“Let us put our minds together and see what kind of future we can create for our children.”

— Sitting Bull

Our Mission
In partnership with the community, we support a county-wide continuous prevention and early intervention system that promotes optimal health and development, narrows disparities, and improves the lives of children 0 to 5 and their families.

Our Vision
Every child in Alameda County will have optimal health, development, and well-being to reach his or her greatest potential.

First 5 Alameda County Commissioners

Current Commissioners (FY 2017-2018)
Wilma Chan
(Alternate Vanessa Cedeño)
Scott Coffin
Lori Cox
(Alternate Michelle Love)
Cecilia Echeverría
Renee Herzfeld
Tomás A. Magaña, M.D., M.A., F.A.A.P.
Pamela Simms-Mackey, M.D., F.A.A.P.
Kimi Watkins-Tattt
(Alternate Quamrun Eldridge)

Past Commissioners (1999-2016)
Yolanda Baldovinos
Alex Briscoe
Keith Carson
Ricky Choi, M.D., M.P.H., F.A.A.P.
Rocio de Mateo Smith
Marge Deichman
Gilda Gonzalez
Chet Hewitt
Dave Kears
Rodger Lum
Helen Mendel, C.M.D.
Rosemary Obeid
Linda Olivenbaum
Deborah Stark
Melanie Tervalon, M.D.
Mildred Thompson
Gail Ward
Albert Wang, M.D.
I am tremendously proud and humbled to be introducing First 5 Alameda County’s 20th Anniversary Report. Since 1998, First 5 has set out to help our county’s youngest residents reach their full potential. I am grateful for the leadership and good work of our local Commission, my two CEO predecessors, Mark Friedman and Janis Burger, and First 5 staff; under your stewardship, our local early childhood system has undeniably been enhanced.

Due to advances in neuroscience, we know that 90% of a child’s brain develops in the first five years of life. Targeted investments intended to improve early life experiences also improve adult life outcomes. These improvements have the added benefit of supporting the future health and economic well-being of our communities and families. As the largest local funder of services solely for children ages 0–5, First 5 has spent the last two decades investing in innovative programs, disseminating best practices, convening and collaborating, engaging parents and caregivers, and advocating for policies that support children.

Despite our accomplishments, we are unfortunately faced with declining resources to address the pervasive poverty and persistent inequality that impact our neighborhoods and family and child well-being. As we look to the future, in a county where the cost of living is making it ever more financially difficult for families, we know that access to early learning in combination with basic family support is critical to the health of our communities. Kindergarten readiness is tied to health and well-being, socioeconomics, access to early care and education, as well as the use of community resources. All of these are linked to the financial realities of families. We are making strategic investments that recognize the interplay between equity, place, adult health, and child well-being. Parent/caregiver employment, safe stable housing, reliable transportation, food security, and thriving neighborhoods irrefutably support a young person’s development, and are therefore important elements of the early childhood field and our local system of care.

**Toward this end, in our 20th Anniversary Report, you will find the following:**

1. **Our newest policy agenda**, which outlines our vision for actively combating poverty and achieving equity in order to realize our mission of ensuring all children in Alameda County can reach their full potential.

2. **A look back at First 5’s history**, which is mapped out in this special anniversary report under four key investments: Parent and Community Engagement, Quality Early Care and Education, Early Identification and Intervention, and Training and Capacity Building.

3. **A county data profile** that outlines the state of our children and families and allows First 5, along with other systems and community leaders, to envision how we might better work together to meet Alameda County’s needs.

First 5 looks forward to building on these successes and embracing the remaining work to achieve our vision of ensuring optimal health, development, and well-being for all children in Alameda County.

Kristin Spanos
CEO, First 5 Alameda County
Policy Agenda

First 5 Alameda County (First 5) was created by the passage of Proposition 10 in 1998, which added 50¢ per pack of cigarettes to help fund early childhood education and development related services. We are the local leading policy voice and funder of programs focused solely on young children (prenatal to age five) and the environments that promote their well-being.

There is growing acknowledgement that if we are to use public resources effectively in service of our population results, we need to support families around jobs, housing, food, financial resources, health care, and transportation. We are committed to advocating for and achieving equity, ensuring that all children in Alameda County are born healthy and reach their full potential.

