



# First 5 San Mateo County 2025-2030 Strategic Plan

July 1, 2025 - June 30, 2030





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## Term

July 1, 2025 - June 30, 2030

## Mission

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

## Vision

**Success for Every Child.**

San Mateo County: Where everyone belongs and children lead the way.

## Who We Are and What We Do

### History of First 5 Children and Families Commissions

In November 1998, California voters passed the California Children and Families First Act (Prop 10). This groundbreaking legislation 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 Children and Families First Act are distributed to each county based upon the number of births in that county. County Commissions are responsible for developing strategic plans that guide funding decisions to meet local strategic priorities, consistent with the legislative intent of the Act.



For the last 25 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, and 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 addition to the First 5 Association Network, an advocacy organization solely dedicated to children prenatal to age 5 across all 58 counties in the state.

**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 five related trends in Commission investments:**

1. Endorsing promising practices or practices with evidence of effectiveness
2. Focusing on prevention and early identification
3. Targeting populations most at risk and/or those facing the largest inequities
4. Shifting the balance from funding primarily direct services to efforts that contribute to broader systems change
5. Considering the contextual landscape at the local, state, and federal level by examining the policy and budget landscape, partnership opportunities, and other funding and sustainability considerations

As outlined in its 2025-2030 Strategic Plan, First 5 San Mateo County is prioritizing partnerships with entities that are achieving both direct impact and positive systemic change. This approach fosters sustainable improvement within agencies and systems, and allows families beyond the direct service reach to benefit. Many of our investments serve present needs as well as examining and improving the underlying systems.

## 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 \$182 million in local programs and has served nearly 117,000 children from birth through age five. Each year, more than 3,000 parents and primary caregivers receive First 5 San Mateo County-funded services.

## Roles of the First 5 San Mateo County Commission

As children and families live whole and integrated lives, First 5 San Mateo County recognizes that efforts to make a positive impact for young children and their families are inherently interwoven and often intersect. Over the past twenty-five years serving children and families, the First 5 San Mateo County Commission has successfully woven the roles of *Strategic Financial Investor*, *Community Partner*, and *Systems Leader* within and across its various strategies and domains.





First 5 San Mateo County (F5SMC) is fortunate to be a part of a community with a history of collaboration and partnership within and across our publicly funded service sectors and community-based organizations. In light of the Commission's declining revenues, as well as expanding opportunities for partnership, the First 5 San Mateo County Commission reaffirmed that its desired role in the community is to maximize positive impacts for children, families, and the community. For the duration of the 2025-2030 Strategic Plan, F5SMC will continue to weave together its three primary community roles: Strategic Financial Investor, Community Partner in aligned efforts, and Systems Leader to advocate for the prioritization of young children and their families in decision-making processes.

## F5SMC's Primary Roles:

- **Systems Leader:** As the County's only organization legislated exclusively to achieving positive outcomes for children 0-5 and their families, the Commission will set and drive a child-centered agenda and vigorously advocate for their needs and priorities. Using appropriate and respectful channels, this leadership aims to ensure that the unique health and developmental needs of young children are known, discussed, and integrated into community solutions for families.

As a systems leader, F5SMC identifies strategic partners and aligns leadership and resources to promote optimal child and family outcomes; convenes high-level, multi-agency policy conversations that keep early childhood priorities and the impact of early childhood in the forefront of decision making; develops and implements a Policy and Practices Platform that advances F5SMC's vision of success for every child; and partners with elected officials, community leaders, and other stakeholders to promote an early childhood agenda. F5SMC continues to maintain strategic partnerships with state-level groups such as First 5 California, the First 5 California Association, and other early childhood advocacy-focused organizations.

- **Community Partner:** The Commission's role as a community partner may be as a leader, initiating cross-agency and multidisciplinary partnerships and 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. F5SMC prioritizes partnerships that are results-driven, action-oriented, and likely to achieve measurable results and community impact.
- **Strategic 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 that are currently unable to be addressed by other entities. Strategic investments will also target quality improvement and enhancements within and across organizations and professionals serving children 0-5 and their families.

## Core Values

### We believe that our work must...

- 1. 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.
- 2. Re-envision systems that serve young children and their families to ensure equitable access and a seamless experience.** We recognize the importance of smooth transitions for children and families as they grow from infancy through toddlerhood and the preschool years, and enter elementary school.
- 3. Embrace the importance of all caregivers in the healthy development of children.** We believe all services should be inclusive of all types of families and caregivers in a child's life.
- 4. Support the right of all children to live, grow, and learn in their communities.**
- 5. Uplift cultural, ethnic, and linguistic diversity.** We believe all services should be designed, planned, and delivered to meet the needs of our county residents, in a culturally and linguistically responsive way.
- 6. Believe in the strengths and resiliency of all families and cultures.** We respect the desire and ability of families to nurture their children and act as their first teachers. We build upon the positive qualities of children, families, and communities in the design and delivery of programs.
- 7. Expand our collective understanding of the critical importance of supporting and meeting the need for healthy development of all children.**



## Guiding Principles

### In our work on behalf of young children, we strive to...

- 1. Create value.** Invest in approaches that add value to the landscape of supports for all children and families; and, evaluate our strategies to ensure excellence.
- 2. Advance equity.** Ensure all children, regardless of circumstance, have the opportunity to reach their full potential, and families are included as partners in decisions about their children.
- 3. Drive progress on prevention & early intervention.** Promote positive social-emotional, mental, and physical development in infants and toddlers, and focus on prevention and early intervention.
- 4. Promote healing.** Uplift the capacity of providers, partners, and systems to be trauma-informed and promote the healing and restoration of children, families, and communities that have experienced harm.
- 5. Achieve sustainability.** Use Commission investments to effect long-term policy, institutional, funding, and systemic changes that extend the reach and impact of F5SMC activities.
- 6. Cultivate collaboration & learning.** Build upon and integrate with existing services to improve quality and provide efficient service delivery.





## Preparing Children for Lifelong Success: Guiding Frameworks & Research

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, the work of the F5SMC Commission goes far beyond success in school settings. F5SMC’s vision is for children to succeed in all aspects of their lives.

