

Poverty Amidst Plenty

Fourth Edition, 2012

Surviving the Economic Downturn



A Guide To Action

Prepared by the Community Foundation of Anne Arundel County to inform and inspire our community to join us as we undertake the critical work that will create community solutions to local challenges.

POVERTY AMIDST PLENTY IV: SURVIVING THE ECONOMIC DOWNTURN

Fourth Edition, 2012

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Preface

Poverty Amidst Plenty IV uses the most recent 2010 US Census data where possible, recognizing that there are still areas awaiting more complex analyses at the County level. The American Community Survey, 2010 (1-year estimates) was used for more specific data estimated from the 2010 census. Other sources included many County documents posted online and personal communication with sources.

The 2012 needs assessment draws on qualitative data gathered from 11 key informants and 11 focus groups, for a total number of 105 participants representing public housing, the arts, the environment, human services, the not-for-profit sector, health, mental health, early childhood, and consumers of services. Interviews and conversations were recorded, with the permission of participants, and transcribed verbatim. The data was read and reread until dominant themes emerged which became the subtext of the report. All participants gave permission for their words to be used in the final report, although their identities are protected. We are indebted to the many residents who gave their time freely to ensure a wide range of experiences and opinions are heard throughout the chapters.

The authors take full responsibility for the interpretations and analyses presented here. They do not necessarily represent the interpretations or views of the Community Foundation of Anne Arundel County, the Anne Arundel Partnership for Children and Families, or the boards, officers, or donors of these organizations or of any other organizations with which the authors are affiliated. The report has only one fundamental goal: To help frame an informed discussion about trends and needs in Anne Arundel County, Maryland, and to contribute to planning and actions that address those needs.

Foreword

The Community Foundation of Anne Arundel County (CFAAC) is pleased to present this Needs Assessment report to the residents of Anne Arundel County. We are deeply appreciative to Dr. Pamela Brown and the Partnership for Children, Youth, and Families and Dr. Karen Pell for compiling the data and drafting this report.

CFAAC is dedicated to harnessing our community's tremendous resources in order to address our toughest challenges and embrace our most inspiring opportunities. Our mission is to connect people who care to contribute to causes that matter in our community. Through philanthropy and action, we can make meaningful, lasting, and positive change together.

Unquestionably, the recession and ongoing economic downturn have caused hardship for our citizens and tested the strength of the social safety net. Direct service providers have struggled to meet budget goals with fewer resources, while at the same time opening their doors wider to serve a burgeoning number of community members in need. Yet these same challenging economic factors are also creating a unique opportunity for program innovation and stakeholder collaboration. The resulting new partnerships created to share tools and insights have helped break down agency silos in order to develop effective cross-sector strategies that support community solutions.

When selected government services were absorbed into the nonprofit sector in the 1990s, the County devoted a portion of its annual budget to these services in recognition of the public sector's continued responsibility to support vital social programs. Now however, government is not fiscally able to provide the same level of support. As a result, nonprofit organizations are challenged to fill that budget gap while continuing to provide crucial services to the community. It is here that CFAAC plays the important role of building a permanent base of local assets that will sustain nonprofit agencies and the good work that they do to improve the quality of life for all Anne Arundel County residents.

To this end, CFAAC is committed to achieving a lasting positive impact on our entire community through fostering philanthropy. Our focus is not solely on Annapolis. Rather, CFAAC believes that the Anne Arundel County community is linked together as one through interconnected neighborhoods. Our attention, interest, and giving will reach all corners of the County. In fact, in an effort to spread our energy and resources where need is greatest, CFAAC will devote resources and attention to the northern portion of the County, specifically Glen Burnie, Brooklyn Park, and Pasadena, all areas noted in the report as having elevated needs.

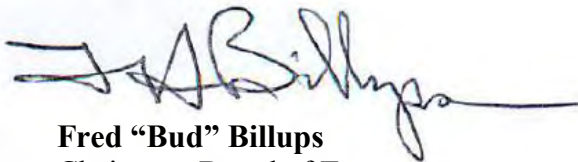
Additionally, the Needs Assessment highlights three pressing issues that were identified time and again by focus group members interviewed for this report – affordable child care, affordable housing, and transportation. Without these building blocks, it is nearly impossible for struggling community members to build independent, self-sufficient lives and be afforded the dignity of providing for themselves and their families into the future. A combination of public will and pressure, government action, and public-private partnerships will be necessary if we are to tackle these important issues. They are vital to the future growth and vibrancy of our community.

This fourth edition of *Poverty Amidst Plenty* should be considered a call to action to the entire Anne Arundel County community. By tracking key measures of community well being and developing action items to address those needs, the report serves as a yardstick with which we can measure progress every two years.

We hope this report will inform our fund holders, donors, nonprofit grantees, professional advisor partners, and the community at-large by underscoring the gravity of local challenges and the importance of their participation in critical conversations centered on community solutions. It is our hope that individuals, families, businesses, and civic and faith-based organizations will use this Needs Assessment to find issues of shared interest, align their efforts and resources, and join with CFAAC to improve the quality of life for all of our residents.

CFAAC, itself a nonprofit organization, is one of the largest funders of charitable organizations in Anne Arundel County. Established in 1998, CFAAC is supported by local donors and governed by a board of distinguished, private citizens. The Community Foundation manages over \$3.1 million spread among 55+ funds including donor-advised, field-of-interest, and impact area funds. Over the years, we have made more than \$3.5 million in grants to local nonprofits. Last year, grants totaled over \$700,000 with most funding given in our Impact Areas of Economic Opportunity and Youth & Education. To address the most pressing needs of our community we are also focusing on the following Impact Areas: Arts & Culture, Environment, and Health. This report reflects our targeted focus in these areas.

Now in our fourteenth year, there is much to celebrate, including our successful efforts to educate the community of critical needs, convene diverse stakeholders who can help create a better future for our community members, and build the capacity and effectiveness of nonprofits. At the same time, however, we know that as a community, we can make an even larger impact on the quality of life for all. Together we can truly “move the needle.” We hope the Needs Assessment that follows will spur you to action, including sharing the message with friends and colleagues.



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Summary of Principal Findings

Population Change: The most recent 2010 census reports that the total population of Anne Arundel County is 537,656. Growth has slowed since the high decades of the 1970s and 1980s, with only a 10% increase in overall figures since the 2000 census. The County is becoming increasingly diverse; the greatest growth occurred in the Hispanic/Latino population. From 1990-2010, that population increased by 383%.

Impact of the Recession: The 2012 assessment reveals some of the major impacts of the economic downturn, not just for low-income families but also for middle-income families struggling to make ends meet, families in which one or both parents have lost jobs and may be paying a mortgage on a home worth far less than the price they paid. For all income levels these stressors are resulting in increased depression and anxiety.

Cost of Living: Anne Arundel County is one of the top three most expensive places to live in Maryland. Housing costs have doubled since 2001, which is the highest increase in the state, according to the recently released *2012 Self Sufficiency Standard for Maryland*. This report shows that a family consisting of one adult and a preschool child would need an income of at least \$58,048 to live independently in Anne Arundel County.

Family Income: 2010 census estimates report that the median family income in Anne Arundel County is \$97,974, although there are still nearly 27,000 families earning less than \$50,000 (see Table 2.4). The median income for people in the workforce is \$41,876 and when that amount is compared to the Maryland Self Sufficiency Standard of \$58,048, there remains an income gap of \$16,172. A 2010 survey of three subsidized and public housing complexes in the City of Annapolis fixed the median income within those complexes at \$15,000, leaving residents with an income gap of over \$43,000 and little hope for self-sufficiency.

The Most Compelling Needs: Affordable Housing, Transportation, Quality Child Care: For Anne Arundel County residents attempting to live independent and productive lives, there are three main barriers to self-sufficiency: housing, transportation and quality child care. These three basic necessities impact every aspect of family life, including employment, access to college, school stability, health care, good mental health, recreation, and physical activity. Good programming and grants cannot fix these issues entirely. It will take political will and courage from policy makers to address such fundamental barriers to self-sufficiency and their consequent impact on the economic health of the County.

Homelessness: The County's homeless numbers, especially for families with children, are growing. According to the most recent Homeless Management Information Systems (HMIS) report, 3,605 people are homeless; of those numbers, 72.6% report they are not chronically homeless, 4.2% are veterans, 10.5% report being victims of domestic violence, and only 15.9% are employed. More than 1,100 are children. The number of homeless children has essentially doubled since 2008, with some variation from year to year.

Poverty and Single Parents: Of the 139,262 family households in the County, 33,307 are led by single parents (male or female); the female heads of households predominate (24,064). Economic

wellbeing for households headed by a single parent is fragile. There are 2,925 single parent households in which income in the last 12 months was estimated below the federal poverty level of \$23,050 for a family of four; 2,400 of those households were headed by single females. A single parent caring for a preschool-aged child needs to earn \$27.48 per hour to be self-sufficient and a single parent with two children, a preschooler, and school-aged child needs \$32.13 per hour to meet the family's basic needs.

Children and Youth: Youth are the promise for the future of Anne Arundel County. Their care and development from birth through early adulthood is key to the economic and social vitality of the County. Fortunately, there is good news to report on some of the eight objectives that the State of Maryland has identified for assessing child wellbeing:

- Anne Arundel County lowered its **teen birth rate** from 2.1% in 2007 to 1.9% in 2010.
- The **mortality rate** for infants has decreased consistently over the last four years.
- Anne Arundel County Public Schools (AACPS) uses the Maryland Model for School Readiness assessment as an early measure of child development. The trend in Anne Arundel County is very positive with steady growth in the percentage of children entering school **ready to learn** over the last five years, reaching 86% in 2011 and remaining at that rate for 2012.
- Anne Arundel County students' **academic performance** exceeds that of students statewide; County students score from three to nine percentage points higher than Maryland students overall.
- **Behavior in school** has improved. Data from the Office of Safe and Orderly Schools in AACPS showed a decline by more than 53% over six years in disciplinary referrals at the County level.

In a number of other areas, however, the record is not quite as encouraging. For example:

- When student performance is analyzed using Free and Reduced Meals Students (FARMS) data as an indicator of economic need, Anne Arundel County math and science scores drop significantly. While students in the FARMS program in Anne Arundel County do better than like students statewide, there is a troubling gap in performance. For example, according to 2011-2012 Maryland School Assessment (MSA) scores, only 70.5% of Anne Arundel County 8th grade FARMS students scored proficient in reading in comparison with 84.5% of all students. For Math proficiency, the gap is much wider with only 53.3% of 8th grade FARMS students scoring proficient or advanced as opposed to 74.4% of all students.
- FARMS students are also missing instructional time at greater rates than students overall. The FARMS truancy rate escalates as students move up grades, doubling from elementary to middle, and then growing to more than one in four students in high school.
- Mental health services for children are sorely lacking. AACPS's system for offering school-based mental health was given high marks, but there are waiting lists. Other issues include the lack of mental health providers, especially psychiatrists, willing to accept Medicaid and MCHIP and the low numbers of bilingual therapists.
- The cohort of youth aged 16-24 is experiencing many transitions, socially, developmentally and economically. They are the age group most often referred to by

interviewers as “forgotten” or “lost,” a reference to the fact that this group is not tracked by any system as a cohort. In almost every focus group, participants commented that the 16-24 age group needs special attention in the school setting in the form of apprenticeships, job training, and certification programs, especially for those who do not want to go to college.

- There is a steady growth in drug abuse among adolescents, often coupled with gang activity. Underage alcohol use continues to be reported as a “community norm.”
- Participants noted the need for more afterschool programs and mentors for children, before they get involved in alcohol, drugs, crime, and gangs.

Health: Overall, the County ranks tenth of the 24 Maryland jurisdictions for health vitality per the County Health Rankings, 2012. Issues related to obesity are rising; 29.6% of adults in the County are obese. The most recent study of obesity in children in the County was conducted in 2006. Those data show that 15.6% of children ages 2 to 19 were overweight, with 16.9% additionally at risk of being overweight. Obesity is one of two goals for the new Local Health Improvement Coalition, a collaboration of public and private stakeholders led by the Anne Arundel County Department of Health. The other goal is related to co-occurring disorders, a term used to describe residents who are battling substance abuse and mental health issues concurrently.

Mental Health: Most focus group members who work in service agencies reported that, in 2012, they are seeing a higher rate of depression among those they serve, attributed to the downturn in the economy and the reduction in community services available to those in need. According to the Centers for Disease Control Behavioral Risk Factor Surveillance System (BRFSS), in Anne Arundel County the average number of poor mental health days over a 30-day period is reported as 3.5, which exceeds the national average of 2.3 and the Maryland average of 3.3. Additionally, the Anne Arundel County Mental Health Agency reports that the County saw an 18% increase in the number of consumers of services in 2010.

