



**First 5 Madera County  
2020-2023  
Evaluation Report**

Developed by



## Evaluation Purpose and Questions

This document summarizes the findings from the evaluation of First 5 Madera County's implementation of its strategic plan from July 2020 through June 2023. As the Commission enters the final year of its strategic plan, it sought to strengthen its evaluation infrastructure, and document the progress and successes of its past efforts to inform the development of the next strategic plan.

The evaluation focused on addressing the following questions:

- How was the First 5 Madera County 2019-2024 Strategic Plan implemented?
- What factors facilitated and hindered implementation?
- How did children, primary caregivers, service providers, and organizations change or benefit as a result of the activities implemented and/or funded by First 5 Madera County?
- What lessons can be learned that First 5 Madera County can use to guide its future programs and grantmaking?

## Evaluation Methods

First 5 Madera County's 2019-2024 Strategic Plan was approved in June of 2019. The evaluation was retrospective, with program documentation from July 2020 through June 2023 available to the external evaluator, Hamai Consulting. No other data sources were available to the evaluation team. Hamai Consulting analyzed the following types of documentation:

- Content on the First 5 Madera County website
- Funded Program Charts
- Funded Program Updates
- Quarterly Summary Sheets
- Pandemic Program Revisions
- Annual Target Modifications
- Contract Monitoring Lists
- Mid-Year and Year-End Commission-Initiated Project Lists
- Mid-Year and Year-End Community-Initiated Funded Programs
- Contracts and Contract Extensions
- Budgets, Budget Narratives, and Budget Modifications
- Measurable Outcomes Plan
- State Forms
- CFC Forms
- Milestone Activity Reports
- Program Highlights
- Fiscal Collaboration Forms, Invoices, and Expenditure Reports

The evaluation results are limited to the information available within these documents.

## Implementing the First 5 Madera County 2019-24 Strategic Plan



### HISTORY

In 1998, California voters passed Proposition 10, the California Children and Families Act of 1998, a 50-cent tax on the sale of tobacco and e-cigarette products. These tax revenues are earmarked to support distributed throughout the state, with 80% going to each County Commission based on their birth rate. First 5 Madera County uses the Proposition 10 funds to support young children and their families in Madera County.



### VISION

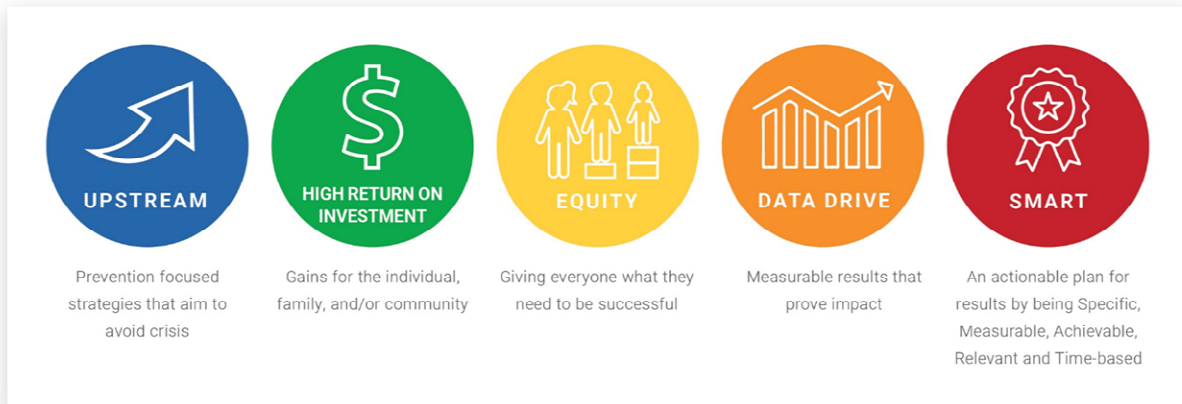
Madera County's success is measure by the well-being of its youngest children.



