

Community Action Plan  
Listing of Attachments

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## Attachment A

### Listing of Contracts Used for Survey Distribution

1. Cities and County – City Managers, City Clerk, Economic Development (from ABAG list) – 74
2. CDBG Non-Profits (from Bob Calkins) – 256
3. Community Partners (from Monique) – 196
4. EOC List (from Alicia) - 20
  - a. Total 366
5. CCC BOS – Request BOS members to email the survey to their constituents and other contact lists – quantity of contacts unknown
6. STARS – forward to STARS, our internal county employee notification system, send to Dave Tilton at [tiltoda@ehsd.cccounty.us](mailto:tiltoda@ehsd.cccounty.us) or (925) 313-1662 on Tuesday, May 12, 2015 – quantity of contacts unknown
7. Request Made to the Following Elected Officials
  - a. Assembly Member Jim Frazier  
(District 11)  
District Office:  
150 City Park Way  
(Brentwood City Hall)  
Brentwood, CA 94513-1164  
Tel: (925)513-0411  
Fax: (925) 513-3511  
  
District Office  
2440 Camino Ramon, Suite 345  
San Ramon, CA 94583  
(925) 328-1515  
(925) 328-1514 fax  
<http://ad16.asmr.org/>
  - b. Assembly Member Susan Bonilla  
District Office:  
2151 Salvio Street, Suite 395  
Concord, CA 94520  
Tel: (925) 521-1511  
Fax: (925) 602-1536 Satinder Malhi,  
District Director  
Heather Pritchett, Exec. Assistant  
<http://asmdc.org/members/a14/district/staff>
  - c. Catharine Baker  
Assembly Member, 16th District
  - d. Representative Mike Thompson  
Vallejo District Office  
985 Walnut Ave  
Vallejo, CA 94592  
phone: (707) 645-1888  
fax: (707) 645-1870  
hours: M-F 9-5:30pm  
<http://mikethompson.house.gov/>
  - e. Representative Mark DeSaulnier  
101 Ygnacio Valley Road, Suite #210  
Walnut Creek, CA 94596  
Phone: (925) 933-2660  
Fax: (925) 933-2677  
<https://desaulnier.house.gov/>

Attachment B  
Communication Template and Link For:  
County Residents, Service Providers, Agency Representatives or Constituents

Dear (county resident, service provider, agency representative, or constituent):

To assist Contra Costa County's Economic Opportunity Council (EOC) and the Community Services Bureau (CSB) in developing its Community Action Plan (CAP) to guide activities over the new two years (2016-2017), the EOC, working with staff, has developed the survey that follows.

This survey is intended to provide an additional opportunity for people to provide input to the CAP, especially for those unable to attend one of the three public hearings held throughout the County during the past few months. As we are attempting to get as much participation as possible, please share the link to this survey with anyone you believe should participate in the survey: <https://www.surveymonkey.com/s/2016-2017-Community-Action-Plan>.

The survey should take only five to seven minutes to complete. The survey is confidential and no person or organization will be identified; only the combined responses to individual questions will be shared. We have asked for some general demographic information at the end, but again, that's only to categorize the information as coming from a person or family that is receiving services or needs services, as contrasted with an agency or organization that is providing services.

Should you have questions regarding this survey or need more information, please contact Tom Stewart at 925-681-6347 or [tstewart1@ehsd.cccounty.us](mailto:tstewart1@ehsd.cccounty.us) or Alicia Prieto at 925-681-6311 or [aprieto@ehsd.cccounty.us](mailto:aprieto@ehsd.cccounty.us).

We want to thank you in advance for completing this survey and for your efforts to address the needs of those living in poverty in our county.

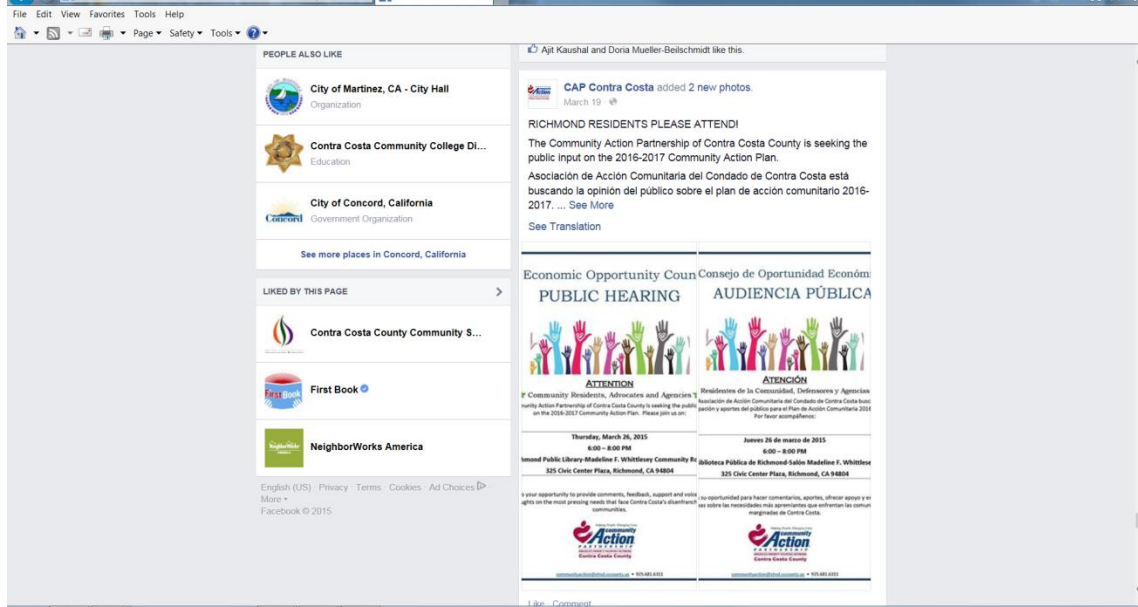
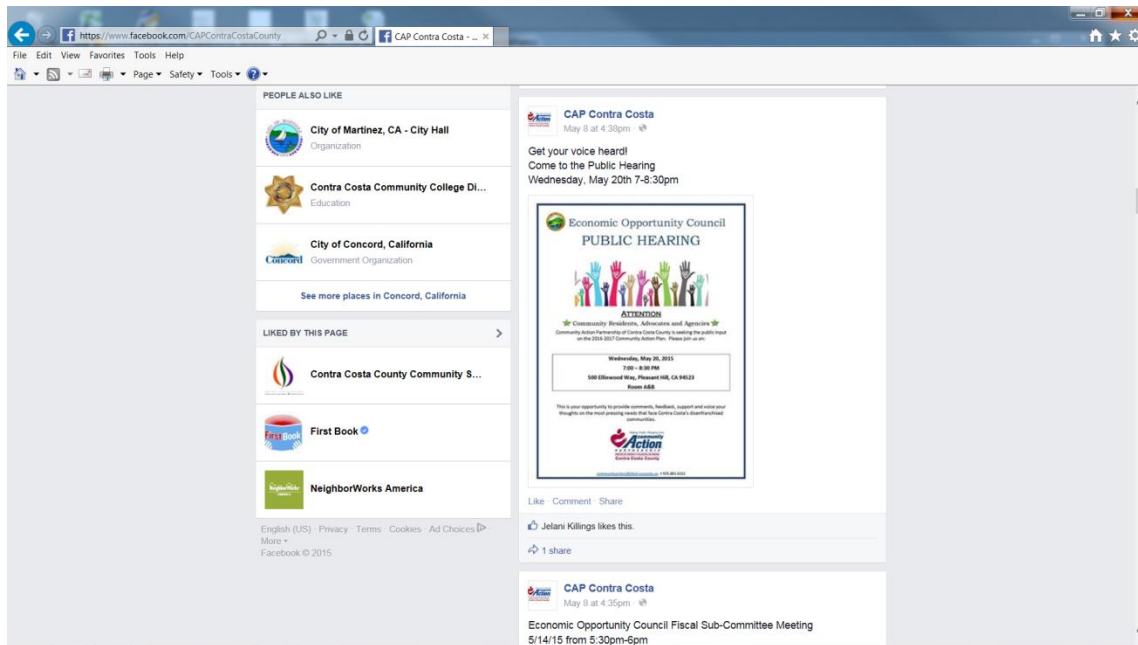
Ajit Kaushal, Chair  
Economic Opportunity Council

Camilla Rand, Director  
Community Services Bureau

## Appendix C

### Public Hearing Flyer Posted on Community Services Bureau's FaceBook Page

[www.facebook.com/CAPContraCostaCounty](http://www.facebook.com/CAPContraCostaCounty) (Serving as the Contra Costa County Community Action Agency)





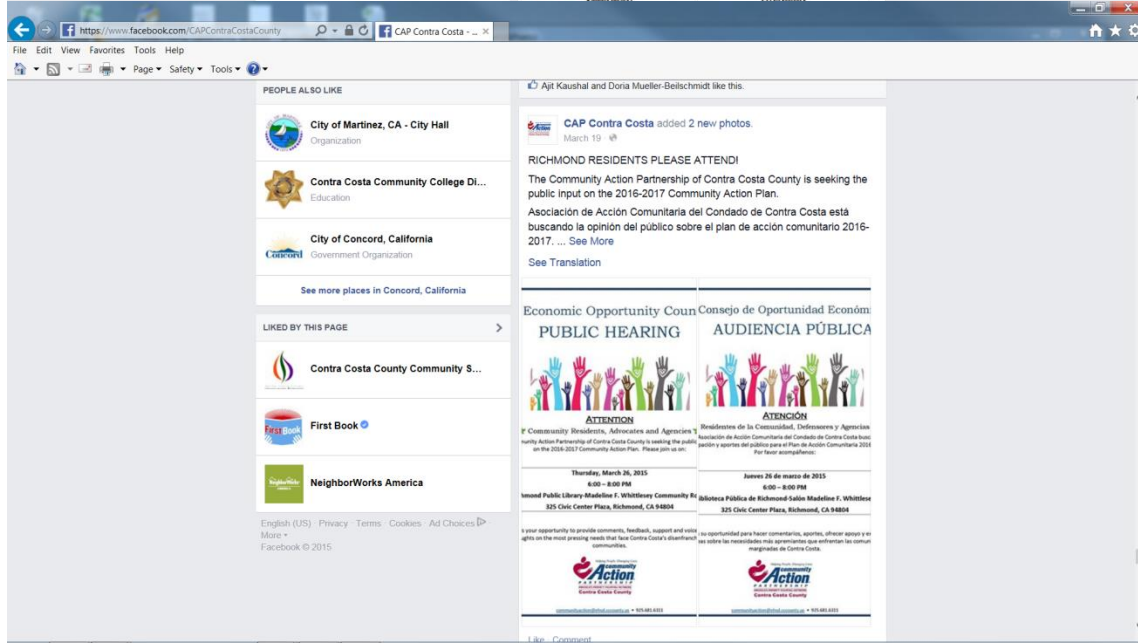
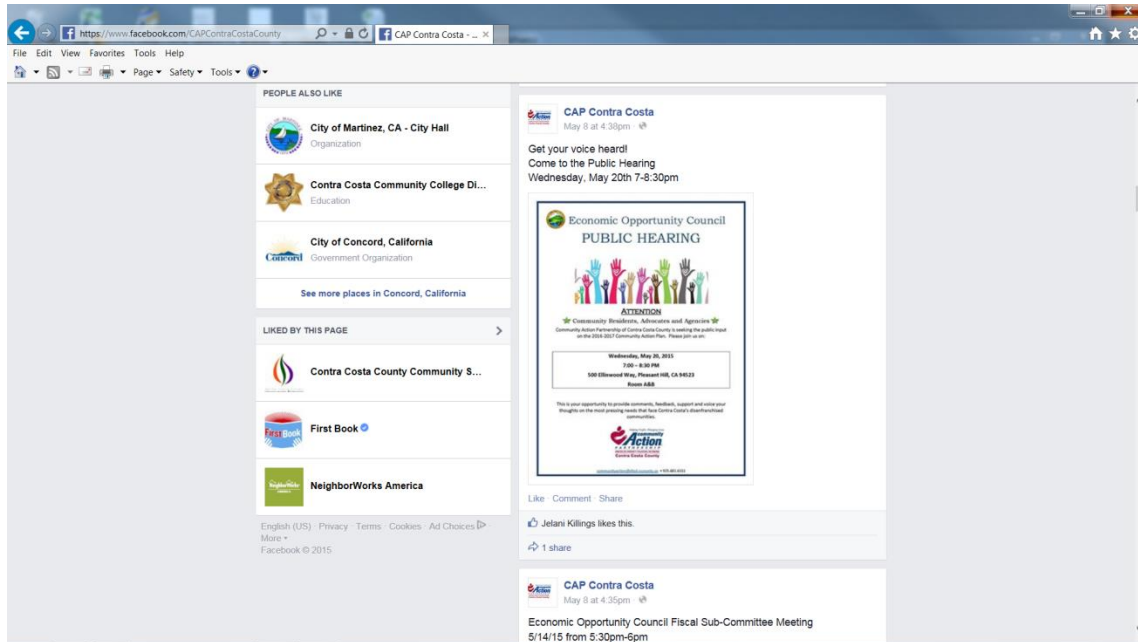
## Appendix D

Community Services Bureau's FaceBook Page Postings for the Three Public Hearings  
[www.facebook.com/CAPContraCostaCounty](https://www.facebook.com/CAPContraCostaCounty) (Serving as the Contra Costa County Community Action Agency)

West Contra Costa County – Richmond Public Library – Thursday, March 26, 2015, 6:00 to 8:00 p.m.


East Contra Costa County - Los Medanos College - Thursday, April 23, 6:00 to 8:00 p.m.


Central Contra Costa County – County Building (500 Ellinwood) - May 20 - 6:00 to 8:00 p.m.



Attachment E  
Public Hearing Flyers & Agendas for Public Hearings

West Contra Costa County Public Hearing  
Copies of Agenda (English & Spanish) and Flyer Announcement  
Richmond Public Library – Thursday, March 26, 2015, 6:00 to 8:00 p.m.


 **Economic Opportunity Council**  
**PUBLIC HEARING**



**ATTENTION**  
★ Community Residents, Advocates and Agencies ★  
Community Action Partnership of Contra Costa County is seeking the public input on the 2016-2017 Community Action Plan. Please join us on:

**Thursday, March 26, 2015**  
**6:00 – 8:00 PM**  
**Richmond Public Library-Madeline F. Whittlesey Community Room**  
**325 Civic Center Plaza, Richmond, CA 94804**

This is your opportunity to provide comments, feedback, support and voice your thoughts on the most pressing needs that face Contra Costa's disenfranchised communities.

  
communityaction@ehsd.cccounty.ca • 925.681.6311

 **Consejo de Oportunidad Económica**  
**AUDIENCIA PÚBLICA**



**ATENCIÓN**  
★ Residentes de la Comunidad, Defensores y Agencias ★  
La Asociación de Acción Comunitaria del Condado de Contra Costa busca la participación y aportes del público para el Plan de Acción Comunitaria 2016-2017. Por favor acompañenos:

**Jueves 26 de marzo de 2015**  
**6:00 – 8:00 PM**  
**Biblioteca Pública de Richmond-Salón Madeline F. Whittlesey**  
**325 Civic Center Plaza, Richmond, CA 94804**

Esta es su oportunidad para hacer comentarios, aportes, ofrecer apoyo y expresar sus ideas sobre las necesidades más apremiantes que enfrentan las comunidades marginadas de Contra Costa.

  
communityaction@ehsd.cccounty.ca • 925.681.6311

**Agenda**

Grupo/Nombre de la Reunión: Audiencia Pública del Plan de Acción Comunitaria  
Fecha: 3/26/2015 Hora: 6:00 pm A: 8:00 pm  
Lugar: Biblioteca Pública de Richmond-Salón Madeline F. Whittlesey  
Facilitador: Jagjit Bhambra  
Objetivo: Obtener información del público sobre las necesidades de la comunidad que se abordarán en el Plan de Acción Comunitaria 2016-2017.  
*El Consejo de Oportunidad Económica proporcionará acomodaciones razonables para las personas con discapacidad que necesiten participar en la audiencia pública. Por favor póngase en contacto con el personal del EOC por lo menos 24 horas antes de la reunión en el 925.681.6311.*

**Resultados Esperados: Al final de esta reunión tendremos:**

Comprensión de los Resultados Esperados y de los Reglamentos de la Reunión para poder cumplir con los objetivos de nuestra reunión de manera oportuna y eficiente. (Ver <u>Appendix A</u> )
Presentación de los miembros del Consejo de Oportunidad Económica (COE) y personal del Departamento de Servicios Comunitarios para tener conocimiento de quienes son.
Revisión del Resumen de la Audiencia Pública para estar informados.
Un registro de los aportes y opiniones del público en cuanto a los temas más apremiantes que enfrentan nuestras comunidades para que estas necesidades puedan ser abordadas en el Plan de Acción Comunitaria 2016-2017.
Oportunidad para preguntas o aclaración.

Agenda			
Qué	Cómo	Quién	Tiempo
➤ Resultados Esperados y Reglamentos de la Reunión	Presentar Revisar Verificar la Comprensión	Miembro del COE	6:00-6:05 PM (5 Minutos)
➤ Introducción	Presentar	Jagjit Bhambra	3:05-6:10 PM (5 Minutos)
➤ Resumen de la Audiencia Pública	Leer Revisar Verificar la Comprensión	Miembro del COE	6:10-6:25 PM (15 Minutos)
➤ Planteamiento de las Necesidades de la Comunidad	Presentar Revisar Verificar la Comprensión	Grupo	5:25-7:45 PM (80 Minutos)
➤ Preguntas o Preocupaciones	Presentar Revisar Verificar la Comprensión	Miembro del COE Personal	7:45-8:00 PM (15 Minutos)

**Agenda**


Group/Meeting Name: Community Action Plan Public Hearing  
Date: 3/26/2015 Time: 6:00 pm To: 8:00 pm  
Location: Richmond Public Library-Madeline F. Whittlesey Community Room  
325 Civic Center Plaza, Richmond, CA  
Facilitator: Jagjit Bhambra  
Purpose: Gain information from the public about community needs to be addressed in the 2016-2017 Community Action Plan.  
*The Economic Opportunity Council will provide reasonable accommodations for persons with disabilities planning to participate in the Public Hearing. Please contact EOC Staff at least 24 hours before the meeting at 925.681.6311.*

**Desired Outcome: By the end of this meeting, we will have:**


An understanding of the desired outcomes and meeting rules so that we can accomplish our meeting objectives in a timely and efficient manner. (See <u>Appendix A</u> )
Introduced Economic Opportunity Council (EOC) members and Community Services Bureau (CSB) staff so that we are aware.
Reviewed the Public Hearing Summary so that we are informed.
A record of public input as to the most pressing issues that face our communities so that these needs can be addressed in the 2016-2017 Community Action Plan.
Opportunity for questions or clarifications.

Agenda			
What	How	Who	Time
➤ Desired Outcomes and Meeting Rules	Present Review Check for Understanding	EOC Member	6:00-6:05 PM (5 Minutes)
➤ Introduction	Present	Jagjit Bhambra	6:05-6:10 PM (5 Minutes)
➤ Public Hearing Summary	Read Review Check for Understanding	EOC Member	6:10-6:25 PM (15 Minutes)
➤ Addressing Community Needs	Present Review Check for Understanding	Group	6:25-7:45 PM (80 Minutes)
➤ Questions or Clarifications	Present Review Check for Understanding	EOC Member CSB Staff	7:45-8:00 PM (15 Minutes)

**East Contra Costa County Public Hearing**  
**Copies of Agenda (English & Spanish) and Flyer Announcement**  
**Los Medanos College - Thursday, April 23, 6:00 to 8:00 p.m.**



**Economic Opportunity Council**  
**PUBLIC HEARING**



**ATTENTION**  
 ★ Community Residents, Advocates and Agencies ★  
 Community Action Partnership of Contra Costa County is seeking the public input on the 2016-2017 Community Action Plan. Please join us on:

**Thursday, April 23, 2015**  
**6:00 – 8:00 PM**  
**Los Medanos College - The Library Community Room (L109)**  
**2700 E. Leland Rd, Pittsburg, CA 94565**  
**Parking is free in Lot A (closest to Leland Rd.)**

This is your opportunity to provide comments, feedback, support and voice your thoughts on the most pressing needs that face Contra Costa's disenfranchised communities.



helping people. changing lives.  
**community ACTION**  
 PARTNERSHIP  
 economic opportunity services network  
 Contra Costa County  
[communityaction@ebay.com](mailto:communityaction@ebay.com) • 925.681.6311



**Consejo de Oportunidad Económica**  
**AUDIENCIA PÚBLICA**



**ATENCIÓN**  
 ★ Residentes de la Comunidad, Defensores y Agencias ★  
 La Asociación de Acción Comunitaria del Condado de Contra Costa busca la participación y aportes del público para el Plan de Acción Comunitaria 2016-2017. Por favor acompañenos:

**Jueves 23 de Abril 2015**  
**6:00 – 8:00 PM**  
**Los Medanos College – La Sala de Biblioteca Comunitaria (L109)**  
**2700 E Leland Rd, Pittsburg, CA 94565**  
**Estacionamiento es gratuito en Lote A (cercana a Leland Rd.)**

Esta es su oportunidad para hacer comentarios, aportes, ofrecer apoyo y expresar sus ideas sobre las necesidades más apremiantes que enfrentan las comunidades marginadas de Contra Costa.



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 Contra Costa County  
[communityaction@ebay.com](mailto:communityaction@ebay.com) • 925.681.6311

**Agenda**

Group/Meeting Name: Community Action Plan Public Hearing  
 Date: 4/23/2015 Time: 6:00 pm To: 8:00 pm  
 Location: 2700 E. Leland Rd, Pittsburg, CA 94565 Los Medanos College – The Library Community Room (L109)  
 Facilitator: Jagjit Bhambra  
 Purpose: Gain information from the public about community needs to be addressed in the 2016-2017 Community Action Plan.  
*The Economic Opportunity Council will provide reasonable accommodations for persons with disabilities, planning to participate in the Public Hearing. Please contact EOC Staff at least 24 hours before the meeting at 925.681.6311.*

Desired Outcome: By the end of this meeting, we will have:

- An understanding of the desired outcomes and meeting rules so that we can accomplish our meeting objectives in a timely and efficient manner. (See Appendix A)
- Introduced Economic Opportunity Council (EOC) members and Community Services Bureau (CSB) staff so that we are aware.
- Reviewed the Public Hearing Summary so that we are informed.
- A record of public input as to the most pressing issues that face our communities so that these needs can be addressed in the 2016-2017 Community Action Plan.
- Opportunity for questions or clarifications.

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What	How	Who	Time
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➤ Public Hearing Summary	Read Review Check for Understanding	EOC Member	6:10-6:25 PM (15 Minutes)
➤ Addressing Community Needs	Present Review Check for Understanding	Group	6:25-7:45 PM (80 Minutes)
➤ Questions or Clarifications	Present Review Check for Understanding	EOC Member CSB Staff	7:45-8:00 PM (15 Minutes)

**Agenda**

Grupo/Nombre de la Reunión: Audiencia Pública Plan de Acción Comunitaria  
 Fecha: 4/23/2015 Hora: 6:00 pm A: 8:00 pm  
 Lugar: 2700 E. Leland Rd, Pittsburg, CA 94565 Los Medanos College – Library Community Room (L109)  
 Facilitador: Jagjit Bhambra  
 Objetivo: Obtener información del público sobre las necesidades de la comunidad que se abordarán en el Plan de Acción Comunitaria 2016-2017.  
*El Consejo de Oportunidad Económica proporcionará acomodaciones razonables para las personas con discapacidad que necesiten participar en la Audiencia Pública. Por favor contacten al personal del EOC por lo menos 24 horas antes de la reunión en el 925.681.6311.*

Resultados Esperados: Al final de esta reunión tendremos:

- Comprensión de los Resultados Esperados y de los Reglamentos de la Reunión para poder cumplir con los objetivos de nuestra reunión de manera oportuna y eficiente. (Ver Apéndice A)
- Presentación de los miembros del Consejo de Oportunidad Económica (COE) y personal del Departamento de Servicios Comunitarios para tener conocimiento de quienes son.
- Revisión del Resumen de la Audiencia Pública para estar informados.
- Un registro de los aportes y opiniones del público en cuanto a los temas más apremiantes que enfrentan nuestras comunidades para que estas necesidades puedan ser abordadas en el Plan de Acción Comunitaria 2016-2017.
- Oportunidad para preguntas o aclaración.

Agenda			
Qué	Cómo	Quién	Tiempo
➤ Resultados Esperados y Reglamentos de la Reunión	Presentar Revisar Verificar la Comprensión	Miembro del COE	6:00-6:05 PM (5 Minutos)
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➤ Preguntas o Preocupaciones	Presentar Revisar Verificar la Comprensión	Miembro del COE Personal	7:45-8:00 PM (15 Minutos)

Central Contra Costa County Public Hearing  
Copies of Agenda (English & Spanish) and Flyer Announcement  
County Building (500 Ellinwood) - May 20 - 6:00 to 8:00 p.m.

 **Consejo de Oportunidad Económica**  
**AUDIENCIA PÚBLICA**



**ATENCIÓN**

★ Residentes de la Comunidad, Defensores y Agencias ★  
La Asociación de Acción Comunitaria del Condado de Contra Costa busca la participación y aportes del público para el Plan de Acción Comunitaria 2016-2017. Por favor acompáñenos:

**Miércoles, 20 de Mayo 2015**  
**7:00 – 8:30 PM**  
**500 Ellinwood Way, Pleasant Hill, CA 94523**  
**Sala A y B**

Esta es su oportunidad para hacer comentarios, aportes, ofrecer apoyo y expresar sus ideas sobre las necesidades más apremiantes que enfrentan las comunidades marginadas de Contra Costa.

  
community Action  
PARTNERSHIP  
ASOCIACIÓN DE ACCIÓN COMUNITARIA  
Contra Costa County

[communityaction@ebud.cccounty.us](mailto:communityaction@ebud.cccounty.us) • 925.681.6311

 **Economic Opportunity Council**  
**PUBLIC HEARING**



**ATTENTION**

★ Community Residents, Advocates and Agencies ★  
Community Action Partnership of Contra Costa County is seeking the public input on the 2016-2017 Community Action Plan. Please join us on:

**Wednesday, May 20, 2015**  
**7:00 – 8:30 PM**  
**500 Ellinwood Way, Pleasant Hill, CA 94523**  
**Room A&B**

This is your opportunity to provide comments, feedback, support and voice your thoughts on the most pressing needs that face Contra Costa's disenfranchised communities.

  
community Action  
PARTNERSHIP  
ASOCIACIÓN DE ACCIÓN COMUNITARIA  
Contra Costa County

[communityaction@ebud.cccounty.us](mailto:communityaction@ebud.cccounty.us) • 925.681.6311

**Agenda**

Group/Meeting Name: **Community Action Plan Public Hearing**

Date: **5/20/2015** Time: **7:00 pm** To: **8:30 pm**

Location: **500 Ellinwood Way, Pleasant Hill, CA – Rm. A&B**

Facilitator: **Thomas Stewart**

Purpose: **Gain information from the public about community needs to be addressed in the 2016-2017 Community Action Plan.**

*The Economic Opportunity Council will provide reasonable accommodations for persons with disabilities planning to participate in the Public Hearing. Please contact EOC Staff at least 24 hours before the meeting at 925.681.6311.*

**Desired Outcome: By the end of this meeting, we will have:**

An understanding of the desired outcomes and meeting rules so that we can accomplish our meeting objectives in a timely and efficient manner. (See Appendix A)
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Opportunity for questions or clarifications.

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➤ Desired Outcomes and Meeting Rules	Present Review Check for Understanding	EOC Member	7:00-7:05 PM (5 Minutes)
➤ Introduction	Present	Thomas Stewart	7:05-7:10 PM (5 Minutes)
➤ Public Hearing Summary	Read Review Check for Understanding	EOC Member	7:10-7:20 PM (10 Minutes)
➤ Addressing Community Needs	Present Review Check for Understanding	Group	7:20-8:20 PM (60 Minutes)
➤ Questions or Clarifications	Present Review Check for Understanding	EOC Member CSB Staff	8:20-8:30 PM (10 Minutes)

**Agenda**

Grupo/Nombre de la Reunión: **Audiencia Pública Plan de Acción Comunitaria**

Fecha: **5/20/2015** Hora: **7:00 pm** A: **8:30 pm**

Lugar: **500 Ellinwood Way, Pleasant Hill, CA – Sala A&B**

Facilitador: **Thomas Stewart**

Objetivo: **Obtener información del público sobre las necesidades de la comunidad que se abordarán en el Plan de Acción Comunitaria 2016-2017.**

*El Consejo de Oportunidad Económica proporcionará acomodaciones razonables para las personas con discapacidad que necesiten participar en la Audiencia Pública. Por favor póngase en contacto con el personal del EOC por lo menos 24 horas antes de la reunión en el 925.681.6311.*

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➤ Introducción	Presentar	Thomas Stewart	7:05-7:10 PM (5 Minutos)
➤ Resumen de la Audiencia Pública	Leer Revisar Verificar la Comprensión	Miembro del COE	7:10-7:20 PM (10 Minutos)
➤ Planteamiento de las Necesidades de la Comunidad	Presentar Revisar Verificar la Comprensión	Grupo	7:20-8:20 PM (60 Minutos)
➤ Preguntas o Preocupaciones	Presentar Revisar Verificar la Comprensión	Miembro del COE Personal	8:20-8:30 PM (13 Minutos)

Attachment F  
CSB Community Assessment for 2015 – Full Report



**2015 – 2018  
COMMUNITY ASSESSMENT**



**Contra Costa County  
Employment and Human Services Department  
Community Services Bureau**

Rev. 2/2015

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# Executive Summary

## Purpose and Objectives

The Community Services Bureau (CSB) in Contra Costa County receives state funding to provide support and development services to approximately 1,900 families with 2,022 children eligible for the Early Head Start and Head Start program. CSB staff are deeply involved in community activities undertaken to ensure appropriate representation of child and family interests and a consistent forum for discussion of child/family needs. Examples of the CSB's commitment to and involvement with the community include 2 positions on the county's First 5 Commission, collaborations with community-based organizations in efforts such as the Building Blocks for Kids initiative, a Harlem Children's Zone inspired project in the Iron Triangle of Richmond, and data collection processes that include the County Office of Education, the Contra Costa Local Planning Council, and First 5 Contra Costa.

