First 5 San Mateo County
Strategic Plan
2015-2020

Approved on September 22, 2014
Vision: Success for every child.

Mission: First 5 San Mateo County promotes positive outcomes for young children and their families through strategic investments, community leadership, and effective partnerships.

Desired Outcomes:
The First 5 San Mateo County Commission (F5SMC) adopted the following desired outcomes to guide its efforts during the 2015-2020 Strategic Plan:

1. San Mateo County will give priority to young children and their families;
2. Communities provide a safe and healthy environment for young children;
3. Children have access to high-quality early care and education settings;
4. Families feel connected to and supported by their community and able to nurture their child’s health and development;
5. Children have healthy attachments to their parents and caregivers; and
6. Children have access to and are utilizing appropriate health care services to meet their health and developmental needs.

Preparing Children for Life-Long Success:
By the time children reach their sixth birthday, they should be poised to achieve their potential in all areas. This is frequently labeled “school readiness” and measured using standardized tests; however, what the First 5 San Mateo County Commission aims to achieve goes far beyond success in school settings. F5SMC wants children to succeed in all aspects of their lives.

The foundations for physical, emotional, cognitive, and behavioral health are laid during the first years of life. Children develop these capacities through interactions with responsive and loving caregivers in safe environments. Stable, nurturing relationships literally build children’s brains in ways that foster healthy, emotional expression, self-regulation and impulse control, and social interactions. Parents and other caregivers are better able to build warm and consistent relationships with children if they themselves feel secure in their lives. Parents who are experiencing mental health issues, substance abuse, violence, social isolation, or the stress of being unable to meet their family’s basic needs have a much more difficult time providing a nurturing environment for their children.

Research has identified four major building blocks that contribute to a child's likelihood of thriving in school and beyond: behavioral and emotional health, physical health, social skills, and academic skills. Children who arrive in elementary school well prepared in all four of these building blocks are over three times more likely to be reading at grade level in 3rd grade than children who need additional support in all areas. In fact, healthy behavioral and emotional development at kindergarten entry is just as important as academic skills in predicting future success. Given our charge to foster the optimal development for children prenatally through age 5, F5SMC can play a unique role in ensuring that communities prioritize the needs of young children and their families.

History of First 5 Children and Families Commissions:
In November 1998, California voters passed Proposition 10, the California Children and Families Act, which added a 50-cent tax on all tobacco products. The purpose of this funding is to create “an integrated, comprehensive, and collaborative system of information and services to enhance optimal early childhood development and to ensure that children are ready to enter school.”
The Act established the Children and Families Commissions, subsequently called First 5 Commissions, in each of the state’s 58 counties. It also created a State Children and Families Commission (First 5 California) that focuses on statewide initiatives, media communications, public education, and research and evaluation functions.

Funds from the Proposition 10 tax are distributed to each county based upon the number of births in that county. Commissions are responsible for developing strategic plans that guide funding decisions to meet local strategic priorities, consistent with the legislative intent of Proposition 10.

Over the years, First 5 County Commissions have funded a wide variety of programs and services that address the needs of children in the prenatal stage through age 5 and their families. Investments were made in the areas of early childhood development and education, health care, parent education and support. Additionally, investments have been made to improve capacity and quality of services provided to young children and their families. These local efforts have been complemented by an array of investments by First 5 California.

In recent years, many Commissions have been faced with the issue of declining revenues. While First 5 dollars were never able to meet all of the need for children 0-5 and their families, the decrease in funding has resulted in four related trends in Commission investments:

1) Endorsing practices with evidence of effectiveness;
2) Focusing on prevention;
3) Targeting populations most at risk; and
4) Shifting the balance from funding primarily direct services to more strategic and systemic investments.

During the next five years, First 5 San Mateo County expects to direct resources increasingly towards community partnerships, policy development, and leadership on issues related to young children and families. Declining revenues require the Commission to scale back its financial support for programs that directly serve children and families. The First 5 San Mateo County Commission has developed this Strategic Plan with these considerations in mind and has included a combination of focused financial investments and systems-level work that will still achieve positive child, family and community outcomes.

**About the First 5 San Mateo County Commission:**

The First 5 San Mateo County Commission was established in March 1999. It consists of nine Commissioners appointed by the San Mateo County Board of Supervisors. Since its inception, First 5 San Mateo County has invested more than $120,000 million in local programs and has served over 63,000 children from birth through age five. Each year, more than 8,000 parents and primary caregivers receive F5SMC services.

