

# First 5 Sonoma County: Community Indicators Snapshot

March 2019



Prepared by:



LEARNING *for* ACTION

# About this Snapshot

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This report highlights high-level community indicators that provide a “snapshot” of the well-being of children ages 0-5. These proposed community indicators can help First 5 Sonoma County to:

- ☑ **Understand current needs**
- ☑ **Inform strategic planning**
- ☑ **Track county-level change over time**

As shown below, First 5 Sonoma County’s goals are intended to collectively contribute to the community indicators. Tracking these indicators over time will help assess progress toward First 5 Sonoma County’s vision that “children from the prenatal stage to age five will develop to their fullest potential.”

## *Strategic Plan Goal Areas*

**Goal 1: Ensure the health and healthy development of children**

**Goal 2: Ensure families are supported and nurturing**

**Goal 3: Ensure high-quality early care and education**

**Goal 4/5: Engaging the community to support children and families**

## *Community Indicators*

- **Kindergarten Readiness**
- **Early Care Quality**
- **Healthy Birthweight**
- **Health Insurance**
- **Dental Visits**
- **Child Abuse and Neglect**

In addition, we present a **summary of economic conditions** at the end of this snapshot (slides 10-11). Although First 5 Sonoma activities do not directly influence families’ economic conditions (e.g. self-sufficiency, cost of housing, etc.), it monitors these indicators due to their enormous influence on the physical and mental health and well-being of children and their families.

# Notes on Our Methodology

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First 5 Sonoma County staff and the Learning for Action team collaboratively chose indicators for this snapshot.

- We prioritized indicators where we see the most change anticipated with Commission investments and for which reliable data are available for children 0-5 at the county level. We also consulted the First 5 Association's recommendations for community indicators.
- In order to contextualize findings, we provide demographic breakdowns and geographical comparisons [between **Sonoma County data (reported in teal)** and the **state of California (reported in navy)**] when data are available.
- Indicators are not comprehensive and are intended to inform decision making, but not to be used in isolation. We also emphasize the importance of collecting qualitative data to learn about and assess the impact of First 5's work, and in particular gathering stories that uplift the voices and needs of families.

→ Refer to the document "**Additional Data and Supplemental Information**" for more detail about the data presented in this Snapshot, including data over time.



## Notes:

- We adapted some text in the "Why This Matters" boxes from other First 5 publications, including the Children and Families Commission of Orange County's Conditions of Children Report.
- We chose not to include data from California Health Interview Survey (CHIS), an oft-cited data source for indicators of interest to First 5, because the county-level, single-year data points are not reliable due to small sample size.

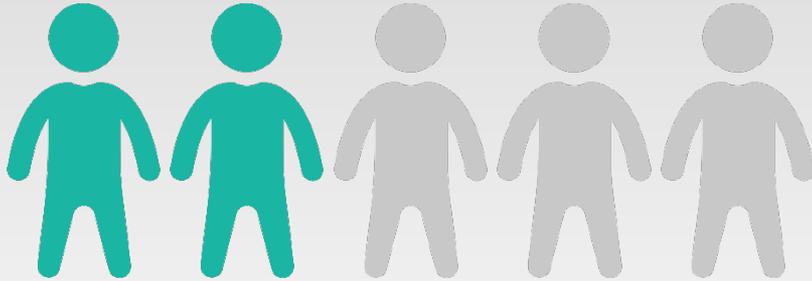
# Kindergarten Readiness

**% of children assessed as ready when entering kindergarten**

**Why does this matter?** A child's long-term academic success is heavily dependent upon their readiness for kindergarten. Children who enter school with early skills, such as basic knowledge of math and reading concepts as well as communication, language, social competence and emotional maturity, are more likely than their peers without such skills to experience later academic success, attain higher levels of education, and secure employment.