As part of its service mission, the CSB conducts an annual Community Assessment to provide a current profile of the economic, health, safety, and educational status of the estimated 63,491 0-4 year old children in families who call Contra Costa County home. The Community Assessment is a multi-phase, ongoing process that integrally involves the Head Start Policy Council, the Contra Costa County Board of Supervisors and active parents. Findings are used to appraise staff and parents in service coordination meetings of emerging needs, to revise approaches, and to keep the Policy Council informed. The Board of Supervisors is also kept apprised of results through periodic reports and presentations. Through monthly reports to the County Administrator, the CSB also reports to the County Board of Supervisors on the program's responsiveness to the community.

## Methodology

To complete the assessment, a variety of data collection techniques are undertaken. CSB Assistant Directors work with staff and parents to revise or refine the assessment process, develop and implement the parent questionnaire used to survey parents about community needs and emerging issues, and gather demographic information about current CSB enrollment. These collaborations also help identify new areas of eligible populations, determine the number of Head Start eligible children in the county, describe eligible children and families by population, income, family size, and by family characteristics such as educational attainment, employment status, special needs, ethnicity, and language. Finally, these collaborations help identify emerging needs or interests of eligible community members from other agencies that serve the population. CSB also works with staff members to identify other critical data sources for the Assessment including:

- Local commissions, committees and community-based organizations such as First 5 Contra Costa, the United Way, Cal-WORKS, the County Health Department, Contra Costa County Local Planning Council for Child Care, and the County Office of Education
- Parent and family partnership data, parent planning sessions, and self-assessment questionnaires
- Internal data sources such as the Program Information Report (PIR)
- Community Care Licensing data
- Training and Technical Assistance Plan
- Federal and state agency data sources such as the U.S. Census Bureau, CA Department of Finance; CA Department of Education; and CA Employment Development Department
- Other sources including school enrollment data, birth rates, TANF data, and the Association of Bay Area Governments

The Policy Council's involvement in the Community Assessment continues throughout the process as they provide input to the process, through participation in meetings and opportunities for dialog, or as they review the data for planning in the context of shared governance. In the spring of each year, the full Policy Council receives a comprehensive presentation of the current Community Assessment and exercises its mandate to evaluate, discuss and pose questions about its findings. In August of each year, the Policy Council reviews and approves the current Community Assessment. This summary presents the results of this Community Assessment process for 2014 to 2016.

# Population Profile

- ◆ Contra Costa County's population grew to 1,079,460 in 2013, a 4% increase since 2009. The county saw a 4% decline in Caucasian residents, compared to the state's 3% drop and a 4% increase in Asian residents, compared to the state's 1% increase since 2009. Latino residents continue to make up a smaller proportion of residents in the county (25%) compared to the state (38%).
- ◆ Between 2007 and 2014, the county grew 10% overall, while the city of Brentwood grew 66%, San Ramon grew 65%, and Oakley grew 41%. Other communities, such as San Pablo and Pinole, saw population declines near 4%.
- ◆ The number of families in the county grew 6%, compared to the state's slight decline. In 2013, female head of household families account for 12% of all households in the county, compared to 14% in California. However, female-headed households in Contra Costa grew by 8,764, a 23% increase since 2009, compared to the state's slight increase, and the proportion of female-headed households with children increased in the county, while it decreased in the state.
- ◆ Contra Costa County continues to maintain a younger student body than the state overall. Since 2007, the number of the county's children in nursery school, preschool or kindergarten has increased 3% from 31,729 to 32,666. During the same time, college or graduate school enrollment in the county grew by 7,905 students or 12%.

## Economic Profile

### INCOME AND POVERTY

- ◆ The self-sufficiency standard in Contra Costa County for a family with 1 adult, an infant, a preschooler, and a school age child increased to an estimated \$109,545 in 2014, while the median family income was about \$94,208. An estimated 37% of families lived below the self-sufficiency standard in 2012.
- ◆ Since 2005, the proportion and number of Contra Costa County families that earn less than \$15,000 annually has increased by 13,951 families, while this proportion has remained constant in California overall. Both the county and state have seen moderate declines in middle income families.
- ◆ From 2008 to 2013, the proportion of county residents in poverty increased 2.5 percentage points overall, families with children under 18 in poverty increased 2.8 points, Hispanics in poverty increased 4.1 points, residents in poverty who work less than fulltime increased 5.0 points, those in poverty who did not complete high school increased 5.2 points, and African Americans in poverty increased 5.8 points. Importantly, the poverty rate for female-headed households with children under 5 has risen 10 points from 30% to 40% since 2008.
- ◆ Although poverty rates for families in the county remain lower than the state, poverty rates for children in the school districts of Pittsburg (29%), Antioch (23%), John Sweet (22%), West Contra Costa (20%), Knightsen (20%), Mount Diablo (17%), and Byron (16%) all surpass the overall county rate of 15%.
- ◆ Since 2000, the number of children in poverty in Contra Costa County school districts rose 24,658, while the percentage of children in poverty has increased in 13 of 17 school districts, from a 0.7 percentage point increase in Oakley to a 17.4 point increase in Pittsburg. In 2013, 33,834 of the county's 40,590 children in poverty (83%) live in the school districts of Antioch, Liberty, Mt. Diablo, Pittsburg and West Contra Costa.
- ◆ In 2014, about 2% of all Contra Costa County residents are CalWORKs cash recipients, and participation has grown nearly 20% from 18,619 in 2002 to 22,305 in 2014. The Welfare to Work program saw an 11% increase since 2002. In 2013, more than 23,800 Contra Costa County households receive SNAP benefits.
- ◆ The number of CalFresh recipients far exceeds all other Public Assistance programs, and participation has grown much faster than other programs. Since 2010, the number of families

with CalFresh benefits has increased by 33% from 26,630 to 35,280 in 2014. About 30% of cases are African American households, 30% are Latino and 27% are Caucasian.

- ◆ In 2014, over one third of CalWORKs cases are African American households (38%) followed by Latino households (31%) and Caucasian households (25%). About 72% of the 2,258 caseload increase since 2002 has been distributed to Latino households.
- ◆ Since 2004, the percentage of children eligible to receive free and reduced cost meals in county schools has risen from 30% to 41%, due to large increases in Antioch Unified, John Swett Unified, Knightsen Elementary, Liberty Union High, Mt. Diablo Unified, Oakley Union Elementary, Orinda Union Elementary, Pittsburg Unified, and West Contra Costa Unified.
- ◆ Districts with the highest percentage of FRPM-eligible students in 2013-14 are Pittsburg Unified (84%), SBE - Synergy (77%), West Contra Costa Unified (71%), John Swett Unified (68%) and Antioch Unified (63%). These districts all exceed the state average of 59%. Antioch Unified, John Swett Unified, Pittsburg Unified, and West Contra Costa Unified all had the highest percentage of eligible students in the 2009-10 school year as well.

## **EMPLOYMENT**

- ◆ Since 2012, Contra Costa County saw unemployment drop to 6% in 2014. The state saw similar relief as its rate dropped to 7% from 11% in 2012. However, several highly populated areas in the county surpass both the state and county rate, including San Pablo (12%), Richmond (10%), and Pittsburg (9%). While conditions continue to improve in the local and state economies, many families in Contra Costa County still face multiple financial stressors, such as longer commute times, rising rents, lower paying jobs and under-employment.
- ◆ In the past 13 years, Contra Costa County's civilian labor force grew 8% or 38,000 workers, while the county lost about 2,300 jobs across all major industries. Since 2000, the county has also lost jobs in the relatively higher paying sectors of construction; professional, scientific, and management; and manufacturing. Analysts predict growth in the demand for economists, conservation scientists, pipe layers, soil and plant scientists and software developers.
- ◆ Workers on average spend more time traveling to work in 2013 (34.3 minutes) than they did in 2008 (31.9 minutes), more than commuters in nine other Bay Area counties, and more than the statewide average of 27.5 minutes. Almost 42% of Contra Costa County workers must travel outside the county to work in 2013.
- ◆ Importantly, between 2000 and 2013, the percentage of those in the county who drive alone to work has steadily increased from 66% to 70%, the percentage who carpool has decreased from 16% to 12%, and the percentage who use public transit has dropped from 16% to 10%.

## **HOUSING**

- ◆ As the Bay Area housing market recovers and home prices increase from record lows a few years ago, the ability for median income households to afford a home decreased dramatically in 2014. Only about 29% of homes are affordable to a median income household in the Oakland-Fremont-Hayward area, compared to 67% in 2010. One-year high sale price increases of more than 10% were recorded in nearly half of all Contra Costa County zip codes, while 6 areas increased more than 20% in the past year (94514, 94519, 94565, 94801, 94804, and 94805).
- ◆ Median rents in the county also increased 13% since 2011, with the median rent for a 2-bedroom apartment rising to \$1,709 from \$1,482 in 2011.
- ◆ From 2009 to 2013, the county's homeless population grew an estimated 29% to 6,635, while the US overall saw a 10% reduction. In 2013, about 1,370 (21%) of the County's homeless were newly homeless, 38% were less than 18 years of age, and communities such as Walnut Creek, San Pablo and Pittsburg faced very large increases in homelessness.
- ◆ Impacts of homelessness in regions such as Contra Costa County may be underestimate as national trends indicate nearly half of all homeless persons live in 1 of only 4 states, California tops that list with the highest homelessness rate in the country (3.65 per 1,000), increasingly homeless persons access services in suburban and rural areas rather than in large cities, and the proportion of persons in families who access services has increased relative to individuals.

# Health Profile

The well-being of the county's children and families is impacted greatly by factors such as health care coverage; physical fitness; access to proper nutrition, immunizations, and affordable dental care; and exposure to STDs, tobacco use and environmental hazards. Not surprisingly, most of these pervasive health concerns disproportionately impact children, the elderly, people of color and low-income communities.

## HEALTH INSURANCE COVERAGE

- ◆ Since 2005, the proportion of Contra Costa County residents who are uninsured (11%) has remained relatively steady, while the state's rate of uninsured (15%) has dropped. Residents with job-based coverage has also steadily decreased from 9.4 points above the state's rate in 2005 to the same rate as the state in 2012 (54%). Rates of Medi-Cal coverage has more than doubled since 2005 in both the state (22%) and the county (15%).
- ◆ Although from 2006 to 2012, the county's Healthy Families enrollment grew dramatically from 4,942 to 13,528 families, the 2013 state budget cut the program after 15 years of providing low-cost health, dental, and vision coverage for low- and moderate-income families. Families previously eligible for Healthy Families coverage have been transitioning to Medi-Cal coverage since January 2013.
- ◆ Although children age 0-17 are still covered through their parents' job-based insurance at a higher rate in the county than in California overall (47%), the county's rate has dropped dramatically from 76% in 2009 to 60% in 2012. Nearly 5 times as many children in the county are estimated to be uninsured in 2012 (9,690) as compared to 2009 (2,016).

## CHILDREN WITH DISABILITIES

- ◆ In 2014, 2,309 infants and preschool children in Contra Costa County are disabled, which represents a 3% decrease since 2012. Speech or language impairment disabilities continue to account for the vast majority (71%) of students age 2 through 5 enrolled in Special Education. Speech or language impairments also account for 86% of the diagnosed disabilities among Head Start (4-5 year old) participants.
- ◆ As the second most common disability in the county, autism presents a growing concern, up from 11% in 2009 to 17% in 2014 among 0-5 year olds. Hearing impairments continue to affect about 4% of 0-5 year olds.
- ◆ The number of disabilities among preschoolers in Head Start has also decreased steadily in the past 8 years as diagnoses dropped from a high of 280 in 2007 to a 9-year low of 143 in 2014.

## PHYSICAL FITNESS

- ◆ Since 2003, the county's 5th, 7th and 9th graders score higher overall than the state on physical fitness tests in every year except 2010, and both the county and state have seen an overall upward trend in fitness among 9th graders in the past 10 years. However, Contra Costa County 9th graders who are Native Hawaiian/Pacific Islander, Hispanic/Latino or African American are significantly less likely to be physically fit than Asian American, White and Filipino students.
- ◆ The county has surpassed the state's proportion of 5th graders in the healthy fitness zone for body composition by at least 4 percentage points since 2009; however, both county and state have seen this percentage drop nearly 10 percentage points since 2009. District proportions vary widely from a high of 87% in Moraga Unified to a low of 48% in Pittsburg Unified.
- ◆ Notably, Lafayette Unified is the only district in the county that improved its percentage of 5th graders in the HFZ for body composition since 2009, up over 10 points to 78% in 2013. Three districts saw declines of more than 10 percentage points in this time, including Pittsburg Unified (-15), Orinda Unified (-14) and West Contra Costa (-11).

## **ASTHMA**

- ◆ Asthma, one of the most common chronic diseases in the US, disproportionately impacts youth, the elderly, people of color and low-income communities and is of particular concern for Contra Costa County, which received an F grade for air quality in 2011 from the American Lung Association's State of the Air Evaluation.
- ◆ Asthma diagnoses among children in Contra Costa County dropped from a 10-year high of 22% in 2009 to 19% in 2012, but remains higher than California among all age groups.
- ◆ Both the county and state have seen overall declines in asthma-related hospitalizations and emergency department visits since 2000, but declines have been much steeper among California children than in the county. Importantly, hospitalization rates among 0-4 year olds in Contra Costa County, at 26.3 per 10,000, has not declined since 2006, and are projected to be nearly twice as high as the state in low-income, predominantly African American communities, such as Richmond.

## **OTHER MARKERS OF COMMUNITY HEALTH**

- ◆ Tobacco use among residents overall has decreased steadily since 2002, down from 14% in 2002 to 11% in 2012, and remains less than statewide use overall. Contra Costa County teenagers are slightly less likely to smoke when compared to California teenagers as well. However, cigarette use among American Indian/Alaska Native (13%) teens, Native Hawaiian/Pacific Islander (11%) teens, Hispanic/Latino (10%) teens, and African American (10%) teens is considerably higher than students of other races/ethnicities.
- ◆ STD incidence rates have declined slightly in both the county and state since 2011, and in 2013 rates of Chlamydia in Contra Costa County (650.3 per 100,000) have dropped below statewide rates (717.7 per 100,000). However, the county's rates of Gonorrhea (115.4 per 100,000) remain somewhat higher than the state (99.7 per 100,000).
- ◆ In 2014, the county's rate of fully immunized children entering school is 94% compared to the state's rate of just 90%. The county rates have also remained stable relative to state rates, which dropped from 92% in 2000 to 90% in 2014. Importantly, non-compliance based on Personal Belief Exemptions has risen in the county from 1% in 2000 to over 2% in 2014.
- ◆ In 2012, the county exceeded statewide averages for both high and low birth weight babies. The percentage of Contra Costa County children who regularly consume fast food has been less than that of the state since 2007; however, the county's rate continues to rise, while the state's rate has dropped somewhat in the past 5 years.
- ◆ Infant mortality rates in Contra Costa County have risen from 4.1 per 1,000 in 2006 to 4.9 per 1,000 in 2012, which suggests a decline in maternal health, health care access, health practices and/or related socioeconomic conditions. Rates also vary by race/ethnicity with higher rates seen among multi-racial (9.7) and African American (9.0) residents in 2012. Gradually rising rates are also apparent among Asians, Hispanic and Caucasian residents.
- ◆ Data regarding children's oral health also reveals a troubling trend. The percentage of 2 – 11 year olds in Contra Costa County who have never seen a dentist was only slightly higher than the state in 2009 (12% and 11%, respectively), but grew to 16% in the county by 2012, while the state's rate dropped to 10%. Compared to 2009 (72%), fewer county children had visited a dental in the past 6 months in 2012 (67%), while California improved its rate from 70% to 73%.

## **Community Safety Profile**

Although crime statistics show a general decline in crime since 2008 in both the county and state, the perception of high crime and threats to personal safety and well-being remains very real in many communities. As one consequence of the stress and strain of pervasive poverty, violent crime continues to plague many communities, such as Richmond, whose homicide rate ranks among the nation's highest.

- ◆ Since 2004, adult arrests have dropped in both the county and state, and Contra Costa County has seen a steeper decline in the number of misdemeanors arrests compared to the state

(down 21% and 15%, respectively). However, the county's 1% decline in the number of felony arrests does not compare well to the state's 11% decline.

- ◆ Juvenile arrests in the county have declined in the past several years, following state trends. In 2013, the number of juvenile misdemeanor arrests in the county dropped to 1,132, a 56% decrease since 2004. The number of juvenile misdemeanors in California dropped to 54,315 in 2013, a 57% since 2004. Juvenile felony arrests per 1,000 have also fallen in the county from 12.9 in 2007 to 5.5 in 2013, while the state's rate fell from 14.2 in 2007 to 7.5 in 2013. An estimated 8% to 9% of Contra Costa County teenagers may be members of a gang in 2010.
- ◆ In the past 9 years, the rate of substantiated child abuse cases per 1,000 children in Contra Costa County has been substantially lower than the state, but the steep declines the county saw in child abuse rates from 2007 (8.8) to 2009 (5.1) have not continued. Rates increased in 2011 (5.5) and held at 2009 levels in 2013 (5.1). In 2013, the proportion of cases involving 6 -10 year olds is higher (28%) compared to 2009 (26%).
- ◆ Although county-level data regarding probationers and inmates with children is unavailable, the CSB database, COPA, suggests families impacted by incarcerations rose an alarming 206% from 2010 to 2012. This trend is partly explained by a dramatic increase in the number of women incarcerated, as the US female prison population grew nearly 400% since 1986. Further, an estimated 9% of children in the state have a parent in the criminal justice system in 2000, and in 2007, an estimated 53% of inmates in the US had at least one minor child.
- ◆ Despite a lack of county-level estimates, the county's probation department attests that many inmates and probationers in their charge are primary caregivers of children under 5. These children may be particularly vulnerable to financial insecurity, poor academic performance, social stigma and isolation, delinquency, emotional withdrawal, and mental health problems.
- ◆ In 2012, rates of domestic violence calls for assistance continued their downward trend and reached a 12-year low of 4.6 per 1,000 in the county and 6.2 in the state. However, this figure translates into 3,286 calls for assistance in Contra Costa County in 2012.

## **Profile of Children and Families**

- ◆ While the overall number of births in Contra Costa County decreased by 9% from 13,315 in 2002 to 12,061 in 2012, the number of births to Asians or Pacific Islanders grew by 17%, and the number of births to Caucasians dropped by 25%.
- ◆ From 2000 to 2012, the proportion of women in the county who receive prenatal care in the first trimester dropped from 89% to 85%; however, 2012 rates improved from their 12-year low of 82% in 2008. In 2012, the proportion who received care in the first trimester is lowest among Pacific Islanders mothers (61%) and highest among Caucasian (89%) and Asian (88%) mothers.
- ◆ Teen births in both the county and state have maintained gradual but steady declines in the past 10 years, falling in the county from 7% in 2002 to 5% in 2012. Latinos continue to have the highest proportion of the county's teen births with 55% in 2012, while African Americans had 21% of the teen births and Caucasians had 15%.
- ◆ Importantly, while teen birth rates declined, the proportion of low birth weight infants born to teenagers rose from 7% in 2008 to 8% in 2012. Teen mothers who miss prenatal care in the critical first trimester of pregnancy improved slightly from 36% in 2010 to 33% in 2012.

## **DEMOGRAPHICS OF HEAD START AND EARLY HEAD START ELIGIBLE CHILDREN**

- ◆ Approximately 10,009 of the 0-5 year olds who reside in Contra Costa County in 2013 would be eligible for Early Head Start (5,786 0-2 year olds) or Head Start (4,223 3-4 year olds) programs based on family incomes below the FPL.
- ◆ Based on projections of the number of families living below FPL in 2013, about 37% of income eligible children in the county are Hispanic or Latino, 18% are African American, 48% are White, 11% are Asian, 13% are some other race/ethnicity, and less than 1% are Native American or Pacific Islander.

## **CHILD CARE NEEDS**

- ◆ From 2008 to 2012, the number of children under age 5 in Contra Costa County decreased 4% from 66,140 in 2008 to 63,491 in 2012, a reduction of 2,649 children age 0-4. However, about 66% of the county's 0-12 year olds have parents in the workforce in 2012, compared to just 64% statewide, and the county has seen a more than 25% increase in the number of 0-5 year olds living in poverty since 2008.
- ◆ From 2004 to 2012, the number of available child care slots dropped nearly 2% and the number of service provider sites dropped by 20% in Contra Costa County. Slots in licensed centers and family child care homes in the county declined from 38,237 slots at 1,835 sites in 2004 to 37,646 slots at 1,464 sites in 2012. Available slots have continued to shift from Family Child Care Homes to Child Care Centers.
- ◆ Parent requests for child care for 0-2 year olds declined slightly since 2010, with about 39% of all requests for licensed child care in 2012 involving children less than 2 years of age, as compared to 41% in 2010.
- ◆ Despite population shifts and declining requests for care, reduced capacity disproportionately impacts harder-to-place children, as providers vary in their willingness and qualifications to accept subsidized or special needs children, such as those in protective services. In their 2013 annual report, the Contra Costa County Child Care Council estimates that as many as 3,000 low income children remain on wait lists for child care.
- ◆ Gaps between demand and the ability to pay for child care continue to plague high need areas such as lower income communities in Antioch, Concord, Pittsburg, Richmond, and San Pablo. About 83% of the county's 40,590 children in poverty are concentrated in the Antioch, Liberty, Mt. Diablo, Pittsburg and West Contra Costa school districts. Since 2000, large increases in the number of children in poverty have occurred in Mt. Diablo (up 6,543), Antioch (up 4,228), West Contra Costa (up 4,195) and Pittsburg (up 2,945).
- ◆ Cost of care represents another critical barrier to access, even for middle class families earning at or near the county's annual median of \$94,208 in 2014. Full-time care for infants now costs an estimated \$13,602 per year, up \$952 since 2010.
- ◆ Rates of first entry into foster care in the county has been lower than that of the state since 2003. In 2013, the county's rate is 1.6 per 1,000 children, while the state's rate is 2.8. Rates in the county continue to be highest among African American children (6.3 per 1,000 children), which is 4 times higher than rates of first entry for Caucasians (1.6 per 1,000).
- ◆ The rate of first entry into foster care among the county's African Americans rose moderately from 5.6 in 2010 to 6.3 per 1,000 in 2013, while the rate among Latino children in the county dropped slightly from 1.4 to 1.3 per 1,000 in the same period.
- ◆ After dropping to 960 in 2010, the number of children in foster care in Contra Costa County has increased to 1,164 in 2013. About 28% of children in foster care (n=327) are 0-5 years old.

## **DEMOGRAPHICS OF CHILDREN ENROLLED IN HEAD START**

- ◆ In 2014-2015, the county's Early Head Start program served 397 0-3 year olds, while its Head Start program served 1,625 preschoolers. About one-third of Early Head Start enrollees were less than a year old, and about half of Head Start enrollees were 4 years old.
- ◆ In 2014, 58% of Early Head Start and 66% of all Head Start enrollees in the county are Latino, while 24% of Early Head Start and 20% of Head Start enrollees are African American. Caucasian enrollees make up nearly two thirds of Early Head Start (64%) and Head Start (67%) enrollees. Only 2% of Early Head Start and 4% of Head Start enrollees are Asian, while less than 1% of enrollees in either program are Pacific Islander/Native Hawaiian or American Indian/Alaskan.
- ◆ Single-parent families represent 70% and 63% of all families with children enrolled in Early Head Start and Head Start, respectively. Both figures are down since 2010.
- ◆ Income eligible children represent 67% of Early Head Start and 64% of Head Start enrollees, a 10.4 percentage point increase for Early Head Start and a 4.8 increase for Head Start since



2010. Enrollment based on receipt of public assistance represents 22% of Head Start and 18% of Early Head Start children in 2014. Both program's 2014 enrollment saw increases in eligibility based on being in foster care (3% of Head Start and 5% of Early Head Start children). The number and proportion eligible based on homelessness has not changed markedly since 2010.

- ◆ Disabilities among preschoolers in Head Start have steadily decreased in the past 8 years, dropping 49% from a high of 280 in 2007 to a 9-year low of 143 in 2014. In 2014, speech or language impairments continue to be most common, representing 86% of all diagnoses, a 7 point decline from the prior year. Unlike prior years, autism (n=6) and non-categorical developmental delay (n=5) represent the second and third most common disabilities in 2014.

## COMMUNITIES SERVED BY HEAD START

A total of 37 provider sites (including county, partner, and affiliate-operated childcare centers) located in the eastern, western and north central areas of the county deliver Head Start and Early Head Start services to residents. Provider locations have been largely concentrated in the predominantly urban or inner city areas of eastern, western and north central county to match neighborhoods of greatest need, high concentration of children age 0-5, and large immigrant populations. These communities have also been plagued with much higher than average poverty rates; high rates of violent crime, homelessness, and unemployment; and alarmingly high truancy and dropout rates. Residents in the 31 zip codes identified below access Head Start and Early Head Start services.

94505	94513	94520	94525	94531	94561	94582	94805
94506	94514	94521	94526	94547	94564	94801	94806
94509	94518	94522	94529	94549	94565	94803	94808
94511	94519	94523	94530	94553	94572	94804	

## Educational Profile

- ◆ In 2013, the percentage of county students who score proficient or above in English Language Arts exceeds the state (62% and 56%, respectively), and both the county and state have improved these percentages since 2011. Percentages vary widely from 42% in West Contra Costa Unified, to 92% in Orinda Union Elementary.
- ◆ The percentage of county students who score proficient or above in math also exceeds the state (56% and 51%, respectively), and both the county and state have improved these percentages since 2011. District percentages range from 38% in West Contra Costa Unified to 91% in Orinda Union Elementary.
- ◆ Contra Costa County also surpasses California in the percentage of students proficient or above in science (65% and 59%, respectively), and both the county and state have improved these percentages since 2011. District proportions range from 44% in Pittsburg Unified to 94% in Orinda Union Elementary.
- ◆ The proportion of Contra Costa County students who are English Learners, although historically lower than that of the state, continues to gradually approach state proportions. Between 2003 and 2013, while the proportion of English Learners in California dropped from 25% to 22%, the county experienced an increase from 15% to 17%.
- ◆ In 2013, the top 7 languages spoken by English Learners in Contra Costa County remain virtually unchanged from prior years and include Spanish (80%), Filipino/Tagalog (3%), Vietnamese (2%), Farsi/Arabic (2%), Mandarin (1%), Punjabi (1%) and Cantonese (1%).
- ◆ The countywide truancy rate has generally exceeded the state's rate since 2004, and at 30%, remains above the state's 29% in 2012-13. However, Orinda Union Elementary (<1%), Moraga Elementary (1%), and Knightsen Elementary (14%) have maintained relatively low rates, while West Contra Costa Unified (59%) and Pittsburg Unified (45%) struggle against rates far above state averages.

- ◆ Notably, truancy in Liberty Union High rose from <1% to 35% since 2010, and 2 other districts saw rates climb significantly, including Acalanes Union High (up 10.4 points), and Knightsen Elementary (up 12.1 points). In contrast, rates in John Swett Unified dropped from 57% to 21%.
- ◆ Although dropout rates in the county (8%) remain below that of the state (11%), rates here have increased 2 percentage points since 2000, while the state's rate rose less than 1 point. In 2013, dropout rates in 3 districts – Mt. Diablo Unified (12%), Pittsburg Unified (22%), and West Contra Costa Unified (13%) – all exceed the state's rate of 11%.
- ◆ Notably since 2001, dropout rates improved in West Contra Costa Unified (from 17% to 13%), John Swett Unified (from 10% to 7%), San Ramon Valley Unified (from 1% to <1%), and Liberty Union High (from 5% to 4%).
- ◆ The county has seen a reduction in dropout rates among students of all ethnicities in the past 8 years; however, since 2004, dropouts among Asian, Filipino and Caucasian students have been consistently the lowest in the county, while rates among African American, Latino, Native American and Pacific Islander students have been the highest.
- ◆ Bullying and harassment by classmates, implicated as one underlying cause of poor academic performance and truant behavior, is reported more often by Contra Costa County teens (44%) than by California teens overall (42%).
- ◆ Since 2005, the percentage of county residents with at least a high school education dropped slightly from 89% to 88%, compared to a 1% increase statewide. Notably, the percentage of county residents with less than a 9th grade education also increased from 5% to 6%, while the state's rate dropped slightly to 10%.

## **Additional Resources for Head Start Eligible Children**

No single agency would be capable of eliminating the myriad causes and effects of poverty. Collaborations of the private sector, government agencies, community-based, and faith-based organizations play a critical as they join forces, multiply individual efforts, and leverage scarce resources. The Community Services Bureau recognizes the Head Start, Early Head Start, CDD, and CSBG programs accessed by many residents are most effective in reducing or eliminating poverty's impact on children and families when they operate in unison with a comprehensive network of partnerships with hundreds of organizations committed to transforming individuals, families, neighborhoods, and entire communities.

