundation

Child Maltreatment Data

Data point	Level of Data and Source	Notes
<p>Highest risk factors for victimization</p> <p style="padding-left: 150px;">Under age 4</p> <p style="padding-left: 40px;">Special needs that increase caregiver burden (e.g. mental health, social-emotional development)</p>	CDC	<p>Does this make the case for:</p> <ol style="list-style-type: none"> 1) focusing on young children and families with SUDs; and 2) focusing on ensuring older youth in the system as having indicated “special needs that increase caregiver burden,” including predictable behavioral issues due to traumatic experiences, to ensure that they leave care with all protective and promotive factors possible? <p>What does this mean for focusing on special needs for all ages?</p>
Terminated Parental Rights by type	ICJ PPT slide (can inquire for original source)	
Assessments of child abuse and neglect	IA DHS	Assessments by “not confirmed,” “confirmed,” and “founded”; consider getting the “total referrals” number, which is higher than “assessments”
Total numbers of abused and neglected children by age	IA DHS	
Abuse and neglect by type	IA DHS	54% neglect; 27% dangerous substance; 7% presence of illegal drug in child’s body
Costs of child welfare	IA DHS	The Vision Council can work with DHS to get cross tabs and more detailed data, e.g. how often SUD is a factor.