

Fairfax County Human Services

Response to Challenges in the Community

Selected Trends in Service Utilization and Demand

February 2004





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Fairfax County Human Services: Response to Challenges in the Community

Selected Trends in Service Utilization and Demand

- This report presents utilization and trend data for selected services and programs offered by Fairfax County Human Services. This report seeks to illustrate the scope of human services and to highlight selected trends in service demand over time. It is *not* intended to provide a comprehensive picture of every human service offered by the County, nor does it provide information on program performance or client outcomes.
- The report is organized by seven Human Services “Community Challenges,” or statements of basic goals that local government shares a legal or ethical responsibility to achieve. For each challenge, there is a desired “Quality of Life” statement as well as an “Action Statement” that summarizes the Human Services approach to achieving the desired quality of life.
 - Challenge 1: Providing Assistance to Promote Independence
 - Challenge 2: Ensuring Safe, Affordable Housing
 - Challenge 3: Supporting Families and Individuals in Crisis/Preventing Abuse & Neglect
 - Challenge 4: Protecting the Public Health
 - Challenge 5: Addressing Alcohol, Drug, Mental & Physical Health Issues
 - Challenge 6: Responding to Crime in the Community
 - Challenge 7: Providing Community-wide and Targeted Supports to Prevent Social Isolation and Neighborhood Deterioration.
- Please note that with a few exceptions, this report presents information only on services provided directly by Fairfax County Human Services and some contract agencies, and does not include data on the many essential human services provided by other community-based organizations, private providers, and non-profit agencies.

Fairfax County Human Services System: Mission

The mission of the Fairfax County Human Services System is to provide services and develop partnerships that protect and enrich the quality of life for the people, neighborhoods, and diverse communities of Fairfax County.

Through our services and partnerships, we protect the vulnerable, we help people and communities realize and strengthen their capacity for self-sufficiency and inclusion, and we look ahead to ensure good outcomes through prevention and early intervention.

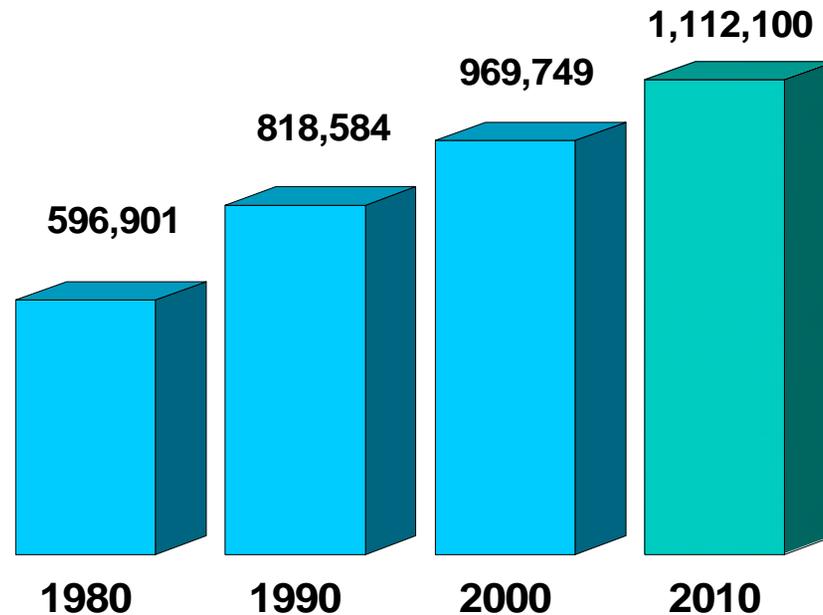
Fairfax County Human Services: Response to Challenges in the Community

Demographic Trends

- Human Services must be a dynamic system able to identify and adapt to emerging trends and opportunities. Changing conditions in the environment affect not only the system's capacity to provide services, but also shape the relationship between the service system and the community it supports.
- There are several major demographic trends that are currently impacting the County and will continue to shape our community in the future: overall growth of the area's population, the dramatic increase in the aging of the population, and the increase in cultural diversity. The following section illustrates those trends.

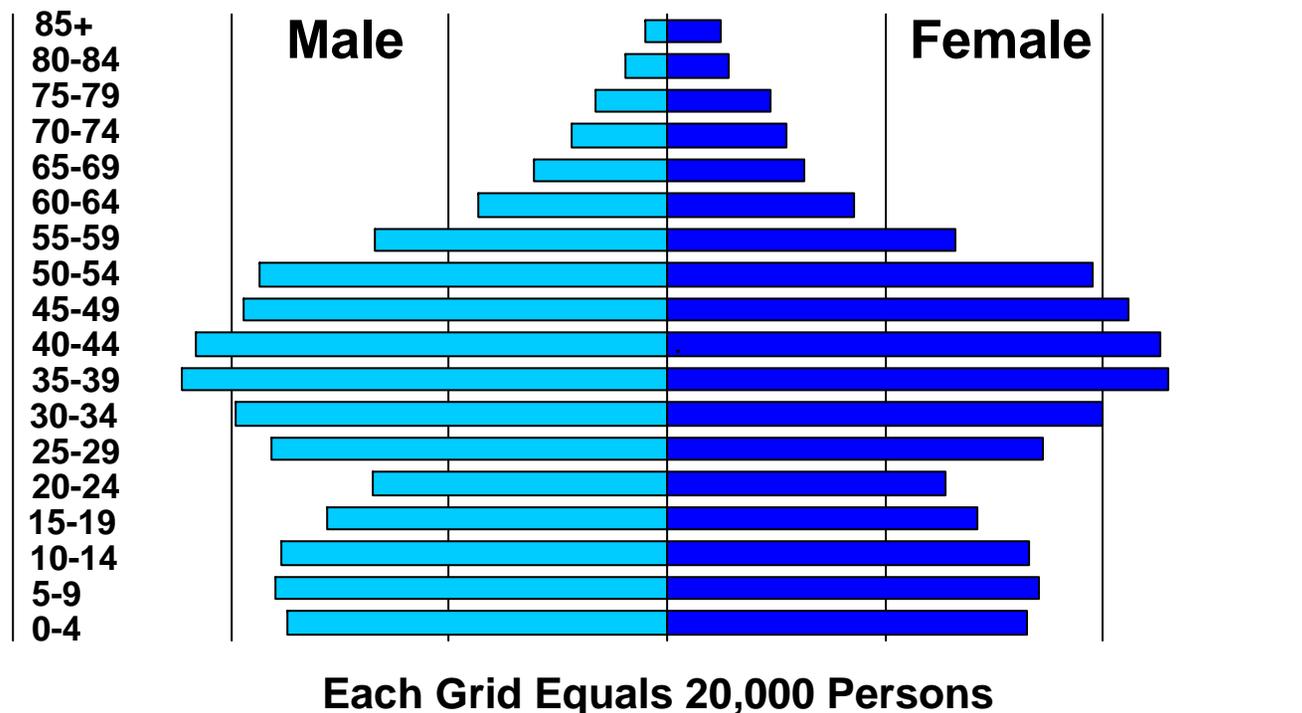
Total Fairfax County Population: 1980 to 2010

- Fairfax County has experienced double-digit population growth each decade since the 1970's. From 2000 to 2010, the population is expected to grow by nearly 15% to 1,112,100. With this rapid population growth comes economic growth and an increased demand for infrastructure and basic services, such as roads, schools, restaurant and building inspections, and sewer and septic services.
- Within the overall population growth, the two fastest growing age groups have been the seniors, 65 years and older, and persons under age 20. Growth in the school-aged population has had a direct impact on the demand not only for schools and teachers, but also for child welfare and youth services, and other human services.



Fairfax County Population by Age in 2000

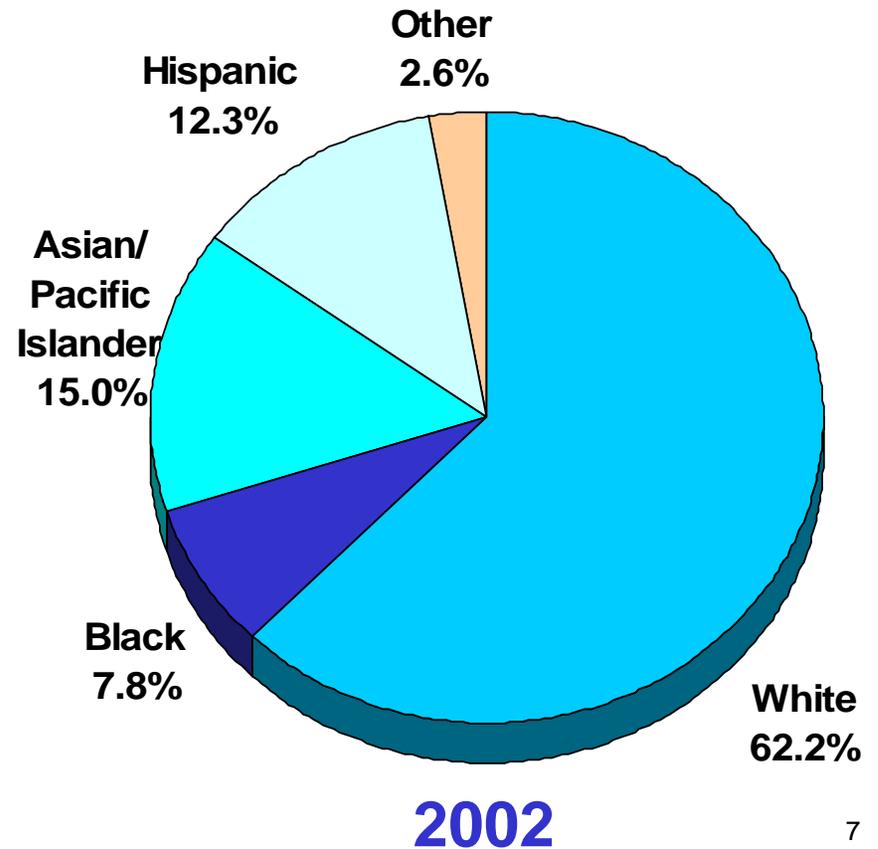
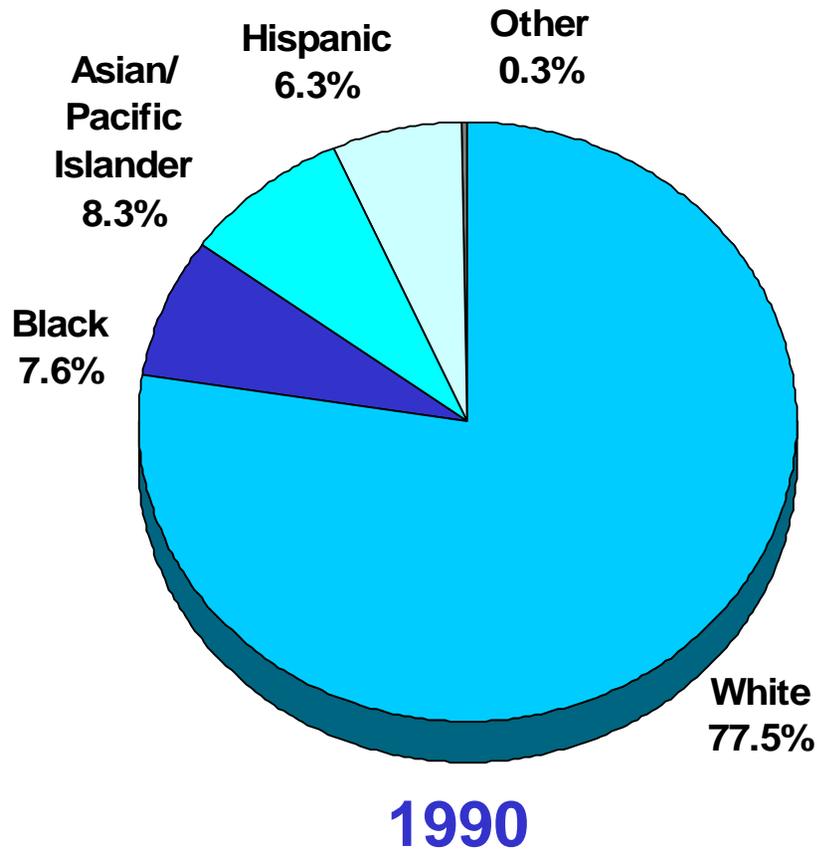
- **Fairfax County has been getting older.** From 1980 to 2000, the number of persons in Fairfax County age 65 and older more than doubled, from 29,385 to 80,833. While this age group is growing across the nation, Fairfax County's rate of growth is much faster than the national rate.
- Nationwide and in Fairfax County, the 20-34 age group is smaller than it was in 1990. In Fairfax County, this age group would be even smaller without immigration.



Racial/Ethnic Distribution

Fairfax County - 1990 and 2002

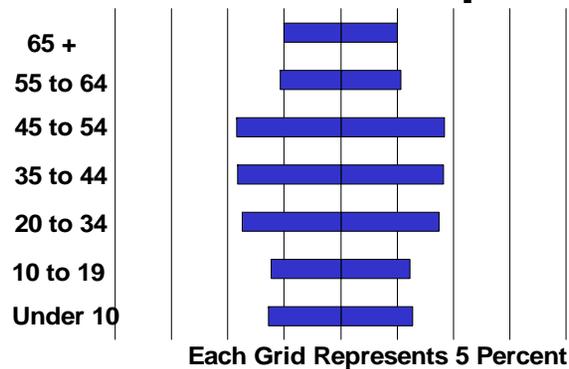
- During the past decade, our community has become richly diverse in ethnicity, language, and cultural background. The Hispanic and Asian populations are the fastest growing racial or ethnic groups in the County.



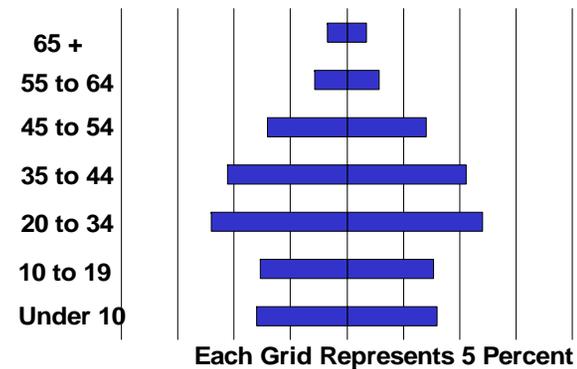
Fairfax County Population Age Distribution: 2000

- Non-Hispanic whites are the oldest group in the County, with a median age of over 39 years and about 10% over age 65. Hispanics are the youngest group, with a median age of almost 28 years and only 7% older than age 55.

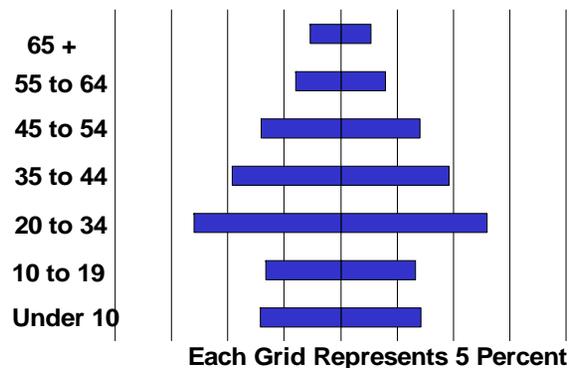
White - Not Hispanic



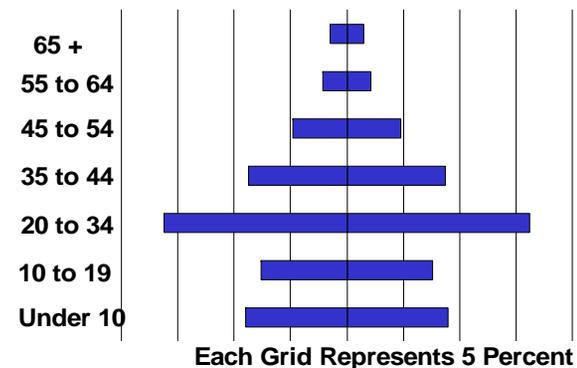
Black



Asian



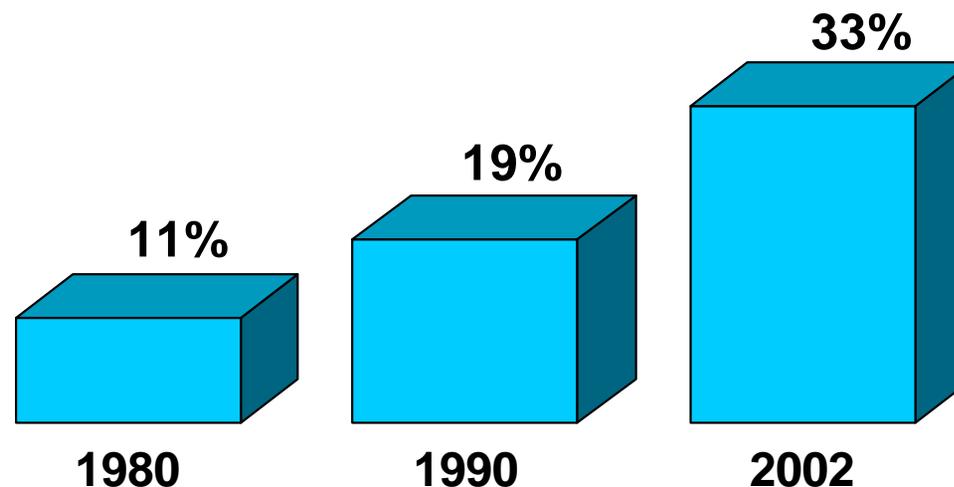
Hispanic



Persons Speaking a Language Other than English at Home

(Fairfax County Residents 5 Years and Older)

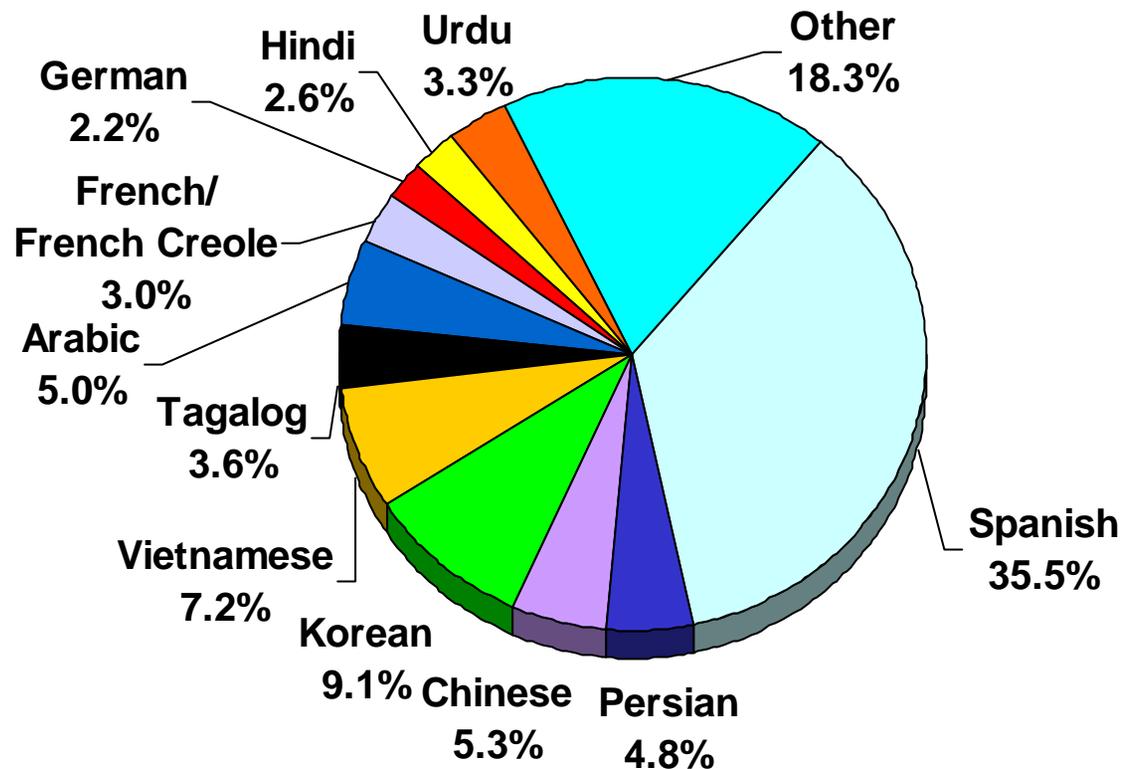
- Persons who speak a language other than English at home are a rapidly growing group representing approximately 90% of the net population growth from 1990 to 2000. Between 2000 and 2002, a net increase of 32,000 persons who speak a language other than English at home have been added to the county.
- Fairfax County differs significantly from national trends, with a third (32.9%) of the Fairfax population vs. 18.3% of the U.S. population speaking another language at home.
- It continues to be a challenge for public and private health care and human service systems to provide culturally appropriate outreach and services and to tap into the workforce expertise of multicultural communities.



Language Spoken at Home in Fairfax County: 2000

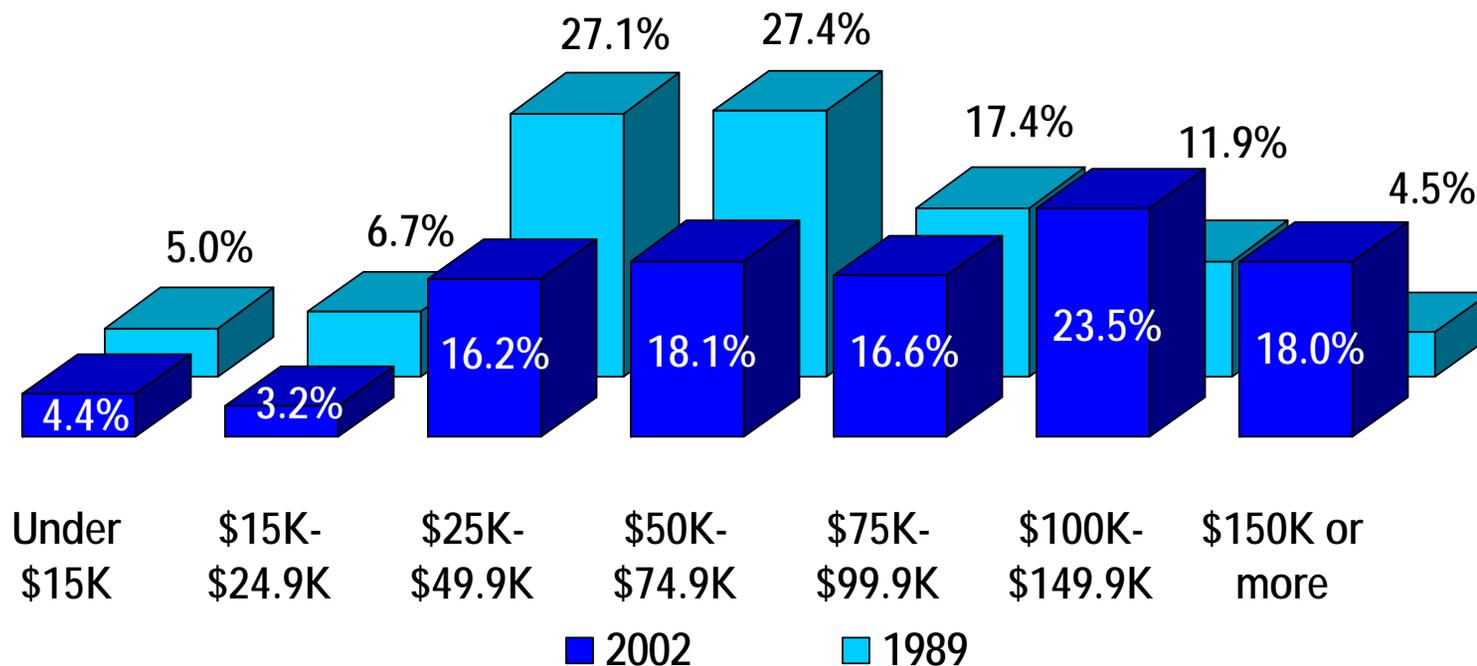
(Persons Age 5 Years and Older Speaking a Language Other than English at Home)

- Fairfax County is much more linguistically diverse than the rest of the nation, with over 100 languages spoken here. Of persons who speak a language other than English at home in Fairfax County, over 35% speak Spanish. Nationally, the figure is 60%.



Household Income Distribution: 1989 and 2002

- From 1989 to 2002, very low income households (<\$15,000) declined as a proportion but grew in number of households. Low to moderate income households (\$25,000-\$74,999) declined as a proportion and in number, while high income households (\$100,000+) grew rapidly in proportion and number.
- While poverty rates are low in Fairfax County (4.5% in 2002), approximately 15% of Fairfax County residents have incomes below 200% of poverty, which is closer to the income needed to approach “self-sufficiency” in Fairfax County.

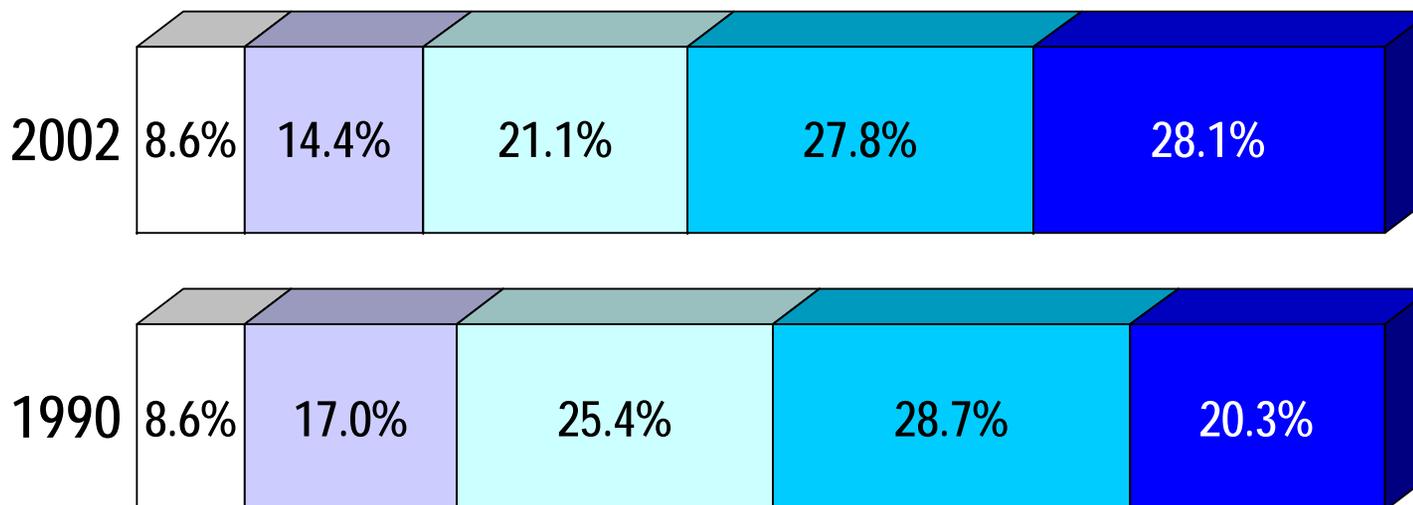


Source: U.S. Bureau of the Census, 1990 Decennial Census and 2002 American Community Survey; 2000 Fairfax-Falls Church Community Assessment; Wider Opportunities for Women, *The Self-Sufficiency Standard for the Washington, DC Metropolitan Area*, Fall 1999.

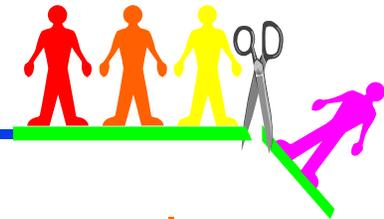
Educational Attainment Fairfax County Persons Age 25 and Older

- Between 1990 and 2000, there was an increase in the number and proportion of persons age 25 and older with four year college degrees or more education, with 55.9% of Fairfax County residents having at least a four year college degree. The Fairfax County rate is more than double the national rate of 25.9%.

□ Less than HS □ HS/GED □ Some College/Assoc/Other □ BS Degree □ Post Grad



Demographic Characteristics



	1970	1980	1990	2002	2010
Population (000)	454.3	596.9	818.6	1,004.4	1.1 M
Median Age (years)	25.2	30.1	33.1	37.3	Older
At - Place Employment (000)	96.7	192.4	371.7	524.3	653.2
Percent Minority	6.8%	13.8%	22.6%	37.8%	Larger %

Sources: Department of Systems Management for Human Services (population), U.S. Census Bureau (age and percent minority), Virginia Employment Commission (employment) and Department of Planning and Zoning (employment forecast).

*At-Place Employment is a measure of jobs in Fairfax County.

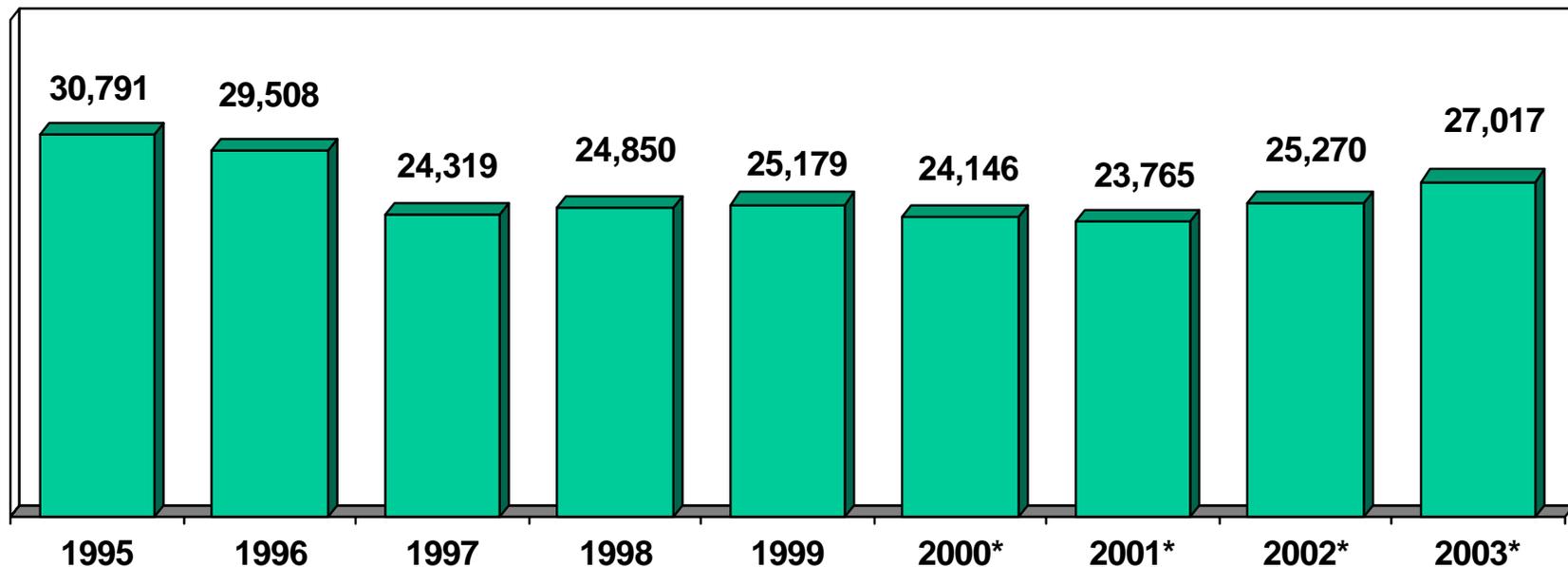
Fairfax County Human Services: Response to Challenges in the Community

- **Challenge 1:**
Lack of Assistance to Promote Independence
- **Quality of Life Statement:**
Fairfax County is a community in which families and individuals are able to achieve their maximum potential for self-sufficiency.
- **Action Statement:**
Take steps to ensure that families and individuals have the supports needed to achieve their maximum potential for self-sufficiency.