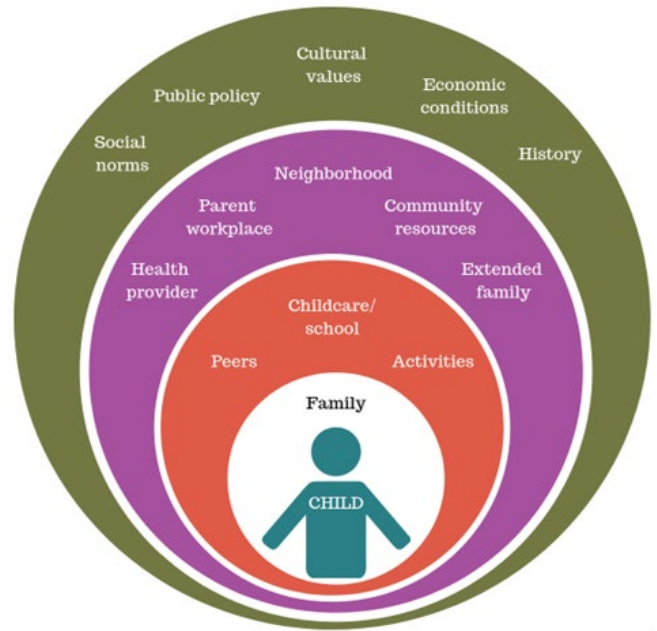
The foundations for physical, emotional, cognitive, and behavioral health are laid during the first years of life. Children develop these capacities through interactions with responsive and loving caregivers in safe environments. Stable, nurturing relationships literally build children’s brains in ways 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. Caregivers who are experiencing mental health issues, substance abuse, violence, social isolation, or the stress of being unable to meet their family’s basic needs face more barriers to 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 more likely to be reading at grade level in third 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 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.

To be successful in this role, we must be thoughtful and intentional about how we approach all that we do. The following are the frameworks and philosophies that guide our work and have informed the strategies outlined in this plan.

## Guiding Framework: Ecological Systems Theory

Our approach to supporting children’s success is aligned with Bronfenbrenner’s Ecological Systems Theory, which was first published in 1979. This theory emphasizes environmental factors as central context to development. In this approach, the child is at the center of what can be visualized as concentric circles including other systems and influences, such as family, community, and public policy.



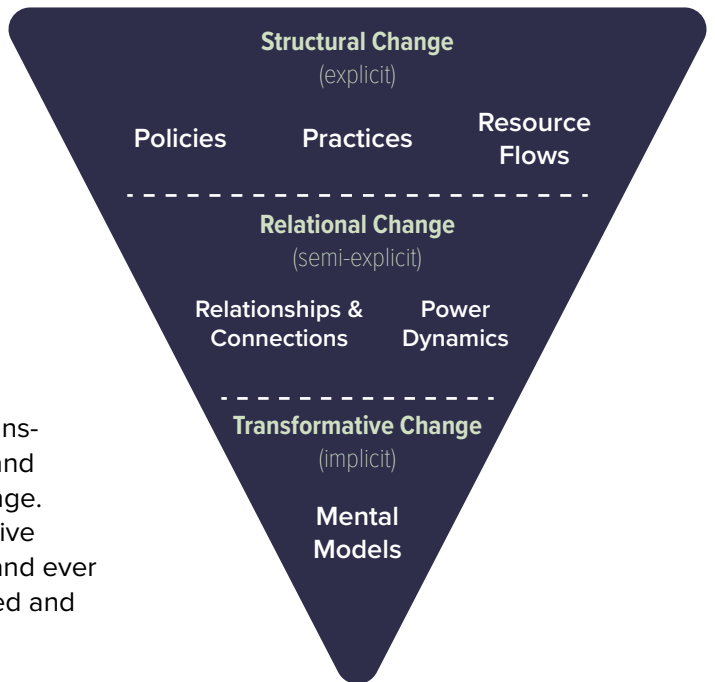
## Guiding Framework: Social Determinants of Health

Many of these systems and influences have been studied in research on Social Determinants of Health, including physical environment, housing, employment opportunities, wages, education, community safety, and social connections. These factors influence the health, cognitive and social-emotional development, well-being, and long-term success of children and their caregivers. Each child’s development and opportunity to thrive is thus shaped by the distribution of and access to resources and power.<sup>1</sup> Through intentional focus on social determinants of health, F5SMC seeks to address health inequities that disproportionately impact children of color and children from low-income families in San Mateo County, limiting their ability to fully thrive.

## Guiding Framework: Water of Systems Change

Recognizing the profound role that systems play in a child’s development, F5SMC acknowledges that to effectively support children’s success, it must have a role in transformational systems change. F5SMC’s approach to systems change is guided by FSG’s Water of Systems Change, which outlines six conditions that influence how systems operate and function (Kania, Kramer, Senge, 2018). These conditions are organized into three levels of systems change. The first level is structural change, which happens through shifting policies, practices, and resource flows. The second level is relational change, which requires fundamentally altering relationships, connections, and power dynamics. The final level is transformative change, which requires changing mental models.<sup>2</sup> With an eye towards transformational systems change, F5SMC prioritizes strategies and approaches that address at least one level of systems change. It is important to note that systems change and transformative change take time, and that because systems are dynamic and ever evolving, related efforts will need to constantly be monitored and iterated upon.

### Six Conditions of Systems Change

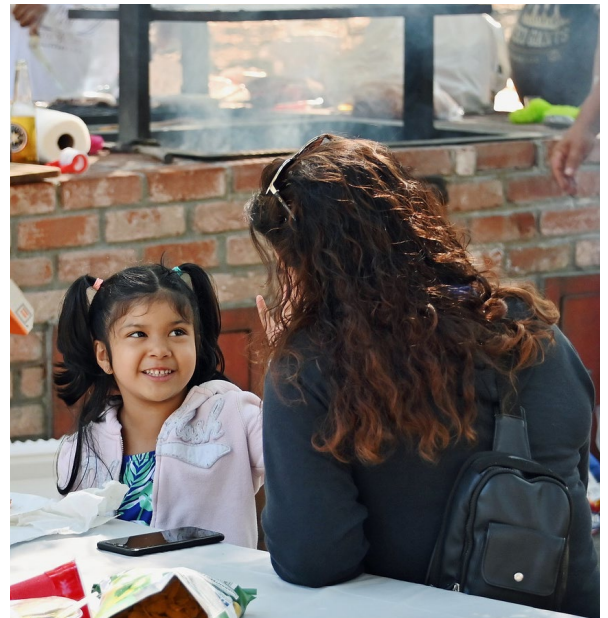




F5SMC defines a **‘system’** as multiple parts that are intertwined and interrelated, working together to produce an outcome.<sup>3</sup>

With limited resources, F5SMC is maintaining a strategic focus on efforts that have the potential to change systems and lead to transformative change.