**Roles of the First 5 San Mateo County Commission:**

First 5 San Mateo County is fortunate to be a part of a community with a history of collaboration and partnership within and across our publically funded service sectors. In light of the Commission’s declining revenues as well as expanding opportunities for partnership, the First 5 San Mateo County Commission examined how its role in the community can best maximize positive impacts for children, families and the community. For the duration of the 2015-2020 Strategic Plan, F5SMC will focus on three primary community roles: Strategic Financial Investor, Community Partner in aligned efforts, and as a Community Leader to advocate for the prioritization of young children and their families in decision making processes.
• **Strategic Financial Investor:** The Commission’s role as an investor is to make positive movement toward its desired outcomes in critical areas of need for young children and their families. Specifically, these investments aim to make a unique contribution to specific family needs and are currently unable to be addressed by other entities. Strategic investments will also target quality improvement and enhancements with and across organizations and professionals serving children 0-5 and their families.

• **Community Partner:** The Commission’s role as a community partner may be as a leader, initiating collaborative efforts aligned to its vision and mission; as a partner in existing efforts for which the leadership is provided or shared; or as a champion of community efforts, encouraging the efforts of others better resourced to make a positive impact. First 5 San Mateo County prioritizes partnerships that are results-driven, action-oriented, and that are likely to achieve measureable results and community impact.

• **Community Leader:** As the County’s only organization dedicated exclusively to achieving positive outcomes for children 0-5 and their families, the Commission will vigorously advocate for their needs and priorities. Using appropriate and respectful channels, this leadership aims to ensure that young children’s unique health and developmental needs are known, discussed, and integrated into community solutions for families.

**Prioritizing San Mateo County’s Young Children:**
Lasting improvements to the well-being of the County’s youngest residents are possible when community organizations, policy makers, businesses, and residents understand the importance of supporting young children and their families, and work together to mobilize resources.

Voicing the need to prioritize young children and those who care for them is especially important in light of the stark inequalities of opportunity for the children of San Mateo County. Although it is one of the wealthiest regions of the nation, the cost of living here is high, making self-sufficiency a struggle for many families.

This inequity manifests itself in the stress experienced by parents and caregivers, and the opportunities available for young children to reach their potential. Children living in low-income families are less likely to visit the dentist, attend preschool, be read to daily, have access to enrichment activities, and are more likely to be diagnosed with a developmental disability and to have a parent dealing with depression.

First 5 San Mateo County strives to create the conditions that will allow all young children to prosper socially, emotionally, and economically. Altering the trajectory of children who currently arrive to school without readiness is a significant undertaking and will require a community solution not possible with funding alone. This effort will require common understanding, shared ownership, willingness to change, and commitment to opportunity for all children.

An example of this work is the Early Childhood Policy Cabinet, which was convened as part of the strategic planning process. The Cabinet consisted of a cross-section of large agencies in San Mateo County including the County Office of Education, Human Services Agency, Probation, Housing, and others. The leadership of these agencies quickly identified opportunities for alignment and maximization of positive outcomes while better meeting family needs. This work will continue as part of First 5 San Mateo County’s 2015-2020 Strategic Plan. Additional activities to promote the prioritization of young children in San Mateo County are listed below.
Policy, Advocacy, and Communication Efforts:

1. **Leadership on Early Childhood Advocacy & Policy Development**: Identify strategic partners and align leadership and resources to promote optimal child and family outcomes. Activities may include: Convening high-level, multiagency policy conversations that keep early childhood priorities and the impact of early childhood in the forefront of decision making; development and implementation of a Policy and Practices Platform that advances First 5 San Mateo County’s vision of *Success for every child*; partnering with elected officials, community leaders, and other stakeholders to promote an early childhood agenda.

2. **Community Partnership**: Foster cross-agency and multidisciplinary partnerships to better serve children 0-5 and their families. Activities may include: Facilitation of partnerships and collaborative efforts that increase the capacity and quality of services to children 0-5 and those that care for them; and hosting facilitated opportunities for multidisciplinary cross-training and networking for both funded and unfunded partners.

3. **Community Education**: Increase understanding about foundational early childhood topics such as early brain development. In coordination with other efforts, build public and political will to invest in the well-being and success of our young children. Activities may include: development and implementation of a Communications Plan highlighting the importance of a child’s early years, the needs and circumstances of families with young children in San Mateo County, and opportunities for stakeholders to act in ways that maximize positive outcomes for this population.

**Early Childhood Research:**
Proposition 10 was based on research that a child’s brain develops more during the first five years than any other time and that a child’s experiences and relationships during these years will impact a child the rest of his or her life.

Since that time, a wealth of research has supported and expanded upon these earlier findings. This newer research provides First 5 Commissions additional information about types of early childhood programs and services that make the greatest difference, as well as demographic targets that will achieve the greatest benefit.