### MISSION

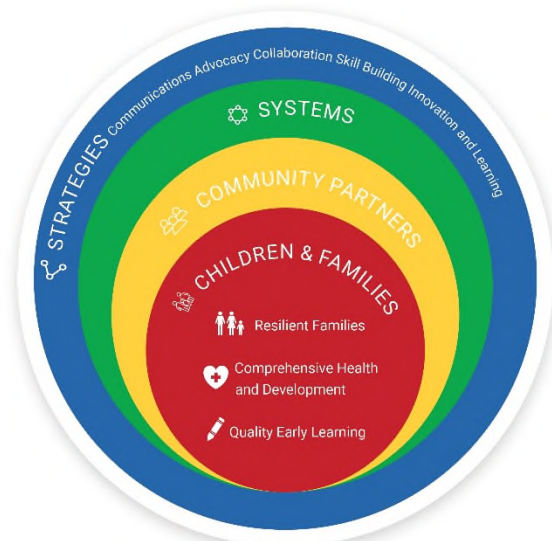
Enhance early childhood development, child health, and family involved by advocating, supporting, and providing access to early intervention systems.

First 5 Madera County intends to use the 5 Guiding Principles in its decision making:





First 5 Madera County is part of a larger countywide, regional, and statewide network of health, social service, family support, and early childhood education partners. This Network Strategy frames healthy children in the context of healthy communities, systems, and strategies.


With Proposition 10 funds declining over the past decade as fewer people use tobacco, the Network Strategy is evolving to focus on finding new and sustainable sources of funding and resources for family's system of care. This calls for coordinating, aligning, and streamlining high-quality efforts to serve all the county's children most effectively and efficiently.



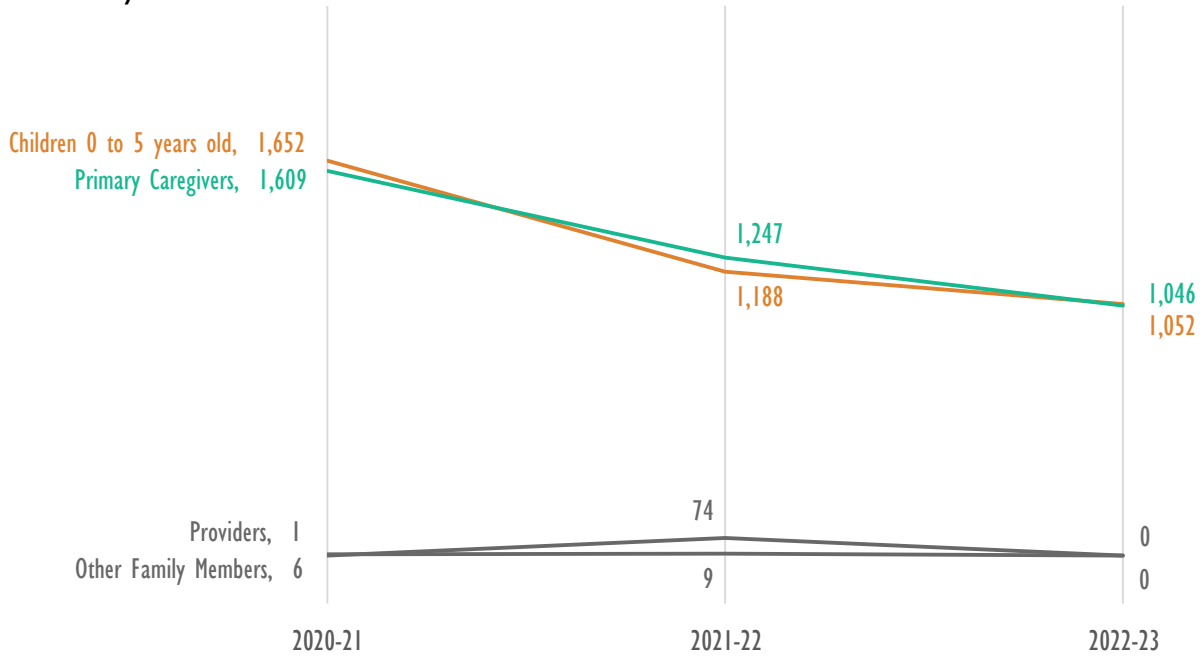
First 5 Madera County made investments in community-initiated strategies and funded and implemented Commission-initiated strategies to achieve its goals in child health, family involvement, and child development, as summarized in the table below.