Building upon FSG’s Water of Systems Change framework, F5SMC defines **‘systems change’** as “shifting the conditions that are holding the problem in place,” and **‘transformative change’** as occurring when we shift mental models, as these are more likely to uphold explicit conditions such as policies, practices, and resources.



Understanding the complexity of achieving health and well-being, we strive to work broadly and proactively to create, support, and sustain the social, physical, and economic conditions for children’s success.

## Early Childhood Research

The Children and Families First Act was based on research that a child’s brain develops more during the first five years than at any other time and that a child’s experiences and relationships during these years will impact a child for 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 lifelong problems in learning, behavior, and physical and mental health.
- A caring and nurturing relationship with at least one primary caregiver helps children feel safe and secure, and supports their learning and social-emotional development. A loving bond with a caregiver can offset adverse experiences.

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 ideal, early intervention after stressors have occurred can also be significantly beneficial to young children and can help prevent negative outcomes later in life.

# Developing the 2025-2030 Strategic Plan

## Children and Families in San Mateo County

Located in the heart of the Silicon Valley, San Mateo County has a diverse population. It is home to over 47,000 children aged five and under.<sup>4</sup> White children, under the age of 17, are the largest population in the county at 35.3%, followed by Latinx (31.4%) and Asian American (22.7%). Other ethnic populations include: Multiracial (7.1%), African American (1.8%), and Pacific Islander (1.4%).<sup>5</sup>

Amidst the tremendous wealth in San Mateo County, there exists a glaring disparity between “the haves” and “the have nots,” which was only further exacerbated by the COVID-19 pandemic in 2020. This disparity is best captured in the fact that there are over 3,000 children ages 0-5 that are living in poverty in San Mateo County, a county which has ranked third in the state for median income.<sup>6,7</sup>

The high cost of living in the county has made it challenging for many families to not only stay in the area, but to do so without some level of financial stress. While the median annual income for households in the county is approximately \$186,600<sup>8</sup> in 2024, the Self-Sufficiency Standard for California estimates that a San Mateo County family of two adults and two children under the age of 5 would need an annual income of \$206,427<sup>9</sup> to make ends meet without assistance.<sup>10</sup>

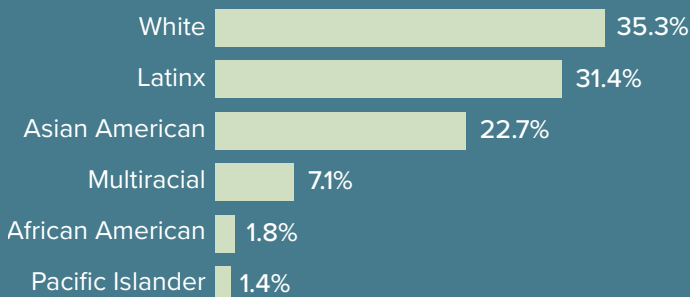


Annual income needed for family of four to meet the Self-Sufficiency Standard in San Mateo County, 2024



Area Median Income for San Mateo County for a family of four, 2024

### Population of children under the age of 17 in San Mateo County



**3,196**

Children ages 0-5 living in poverty in San Mateo County





These income disparities become greater when factoring in race and ethnicity. Though the county's overall median income in 2022 was \$149,907, this drops dramatically for Hispanic/Latino households (estimated at \$99,162) and Black/African American households (estimated at \$97,411).<sup>11, 12</sup> For white households, the median income in 2022 was estimated at \$166,608.<sup>13</sup>

One of the most commonly noted challenges in the county is the high cost of housing, as renters need to earn at least 3.7 times the minimum wage to afford the average asking rent in San Mateo County.<sup>14</sup> In fact, 84% percent of extremely low-income households with young children in San Mateo County are paying more than half their income on housing costs. Coupled with housing costs, families with young children also struggle with finding affordable high-quality child care in the county.

As can be imagined, the high cost of living compounded by the collective trauma and social isolation of the COVID-19 pandemic, has had ripple effects on the mental and behavioral health of young children and families in our county. Interviews conducted with San Mateo County families in 2021 by the Silicon Valley Community Foundation helped to articulate the profoundly stressful and traumatic reality that many families faced during this time. These families reported having to juggle school, child care, and other responsibilities all while not being able to work from home. They experienced fear, isolation, and financial insecurity and continue to deal with the lingering effects of this toll on their mental health. The stories of these lived experiences have been validated in local data from child and family-serving organizations. For example, Family Connections, a San Mateo County organization that works with families of young children, reported a 41% increase in families needing mental health services.<sup>15</sup>

For families that do not qualify for subsidized services, but also do not make enough income to cover the high costs of living in the county, finding support and relief for these and any other emerging challenges they face can be difficult to near impossible.

## The 2025-2030 Plan Refresh Process

In 2024, F5SMC celebrated 25 years as a Systems Leader, Community Partner, and Strategic Investor for young children in San Mateo County. Through deep reflection of the past 25 years, F5SMC reaffirmed its belief that effectively planning for the future requires deep listening and learning from community partners and the lived experiences of the families it seeks to serve.

In May of 2024, the F5SMC Commission began its strategic planning revision process to guide future community investments. The process was designed in partnership with VIVA Social Impact Partners to leverage existing efforts, uplift diverse voices, center lived experiences, and strengthen community collaboration.



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.

### The plan refresh process included the following activities:

- Reviewing data from projects and programs funded by F5SMC, which included family interviews, family focus groups, surveys, and other evaluation and community-level data.
- A Community Forum for community partners to share their feedback, perspectives and priorities.
- A System Leader Convening with public agency systems partners and philanthropic leaders to identify areas for collaboration and alignment.
- An Ad-hoc committee of F5SMC Commissioners that met regularly over five months.
- Dozens of meetings with F5SMC Staff.
- Four strategic planning sessions held as part of Commission meetings that included dialogue among Commissioners, community members, and F5SMC staff.