Among the primary findings are:

- The brain undergoes its most rapid development from the prenatal period through three years old. In the first few years of life, 700 new neural connections are formed every second.
- During these early sensitive periods of development, healthy emotional and cognitive development is shaped by responsive, dependable interaction with adults.
- Conversely, stress experienced early in life can result in physiological changes to the brain and have a cumulative toll on a child’s physical, emotional, and cognitive development.
- The more adverse experiences in childhood, the greater the likelihood of developmental delays and life-long problems in learning, behavior, and physical and mental health.

The impact of experiences on brain development is greatest during the earliest years of a child’s life. It is easier and less costly to form strong brain circuits during the early years than it is to intervene later. However, it is important to remember that the brain remains flexible and capable of building new pathways throughout life. Therefore, while prevention of early childhood trauma is arguably ideal, intervention after stressors have occurred can also be significantly beneficial to children.
Children and Families in San Mateo County:
Located in the heart of the Silicon Valley, San Mateo County has a highly educated population with a median family income of $97,779. It is home to over 56,000 children age five and under. Latino children are the majority population in the county at 34.6%, followed by Caucasian (32.2%) and Asian-American (21.9%). Other ethnic populations include: Multiracial (7.2%), African-American (2.2%), and Pacific Islander (1.7%).

Eleven percent of all children 0-5 are living at or below federal poverty standards. Compared to the overall population of children 0-5 in the county, Latino and African American children are much more likely to be living in poverty than all other children. In fact, 44% of all African American children 0-5 and 23% of all Latino children 0-5 live in poverty.

While the median annual income for families in the county was $97,779 in 2012, the Self-Sufficiency Standard for California estimates that a San Mateo County family of 2 adults and 2 children (one infant/toddler and one preschooler), would need an annual income of $99,008 to make ends meet without assistance. Although relatively few families in the county live below the Federal Poverty Line, 42% of families with young children are below the Self-Sufficiency Standard. At the same time, high housing prices continue to make owning a home – or even finding affordable rentals – difficult for most families, as the median value of housing units is almost double that of the state.

According to the 2013 Silicon Valley Parent Story Project, approximately a third of parents in San Mateo and Santa Clara Counties experienced depressive symptoms. Low-income parents reported higher frequency of depressive symptoms compared to middle-to-high income parents. The study also brought to light several other troubling disparities between low-income or Latino parents and their middle-to-high income, non-Latino peers. These included:

- Low-income parents reported lower levels of both personal and neighborhood support;
- Latino preschool-age children were less likely to be enrolled in preschool and less likely to participate in enrichment activities outside of school;
- Low-income parents were more likely to encounter problems finding childcare and identified cost and inconvenient hours or locations as barriers to selecting child care options; and
- Low-income parents engaged in language development activities less frequently with their infant/toddler than middle-to-high income parents.

The Parent Story Project also presented findings that illustrated strengths among low-income and Latino parents. These included that they:

- Were more likely to help their children with homework;
- Were more likely to have family meals together than middle-to-high income parents; and
- Reported a greater ability to deal with stress compared to non-Latino parents.

Core Values & Guiding Principles:

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The First 5 San Mateo County Commission has established the following Core Values and Principles to guide this Strategic Plan.

Core Values:
We believe that our work must:

- **Support the whole child within the whole family:** We understand that young children’s social, emotional, physical, and cognitive development are interdependent, and that children grow and learn within their family relationships and the larger community.

- **Build connections between the many systems that serve young children and their parents and caregivers:** We recognize the importance of smooth transitions for children and families as they grow from infancy through toddlerhood and preschool, and enter elementary school.

- **Embrace the importance of fathers and male role models in the healthy development of children:** We expect intentional inclusion of fathers/male role models and consideration of their needs within the structure and delivery models of family services and supports.

- **Promote positive early development and focus on prevention and early intervention:** We know that 75% of a child’s brain develops before the third birthday, and that it is therefore critical to support pregnant women and to help mothers, fathers, and caregivers establish and maintain stable and loving relationships with their infants and toddlers.

- **Include children of diverse abilities:** We support the right of all children to actively participate in natural settings within their communities.

- **Respect and engage parents and families:** We acknowledge the strength of individual familial structures and cultures, and respect parents' desire and ability to nurture their children and act as their first teachers.

- **Honor cultural, ethnic and linguistic diversity:** We ensure that services are delivered in a culturally and linguistically competent way.

- **Appreciate strengths:** We build upon the positive qualities of children, families, and communities in the design and delivery of programs.