Total Benefits Applications Received

FISCAL YEARS 1995 to 2003

- Benefits Programs (Food Stamps, TANF, and Medicaid) are a significant indicator of human need within the County. The past 36 months have shown a continued increase in applications due to a slowed economy, federal and state policy changes, and outreach efforts aimed at improving access to services and connecting people with benefits.



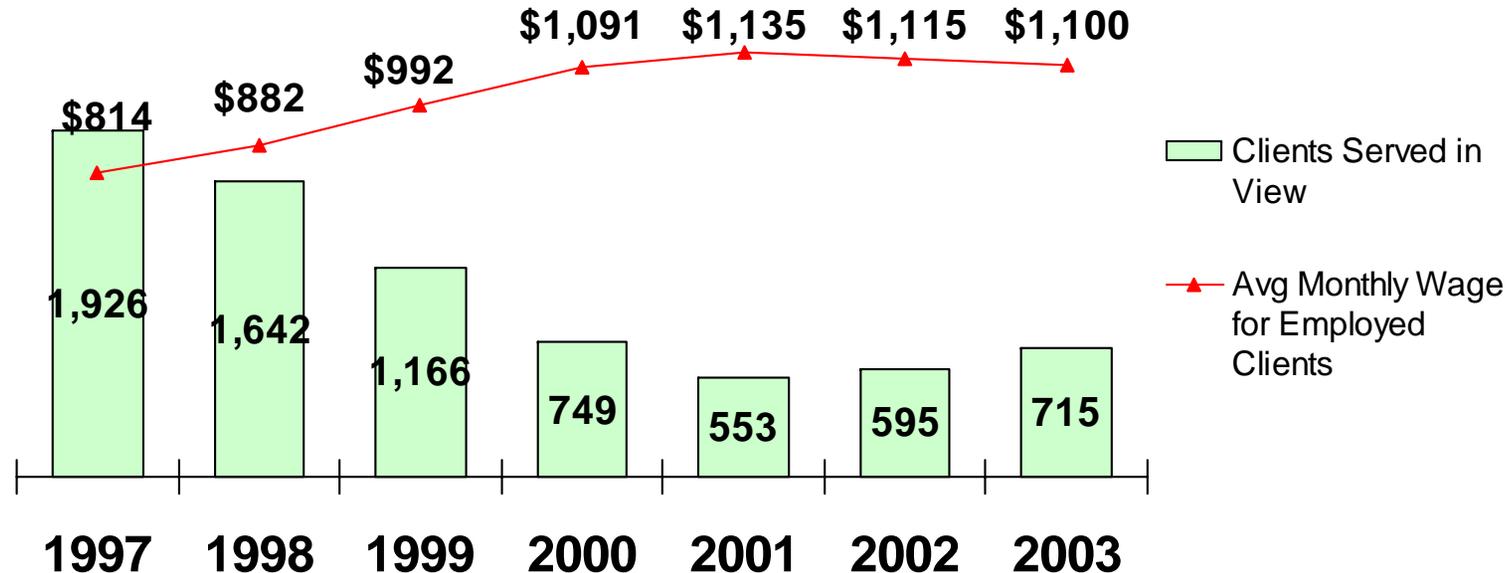
*Because of a lack of available data from the state, FY 2000, 2001, 2002, and 2003 reflect applications processed rather than applications received.

Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Fairfax Works: Welfare Reform in Fairfax County

FISCAL YEARS 1997 to 2003

- Following implementation of the Virginia's Initiative for Employment and not Welfare (VIEW) program in April 1996, the number of Individuals served in VIEW has declined significantly. Current VIEW caseloads consist primarily of "hard-to-serve" individuals with multiple issues such as limited English proficiency, lack of transportation, low education or skills, and mental health issues.
- As of November 2003, 382 participants were currently enrolled in VIEW and receiving Temporary Assistance to Needy Families or job follow up services. Of those 382 participants, 191 are employed with an average monthly wage of \$1,129.

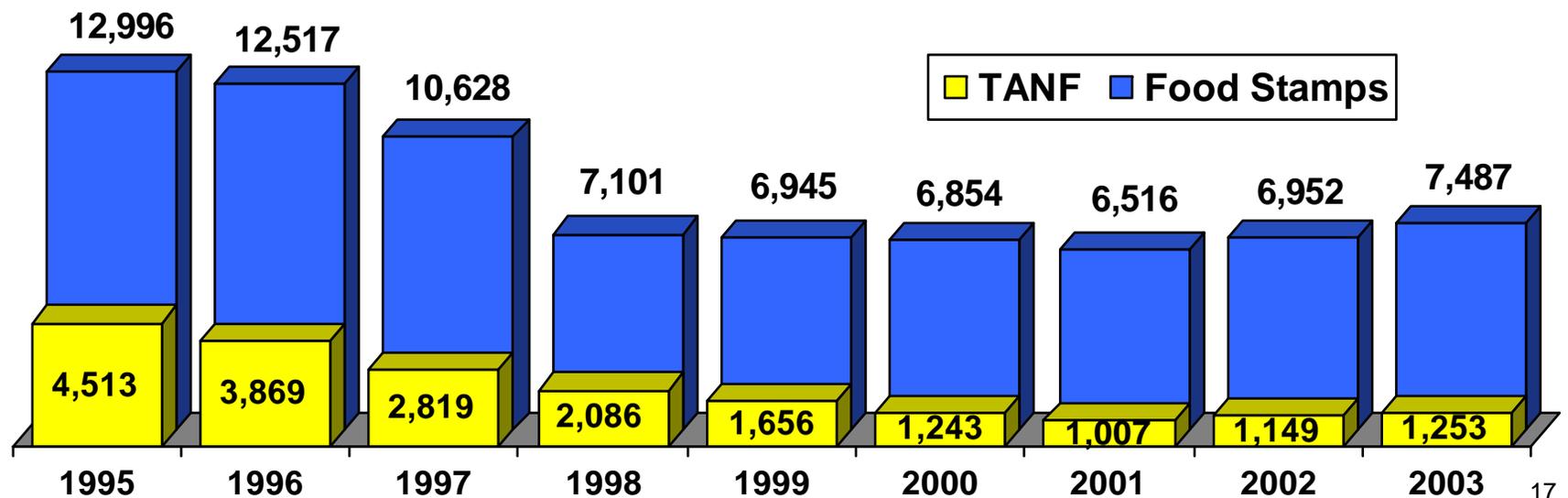


Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Average Cases Under Care: TANF (AFDC) and Food Stamps

FISCAL YEARS 1995 to 2003

- Caseloads declined considerably following implementation of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) in 1996. However, beginning in FY 2001 this trend has seen a reversal with Food Stamp and TANF caseloads increasing approximately 15% and 24% respectively by the end of FY 2003. This recent trend is likely to continue due to the combination of a slow economy and policy changes designed to streamline the application process, align the Food Stamp and TANF programs, allow certain groups of immigrants to qualify for Food Stamps again, and simplify client reporting requirements.

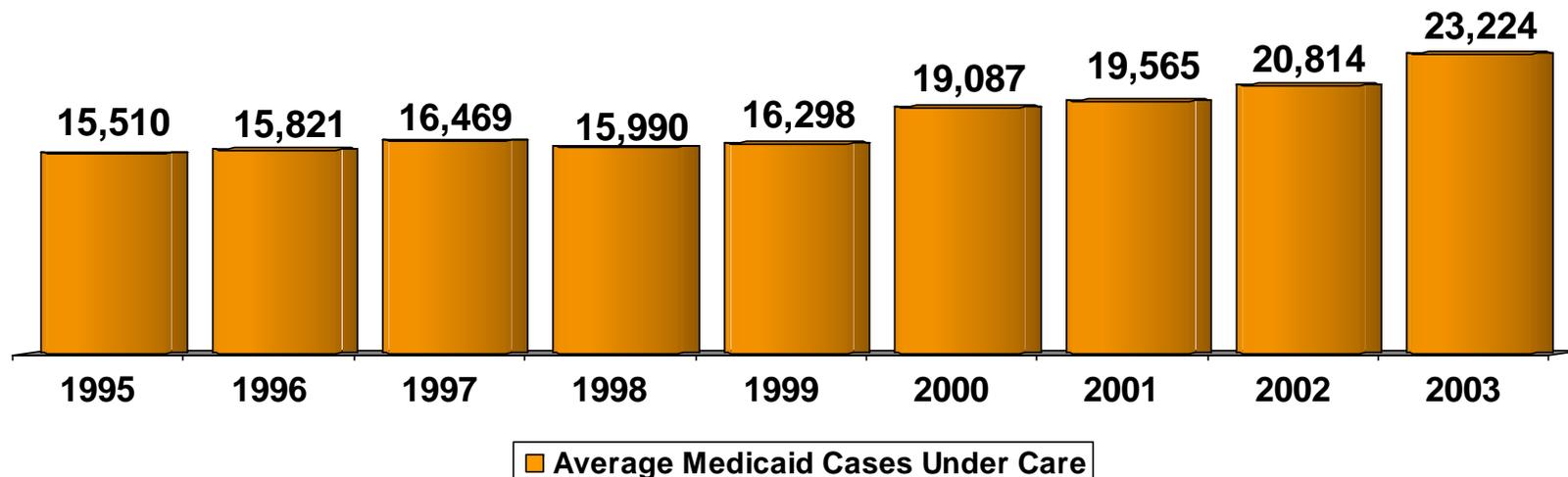


Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Average Medicaid Cases Under Care

FISCAL YEARS 1995 to 2003

- Over the years fluctuations in the number of Medicaid cases are due largely to legislative changes expanding or restricting eligibility for the program.
- Since 1998, following the Implementation of the State Children's Health Insurance Program (SCHIP) with its emphasis on expanding eligibility and increasing enrollment of children, there has been a steady increase in Medicaid caseloads. As outreach continues and emphasis is placed on retention, it is likely that caseloads will continue to grow.



Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

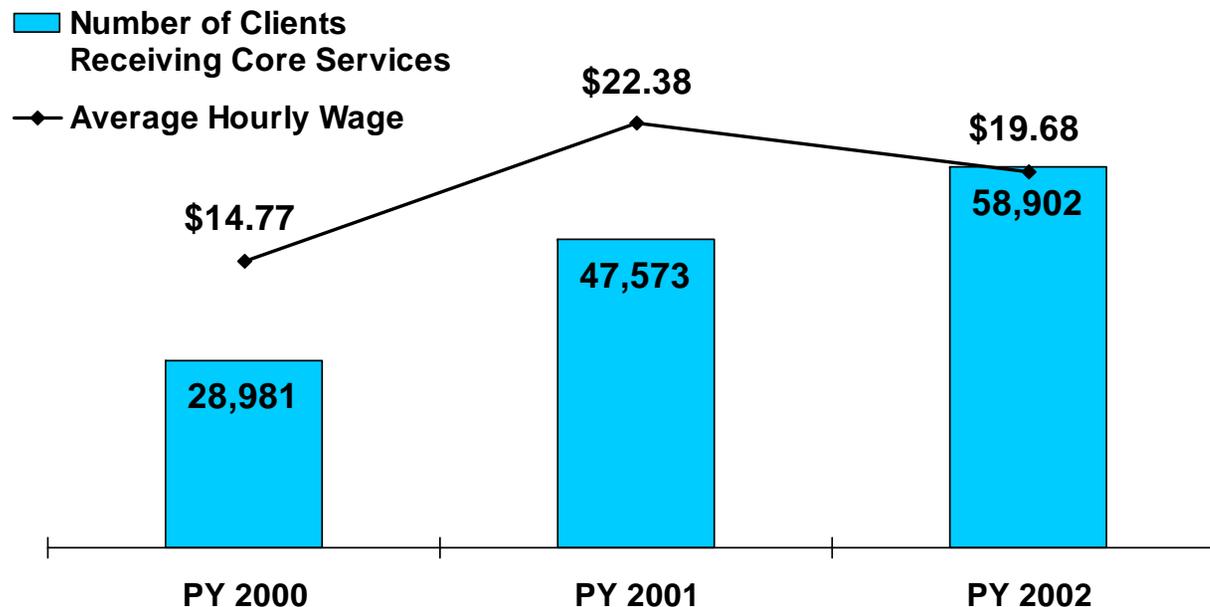
Public Assistance Trends in the First Six Months of FY 2004

- **Public assistance caseloads have increased at the rate of 1,000 new cases per month**, bringing the total caseload count to over 42,000 cases.
- Contributing to this increase are weak economic conditions and changes in federal and state program policies including:
 - **Restoration of Food Stamp eligibility to legal immigrants** residing in the U.S. for 5 years and to legal immigrants under 18 years of age regardless of date of entry
 - **Changes in eligibility-determination rules:** Vehicles are no longer treated as a resource barring eligibility in the Food Stamp program and the financial resources of the family are no longer considered in determining eligibility for the TANF program
 - **Expansion of Medicaid eligibility to children** between the ages of 6 and 19 years by increasing the income eligibility level
 - **Simplified reporting requirements** for clients which make it easier for eligible families to retain eligibility

Employment & Training Programs

Program Years 2000-2002

- Various types of employment and training services are available at the **SkillSource** Centers including Federal Workforce Investment Act (WIA) programs. These services are provided in partnership with a variety of community and government organizations that are co-located at the centers.
- Two levels of services are provided: the first is a “universal access” model that allows core employment services to be delivered to all citizens without registration into the system or eligibility requirements. The rate of clients receiving Core Services through the one-stop centers has steadily increased since Program Year 2000, almost doubling in the past two years.

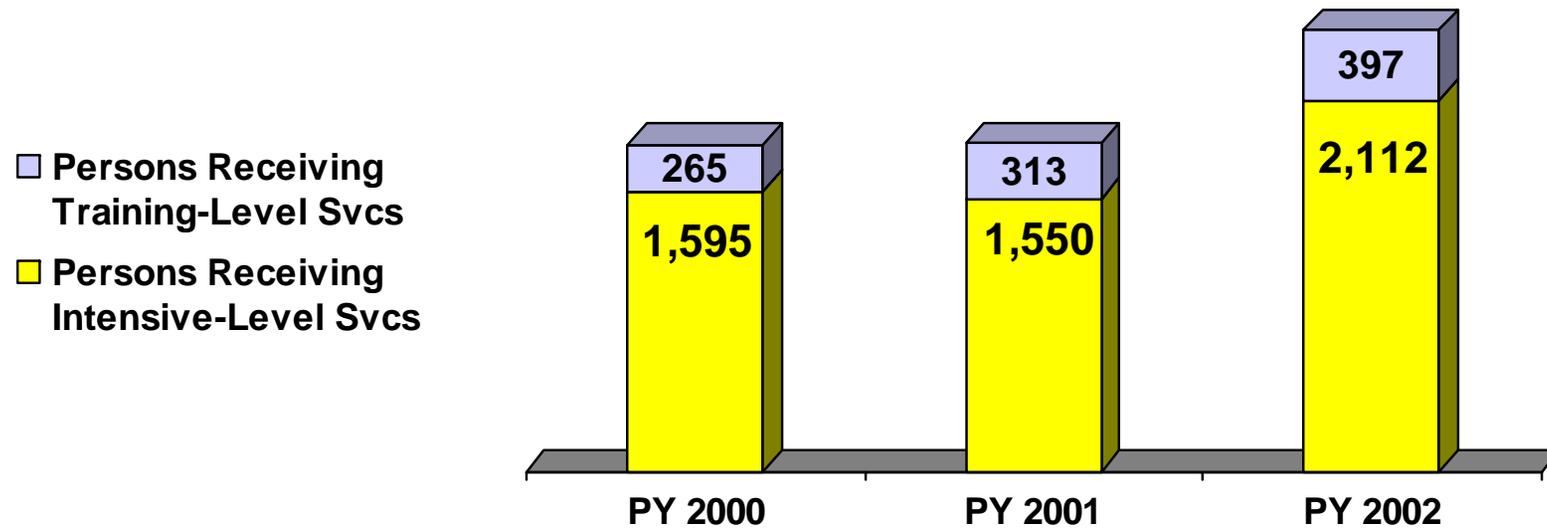


Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Employment & Training Programs

(continued)

- Two higher levels of service -- Intensive and Training – are also available at the WIA One-Stop Centers. These services are delivered to eligible individuals with multiple barriers to employment. Due to funding limitations, not all persons eligible and in need of specialized training can receive these services.
- The overall increase in Core and other services delivered at the WIA's One-Stop Centers can be attributed to greater outreach efforts, a slowed economy, more programs to serve specific populations, and increased participation in the centers by partner agencies (allowing greater client access to a wider range of programs).

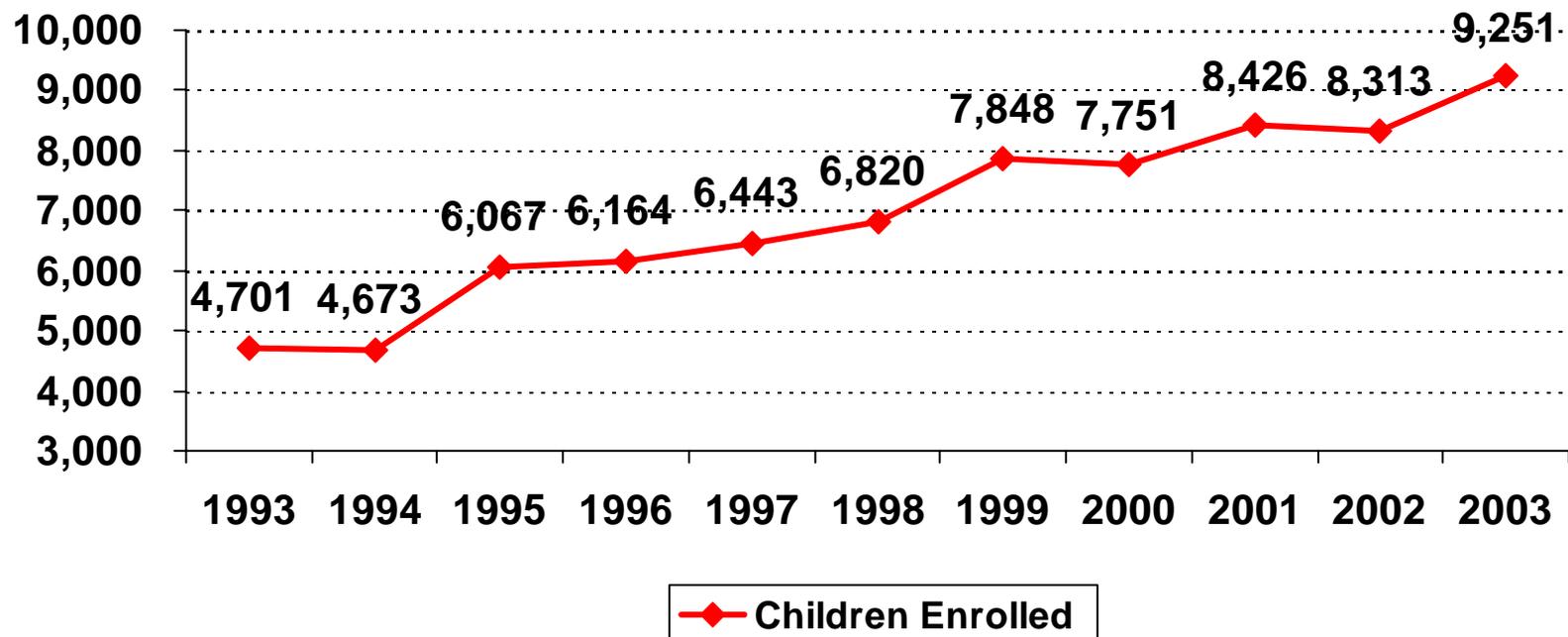


Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Child Care Assistance and Referral Program (CCAR): Number of Children Served

FISCAL YEARS 1993 to 2003

- These numbers represent the total number of children served throughout the year. A recent County survey on child care affordability indicates that among low and moderate income households with children, 71% are unaware of the CCAR program.

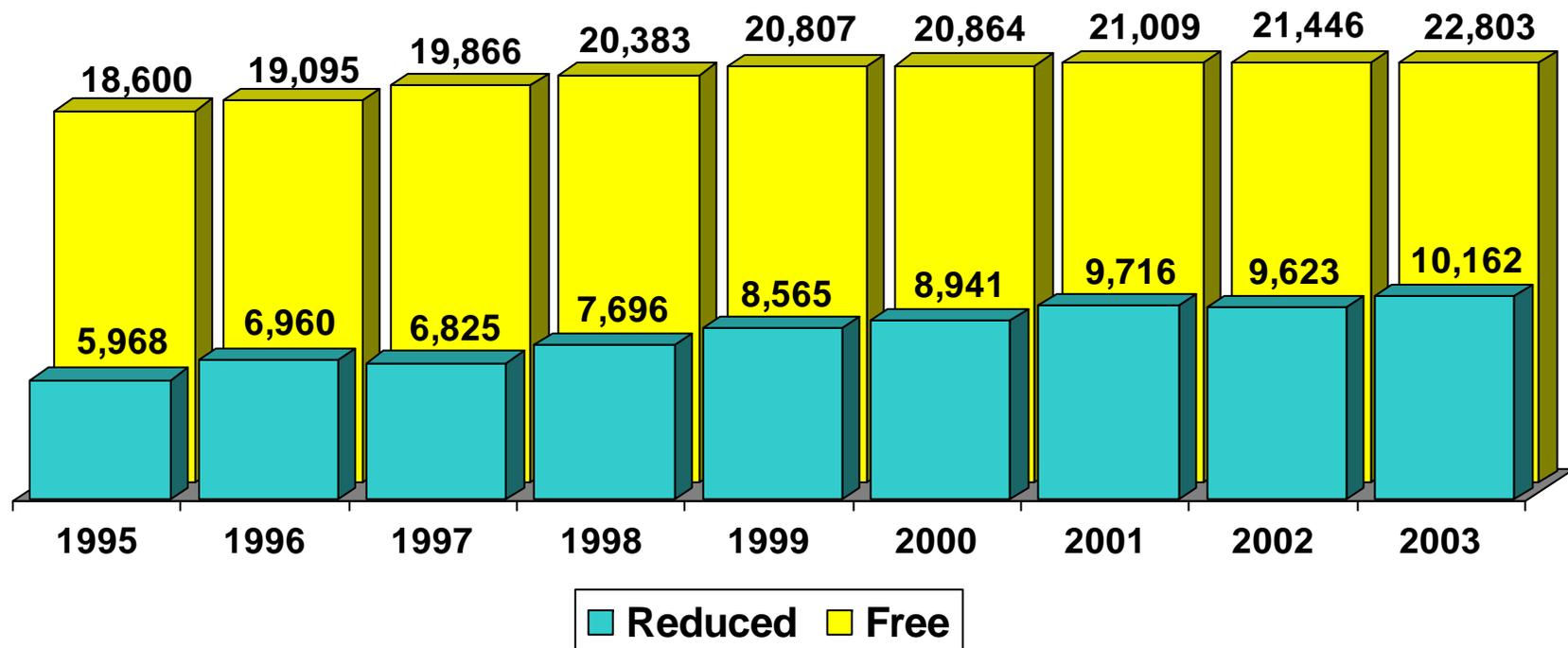


Source: Fairfax County Department of Family Services, Office for Children.
Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.

Children Approved for Free and Reduced School Lunches

JUNE 1995 to 2003

- Of the over 162,300 children enrolled in the Fairfax County Public Schools in June 2003, more than 1 out of every 5 children (20%) were approved for free or reduced-price lunches on the basis of their family's income.



Source: Fairfax County Public Schools.
Includes Fairfax County and the City of Fairfax.

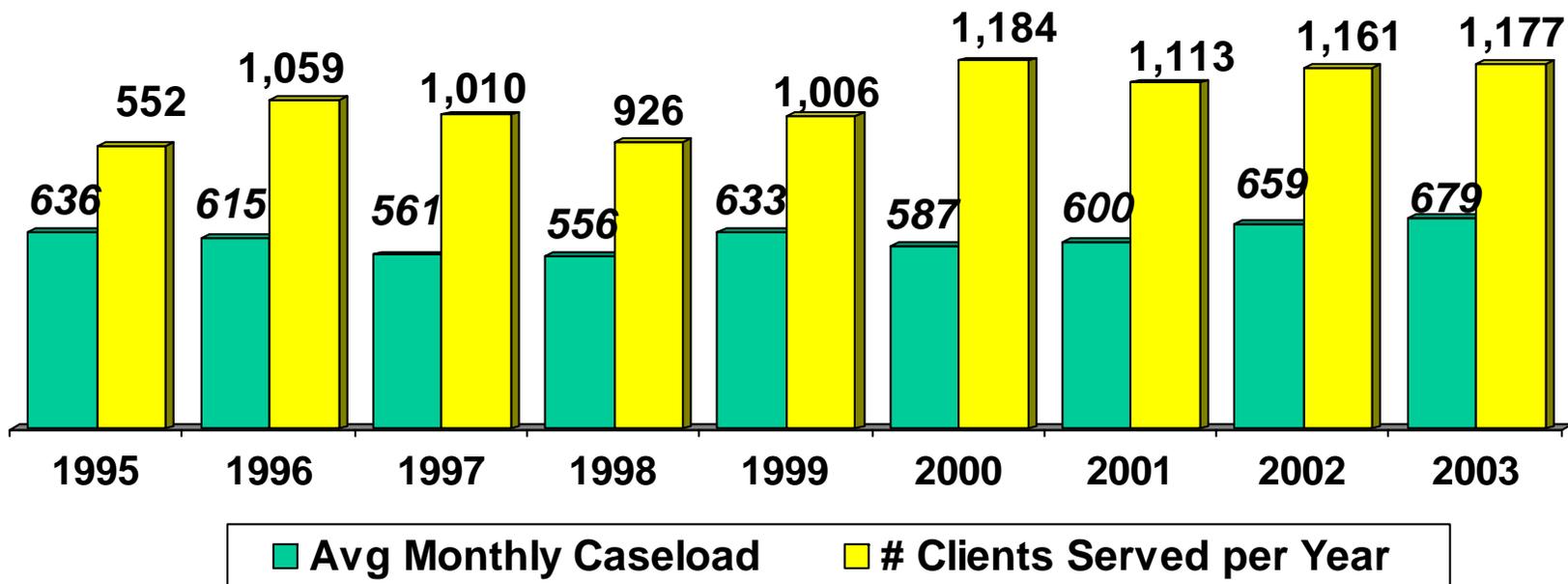
Family Self-Sufficiency Program

- Family Self-Sufficiency (FSS) is a HUD initiative which combines Section 8 and Public Housing subsidy programs with support services provided by local jurisdictions/housing authorities to assist families in achieving independence from all welfare and federal subsidy programs over a five-year period.
- FSS allows families who enroll and sign a contract to benefit from increases in employment income. As employment income increases, the housing authority creates interest-earning escrow accounts, equal to the increase in rent which resulted from increased earnings, that provide a “nest egg” for use in moving off subsidy programs. Participants receive the escrow funds upon successful completion of their contract.
- As of October 2003, 10 Section 8 tenants and 4 Public Housing tenants participate in the FSS program. **To date, 83 families have graduated from the program.***
- FSS has been essentially an unfunded mandate which has impacted the ability to serve larger numbers of participants. HCD recently received a small grant (\$20,000) from HUD which will be used to increase enrollment in the program.

Home Based Care: Monthly Caseload and Clients Served

FISCAL YEARS 1995 to 2003

- Home Based Care provides homemaker and companion services for elderly persons and adults with disabilities who live alone or with family members, preventing costly and inappropriate institutionalizations. Ninety percent of Home Based Care clients are 60 years of age or older.

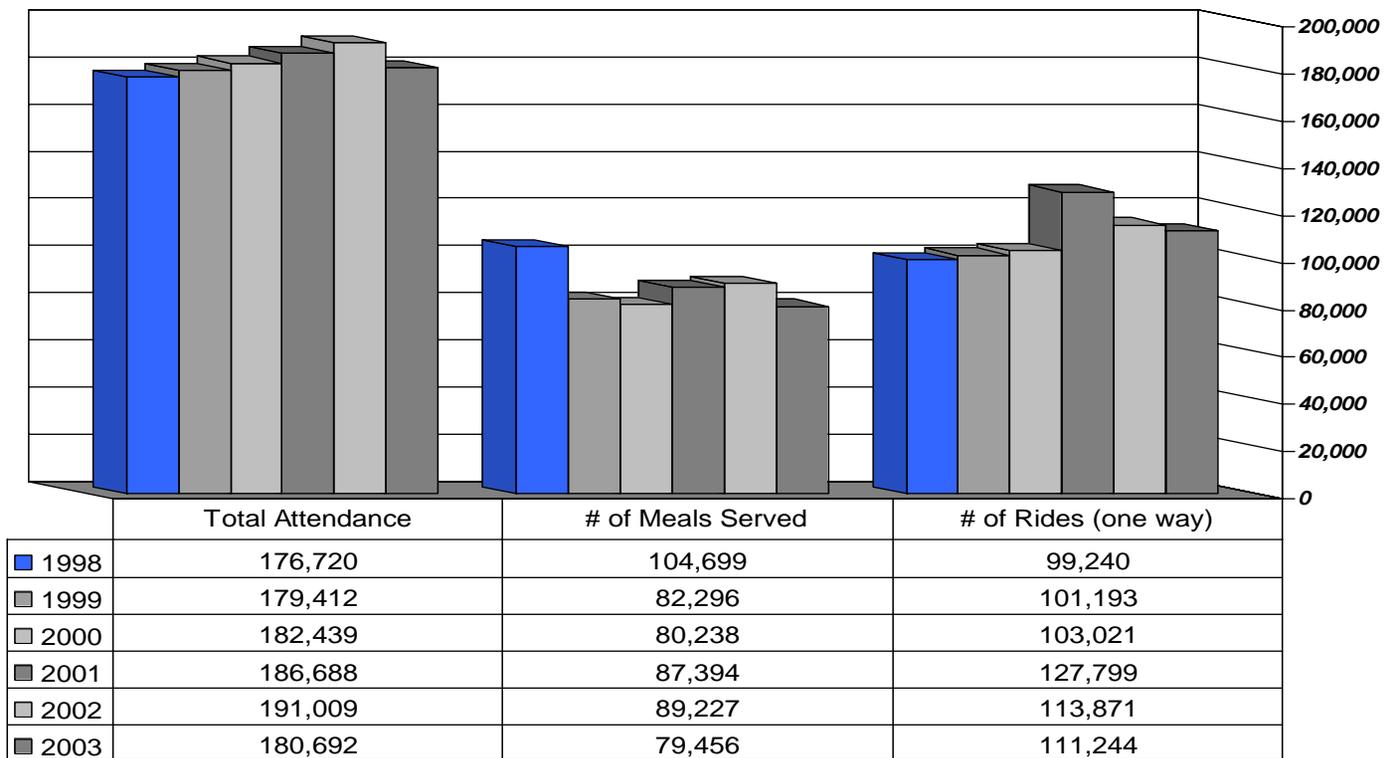


Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Senior Centers: Operations and Meals Served

FISCAL YEARS 1998 to 2003

- There are 13 Senior Centers located throughout the County which provide community services, noon time meals, transportation, opportunities to socialize, and a variety of activities for senior citizens.