 CHILD HEALTH		Promote the overall physical, social, and emotional health of young children.		
		2020-21	2021-22	2022-23
<b>GOAL 1: Expand opportunities to promote overall child health.</b>				
<i>Objective 1.1</i> Increase access to preventative health & developmental services	Community-Initiated	<ul style="list-style-type: none"> <li>• Chowchilla EUSD Dynamic Mindfulness</li> <li>• Camarena Health Preschool Healthy Lifestyle</li> </ul>		
	Commission-Initiated	<ul style="list-style-type: none"> <li>• Developmental Screening – ASQ (CASA)</li> <li>• Developmental Screening – ASQ (FRCs)</li> <li>• Vision Mobile Clinic</li> <li>• Pediatric Oral Health Advisory Committee</li> </ul>		
<i>Objective 1.2</i> Increase access to adequate nutrition & physical activity	Community-Initiated	<ul style="list-style-type: none"> <li>• Camarena Health Preschool Healthy Lifestyle</li> </ul>		
	Commission-Initiated	<ul style="list-style-type: none"> <li>• Breastfeeding Coalition</li> <li>• Healthy Food Accessibility</li> </ul>		
 FAMILY INVOLVEMENT		Cultivate parenting skills and enhance access to services.		
		2020-21	2021-22	2022-23
<b>GOAL 2: Improve family capacity to keep children safe from harm.</b>				
<i>Objective 2.1</i> Increase early intervention services for families at risk for maltreatment	Community-Initiated	<ul style="list-style-type: none"> <li>• Westside Family Preservation Services Network (WFPSN) Child Maltreatment Reduction Plan</li> </ul>		
	Commission-Initiated		<ul style="list-style-type: none"> <li>• PSP Program with DSS (FRCs)</li> </ul>	
<i>Objective 2.2</i> Reduce the harmful effects of tobacco and cannabis products	Commission-Initiated	<ul style="list-style-type: none"> <li>• Cannabis Campaign in partnership with CA HC</li> <li>• Smoke-Free awareness</li> </ul>		
<i>Objective 2.3</i> Increase parental knowledge and skill building around preventative injuries to children	Commission-Initiated	<ul style="list-style-type: none"> <li>• Child Passenger Safety Program</li> <li>• Safe Sleep Coalition</li> </ul>		