- **Enlarge community capacity:** We invest in our community’s understanding of and ability to support the healthy development of all children.

Guiding Principles:
In our work on behalf of young children, we strive to:

- **Create Value:** Invest in approaches that add social and economic value to the landscape of supports for all children and families; and build upon, integrate, and collaborate with existing services to improve quality and provide efficient service delivery.

- **Promote Equity:** Ensure that all children, regardless of circumstance, have the opportunity to reach their full potential, and include families as partners in decisions that affect their service provision.

- **Foster Excellence:** Expect excellence and allow for innovation in the development and implementation of initiatives and programs.

- **Demonstrate Effectiveness:** Consider the existing evidence of impact when designing and supporting activities, and evaluate our investments to monitor results and inform continuous quality improvement.
• **Achieve Sustainable Change**: Use Commission investments to affect long term policy, institutional, funding, and systemic changes that extend the reach and impact of First 5 San Mateo County activities.

**Developing the Strategic Plan -- The Planning Process:**
In February 2014, the First 5 San Mateo County Commission began its strategic planning process to guide future community investments. The process included the following activities:

- A discovery process to identify and analyze relevant First 5 San Mateo County documents and data to inform the planning;
- A “Listening Tour” of relevant community meetings and events to inform the community context within First 5 San Mateo County’s strategic planning;
- A survey of all First 5 San Mateo County grantees;
- A survey of First 5 San Mateo County Commissioners;
- A focus group and several planning meetings with First 5 San Mateo County staff;
- An analysis of First 5 San Mateo County service and evaluative data; and
- Seven strategic planning sessions held as part of Commission meetings that included some tabletop dialogue sessions among Commissioners, community members, representatives of community based organizations, and First 5 San Mateo County staff.

In addition, an Ad-Hoc strategic planning committee comprised of four commissioners convened regularly to provide direction to the process, structure, and make recommendations to the full Commission on aspects of the plan. The information gathered from these discussions served as guidance for the strategic planning process and informed the Commission’s deliberations and ultimate decisions on the Strategic Plan.

**Framework for the 2015-2020 Strategic Plan:**
The 2015-2020 Strategic Plan is consistent with the focus and intent of the Children and Families Act, building on what has been learned and accomplished locally and providing a framework for the Commission and the community for how Proposition 10 funds will be strategically invested over the next five years.

Central to the success of these investments is a strong foundation that adequately prioritizes early childhood systems and services in San Mateo County. These foundational improvements will be furthered with investments in three core focus areas: Early Learning, Child Health & Development, and Family Engagement.

**Focus Area: Early Learning**

**Introduction:**
Early learning settings—including infant and toddler care, family child care homes, and center-based preschool programs—play a critical role in nurturing children’s social, emotional, and cognitive development and are an essential component of any strategy to promote school readiness and success in all aspects of life. In San Mateo County, 71% of children ages 0-5 live in families where all parents work (American Community Survey, 2010-2012 3 year estimates), and 81% of kindergartners attended preschool in the year before entering elementary school (2012 San Mateo County School Readiness Assessment). The benefits of a continuum of high-quality early learning, beginning in infancy and with smooth transitions into toddler care, preschool, and elementary school, has been well researched and is a priority for the Commission.
Quality matters when providing early care and education services. Programs that participate in continuous quality improvement efforts are more likely to prepare students for success in school and beyond. Children who participate in high-quality early childhood education programs show long-term impacts on their ability to learn and interact with the world around them, including increased language and math skills, positive peer relationships, decreased rates of grade repetition, fewer referrals to special education services, and higher levels of cognitive and social development.

**Rationale:**
The long-term economic benefit of children attending high-quality preschool programs is well documented, particularly for children living in low-income households. These “rate of return” studies differ on level of return depending on the population served, length of the program, and quality enhancements. One of the most widely studied programs is The Perry Preschool Program, a high-quality, half-day preschool targeted to very low income children. Evaluations of this preschool document that the program returned seven dollars for every dollar invested.

Parents of children with special needs and of infants and toddlers consistently report difficulty finding appropriate child care settings for their children. According to the 2010 San Mateo County Child Care Needs Assessment conducted by the Child Care Partnership Council, only 56% of the demand for infant and toddler care can be met with the available supply, and only 21% of the need for subsidized infant/toddler care is addressed. The report estimated that the parents of 1,956 children ages 0-5 with identified special needs are looking for an early learning program that will enroll their child. High-quality early learning programs can also provide an early identification process to assess young children for special needs. Early interventions for children at high risk can improve their social competence and cognitive abilities prior to school entry. These programs adapt to meet the needs and strengths of their students, to ensure that students with physical, sensory, or cognitive disabilities can learn some or all of the same lessons as other students.