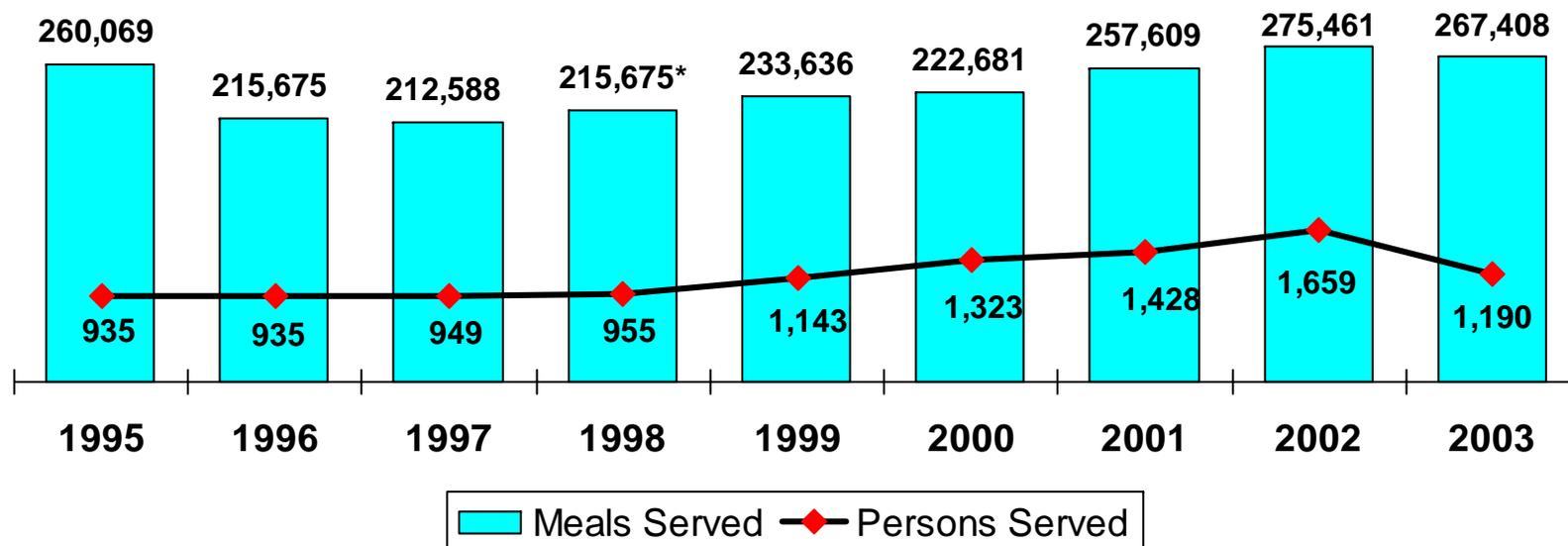
NOTE: Attendance and number of meals served are variable each year due to cancellation days for snow and ice. Number of meals served reflects only meals served at Senior Centers.

Source: Fairfax County Department of Community and Recreation Services. Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Home Delivered Meals Program: Persons and Meals Served

FISCAL YEARS 1995 to 2003

- The Home Delivered Meals program provides nutritious hot meals to home-bound seniors. In recent years, the program has also offered liquid meal supplements (e.g., Ensure) as well as hot food. Need for the program exceeds the County's ability to provide services.



* The decrease in FY 96 is due to changes in state guidelines for counting liquid supplements as meals.

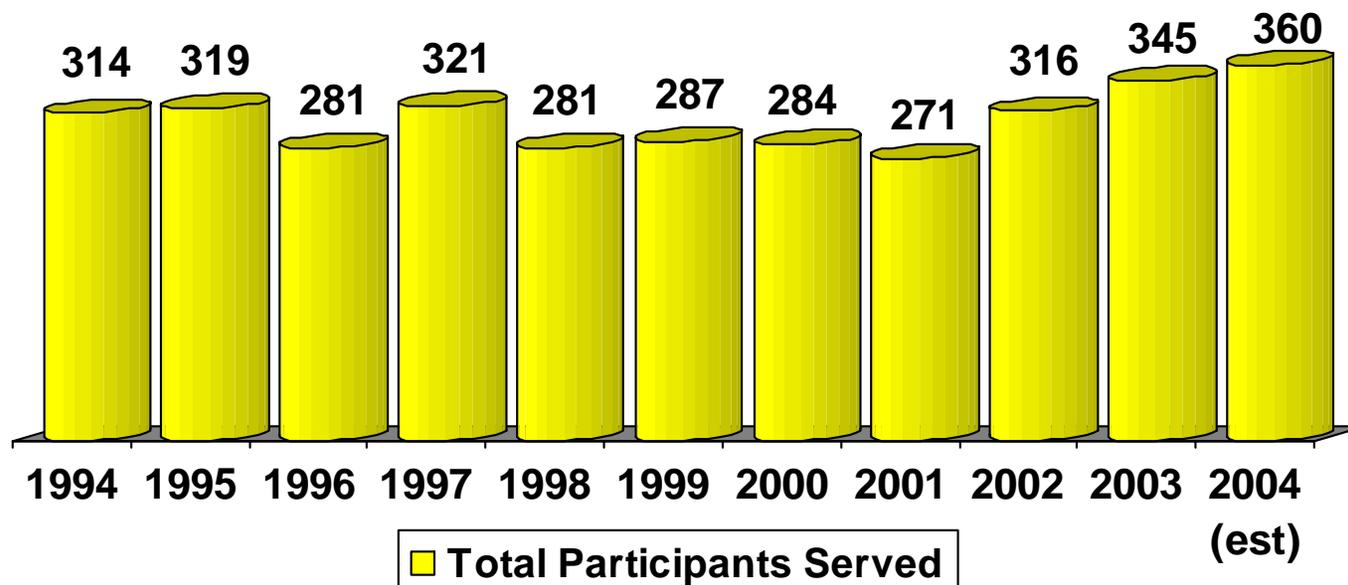
** FY2003 decreases reflect changes in data collection methods.

Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.

Adult Day Health Care: Number of Participants Served

FISCAL YEARS 1994 to 2004 (estimate)

- The County currently has five Adult Day Health Care Centers: Annandale, Lewinsville, Lincolnia, Mount Vernon and Herndon Harbor. The Little River Glen Center is scheduled to open in mid-2005.
- There is a growing need for long-term care options in Fairfax County. Between 1995 and 2000, the number of persons over age 85 is estimated to have increased by 32%. By 2010, it is estimated that there will be a 150% increase in this age group.

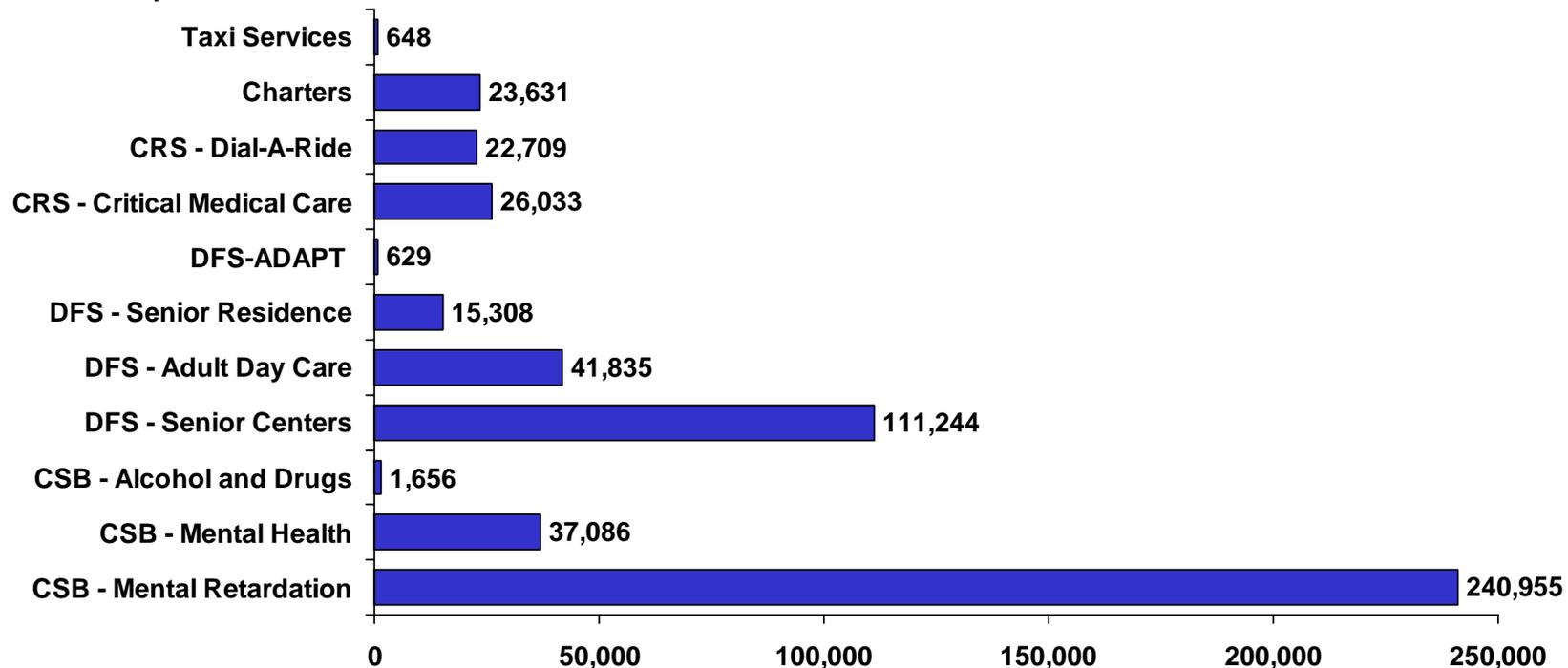


Source: Fairfax County Health Department.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Transportation for Human Services Programs: Fastran and Ridership (One-Way Rides)

FISCAL YEAR 2003

- Fastran provides door-to-door transportation for residents with physical and cognitive disabilities and for senior citizens. The program serves those who have no other means of access to programs and services sponsored by Human Services, and complies with the Americans with Disabilities Act (ADA). The program provided over 521,734 rides in FY 2003.

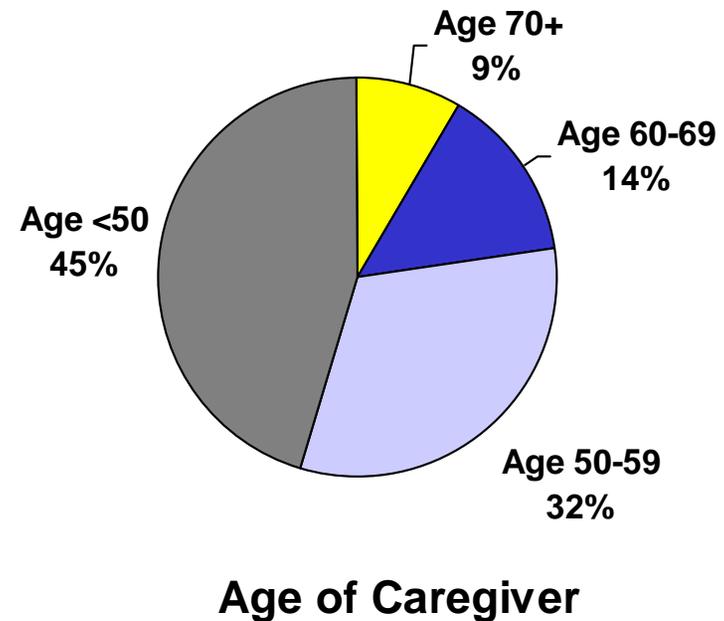
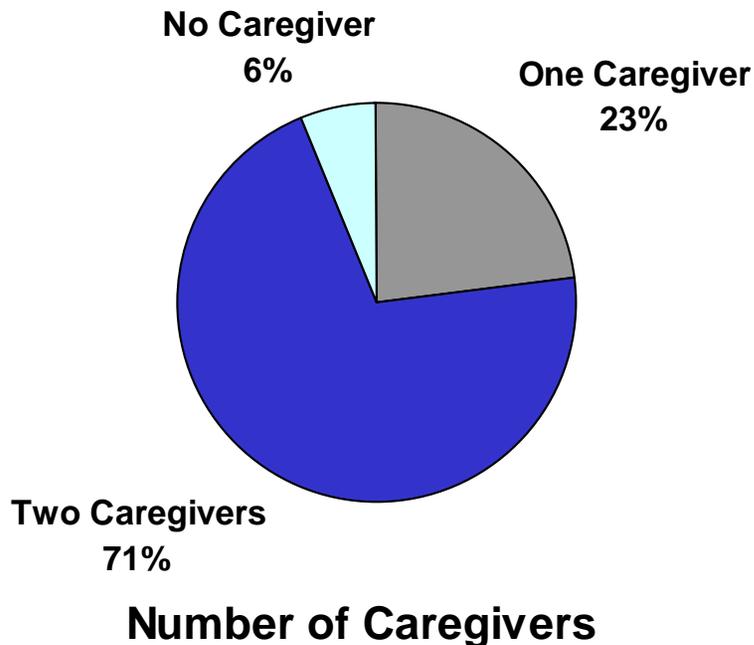


Source: Fairfax County Department of Community and Recreation Services.
Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.

Mental Retardation: Waiting List for Residential Services

BASED ON FISCAL YEAR 2004 DATA

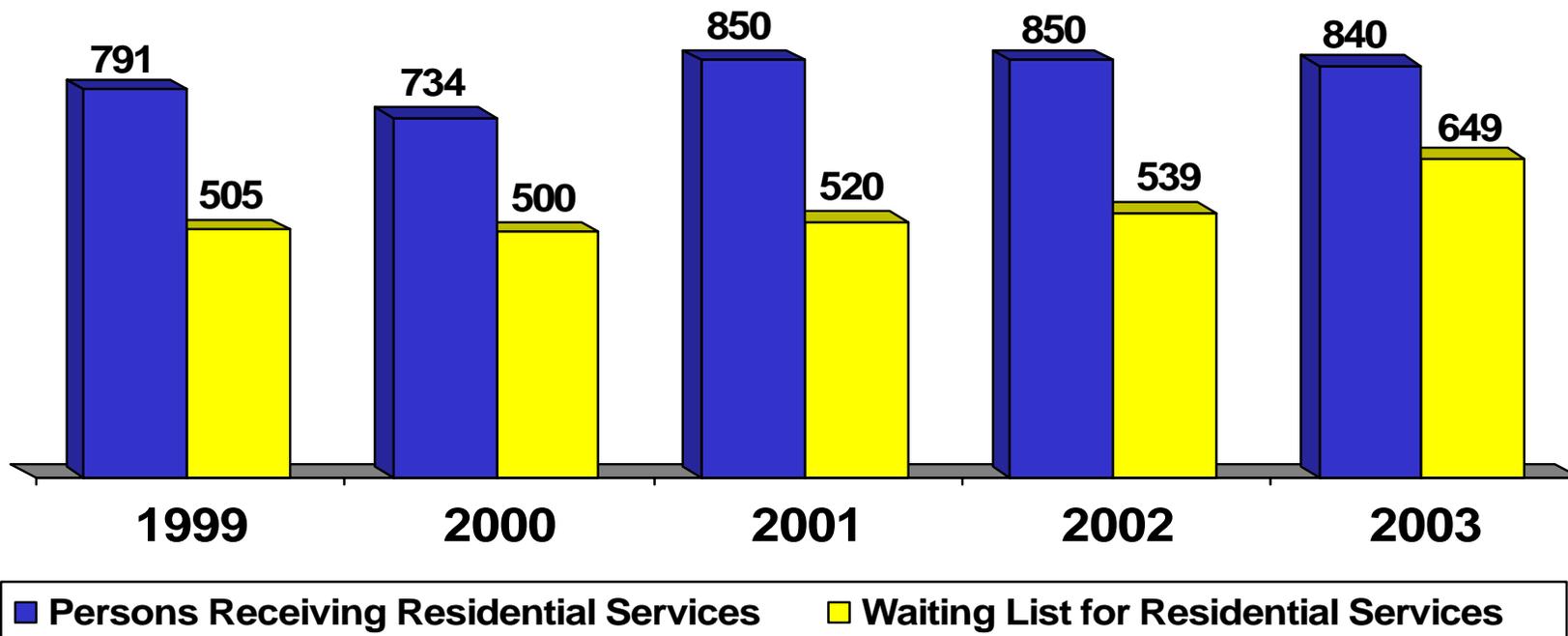
- There are 716 individuals waiting for placement in a residential setting.
- In 23% of the cases, these individuals are living with only one caregiver. In 16% of those cases, caregivers are over age 70.
- 47% of individuals on the waiting list who are living with their families are in a “high-risk” situation; that is, the family feels they cannot continue with their current care arrangement.



Mental Retardation: Residential Services

FISCAL YEARS 1999 to 2003

- Residential Services includes group homes, supported apartments, sponsored placements, domiciliary care, and supported living arrangements. The waiting list reduction in 1995 was due to an increase in capacity and a review of the residential needs of persons on the waiting list.

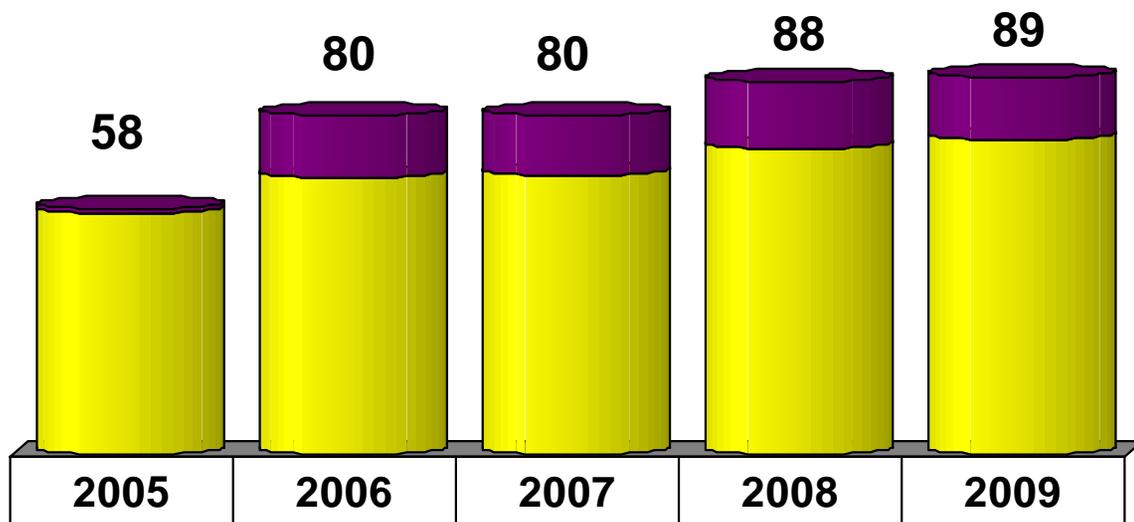


Source: Fairfax-Falls Church Community Services Board.
Note: Persons served included persons funded with Medicaid waiver.

Special Education Graduates Entering Mental Retardation Services

PROJECTIONS FOR FISCAL YEARS 2005 to 2009

Total Number of Graduates



	2005	2006	2007	2008	2009
■ Case Management Only*	1	15	14	16	15
■ Vocational & Case Management**	57	65	66	72	74

* These consumers do not require CSB funding for Vocational Services upon graduation.

** These consumers require funding for both Vocational Services and Case Management upon graduation.

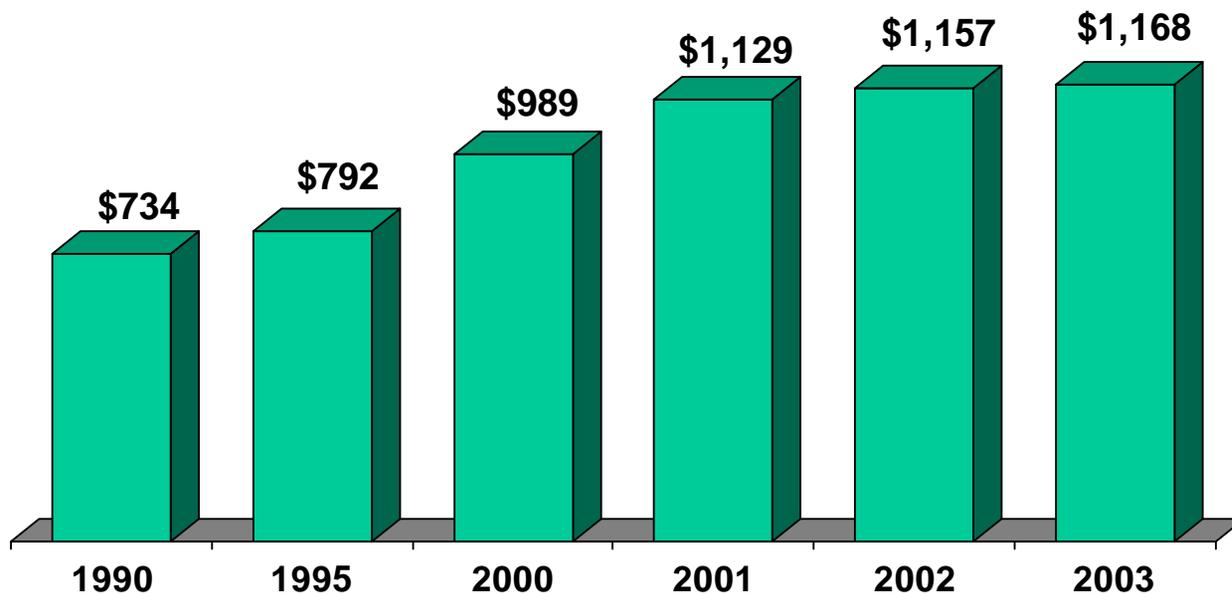
Source: Fairfax County Public Schools (Projections as of Fall 2003).

Fairfax County Human Services: Response to Challenges in the Community

- **Challenge 2:**
Ensuring the Availability of Safe, Affordable Housing
- **Quality of Life Statement:**
Fairfax County is a community that has quality housing opportunities for families and individuals in all income ranges.
- **Action Statement:**
Take affirmative steps to preserve and increase the availability of housing opportunities that are affordable to persons with low to moderate incomes.

Average Monthly Rental Complex Rates in Fairfax County 1990 - 2003

- Between 1990 and 2003, the average monthly rent charged by rental complexes in Fairfax County increased by almost 60%. The average monthly rental complex rent has increased by 18% in the last three years.
- In 2002, more than two-thirds (67.1%) of all Fairfax County renters paid \$1,000 or more per month, compared to only 15.6% of renters nation-wide.
- In Fairfax County, 37% of renters spent 30% or more of their 2002 income on housing.



Source: U.S. Bureau of the Census, 2002 American Community Survey and Department of Systems Management for Human Services, *2003 Rental Housing Complex Census Analysis*.

Affordable Rental Housing: Public Housing, Section 8 and FCRP

- The Fairfax County Redevelopment and Housing Authority (FCRHA) owns and operates **1,064** public housing units at 31 locations across the County, including both multifamily and townhouse communities.
 - No new units have been added since 1997 nor are any anticipated in the future.
- The FCRHA also owns **1,690** units under its Fairfax County Rental Program (FCRP) for low and moderate income persons including:
 - 1,085 units of family housing
 - 20 units at the Coan Pond for working single persons
 - 408 units of senior housing
 - 177 units/beds in Group Homes
- The FCRHA also administers **3,146** Section 8/Housing Choice Vouchers, plus another 300 Portability Vouchers, that provide rental assistance to families and individuals living in privately owned units in the County.
 - 470 new vouchers have been received since 2001; however, reductions in funding for the program are anticipated by HUD for the next fiscal year.
 - The program has been fully leased for the past year.

Affordable Rental Housing: Private Sector

FEDERALLY ASSISTED

- There are also approximately 3,115 privately-owned federally-assisted rental housing units that were developed to serve low income families, the elderly, persons with disabilities, and single individuals.
 - Between 1997 and 2002, a total of 1,030 units of affordable housing were lost in the County, primarily due to expiring subsidies on federally assisted projects.

TAX CREDIT, BOND FINANCED, AFFORDABLE DWELLING UNIT (ADU) OR OTHER ASSISTED

- There are approximately 4,700 units of affordable housing where rents are considered affordable due to tax credit and/or financing provisions. These include:
 - 3,913 tax credit/bond financed units (Tax credits are the major source of funding for multifamily affordable rental housing today.)
 - 762 rental units produced to date as a result of the Affordable Dwelling Unit (ADU) Ordinance
 - 65 units proffered by developers

Waiting Lists for Assisted Housing

- In January 2004, there are 3,901 households on the FCRHA waiting lists for Public Housing, Section 8/Housing Choice Voucher, and the Fairfax County Rental Program.
 - That number is expected to increase significantly when waiting lists for the Public Housing and Housing Choice Voucher program re-open on Wednesday, **March 10, 2004**. The waiting list has been closed since April 2002.
 - Of the 3,901 households on the waiting list, a total of 2,058 households (52.7%) reported that they were employed or in training
 - 1,933 households (49.5%) are paying more than 30% of their gross income for rent
 - 14.1% have an elderly head of household or spouse
 - 22.7% of households have a member living with disabilities
 - The number of households on the waiting list who do not speak English or for whom English is a second language has been increasing.

HCD Housing Initiatives

- **Preservation Loan Fund**
 - Established in 2003
 - A new lending tool for nonprofit developers which provides a revolving loan fund to assist nonprofit developers preserve existing affordable housing in the County
 - Up to \$1 million available
- **Affordable Housing Partnership Fund**
 - A special fund within the Housing Trust Fund to assist nonprofits and for-profit developers seeking to build or preserve affordable housing in the County
 - Has been used to produce units for Habitat for Humanity, Wesley Housing, and other nonprofits
- **Magnet Housing**
 - A new concept in affordable housing – in the planning stages
 - Will provide low cost, temporary affordable housing in a focused living and learning environment while participants seek training and career advancement opportunities.
- **Senior Housing**
 - To meet the growing need for the fastest growing segment of the County's population, HCD has developed 408 units of senior housing. Gum Springs Glen opened in May 2003, adding 60 new affordable apartments to the housing stock. Private investment played a major role in the financing of this project.

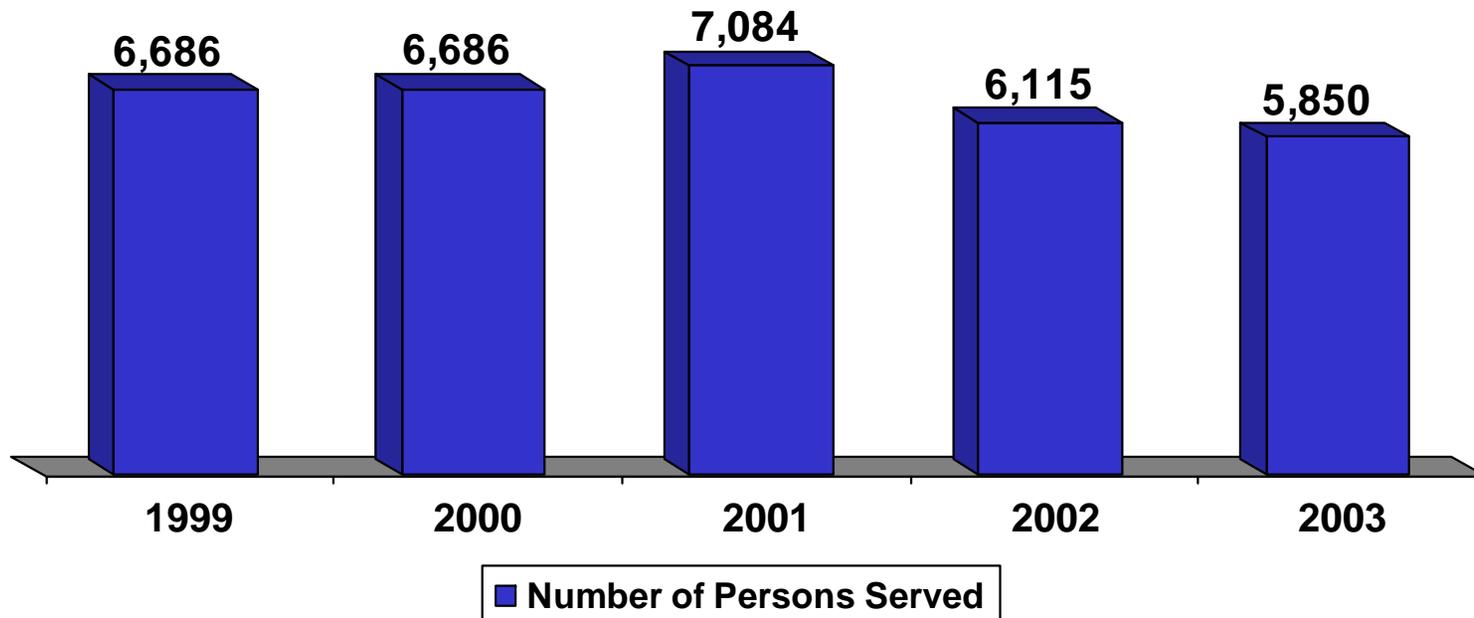
Fairfax County Human Services: Response to Challenges in the Community

- **Challenge 3:**
Supporting Families and Individuals in Crisis; Preventing Abuse and Neglect
- **Quality of Life Statement:**
Fairfax County is a community that promotes family and individual stability, in which all people are free from financial, emotional, or physical crises. It is a community in which all people are safe from abuse, neglect and exploitation.
- **Action Statement:**
Provide crisis intervention, stabilization and support services to prevent or alleviate financial, physical, or emotional crisis. Prevent the incidence of and protect people of all ages from harm due to abuse, neglect, and exploitation.

Mental Health Emergency Services: Persons Served

FISCAL YEARS 1999 to 2003

- Mental Health Emergency Services includes General Emergency Services, Independent Evaluators, Forensic Services and the Mobile Crisis Unit . The number of persons served has been affected by staffing patterns and by having after-hours coverage for the southeastern County provided through a contract with Inova Mount Vernon Hospital.
- While there has been an overall decrease in the number of persons served, services provided by the Mobile Crisis Unit have increased by 18% since FY 2001.