### Across the input processes, we learned that:

1. Families of young children are struggling with accessible quality early care and education, accessible mental and behavioral health supports, and basic needs (e.g., housing, diapers, food).
2. Families often face barriers around awareness of what services are available, how to navigate complex systems and access services, meeting eligibility criteria to receive services, and being placed on waitlists.
3. The most common barrier faced when trying to address child and family needs are a shortage of available service providers, including having enough providers that can meet linguistic and cultural affinity needs of families. These workforce challenges are compounded by a lack of coordination of partners and systems, a lack of sustainable funding, and complex systems that providers must navigate.
4. Despite the significant challenges that families face, many families are finding ways to be resourceful and have inherent strengths that should be applauded and reinforced.



## The following themes emerged as central to F5SMC's efforts moving forward.

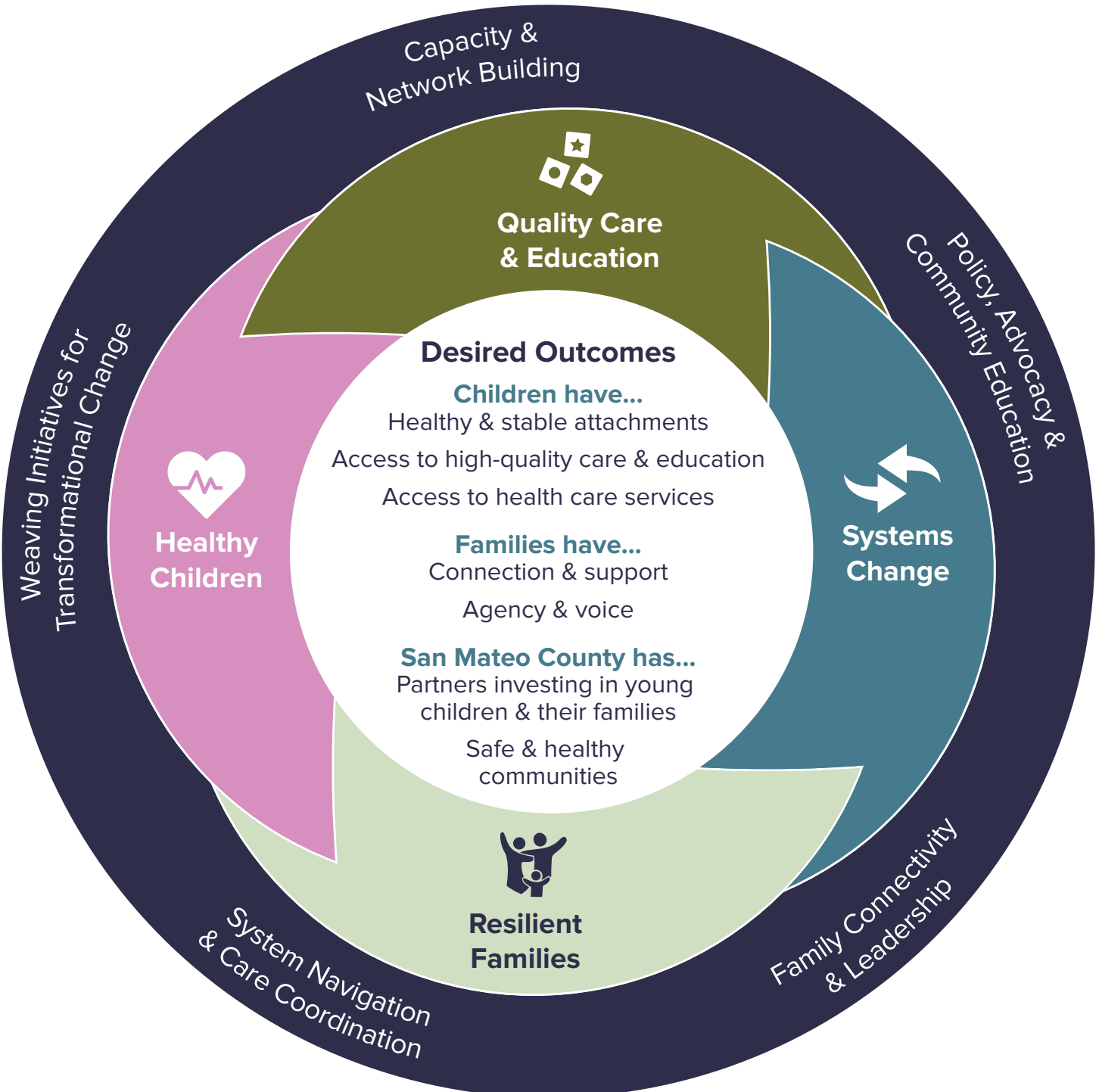
1. **Weaver:** Building bridges and connecting dots to cultivate strategic partnerships and cross-sector collaboration, help local funded and unfunded stakeholders tap into opportunities to strategize together in support of common goals, and transform mindsets.
2. **Change Agent:** Impacting local, regional, and state decision makers, including community business leaders, to prioritize young children in policy and practice.
3. **Resource Maximization:** Leveraging, aligning, and blending funding as well as ensuring available public funds are maximized before F5SMC funding is utilized.
4. **Impact Investor:** Prioritize investments that focus on prevention, upstream interventions, and transformational change to promote long-lasting equitable outcomes.
5. **Systems Catalyst:** Striking the right balance between program investments and systems improvements through bold, cross-sector initiatives and effective partnership.



# FRAMEWORK FOR THE 2025-2030 STRATEGIC PLAN

Our strategic plan guides our actions and our areas of focus. At the center of our framework and the central drivers of our efforts are our desired outcomes for children, families, and the county. We will work to achieve these outcomes by focusing on four intersecting core domains. Changes in these domains can have a direct impact on our desired outcomes. How we focus on the domains will be guided by our five strategies. These strategies inform our investments and actions within and across the domains.

Pages 15-27 of this plan share details about our desired outcomes, core domains, and strategies.







