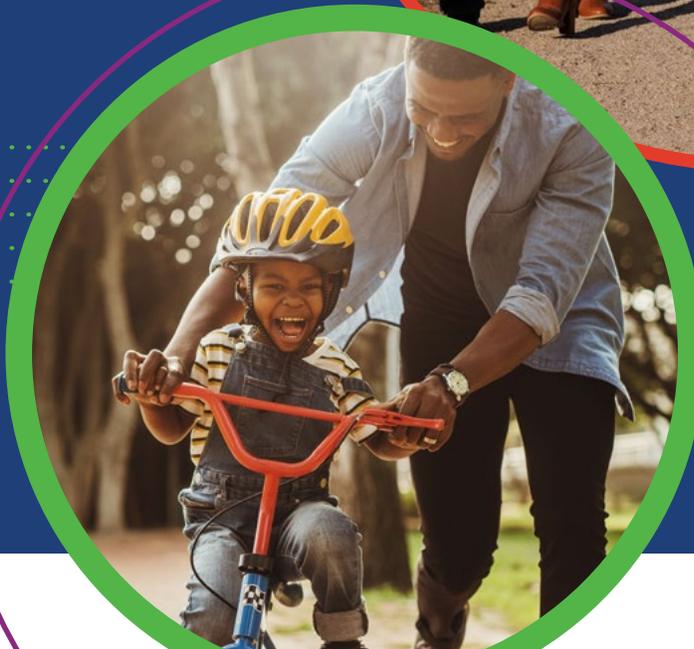


Together  
We Raise  
Monterey  
County!



# Strategic Plan

JULY 2023 – JUNE 2029





STRATEGIC PLAN  
JULY 2023 – JUNE 2029



# Contents

# Executive Summary

This document presents the strategy that First 5 Monterey County (F5MC) will employ to achieve greater outcomes for early childhood in Monterey County over the next six years.

Research shows that what happens in the first five years of life impacts each of us. “Early experiences affect how the brain develops, shaping how children learn, behave, and grow.” When all children are well-cared for, we lay the foundation for a healthier, more creative, more prosperous, and more engaged world. Likewise, investments in the early years yield economic benefits for our communities and society as a whole.

F5MC builds on over 24 years of experience in supporting the wellbeing of children ages prenatal through age 5 and their families in Monterey County. Our work was launched in 1998 by the voter-approved California Children and Families Act (Proposition 10), which created the statewide organization, First 5 California, to oversee the expenditure of tobacco tax revenues. There is a First 5 in every county tasked with addressing the unique challenges and opportunities of its community. In addition to Prop 10, F5MC has been successful in leveraging funds and attaining additional grants to further the Mission and Vision as defined by our Strategic Plan.

F5MC believes that when children and families have the power to shape the programs, services, and systems that are meant to support them, better outcomes are achieved. This Strategic Plan has been co-created with community partners, including community-based organizations, parents, and providers, with a focus on those members of our community that have historically been excluded from decision-making. It outlines the priorities and strategies of F5MC for the next 6 years aligned with our mission and vision, values, and core roles:

## MISSION

First 5 Monterey County enriches the lives of children, ages prenatal through 5, and their families by elevating early childhood as a priority, strengthening connections, and advancing quality within a whole system of care and support.

## VISION

The wellbeing of all young children and families is nurtured by responsive services, just and equitable systems, and safe and welcoming environments.<sup>i</sup>

## VALUES

Our values guide not only how First 5 Monterey County works, but also determine which projects and programs we choose to prioritize, who we work with, and what we work for:

**Equity • Trust • Healing • Connection • Prevention**

**Equity:** F5MC believes that all young children deserve to be well and well-cared for; that all families should have what they need to nurture their children; and that all people deserve to have a role in making decisions that impact their lives.

**Trust:** When relationships of trust are built within and between children, families, providers, systems, and communities, children and families thrive.

**Healing:** We must acknowledge places where trauma or harm has or continues to happen. Only from there can we engage in a process of repair and healing.

**Connection:** A whole child, whole family, whole systems approach makes connections across the full range of factors comprising and influencing children's and families' experiences to ensure their holistic wellbeing.

**Prevention:** We emphasize prevention because we know that addressing challenges before they start is more effective and also more time and cost efficient.



## CORE ROLES

Over the past 24 years F5MC has renewed our commitment to the Proposition 10 mandate, evaluated outcomes, refined our approaches, and identified that we are most successful in supporting young children and families when we play the following core roles:

• Early childhood  
• development  
• **champion**  
• and advocate

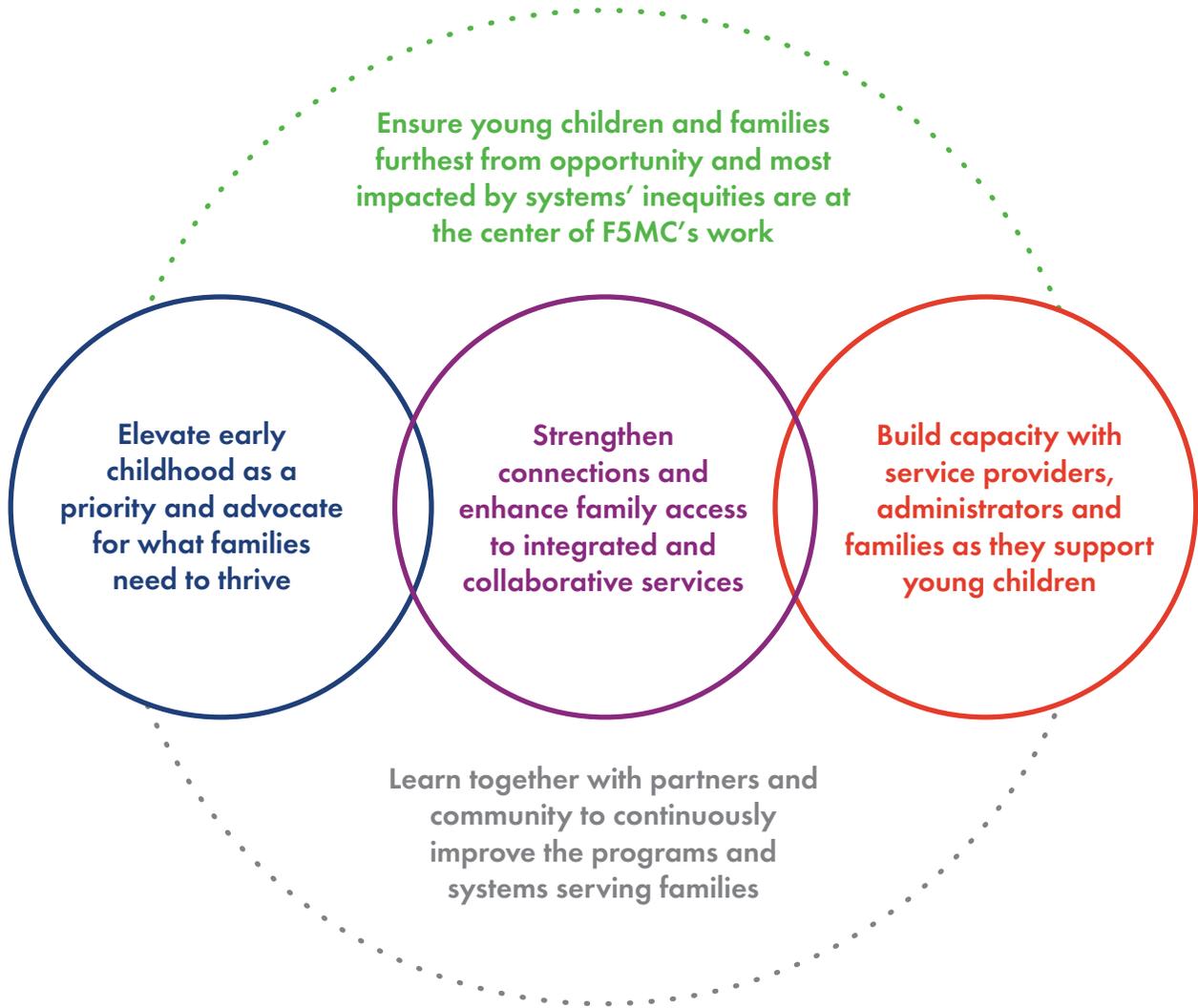
• Whole child,  
• whole family,  
• whole **systems**  
• **connector**

• Healing-focused,  
• relationship-based,  
• quality-driven  
• **capacity builder**

We believe that we can address root causes and enrich the lives of more children and more families when we work at the systems level, across agencies and sectors, and support service providers (e.g., in health, education, and social services) as they support young children and families.

The following **strategic priorities** will guide our work over the next 6 years:

## STRATEGIC PLAN FRAMEWORK PRIORITIES FY 2023 – 2029

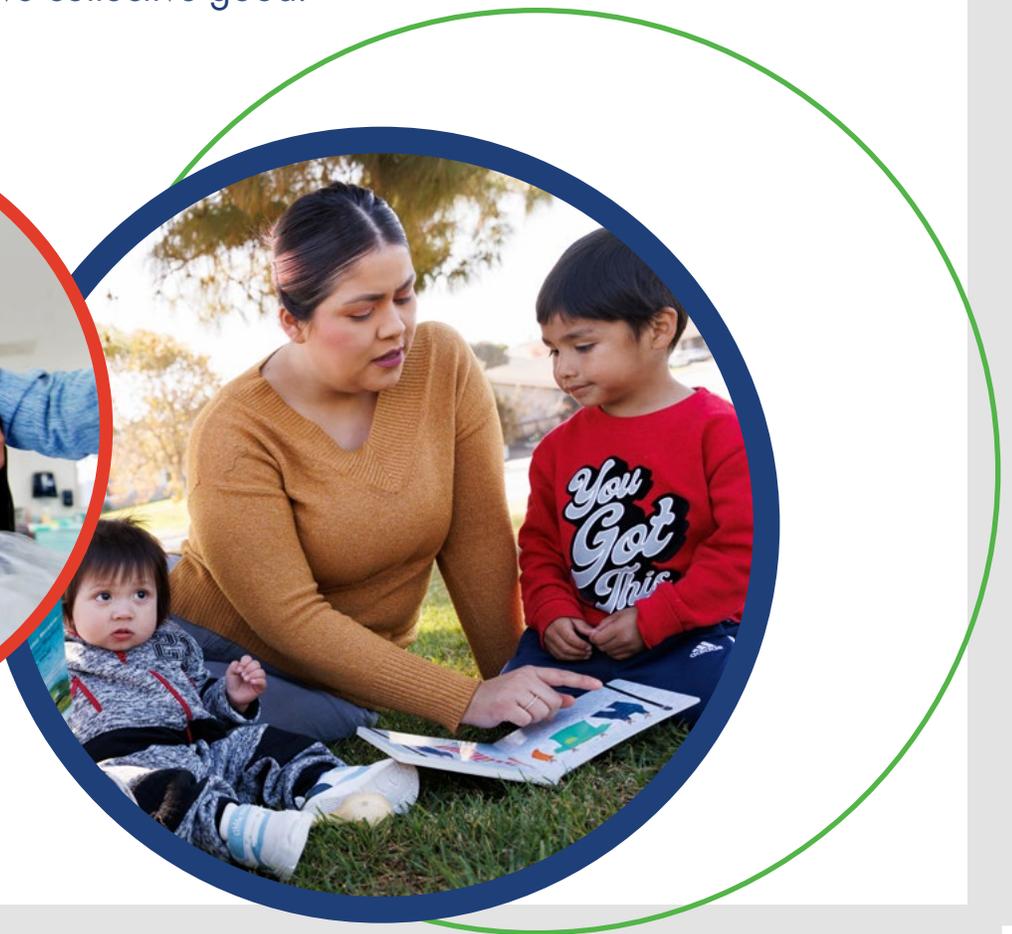


Through collaboration, First 5 Monterey County clarified a pathway leading to better outcomes for children and families and that collaboration will continue. This document describes our commitment to working in relationships and to building power for young children and families within F5MC and across our spheres of influence to achieve our shared vision.