This commitment requires the strategic and creative use of our investments, programs, partnerships with parents, communities, community-based organizations, and advocacy for policy and systems change.

First 5 Alameda County works to achieve two population level results:

1. Children are ready for kindergarten and can later achieve success in the third grade

2. Children are free from abuse and neglect

Similar to other counties in the Bay Area, the percent of children ready for school has not improved over time. That is why First 5 is committed to working with partners to close the opportunity gap by investing in children, families, and their neighborhoods.

Alameda County modernized child welfare practice and moved to prioritize prevention and keeping children safely with their families. First 5 is committed to promoting socioeconomic stability and protective factors that foster family resilience.
SUSTAINABILITY FOR PROVEN RESULTS
• Preserve and scale successful programs
• Coordinate and align neighborhood and county-wide family-centered programs and investments

ADDRESS INEQUALITY AND CHILD POVERTY
• Advocate for policy changes and enhancements that will:
  • Increase the use of the social safety net
  • Reduce the financial burdens associated with raising a family (e.g., childcare, diapers, implement targeted tax credits)
  • Remove administrative barriers to existing programs to better address the needs of communities, families, and children
  • Advocate for increased resources to adequately meet needs (e.g., affordable housing, public transportation, expand EITC)
  • Facilitate investment to support community economic development

SUPPORT FAMILY ENGAGEMENT, LEADERSHIP, AND COMMUNITY WELL-BEING
• Train and support parent leaders
• Provide capacity and infrastructure building for providers in order to:
  • Promote promising and best practices
  • Support parent leadership and advocacy
  • Advance the field toward equity by making strategic investments, such as promoting engagement with fathers and the use of the Father Friendly Principles
Parent and Community Engagement is both providing a continuum of concrete supports to strengthen families’ protective factors and investing in neighborhood-based, parent and resident-led strategies that support whole communities and underpin the alignment and coordination of other community and county efforts.

WHY IT MATTERS
We know that families living in a thriving community with a stable income do better, and cultivating parent leadership is critical to bolstering resilience and sustaining program efforts and outcomes.

20 YEAR HIGHLIGHTS

1999 Invested in universal home visiting and added Perinatal Hospital Outreach Coordinators (PHOCs) at major birthing hospitals (and eventually the Eastmont Self-Sufficiency Center) to coordinate access to home visiting throughout the county. Approximately 36,700 referrals made from 2001-2018

2000 Developed a county-wide community grants program to expand and enhance services for families and increase the capacity of partners to serve families with young children. 4,000–5,000 parents/caregivers served annually over the course of 17 years

2002 Partnered with Social Services Agency (SSA) to implement Another Road to Safety, intensive prevention and early intervention services for families referred to Child Protective Services. 200 families served annually over the course of 5 years

2004 Invested in Summer Pre-K (SPK) to expand access to preschool exposure, support successful student transition into kindergarten, and improve school readiness. 387 classrooms funded and 6,996 children served across 11 districts

2008 Began funding evaluations of school readiness assessments with entering kindergarteners and their families in three school districts. This initiative turned into a biannual kindergarten readiness study. 8,882 school readiness assessments completed since 2008

2016 Implemented Project DULCE at Highland Hospital, an innovative intervention that combies health care, concrete supports, and legal services in primary care sites to promote healthy development in infants 0-6 months. 350 families have enrolled in Project DULCE since its start

NOTABLE POLICY & SYSTEMS CHANGE
First 5 Alameda County has:

Invested $68 million in home visiting programs and co-developed with ACPHD a common outcomes framework to assess program effectiveness.

Partnered with SSA to train community partners on Standard Decision Making, when assessing risk of child abuse, to mitigate implicit bias and unnecessary child removals.

Helped local school districts begin supporting kindergarten transition earlier. Seven school districts have sustained their SPK programs and are collectively supporting 19 SPK classrooms.

Funded and authored kindergarten readiness studies that informed two local child care ballot initiatives.