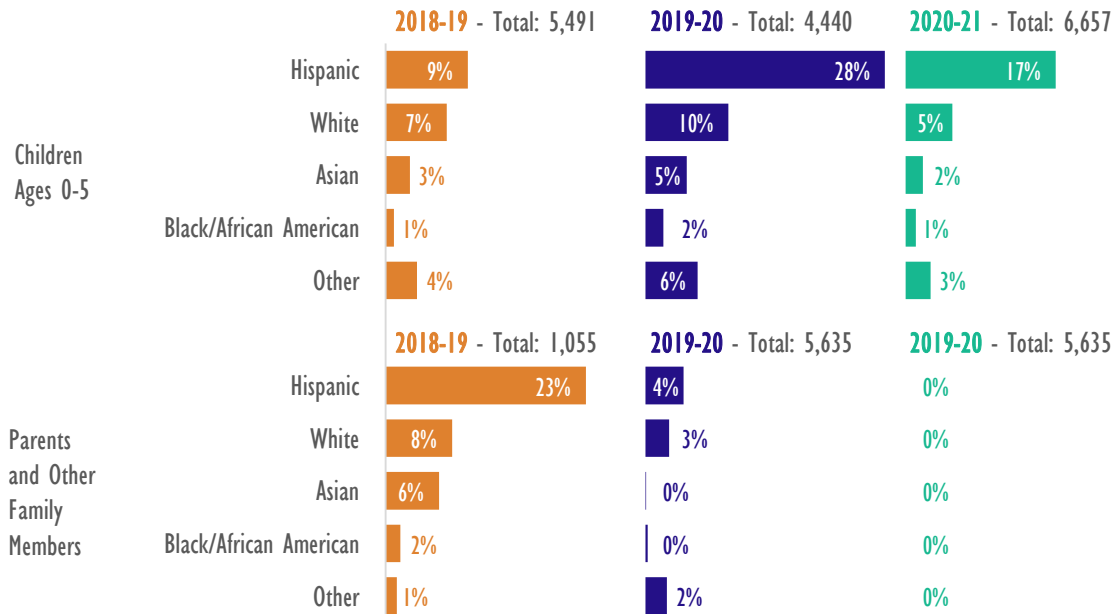


		2020-21	2021-22	2022-23
<b>GOAL 3: Increase community capacity to effectively promote family resiliency.</b>				
<i>Objective 3.1</i> Increase culturally sensitive professional development opportunities related to child maltreatment	Commission-Initiated		<ul style="list-style-type: none"> <li>Equity in Service Delivery Training</li> <li>5 Protective Factors Training</li> </ul>	
<i>Objective 3.2</i> Increase parenting interventions that are culturally sensitive	Community-Initiated	<ul style="list-style-type: none"> <li>Parent Cafés (CBDIO and Exceptional Parents Unlimited)</li> </ul>		<ul style="list-style-type: none"> <li>Triple P (CBDIO and WFPSN)</li> </ul>
	Commission-Initiated		<ul style="list-style-type: none"> <li>Parents as Teachers/Abriendo Puertas</li> </ul>	
<i>Objective 3.3</i> Increase access to social and concrete supports to reduce the effects of family isolation	Commission-Initiated		<ul style="list-style-type: none"> <li>Park Safety &amp; Walkability</li> <li>Resource Awareness</li> <li>Community Mobilization</li> <li>Transportation</li> </ul>	
 <b>CHILD DEVELOPMENT</b>				
<b>Ensure children have access to quality early learning experiences and environments.</b>				
		2020-21	2021-22	2022-23
<b>GOAL 4: Expand the capacity to serve children in quality early education</b>				
<i>Objective 4.1</i> Increase the availability of preschool programming that targets working and struggling families	Community-Initiated	<ul style="list-style-type: none"> <li>Camarena Health Preschool Healthy Lifestyle</li> </ul>		
	Commission-Initiated		<ul style="list-style-type: none"> <li>PreK University (PKU)</li> </ul>	
<i>Objective 4.2</i> Strengthen the early care and education workforce	Commission-Initiated	<ul style="list-style-type: none"> <li>IMPACT</li> </ul>		
<b>GOAL 5: Empower parents to be their child's first teacher</b>				
<i>Objective 5.1</i> Increase opportunities for quality parent-child interaction and activities	Community-Initiated		<ul style="list-style-type: none"> <li>City of Madera Reading and Beyond</li> </ul>	<ul style="list-style-type: none"> <li>Madera County Libraries Raising a Reader</li> </ul>
		<ul style="list-style-type: none"> <li>Madera County Libraries Backpack Literacy</li> </ul>		
	Commission-Initiated	<ul style="list-style-type: none"> <li>FRCs</li> <li>IMPACT</li> <li>Public Awareness Campaign</li> <li>Park Conversation Panels Project</li> </ul>		
<b>GOAL 6: Promote a “one-voice” message on the importance of early childhood</b>				
<i>Objective 6.1</i> Incorporate F5CA's Talk. Read. Sing. campaign in all programming	Commission-Initiated	<ul style="list-style-type: none"> <li>Talk. Read. Sing. Campaign</li> <li>IMPACT</li> </ul>		

The number of **children ages 0 to 5** and **primary caregivers** served has declined since 2020-21, while the numbers of **other family members** and **providers** served has been consistently low.

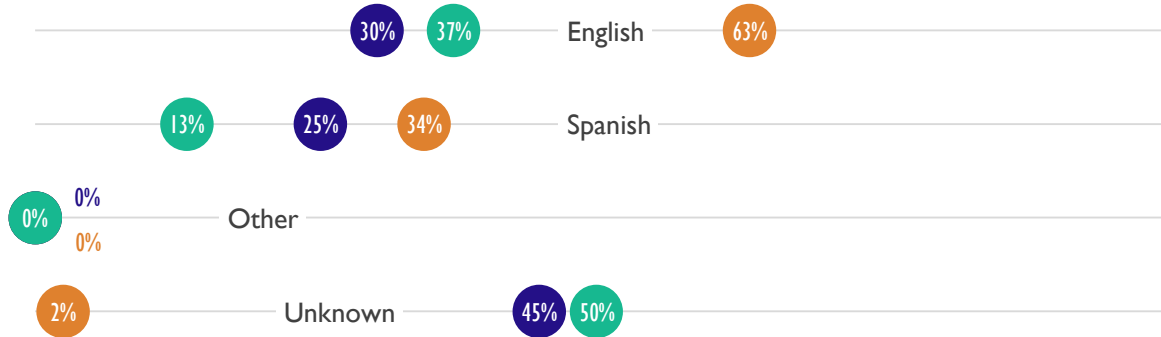


Contractors served more Hispanic children and their primary caregivers than people of other races/ethnicities; however, race/ethnicity is unknown for most people in 2021-22 and 2022-23.