## Desired Outcomes

The First 5 San Mateo County Commission (F5SMC) adopted the following desired outcomes to guide its efforts during the 2025-2030 Strategic Plan:

- 1 San Mateo County leaders and partners fully invest in young children and their families.**
- 2 Communities provide a safe and healthy environment for young children.**
- 3 Children have timely and affordable access to high-quality early care and education settings.**
- 4 Families feel connected to and supported by their community and able to nurture their children's health and development.**
- 5 Children have healthy relationships and stable attachments to their primary caregivers.**
- 6 Children have access to and are utilizing appropriate health care services to meet their health and developmental needs.**
- 7 Families have agency and voice to direct policies and systems that impact their children.**



## Strategies

To achieve our desired outcomes, F5SMC has identified the following five strategies with the goal of impacting children and families across our four core domains. To maximize our resources and the expertise that exists in our county, these strategies will be implemented in collaboration and coordination with other funding partners, systems, and community organizations, as F5SMC has done for 25 years.

Guided by our understanding of the interdependencies and interrelatedness of early childhood systems, F5SMC recognizes that these strategies may directly impact and/or have ripple effects beyond one singular domain area.

### 1. System Navigation and Care Coordination for Families:

To support families with equitable access to the services they need to support their child's positive and healthy development, F5SMC will advance system building efforts that help families navigate systems, resources, and services, and promote stronger service coordination, care coordination, and case management for families with complex needs. This will be done in coordination with other funding partners and systems to achieve the highest impact.

### 2. Capacity and Network Building for Child-Serving Systems and Providers:

To strengthen child- and family-serving systems to deliver high-quality services to children and families, F5SMC will drive efforts that build and strengthen organizational and workforce capacity, promote workforce retention, break down silos, and increase cross-collaboration. This will be done in coordination with other funding partners and systems to achieve the highest impact.

### 3. Weaving Partnerships and Innovative Initiatives for Transformational Change:

To fundamentally change the systems that impact the wellbeing and lifelong trajectories of children prenatal to five, F5SMC will lead efforts that weave together cross-sector partnerships, amplify family voices, transform mental models, and practice the vision of the future that we are seeking to build for our county's youngest children. This will be done in coordination with other funding partners and systems to achieve the highest impact.



#### 4. Family Connectivity and Leadership:

To strengthen the connections, relationships, and power that make up a supportive and holistic ecosystem of care for families of young children, F5SMC will support parent connection and community-building efforts that reduce social isolation of families and empower caregivers with the relationships, knowledge, leadership skills, and tools to support their child's positive and healthy development and to advocate for their child. These parent connectivity and leadership efforts may focus on positive mental health of caregivers of young children prenatal to five, positive caregiving, quality early learning, healthy development, family advocacy and leadership building, or protective factors for children. This will be done in coordination with other funding partners and systems to achieve the highest impact.



#### 5. Policy, Advocacy, and Community Education:

To cultivate a child-centered culture where children lead the way in San Mateo County, F5SMC will lead strategic policy, advocacy, communications, and research and knowledge development to build public and political will to invest in the well-being and success of our young children, and give stakeholders the information they need to change the systemic conditions for children and families. This includes developing and implementing a new Communications Plan that supports increasing understanding about foundational early childhood topics such as early brain development. This will be done in coordination with other partners and leaders to achieve the highest impact.

*In addition to leading and investing in these overarching strategies, as a Community Partner, F5SMC will participate, champion, and/or stay informed of other concurrent initiatives and efforts happening in the County to ensure that when and where there is an opportunity to uplift the voices of children 0-5 and their families F5SMC can do so effectively.*

\*Note: Future procurement processes will provide more specific detail and information about the implementation of the above strategies.

### F5SMC's Core Domains & Indicators

The 2025-2030 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, leadership, and partnerships that target four core domains:**

- Healthy Children
- Resilient Families
- Quality Care and Education
- Systems Change

Within each of these core domains are a set of indicators at the population level, systems level, and participant level that will be monitored by the F5SMC Staff and Commission and that will support F5SMC in evaluating and adapting its implementation of the strategic plan.

- **Population-Level Indicators:** These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor these indicators to inform its ongoing work as a systems leader and community partner.
- **Systems-Level indicators:** These indicators will be monitored by First 5 San Mateo County to inform its systems-level efforts and investments.
- **Participant-Level Indicators:** These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services.

The following outlines the critical importance of each of these domains for children and families in San Mateo County, and the indicators that will be monitored for each area.



## ► Healthy Children

Children’s optimal health and development is influenced by many factors, from the environments in which children live and are cared for to their access and utilization of preventive health services.<sup>16</sup> Because the social determinants of health intersect with numerous systems, addressing health inequity for children requires cross collaboration and an intentional focus on systems change efforts. F5SMC has a strong history of supporting collaborative health efforts, particularly those that focus on prevention and early intervention.

In San Mateo County, 98% of children are covered by health insurance.<sup>17</sup> Health coverage and utilization of preventive care benefits has been and continues to be an advocacy priority for the Commission. As California continues to roll out enhancements for Medi-Cal Transformation, there are numerous opportunities on the horizon to strengthen children’s access and utilization of preventive and early intervention services. However, many children in San Mateo County are privately insured,<sup>18</sup> and others may still face barriers to accessing timely and needed health care services, such as language issues, availability of specialized service providers, waitlists, lack of formal diagnosis required to receive services, and out-of-pocket costs.<sup>19</sup>

### Access to Preventive Oral Health Care

Preventive health care can help minimize threats to healthy development and provide early detection and intervention for problems that emerge.<sup>20</sup> For children in the United States, tooth decay is the most common chronic condition. Untreated decay can have negative implications for children’s development, including problems with eating and speaking, as well as poor self-esteem. Additionally, dental problems are one of the leading causes of school absenteeism, which is associated with lower academic achievement.<sup>21</sup> Preventive dental visits for children save 10 times the cost of more invasive dental treatment and help to avoid the negative physical, socio-emotional, and academic consequences of poor dental health.<sup>22</sup> However, in 2020, only 30% of children 0-5 from low-income families had visited a dentist in the last year.<sup>23</sup>





### Access to Early Identification

Another important element of preventive care for children during the first five years of life is the early identification and treatment of developmental concerns, because this is the time when a child's brain, body, and behavior are most malleable. Early detection is critical for the 16.9% percent of all children ages 0-5 in California who have special health care needs.<sup>24</sup> However, in 2021, only 45% of children with Medi-Cal in San Mateo County received an annual preventive checkup.<sup>25</sup>

Screening for developmental delays using a validated tool has been shown to detect credible concerns that are otherwise missed by primary care physicians and other child-serving professionals who rely instead on surveillance methods. The American Academy of Pediatrics recommends that pediatricians implement universal screening for their patients three times before a child's third birthday. In San Mateo County, 64.8% of children receive timely developmental screenings, suggesting that there are still many children who may not be identified early enough.<sup>26</sup> Although developmental delays pose risks for all children, delays that are prevalent among low-income children are more likely to be missed.