Substance Abuse: Mental health professionals interviewed for this assessment noted that there are not enough substance abuse counselors or programs; only one in 28 people who need substance abuse treatment get it. Twenty to twenty-five percent of substance abuse users have an underlying disorder, often depression. The group presenting with ‘co-occurring’ disorders (mental health and substance abuse) is growing.

The Environment: Environmental stewardship in the County is bolstered by a large number of groups and initiatives. Participants noted that the County is lacking a “single entity or champion” to pull together and align the many volunteer and professional efforts to improve the environment. Similarly, there is not an integrated report card to monitor the environment and its impact on health in a more formal way.

The Arts: The arts comprise an industry that generates economic benefits through jobs, spending, and tax revenues. It is estimated that every dollar of the arts organizations’ operating budgets generates \$3.78 in additional economic activity. Marylanders overwhelmingly support arts education, backed by the belief that arts skills build life skills that children use as adults. Access and affordability issues exist for children and families to experience or create art.

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Introduction

Poverty Amidst Plenty 2012 is the Community Foundation of Anne Arundel County's fourth edition of the Anne Arundel County community needs assessment. The data for the 2010 assessment were collected at the end of 2009, when the economic downturn was still a relatively new reality for the County. The 2012 assessment reveals some of the major impacts of that downturn, not just for low-income families, but for ordinary middle-income families struggling to make ends meet, such as families in which one or both parents have lost jobs and may be paying a mortgage on a home worth far less than the price they paid. Many of these newly poor families are requesting help and accessing services for the first time, stretching available resources during a period when continuing budget cuts are weakening the capacity of agencies to respond to vulnerable children and families.¹

The most recent 2010 census (see Table A) reports that the total population of Anne Arundel County is 537,656. Growth has slowed since the high decades of the 1970s and 1980s, with only a 10% increase in overall figures since the 2000 census. The County is becoming increasingly diverse with the greatest growth occurring in the Hispanic/Latino population. From 1990-2010, that population increased by 383%. Focus group participants commented favorably on the growing integration of the community, noting that many Hispanic/Latinos are "opening their own small businesses." The Vietnamese and Korean populations are also growing.

Anne Arundel County can be divided into four very distinct quadrants. The northern part of the County touches the edges of Baltimore City and shares issues related to urban poverty. To the west, the new Odenton Town Center rubs shoulders with the military installation of Fort Meade, the new U.S. Cyber Command headquarters and home of the National Security Agency. The Base Closure and Realignment Commission (BRAC) is creating new jobs and housing as military personnel are transferred from other areas of the country. The central part of the County is dominated by the historic City of Annapolis, situated on the Chesapeake Bay at the mouth of the Severn River. With a population of 38,394,² Annapolis is one of only two incorporated towns in the entire County, the other being Highland Beach. Finally, the area referred to as South County most resembles some of the rural communities found on Maryland's Eastern Shore. Each one of these County quadrants has its own unique set of obstacles and barriers for residents, although North County (specifically Glen Burnie, Brooklyn, and Pasadena) was most often cited as the area with the highest levels of unmet needs with the City of Annapolis a close second.

Table A

Ethnic/ Racial Composition Anne Arundel County, 1990-2010							
	1990		2000		2010		Percent Change, 1990-2010
	Amount	%	Amount	%	Amount	%	
Total Population	427,239	100.0	489,656	100.0	537,656	100.0	25.8%
Non-Hispanic Whites	361,609	84.6	390,519	79.8	405,456	75.4	12.0%
Other:	65,630	15.4	99,137	20.2	132,200	24.6	101.4%
Hispanic or Latino	6,815	1.6	12,902	2.6	32,902	6.1	382.8%
Black or African- American	49,954	11.7	65,755	13.4	83,484	15.5	67.1%
Other*	8,861	2.1	20,480	4.2	15,814	3.0	78.5%

* "Other" here includes "American Indian and Alaskan Native", "Asian", "Native Hawaiian or other Pacific Islander," "Some other race," or "Two or more races." The "White" and "Black" figures are those who were counted as "White alone" or "Black alone."

Source: U.S. Census, *American Community Survey*, Anne Arundel County, DP-1, 2010.

Anne Arundel County is an appealing place to live. The natural beauty of the County can be enjoyed at 2 State and 70 County parks, as well as through an extensive network of recreation and transportation trails that annually host more than two million visitors.³ With 534 miles of linear coastline, the County ranks second for miles of waterfront in the state and second in the nation when compared to other counties. Despite this abundance of water, however, there is limited public water access.

Notwithstanding the economic downturn, Anne Arundel County is one of the top three most expensive places to live in Maryland. Housing costs have doubled since 2001, which is the highest increase in the state, according to the recently released 2012 Self Sufficiency Standard for Maryland.⁴ That report shows that a family of two (consisting of one adult and one pre-school child) would need an income of \$58,048 and above to live independently in Anne Arundel County. Although the median income for a family in Anne Arundel County is high at \$97,974,⁵ there are 26,872 families,⁶ or 20% of all Anne Arundel County families with incomes less than \$50,000 (less than the self-sufficiency threshold). It is clear by the size of that gap that many community members require help meeting their basic needs.

Not unexpectedly, participants in focus groups cited the economic downturn as a stressor for all income levels. Low-income families are experiencing increased unemployment and reduced access to health and mental health services, affordable housing, and child care. According to the Anne Arundel County Department of Social Services, households eligible to receive food stamps nearly tripled between 2006 and 2012 (see Figure 2.1 below). Middle-income families negatively impacted by the economy are also feeling the added stress of unemployment and mounting bills, and for all income levels, these stressors can result in depression and anxiety.

Between 2007 and 2010 there was a 50.5% increase in the use of public mental health services across all age groups in the County (Table B), with the most significant percentage increases for young adults (ages 18-21) at 58.4% and adults (ages 22-64) at 64.8%. Focus group and key stakeholder interviews corroborate this data citing “depression” as the most overwhelming issue, especially in low-income communities. Participants described the “hopelessness” and “despair” among public and subsidized housing residents who have a “lack of belief, faith and hope in their future.” Several participants noted that low-income family members might hold “poor mental models” for what success might look like and set low expectations for the future of their children.

Table B

Persons Served by Anne Arundel County Public Mental Health Service System					
	FY07	FY08	FY09	FY10	Percent Change 2007-2010
Early Child (0-5)	214	263	292	296	38.3%
Child (6-12)	1051	1148	1314	1430	36.1%
Adolescent (13-17)	847	919	959	1120	32.2%
Transitional (18-21)	303	363	402	480	58.4%
Adult (22-64)	2310	2662	3059	3811	64.9%
Elderly (65 and over)	49	52	49	49	0%
TOTAL	4774	5407	6075	7186	50.5%

Source: Anne Arundel County Mental Health Agency, *Fiscal Year 2011 - 2013 (2012 UPDATE) Annual Reports* FINAL-FINAL-12 UPDATE1-6-11-12PLAN FINAL

Despite the issues outlined above, this needs assessment is a story of hope and accomplishment for the County. Participants in focus groups and interviews reported a vibrant spirit of collaboration among residents, the philanthropic community, government, non-profit agencies, the business sector, and the faith-based community. Of particular note are some of the new partnerships developing between city and County government, the private and public health systems, and most importantly, the contributions of residents within their own neighborhoods, working shoulder-to-shoulder with social service organizations. The recession created a shared sense of responsibility that has resulted in new cost-effective and creative ways to serve vulnerable children and families.

Leadership in the County was given high marks for caring and creativity among the majority of respondents and cited as “outstanding” at the public school system, community college, government agency, and not-for-profit levels. County stakeholders are creating innovative programming, with several programs singled out for special mention including:

- Arts integration and the “Advancement Via Individual Determination” (AVID) programs in the Anne Arundel County Public Schools (AACPS),
- A robust non-profit community with leadership that is getting better at focusing on what they do best while centralizing their efforts and maximizing their resources,

- The Systems of Care single-point-of-access collaboration headed by the Partnership for Children, Youth and Families and AACPS,
- Healthy Start and the “REsidents Access to a Coalition of Health” (REACH) programs funded by the Anne Arundel County Department of Health,
- “Step Up to Success” program through Anne Arundel County Workforce Development,
- “Pathways to Opportunity” at the Housing Authority of the City of Annapolis, and
- Annapolis Community Health Center funded by Anne Arundel Medical Center.

Chapter 1: The Most Compelling Needs: Affordable Housing, Transportation, Quality Child Care

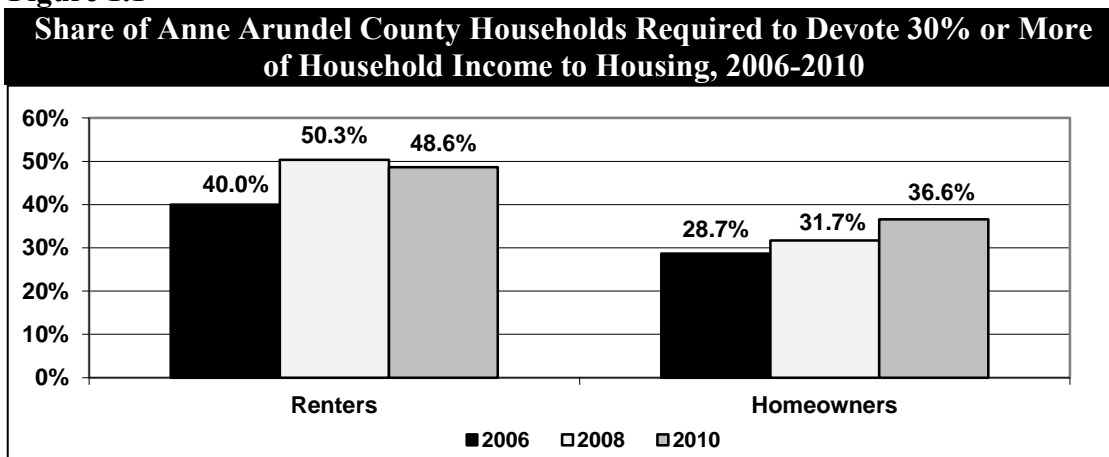
Three main barriers to self-sufficiency for Anne Arundel County residents who struggle to live independent and productive lives are housing, transportation, and quality child care. These three basic necessities impact every aspect of family life, including employment, access to college, school stability, health care, good mental health, recreation, and physical activity. As mentioned time and time again by focus group members, without these basics, it is almost impossible to hold down a job, or even get an interview, particularly for single parent families.

1. Affordable Housing

The median home value in Anne Arundel County in 2010 was \$343,000, \$42,000 higher than the rest of the state and \$163,500 greater than the U.S. median value.⁷ At the same time, the cost of housing has increased 99% from 2001 to 2012.⁸ Although one might expect that the recession would lead to falling costs, in fact, the opposite has been true. In Anne Arundel County (as well as in all Maryland counties), the cost of basic needs, including housing, has increased.⁹

The median rental price in the County is \$1,371 per month.¹⁰ Since 2006, the percentage of households required to spend more than 30% of their income on housing has increased among renters by nearly 10% and among homeowners by almost 8% (see Figure 1.1 below). The lack of affordable housing in the County was a constant refrain among participants in focus groups and interviews.

Figure 1.1



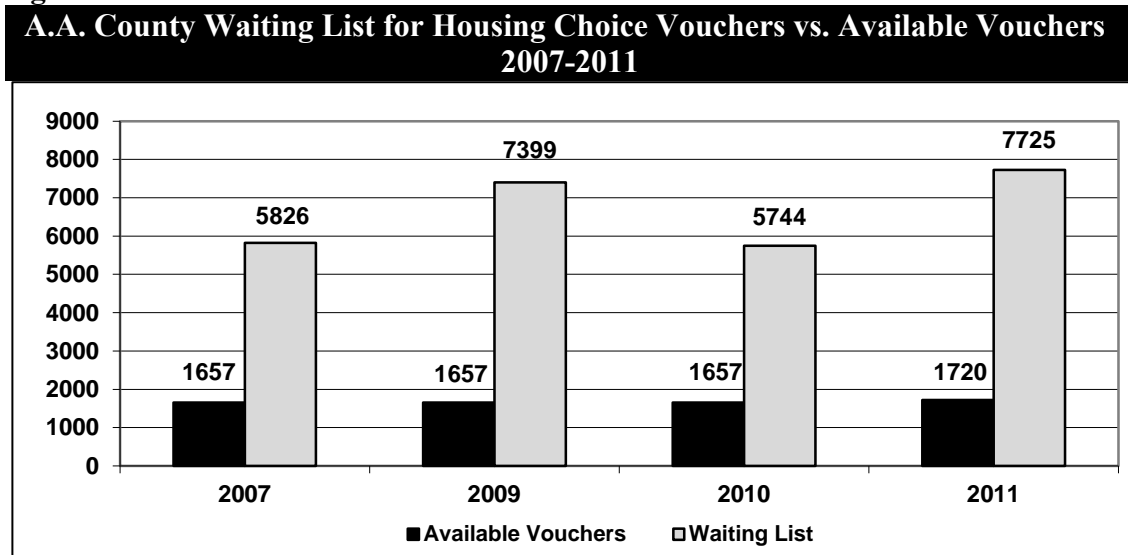
Source: U.S. Census Bureau, *American Community Surveys*, 2006, 2008 and 2010, Anne Arundel County, Table B25074; U.S. Census Bureau, *American Community Survey*, 2010, Anne Arundel County, Table S2506.