With this perspective, the CSB continues its successful history of merging Head Start and Child Development programs into a unified Child Start program which offers more families full-day, year-round services such as high-quality preschool education; health and dental services; job skills training support for family members in the CalWORKs program; and family advocacy services. CSB-served families gain access to Heating/Energy Assistance, free meals, and emergency shelter offered through other county departments. Families also benefit from health services available through the CSB's extensive network of formalized collaborations, including First 5 Contra Costa (Prop 10), Women, Infants and Children (WIC), and the Child Health and Disability Prevention program (CHDP). Finally, families benefit from the CSB's affiliation with regional health advocacy groups such as the Contra Costa County Asthma Coalition, the Community Coalition, Injury Prevention Council, Baby Shots Immunization Coalition, Dental Health Action Team and Bay Point Partnership for public health.

# Demographics

From 2009 to 2013, Contra Costa County's population grew 3.7% from 1,041,274 to 1,079,460. During this period, the statewide growth rate was also 3.7%. The proportion of Caucasian residents dropped 4.1% in Contra Costa County and 2.9% California, while the percentage of Latino residents in Contra Costa County continues to be significantly lower than that of California overall (24.9% vs. 38.4%, respectively). The county's 46,285 increase in Asian residents since 2009 accounts for the majority of its growth and represents a 3.8% increase, compared to the state's 1.4% increase in Asian residents in this 4-year period.

**Table 1 – Population by Ethnicity 2009 – 2013**

ETHNICITY	2009			2013		
	CONTRA COSTA NUMBER	CONTRA COSTA PERCENT	CALIFORNIA PERCENT	CONTRA COSTA NUMBER	CONTRA COSTA PERCENT	CALIFORNIA PERCENT
Caucasian	741,387	71.2	76.4	723,829	67.1	73.5
African American	101,004	9.7	6.6	113,757	10.5	6.6
American Indian / Alaska Native	8,330	.8	1.2	17,728	1.6	1.7
Asian	146,820	14.1	12.7	193,105	17.9	14.1
Pacific Islander / Native Hawaiian	5,206	.5	.4	12,709	1.2	.5
Two or more races	38,527	3.7	2.6	62,717	5.8	3.7
Hispanic or Latino	241,576	23.2	37.0	267,184	24.9	38.4
<b>Total population</b>	<b>1,041,274</b>	<b>-</b>	<b>36,961,664</b>	<b>1,079,460</b>	<b>-</b>	<b>38,332,521</b>

Source: U.S. Census Bureau, Quick Facts; as of July 2014; 2011-2013 3-Year American Community Survey;  
<http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

Although Contra Costa County and California share similar household characteristics, the County saw a 1.4 percentage increase in families from 2009 to 2013, compared to the state's slight 0.1 percentage point decline. In 2013, female-headed households (with no husband present) account for 12.3% of the county's households compared to 13.7% in California. However, the number of female-headed households in the county rose by 8,764 and 1.8 percentage points since 2009, compared to the state's 4-year increase of just 0.8 points. The proportion of female-headed households with children also increased slightly in the county, while it decreased in the state.

**Table 2 – Household Characteristics 2009 – 2013**

HOUSEHOLD TYPE	2009			2013		
	COUNTY NUMBER	COUNTY PERCENT	CALIFORNIA PERCENT	COUNTY NUMBER	COUNTY PERCENT	CALIFORNIA PERCENT
Family households (families)	253,104	69.2	68.5	268,549	70.6	68.4
With own children < 18 years	120,947	33.4	34.8	126,814	33.4	32.1
Married-couple family	198,162	54.7	49.7	202,507	53.3	48.7
With own children < 18 years	92,821	25.6	24.5	94,979	25.0	22.2
Female householder, no husband present	37,859	10.5	12.9	46,623	12.3	13.7
With own children < 18 years	20,467	5.7	7.4	23,115	6.1	7.2
Nonfamily households	108,998	30.1	31.5	111,587	29.4	31.6
Householder living alone	86,591	23.9	24.5	88,852	23.4	24.4
Householder 65 year +	26,960	7.4	7.8	34,307	9.0	8.7
Households with individuals < 18 years	133,420	36.8	38.7	138,923	36.5	36.2
Households with individuals 65 years +	80,818	22.3	22.2	100,751	26.5	25.5
<b>Total households</b>	<b>362,102</b>	<b>-</b>	<b>12,097,894</b>	<b>380,136</b>	<b>-</b>	<b>12,581,722</b>

Source: <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

# Population Estimates

From 2007 to 2014, the population of Brentwood grew 65.9%, San Ramon grew 64.6%, and Oakley grew 41.3%. During this 7-year period, the city of San Pablo saw a 4.2% population decline, while Pinole dropped 3.6%. Between 2007 and 2014, population growth in Contra Costa County overall averaged 9.5%.

**Table 3 – Population by City and Percentage Change, 2007 – 2014**

Location	2007	2009	2011	2014	% Change
<b>COUNTYWIDE</b>	<b>992,700</b>	<b>1,020,898</b>	<b>1,065,117</b>	<b>1,087,008</b>	<b>9.5%</b>
Antioch	99,100	101,049	103,833	106,455	7.4%
Brentwood	33,000	40,912	52,575	54,741	65.9%
Clayton	10,950	10,982	10,996	11,200	2.3%
Concord	124,700	124,798	123,206	124,656	0.0%
Danville	43,100	43,273	42,450	43,146	0.1%
El Cerrito	23,500	23,407	23,774	24,087	2.5%
Hercules	20,450	23,360	24,272	24,572	20.2%
Lafayette	24,350	24,317	24,159	24,659	1.3%
Martinez	36,800	36,818	36,225	36,842	0.1%
Moraga	16,500	16,435	16,152	16,348	-0.9%
Oakley	26,950	28,265	36,532	38,075	41.3%
Orinda	17,800	17,797	17,819	18,089	1.6%
Pinole	19,500	19,604	18,560	18,794	-3.6%
Pittsburg	60,900	62,605	64,706	66,368	9.0%
Pleasant Hill	33,600	33,638	33,440	33,872	0.8%
Richmond	101,100	103,012	104,887	106,138	5.0%
San Pablo	30,750	31,344	29,105	29,465	-4.2%
San Ramon	46,950	51,027	74,378	77,270	64.6%
Walnut Creek	65,800	66,501	65,233	66,183	0.6%
<b>BALANCE OF COUNTY</b>	<b>156,900</b>	<b>161,754</b>	<b>162,815</b>	<b>166,048</b>	<b>5.8%</b>

Source: <http://www.dof.ca.gov/research/demographic/reports/estimates/e-1/view.php>

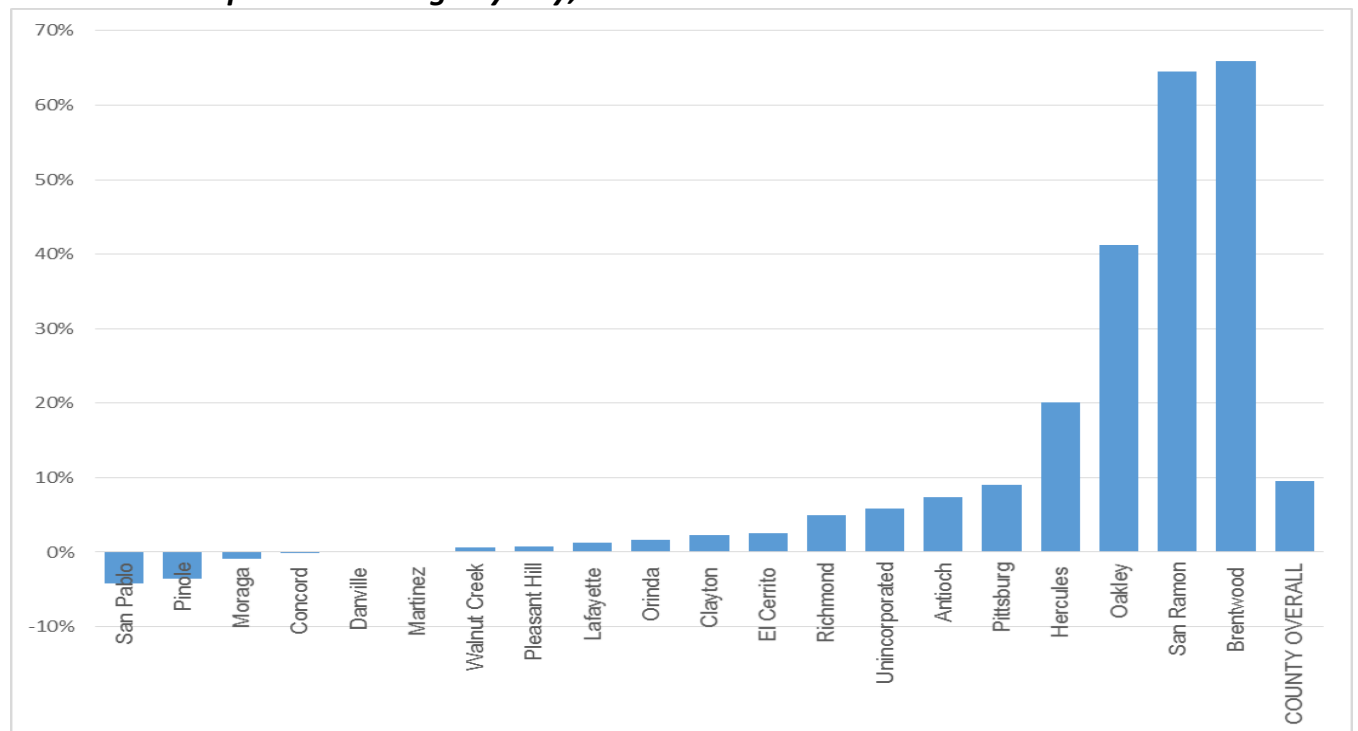
From 2007 to 2013, the proportion of children enrolled in nursery school, preschool and kindergarten in Contra Costa County and in California remained relatively constant overall. Patterns of enrollment since 2007 for elementary school, high school and college in the county also closely followed those of the state, with slight declines in high school enrollment and moderate gains in college enrollment, yet Contra Costa County continues to maintain a younger student body than the state overall. About 26% of Contra Costa County residents are enrolled in college or graduate school, compared to 30% of California residents.

**Table 4 – School Enrollment 2007 – 2013 (Percentage Age 3 and Over)**

	CONTRA COSTA 2007		CALIFORNIA 2007	CONTRA COSTA 2013		CALIFORNIA 2013
	COUNT	PERCENT	PERCENT	COUNT	PERCENT	PERCENT
Nursery school, preschool	17,851	6.5	5.6	17,855	6.1	5.6
Kindergarten	13,878	5.0	4.8	14,811	5.1	4.9
Elementary school (grades 1-8)	111,837	40.6	39.7	119,497	41.0	38.3
High school (grades 9-12)	63,847	23.2	22.3	63,297	21.7	21.1
College or graduate school	68,333	24.8	27.4	76,238	26.1	30.2
<b>Total Enrollment</b>	<b>275,746</b>		<b>10,341,546</b>	<b>291,698</b>		<b>10,589,030</b>

Source: U.S. Census Bureau, Quick Facts; as of July 2014; 2011-2013 3-Year American Community Survey; <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

**Figure 1 – Percent Population Change by City, 2007 - 2014**



Source: <http://www.dof.ca.gov/research/demographic/reports/estimates/e-1/view.php>

From 2005 to 2013, the percentage of Contra Costa County residents age 25 and over who have at least a high school diploma or GED dropped somewhat from 89.4% to 88.5%, compared to a slight increase of 1.4% among Californians overall. However, the proportion of Contra Costa County residents who have at least a bachelor's degree continues to surpass the state's proportion and grew to 39.1% in 2013. Notably, the percentage of County residents with less than a 9th grade education increased from 4.8% to 5.8% from 2005 to 2013, while the state's rate dropped slightly from 10.5% to 10.1%.

**Table 5 – Educational Attainment (Percentage Age 25 and Over)**

	CONTRA COSTA COUNTY		CALIFORNIA	
	2005	2013	2005	2013
Less than 9 <sup>th</sup> grade	4.8	5.8	10.5	10.1
9 <sup>th</sup> to 12 <sup>th</sup> grade, no diploma	6.8	5.6	9.4	8.4
High school graduate / GED	20.2	18.9	21.8	20.8
Some college, no degree	22.3	22.3	21.0	22.0
Associate degree	8.0	8.2	7.7	7.8
Bachelor's degree	24.0	24.9	18.9	19.5
Graduate or professional degree	13.9	14.2	10.6	11.3
Total population 25 years and over	<b>658,892</b>	<b>727,044</b>	<b>22,299,041</b>	<b>24,793,022</b>
Percent high school graduate or higher	89.4	88.6	80.0	81.0
Percent bachelor's degree or higher	37.9	38.6	29.5	30.5

Source: U.S. Census Bureau, Quick Facts; as of July 2014; 2011-2013 3-Year American Community Survey;  
<http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

# Economic Indicators

## Self-Sufficiency

The Self-Sufficiency Standard calculates the local or regional costs associated with each basic need to determine the household income individuals and families need to meet these basic needs without public subsidies or private assistance. It provides a more detailed, up-to-date, and regionally-specific measure than the FPL of what people must earn to be self-sufficient. In 2012, more than one-third of Contra Costa County households lived below the Self-Sufficiency Standard.

In 2014, the annual self-sufficiency standard in Contra Costa County for a family with one adult, an infant, a preschooler, and a school age child had increased to \$109,545, representing a fulltime hourly wage of about \$52. In 2013, the median family income in Contra Costa County was \$94,208.

**Table 6 – Percentage of Contra Costa Households above and below Self-Sufficiency Standard, 2012**

Household Status	Percent
Living Below 2012 Self-Sufficiency Standard	36.6%
Living Above 2012 Self-Sufficiency Standard	63.4%

**Table 7 – Self-Sufficiency Wage for Various Family Types, Contra Costa County, 2014**

Monthly Costs	Adult	Adult + Infant	Adult + Preschooler	Adult + Infant Preschooler	Adult + Infant Preschooler Schoolage	2 Adults + Infant Preschooler	2 Adults + Preschooler Schoolage
<i>Housing</i>	\$1,207	\$1,517	\$1,517	\$1,517	\$2,119	\$1,517	\$1,517
<i>Child Care</i>	\$0	\$1,324	\$1,058	\$2,382	\$2,889	\$2,382	\$1,565
<i>Food</i>	\$300	\$445	\$455	\$597	\$806	\$856	\$939
<i>Transportation</i>	\$103	\$103	\$103	\$103	\$103	\$206	\$206
<i>Health Care</i>	\$149	\$450	\$450	\$460	\$485	\$518	\$534
<i>Miscellaneous</i>	\$176	\$384	\$358	\$506	\$640	\$548	\$476
<i>Taxes</i>	\$416	\$957	\$842	\$1,541	\$2,436	\$1,343	\$1,004
<i>Earned Income Tax Credit</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<i>Child Care Tax Credit</i>	\$0	-\$50	-\$50	-\$100	-\$100	-\$100	-\$100
<i>Child Tax Credit</i>	\$0	-\$83	-\$83	-\$167	-\$250	-\$167	-\$167
<i>Self-Sufficiency Hourly Wages</i>	<b>\$13.36</b>	<b>\$28.67</b>	<b>\$26.42</b>	<b>\$38.85</b>	<b>\$51.87</b>	<b>\$20.18</b>	<b>\$16.98</b>
						<i>per adult</i>	<i>per adult</i>
<i>Monthly Wages</i>	<b>\$2,351</b>	<b>\$5,046</b>	<b>\$4,651</b>	<b>\$6,838</b>	<b>\$9,129</b>	<b>\$7,104</b>	<b>\$5,976</b>
<i>Annual Wages</i>	<b>\$28,209</b>	<b>\$60,557</b>	<b>\$55,807</b>	<b>\$82,059</b>	<b>\$109,545</b>	<b>\$85,246</b>	<b>\$71,711</b>

Source: Self-Sufficiency Standard Report for California, 2014; Center for Women's Welfare, University of Washington; <http://www.insightccd.org/>

## Annual Income

Table 8 compares the family income distribution of Contra Costa County and California residents from 2005 and 2013. While the lowest income families in the county constitute a smaller percentage of total families than in California overall, the proportion of Contra Costa County families that earn less than \$15,000 per year has increased slightly from 4.9% to 5.2%, while this proportion has remained constant in

the state. With cost of living increases in the relatively expensive Bay Area, the financial burdens borne by these 13,951 families, an increase of 1,439 families since 2005, is considerable. During the same period, both the county and the state experienced a moderate decline in middle income families.

Despite increases in lower income families and declines in middle income families, the County maintains a larger and growing share of families earning \$150,000 or more annually, compared to the state. In 2013, Contra Costa County families earned a median annual income of \$94,208, while California families earned a median annual income of \$67,746.

**Table 8 – Annual Income for Contra Costa County and California Families, 2005 – 2013**

INCOME	2005			2013		
	CONTRA COSTA COUNT	CONTRA COSTA %	CALIFORNIA %	CONTRA COSTA COUNT	CONTRA COSTA %	CALIFORNIA %
Less than \$10,000	7,929	3.1	4.5	8,491	3.2	4.7
\$10,000 to \$14,999	4,583	1.8	3.6	5,460	2.0	3.4
\$15,000 to \$24,999	15,409	6.1	9.5	15,634	5.8	8.7
\$25,000 to \$34,999	16,107	6.4	9.6	15,542	5.8	8.6
\$35,000 to \$49,999	26,494	10.5	13.3	25,757	9.6	12.1
\$50,000 to \$74,999	44,940	17.8	18.8	39,600	14.7	17.0
\$75,000 to \$99,999	36,372	14.4	13.7	33,799	12.6	12.7
\$100,000 to \$149,999	53,105	21.0	15.3	54,619	20.3	16.5
\$150,000 to 199,999	21,826	8.6	5.7	30,832	11.5	7.7
\$200,000 or more	26,339	10.4	5.8	38,815	14.5	8.7
Median family income	\$82,641		\$61,476	<b>\$94,208</b>	-	\$67,746
<b>Total Families</b>	<b>253,104</b>	<b>100.0</b>	<b>8,281,119</b>	<b>268,549</b>	<b>100.0</b>	<b>8,602,735</b>

Source: Source: U.S. Census Bureau, 2011-2013 3-Year American Community Survey;  
<http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

## Unemployment

While conditions continue to improve in both the local and state economies, the average family in Contra Costa County still faces multiple financial stressors, such as longer commute times, lower paying jobs and under-employment. In 2014, the unemployment rate in Contra Costa County dropped 3.3 percentage points from the 2012 rate of 9.0% to 5.7%, while the state's unemployment rate dropped 3.6 points from 10.9% to 7.3%. The 2014 unemployment rate in the county is now close to that last seen in 2008, while California's 2014 unemployment rate is still somewhat higher than 2008 levels.

**Table 9 – Unemployment Rates in Contra Costa County and California, 2002 – 2014**

	2002	2004	2006	2008	2010	2012	2014
<b>Contra Costa County</b>	5.3	5.3	4.0	5.6	10.8	9.0	5.7
<b>California</b>	6.3	6.1	4.6	6.4	11.9	10.9	7.3

Source: California Employment Development Department, Labor Market Information Division, 2014;  
<http://www.labormarketinfo.edd.ca.gov>

While Contra Costa County's overall 2014 unemployment rate of 5.7% is less than the state's 7.3% rate, several highly populated sub-areas in this region surpass both the state and countywide average, including San Pablo (11.8%), Richmond (9.5%) and Pittsburg (9.3%). Rates in Antioch (6.5%) and Concord (6.2%) surpass the countywide average. Areas with the lowest unemployment rates within the county include Clayton (1.3%), Lafayette (2.0%), Orinda (2.1%), San Ramon (2.3%) and Danville (3.0%).

**Table 10 – Annual Unemployment Rates by County Sub-Area, 2002 – 2014**

	2002	2004	2006	2008	2010	2012	2014
Alamo (CDP)	2.3	2.3	1.4	2.0	4.0	3.3	2.1
Antioch (City)	6.1	6.0	4.6	6.4	12.2	10.2	6.5
Bayview-Montalvin (CDP)	9.7	9.7	8.0	11.1	20.1	17.2	11.2
Bethel Island (CDP)	9.4	9.4	8.1	11.1	20.2	17.2	11.3
Blackhawk (CDP)	2.8	2.8	1.9	2.7	5.2	4.3	2.7
Brentwood (City)	4.7	4.7	3.5	5.0	9.6	8.0	5.0
Clayton (City)	1.1	1.1	0.9	1.3	2.6	2.2	1.3
Concord (City)	5.8	5.8	4.4	6.1	11.6	9.8	6.2
Crockett (CDP)	10.2	10.2	8.4	11.6	21.0	17.9	11.8
Danville (City)	2.7	2.7	2.1	2.9	5.7	4.7	3.0
Discovery Bay (CDP)	3.2	3.2	2.8	3.9	7.7	6.4	4.0
East Richmond Heights	6.1	6.1	4.9	6.8	13.0	10.9	7.0
El Cerrito (City)	4.7	4.7	3.6	5.0	9.6	8.0	5.1
El Sobrante (CDP)	4.7	4.7	3.6	5.0	9.6	8.0	4.6
Hercules (City)	3.5	3.5	2.8	4.0	7.7	6.4	4.0
Kensington (CDP)	2.0	2.0	1.4	2.0	3.9	3.2	2.0
Lafayette (City)	1.9	1.9	1.4	2.0	3.9	3.3	2.0
Martinez (City)	4.2	4.2	3.2	4.5	8.6	7.2	4.5
Moraga Town (City)	8.2	8.2	5.9	8.2	15.3	13.0	3.4
Oakley (CDP)	3.8	3.8	2.8	4.0	7.8	6.5	4.1
Orinda (City)	1.8	1.8	1.5	2.1	4.1	3.4	2.1
Pacheco (CDP)	5.1	5.1	4.2	5.8	11.1	9.3	5.9
Pinole (City)	3.4	3.4	2.7	3.9	7.5	6.2	3.9
Pittsburg (City)	8.6	8.6	6.6	9.1	16.9	14.3	9.3
Pleasant Hill (City)	4.3	4.3	3.2	4.5	8.8	7.3	4.6
Richmond (City)	8.8	8.8	6.7	9.3	17.2	14.6	9.5
Rodeo (CDP)	3.8	3.8	2.3	3.3	6.5	5.4	8.3
San Pablo (City)	11.1	11.0	8.5	11.7	21.1	18.0	11.8
San Ramon (City)	2.1	2.1	1.6	2.3	4.5	3.7	2.3
Tara Hills (CDP)	6.0	6.0	4.5	6.3	11.9	10.0	6.4
Vine Hill (CDP)	7.2	7.2	6.0	8.3	15.6	13.1	8.5
Walnut Creek (City)	3.5	3.5	2.7	3.7	7.3	6.1	3.8

Source: California Employment Development Department, Labor Market Information Division. 2006 – September 2014;  
[http://www.labormarketinfo.edd.ca.gov/CES/Current\\_Industry\\_Employment\\_and\\_Unemployment\\_Rates\\_for\\_California.html](http://www.labormarketinfo.edd.ca.gov/CES/Current_Industry_Employment_and_Unemployment_Rates_for_California.html)  
 Note: CDP stands for Census Designated Place.

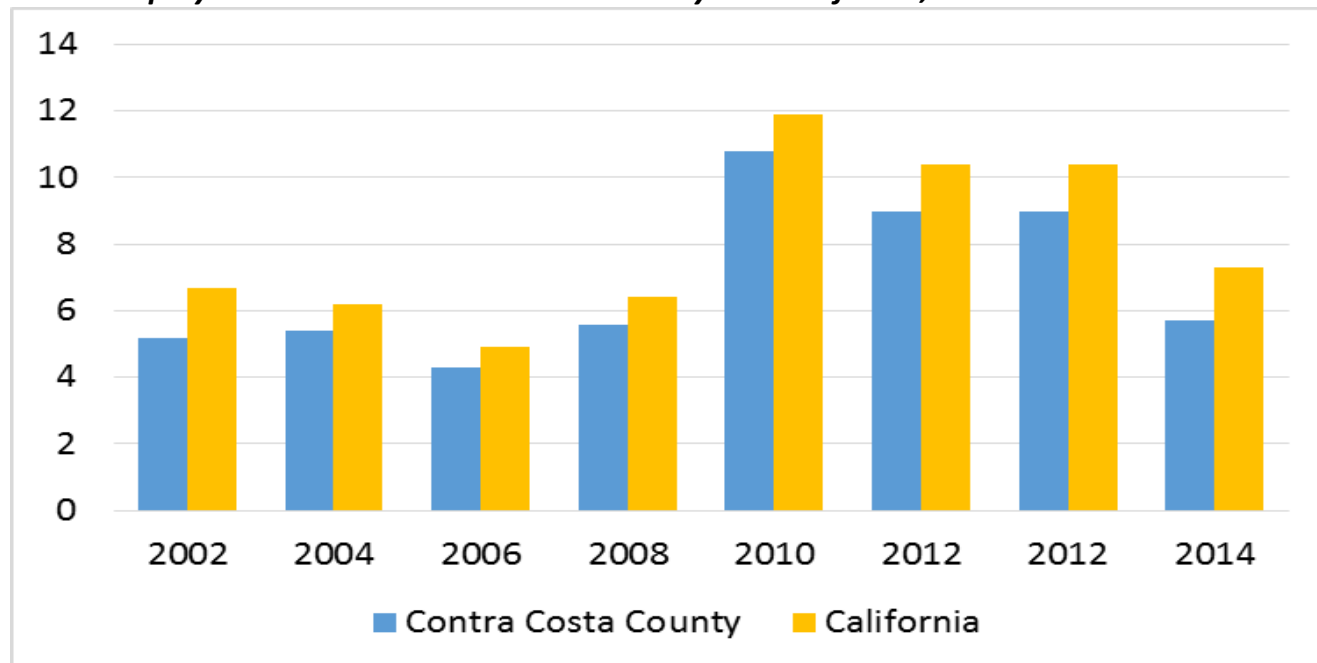
## Employment

While Contra Costa County's labor force grew a moderate 7.6% or 38,000 workers between 2000 and 2013, in the past thirteen years the county has lost about 2,300 jobs across all industries. Business trends in the region since 2000 have resulted in job losses in most industry sectors, including manufacturing, wholesale and retail trade, finance, transportation and utilities, government, farming, construction and professional services. Since 2000, Contra Costa County has particularly lost jobs in the relatively high paying sectors of construction; professional, scientific, and management; and manufacturing, although a



November 2014 study by the National Employment Law Project reports that, unlike in the past, manufacturing jobs now pay wages that are 8% below the median wage for all occupations.<sup>1</sup>

**Figure 2 – Unemployment Rates in Contra Costa County and California, 2002 – 2014**



**Table 11 – Cities with Unemployment Rates Higher Than the Countywide Average, September 2014**

Rank	City	Rate
1	San Pablo	11.8
2	Richmond	9.5
3	Pittsburgh	9.3
4	Antioch	6.5
5	Concord	6.2

Analysts project future growth in the demand for certain professionals, including more than a 33% growth in the need for economists, conservation scientists, pipe layers, soil and plant scientists and software developers by the year 2020.

**Table 12 – Projected Growth in Employment by Occupation, Contra Costa County 2010-2020**

Occupation	Employment		Employment Change	
	Estimated	Projected	Number	Percent
Economists	190	270	80	42.1
Conservation Scientists	230	320	90	39.1
Pipe layers	150	210	60	40.0
Soil and Plant Scientists	230	310	80	34.8
Software Developers, Applications	7,180	9,560	2,380	33.1

Source: EDD, Labor Market Information Division, 916-262-2162; [www.labormarketinfo.edd.ca.gov](http://www.labormarketinfo.edd.ca.gov). March 2013.

<sup>1</sup> [http://nelp.3cdn.net/9bcf95bb94ded5474e\\_82m6i48hk.pdf](http://nelp.3cdn.net/9bcf95bb94ded5474e_82m6i48hk.pdf)

**Table 13 – Contra Costa County Employment by Industry Sector, 2000 – 2013**

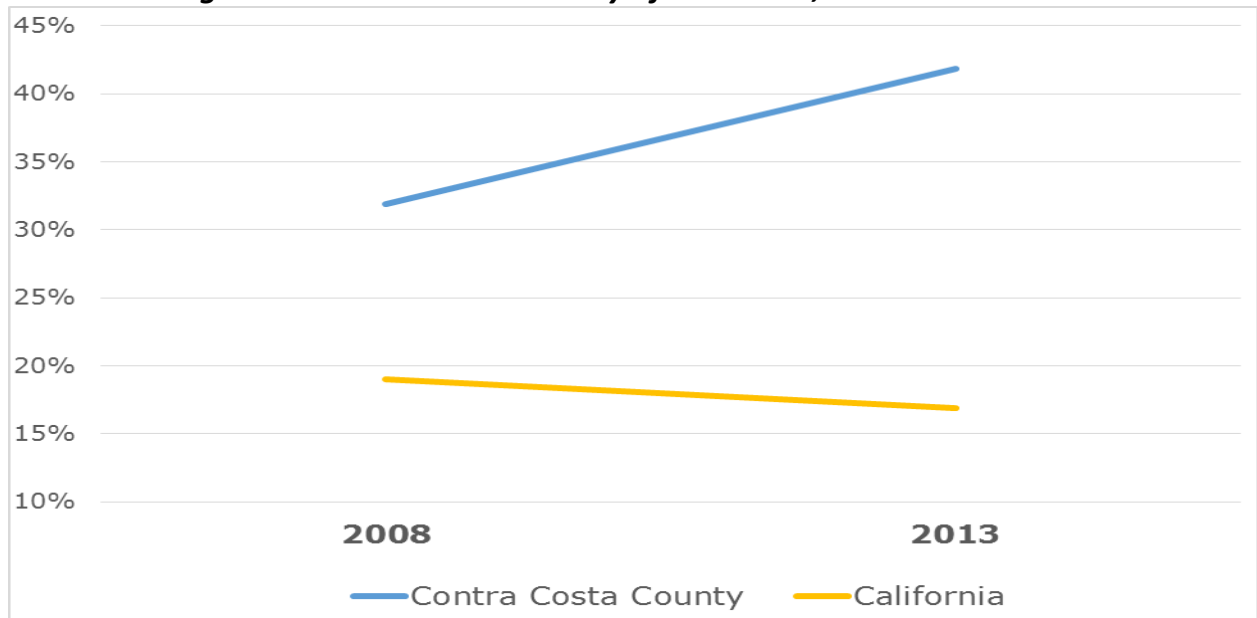
Industry Sector	2000		2010		2013	
	Number	Percent	Number	Percent	Number	Percent
Manufacturing	23400	6.9	18300	5.8	15800	4.7
Wholesale trade	9200	2.7	7600	2.4	8600	2.6
Retail trade	42700	12.6	40400	12.7	41000	12.2
Finance, insurance & real estate	26300	7.8	25300	8.0	25300	7.5
Transport., warehousing, & utilities	8900	2.6	8000	2.5	8500	2.5
Government	48200	14.2	49200	15.5	48100	14.3
Farming	2200	< 1.0	700	< 1.0	1000	< 1.0
Construction, logging & mining	28800	8.5	18300	5.8	21600	6.4
Professional & Business Services	54100	16.0	43800	13.8	51300	15.3
Employed, all industries	<b>338400</b>	-	<b>317200</b>	-	<b>336100</b>	-
Total civilian labor force	<b>500900</b>	-	<b>524200</b>	-	<b>538900</b>	-

Source: Employment Development Department Labor Market Information Division, 916-262-2162; [www.labormarketinfo.edd.ca.gov](http://www.labormarketinfo.edd.ca.gov). March 2013. <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

## Transportation

In 2013, 41.8% of Contra Costa County workers age 16 and older worked outside of the county compared to 16.9% statewide. Importantly, since 2008 the percentage of those who work outside of their county of residence has increased about 10 percentage points for Contra Costa County workers, while it has decreased about 2 percentage points for Californians overall. The average time Contra Costa residents spend traveling to work rose from 31.9 to 34.3 minutes from 2008 to 2013, which continues to be the longest commute among all nine Bay Area counties and surpasses the statewide average of 27.5 minutes.