# The Importance of the First 5 Years

What happens in the first five years of a child's life affects us all. Early experiences shape a child's growth and their future as an adult. Our individual developmental journeys impact one another and all of society through the ways we show up in our families and communities, in school and in work, and in our ability to contribute to a positive collective good.



When all children are well-cared for, the foundation is set for a healthier, more creative, more prosperous, and more engaged world:

Figure 1:

## HOW EARLY CHILDHOOD EXPERIENCES AFFECT ADULTHOOD AND ALL OF SOCIETY

	Strong Families / Caregivers 	Comprehensive Health & Development 	Quality Early Learning 
<b>WHAT HAPPENS AS A CHILD...</b>	<p><b>Early positive experiences with families/caregivers</b> allow a child to develop social and emotional skills and feel confident and secure about themselves</p> <p style="text-align: center;">∨</p>	<p><b>Early access to holistic health care,</b> including screening and intervention, helps embody healthy habits and addresses special needs</p> <p style="text-align: center;">∨</p>	<p><b>Participation in high quality early learning experiences</b> supports children to harness their in-born capacity to learn, explore, and create</p> <p style="text-align: center;">∨</p>
<b>SHAPES A PERSON'S GROWTH...</b>	<p><b>Improved relating</b> to others in school, work, and at home</p> <p style="text-align: center;">∨</p>	<p><b>Optimal growth</b> and development through adolescence</p> <p style="text-align: center;">∨</p>	<p><b>Stronger skills</b> that are critical for lifelong learning; increased likelihood of reaching milestones like high school graduation</p> <p style="text-align: center;">∨</p>
<b>AND THE REST OF SOCIETY.</b>	<p><b>Resilient adults</b> who are part of strong and supportive relationships, living in a cooperative society</p>	<p><b>Healthier adults and communities</b></p>	<p><b>More opportunities for adults to succeed;</b> greater ability to navigate our current systems with ease</p>

Home, health, and education settings are three places where children receive direct care but we know that families and services operate in a larger context: How our systems and society support families and providers impacts how they are able to support children (see the impact model in the next section).

Because the wellbeing of young children so significantly shapes and is shaped by our systems and society, healthy early childhood is critical to the success of those working across all sectors and must be made a priority for people of all ages.

FIRST 5 MONTEREY COUNTY:

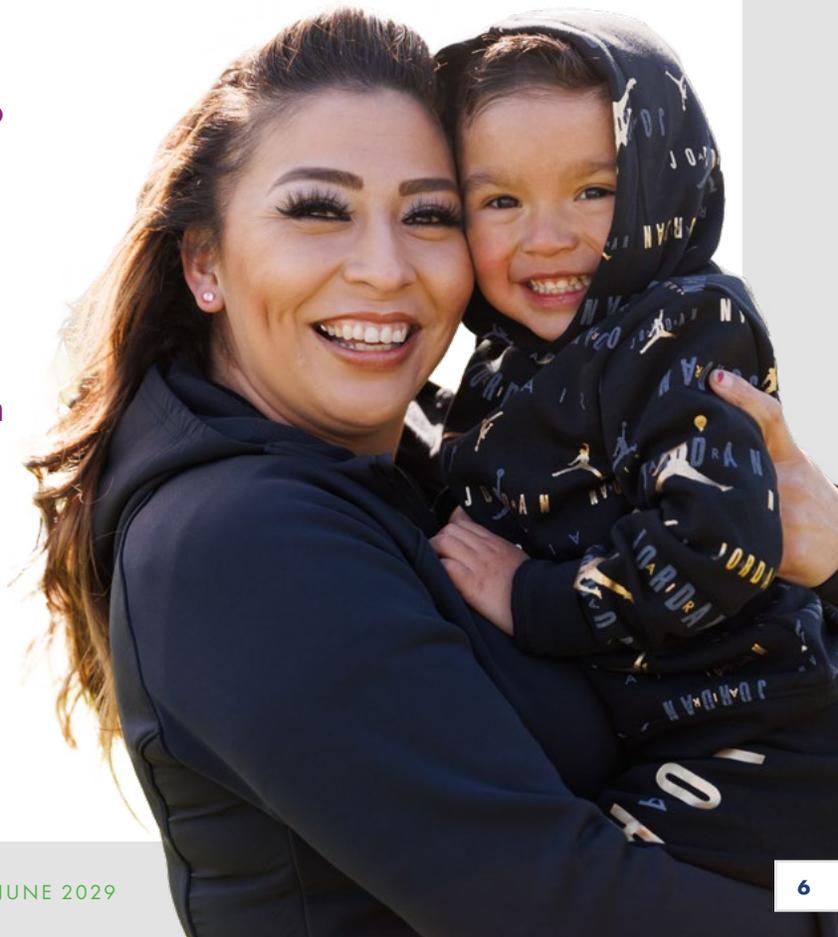
# Past & Future

The California Children and Families Act (Proposition 10) created a statewide network of organizations in 1998 to administer tobacco tax dollars to “**promote, support, and improve the early development of children** from the prenatal stage to five years of age.”<sup>ii</sup>



Proposition 10 also clarifies:

- “ It is the intent of this act to facilitate the creation and implementation of an **integrated, comprehensive, and collaborative system** of information and services to enhance optimal early childhood development and to ensure that children are ready to enter school.”
- “ This system should function as a **network that promotes accessibility** to all information and services from any entry point into the system.”



To ensure local decision-making and provide for greater local flexibility, the Proposition established a Children and Families Commission at the state level (First 5 California) and subsequently one in each county. Each county's First 5 is tasked with creating a strategic plan to address the unique challenges and opportunities of its community. This document presents the strategy for First 5 Monterey County (F5MC).

**MISSION** First 5 Monterey County enriches the lives of children, ages prenatal through 5, and their families by elevating early childhood as a priority, strengthening connections, and advancing quality within a whole system of care and support.

F5MC works across these areas to achieve the **vision** that, one day...

**VISION** The wellbeing of all young children and families is nurtured by **responsive services, just and equitable systems, and safe and welcoming environments.**

**Responsive services** are designed and delivered with young children's and parents' needs, desires and dreams at the center. Responsive services attune to the unique and holistic needs of children and families, are offered in families' preferred languages and are not only culturally responsive, but culturally-affirming.

**Just and equitable systems** operate for the benefit of all of their constituents and strive for equality by:

- 1) Understanding their part in contributing to current inequalities; and by
- 2) Centering race, equity, diversity and inclusion (REDI) to rebalance power and resources.

**Safe and welcoming environments** in which children and families live, work, learn, play and go for support are stable, nurturing and healing-centered to ensure the wellbeing of families and the healthy development of all children.



**ULTIMATELY, F5MC ASPIRES TO A FUTURE IN WHICH:**

**CHILDREN** recognize and are recognized for their inherent strengths and assets. They are healthy, well-cared for, and reach their unique potential;

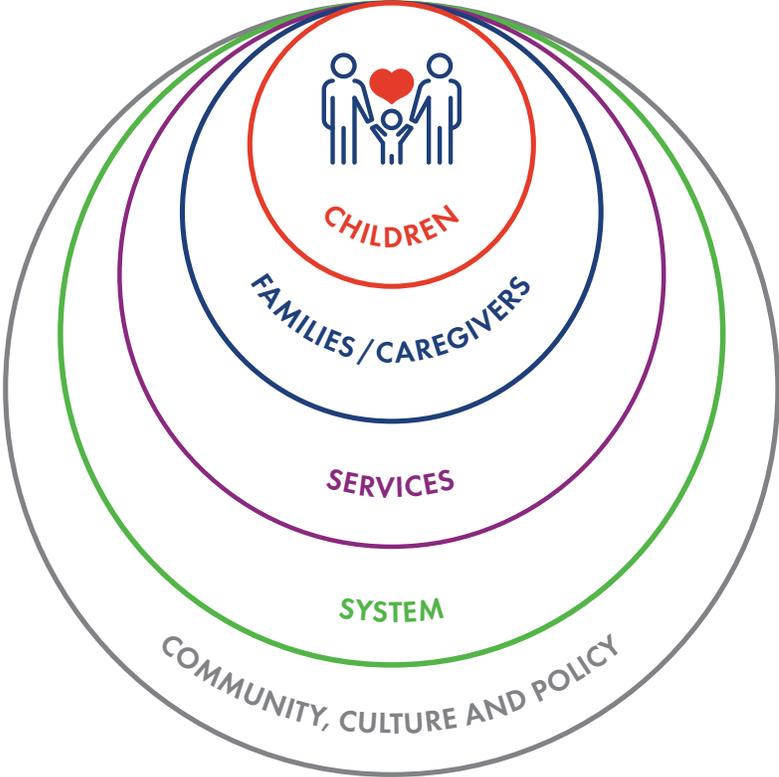
**FAMILIES/CAREGIVERS** recognize and are recognized for their inherent strengths and assets. They are well-connected, well-respected, and supported in caring for their children;

**SERVICES** for families are high-quality, accessible, plentiful, and responsive to families’ needs;

The whole **SYSTEM** serving young children and families is cohesive, connected, navigable, and equitable; and

**COMMUNITY, CULTURE, AND POLICY** honors and supports all families in the important task of raising children.

Figure 2:  
**STRATEGIC PLAN FRAMEWORK  
IMPACT AREAS**



F5MC has adapted the Socio-Ecological Model<sup>iii</sup> to frame our aspirations based on the belief that each individual aspiration is not possible to achieve without the others – they are interdependent.