In order to enroll their children in high-quality, early learning programs, parents must be able to find understandable, user-friendly, reliable information about the quality of specific programs. Currently, there is no way for parents to easily access information regarding the quality of care providers.

As a member of the Peninsula Partnership Leadership Council and the Big Lift Initiative, the Commission is proud to support preschool quality improvement. The Big Lift aims to increase the percentage of San Mateo County children reading at grade-level in 3rd grade from 57% to 80% through four main strategies: Increasing the availability of high-quality preschool in low-performing school districts; partnering with families to help children reach their potential; reducing chronic absenteeism; and creating inspiring summers for children. It was initiated by the Peninsula Partnership Leadership Council, which has over 50 member organizations and has been fueled by a $10M commitment by the San Mateo County Board of Supervisors in 2013. First 5 San Mateo County can play a key role in supporting the quality of early learning programs through the Big Lift. This effort is complementary to the Commission’s participation in the Early Learning Race to the Top Challenge and First 5 California’s Child Signature Program, which aim to improve the quality of early care for children ages 0-5 using validated, research-based quality assessment ratings.
Strategies for Investment:

1. **Quality Improvement**: In partnership with existing community efforts, support formal quality improvement frameworks in early learning environments, and provide the services required to help providers and programs improve their quality as measured by these frameworks. Such services may include: program quality assessments, facility enhancements, early learning provider training, technical assistance, coaching/consultation, and peer mentoring. Recruiting, retaining, and educating the early learning workforce is vital in creating and sustaining high-quality early learning programs.

2. **Expand Access to Early Learning Settings for Children with Special Needs** and for Infants and Toddlers: Support families’ ability to access appropriate early learning experiences for their children with special needs and their infants and toddlers. Such efforts may include: enhanced referrals matching children with appropriate placements; and advocating for policies and practices that increase the availability of childcare for infants and toddlers.

3. **Strengthen Understanding of High Quality Early Learning Settings**: Increase parents’ understanding of the importance of quality care environments, and their knowledge and ability to choose quality care. Activities may include: supporting the creation of a publically available and user-friendly online directory of early learning program quality ratings.

4. **Big Lift Participation**: In addition to the many strategies already listed in this strategic plan that are foundational to the Big Lift and its quality elements, the Commission will also continue to support the effort and respond to its emerging needs that meet the intent of this plan and are complimentary to the San Mateo County community collaboration.

Population-level Indicators:
These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor the following indicators to inform its work:

- Increase in the percentage of children ages 3-5 who are enrolled in preschool prior to Transitional Kindergarten/Kindergarten entry;
- Increase in the available supply of infant and toddler care relative to the need;
- Increase in the number/percent of early learning programs that enroll and maintain children 0-5 with special needs; and
- Increase in the percentage of all early learning programs participating in the QRIS.

Participant-level Indicators:
These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:

- Increase in the percentage of children ages 3-5 who are enrolled in quality preschool prior to Transitional Kindergarten/Kindergarten entry (data not currently available at this time);
- Increase in the percentage of early learning programs rated at 3 or above on the QRIS scale; and

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2 Children with special needs have or are at risk for a chronic physical, developmental, behavioral or emotional condition and also require developmental, medical, health and related services of a type or amount beyond that required by children generally. (Adapted from The U.S. Department of Health and Human Services, Maternal and Child Health Bureau.)
• Increase in the percentage of families of children with special needs and of infants/toddlers reporting ability to access appropriate early care for their children.

**Focus Area: Child Health and Development**

**Introduction:**
Children’s health and development is influenced by many factors, including the ability to access comprehensive health care; whether developmental concerns are detected and treated early, the environments in which they live and are cared for, and by the social conditions that impact them.

Access to medical care for children can help prevent threats to healthy development, and provide early detection and intervention for problems that emerge.\(^9\) Well-baby and well-child health care focus on prevention and promote child health by reducing the incidence of illnesses. The wide availability of general health services, including mental health services, is one of the most effective policies available for reducing early childhood health impairments.\(^10\)

Additionally, the conditions in which children are born, grow, live, and attend school also factor in to their health outcomes (Data source: [www.who.int/social_determinants/en/](http://www.who.int/social_determinants/en/)). These social determinants of health are shaped by the distribution and access to resources and power (Ibid). Therefore, improving the conditions where children live, play, and go to school can help to create a healthier population and society where children thrive.

