



MONTEREY COUNTY
CHILDREN'S COUNCIL
2023-2024

ANNUAL REPORT

Contents

Vision, Mission and Guiding Principles	2
Vision Statement	2
Mission Statement	2
Guiding Principles	2
A Message from the Children’s Council Chair	3
Methodology	4
Executive Summary	5
Profile of Children and Youth	
Children Living Below the Poverty Level	6
Socio-Economically Disadvantaged Students	6
Student Homelessness	7
Children Supported by CalWorks	8
Referrals for Child Abuse and Neglect	9
Children in Foster Care	9
Children with Health Insurance	10
Digital Divide	10
Low Birth Weight	11
Early Prenatal Care	11
Education of Mother	12
Licensed Child Care Slots Available	12
Licensed Child Care and Education Cost	13
Kinder Readiness Assessment	14
Student Demographics	
Public School Enrollment	15
Children Enrolled in Special Education	16
English Language Arts	17
English Language Learners	19
Math CAASPP Scores	20
Graduation Rates Over Time	22
Student Suspension Rates Over Time	24
Student Expulsion Rates Over Time	26
Student Drop Out Rates Over Time	28
Births to Teens	30
Sexually Transmitted Infection Cases	30
Juvenile Misdemeanors and Felony Arrests	31
Suicides Among Youth	32
Substance Abuse and Non-Fatal Overdoses in Youth	33
Substance Abuse and Fatal Overdoses in Youth	34
Initiatives and Areas of Focus	34
2023-2024 Member Presentations	36
2023-2024 Members and Designated Alternates	37
Appendix	38

Vision, Mission and Guiding Principles

Vision Statement

All children in Monterey County live in safe, nurturing homes and communities; they are healthy, valued, succeed in school and realize their full potential.

Mission Statement

The Children's Council provides leadership and policy direction to encourage the development of a comprehensive and collaborative delivery system of services to children and youth in Monterey County.

Guiding Principles

Collaborative – promoting cross-agency policies and procedures that enhance seamless service delivery; encourage interdisciplinary problem-solving and support; and address the barriers to success;

Comprehensive, Coordinated and Integrated – recommending a full array of services and supports where the entire range of needs is addressed in an efficient, responsive and effective manner;

Family-Centered and Family-Driven – honoring, respecting and empowering families as their child's first teacher and strongest advocate;

Culturally Responsive – ensuring diverse populations receive culturally responsive services and supports;

Community-Based/Community Driven – ensuring that services are available and accessible in a variety of settings and locations;

Participatory – ensuring that program recipients participate in making and shaping decisions; and

Outcomes-Oriented – measuring outcomes for children, youth and families and using data to facilitate decision-making, identify obstacles and improve services.

A Message from the Children's Council Chair

Honorable Board of Supervisors and Monterey County residents,

The Monterey County Children's Council (Children's Council) is pleased to present its FY 2023-2024 Annual Report, a snapshot documenting the status of children and youth in our County in an effort to not only have a better understanding of their needs, but to help incite continued and enhance commitment in meeting these needs.

The Children's Council membership includes the executive leaders from major public, private and non-profit sectors of the County whose agencies and organizations serve children and youth in a wide variety of ways. The Children's Council members meet monthly to coordinate cross-sector work focused on addressing systemic issues that are affecting the health, education and wellbeing of children and youth in Monterey County. The Council is guided by its purpose and its vision: to provide leadership and policy direction to encourage the development of comprehensive delivery system of services for children and their families so that all children in Monterey County live safe nurturing homes and communities; they are healthy, valued, succeed in school and realize their full potential.

This report reflects current efforts in support of the Children's Council's purpose and vision. The report presents a comprehensive data set, which offers an understanding of the status of children and youth in Monterey County, and more importantly, provides a context for focusing the work that needs to be done to improve conditions and success of our children and youth. I am pleased to report the Children's Council continued its focus on its Bright Beginnings Initiative, partially funded by the Monterey County Board of Supervisors, and this critical work highlighted in this report. This year, the Children's Council also continued its focus to deepen its understanding of issues impacting our children, families, and caregivers using Reflective Practice as a tool while exploring issues related to child well-being and education. Presentations were delivered both by its membership and other community stakeholders and partners and can be found on our [website](#). The report concludes with the historic records of previous Children's Council Initiatives and areas of focus that have successfully impacted health, education, and wellbeing of children and youth in Monterey County.

The Children's Council Annual Report is a call to action for all of us to prioritize the health, education, and wellbeing of children and youth. We believe that this report reflects the Children's Council's goal of connecting its work to the broad group of stakeholders and community members. Only through collective action can we ensure every child and youth in Monterey County thrives and prepares for success.

Sincerely,

Todd Keating, Chair
Monterey County Children's Council

Why this Children's Council Annual Report is Important

The Annual Report was created to help our community understand the needs of our children and youth, in order to build community commitment to meet these needs. It is a local and state "snapshot" documenting the status of our children and youth. This Annual Report is intended to help community members make informed decisions regarding public policy issues, volunteer efforts and support for nonprofit organizations.

The Annual Report has four goals:

- To serve as a benchmark to measure how children and youth are faring over time
- To serve as a catalyst to mobilize communitywide efforts to address the most critical challenges to children's and youth's circumstances
- To recognize areas in which services and initiatives have been successful in improving children and youth's quality of life, in order to maintain continued support for these efforts
- To present multiple indicators in a simple arrangement and location

Methodology

This Annual Report serves as a benchmark to measure the relative success of efforts, to improve conditions for all children ages 0-18. The Fiscal Year 2023-2024 Annual Report is based exclusively on secondary data reports. A list of indicators was created by the Children's Council in 2018. Secondary data was then collected from local and state-level published reports. The quality of the data was evaluated and then it was determined whether it addressed pertinent indicators for this Annual Report. Data was collected from a variety of sources as indicated on the specific pages, and data series with historic trends and comparison between state and local rates were preferred.

Reflective Practice

In collaboration with West Ed, the Children's Council introduced reflective practice facilitation in 2020. The council continues the practice with support from the Monterey County Behavioral Health department to develop equity-centered reflective practice skills through deepening our understanding of awareness, presence, connection, and vision in our work. As a learning community, the council breaks out to small-group reflective sessions after presentations for deeper dive discussion into participants' real-life experiences working with children and families.

Measuring Results

Thirty indicators have been selected and organized into three major age ranges: birth to 18 years of age, birth to five years of age, and six to 18 years of age for which conditions for children are assessed as "stable", "fluctuating", "increasing", "decreasing", or "N/A" (not available) for Monterey County and the State of California. You will find this assessment on the Executive Summary page for each specific indicator.

Executive Summary

Birth to 18

	Trend
Children Living Below Poverty Level	Fluctuating
Socio-Economically Disadvantaged Students	Increasing
Student Homelessness Enrollment	Increasing
Children Supported by CalWorks	Fluctuating
Referrals for Child Abuse and Neglect	Fluctuating
Children in Foster Care	Decreasing
Children with Health Insurance	Stable
Digital Divide	Decreasing

Birth to 5

Low Birth Weight	Stable
Early Prenatal Care	Fluctuating
Education of Mother	Fluctuating
Licensed Child Care and Education Slots *	Fluctuating
Licensed Child Care and Education Costs *	Increasing
Kindergarten Readiness *	Increasing

6 to 18

Public School Enrollment	Decreasing
Children Enrolled in Special Education	Increasing
English Language Arts	Stable
English Language Learners	Fluctuating
Math CAASPP Scores	Stable
Graduation Rates Over Time	Increasing
Student Suspension Rates Over Time	Fluctuating
Student Expulsion Rates Over Time	Fluctuating
Student Drop Out Rates	Decreasing
Births to Teens	Decreasing
Sexually Transmitted Infection Cases	Fluctuating
Juvenile Misdemeanor and Felony Arrests	Fluctuating
Suicide Trends in Youth	Fluctuating
Substance Abuse and Non-Fatal Overdoses in Youth	Fluctuating
Substance Abuse and Overdoses in Youth	Fluctuating

Note: When an indicator has been assessed as “stable”, this means that the trend line is flat, indicating that there is not much change or inconsistency on the data figures. On the other hand, when an indicator is assessed as “fluctuating”, this means that the data figures are inconsistent from year to year. An assessment of “increasing”, refers to higher numbers in the value of the data and an assessment of “decreasing”, refers to lower numbers in the value of the data. When looking at the assessment of “increasing” or “decreasing”, please keep in mind that these terms reflect how the rate or number in each particular trend is changing. They do not indicate improvement or worsening.

Indicator with an * and in bold font did not have updated data available to report during the timing to complete this report.

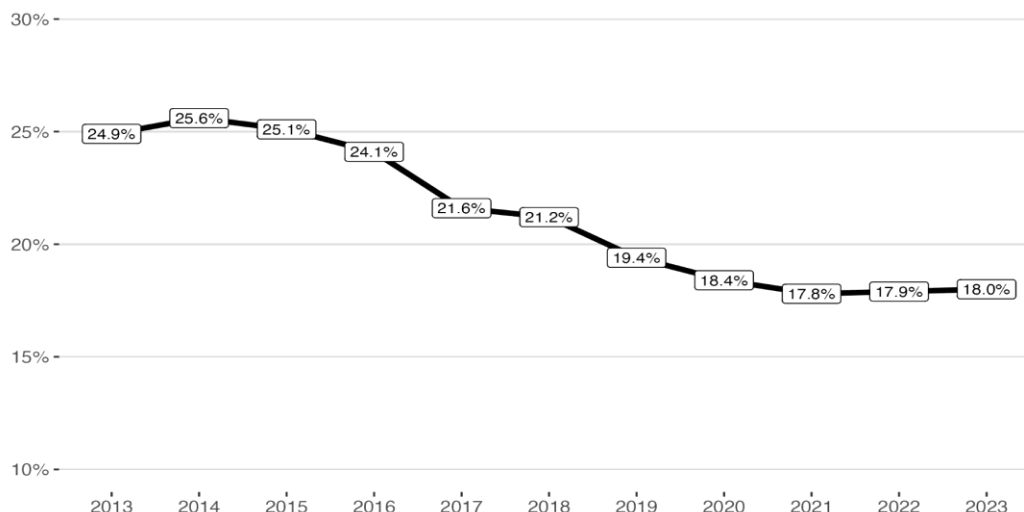
Definition of the Indicator

Based on the Census's American Community Survey 5-year rolling average it looks at children under 18 who are living in poverty.

Why the Indicator is Important

Children living in poverty frequently face more barriers to success in life than their more affluent peers. Childhood poverty is associated with lower overall education attainment, higher levels of stress, lack of stable housing, lower median lifetime earnings and shorter life expectancies.

Children Living in Poverty in Monterey County



Source: Census - American Community Survey 5 year estimates: Table S1701

Socio-Economically Disadvantaged Students

Birth-18

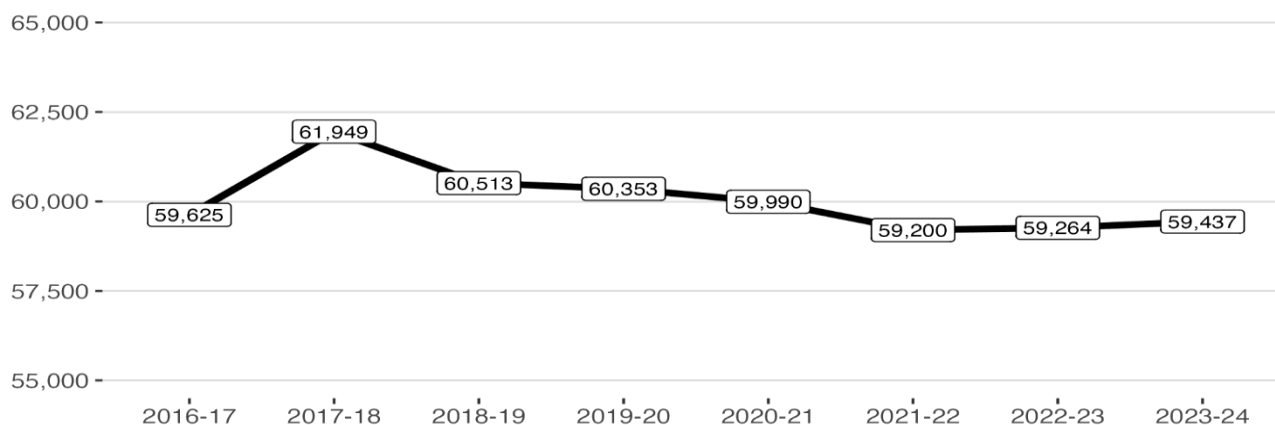
Definition of the Indicator

Enrollment is based upon the Cumulative Enrollment from the California Longitudinal Pupil Achievement Data System (CALPADS). This includes information about total enrollment, Free and Reduced Meal Program, Homeless, Els and others. Cumulative enrollment consists of the total number of unduplicated primary and short-term enrollments within the academic year (July 1 to June 30), regardless of whether the student is enrolled multiple times. If a student is enrolled in multiple schools within a district during the academic year, they are counted only once in the district's cumulative enrollment.

Why the Indicator is Important

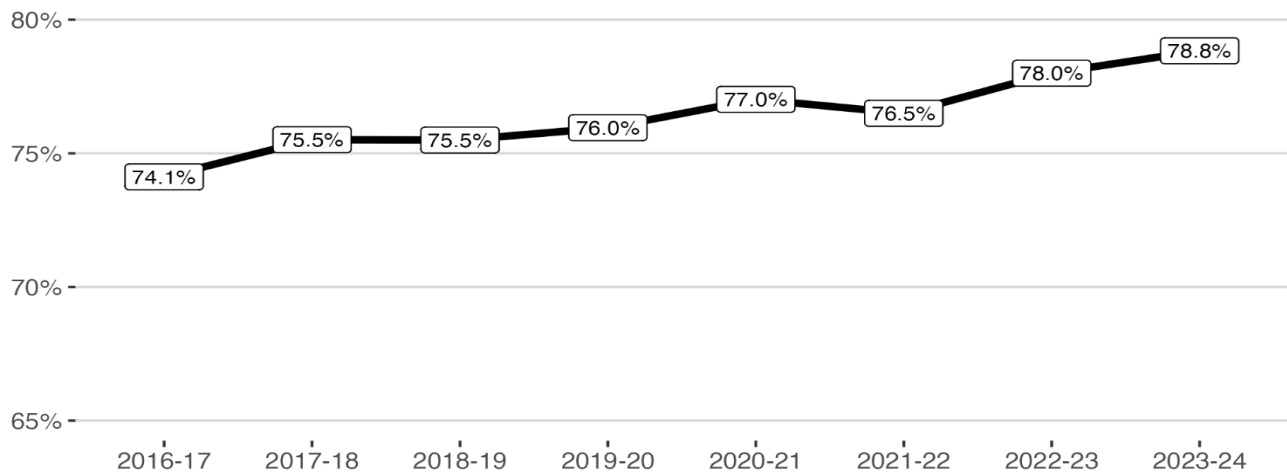
Knowing the size of a population in question helps to determine the scale and scope of efforts to support the population.

Socioeconomically Disadvantaged Enrollment in Monterey County (Count)



Source: Cumulative Enrollment Data
<https://www.cde.ca.gov/ds/ad/files/enrcum.asp>

Socioeconomically Disadvantaged Enrollment in Monterey County (Percent)



Source: Cumulative Enrollment Data
<https://www.cde.ca.gov/ds/ad/filesenrcum.asp>

Student Homelessness Enrollment

Birth-18

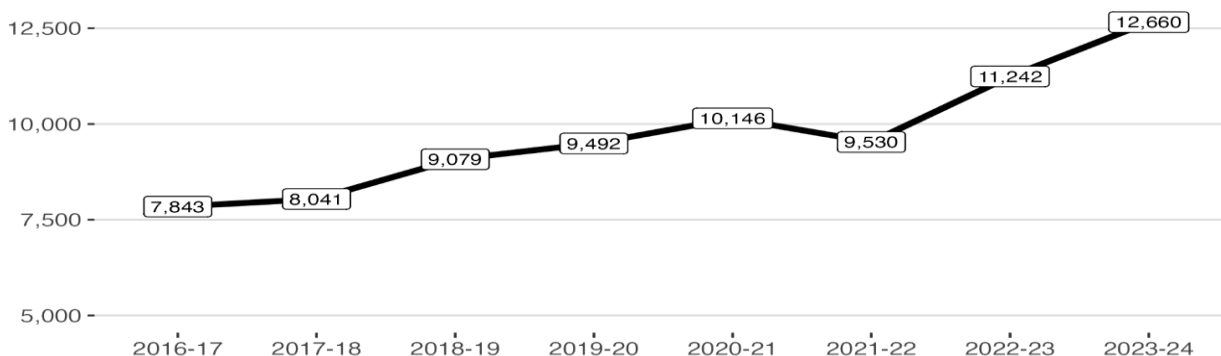
Definition of the Indicator

Enrollment is based upon the Cumulative Enrollment from the California Longitudinal Pupil Achievement Data System (CALPADS). This includes information about total enrollment, Free and Reduced Meal Program, Homeless, Els and others. Homeless as defined by McKinney-Vento (A) means individuals who lack a fixed, regular, and adequate nighttime residence; and (B) includes—(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals; (ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; (iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and (iv) migratory children who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).

Why the Indicator is Important

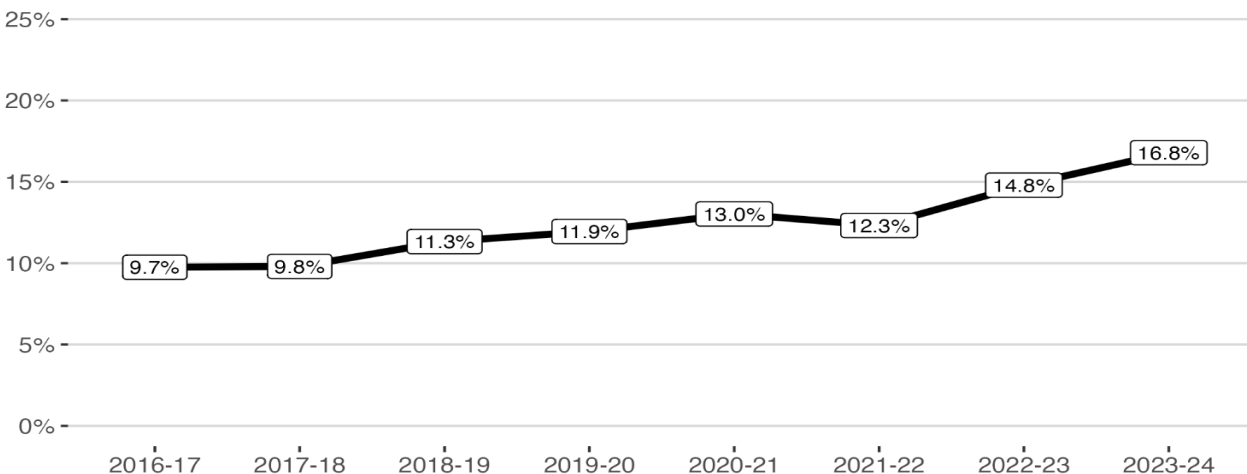
Knowing the size of a population helps determine the needed scale and scope. Students experiencing homelessness have lower graduation rates and without support for the whole child they can struggle to thrive in the classroom.