For example, the Strengthening Families Protective Factors Framework<sup>iv</sup> identifies that children can only be well and well-supported when families are well and well-supported. Support for families e.g., concrete supports and social connections, come from *responsive services* and *welcoming communities*. But services and communities do not operate in a vacuum. They are nested within systems and environments which are governed by policies and norms that must also be supportive of all children and families in order for them to truly thrive.



# Current State of Children & Families in Monterey County

Over the last 24 years F5MC has made incredible strides in elevating early childhood as a priority, strengthening connections and advancing quality within *and beyond* the early childhood system. We have also witnessed how significant challenges in our systems and in our world affect families' wellbeing and the healthy development of young children. In the midst of a persistent pandemic and increasing inflation, climate-, violence- and poverty-fueled migration, and environmental disasters, some challenges are growing and becoming even more complex. The data in Table 1 below (and in Appendix II) offer context for how children and families are doing under the pressure of these external factors and in the absence of optimal support from services, systems and society.

We see a significant gap between our current state and our aspirations for all families and, where we have access to data for different races and ethnicities, we see even greater gaps in the wellbeing of Black, Indigenous, Latinx and other families of color. Disaggregating data is an important step to promoting equity and ensuring that all children can truly thrive because, when we have data that show us difference in wellbeing for different populations, we can explore more effective, targeted strategies to address those disparities. This section illuminates the challenges children and families face in Monterey County. The following sections offer proposed solutions.



Table 1:

## DATA FOR CURRENT CONTEXT OF CHILDREN AND FAMILIES IN MONTEREY COUNTY

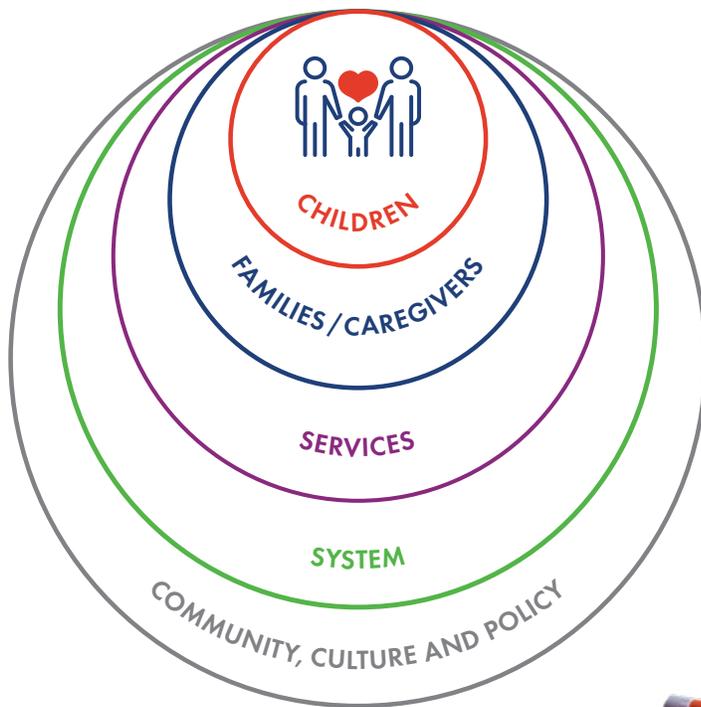
ASPIRATION	DATA RELATED TO ASPIRATIONS
<p><b>CHILDREN</b> recognize and are recognized for their inherent strengths and assets. They are healthy, well-cared for and ready for school and life</p>	<ul style="list-style-type: none"> <li>• 17% of children in Monterey County are food insecure (10% of all Monterey County residents are food insecure: 17% of Black residents compared to 15% of Latinx and 5% of white residents).<sup>v</sup></li> <li>• 21% of children live in poverty (25% of Latinx children compared to 6% of white children).<sup>vi</sup></li> <li>• 41% of children live in crowded households.<sup>vii</sup></li> <li>• 25% of children are “ready for kindergarten” (14% of Indigenous Mexican children and 16% of Latinx compared to 40% white children).<sup>viii</sup></li> <li>• 27% of children 0–36 months received a developmental screening from their provider.<sup>ix</sup></li> </ul>
<p><b>FAMILIES/ CAREGIVERS</b> recognize and are recognized for their inherent strengths and assets. They are well-connected, well-respected and supported in caring for their children</p>	<ul style="list-style-type: none"> <li>• 17% of new mothers reported prenatal depressive symptoms<sup>x</sup> (18% of Latinx new mothers compared to 13% of white new mothers).</li> <li>• 65% of households with children under six live below the Real Cost Measure i.e., earn less than what is needed to cover basic needs.<sup>xi</sup></li> <li>• Families report not always knowing how to care for their children, especially when there’s a concern about the child’s wellbeing.<sup>xii</sup></li> <li>• Families report not being connected to supports they need related to child development, health, housing, employment and transportation.<sup>xiii</sup></li> <li>• Families report concern that their life struggles – particularly financial struggles – may adversely impact their children.<sup>xiv</sup></li> </ul>
<p><b>SERVICES</b> that families might need are high-quality, accessible, plentiful, and responsive to families’ needs</p>	<ul style="list-style-type: none"> <li>• There are only enough child care spaces for 17% of children from working families.<sup>xv</sup> This figure does not include children from families where a parent is not working (despite the fact that parents may not work because of a lack of child care options); 25% of Latinx families report having regular child care arrangements compared to 44% of white families.<sup>xvi</sup></li> <li>• 57% of survey respondents said that unmet mental health needs were a significant problem in their communities.<sup>xvii</sup></li> <li>• Care coordinators cite long waitlists as one of the biggest barriers to connecting families to services (primarily in child care and healthcare).<sup>xviii</sup></li> <li>• Care coordinators and families report gaps in intervention and support for children with developmental delays and/or special needs.<sup>xix</sup></li> <li>• Families report being disrespected or disbelieved by service providers (particularly Black and Brown families, immigrant families, and those who don’t speak English as a first language).<sup>xx</sup></li> </ul>

The whole **SYSTEM** serving young children and families is cohesive, connected, navigable, and equitable

- The county’s most impacted families face difficulties accessing care and services across programs/agencies, especially in South County.<sup>xxi</sup>
- Providers report they don’t always know where to refer families and/or don’t have capacity to make warm handoffs.<sup>xxii</sup>
- Families feel that providers often aren’t aware of their full context and struggle to serve them holistically.<sup>xxiii</sup>
- Care coordinators and families report families not being eligible for care or service despite need; also report families’ difficulties enrolling in programs or services despite being eligible.<sup>xxiv</sup>
- While much collaboration across agencies happens, more is needed: Agencies often work in silos or are unaware of the impact of their work on early childhood development.<sup>xxv</sup>

**COMMUNITY, CULTURE AND POLICY** honors and supports all families in the important task of raising children.

- U.S. pays less than half the average of what other industrialized countries pay for quality Early Childhood Education.<sup>xxvi</sup>
- 10% of workers report that their current employer offers child care assistance.<sup>xxvii</sup>
- Families report working conditions that make healthy parenting difficult (low wages, long work hours, unpredictable work hours, lack of flexibility to support sick children, insufficient supports for breastfeeding or pumping).
- Student parents struggle with child care and other parenting supports, impacting decisions to continue their studies.
- Families report a lack of family-friendly, accessible and safe places for children to play.



## FIRST 5 MONTEREY COUNTY'S

# Areas of Focus

First 5s are known for their work across disciplines and sectors to improve the wellbeing of young children prenatal through age 5 and their families. Given our broad scope, all of the challenges mentioned in the section above represent potential opportunities for F5MC to intervene in order to make positive changes towards the ideal vision of early childhood. As an efficacy rule of thumb however, organizations must prioritize the areas in which finite staff time and resources can have the greatest sustained impact. F5MC areas of focus for the 2023–2029 strategy cycle are informed by:

- **The Need:** Who faces the greatest challenges? Where are we farthest from our ideal state?
- **Values:** What truths do we hold about how to best support children, families, providers and systems?
- **Skills, Assets, and Expertise:** Where has F5MC been most successful? What capacities have we built with our community? What have we learned that can help us be most effective?
- **The Potential Scale of Change:** What are the strongest levers for social change? What are the doorways that open up the greatest possibility for impact?

Taken together, these areas point to F5MC's **core roles** i.e., the places in which we are best-positioned to make a difference for early childhood.

## The Need

F5MC is increasingly focusing our work using a Targeted Universalism approach, developed by John A. Powell and The Othering & Belonging Institute at the University of California, Berkeley.

“*Targeted universalism means setting universal goals pursued by targeted processes to achieve those goals. Within a targeted universalism framework, universal goals are established for all groups concerned. The strategies developed to achieve those goals are targeted, based upon how different groups are situated within structures, culture, and across geographies to obtain the universal goal.*”<sup>xxviii</sup>