According to focus group participants, many single-family homes occupied by low-income families are now overcrowded because other family members who lost their own homes during the recession are “doubling up.” As one participant commented, “Many (homeless) are living with family members, in some cases up to fifteen persons in a townhouse. Others live from place to place.” The lack of affordable housing is a particularly difficult issue for low-income families, especially those in public housing. As another participant commented:

There's no affordable housing for public housing residents. When people say public housing is temporary, residents ask, "Where am I going to move to?" Most can't afford to live in the community.

For families who are at risk of homelessness, the chance of finding a temporary space in public or subsidized housing is particularly bleak. The number of community members on the County waiting list for housing vouchers in 2011 was 7,725, yet there are only 1,720 available vouchers (Figure 1.2). The trend line for numbers of families on the waiting list has an up and down appearance during the four year time frame charted below. Standard practice for the housing authority is to purge the list of families if they are unable to contact them two times per year. Additionally, when vouchers are issued, families are invited to an informational meeting. If they do not attend and do not contact the office, they are removed from the waiting list. As evidenced in the chart below and confirmed by the County housing eligibility officer,¹¹ in 2010, more families were purged. As of this writing, there are 1,854 families on the Housing Authority of the City of Annapolis' (HACA) waiting list.¹²

Figure 1.2



Source: Anne Arundel County Community Development Services, FY 2007, 2009, 2010 and 2011. Consolidated Annual Performance and Evaluation Report (CAPER), The Homeless Population.

According to the most recent Homeless Management Information Systems (HMIS) report,¹³ 3,605 people are homeless; of those, 72.6% report they are not chronically homeless, 4.2% are veterans, 10.5% report being victims of domestic violence, and only 15.9% are employed. These data were collected from homeless persons who used emergency shelter, transitional housing, or permanent supportive housing programs during the 12-month period that spans 2010-2011. The data are based on unduplicated counts, meaning each person is counted only once, regardless of how many different programs the person used.

Interviewees also commented on the increasingly visible homeless population living in camps. As one participant noted:

Homeless camps are popping up everywhere – off Glen Burnie on 8th Avenue and there's another on Route 10. There's one off 648. There's one tent city of teenagers off Baltimore Annapolis Boulevard. They feel safe together.

Tables 1.1 - 1.3 describe characteristics of these homeless persons. Alarming, nearly one-third of the homeless population is children. Nearly equal percentages are Caucasian (45%) and African American (48%). Corresponding to the growth in the Hispanic population in Anne Arundel County, the number of homeless Hispanic people is 5%.

Table 1.1

Age, Ethnicity and Race Breakdown of those in Homeless Status per HMIS 2010-11 (Unduplicated Count)	
Breakdown	# of Homeless
Ages 0-5	504
Ages 6-17	636
Ages 18-61	2366
Ages 62+	99
TOTAL - Age Group	3605
Hispanic/Latino	182
Non-Hispanic	3355
Ethnicity - No Report	68
TOTAL - Ethnicity	3605
White/Caucasian	1612
Asian	12
Black/African American	1736
American Indian/Alaskan/ Hawaiian/Pacific Islander	13
Multi-Racial	174
Race - Not Reported	58
TOTAL - Race	3605

Source: Program Demographics Report HMIS, DSS Anne Arundel County, personal communication.

Table 1.2

Use of Shelters Anne Arundel County 2008, 2009, 2011 (Unduplicated Count)			
	FY08	FY09	FY11
Emergency Shelters			
Persons in Families	450	350	863
Individuals	306	220	
Transitional Housing			
Persons in Families	138	108	164
Individuals	32	33	
TOTAL	926	711	1027

Sources: <http://hudhdx.info/publicReports.aspx>, DSS Anne Arundel County, personal communication.

Table 1.3

Number of Shelter Users by Type of Shelter per HMIS 2010-11 (Unduplicated Count)	
Shelter Type	# of Users
Emergency Shelter	863
Transitional Housing	164
Permanent Supportive Housing	246
Homeless Prevention/Rapid Re-Housing	586
Services Only	2436

Source: Program Demographics Report HMIS, DSS Anne Arundel County, personal communication.

Homeless Children

The federal McKinney-Vento Homeless Assistance Act defines “homeless” as individuals who lack a “fixed, regular and adequate nighttime residence.” This definition includes children who are sharing housing with other families or who are “living in motels, hotels, trailer parks or camping grounds ... are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement.”¹⁴

Anne Arundel County Public Schools have seen an alarming increase in the number of homeless students. By the end of the 2011-12 school year, 1096 pupils were homeless, a 34% percent increase from the 2010-11 school year.¹⁵ As an interviewee commented:

I was in a meeting and a Pupil Personnel Worker told me that since Christmas, ten students had walked in to tell her they were now homeless; they had lost their homes. She was telling this community group “it’s epidemic... there are not enough resources.”

The number of homeless children in County schools has nearly doubled since 2008, with some variation from year to year. At the beginning of the 2011-2012 school year, 52% of homeless children in AACPS were in grades K – 5.¹⁶

A further housing issue relates to youth over 18, some who have aged out of foster care, mental health, or the juvenile services system. They may have also failed to graduate from school or dropped out. As one participant noted, “We don’t have any affordable housing for 18-22 year olds. They can’t afford \$1,500 a month rent.”

2. Public and Alternative Transportation Networks

Public transportation inadequacies in the County often prevent low-income families and individuals from obtaining or maintaining employment. No single transportation authority exists for the entirety of the County. Instead, small systems operate but are not integrated together, causing inconvenience and confusion for passengers. Nor do any of the existing transportation networks link to dense housing areas or existing high employment areas such as Arundel Mills, Thurgood Marshall BWI Airport, or Fort Meade.

Indeed, other residents are also hindered by the inadequate transportation infrastructure. As one community college student reported, “Transportation is terrible. It is impossible to get to the

community college if you don't have a car.” Speaking on behalf of parents with children who have special medical needs, one participant expressed:

If you need to get a child to Kennedy [Krieger] there is no transportation to get across counties. You would have to get the bus from Annapolis (you have to get down to where Social Services is) then on the light rail then transfer to the subway. How many hours is that? What if your child needs to go once or twice per week?

In 2010, 9,231 households in the County had no vehicle available. Of the households with no workers, 14% had no vehicle available.¹⁷ For low-income workers, efficient and effective public transportation is a lifeline, yet without this existing infrastructure, access to employment is difficult. As one stakeholder commented, “You have to have a car to have a job in this County.”

Public transportation as a means to commute to work has held steady at 3%¹⁸ since the 2010 *Poverty Amidst Plenty* needs assessment. The County's 2010 Transit Development Plan Update identifies a range of transportation needs, including greater frequency of services, more activity centers served, services beyond commuting needs, and high numbers of transit-dependent citizens.¹⁹ Fortunately, initiatives are currently being put in place that begin to address some of these issues, including a plan to link job seekers in North County to some of the large employment hubs.

3. Access to Quality Affordable Child Care

Access to quality child care was the third recurring theme among participants commenting on barriers and obstacles for low-income families in Anne Arundel County. One focus group participant commented:

What about the single parent who works at Walmart and has three children under five? ... We lean on these parents to get jobs and get busy but we can't offer them any subsidized child care.

The estimated cost for infant child care in a family home is \$10,115 per year and the estimated annual cost for a pre-school child in a child care center is \$9,464.²⁰ When the two amounts are added together to calculate the cost for a family with two children, the amount is 20% of the family median income of \$97,974.

A low-income family must pay a higher percentage of their income for quality child care. As a result, instead of using regulated child care, many families tap a family member or friend to help supervise children while the parents work. However, an early childhood expert who participated in an interview for this report noted, “for the kids who are at greatest risk of not coming to school prepared, they need the best quality child care.”

Yet another challenge for Anne Arundel County families is the availability of child care. The Maryland Child Care Resource Network estimates that 60,046 children under 12 have mothers in the work force and may require child care,²¹ however they predict that fewer family and center-based programs will exist in the County over the next three years. The number of family care providers is predicted to decline to 614 by 2015 and centers to 88 versus 672 providers and 96

centers today.²² Table 1.4 shows the current child care slots available through public and private funding.

Table 1.4

Current Providers by Type of Early Childhood Education (ECE) in Anne Arundel County, 2012		
Type of ECE Provider	# Programs	Capacity of Children
Private Funding		
Family Child Care	672	5025
Child Care Centers (8-12 hour)	96	7478
Infant and Toddler Programs	46	822
Employer-Sponsored	4	492
Nursery Schools	42	NA
Public Funding		
Head Start/Early Head Start	7	441
Public Pre Kindergarten	36	NA

Source: *Maryland Child Care Resource Network, Arundel Child Care Connections, Child Care Demographics 2012*; retrieved from <http://arundelccc.org/AnneArundel.pdf>, p 5.

The state's Child Care Subsidy (CSS) program offers vouchers to help limited-income families pay for child care while parents work, attend school, or train for a job. For a family of four, the maximum annual income to qualify for the program is \$35,702.²³ 70% of family child care providers and 76% of child care centers are willing to accept CSS vouchers.²⁴

Unfortunately, there is a waiting list and at some point each year those vouchers simply run out. In fiscal year 2012, the allocation from the Maryland State Department of Education for Anne Arundel County was \$2.3 million, equivalent to 602 full-time children, or just 1% of the estimated number of children who need child care in the County. In fiscal year 2011, 22.1% of calls to the free referral service, LOCATE, were from families who were eligible for CSS.²⁵ Not surprisingly the number one reason parents, when queried, could not find child care in Anne Arundel County, was cost. Early childhood experts interviewed underscored these statistics, stating, "We need more high quality childcare and we need to revamp the whole subsidy system so that it encourages the kids who need the best quality to get the best quality."

Summary

Transportation, affordable housing, and quality child care are recurring issues for low-income families throughout the nation, but in a wealthy County like Anne Arundel, these obstacles are thrown into sharp relief. They are not issues that can be fixed entirely by good programming and grants. It takes political will and dedication from policy makers to address such fundamental barriers to self-sufficiency and their consequent impact on the economic health of the County.

Chapter 2: Self-Sufficiency through Economic Opportunity

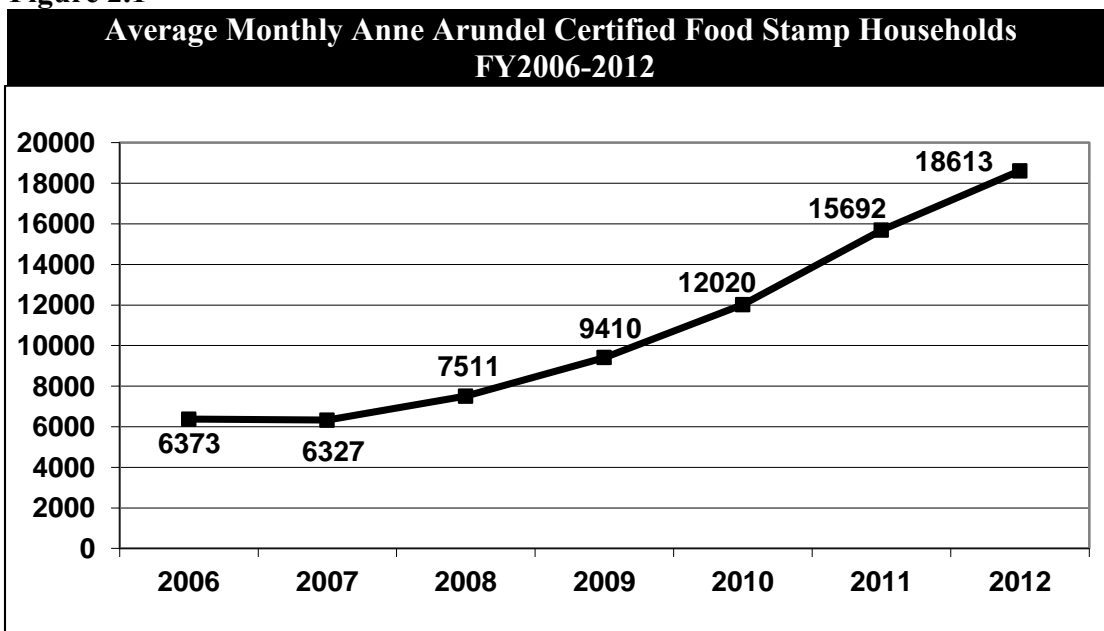
Poverty

Poverty may be defined in different ways. The Federal government classifies a family of four (two adults, two children) with an annual income of below \$23,050 as living in poverty.²⁶ There are a total of 539,198 residents of Anne Arundel County; 6.4% or 34,509 of those residents live in poverty; 10,213 of them are children under 18 years of age.²⁷

Of the 139,262 family households in the County, 33,307 are led by single parents, 24,064 with a female head of household.²⁸ Economic wellbeing for households headed by a single parent can be fragile. There are 2,925 single parent households in which income in the last 12 months was estimated below the federal poverty level; single females headed 2,391 of those households.²⁹ In the City of Annapolis' public housing, over 85% of residents are single female heads of household.³⁰

Food insecurity is defined as a “lack of access, at times, to enough food for an active, healthy life for all household members; limited or uncertain availability of nutritionally adequate food.” Food insecurity rates offer another lens by which to examine the level of poverty and its impact on the Anne Arundel County community. From 2009 to 2010, the food insecurity rate in the County was 8.5% or 44,960 people who did not have adequate food when hungry. The rate climbs to 15.9% for children.³¹ Correspondingly, the number of people enrolled in the primary federal nutrition program created to combat food insecurity for those with the lowest incomes — the Supplemental Nutrition Assistance Program (formerly called food stamps) — has also risen significantly. As illustrated in Figure 2.1, that number in Anne Arundel County, after remaining flat in 2006 and 2007, nearly tripled between 2006 and 2012.