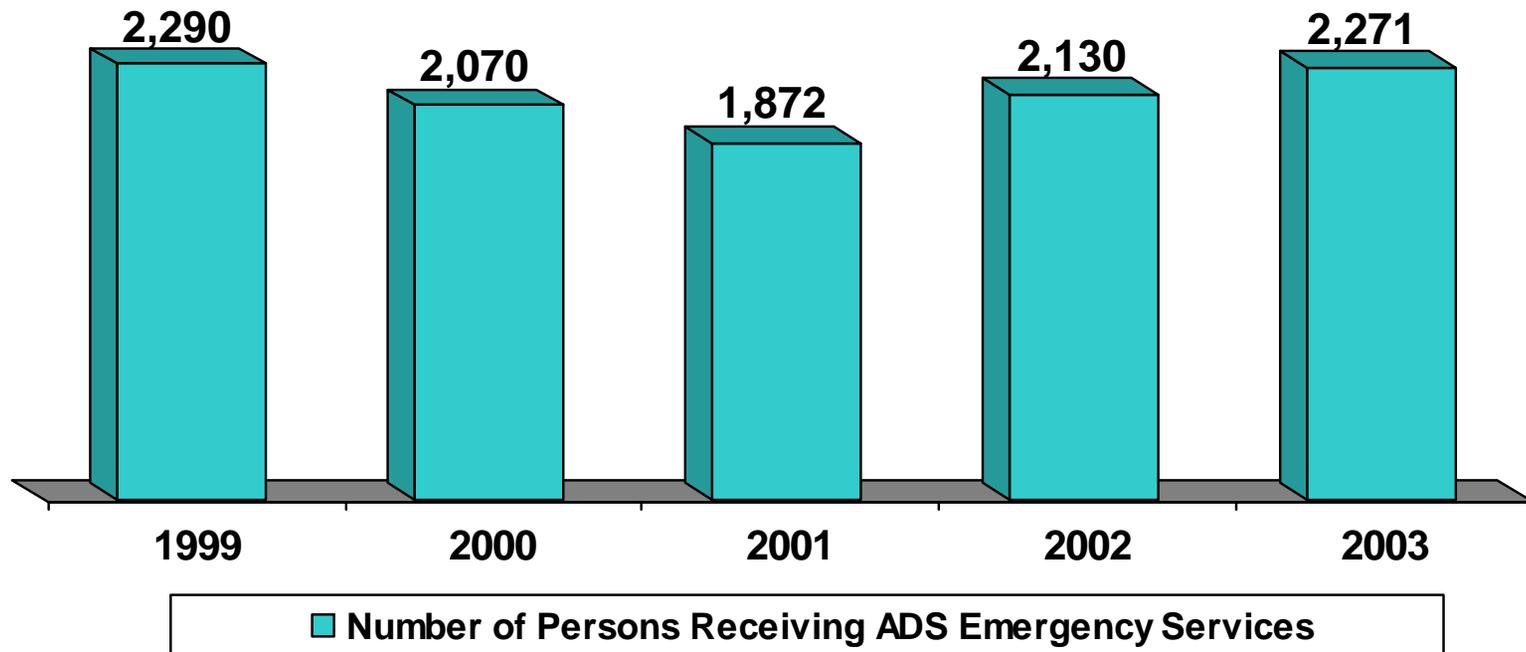


Source: Fairfax-Falls Church Community Services Board.

Alcohol & Drug Emergency Services: Persons Served

FISCAL YEARS 1999 to 2003

- The number of persons served in ADS Emergency Services increased in FY 1999 as a result of Welfare-to-Work grant services, which ended in FY 2000.
- In FY 2002 and FY 2003, Emergency Services experienced increased demand for services as a result of post-9/11 stressors.

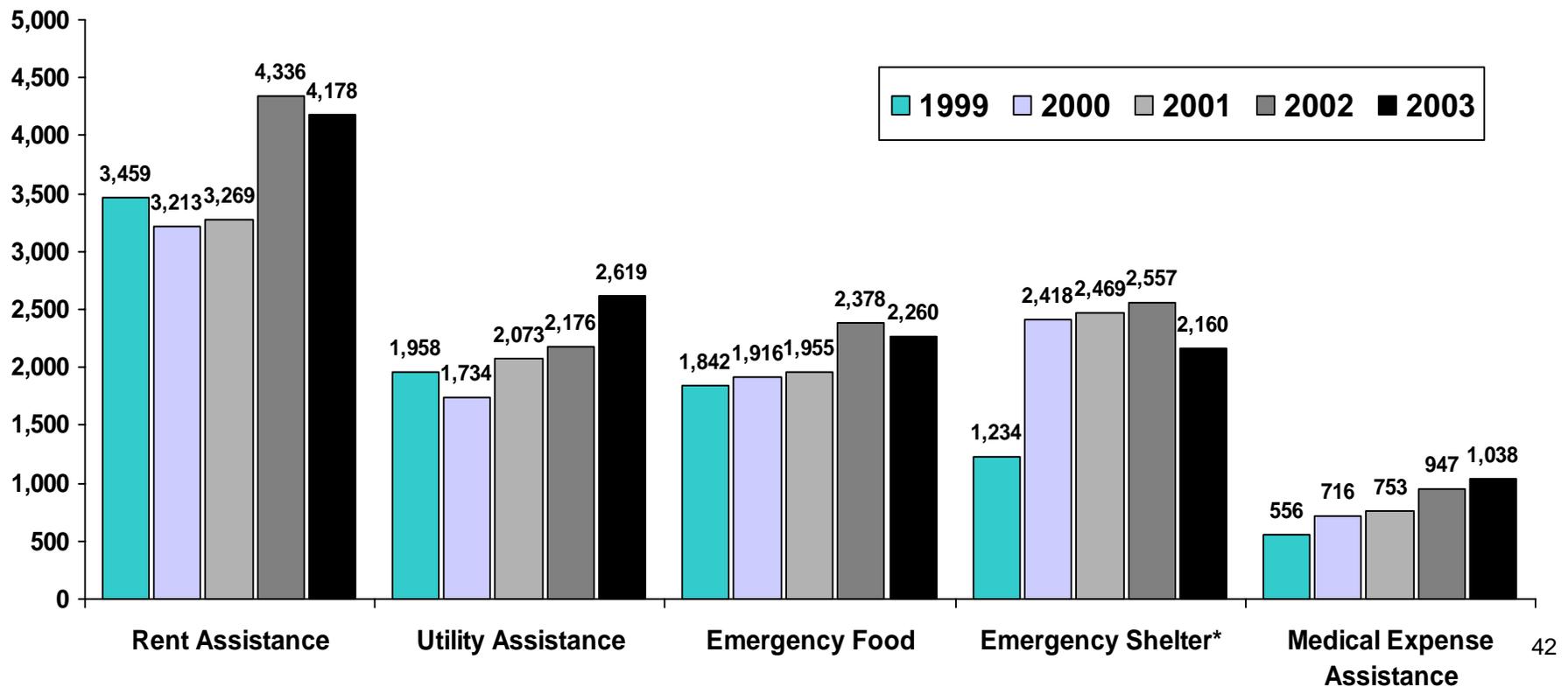


Source: Fairfax-Falls Church Community Services Board.

Coordinated Services Planning: Emergency Assistance with Basic Needs

FISCAL YEARS 1999 to 2003

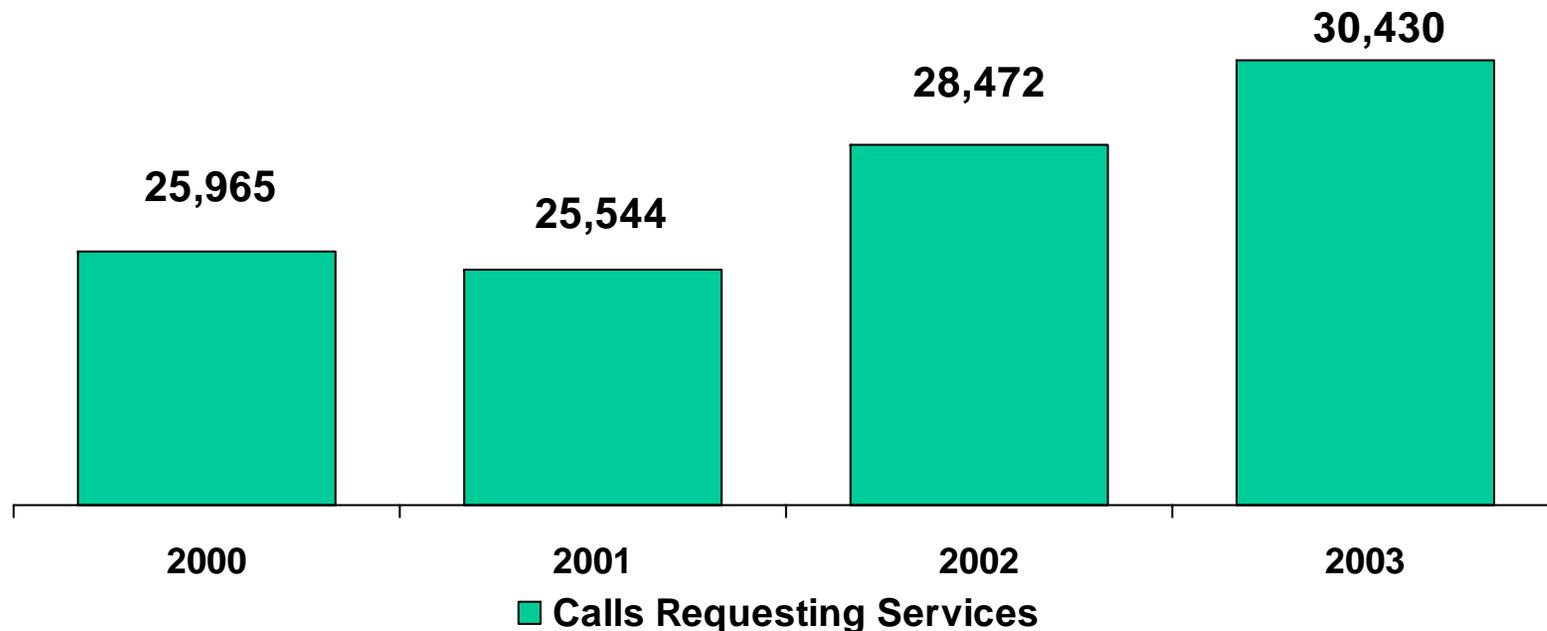
- In FY 2000, Coordinators answered nearly 61,000 calls to the Human Services number (222-0880), representing nearly 29,000 requests for assistance. Coordinators assist clients by providing broad-based assessments and linkage to community-based and County services with a focus on prevention and self-sufficiency. The types of requests for crisis assistance listed below represent almost 40% of the total types of requests received by CSP.



Source: Department of Systems Management for Human Services.

Mental Health Entry and Referral Services Calls per Year Requesting Services FISCAL YEARS 2000 - 2003

- MH Entry and Referral Services is the single point of contact for all initial requests for mental health services, providing screening, appointment scheduling or referrals for over 30,000 calls in FY 2003. There was an 11% increase in calls from FY 2001 to FY 2002, at least in part due to the impact of 9/11, with an overall increase of 19% from FY 2001 through FY 2003.
- An increasing number of callers are identifying issues related to co-occurring disorders of mental illness and substance use.

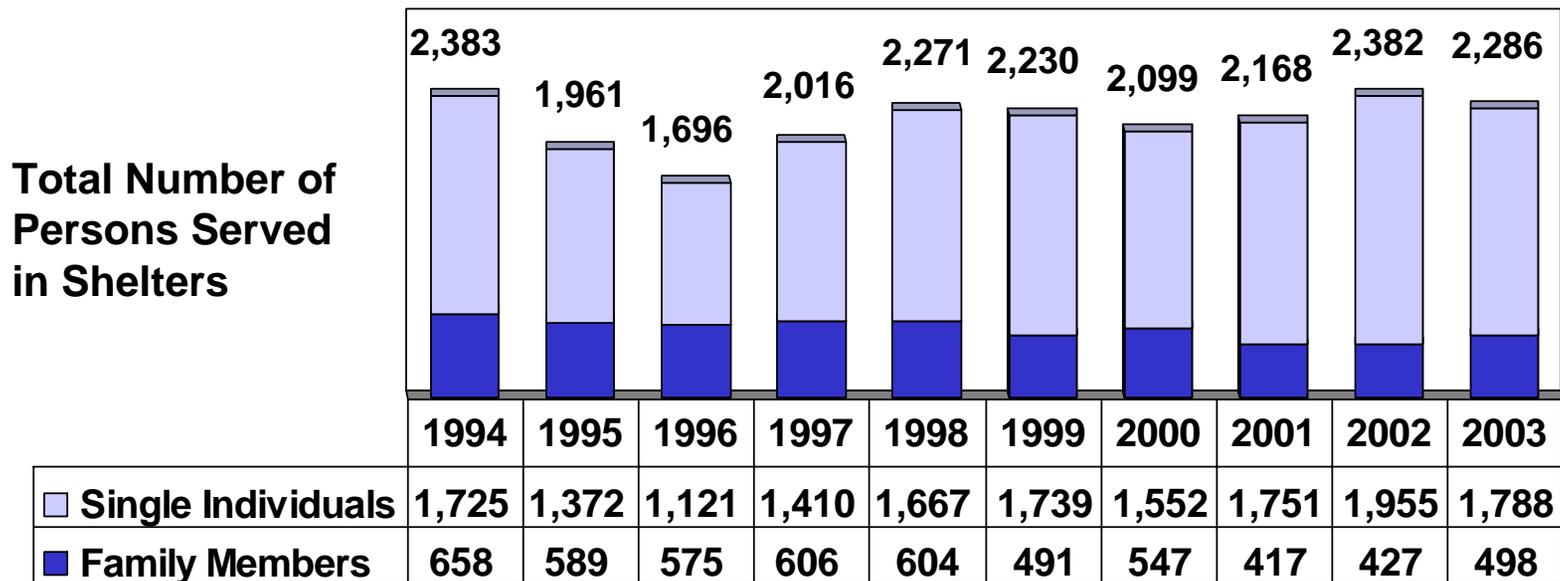


Source: Fairfax-Falls Church Community Services Board.

Services to the Homeless: Number of Persons Served in Shelters

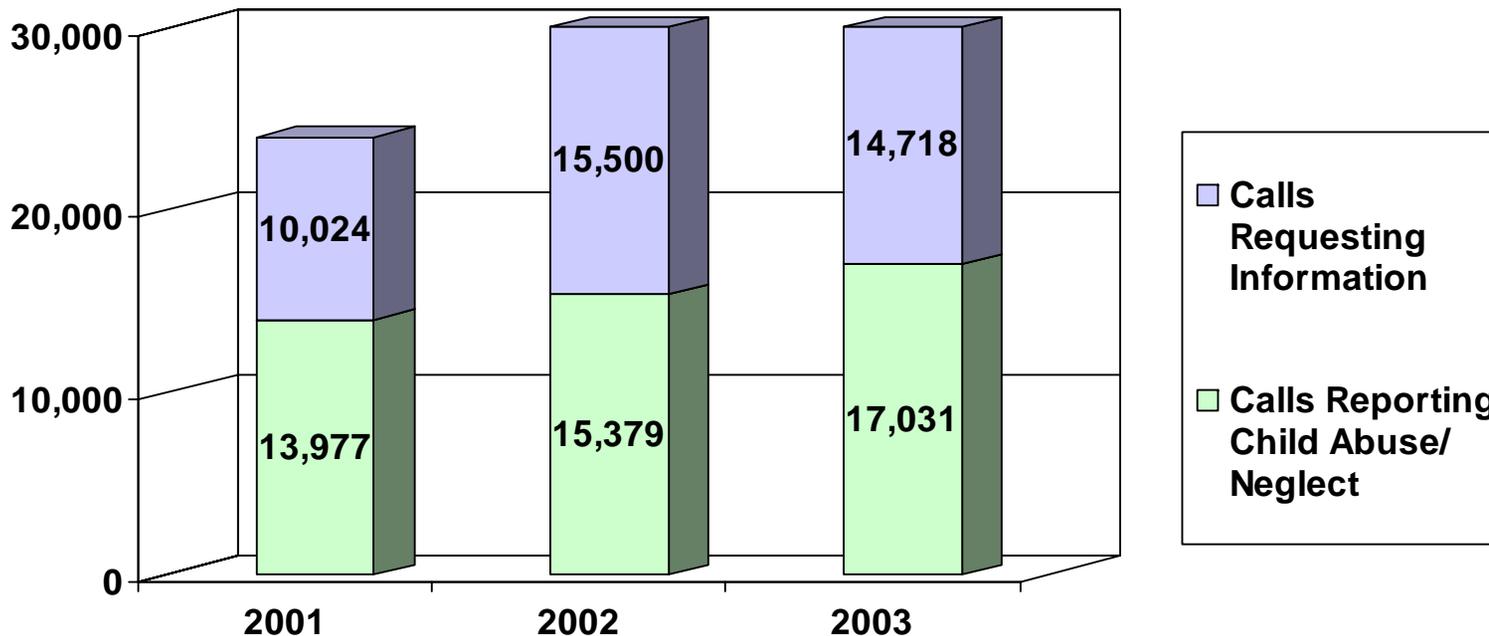
FISCAL YEARS 1994 to 2003

- Homelessness affects both single individuals and families with children. According to the January 2003 Point-in-time survey, 39% of the total homeless population are children.



Child Protective Services: Number of Child Abuse & Neglect Hotline Calls per Year FISCAL YEARS 2001 to 2003

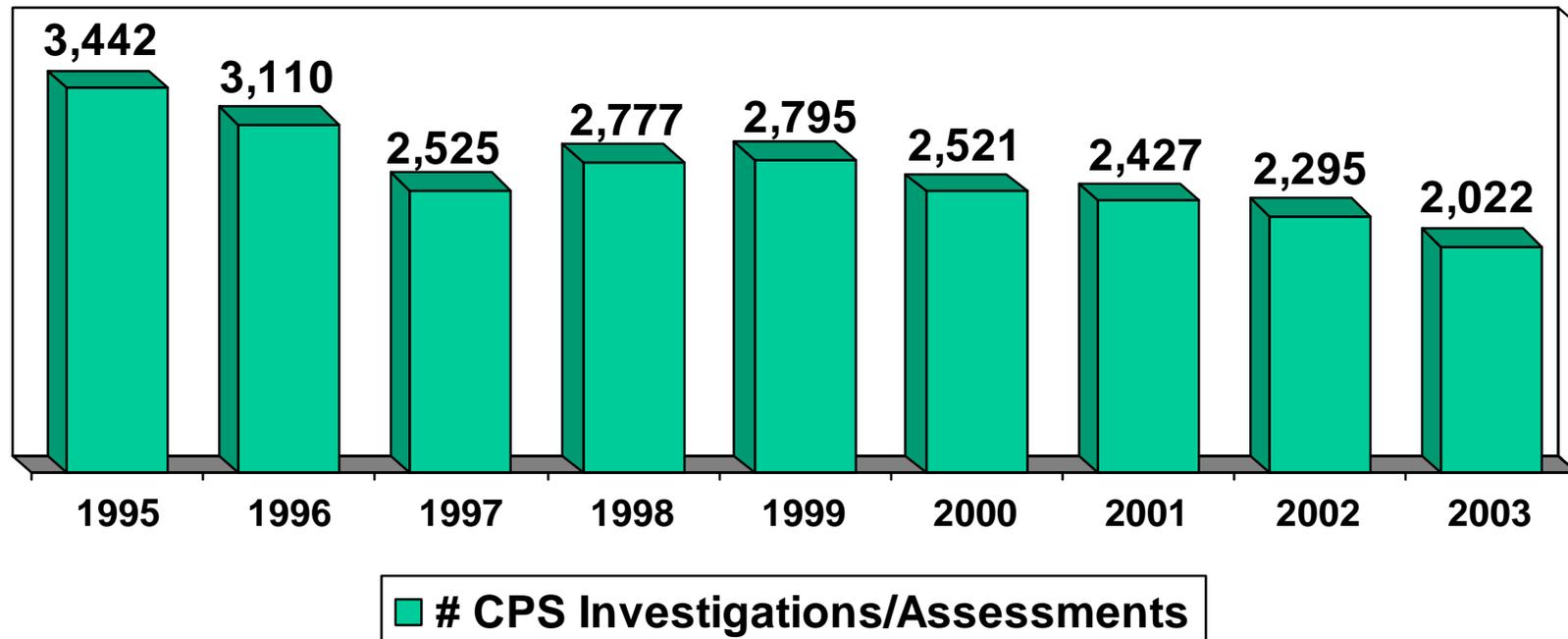
- The CPS Hotline receives calls reporting potential abuse & neglect of children as well as other calls requesting information. Total calls increased by over 32% from FY 2001 to FY 2003.
- The rise in calls may be attributed to an increased focus on public outreach and education about child abuse and neglect.



Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Child Protective Services: Number of Investigations/Family Assessments per Year FISCAL YEARS 1995 to 2003

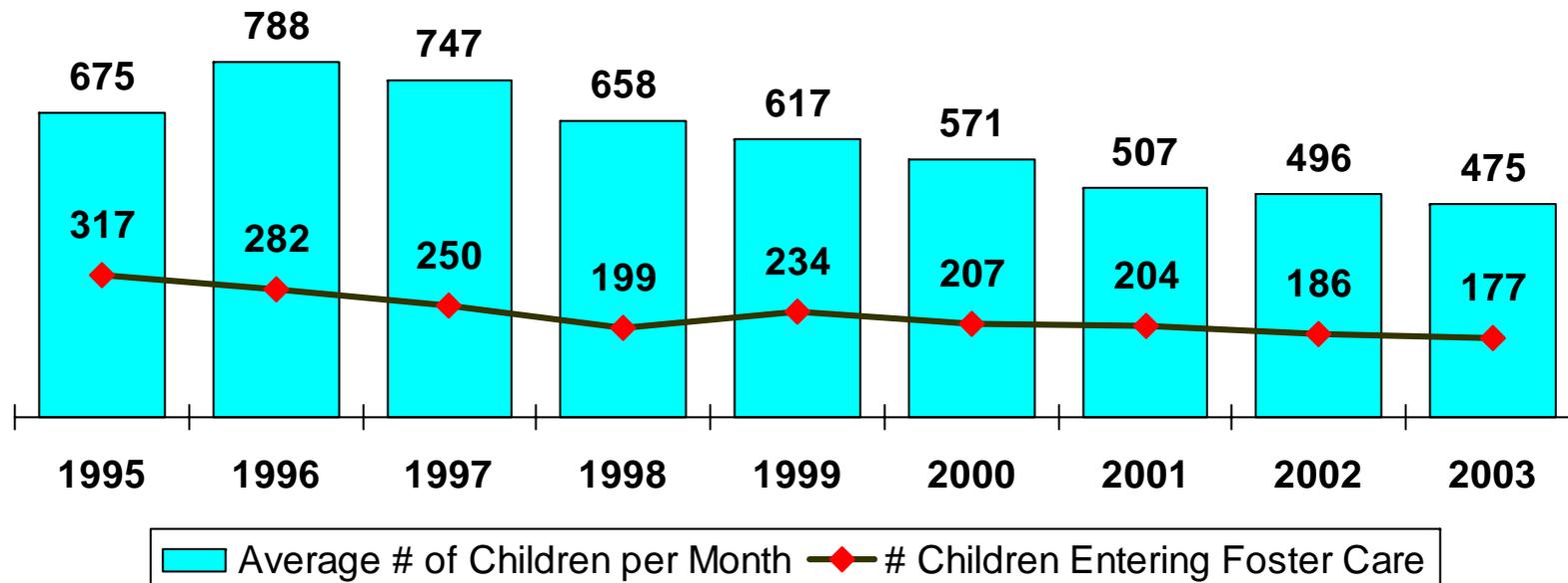
- CPS investigations & family assessments typically fluctuate from year to year without a predictable pattern. However, since FY 99, the number of investigations & family assessments has decreased steadily by a total of almost 28%.
- The downward trend may be due to increased prevention efforts as well as increased community supports to at-risk families.



Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Foster Care and Adoption: Average Number of Children in Care per Month FISCAL YEARS 1995 to 2003

- From FY 1996 to FY 2003, there has been a 40% decrease in the monthly average number of children in Foster Care. There has also been a steady decrease in the number of children entering care since FY 1999. The median length of time a child is in foster care has decreased from 2.5 years in FY 2000 to 2.04 years in FY 2003.
- These trends are the result of intensive prevention, early intervention efforts, and new legal requirements that strengthen permanency planning efforts for foster children and their families.

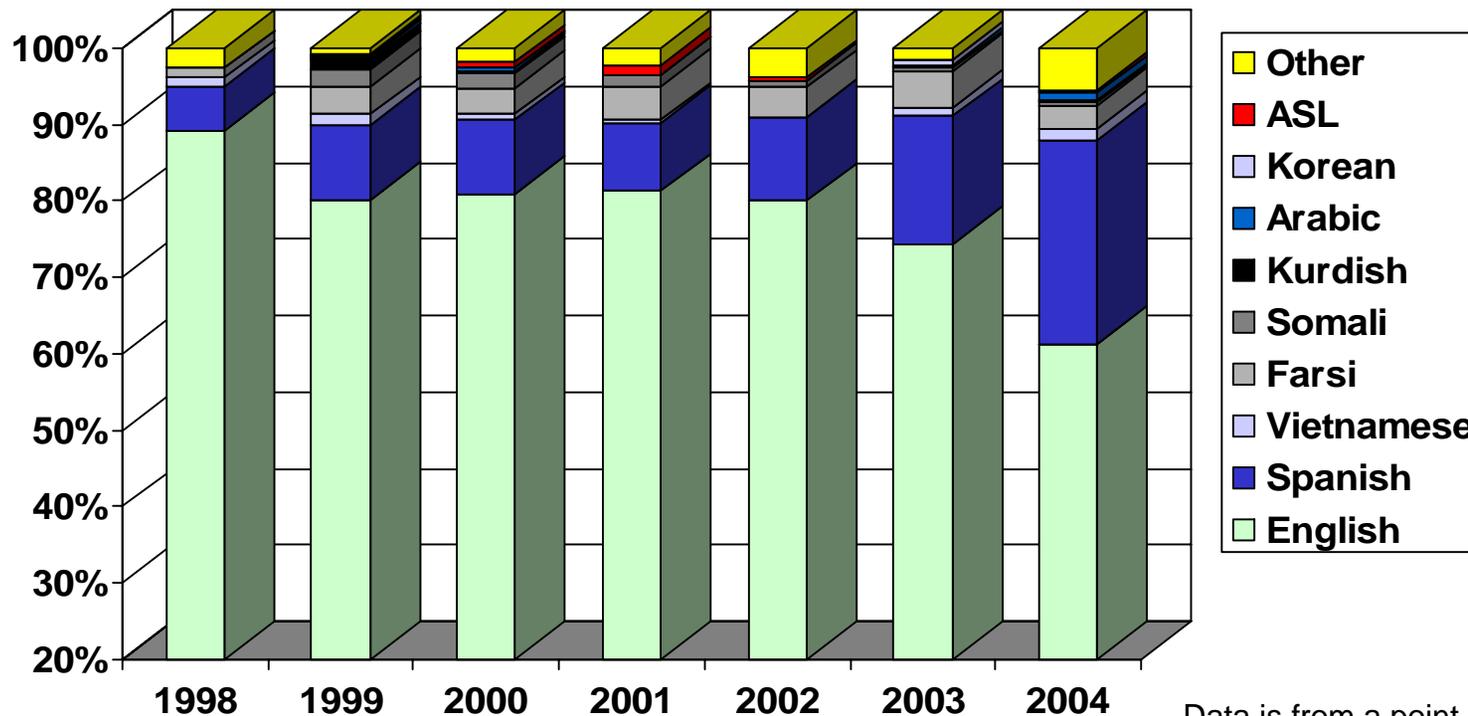


Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Family & Child Intensive Family Services: Languages Spoken in the Home of Families Served

FISCAL YEARS 1998 to 2004

- Family & Child serves families with children who are at high-risk for being abused or neglected.
- Each year, the diversity of the families served increases. The percentage of families who speak a language other than English in the home has increased from 11% in FY 1998 to 39% in FY 2004. A total of 288 families were served in October 2003.



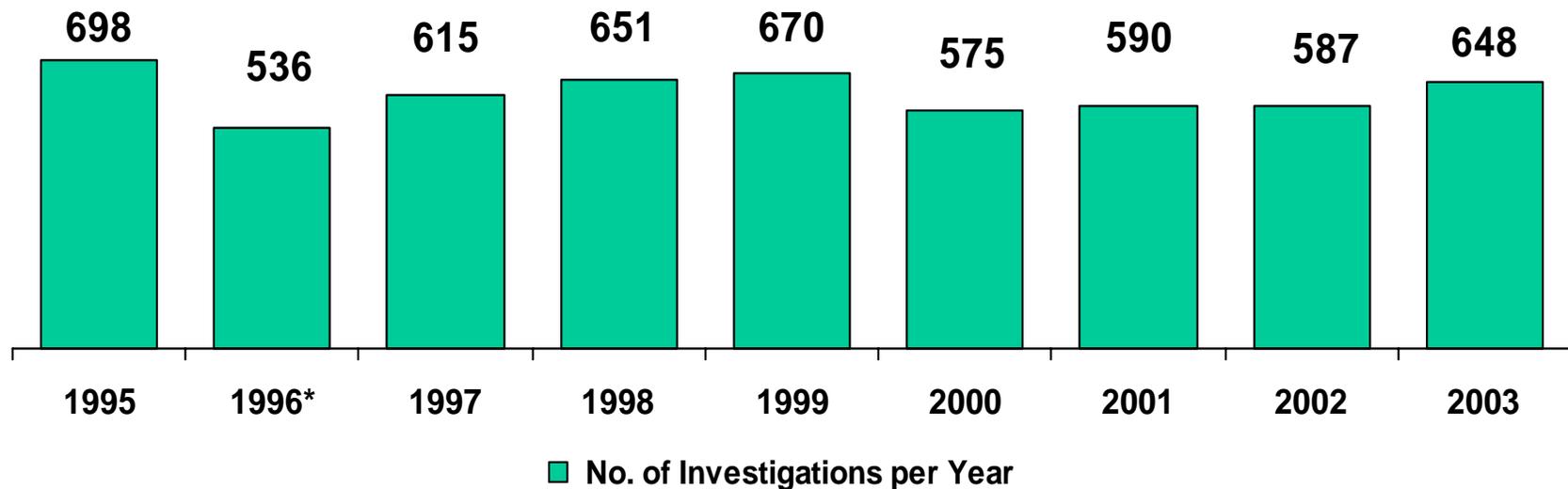
Data is from a point in time measure taken during October of each fiscal year.

Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Adult Protective Services: Number of Investigations per Year

FISCAL YEARS 1995 to 2003

- The typical APS client is elderly, white, female, and lives alone or with a relative. However, 17% of those referred were under the age of 60. These individuals have a range of disabilities or illnesses, including mental retardation, multiple sclerosis, head and spinal cord injuries and cancer.
- In FY 2003, 49% of the cases investigated resulted in a person needing protective services.



*The decrease in investigations conducted in FY 1996 was consistent with state-wide trends.