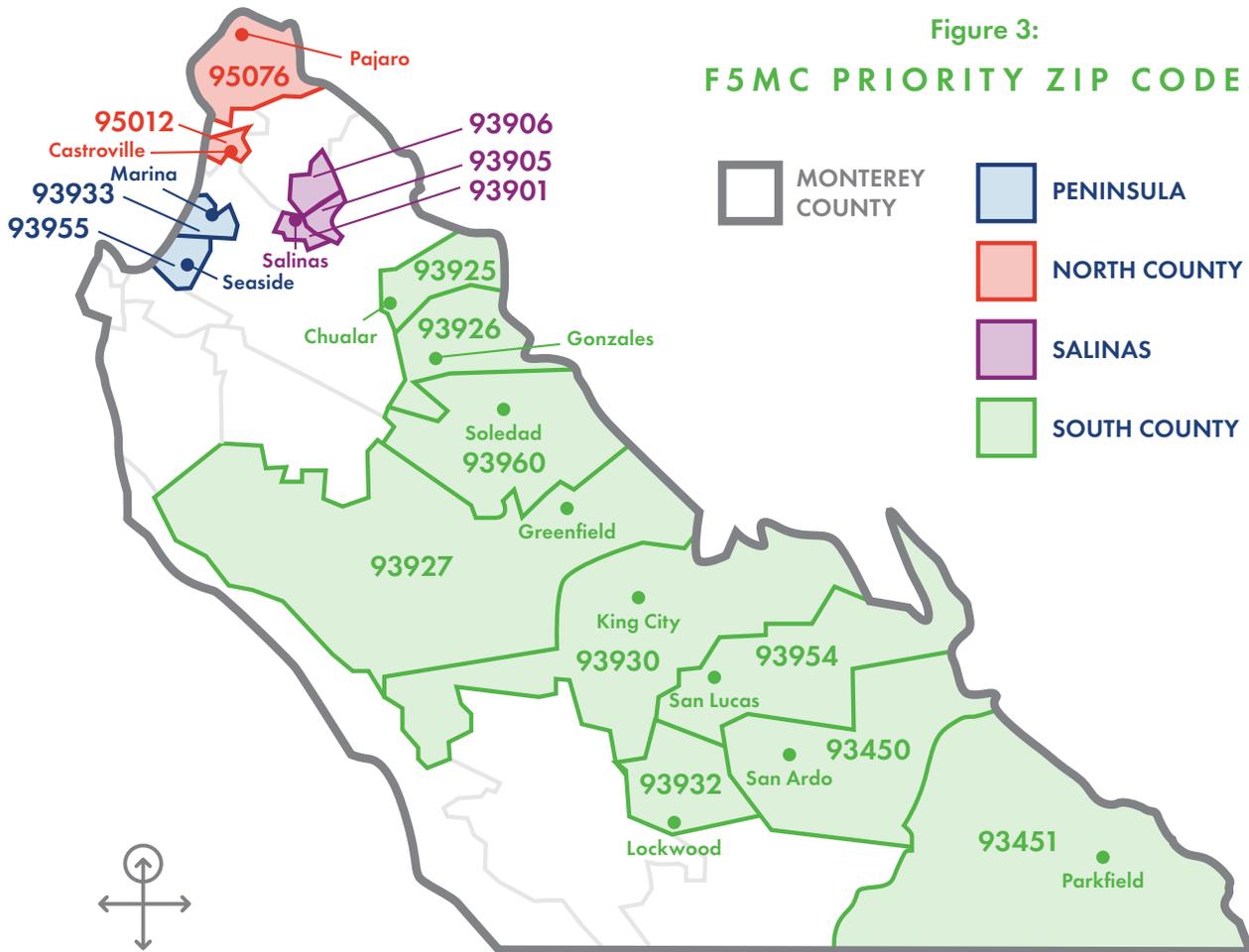


F5MC uses some universal strategies that benefit all children and families and more in-depth, targeted strategies to support young children and families that are furthest from our universal goal i.e., those who are most underserved and most impacted by systems failures. Demographic data says a lot about who those children and families are: Children prenatal through age 5 in California are more likely to be poor if they have **non-English speaking** or **immigrant** parents. In terms of race, **Latinx** children are more likely to be poor than any other race, followed by **Black/African American** children.<sup>xxxix</sup> In Monterey County the **Mexican Indigenous** population is also significantly removed from opportunity, although they are rarely included or called out in research studies so there is little quantitative data measuring their wellbeing. In addition to focusing on these populations overall, F5MC’s 2023–2029 strategy will involve learning, collecting data, conducting outreach and forming closer relationships with systems and community partners to better serve families who are among those most acutely impacted by systems failures, including:

- **Families who do not have documentation or have “mixed” documentation.** Many families do not qualify for supports or decline supports for which they do qualify due to fear of deportation and separation from loved ones. Parents without documentation may also hesitate to advocate for themselves or their children when needed, putting them at higher risk for being underserved.<sup>xxx</sup>
- **Families who work in agriculture.** 90% of those who work agriculture are immigrant and nearly 60% are undocumented.<sup>xxxi</sup> Many have had less access to higher education and are exposed to greater health challenges. Farm work is seasonal and less secure, more physically demanding, and requires migration or at least longer commutes to work posing greater challenges for families with young children.<sup>xxxii</sup>
- **Children with special needs.** According to the CDC, at least 1/6<sup>th</sup> of all children have developmental disabilities.<sup>xxxiii</sup> In addition, many children have developmental needs that are often overlooked due to low screening and identification rates. Those who are identified, struggle with connecting to or receiving the supports that they need and report:
  - Limited follow-through on medical referrals post-assessment;
  - Issues with eligibility in receiving supports from the regional center or school districts;
  - Mixed supports from the regional center or school districts, when eligible; and/or
  - Low numbers of local providers that address pediatric special needs.<sup>xxxiv</sup>
- **Families involved with the judicial system,** including those who interface with child welfare, probation, and/or families with a parent in jail/prison.

These families are impacted by compounding factors of trauma related to poverty and structural racism, which may lead to mental health challenges, use of violence and/or addiction that is often multi-generational.<sup>xxxv</sup>

Figure 3:  
F5MC PRIORITY ZIP CODES



Disparities in child and family wellbeing in Monterey County can be measured not only across demography but geography as well. F5MC’s target zip codes from the 2017–2023 strategy cycle were vetted and re-confirmed during this process by triangulating the areas of highest need identified by 3 indices:

**CA Strong Start Index | CA Healthy Places Index and | Area Deprivation Index**

These indices evaluate census tracts or block areas, defining area “need” according to indicators like:

- Birthweight
- Ability to afford and access healthcare, including prenatal care
- Education level and enrollment
- Employment status
- Housing quality
- Environmental health

What the indices do *not* clearly measure is the density or availability of services or supports for each area. While there are pockets of considerable need in all of Monterey County’s regions (North County, Salinas, Marina/Seaside and South County), qualitative data suggests that additional emphasis on South County is needed because of the scarcity of existing local services combined with the region’s distance from other services in the rest of the county and the challenges many families face with access to transportation.

# Values

The following values guide not only how F5MC works but inform which projects and programs we choose to prioritize, who we work with, and what we work for:

**Equity • Trust • Healing • Connection • Prevention**

**Equity:** F5MC believes that all young children deserve to be well and well-cared for; that all families should have what they need to nurture their children; and that all people deserve to have a role in making decisions that impact their lives. When we look around our communities and at the data, however, we see inequalities in wellbeing and civic influence across demographics – including gender, race, language, and immigration status. We know that these disparate outcomes exist as a result of systems that have excluded, erased, suppressed, and/or discounted the voices of far too many members of our communities.

"Interpersonal and structural racism prevents millions of people from attaining their highest level of health, consequently affecting the health of our nation."<sup>xxxvii</sup> Racial discrimination hurts everyone – not just people of color – by negatively impacting the economy (through the reduction of wealth and income) and stifling the critical thinking, creativity and innovation needed to solve our society's complex problems. <sup>xxxviii xxxvix</sup> Ensuring that all children and families *truly* have the care, respect, access, and power to which they're entitled requires F5MC to work on Race, Equity, Diversity, and Inclusion (REDI) for the REDIness of our systems and services and to use a community engagement-to-power approach.

**Trust:** Building relationships of trust requires humility, curiosity, listening, attunement, connection, reflection, respect and reciprocity. These postures/activities underlie how F5MC approaches our work with partners how we recommend partners relate to children and families. When relationships of trust are built within and between children, families, providers, systems, and communities, children and families thrive. Also, as the administrator of Prop 10 state tobacco tax funds locally, F5MC is committed to upholding public trust and being an effective and transparent fiscal steward.

**Healing:** Wellbeing, or wellness, relates not only to physical health but also to mental health and social and emotional wellbeing. In order to make progress towards a future where all children and families experience wellbeing, we must acknowledge places where trauma or harm has or continues to happen. Only from there can we engage in a process of repair or healing. F5MC's approach is well-characterized here: "A healing-centered approach is holistic, involving culture, spirituality, civic action and collective healing. The term healing-centered engagement expands how we think about responses to trauma and offers a more holistic approach to fostering well-being."<sup>xi</sup>



**Connection:** Individuals are multi-faceted, defined by diverse experiences, capabilities, desires and needs. Further, the socio-economic and social determinants of health frameworks explain that, when put together in society, “individuals affect and are affected by a complex range of social influences and nested environmental interactions.”<sup>xii</sup> A whole child, whole family, whole systems approach makes connections across the full range of factors comprising and influencing children’s and families’ lived experiences to ensure their holistic wellbeing. F5MC also works to support children and families to make these connections within themselves i.e., accepting all aspects of themselves, including their inherent strengths and assets, as parts within a greater whole. When we remember that we were born and we remain “unbroken and undamaged,”<sup>xlii</sup> we have more resource, pride and courage to navigate life’s challenges.

**Prevention:** Prevention is aligned with all the values above including addressing root causes, understanding the systemic nature of “dis-ease”, and sustaining wellness as a goal. F5MC emphasizes prevention because we know that addressing challenges before they start is more effective and also more time and cost efficient.<sup>xliii</sup> That said, young children and families need support across a continuum of intervention and treatment too and F5MC acknowledges that: a) families with acute needs also need support; and b) sometimes treatment can also be seen as prevention e.g., treating trauma prevents recurrence and prevents it from being passed along.<sup>xliv</sup>

## Skills, Assets, and Expertise

In alignment with our mandate, F5MC has played and continues to play a unique and essential role in the county. We take a bird’s eye view across systems, services, and sectors to address the holistic needs of children and families: We have been successful in supporting the **coordination** of direct services to children and families and in our work to **integrate and align systems** to close gaps and build bridges for early childhood.<sup>xlv</sup> We learned through third-party research that we are considered by systems partners as the county’s lead expert in early childhood: We are seen as an effective **thought-partner, thought-leader and advocate** for the importance of early childhood and what young children and their families need to thrive.<sup>xlvi</sup> This expertise contributes to the success of all of our work, including how we approach **capacity building** among administrators, providers, and caregivers: evaluation of our capacity building activities suggests they lead to improvements in the **quality** of care to young children and families.<sup>xlvii</sup> F5MC is also a conduit for **raising and directing funds** towards early childhood and expert in administering those funds to foster greater collaboration and encourage best practices among service providers.