**Figure 3 – Percentage Who Work Outside County of Residence, 2008 - 2013**



**Table 14 – Percent Who Work Outside County of Residence and Mean Commute Time, 2008 – 2013**

	Contra Costa County		California	
	2008	2013	2008	2013
Worked outside of county of residence	31.9%	41.8%	19.0%	16.9%
Mean travel time to work in minutes	31.9	34.3	27	27.5

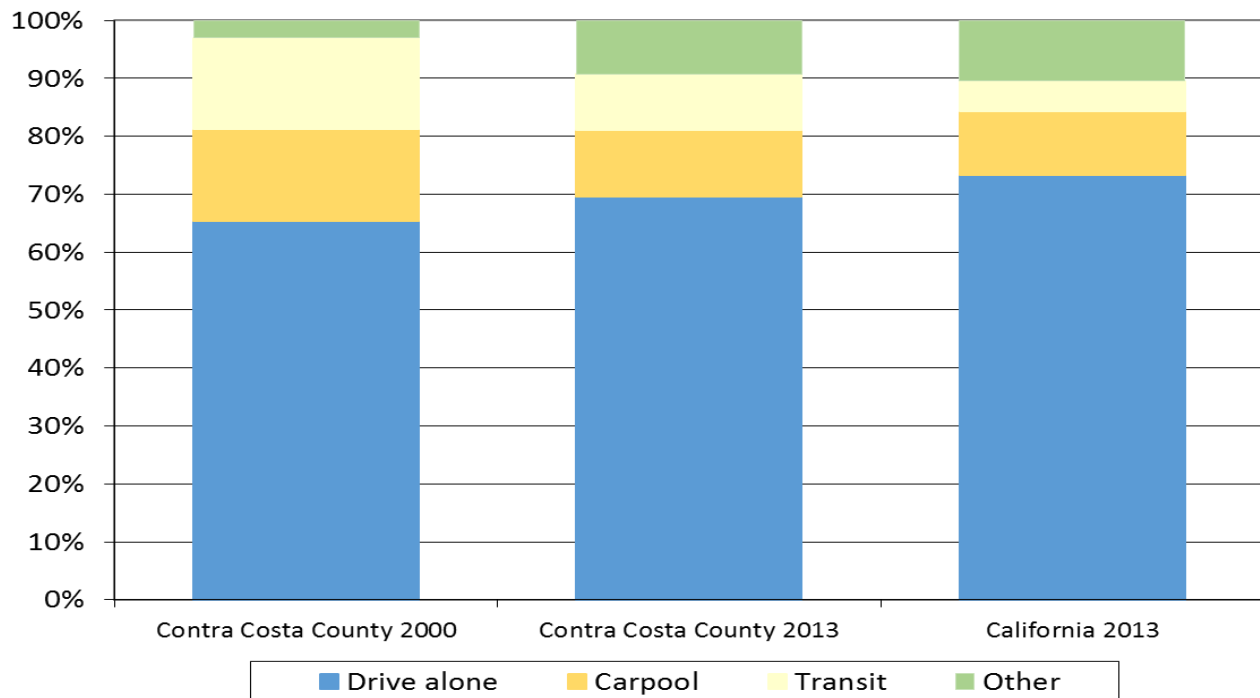
Source: U.S. Census Bureau, 2011-2013 American Community Survey 3-Year Estimates;  
<http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

In Contra Costa County, workers age 16 and over who travel to a work place are more likely to take public transit or carpool to work than workers in California overall, and they are less likely to drive alone. However, the percentage of workers who drive alone to work has steadily increased in the county from 66% in 2000 to 70% in 2013. Similarly, the percentage of Contra Costa County workers who carpool to work has decreased from 16% in 2000 to 12% in 2013, while the percentage who use transit (includes busses, trains and ferry boats) has also dropped from 16% in 2000 to 10% in 2013.

**Table 15 – Workers 16 Years and Over Commuting to Work, 2000 – 2013**

	Contra Costa County				California
	2000	2005	2010	2013	2013
Drive alone	66%	64%	69%	70%	73%
Carpool	16%	18%	13%	12%	11%
Transit	16%	15%	9%	10%	5%
Other	3%	12%	9%	9%	11%

Source: U.S. Census Bureau, 2011-2013 American Community Survey 3-Year Estimates;  
<http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

**Figure 4 – Means of Transport to Work for Contra Costa County Workers, 2000 – 2013**

## Poverty Status

Data from the 2011-2013 American Community Survey indicate that 8.2% of all families in Contra Costa County lived at income levels below the federal poverty level (FPL) in 2013, a steep increase from the 2008 rate of 6.3%. The statewide percentage of all families with income levels below poverty was 12.7%. Additionally, among Contra Costa County families with a female head of household (and no husband present), 21.5% live in poverty compared to 28.5% statewide.

Comparing 2008 to 2013 poverty levels reveals that while in 2013, the proportion of Contra Costa County residents who lived below poverty increased 2.5 percentage points, families in poverty with children under 18 increased 2.8 percentage points, Hispanics in poverty increased 4.1 percentage points, people in poverty who work less than fulltime increased 5.0 points, people in poverty who did not complete high school increased 5.2 points, and African Americans in poverty increased 5.8 percentage points. The County's poverty rate for female-headed households with children all under 5 years of age rose 10.0 percentage points from 30.0% to 40.0% since 2008.

**Table 16 – Percentage of Contra Costa Families with Income below Poverty Level, 2013**

Family Type	Percent Below Poverty
<b>All families</b>	8.2
With related children under 18 years	12.4
With related children under 5 years only	12.0
<b>Families with female householder, no husband present</b>	21.5
With related children under 18 years	30.9
With related children under 5 years only	40.0

**Table 17 – Percentage of Children Living at 0-99% of Federal Poverty Level, 2006 - 2013**

	2006	2008	2010	2013
<b>California</b>	18.1%	18.5%	22.0%	23.3%
<b>Contra Costa County</b>	9.8%	13.2%	12.6%	14.5%

Source: U.S. Census Bureau, 2011-2013 American Community Survey 3-Year Estimates;  
<http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

Among Contra Costa County residents less than 18 years old, 2013 poverty rates in several school districts exceed the overall county rate. Poverty rates for children in the Pittsburg (28.9%), Antioch (23.1%), John Sweet (22.4%), West Contra Costa (20.4%), Knightsen (20.0%), Mount Diablo (17.2%), and Byron (16.4%) school districts all surpass the county rate of 14.5%. Since 2000, the number of children in poverty in Contra Costa County school districts has increased by more than 24,600, while the percentage of children in poverty has increased in 13 of 17 school districts, from a 0.7 percentage point increase in Oakley to a 17.4 point increase in Pittsburg.

In 2013, 33,834 of the county's 40,590 children in poverty (83.4%) live in the five school districts of Antioch, Liberty, Mt. Diablo, Pittsburg and West Contra Costa. The largest 13-year increases in the number of children in poverty took place in the districts of Mt. Diablo (up 6,543), Antioch (up 4,228), West Contra Costa (up 4,195) and Pittsburg (up 2,945).

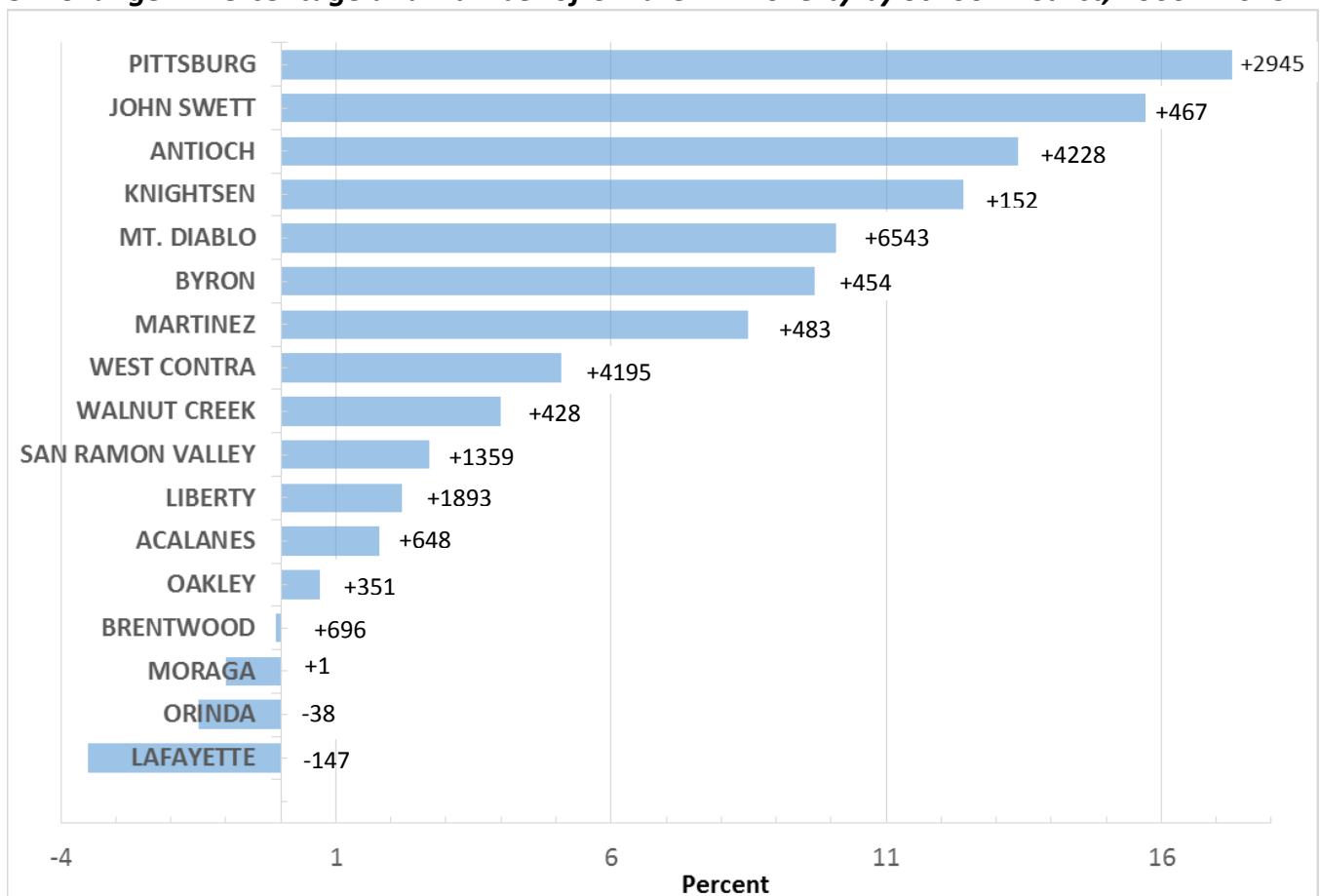
**Table 18 – Number and Percent of Children in Poverty by School District, 2000 – 2013**

School District	Number <18	2000 Number <18 in Poverty	Percent <18 in Poverty	Number <18	2013 Number <18 in Poverty	Percent <18 in Poverty	Number in Poverty Change	% in Poverty Change
ACALANES	4,901	70	1.4	22,151	718	3.2	648	1.8
ANTIOCH	23,286	2,257	9.7	28,074	6,485	23.1	4,228	13.4
BRENTWOOD	4,645	268	5.8	16,780	964	5.7	696	-0.1
BYRON*	1,473	98	6.7	3,371	552	16.4	454	9.7
JOHN SWETT*	2,918	188	6.4	2,926	655	22.4	467	16.0
KNIGHTSEN*	330	25	7.6	887	177	20	152	12.4
LAFAYETTE	4,194	148	3.5	6,376	1	0	-147	-3.5
LIBERTY	3,688	165	4.5	30,713	2,058	6.7	1,893	2.2
MARTINEZ	5,051	200	4	5,474	683	12.5	483	8.5
MORAGA*	2,241	78	3.5	3,200	79	2.5	1	-1.0
MT. DIABLO	45,797	3,265	7.1	56,959	9,808	17.2	6,543	10.1
OAKLEY	5,050	292	5.8	9,917	643	6.5	351	0.7
ORINDA*	2,796	51	1.8	4,631	13	0.3	-38	-1.5
PITTSBURG	12,339	1,418	11.5	15,109	4,363	28.9	2,945	17.4
SAN RAMON VALLEY	24,038	352	1.5	40,960	1,711	4.2	1,359	2.7
WALNUT CREEK	3,972	132	3.3	7,706	560	7.3	428	4.0
WEST CONTRA COSTA	45,404	6,925	15.3	54,635	11,120	20.4	4,195	5.1

Source: U.S. Census Bureau, 2011-2013 ACS; <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

\* 2013 estimates for these districts was not available at the time of this report. Estimates are from the 2008-2012 5-year ACS.

**Figure 5 – Change in Percentage and Number of Children in Poverty by School District, 2000 – 2013**



**Table 19 – Poverty Status in Contra Costa County, 2008 – 2013**

	2008			2013		
	Total	Below Poverty	Percent Below	Total	Below Poverty	Percent Below
Population for whom poverty status is determined	1,005,676	88,559	8.8	1,069,865	120,984	11.3
<b>AGE</b>						
Under 18 years	247,430	28,846	11.7	257,021	37,356	14.5
Related children under 18 years	246,349	27,807	11.3	256,250	36,624	14.3
18 to 64 years	640,984	52,591	8.2	672,113	73,636	11.0
65 years and over	117,262	7,122	6.1	140,731	9,992	7.1
<b>SEX</b>						
Male	493,811	38,536	7.8	521,812	53,704	10.3
Female	511,865	50,023	9.8	548,053	67,280	12.3
<b>RACE AND HISPANIC OR LATINO ORIGIN</b>						
One race						
White	620,555	43,605	7.0	669,720	63,715	9.5
Black or African American	90,953	15,078	16.6	95,642	21,443	22.4
American Indian and Alaska Native	4,168	300	7.2	5,776	767	13.3
Asian	135,619	8,726	6.4	157,524	12,958	8.2
Native Hawaiian and Pacific Islander	--	--	--	5,171	1,082	20.9
Some other race	108,115	16,331	15.1	73,838	14,060	19.0
Two or more races	42,116	3,860	9.2	62,194	6,959	11.2
Hispanic or Latino origin (of any race)	225,657	31,163	13.8	264,647	47,485	17.9
White alone, not Hispanic or Latino	514,147	29,760	5.8	499,322	32,105	6.4
<b>EDUCATIONAL ATTAINMENT</b>						
Population 25 years and over	666,799	47,393	7.1	722,835	65,859	9.1
Less than high school graduate	78,809	13,451	17.1	82,246	18,334	22.3
High school graduate / GED	131,913	13,792	10.5	136,290	17,011	12.5
Some college, associate's degree	203,165	12,072	5.9	220,742	19,926	9.0
Bachelor's degree or higher	252,912	8,078	3.2	283,557	10,588	3.7
<b>EMPLOYMENT STATUS</b>						
Civilian labor force 16 years and over	523,037	26,735	5.1	550,360	38,948	7.1
Employed	490,774	19,972	4.1	496,605	26,051	5.2
Male	263,469	9,744	3.7	264,469	13,094	5.0
Female	227,305	10,228	4.5	232,136	12,957	5.6
Unemployed	32,263	6,763	21.0	53,755	12,897	24.0
Male	17,175	3,373	19.6	28,900	6,548	22.7
Female	15,088	3,390	22.5	24,855	6,349	25.5
<b>WORK EXPERIENCE</b>						
Population 16 years and over	788,806	62,953	8.0	842,969	87,658	10.4
Worked FT, year-round past 12 months	316,594	4,220	1.3	329,643	6,144	1.9
Worked PT or part-year past 12 months	232,864	22,526	9.7	219,678	27,149	12.4
Did not work	239,348	36,207	15.1	293,648	54,365	18.5
<b>All Individuals below:</b>						
50 percent of poverty level	39,455	(X)	(X)	51,560	(X)	(X)
125 percent of poverty level	118,582	(X)	(X)	162,976	(X)	(X)
150 percent of poverty level	151,607	(X)	(X)	199,691	(X)	(X)
185 percent of poverty level	194,366	(X)	(X)	251,543	(X)	(X)
200 percent of poverty level	211,536	(X)	(X)	277,797	(X)	(X)
<b>Unrelated individuals for whom poverty</b>	166,158	28,356	17.1	172,837	38,520	22.3
Male	78,783	11,572	14.7	81,917	16,570	20.2
Female	87,375	16,784	19.2	90,920	21,950	24.1
<b>Mean income deficit for unrelated individuals (\$)</b>	\$3,707	(X)	(X)	\$6,819	(X)	(X)
Worked FT, year-round in past 12 months	70,804	1,080	1.5	68,203	1,208	1.8
Worked less than FT, year-round in past 12 months	46,134	10,741	23.3	43,107	12,182	28.3
Did not work	49,220	16,535	33.6	61,527	25,130	40.8

Source: U.S. Census Bureau, Poverty Status in Past 12 Months, 2011-2013 American Community Survey 3-Year Estimates;  
[http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_13\\_3YR\\_S1701&prodType=table](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_3YR_S1701&prodType=table).

**Table 20 – Change in Poverty Status in Contra Costa County, 2008 – 2013**

Subject	Change in Total Determined	Change in # Below Poverty	Change in % Below Poverty
Population for whom poverty status is determined	64,189	32,425	2.5
<b>AGE</b>			
Under 18 years	9,591	8,510	2.8
Related children under 18 years	9,901	8,817	3.0
18 to 64 years	31,129	21,045	2.8
65 years and over	23,469	2,870	1.0
<b>RACE AND HISPANIC OR LATINO ORIGIN</b>			
One Race			
White	49,165	20,110	2.5
Black or African American	4,689	6,365	5.8
American Indian and Alaska Native	1,608	467	6.1
Asian	21,905	4,232	1.8
Native Hawaiian and Other Pacific Islander	--	--	--
Some other race	-34,277	-2,271	3.9
Two or more races	20,078	3,099	2.0
Hispanic or Latino origin (of any race)	38,990	16,322	4.1
White alone, not Hispanic or Latino	-14,825	2,345	0.6
<b>EDUCATIONAL ATTAINMENT</b>			
Population 25 years and over	56,036	18,466	2.0
Less than high school graduate	3,437	4,883	5.2
High school graduate (includes GED)	4,377	3,219	2.0
Some college, associate's degree	17,577	7,854	3.1
Bachelor's degree or higher	30,645	2,510	0.5
<b>WORK EXPERIENCE</b>			
Population 16 years and over	54,163	24,705	2.4
Worked FT, year-round in past 12 months	13,049	1,924	0.6
Worked PT or part-year in past 12 months	-13,186	4,623	2.7
Did not work	54,300	18,158	3.4
<b>All Individuals below:</b>			
50 percent of poverty level	12,105	(X)	(X)
125 percent of poverty level	44,394	(X)	(X)
150 percent of poverty level	48,084	(X)	(X)
185 percent of poverty level	57,177	(X)	(X)
200 percent of poverty level	66,261	(X)	(X)
Worked full-time, year-round in past 12 months	-2,601	128	0.3
Worked less than FT, year-round in past 12 months	-3,027	1,441	5.0
Did not work	12,307	8,595	7.2

Source: Based on tables from U.S. Census Bureau, 2008 and 2013 American Community Survey. Note that calculations do not reflect margins of error inherent in estimates derived from samples and should be used prudently to represent relative change.

## Public Assistance

According to the California Department of Social Services, in September 2014, about 2.1% of all Contra Costa County residents are CalWORKs cash grant recipients. Participation in the County's CalWORKs program has grown nearly 20% from 18,619 individuals in 2002 to 22,305 in 2014, while the Welfare to Work program saw about an 11% increase in participation during the same 12 year period. Refugee Cash Assistance recipients are also up dramatically from prior years.

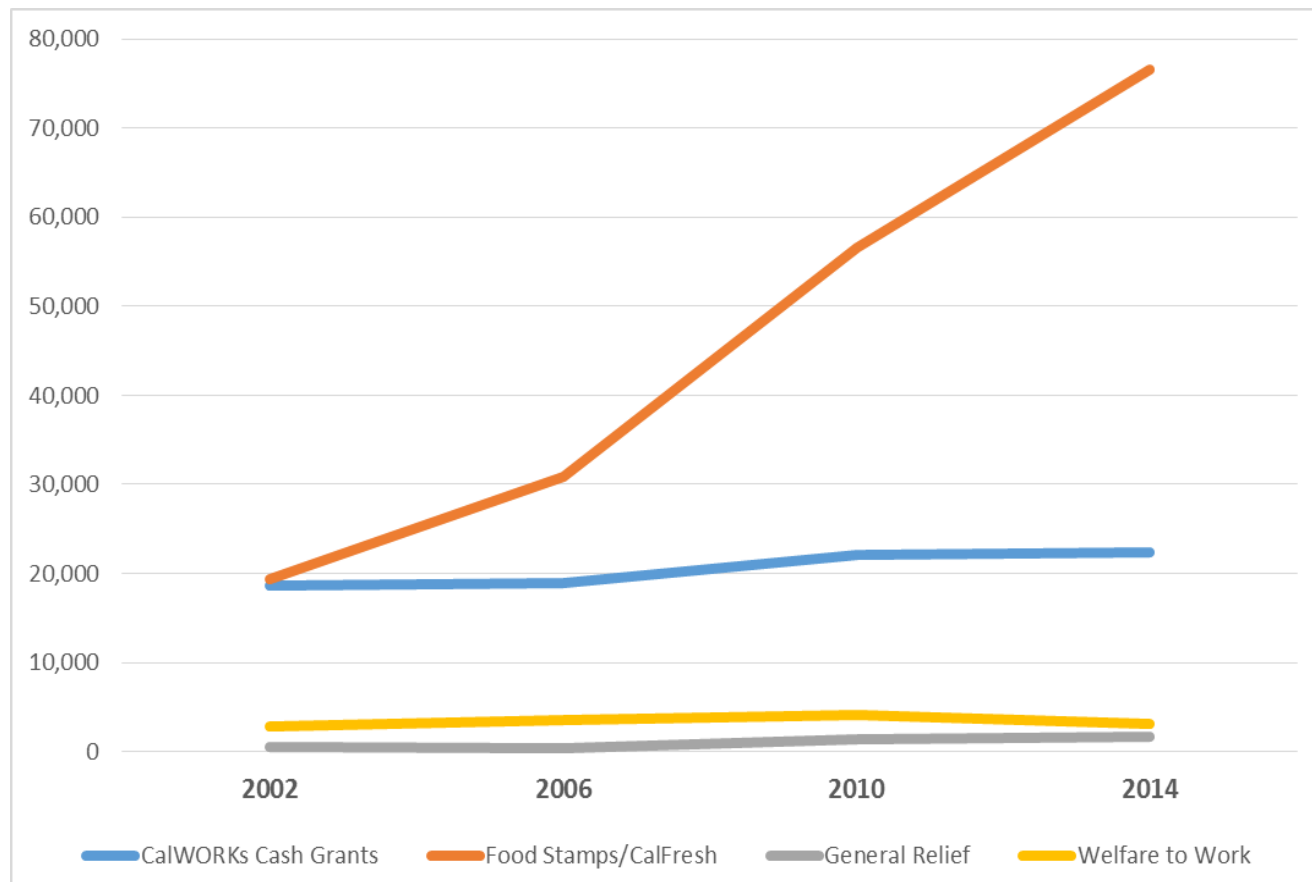
The number of CalFresh recipients in Contra Costa County far exceeds all other Public Assistance (PA) programs and participation rates have grown much faster than other programs. According to American Community Survey estimates, about 10,500 Contra Costa County households relied on some cash public assistance income in 2013, while more than 23,800 received SNAP benefits.

**Table 21 – Public Assistance Recipients by Program, Contra Costa County 2002 – 2014**

	2002	2006	2010	2014*
CalWORKs Cash Grants	18,619	18,938	22,038	22,305
Food Stamps/CalFresh	19,392	30,867	56,625	76,636
General Relief	446	387	1,395	1,630
Refugee Cash Assistance	14	n/a	24	328
Welfare to Work	2,822	3,531	4,087	3,137

Source: 2002–2010: <http://www.calmis.ca.gov/htmlfile/county/ccosta.htm>. As of 2014, Labor Market Information (LMI) tables are no longer prepared by the Employment Development Department. 2014 totals has been calculated from California Dept. of Social Services reports at <http://www.cdss.ca.gov/research/PG219.htm>; September 2014.

**Figure 6 – Number of Public Assistance Recipients in Contra Costa County, 2002 – 2014**



In 2014, over one third of CalWORKs cases were African American households (38.3%) followed by Latino households (30.9%) and Caucasian households (25.0%). Since 2002, the percentage of African American, Caucasian and Asian/Pacific Islander households with CalWORKs assistance has dropped, while the percentage of Latino households has increased. About 72% (1,624) of the 2,258 increase in cases since 2002 has been distributed to Latino households.

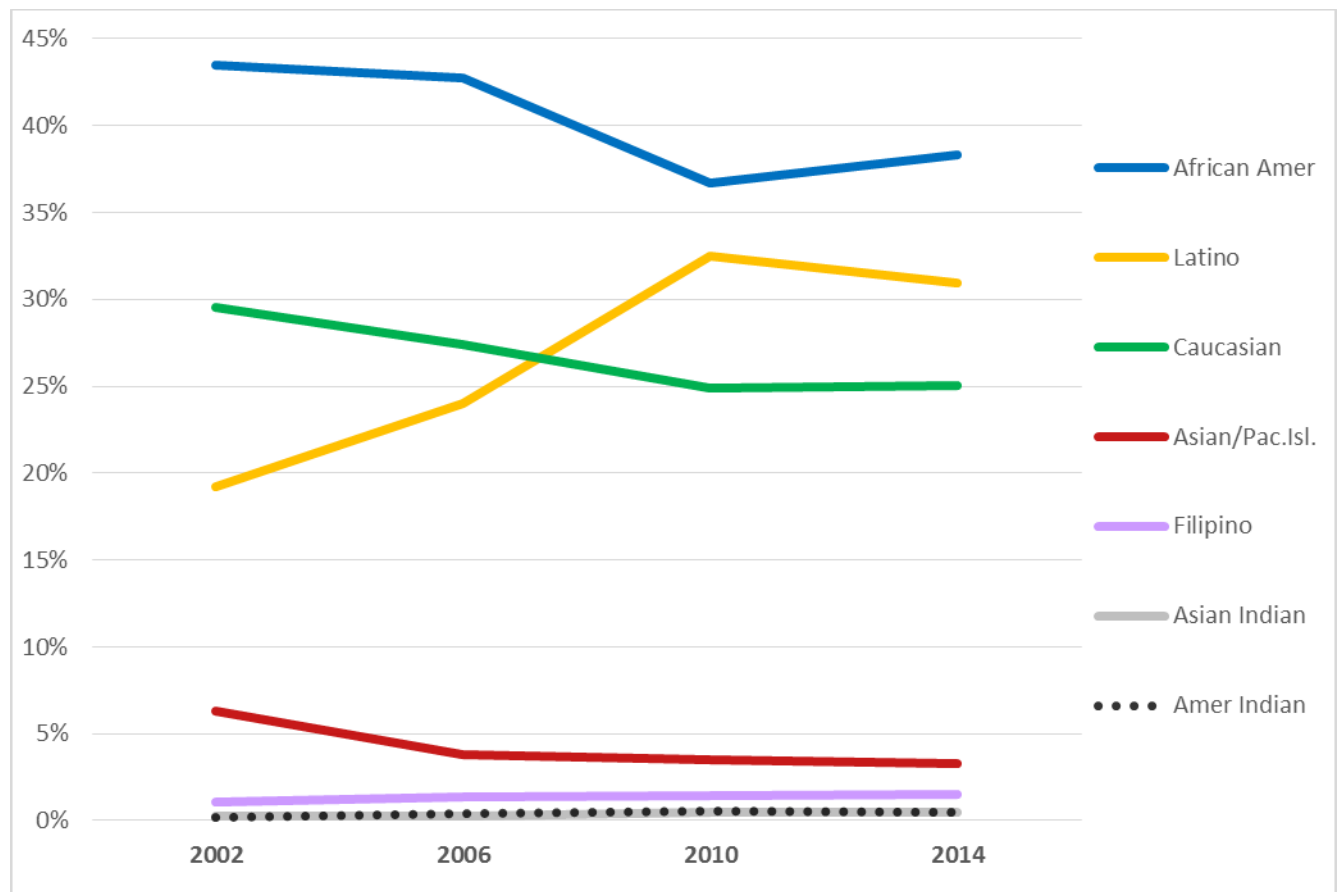


**Table 22 – CalWORKs Cash Grant Cases by Ethnicity, Contra Costa County, 2002 – 2014**

Ethnicity	2002		2006		2010		2014	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
African American	3,451	43.5%	3,846	42.8%	4,094	36.7%	3,908	38.3%
American Indian	12	0.2%	39	0.4%	58	0.5%	47	0.5%
Caucasian	2,342	29.5%	2,468	27.4%	2,776	24.9%	2,550	25.0%
Asian Indian	18	0.2%	23	0.3%	49	0.4%	49	0.5%
Filipino	84	1.1%	121	1.3%	160	1.4%	155	1.5%
Latino	1,527	19.2%	2,161	24.0%	3,625	32.5%	3,151	30.9%
Asian / Pacific Islander	503	6.3%	338	3.8%	388	3.5%	335	3.3%
<b>Total cases</b>	<b>7,937</b>	<b>100.0%</b>	<b>8,996</b>	<b>100.0%</b>	<b>11,150</b>	<b>100.0%</b>	<b>10,195</b>	<b>100.0%</b>

Source: California Dept. of Social Services; <http://www.cdss.ca.gov/research/PG369.htm>; July 2002, 2006, 2010 & 2014

**Figure 7 – Percentage of CalWORKs Cases by Ethnicity, Contra Costa County, 2002 – 2014**



In the past four years, the number of Contra Costa County households that receive CalFresh benefits has increased by 32.5% from 26,630 in 2010 to 35,280 in 2014. Currently, 30.0% of CalFresh cases are African American households, 29.7% are Latino households and 27.3% are Caucasian households.