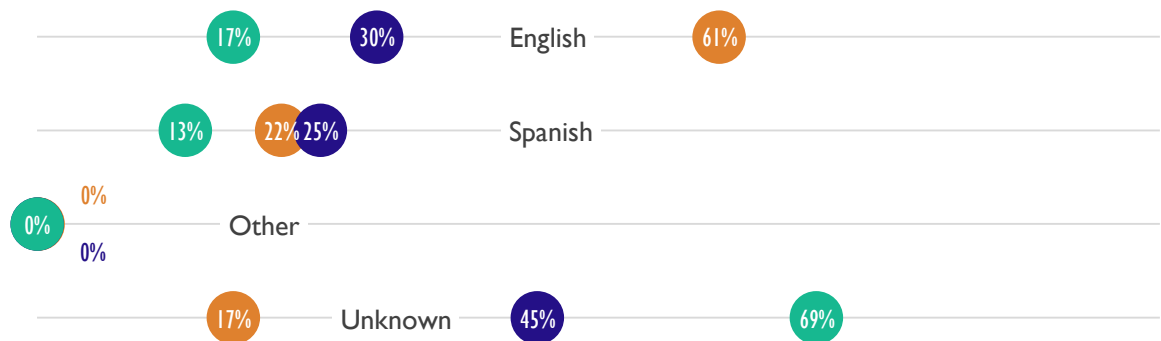


English was the most common primary language for children served by programs implemented and funded by First 5 Madera County in **2020-21**, **2021-22**, and **2022-23** (for those whose primary language is known). More children had English as their primary language in **2022-23** than their primary caregivers.

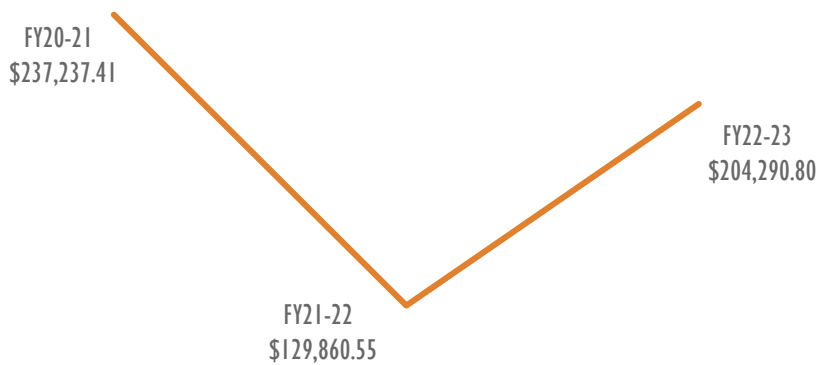
Children ages 0 to 5



Parents and Other Family Members



Expenses for grant-funded programs recovered in FY22-23, after services paused and shifted during the pandemic, but not to the pre-pandemic (FY20-21) level.



## **Outcomes for Children, Primary Caregivers, and Service Providers**

### **Goal 1: Expand opportunities to promote overall child health.**

The funded programs that provided developmental screenings and referrals increased awareness of available resources in the community and connected many families with medical and developmental services. Families received Ages and Stages (ASQ) kits and calming kits with activities to help with parent/child interactions and child development milestones. ASQ Specialists helped families to understand the importance of child health, family involvement, and a healthy family environment, and how these impact ASQ results. Specialists also educated families about the services at the FRCs. Primary caregivers increased their knowledge of developmental milestones and learned how to interact with their children. Participants reported feeling more confident and knowledgeable.

One parent connected with an ASQ Specialist, after feeling like she could no longer care for her baby with special needs. Through home visits, she received weekly support, such as weighted blanket and swaddling tutorials, and a referral to in-home support services. She reported feeling more confident in providing quality care and more proficient in accessing community resources. She said, "I understand how much work it takes and the importance of having patience and not giving up."