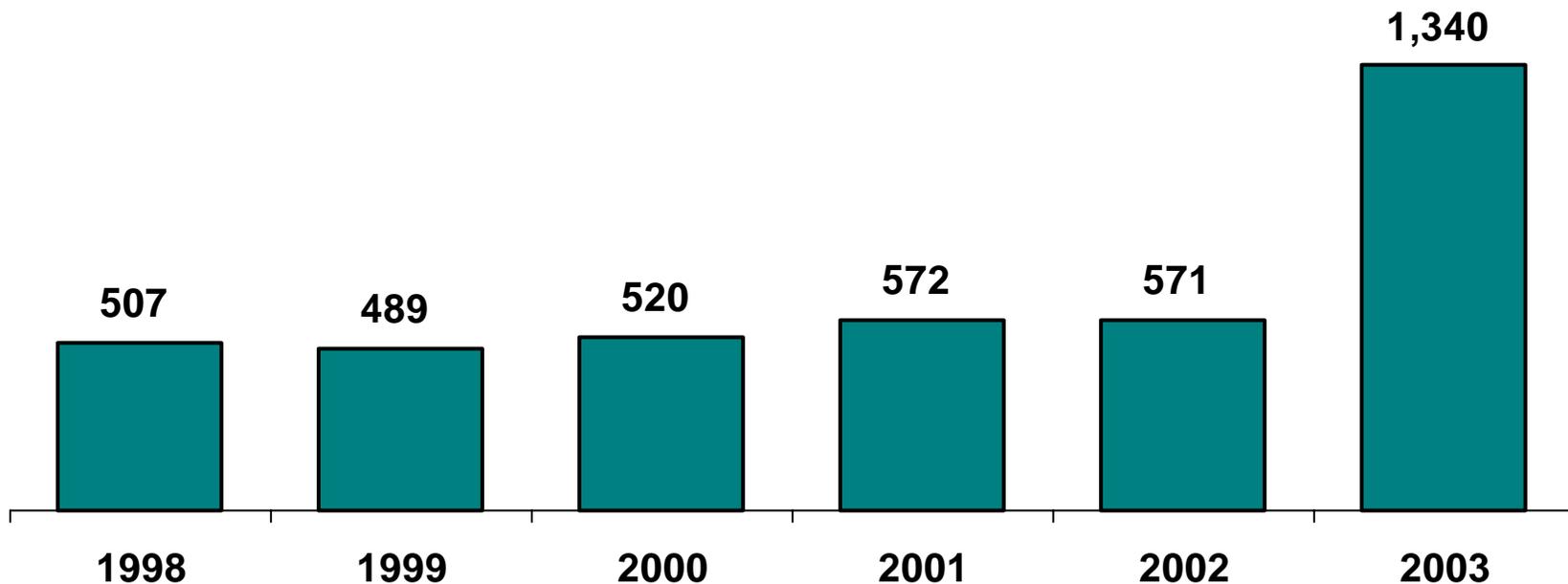
Fairfax County Human Services: Response to Challenges in the Community

- **Challenge 4:**
Threats to the Public Health
- **Quality of Life Statement:**
Fairfax County has a healthy community environment which is free of threats to the public health.
- **Action Statement:**
Provide protection from communicable diseases and environmental hazards, and provide related prevention services to improve the public health.

Communicable Disease Control: Communicable Disease Cases Investigated

FISCAL YEARS 1998 to 2003

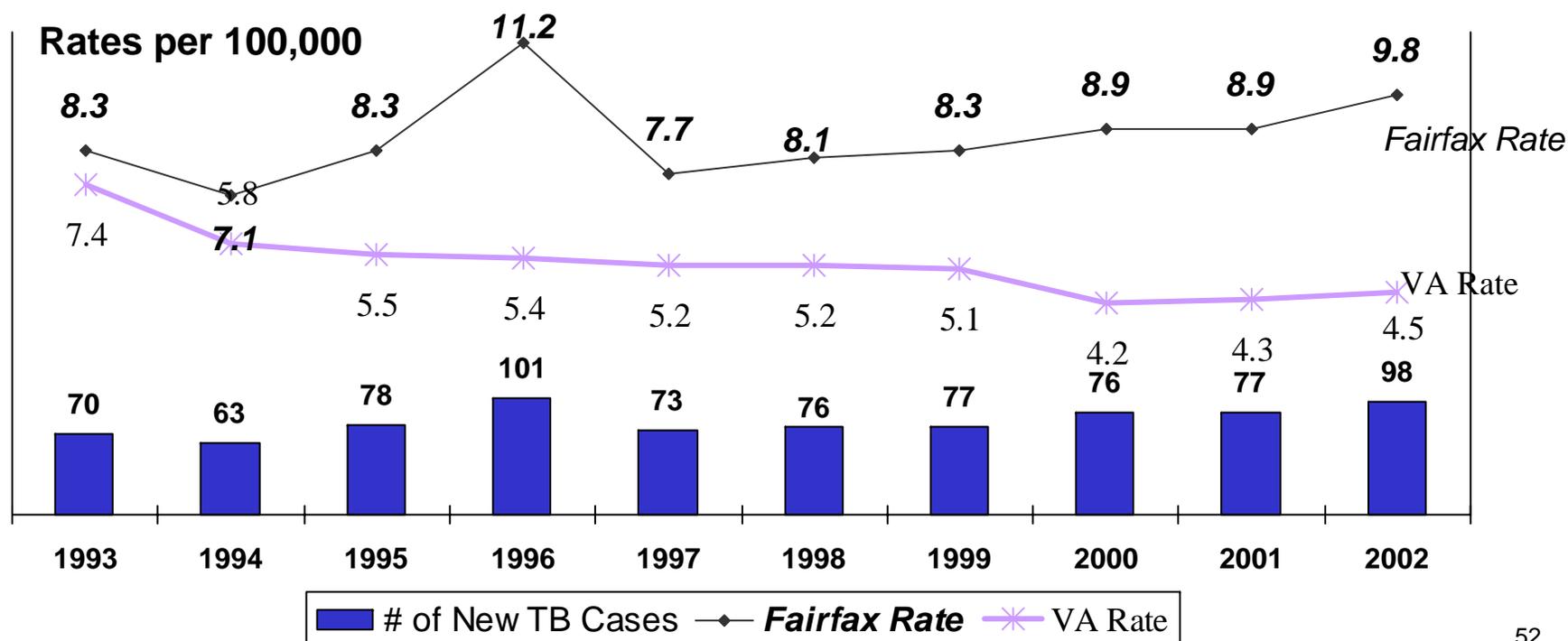
- Communicable disease investigations more than doubled in FY 2003 from previous years. Four major communicable disease outbreak investigations and new emerging infectious diseases account for this increase.



Communicable Disease Control: New Cases of Tuberculosis and Rates per 100,000

CALENDAR YEARS 1993 to 2002

- New Cases are persons diagnosed with active TB during the calendar year. The increase in cases in 1996 may reflect an improved reporting system. The increase in the 2000 and 2002 Fairfax rate is representative of an overall increase in TB cases across Northern Virginia.

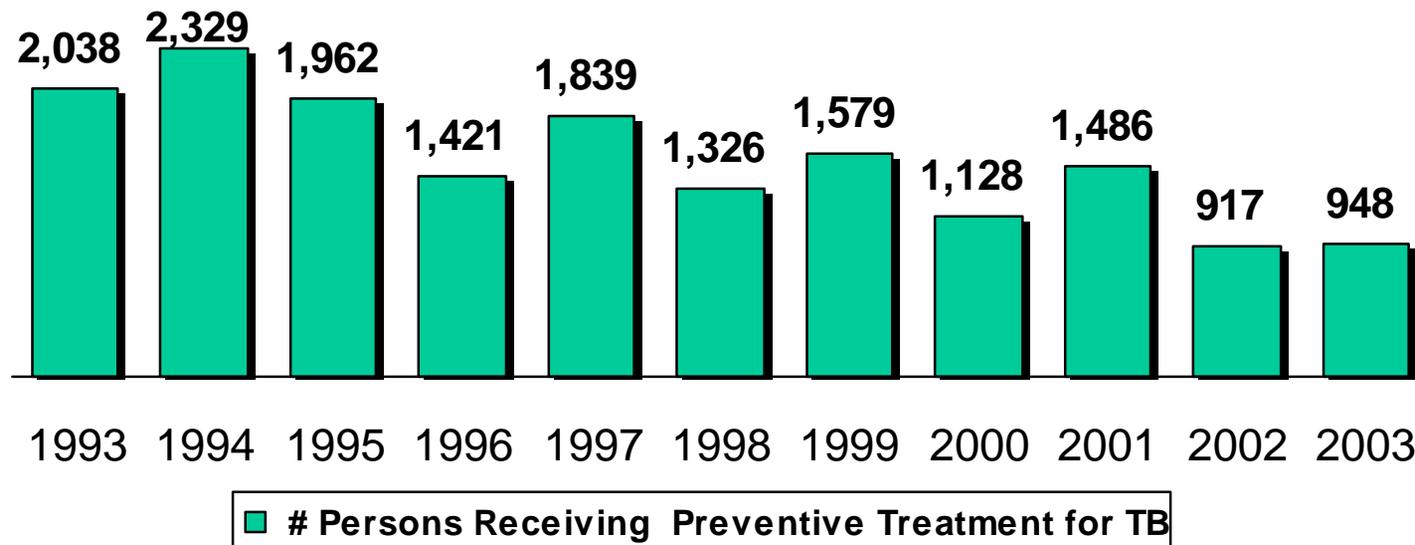


Source: Fairfax County Health Department.
Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.

Communicable Disease Control: Persons Receiving Preventive Treatment for Tuberculosis

FISCAL YEARS 1993 to 1999; CALENDAR YEARS 2000 TO 2003

- Preventive treatment ensures that persons infected with Tuberculosis will not progress to active disease. The Health Department screens all refugees and immigrants for TB. The decline in persons receiving preventive treatment in FY 95-96 is due in part to fewer refugees coming into the area. The increases in 1997 and 2001 reflect, in part, the result of contact investigations where large number of persons were screened. The decrease in 2000, 2002, and 2003 reflects current national guidelines that recommend starting only those persons on preventive treatments who are committed to complete the course of therapy.

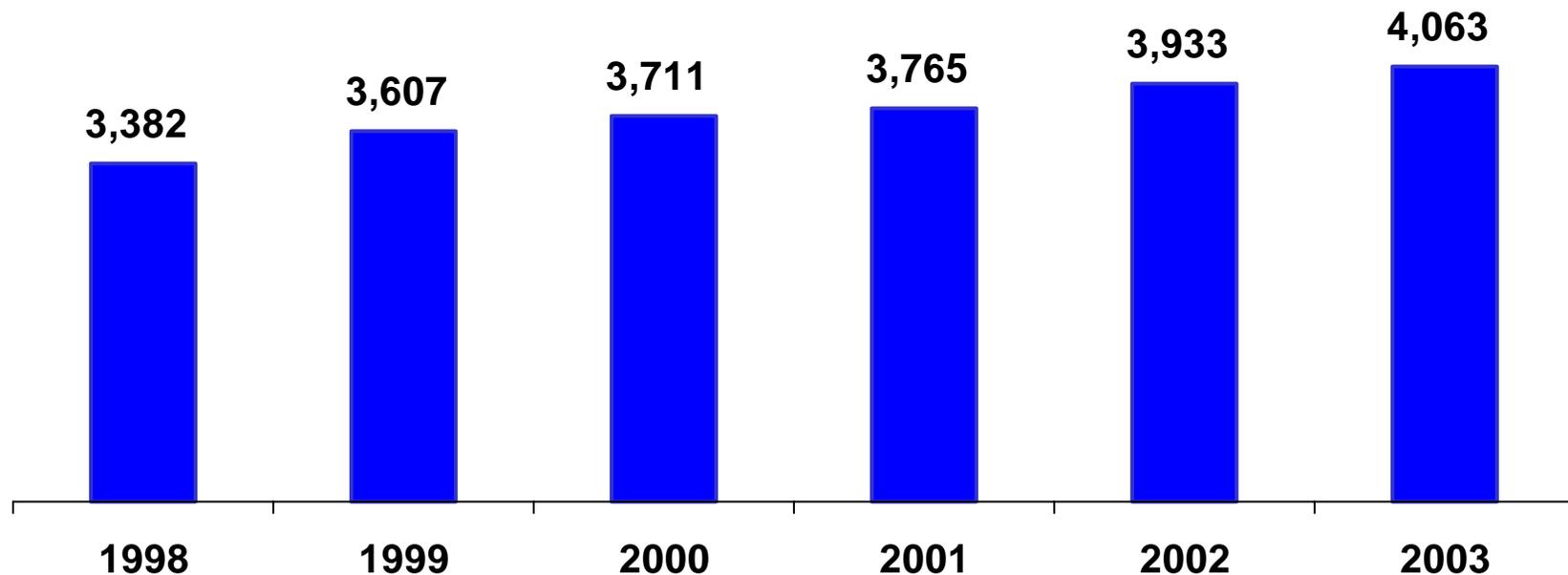


Source: Fairfax County Health Department.
Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.

Communicable Disease Control: Persons Receiving Counseling, Diagnosis and Treatment for Sexually Transmitted Disease

FISCAL YEARS 1998 to 2003

- The number of persons receiving counseling, diagnosis and treatment for sexually transmitted diseases in Health Department clinics has increased slightly since FY 1998. These numbers reflect both statewide trends and more accessibility to care.

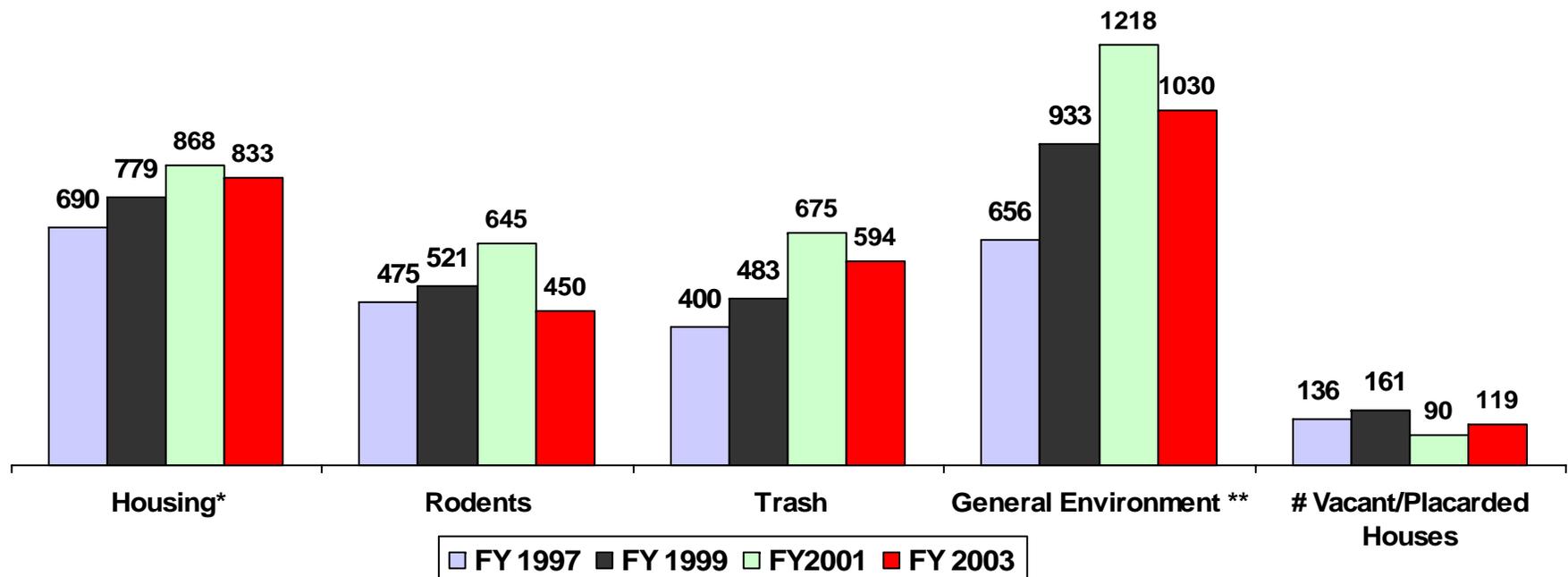


Environmental Health Services: Community Health & Safety

Number & Type of Complaints Investigated per Year

SELECTED FISCAL YEARS 1997 to 2003

- The Community Health and Safety Section of Environmental Health investigates complaints and takes actions to control sub-standard and blighted housing; disease-carrying rodents; trash and garbage complaints; and other public health hazards.



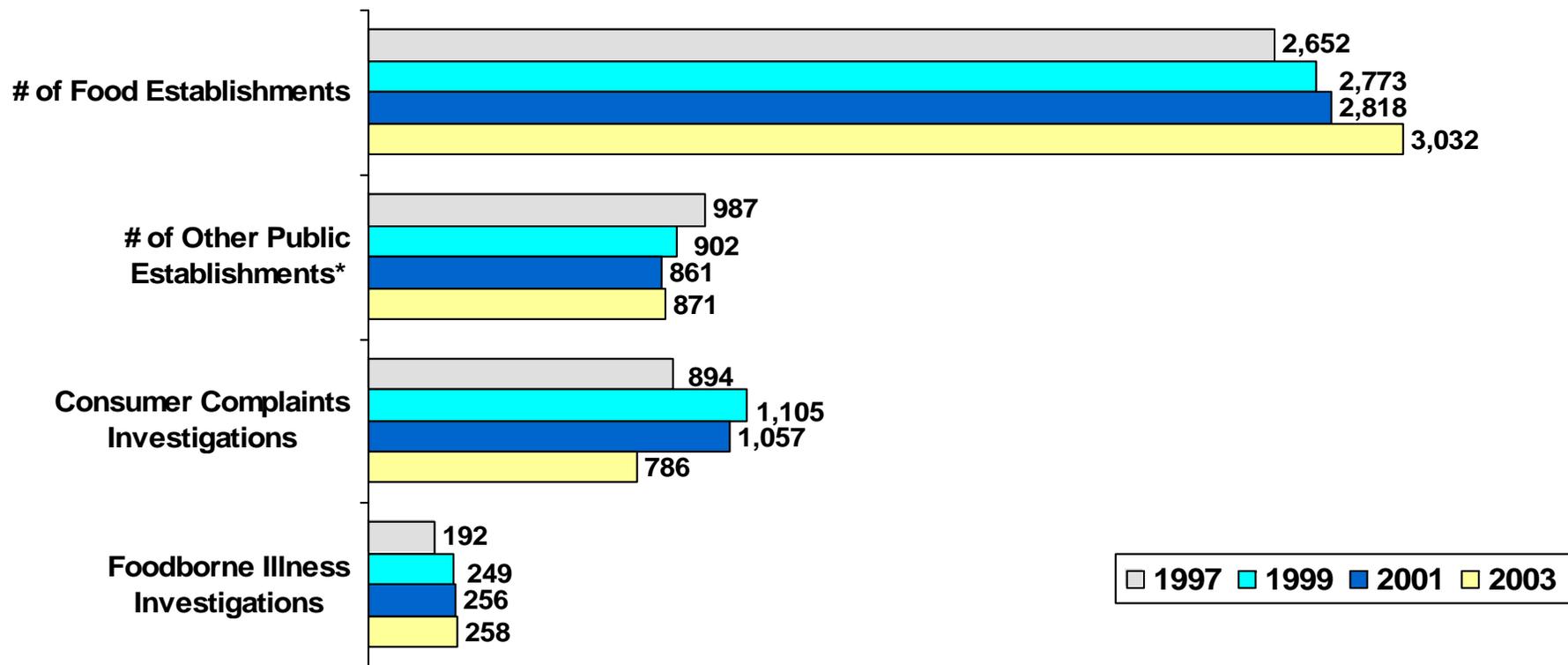
* Housing includes Property Maintenance and Lead. **General Environmental includes animal waste, birds, bats, insects, safety hazards, hazardous materials, indoor air quality, air pollution, and biological agents. 55

Source: Fairfax County Health Department.

Environmental Health Services: Public Establishments Number and Type of Inspections and Investigations

SELECTED FISCAL YEARS 1997 to 2003

- The Division of Environmental Health conducts safety and public health inspections of public establishments, such as restaurants, swimming pools, and other public facilities.



Source: Fairfax County Health Department.

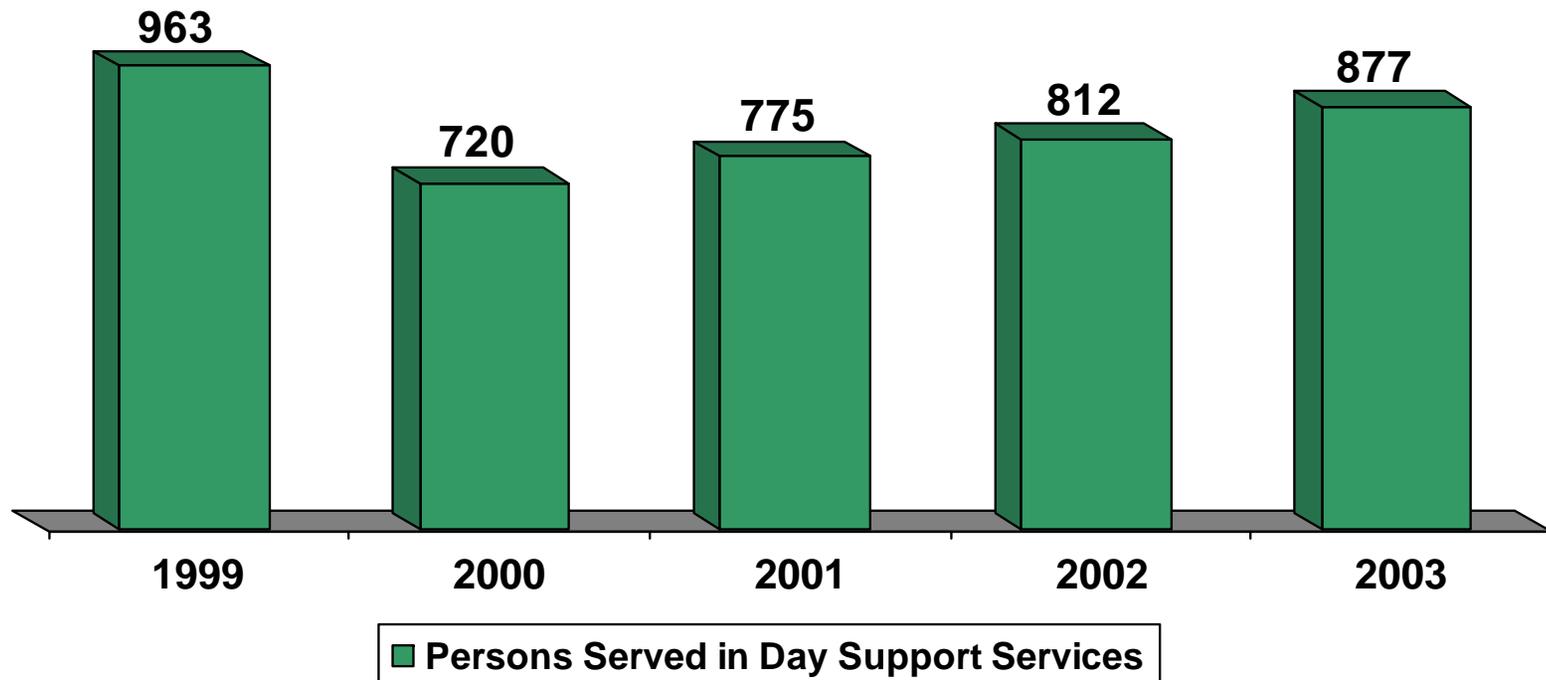
Fairfax County Human Services: Response to Challenges in the Community

- **Challenge 5:**
Addressing Alcohol, Drug, Mental and Physical Health Issues
- **Quality of Life Statement:**
Fairfax County is a community in which all people have access to a wide variety of affordable services for mental health, alcohol and drug abuse, and physical health care.
- **Action Statement:**
Contribute to the availability of mental health services, alcohol and drug treatment services, and physical health care services that are affordable to persons with low to moderate incomes.

Mental Health Day Support Services: Persons Served

FISCAL YEARS 1999 to 2003

- Day services are provided through a mix of directly-operated programs and through contracts with private providers. Services include sheltered employment, day support and partial hospitalization programs.
- People who stayed in partial hospitalization programs 3 months or more showed a 64% reduction in using Emergency Services one year post-discharge compared to the year prior to entering treatment.

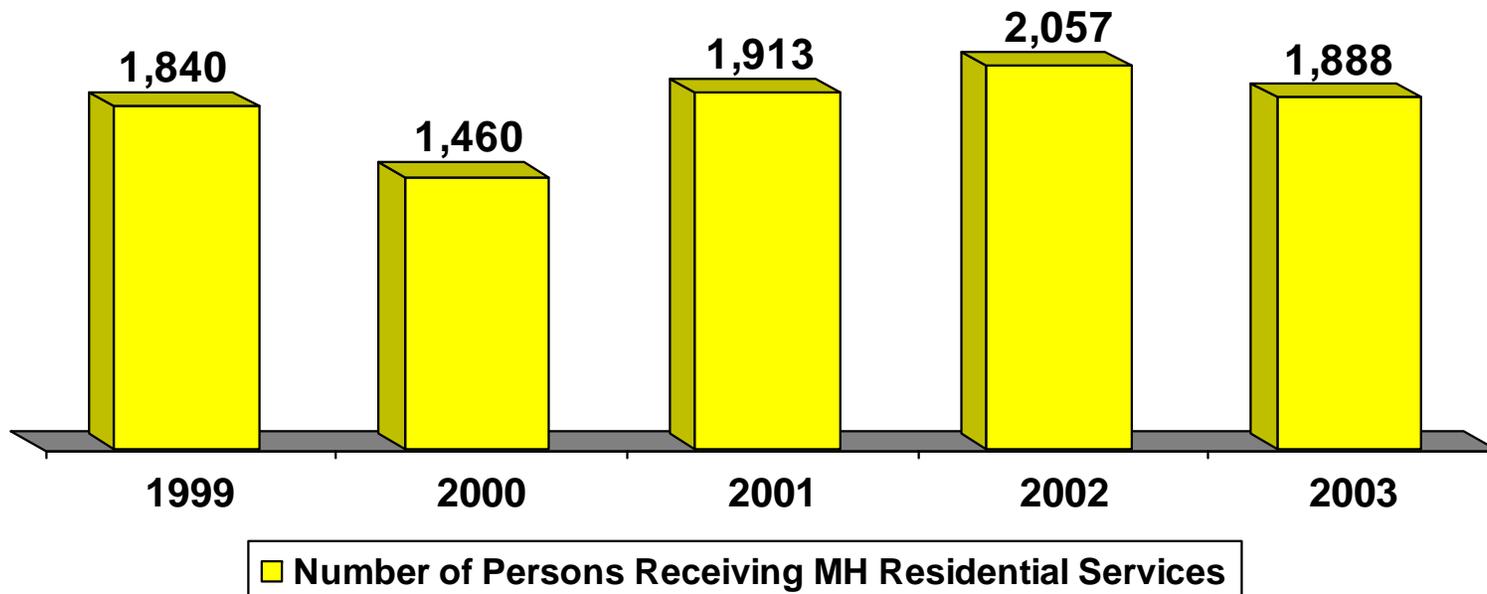


Source: Fairfax-Falls Church Community Services Board.

Mental Health Residential Services: Persons Served

FISCAL YEARS 1999 to 2003

- Residential Services are provided on a continuum from 24-hour care residences to support services for people living in their own homes. Services are provided both in directly-operated programs and through contract agencies. There are currently 465 people waiting for housing in CSB directly-operated programs.
- In FY 2003, 90% of consumers in MH Supported Living Arrangements were able to maintain stable housing for one year or more.

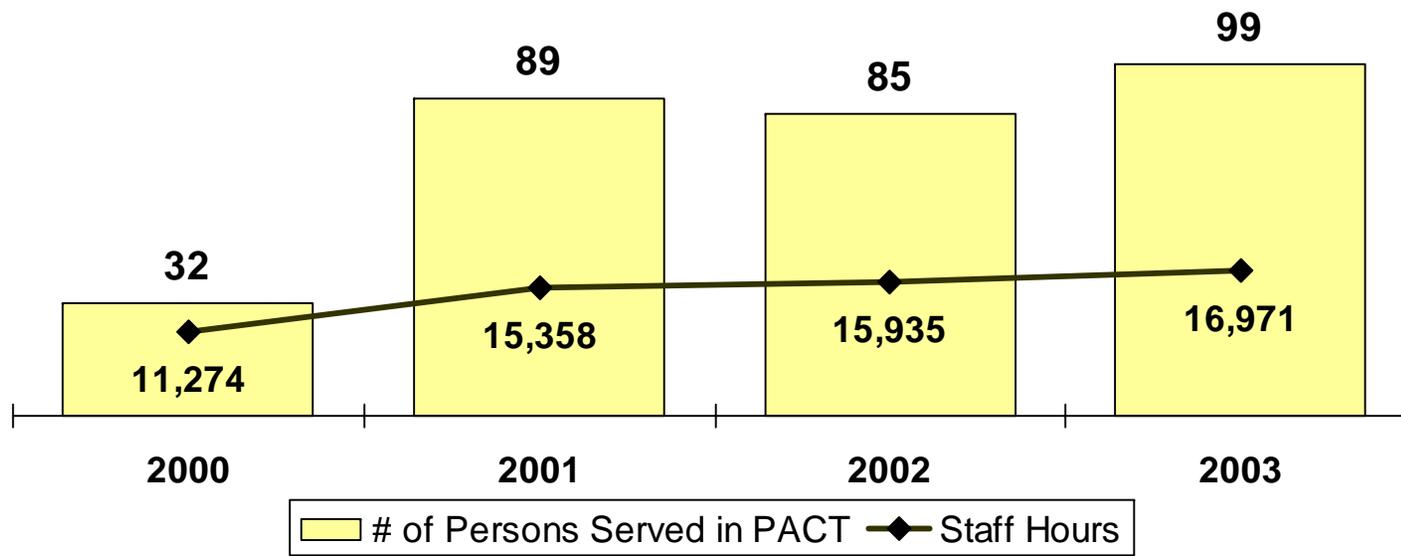


Source: Fairfax-Falls Church Community Services Board.

