

First 5 Madera County 2020-2024 Evaluation Report





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 2024. 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 for 2020 through 2023 (using program documentation from July 2020 through June 2023) and with documentation continuing through June 2024. The external evaluator, Hamai Consulting, analyzed the following types of documentation and data:

- 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/Data Sheets
- Milestone Activity Reports
- Program Highlights
- Supplemental Evaluation Documents
- Fiscal Collaboration Forms, Invoices, and Expenditure Reports

The evaluation results are limited to the information available within these documents for July 2020 through June 2024.



Implementing the First 5 Madera County 2019-24 Strategic Plan



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 ecigarette products. These tax revenues are earmarked to support early childhood development through programs for children prenatal through age 5, with 80% going to each California county Commission based on their birth rate (the other 20% covers administration and oversight by First 5 California). First 5 Madera County uses the Proposition 10 funds to support young children and their families in Madera County.



VISION



MISSION

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

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 shifted to making investments in strategies, overall, from 2020-21 to 2023-24, focusing more on Commission-initiated programs than Community-initiated programs over time, as summarized in the table below. Leadership made decisions related to this shift as they responded to reductions in the amount of Proposition 10 funding and lessons learned during implementation of programs in 2020-21. The shift aimed to bridge the gap between available funding and the goals of the strategic plan.

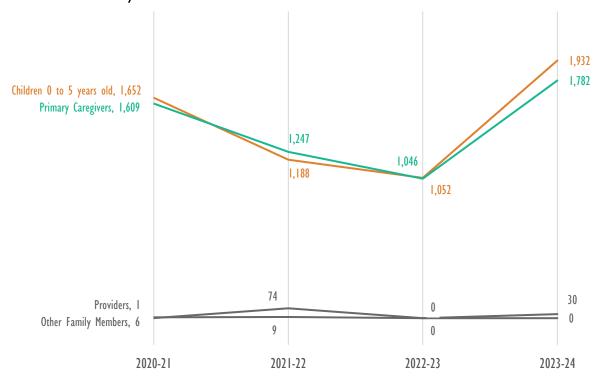
CHILD HEALTH: Promote the overall physical, social, and emotional health of young children.								
		2020-21	2021-22	2022-23	2023-24			
GOAL I: Expand opportunities to promote overall child health.								
Objective 1.1 Increase access to preventative health & developmental services	Community- Initiated	 Chowchilla EUSD Dynamic Mindfulness Camarena Health Preschool Healthy Lifestyle 						
	Commission -Initiated	CASA Developmental Screening						
		FRCs and PSP Developmental ScreeningMobile Vision Project						
		Pediatric Oral Heal Committee	Ith Advisory					
Objective 1.2 Increase access to adequate nutrition & physical activity	Community- Initiated	Camarena Health Preschool Healthy Lifestyle						
	Commission -Initiated	Breastfeeding Coalition						
		Healthy Food Acce	essibility					
FAMILY INVOLVEMENT: Cultivate parenting skills and enhance access to services.								
		2020-21	2021-22	2022-23	2023-24			
GOAL 2: Improve family capacity to keep children safe from harm.								
Objective 2.1 Increase early intervention services for families at risk for maltreatment	Community- Initiated	 WFPSN Child Maltreatment Reduction Plan 						
	Commission -Initiated		PSP Program					
Objective 2.2 Reduce the harmful effects of tobacco and cannabis products	Commission -Initiated	Cannabis CampaignSmoke-Free Aware						
Objective 2.3 Increase parental knowledge and skills around preventative injuries to children	Commission -Initiated	 Child Passenger Safe Safe Sleep Coalition						



