

DATE: August 28, 2007
TO: Children and Families Commission of Orange County
FROM: Michael M. Ruane, Executive Director 
SUBJECT: Confirm Workshop Schedule for Priority Areas For FY07/08

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COMMUNICATIONS SECTION

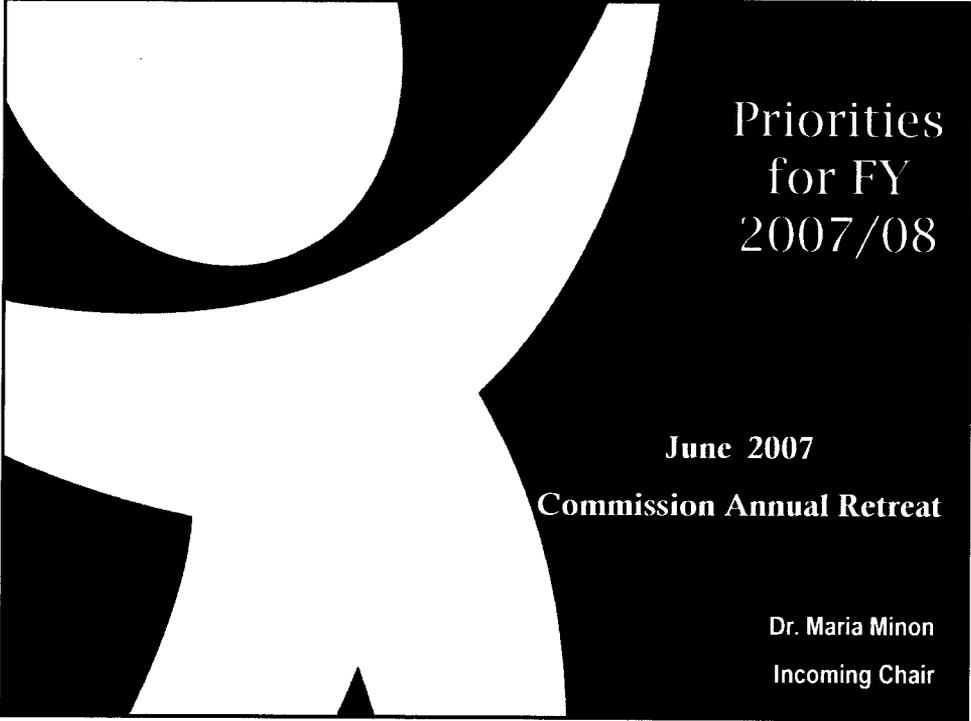
SUMMARY:

As discussed at the Commission retreat in June 2007, there were three priority areas that lend themselves to a more in depth discussion. Attached is the presentation that was made at the retreat that includes more specific information on each of the topics to be discussed.

Following is a proposed schedule of workshops; the workshops will take place immediately following the Commission meetings on months when there is not a Pediatric Subcommittee meeting. The intention of the workshop is to discuss relevant research and existing community efforts on each of these priority areas and concluding with a potential action plan for each of the topic areas.

Proposed Date	Topic Area
October 3, 2007	Childhood Obesity Prevention/ Healthy Nutrition
January 2, 2008	Services to Homeless Children
April 2, 2008	Developmental Delays- Speech and Language

Attachments:
Priorities for FY 2007/08



Priorities
for FY
2007/08

June 2007
Commission Annual Retreat

Dr. Maria Minon
Incoming Chair

FY 07/08 Priorities

- Establish a Forum to Further Discuss and Develop Strategies to Address:
 - Early Outreach for Healthy Nutrition
 - Homeless/Motel Families
 - Developmental Delays – Speech and Language
 - Other Unmet Needs

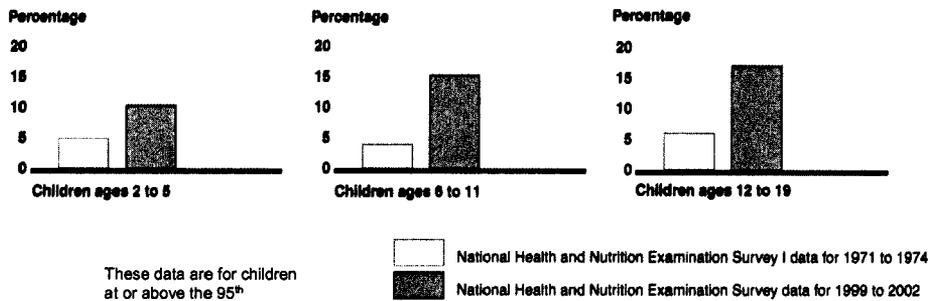
Programs Serving Homeless/Motel Families

- Schedule a Workshop Session to:
 - Assess the “state of the problem”
 - Review of current strategies and services – with speakers who are working with homeless/motel families.
 - Understand the current service needs and gaps and broaden our understanding of the problem.