**Table 23 – CalFresh Cases by Ethnicity, Contra Costa County, 2010 – 2014**

Race/Ethnicity	2010		2012		2014	
	Count	Percent	Count	Percent	Count	Percent
<b>African American/Black</b>	8,765	32.9%	10,130	30.7%	10,581	30.0%
<b>American Indian/Alaska Native</b>	170	0.6%	218	0.7%	213	0.6%
<b>Asian/Filipino/Pacific Islander</b>	1,469	5.5%	1,985	6.0%	2,272	6.4%
<b>Hispanic/Latino</b>	8,072	30.3%	9,877	30.0%	10,483	29.7%
<b>White</b>	7,486	28.1%	9,464	28.7%	9,618	27.3%
<b>Multiracial</b>	99	0.4%	250	0.8%	275	0.8%
<b>Other</b>	569	2.1%	1,053	3.2%	1,838	5.2%
<b>Total</b>	26,630	100%	32,977	100%	35,280	100%

Source: California Dept. of Social Services; <http://www.cdss.ca.gov/research/PG369.htm>; 2010, 2012 & 2014

## Free and Reduced Price Meals

The percentage of Contra Costa County students eligible to receive free and reduced price meals (FRPM) has demonstrated an upward trend since the 2004-05 school year in all but three districts. Brentwood Union Elementary, Contra Costa County Office of Education, and Walnut Creek Elementary all saw small declines in the percentage of FRPM-eligible students in the past nine years.

**Table 24 – Percentage Eligible for Free and/or Reduced Price Meals by District, 2004 – 2014**

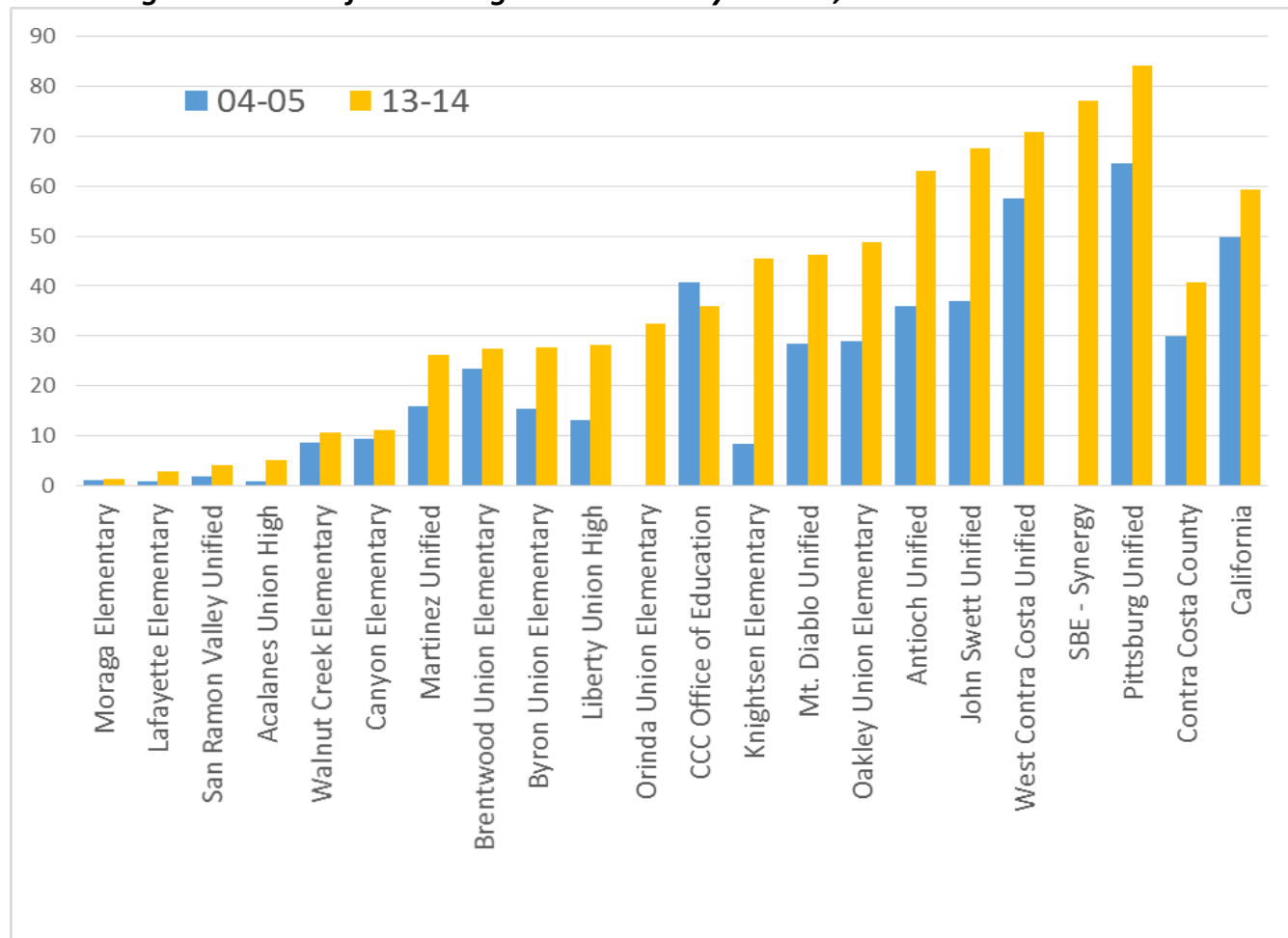
District	04-05	09-10	13-14
Acalanes Union High	0.9	2.52	5.0
Antioch Unified	36.1	54.1	63.2
Brentwood Union Elementary	23.5	28.4	27.4
Byron Union Elementary	15.5	26.5	27.6
Canyon Elementary	9.4	10.1	11.1
Contra Costa Co. Office of Education	40.8	62.7	36.1
John Swett Unified	36.9	45.5	67.5
Knighten Elementary	8.4	29.1	45.5
Lafayette Elementary	0.9	2.3	2.9
Liberty Union High	13.2	19.7	28.1
Martinez Unified	15.8	27.3	26.1
Moraga Elementary	1.0	1.0	1.4
Mt. Diablo Unified	28.5	39	46.2
Oakley Union Elementary	29	49.1	48.7
Orinda Union Elementary	0	1.1	32.4
Pittsburg Unified	64.6	78.4	84.3
San Ramon Valley Unified	1.7	2.7	4.2
SBE - Synergy	0	0	77.1
Walnut Creek Elementary	8.5	12.1	10.5
West Contra Costa Unified	57.5	65.8	70.9
Contra Costa County	<b>30</b>	<b>37.1</b>	<b>40.8</b>
California	<b>49.7</b>	<b>55.9</b>	<b>59.4</b>

Source: California Department of Education (CDE), Data & Statistics, 2014; <http://www.cde.ca.gov/>

Overall, the percentage of FRPM-eligible students grew in Contra Costa County from 30.0% to 40.8% since the 2004-05 school year, due primarily to large increases in the districts of John Swett Unified, Knightsen Elementary, Liberty Union High, Mt. Diablo Unified, Oakley Union Elementary, Orinda Union Elementary, Pittsburg Unified, West Contra Costa Unified and Antioch Unified. California schools also experienced nearly a 10 point increase in the percentage of FRPM-eligible students in the past nine years.

The top five districts with the highest percentage of FRPM-eligible students in 2013-14 are Pittsburg Unified (84.3%), SBE - Synergy (77.1%), West Contra Costa Unified (70.9%), John Swett Unified (67.5%) and Antioch Unified (63.2%). These districts all have percentages higher than the state average of 59.4%, and four of these districts (Antioch Unified, John Swett Unified, Pittsburg Unified, and West Contra Costa Unified) had the highest percentage of eligible students in the 2009-10 school year as well.

**Figure 8 – Change in Percent of FRPM-Eligible Students by District, 2005-2014**



## Housing and Homelessness

### HOUSING AFFORDABILITY

As the housing market in the Bay Area recovers and home prices increase from the record lows of 2011, the ability for residents in median income households to afford a home decreased dramatically in 2014, as shown in Table 25. The Housing Opportunity Index (HOI) is a measure used by the National Association of Home Builders (NAHB), as well as mortgage lenders, to determine the affordability of homes in a given region. The HOI is the proportion of homes sold in a given area that would have been affordable to a median income family of that area, assuming families can afford to spend no more than 28% of their income on housing.

In 2014, the Housing Opportunity Index in all major housing markets surrounding Contra Costa County (part of the Oakland-Fremont-Hayward area) remains considerably less than the national average (29.4 and 61.8, respectively).

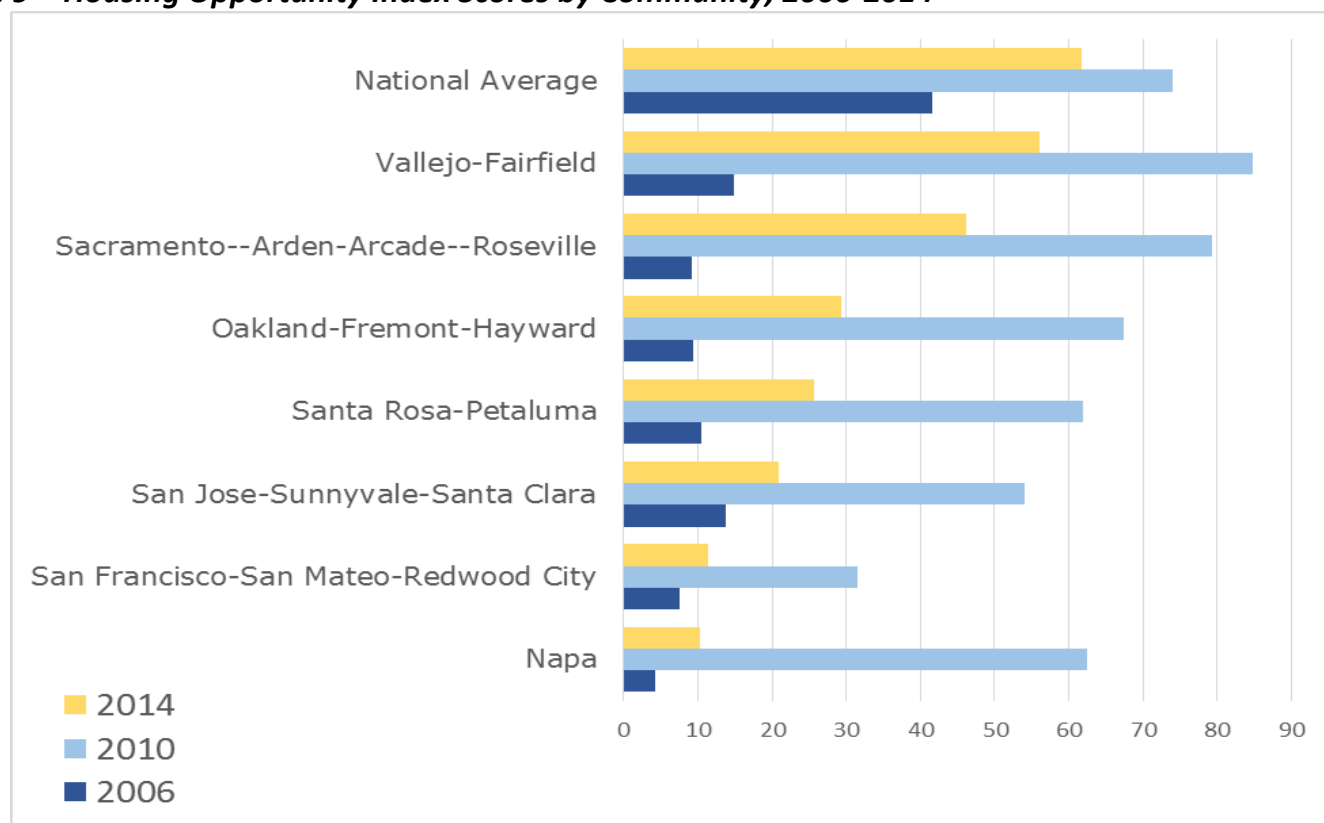
**Table 25 – Percentage of Homes Affordable to Median Income Households, 2006 – 2014**

	2006	2008	2010	2012	2014
<b>Napa</b>	4.3	35.3	62.5	64.4	10.2
<b>Oakland-Fremont-Hayward*</b>	9.3	60.1	67.3	64.4	29.4
<b>Sacramento--Arden-Arcade--Roseville</b>	9.2	66.0	79.3	79.5	46.2
<b>San Francisco-San Mateo-Redwood City</b>	7.5	20.6	31.5	28.4	11.4
<b>San Jose-Sunnyvale-Santa Clara</b>	13.7	44.0	54.1	48.5	20.9
<b>Santa Rosa-Petaluma</b>	10.4	47.4	61.9	66.2	25.6
<b>Vallejo-Fairfield</b>	14.9	64.6	84.8	86.4	56.0
<b>National Average</b>	<b>41.6</b>	<b>62.4</b>	<b>73.9</b>	<b>74.9</b>	<b>61.8</b>

Source: National Association of Builders, Housing Opportunity Index, 2014; Data from Q4 estimates, except 2014 figures published November 2014 for Q3; [http://www.nahb.org/reference\\_list.aspx?sectionID=135](http://www.nahb.org/reference_list.aspx?sectionID=135)

\* This region includes Contra Costa County

**Figure 9 – Housing Opportunity Index Scores by Community, 2006-2014**



In October 2014, the median and high sale price of homes varied greatly throughout the county from \$1,300,000 in Orinda (zip code 94563) to \$250,000 in Richmond (zip code 94801). Home prices also demonstrated large-scale 1-year adjustments as market conditions rapidly improved. Median home prices saw the largest 1-year increases of 103.3% in Byron (94514) and 33.3% in Rodeo (94572), while Alamo (94507) and Hercules (94547) saw the largest decreases in median home prices (-17.2% and -7.9%, respectively).

One year high sale price increases of more than 10.0% were recorded in about half of all Contra Costa County zip codes and six communities increased more than 20% in the past year (94514, 94519, 94565, 94801, 94804, and 94805). High sales prices in the six zip codes of 94507, 94517, 94528, 94531, 94556, 94582 and 94595 declined from 2013 to 2014.

**Table 26 – Median and High Sale Price of Single Family Residences, Condos, and New Homes by Contra Costa County Community, October 2014**

Community	Zip	Sales	% Change Since 2013	Median	% Change Since 2013	High Price	\$/SqFt	% Change Since 2013
Alamo	94507	19	18.8	\$1,070,000	-17.2	\$2,065,000	\$421	-4.5
Antioch	94509	83	13.7	\$278,000	14.1	\$620,000	\$169	14.1
Antioch	94531	68	-19.0	\$347,000	8.4	\$575,000	\$163	8.9
Brentwood	94513	126	29.9	\$475,000	17.1	\$952,000	\$200	11.9
Byron	94514	2	0.0	\$465,000	103.3	\$550,000	\$275	62.8
Clayton	94517	16	-38.5	\$627,000	14.4	\$860,000	\$298	-1.0
Concord	94518	46	27.8	\$472,500	24.3	\$1,075,000	\$318	3.5
Concord	94519	26	-7.1	\$382,500	2.7	\$505,000	\$297	20.8
Concord	94520	41	24.2	\$335,000	15.9	\$450,000	\$284	15.3
Concord	94521	51	-3.8	\$465,000	13.4	\$925,000	\$293	5.6
Danville	94506	42	2.4	\$1,137,000	21.6	\$1,762,000	\$385	0.2
Danville	94526	44	25.7	\$900,000	10.2	\$3,395,000	\$422	7.3
Diablo	94528	3	50.0	\$1,225,000	11.4	\$1,475,000	\$431	-12.2
El Cerrito	94530	33	50.0	\$670,000	8.9	\$1,550,000	\$421	11.4
El Sobrante	94803	30	15.4	\$432,500	12.7	\$673,500	\$267	11.8
Hercules	94547	34	13.3	\$350,000	-7.9	\$589,000	\$241	8.2
Lafayette	94549	37	23.3	\$1,108,000	17.2	\$3,080,000	\$566	19.6
Martinez	94553	45	-26.2	\$400,000	17.6	\$665,000	\$301	17.0
Moraga	94556	25	0.0	\$940,000	19.0	\$1,327,000	\$462	-2.2
Oakley	94561	64	3.2	\$323,000	-4.2	\$637,000	\$182	14.6
Orinda	94563	26	-3.7	\$1,300,000	31.3	\$2,750,000	\$578	15.9
Pinole	94564	24	26.3	\$425,000	21.4	\$540,000	\$267	9.5
Pittsburg	94565	90	-14.3	\$277,500	-3.8	\$621,500	\$195	21.6
Pleasant Hill	94523	53	3.9	\$521,000	-5.3	\$1,367,500	\$355	2.5
Richmond	94801	26	23.8	\$250,000	20.5	\$1,275,000	\$230	40.9
Richmond	94804	33	-32.7	\$279,000	21.3	\$770,000	\$241	26.2
Richmond	94805	14	-36.4	\$307,500	5.1	\$625,000	\$285	22.7
Rodeo	94572	7	-12.5	\$400,000	33.3	\$440,000	\$218	7.4
San Pablo	94806	55	25.0	\$306,500	17.9	\$630,000	\$250	16.7
San Ramon	94582	65	6.6	\$897,000	17.3	\$1,460,000	\$386	-1.2
San Ramon	94583	74	64.4	\$747,500	4.0	\$2,267,000	\$407	13.3
Walnut Creek	94595	29	-21.6	\$560,000	5.9	\$1,798,000	\$413	-13.8
Walnut Creek	94596	26	4.0	\$590,000	-4.8	\$1,710,000	\$460	8.7
Walnut Creek	94597	38	46.2	\$615,000	15.0	\$1,400,000	\$408	14.0
Walnut Creek	94598	24	-25.0	\$712,955	1.9	\$1,150,000	\$379	8.9

Source: Data Quick Information Systems, San Francisco Chronicle Charts; October 2014; <http://www.dqnews.com/charts/monthly-charts/sf-chronicle-charts/zipsfc.aspx>.

Housing costs for Contra Costa County renters also increased significantly since 2011. The median monthly rent for units of all sizes in the county (part of the Oakland-Fremont area) increased about 12.5% from 2011 to 2015. The median rent for a two-bedroom apartment in Contra Costa County was up from \$1482 in 2011 to \$1,709 in 2015. In comparison, the 2015 median rent for a 2-bedroom apartment is estimated to be \$1,283 in the Vallejo-Fairfield area and \$2,263 in the San Francisco area.

**Table 27 – Median Monthly Rents, Fiscal Year 2015**

	Studio	1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms
Napa	\$975	\$1222	\$1635	\$2333	\$2341
Oakland-Fremont	\$1120	\$1358	\$1708	\$2385	\$2926
Sacramento--Arden-Arcade--Roseville	\$726	\$865	\$1086	\$1600	\$1923
San Francisco	\$1378	\$1794	\$2263	\$3074	\$3717
San Jose-Sunnyvale-Santa Clara	\$1317	\$1541	\$1965	\$2771	\$3141
Santa Rosa-Petaluma	\$958	\$1117	\$1462	\$2154	\$2525
Vallejo-Fairfield	\$814	\$1024	\$1283	\$1891	\$2248

Source: HUD, User Data Sets, 50th percentile rents, FY 2015. Note: Oakland-Fremont area includes Contra Costa and Alameda Counties.

HUD defines affordable housing as that which costs no more than 30% of household income. Of Contra Costa County residents in housing units with a mortgage, 43.3% expend at least 30.0% of their income on housing costs in 2013, which is improved somewhat from 49.1% in 2012. Among renters, 55.7% expend at least 30.0% of their income on housing costs in 2013.

**Table 28 – Monthly Housing Costs as a Percentage of Household Income in the Past 12 Months, Contra Costa County, 2013**

Selected Housing Characteristics	Estimate	Margin of Error	Percent	Margin of Error
<b>Housing units with a mortgage*</b>	186,595	+/-2,499		(X)
Less than 20.0 percent	53,085	+/-1,967	28.4	+/-1.0
20.0 to 24.9 percent	28,731	+/-1,663	15.4	+/-0.9
25.0 to 29.9 percent	24,028	+/-1,356	12.9	+/-0.7
30.0 to 34.9 percent	20,347	+/-1,509	10.9	+/-0.8
35.0 percent or more	60,404	+/-2,041	32.4	+/-1.1
<b>Housing units without a mortgage*</b>	58,331	+/-1,667		(X)
Less than 20.0 percent	25,434	+/-1,191	43.6	+/-1.8
20.0 to 24.9 percent	10,437	+/-963	17.9	+/-1.5
25.0 to 29.9 percent	6,101	+/-631	10.5	+/-1.0
30.0 to 34.9 percent	3,981	+/-563	6.8	+/-0.9
35.0 percent or more	3,114	+/-523	5.3	+/-0.9
<b>Gross Rent as Percentage of Income*</b>	128,376	+/-2,723		(X)
Less than 20.0 percent	25,251	+/-2,022	19.7	+/-2.1
20.0 to 24.9 percent	16,209	+/-1,393	12.6	+/-1.0
25.0 to 29.9 percent	15,303	+/-1,240	11.9	+/-0.9
30.0 to 34.9 percent	11,999	+/-1,284	9.3	+/-1.0
35.0 percent or more	59,614	+/-2,277	46.4	+/-1.9

Source: U.S. Census Bureau, 2011-2013 American Community Survey 3-Year Estimates. \* Estimates exclude units where housing costs cannot be computed.

## HOMELESSNESS

According to the Department of Housing and Urban Development's (HUD) Point-in-Time (PIT) Count<sup>2</sup> of homelessness, in January 2014 an estimated 578,424 individuals in the US are homeless, which represents an overall 10% reduction in the homeless population since 2010. However, national-level data may not adequately depict the impacts of homelessness in regions such as Contra Costa County, as about 25% of the US homeless population live in California. HUD data trends also indicate the proportion of persons who utilize homeless services in suburban and rural areas has increased relative to that in large urban areas, and the proportion of persons in families who access services has increased relative to individuals. California also has the largest number of chronically homeless families.<sup>3</sup>

In 2013, a total of 6,635 people were estimated to have used homeless services in the county, and 1,370 (20.6%) of these were newly homeless. Nearly 38% of the county's homeless are less than 18 years of age and 17% are over the age of 55. In 2013, an estimated 1,997 students in Contra Costa County public schools, or approximately 1.2%, were homeless. This proportion is essentially unchanged since 2011.

**Table 29 – Estimated Homeless Persons in Contra Costa County by Sub-Area, 2009 – 2013**

Where did you lose your housing?*	2009			2013		
	Count	Percent	Newly Homeless	Count	Percent	Newly Homeless
Antioch	338	6.6	143	507	7.6	161
Concord	825	16.1	287	574	8.7	97
Martinez	194	3.8	72	222	3.4	37
Pittsburg	140	2.7	44	287	4.3	74
Richmond	1,871	36.5	728	1482	22.3	243
San Pablo	202	3.9	77	656	9.9	60
Walnut Creek	34	0.7	13	141	2.1	38
Other Central County	90	1.8	25	130	2.0	32
Other East County	97	1.9	41	241	3.6	77
Other South County	6	0.1	2	31	0.5	9
Other West County	130	2.5	53	563	8.49%	54
Other Contra Costa	35	0.7	0	5	0.1	0
Outside County	181	3.5	104	924	13.9	311
Unspecified/Unknown	984	19.2	282	872	13.1	177
<b>Total</b>	<b>5127</b>	<b>100</b>	<b>1871</b>	<b>6635</b>	<b>100</b>	<b>1370</b>

Source: [http://cchealth.org/services/homeless/pdf/hmis\\_demographics\\_report\\_fy08-09.pdf](http://cchealth.org/services/homeless/pdf/hmis_demographics_report_fy08-09.pdf) and [http://cchealth.org/services/homeless/pdf/hmis\\_demographics\\_report\\_fy12-13.pdf](http://cchealth.org/services/homeless/pdf/hmis_demographics_report_fy12-13.pdf)

\* Note that the survey question text in prior years was "What city did you sleep in last night?"

**Table 30 – Homeless Students in Contra Costa County by Nighttime Residence, 2011 – 2013**

Nighttime Residence	2011	2012	2013
Doubled Up with Friends or Relatives	80.0%	89.7%	85.3%
Hotel/Motel	4.3%	2.2%	3.4%
Temporary Shelter	14.7%	7.2%	9.4%
Unsheltered	1.0%	0.8%	1.9%

Source: <http://www.kidsdata.org/topic/40/homelessness/summary>

<sup>2</sup> The Department of Housing and Urban Development establishes and maintains requirements for conducting point-in-time (PIT) counts of homeless persons. Current standards and methods may be found at [http://www.hud.gov/offices/cpd/homeless/library/webcast101006/point\\_in\\_time\\_slides.pdf](http://www.hud.gov/offices/cpd/homeless/library/webcast101006/point_in_time_slides.pdf)

<sup>3</sup> <https://www.hudexchange.info/resources/documents/AHAR-2014-Part1.pdf>

In 2013, an estimated 85.3% of homeless students in Contra Costa were doubled up with friends or relatives at night, 9.4% were in temporary shelters and 1.9% were unsheltered. The percentage of homeless students who are unsheltered (1.9%) has nearly doubled since 2011 (1.0%).

According to January 2014 Continuum of Care (CoC) Homeless Assistance Program reports, the Richmond CoC Program provides services to approximately 2% of the state's 113,952 homeless individuals. Of these, 33.8% are sheltered and 66.2% are unsheltered. In contrast, about 37.3% of all homeless individuals served by CoC programs in California were sheltered in 2014.

**Table 31 – Homeless Population by Bay Area Community, January 2014**

Area	Total Homeless	Percent of CA Total	Sheltered		Unsheltered	
			Count	Percent	Count	Percent
San Jose/Santa Clara City & County	7,567	6.6%	1,893	25.0%	5,674	75.0%
San Francisco	6,408	5.6%	2,093	32.7%	4,315	67.3%
Oakland/Alameda County	4,272	3.7%	1,935	45.3%	2,337	54.7%
Sacramento City & County	2,449	2.1%	1,663	67.9%	786	32.1%
Santa Rosa/Petaluma/Sonoma County	4,266	3.7%	957	22.4%	3,309	77.6%
Richmond/Contra Costa County	2,009	1.8%	680	33.8%	1,329	66.2%
Marin County	679	0.6%	501	73.8%	178	26.2%
Daly/San Mateo County	2,024	1.8%	725	35.8%	1,299	64.2%
Napa City & County	285	0.3%	194	68.1%	91	31.9%
Vallejo/Solano County	1,295	1.1%	406	31.4%	889	68.6%
<b>California Total</b>	<b>113,952</b>		<b>42,515</b>	<b>37.3%</b>	<b>71,437</b>	<b>62.7%</b>

Source: HUD Exchange; <https://www.hudexchange.info/resource/4074/2014-ahar-part-1-pit-estimates-of-homelessness/>

## Health Indicators

### Healthcare Insurance

Based on 2011-2013 American Community Survey estimates, the percentage of uninsured residents in Contra Costa County (11.9%) continues to be less than that in California (17.7%). Furthermore, a higher percentage of county residents are covered by private insurance (72.6%) than California (60.1%) and a lower percentage are covered by public insurance (26.6%) than California (30.5%). The percentage of uninsured Contra Costa residents has dropped somewhat from 12.6% in 2009 to 11.9% in 2014.