Homeless Enrollment in Monterey County (Count)



Source: Cumulative Enrollment Data
<https://www.cde.ca.gov/ds/ad/filesenrcum.asp>

Homeless Enrollment in Monterey County (Percent)



Source: Cumulative Enrollment Data
<https://www.cde.ca.gov/ds/ad/filesenrcum.asp>

Children Supported by CalWORKs

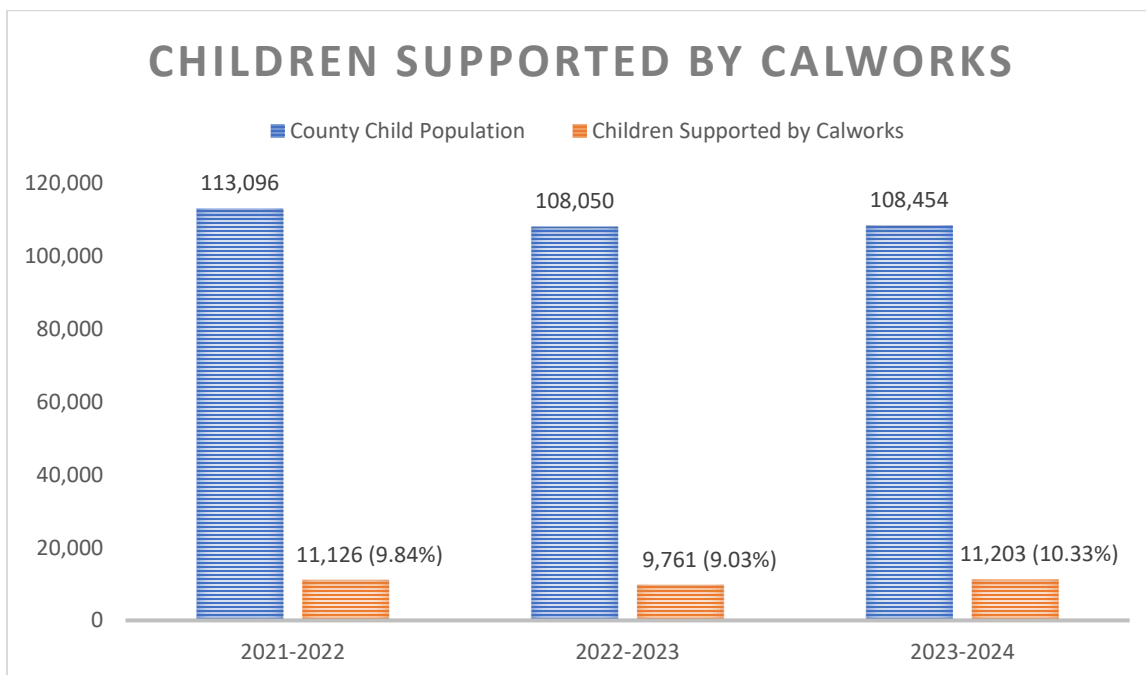
Birth-18

Definition of the Indicator

The federal welfare reform legislation, Personal Responsibility and Work Opportunity Reconciliation Act of 1996, known as CalWORKs, provides financial assistance to needy children and families in Monterey County. This indicator reflects the average annual caseload of children under the age of 18 receiving financial assistance through CalWORKs.

Why the Indicator is Important

The CalWORKs program has multiple goals, including reduced welfare dependency, increased self-sufficiency, and decreased non-marital childbearing. The CalWORKs legislation sought to achieve the goals of improving child and family well-being by strengthening work first requirements and increasing support services for families engaged in work activities. California efforts to continue a focus on child well-being include provisions of a safety net program for children when adults are sanctioned or reach their sixty-month limit on aid, their requirement of school attendance, child immunizations, and assisting with paternity and child support enforcement activities.



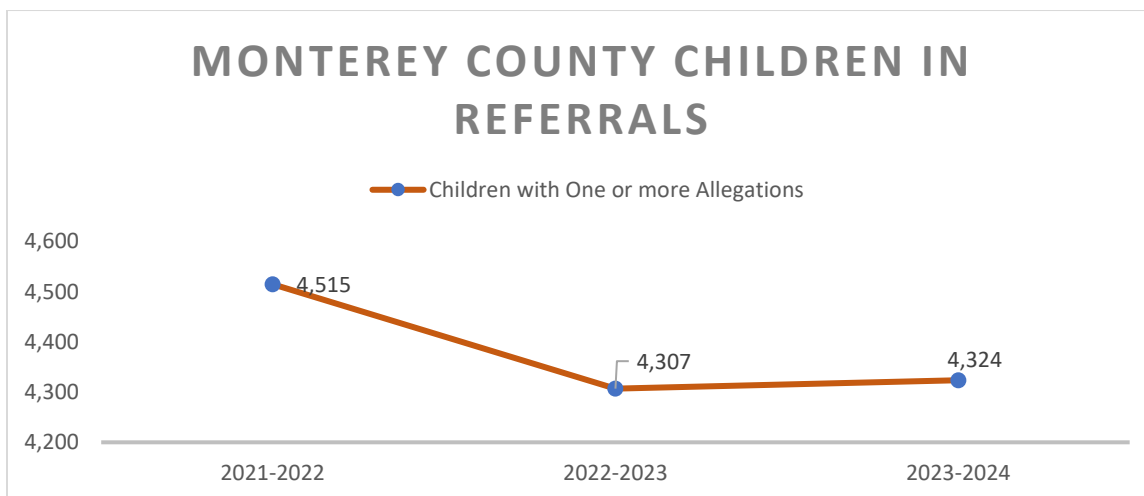
Source: Monterey County Department of Social Services — IT Data Development 2024

Definition of Indicator

The rate of substantiated reports in which a referral was made due to allegations of child abuse, neglect, and/or exploitation of children 18 years of age or less.

Why the Indicator is Important

This indicator represents the prevalence of child abuse in Monterey County. State law requires several categories of professionals, including teachers, nurses, social workers, law enforcement officers and childcare providers, to report suspected cases of maltreatment or child abuse. Other sources of child abuse reporting include parents, neighbors, friends, and anonymous persons. A report to the Child Abuse Hotline is the primary entry point for children and families into the Child Welfare Services of Monterey County. Depending on the severity of the report, there are established time standards for initiating the investigation. Reports are investigated and assigned to one of three disposition categories – “Unfounded”, “Inconclusive”, or “Sustained”.



<https://ccwip.berkeley.edu/childwelfare/reports/Allegation/MTMG/r/ab636/s>

A child is counted only once, in category of highest severity.

Data Source: CWS/CMS 2023 Quarter 3 Extract. - Program version: 2013.12.05 Database version: 7835E42F -CCWIP reports. Retrieved Jan 18, 2024, from University of California at Berkeley California Child Welfare Indicators Project website. URL:

<https://ccwip.berkeley.edu>

Children in Foster Care

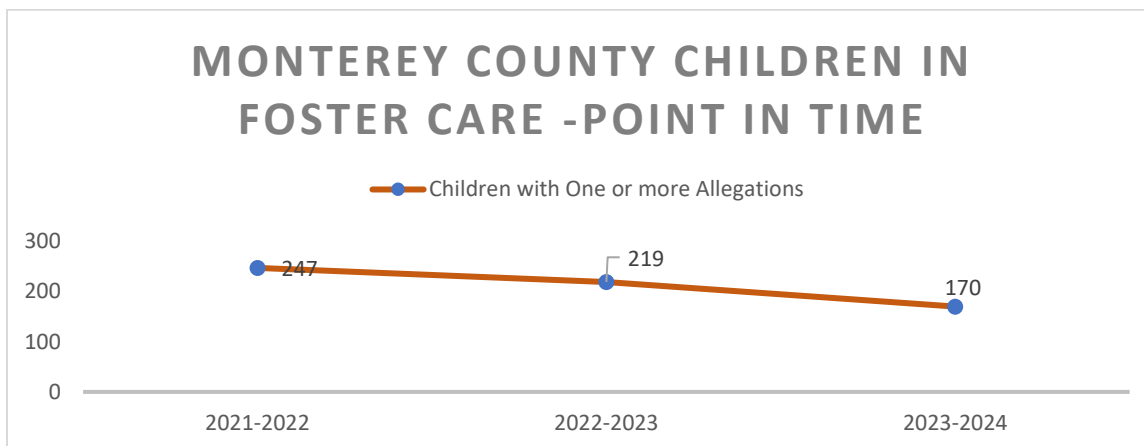
Birth-18

Definition of Indicator

Rate of children placed in welfare supervised care including shelter, court-specified home, kin, guardian or other.

Why the Indicator is Important

Removal of children from their families and placement in foster care is a difficult intervention for children and only exercised when risk to children is extreme. Best practice, as well as both federal and state laws, discourage the removal of children from their homes, unless absolutely necessary to ensure the child's safety. The placement of children in out-of-home care is an indicator of family problems that are so difficult, that a child cannot remain with his or her family. Child abuse and neglect are serious problems that cross socioeconomic boundaries and have profound effects on the safety and well-being of impacted children.



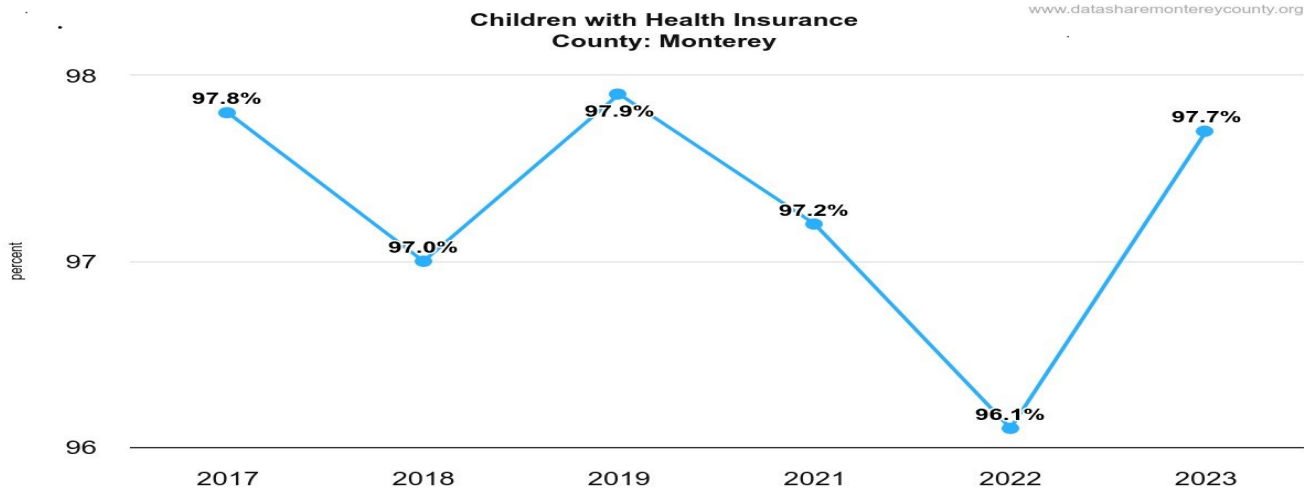
Source: CCWIP reports. University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucbc_childwelfare

Definition of the Indicator

The percentage of children aged 0-18, with health insurance is based on the number of children who have private and public health insurance. The percentage of those who have health insurance was calculated by dividing the number of those insured by the total number of children living in Monterey County. Health policy changes occurred in 2014 when many provisions of the Patient Protection and Affordable Care Act (ACA) went into effect. One of those provisions included changes to the definition of a "qualifying child". Under ACA, a qualifying child is aged 0-26.

Why the Indicator is Important

Health insurance allows children to access health care services, such as required regular checkups, dental and vision care, urgent medical services, and primary care services for illness and injury. Children with health insurance are more likely to receive preventative care and immunizations that will aid in decreasing the likelihood of illness and reduce out-of-pocket medical expenses. Generally, children with health insurance will experience better overall health throughout their childhood and into early adulthood.



Source: American Community Survey 1-Year (2023)

Digital Divide

Birth-18

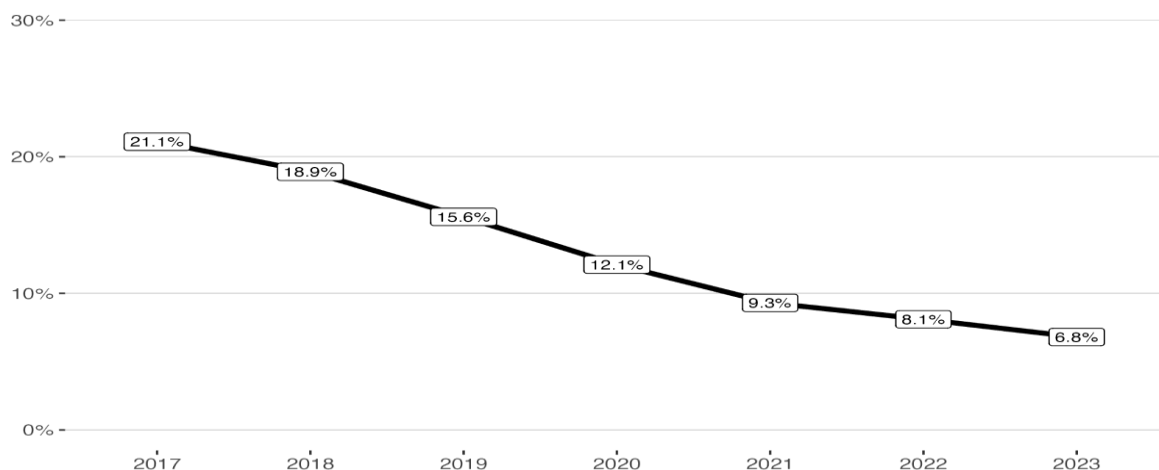
Definition of Indicator

"Households without internet subscription" refers to data collected by the American Community Survey (ACS) that indicates households which do not have an active internet subscription, meaning they do not pay for internet access, even if they may have access to the internet through other means like free public Wi-Fi or a neighbor's connection.

Why the Indicator is Important

Californians use the internet for a range of activities, including financial services, telecommuting, school communications, job searches, online classes or job training, and/or telehealth. Even if a household reports "no internet subscription," it doesn't necessarily mean they have absolutely no internet access; they might access the internet occasionally through other methods.

Households without an internet subscription in Monterey County



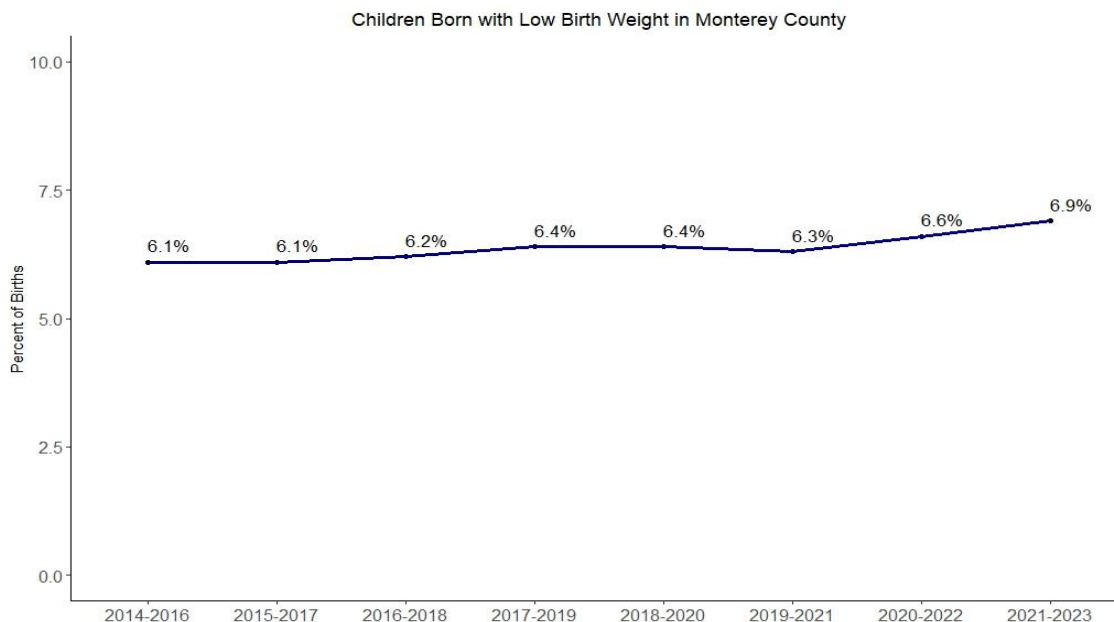
Source: Census - American Community Survey 5 year estimates: Table S2801

Definition of Indicator

The percentage of children born weighing less than 2500 grams (about 5.5 lbs.)

Why the Indicator is Important

Children born with low birth weights are more prone to infant death as well as developmental delays and certain chronic diseases. Causes of low birth weight babies include premature birth, smoking and maternal drug use.



Source: Birth Information: State of California, California Department of Public Health, VRBIS, California Comprehensive Birth File. Analysis by County of Monterey Health Department, Epidemiology and Surveillance Unit. Data updated 9/09/2024.

Early Prenatal Care

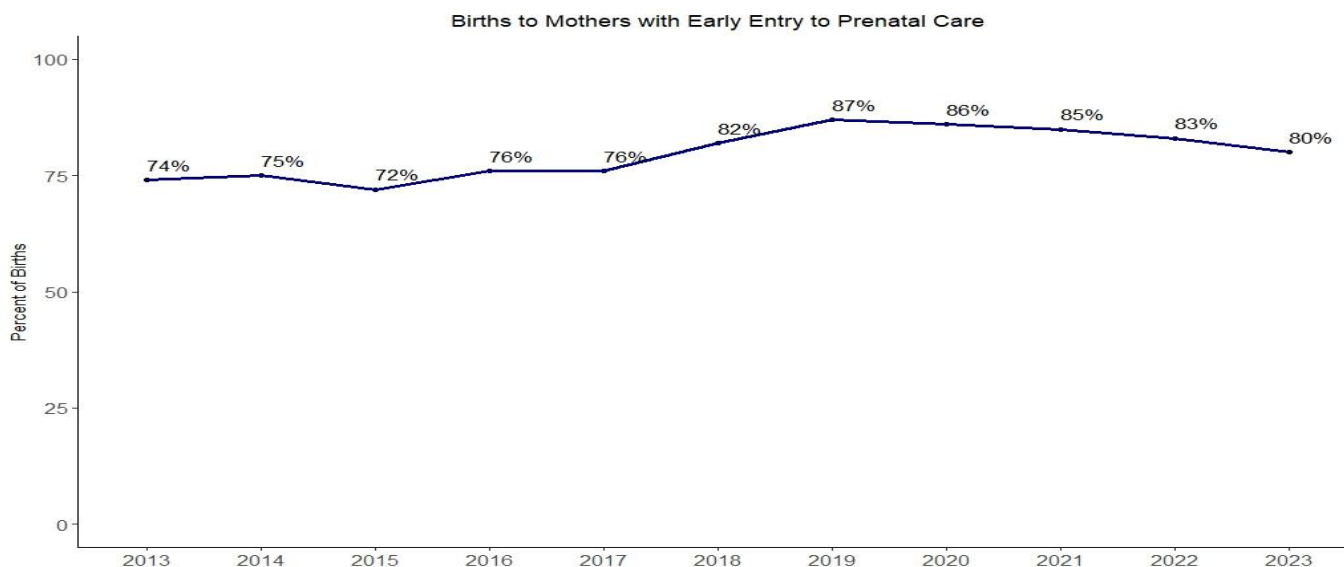
Birth-5

Definition of Indicator

The percentage of pregnant women who receive prenatal screening and treatment for medical conditions and identification of behavioral risk factors in the first three months of pregnancy. Proportion of Births to Mothers with Entry to Prenatal Care During First Trimester Among All Monterey County Births.

Why the Indicator is Important

Studies have shown that earlier prenatal care is associated with better health and developmental outcomes for newborns as well as fewer complications for mothers.



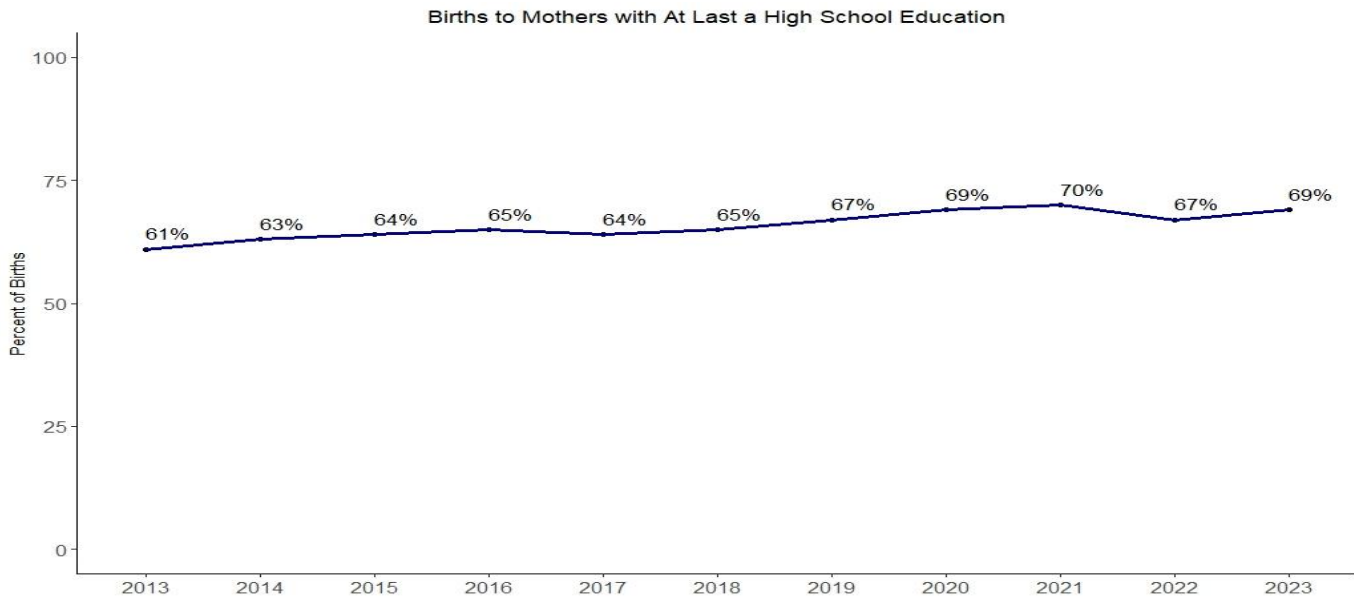
Source: Birth Information: State of California, California Department of Public Health, VRBIS, California Comprehensive Birth File. Analysis by County of Monterey Health Department, Epidemiology and Surveillance Unit. Data updated 9/09/2024.