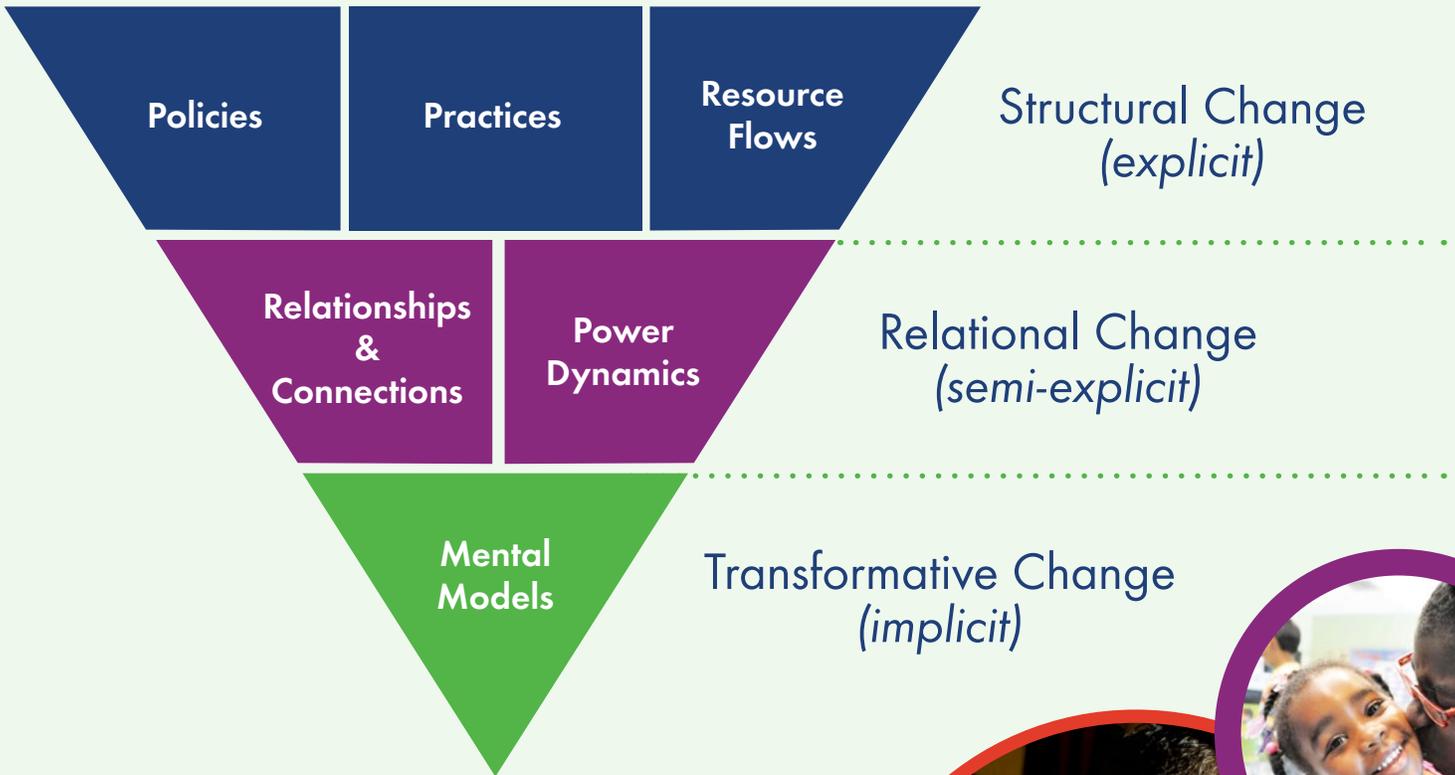
# Scale of Change

Solving problems effectively means addressing causes more often than symptoms. In social change work, where we strive to support the wellbeing of not just one or a handful of people but hundreds and even thousands, we must look to the underlying factors that affect them all.

Root causes like trauma, structural racism, and poverty stem from challenges within our systems: collectively experienced but also collectively imposed and sustained – by the policies, practices, and resource flows of our institutions and by the relationships, connections, power dynamics and mental models or beliefs that shape our individual, organizational and communal behavior. F5MC knows that the most promising strategies for deep and broad social impact lie at the systems level. Understanding these ways that our systems initiate and hold problems in place also offers keys to those problems’ solutions. This lens informs our work – not just to connect and integrate systems for early childhood but to *transform* systems in a way that supports the wellbeing of children and families at the root. Figure 4 explains the conditions of systems change that need to be shifted.

Figure 4:

## SIX CONDITIONS OF SYSTEMS



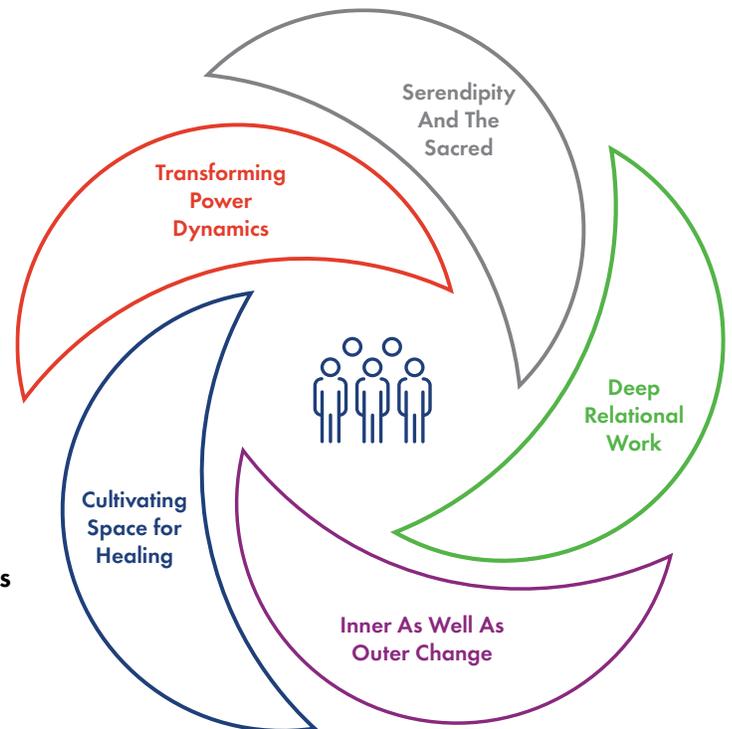
Source: Kania, Kramer, and Senge. "The Water of Systems Change." FSG. 2018



Figure 5 explores how to effectively shift the subtler and more easily-entrenched parts of our systems and society i.e., the bottom of the triangle in Figure 4 – relationships, power dynamics and mental models. Both of these frameworks are aligned with F5MC’s values and shape the *what* and *how* of our systems change work.

- F5MC cultivates **deep relationships** with partners and supports partners to build relationships with each other and with children and families.
- F5MC emphasizes **inner as well as outer change** by encouraging reflective practice for staff and partners and noting that REDI work requires “being the change we wish to see in the world”. F5MC also promotes programming that offers reflective spaces for families to learn and grow along with their children.
- F5MC has cultivated and will continue to grow our efforts to **cultivate spaces for healing**, particularly in our emphasis of mental health support for providers, children and families and in seeking culturally-affirming, asset-based approaches to care and learning.
- F5MC seeks to **transform power dynamics** by supporting families to be at the center of our work. Families co-developed the strategic priorities outlined below; families have and will continue to choose and design programs that work best for them; and F5MC is taking steps to increase family leadership in grantmaking and governance and help grow families’ decision-making power not only at F5MC but across the county as advocates for early childhood.
- As F5MC practices moving away from either-or thinking, quantity over quality, perfectionism, and urgency<sup>xlviii</sup> we are making more time and space for **serendipity and the sacred**. What we know is that healing often requires accessing resources that are beyond our material reality. Often, for example, families use culture and spirituality as resources to support them through challenging times.

**Figure 5:**  
**HOW SYSTEMS SHIFT**



Source:  
Milligan, Zerda, and Kania.  
“How Systems Shift.”  
Collective Change Lab. 2020



## Core Roles

Taken all together, F5MC's values, expertise, approach to systems-focused social change, and emphasis on serving those most impacted presents a clear direction about where and how F5MC is best-positioned to support the field of early childhood development in Monterey County. F5MC will play these three core roles:

- Early childhood development **Champion** and advocate
- Whole child, whole family, whole **Systems Connector**
- Healing-focused, relationship-based, quality-driven **Capacity Builder**



FIRST 5 MONTEREY COUNTY'S

# Priorities & Objectives for Change

While current challenges are significant, Monterey County has the creativity, passion, power, and collective resources to rise in stronger support of young children and families with the kind of environments, systems, and services they need to thrive.

This framework was developed alongside systems and community partners to bridge the gap between current context and our ideal vision by working to elevate early childhood as a priority, strengthen connections and advance quality within a whole system of care and support.



The objectives below reflect community-wide aspirations and achieving them will require a collective effort. The strategies below describe F5MC’s intended contribution to advancing those objectives given the scope of what’s possible for F5MC to achieve with the proper support and funding. Defining the details of the plan *beyond* this framework, i.e., deciding what programs and activities support each strategy and how to design and implement them, will be an ongoing process involving both community and systems partners.

Figure 6:

**STRATEGIC PLAN FRAMEWORK  
PRIORITIES FY 2023 – 2029**

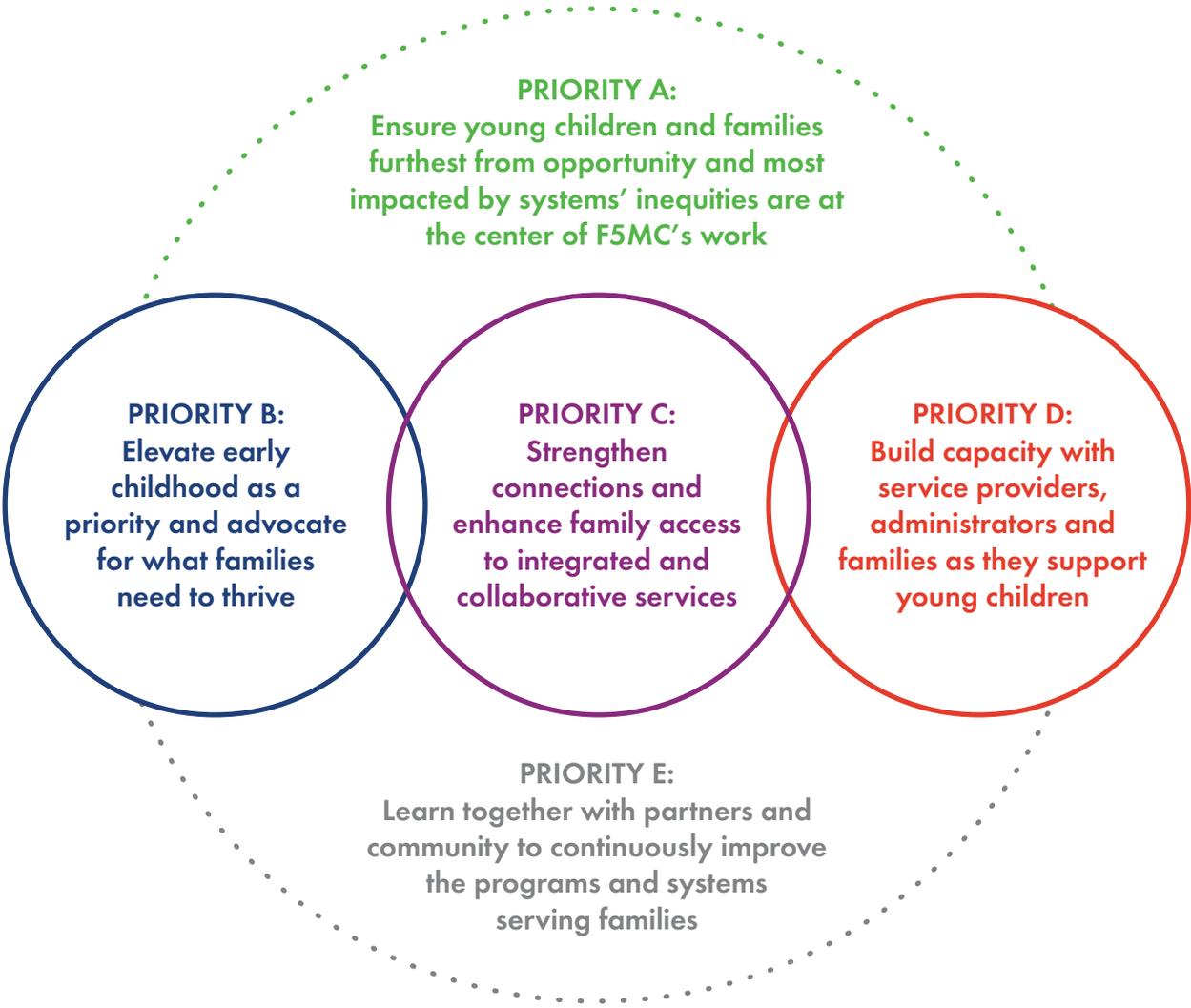


Table 2:

## PRIORITIES, OBJECTIVES AND STRATEGIES

### PRIORITY A:

Ensure that young children and families furthest from opportunity and most impacted by systems' inequities are at the center of F5MC's work

#### PRIORITY A OBJECTIVES

#### PRIORITY A STRATEGIES MAY INCLUDE:

**Opportunities increase for community<sup>1</sup> to have power and influence over decisions that impact them**

- Develop ongoing partnerships with community-building organizations, supporting the capacity of impacted residents in their growth as leaders
- Include community in strategy implementation, program design, and operations
- Include families in decision-making roles governing the services and systems that support them
- Mentor families served into paid roles, including decision-making roles
- Co-develop programs with community to ensure they're inclusive, responsive, and culturally-affirming

**Quality services are distributed equitably in Monterey County, ensuring that historically underserved populations have access**

- Identify historically underserved target populations and learn about their strengths, needs, supports and barriers to access by collecting data, conducting outreach, and building relationships with systems and community partners connected to those most impacted
- Locate F5MC funded services in identified priority areas
- Co-develop programs with community to ensure they address the strengths, needs, supports and barriers identified above

**Systems are accountable to those who have been historically excluded from decision making, including communities of color**

- Employ equitable practices within F5MC operations, programs, activities, and among funded partners
  - Support intentional and consistent use of interpretation, translation, and multilingual service providers
  - Engage in ongoing REDI learning, REDI-centered organizational change, and cultural humility development
  - Develop, track, report, and act on equity performance indicators
- Advocate more strongly for early childhood systems partners across agencies and sectors to employ equitable practices and center those most impacted in decision making

<sup>1</sup> Community here is defined as families of young children and their providers, especially those historically excluded from decision-making, such as communities of color.

## PRIORITY B:

### Elevate early childhood as a priority and advocate for what families need to thrive

#### PRIORITY B OBJECTIVES

#### PRIORITY B STRATEGIES MAY INCLUDE:

**Communities are engaged and connected in supporting the healthy development and wellbeing of young children**

- Spread public awareness and learning about early childhood through outreach, education and media presence
- Co-develop parent skills in community engagement and leadership

**Public policies and public funding prioritize early childhood, improving community level outcomes for all young children and families**

- Engage in campaigns and initiatives that benefit early childhood
- Engage with families in leadership around advocacy for early childhood

**Families are supported to have economic stability, including the resources essential to a healthy life and the time and energy to spend with their children**

- Support advocacy for family friendly policies and systems
- Engage in campaigns and initiatives that support families having economic stability

## PRIORITY C:

### Strengthen connections and enhance family access to integrated and collaborative services

#### PRIORITY C OBJECTIVES

#### PRIORITY C STRATEGIES MAY INCLUDE:

**Pregnant parents and families with young children (especially currently and historically underserved populations) are better able to access the services they need at the earliest point needed**

- Develop service hubs (virtual or physical) to support family connection to needed services
- Meet families in the places and systems they typically connect with to facilitate better links to supports
- Support providers to be better systems navigators for families
- Support families in building sustainable navigation skills

**Systems and community partners are aligned on strategies and approaches for early childhood systems change (e.g., filling service gaps, prioritizing prevention) and dedicate time, staff, resources and money in support of those strategies' implementation**

- Facilitate "systems tables" where administrators, providers, and community representatives come together to address gaps and develop solutions
- Cultivate systems partnerships to address program and system gaps/make connections, support referrals, deepen collaboration
- Match funding opportunities to local early childhood needs; identify and convene funded partners to plan for local implementation

## PRIORITY D:

### Build capacity with services providers, administrators and families as they support young children

#### PRIORITY D OBJECTIVES

Services and practitioners for pregnant parents and families with young children demonstrate high levels of quality, support whole-family wellbeing and center equity

Families feel valued and supported in becoming self-reflective and healing-oriented and in developing trust in themselves as caregivers of their children

Families engage in individually and developmentally appropriate behaviors to support children's development

#### PRIORITY D STRATEGIES MAY INCLUDE:

- Implement professional development, including connecting diverse service providers and administrators, that supports community building, co-development of assets, resilience, and healing
- Support advocacy for programmatic alignment with ECE quality criteria in early childhood programs, including those in school systems
- Support families in parenting development opportunities that build connections, community, self-efficacy, resilience, healing and knowledge
- Co-develop programs with those they seek to serve to ensure they're inclusive, responsive and culturally-affirming
- Support families in parenting development opportunities that build connections, community, self-efficacy, resilience, healing, and knowledge
- Co-develop programs with those they seek to serve to ensure they're inclusive, responsive and culturally-affirming



## PRIORITY E:

Learn together with partners and community to continuously improve the programs and systems serving families

### PRIORITY E OBJECTIVES

### PRIORITY E STRATEGIES MAY INCLUDE:

**F5MC partners and programs use data to improve systems and program connectivity, quality, and equity**

- Work with partners and community members to identify and track meaningful indicators of systems/program connectivity, quality, and equity
- Work with partners and community to further explore how systems and programs are performing for families of different backgrounds and experiences (e.g., by race/ethnicity, ZIP Code, and other characteristics that partners and community would help us identify)
- Work with partners and community to interpret data collected on systems/program performance, identify inequities in systems and services, and develop strategies for continuous quality improvement

**Systems serving children and families use data to improve systems connectivity, quality and equity**

- Work with community and community organizations to identify where community wellbeing isn't being appropriately measured or where wellbeing isn't being measured for priority populations (e.g., for Monterey County residents based on race/ethnicity, zip code, age and other characteristics community members identify as important for understanding root causes)
- Work with community and community organizations to advocate for and support collecting data to fill measurement gaps
- Work with community and community organizations to interpret data on community wellbeing and use to advocate for change

F5MC strategies primarily target systems and services so that they are ready for and inclusive of the needs of children and families. Ultimately, all the strategies that F5MC employs at the system, service, community, or family level are meant to improve outcomes for all young children in the county so that:

**CHILDREN recognize and are recognized for their inherent strengths and assets.**

**They are healthy, well-cared for and ready for school and life.**

- Children receive early and timely developmental supports and services
- Children receive early and timely healthcare supports and services
- Children experience diverse, high-quality early learning opportunities, including play, nature, art, music, and social interactions
- Children have supportive, healthy relationships, and feel connected, respected, secure and loved
- Children have a sense of agency and see themselves as competent, curious learners
- Children are supported in co-regulating and develop self-regulation skills



# Keys to Success

In addition to the priorities, strategies, and objectives listed above, there are other ways we will live-into our areas of focus: centering community leadership and engagement, cultivating intentional systems partnerships, diversifying our funding, ensuring organizational integrity, and measuring our success and learning.