**Table 32 – Health Insurance Coverage by Coverage Type, 2005 - 2012**

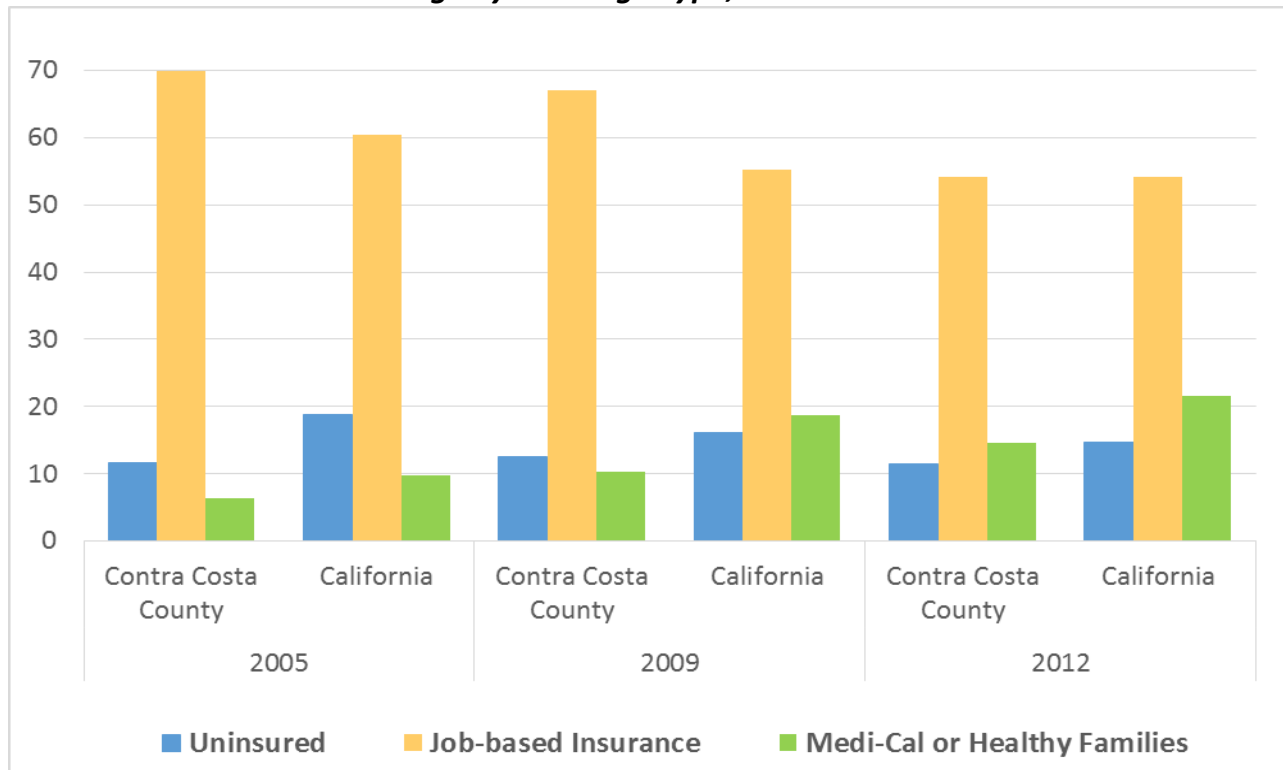
YEAR	AREA	PERCENT UNINSURED	PERCENT WITH JOB-BASED	PERCENT WITH MEDI-CAL
2005	Contra Costa County	11.7	69.8	6.3
	California	18.8	60.4	9.8
2009	Contra Costa County	12.6	67.1	10.4
	California	16.2	55.2	18.7
2012	Contra Costa County	11.4	54.2	14.6
	California	14.7	54.2	21.6

Source: <http://www.chis.ucla.edu/main/default.asp>

Since 2005, the percentage of residents in the county who are uninsured has remained relatively constant, while the state rate of uninsured has decreased from 18.8% in 2005 to 14.7% in 2012. In contrast, the percentage of county residents with job-based coverage has steadily decreased from 9.4 points above the state in 2005 to exactly the state rate in 2012 (54.2%). In both the state and the county, the percentage with Medi-Cal or Healthy Families coverage has more than doubled since 2005.



**Figure 10 – Health Insurance Coverage by Coverage Type, 2005-2014**



**Table 33 – Health Insurance Coverage of Residents by Federal Poverty Level (FPL), 2009 – 2012**

	2009		2012	
	Contra Costa County	California	Contra Costa County	California
<b>0-99% of FPL</b>				
Percent Uninsured	31.3	29.2	24.1	24.8
Percent with Job-Based Insurance	22	11.5	7.5*	11.3
Percent with Medi-Cal	39.8	53.1	50.3	56
<b>100-199% of FPL</b>				
Percent Uninsured	23.3	26.9	21.3	26.5
Percent with Job-Based Insurance	36.1	31.6	35.7	30.2
Percent with Medi-Cal	22.7	24.7	32	29

Source: <http://ask.chis.ucla.edu/main/DQ3/geographic.asp>

## HEALTHCARE INSURANCE – HEALTHY FAMILIES

Cut from the state budget after fifteen years of providing low-cost health, dental, and vision coverage for children in low- and moderate-income families, the California Healthy Families Program (HFP) dropped enrollment from 13,528 Contra Costa County families in 2012 to only 26 families in 2014. Due to these budget cuts, families previously eligible for Healthy Families coverage have been transitioning to Medi-Cal coverage since January 2013.

**Table 34 – Health Insurance Coverage of Children by Age Group, 2009 - 2012**

	2009		2012	
	CONTRA COSTA COUNTY	CALIFORNIA	CONTRA COSTA COUNTY	CALIFORNIA
<b>Age 0-4 years</b>				
Uninsured	-	3.6	-	3.5
Medi-Cal	25.1*	38.6	44.6	48.0
Healthy Families	1.1*	4.2	-	4.6
Employment-based	67.4	47.0	47.5	39.5
Privately purchased	6.1	3.9	7.7*	2.9
Other public	-	2.7	-	1.5
<b>Total</b>	<b>70,000</b>	<b>2,736,000</b>	<b>82,000</b>	<b>2,523,000</b>
<b>Ages 5-9 years</b>				
Uninsured	1.4*	4.5	-	2.7
Medi-Cal	13.9	28.3	10.2	36.1
Healthy Families	4.3*	9.4	5.8*	7.7
Employment-based	75.9	51.5	74.7*	47.9
Privately purchased	4.5%	4.6	8.4*	4.3
Other public	-	1.7	-	1.4
<b>Total</b>	<b>3,000</b>	<b>2,580,000</b>	<b>45,000</b>	<b>2,414,000</b>
<b>Ages 10-17 years</b>				
Uninsured	.8*	4.9	3.8*	4.2
Medi-Cal	17.2	28.9	24.9	35.8
Healthy Families	1.7*	7.2	2.4*	7.6
Employment-based	75.8	52.5	59.8	46.9
Privately purchased	4.5	4.3	8.9*	4.1
Other public	-	2.3	-	1.5
<b>Total</b>	<b>252,000</b>	<b>9,815,000</b>	<b>255,000</b>	<b>9,135,000</b>

Source: <http://www.chis.ucla.edu/main/default.asp>

Note: Hyphen = less than 500 people; \*Indicates estimate may be statistically unreliable due to small sample size

## Disability Status

According to the California Department of Education, Special Education Division, in 2014 there were 2,309 children in Contra Costa County less than 6 years of age with disabilities. Children with speech or language impairment disabilities continue to account for the vast majority of students age 2 through 5 enrolled in Special Education. However, autism persists as a growing concern among Special Education students in Contra Costa County. As the second most common disability, autism impacts 16.5% of students in the 3 to 5 year old age group, up from 14.2% in 2011. The other most common disabilities of Special Education students include hearing impairment, developmental delay and other health impairment.

In 2014, the county's distribution of special education students age 0 to 5 by disability or impairment type remains fairly similar to 2009 distributions, with the exception that children with speech or language impairments currently represent a slightly smaller proportion of all special education students (71.8%) compared to 2009 (72.9%), and those with autism represent a higher proportion (16.5%) compared to 2009 (11.4%). The proportion of children with hearing impairments may also be trending upwards with an increase from 3.7% in 2009 to 4.1% in 2014.

**Table 35 – Countywide Special Education Enrollment by Age and Disability, 2013-14**

Type of Disability	Age 0	Age 1	Age 2	Age 3	Age 4	Age 5	Total
Developmental delay	0	0	0	15	24	27	66
Hard of hearing	*	18	25	21	16	15	95
Deaf	*	*	*	*	*	*	0
Speech or language impairment	0	*	87	377	566	616	1646
Visual impairment	0	*	*	*	*	*	0
Orthopedic impairment	*	*	*	17	17	17	51
Other health impairment	0	0	*	18	20	25	63
Specific learning disability	0	0	0	0	*	11	11
Deaf-blindness	0	0	0	0	*	0	0
Multiple disability	0	0	*	*	*	*	0
Autism	0	0	*	93	147	137	377
Traumatic brain injury	0	*	0	0	*	*	0
Emotional Disturbance	0	0	0	0	*	*	0
<b>TOTAL</b>	<b>0</b>	<b>18</b>	<b>112</b>	<b>541</b>	<b>790</b>	<b>831</b>	<b>2309</b>

Source: CA Department of Education, Special Education Division, as of 2014; <http://dq.cde.ca.gov/dataquest/SpecEd/>

\* Denotes less than 11.

## Physical Fitness

Students who meet all six of the fitness standards on the California Physical Fitness Test are considered to be fit. Since 2004, the percentage of 5th, 7th and 9th graders in Contra Costa County who are physically fit exceeded that of the state in every year except one. In 2010, a slightly smaller percentage of 7th graders in Contra Costa County met the physical fitness standard than did 7th graders in California overall (31.4% and 32.1%, respectively).

Both the county and state demonstrate an overall upward trend in fitness among 9th graders since 2004. The percentage of 9th graders in Contra Costa County who meet all of the six fitness standards has grown from 30.6% in 2004 to 40.9% in 2013. However, 5th and 7th graders in the county have not seen the same gradual fitness improvements experienced by California students overall.

**Table 36 – Percentage of Students who are Physically Fit, Contra Costa & California, 2004 – 2013**

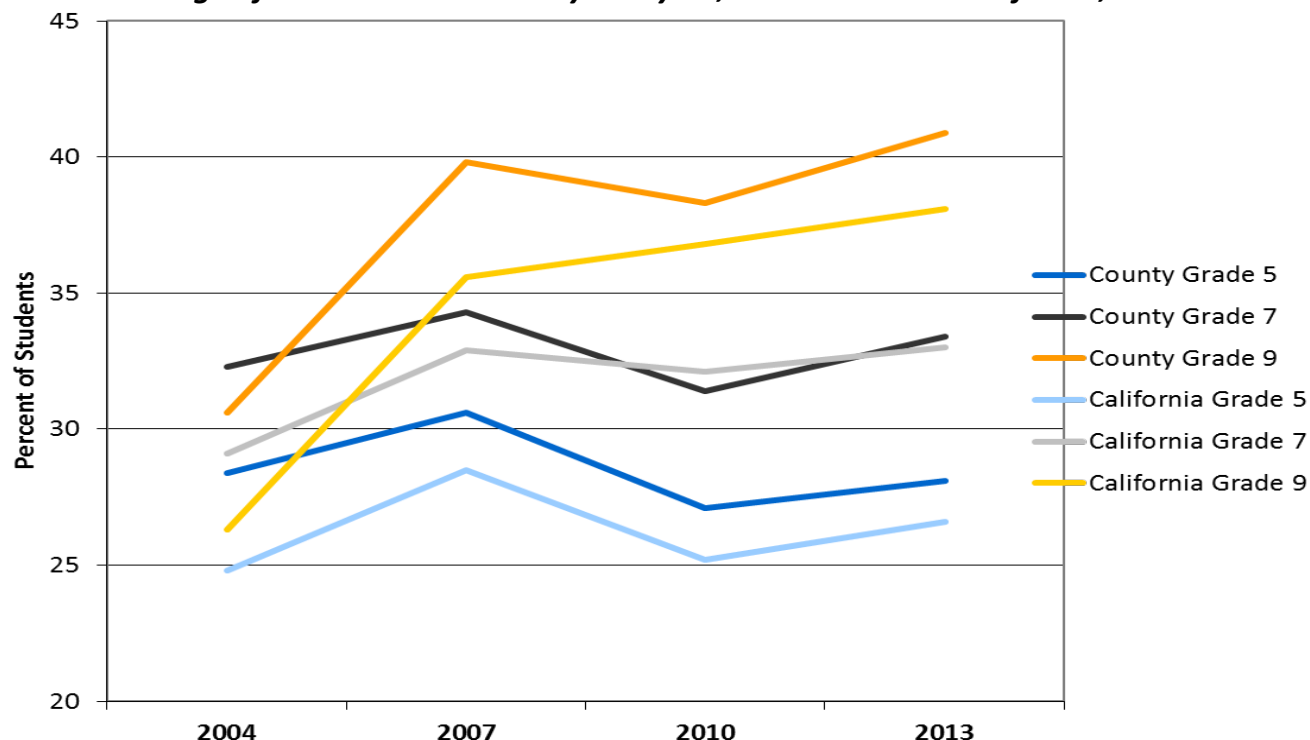
	2004	2007	2010	2013
<b>CONTRA COSTA COUNTY</b>				
Grade 5	28.4	30.6	27.1	28.1
Grade 7	32.3	34.3	31.4	33.4
Grade 9	30.6	39.8	38.3	40.9
<b>CALIFORNIA</b>				
Grade 5	24.8	28.5	25.2	26.6
Grade 7	29.1	32.9	32.1	33
Grade 9	26.3	35.6	36.8	38.1

Source: <http://dq.cde.ca.gov/dataquest/>

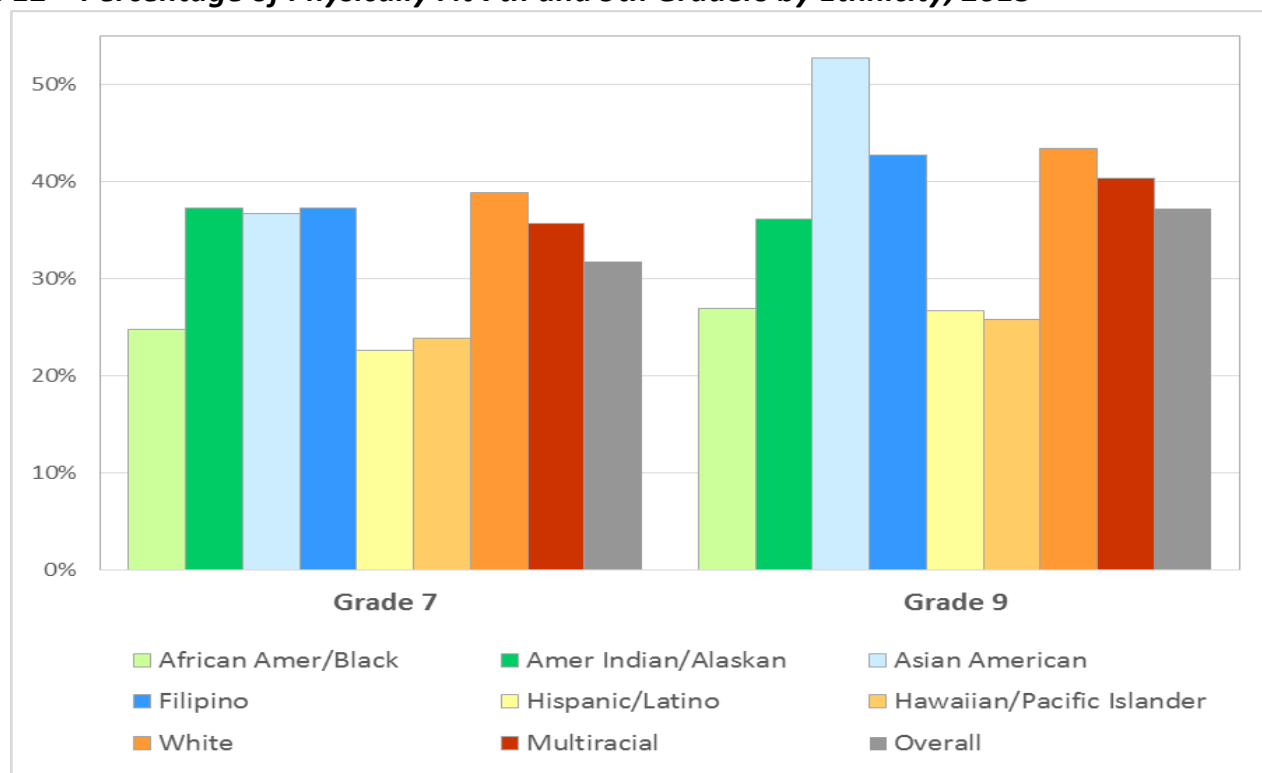
Note: Students meeting six of six fitness standards are considered physically fit.

Importantly, not all students achieve these same grade-related fitness improvements, as fitness scores vary very considerably by race and ethnicity. In 2013, 9th graders who are Native Hawaiian/Pacific Islander, Hispanic/Latino or African American were less likely to be physically fit, while Asian Americans, Whites and Filipinos were more likely to be physically fit.

**Figure 11 – Percentage of Students who are Physically Fit, Contra Costa & California, 2004 – 2013**



**Figure 12 – Percentage of Physically Fit 7th and 9th Graders by Ethnicity, 2013**



The healthy fitness zone (HFZ) for body composition is 17% - 32% body fat for females and 10% - 25% for males. Contra Costa County as a whole has surpassed the state's proportion of 5th graders in the HFZ for body composition by at least 4 percentage points since 2009; however, both the county and the state have seen this percentage drop 8 to 9 percentage points in the past four years.

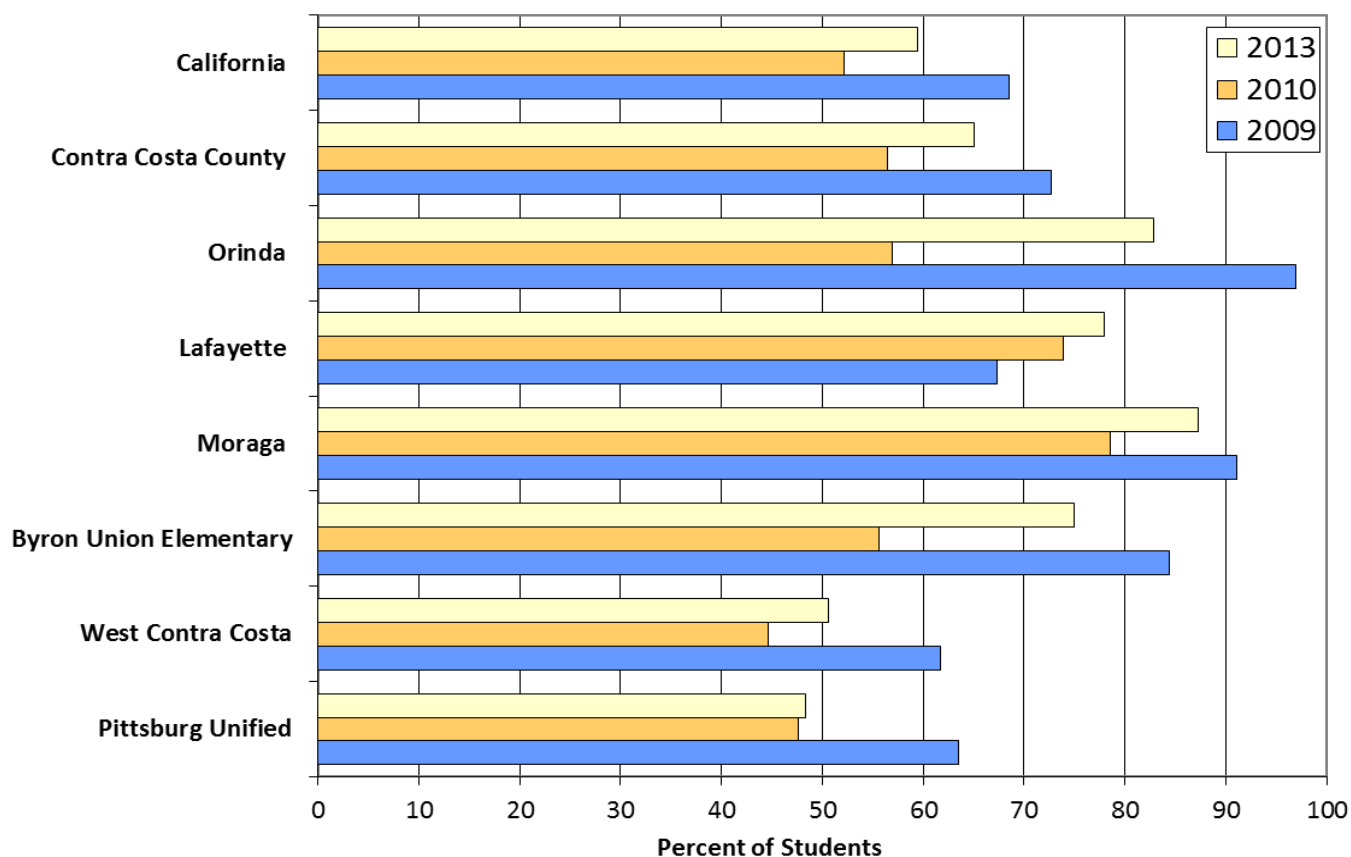
Additionally, individual school districts in the county vary widely from a high of 87.3% in Moraga Unified to a low of 48.3% in Pittsburg Unified. Notably, Lafayette Unified is the only district in Contra Costa County that saw an improvement in the percentage of 5th graders in the HFZ for body composition in the last four years, up 10.6 points from 67.3% in 2009 to 77.9% in 2013. Notably, three districts saw 4-year declines of more than 10 percentage points, including Pittsburg Unified (-15.2), Orinda Unified (-14.2) and West Contra Costa (-11.1).

**Table 37 – Percentage of 5th Graders in Healthy Fitness Zone on Body Composition, 2009 – 2013**

	2009		2010		2013	
	Total Tested	% In HFZ	Total Tested	% In HFZ	Total Tested	% In HFZ
Pittsburg Unified	762	63.5	775	47.6	783	48.3
West Contra Costa Unified	2,185	61.7	2,215	44.6	2,197	50.6
Byron Union Elementary	212	84.4	189	55.6	192	75.0
Moraga	190	91.1	192	78.6	244	87.3
Lafayette	315	67.3	410	73.9	403	77.9
Orinda	297	97	297	56.9	285	82.8
Contra Costa County	12,367	72.7	12,794	56.4	13,092	65.0
California	447,863	68.5	456,409	52.1	449,459	59.5

Source: <http://dq.cde.ca.gov/dataquest/>

**Figure 13 – Percentage of 5th Graders in Healthy Fitness Zone (HFZ) on Body Composition by District, 2009 – 2013**



# Asthma

Asthma has long been recognized by national health organizations, such as the Centers for Disease Control and Prevention and the American Lung Association, as one of the most common chronic diseases in the United States that overburdens health care systems, carries enormous costs in terms of missed days of work or school and other disruptions in daily life, and disproportionately impacts children, people of color and low-income communities. Because additional risk factors for the disease include workplace and environmental exposures, asthma is of special concern in Contra Costa County, which received an F grade for air quality in 2011 from the American Lung Association's State of the Air evaluation.

Although asthma diagnoses among children 1-17 years old increased in Contra Costa County from 15.3% in 2001 to 22.0% in 2009, in 2012 the percentage of children ever diagnosed with asthma dropped from the 10-year reported high of 22.0% to 18.5%. However, these annual estimates are based on results of the most recent UCLA California Health Interview Survey, which, as a general population survey, is subject to both sampling and non-sampling error.

**Table 38 – Asthma Diagnoses among Children Age 1-17 in Contra Costa County, 2003 – 2012**

	2003	2005	2007	2009	2012
Ever been diagnosed with asthma	19.1%	21.3%	18.5%	22.0%	18.5%

Source: <http://www.kidsdata.org/topic/238/asthma/table#fmt=97&loc=171&tf=6,8,10,37,77&sortColumnId=0&sortType=asc>

From 2000 to 2012, rates of asthma-related hospitalizations and emergency department visits in Contra Costa County generally exceeded statewide rates for all age groups. County rates of asthma-related hospitalizations across all age groups has dropped from 11.9 per 10,000 in 2000 to 9.8 in 2012, compared to a statewide drop from 10.9 per 10,000 in 2000 to 8.6 in 2012.

**Table 39 – Rates of Asthma-Related Hospitalizations and Emergency Room Visits by Age Group, 2000 – 2012**

	2000		2006		2012	
	Contra Costa	California	Contra Costa	California	Contra Costa	California
0-4 years	36.4	35.7	26.3	25.4	26.3	22.0
5-17 years	10.5	11.2	10.2	7.1	8.1	7.9
All ages (children & adults)	11.9	10.9	10.4	9.4	9.8	8.6

Source: [http://www.ehib.org/page.jsp?page\\_key=124](http://www.ehib.org/page.jsp?page_key=124)

Note: Age-adjusted rate per 10,000

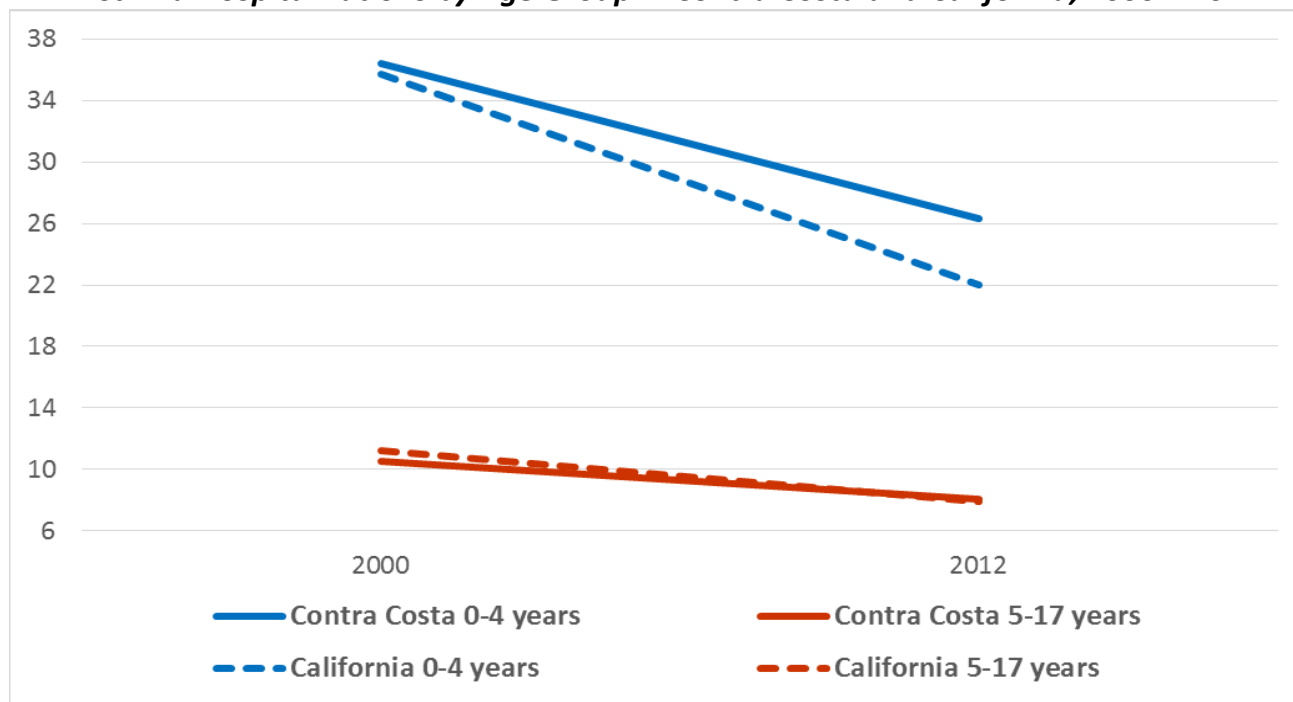
**Table 40 – Number of Asthma-Related Hospitalizations and Emergency Room Visits by Age Group, Contra Costa County, 2008 – 2012**

Age Group	2008	2009	2010	2011	2012
0-4 years	185	173	187	164	167
5-17 years	149	153	140	122	153
0-17 years	334	326	327	286	320
All ages (children & adults)	1,136	1,200	1,181	1,163	1,075

Source: <http://www.kidsdata.org/topic/238/asthma/table#fmt=97&loc=171&tf=6,8,10,37,77&sortColumnId=0&sortType=asc>

While both the county and the state have seen declines in rates of asthma-related hospitalizations and emergency department visits since 2000, declines have been steeper among California children overall than they have been in Contra Costa County. Rates of children hospitalized due to asthma also vary considerably by county subarea, and according to the California Department of Health Services, may be nearly twice as high as state averages in low-income, African American communities, such as Richmond.

**Figure 14 – Asthma Hospitalizations by Age Group in Contra Costa and California, 2000 – 2012**



## Tobacco Use

As one primary risk factor for asthma, tobacco use and second-hand smoke exposure is also of particular concern for communities with high rates of the disease. Current data indicates tobacco use among Contra Costa County residents overall has decreased steadily since 2002, down from 13.7% in 2002 to 10.6% in 2012. Although this 3.1 percentage point drop is slightly less than the 3.5 point drop among California residents in the same 10-year period, tobacco use in the county has been less than that in the state since 2002. Tobacco use in California declined from 16.2% in 2002 to 12.7% in 2012.