Mental Health Services: Program of Assertive Community Treatment (PACT)

FISCAL YEARS 2000 to 2003

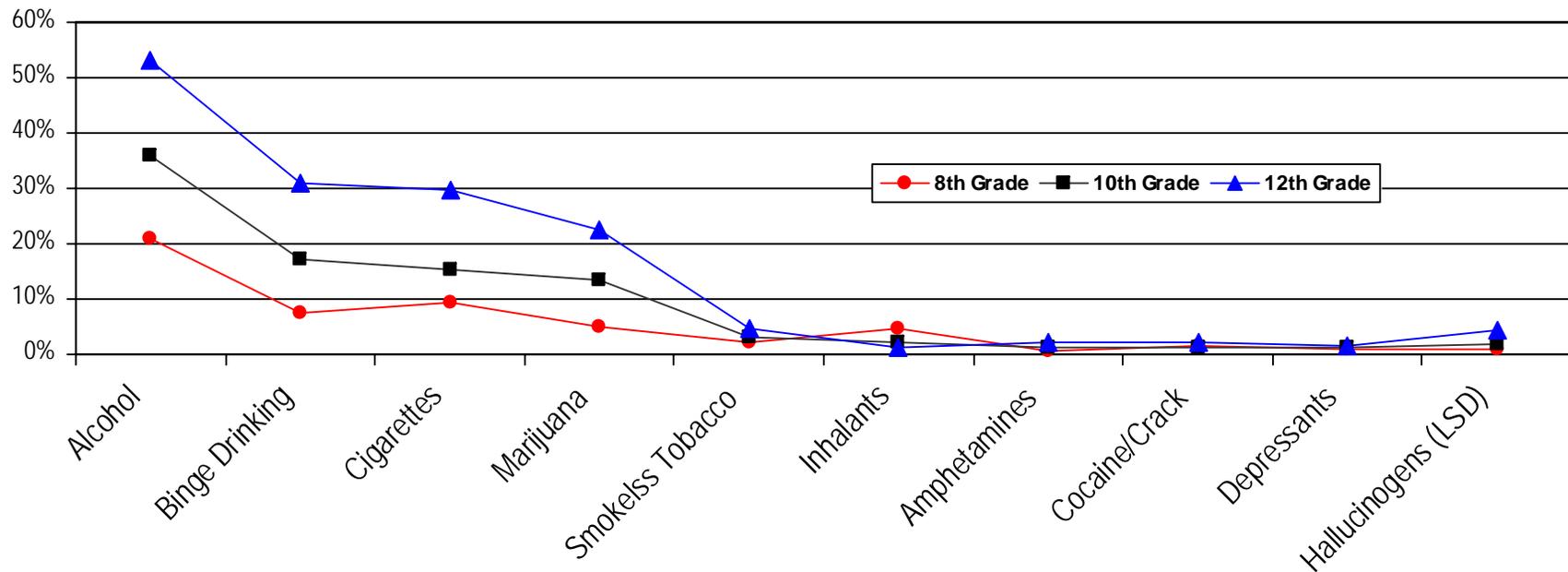
- The PACT Team provides comprehensive mobile psychiatric treatment to persons with severe mental illness who need on-going intensive drop-in services to live and participate in the community. Services include psychiatric, nursing, medications, substance abuse, vocational, emergency, and jail/hospital discharge planning. The PACT Team is multi-disciplinary and includes consumer employees.
- Upon admission to PACT, 38% of consumers were either homeless or in jail and another 36% were in State hospitals with no residence to return to upon discharge. Two years after PACT began, 91% of PACT consumers were in housing and 40% obtained employment, entered school, or engaged in volunteer work.



Source: Fairfax-Falls Church Community Services Board.

30-Day Use of Alcohol, Tobacco and Other Drugs for Fairfax County Students

- With few exceptions, students in Fairfax County reported slightly less use of alcohol, tobacco and other drugs than students nationally.
- More than one-half (53.4%) of 12th graders surveyed indicated use of alcohol in the past 30 days. 17.3 % of 10th graders and almost one-third (31.0%) of 12th graders reported binge drinking in the past two weeks.
- While use of alcohol, cigarettes and marijuana increases with age, use of the other substances is consistently low across age groups. Inhalants are the only substance more likely to be used by younger students, most likely due to easy accessibility.

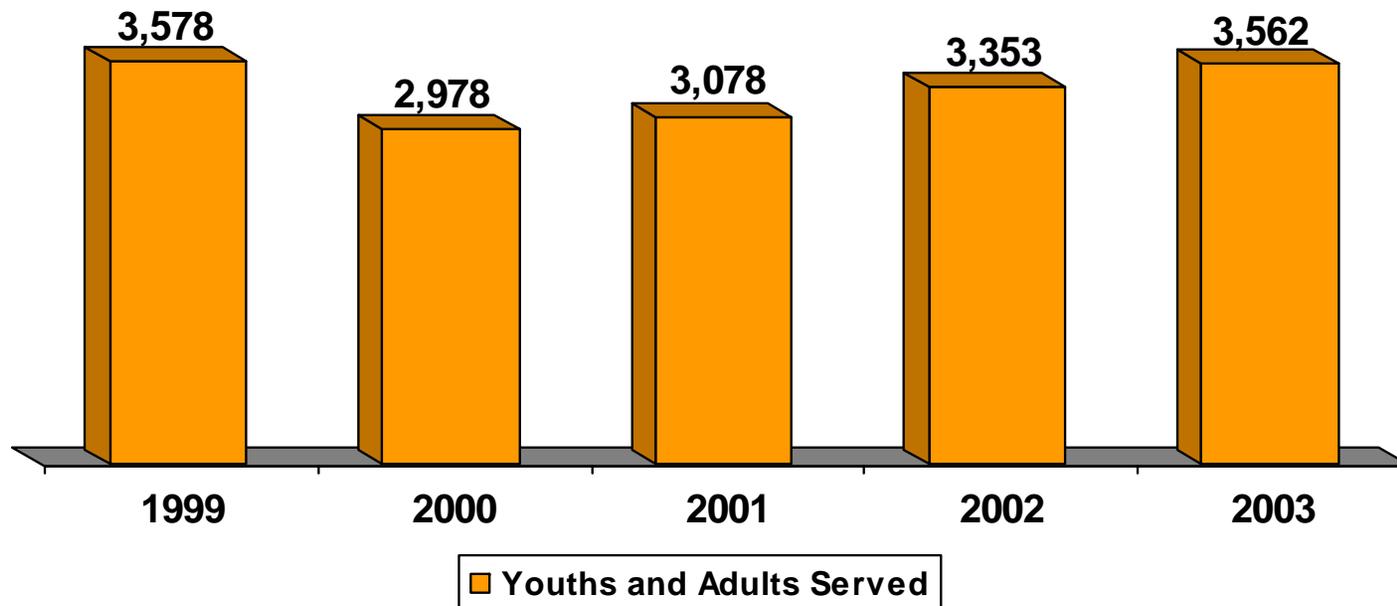


Source: Fairfax County, Virginia, *Communities That Care: 2001 Youth Survey*.

Alcohol & Drug Outpatient and Case Management: Persons Served

FISCAL YEARS 1999 to 2003

- The number of youths and adults served in ADS Outpatient and Case Management services has fluctuated due to changes in funding and program designs. The closing of the Hope Center in FY 2003 and decreased funds for Residential Services increased the number of persons served in Outpatient and Day Treatment.
- In FY 2002 and FY 2003, Outpatient/Case Management Services experienced increased demands for services as a result of post-9/11 stressors.

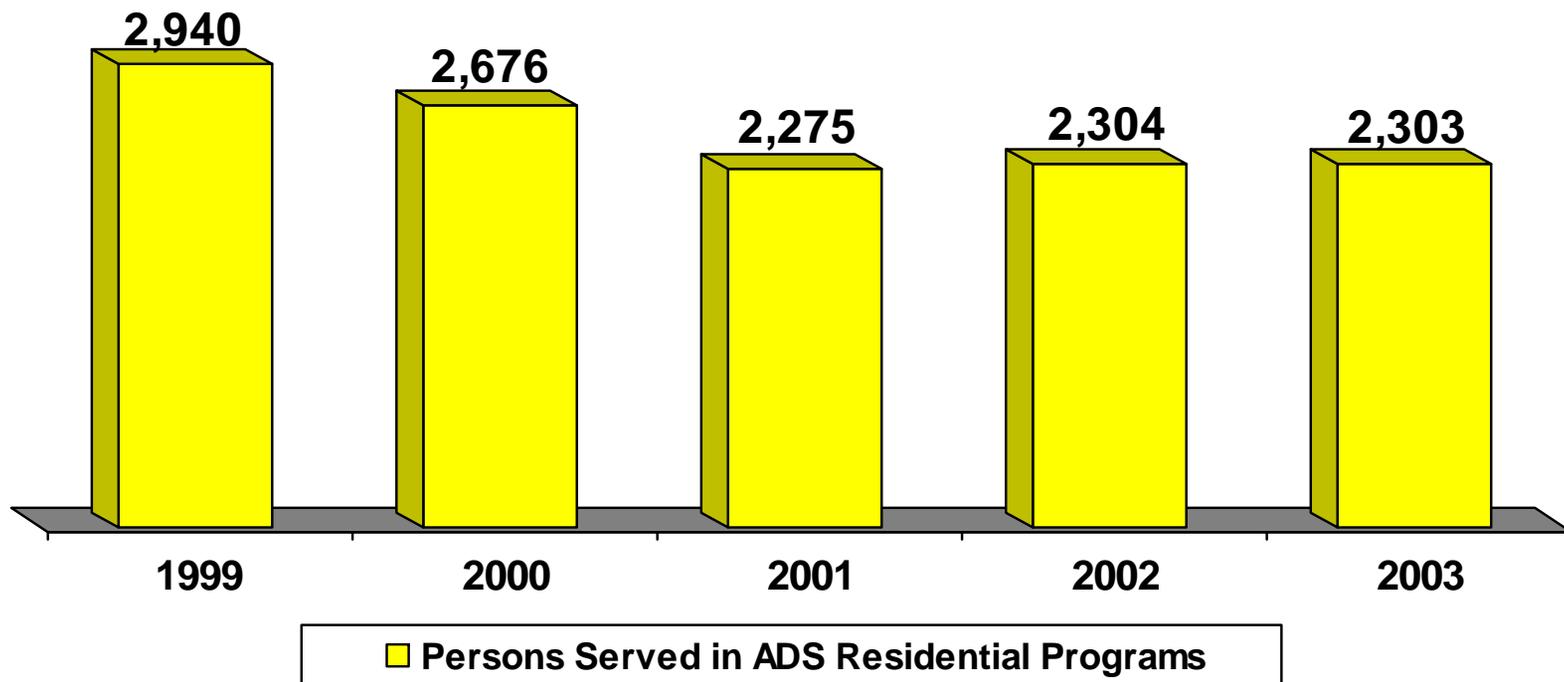


Source: Fairfax-Falls Church Community Services Board.

Alcohol & Drug Residential Services: Persons Served

FISCAL YEARS 1999 to 2003

- The reduction in the number of persons served in ADS Residential programs is due to contract funding reductions and a shift from shorter-duration (10 day) Social Detoxification services to longer-duration treatment services.
- Decreases in the availability of residential services resulted in an increase in persons served in Outpatient and Day Treatment.

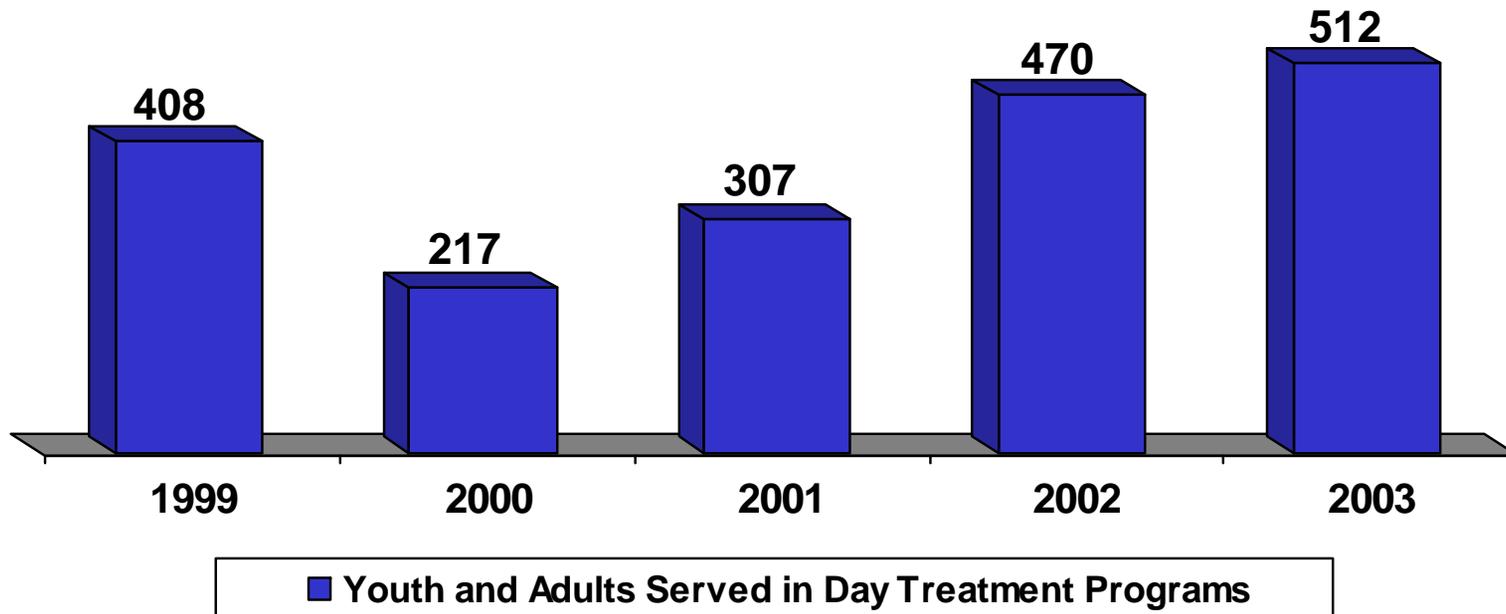


Source: Fairfax-Falls Church Community Services Board.

Alcohol & Drug Day Treatment Services: Persons Served

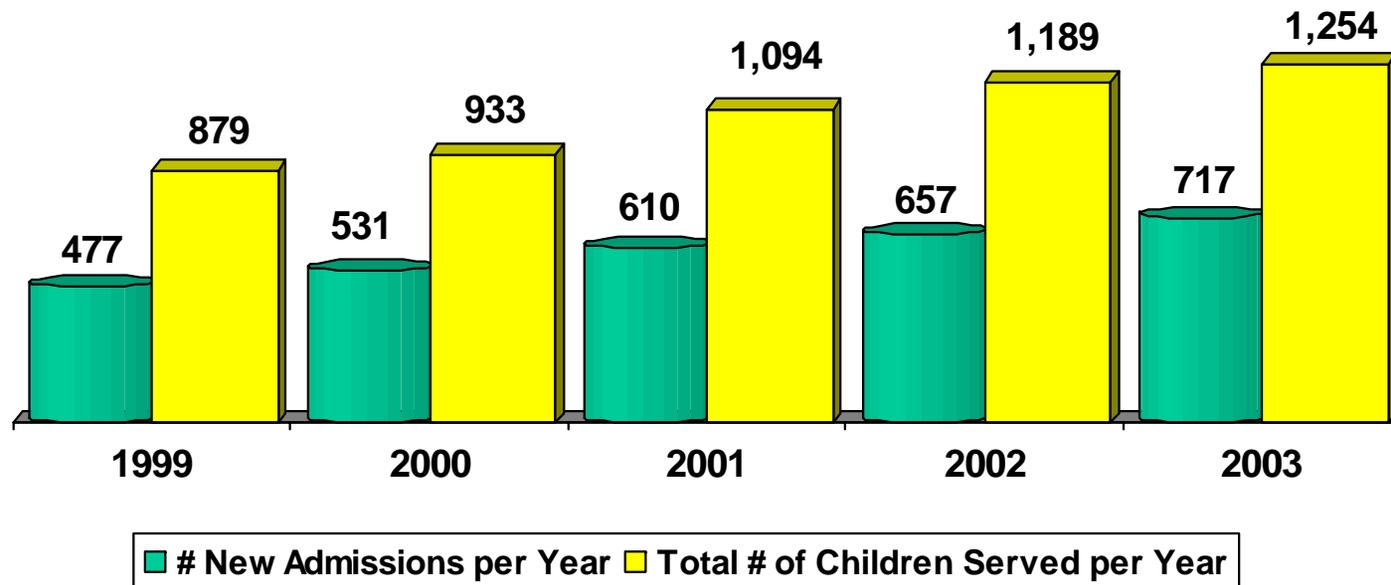
FISCAL YEARS 1999 to 2003

- Youth and Adult Day Treatment Programs generally provide services for approximately 425 individuals. Service provision decreased in FY 2000 due to the closing of the Dual Diagnosis Day Treatment and the MATES Programs.
- The increase in services in FY 2002 was due to the inclusion of services provided at the Juvenile Detention Center, increased demand for services as a result of post-9/11 stressors and reduction in funding for ADS Residential programs.



Community Services Board Infant/Toddler Connection: Number of Children Served FISCAL YEARS 1999 to 2003

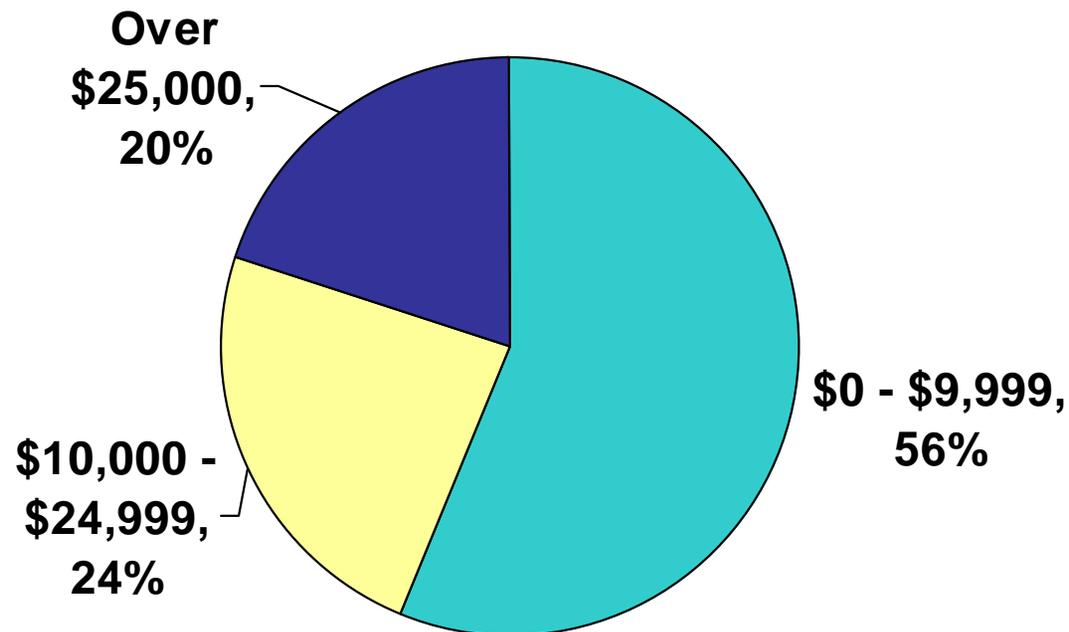
- The Infant/Toddler Connection provides services to infants and toddlers with disabilities and their families to assist in day to day activities, community integration, and promotion of overall development. Services include physical, occupational and speech-language therapy; vision and nutrition services; assistive technology; and social work, counseling and service coordination. Infants are eligible to remain in the program from birth until age three when they transfer into the school system.



Income Levels of Community Services Board Consumers

FISCAL YEAR 2003

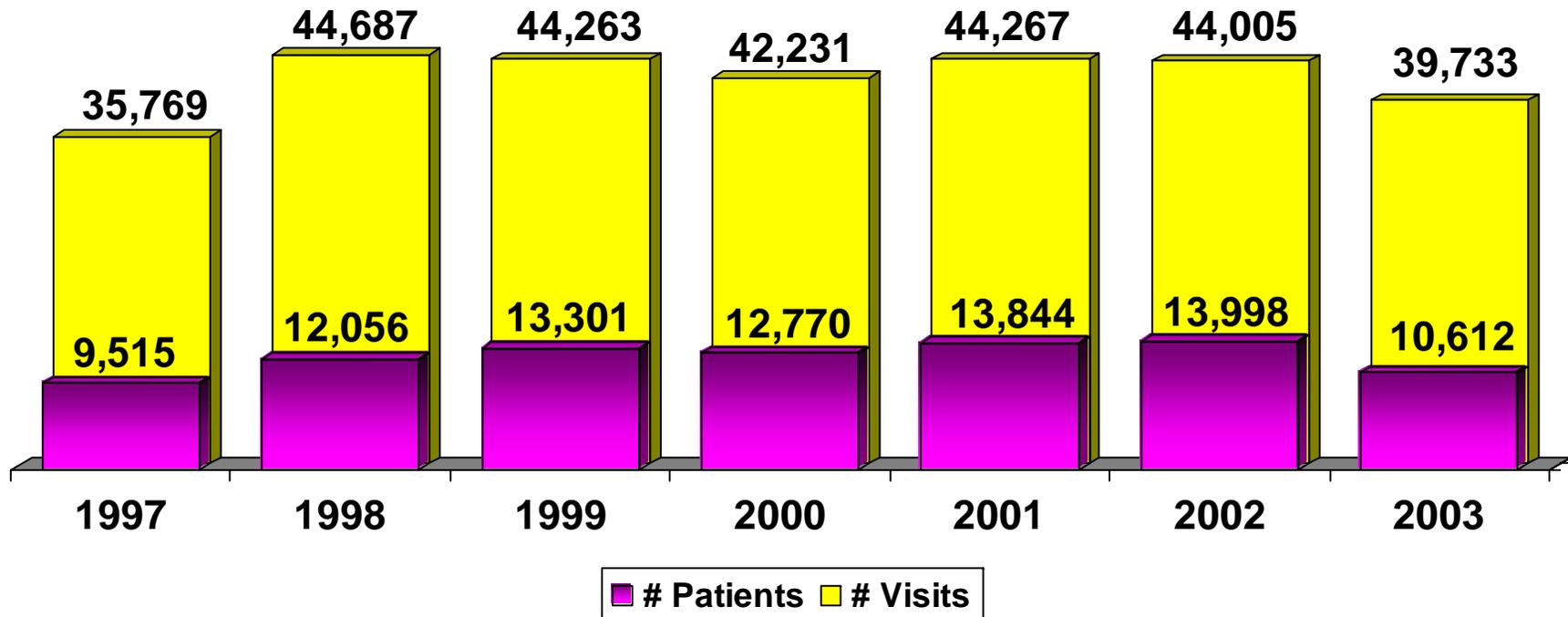
- The percentage of consumers at the various Income Levels has remained fairly consistent over the last four years.
- The number of adults and children without health insurance continues to rise. In FY 2003, two-thirds (67%) of CSB consumers reported having no health insurance.



Community Health Care Network: Number of Primary Care Patients and Visits

FISCAL YEARS 1997 to 2003

- Over one-quarter of all household earning less than \$25,200 have at least one person without health insurance. The Community Health Care Network provides primary medical care for low income families without health insurance. Services are provided at the North County, Bailey's and South County Health Centers. Currently, over 12,000 persons are enrolled program-wide.



Source: Fairfax County Health Department.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

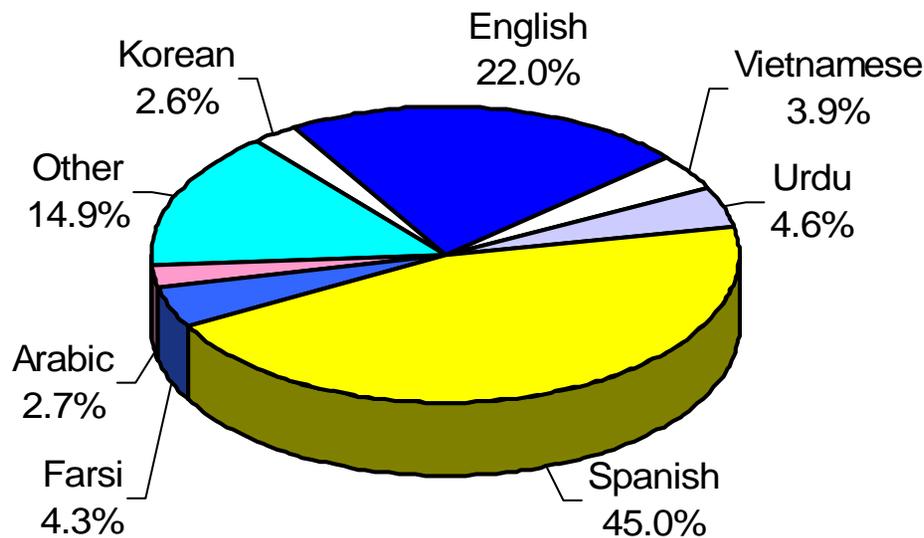
Community Health Care Network: Client Characteristics

JULY 2003

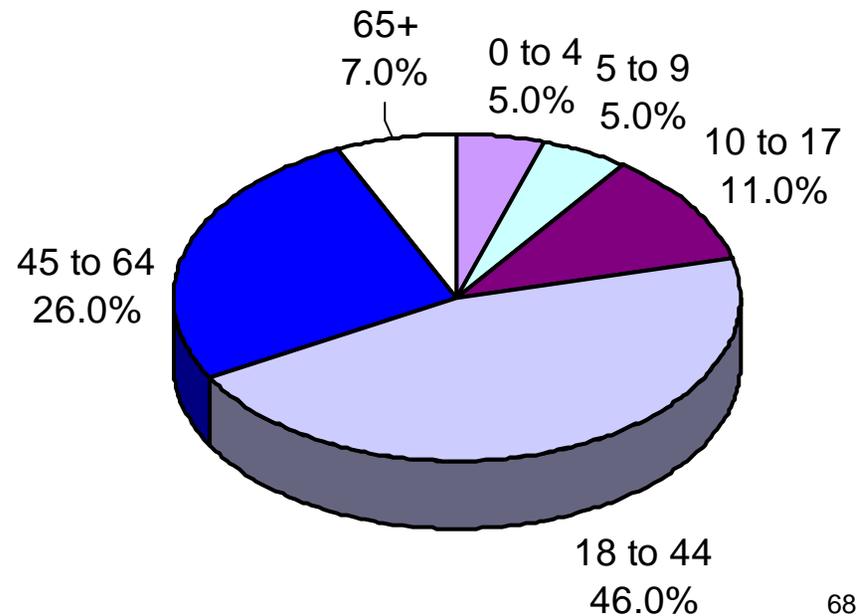
The CHCN serves a wide variety of patients:

- 70% of patients are wage earners or dependents of wage earners.
- 9% receive some form of public assistance, including TANF, GR, SSI, or Refugee Assistance.
- 19% have no income, and the remaining 2% receive income from other sources.

Primary Language



Age Distribution



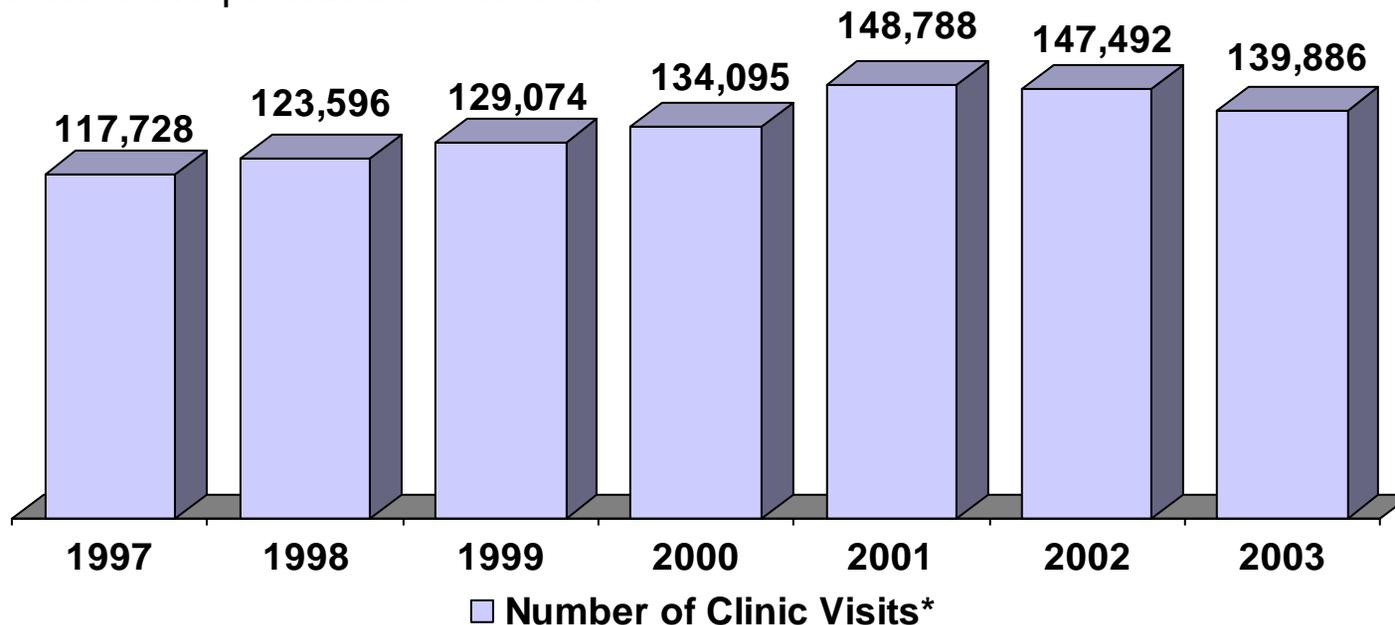
* Other languages include Mandarin Chinese, Cambodian, French, Thai, Laotian, Hindi and Punjabi.

Source: Fairfax County Health Department. Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.

Health Department Clinic Visits*

FISCAL YEARS 1997 to 2003

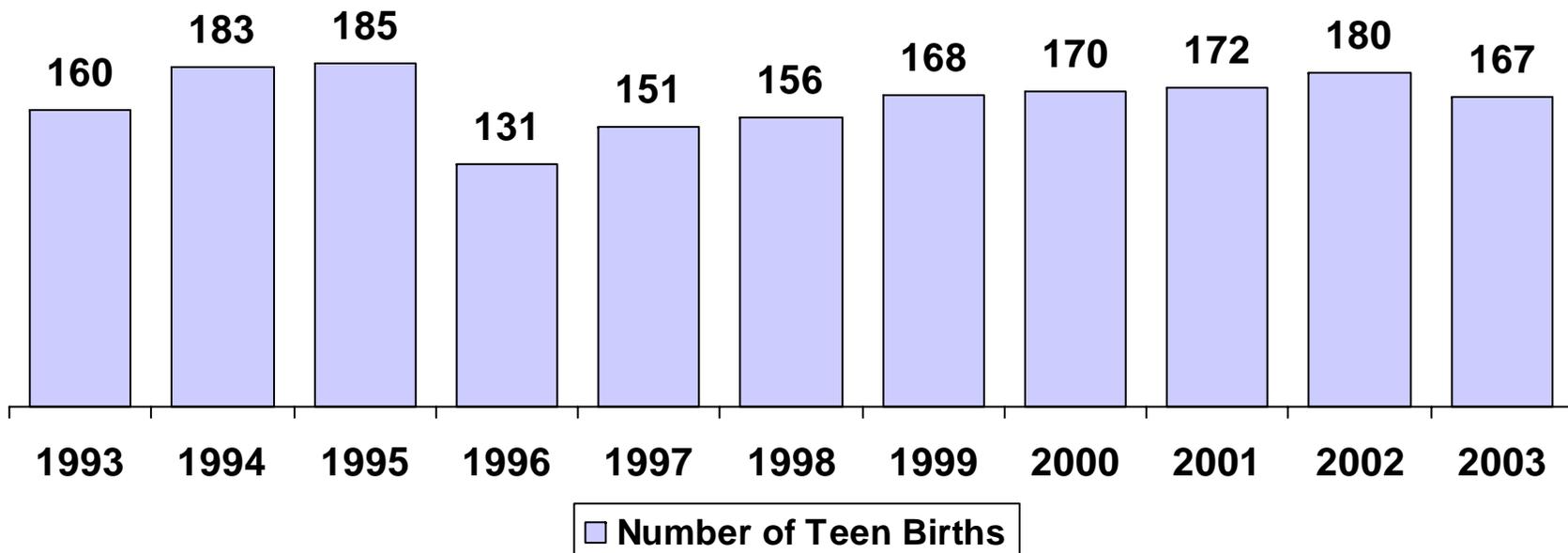
- In 1997, the Health Department conducted a redesign of clinic services that included expanded walk-in hours, increased service availability and added a new option of appointments for patients. Demand for services increased as a result of those changes and new requirements for childhood immunizations in FY 2001 and 2002. The number of visits decreased in FY 2003 due to vaccine shortages, new combination vaccines requiring fewer clinic visits, and a change in how maternity services are provided at one site.