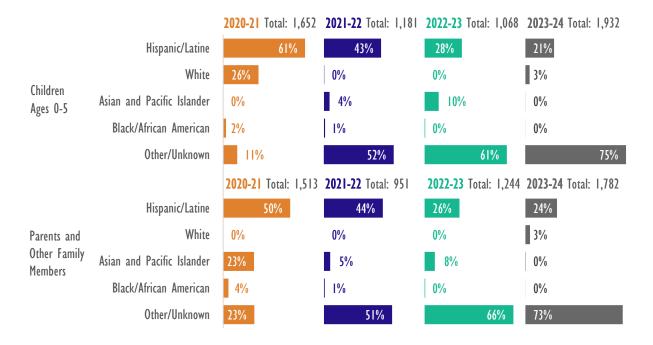
GOAL 3: Increase community capacity to effectively promote family resiliency.									
Objective 3.1 Increase culturally sensitive professional development related to child maltreatment	Commission- Initiated	Equity in Service Delivery Training							
		• IMPACT							
			• 5 Protective Factors Training		 Regional Home Visiting 				
Objective 3.2 Increase parenting interventions that are culturally sensitive	Community- Initiated	 Parent Cafés (CBDIO and Exceptional Parents Unlimited) 		• Triple P (CBDIO & WFPSN)	• Triple P (CBDIO)				
	Commission- Initiated		Parents as Teachers/Abriendo Puertas						
Objective 3.3 Increase access to social and concrete supports to reduce the effects of family isolation	Commission- Initiated	Park Safety & WalkabilityResource AwarenessCommunity MobilizationTransportation			• FRCs' diaper distribution				
CHILD DEVELOPMENT: Ensure children have access to quality early learning experiences and									
environments.		2020-21	2021-22	2022-23	2023-24				
GOAL 4: Expand the capacity to serve children in quality early education									
Objective 4.1 Increase the availability of preschool programming	Community- Initiated	Camarena Health Preschool Healthy Lifestyle							
	Commission- Initiated		PreK University (PKU)						
Objective 4.2 Strengthen the early care and education workforce	Commission- Initiated	• IMPACT							
GOAL 5: Empower parents to be their child's first teacher									
Objective 5.1 Increase opportunities for quality parent-child interaction and activities	Community- Initiated		 Reading and Beyond 						
		 Madera County Libraries Backpack Literacy 		 Madera County Libraries Raising a Reader 					
	Commission- Initiated	FRCs' Play and Learn Groups & other activitiesIMPACT							
		Public Awareness Campaign							
		Park Conversation Panels Project							
GOAL 6: Promote a "one-voice" message on the importance of early childhood									
Objective 6.1 Incorporate Talk. Read. Sing. in all programming	ocorporate Talk. Commission- ead. Sing. in all Initiated • Talk. Read. Sing. Campaign								



The number of children ages 0 to 5 and primary caregivers recovered in 2023-24 to levels higher than in 2020-21, while the numbers of other family members and providers served has been consistently low.

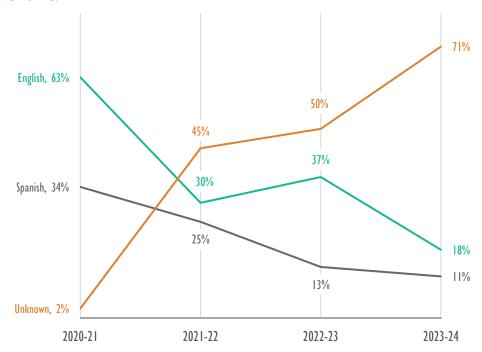


Contractors served more Hispanic children and their primary caregivers than people of other races/ethnicities; however, the percentage of people with unknown race/ethnicity has increased dramatically over time.

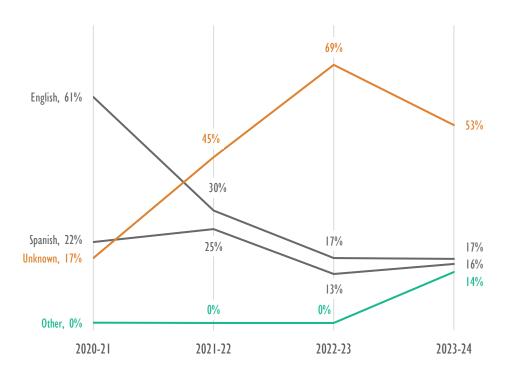




English was the most common primary language for children, but it's lead over other languages is reducing with time. The percentage of children with **unknown** primary language has increased over time.



The same pattern is evident for parents/caregivers. Additionally, more other parents spoke other languages in 2023-24 than in previous years.





Outcomes for Children, Primary Caregivers, and Service Providers Goal I: 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.