**Table 41 – Percentage Who Smoke Tobacco, Contra Costa County & California, 2002 – 2012**

	Contra Costa County	California
2002	13.7	16.2
2008	12.5	13.2
2012	10.6	12.7

Source: [http://ask.chis.ucla.edu/main/DQ3/output.asp?\\_rn=0.9180414](http://ask.chis.ucla.edu/main/DQ3/output.asp?_rn=0.9180414)

Tobacco use among Contra Costa County teens also compares favorably with the state, as students in grades 7 through 11 in the county are slightly less likely to smoke than California students overall. However, the percentage of teenagers who used cigarettes and who identify as American Indian/Alaska Native (13.0%), Native Hawaiian/Pacific Islander (11.0%), Hispanic/Latino (10.4%), African American (9.7%) or multi-racial (9.4%) are somewhat more likely to smoke than students of other races/ethnicities. Asian teenagers in Contra Costa County report the lowest cigarette use.

**Table 42 – Cigarette Use in Past Month among Students by Grade Level, 2008 - 2010**

	Grade Level	0 days	1 day	2 days	3-9 days	10-19 days	20 or more
Contra Costa County	7th	95.4%	1.7%	0.8%	0.8%	0.4%	1.0%
	9th	91.2%	2.6%	1.3%	2.1%	1.0%	1.8%
	11th	86.9%	3.3%	2.1%	3.0%	1.6%	3.2%
	Non-Traditional	61.2%	7.1%	4.5%	5.7%	4.4%	17.1%
	Grade Level	0 days	1 day	2 days	3-9 days	10-19 days	20 or more
California	7th	94.9%	2.1%	0.9%	0.9%	0.4%	0.8%
	9th	90.1%	3.0%	1.7%	2.1%	1.1%	2.0%
	11th	86.8%	3.4%	2.2%	2.9%	1.5%	3.2%
	Non-Traditional	60.6%	7.0%	5.2%	7.4%	4.8%	15.1%

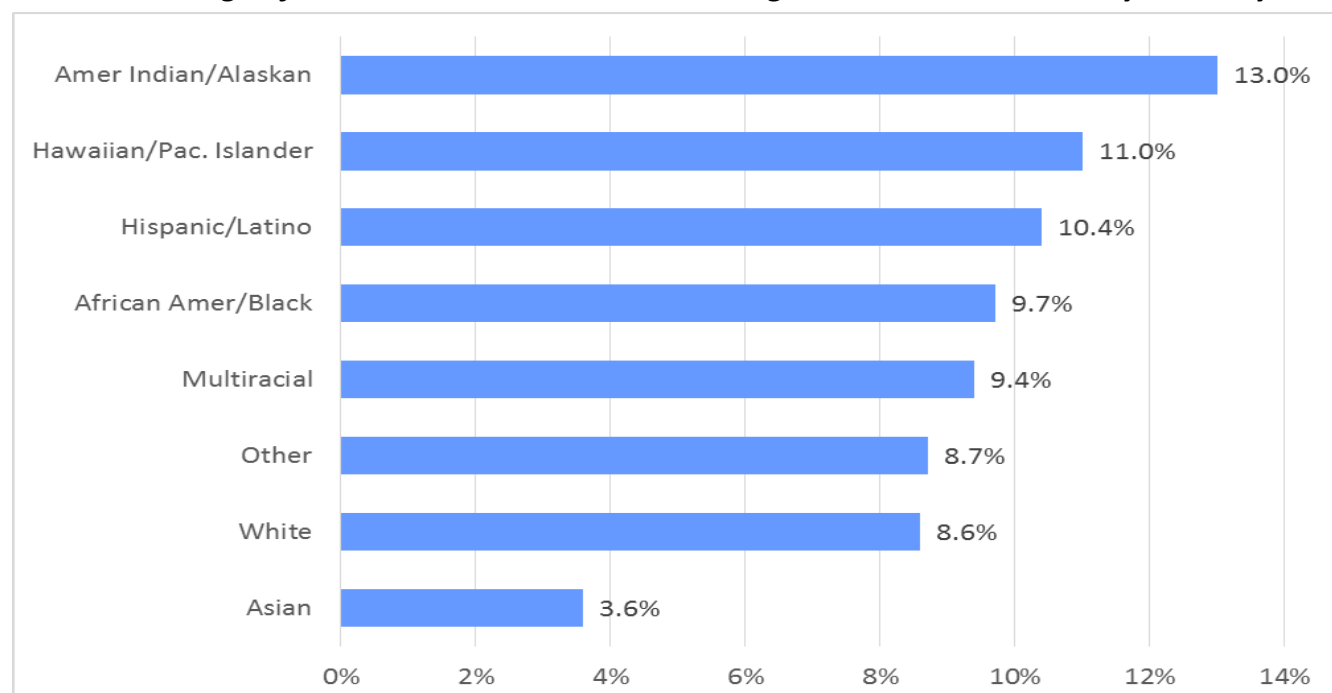
Source: <http://www.kidsdata.org/topic/592/cigarette-use-grade/>

**Table 43 – Cigarette Use in Past Month among Contra Costa Students by Ethnicity, 2008 - 2010**

Race/Ethnicity	0 days	1 day	2 days	3-9 days	10-19 days	20 or more
African American/Black	90.3%	2.6%	1.2%	1.5%	1.4%	3.1%
American Indian/Alaska Native	87.0%	3.2%	2.6%	2.3%	2.8%	2.2%
Asian	96.4%	1.0%	0.9%	0.6%	0.3%	0.9%
Hispanic/Latino	89.6%	3.3%	2.0%	2.8%	0.9%	1.4%
Native Hawaiian/Pacific Islander	89.0%	3.2%	1.5%	2.2%	0.7%	3.5%
White	91.4%	2.2%	1.1%	1.9%	1.2%	2.3%
Multiracial	90.6%	2.7%	1.5%	2.4%	1.1%	1.8%
Other	91.3%	3.0%	1.2%	1.4%	0.7%	2.4%

Source: California Department of Education, California Healthy Kids Survey (WestEd); <http://www.chis.ucla.edu/main/default.asp>

**Figure 15 – Percentage of Contra Costa Teens Who Used Cigarettes in Past Month by Ethnicity, 2010**





# Sexually Transmitted Diseases

Because rates for STDs are considered a proxy for unsafe sexual practices and HIV risk factors, trends in incidence rates are particularly important to maintain healthy communities, and STD rates are closely monitored by a statewide surveillance system that defines high-risk populations, assesses STD trends, measures prevalence of select STDs, health impacts and costs, and evaluates progress toward reaching Healthy People Year 2020 STD objectives.

After a few years of gradual increases in the incidence of Chlamydia and Gonorrhea in both the county and the state, STD incidence rates since 2011 have declined slightly. However, while rates of Chlamydia in Contra Costa County have dropped below statewide rates, incidence rates of Gonorrhea in the county remain somewhat higher than incidence rates in California overall.

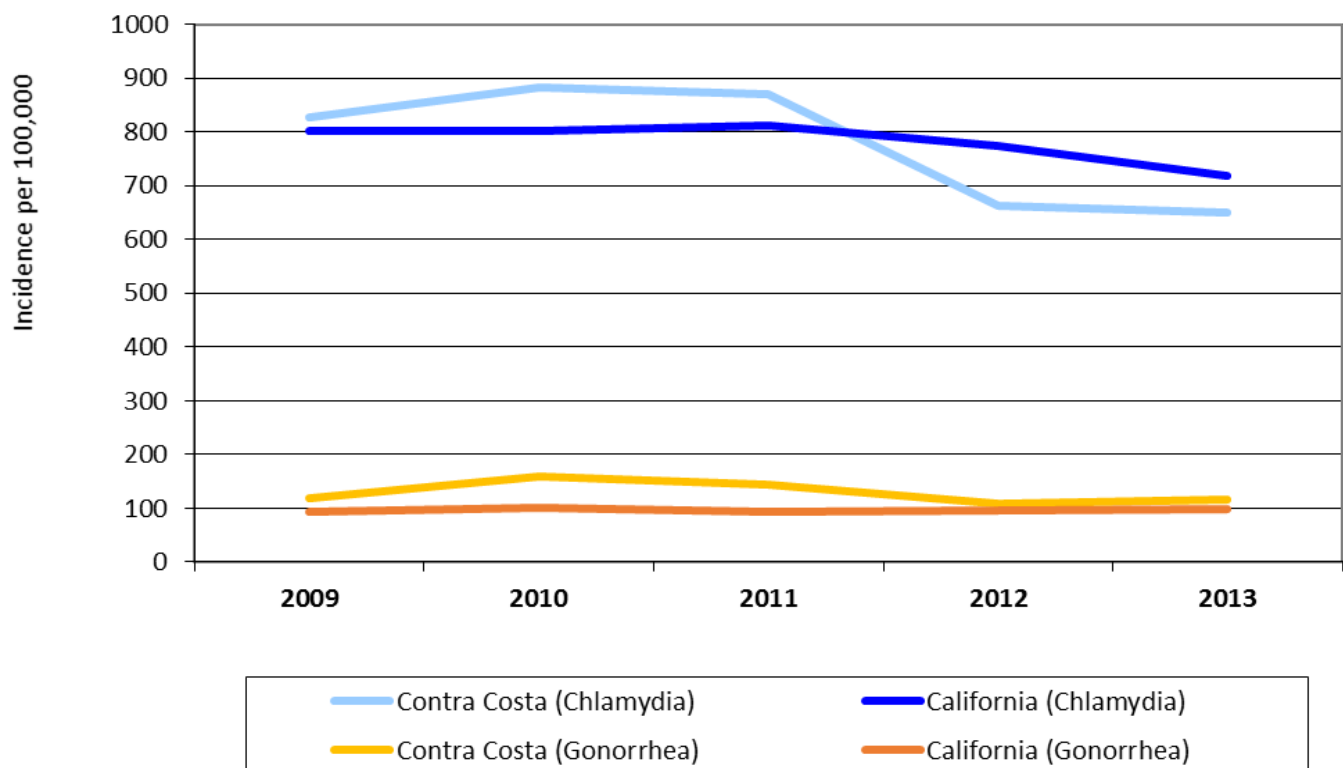
**Table 44 – STD Incidence for Chlamydia and Gonorrhea by Age Group, Contra Costa County 2013**

Age Group	Chlamydia	Gonorrhea
Ages 10-14	44.3	14.8
Ages 15-19	1,234.30	212.4

Source: <http://www.cdph.ca.gov/data/statistics/pages/STDDData.aspx>; Note: Rate per 100,000

Since 2010, rates of Gonorrhea among all ages in Contra Costa County have dropped from 158.6 to 115.4 per 100,000. In comparison, California’s rate for Gonorrhea is currently 99.7 per 100,000. In 2013, the county reports an overall Chlamydia rate of 650.3 per 100,000, down from 882.8 in 2010. California’s 2013 rate for Chlamydia is 717.7 per 100,000, down from 802.3 in 2010.

**Figure 16 – STD Incidence in Contra Costa County and California, 2009 – 2013**



**Table 45 – STD Incidence for Chlamydia and Gonorrhea, All Ages**

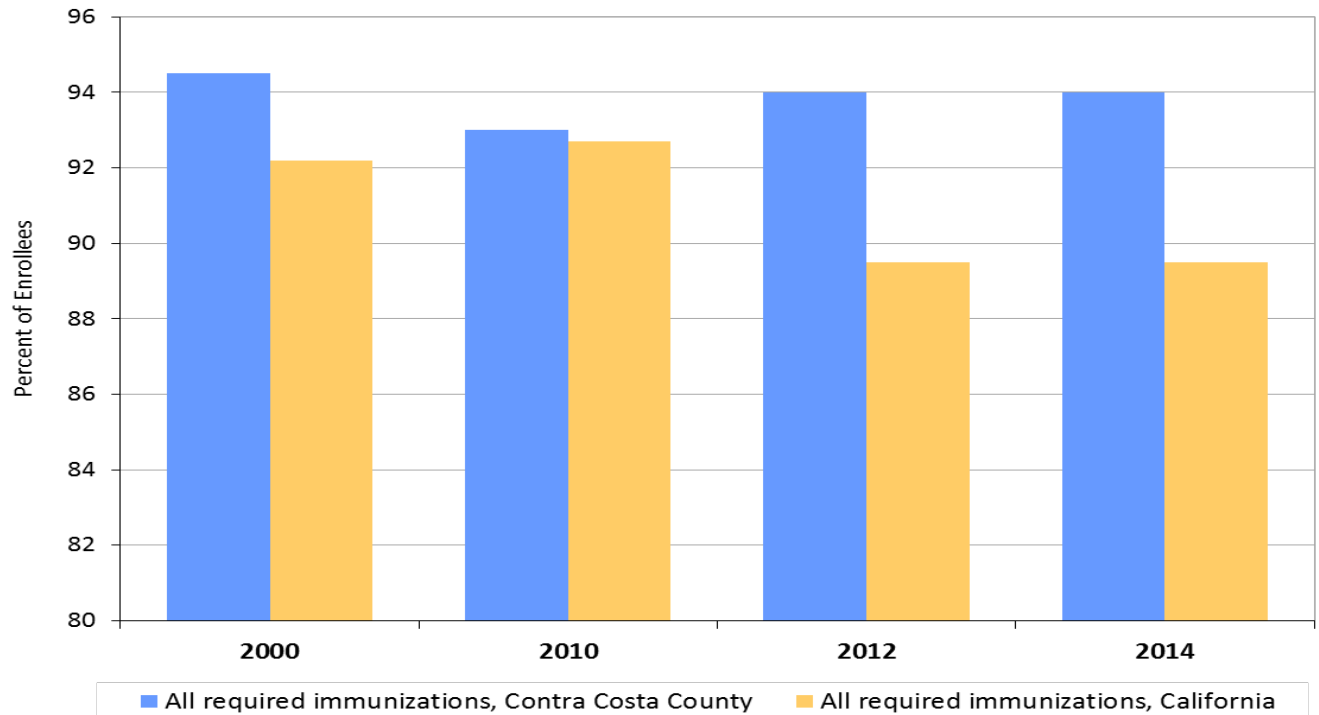
Year	STD	Contra Costa County	California
2009	Chlamydia	827.9	803.0
	Gonorrhea	118.5	94.5
2010	Chlamydia	882.8	802.3
	Gonorrhea	158.6	100.6
2011	Chlamydia	870.6	810.7
	Gonorrhea	144.9	92.6
2012	Chlamydia	662.8	772.7
	Gonorrhea	108.9	95.7
2013	Chlamydia	650.3	717.7
	Gonorrhea	115.4	99.7

Source: <http://www.cdph.ca.gov/data/statistics/pages/STDDData.aspx>; Note: Rate per 100,000

## Immunizations

Historically, the percentage of fully immunized kindergarteners in Contra Costa County has been higher than that of the state. Since 2000, the percentage of fully immunized kindergarteners in the county has remained stable relative to the state's rate, which has dropped somewhat from 92.2% in 2000 to 89.5% in 2014. Declines in immunization rate are thought to be related to controversies surrounding the perceived health risks and side effects of immunization, an explanation that appears to be supported by the increased proportion of non-compliance based on Personal Belief Exemptions, which has more than doubled in the county from 0.9% in 2000 to 2.3% in 2014. In contrast, the percentage of kindergarteners in the county who were not immunized based on Permanent Medical Exemptions (PME) has remained relative constant at 0.2% or less. In 2014, the county's rate of full immunized children entering school is 94.0% compared to the state's rate of 89.5%.

**Figure 17 – Childhood Immunization Status, Contra Costa County & California, 2000 – 2014**



**Table 46 – Childhood Immunizations Status, 2000 – 2014**

	2000		2010		2012		2014	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
Permanent Medical Exemptions (PME)	27	0.2	28	0.2	23	0.2	15	--
Personal Belief Exemptions (PBE)	120	0.9	197	1.4	257	1.8	344	2.3
<b>All required immunizations, Contra Costa</b>	<b>12551</b>	<b>94.5</b>	<b>13,113</b>	<b>93.0</b>	<b>13,621</b>	<b>94.0</b>	<b>13,948</b>	<b>94.0</b>
<b>All required immunizations, California</b>		<b>92.2</b>		<b>92.7</b>		<b>89.5</b>		<b>89.5</b>

Source: <http://www.cdph.ca.gov/data/statistics/Pages/default.aspx>

## Pediatric Nutrition

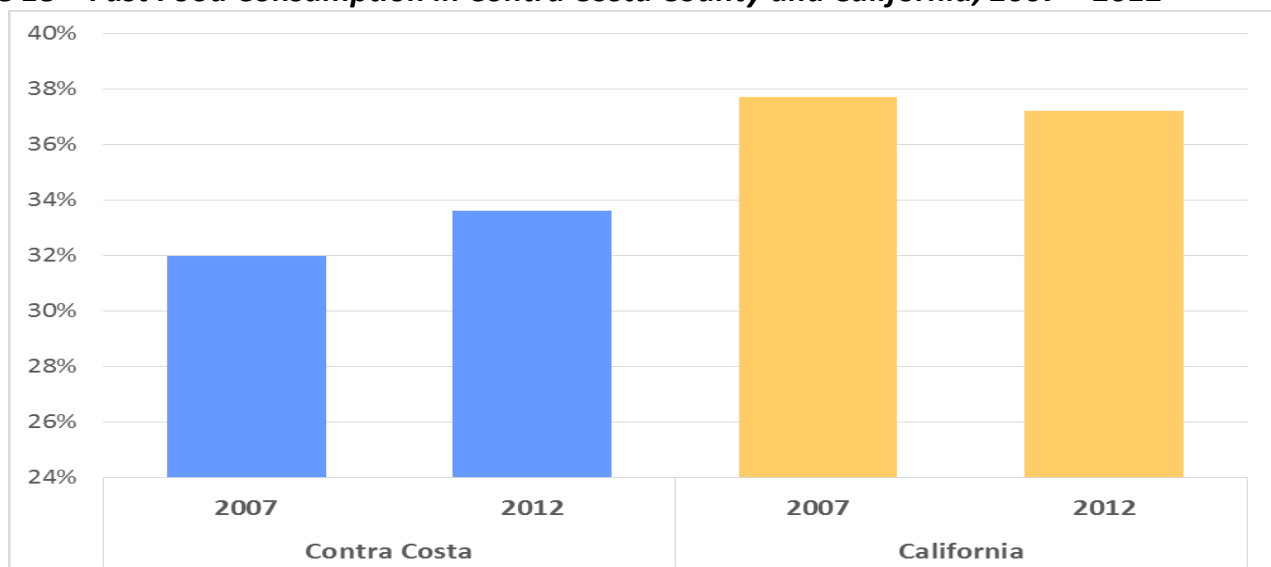
Nutritional status (weight, height, and hematology) among low income, high-risk infants and children is an important indicator of health and wellbeing. Poor nutrition and poverty are also significantly correlated. In 2012, the county exceeded the statewide percentage of low birth weight children (6.8% and 6.7%, respectively). The county has exceeded the statewide average for low birth weight children since 2007.

Another indicator of poor nutritional health that contributes to multiple health risks such as obesity, dental decay, type 2 diabetes, high cholesterol and high blood pressure is the consumption of fast food which tends to be very high in fat and sugar. In Contra Costa County, the percentage of children who consume fast food two or more times a week has been somewhat less than that of the state since 2007. However, the percentage of 2-17 year olds who ate fast food two or more times in the past week has increased in the county from 32.0% in 2007 to 33.6% in 2012, while in California as a whole the percentage has dropped from 37.7% in 2007 to 37.2% in 2012.

**Table 47 – Fast Food Consumption by Age Group, Contra Costa County and California 2007 - 2012**

Age Group	2007		2009		2012	
	Contra Costa	California	Contra Costa	California	Contra Costa	California
<b>2-11 year olds</b>	26.9%	32.3%	17.9%	31.4%	28.5%	33.2%
<b>12-17 year olds</b>	39.7%	45.8%	39.0%	48.2%	--	43.7%
<b>Total 2-17 year olds</b>	<b>32.0%</b>	<b>37.7%</b>	<b>26.9%</b>	<b>38.1%</b>	<b>33.6%</b>	<b>37.2%</b>

Source: <http://healthpolicy.ucla.edu/chis/Pages/default.aspx>; Percentage of children who ate fast food more than once in the past week

**Figure 18 – Fast Food Consumption in Contra Costa County and California, 2007 – 2012**

# Oral Health Status of Children

Dental disease and oral health problems impact more children in the United States than any other chronic disease. Dental disease may negatively impact a child's health and development, interfere with proper nutrition, deter speech development, and reduce school attendance and academic performance. When children miss school due to oral health problems, school districts also suffer from the loss of funding.

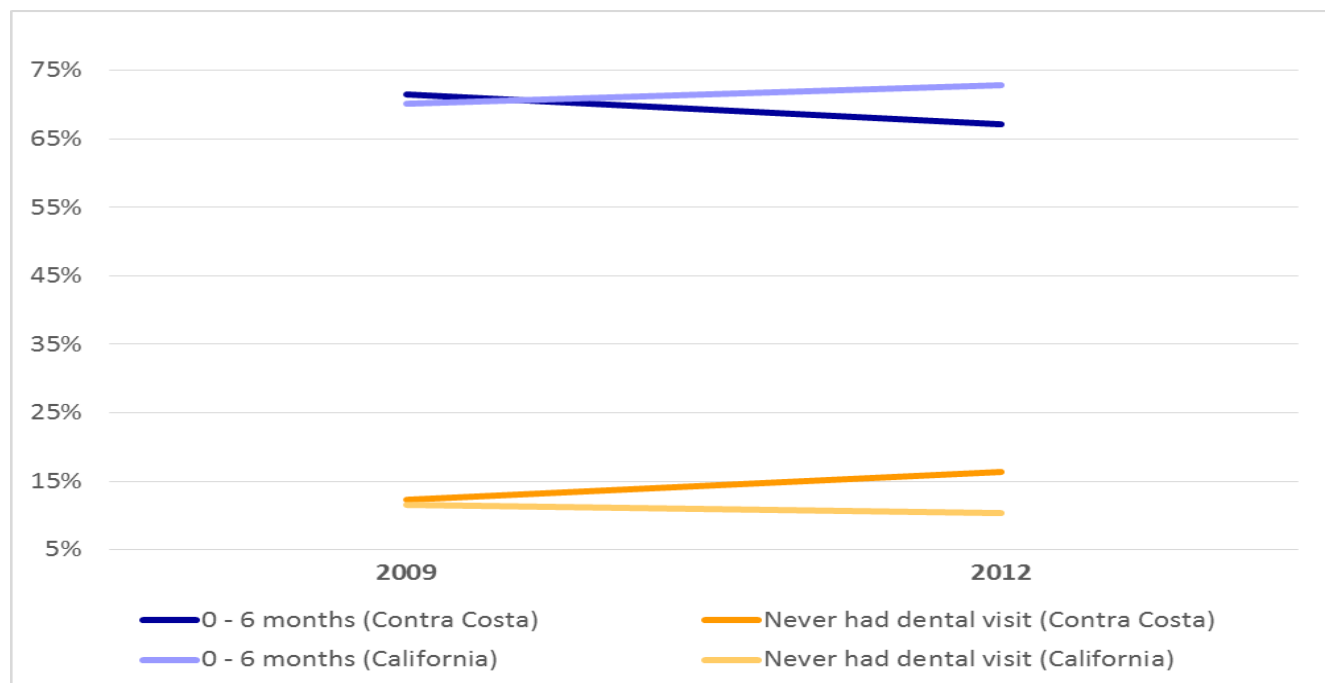
In 2009, the percentage of children age 2 – 11 in the county who had never been to a dentist was only slightly higher than the state overall (12.3% and 11.6%, respectively); however by 2012, this percentage had increased to 16.3% in the county, while it had dropped to 10.3% in California. This troubling trend in dental care among Contra Costa County children is further indicated by a decrease in the percentage who had a dental visit within the past 6 months which dropped from 71.5% in 2009 to 67.1% in 2012. In contrast, California overall improved its percentage from 70.2% in 2009 to 72.9% in 2012.

**Table 48 – Length of Time since Last Dental Visit among Children Age 2-11, Contra Costa County and California, 2009 and 2012**

	Contra Costa County		California
	Percent	Count	Percent
<b>2012</b>			
Less than 6 months ago	67.1	96,000	72.9
6 to 12 months ago	11.5	16,000	12.9
More than 12 months ago	5.1	7,000	2.9
Never had a dental visit	16.3	23,000	10.3
<b>2009</b>			
Less than 6 months ago	71.5	89,000	70.2
6 to 12 months ago	12.6	16,000	14.5
More than 12 months ago	3.7	5,000	3.7
Never had a dental visit	12.3	15,000	11.6

Source: [http://ask.chis.ucla.edu/main/DQ3/output.asp?\\_rn=8.454531E-02](http://ask.chis.ucla.edu/main/DQ3/output.asp?_rn=8.454531E-02) reported by <http://www.kidsdata.org/topic/264/lastdentalvisit/>

**Figure 19 – Time since Last Dental Visit among Children Age 2-11, 2009 – 2012**



# Community Safety Indicators

## Adult Arrests

From 2004 to 2013, the number of adult arrests for misdemeanor and felony offenses dropped in both Contra Costa County and California. Since 2004, Contra Costa County has experienced a steeper decline in the number of arrests for misdemeanors compared to the state (21.1% and 14.8% less, respectively). However, the county saw only a 0.9% decline in the number of arrests for more serious felony offenses during the same period, while the state saw an 11.0% decline. While crime statistics show an overall drop in the number of adult arrests since 2004 in both the county and the state, the perception of high crime remains very real in many communities in the county.

**Table 49 – Adult Misdemeanor Arrests, 2004 - 2013**

	2004	2007	2010	2013	Percent Change
Contra Costa County	16,744	16,301	15,719	13,206	-21.1%
California	818,027	857,959	812,026	696,670	-14.8%

Source: <http://oag.ca.gov/sites/all/files/agweb/pdfs/cjsc/publications/candd/cd13/cd13.pdf?>

**Table 50 – Adult Felony Arrests, 2004 - 2013**

	2004	2007	2010	2013	Percent Change
Contra Costa County	11,017	10,824	10,509	10,921	-0.9%
California	462,910	457,085	396,532	411,929	-11.0%

Source: <http://oag.ca.gov/sites/all/files/agweb/pdfs/cjsc/publications/candd/cd13/cd13.pdf?>

## Adult Incarcerations

Although current county-level data regarding probationers and inmates who have children less than 5 years of age is unavailable, Contra Costa County's CSB database, COPA, indicates the number of families impacted by at least one currently or formally incarcerated parent rose an alarming 206% from 2010 to 2012. According to a number of sources<sup>4</sup>, this trend is partly explained by a dramatic increase in the number of women incarcerated, as the female prison population in the US has shot up nearly 400% since 1986. Data from a 2000 California Research Bureau report estimates 9% of all children in the state have a parent in the criminal justice system, and in 2007, the US Bureau of Justice Statistics (BJS) estimates that 53% of the US prison population are parents of at least one minor child.

In the Contra Costa County Reentry Strategic Plan (March 2011), data compiled by the Urban Strategies Council and Ijichi Perkins & Associates estimates 55% of the county's 4,138 adult parolees and probationers in 2010, or about 2,274 families annually, need family support services such as child support assistance, counseling, or reunification assistance upon release. They also estimate the county's populations of soon-to-be-released inmates are largely concentrated in the communities of Richmond (94804), Antioch (94509), and Concord (94519 and 94520).

Despite a lack of current estimates, the county's probation department acknowledges many probationers and inmates of Contra Costa County are primary caregivers of children under five. The CSB recognizes that, particularly in light of Public Safety Realignment (AB 109) plans and resources, these children

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<sup>4</sup> <http://www.justicestrategies.org/sites/default/files/publications/JS-COIP-1-13-11.pdf>,  
[http://www.rand.org/content/dam/rand/pubs/monographs/2011/RAND\\_MG1165.pdf](http://www.rand.org/content/dam/rand/pubs/monographs/2011/RAND_MG1165.pdf)

represent a growing at-risk group in the county, highly vulnerable to financial insecurity, poor academic performance, social stigma and isolation, delinquency, emotional withdrawal, and mental health problems.

## Domestic Violence

In 2012, the rate of domestic violence calls for assistance per 1,000 population continued its downward trend and reached a 12-year low of 4.6 in Contra Costa County and 6.2 in California overall. The rate of domestic violence calls for assistance in Contra Costa County has been consistently 1.0 or more lower than the statewide rate from 2000 through 2012 and was a record 1.6 points lower in 2012. These declining rates also represent a reduction in the number of calls, as indicated in Table 52.

**Table 51 – Rate of Domestic Violence Calls for Assistance, 2000 - 2012**

	2000	2002	2004	2006	2008	2010	2012
<b>Contra Costa County</b>	7.8	7.6	6.4	5.9	5.6	5.3	4.6
<b>California</b>	8.9	8.6	7.9	7.4	6.8	6.6	6.2

Source: <http://oag.ca.gov/crime/cjsc-stats/2010/table14> and <http://oag.ca.gov/sites/all/files/pdfs/cjsc/prof10/table27.pdf>; as reported by kidsdata.org; Rate is per 1,000

**Table 52 – Domestic Violence Calls for Assistance, Contra Costa County, 2008 - 2012**

	2008	2009	2010	2011	2012
<b>Number of Calls</b>	3,868	3,836	3,687	3,404	3,286

## Child Abuse

Over the past nine years, the rate of substantiated child abuse cases per 1,000 children ages 0-17 in Contra Costa County has been substantially lower than the statewide rate. However, the steep declines Contra Costa County saw in child abuse cases from 2007 (8.8 per 1,000) to 2009 (5.1 per 1,000) has not continued as rates in 2011 increased slightly to 5.5 per 1,000 and rates in 2013 remain at 2009 levels of 5.1 per 1,000 population. The drop in rates since 2005 also represent a reduction in the number of cases, as demonstrated in Table 54.

**Table 53 – Rate of Substantiated Child Abuse Cases, 2005 – 2013**

	2005	2007	2009	2011	2013
<b>Contra Costa County</b>	7.6	8.8	5.1	5.5	5.1
<b>California</b>	11.3	10.7	10.0	9.5	8.9

Source: [http://cssr.berkeley.edu/ucb\\_childwelfare/](http://cssr.berkeley.edu/ucb_childwelfare/) as reported on kidsdata.org

Note: Rate per 1,000 children (ages 0-17); the substantiated child abuse rate measures the number of child abuse reports that warrant an in-person investigation and are determined to have occurred.