## Sonoma County

### Overall



**2 out of 5 kindergarteners in Sonoma County entered kindergarten "ready to go" in 2017-18.**

### Breakdown by home language

**Children who speak Spanish at home are far less likely to be ready for kindergarten than English Only students.**



**44% of English Only students** entered kindergarten "ready to go."



**29% of Spanish speaking (bilingual) students** entered kindergarten "ready to go."

*The readiness of Spanish speaking (bilingual) children increased 6 percentage points (from 23% to 29%) from the 2015-16 school year to 2017-18.*

#### Data Source:

- See [READY's 2017-18 Sonoma County School Readiness Report](#).
- READY has been partnering with Sonoma County school districts since 2015-16 to assess incoming kindergarteners using the Kindergarten Student Entrance Profile (KSEP). In 2017-18, READY assessed 1,647 students in 10 districts. (This is roughly 1/3 of Sonoma County kindergartners.)

# Early Care Quality

## % of sites participating in Quality Counts

**Why does this matter?** Quality Counts is a statewide and county-level initiative that helps promote quality in early care and education by providing information, resources, and support to programs and providers. Research shows that quality early learning programs can improve young children's development, enhance school readiness, help close the achievement gap, and improve children's social-emotional and cognitive outcomes.

### Sonoma County

#### Sonoma County Sites' Participation in Quality Counts (as of 2019)



(59 of 150) licensed **child care centers** participate in Quality Counts



(34 of 324) licensed **family child care centers** participate in Quality Counts

### California

#### California Sites' Participation in Quality Counts (as of 2018)



(3,844 of 12,656) licensed **child care centers** participate in Quality Counts



(2,438 of 28,283) licensed **family child care centers** participate in Quality Counts

#### Data Sources:

- Sonoma County: The number of licensed centers was provided by 4Cs of Sonoma County in January 2019. The number of QRIS participants came from a "Site QRIS Matrix Report," accessed through Sonoma County Quality Counts' online data system in January 2019.
- California: QCC Common Data File for FY 2017-18 and CDSS Community Care Licensing June 30, 2018. Numbers provided by Gretchen Williams at First 5 California.

# Healthy Birthweight

**% of babies who were not born at low birthweight**

**Why does this matter?** Infants born at a low birthweight, compared to infants born at a healthy weight, are at increased risk for experiencing developmental problems and delays and lifelong health difficulties. Risk factors that increase the likelihood of low birthweight include smoking, alcohol/drug use during pregnancy, multiple births, poor nutrition, maternal age, socioeconomic factors, domestic violence, and maternal or fetal infection.

## Sonoma County



**94% of newborns were not low birthweight** in Sonoma County in 2016.

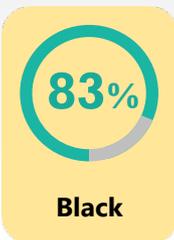
**Sonoma County ranks as #19 in the State of California** (out of 58 counties).



**Breakdown by Race/Ethnicity:** Black newborns are far more likely to be born at low birthweight; this disparity is also present at the statewide level.



Asian



Black



Latinx



White



Of another race/ethnicity

## California



**93% of newborns were not low birthweight** in California in 2016.

**Breakdown by Race/Ethnicity:** Black newborns are far more likely to be born at low birthweight, compared to newborns of other races/ethnicities.



Asian



Black



Latinx



White



Of another race/ethnicity

### Notes:

- Data Source: 2018-19 [Children Now Scorecard](#).
- To calculate "not low birthweight," Children Now included births that were greater than or equal to 2,500 grams. Data were obtained from the California Department of Public Health, Maternal Child and Adolescent Health Division.

# Health Insurance

## % of children under 6 years old with health insurance

**Why does this matter?** Improving health care access for all children helps to improve prevention, early diagnosis, and treatment of health problems. Compared to those without health insurance, children with health insurance are more likely to get timely prescription medications and medical or mental health care when needed; are more likely to get preventive care (including immunizations, dental care and vision screenings); and, overall, have better health outcomes. Unfortunately, it is possible that the percentage of children with health insurance could go down in future years due to the increasingly anti-immigrant political climate, including the proposed public charge rule currently under review by the Department of Homeland Security.

### Sonoma County



of Sonoma County children in 2017 under 6 years old **were insured** and **2.6% were uninsured**.

**Breakdown by Race/Ethnicity:** We do not have data available for children 0-5 specifically; however, for the overall population, Hispanic/Latinx people (of any race) are far more likely to be uninsured. 10.9% of Hispanic or Latinx people were uninsured in Sonoma County, compared to 3.1% of people who are White alone (not Hispanic or Latinx).