Figure 2.1



Source: Anne Arundel County Department of Social Services (2006-2012).
<http://dhr.maryland.gov/co/reports.php>

The Self-Sufficiency Standard

The Maryland Community Action Partnership annually publishes the Self-Sufficiency Standard that provides an alternate measure of poverty to the Federal Poverty Guidelines. The Self-Sufficiency Standard describes at what income level families of various sizes and compositions can make ends meet without public or private assistance. It is a measure of economic security that is based on the costs of the basic needs for working families: housing, child care, food, health care, transportation, and miscellaneous items, as well as the cost of taxes and the impact of tax credits.

As seen in Table 2.1 below, the Self-Sufficiency Standard shows that earnings well above the official Federal Poverty Level are nevertheless far below what is needed to meet families' basic needs.

Table 2.1

Self-Sufficiency Standard v. Federal Poverty Guidelines Annual Income - 2012			
Family Composition	Self-Sufficiency Standard (measured by County)	Federal Poverty Level (measured nationally)	Difference
<i>1 Adult</i>	\$34,924	\$11,170	\$23,754
<i>1 Adult, Infant, Preschooler</i>	\$74,173	\$19,090	\$55,083
<i>2 Adults, Preschooler, School-Age</i>	\$76,108	\$23,050	\$53,058
<i>2 Adults, Infant, Preschooler</i>	\$81,581	\$23,050	\$58,530

Source: *The Self-Sufficiency Standard for Maryland, 2012*. The Maryland Community Action Partnership and US Dept. of Health and Human Services, 2012 Poverty Guidelines; <http://aspe.hhs.gov/poverty/12poverty.shtml/#guidelines>.

The gap is the largest for a family of four (with an infant and preschooler) at \$58,530 between what qualifies as poverty level by the federal government and what is actually needed to achieve self-sufficiency.³² Using the Self-Sufficiency standard, a single mother with an infant and preschooler must earn \$35.12 per hour to be self-sufficient, far above the state minimum wage of \$7.25 per hour.³³

Anne Arundel County falls third in the state, behind Montgomery and Howard Counties, as having the highest Self-Sufficiency Standard for a family of one adult and one child in preschool.³⁴

Factors that Support Self-Sufficiency:

Clearly, self-sufficiency among low-income families is achieved by increasing family income and reducing costs. Programs such as the Child Care Subsidy, Supplemental Nutrition Assistance Program, and the earned income tax credit are the first steps toward lifting families out of poverty. More must be done, however, to increase self-sufficiency outcomes. Removing

barriers to affordable housing and public transportation, along with education, career guidance, and job training are essential. In fact, many participants in focus groups made such suggestions, including the comment that “There needs to be more school-based services related to food, housing and employment to help families, while removing transportation barriers.”

Adult Educational Achievement:

As Table 2.2 shows, Anne Arundel County has a highly educated workforce; 89.3% of the population 25 years and older is estimated to have a high school diploma and 65% of that population has at least some college education. However, there are nearly 40,000 adult residents who did not graduate from high school.³⁵ According to the Bureau of Labor Statistics, the national unemployment rate for high school graduates in June 2012 was 8.4%, but for dropouts the rate jumps to 12.6%.³⁶ As Table 2.3 indicates, the general unemployment rate for the County consistently remains lower than both the Maryland and national unemployment rates. As of May 2012, the County unemployment rate was 6.1%.³⁷

Focus group participants noted that an additional consequence of the recession is the willingness of college graduates to accept low wage, entry level jobs that were previously filled by those without formal qualifications beyond high school.

Table 2.2

Educational Attainment for Persons over 25 Years of Age Anne Arundel County, American Community Survey, 2010		
	Estimated Number	Estimated Percent
Less than 9th grade	11,123	3.0%
9th to 12th, no diploma	28,012	7.7%
High School Graduate (includes GED)	89,429	24.5%
Some College, no degree	80,879	22.2%
Associate’s Degree	25,679	7.0%
Bachelor’s Degree	78,612	21.6%
Graduate or Professional Degree	50,979	14.0%
TOTAL	364,713	100%

Source: U.S. Census Bureau, *American Community Survey*, 2010, Anne Arundel County, Detailed Table DP02.

Table 2.3

Average Employment Status in Anne Arundel County 2010			
	Average First Quarter 2012	Average First Quarter 2011	Percent Change
Civilian Labor Force	296,603	294,172	+.83%
Employed	278,232	274,530	+1.35%
Unemployed	18,371	19,642	-6.47
Rate of Unemployment	6.2%	6.7%	-7.46
MD Rate of Unemployment	6.9%	7.4%	-6.76%
US Rate of Unemployment	8.3%	9.0%	-7.78%

Source: Anne Arundel Economic Development Corporation,
<http://www.aedc.org/images/stories/pdf/Economicindicators1stQTR2012.pdf>
 Retrieved July 26, 2012.

Employment

Anne Arundel County's 14,560 businesses employ 230,096 workers. An estimated 300 of these businesses have 100 or more employees. Key private sector employers include: ARINC, Booz Allen & Hamilton, CSC, General Dynamics, and Northrop Grumman. Key government employers include the Defense Information Systems Agency, National Security Agency, Fort George G. Meade, and the U.S. Naval Academy.³⁸ The County's major employers are primarily located within Annapolis, Glen Burnie, and Hanover.

As the County's largest employer, Fort Meade has additional transit needs with the recent influx of 5,700 employees and their family members due to BRAC activities. Anne Arundel County Public Schools and the State of Maryland, the second and fourth largest employers in the County respectively, are based in Annapolis. Baltimore Washington International airport is the County's third largest employer. Northrop Grumman, the fifth largest employer, is located just north of the airport in Linthicum.³⁹

In focus groups and interviews with workforce development professionals, all agreed that while STEM (Science, Technology, Engineering and Math) programs in the public schools are increasing the opportunities for some students, more focus on soft skills and training for jobs that do not require a college degree is needed in order to improve the chances of employment for young people. Soft skills include communication, teamwork, punctuality, and organization. As one participant commented, "In schools, there's a lot of emphasis on advancement through college, but not much on employability skills."

Additionally, while academic counseling was rated highly at AACPS and Anne Arundel Community College among focus group participants, career planning was found to be lacking in both places. Some students take community college courses with no clear idea of what their career goal is, as noted in a focus group among County community college students. As one student explained, "I'm just taking random classes."

Participants commented on the prevalence of "poor mental models" for success in low-income communities, especially related to employment. Depression and hopelessness are prevalent,

especially among the ranks of the long-term unemployed. In public housing communities, many families are trapped, mentally and physically, in an intergenerational cycle of poverty. As one subsidized housing resident noted, “Some residents have never been outside out of Bywater, the Woods and 20 (public housing). Most live from day to day, in survival mode.” Another participant noted, “Our most poor kids have such a short vision. No one in their family has a long term plan.”

Family Income

The 2010 census estimates report that the median family income in Anne Arundel County is \$97,974, although there are still nearly 27,000 families earning less than \$50,000 (see Table 2.4). A 2010 community development survey of three subsidized and public housing complexes in the city fixed the median income within those complexes at \$15,000, leaving residents with an income gap of over \$43,000 and little hope for self-sufficiency.

Table 2.4

Estimated Annual Family Income, Anne Arundel County American Community Survey, 2010		
	Estimated Number	Estimated Percent
Less than \$10,000	3,271	2.4%
\$10,000- \$14,999	1,069	0.8%
\$15,000 - \$24,999	5,458	4.0%
\$25,000 to \$34,999	6,720	4.9%
\$35,000 to \$49,999	10,354	7.6%
\$50,000 to \$74,999	22,725	16.6%
\$75,000 to \$99,999	20,591	15.1%
\$100,000 to \$149,999	33,770	24.7%
\$150,000 to \$199,999	16,230	11.9%
\$200,000 or more	16,393	12.0%
TOTAL	136,581	100%

Source: U.S. Census Bureau, *American Community Survey*, 2010, Anne Arundel County, Detailed Table DP03.

Focus group participants perceive that the face of poverty is changing in the County; many former middle-income families are becoming the “new” poor. As one participant noted:

Families are beginning to face homelessness because of foreclosure and because Dad lost his job. Some families cannot sell their house. There’s a new face of need for services – it is the middle class.

Indeed, in 2007, the percentage of families with a family income of less than \$50,000 was 18.7%. That number grew to 19.7% in 2010. Middle-income families (\$50,000 - \$149,999) comprised 60.8% of the total families of 130,466 in 2007. The total number of middle-income families shrunk to 56.4% in 2010. High-income families (\$150,000 and up) grew from 20.5% of the total in 2007 to 23.9% in 2010.⁴⁰

What We Are Doing Well

Despite the impact of the recession, participants reported several areas of strength that help ramp families to self-sufficiency. The Systems of Care (a collaboration between the Anne Arundel County Partnership for Children, Youth and Families and AACPS) was noted as an excellent resource for families struggling with basic needs. The Systems of Care was given high marks from participants for offering a single-point-of-entry, along with linking families and young people to governmental and community assistance. As one agency representative noted, “Systems of Care gets all my calls – that’s where I send my families. I used to have to fumble around to call DSS and call Community Action Agency.”

Participants also noted the number of partnerships and collaborations in operation in the County that address vulnerable families in a more holistic way, ones in which the families themselves are included as partners. The Promise Neighborhood Consortium, Pathways to Opportunity at the City of Annapolis Housing Authority, and the Community Resource Initiative/Care Team (a multi-disciplinary team that meets twice a month to help families) were all singled out for special mention.

Anne Arundel County Public Schools were rated as “excellent,” “superb,” and “outstanding” among participants, who noted particularly the STEM initiative and the AVID program as very important. Other innovative initiatives targeted for special mention include the Green Jobs program, Job Corps, youth summer programs and the STEP UP TO SUCCESS program organized by the Anne Arundel County Workforce Development Corporation to target dropouts. The latter agency is scheduled to open a new youth employment center in Arnold later this year.

Needs and Gaps in Services

Job skills training is most effective when coupled with soft skills training and financial literacy. Interviewees focused on these needs, as well as bringing apprenticeship programs to the schools, noting that not all students “need or want to go to college.” Additionally, a large number of participants explained that, before effectively serving low-income families, their needs and challenges must be properly understood, rather than guessed or assumed. As best described by one participant:

We need to identify needs properly – assess what we are trying to impact. We need a diagnostic that will assist us to help voiceless people to have a voice and identify what’s going on for them.

Others expressed the need to “meet people where they are” physically, socially, and emotionally. Thus, programs should not be designed with the view that “one size will fit all,” but rather address the distinct needs of each individual. Once obstacles are determined, a network to support success and measure progress should be created together with the client.

Chapter 3: Youth Development & Education

Youth are the promise for the future of Anne Arundel County. Their care and development from birth through early adulthood is key to the economic and social vitality of the County. Many young people are leaving high school well prepared to lead happy and productive lives.

However, as previous chapters indicated, and as focus group participants emphasized, there are points at all stages of child development where some children and youth are vulnerable to issues related to poverty and stress, particularly in single parent households.

This report has already noted the issues with quality child care; this chapter will examine other stages of the development process. Of particular note is the group known as “transition-aged youth,” between ages 16 and 24, who are transitioning from school to the next stage of adulthood.