THREE NOTABLE RESULTS IN 2017-2018

Four Neighborhoods Ready for School grants of $470,000 were awarded to community organizations in West Oakland, San Antonio, Deep East Oakland, and Union City. 1,845 referrals were made for home visiting and other early childhood supports by the PHOCs.

1,444 kindergarteners from 13 school districts participated in the latest school readiness study, resulting in the first county-wide representative sample.
WHY IT MATTERS

When infants, toddlers, and preschoolers receive quality ECE they are more likely to enter kindergarten ready to learn and they have better future educational outcomes. Quality ECE can have a substantial impact on their health, economic, and educational outcomes, as well as a parent’s ability to participate in work and school.

20 YEAR HIGHLIGHTS

2001 Launched the Quality Improvement Initiative (QII) to provide technical assistance, training, easier access to community college coursework, and funding for facility improvements and materials to ECE providers. QII was renamed Quality Counts (QC).

2010 Seeded an initiative with community partners to provide school readiness supports at 29 libraries and park and recreation centers, ensuring free and accessible child development experiences, primarily for children not in preschool.

2012 Worked with multiple partners to develop Alameda County’s Quality Rating and Improvement System (QRIS) under QC. First 5 continues to oversee this work and is the convening entity for the partnership.

2016 Leveraged a $1.2M IMPACT grant to support school readiness activities at approximately 100 alternative care sites that serve low-income children.

NOTABLE POLICY & SYSTEMS CHANGE

First 5 Alameda County has:

Worked with several community colleges to make obtaining units more accessible to ECE staff by offering classes at more convenient locations within the community.

Partnered with UCLA’s Center for Improving Child Care Quality on the Quality Interventions in Early Care and Education research project.

Rated and improved services for close to 500 sites across the county. In the last year alone, 43% of ECE sites that were re-rated improved their ratings after receiving support through QC.

Focused resources on providers in low-income neighborhoods to support equitable access to quality early education programming.

THREE NOTABLE RESULTS IN 2017-2018

- 189 child care centers,
- 85 family child care programs, and
- 119 alternative programs, serving 10,086 children, participated in QC’s quality improvement programs this fiscal year.

- All subsidized early learning programs, including Early Head Start, Head Start, and state-funded programs in Alameda County, are now participating in Quality Counts.

- First 5’s most recent Kindergarten Readiness Study shows that low-income children who attended a high quality ECE program (as rated by Quality Counts) were just as ready for kindergarten as their more affluent peers.
Early Identification and Intervention

is detecting early signs of developmental, social-emotional, and learning concerns before a child enters school. First 5 helps families navigate complex systems to receive necessary resources. These efforts are coordinated through our Help Me Grow (HMG) program.

**WHY IT MATTERS**

Studies show that developmental concerns often go undetected until a child reaches school; however, the earlier a child receives supports, the better their outcomes. Early detection also reduces the need for costly interventions, which leads to savings across multiple systems.

**20 YEAR HIGHLIGHTS**

**2001** Set out to increase the awareness of the importance of child developmental screenings among providers and families. First 5 also sought to increase families’ access to developmental information.

**2003** Began providing technical assistance to health care providers, early care and education providers, and community organizations to promote the early identification of developmental delays.

**2009** Created the Help Me Grow Phone Line to be a centralized resource to help link families with needed services.

**2014** Developed the AlamedaKids.org Resource Directory, which allows providers and families access to timely, accurate information about available support and services, including a list of publicly funded early childhood mental health services by availability and language.

**NOTABLE POLICY & SYSTEMS CHANGE**

**First 5 Alameda County has:**

Participated in efforts to raise the profile of developmental screening at the state level, which has resulted in legislation and additional funding.

Established HMG as an important part of the local safety net, supporting families through navigating complex systems by spanning health, education, legal, and public benefits. 85% of families served by HMG are enrolled in Medi-Cal.

Enhanced the capacity of pediatric, ECE, and education providers to promote child development, integrate developmental screening, and successfully link children to services, with many providers making changes to their own systems to support early identification.

Created a central access point for providers to obtain child development information, coordinate care with other providers, and make referrals for families.

**THREE NOTABLE RESULTS IN 2017-2018**

21,928 child developmental screenings were conducted in pediatric practices, early care and education settings, and community organizations across Alameda County (compared to 356 in FY 2001–2002).