Definition of Indicator

The percentage of mothers who have at least completed high school. A GED equivalency exam also qualifies as completing high school. Schooling obtained in Mexico or other national systems is also recognized. Proportion of births to mothers with at least a high school diploma or equivalent among all Monterey County births.

Why the Indicator is Important

Maternal education level is closely tied to future academic achievement, health, and economic status for the mother and her children.



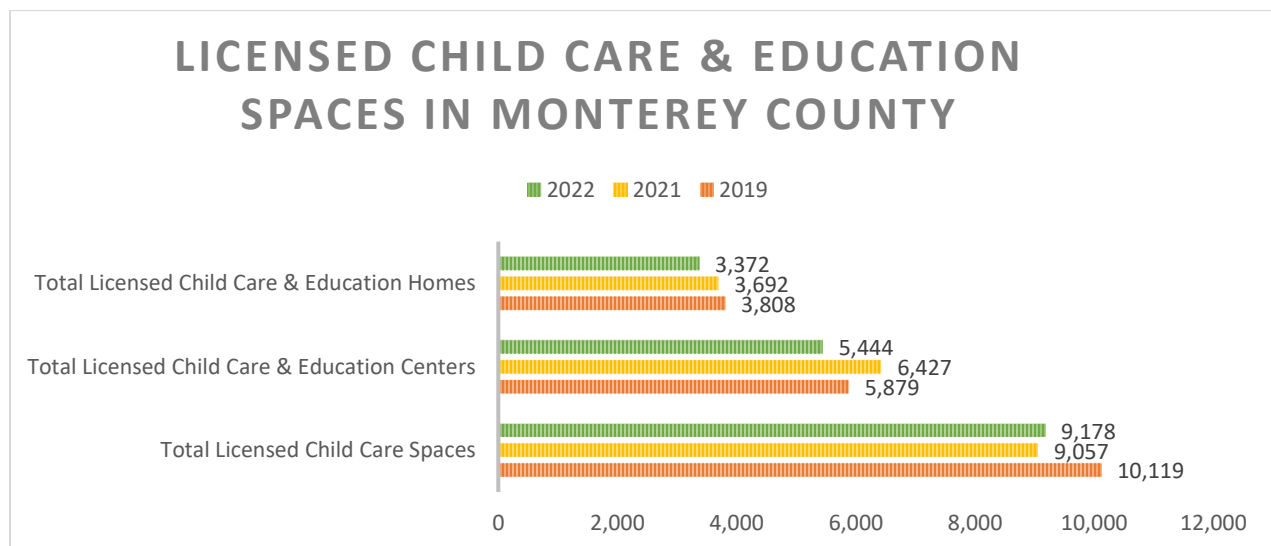
Source: Birth Information: State of California, California Department of Public Health, VRBIS, California Comprehensive Birth File. Population Data: State of California, Department of Finance, Population Estimates. Analysis by County of Monterey Health Department, Epidemiology and Surveillance Unit. Data updated 9/09/2024.

Definition of Indicator

The number of licensed child care slots includes both part-day and full-day care for infant, toddler, and preschool. This also includes expansion of transitional kindergarten in school districts serving four year old children. It does not include license-exempt or family and neighbor care scenarios.

Why the Indicator is Important

Quality child care is very beneficial for a child's social, emotional and cognitive development. Many working parents have a difficult time locating quality care. Licensed care is available for about a third of parents in the labor force.



Source: local Resource and Referral through MAOF. Data updated 1/25/24.

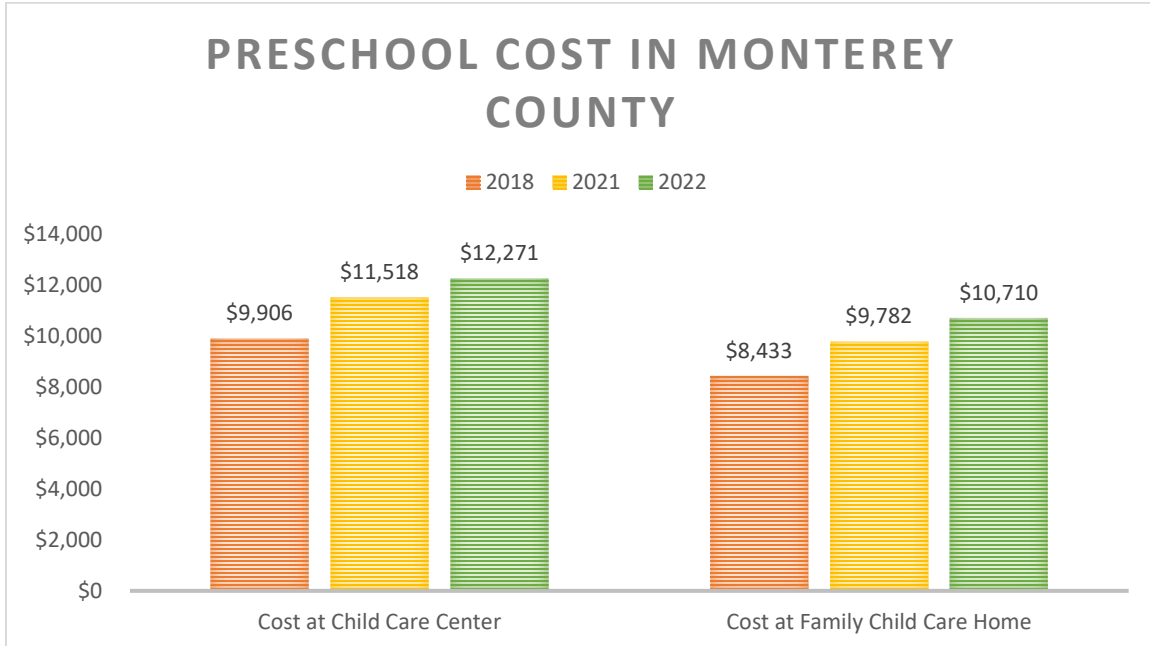
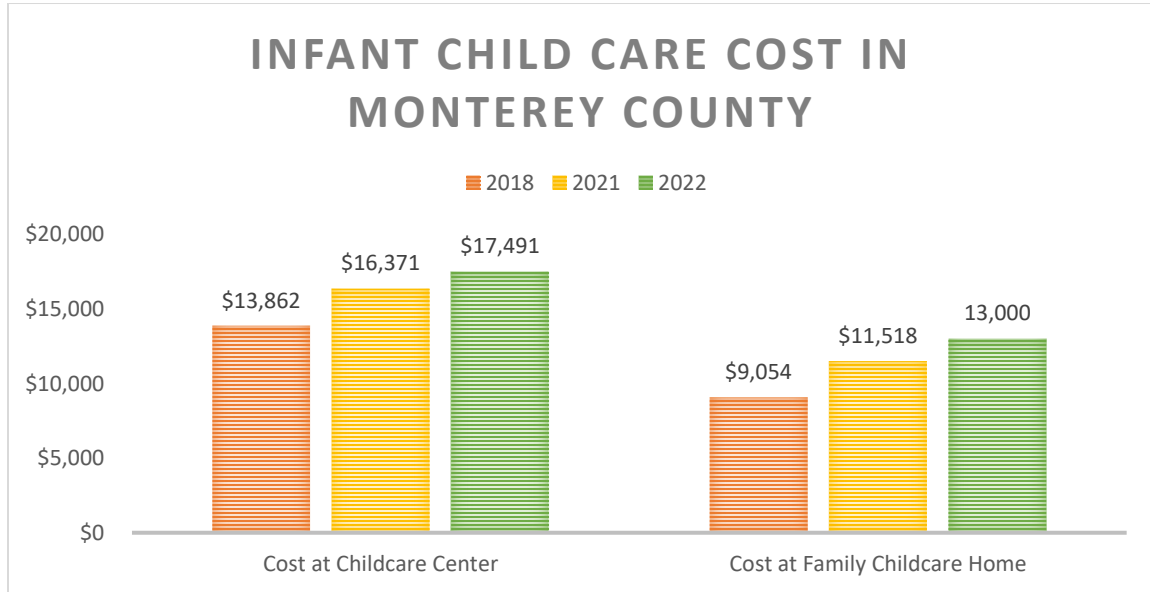
Note: Updated data was not available to report during the timing to complete this report.

Definition of Indicator

The number of licensed child care and education spaces includes both part-day and full-day care and education in home-based and center-based settings. This does not include state preschool, transitional kindergarten, license-exempt or informal child care and education settings.

Why the Indicator is Important

Paying for quality child care can be a large burden on a family, especially families living at the cutoff for subsidized care. Likewise, keeping trained quality childcare providers is difficult if they cannot earn an adequate salary.



Source: local Resource and Referral through MAOF. Data updated 1/25/24

Note: Updated data was not available to report during the timing to complete this report.

Definition of the Indicator

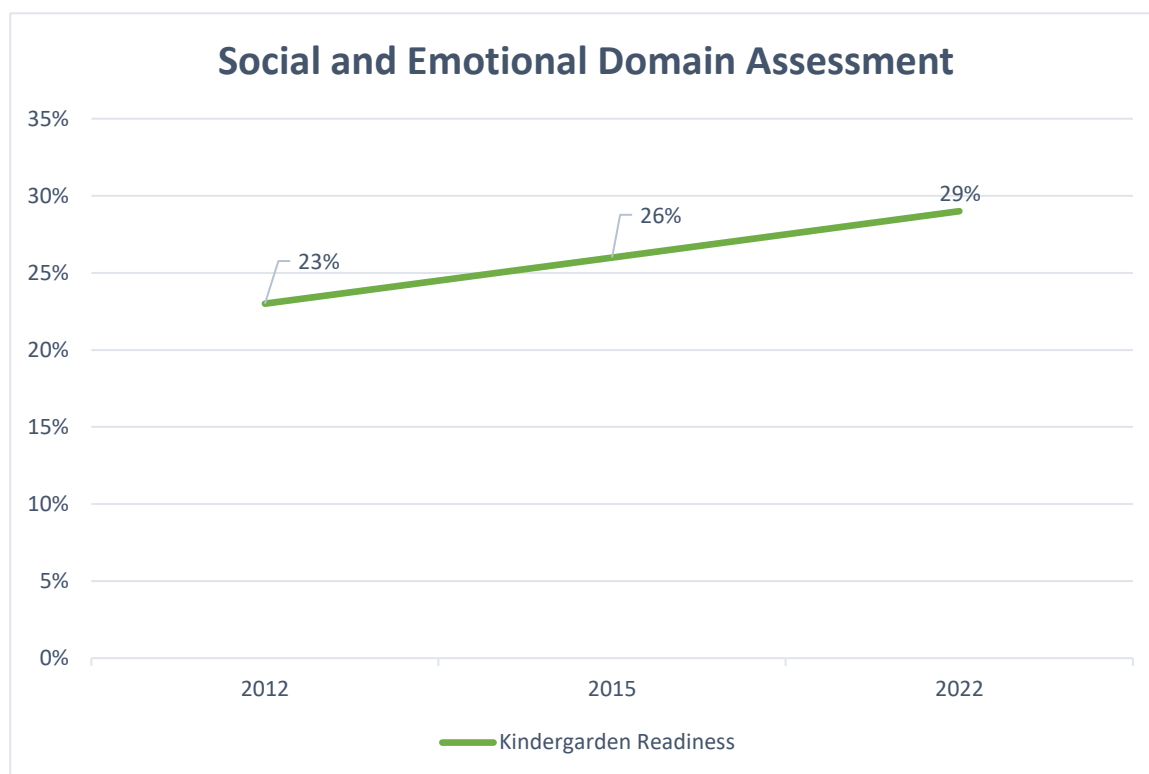
Kindergarten children in 2022 were more likely than children in 2012 and 2015 to meet the readiness threshold for the Social Emotional Domain. Please note that because the 2012 and 2015 data had to be re-scaled for comparison to the 2022 data, the percentages reported here from previous years may not be the same as previous reports.

In this report, kindergarten readiness is defined as the percentage of kindergarten children meeting or exceeding the readiness threshold in the Social and Emotional Development Domain of the DRDP-K (2015) Essential View¹, which replaces the DRDP-SR (2012)². The Social and Emotional Domain consists of four measures that teachers complete based on observations of children's relevant skills, knowledge, and behaviors demonstrated during children's authentic learning experiences; each item can be given a rating in one of six levels. "Readiness" was calculated using psychometrically valid multidimensional domain scaled scores³. Children with scores corresponding to the "integrating" or later levels of the DRDP-K Social Emotional Domain were categorized as meeting the "readiness" threshold.⁴

Why the Indicator is Important

Young children's social emotional skills lay the foundation for development in other domains, such as math and literacy. The social emotional readiness of kindergarten children is an indicator of community and service readiness to support the healthy development of babies, toddlers and preschool age children and the adults who care for them.

This indicator is the overarching indicator of success for the Bright Beginnings Early Childhood Development Initiative, yet must be interpreted in the context of the other community indicators in this report, such as access to early prenatal care and child care.



¹ <https://drdpk.org/>

² <https://www.drdpk.org/docs/DRDP-SR%207-2012v4.pdf>

³ Draney, K., Sussman, J., Gochyyev, P., Kriener-Althen, K., Newton, E., & Mangione, P. (2021). *DRDP technical report for early infancy through kindergarten: Structural validity and reliability information for the Desired Results Development Profile*. Berkeley Evaluation and Assessment Research Center

⁴ For more information on study method, including sample sizes, demographics of the samples please email Jennifer@first5monterey.org. A detailed technical report will be released in 2025.

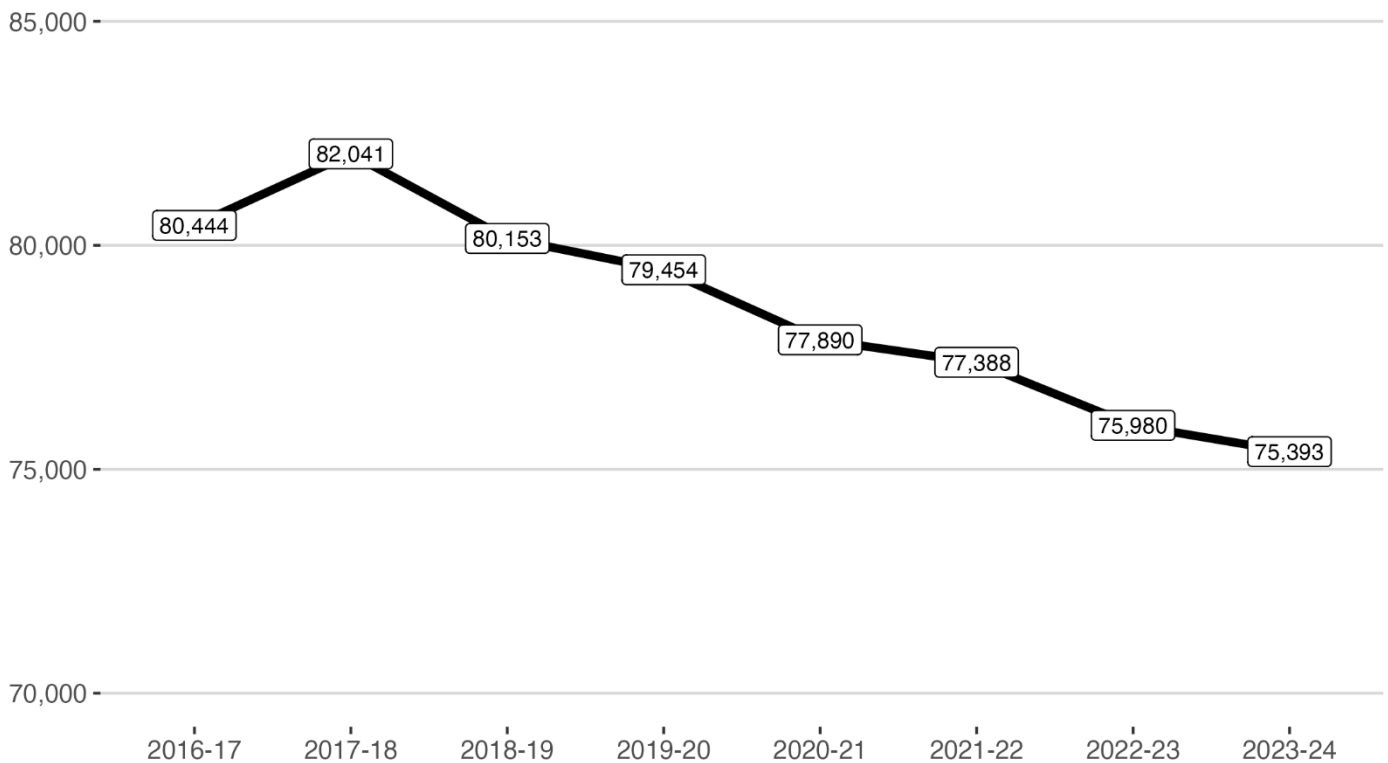
Definition of the Indicator

Enrollment is based upon the Cumulative Enrollment from the California Longitudinal Pupil Achievement Data System (CALPADS). This includes information about total enrollment, Free and Reduced Meal Program, Homeless, Els and others. Cumulative enrollment consists of the total number of unduplicated primary and short-term enrollments within the academic year (July 1 to June 30), regardless of whether the student is enrolled multiple times. If a student is enrolled in multiple schools within a district during the academic year, they are counted only once in the district's cumulative enrollment.

Why the Indicator is Important

Knowing the size of a population in question helps to determine the scale and scope of efforts to support the population.

Total Enrollment in Monterey County



Source: Cumulative Enrollment Data
<https://www.cde.ca.gov/ds/ad/filesenrcum.asp>

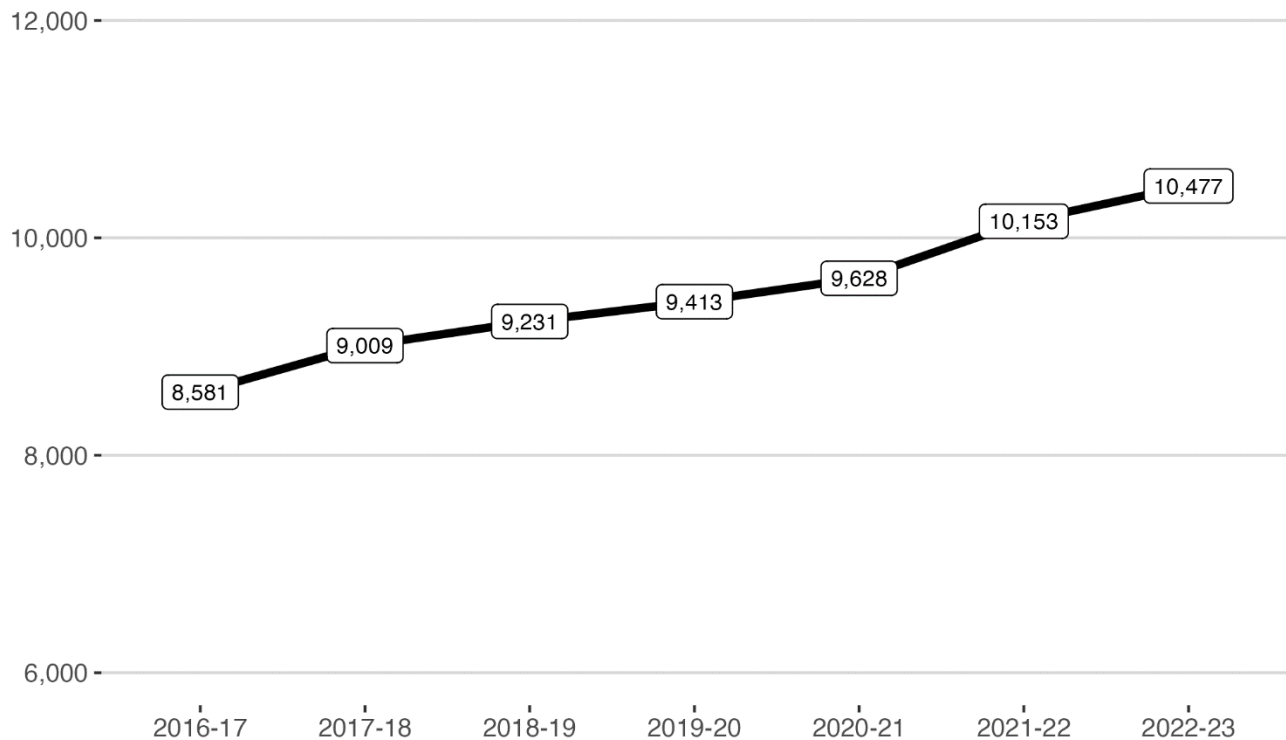
Definition of the Indicator

California provides specially designed instruction, at no cost to parents, to meet the unique needs of children with disabilities. This instruction is provided in a variety of settings that allow infants and their families, preschoolers, students, and young adults to be educated with their peers as much as possible; that is, in the least restrictive environment. Special education services are available in a variety of settings, including day-care settings, preschool, regular classrooms, classrooms that emphasize specially designed instruction, the community, and the work environment. The disability categories and enrollment breakdown in California for individuals who received special education services are as follows: autism, near-blindness, deafness, emotional disturbance, hard of hearing, intellectual disabilities, multiple disabilities, orthopedic impairment, other health impairment, specific learning disability, speech or language impairment, traumatic brain injury, and visual impairment.