*Includes immunizations, maternity, pregnancy testing, TB, STD, WIC, X-Ray, Dental, Speech and Hearing. 69

Maternity Services: Number of Teen Births (Up to Age 19) FISCAL YEARS 1993 to 2003

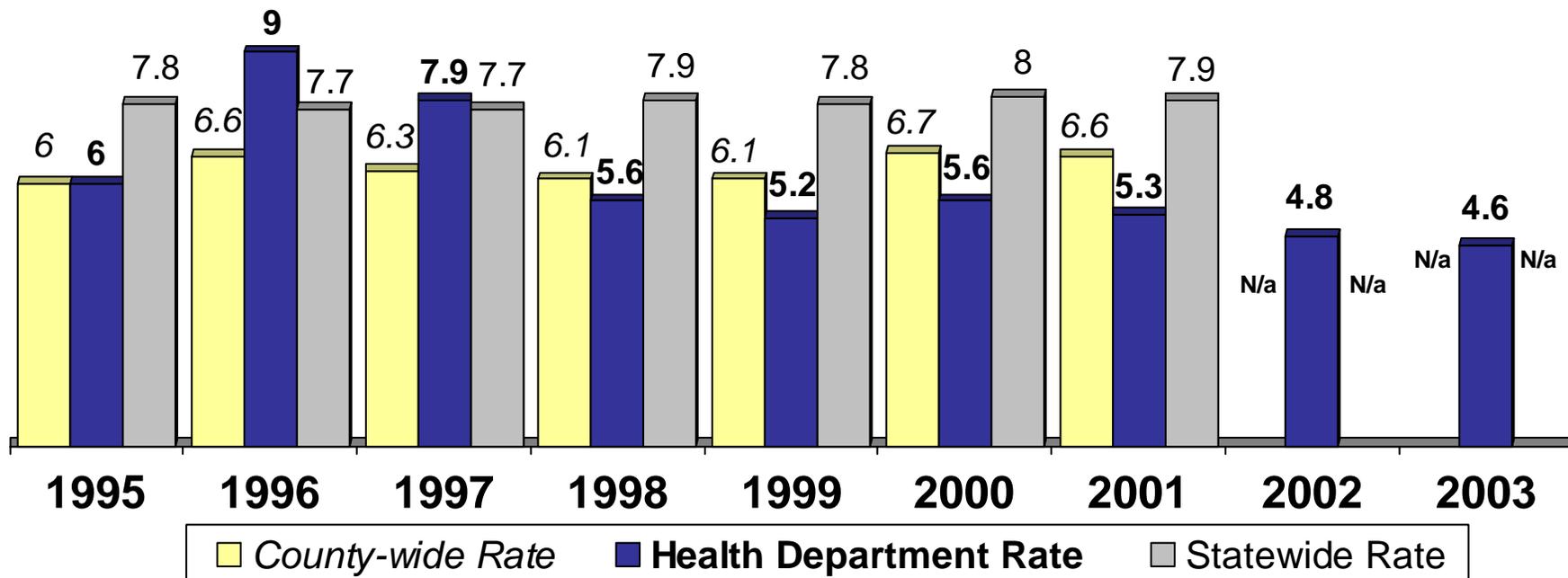
- **From 1990 to 2001, the County-wide teen birth rate dropped from 26 per 1,000 to 14.2 per 1,000.** The drop, which mirrors Health Department and national trends, may also reflect efforts to prevent first and second pregnancies among teens, such as the Resource Mothers program. The percent increase in teen births between FY01 and FY02 is almost equal to the percent increase in total births to Health Department patients. However, the decrease in the number of teen births from FY02 to FY03 is greater than the decrease in births among Health Department maternity patients overall.



Source: Fairfax County Health Department.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Low Birthweight Births per 100: Health Department, Fairfax Co., and Virginia Rates 1995 to 2003

- The majority of the approximately 2,200 Health Department Maternity Patients are at risk for low birth weight babies (up to ~5.5 lbs) due to socioeconomic, demographic, or medical factors. Through early, continuous prenatal care and case management, the Health Department rate has historically been almost that of the County as a whole.

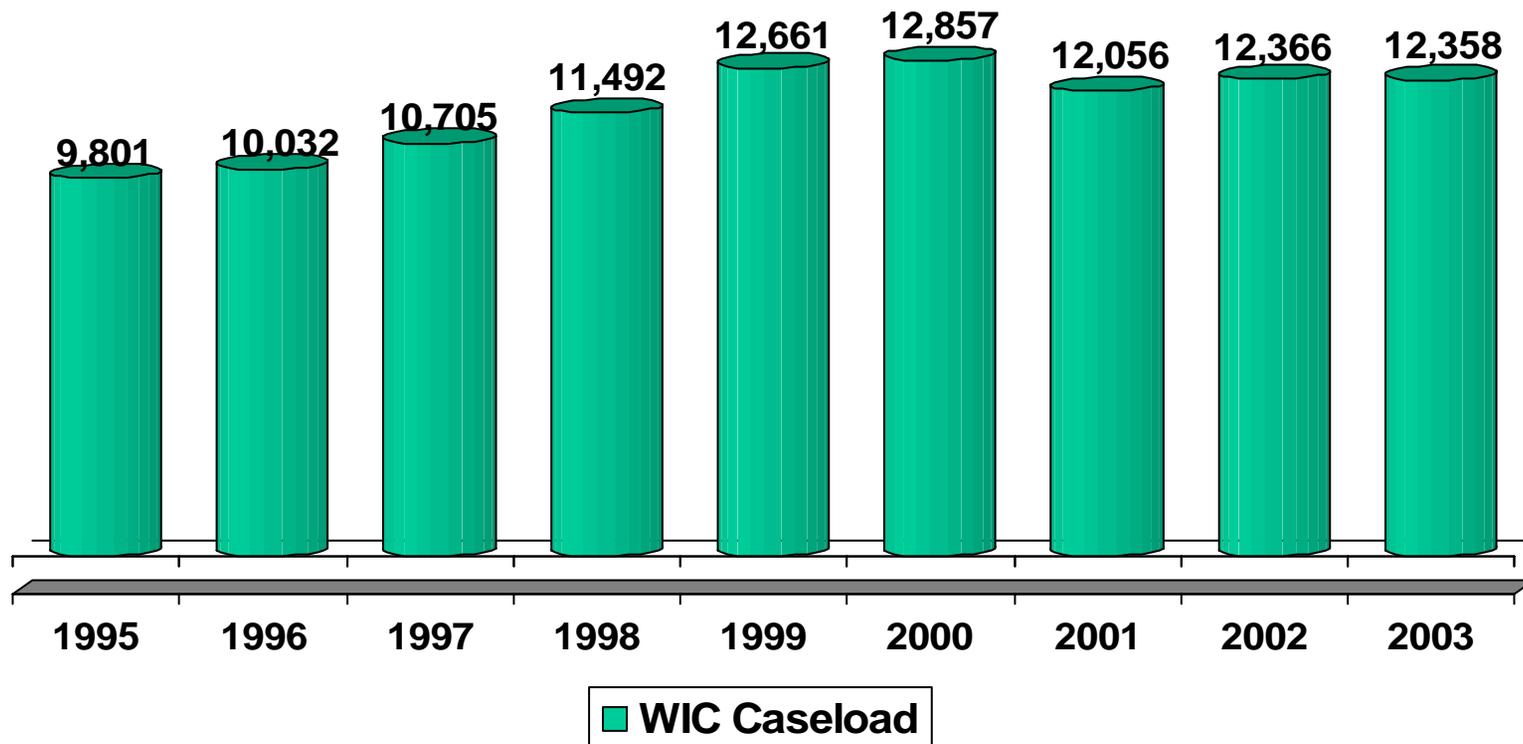


Source: Fairfax County Health Department.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Women, Infants, and Children (WIC) Nutritional Program: Program Caseload

FISCAL YEARS 1995 to 2003

- WIC is a federally funded supplemental food program for pregnant or nursing women, infants, or children under five years of age. Clients must meet income and geographic eligibility requirements and be at nutritional risk.

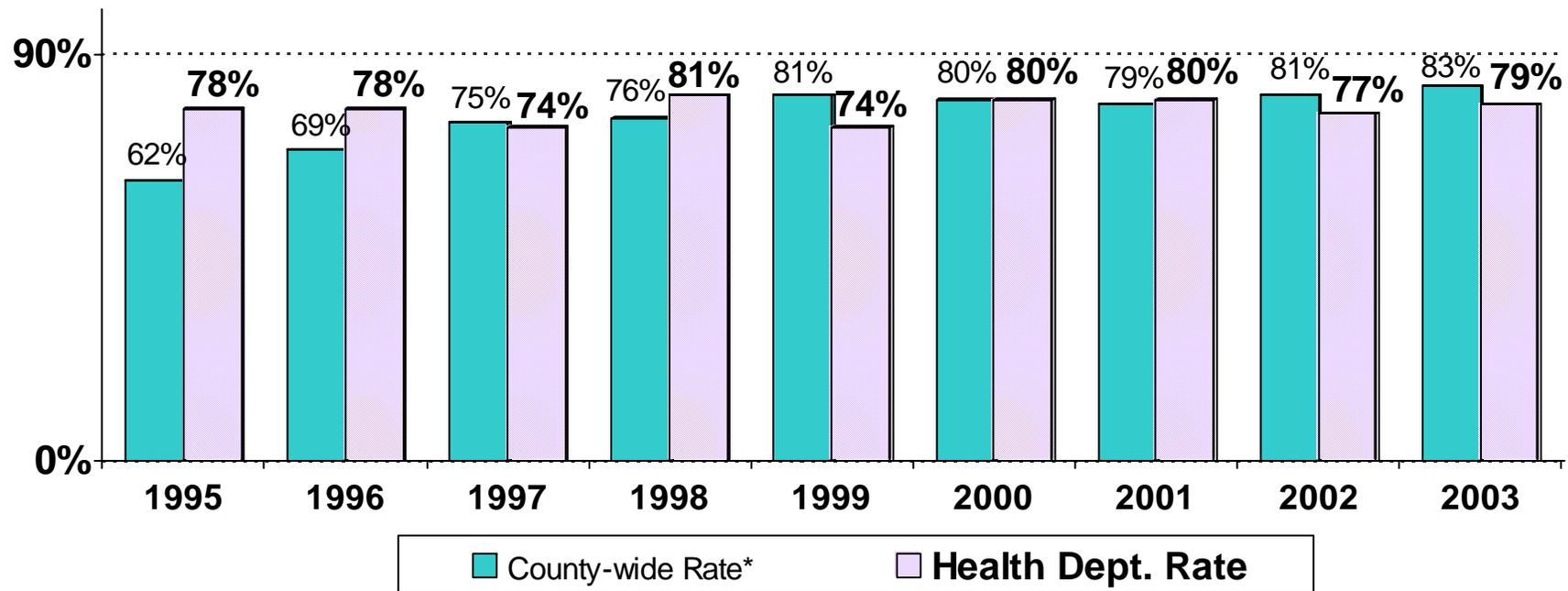


Source: Fairfax County Health Department.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Immunization Completion Rate for Two Year Olds: County Rate* vs. Health Department Rate

FISCAL YEARS 1995 to 2003

- The Health Department provides immunizations for over 20,000 children every year. Although the immunization program does not have income-eligibility guidelines, the program primarily serves children from lower-income families. The goal for the year 2000 is an immunization rate of 90%.



Source: Fairfax County Health Department.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

* County Rate based on retrospective study
done in the Schools.

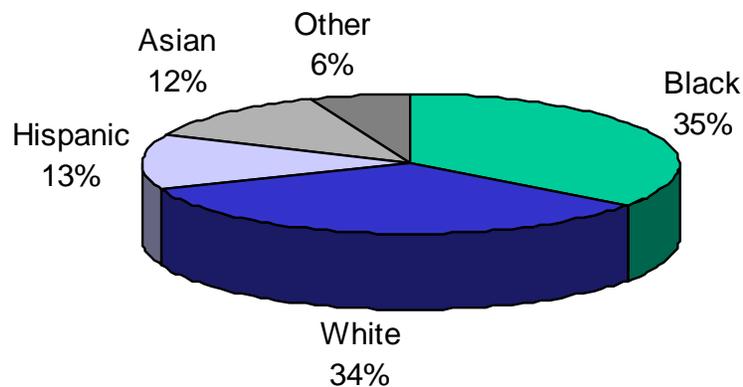
Fairfax County Human Services: Response to Challenges in the Community

- **Challenge 6:**
Responding to Crime in the Community
- **Quality of Life Statement:**
Fairfax County is a community that is safe from the threat of crime.
- **Action Statement:**
Administer a justice system that delivers a just and equitable response to juvenile and domestic crimes, and which reduces these crimes by addressing the factors that lead to crime in the community.

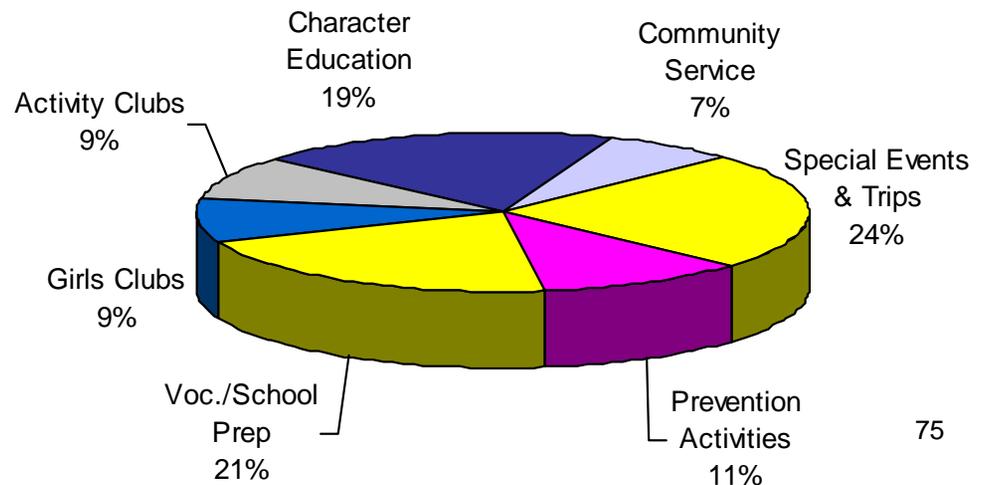
Community and Recreation Services: Teen Services

- Beginning in FY 2004, the teen center service model will transition from the current model of 9 centers (one in each magisterial district) to a regional model comprised of five regional centers, ten neighborhood centers, and ten community-based activities. It is anticipated that community programs will develop partnerships with other organizations and schools. The goal of this redesign initiative is to provide greater flexibility in meeting the needs of teens and the community and to eliminate barriers between magisterial districts.
- In the past year, Teen Center participation has grown by almost 9%, from 48,822 to 53,265. Female attendance has increased by over 20%, from 11,981 to 14,462. Participation in a variety of activities (other than basketball) has also increased significantly.

Ethnic Diversity of Enrollees



Teen Center Activities

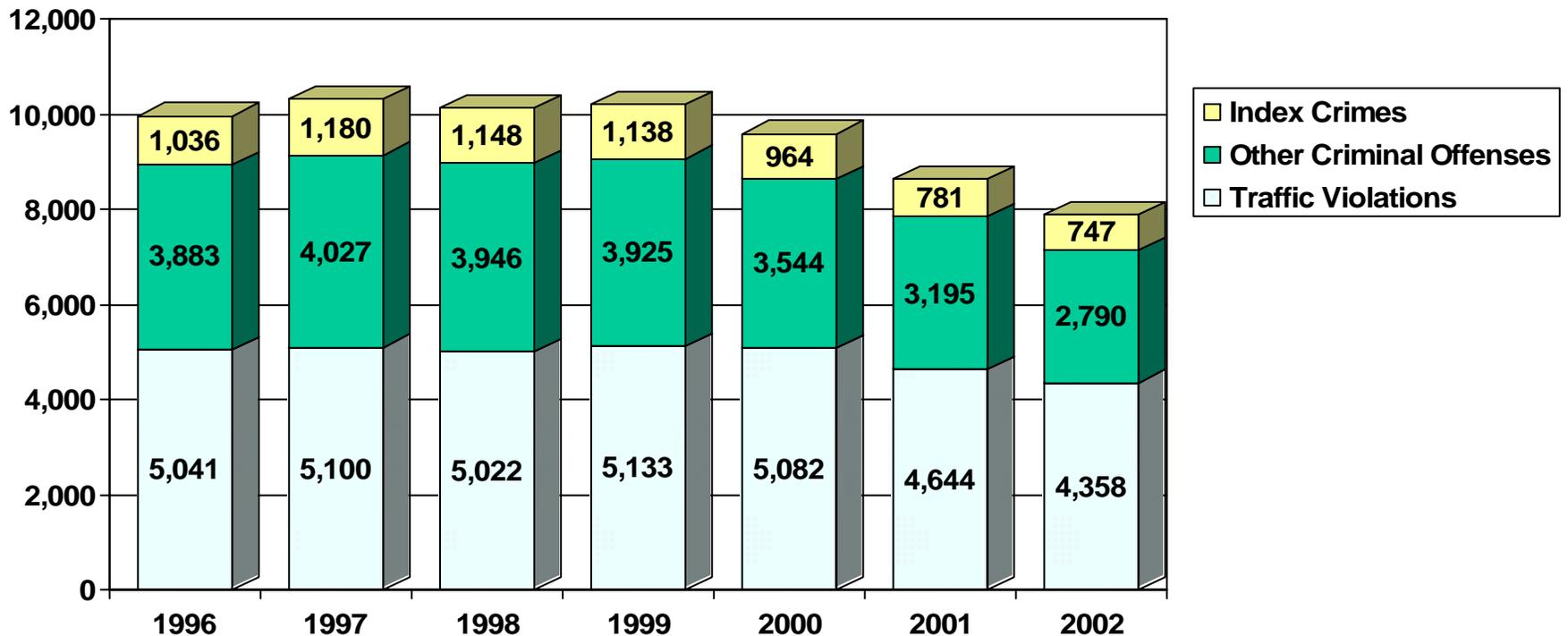


Source: Fairfax County Department of Community and Recreation Services.

Juvenile Arrest Data

CALENDAR YEARS 1996 – 2002

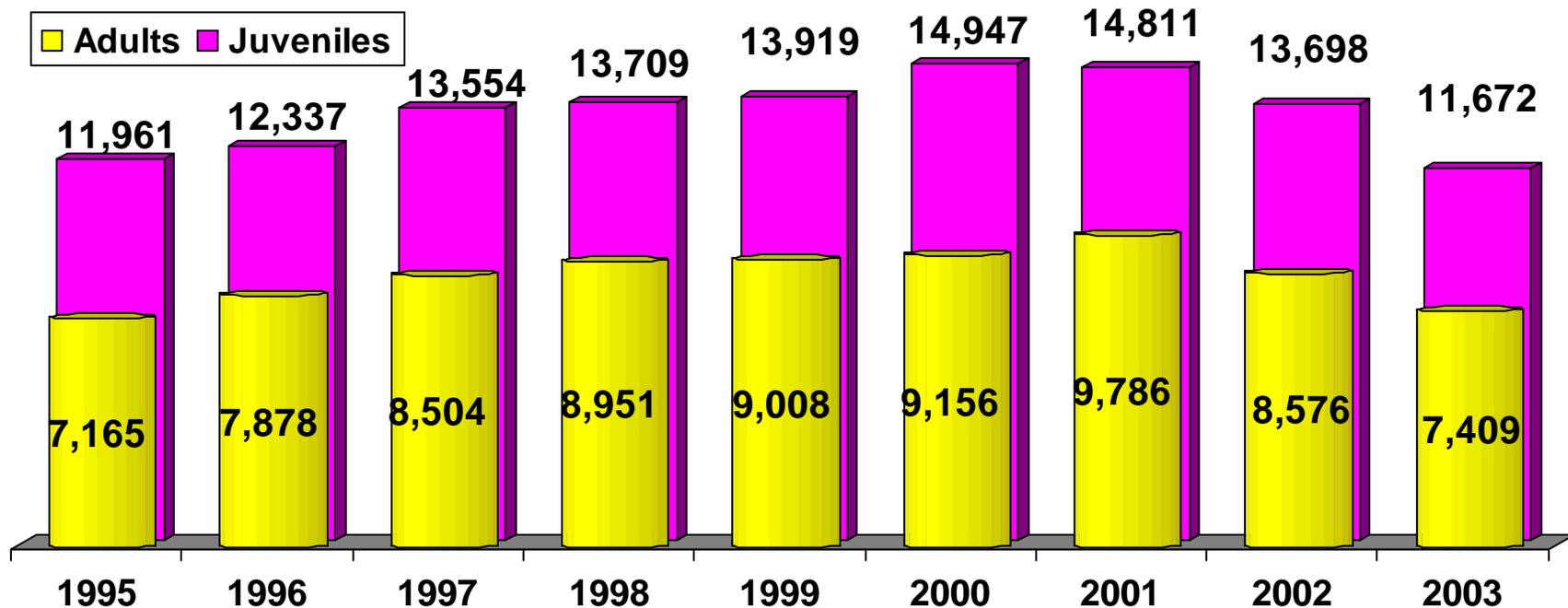
- Between 1997 and 2002, arrests for criminal offenses have declined by 23%. Index crimes include Murder, Rape, Robbery, Aggravated Assault, Burglary, Larceny and Motor Vehicle Theft.



Number of New Cases Filed in Court for Juveniles & Adults

FISCAL YEARS 1995 – 2003

- Since 2001, the number of new cases filed for formal court processing in Juvenile and Domestic Relations Court has decreased by 22%, a drop that is consistent with statewide and national trends.
- Cases include: Delinquency; Children in need of services and supervision; custody; visitation and support determination; criminal offenses among family members; and adults charged with offenses against minors.



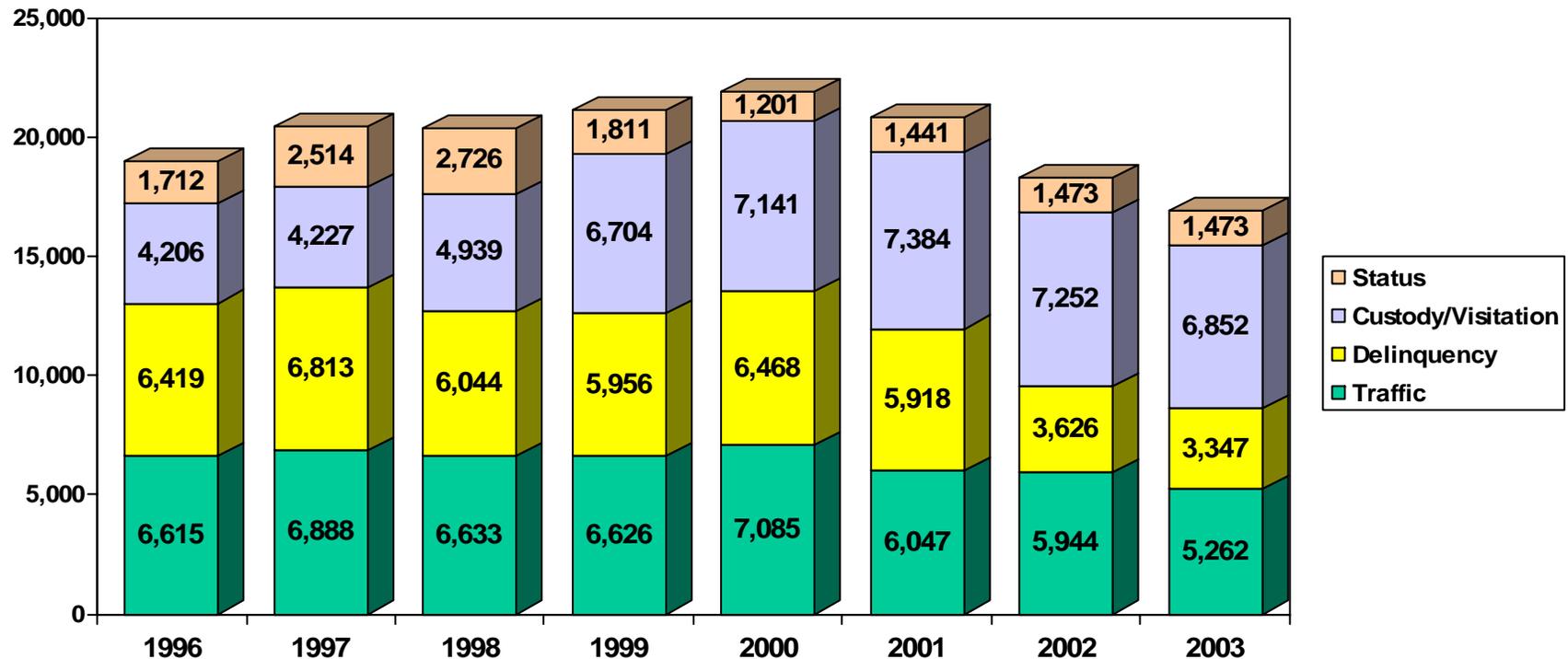
Source: State Supreme Court Case Management System (CMS), Juvenile and Domestic Relations Court, Fairfax County and City of Fairfax.

CMS data includes only those cases sent for formal court processing. It does not include juveniles diverted at intake or informal interventions with juvenile offenders.

Number of New Cases Filed for Juveniles

CALENDAR YEARS 1996 – 2002, FY 2003

- Since 2000, the total number of new juvenile cases filed for formal court processing has decreased by 23%.



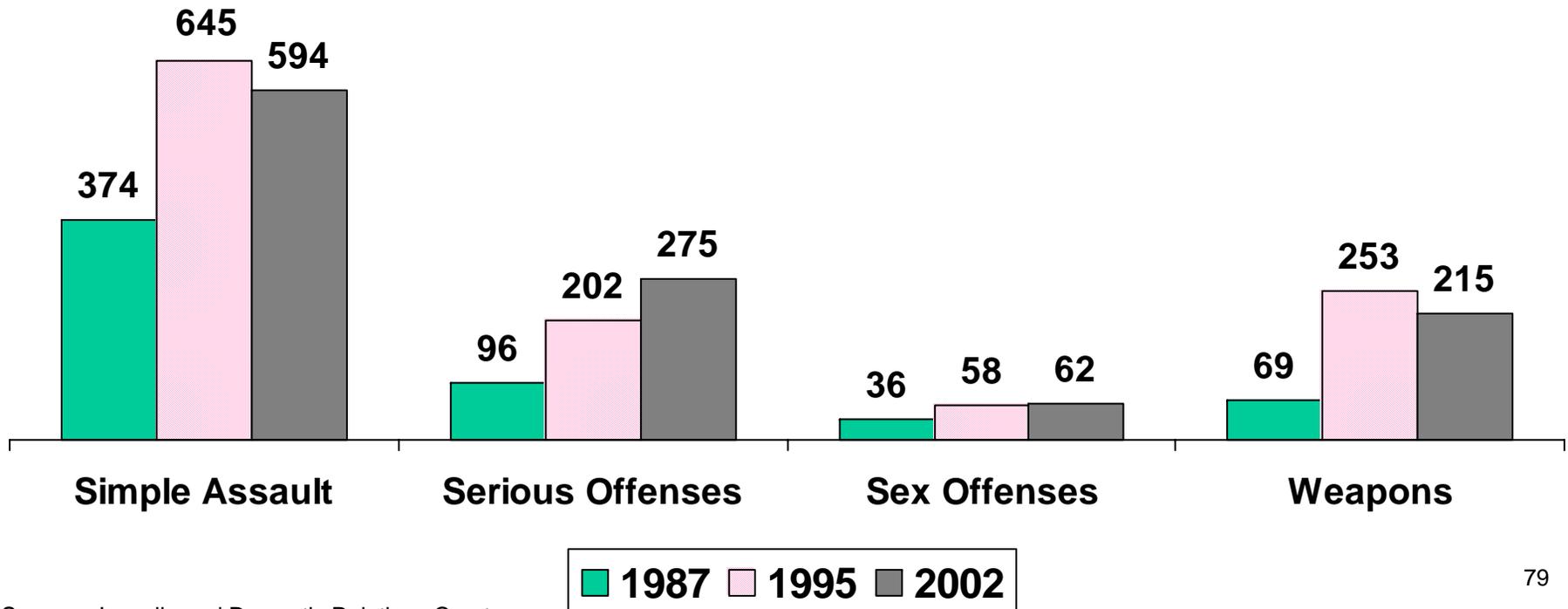
Source: State Supreme Court Case Management System, History of Commenced Cases Report Fairfax County and City of Fairfax.

CMS data includes only those cases sent for formal court processing. It does not include juveniles diverted at intake or informal interventions with juvenile offenders.

Violent Juvenile Offenses

FISCAL YEARS 1987, 1995, and 2002

- Simple assault represents the majority of juvenile offenses against persons. In Fairfax County, serious offenses against persons have increased since 1995 while weapons and simple assault offenses have decreased. Nationally, the juvenile arrest rate for violent index crimes fell by 44% between 1994 and 2001, while arrest rates for simple assault have stayed relatively constant.