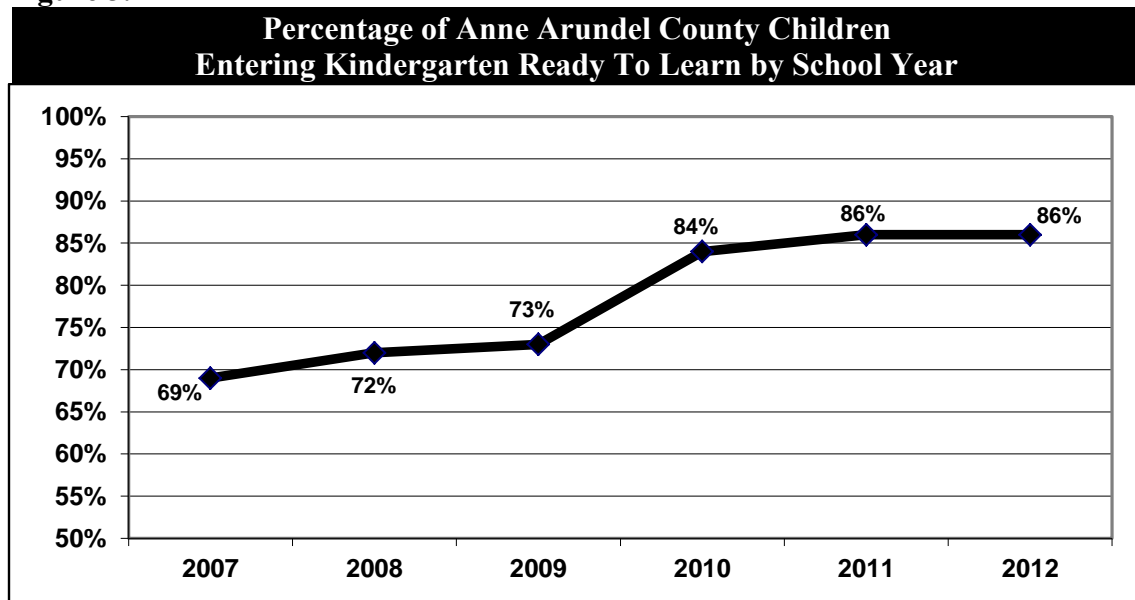
Children Entering School Ready to Learn

AACPS uses the Maryland Model for School Readiness assessment as an early measure of child development. Each kindergarten teacher observes and rates their students’ behavior for readiness in Language and Literacy, Mathematical Thinking, and Scientific Thinking, using portfolio assessment strategies including samples of student work and review of measures of student learning. The results are collected annually from teachers and reported by the County to the Maryland State Department of Education (MSDE).

The trend in Anne Arundel County is very positive, with steady growth in the percentage of children entering school ready to learn over the last five years, reaching a peak of 86% in 2011 and remaining there for 2012, as Figure 3.1 shows. In fact, the increases since the 2001-2002 school year include 34 points for Language and Literacy, 37 points for Mathematical Thinking, and 57 points for Scientific Thinking.

More importantly, when looking at County data for kindergartners from low-income households, the growth in readiness nearly matches the success Countywide. 79% of children from low-income households demonstrated school readiness, more than doubling that percentage from the 2001-2002 school year.⁴¹ Stakeholder participants credited programs that help “break down agency silos” for some of these gains. Special mention was given to the County’s Judy Center, a “one stop shop” for early childhood, AACPS’s Infants and Toddlers program that serves families of children with special needs during the first three years of the child’s developmental journey, and the Behavioral/ Emotional Support and Training (BEST) program offered at the TEACH Institute of Anne Arundel Community College.

Figure 3.1



Source: Maryland Model for School Readiness 2011-2012.

Children Successful in School

Once children enter school, there are a number of key indicators that map their academic progress. Academic achievement is tied to the Maryland School Assessment (MSA) that sets academic standards for student performance. Reading, math, and science scores are presented in Table 3.1 for grades 3 through 8, comparing Anne Arundel County students with students statewide. Anne Arundel County students perform better in all grades and subjects than students statewide, with County students scoring from three to nine percentage points higher than Maryland students overall.

Table 3.1

Reading, Math and Science MSA Scores (Percent of TOTAL Students by Grade) Anne Arundel County and Maryland Average, SY 2011-12						
Grade Level	Average Proficient and Advanced in Reading		Average Proficient and Advanced in Math		Average Proficient and Advanced in Science (2011)	
	AAC	MD	AAC	MD	AAC	MD
3	90.4	85	93.1	87.8		
4	93.1	89.8	>95.0	89.9		
5	93.9	89.9	91.4	85.3	75.8	66.8
6	87.6	84.5	86.1	83.0		
7	85	81.2	82.4	76.3		
8	84.5	80.8	74.4	69.3	78.7	69.5

Source: 2012 Maryland Report Card, Anne Arundel County

<http://www.mdreportcard.org/Assessments.aspx?K=02AAAA>; Retrieved July 27, 2012.

Other indicators related to school performance point to areas requiring improvement. Science assessment scores consistently lag behind reading and math. School proficiency drops for all students as they age. Additionally, when student performance is analyzed using Free and Reduced Meals Students (FARMS) data as an indicator of economic need, FARMS students score lower than all students across the board. Table 3.2 below demonstrates the greatest disparity – 21 points between all 8th graders proficient in math versus 8th grade FARMS students. While students in the FARMS program in Anne Arundel County do better than like students statewide, the gap in their performance is troubling. Poor academic performance has long-lasting economic consequences, reducing earning capability and self-sufficiency.

Table 3.2

Reading, Math and Science MSA Scores (Percent of TOTAL 8th Grade Students) All Students vs. FARMS Anne Arundel County and Maryland Average, SY 2011-12						
Grade Level	Average Proficient and Advanced in Reading		Average Proficient and Advanced in Math		Average Proficient and Advanced in Science	
8 th	AAC	MD	AAC	MD	AAC	MD
All Students	84.5	80.8	74.4	69.3	78.7	69.5
FARMS	70.5	68.0	53.3	51.0	60.7	50.0

Source: <http://mdreportcard.org/Entity.aspx?K=02AAAA>; retrieved July 27, 2012.

Truancy is an additional indicator of student success. Living in poverty increases chances that a student will be truant from school, causing adverse impacts on student achievement. Truancy is defined as missing more than 20 days in one school year. Students in poverty miss instructional time at greater rates than students overall (see Table 3.3). The FARMS truancy rate escalates, nearly doubling from elementary to middle, and then growing to more than one in four students in high school.

Table 3.3

Truancy Rates in Anne Arundel County Public Schools 2011 by Grade and by FARMS		
Grades	All Students	FARMS Students Only
Elementary	< 5.0	8.7
Middle	5.4	16.8
High	10.2	27.9

Source: <http://msp.msde.state.md.us/AttendanceRate.aspx?>; retrieved July 27, 2012.

The issues related to high school dropouts are well known – high school dropouts earn less and contribute fewer tax dollars into the economy, they increase criminal justice costs, and they are more likely to rely on some form of public assistance. Dropout rates are higher for FARMS students. For the Class of 2011, non-FARMS students had a dropout rate of 9.74% while the FARMS students rate was more than double at 20.12%.⁴² The dropout rate for all students in grades 9-12 in 2011 was 3.24% and 5.14% for FARMS students.⁴³

Students Graduating Successfully

Graduation rates are distinct but similar to dropout rates. The graduation rate is defined as the percentage of students who have completed high school within four years of their first entry into ninth grade. The Maryland State Department of Education adopted a new method of determining graduation rates for the 2010-11 school year that was adopted by AACPS. This method, the cohort method, ensures that all students who entered 9th grade together are accounted for in the graduation rate at the end of four years and at the end of five years.

As seen in Table 3.4 below, FARMS students have a lower graduation rate than non-FARMS students at both the County and state level. It is interesting to note that FARMS students statewide have a higher graduation rate than Anne Arundel County FARMS students.

Table 3.4

Graduation Rate: 4-Year Adjusted Cohort Sorted by Class and FARMS Status				
	Anne Arundel Co. Class of 2011	Anne Arundel Co. Class of 2010	Maryland Class of 2011	Maryland Class of 2010
FARMS Students	70.48	69.46	73.70	74.11
Non- FARMS Students	87.03	85.31	86.49	84.96

Source: <http://mdreportcard.org/CohortGradRate.aspx?>; retrieved July 28, 2012.

The issue of students not graduating on time or at all is a complex one. AACPS has worked hard to provide alternate graduation options for students, involve families in student learning, and monitor students to track their academic progress – all important ingredients in preventing dropouts. Still, the graduation rate, particularly among FARMS students, is of concern. It is in the community's best interest to contribute to a lasting solution to this issue through advocating for an increase in the age of compulsory attendance at school from 16 to 18. Additionally, implementing career and workforce readiness programs in school has been shown to increase graduation rates.

Fortunately, student behavior in school has improved. Data from the AACPS Office of Safe and Orderly Schools showed a decline by more than 53% over six years in disciplinary referrals at the County level (from 932 in 2004-05 to 362 in 2010-11).⁴⁴ Physical attacks by students, fighting, threats, and insubordination are the top four offenses. Suspensions totaled 254, a decline of 10% from the previous year. African American students accounted for 52% of all suspensions; white students accounted for 36%. Hispanics accounted for 6%, an increase of 55% from the previous year. Expulsions decreased from 20 to 14 in 2011; most were for attacks or weapons, usually possession of a knife (12 of 14). It is clear that AAPCS is committed to safety, civil behavior, and retention of students in schools to promote learning.

Youth Aged 16-24 – Transitioning to Self-Sufficiency

The cohort of youth aged 16-24 is experiencing many transitions, socially, developmentally and economically. During this time, young people reach the age where they decide whether to stay or exit high school; they become drivers and voters; some become mothers and fathers; others join the military; many graduate from high school and advance their education. Some work and pay taxes. They are the age group most often referred to as “forgotten” or “lost,” a reference to the fact that this group is not tracked by any system as a cohort. That unidentified status increases for high school dropouts, the young unemployed, and those young people who age out of the child welfare, foster care, or juvenile services system.

As one participant noted:

They are 17-22 and they have left education, they are not associated with an agency. We don’t have a place for that population to turn to. How do we develop a portal for that population so they know what services are available to them? For those with special education needs and the mentally ill whose families have turned them out or if the families don’t know where to turn - we need a mechanism for that age group.

Some of the most vulnerable in this age group have no systems of support from family or community. Many are at risk for health issues given their greater access to alcohol and illegal substances, to sexual activity, and to trauma (car and other accidents due to riskier behaviors). They may leave families or care settings, they may become homeless, and they may become single parents with small children.

In 2010, 25.8 births were to young women ages 15-19 per 1,000 women in that age group.⁴⁵ As one participant noted, “they are our next parents” yet “there are no supports for single parents who are struggling and trying to go to community college.” In almost every focus group, participants commented that the 16-24 age group needs special attention in the school setting, especially for those who do not want to go to college.

Many low-income students are not encouraged, and thus do not make long-term goals involving career and family. Several participants noted that “planning” and “soft-skills” training should begin in middle school, before disengaged students drop out. Another participant noted that there are few opportunities for low-income children to leave their neighborhoods and experience other settings because “kids in public housing never cross Forest Drive.” On the same theme, a subsidized housing resident told the story of a young, Annapolis low-income resident who, having been told about the Anne Arundel Community College in Arnold, asked the question, “Where’s Arnold?”

What We Are Doing Well

Anne Arundel County Public Schools and Anne Arundel Community College are dedicated to teaching all students and were consistently rated “excellent” among focus group participants. Young children are receiving the preparation to enter school ready to learn and academic measures exceed state standards. The top tier of children and youth are thriving, as graduation rates and college pursuits attest. There are opportunities for gifted children throughout the

system. The County's first Performing and Visual Arts (PVA) Magnet school opened its doors in the fall of 2009 and is discussed further in Chapter 6.

AACPS's STEM Magnet Program offers an educational choice for academically able and motivated students interested in rigorous and relevant studies in science, technology, engineering and mathematics. Two STEM Magnet High Schools serve students in grades 9-12 providing relevant, real-world, hands-on experience with cutting-edge technology. Innovative learning abounds. In the 2011-12 school year, three students at South River High School developed an app for Android users that provides a "shake to shuffle" capability, allowing users to change songs while listening to music. The app has gained global recognition and received hundreds of downloads.

The nonprofit community is highly supportive of the school system. As one participant noted, "there is much more emphasis on coordinating nonprofit programming with educational goals and improvements." As an example of this mutually beneficial relationship, the Eastport Girls Club works closely with teachers to ensure the girls in their programs complete and submit science projects. Restoration Community Development Corporation offers several afterschool programs in partnership with the public schools to help every child achieve educational success.

The Anne Arundel County Workforce Development Corporation has a number of targeted programs to help youth move up academically and occupationally, including summer youth programs, job fairs, and business advisory boards. Career exploration is provided at Step Up to Success, as well as the Foster Youth Program, funded by the Community Foundation of Anne Arundel County and operated through the Anne Arundel County Department of Social Services. The WAGES (Work Maturity and Growing Employability Skills) program targets youth at risk of dropping out at North County High School. There is a Soft Skills Coalition that is trying to widen the reach of this program to teach more youth about the "soft skills" of communication, attendance, and positive attitude that are required by all employers.⁴⁶

Needs and Gaps in Services

As noted earlier, transition-aged youth would benefit from strong guidance in career planning and financial literacy, particularly in a tight economy. As one participant noted:

When kids get out of high school they have to know something to feed themselves. It's a harder road now to get to the first step. We need a financial literacy curriculum in the high schools.