Why the Indicator is Important

Special education enrollment is a key component in addressing the needs of all students and being able to deliver an enriched learning experience. Accurate student count affects the necessary funding to provide the necessary supports.

Students with Disabilities Enrollment in Monterey County



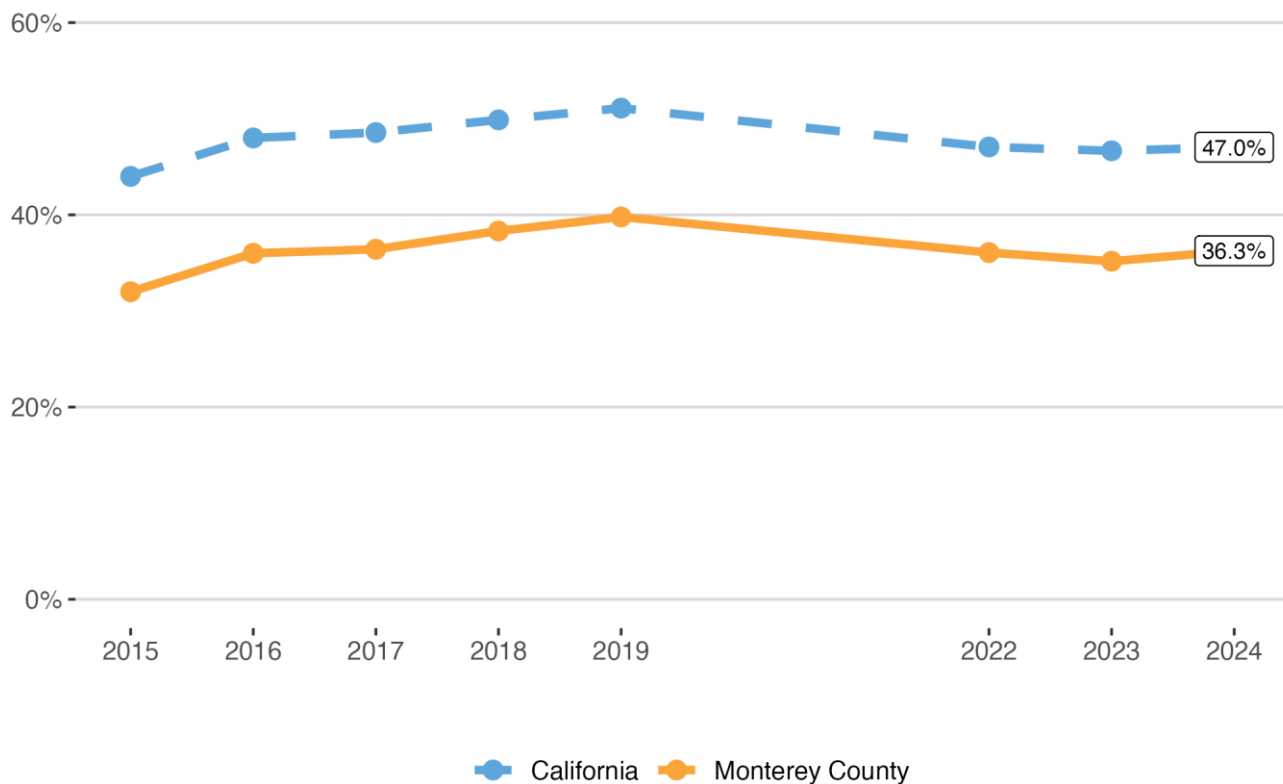
Source: Cumulative Enrollment Data
<https://www.cde.ca.gov/ds/ad/filesenrcum.asp>

Definition of the Indicator

California's academic standards – what we want students to know and be able to do – are designed so students graduate ready for college and/or career. One way student progress is measured is through computer-based assessments, for grades 3rd-8th and 11th. These assessments were created to gauge each student's performance in English Language Arts. Because the California Assessment of Student Performance and Progress (CAASPP) tests are given statewide, they provide an opportunity to measure the skills of all students against the same academic standards. The tests are computer-adaptive, allowing more precise measurement of individual skills. Parents receive a written report of their child's scores and can compare progress from one year to the next.

Why the Indicator is Important

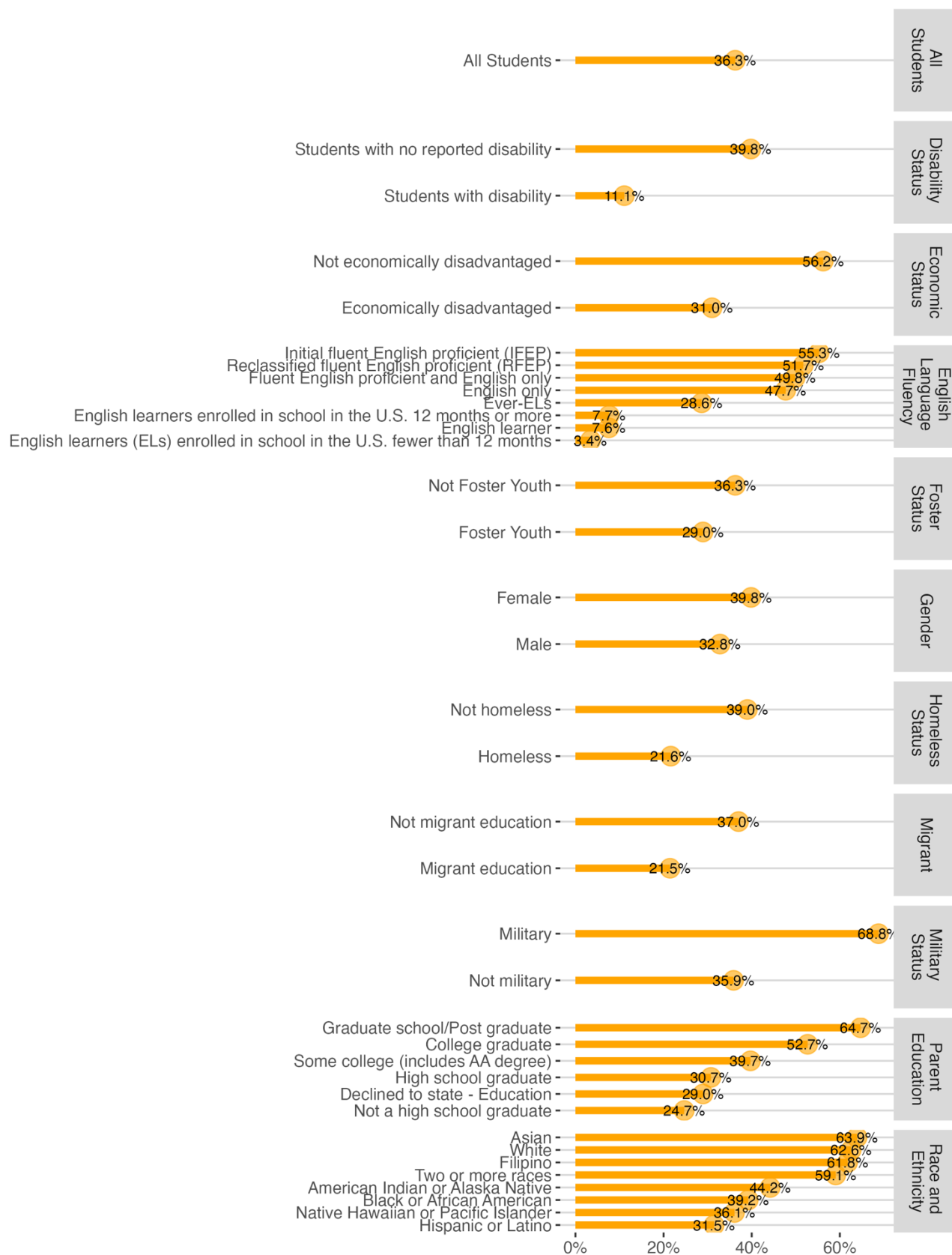
The purpose of the CAASPP system is to assist teachers, administrators, students, and parents to better understand academic performance in order to improve student achievement in California's Academic Content Standards.

ELA Percentage Meeting and Exceeding Rates Over Time

Source: CAASPP Research Files
<https://caaspp-elpac.cde.ca.gov/caaspp/ResearchFileList>

Note: In 2020 CAASPP testing was cancelled. In 2021, only about a tenth of eligible students took the CAASPP ELA and Math tests. Since, districts were able to determine the most viable assessment to implement. In Monterey County six districts elected to use the CAASPP ELA and Math tests. Because of the many unique circumstances in spring 2021, combined with the low numbers of students taking the state tests, it is not appropriate to analyze County level results and how they compare to other years.

2024 ELA Percentage Meeting and Exceeding Rates by Student Group



Source: CAASPP Research Files
<https://caaspp-elpac.cde.ca.gov/caaspp/ResearchFileList>

Definition of the Indicator

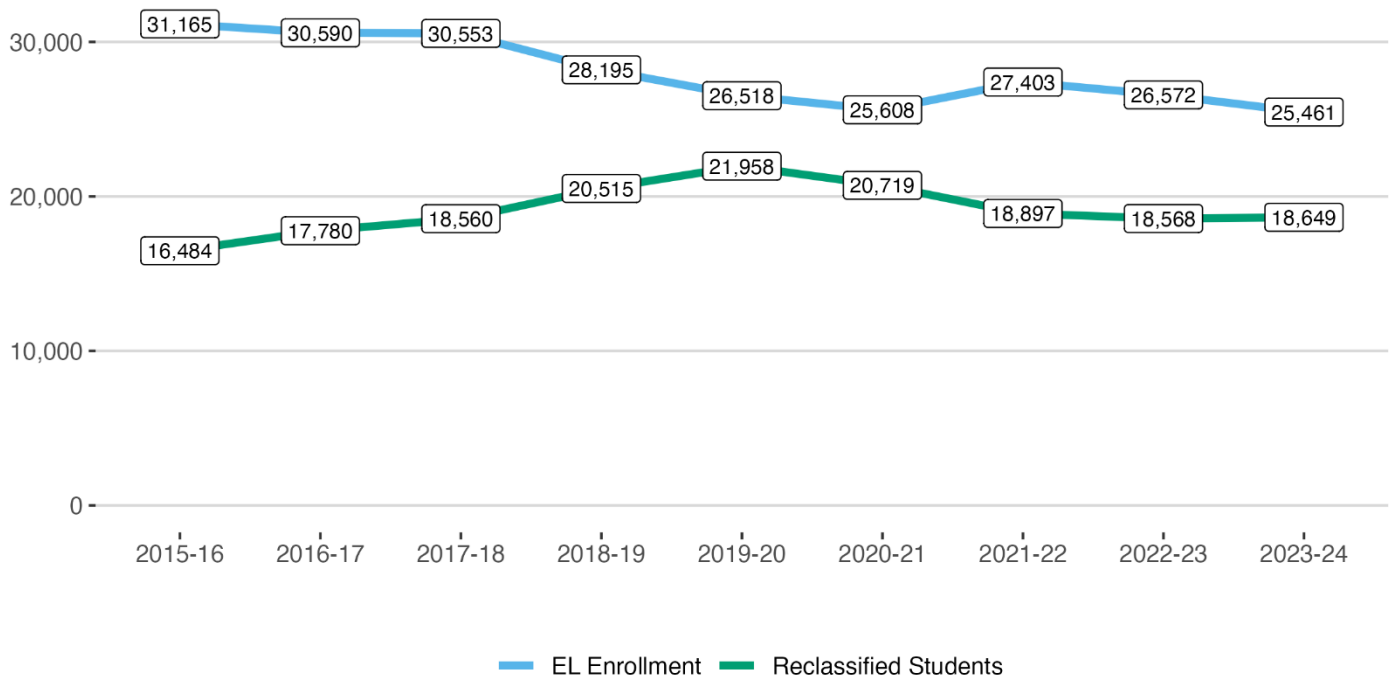
Enrollment is based on reclassification numbers identifying the entire English Learner (EL) population. English Learner students are those students for whom (1) parents report of a primary language other than English on the state-approved Home Language Survey **and** (2) who lack English-language skills based on the state approved assessment (Initial ELPAC) in listening comprehension, speaking, reading, and writing which are necessary to succeed in the school's regular instructional programs. EL students are reclassified according to the multiple criteria including assessment results (Summative ELPAC) and district-adopted standards that demonstrate that students have an English-language proficiency comparable to that of average native English speakers.

Why the Indicator is Important

Knowing the size of the population in question helps to determine the scale and scope of efforts needed to support the population. EL students may need additional English Language Development support to create equitable learning environments. This helps ensure that English learners acquire full proficiency in English as rapidly and effectively as possible and attain parity with native speakers of English.

The EL reclassification rate gauges the success of meeting the state goal to have students redesignated as English proficient. Becoming English proficient is a step towards growth by aiding EL students to succeed with peers whose primary language is English. Reclassification also allows students more opportunities to take additional elective courses.

English Learner and Reclassified Fluent Enrollment by Year



Source: Enrollment by ELAS
<https://www.cde.ca.gov/ds/ad/files/tel.asp>

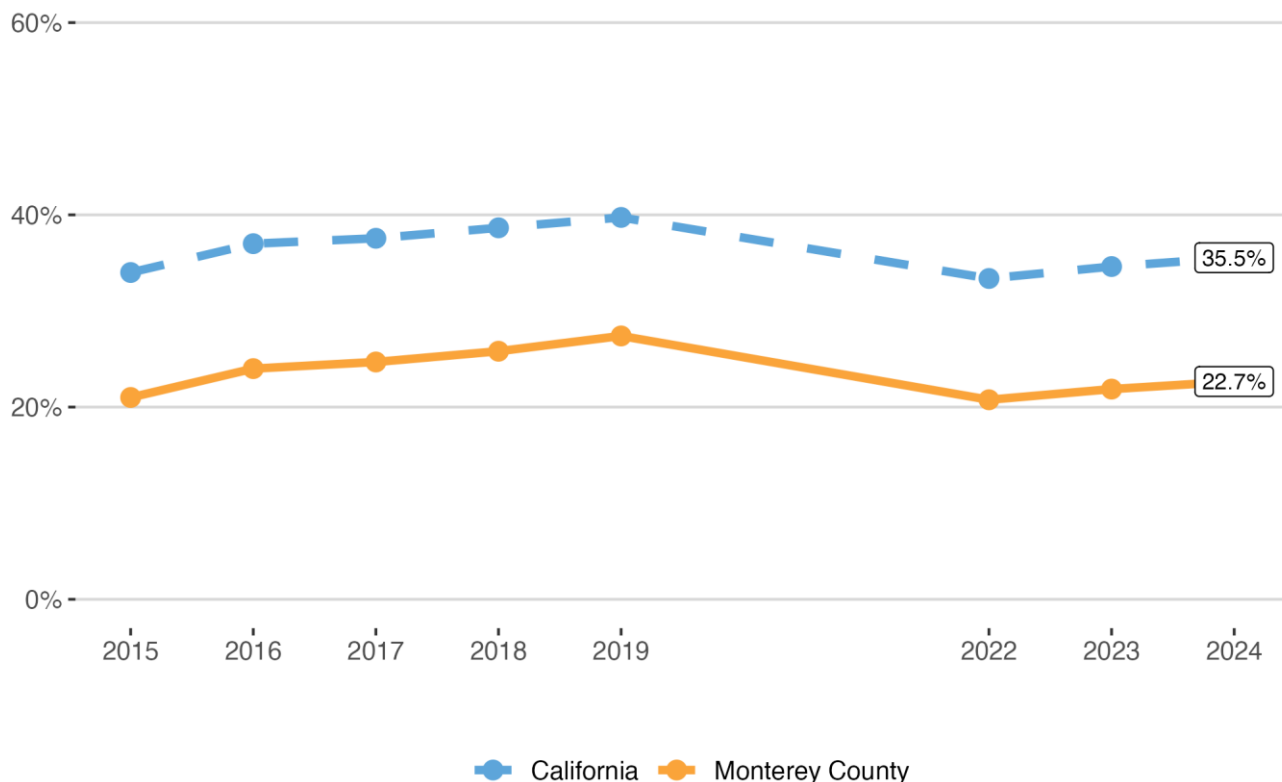
Definition of the Indicator

California's academic standards – what we want students to know and be able to do – are designed so students graduate ready for college and/or career. One way student progress is measured is through computer-based assessments, for grades 3rd – 8th and 11th. These assessments were created to gauge each student's performance in mathematics. Because CAASPP tests are given statewide, they provide an opportunity to measure the skills of all students against the same academic standards. The tests are computer-adaptive, allowing more precise measurement of individual skills. Parents receive a written report of their child's scores and can compare progress from one year to the next.

Why the Indicator is Important

The primary purpose of the CAASPP System is to assist teachers, administrators, students, and parents by promoting high-quality teaching and learning through the use of a variety of assessment approaches and item types. These assessments are a measure of student achievement in the grade level standards adopted by the California State Board of Education.

Math Percentage Meeting and Exceeding Rates Over Time



Source: CAASPP Research Files
<https://caaspp-elpac.cde.ca.gov/caaspp/ResearchFileList>

Note: In 2020 CAASPP testing was cancelled. In 2021, only about a tenth of eligible students took the CAASPP ELA and Math tests. As a reminder, districts were able to determine the most viable assessment to implement. In Monterey County six districts elected to use the CAASPP ELA and Math tests. Because of the many unique circumstances in spring 2021 combined with the low numbers of students taking the state tests, it is not appropriate to analyze county level results and how they compare to other years.

2024 Math Percentage Meeting and Exceeding Rates by Student Group



Source: CAASPP Research Files
<https://caaspp-elpac.cde.ca.gov/caaspp/ResearchFileList>

Definition of the Indicator

The Four-Year Adjusted Cohort Graduation Rate (ACGR) is the number of students who graduate from high school in four years with a regular high school diploma, divided by the number of students who form the adjusted cohort for the graduating class. The four-year cohort is based on the number of students who enter grade 9 for the first time adjusted by adding into the cohort any student who transfers in later during grade 9 or during the next three years and subtracting any student from the cohort who transfers out, emigrates to another country, transfers to a prison or juvenile facility, or dies during that same period. Graduation data, including DASS graduation data, are reported in the CALPADS by LEAs and extracted via the CALPADS ODS.

For the ACGR, a “regular high school diploma” is the standard high school diploma awarded to the preponderance of students in a state that is fully aligned with the state’s standards and does not include a general equivalency diploma (GED), certificate of completion, certificate of attendance, or any other similar or lesser credential, such as a diploma based on meeting Individualized Education Program (IEP) goals.