### Access to Early Intervention Services

Once a health or developmental concern has been identified, families and providers need support to understand and navigate the complex array of community-based services and supports available to promote children's optimal health and wellness.<sup>27</sup> Navigating numerous and sometimes disconnected systems to access vital health care services can be challenging for any family, but especially for working families, families with limited English proficiency, and families from marginalized and disenfranchised communities.

When families are supported through coordinated care, case management, system navigation, and warm hand-offs, they may be able to more easily access health services that their children need to develop and lead healthy lives. However, California ranks 43<sup>rd</sup> in the nation on effective care coordination for children with special health care needs.<sup>28</sup> In 2024, F5SMC gathered qualitative and survey data from families through a number of initiatives. Across these insight gathering efforts, systems navigation and care coordination consistently rose to the surface as a key need.<sup>29</sup>

### Access to Early Childhood Mental Health

Intervening early to impact children's health outcomes is inherently an upstream strategy that can mitigate longer-term health challenges and inequitable health outcomes. Creating greater access to quality early childhood mental health and family behavioral health services in San Mateo County is crucial to support the healthy development of our youngest residents.

We know that the groundwork for positive emotional health is laid during pregnancy. After birth, this continues to be developed through caring and safe relationships with a child's caregivers. Positive mental and emotional health enables children to thrive in all aspects of their life, including their health. However, when children struggle with

emotional, mental, and behavioral health concerns, it can lead to more significant health symptoms such as chronic eating, difficulty sleeping, toilet training issues, and dangerous or risky behaviors.<sup>30</sup> According to Zero to Three, between 10-16% of young children in the United States experience mental health conditions, and for babies in poverty this number increases to 22%.<sup>31</sup>

The causes of mental health issues in young children can be due to a number of factors such as environment, trauma, biology, and other adverse childhood experiences (ACEs).<sup>32</sup> ACE scores are highly correlated with future health outcomes and opportunities, including greater risk of nearly every major disease or condition. People with high ACE scores are more likely to die decades before their counterparts with lower ACE scores.<sup>33</sup>



In San Mateo County, we are seeing families facing challenges navigating and accessing the early childhood mental health system, due to a number of barriers. According to the San Mateo County Early Childhood Mental Health Landscape Scan conducted in 2024, these barriers range from eligibility restrictions, to logistical challenges and language access, to high staff turnover that disrupts continuity of care for families. Furthermore, challenges with insurance create another set of limitations for families of young children. Most children in San Mateo County are privately insured. Some private insurance plans do not cover services until high deductibles or out-of-pocket maximums are met, and out-of-pocket costs can be difficult for families to afford and may not be reimbursable. Additionally, providers may be hesitant to share the information required by private insurance companies and are reluctant to contract with them due to concerns over extensive documentation requests and the risk of payment denials or clawbacks. These issues further limit access to quality mental health services for children and families.<sup>34</sup>

## Population-Level Indicators

- Maintenance of universal or near-universal health insurance rates for children ages 0-5 (at or above 98.5% of children 0-5 insured).
- The percentage of children enrolled in Medi-Cal managed care who had 6 or more well-child visits during the first 15 months of life.
- The number of children and families enrolled in home visiting.
- The percentage of children ages 1-5 who have seen the dentist for a routine check-up in the past year.
- The number of children ages 0-5 who live in High Community Need areas, as defined by the Health Equity Index from San Mateo County All Together Better.
- The number or percentage of children receiving Early Start services in San Mateo County.
- The percentage of children ages 0-5 in priority school districts and childcare settings that are receiving oral health screenings and/or services.



## System-Level Indicators

- The number or percentage of pediatric health providers who provide access to developmental screening as a part of routine well-child visits.
- The number or capacity of dental providers who serve children ages 0-5 on public insurance.
- The percentage of providers reporting confidence and capacity to refer families to Help Me Grow services.
- Progress made by agencies participating in the Trauma and Resiliency-Informed Systems Initiative towards becoming Healing Organizations
- The number and strength of partnerships established with key organizations to support Baby Bonus program implementation and community health worker (CHW) engagement.

## Participant-Level Indicators

- The percentage of children with the appropriate number of well-child visits for their age in the past 12 months.
- The percentage of parents reporting difficulty accessing services for their child's mental, developmental, and/or behavioral health.
- The percentage of Help Me Grow (HMG) referrals that result in families feeling that their needs have been met.
- The number of children ages 1-5 who received a dental visit in the past year.

## ► Resilient Families

Secure, stable, and supportive relationships with caring adults significantly contribute to a child's healthy brain development.<sup>35</sup> 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.<sup>36</sup> Furthermore, lower levels of parenting stress may serve as a protective factor of the social-emotional health of their children. The early childhood field has gained tremendous knowledge in recent years about the ways in which families should be engaged in children's healthy development. The Strengthening Families Protective Factors Framework articulates five elements that can support child development and reduce the likelihood of abuse and neglect through engaging families in a strengths-based approach.<sup>37</sup> These factors include: parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social and emotional competence of children. In order to cultivate these protective factors in families, there needs to be concerted strengths-based efforts to build parent partnerships, create avenues for social connection, mutual support, and inclusion, promote engagement, and support parents as decision-makers and leaders.



Strength-based approaches that authentically affirm different cultures, languages, and family structures are accepted by the field as the best way to partner with families to achieve positive outcomes for children. Research on family engagement has repeatedly demonstrated that the majority of parents want the best for their children but may lack the knowledge and resources to promote development in the critical early years. It is critical that parents and caregivers feel able to nurture their child's optimal development, because positive home learning environments contribute significantly to children's school achievement.<sup>38</sup> 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.<sup>39</sup> Effectively partnering with parents in promoting their child's optimal development also results in better lifelong outcomes and reduces costs to society for special education, welfare, criminal justice, and health. 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.