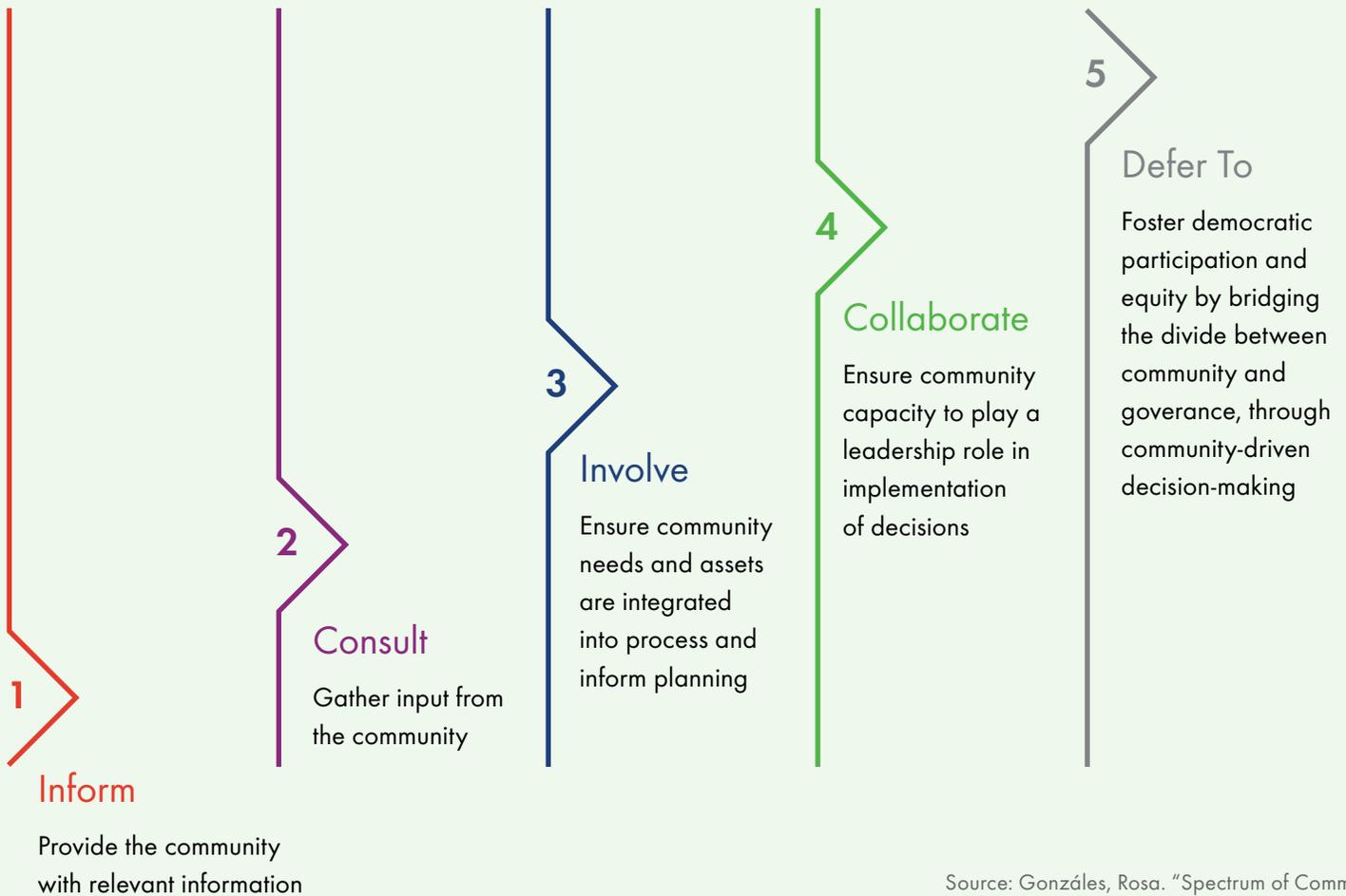
## Community Leadership and Engagement

In order to achieve the vision that the wellbeing of all young children and families will be nurtured by *responsive services, just and equitable systems, and safe and welcoming environments*, the distribution of power and resources must continue to shift. Those who have traditionally been excluded from participating in systems- and service-level decisions that impact them are, for the most part, still excluded or only marginally included. F5MC's overarching priority is that those whom F5MC serves are at the center of our work, which means that active, authentic community leadership and engagement is essential to the success of all of the strategies outlined above. Ideally, that engagement looks more like collaboration or shared decision-making (levels 4 and 5) versus just providing information to the community, or only seeking limited input or involvement (levels 1–3) on the Spectrum for Community Engagement shown in Figure 7.<sup>xlix</sup>



Figure 7:

## SPECTRUM OF COMMUNITY ENGAGEMENT TO OWNERSHIP



The Community Action Team assembled for this strategic planning process (see Appendix I) recommended incorporating community participation into existing F5MC planning and decision-making groups, conversations and processes at every level of the organization. Incorporating authentic community engagement at every level means ensuring community representation on F5MC Staff, on the F5MC Commission, and among F5MC Consultants and Contractors. It also means centering community leadership in F5MC grantmaking and strategy implementation. Processes for community engagement-to-power will continue to be developed over the course of this strategy cycle because F5MC understands that true inclusion means the organization must change to accommodate community members, rather than ask community to accommodate F5MC norms and processes.

# Systems Partnerships

The holistic wellbeing of children and families can be achieved through greater and more equitable access to services that are part of more cohesive and navigable systems. Equitable, cohesive, and navigable services and systems are only possible to achieve through dedicated collaboration and partnerships. F5MC will focus on facilitating the conditions for systems partners to collectively strive towards shared understandings and aligned actions similar to the following:

UNDERSTANDING	ACTION
<b>Child and family wellbeing is holistic and interrelated</b>	Partners commit to supporting whole-child, whole-family wellbeing
<b>The early childhood system has a broad scope (spanning across sectors and disciplines)</b>	Partners acknowledge their place/membership within the early childhood system
<b>Sustained connections with others in the system are critical to knowing about services and resources and supporting family linkage</b>	Partners commit to learn about what’s available and help link families to supports within and beyond their own organization / department / discipline
<b>Dedicated time, staff and funds are essential for the successful implementation of strategies for systems change</b>	Partners work with other systems and community stakeholders to align on strategies for systems change (e.g., filling service gaps) and dedicate time, staff and money in support of those strategies’ implementation
<b>Organizations that interface with young children and families can support higher-quality service delivery when they engage in the systems change principles listed above (e.g., inner as well as outer change, deep relational work, transforming power dynamics and centering spaces for healing) at every level – from administration to operations to program and service delivery</b>	<ul style="list-style-type: none"> <li>• Systems allow themselves to be accountable and responsive to those who have been historically excluded from decision-making</li> <li>• Systems leadership (e.g., administrators, managers, policymakers) has space to reflect in support of their personal and professional development</li> <li>• Leadership has special knowledge of early childhood</li> <li>• Leadership is culturally humble and policies are culturally-affirming</li> <li>• Policies, practices, priorities, and programs are trauma-informed and healing-centered across the board i.e., including for organizations/ departments/ personnel that don’t have an explicitly healing purpose such as those who offer employment, income or housing support</li> </ul>



## Sustainability

The success of this plan relies not only on strategic partnerships but also funding partnerships. Proposition 10 created First 5s to administer tobacco tax dollars across the state in support of early childhood. F5MC has been utilizing its Proposition 10 income and fund reserves to maintain program activities through the current Strategic Plan Funding Cycle. Due to declining tobacco sales and the depletion of reserves, F5MC can no longer rely on Proposition 10 dollars to fund community programs without leveraging other funds. The good news is that, while Prop 10 has represented a major portion of F5MC’s budget to date, approximately 40% of the current revenues come from other grants, leveraging opportunities, and investments. Over the next six years, F5MC intends to increase our capacity to raise and leverage funds for early childhood in Monterey County through philanthropy, public funds, and managed care opportunities. We have established ourselves as a successful fund administrator – fostering collaboration, imbuing our values and best practice approaches, and supporting quality among our funded partners – but we are also committed to using our influence to direct funding to early childhood programs and services in Monterey County to support the entire ecosystem regardless of whether or not those funds are administered by F5MC.

## Organizational Integrity

F5MC understands the importance of walking our talk, and of making sure that internal organizational practice reflects the best practices we recommend for families and partners. Examples of “inner as well as outer change,” which support operational success, include:

- Continue with healing and reflective spaces for F5MC staff;
- Continue to evaluate and improve F5MC organizational REDIness in all programs and policies;
- Ensure sufficient F5MC staff capacity in terms of time, energy, and expertise to successfully implement the strategy; and
- Form a strategy implementation team with community partners to oversee programmatic and organizational changes at F5MC and keep track of bigger-picture goals.

## Accountability

The success of this plan will be measured in terms of the alignment of F5MC's activities with the priorities and strategies listed above and by progress made towards the corresponding objectives. As previously mentioned, the objectives reflect community-level outcomes to which F5MC aspires and invites partners to aspire as well. While we can only be responsible for our part (i.e., the successful implementation of our strategies), we commit to tracking community-level indicators and using the data to advocate for partners to join forces in addressing county-wide barriers to the wellbeing of young children and families.

With that in mind, success of the strategic plan should also be measured in terms of the strength of F5MC's community and systems partnerships and the extent to which F5MC's activities operate within our chosen areas of focus (see Section IV), particularly our values, our commitment to systems change, and our focus populations and geographies.

Given that the success of this strategy depends on the participation of a broad range of stakeholders, the same stakeholders must also be included in the tracking and reporting of the strategy's success. F5MC commits to remaining accountable to ourselves (staff and Commissioners), our funders and partners, those we seek to support (providers and families), and to the general public as a steward of tax dollars. F5MC will continue to measure and share the results of the collective efforts towards the strategy's objectives in order to learn and grow together and to adapt, revise, repair and/or reinforce our approaches so that:

One day, the wellbeing of all young children and families will be nurtured by *responsive services, just and equitable systems, and safe and welcoming environments.*



## Appendix I: Strategic Planning Process and Methodology

The strategic planning process, which began in September 2021, engaged a broad range of stakeholders and drew from a diverse set of sources to shape the organization’s priorities over the next six years. These stakeholders and sources include:

- COLIBRÍ learning series with community and systems partners
- Community Action Team-led community research
- Staff and commissioner interviews
- Systems peers and partners interviews
- Outcomes evaluation research related to F5MC activities in policy, care coordination, and capacity building – conducted by Social Policy Research Associates
- Collaborative Learning Group meetings, including staff from F5MC’s funded partner collaboratives
- Community data and reports and other F5MC community research

**COLIBRÍ:** Starting in August 2021 and lasting one full year, F5MC participated in an intensive learning and working series with Monterey County regional government institutions, other systems partners, and community leaders coming together to advance racial equity in the region. The series was facilitated by Building Healthy Communities, Race Forward and Facilitating Power and became known as COLIBRÍ: Collaboratively Organizing for Liberation, Inclusion, and Breaking Racial Inequities.

*COLIBRÍ’s guiding vision: “The systems and structures that shape the lives of community members are working together collaboratively toward lifting up children, youth, families and residents that have been harmed the most by racial inequities. Individuals most impacted are centered in decision-making spaces to transform the culture and policies, identifying and using their collective power to take ownership of institutions/systems.”<sup>1</sup>*

Every month Learning to Action teams – focused on different issue areas and consisting of resident leaders, community organizers, service providers, and systems staff met to co-develop a racial equity plan, guided by the Targeted Universalism<sup>li</sup> framework. For F5MC, this racial equity plan formed the basis for our Strategic Plan. Every other month participants would virtually gather in “Big Tent” sessions to hear from local and national thought leaders on racial equity practices.

Within this container F5MC, alongside twelve other systems and community leaders:

- Decided on a universal goal for early childhood (which now serves as F5MC’s vision statement);
- Developed a shared analysis of the current state of children and families in Monterey county, including an understanding of underlying root causes that challenge child and family wellbeing;
- Identified target populations to focus F5MC’s resources and efforts on children and families who are most harmed by racial inequities and systems failures; and
- Designed a plan, inspired by the Spectrum for Community Engagement to Ownership<sup>lii</sup>, to build community ownership of the strategy and ensure F5MC stays accountable to those it serves throughout strategic planning and implementation processes.