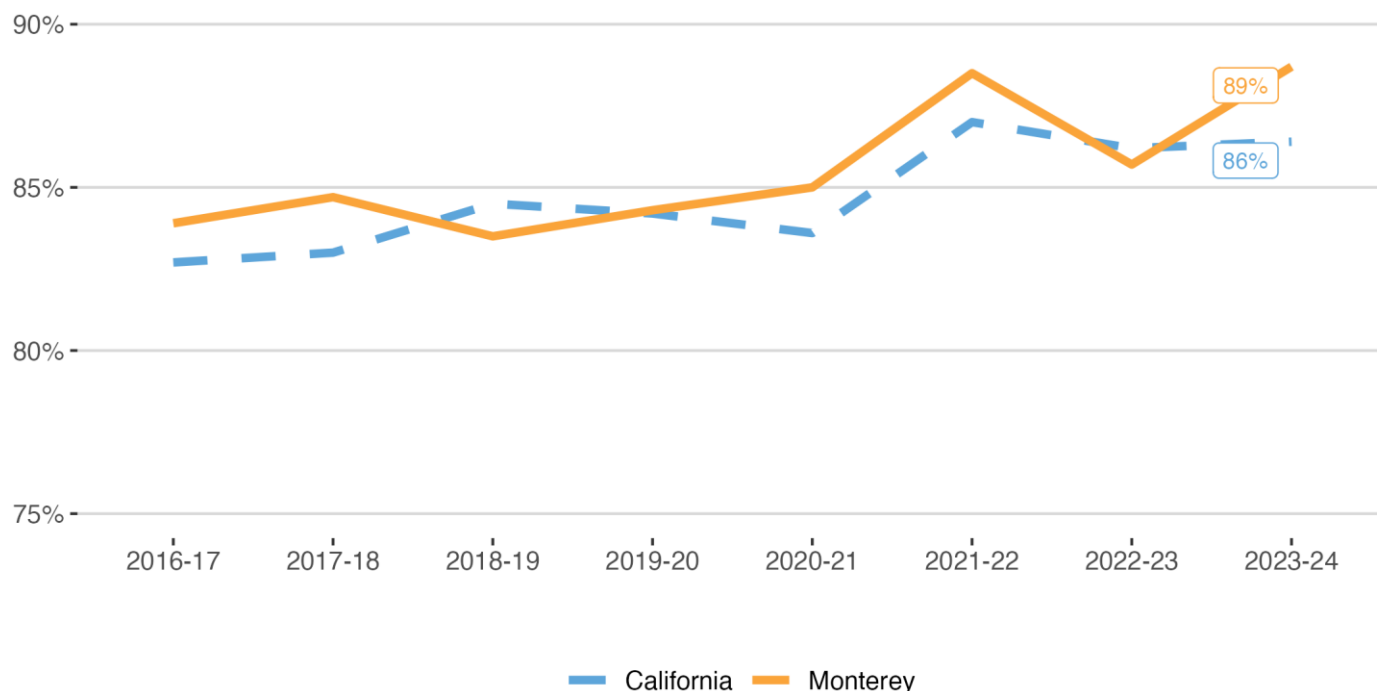
The figures reported here include all charter schools and DASS schools.

Why the Indicator is Important

Education provides the foundation for young people to realize their fullest potential as productive, successful members of society. The graduation rate is a standard measure of basic academic competence. It is generally considered a minimum requirement for entry into the professional workforce and is an essential prerequisite for additional education and training.

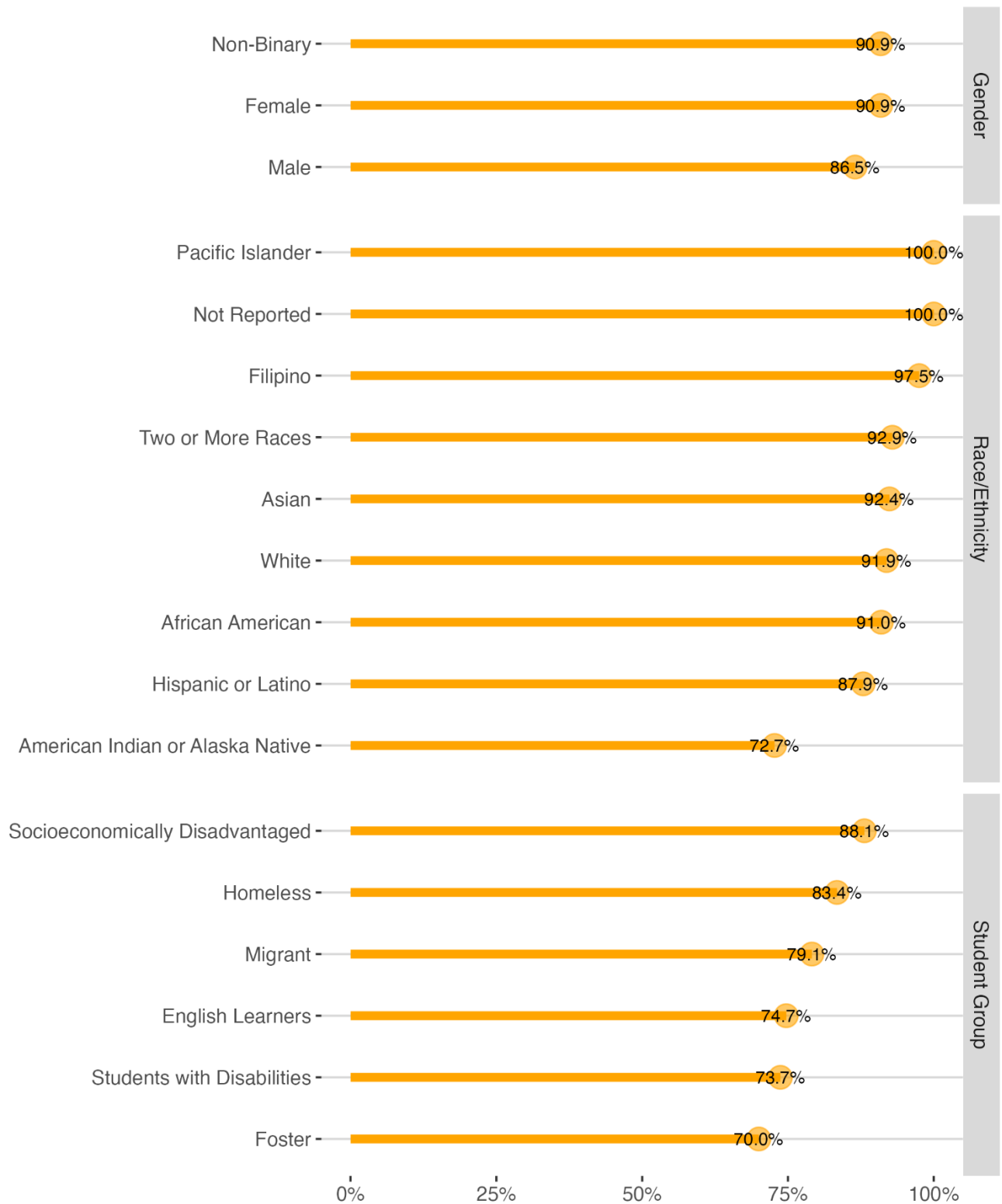
Greater economic earnings, health and social well-being correlate strongly with educational level.

Graduation Rates Over Time



Source: Adjusted 4 Year Cohort Outcome Data
<https://www.cde.ca.gov/ds/sd/sd/filesacgr.asp>

2024 Graduation Rates by Student Group



Source: Adjusted Cohort Outcome Data
<https://www.cde.ca.gov/ds/sd/sd/filesacgr.asp>

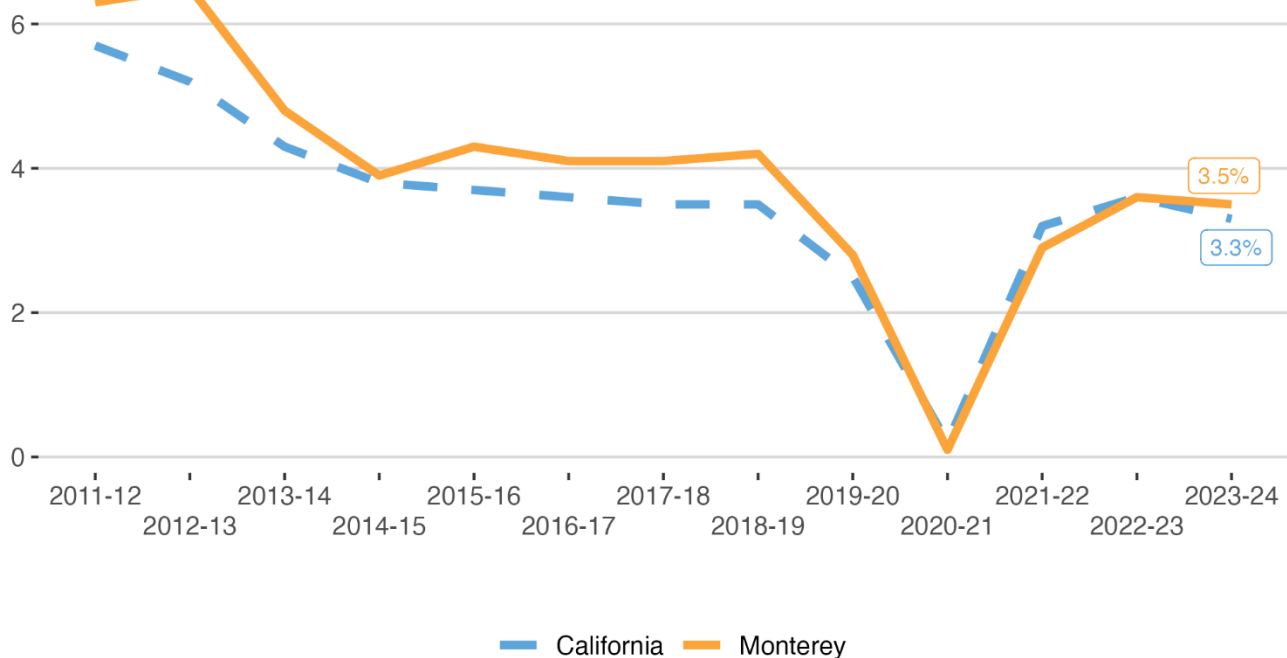
Definition of the Indicator

The Suspension Rate indicator is based on the number of students who were suspended at least once in the current school year. Note: If a student was suspended more than once in the school year, they are counted only once. The Suspension Rate is calculated by dividing the number of students suspended for an aggregate total of one full day in the current year by the cumulative enrollment. For this measure the desired outcome is a low suspension rate.

Why the Indicator is Important

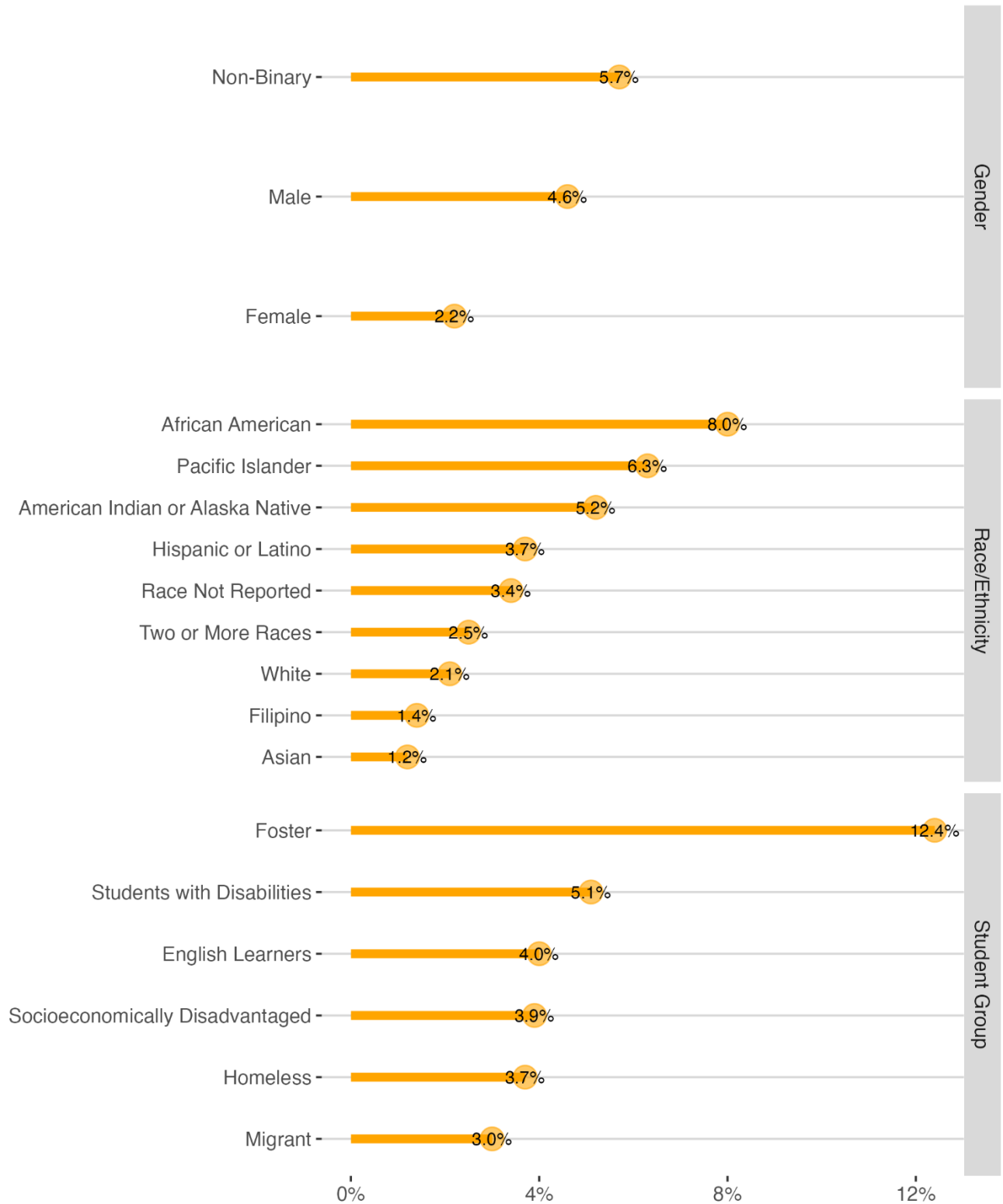
Effectively improving the school climate and creating an inclusive and equitable learning environment begins with keeping kids in the classroom. Exploring suspension rates can identify challenges of school culture and climate and identify students most affected.

K-12 Suspension Rates Over Time



Source: Suspension Data Files
<https://www.cde.ca.gov/ds/sd/sd/filesd.asp>

2024 K-12 Suspension Rates By Subgroup



Source: Suspension Data Files
<https://www.cde.ca.gov/ds/sd/sd/filesd.asp>

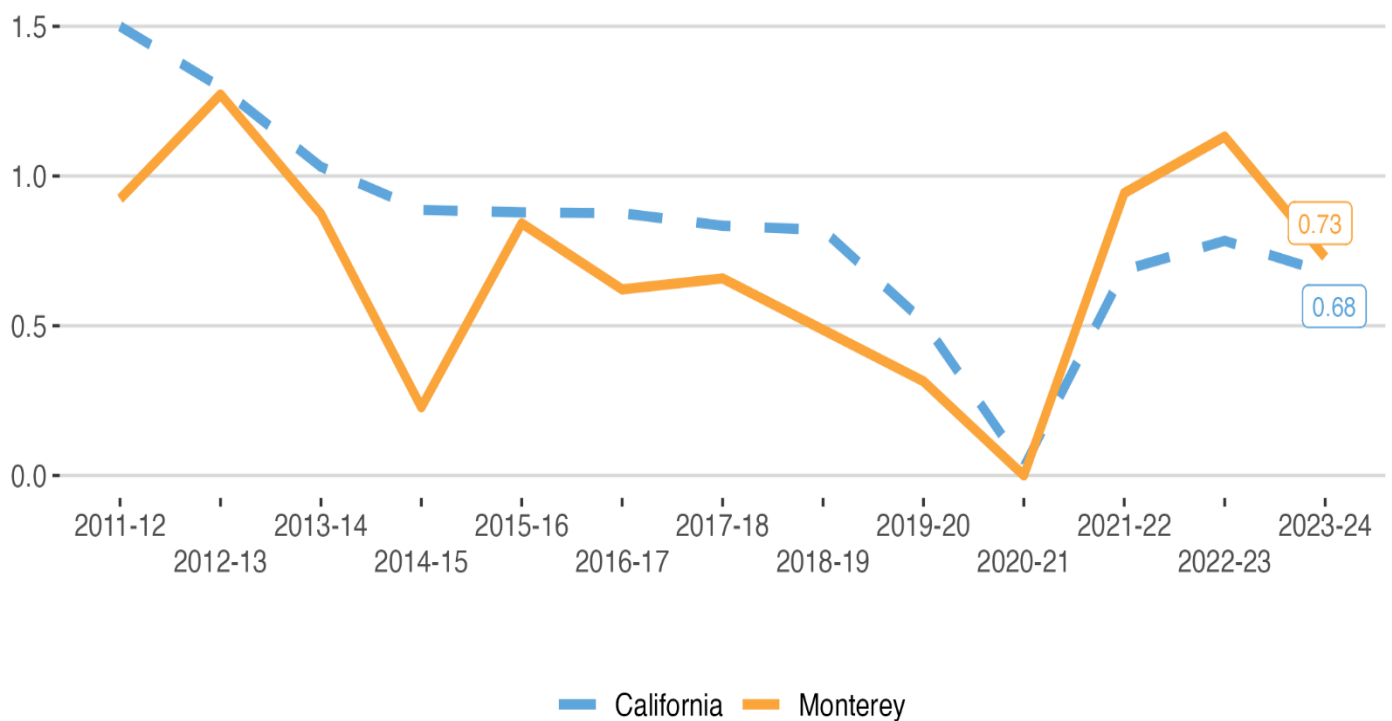
Definition of the Indicator

Discipline data are submitted by local educational agencies (LEAs) and charter schools to the California Department of Education (CDE) as part of the annual End of Year 3 (EOY 3) data submission in the California Longitudinal Pupil Achievement Data System (CALPADS). Offenses that students may be expelled for include violent incidents, weapons possessions, controlled substances incidents, and defiance.

Why the Indicator is Important

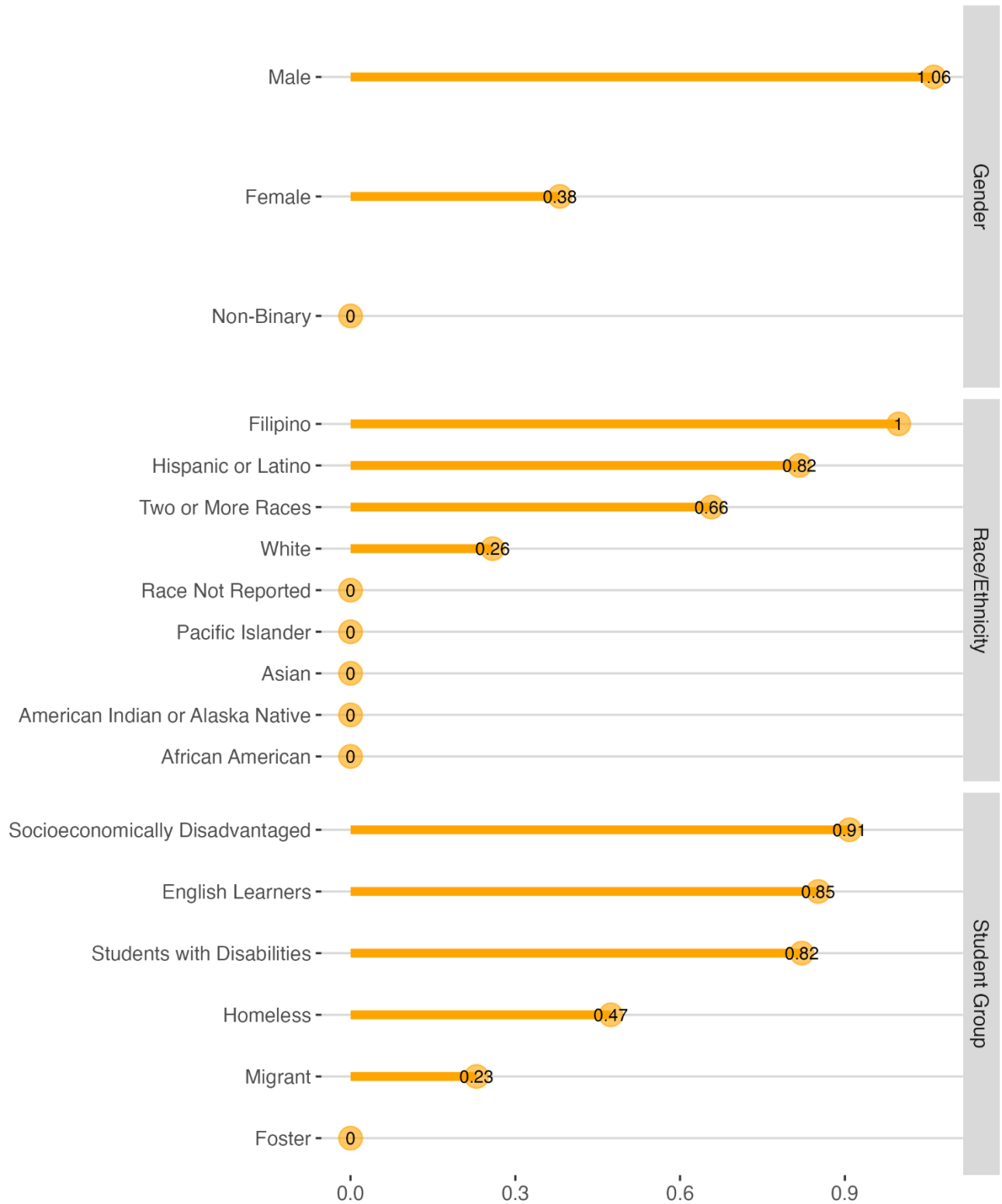
Expulsions indicate students for whom their educational and social system has not been successful. There were no expulsions in Monterey County in 2020-21 due to school closures during the pandemic. County and school district superintendents develop plans that outline individualized educational alternatives for expelled students that identify gaps in educational services to them and develop strategies for filling those service gaps. The goals of the plan are to ensure that expelled students have appropriate options; decrease the dropout rate; and increase the graduation rate.