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Increase in Childhood Obesity



These data are for children at or above the 95th percentile of BMI for age and gender.

 National Health and Nutrition Examination Survey I data for 1971 to 1974
 National Health and Nutrition Examination Survey data for 1999 to 2002

Source: GAO (image) based on Ogden et al., "Prevalence and Trends in Overweight Among US Children and Adolescents, 1999-2000," JAMA, vol. 288, no. 14 (2002), and Hedley et al., "Prevalence of Overweight and Obesity Among US Children, Adolescents, and Adults, 1999-2002," JAMA, vol. 291, no. 23 (2004).

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Healthy Nutrition for Infants and Very Young Children

- Since 1980, the prevalence of overweight among children and adolescents, has doubled among 12 to 19 year olds, and tripled among 6 to 11 year olds. Diabetes rates are skyrocketing.
- Type 2 diabetes, once rare in children, is estimated to be 30 to 50% of all pediatric diabetes diagnoses. 12,000 California teenagers have been diagnosed with diabetes but the rates are likely much higher as Type 2 diabetes is "silent" in its earliest stages.
- An emerging field of research in the origins of diabetes explores the link between maternal gestational diabetes and pre-pregnant maternal body fatness as significant predictors of both body fatness in and the development of metabolic syndrome in offspring children and adolescents.

Source: Center for Public Health Advocacy Policy Brief No. 4 August 2005); Boney CM, et al. Metabolic Syndrome in childhood: Association with Birth Weight, Maternal Obesity, and Gestational Diabetes Mellitus. *Pediatrics* 2005; 115:290-296)

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Healthy Nutrition for Infants and Very Young Children

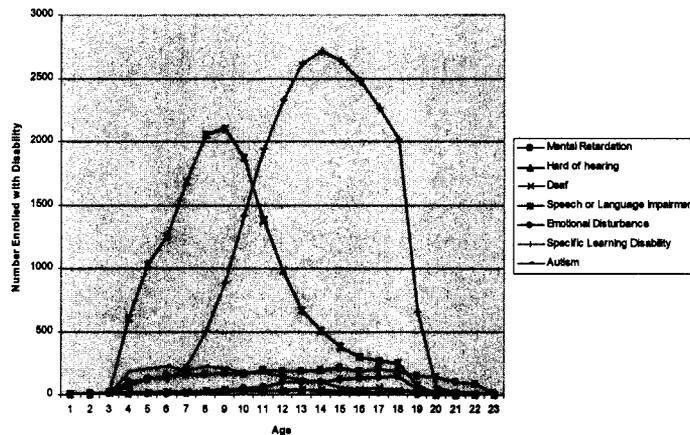
- Evaluate strategies to outreach to first-time parents to promote:
 - Breastfeeding
 - Understanding of obesity risks
 - Healthy childhood nutrition
- Review strategies for leveraging existing programs such as:
 - Sesame Street Workshop
 - Bridges for Newborns & Home Visitation Programs
 - Primary Care Services through AAP and Community Clinics

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Developmental Surveillance, Screening and Services

Special Education Enrollment by Age and Disability in Orange County (2002)



Source: Building a Model System of Developmental Services in Orange County, Neal Halfon MD MPH et al, UCLA Center for Healthier Children, Families, and Communities, September 2004.



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Speech and Language Delays

- Early identification of developmental disorders is critical to the well-being of children.
- Current detection rates of developmental disorders are lower than their actual prevalence.
- Some children may qualify for services and supports.
- Gaps in enrichment and intervention services exist for at-risk children and for those with mild and moderate delays.

Sources:
American Academy of Pediatrics Policy Statement, Pediatrics Volume 118, Number 1, July 2006
Beyond Referral: Pediatric Care Linkages to Improve Developmental Health, The Commonwealth Fund, Amy Fine and Rochelle Mayer, Georgetown university, December 2006.



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Engage Commissioners in an Evaluation of Other Community Gaps

- While the Strategic Assessment by Bridgespan is underway later this year, we need to still build upon successful strategies and gaps
- Establish a quarterly process to more thoroughly analyze investments and remaining gaps in services

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