Systems and community leaders in the 2021–2022 COLIBRÍ cohort included:

- Elizabeth Ambriz, *Community Leader and Facilitator*
- Jacqueline Hernandez, *Community Leader*
- Ana Hernandez, *Community Leader*
- Liliana de la Fuente, *Community Leader*
- Maria Carmen Parra, *Community Leader*
- Lilia Chagolla, *Central California Alliance for Health*
- Cristina Sotelo, *Community Mental Health Advocate*
- Relindis Diaz, *Department of Behavioral Health*
- Vivette Catipon, *Early Education Trainer*
- Tiffanie May Morla, *Department of Public Health*

**Community Action Team:** Beyond the container of the COLIBRÍ learning series, F5MC also developed a Community Action Team, including community leaders from the series and other organizers representing families from across the county and affiliated with the following organizations:

- Center for Community Advocacy (CCA)
- Mujeres en Acción
- Mamas de Salinas Abogan
- Líderes Campesinas
- Monterey County Black Caucus
- Padres Unidos

These organizers helped plan, present at and facilitate community focus groups, then – alongside F5MC – synthesized findings and developed recommendations. Approximately 100 parents, caregivers and community members participated in 1–3 conversations about their dreams, challenges, and priorities for the young children in their lives. The strategy framework was co-developed with the Action Team and then put back in front of approximately 45 members of the original focus group respondents and the COLIBRÍ cohort for their feedback and revision, and to identify funding priorities.

Engaging in COLIBRÍ and the Community Action Team was about so much more than collecting inputs for the strategic planning process. F5MC participated in these experiences in order to learn and practice embedding more authentic community engagement and community power in our work. “The Spectrum for Community Engagement to Ownership” has become a guiding framework that will continue to influence us over the next chapter as this strategic plan unfolds. Author Rosa Gonzáles says that every step along the spectrum is important, but true community power is possible when organizations and systems work at Steps 4 and 5 (see Figure 7).<sup>liii</sup>

## Systems peers and partners interviewed

(including interviews from Outcomes Evaluation Research<sup>liv</sup>):

- Chris Lopez, Board of Supervisors
- John Phillips, Board of Supervisors
- Mary Adams, Board of Supervisors
- Wendy Askew, Board of Supervisors
- Bruce Taylor, Business Leader
- Deneen Guss, Office of Education
- Dan Baldwin, Community Foundation for Monterey County
- Erik Cushman, MC Weekly
- Eduardo Ochoa, Academic Leader
- Margaret D'Arrigo, Hartnell College
- Monica Lal, Monterey Peninsula Chamber of Commerce
- Paul Farmer, Salinas Chamber of Commerce
- Charles McKee, County Administrative Office
- Alma Cervantes, Action Council
- Michael Applegate, Bright Futures
- Diana Jimenez, Department of Social Services
- Marni Sandoval, Department of Behavioral Health
- Krista Hanni, Department of Public Health
- Sonja Koehler, Bright Beginnings Early Childhood Initiative
- Angie Ramirez, CAPSLO
- Megan Matteoni, Quality Matters
- Patricia Quezada, FCC (licensed home educator)
- Katy Castagna, United Way
- Elsa Mendoza Jimenez, Department of Public Health
- Laura Neal, Department of Social Services
- Hilary Gillette-Walch, Central California Alliance for Health
- Kathleen McCarthy, Central California Alliance for Health
- Ella Harris, Department of Public Health
- Ed Moreno, Public Health Bureau
- Tara Crampton, Office of Education
- Dana Edgull, Department of Behavioral Health
- Sabino Lopez, Center for Community Advocacy
- Ginger Pierce, Child Abuse Prevention Council
- Lori Luzader, Special Kids Connect

## Other sources reviewed:

- First 5 Monterey County. Strategic Planning Process Community Research Notes. 2016.
- California Institute of Rural Studies. Farmworker Housing Study – Salinas and Pajaro Valley. 2018.
- Monterey Community Action Partnership. Needs Assessment. 2019.
- IMPACT Monterey County. Community Assessment. 2019.
- California Institute of Rural Studies. COVID-19 Farmworker Study. 2020–2021.
- Regions Rise Together. Community Engagement Working Group Report. 2021.
- Regions Rise Together. Salinas Investment Plan Blueprint. 2021.
- First 5 Monterey County. Collaborative Learning Groups research on ARPA, systems gaps and CCECAN. 2021–2022.
- First 5 Monterey County. Period 1 Reporting Collaborative Data. 2021–2022.
- Central Coast Early Childhood Advocacy Network. Community Survey. 2022.

The 2023–2029 Strategic Planning Process was facilitated by Lindsay Bellows, Heart of Strategy.

## Appendix II: Additional Data on Current State of Children and Families in Monterey County

Table 3:

### ADDITIONAL DATA FOR CURRENT CONTEXT OF CHILDREN AND FAMILIES IN MONTEREY COUNTY, CONTINUED FROM TABLE 1

ASPIRATION	MOST RECENT DATA TO CONTEXTUALIZE ASPIRATIONS
<p><b>CHILDREN</b> recognize and are recognized for their inherent strengths and assets. They are healthy, well-cared for and ready for school and life</p>	<ul style="list-style-type: none"> <li>43% of children have at least 1 adverse childhood experience, as reported by a parent.<sup>lv</sup></li> <li>27% of 3<sup>rd</sup> graders meet or exceed English Language Arts standards (21% of Latinx 3<sup>rd</sup> graders compared to 56% of white 3<sup>rd</sup> graders).<sup>lvi</sup></li> <li>53% of children 0-14 months received at least 6 well child visits in the prior year; 64% of children 3 to 4.99 received one annual well child visit in the prior year.<sup>lvii</sup></li> </ul>
<p><b>FAMILIES/ CAREGIVERS</b> recognize and are recognized for their inherent strengths and assets. They are well-connected, well-respected and supported in caring for their children</p>	<ul style="list-style-type: none"> <li>20% of new mothers surveyed experienced food insecurity while pregnant.<sup>lviii</sup></li> <li>A family of 4 (2 parents, 2 children) requires 3 full time jobs to make ends meet when parents are employed as farm workers or in other minimum wage jobs.</li> <li>50% of families read to their children every day; 41% of families take their children out of the house everyday.<sup>lix</sup></li> </ul>
<p><b>SERVICES</b> that families might need are high-quality, accessible, plentiful, and responsive to families' needs</p>	<ul style="list-style-type: none"> <li>The cost of child care is more than double what the CDC considers "affordable" for a toddler and more than triple that amount for an infant.</li> <li>The child care workforce is paid low wages leading to high turnover.<sup>lx</sup></li> <li>Care coordinators and families report shortages in mental healthcare for children and parents.<sup>lxi</sup></li> <li>Families report being denied care or service when they believed they were entitled to it.<sup>lxii</sup></li> <li>Families report language barriers in receiving care or service and providers often do not share families' race, ethnicity, or lived experiences.<sup>lxiii</sup></li> <li>Providers are not always trained to address the specific needs of young children 0-5 and their families.<sup>lxiv</sup></li> </ul>

# Endnotes

- i The vision statement (otherwise referred to as our universal goal), impact areas, strategic priorities, and many elements of the strategic plan were co-developed with community partners. See methodology section in the appendix.
- ii Proposition 10 – The California Children and Families Act Statute. Amended 2011.
- iii Bronfenbrenner, U. “Ecological systems theory”. In U. Bronfenbrenner (Ed.), Making human beings human: Bioecological perspectives on human development. Sage Publications Ltd. 1992.
- iv Center For The Study Of Social Policy. “Strengthening Families Protective Factors Framework.” Accessed 2022.
- v Feeding America. Map the Meal Gap. 2020.
- vi U.S. Census Bureau. American Community Survey. Presented by Kids Data. 2020.
- vii Monterey and San Benito Counties combined. Population Reference Bureau, analysis of U.S. Census Bureau American Community Survey public use microdata. Presented by Kids Data. 2019.
- viii First 5 Monterey County. Kindergarten Readiness Assessment. 2015. Note: The next F5MC School System Readiness Assessment is underway as this report is being written. School System readiness puts the onus on systems, not children, to ensure they’re ready to support children’s holistic well-being.
- ix Central California Alliance for Health (CCAH). Data for children served by CCAH/medi-cal that have been enrolled in the program for at least 11 of the past 12 months. 2021.
- x California Department of Public Health. Maternal and Infant Health Assessment (MIHA). Monterey County. 2016–2018.
- xi United Ways of California and B3 Consults. The Real Cost Measure in California. Monterey County Profile. 2021. Data calculated for this geographic profile is from 2019.
- xii First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xiii First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xiv First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xv California Child Care Resource and Referral Network, California Child Care Portfolio. 2021 data (accessed in May 2022); U.S. Census Bureau, American Community Survey public use microdata. Presented by Children Now’s California County Scorecard of Children’s Well-Being. 2023.
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- xix First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xx First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxi First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxii First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxiii First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxiv First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxv First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxvi Public Spending on Childcare and Early Education. OECD–Social Policy Division–Directorate of Employment, Labour and Social Affairs, n.d. Accessed on Web Portal. <https://www.newamerica.org/education-policy/reports/transforming-financing/putting-it-into-context/>
- xxvii Harris Poll, conducted for Fortune Magazine. 2022. National data. Also see: McKinsey & Company “The child care conundrum: How can companies ease working parents’ return to the office?” 2022.

- xxviii Othering and Belonging Institute, University of California-Berkeley. Web Portal. Accessed 2022. <https://belonging.berkeley.edu/targeted-universalism>
- xxix Danielson, C. and Bohn, S. "Geography of Child Poverty in California." Public Policy Institute of California. 2017.
- xxx First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxxi Cha, P with research support from Collins, J. "Health Care Access among California's Farmworkers." Public Policy Institute of California. 2022.
- xxxii First 5 Monterey County. Strategic Planning Primary Research. 2022. See appendix for detail on methodology.
- xxxiii CDC. Web Portal. Accessed 2022. <https://www.cdc.gov/ncbddd/developmentaldisabilities/about.html>
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- xxxv Qualitative assessments from systems partners working in social services and behavioral health, collected from the COLIBRÍ process. 2021–2022.
- xxxvi Centers for Disease Control and Prevention (CDC). "Racism and Health." Web Portal. Accessed 2022. <https://www.cdc.gov/minorityhealth/racism-disparities/index.html>
- xxxvii Cook, Lisa. "Racism Impoverishes the Whole Economy." New York Times. 2020.
- xxxviii Phillips, Katherine. "How Diversity Makes Us Smarter." Greater Good Magazine. 2017. Originally published in Scientific American. 2014.
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- xlii Oxford Languages in partnership with Google. Oxford University Press. Accessed from Google.com. 2022.
- xliii Heckman, James. Accessed from Web Portal. 2022. [heckmanequation.org/resource/invest-in-early-childhood-development-reduce-deficits-strengthen-the-economy/](http://heckmanequation.org/resource/invest-in-early-childhood-development-reduce-deficits-strengthen-the-economy/)
- xliv Ndefo, Nkem MSN, CNM, RN, is the founder of Lumos Transforms and creator of The Resilience Toolkit.
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