### California



of California children in 2017 under 6 years old **were insured** and **2.5% were uninsured**.

**Breakdown by Race/Ethnicity:** We do not have data available for children 0-5 specifically; however, for the overall population, Hispanic/Latinx people (of any race) are far more likely to be uninsured. 17.8% of Hispanic or Latinx people were uninsured in California, compared to 5.9% of people who are White alone (not Hispanic or Latinx).

#### Data Source:

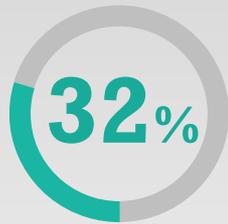
- [American Community Survey](#), 1-Year Estimates for Health Insurance Coverage in Sonoma County, California

# Dental Visits

**% of low-income children, ages 0-5, who have visited a dentist in the last year**

**Why does this matter?** Dental care is incredibly important for preventing and treating tooth decay, the most common chronic condition among children in the US. Untreated tooth decay can have many serious negative consequences including difficulty speaking (which can delay intellectual and social development), difficulty chewing (which can slow physical development and limit children's nutrition), and missed school days. Sonoma County children may be at an increased risk for dental disease due to lack of access to fluoridated public water, which has been shown to be the most effective public health measure for preventing dental disease.

## Sonoma County



**32%** of low-income children, ages 0-5, had visited a dentist in the last year in Sonoma County in 2016.

Sonoma County ranks as **#22** in the State of California (out of 58 counties).



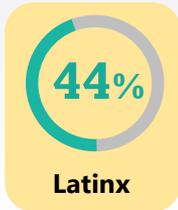
**Breakdown by Race/Ethnicity:** Children of all races/ethnicities had low rates of visiting a dentist. Latinx children were far more likely to have visited a dentist in the last year than children of other races/ethnicities.



Asian



Black



Latinx



White



Of another race/  
ethnicity

## California



**26%** of low-income children, ages 0-5, had visited a dentist in the last year in CA in 2016.

*This statewide rate is lower than the rate in Sonoma County.*

**Breakdown by Race/Ethnicity:** Children of all races/ethnicities had low rates of visiting a dentist. Latinx children were more likely to have visited a dentist in the last year than children of other races/ethnicities.



Asian



Black



Latinx



White



Of another race/  
ethnicity

# Child Abuse and Neglect

## Reports of substantiated abuse or neglect per 1,000 children

**Why does this matter?** The impacts of child abuse and neglect can be profound. Research shows that child maltreatment is associated with adverse health and mental health outcomes in children and families, and those negative effects can last a lifetime. Childhood experiences also have a large impact on future violence and perpetration. Ensuring safe, stable, and nurturing environments for children promotes their lifelong well-being.

### Sonoma County

### California

#### Child Maltreatment Substantiations: Incidence per 1,000 Children (ages 0-5) in 2017

**16.2**

Under 1  
year old

**5.4**

1-2  
years old

**5.1**

3-5  
years old

**22.7**

Under 1  
year old

**9.5**

1-2  
years old

**8.2**

3-5  
years old

**Breakdown by Race/Ethnicity:** The incidence of substantiated abuse or neglect was higher for black children 0-5, compared to other racial/ethnic groups. This is consistent with statewide trends; however, the county-level sample size is very small and we cannot draw definitive conclusions.

**Breakdown by Race/Ethnicity:** The incidence of substantiated abuse and neglect was much higher for Native American and Black children 0-5, compared to other racial/ethnic groups.

**0**

Asian/  
Pacific  
Islander  
(n=1,089)

**20.7**

Black  
(n=386)

**5.8**

Latinx  
(n=12,848)

**9.3**

White  
(n=13,903)

**6.1**

Native  
American  
(n=164)

**2.5**

Asian/  
Pacific  
Islander  
(n=328,314)

**34.1**

Black  
(n=142,749)

**11.5**

Latinx  
(n=1,525,853)

**9.3**

White  
(n=778,732)

**54.7**

Native  
American  
(n=6,742)