In 2023-24, 53% of referrals closed with the child, parent, or family connecting with the referred services. The other referrals remained in pending status as follow-ups were unsuccessful or families were put onto waitlists for services. Families who completed referrals connected with services such as pediatricians, Exceptional Parents Unlimited, the school district for IEP-related evaluations, and concrete supports.

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.

Additionally, parents who participated in Centro Binacional para el Desarrollo Indígena Oxaqueño's Triple P program reported gaining knowledge about thirdhand smoke and how it can impact them and their children.

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."

In 2023-24, parents reported learning about discipline, new strategies to support their children, how to support their children to be resilient, effective communication, respect between parent and child, how to create a sleeping routine, the importance of creating habits, how to manage aggression with their children, and ways to manage their children's behavior, after participating in the Triple P sessions. One mom mentioned that she learned that not knowing how to read and write is not an obstacle to reading a book to her children. For example, she can read the images instead of the words. Parents appreciated the topics addressed and that they were addressed in a culturally sensitive way by people who were like them (i.e., from the Indigenous community). Reflecting on their own experiences helped some parents to realize that they would like to be more involved with their children and their children's development, as well as find ways to share their culture and language with their children.

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, which reduces the immediate stress of caretaking and financial needs. 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 4: Expand the capacity to serve children in quality early education

Although data were collected, the evaluation team have access to any outcome data related to this goal for this report.

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.

In 2022-23 and 2023-24, the Madera County Libraries implemented the Raising a Reader program. Although most parents were already reading to their children when they started the program, the program helped parents enjoyed the program and shared their children positively benefited from the program. For example, one parent shared that their child was highly engaged while reading. Their child is non-verbal and was using some Spanish words when interacting with the books. Another parent shared that her 4-year-old daughter copies what she does when she reads to her, and is reading out loud to her younger sibling.

Goal 6: Promote a "one-voice" message on the importance of early childhood

The evaluation team have access to any outcome data related to this goal for this report.



Factors That Facilitated Implementation

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

I. Experienced staff

Dedicated, trained, and certified staff keep programs operating well over time. During the pandemic, programs who had or hired experienced staff were able to more quickly and effectively prepare for and facilitate virtual workshops.

door-to-door outreach

2. In-person outreach

Residents responded well to during the pandemic. After the pandemic, In-person kickoff events at different sites with snacks and multi-lingual materials helped enroll parents in Raising a Reader.

3. Collaborating with partner organizations

Programs were most successful with implementation when they worked with other organizations for outreach and delivering services (e.g., securing a location).

4. Adapting to parents' context

Parents' engagement with programs was strongest when programs accommodated their needs and preferences, such as providing childcare, being located close to families, and scheduling on weekend evenings.



5. Financial supports

Providing families with financial support (e.g., emergency relief and diapers) gets families in the office and connected to other services. Additionally, offering incentives and transportation keeps families engaged with programs over time.

6. Comfort and trust

Parents are more likely to enroll in services when they already know of and trust the organization. They feel more comfortable participating in services when the staff are like them (i.e., from the same community).

7. Collaborating with partner organizations

Programs were most successful with implementation when they worked with other organizations for outreach and delivering services (e.g., securing a location).

8. Support from First 5 Madera County Staff

First 5 Madera County staff helped grantees by discussing issues and supporting adaptations to the pandemic and fires, as well as changes to meet family needs after the pandemic.

9. Evaluation

Developing evaluation capacity and infrastructure helped staff to understand how their work tied to the strategic plan and how they could better tell the story of their impact.



Factors That Hindered Implementation

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

I. 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 concreate 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, only Triple P (which focuses on parents of communities indigenous to California and Mexico) continued through the end of the strategic plan. Cultural relevance was not intentionally considered or addressed in other programming or for families from other cultural backgrounds (e.g., non-indigenous Black and people of color, people who speak languages other than English and Spanish, people of different abilities). First 5 Madera County could speak with



families to better understand how primary caregivers from different cultures 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 stronger evaluation foundation and infrastructure.

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.

Additionally, as First 5 Madera County staff engaged in evaluation training and activities, they discovered the potential power and utility of evaluation in their work. As their knowledge grew, they saw how evaluation could and should be embedded in everything they do, from planning through implementation. They are committed to working with Hamai Consulting to continue strengthening the foundation and infrastructure for evaluation throughout the organization.