As a result of the COVID-19 pandemic and its many aftereffects, many families continue to struggle in San Mateo County with stress and social isolation. This stress, which is primarily due to economic inequality in the county and social isolation, is particularly profound for families that face low annual household incomes, or middle-income families that may not be able to qualify for certain resources. Preliminary findings from a 2024 survey conducted with 69 parents of children with Medi-Cal eligible children in the County revealed that 34% face housing insecurity, 31% report financial concerns, and 31% experience food insecurity, which are critical stressors for families. Additionally, 24% of parents reported feeling socially isolated.<sup>40</sup> These stressors have ripple effects on children's mental and emotional well-being. Through the 2024 San Mateo County Early Childhood Mental Health Landscape Scan, data reveals a rise in anxiety among young children, particularly since COVID-19. The rise in anxiety is often misinterpreted as misbehavior, when in reality, these behaviors stem from underlying trauma.<sup>41</sup>

## Population-Level Indicators

- The percentage of families of young children experiencing housing insecurity.
- The percentage of parents who regularly read, sing, and/or count with their children ages 0-5.
- Median earnings of families by race and ethnicity.
- The number of families with children living at or below 250% of the federal poverty line in the County.
- The percentage of children ages 0-5 reunified with their families within 12 months of entering out-of-home care.
- The percentage of children ages 0-5 re-entering the child welfare system.



## System-Level Indicators

- Core resource centers are consistently stocked with essential supplies (e.g., diapers, wipes, formula) to meet community demand.
- The percentage of parents reporting that they are able to access the services their family needs.

## Participant-Level Indicators

- The number and/or severity of risk factors reported by parents receiving intensive services, such as inadequate food, inadequate housing, depression, domestic violence, and substance abuse.
- The percentage of parents who report feeling connected to a support network.
- The percentage of parents reporting confidence in their ability to nurture their children and support their development.
- The percentage of parents who report feeling confident in their ability to advocate for their child.
- The percentage of parents who regularly read, sing, and/or count with their children ages 0-5.
- The percentage of parents reporting increased confidence and capacity to engage in leadership roles and influence systemic change.

## ► Quality Care and Education

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 children’s lives. In San Mateo County, 71% of children ages 0-5 live in families with working parents,<sup>42</sup> but in 2021 there were only enough licensed childcare spaces available for 33% of these children.<sup>43</sup> Overall, the county faces a shortage of about 6,897 child care spaces for children 0-5. While statewide efforts, such as the expansion of Universal Transitional Kindergarten, may offset some of these shortages for preschool age children, access for younger children continues to be a significant challenge.

### Benefits of Quality Care and Education

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.<sup>44</sup> Children with preschool



experience are generally more developmentally prepared for kindergarten, setting them on the path for grade-level reading proficiency by the third grade, which research shows can increase the likelihood of high school graduation and future success.<sup>45</sup>

The long-term economic benefit of children attending high-quality preschool programs is well documented, particularly for children living in low-income households. These “return on investment” 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 program document that the program returned seven dollars for every dollar invested.<sup>46</sup>

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.<sup>47,48</sup> 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.

### Improving Quality Through Workforce Support

Critical to high-quality early learning settings are safe, accessible, and developmentally appropriate facilities, and a well-trained and well-supported workforce. Studies have found that teachers’ specialized knowledge about child development and instruction for young children is particularly important for quality early learning.<sup>49</sup> In order to develop and retain a well-qualified workforce, especially in a county with a high cost of living, teachers must be well-compensated, well-educated, and well-respected. Professionalizing the early care and education field reduces teacher vacancies and turnover.<sup>50</sup>

While the vast majority of early educators feel their work makes a difference, only 43% of center teachers and 65% of family child care (FCC) providers in San Mateo County feel respected in their roles.<sup>51</sup> Low wages in early care and education affect educators’ economic well-being, leading to food insecurity and reliance on public assistance, which contributes to high-stress. About one in three early educators in San Mateo County use public assistance, with 44% of center assistants relying on it. Furthermore, staff recruitment challenges are widespread, with 82% of family child care providers and 93% of center directors reporting difficulties in finding qualified candidates. Retention is equally concerning; only one-third of center teachers and assistants are likely to remain at their current sites for at least three more years.<sup>52</sup> Low pay and financial concerns frequently drive educators to leave their positions. Addressing and improving these factors will not only alleviate stress among educators but also foster an environment where they can better support quality education in the classroom.



### Promoting Equitable Access to Quality Care and Education in San Mateo County

The First 5 San Mateo County Commission is committed to serving as a leader, partner, and investor in efforts that promote equitable access to quality care and education in San Mateo County. The Commission will continue to serve as an advocate, pushing for policies that improve conditions for the workforce and create more equitable access to quality care and education for children and families, including for dual language learners, children of color, and children with cognitive and physical disabilities. F5SMC will also continue to partner with local, regional, and statewide collaborative efforts that support access to, and the quality improvement of, early learning settings for all children 0-5. Through strong partnerships, and strategic collaboration, F5SMC believes a more equitable early learning system for children, their families, and their teachers is possible.



## Population-Level Indicators

- The available supply of infant and toddler care relative to the need.
- The percentage of children ages 3-5 who are enrolled in Preschool (UPK) before Transitional Kindergarten/Kindergarten entry.
- The percentage of all early learning programs participating in Quality Improvement activities.
- The percentage of third-grade students reading at or above grade level.
- The percentage of children entering kindergarten ready to thrive.

## System-Level Indicators

- The number of early learning facilities maintained, expanded, or in the pipeline.
- Number and/or percentage of publicly-funded child care settings receiving Early Childhood Mental Health Consultation services

## Participant-Level Indicators

- The number of children ages 3-5 who are enrolled in programs participating in Quality Counts.
- The percentage of home-based and alternative setting early learning programs that are participating in Quality Counts.
- Of children who attend early learning programs that are participating in Quality Counts, the percentage of those that are dual language learners and children of color, and special needs.



## ► Systems Change

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. While San Mateo County overall has some of the best health outcomes in the state,<sup>53</sup> these experiences are not shared equally. San Mateo County, along with Santa Clara county as part of the Silicon Valley region, has a staggering degree of wealth inequality. In fact, the top 1% of households in Silicon Valley hold 48 times the wealth of the bottom 50%, compared to the national gap where 1% of households hold 23 times the wealth.<sup>54</sup>

This inequality 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, and have access to enrichment activities, and they are more likely to be diagnosed with a developmental disability and to have a parent dealing with depression.