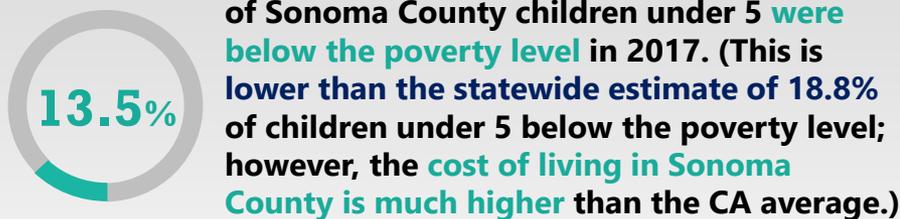
# Poverty and Self-Sufficiency Levels

**Why does this matter?** Families' economic status impacts children's housing, nutrition, health, safety, access to education and childcare, and more. Living in poverty can have a wide range of negative effects on children's health and development.

## Sonoma County

### Poverty Level among Children Under 5

Estimated percentage of children under 5 years old below poverty level



Federal poverty levels are used to determine families' eligibility for important benefits, such as Medi-Cal and Children's Health Insurance Program (CHIP). In 2017, the federal poverty threshold for a family of four was \$24,600. Improved measures are needed to better identify struggling families - the federal poverty level does not reflect variations in the cost of living across the US.

#### Data Sources:

- Poverty Status in the past 12 months, 1-Year Estimate. Accessed via [Census Bureau's American FactFinder](#).
- "[The Cost of Being Californian: A Look at the Economic Health of California Families Report](#)." April 2018. Insight Center for Community Economic Development.
- The Self-Sufficiency Standard for California 2018, Center for Women's Welfare, University of Washington. More information at <http://www.selfsufficiencystandard.org/california>

## Self-Sufficiency among Sonoma County Families

**% of Families that Live Below the Self-Sufficiency Standard**

Unlike the federal poverty level, the Self-Sufficiency Standard defines the amount of income necessary to meet basic needs without public subsidies and without private/informal assistance. It provides a "bare bones" budget that takes into account family size, reflects the actual costs of living, and includes housing, childcare, groceries, healthcare, transportation, some miscellaneous items (clothing, shoes, diapers, nonprescription medicines, cleaning and household items, personal hygiene items, and phone service) and taxes.

As of 2018, the self-sufficiency standard for a family of four (two adults, one infant, one preschooler) is **\$94,004** per year in Sonoma County.



**44%** of all Sonoma County households with 1 or more children live below the Standard.

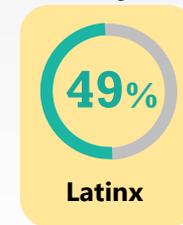
**Breakdown by Race/Ethnicity:** Sonoma County's Latinx families are by far most likely to fall below the Standard.



Asian/Pacific Islander



Black



Latinx



White



Native American

# Economic Factors Affecting Families

## Sonoma County

### Cost of Living

The costs of housing and childcare make Sonoma County unaffordable for many families. Affordable housing and childcare would go a long way towards helping families become self-sufficient.



The cost of living in Sonoma County is very high, at **78% higher than the US average** (as of 2019). (California's cost of living is **69% higher** than the US average.)

The average rent in Sonoma County is **\$1,887 per month for a two-bedroom** (compared to **\$1,723 per month in California**).



As of 2015, the annual per-child cost for full-year preschool serving 3- and 4-year olds was estimated to be **\$13,143**.

As of 2016, the average annual price of full-time, center-based care for infants was estimated to be **\$14,653**.

#### Data Sources:

- Cost of living and average rent found on [Sperling's BestPlaces](#).
- Cost of preschool found in American Institutes for Research Report ("Analysis of Options for Funding Universal Preschool in Sonoma County"). Cost of infant childcare data found in [2017 California Child Care Portfolio](#).
- Shortage of childcare data pulled from [Sonoma County Child Care Needs Assessment Update](#) (2014). This data will likely be updated soon. Additionally, there are low income families who fall just above the income threshold and don't qualify for subsidies, but cannot afford market rate care.

### Shortage of Childcare

There is a shortage of subsidized childcare in Sonoma County.

Percent of demand met for subsidized care in 2014 by age group:



For children under 2 years old (infants)

*4,400 infants qualified for subsidized childcare, but only 484 slots were available.*



For children 3-5 years old (preschool age)

*Shortage of 2,100 slots*