Children and families received referrals to services based on their ASQ results and made progress toward or reached their developmental milestones. For example, in one year at one FRC, 288 families participated in classes at the FRC, leading to 19 children receiving an ASQ screening. Of those children, 11 had identified concerns ranging from communication to social emotional behavior. Most of those concerns were improved through attendance of the FRC's PKU sessions. Families with more severe concerns received referrals to a more intensive program.

### **Goal 2: Improve family capacity to keep children safe from harm**

Programs, such as the Westside Family Preservation Services Network Triple P program, have anecdotal stories of how families are improving their capacity to care for and protect their children. Here are couple of those stories:

The Senior Educator met a 22-year-old, Native American mother who was living in her car with her four-year-old daughter in Oakhurst and connected her to the Triple P parenting class. The mother was experiencing substance use dependency and was clearly intoxicated when she showed up for the class. The Senior Educator discussed the effect that her drug use was having on her child, and the mother accepted help. After being put on a wait list for the Chukchansi Tribe's rehab facility in Stockton, she entered rehab with her child. The program staff have heard that she is doing well in rehab.

Another young mother reached out to a local church for help as she was fleeing domestic violence with her three children, all under 5 years old. She had been living in a series of



homes, but her abuser had tracked her down each time. The church connected her with Westside Family Preservation Services Network. Through their local referral network, they were able to secure enough funding for gas money, food, and water to get the family safely back to the mother's family in Southern California.

### **Goal 3: Increase community capacity to effectively promote family resiliency.**

Many primary caregivers participated in Parent Cafés and Triple P parenting classes, and some of those parents were trained as parent leaders of the Parent Cafés. Primary caregivers led these sessions. They discussed their worries and concerns, and shared strategies with each other to address their different challenges. Examples of the topics discussed include the pandemic, protections from evictions, and supporting their children with technology and homework despite not speaking English. The participants have shared that the timing of the sessions was perfect for them and their families. Other parents said:

“The cafés have encouraged me to participate in my child's school.”

“I have learned about my rights and feel more equipped to advocate for my children.”

“I learned how to support my child's self-esteem.”

The FRCs and other funded programs provided several types of social and concrete support to primary caregivers. Several parents expressed gratitude for learning about the various resources available to them in their community. They enjoyed connecting with other parents in the programs because they could hear about others' experiences and no longer feel alone.

Many families received diapers at the FRCs. They also received help with translation and filling out school applications, PG&E applications, utility applications, housing applications, EDD applications, and other non-legal forms. Some families who were stranded due to extreme weather conditions received water, food, and gas for generators.

### **Goal 5: Empower parents to be their child's first teacher.**

Several of the funded programs provided events, education, and resources for families to increase opportunities for quality parent-child interactions and activities. For example, a health fair for MUSD families provided basic health information, screening and testing, community resources, food sampling, and resources from local agencies.

The Computer Literacy Workshops at the Madera County Libraries helped almost all participants feel more confident in navigating their devices (86%-95%), using Zoom (86%), and using technology/the internet safely (100%). Most participants also felt more confident accessing child education media resources (91%), in their ability to create a safe learning environment at home, supporting their children's education (100%), and using different tele-school options (83%), such as Zoom, Class Dojo, and ParentSquare. Some participants said they benefited from the workshops:

“En que puedo usar la aplicación [Zoom] y antes no sabía nada sobre esta aplicación.” (*In using [Zoom] when before I did not know anything about this application.*)

"This workshop had excellent tips on how to keep my children/grandson safe when it comes to getting online."

"This workshop had lots of information that was new to me. It also brought safe environments that I would not have thought about in regard to kids feeling safe...so learning can take place."

Learning to use technology can also help primary caregivers gain or stay employed. For example, one participant connected with the California Bridge Academies program (a workforce program) through the workshop and has been working with a Career and Family Navigator to assist her with finding full-time employment.

## Factors That Facilitated Implementation

Several factors contributed to the success of the activities implemented and funded by First 5 Madera County.

### 1. Experienced staff

Programs who had or hired staff with extensive experience were able to more quickly and effectively prepare for and facilitate virtual workshops.

### 2. Door-to-door outreach

Residents responded well to door-to-door outreach. The more program staff were out in the community, the more residents signed up for services.

### 3. Support from First 5 Madera County Staff

First 5 Madera County staff helped grantees by discussing issues and supporting decision making as programs adapted to the pandemic and fires and helped expand outreach efforts.