**Rationale:**
Adequate medical surveillance and preventative care for pregnant women and children 0-5 are critical to the long-term wellbeing of children. Although the Affordable Care Act (ACA) has increased access to insurance for some, the Healthy Kids program in San Mateo County offers health insurance coverage for many children not eligible for other insurance products and for whom private insurance is out of financial reach. Health coverage and utilization of preventative care benefits has been and continues to be a priority for the First 5 San Mateo County Commission. Because F5SMC is unable to meet all health needs for young children and their families, it will focus on collaborative efforts in three areas: mental health, special needs, and oral health.

Early identification and treatment of special needs during the first five years of life is critical because this is the time when a child’s brain, body, and behavior are most malleable. Although developmental delays pose great risks for all children, delays that are prevalent among low-income children are often undetected.\(^11\) Undetected developmental problems in young children may cause delays in acquiring speech and language, inability to maintain relationships, and serious impediments to school learning.\(^12,13\)

In addition, California ranks 46\(^{th}\) in the nation on effective care coordination for children with special health care needs, and families in our state are more likely than families in every other state to cut back or stop working due to their child’s condition (Data source: 2009/10 National Survey of Children with Special Health Care Needs. Data Resource Center for Child and Adolescent Health. [www.childhealthdata.org](http://www.childhealthdata.org)).

In addition to the individual behaviors that can help children stay healthy such as eating well, getting enough physical activity, and attending preventative health care appointments, health is also partially determined by social factors. The conditions in which children live explain in part why some are healthier over the course of their lives than others (Data source: [www.healthypeople.gov](http://www.healthypeople.gov)). By helping to insure access to social and physical environments that promote good health for all San Mateo County children, First 5 San Mateo County intends to play a role in promoting health equity.
Strategies for Investment:

1. **Health Care Access & Utilization:** Fund unmet need for Healthy Kids health insurance premiums as part of a funder collaborative and promote the utilization of preventative services and benefits of that coverage. Address gaps in direct services, targeting high-risk children, in the areas of mental health, special needs, and oral health. Activities may include: outreach, enrollment, retention, and utilization support; funding for health insurance premiums; partnerships to improve young children’s utilization of preventive oral health care and to increase the number of San Mateo County dental providers serving children on public dental insurance; and partnerships to address the persistent shortage of mental health, developmental, and behavioral services for young children.

2. **Integrate Systems for Children with Special Needs and their Families:** Bolster the continuum of services that identify and treat children with special needs, and the ongoing efforts to address systemic issues that impact access to and the quality of these services. Activities may include: promoting universal health, social-emotional, and developmental screening services for children 0-5; co-location of services; incorporating screenings, assessments, and care coordination into pediatric clinics, early learning settings, or family support services; supporting timely access to assessment, care coordination, and services for children and families requiring additional assistance.

3. **Safe, Healthy, and Equitable Communities:** Promote equitable access to safe environments and healthy foods, beverages, and activities for children 0-5 and their families. Activities may include: population- or place-based interventions; public education and awareness campaigns; or participation in other collective efforts to build health equity.

**Population-level Indicators:**
These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor the following indicators to inform its work:

- The percentage of children ages 0-5 exposed to high levels of community violence, who live in neighborhoods that are safe for walking and bicycling, and who have access to fresh, affordable, and healthy food;
- Participation by early learning programs in efforts to improve the nutritional and physical activity offerings for the children they serve;
- Maintenance of universal or near-universal health insurance rates for children ages 0-5 (at or above 98.5% of children 0-5 insured);
- Increase in the number or capacity of dental providers who serve children on public insurance; and
- Increase in the number of pediatric health providers who provide access to developmental screening as a part of routine well-child visits

**Participant-level Indicators:**
These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:

- Increase in the percentage of children with the appropriate number of well-child visits for their age in the past 12 months, calculated using the Academy of Pediatrics schedule;
- Increase the percentage of children ages 1-5 who have seen the dentist for a routine check-up in the past year; and
- Reductions in the percentage of parents reporting difficulty accessing services for mental health, developmental, or behavioral concerns.
Focus Area: Family Engagement

Introduction:
Children do well when cared for by supportive families, which, in turn, do better when they live in vibrant and supportive communities. The early childhood field has gained tremendous knowledge in the past ten years about the way in which families should be engaged regarding children’s healthy development. Strength based approaches that authentically recognize and value the culture, language, and alternative family structures are beginning to be accepted by the field as the best way to partner with families to achieve positive outcomes for children.

By working with parents as equal partners in their child’s healthy development, as well as acknowledging parents, schools and communities as collectively responsible for the success of children, we promote reciprocal relationships that exponentially benefit children.

Supporting the child’s early development is complimented by investing in parents and the family environment. This is especially true for families facing many challenges. Supporting families with multiple stressors diminishes the effects of trauma and promotes resilience by providing a more stable foundation for life-long learning and success.