The lack of tracking and data collection for the "transitioning" age group hinders the ability of nonprofit and government agencies to provide comprehensive services. A universal data collection system that tracks by individual, rather than program-by-program, would help uncover needs and integrate services.

Afterschool programs were noted as particularly important for vulnerable youth. The time period from 3:00 p.m. to 8:00 p.m. was frequently referred to as the "most dangerous time" for children in low-income communities. As one stakeholder aptly explained:

When you live in a middle class neighborhood and kids leave school; between 3:00 p.m. and 8:00 p.m. they're engaged in activities that develop that other part – keep them busy, keep them challenged. Low-income families don't have access to that. We need to concentrate on that 3:00 p.m. to 8 p.m. time; structure that time for kids in their own communities. The Departments of Juvenile Services and Social Services and the school system deal with the bad piece of those six hours and we're unraveling that damage. We should reallocate resources to those hours and those communities.

Finally, interviewees continually noted the need for more mentors for vulnerable young people as a means of preventing involvement in alcohol, drugs, crime, and gangs. As one participant noted “they don't care what you know until they know that you care.”

Summary

Young people in Anne Arundel County have access to an outstanding public school system and an array of afterschool programs. Those whose families have sufficient resources and safe homes, and even some whose families struggle, continue to make the County one of the Maryland stars, consistently exceeding statewide averages for academic achievement. The gap in achievement is still great, however, between those who are thriving and those needing supports to thrive, beginning with early school readiness and continuing across youth development. For youth aged 16-24, the need is great and resources are lean. The academic issues related to poverty and want are not the responsibility of the school system alone. Caring communities need to work together for the wellbeing, self-sufficiency, and happiness of the next generation of citizens and parents.

Chapter 4: Health

Anne Arundel County has an active County health department (Anne Arundel County Department of Health) committed to a vision where all residents thrive in healthy environments. More than one out of every three County residents is directly served by the Department of Health each year. More than 184,000 residents receive direct personal health or screening services through their programs.⁴⁷

The Department benchmarks the health of communities using Healthy People goals established by the US Department of Health and Human Services. The 2020 goals present the current yardstick for the Anne Arundel County Department of Health, which works diligently and monitors progress toward these goals. The County has already met some of the 2020 goals and continues to work toward achieving others. As Health Officer for the County, Dr. Angela M. Wakhweya is committed to a collaborative approach, stating “Critical to achieving our vision and mission are strong, sustainable partnerships with public sector agencies, community-based organizations, health care providers and payers, academic institutions and private sector businesses.”⁴⁸

General Health Indicators

The first indicator of Anne Arundel County’s health is life expectancy; in 2009 it reached the highest level to date at 79.1 years followed by a slight drop to 79.0 years in 2010.⁴⁹ The leading causes of death in 2010 were heart disease (906 deaths) and cancer (891 deaths); together they account for almost half of all deaths in the County.⁵⁰

Table 4.1 shows that the County has already met 2020 goals for reduction in rates of diabetes, unintentional injuries, homicide and suicide. Notably, the County has lowered the rate of obesity in adults enough to meet the 2020 goal.

Table 4.1

Healthy 2020 Goals for Anne Arundel County Rates per 100,000 Population		
Indicator	Met Goal 2020	National Goal 2020
Mortality		
Diabetes	Yes	65.8
Unintentional Injuries	Yes	36.0
Homicide	Yes	5.5
Suicide	Yes	10.2
Stroke	No	33.8
Female Breast Cancer	No	20.6
All Cancers	No	160.6
Lung Cancer	No	45.5
Coronary Heart Disease	No	100.8
Risk Factors		

Healthy 2020 Goals for Anne Arundel County Rates per 100,000 Population		
Indicator	Met Goal 2020	National Goal 2020
Cigarette Smoking in Adults	No	12.0
Healthy Weight in Adults	No	33.9%
Obesity in Adults	Yes	30.6%

Source: Anne Arundel County Health Report Card, <http://www.aahealth.org/pdf/aahealth-report-card-2012.pdf>, Retrieved July 28, 2012, pp. 5, 6 and 18.

Behavioral risk factors contribute to these leading causes of death; the two targeted for Anne Arundel County adults to reach Healthy 2020 goals are smoking and excess weight. The rate of adults who smoke in the County was 15.3% in 2010, an increase from 14% in 2009. In Anne Arundel County, smoking rates among teens peaked in 2000, and now about 19 percent of teens are current smokers. Forty-four percent of all County children live in a household where at least one person smokes.⁵¹

Adult obesity, defined as a Body Mass Index of equal to or greater than 30, shows that 29.6% of adults in the County are obese.⁵² While that number is lower than the National Healthy People 2020 goal of 30.6%, it far exceeds the Healthy People 2010 goal of 15%. One of the Healthy 2020 goals is to increase the number of persons considered to be at healthy weight to 33.9% of the population; in 2010, 32.1% were considered at a healthy weight.⁵³

The most recent study of obesity in children in the County was conducted in 2006. Those data show that 15.6% of children ages 2 to 19 were overweight, with 16.9% additionally at risk of being overweight.⁵⁴ Taken together, one in three children in Anne Arundel County was either overweight or at risk for being overweight, which is defined as "having excess body weight for a particular height from fat, muscle, bone, water, or a combination of these factors."⁵⁵ While six years have elapsed since this report, the national data suggest that the trend is not reversing.⁵⁶

Participants in focus groups and interviews noted the rising phenomenon of obesity and cited the lack of "healthy food" and depression as likely causes. As one participant noted, for low-income families "a lot of inexpensive food is on the dollar menus with lots of fried food and so cholesterol is high." Hypertension and diabetes in later life is often the result of children's unhealthy eating habits and lifestyles.

The lack of open green space in low-income communities, coupled with transportation issues, increases the likelihood of a sedentary lifestyle. Walking, particularly to school among young people, is infrequent, perhaps due to a lack of sidewalks in many jurisdictions. AACPS transports 73% of students to school in buses.⁵⁷

Overall, the County ranks tenth of the 24 Maryland counties for health vitality per the County Health Rankings (2012) published by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation. These rankings are based on measures such as the rate of people dying before age 75, high school graduation rates, access to healthier foods, air pollution levels, income, and rates of smoking, obesity and teen births.⁵⁸

Health care reform has been ongoing for a number of years in Maryland and has increased eligibility for vulnerable families. Medical Assistance has expanded for single persons, seniors, and families. MCHIP provides health coverage for children statewide, including Anne Arundel County. However, access to health and mental health services is still an issue for many County residents. The recession has decreased the numbers of people who have health insurance from a high in 2008 of 91.8% of the population to 89.7% in 2010,⁵⁹ likely due to unemployment or contractual work that does not offer benefits. Many working poor families do not realize they are eligible for medical care and outreach to these families can be difficult. A focus group participant commented:

People out there don't know they're eligible [for Medicaid and other health entitlement programs]. We have kids who need glasses, hearing aids. People now don't have access to computer or phone. Or, if you're working at Walmart you can't just pick up the phone and call. You may have only 100 minutes on a pay as you go cell phone.

Specific Health Indicators

There are a number of key indicators that point to the health status of a community, including babies born healthy, infant mortality, and mental health.

Babies Born Healthy

Anne Arundel County has lowered its teen birth rate from 2.1% in 2007 to 1.9% in 2010. In 2007, 2.5% of births in the County were to mothers who received late (third trimester) or no prenatal care. In 2010, that number climbed to 4.1%.⁶⁰ Low birth weight (less than 2,500 grams at birth) is a key marker for child development; it can contribute to health complications and compromises an infant's capacity to thrive. This rate has been relatively stable over four years at 8.2%, spiking once in 2008 to 9.2%.

Table 4.2

Percentage of Births to Anne Arundel County Mothers 2007-2010								
	2007		2008		2009		2010	
	MD	AAC	MD	AAC	MD	AAC	MD	AAC
Less than age 18	2.9 %	2.1%	2.8%	2.2%	2.6%	1.8%	2.3%	1.9%
Less than 12 years of education	14.9%	NA	15.0%	NA	14.5%	NA	15%	11.7%
Unmarried	40.9%	31.8%	42.3%	33.1%	42.8%	33.2%	41.7%	32.3%
Late or no Prenatal Care	4.7%	2.5%	4.2%	2.1%	4.7%	2.0%	6.3%	4.1%
Low Birth Weight of Baby	9.1%	8.2%	9.3%	9.2%	9.2%	8.2%	8.8%	8.2%

Source: Maryland Vital Statistics Reports, 2007-2010; <http://vsa.maryland.gov/html/reports.cfm>.

Infant Mortality

The mortality rate for infants has decreased consistently over the last four years in Anne Arundel County. These deaths are recorded in the first year of life, not just at birth. Maryland's rate, while also in decline, is higher than Anne Arundel County. There is a great disparity between white and black infants in terms of mortality rates. In 2010, there were 10.9 deaths for black infants per 1000 live births, compared to 3.3 for white infants in Anne Arundel County, raising questions about equality of access to quality prenatal care and education about infant care and healthy behaviors.

Table 4.3

Infants Mortality Rate (number of deaths per 1000 live births)		
Year	Maryland	Anne Arundel County
2007	8.0	6.5
2008	8.0	8.7
2009	7.2	4.9
2010	6.7	4.7

Source: *Steps Toward Wellness: Report Card of Community Health Indicators*, Anne Arundel County Department of Health, May 2012, p.12.

Mental Health

Mental health issues were cited as a major concern throughout the focus groups with many participants believing mental health to be the number one health issue in Anne Arundel County. Most focus group members who work in service agencies reported that, in 2012, they are seeing a higher rate of depression among those they serve. They attribute depression to the downturn in the economy and the reduction in community services available to those in need. Several also noted the impact of culture shock among new immigrants. As one noted, "They used to walk to market. Here they are indoors; they are depressed - there are cultural issues."

As noted in the Introduction, the continuing lagging economy has forced more families into crisis and created a subsequent impact on wellbeing as noted by increased stress, anxiety, and depression. As one physician serving the low-income community noted:

There's a lot of depression; it's almost every other patient. They can't sleep so they can't get up to get kids to school. ... Weight gain comes with depression along with low self-image and low self-esteem. The stressors are the mounting bills to pay.

One quantitative measure of mental health uses the average numbers of "poor mental health days," estimated from responses on the Centers for Disease Control Behavioral Risk Factor Surveillance System (BRFSS), which is collected via telephone to persons over 18 years of age. These data are collected over seven years to stabilize estimates and are age-adjusted based on the US population. The question is framed as: "Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?" In Anne Arundel County, the average number of poor mental

health days is reported as 3.4, which exceeds the Maryland average of 3.3 and the national benchmark of 2.3.⁶¹

The Anne Arundel County Mental Health Agency reported that the County saw an 18% increase in the number of consumers of services in 2010, for a total of 7,186 clients. The largest increase of 25% was seen in the adult population, ages 22-64. A 27% increase took place among consumers receiving in-patient services. The average cost per consumer is in line with state averages at approximately \$5,000. The County has fewer psychiatric beds than other counties of comparable size; there are 14 beds, which is 20% of the capacity that other counties in Maryland with populations over 100,000 have available.⁶² Many participants linked parental mental health to their children's mental health, most agreeing that when we "help parents with their mental health then the kids get better."

Participants felt that mental health services for children are sorely lacking. The system by which the public school system offers school-based mental health was given high marks, however there are waiting lists for services. Other issues include the lack of mental health providers, especially psychiatrists, willing to accept Medicaid and MCHIP, as well as the low numbers of bilingual therapists. The lack of services was reported as most crucial among the early childhood population. As one participant noted:

There's a huge lack of mental health resources for early childhood. We need to put most of the work there – by the time they reach third grade if we have not provided the supports, we are headed for disaster by middle school.

It is clear that the increased need for services during a time when current resources are stretched has caused gaps to appear. For so many respondents to express mental health as the number one health need attests to the severity and the lack of adequate resources.