## Factors That Hindered Implementation

Other factors hindered the success of the activities implemented and funded by First 5 Madera County.

### 1. The COVID-19 pandemic

Even while facing the personal challenges of the pandemic, providers paused services and shifted to virtual service delivery. Engagement with services was low and was slow to recover over time.

### 2. Fires

The Creek fire and Eastern Madera County fire impacted providers and participants. Service delivery was paused or delayed, and participants were slow to return to services during recovery.

### 3. Staff turnover

Finding and keeping staff was difficult. Some staff resigned for different reasons and filling vacancies took a long time. Once hired, onboarding and training continued to postpone service delivery.

### 4. Contracting delays

First 5 Madera County contracting delayed the start of a couple of programs. Another program had their required training and affiliate approvals delayed, which affected services.

### 5. Parent outreach and engagement

Several programs had no registrations, no shows, or reduced programs due to engagement. Severe weather and changing or heavy work schedules limited availability.

### 6. Insufficient referrals

A couple of programs did not receive sufficient referrals to meet their service targets.

### 7. Literacy levels

English is not the first or primary language for many participants. Low literacy levels was a barrier for several participants in parent education programs.

### 8. Technology

Many families did not own a computer and relied on a cellular device. Programs had to adapt their services and support to work with the technology families had available.

### 9. Insufficient budget

Some programs reported having insufficient funding for snacks and space for childcare. One program had to change its activities due to being overspent.

## Lessons Learned

First 5 Madera County and its grantee organizations may make improvements in grantmaking, program design, and service delivery by considering the lessons which may be learned from the evaluation results.

### **Funding and actual implementation are stronger for direct services than efforts targeting organizations and systems change.**

Most of the funding and program implementation focused on:

- building primary caregivers awareness of resources in the community,
- building community awareness of the importance of early childhood,
- conducting ASQ screenings,
- parent education,
- Family Resource Centers, and
- strengthening children's early literacy skills.

Many strategies identified in the Strategic Plan were not implemented or not fully implemented. This is likely due to limited First 5 Madera County staff capacity and limited available funding. When developing the next strategic plan, it may be more effective to identify fewer goals and objectives, and to identify more specific strategies for each of the objectives. Decisions about what and how to target limited resources are increasingly important as Proposition 10 funds continue to decline over time.

### **Virtual services, emergency response, and concrete supports need to be readily available for providers and families.**

Grantees responded well to the COVID-19 pandemic and wildfire disasters; however, they highlighted the lack of existing infrastructure for virtual and emergency services. Disasters and emergencies will continue to occur, especially as the climate crisis worsens. In calm times, First 5 Madera County and other providers can build a stronger infrastructure of virtual services, emergency response, and concrete supports for providers and families, in preparation for the next emergency or disaster. Strengthening partnerships between organizations and the FRCs may be a first step in this work.

### **There is an intention to provide more culturally relevant services, but there is not a clear direction or plan for taking action.**

First 5 Madera County's Strategic Plan targets the provision and expanded availability of culturally relevant services; however, the funded programs were limited to Parent Cafes, Abriendo Puertas, and Triple P parenting classes. While these programs appeared to be successful, they are not relevant to people from a wide range of cultural backgrounds. First 5 Madera County could speak with families to better understand how primary caregivers from different cultures (particularly those which are historically underserved and under-resourced) want their culture to be reflected in services. Next, First 5 Madera County could convene

service providers and primary caregivers to develop a countywide shared definition of culturally relevant services to guide future grantmaking.

**First 5 Madera County needs a more complete and efficient evaluation and data system and tools.**

While conducting the evaluation, the Hamai Consulting team discovered many gaps in the documentation (e.g., some quarters did not have documentation, evaluation measures were identified but not available/completed) and inconsistencies in the data (e.g., contradictions in numbers of clients served, narratives and numbers describing implementation differently). There tended to be many documents containing outputs from implementation, such as counts of clients, and descriptions of planned activities. Descriptions of actual activities completed and information about quality of implementation and outcomes was not as prevalent. The missing documentation may exist but was not provided to the evaluation team. Moving forward, establishing consistent tools for collecting and reporting data about planned activities, actual implementation, how well activities were implemented, and the outcomes that result for participants due to participation will yield more complete and more actionable evaluation results.