First 5 San Mateo County funding alone is unable to significantly impact families with young children. However, it can make a significant impact by pairing its strategic financial investments with systems improvement partnerships within and across the existing support network for families and children in our county.

Rationale:
Secure, stable, and supportive relationships with caring adults significantly contribute to a child’s healthy brain development. A loving and caring environment within the parent-child relationship is associated with many positive outcomes including higher self-esteem, increased communication, and fewer psychological and behavioral problems. Furthermore, lower levels of parenting stress may serve as a protective factor of the social-emotional health of their children.

Families in greatest need of support, for example parents with mental health or substance abuse problems and parents experiencing domestic violence or incarceration, -- and especially those dealing with more than one serious issue -- benefit from focused services that are targeted to their particular source of stress.

It is critical that parents and caregivers feel able to nurture their child’s optimal development because positive home learning environments contribute significantly to a child’s school achievement. When parents act as their child’s advocate and are involved in their child’s education, it is more likely that their child will have increased school attendance and higher academic achievement. Effectively partnering with parents in promoting their child’s optimal development also results in better life-long outcomes and reduces costs to society for special education, welfare, criminal justice and health.

Data gathered from First 5 San Mateo County’s research and evaluation efforts has identified social isolation, especially during the infant and toddler years, as a common struggle for parents. Between 2009 and 2013, the proportion of parents participating in F5SMC services who report a lack of social support has increased from 24% to 33%. This mirrors one of the key findings of the 2013 Silicon Valley Parent Story Project, which found that 37% of low income families could not count on anyone in their neighborhood for help.
Strategies for Investment:

1. **Intensive Support for Families with Multiple Risk Factors**: Provide ongoing, individualized, professional support to children and parents in families experiencing multiple challenges, such as: homelessness, low income, domestic violence, incarceration, mental illness or substance abuse. Activities may include: home visiting, care coordination, case management, family needs assessments, social-emotional screening, and therapeutic services.

2. **Parent Partnerships**: Capitalize on parents’ intrinsic strengths by engaging them as equal partners in services delivered to their families and by promoting parent leadership opportunities during service delivery that value their unique experiences, knowledge of their child, and ability to advocate on their behalf. Activities may include: groups, classes, and workshops that reinforce and strengthen parenting practices while appreciating the importance of the reciprocal process between parents and providers.

3. **Parent Connectivity**: Support informal or semi-formal social networks to promote parental resiliency and reduce social isolation. Activities may include: mothers’ or fathers’ groups; paraprofessional- or peer-led support groups; social media networking opportunities; father involvement efforts; developmental play groups; and partnering with parents to identify parent leaders who understand and share knowledge about attachment and early child development among their peers.

4. **Training & Capacity Building**: Increase the understanding of early brain development and the parent-child relationship among service providers from sectors whose decisions affect family functioning, and promote the appropriate application of that knowledge within their work. Activities may include: training and capacity building of both service sector leaders and direct service staff on early childhood development, adverse early childhood experiences and related subjects; promotion of family-centric practices; and increased cross-sector knowledge of programmatic services and eligibility. Examples of target service sectors may include: housing, law enforcement, criminal and family court, child welfare, probation, and other community agencies.

**Population-level Indicators:**
These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor the following indicators to inform its work:

- Increase in the percentage of children reunified with their families within 12 months of entering out of home care;
- Decrease in the percentage of children ages 0-5 re-entering the child welfare system;
- Increase in the percentage of parents who regularly read, sing, and/or count with their children ages 0-5; and
- Increase in percentage of parents who report feeling connected to a support network.

**Participant-level Indicators:**
These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:

- Reductions in the number and/or severity of risk factors reported by parents, such as inadequate food, inadequate housing, depression, domestic violence, and substance abuse;
- Increase in percentage of parents reporting that they are able to access the services their family needs;
- Increase in percentage of parents who report feeling connected to a support network;
• Increase in percentage of parents reporting confidence in their ability to nurture their children and support their development; and
• Increase in the percentage of parents who regularly read, sing, and/or count with their children ages 0-5.

**Accountability and Evaluation:**
First 5 San Mateo County Commissioners are responsible for ensuring that First 5 funds are used as voters intended when Proposition 10 was passed in 1998. Commissioners work with First 5 staff to create and implement internal policies and procedures in order to help guide decision-making that is both consistent with the law and that respects and honors families with young children. In addition, Commissioners serve on committees such as Finance & Administration, Program, Operations, and Planning, and Evaluation. Committee work facilitates in-depth discussions on internal and external activities and responsibilities. Reports from committee meetings are a part of each Commission meeting.