K-12 Expulsion Rates per 1,000 Over Time



Source: Expulsion Data Files
<https://www.cde.ca.gov/ds/sd/sd/filesed.asp>

2024 K-12 Expulsion Rates per 1,000 By Subgroup



Source: Expulsion Data Files
<https://www.cde.ca.gov/ds/sd/sd/filesed.asp>

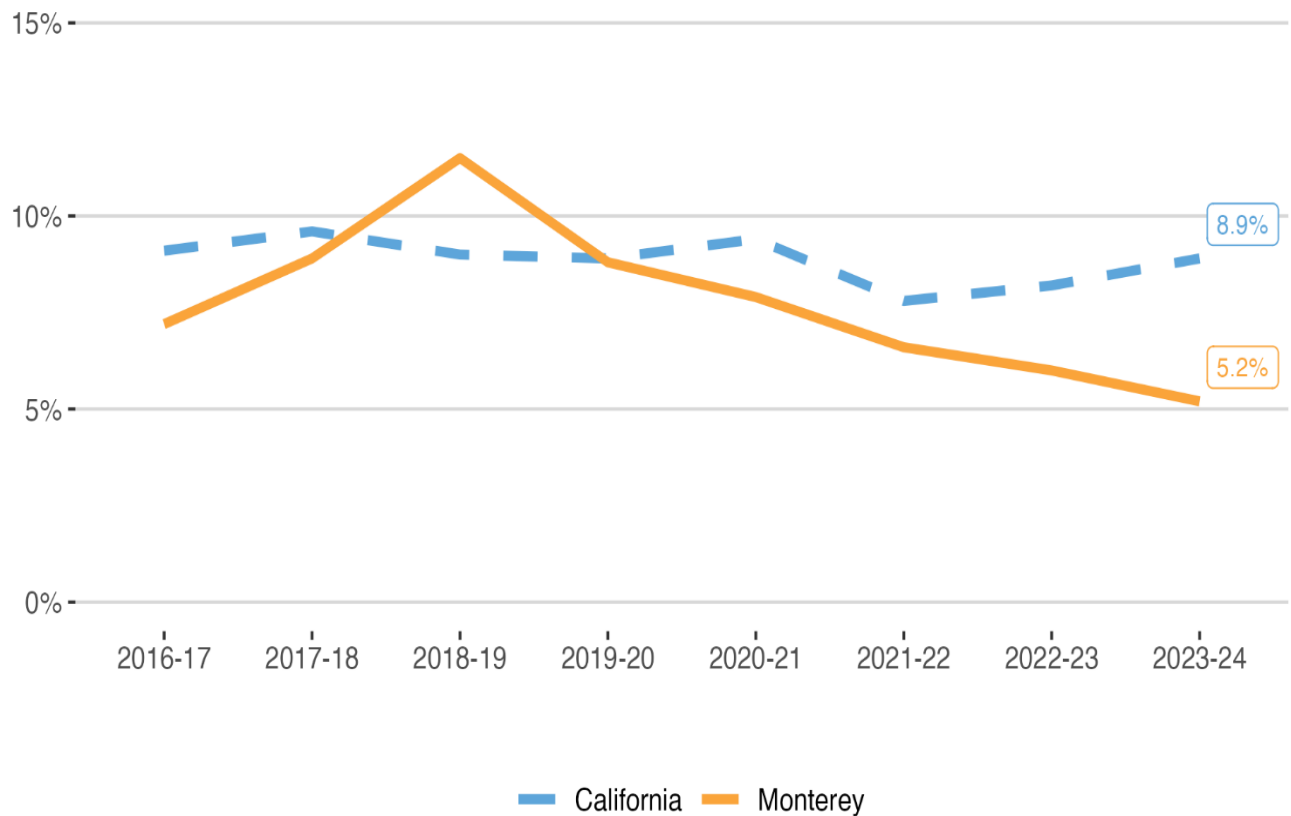
Definition of the Indicator

The number of students who dropped out from the cohort. The four-year cohort is based on the number of students who enter grade 9 for the first time adjusted by adding into the cohort any student who transfers in later during grade 9 or during the next three years and subtracting any student from the cohort who transfers out, emigrates to another country, transfers to a prison or juvenile facility, or dies during that same period.

Why the Indicator is Important

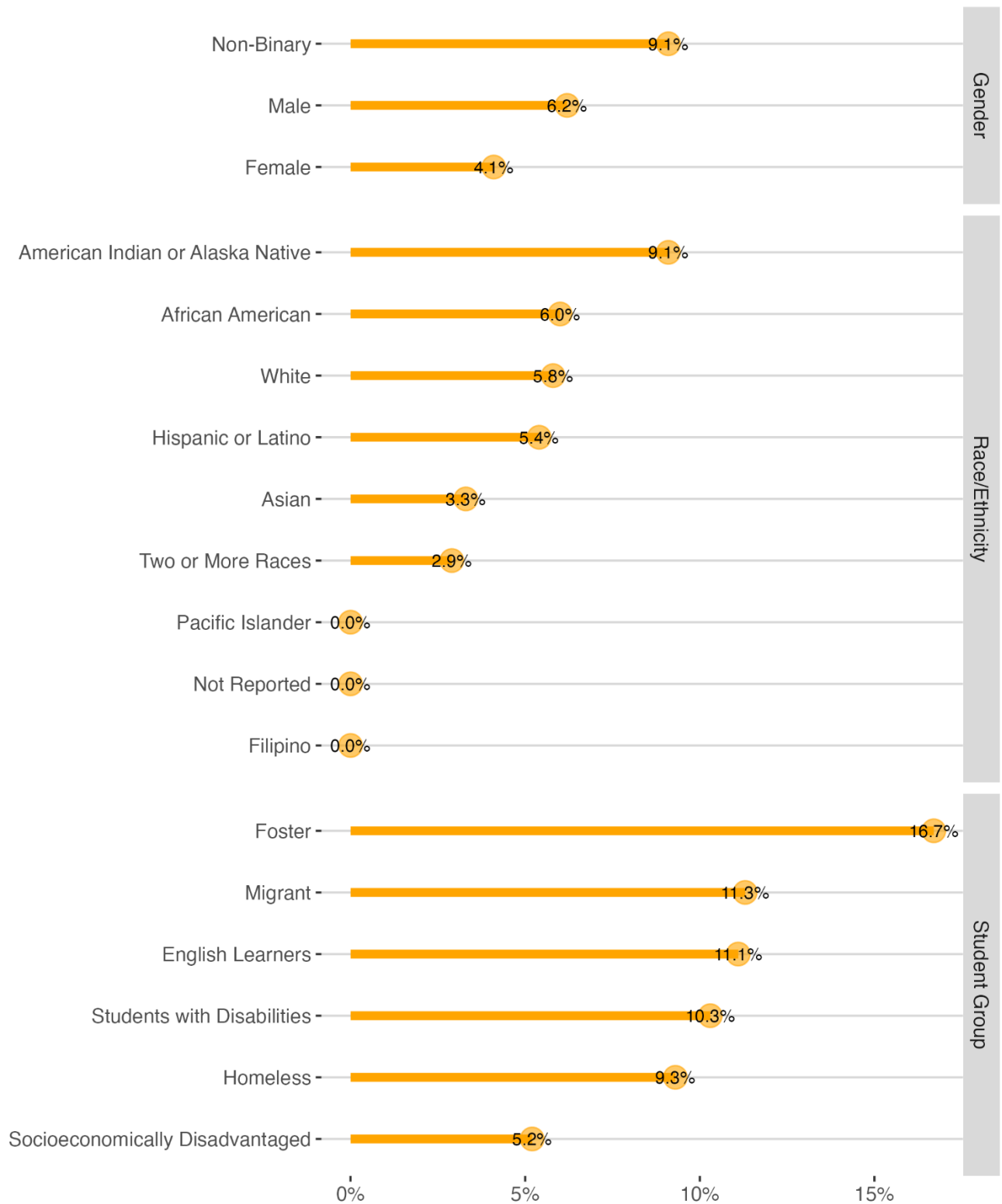
Students who fail to complete high school are less likely to find and keep a good job. It is generally considered a minimum requirement for entry into the professional workforce and is an essential prerequisite for additional education and training, greater economic earnings, health and social well-being correlate strongly with educational level.

Dropout Rates Over Time



Source: Adjusted Cohort Outcome Data
<https://www.cde.ca.gov/ds/sd/sd/filesacgr.asp>

2024 Dropout Rates by Student Group



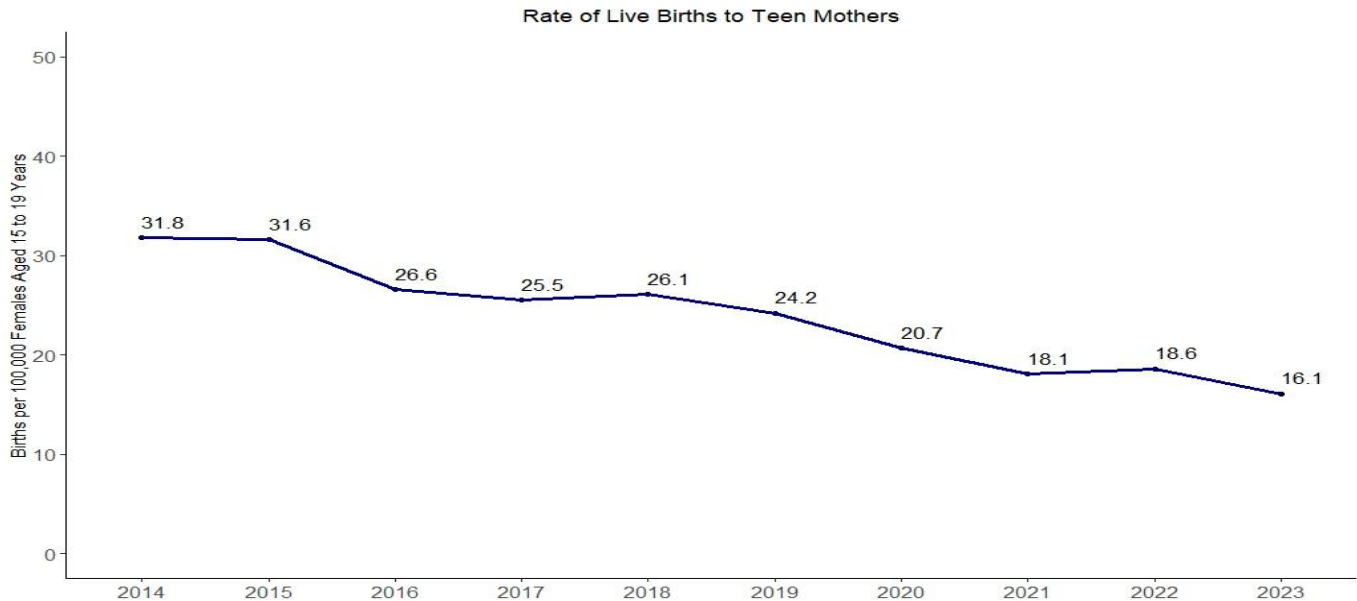
Source: Adjusted Cohort Outcome Data
<https://www.cde.ca.gov/ds/sd/sd/filesacgr.asp>

Definition of Indicator

The rate of live births to teen mothers 15 to 19 years of age per 1,000 births to the same age group during a specific year.

Why the Indicator is Important

The impact of giving birth as a teen can have negative consequences for both the mother and the child. Teen mothers are less likely to complete high school or college and are more likely to require public assistance and live in poverty than their peers who are not mothers. Research demonstrates that birth to teen mothers is highly correlated to economically disadvantaged communities or families, poor educational achievement, low self-esteem, substance abuse or behavioral problems, and in turn being the child of a teen mother.



Source: Birth Information: State of California, California Department of Public Health, VRBIS, California Comprehensive Birth File. Population Data: State of California, Department of Finance, Population Estimates. Analysis by County of Monterey Health Department, Epidemiology and Surveillance Unit. Data updated 9/09/2024.

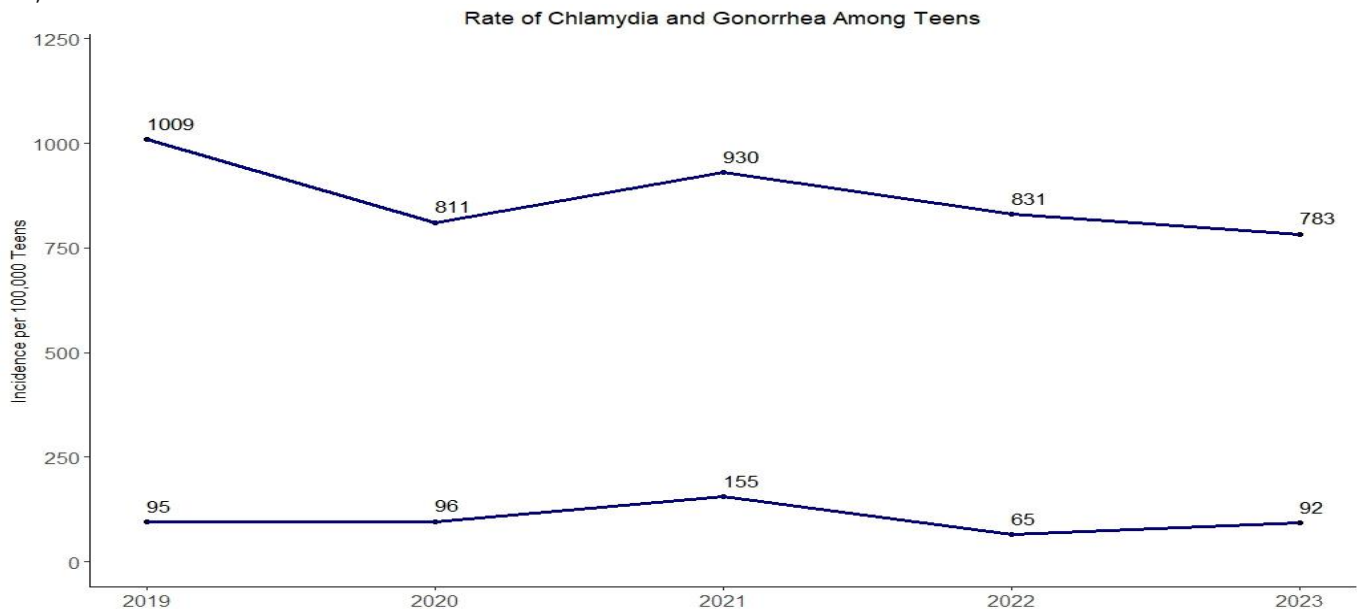
Sexually Transmitted Infection Cases

Definition of Indicator

Number of reported chlamydia and gonorrhea cases among youth ages 13-19.

Why the Indicator is Important

While chlamydia and gonorrhea are treatable, left untreated, they may cause long-term harm, including reproductive health issues, fetal and premature problems, and increased sexual transmissions.



Source: Communicable Disease Data: County of Monterey Health Department, Communicable Disease Unit. Population Data: State of California, Department of Finance, Population Estimates. Analysis by County of Monterey Health Department, Epidemiology and Surveillance Unit. Data updated 12/12/2024.

Definition of Indicator

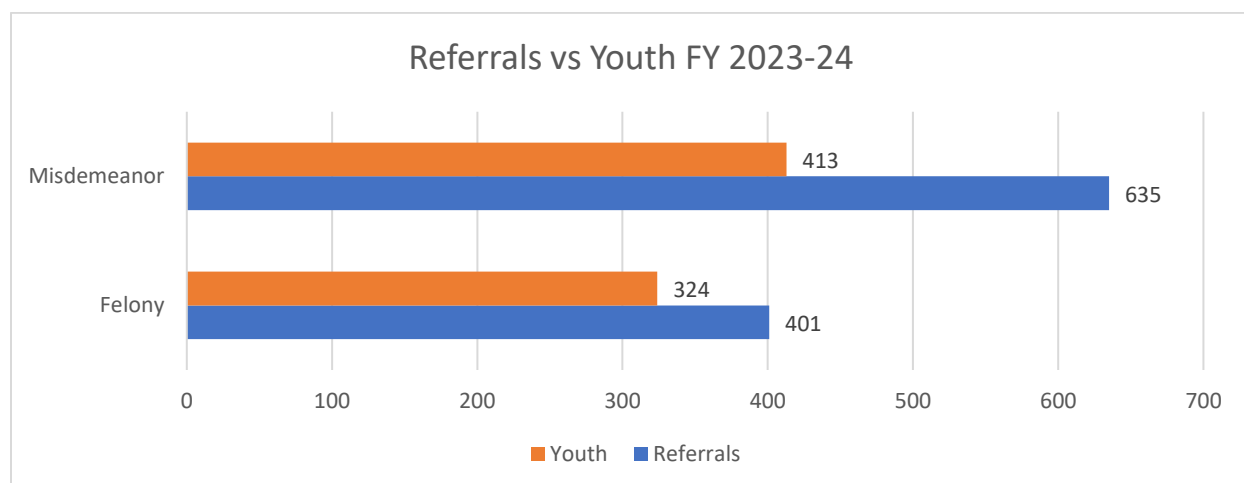
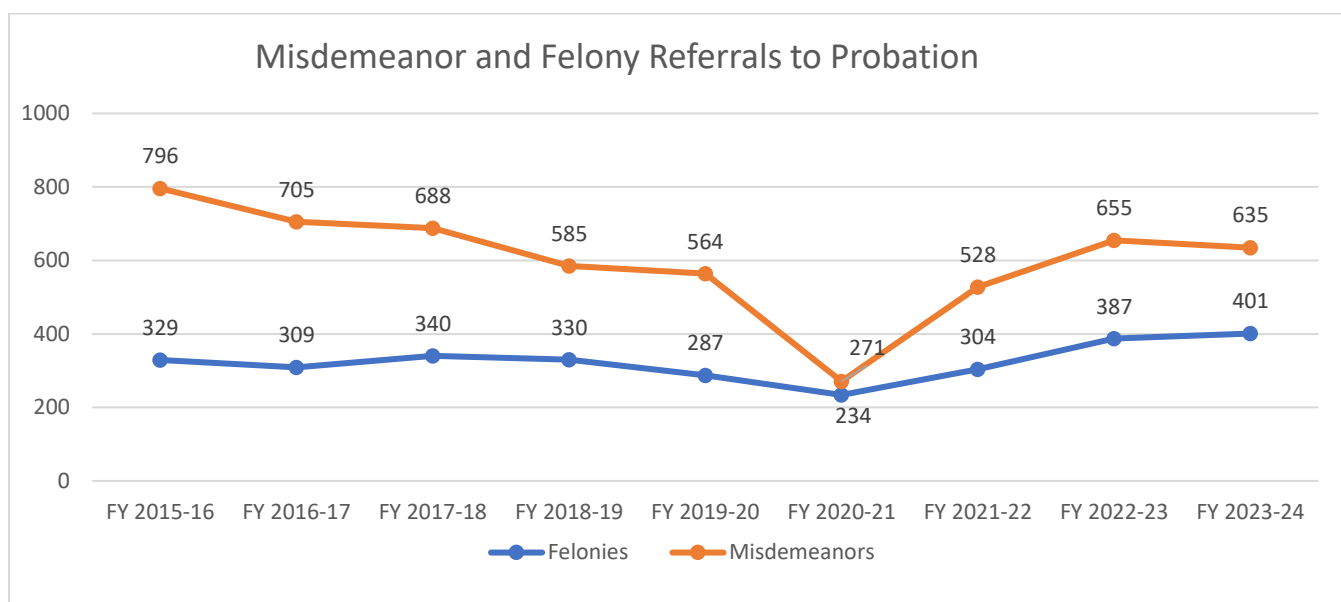
Rates of arrest are perhaps the most widely quoted indicator of crime. It is important to make the distinction between lesser crimes, misdemeanors, and more severe crimes, felonies, which may result in a more stringent sentence. Misdemeanor arrests refer to the number of arrests of youth ages 12 to 17 for less serious or less violent offenses, such as petty theft, vandalism, or trespassing. Felony arrests indicate the number of arrests of youth ages 12 to 17 for more serious or more violent offenses, such as homicide, forcible rape, robbery, assault, and kidnapping.