2,834 calls for support were received by the Help Me Grow phone line (compared to 357 received during FY 2009–2010).

65 pediatric practices across the county conducted early identification screenings (compared to 2 sites in FY 2003–2004).
WHY IT MATTERS

90% of a child’s brain is developed by age five, so services for young children and their families have to be timely and effective. First 5’s training program increases capacity to serve young children at the provider, agency, and systems level by being a reliable resource for county partners to gain core knowledge and competencies as they relate to supporting young children.

20 YEAR HIGHLIGHTS

2000 Launched the Child Development Corp, the largest county professional growth incentive program in the nation, enrolling over 2,400 licensed center-based and family child care educators.

2013–2017 Tripled the number of trainings provided annually (from 23 to 65) and significantly increased the number of unique attendees (from 420 to 1,191) and unique agencies (from 67 to 190) that attend trainings.

2013 Established Alameda County Fathers Corps through a partnership between First 5 and the Alameda County Health Care Services and Social Services agencies to ensure providers have the tools needed to effectively engage and serve fathers and father figures.

2016 Developed “Ripples of Transformation,” a national family engagement toolkit with the Center for the Study of Social Policy.

2018 Awarded 9,100 Continuous Education units since 2005.

NOTABLE POLICY & SYSTEMS CHANGE

First 5 Alameda County has:

Developed the most robust, comprehensive, free to low-cost early childhood training program in the county. The training program is a vital resource for building out an early childhood system of care in Alameda County.

Helped to institutionalize vital resources for providers, such as seeding the Early Childhood Mental Health Certification program at CSU East Bay that was adopted by Alameda County Behavioral Health and funded by the Alameda County Board of Supervisors.

Underscored an enhanced focus on equity, socio-economic issues, and systems navigation across trainings and programs to advance the field toward more concrete forms of equity.

Helped to get the Alameda County Fathers Corps’ Father Friendly Principles adopted by the Alameda County Board of Supervisors.

THREE NOTABLE RESULTS IN 2017-2018

2,155 providers trained, from 190 agencies, with nearly 20,000 hours of training received.

In post-training surveys, providers reported:
- 85% improved knowledge
- 81% improved skills
- 75% implement best or promising practices as a result of training (FY 2017–2018).

113 male providers from 80 different agencies have participated in the Fathers Corps Learning Community as of 2018.
Data for Action

Historic disinvestment in certain communities, the current tensions of gentrification, and the cost of living in Alameda County have resulted in persistent inequities and fewer families with children. We present data on the state of children and families in Alameda County to underscore the root causes of these disparities, highlight our responses, and present opportunities for partnership, policy, and systems change.

Alameda County Family Demographics at a Glance

Alameda County is the 4th most diverse county in the US, with a wealth of unique and vibrant communities. However, concentrated poverty and unequal access to opportunities create significant disparities in infant mortality, quality of life, and life expectancy across communities in the county.

POPULATION OF CHILDREN UNDER 6

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Population</th>
</tr>
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<tbody>
<tr>
<td>1998</td>
<td>122,498</td>
</tr>
<tr>
<td>2017</td>
<td>117,645</td>
</tr>
</tbody>
</table>

8.7% of the total population

7.1% of the total population

MOTHERS WHO GAVE BIRTH IN ALAMEDA COUNTY

<table>
<thead>
<tr>
<th>Race or Ethnicity of Mother</th>
<th>Percentage of All Births</th>
<th>Percentage with Low Birth Weight Babies</th>
<th>Teen Births PER 1000</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td>16%</td>
<td>9%</td>
<td>67.8</td>
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<td>22%</td>
<td>6%</td>
<td>13.9</td>
</tr>
<tr>
<td>Hispanic/Latina</td>
<td>27%</td>
<td>6%</td>
<td>17.7</td>
</tr>
<tr>
<td>White</td>
<td>31%</td>
<td>4%</td>
<td>19.1</td>
</tr>
<tr>
<td>Multiracial / Other</td>
<td>3%</td>
<td>6%</td>
<td>5.6</td>
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ALL BIRTHS

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<td>19,551</td>
<td>5%</td>
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6.7% decrease

POLICY ADVOCACY Access to health care has improved, but stubborn inequities and institutional racism persist, impacting health outcomes. We advocate for increased access to health, behavioral health, and dental care services for young children and their families.