Risky Behaviors Among Young People

Young people are particularly vulnerable to risky behaviors that may negatively affect their health. In Anne Arundel County, the number of teens infected with sexually transmitted infections (STIs) is increasing. The most common STIs affecting teens are chlamydia, human papillomavirus (HPV), and gonorrhea. For Anne Arundel County youth between the ages of 10 and 19, chlamydia cases have risen from 453 cases in 2009 to 589 cases in 2011. However, gonorrhea cases for the same age group fell from 76 cases in 2009 to 54 cases in 2011.⁶³

Young people who begin drinking alcohol in early adolescence are four times more likely to develop alcohol dependence than those who abstain until adulthood. One method of measuring alcohol and drug use among teens is through the Maryland Youth Risk Behavior Survey that was administered to 2,920 students in 30 public high schools in the spring of 2011. According to that data, between 2005 and 2011, the percentage of youth who have ever had a drink of alcohol dropped from 73.1% to 63.5%. 34.8% of Maryland youth report being current drinkers and 18.4% are binge drinkers.⁶⁴

As evidenced in Tables 4.4 and 4.5 below, the trend over eight years shows Anne Arundel County exceeding Maryland and national average rates by persons aged 12 to 20 for both use of

alcohol and binge drinking during a one-month period. Binge drinking is defined as drinking five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least one day in the past 30 days. Participant comments support that data with many describing alcohol use and abuse among teens as a “community norm” and, alarmingly, often supported by parents.

Table 4.4

Annual Average Percent of Population Aged 12 to 20 Using Alcohol in Past 30 Days Based on NSDUH Surveys			
	2002-2004	2004-2006	2006-2008
Anne Arundel County	29.84	29.82	29.96
Maryland	28.19	26.50	27.28
US	28.72	28.27	27.53

Source: <http://adaa.dhmh.maryland.gov/SitePages/Printed%20Publications.aspx> and downloading Maryland Compendium of Cross-County Indicators of Underage Drinking - Maryland Alcohol and Drug Abuse Administration, Department of Health and Mental Hygiene, March 2011.

Table 4.5

Annual Average Percent of Population Aged 12 to 20 Bingeing on Alcohol in Past 30 Days Based on NSDUH Surveys			
	2002-2004	2004-2006	2006-2008
Anne Arundel County	19.29	19.16	20.49
Maryland	17.12	15.82	16.92
US	19.25	18.95	18.31

Source: <http://adaa.dhmh.maryland.gov/SitePages/Printed%20Publications.aspx> and downloading Maryland Compendium of Cross-County Indicators of Underage Drinking - Maryland Alcohol and Drug Abuse Administration, Department of Health and Mental Hygiene, March 2011.

The use of illegal drugs is linked to academic problems, violence, and injury. There was a slight decrease in the percentage of Maryland youth who have ever tried marijuana from 2005 to 2011 (38.2% to 37%). However, there was an increase in the percentage of current marijuana users during the same time period from 18.5% in 2005 to 23.2% in 2011. 2.7% of Maryland young people report being cocaine users. 4.1% have used a needle to inject any illegal drug into their body. 15.2% have used prescription drugs without a doctor’s prescription.⁶⁵

Participants in the needs assessment noted rising substance abuse issues among all age groups, particularly pointing to the accessibility of prescription drugs among youths. One participant commented that substance abuse has been a “blanket of destruction” in low-income communities. Another noted:

Many people are abusing prescription drugs and they refuse to get care for their substance abuse. Oxycontin and Percocet are the big ones. Some doctors are getting better at seeing it; other doctors are just writing out the scripts.

What We Are Doing Well

In December 2011, the Healthy Anne Arundel Coalition was formed with the mission of working together as a community to promote the health and wellness of Anne Arundel County residents.

Members of the coalition include public sector providers, health care providers and payers, community-based partners, the business community, and academic partners. The Coalition is resolute in their commitment to breaking down agency silos in order to address local health issues by developing and implementing action-oriented strategies to improve public health. The Coalition has identified the priority areas of obesity prevention and the management of mental health and substance abuse as co-occurring disorders.

Additionally, the County's private health system has a new focus on low-income families and controlling emergency room rates. These rates, at approximately \$1,500 per visit, increase medical costs for all residents. Two community health centers are positioned, geographically, to serve those for whom access to primary care is problematic due to barriers related to income and transportation. Focus group participants rate both as "excellent." Pioneer City Family Health Center in Severn is a branch of People's Community Health Centers, which is a Federally Qualified Health Center (FQHC) and the Annapolis Community Health Center is sponsored by Anne Arundel Medical Center. Both provide comprehensive primary and preventive care, so that individuals and families do not overuse emergency rooms at the hospitals in the County (Baltimore-Washington and Anne Arundel Medical Center) and are examples of successful public/private partnerships.

The REACH (REsidents Access to a Coalition of Health) Program was chosen as a nationwide innovative "model practice" by the National Association of County and City Health Officials and made an Innovations in Government awardee by the American Society of Public Administration - Maryland. Since 1999, it has served more than 8,400 Anne Arundel County residents without health insurance who earn less than 250% of the federal poverty level. A partnership between the Anne Arundel County Department of Health and the Anne Arundel County Medical Society, the program facilitates the provision of affordable health care to uninsured working adults, using the services of a Department of Health administrator and six case managers. Paperwork is limited and physicians may set limits on the number of REACH patients they can serve. Case managers in the Anne Arundel County Department of Health assist with care coordination and ancillary services.

Needs and Gaps in Services

Despite award-winning programs in the County, health inequities exist relating to health indicators and health care accessibility. With increasing rates of depression and mental stress, interviewees report seeing an increase in the rate of substance abuse, particularly prescription drugs.

Access to primary health care remains an issue for low-income residents. As one health professional noted, "Basic access is a big problem (for low-income residents), especially specialty access." Many more families are eligible for Medical Assistance (MA) and the Maryland Children's Health Insurance Program (MCHIP) than actually enroll in them. There is also growing need for bilingual service providers, particularly Spanish-speakers.

Summary

Overall, Anne Arundel County citizens are healthy and live in a community committed to the constant improvement of key health indicators. Strong partnerships among the County's health department, hospitals, child-serving agencies, and employers help address the less favorable health indicators. New leadership and initiatives at the Anne Arundel County Department of Health bring a vision of public and private collaboration that targets health improvement for all income levels. Much remains to be done, but awareness and community response are high, with key stakeholders working to promote and preserve healthy communities.

Chapter 5: Environment

It is well known and accepted that the health of residents in any community is affected by the environment in which they live. Community residents are interdependent with the physical environment in that both affect the well being and vitality of the other. There are a number of key indicators that link the environment and the health of the community, including water, air, lead, and land (trails and paths).

Anne Arundel County is varied in both the natural environment and development patterns. Growth areas include Fort Meade, Parole, the Edgewater/South River area, the Broadneck Peninsula, Arnold, the Baltimore Washington International Airport, Pasadena, Glen Burnie, and Odenton. The County covers approximately 267,230 land acres with 533 miles of shoreline. Approximately 30% of the county's land acres are zoned agricultural, 12% are zoned open space, and 9,400 acres are permanently protected through a local easement program.⁶⁶

In 2011, drinking water provided to Anne Arundel County met all health and safety regulations. 10,306 water quality samples were collected and 42,327 analyses were performed for 129 various parameters. No water quality violations were reported.⁶⁷ However, according to the 2011 Anne Arundel County Department of Public Works report on Watershed Impairments, of the 12 watersheds in the County, all 12 have at least one impairment caused by trash, toxics, sediment, nutrients, metals, biological, or bacteria. The Patapsco (North County) has five impairments.⁶⁸

The Chesapeake Bay is perhaps Anne Arundel County's most treasured natural resource, constituting the largest estuary in the United States. However, despite many efforts by federal, state, and local governments and other interested parties, pollution in the Bay does not meet existing water quality standards. The pollutants that are largely responsible for impairment of the Bay are nutrients, in the form of nitrogen and phosphorus, and sediment.

In December 2010, the U.S. Environmental Protection Agency (EPA) established a mandatory "pollution diet," called the Chesapeake Bay Total Maximum Daily Load (TMDL), with rigorous accountability measures in order to initiate extensive actions to restore clean water in the Bay, streams, creeks, and rivers. An analysis of selected 2011 milestones showed that of the eight practices evaluated, Maryland exceeded its goals for wastewater nitrogen and phosphorus, forest buffers, and cover crops. Maryland came very close to the benchmark in septic system denitrification, but fell short on stream fencing and stormwater retrofits.⁶⁹

Anne Arundel County is in the process of drafting a local plan to be included in a Watershed Implementation Plan that provides local solutions for cleaning local waters and identifying collaboration opportunities to meet the overall Anne Arundel County TMDL allocation for the Chesapeake Bay.⁷⁰

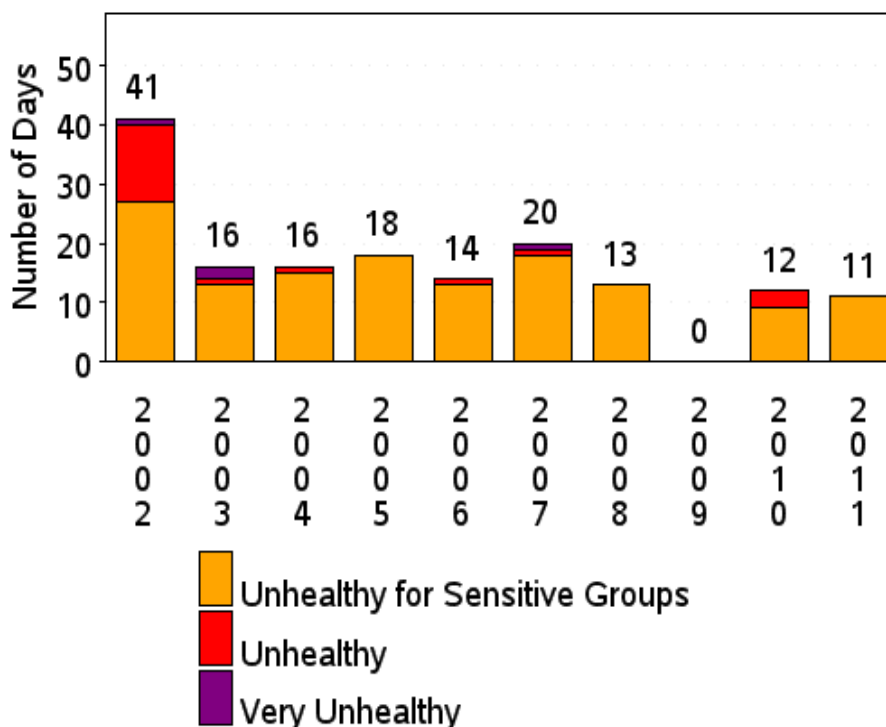
At the beginning of this century, Anne Arundel County was ranked among the worst in the nation for air quality due to violations of ozone standards. Since 1996, ozone levels have decreased to 51.2 fewer High Ozone days per year. However, current levels are still higher than

deemed acceptable by the EPA. Since 2000, the number of days with high Particle Pollution has decreased and is in the acceptable range.⁷¹

Air pollution, particularly ground-level ozone, can trigger asthma symptoms and lead to the development of asthma in children. As seen in Table 6.1 below, the number of unhealthy days for asthma sufferers has been steadily decreasing as ozone levels are reduced.

Table 5.1

Number of Unhealthy Days in Recent Years in Anne Arundel, MD for Asthma or Other Lung Disease



Source : Environmental Protection Agency, AirNow, <http://www.epa.gov/aircompare/compare.htm>, downloaded August 5, 2012.

Data from Fiscal Year 2011 emergency room visits show a total of 1278 asthma related visits for those Anne Arundel County residents less than 18 years of age.⁷² A breakdown by zip code shows the highest frequency in Brooklyn Park (20% of total visits). Total visits from youth/children in Glen Burnie, Severn, and Pasadena accounted for an additional 36%.⁷³ By race, 51% were Black children, 37% were White. By ethnicity, 4.8% were Hispanic.

Lead levels are quite low for Anne Arundel County, based on national averages. There are a small number of cases annually where lead levels exceed safety standards (>10ug/dL). In 2010-2011, there were 30 active cases; 20 of them were contracted in the County and the remainder was children who relocated after their cases were active elsewhere. Of the 20 contracted cases in the County, 14 were in the northern portion; the remainder was in the southern portion.⁷⁴

What We Are Doing Well

Anne Arundel County Public Schools is a leader in the development and implementation of a systemic program in Environmental Literacy. In June 2011, the Maryland Board of Education instituted an Environmental Literacy graduation requirement. AACPS's implementation plan is designed to exceed those state requirements by requiring all students to have a "Meaningful Wetland Educational Experience" outdoors every year, including an overnight visit by all 4th graders to the County's Outdoor Education Center, Arlington Echo. Students will learn in and about the outdoors, including engagement in real world environmental issues and investigation that results in responsible students with the ability to make decisions and take actions that sustain the natural environment.⁷⁵

Additionally, AACPS encourages all schools to become Green Schools and Green Facilities. Folger McKinsey Elementary in Severna Park was recently named one of the first "Green Ribbon Schools" in the nation by the U.S. Department of Education. The award recognizes the school for its exemplary environmental literacy and outdoor education programs, as well as its green practices that save energy and reduce costs. 52 other AACPS schools and centers have earned "green school" status; more than 43% of the facilities have completed this challenging process to earn the state's highest recognition of environmental literacy. By establishing an effective environmental program that includes galvanizing the community to become more environmentally conscious, these schools weave "green" thinking into every aspect of the school experience.