It is also important to note that the number of arrests and the number of individual offenders are different measurements, and that an arrest will not necessarily become an adjudication. A single youth may be arrested several times over the course of a year, so total arrests will almost certainly not match the actual number of juvenile offenders.

Why the Indicator is Important

Youth crime is an important factor in community safety. Additionally, youth who engage in criminal activities are exhibiting self-destructive behavior. As a risk factor, early offenders recidivate at high rates, often well into adulthood. Furthermore, adults who are arrested for the most serious and violent crimes are more likely to have been youthful offenders than are adults who commit lesser crimes.

Arrests for violent crimes are an indicator of more severe risk factors than any other type of arrest. A low level of youth violence in society may be viewed as an indicator of young people's ability to control their behavior, as well as the adequacy of pro-social agents such as families, peers, schools, and other institutions to guide youth behavior to acceptable norms. Violence affects the quality of life of young people who experience, witness, or feel threatened by it. In addition to the direct physical harm suffered by young victims of serious violence, such violence can adversely affect the victims' mental health and development and increase the likelihood that they themselves will commit acts of serious violence.



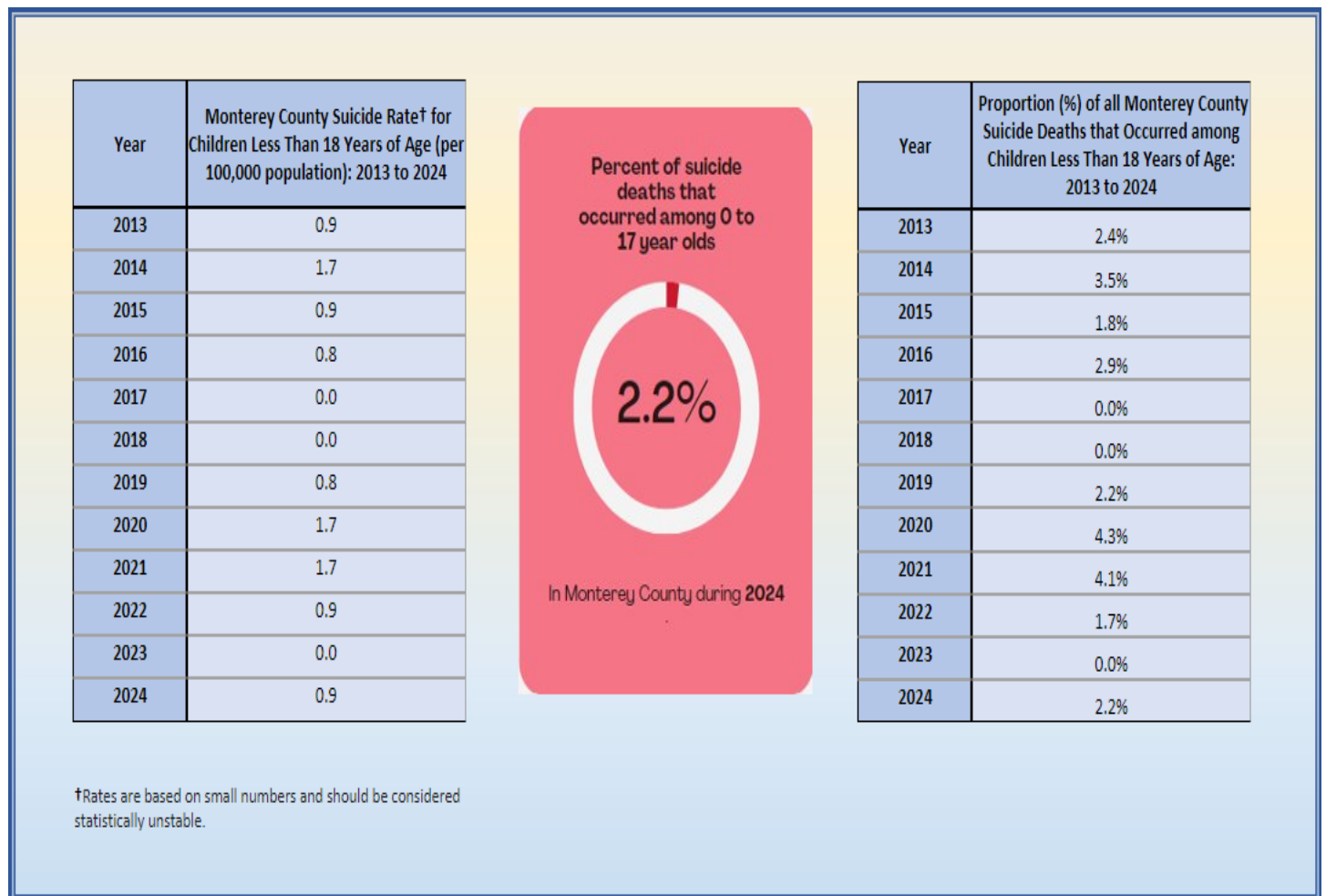
Source: Monterey County Probation Department, IT Case Management system, Smart Probation 2025.

Definition of the Indicator

The death by suicide rate of children under age 18 is reported as both a rate and as a percentage. However, when the number of suicide deaths is less than 10 among children less than 18 years of age, the exact figures are suppressed. An updated analysis of the Coroner's data for the last 10 years indicates that on an average, 1.9% of suicide deaths were among children less than 18 years of age in the County of Monterey. In the year of 2022 and 2023, this percentage was 1.7% and 0% respectively. It is important to note that suicide ideation and attempts data are widely under-reported. Since 2013, data on suicide attempts among children has been incomplete due to ICD code changes. Data on suicidal ideation comes from the California Department of Health Care Access and Information (HCAI), formerly the Office of Statewide Health Planning and Development (OSHPD) and is based on hospital visits for **primary diagnosis** by use of ICD codes specific to suicidal ideation.

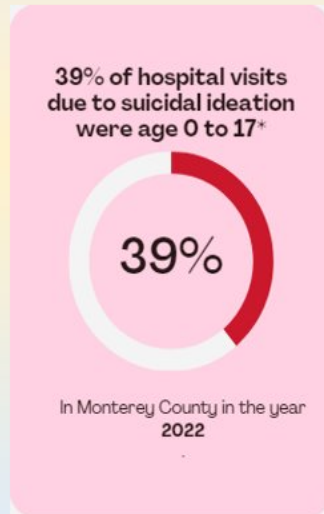
Why the Indicator is Important

The death of a child is tragic. Suicide is a serious public health problem in the US and has lasting effects on individuals, families, and communities. The COVID-19 pandemic has exacerbated the overall mental health challenges for children and youth as a result of isolation, fear, stress, and uncertainty. Research indicates that mental health concerns, trauma (including suspected or confirmed abuse, neglect, and domestic violence), family-related problems (including divorce, custody disputes, parental substance use, family history of suicide or mental health concerns), or school problems (including expulsion, changing schools, suspension, bullying) were contributing factors for children who died by suicide. Further, research suggests young children who attempt suicide are six times more likely than their peers to attempt suicide again once they enter adolescence. To prevent subsequent child and youth suicide attempts and prevent child death it is important to address risk factors at the individual, family, and community level. Key prevention strategies include: building individual and family resilience (promoting connectedness, develop support networks, increased coping skills and parenting skills), building protective environments, strengthening economic supports for families, increasing awareness of mental health and suicide risk factors, and increasing access and delivery of mental health care.



Data Source: Monterey County Coroner's office. Population Data: State of California, Department of Finance, Population Estimates.

Suicide attempts in Monterey County by year*†		
Year	No. of children < 18yr old	% children < 18yr old
2016	<10	50%
2017	<10	11%
2018	<10	13%
2019	<10	25%
2020	<10	30%
2021	<10	33%
2022	<10	23%



Suicide Ideation In Monterey County by Year*			
Year	No. of children < 18yr old	% children < 18yr old	Overall SI No. Monterey county (all ages)
2012	118	30%	392
2013	133	36%	372
2014	74	31%	237
2015	48	24%	197
2016	157	29%	545
2017	79	28%	283
2018	75	30%	247
2019	174	40%	430
2020	134	37%	361
2021	173	39%	439
2022	171	39%	438

*Latest Data on Suicide Attempts & Hospital Visits for Suicidal Ideation for 2024 by year - children < 18 years old Monterey County

*Data Source: HCAI Hospitalization data

†Rates are based on small numbers and should be considered statistically unstable.

Sources: CDC Suicide Prevention <https://www.cdc.gov/suicide/index.html>

Ruch, D. A., Heck, K. M., Sheftall, A. H., Fontanella, C. A., Stevens, J., Zhu, M., Horowitz, L. M., Campo, J. V., & Bridge, J. A. (2021). Characteristics and precipitating circumstances of suicide among children aged 5 to 11 years in the United States, 2013-2017. *JAMA network open*, 4(7), e2115683-e2115683.

Yard E, Radhakrishnan L, Ballesteros MF, et al. Emergency Department Visits for Suspected Suicide Attempts Among Persons Aged 12–25 Years Before and During the COVID-19 Pandemic — United States, January 2019–May 2021. *MMWR Morb Mortal Wkly Rep* 2021;70:888–894.

Substance Abuse and Non-Fatal Overdoses in Youth

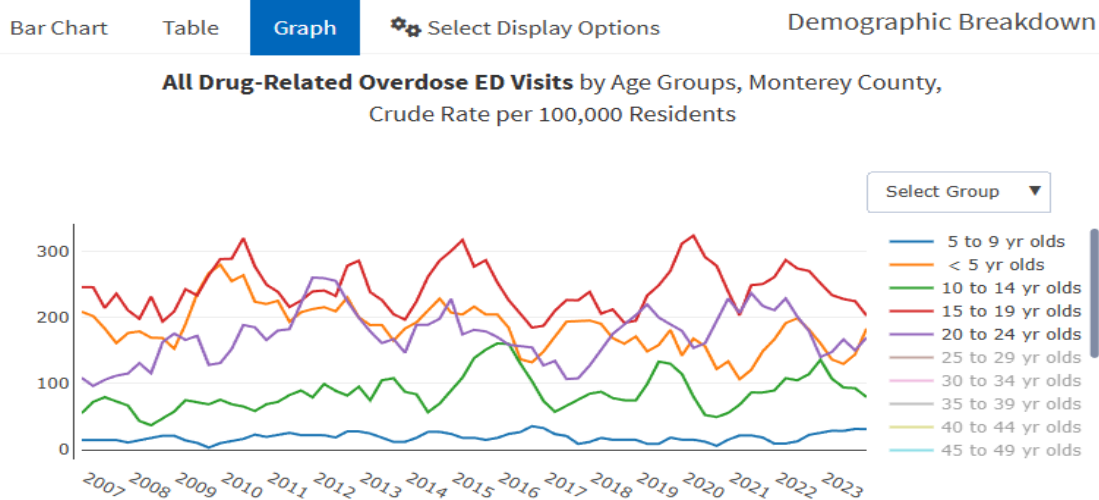
6-18

Definition of Indicator:

Crude Rate per 100,000 residents for all drug-related overdose Emergency Department visits in Monterey County by year by age groups for those up to 24 years of age.

Why the Indicator is Important

This indicator shows the trends of Emergency Department visits for overdose in the Monterey County youth over this time period. All drug overdose emergency department visits caused by non-fatal acute poisonings due to the effects of drugs, regardless of intent (e.g., suicide, unintentional, or undetermined). Emergency department visits related to late effects, adverse effects, and chronic poisonings due to the effects of drugs (e.g., damage to organs from long-term drug use), are excluded from this indicator.



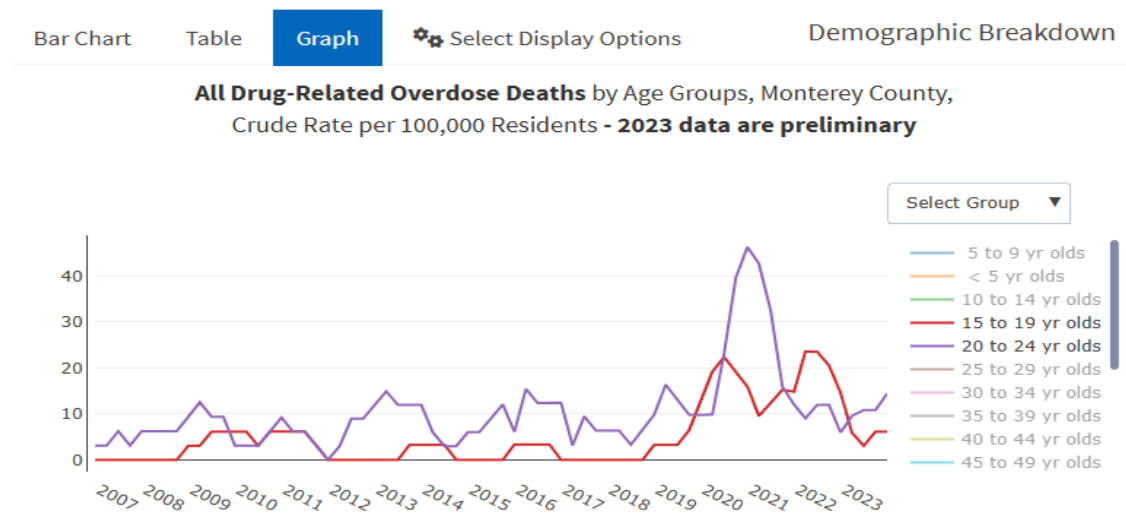
Source: <https://www.cdph.ca.gov/> CDPH California Overdose Surveillance Dashboard and Monterey County Prescribe Safe

Definition of Indicator:

Crude Rate per 100,000 residents for drug related overdose deaths by year for the age groups of 15-24 years of age.

Why the Indicator is Important

This indicator is reflective of the lives lost to drug overdose in teens and young adults.



Source: <https://www.cdph.ca.gov/> CDPH California Overdose Surveillance Dashboard and Monterey County Prescribe Safe

Initiatives and Areas of Focus

Current: Bright Beginnings Early Childhood Development Initiative

The Bright Beginnings Early Childhood Development Initiative was launched by the Monterey County Children's Council in 2012, to bring greater attention, resources and innovation to the system that serves the holistic development of all young children and their families. Its goal is to increase the percent of children who, when entering Kindergarten, reach the level of "readiness" in social and emotional skill building - moving up from 25% of children, and especially narrowing the equity gap.

Organized around the collective impact model, the Bright Beginnings backbone team supports the partners of the Initiative as stewards of the common vision, facilitator of mutually reinforcing actions, and providers of continuous communications and accountability. The Early Childhood Development Advisory Group provides insights and advice on direction and priorities of the Initiative. Bright Beginnings is funded by diverse streams including the County of Monterey Health Department, fiscally sponsored by First 5 Monterey County, and overseen by the Children's Council. It also became the steward of the early childhood-related goals within the Bright Futures Education Partnership, a cradle to career initiative established in 2015 out of California State University - Monterey Bay.

In 2018, the Initiative rolled out a strategic framework. The diverse partners of the Bright Beginnings Initiative are guided by a deep commitment to their common vision, and to collaboration, equity, interconnectedness, co-creation, and impact in order to unite and heal, as we strive to support the wellbeing of *all* children and their families.

In 2022-2034, we cultivated our strong relationships and networks; more deeply committed ourselves to strategically aligned solutions that shift power dynamics from institutionalized injustice to an empowered community; and monitoring our benchmarks and successes; and made the case for increased investments, shifting the way we think about and value early childhood.

A detailed annual report of the Bright Beginnings Initiative is found in the Appendix. For more information, visit www.BrightBeginningsMC.org or on social media: Facebook @BrightBeginningsMC and Instagram @brightbeginmc.

2011: All Kids, Our Kids, Be There for Them Every Day

In 2011, Children's Council launched All Kids, *Our Kids* based on the three assets all children and youth need in order to succeed in school and life: caring relationships, high expectations for all that they can be and do, and opportunities for meaningful participation. Children and youth thrive and succeed when these three assets are part of their life experience at home, in school, with their peers and in the community. The initiative grew out of the Council's initial task force on "Graduating Healthy Students Prepared for Success" (see below).

The Children's Council is pleased to report that All Kids, *Our Kids* has been successfully launched from Children's Council as an independent program now known as Positive Behavior Interventions and Supports for All Kids (PBIS) and is housed in the Monterey County Office of Education.

2010: Graduating Healthy Students Prepared for Success

In 2010, the Children's Council conducted an inventory of initiatives and programs around the county that are directed at early childhood development, parent education, literacy, job training, and other efforts aimed at influencing positive outcomes for young people graduating from high school. With these initial tools, a task force on "Graduating Healthy Students" began.

Building on research gathered and embracing the strengths-based philosophy of the earlier work of the Children's Council, this group worked on supporting the development of the expansion of community driven resources and services that aim at improving educational outcomes for the children and youth and derive a process or model that serve the entire County.

This task force eventually expanded and focused in 2011 to become the All Kids, *Our Kids* Initiative, aimed at significantly impacting adult behavior to value, respect and know all children, through a framework of building developmental assets in children and youth from the pre-natal stage through high school graduation.

One result of the work of this task force was the development of benchmarks in the areas of physical and emotional health, social competence and civic engagement, and in academic and work preparedness that have become a basis for the presentation of many of the indicators of the Council's annual reports over the years.

2008: Community Alliance for Safety and Peace

In 2008, the Children's Council began to direct efforts at finding ways to reduce violence and the influence of the culture of violence in our communities. In response to a rising rate of homicide and gun violence among young males, related to gang activity, the Council's Violence Prevention Subcommittee was formed. In 2009, the committee transitioned into a countywide coalition known as the Community Alliance for Safety and Peace (CASP). This alliance is made up of organizations and leaders of Salinas and Monterey County that are determined to reduce violence and build a better future for our children. CASP's strategy for doing this has been developed in partnership with the community, uniting in a campaign called For Our Future/Para Nuestro Futuro. The strategy is based on four key principles:

- A single operational structure manages action and progress.
- Action is research and data-driven.
- The youth are at the center.
- There is deep and meaningful engagement with the community

CASP is made up of youth service organizations, county housing and health officials, local and state elected officials, criminal justice and law enforcement officials, educational leaders, business leaders, representatives of the faith community, and private funding organizations. More than 30 organizations and leaders are involved. While the immediate tragedy of gang violence continues to compel this effort, CASP seeks to achieve both a present and long-term benefit across the continuum of prevention, intervention, enforcement, and re- entry.

2004: Transitional Housing Program (THP) for Probation Youth not in Placement

In November of 2004, the Council appointed a committee to research the needs of transition age youth leaving the probation or child welfare systems. While many make substantial progress in the structured environment of the Youth Center, or drug recovery programs, their transition back into the community is often complicated by returning to unsafe or inappropriate housing which generated many of the original problems. The committee developed a plan for housing alternatives.

The Behavioral Health Division of the Health Department (BHD) included the recommendation to target youth exiting the youth center in the Mental Health Service Act (MHSA) plan submitted to the state in October 2005. A Request for Proposal for transition age youth housing was issued in January 2006 and a contract was awarded to Peacock Acres. Services began in January 2007, with one house continuing in operation and four youth being served. The Department of Social and Employment Services supported Peacock Acres to start a THPP+ program for youth exiting the Foster Care System. THPP+ began in early 2008 and provides housing for emancipated youth. CHISPA has also worked with Behavioral Health in creating a Transition Age Youth house. In 2009, Community Human Services opened Safe Passage, a transitional supportive housing program in Monterey for homeless youth aged 18-21.

2003: Children's Behavioral Health System of Care (La Familia Sana/The Healthy Family)

In 2003, the Children's Council began a collaboration with the Monterey County Health Department, Behavioral Health Services to develop a comprehensive Community Mental Health Services Program for Children and their Families. This was and continues to be a groundbreaking local effort to establish a network of partnerships among Health, Probation, Social Services, Education, community-based organizations, and families all with the intention of increasing the capacity of families to effectively address a wide variety of issues that affect their lives, through the implementation of evidence-based interventions.