POLICY ADVOCACY Changes in immigration rules cause fear among parents who are turning down needed services for their children as a result. First 5 celebrates the diversity of our county. Separating families at the border and keeping families in detention centers is detrimental to children’s societal well-being. We actively oppose all immigration policy changes that hurt families and we provide resources to ensure families are well-informed.

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46% of 2017 households in Alameda County speak a language other than English.

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IF YOU WANT FURTHER INFORMATION ABOUT OUR DATA AND SOURCES, PLEASE VISIT WWW.FIRST5ALAMEDA.ORG/ANNUAL-REPORTS
Financial Realities for Families

Child well-being is inextricably tied to the financial health of families. The cost of living in Alameda County means that too many families, including those working full time, are forced to choose between basic necessities.

MORE THAN 1 in 10 children are living below the poverty level ($25,100)

2018 CA-ALAMEDA COUNTY SELF-SUFFICIENCY STANDARD

The amount of income families need to meet basic needs

$117,975 2 adults and 2 preschoolers — 2018

$117,975 2 adults and 2 preschoolers — 2018

$45,760 2 full-time workers at CA minimum wage — 2018

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$25,100 Federal Poverty Level for a Family of 4 — 2018

$25,100 Federal Poverty Level for a Family of 4 — 2018

POLICY ADVOCACY

We support parent leadership and workforce opportunities that help young families become advocates on a local, state, and federal level. We fund the Alameda County Early Childhood Policy Committee and are incorporating parent leadership practices across our funding and program portfolios.

IF YOU WANT FURTHER INFORMATION ABOUT OUR DATA AND SOURCES, PLEASE VISIT WWW.FIRST5ALAMEDA.ORG/ANNUAL-REPORTS
HOMELESS CHILDREN

2013–2014: 3,477
2016–2017: 4,574

+24% increase in child homelessness in only three years

POLICY ADVOCACY

We know families are living in vehicles, tents, and doubled up with friends because of high housing costs. We advocate for the prioritization of pregnant women, young children, and their families in homeless assistance programs. We are partnering on a pilot program to prioritize childcare subsidies and other concrete supports for homeless families that can be replicated at a county or statewide level.

COST OF HOUSING AS A PERCENTAGE OF MONTHLY INCOME

<table>
<thead>
<tr>
<th>Year</th>
<th>Median Monthly Income</th>
<th>Housing Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>16%</td>
<td></td>
</tr>
<tr>
<td>2018</td>
<td>27%</td>
<td></td>
</tr>
</tbody>
</table>

Comparing the cost of housing as a percentage of monthly income, there has been a significant increase from 16% in 2000 to 27% in 2018.

COMPARISON OF CHANGE IN MEDIAN MONTHLY INCOME AND HOUSING COST

Housing cost is rising much faster than the average monthly income.

COST OF CHILDCARE

<table>
<thead>
<tr>
<th>Year</th>
<th>Cost of Childcare</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>$10,891 (2017)</td>
</tr>
<tr>
<td>2016</td>
<td>$18,543 (2017)</td>
</tr>
</tbody>
</table>

Full-time childcare cost has risen above the cost of state university tuition.

NUMBER OF CHILDREN 0–4 ELIGIBLE FOR SUBSIDIZED CHILDCARE

Demand: 21,151
Supply: 9,592
Gap: 11,559

Access to early care and education programs is an economic necessity for most families, has positive effects on children’s well-being, and benefits society. We advocate for expanded early care and education at a county and statewide level. Our funded kindergarten readiness study was recently used in two local ballot initiatives.

If you want further information about our data and sources, please visit www.first5alameda.org/annual-reports.
**Policy Advocacy**

We advocate and support state and federal efforts to increase funding for evidence-based family strengthening programs, such as Home Visiting.

**Policy Advocacy**

We advocate for policy and practice changes that lower barriers for eligible parents of young children to receive public benefits. This includes simplifying the eligibility, enrollment, and renewal processes, including dual enrollment when possible, opposing new work requirements, and increasing local resources to conduct outreach and determine eligibility for public programs.