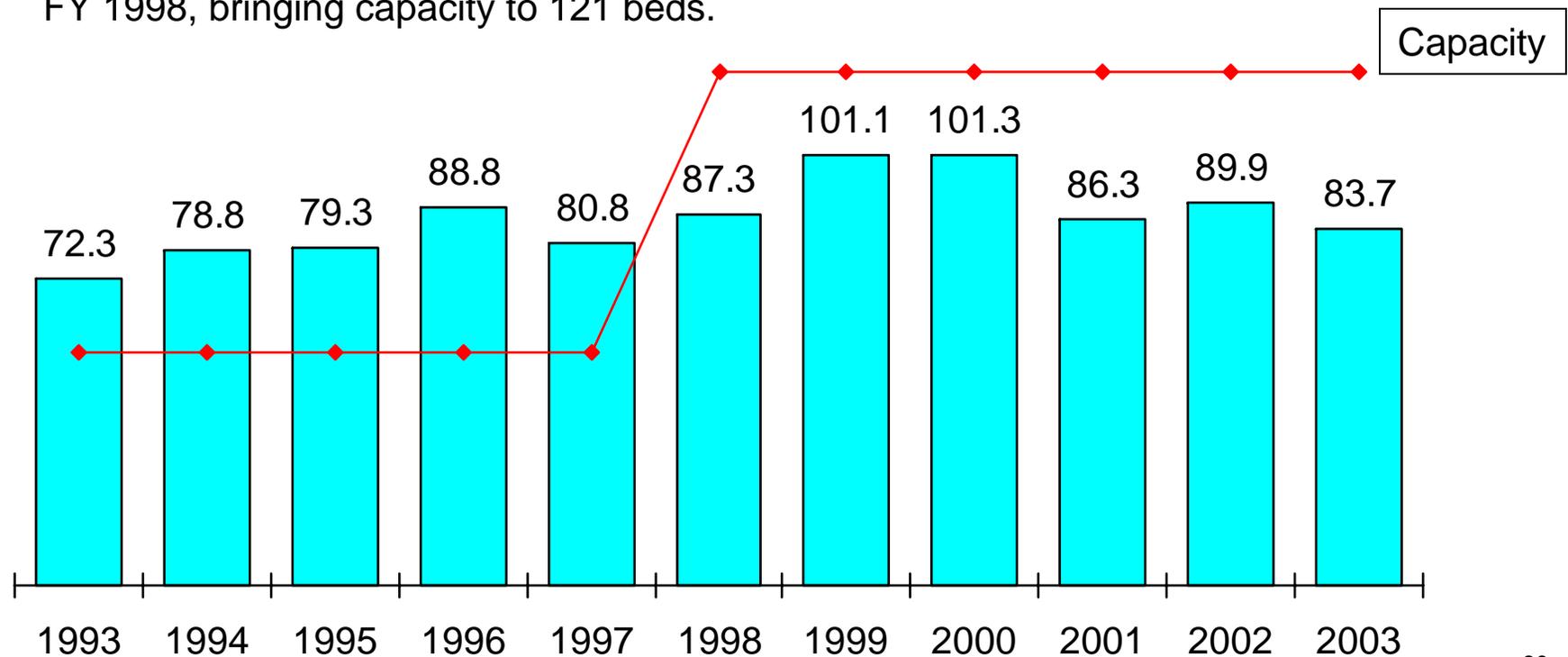


Source: Juvenile and Domestic Relations Court.
Fairfax County and City of Fairfax.

Average Daily Population in Secure Detention Facilities

FISCAL YEARS 1993 to 2003

- From 1993 to 1997, the Court's Secure Detention Facility had the capacity to house 55 juveniles at any given time. However, the need for secure detention spaces outstripped this supply during the 1990's. An expanded center opened during FY 1998, bringing capacity to 121 beds.

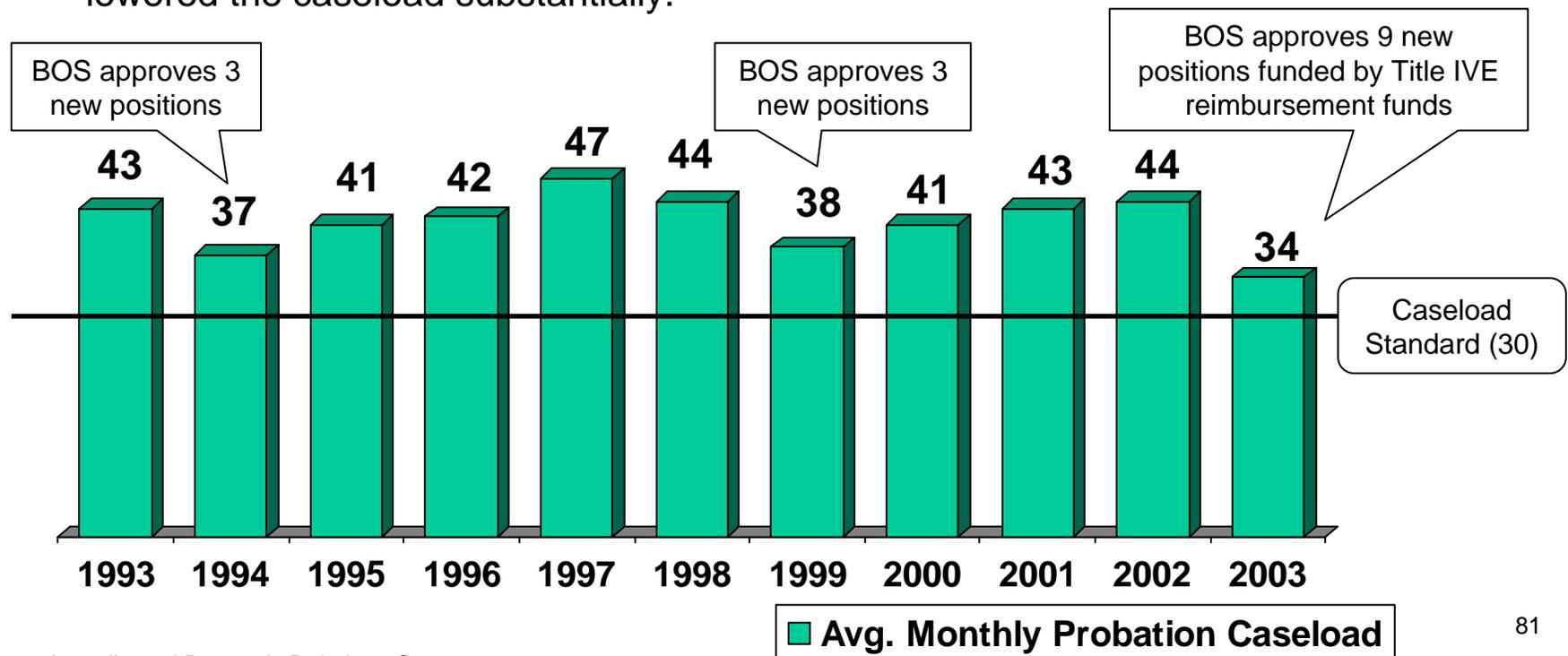


Source: Juvenile and Domestic Relations Court.
Fairfax County and City of Fairfax.

Juvenile Probation Services: Average Monthly Caseload

FISCAL YEARS 1993 to 2003

- During the 1990's, juvenile probation counselors at the Juvenile and Domestic Relations Court operated with average monthly caseloads that exceeded the state standards. Although the Board of Supervisors approved three additional counselors in FY 1994 and again in FY 1999, caseload growth continued to exceed the caseload standard. The addition of 9 new positions in FY 2002 lowered the caseload substantially.

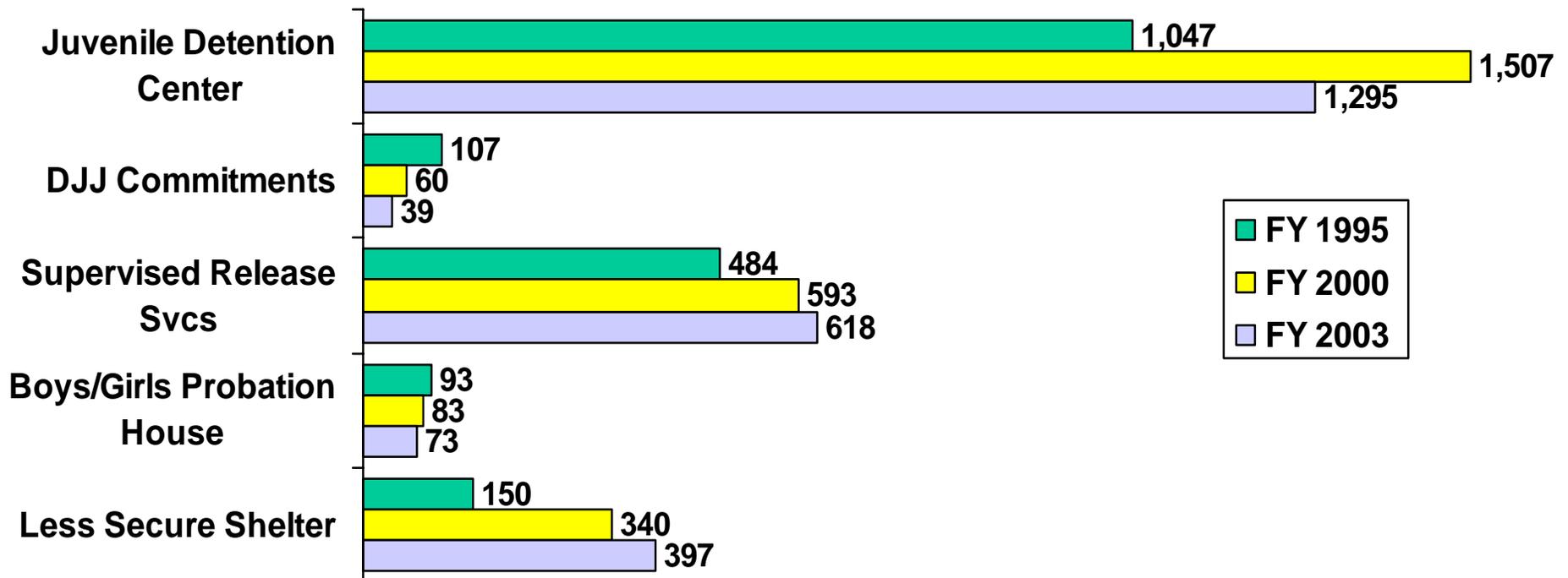


Source: Juvenile and Domestic Relations Court.
Fairfax County and City of Fairfax.

Residential Service Alternatives

FISCAL YEARS 1995, 2000, and 2003

- On any given day, there are more than 175 youth in residential facilities and programs. In FY 2003, a total of 2,422 placements were made to the programs listed below. The overall utilization rate for the Court's residential programs was 74% in FY 2003.



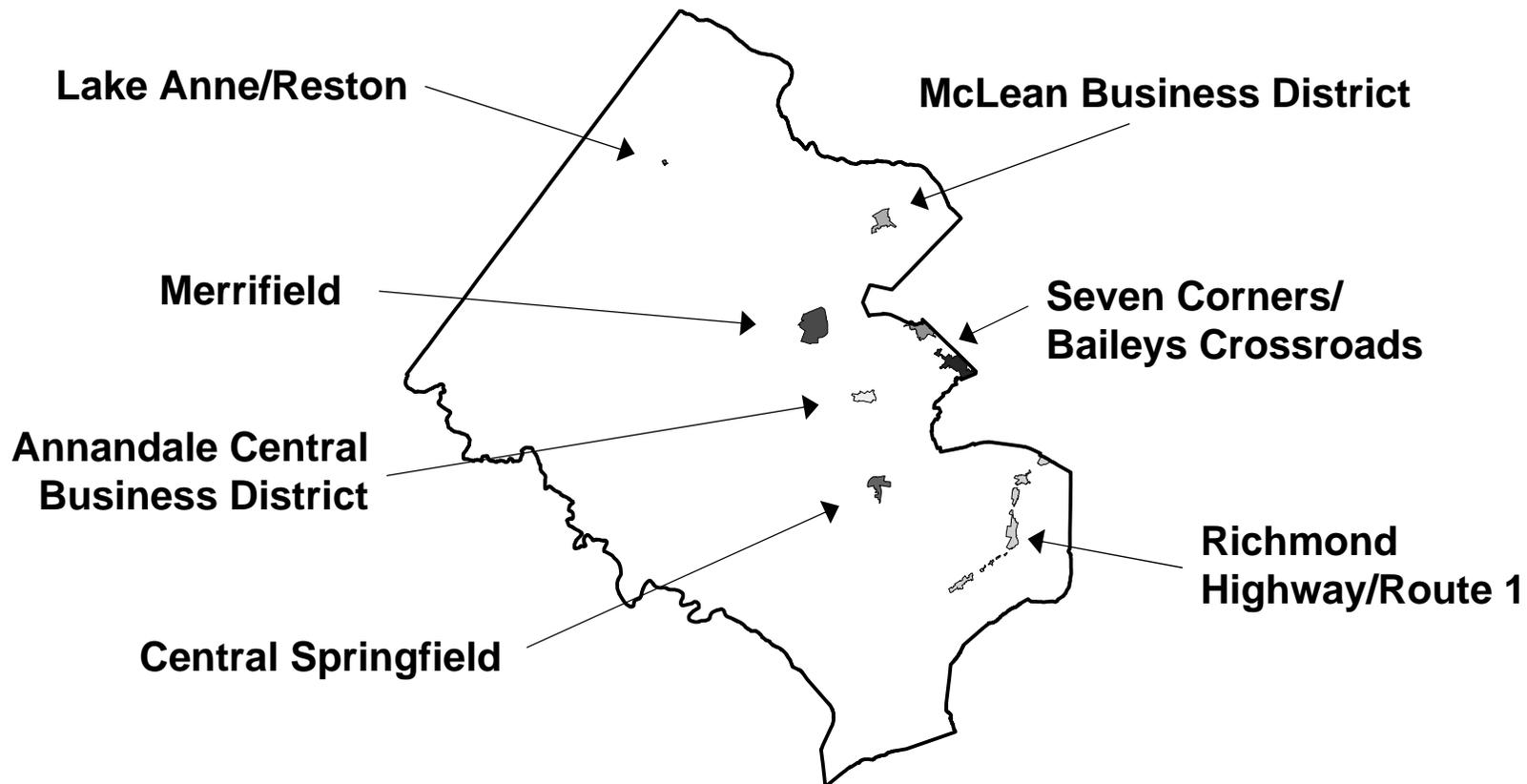
Source: Juvenile and Domestic Relations Court.
Fairfax County and City of Fairfax.

Fairfax County Human Services: Response to Challenges in the Community

- **Challenge 7:**
Providing Community-Wide and Targeted Supports to Prevent Social Isolation and Neighborhood Deterioration
- **Quality of Life Statement:**
Fairfax County is a community that supports and builds on the strengths of individuals, families and neighborhoods.
- **Action Statement:**
In collaboration with the community, provide targeted responses to the social, housing, and civic needs of residents in neighborhoods at risk of social or economic deterioration, as well as broad-based supports for community and family well-being.

Residential and Commercial Revitalization

- The **Department of Housing and Community Development (HCD)** administers a variety of revitalization efforts for Fairfax County which target both commercial and residential areas, as well as individual properties, throughout the County. To date, the Board of Supervisors has designated seven areas for targeted revitalization efforts.



Source: Fairfax County Redevelopment Housing Authority.

HCD Revitalization Programs/Initiatives

Revitalization Incentive Fund – approved in 2003.

- A new initiative by the FCRHA to provide loans to developers and businesses to provide incentives for medium- and larger-scale projects, including lower interest rates, more flexible terms, or accompanying grants.
- Loans would range between \$500,000 and \$2 million and would be expected to leverage additional private sector funds as part of a larger project financing.

The Community Improvement Program – designed to upgrade and preserve older moderate income residential communities built prior to subdivision ordinances requiring sidewalks, storm drains.

- Utilizes general obligation bond funds and homeowner investment to make improvements to streets, sidewalks, and storm drainage systems.
- Previous bond referenda funds are nearly depleted. A new referendum would be needed to address neighborhoods on the waiting list.

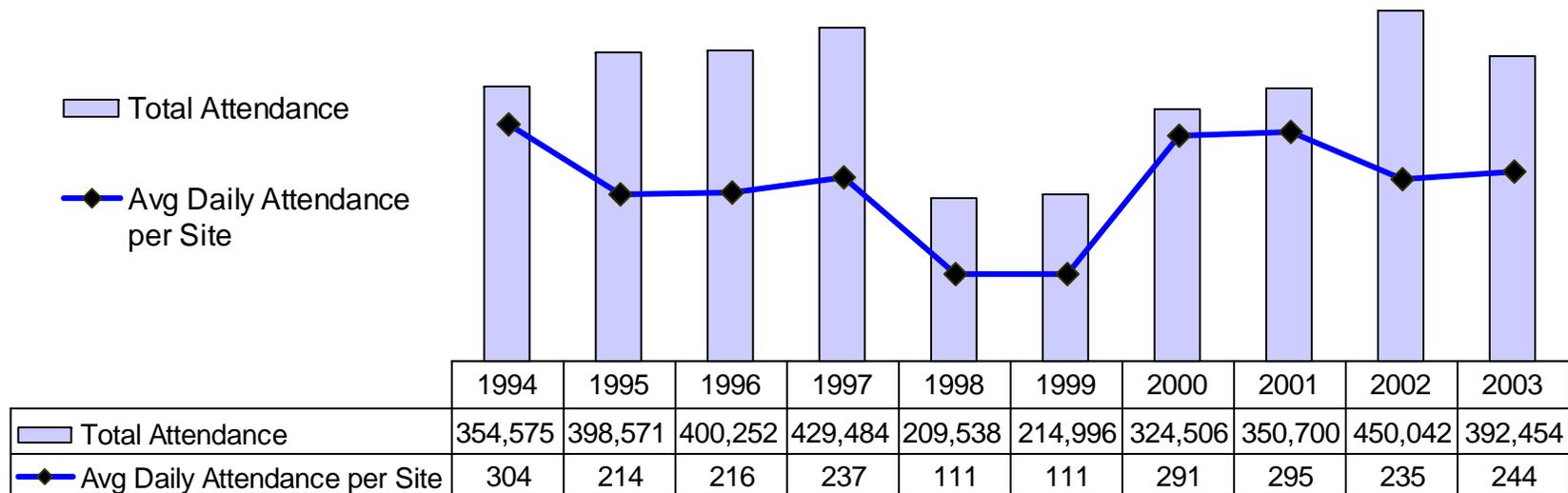
Blight Abatement Program - works with property owners to rid residential and commercial areas of deteriorated structures.

- This program is complemented by a Tax Abatement Program that provides tax credits to property owners for the rehabilitation, renovation, or replacement of older obsolete buildings

Community and Recreation Services: Total Attendance & Daily Participation at Community Centers

FISCAL YEARS 1994 to 2003

- Six community centers provide opportunities for leisure, socialization, and personal growth by offering affordable recreation and enrichment activities in the community.

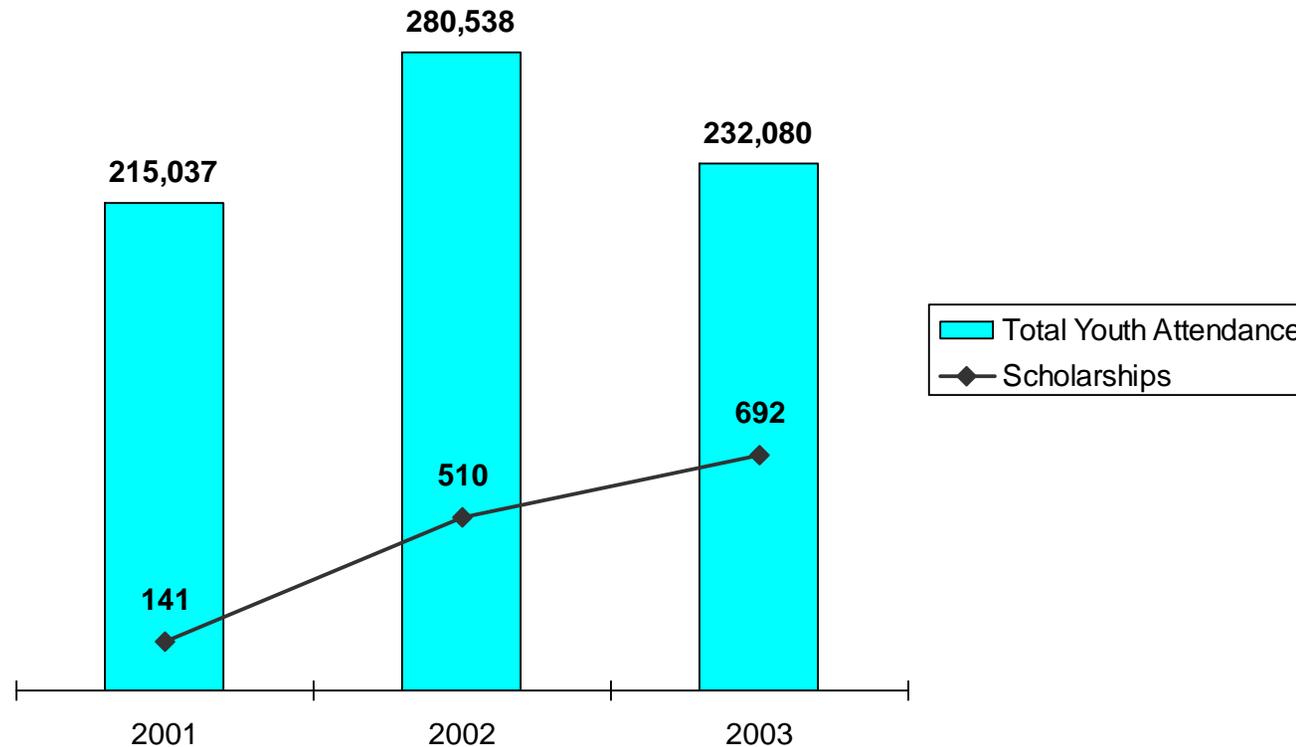


Source; Fairfax County Department of Community and Recreation Services.
Includes Residents of Fairfax County and the Cities of Fairfax and Falls Church.

Community Centers: Total Youth Attendance and Scholarships

FISCAL YEARS 2001 to 2003

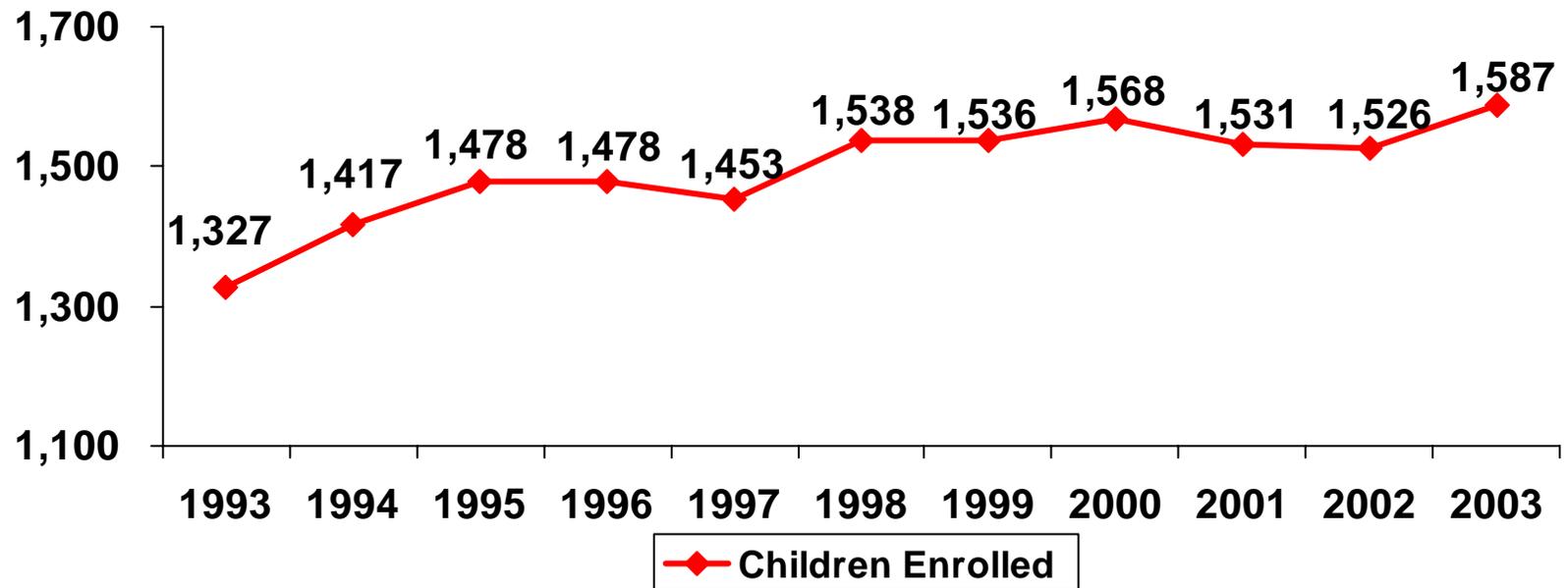
- Six community centers offer a variety of programs for youth of all ages. Scholarships are provided to those who desire to participate in specific programs and who meet minimum financial criteria.



Head Start Program: Number of Children Served

FISCAL YEARS 1993 to 2003

- Since 1993, enrollment in Head Start has increased by 19%. Due to funding and space constraints, demand for the program cannot be accommodated. Currently, there are 331 children on the waiting list.



Source: Fairfax County Department of Family Services, Office for Children.
Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.

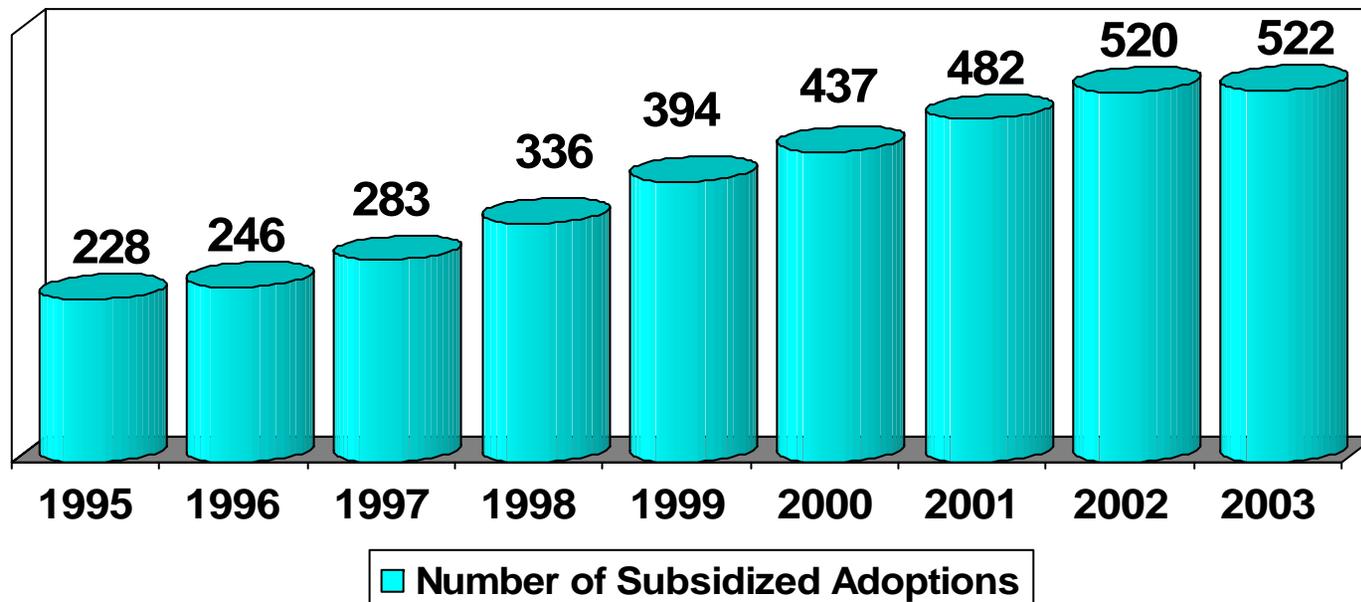
* The decrease in FY97 was the result of mandated smaller classroom sizes.

** The decrease in FY99 was the result of closing Edison House.

Subsidized Support for Special Needs Adoptions

FISCAL YEARS 1995 to 2003

- Subsidized adoption enables permanent placement of children with special needs by providing services and supports to adoptive families until the children reach the age of 18 or 21.
- Supports include referral to, and payment of home-based services, counseling and treatment, child care, health and educational services, therapy and special transportation services. The number of children getting subsidies grows as additional children are adopted. The program is supported with state and federal funds.

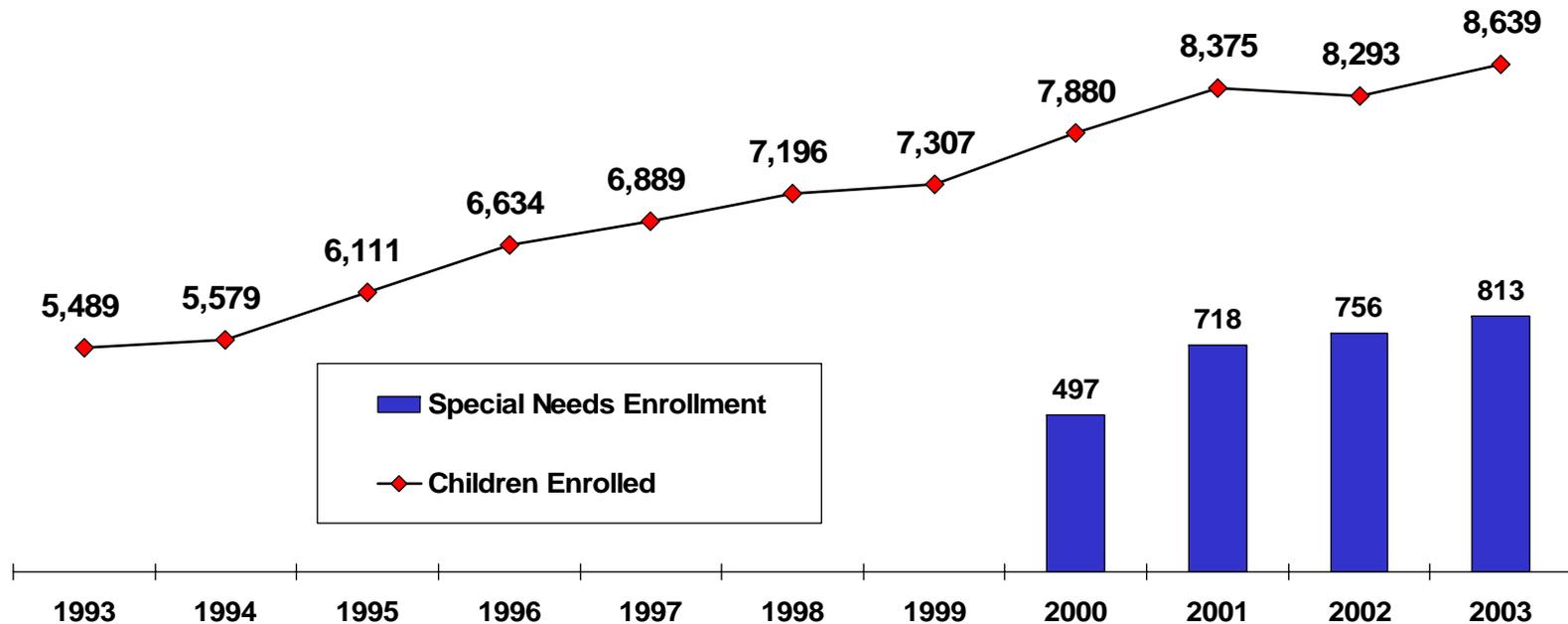


Source: Fairfax County Department of Family Services.
Includes Residents of Fairfax Co. and Cities of Fairfax and Falls Church.

School-Age Child Care Program: Number of Children Served

FISCAL YEARS 1993 TO 2003

- Since 1993, enrollment in the School-Age Child Care Program has increased by 57%. Due to increased demand for the program, SACC opens additional sites each year. Even with the expansion, there are still over 3,000 children on the waiting list.
- The number of children with special needs enrolled in SACC has increased by almost 40% since FY 2000. Approximately 10 percent of the children enrolled in SACC have special needs.



Source: Fairfax County Department of Family Services, Office for Children.
Includes Residents of Fairfax County and Cities of Fairfax and Falls Church.