In partnership with youth, families, and system of care collaborators, La Familia Sana/The Healthy Family builds on the strengths of its mental health services for children by improving interagency partnerships to provide seamless services, improving cultural competence, and including family members in all service levels. All programs are implemented through an integrated, collaborative, inter-agency system of care.

The implementation was carried out with emphasis on system of care values, including:

- Honoring family and youth partnerships
- Striving for cultural competence at all system of care levels
- Collaborating with interagency partners to provide seamless services for children focusing on the individual needs of every child and family.

Highlights Include:

- The Children's Council worked with La Familia Sana to implement evidence-based practice titled Parent Child Interaction Therapy in conjunction with First 5 Monterey to address the mental health needs of children ages 2-8.
- A Family Partnership Program was established to provide direct services and support to families and to involve families in leadership/advisory roles.
- La Familia Sana implemented specific programs targeted at Transition Age Youth, ages 16-25.
 - The mission is to empower these youth and families to create and sustain positive measurable change in their lives.

2000: Child Welfare Redesign/Child Welfare System Improvement Planning

Child Welfare Redesign represents an ongoing strategy that began in the early 2000s and was initially intended to improve the local child welfare system's capacity to plan, implement and measure improvement in four key areas:

1. Recurrence of Maltreatment
2. Child Abuse/Neglect Referrals
3. Timely Social Worker Visits
4. Multiple Forster Care Placements

Family Children's Services (FCS) and Probation have been successful with their focused system improvement. In 2009, the Monterey County Department of Social Services took over full oversight of the Child Welfare System Improvement Planning Process to allow the Children's Council to focus their efforts on strategies for addressing the increasing violence in the county.

2023-2024 Presentations

Year Focus: To continue the overarching theme of mental health and broadening the focus to include substance use disorder or behavioral health and how it affects 0-24 year-olds.

August 14, 2023:

- a. Wellness Collaboration Presentation – Michael Castro, CFMC
- b. Monterey County Health Needs Assessment Data Presentation – Hillary Fish, Natividad

September 11, 2023:

- a. ECM/CS and Behavioral Health CalAim Presentation – Jessica Hampton, Central California Alliance for Health
- b. Overview and Resuming Reflective Leadership Practice- Relindis Diaz, County of Monterey Children's Behavioral Health

October 9, 2023:

- a. Pathway to Safety Presentation – Athena Morris, Melissa Alejandre and Claudia Gomez
- b. Check Your Bias - - Relindis Diaz, County of Monterey Children's Behavioral Health
- c. CalAim Overview Presentation – Elsa Jimenez, Health Department

November 13, 2023:

- a. Bright Beginnings Highlights – Sonja Koehler

December 11, 2023:

- a. Substance Abuse in Youth Data Presentation – Dr. Reb Close and Rowena Killens from Prescribe Safe
- b. Monterey Integrated Systems Transformation Initiative Presentation – Mark Alexakos, Monterey County Health Department
- c. Narcan Landscape: Agency Policies – Elsa Jimenez and Deneen Guss

January 8, 2024:

- a. BHSA Modernization and Potential Impacts to Local Mental Health Plans and CalAIM changes For Our System of Care – Katy Eckert and Jon Drake, Behavioral Health

February 2, 2024:

- a. 2022-2023 Annual Report Overview – Lori Medina, Prior MCCC Chair and Sonja Kohler, Bright Beginnings
- b. Part 2: Prop 1 Impacts to MHSA – Katy Eckert, Behavioral Health

March 11, 2024:

- a. CA Community Schools Partnership Presentation – Dr. Ernesto Vela and Herminia Cervantes, MCOE
- b. Rainbow Connections Project Presentation – Dr. Marni Sandoval, Behavioral Health

April 18, 2024:

- a. CASP Presentation – Jose Arreola, City of Salinas
- b. STRYVE Youth Violence Prevention Program Presentation- Julia Muruato, County of Monterey Health Department
- c. Narcan Training

May 13, 2024:

- a. Bright Beginnings Update – Sonja Koehler

2023-2024 Members

Executive Committee	Organization
Katy Castagna	United Way Monterey County
Elsa Jimenez	Monterey County Health Department
Deneen Guss	Monterey County Office of Education
Todd Keating	Monterey County Probation Department
Lori Medina	Department of Social Services
General Assembly	Organization
Jose Arreola	Community Alliance for Safety and Peace
Dan Baldwin	Community Foundation of Monterey County
Tina Nieto	Monterey County Sheriff's Office
Dan Burns	Salinas Union High School District
Susan Chapman	Public Defender Office
Laura Dunn	Child Care Planning Council
Katy Eckert	Behavioral Health
Les Gerard	County Council
Zulieka Boykin	Housing Authority Monterey County
Timothy Roberts	Superior Court, Juvenile Justice Division
Lori Luzader	Special Kids Connect
Robin McCrae	Community Human Services
Eva Jeronimo	Department of Social Services
Vanya Quinones	Cal State Monterey Bay
Jeannine Pacioni	District Attorney Office
Virginia Pierce	Child Abuse Prevention Council
Francine Rodd	First 5 Monterey County
Wendy Root Askew	Monterey County Board of Supervisors
Hillary Theyer	Monterey County Free Libraries
Randy Bangs	Soledad Unified School District
Carolina Cota	South Monterey County Joint Unified School District
Susan Swick	Ohana Montage Health
Designated Alternates	Organizations
Josh Madfis	United Way Monterey County
Edward Moreno	Monterey County Health Department
Ralph Porras	Monterey County Office of Education
Jose Ramirez	Monterey County Probation Department
Roderick Franks	Department of Social Services
Michael Castro	Community Foundation of Monterey County
Charles DaSilva	Monterey County Sheriff's Office
PK Diffenbaugh	Monterey Peninsula Unified School District
Ashley Butler	Public Defender Office
Marni Sandoval	Behavioral Health
Annette, Cutino	County Counsel
Sam Lovorato Jr.	Superior Court, Juvenile Justice Division
Shirley Milleco	Community Human Services
Jennifer Netniss	Special Kids Connect
Melissa Alejandre	Department of Social Services
Nicole Hollingsworth	Cal State Monterey Bay, Bright Futures
Lana Nassoura	District Attorney Office
Claudia Gomez	Child Abuse Prevention Council
Rosemary Soto	Monterey County First 5
Eric Mora	Supervisor District 4 Office
Ruben Pulido	Chualar Elementary School District
Jessica Moon	Ohana Montage Health

Appendix

See attachment on the next page

Annual Report July 2023– June 2024

The **Bright Beginnings Early Childhood Development Initiative** was launched by the Monterey County Children’s Council in 2012, to bring greater attention, resources and innovation to the systems that serves the holistic development of all young children and their families.

Organized around the collective impact model, the Bright Beginnings backbone team supports the partners of the Initiative as stewards of the common vision, facilitator of mutually reinforcing actions, and providers of continuous communications and accountability. In 2018, the Initiative rolled out a countywide strategic framework, which outlines a goal to increase the percent of children who, when entering Kindergarten, reach the level of “readiness” in social and emotional skill building, with a focus on narrowing the gap between children of low-income and middle- to high-income families, and in particular families of color. Our conviction is that by lifting up those that have been made the most vulnerable, all will benefit.

The diverse partners of the Bright Beginnings Initiative are guided by a deep commitment to their common vision, and to collaboration, equity, interconnectedness, co-creation, and impact in order to unite and heal, as we strive to support the wellbeing of *all* children and their families.

In 2023-2024, we have witnessed what happens when community energy is harnessed: we have forged a stronger network with sustained collaboration and connections between all types of leaders. The numbers and stories in this annual report convey how our systems are transforming, and in 2023, we were able to look at a key benchmark of success: school readiness.

According to the data from the School System Readiness Assessment, children were more likely to meet the readiness thresholds across all domains of development than in previous years. That is clear success. Comparing the social emotional component of the assessment, a key factor for children’s future success, in 2015 26% of children were assessed as “ready.” In 2022, it was 29%.

Particularly in face of the last decades’s challenges - like growing racial reckoning, COVID, floods, and fires - it is clear that collectively, we have made a difference for the children of Monterey County.

A Strong Network Drives Success

The success of the Initiative depends on a cultivation of relationships and a collective mindset, with a focus on shifting power dynamics. The Bright Beginnings team builds, holds, connects, and participates in various networks to understand and center the needs of young children, to distribute and collect resources, to build capacity, and to catalyze change through coordinated action. In these networks, we inspire each other to think differently, to break the habits and patterns that hold racial, gender, ability, and all disparities and prejudices in place. We also strengthen our ability to influence with a united voice. As our network of early childhood champions continues to diversify and grow, we share in each other's successes, and encourage each other when times are daunting. We know that together, we do better. Here are some numbers that demonstrate our strength:

About **330** cross-sector, multidisciplinary leaders actively engaged in the Initiative.

9 Bright Beginnings affinity networks directly supported by the Bright Beginnings backbone team: Early Childhood Development Advisory Group; Mamas de Salinas Abogan; Maternal Mental Health Taskforce; Greenfield Early Learning Partnership; Family, Friends and Neighbor Caregiver Champions Network; Regions Rise Together Care Committee; Family Child Care Home Network Liaisons; Early Childhood Education Apprenticeship Committee; Family Child Care Home Business Capacity Builders.

7 workshops and forums centering race and inclusion attended to increase capacity to advance equity: "Centering People during Transition" by Compass Point virtually; "Being & Belonging" and "Love, Leadership, & Communication," by Central Coast Human Resources Association in Monterey; History of Racism and Resistance in Monterey County virtual series; Race Relations Summit in Seaside; National Strive Together Cradle to Career Partnership in San Francisco; CA FWD Economic Summit in Imperial Valley.

6 local child and family-centered forums attended by staff to elevate need to meet needs of young children: Monterey County Immigrant Services Network of Empowerment (CISNE), South County Outreach Efforts Network (SCORE), Greenfield Community Collaborative, Community Alliance for Safety and Peace (CASP), Monterey County Child Care Planning Council, and Monterey County Children's Council.

4 economic and business development spaces regularly attended to champion the role of early childhood in building a thriving Monterey County: Salinas Valley Chamber of Commerce Government Affairs Committee; Monterey Peninsula Chamber of Commerce Economic Vitality Committee; County of Monterey Economic Development Committee; and Regions Rise Together Inclusive Economic Development Initiative.

9 ads placed in the Salinas Valley Business Journal, for the website with child care resources for families and educators - www.MontereyCountyChildCare.org

27 newsletters published, providing Initiative and partner updates and resources, predominantly for early learning and maternal mental health.

124 social media posts published, highlighting the collaborative work of the Initiative and of individual partners. Connect with us on Instagram @brightbeginmc and on Facebook @brightbeginningsmc . Also check out the Mamas de Salinas Abogan on Instagram @mamasdesalinasabogan831 and Facebook @mamasde.salinasabogan

Elevating Early Childhood, Together

Through our growing network, we are able to catalyze change through coordinated action. Action is aligned around the county-wide strategic framework, which defines key areas that support young children and their families, so that:

- The early care and learning system is fair.
- Families' resilience is strengthened through social and emotional well-being.
- Families are holistically supported by interconnected systems.
- Caregivers are prepared, with access to resources and opportunities to learn.

These areas are supported by cross-cutting strategies: to raise awareness, generate funding, build collective capacity for advocacy, and to heal the impact of systemic racism.

The child's well-being is always at the heart of what Bright Beginnings does. The Initiative's overarching goal is to transform the systems that support young children and their families. Systems transformation happens when we address both the visible and invisible aspects of the system at the same time: policies, practices, resource flows, relationships, power dynamics, and mental models.

Our priorities are deeply influenced by community voice. In this year, we have witnessed accelerated advancement in awareness of the importance of child care and of maternal mental health services. We attribute this success in great part to fostering a deeper connection between systems leaders and community-based leaders. A few examples of this success are spotlighted below.

This report focuses on the efforts that have been primarily facilitated by the Initiative's backbone team. There are numerous other collaborative and transformative actions happening throughout the region, led by the partners of the Initiative. While not captured in this report, they are a crucial part of this Initiative and our collective movement forward to ensure *all* young children have what they need to succeed.

SPOTLIGHT: Elevating Maternal Mental Health in and for Our Community

The Mamas de Salinas Abogan help propel the work of the Maternal Mental Health Taskforce, working with other community-based organizations like Kween's Kouncil, Centro Binacional para el Desarrollo Indígena Oaxaqueño, Raíces y Cariño, and Parenting Connection. Their leadership has not only brought fresh energy into the Task Force, they also ensured their and their peers' perinatal experiences informed the work. They participated in the WIC-led Breastfeeding Awareness events in the Fall in Salinas and Soledad, and in the Spring led the Maternal Mental Health awareness raising walks in Castroville, Salinas, Monterey and Greenfield. Their work even attracted the attention of Telemundo 23. Through their connections at the Task Force, they are part of a grant to train with Parenting Connection as facilitators for the peer-to-peer support circles, Mothers & Babies, and to hold their own circles.

In additional effort to make information more accessible to a Spanish-speaking audience, Bright Beginnings sponsored interpretation for a lactation workshop for agricultural workers, offered by WIC, and released flyer on recent changes to state lactation policies (available at www.BrightBeginningsMC.org/maternal-mental-health/).

150-some folks gathered at **4** community walks to raise awareness and reduce stigma around perinatal mental health, in Monterey, Salinas, Castroville and Greenfield during national awareness week in May.

57 people registered for the Maternal Mental Health Forum at **4** in-person locations (Hartnell College Soledad campus, MCHD Behavioral & Public Health, and Community Hospital of Monterey Peninsula), to learn about best and emerging practices in the field.

1 resolution was passed to recognize the Maternal Mental Health Task Force, adding this year an attribution to community-based leadership: Mamas de Salinas Abogan, Centro Binacional para el Desarrollo Indígena Oaxaqueño, and Raíces y Cariño.

SPOTLIGHT: Community & Systems Leaders Mobilizing for Child Care

The COLIBRI Child Care's goal is to bring equitable outcomes in access to child care. It was inspired by the alignment between the BHC-led learning community Collaboratively Organizing for Liberation, Inclusion, and Breaking Racial Inequities (COLIBRI), the years of work by First 5 Monterey County and Bright Beginnings to raise awareness about the importance of early care and education, and the community-led efforts to support child care.

The process is a community power building approach that centers those most directly impacted by the issue to co-develop the narrative and strategy. Supported by Facilitating Power, approximately 20 community leaders came together to build a narrative and strategy to mobilize others to support access to child care. Leaders are a part of Mamas de Salinas Abogan, Padres Unidos, Líderes Campesinas, Mariposa, Mujeres en Acción, and Centro Binacional Para El Desarrollo Indígena Oaxaqueño.

95 families attended the Preschool, TK & Kinder Enrollment Fair for Greenfield Union School District, to learn how to navigate the enrollment process and access community resources (despite pouring rain). **29** agencies offered resources and **89%** of families who attended completed the enrollment process.

1 report on FFN child care providers focus groups shared with Champions. A new insight is their interest in learning advocacy skills.

2 meetings of the Family, Friends and Neighbor Care (FFN) Champions held, presenting a report from focus groups and the bi-lingual, geographically-based Resource Guides (Salinas, Castroville, Greenfield, Gonzales, Marina, Seaside, Soledad, King City).

51 FFN child care providers received CPR training in Greenfield, a one day free training sponsored by United Way. Resource bags provided containing the Resource Guide from Bright Beginnings, a book from First 5 Monterey County, and COVID tests from the County of Monterey Health Department.

25 civic engagement touchpoints participated in by the Mamas de Salinas Abogan, including the Central Coast Early Childhood Advocacy Network's annual Parent Power Summit and Legislative Visits, and a keynote at the Alisal Union School District's Buckhorn Early Learning Center's groundbreaking. They continue with direct advocacy in the chamber of the County Board of Supervisors, in front of School Board Trustees, and the Alisal District English Language Learner Advisory Committee. As their work deepens, they gathered for a day to reflect and more intentionally plan their efforts. Thank you First 5 Monterey County for sponsoring the facilitation services of the retreat!

12 community tabling events attended, distributing resources and 176 books across the county with diverse audiences, such as the Salinas Valley Chamber awards luncheon, Ciclovía Salinas, the San Ardo Community Resource Fair, and the Juneteenth celebration in Seaside.

2 Uplift listening sessions supported, with First 5 Monterey County as lead coordinator, to gain insight into challenges and priorities for economic mobility in Salinas and Greenfield.

SPOTLIGHT: *The Honorable Supervisor Chris Lopez took center stage at the Monterey Bay Economic Partnership 2023 State of the Region, to share with hundreds of business and economic development leaders why child care is at the heart of our economy and a public responsibility to support. This opportunity was catalyzed through the work of Regions Rise Together, which centers child care as one of four pillars of a thriving and just economy.*

Looking Back to Move Forward, with Gratitude

We've made a difference. Community members marginalized in the past are now influencing decision-making tables. Systems leaders are showing up and listening in underserved communities in new ways. Business leaders are becoming a part of the solution to expanding access to child care. We hope this report has captured even just some of the remarkable success we see in Monterey County.

This success is the feat of many and in face of daunting challenges - COVID, floods, fires, growing racial reckoning. We know the next years will bring more. Bright Beginnings is part of the local movement to protect those who have been made vulnerable to oppressive, exclusionary policies. We know we need to urgently invest in more healing-centered practices for those working with families facing renewed marginalization and racism, and facing deportation, such as first responders, direct service providers, educators, and community outreach workers.

As we engage in meeting immediate needs, we must also advance our long term vision to transform the systems that support young children, bringing innovation and largescale investment into child care and perinatal health. Persistent research, relationship-building and advocacy is needed so our recent gains do not flag.

We are humbled and grateful for all who believe in the Bright Beginnings Initiative. By reflecting on the last year's successes, we hope to inspire a collective commitment to centering our youngest as we advance a just, equitable Monterey County for all. None of this work can be done alone, or apart from our environment. We honor the wisdom and stewardship of the people indigenous to the lands we are on, including the Ohlone, Costanoan, Rumsen, Mutsun, and Esselen tribes. No matter the lands we are from, the ethnicity, cultures and generation we belong to, or the work we do, we are equally important to the wellbeing of our community.

Many thanks to all who came before us, the partners of today, and all who will join us in the future.

MONTEREY COUNTY CHILDREN'S COUNCIL EXECUTIVE COMMITTEE

Todd Keating - Chief Probation Officer (Council Chair)
Katy Castagna - President & CEO, United Way Monterey County
Deneen Guss - Superintendent of Schools, Office of Education
Elsa Jimenez - Director, Health Department
Lori Medina - Director, Department of Social Services

BRIGHT BEGINNINGS INITIATIVE LEADERSHIP

Edward Moreno - Public Health Officer (Initiative Co-Chair)
Francine Rodd* - First 5 Monterey County (Initiative Co-Chair)

EARLY CHILDHOOD DEVELOPMENT ADVISORY GROUP

Jose Arreola - City of Salinas
Laura Dunn - Carmel Unified School District
Claudia Gomez - Door to Hope
Niaomi Hrepich - WIC, Health Department
Sonia Jaramillo - Office of Education - Early Learning Program
Caryn Lewis* - Office of Education - Ed Services
Josh Madfis* - United Way of Monterey County
Mamas de Salinas Abogan
Maria Ortiz - MAOF Resource & Referral
Ginger Pierce - Child Abuse Prevention Council
Angie Ramirez - CAPSLO
Laurie Ramirez - Office of Education - Child Care Planning Council
Mayola Rodriguez - Go Kids, Inc.
Wendy Root Askew - Office of the Supervisor - District 4
Tony Amezcua - Bright Futures Education Partnership
Shannan Watkins* - Early Development Services

** Also Steering Partners for Early Childhood Goals of the Bright Futures Educational Partnership*

BRIGHT BEGINNINGS INITIATIVE BACKBONE STAFF

Sonja Koehler - Director
Cristina De Orta - Program Support
Iris Gamez - Community Outreach, Inclusion & Advocacy Coordinator
Rebeca Zuniga - Communications Coordinator

Our collective work could not happen without the generosity of the County of Monterey Health Department; all of our diverse philanthropic funders including Parenting Connection, Natividad Foundation, Central Coast Alliance for Health, County of Monterey Office of Education, Irvine Foundation via Monterey Bay Economic Partnership and Action; nor the administrative and financial support of our fiscal sponsor, First 5 Monterey County.