Organizations that receive First 5 San Mateo County funds report financial, program, and evaluation data in order to ensure compliance within their contractual guidelines. F5SMC staff partner with grantee staff to ensure that all programs utilize best practices. The fiscal reporting structure of the First 5 San Mateo County Commission was developed in accordance with the First 5 Financial Management Guide. This guide is a result of a cooperative project of the First 5 Association, First 5 California, and the Government Finance Officers Association of the United States and Canada (GFOA). Each year, F5SMC reports financial and program data to First 5 California for inclusion in the statewide Annual Report. In addition, F5SMC completes a comprehensive external audit annually. Together, these measures serve to ensure the public that Proposition 10 funds are being used as they were intended.

**Comprehensive Evaluation:**
Since 2009, First 5 San Mateo County has used a Comprehensive Evaluation approach to track its impact and identify effective strategies for achieving its desired outcomes using common indicators and data collection protocols across all funded partners. The Comprehensive Evaluation has provided the Commission with a more complete picture of the families and providers we serve, and the benefits they gain from F5SMC-funded programs. For example, among families who received home visiting or care coordination services between 2009 and 2013:

- 82% lived in households with an annual income of less than $30,000;
- 78% were Latino, and 70% spoke primarily Spanish;
- 71% of parents had a high school education or less;
- 64% of parents read to their children at least 3 times per week;
- 57% of children were breastfed for at least six months;
- 51% of parents worried about inadequate housing;
- 47% of children ages 1-5 had never been to the dentist;
- 37% of the children had developmental concerns identified at screening, and 12% had been diagnosed with a developmental disability;
- 36% of children had two or more hours of screen time per day;
- 28% of parents needed help with their sadness or depression;

A comprehensive approach to evaluation allows the First 5 San Mateo County Commission to look broadly at the children, families, and providers we serve, and to examine our impact across all funded programs. As we place more of an emphasis on the value we create in partnership with others who fund, develop, and implement programs and policies intended to enhance the well-being of children 0-5, this type of approach will become even more relevant. Collective Impact models of community change
common data collection and data sharing procedures. First 5 San Mateo County looks forward to using our Comprehensive Evaluation data to enrich the larger conversation about the challenges confronting young children and their families, and how we can collaborate as a community to overcome these challenges. Such an effort will require that all partners build deeper connections to align, share, and use the data we collect on behalf of the children and families we serve.

**Status of Young Children Countywide:**
In addition to evaluating the impact of its funded programs, F5SMC has an interest in tracking the overall status of the young children and families of San Mateo County. Partnering with local and regional funders to collect and analyze information about the status of young children allows all those who care about the well-being of our youngest residents to monitor trends, identify emerging issues, and inform program and policy development. To further these ends, the Commission will continue to partner with other funders in support of countywide research projects such as school readiness assessments, parent surveys, or service participation analyses.

**Conclusion:**
Despite a backdrop of declining revenue, First 5 San Mateo County aims to increase its positive outcomes for children 0-5 and their families through strategic alignment with effective partners. Focusing its limited resources on specific efforts where the Commission can make a meaningful contribution while engaging the community about the prioritization of its future – its children – is a bold endeavor and one for which the Commission is ready.

**First 5 San Mateo County Commissioners:**
- Michael Garb, Public Member, Commission Chair
- Angel Barrios, Public Member
- Anne E. Campbell, County Superintendent of Schools
- Jean Fraser, Chief, Health System, Vice-Chair
- Jorge Glascock, Public Member
- Harvey Kaplan, M.D., Public Member
- Lee Michelson, Public Member
- Dave Pine, Board of Supervisors
- Iliana Rodriguez, Agency Director, Human Services Agency

**First 5 San Mateo County Youth Commissioners:**
- Felipe Afanador
- Max Weinstein

**First 5 San Mateo County Staff:**
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- Khanh Chau, Financial Analyst
- Jenifer Clark, Research and Evaluation Specialist
- Karen Pisani, Family Support Program Specialist
- Emily Roberts, Child Health and Development Specialist
- Chonne Sherman, Communication & Operations Liaison
- Mey Winata, Fiscal Office Specialist
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- First 5 San Mateo County staff for their thoughtful and tireless work, and dedication to San Mateo County’s youngest children and families; and
- Viva Strategy + Communications for their wise counsel and facilitation of the strategic planning process.

Sources:

1. - U.S. Census Bureau: State and County QuickFacts. Updated: 08-Jul-2014
3. - Ibid.
4. - Silicon Valley Parent Story, WestEd, 01-Jan-2014