A nascent but growing focus on "green" job training in the County is creating opportunity from the current economic challenges and contributing solutions to looming environmental issues. Green jobs prepare people for sustainable wage jobs that substantially contribute to improving, preserving, or restoring the environment. For example, the Anne Arundel County Community Action Agency's Green Summer Works program was developed in 2010. The program provides low-income youth with an opportunity to learn employment skills in the green job sector through a six-week program that offers soft-skills training and workforce preparation prior to placement in a paid internship at a green job site. 89% of the participants leveraged their job training to obtain employment. 78% have gone on to college or the military.

Additionally, a 14-week Green Jobs training and placement program sponsored by the Governor's Workforce Investment Board in Anne Arundel County was launched in August 2010. This solar energy training program teaches basic skills and safety practices in photovoltaic (PV) array design and components. The program represents collaboration among government, higher education, and industry. Graduates are prepared for the North American Board of Certified Energy Practitioners (NABCEP) Solar PV installer Certification exam, as well as positions as electrical apprentices or installers.⁷⁶

The Chesapeake Bay Trust offers programs that have a green jobs component. Their Chesapeake Conservation Corps initiative is a yearlong program open to 18-25 year olds that provides service-learning opportunities and green job training for young people through environmental and energy conservation projects. This initiative, supported by Constellation Energy, the Trust, and the state of Maryland, has been pairing young adults with organizations that provide hands-

on environmental, leadership, and technical training opportunities since 2010. The Trust's Chesapeake Bay Green Street-Green Jobs-Green Towns Initiative supports local, grassroots-level greening efforts by towns and communities in urbanized watersheds that reduce stormwater runoff, through the creation of "green streets." Projects selected enable green jobs creation and greater connectedness and access to restoration opportunities.

Needs and Gaps in Services

The negative environmental impact resulting from vehicular transportation activities includes tailpipe emissions, noise, highway runoff, and leaking underground fuel tanks. Thus, a better public transportation system would not only increase accessibility to job opportunities for low-income community members, it would also contribute to a healthier environment for all County citizens.

The new Environmental Literacy curriculum at AACPS is making inroads into exposing low-income students to the physical environment. However, transportation costs related to providing an outdoor experience for every child every year can be onerous for many schools and parents.

The need for access to playgrounds, open spaces, and greenways remains for many children during their out-of-school time. With young people leading increasingly indoor lives, the availability of outdoor play space encourages exercise, thus decreasing obesity. Additionally, children who spend time outdoors are more knowledgeable and often more motivated to make decisions that enhance the natural environment. However, children living in public or subsidized housing neighborhoods often have little access to open spaces near their homes.

Environmental stewardship in the County is enhanced by a large number of groups and initiatives. However, interviewees noted that what is lacking is a "single entity or champion" to pull together and align the many volunteer and professional efforts to improve the environment. Similarly, there is not an integrated report card to monitor the environment and its impact on health in an easy-to-understand way. Other focus group participants suggested a "white paper" on environmental philanthropy.

Chapter Six: The Arts

Anne Arundel County's rich arts sector includes varied and numerous arts organizations, businesses, events, and artists. Their contribution to the overall quality of life makes the community a better place to live, work and play. Maintaining a high quality of arts programming, along with public access for all members of the community, benefits the economy, children's education, and a sense of community.

Arts and The Economy

The adage that "where arts start, jobs follow" is borne out in Anne Arundel County. The arts comprise an industry that generates economic benefits through jobs, spending, and tax revenues. Job opportunities include not only artists and performers, but also backstage as technicians and managers. In addition, people who attend local arts activities also enjoy our restaurants, shops and hotels. The Maryland State Arts Council estimates that every dollar of the arts organizations' operating budgets generates \$3.78 in additional economic activity.⁷⁷ A 2009 study estimated that in Annapolis alone, the arts sector had a \$45 million economic impact. A national study found that the arts raise the visibility of a community and bring in visitors. In fact, 31.8% of attendees to an arts event travel from out of their home county. Locals spend an average of \$17.42 and non-locals spend more than double that at \$39.96.⁷⁸

Arts and Education

A compendium of research documents numerous benefits of an arts education for young people. Links between the arts and academic achievement have been empirically proven in the areas of math, reading, and verbal skills, as well as creative thinking. Similar connections are present between arts learning and social and emotional skills such as self-confidence, conflict resolution, motivation, perseverance, and leadership. Participation in the arts is also an important strategy for engaging and motivating students at risk of dropping out of high school and for those with special needs.⁷⁹

It is generally accepted that in today's knowledge-based economy, innovation is the key driver of competitiveness, wage and job growth, and long-term economic growth. Innovation is fueled by creativity and problem solving, skills that are nurtured through an education in the arts. Further, the arts enhance creative inquiry and curiosity, which, in turn, complement the STEM (science, technology, engineering, and math) fields that depend on these applied skills.

Marylanders overwhelmingly support arts education with 91% stating that they believe "schools should provide more exposure to the arts for our young people" and 97% noting their belief that "encouraging our children to imagine and be creative will help them in other ways in life." 95% want more funding for the arts and public subsidies to make arts events free or low cost for the public.⁸⁰

Arts and Community Impact

The arts also act as the glue that connects people across cultures and communities by bringing diverse people together to celebrate, inspire, and be inspired. Art has the capability of creating vibrant places through enlivening and rejuvenating public and private spaces, creating community-based art, and strengthening attachment to places.

Heritage art allows a community to celebrate the rich diversity of cultural achievements, linking society to its past, but also using those connections to explore new paths. 80% of surveyed African Americans and Hispanic Marylanders said “artistic expression keeps me in touch with my cultural identity.”⁸¹

Arts and the Impact on Individuals

Not only does viewing art or experiencing an arts performance lift the spirits, the creation of art touches many lives. Overall, Maryland citizens hold a deep appreciation of and involvement in the arts with many actively creating art at home, school, and work. Nine out of ten Marylanders attended or viewed a performance or exhibition during one year. 84% actively create art, either professionally or in their spare time. Twenty-three percent consider themselves to be either an active or aspiring artist. One quarter of those people are making some or all of their living through art. Among people surveyed who did not consider themselves artists (77%), many were engaged in an art activity such as instrumental music (28%), vocal music (21%), fine art (14%), writing (12%), theater (11%), dance (10%), photography (6%), weaving/sewing/knitting/quilting/textiles (4%), and filmmaking (4%).⁸²

What We Are Doing Well

As Anne Arundel County grows the breadth and depth of its arts sector, more opportunities arise for young people, particularly from low-income families, to access quality programs that will foster their imagination, as well as facilitate their success in school and later in the workforce.

The Anne Arundel Public School System offers the Performing and Visual Arts (PVA) Magnet Middle and High School Program for students who wish to build their artistic skills and gain experience in the arts. Specialized areas of interest include visual arts, instrumental music, voice, creative writing & movement, or dance. In addition, students receive training in digital media, including photo-digital design and audio/video media production. There are co-curricular opportunities for student to engage in drama, musical theater, band, orchestra, dance, chorus, arts studio experiences, and other arts-related clubs. Artists-in-Residence join the credentialed teachers to provide quality instruction throughout the school day and during afterschool programs.

Additionally, afterschool and summer arts programs have been developed to allow young people from low-income families the chance to participate in high-quality arts experiences. Creating Communities is dedicated to ensuring that disadvantaged young people have greater access to quality arts programs and services that will enhance their lives and shape their futures. Programs offered include a free summer camp, as well as a yearlong program for teens. VisionWorkshops, based in Annapolis, offers highly effective photography workshops for youth from underserved communities. They also create photo and writing workshops for special communities such as the Juvenile Drug Treatment Court of Anne Arundel County.

Needs and Gaps In Services

Although opportunities for low-income children and families to experience or create art are increasing, more programs are needed, particularly ones that bring the art to the community or

offer transportation to the arts venue. Other access-related issues include making arts events and performances affordable for low-income families and encouraging parents who may not have been raised in an environment where arts were valued to attend events with their children.

The arts community expressed their hope that leadership can be built throughout the entire County in order to coordinate activities in the City of Annapolis, North County, and South County. Also, although PVA has made inroads, there is a desire to further link artists and schools in order to provide students direct access to the arts as a vehicle to motivate them to succeed in school. Public art and community group projects that weave together heritage and art were also mentioned by focus group members.

Summary

Within Anne Arundel County, many arts organizations and events are centered in Annapolis, creating vibrancy and a positive impact on the economy. Having established this arts base, it is now important to facilitate a ripple effect that allows all County citizens the opportunity to access affordable arts experiences. Low-income children and their families would especially benefit from this exposure thus creating cross-cultural connections, as well as building academic skills and positive behavior.

Conclusion/Recommendations

This needs assessment represents quantitative data analyses, as well as conversations with community stakeholders and focus groups comprised of over 100 participants. These sources help paint a deep and broad picture of Anne Arundel County in 2012. Clearly, many of the issues reported in the 2010 edition of *Poverty Amidst Plenty* still persist. The economic downturn has impacted low-income, as well as middle-income families, causing a considerable strain on the shrinking social safety net. Although there are many initiatives to increase self-sufficiency for low-income residents, three issues vital to the economic health of the County remain: transportation, quality child care and affordable housing.

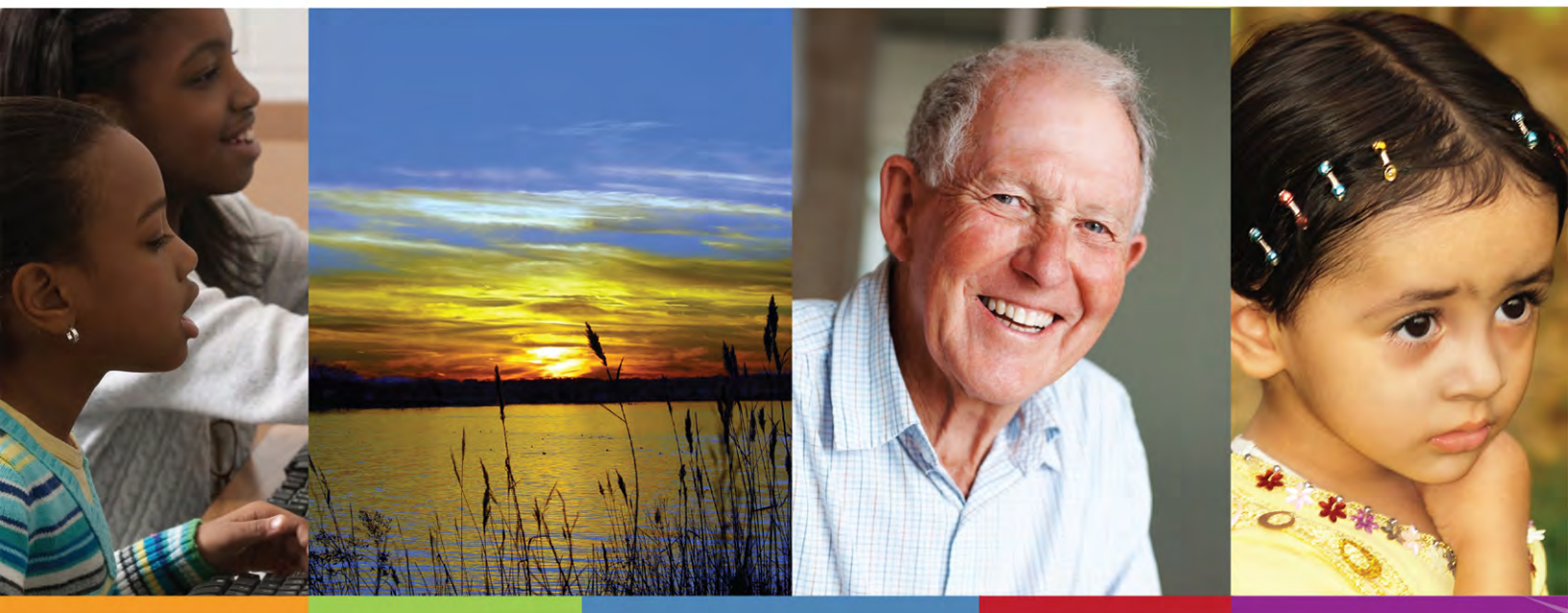
Yet residents of Anne Arundel County also benefit from considerable community assets. The educational systems at the public school and community college levels are among the best in the country. Leadership at the Department of Health is resolutely committed to community health and health equality. Efforts to improve the physical environment, particularly the Chesapeake Bay, have garnered widespread support and produced noteworthy achievements.

Additionally, out of the grim economic climate grew an unprecedented spirit of partnership and collaboration across public and private sectors to address some of the issues encountered by vulnerable children and families. Agency silos broke down in favor of cooperation so that scarce resources could be targeted to those with the most need. Anne Arundel County proved and continues to affirm through the “work of many” described in this report that ours is a caring community committed to raising the quality of life for all our citizens.

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