Children's health and development outcomes follow a social gradient: the further up the socioeconomic spectrum, the better the outcomes. Inequitable access to supports and services has the potential to maintain or increase inequities for children during their early years, because those families most in need of services are typically least able to access them. Reducing inequities during early childhood requires a multi-level, multi-faceted response.

F5SMC strives to create the conditions that will allow all young children to prosper socially, emotionally, and economically. Ensuring that all children can achieve their potential is a significant undertaking and will require a community solution that is not possible with funding alone. This effort will require common understanding, shared ownership, willingness to change, and commitment to providing equitable opportunities for all children.



### Population-Level Indicators

- The status of continuous Medi-Cal enrollment for children 0-5.
- California's ranking in the U.S. for parents reporting their ability to access mental health services for their child.



## System-Level Indicators

- The number and characteristics of partnerships among the organizations that comprise the early childhood ecosystem in San Mateo County.
- The number of child and/or family-serving providers that express having the capacity to participate in systems-level efforts.
- The number of child and/or family-serving providers that express feeling connected to a network and supported.
- The percentage of agencies successfully accessing and utilizing Medi-Cal funding streams to support services for eligible populations.
- The percentage of providers across sectors reporting adequate resources and manageable levels of stress related to participating in systems-level meetings and gatherings.
- The percentage of target audiences that report positive perception, trust, and/or value of the topics that F5SMC communicates about.
- Experiences with San Mateo County early childhood systems, as measured qualitatively through partner and family stories.
- Number of local and statewide advocacy efforts F5SMC has participated in.
- The number of in-person community outreach participated in, including but not limited to local discussion panels and tabling events.
- The number of local jurisdictions adopting strategies to increase the quality and/or availability of childcare.
- Number of providers trained in early childhood mental health modalities and/or foundational practices.

## Other measures that matter

In addition to the indicators outlined above, there are numerous measures that would be meaningful to monitor, if and when the data becomes available, to inform F5SMC's partnerships, investments, advocacy, and leadership efforts. These include the following measures:

- The percentage of mental health clinicians reporting confidence and capacity to serve young children and their families effectively.
- The total amount of funding per year dedicated to early childhood, such as child care, early childhood mental health, home visiting, etc.
- The rate of early childhood mental health concerns reported from families and child-serving providers.

## Accountability

First 5 San Mateo County Commissioners are responsible for ensuring that First 5 funds are used as voters intended when the California Children and Families First Act (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, & 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 contractual compliance. 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.

## Evaluation

First 5 San Mateo County uses a variety of evaluation methods to stay informed about the needs of local families, track its impact, and identify effective strategies for achieving its desired outcomes. These methods include qualitative approaches such as interviews and focus groups with parents and service providers, as well as quantitative analysis of survey results. For example, as part of a recent qualitative needs assessment, substantial proportions of Medi-Cal eligible families identified challenges meeting the following needs for their families:

- Child care: 83%
- Basic needs: 61%
- System navigation: 61%
- Cost of living: 57%
- Parenting education: 35%
- Mental health services: 30%
- Social and emotional support: 26%

Additionally, among a sample of families who received home visiting or care coordination services:

- 35% reported housing insecurity
- 31% often did not have enough money to meet their families' needs
- 24% were socially isolated
- 24% needed help with their sadness or depression
- 7% expressed concerns about domestic violence
- 7% expressed concerns about substance use by someone in their household





While F5SMC is continuing to collect survey data from families who participate in intensive services through our funded programs, different types of data collection may be required as we shift towards partnership, policy, and systems-level interventions. Collective impact models of community change require common data collection and data sharing procedures. Such efforts 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. For example, the Baby Bonus project is fielding an intensive, multipartner data collection and sharing effort as part of a randomized controlled trial to evaluate the program. Regional, statewide, or national efforts typically have their own data collection and evaluation requirements, which we must map onto our local efforts. Work conducted through cross-agency, cross-sector collaborations also requires specialized evaluation to assess the changing nature of relationships between organizations and how those relationships improve systems' abilities to support high-quality service delivery as well as client outcomes.

## 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 wellbeing 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

It is with tremendous gratitude for our fellow investors, leaders, and partners that F5SMC celebrates its contribution to the increased well-being of children ages birth through five and their parents in our County. It is also satisfying that as Proposition 10's funding has decreased, the impact of First 5 continues to be significant.

F5SMC's pivot from primarily serving as a direct-service grant maker to a strategic investor, leader, and partner has set up its enduring relevance and the championing of young children for years to come. Now at its 25-year anniversary as an organization, the maturation of F5SMC, its leadership, and community partners facilitated the ability to rethink the strategies used to make the most impact. Rather than perceiving the funding decline as a fiscal cliff from which one should recoil, it was embraced as an opportunity to seek out new opportunities for leverage and significance. This creative and opportunity-based approach has yielded profound impact for young children and their families, and reinvigorated F5SMC as a community investor, partner, and leader.



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### First 5 San Mateo County Commissioners:

**Nkia Richardson**, Executive Director, CASA San Mateo County, Commission Chair

**Nancy Magee**, County Superintendent of Schools, Commission Vice-Chair

**Louise Rogers**, Chief, San Mateo County Health

**Claire Cunningham**, Director of San Mateo County Human Services Agency

**Carla Boragno**, Former Chair, Genentech Foundation, Public Member

**Noelia Corzo**, Board of Supervisor, District 2

**Manufou Liaiga-Anoa'i**, Founder & Interim Executive Director, Pacific Islander Community Partnership

**Naveen Sultana Mahmood MD**, Pediatrician, Palo Alto Medical Foundation, Public Member

**Sylvia Espinoza**, MD, Pediatrician, Stanford Children's Health, Public Member

Youth Commissioners: **Rikhav Shah** and **Adele Ryono**

### First 5 San Mateo County Staff:

**Kitty Lopez**, Executive Director

**Michelle Blakely**, MA, Deputy Director

**Khanh Chau**, MBA, CPA, Finance Director

**Emily Roberts**, MSW, MPH, Strategic Initiatives Manager

**Myra Cruz**, MBA, Operations Coordinator

**Jenifer Clark**, Research and Evaluation Specialist

**Mai Le**, MPH, Community Health Planner

**Mey Winata**, Fiscal Office Specialist





## End Notes

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