**Policy Advocacy**

Child well-being is inextricably tied to the financial health of families. We advance opportunities to preserve and increase funding streams for job creation, workforce, and social safety net programs such as CalFresh, childcare, and the state and federal earned income tax credit (EITC).

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**Children Born to Families with Low Income**

Percent of births using Medi-Cal as payor in 2016:

- +50%
- 25%–50%
- 0%–25%
- NO DATA

**Neighborhood Investment**

We are committed to closing the opportunity gap experienced by children of color and children living in poverty due to long-term community disinvestment. Our Neighborhoods Ready for School strategy is a place-based approach that informs our policy advocacy and systems integration efforts.

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**Number of Children 0–6 Receiving Public Benefits**

<table>
<thead>
<tr>
<th>Program</th>
<th>1998</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medi-Cal</td>
<td>32,583</td>
<td>36,917</td>
</tr>
<tr>
<td>CalFresh</td>
<td>14,166</td>
<td>15,213</td>
</tr>
<tr>
<td>CalWORKS</td>
<td>11,514</td>
<td>6,003</td>
</tr>
</tbody>
</table>

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Educational Achievement

Socio-economic factors relating to health and well-being and participation in early education are the biggest predictors of later school success.

4 in 5 children who are Not Ready for Kindergarten are still Not Proficient in third grade.

Achievement gaps start early and persist through high school, college, and career.

SIX-YEAR-OLDS WHOSE DEVELOPMENTAL ISSUES WERE UNIDENTIFIED OR UNTREATED PRIOR TO AGE 6

<table>
<thead>
<tr>
<th>Year</th>
<th>High Engagement</th>
<th>Medium Engagement</th>
<th>Low or No Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>56%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>46%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>42%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td>40%</td>
<td></td>
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</tbody>
</table>

LOCAL SYSTEM OF CARE We are increasing the county’s ability to identify developmental concerns early and link families to community resources by incubating Help Me Grow. We seek to integrate Help Me Grow into the current systems of care to ensure this important safety net continues to serve families.

PUBLIC SYSTEM PARTNERSHIP We partner with school districts to support families’ transition to kindergarten. We advocate for policies and practices that position children for school success.

KINDERGARTNERS READY FOR SCHOOL BASED ON LEVEL OF FATHER ENGAGEMENT

EQUITY AND PARENT ENGAGEMENT The Alameda County Fathers Corps works to promote the adoption and implementation of the Father Friendly Principles to ensure programs are more father-friendly and there are more resources to support and expand fatherhood services.

CAPACITY BUILDING Early care and education has long-term positive impacts on educational outcomes for children. We seek to address implicit bias and institutional racism in the early care and education field through staff professional development opportunities and in the design of First 5 programs.

Health & Well-being + Use of Community Resources + Parent Support + Formal ECE + Family Reading Routines → School Readiness

IF YOU WANT FURTHER INFORMATION ABOUT OUR DATA AND SOURCES, PLEASE VISIT WWW.FIRST5ALAMEDA.ORG/ANNUAL-REPORTS
20 Years of Funding at First 5 Alameda County

The 1998 passage of Proposition 10 added a 50-cent-per-pack increase in the state surtax on cigarettes and tobacco products to fund anti-smoking and early childhood programs. In addition, the 2016 passage of Proposition 56 increased the cigarette tax by $2.00 per pack, with equivalent increases on tobacco products and electronic cigarettes containing nicotine. Using this money and other funds, First 5 Alameda County has made significant financial contributions to the local system of care for children ages 0 to 5.

40% decline in yearly Prop 10 revenue since 1999

$29.0M

$11.4M

1999

2017

over $38M received from philanthropic and other funding sources

over $17M has been earned through federal fiscal leveraging efforts since 1999

over $236M has been awarded to community partners and agencies

THANK YOU to First 5 staff, Commission, and community partners. Your vision, leadership, and hard work are celebrated daily in the successes of our children and the health of our families and communities.

“I see children, all children, as humanity’s most precious resource, because it will be to them that the care of the planet will always be left.”

— Alice Walker