**Table 54 – Number of Substantiated Child Abuse Cases in Contra Costa County, 2009 - 2013**

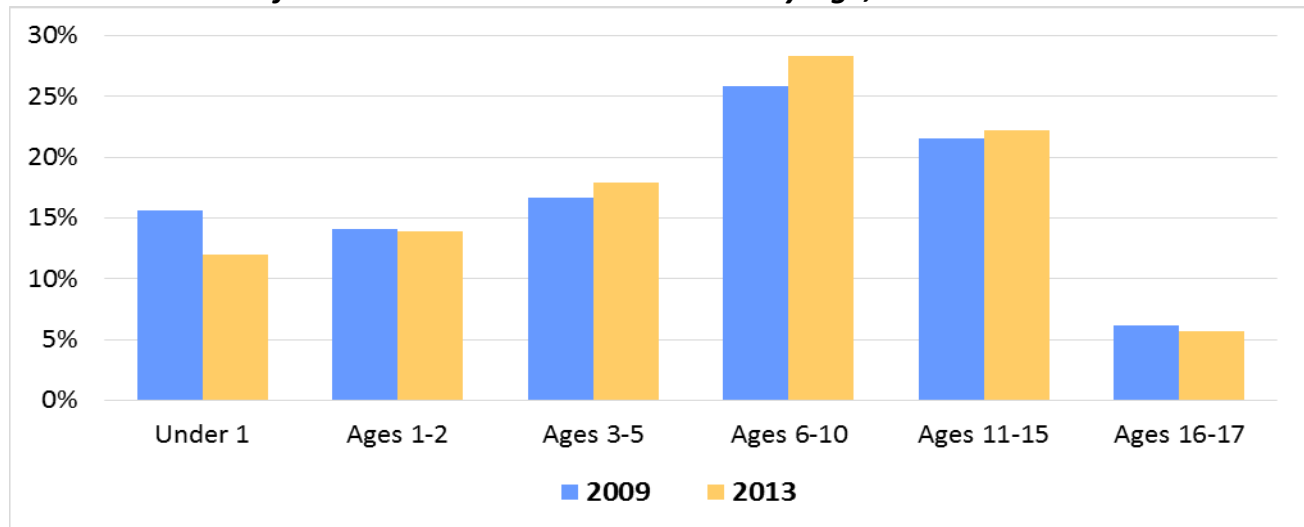
Year	2009	2010	2011	2012	2013
<b>Number of Cases</b>	1,332	1,224	1,423	1,410	1,300

The distribution of substantiated child abuse cases by age of child has changed very little since 2009 with the exception that in 2013, cases involving children under 1 year of age represent somewhat less of all cases (12.0%) as compared to 2009 (15.6%), while cases involving 6 to 10 year olds represent somewhat more of all cases in 2013 (28.3%) as compared to 2009 (25.8%).

**Table 55 – Distribution of Substantiated Child Abuse Cases in Contra Costa by Age, 2009 – 2013**

Age	2009		2011		2013	
	Percent	Count	Percent	Count	Percent	Count
Under 1	15.6	208	12.7	181	12.0	156
Ages 1-2	14.1	188	14.8	210	13.9	181
Ages 3-5	16.7	223	18.8	267	17.9	233
Ages 6-10	25.8	343	24.9	355	28.3	368
Ages 11-15	21.5	287	21.8	310	22.2	288
Ages 16-17	6.2	83	7.0	100	5.7	74

Source: [http://cssr.berkeley.edu/ucb\\_childwelfare/](http://cssr.berkeley.edu/ucb_childwelfare/) as reported on [kidsdata.org](http://kidsdata.org)

**Figure 20 – Distribution of Substantiated Child Abuse Cases by Age, 2009 – 2013**

## Juvenile Arrests

The rate of juvenile misdemeanor and felony arrests in Contra Costa County has decreased significantly in the past several years, following arrest rate trends among juveniles in the state overall. In 2013, the number of juvenile misdemeanor arrests in the county dropped to 1,132, which represents a 55.9% decrease since 2004. The number of juvenile misdemeanor arrests in California dropped to 54,315 in 2013, which represents a 57.4% since 2004.

**Table 56 – Number of Juvenile Misdemeanor Arrests, 2004 - 2013**

	2004	2007	2010	2013
Contra Costa County	2,566	2,524	1,747	1,132
California	127,535	134,629	106,253	54,315

Source: California Department of Justice, Criminal Justice Statistics Center, Monthly Arrest and Citation Register (MACR) Data Files; <http://oag.ca.gov/crime/cjsc/stats/arrests>

Juvenile arrest rates for felony charges have also fallen in both the county and the state since 2007. In 2013, the juvenile felony arrest rate in the county dropped to 5.5 per 1,000, down from 12.9 arrests per 1,000 juveniles in 2007. In this same 6-year period, the state's rate dropped from 14.2 to 7.5 per 1,000.

**Table 57 – Juvenile Felony Arrest Rates, 2004 - 2013**

	2004	2007	2010	2013
<b>Contra Costa County</b>	10.8	12.9	9.7	5.5
<b>California</b>	13.5	14.2	11.6	7.5

Source: California Department of Justice, Criminal Justice Statistics Center, Monthly Arrest and Citation Register (MACR) Data Files as reported by <http://www.kidsdata.org/topic/165/juvenilearrest-rate/>

Note: Rate per 1,000 juveniles (less than 18 years)

Comparing these felony arrest rates by ethnicity indicates that juveniles of all ethnicities have experienced solid declines in arrests since 2009. Although in 2013 African American/Black juveniles still have the highest arrest rates by far, they have also experienced the steepest declines in the past 5 years, with rates dropping from 43.8 to 27.1 per 1000 juveniles.

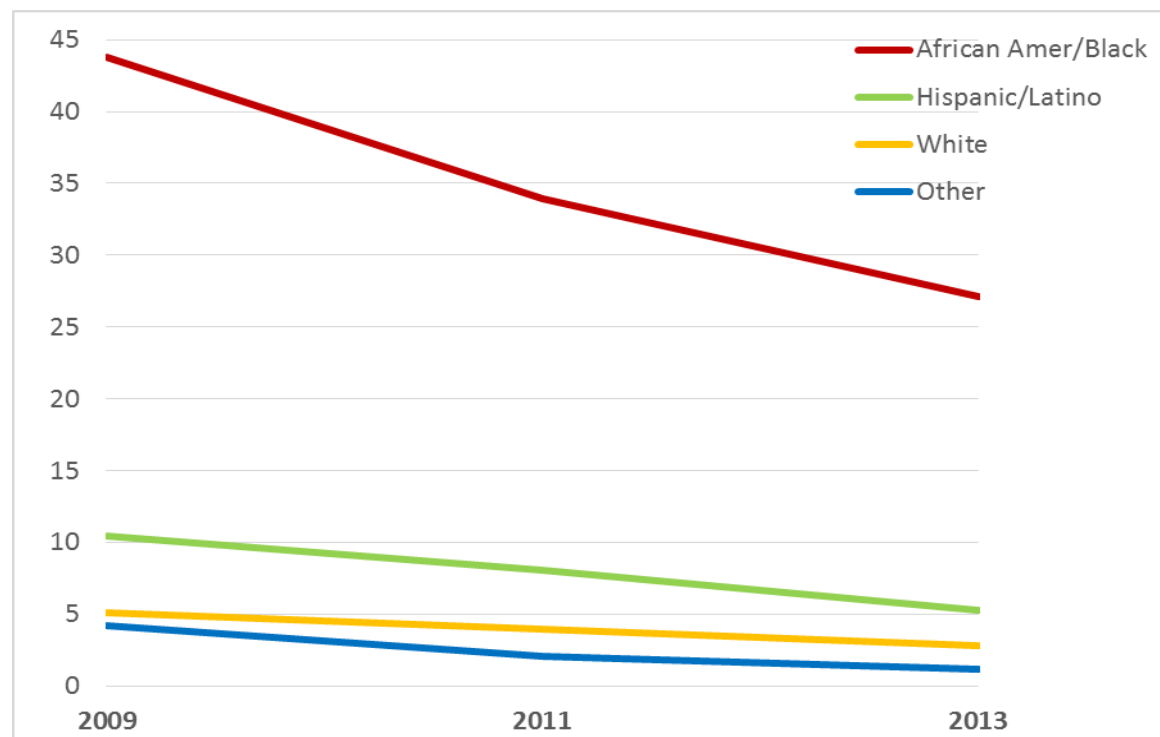
**Table 58 – Juvenile Felony Arrest Rates in Contra Costa County by Ethnicity, 2009 - 2013**

Race/Ethnicity	2009	2010	2011	2012	2013
<b>African American/Black</b>	43.8	40.3	33.9	33.9	27.1
<b>Hispanic/Latino</b>	10.5	10.1	8.1	6	5.3
<b>White</b>	5.1	4.9	4	3.5	2.8
<b>Other</b>	4.2	3.3	2.1	1.7	1.2

Source: California Department of Justice, Criminal Justice Statistics Center, Monthly Arrest and Citation Register (MACR) Data Files as reported by <http://www.kidsdata.org/topic/165/juvenilearrest-rate/>

Note: Rate per 1,000 juveniles (less than 18 years)

**Figure 21 – Juvenile Felony Arrest Rates by Ethnicity, 2009 – 2013**



Note: Rate per 1,000 juveniles (less than 18 years)



## Gang Membership Among Youth

According to statistics compiled from various sources by Helping Gang Youth,<sup>5</sup> every community with a population of 100,000 or more reports some type of gang activity. Despite its recognition as a serious threat to youth and community health, gang activity and membership is not easily tracked and current data is not maintained by most criminal justice agencies. However, data compiled by Helping Gang Youth indicates that 40% of gang members are juveniles.

A number of factors increase the chance that youth will turn to gangs including difficulty or failure in school, high rate of truancy, lack of opportunity for positive activities outside of school, being from a low income household or community, and struggling with learning disabilities and/or emotional disorders. An estimated 60% to 78% of all incarcerated gang members have a learning disability or an emotional disorder that may inhibit them from engaging or excelling in school.<sup>6</sup> The US Justice Department also estimates that approximately 47% of gang members are Hispanic/Latino, while 31% are African American, but the racial and ethnic composition of gangs varies considerably by region.

**Table 59 – Gang Membership among Contra Costa County Youth by Grade Level, 2008 - 2010**

Grade Level	Female		Male		Total Membership Rate
	Yes	No	Yes	No	
7th Grade	7.0%	93.0%	10.3%	89.7%	8.6%
9th Grade	7.3%	92.7%	10.5%	89.5%	8.8%
11th Grade	6.0%	94.0%	10.5%	89.5%	8.1%
Non-Traditional	14.6%	85.4%	19.6%	80.4%	17.4%

Source: California Department of Education, California Healthy Kids Survey (WestEd) as reported by <http://www.kidsdata.org/topic/165/juvenilearrest-rate/>

## Children and Families

### Births

The overall number of births in Contra Costa County decreased by 9.4% from 13,315 in 2002 to 12,061 in 2012. Since 2002, the number of births to Asians/Pacific Islanders increased by 17.0%, and number of births to Caucasians has decreased by 25.4% since 2002. The overall number of births per 1,000 women has dropped in Contra Costa County from 64.0 in 2008 to 57.9 in 2012.

**Table 60 – Birth Rate in Contra Costa County, 2008 - 2012**

	2008	2009	2010	2011	2012
Births per 1000 Women	64.0	62.3	59.7	58	57.9

Source: <http://www.apps.cdph.ca.gov/vsq/default.asp> as reported by <http://www.kidsdata.org/topic/165/juvenilearrest-rate/>

<sup>5</sup> <http://www.helpinggangyouth.com/statistics.html>

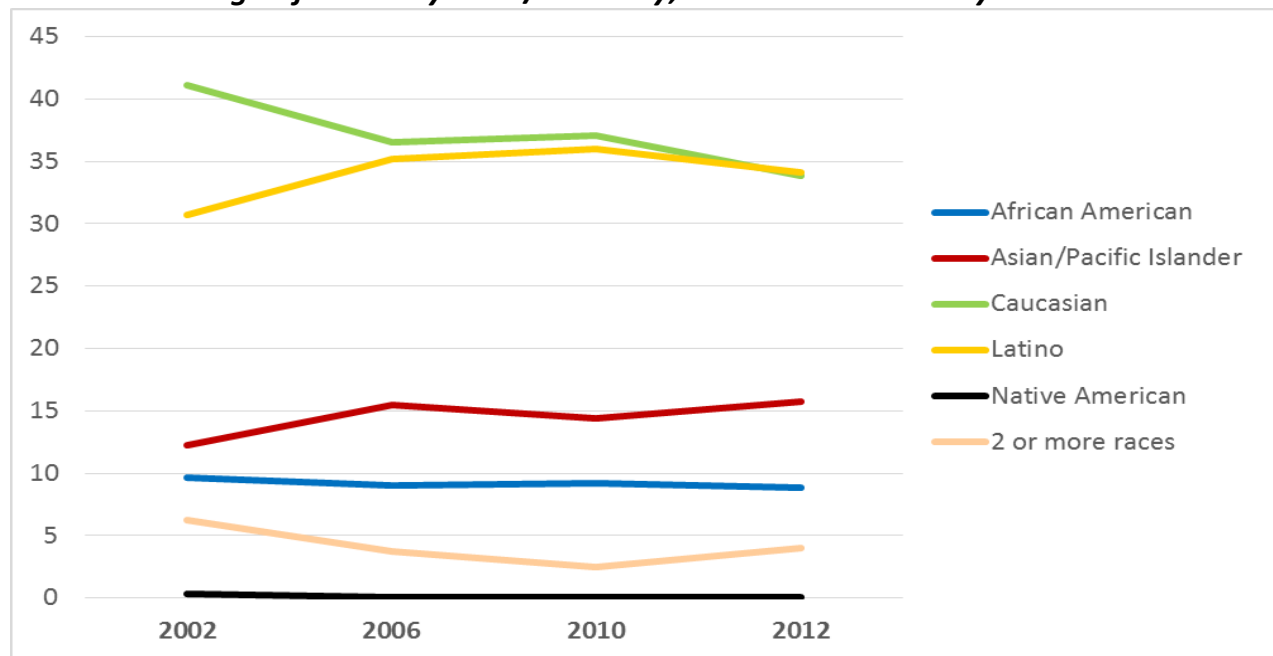
<sup>6</sup> [http://www.helpinggangyouth.com/disability-best\\_corrections\\_survey.pdf](http://www.helpinggangyouth.com/disability-best_corrections_survey.pdf)

**Table 61 – Number and Percentage of Births by Ethnicity, Contra Costa County**

Ethnicity	2002		2006		2010		2012	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
African American	1,273	9.6	1,259	9.0	1,106	9.2	1,064	8.8
Asian/Pacific	1,618	12.2	1,969	15.5	1,915	14.4	1,894	15.7
Caucasian	5,473	41.1	5,068	36.5	4,513	37.1	4,081	33.8
Latino	4,091	30.7	4,910	35.2	4,351	36.0	4,116	34.1
Native American	39	0.3	20	0.1	13	0.1	18	0.1
2 or more races	821	6.2	339	3.7	454	2.5	487	4.0
<b>Total</b>	<b>13,315</b>		<b>13,656</b>		<b>12,352</b>		<b>12,061</b>	

Source: <http://www.apps.cdph.ca.gov/vsq/default.asp>

**Figure 22 – Percentage of Births by Race/Ethnicity, Contra Costa County 2002 – 2012**



## INFANT MORTALITY

Infant mortality rates in Contra Costa County overall have risen from 4.1 per 1,000 in 2006 to 4.9 per 1,000 in 2012 which suggests a decline in factors such as maternal health, health care access, health practices or related socioeconomic conditions.

**Table 62 – Infant Mortality Rate, Contra Costa County, 2006 – 2012**

	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012
Contra Costa County	4.1	4.3	4.3	5	4.9

Source: California Dept. of Public Health, Death Statistical Master Files as reported by <http://www.kidsdata.org/topic/294/infantmortality/>  
Rate is number of deaths of children less than 1 year old per 1,000 live births.

In Contra Costa County, infant mortality rates vary significantly by race/ethnicity. Infant mortality rates per 1,000 are highest among multi-racial (9.7) and African American (9.0) residents in 2012. Gradually rising rates are apparent among Asians, Hispanic and Caucasian residents.

**Table 63 – Infant Mortality Rate by Ethnicity, Contra Costa County, 2006 – 2012**

Race/Ethnicity	2004-2008	2005-2009	2006-2010	2007-2011	2008-2012
African American/Black	9.6	9.2	8.9	9.9	9.0
American Indian/Alaska Native	*	*	*	*	*
Asian/Pacific Islander	2.1	2.4	2.6	3.1	3.4
Hispanic/Latino	4.7	4.3	4.5	4.9	5.2
White	2.5	3	2.7	3.1	3.1
Multiracial	17.4	16.1	12.4	12.6	9.7

Source: California Dept. of Public Health, Death Statistical Master Files as reported by <http://www.kidsdata.org/topic/294/infantmortality/>  
Rate is number of deaths of children less than 1 year old per 1,000 live births.

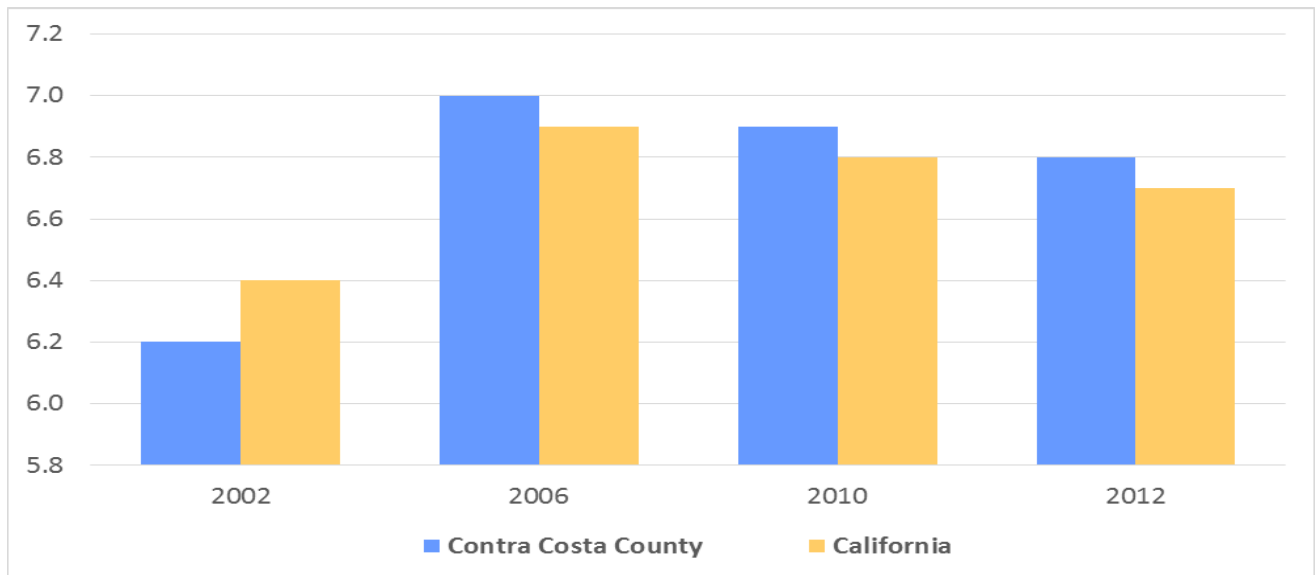
## LOW WEIGHT BIRTHS

A baby is considered to be low weight if it weighs less than 2,500 grams (5 pounds 8 ounces) at birth. In the United States, low birth weight is a strong predictor of infant mortality and morbidity. The percentage of low birth weights in Contra Costa County has been similar to, although slightly higher than, the statewide percentage since 2006. However, with the Healthy People 2020 objective of no more than 5% of low weight births, neither the county nor the state have achieved this target to date.

**Table 64 – Percentage of Low Birth Weight Babies, Contra Costa & California, 2002 – 2012**

		2002	2006	2010	2012
<b>Contra Costa County</b>	Low Birth weight (% < 2500 G)	6.2	7.0	6.9	6.8
<b>California</b>	Low Birth weight (% < 2500 G)	6.4	6.9	6.8	6.7

Source: <http://www.cdph.ca.gov/data/statistics/Pages/default.aspx>

**Figure 23 – Percentage of Low Birth Weight Births, Contra Costa County & California, 2002 – 2012**

Preterm birth, occurring before 37 weeks of gestation, is one of the predominant proximate causes of low birth weight. Risk factors for preterm delivery include low socioeconomic status, low pre-pregnancy weight, inadequate weight gain during the pregnancy, history of infertility problems, smoking and multiple gestations. Infants who are born at low birth weight are at a greater risk of developing other problems later in life, such as physical disabilities and developmental delays.

## PRENATAL CARE

From 2000 through 2012, the percentage of women who received prenatal care in the first trimester has remained somewhat higher in Contra Costa County than in the state overall. In this 12-year period, the percentage in the county has dropped from 89.3% in 2000 to 85.0% in 2012. However, 2012 rates have improved from a 12-year low of 82.4% in 2008.

**Table 65 – Percentage of Women Receiving Prenatal Care in the First Trimester, 2000 – 2012**

	2000	2002	2004	2006	2008	2010	2012
<b>Contra Costa County</b>	89.3	89.2	87.8	88.0	82.4	83.0	85.0
<b>California</b>	83.1	84.8	85.6	85.2	80.7	81.7	81.9

Source: <https://chhs.data.ca.gov/browse?q=prenatal%20care&sortBy=relevance&utf8=%E2%9C%93>

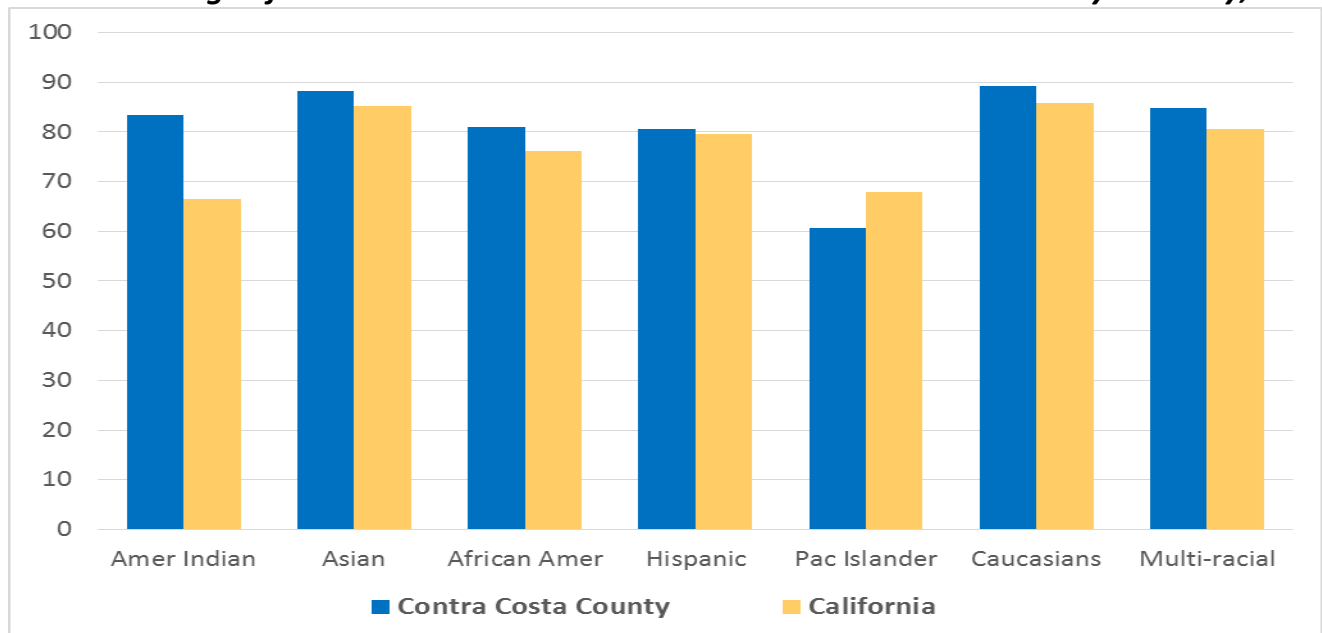
In 2012, the percentage of pregnant women in Contra Costa County who received prenatal care in the first trimester varied by race and ethnicity, with the lowest percentage among Pacific Islanders (60.7%) and the highest among Caucasians (89.3%) and Asians (88.1%).

**Table 66 – Percentage of Women Who Received Prenatal Care in First Trimester by Ethnicity, 2012**

	Contra Costa County			California		
	All Births	Care in Month 1-3	Percent Care in Month 1-3	All Births	Care in Month 1-3	Percent Care in Month 1-3
American Indian	18	15	83.3	1,763	1,172	66.5
Asian	1,811	1,596	88.1	68,547	58,361	85.1
African American	1,065	863	81.0	26,533	20,228	76.2
Hispanic	4,116	3,317	80.6	244,616	194,652	79.6
Pacific Islander	84	51	60.7	2,037	1,383	67.9
Caucasians	4,479	3,999	89.3	149,360	128,078	85.8
Multi-racial / Other	488	414	84.8	10,932	8,805	80.5
<b>Total</b>	<b>12,061</b>	<b>10,255</b>	<b>85.0</b>	<b>503,788</b>	<b>412,679</b>	<b>81.9</b>

Source: Source: State of California, Department of Public Health, Birth Records; <http://www.apps.cdph.ca.gov/>

**Figure 24 – Percentage of Women Who Received Prenatal Care in First Trimester by Ethnicity, 2012**



## BIRTHS TO TEENS

Teen birth rates in both the county and state have shown gradual but steady declines over the past ten years. From 2002 to 2012, teen birth rates in the county dropped from 6.6% to 4.7%, while the state rate dropped from 9.5% to 6.9%. Latinos continue to have the highest proportion of the county's teen births with 55.2% in 2012, which is down significantly from 61.9% in 2010. In comparison, the proportion of teen births to Caucasians dropped moderately from 15.8% in 2010 to 14.9% in 2012, while the proportion of births to African American/Black teens has risen from 18.8% in 2010 to 20.8% in 2012.

**Table 67 – Percentage of Births to Teen Mothers Age 15 to 19, 2002 – 2012**

	2002	2004	2006	2008	2010	2012
<b>Contra Costa County</b>	6.6	6.1	6.7	6.4	6.1	4.7
<b>California</b>	9.5	9.1	9.4	9.4	8.5	6.9

Source: <http://www.apps.cdph.ca.gov/vsq/default.asp>

**Table 68 – Teen Births by Ethnicity in Contra Costa County, 2009 – 2012**

ETHNICITY	2009	2010	2012
<b>African American</b>	20.7	18.8	20.8
<b>Asian/Pacific Islander</b>	4.8	3.2	3.1
<b>Caucasian</b>	20.8	15.8	14.9
<b>Latino</b>	56.6	61.9	55.2

Source: <http://www.apps.cdph.ca.gov/vsq/default.asp>

Although the total number of births to teen mothers (age 15-19) has dropped from 767 in 2009 to 562 in 2012, the proportion of low birth weight infants born to teen mothers has continued at the relatively high rate of 8.4%, up from 7.4% in 2008.

**Table 69 – Low Weight Births to Mothers Age 15-19 in Contra Costa County, 2006 – 2012**

BIRTH WEIGHT	2006	2008	2010	2012
Under 1,500 grams (2.2 lbs.)	15	12	14	11
1,500-2,499 grams (5.5 lbs.)	57	50	49	36
Total low weight (< 2,500 grams)	72	62	63	47
Total teen births	911	842	752	562
<b>Percent low weight</b>	<b>7.9</b>	<b>7.4</b>	<b>8.4</b>	<b>8.4</b>

Source: <http://www.apps.cdph.ca.gov/vsq/default.asp>

Note: Low weight births are less than 2,500 grams.

**Table 70 – Percentage of Mothers Age 15-19 Who Received Prenatal Care in First Trimester, Contra Costa County, 2005 - 2011**

PRENATAL CARE STATUS	2005	2006	2007	2008	2009	2010	2012
<b>Number with prenatal care</b>	600	645	594	557	497	485	375
<b>Total teen births</b>	877	911	869	842	767	752	562
<b>Percent with prenatal care</b>	<b>68.4</b>	<b>70.8</b>	<b>68.3</b>	<b>66.1</b>	<b>64.8</b>	<b>64.5</b>	<b>66.7</b>

Source: <http://www.apps.cdph.ca.gov/vsq/default.asp>

Note: Low weight births are less than 2,500 grams.

The percentage of teen mothers who receive prenatal in the first trimester has improved slightly in Contra Costa County since 2008. Over the past 8 years, the percentage of teen mothers who accessed care in the critical first trimester of pregnancy ranged from a high of 70.8% in 2006 to a low of 64.5% in 2010. In

2012, this percentage rose to 66.7%, but is still well below the Healthy People 2010 Objective of 90% and may contribute to the relatively high percentage of births to teens that are below a healthy weight.

## Child Care

### OVERVIEW OF CHILD CARE IN CONTRA COSTA COUNTY

According to the Summary of the Economic Impact of the Child Care Industry in Contra Costa County published by the Contra Costa Child Care Council in 2003, licensed child care facilities contribute substantially to the local economy by increasing workforce productivity by \$4.92 million, creating \$1.58 billion in direct, indirect and induced income, generating \$255 million in tax revenues, and providing about 35,600 local jobs. Licensed child care centers also generate an approximately \$231.4 million in county revenues, and support 4,757 full-time equivalent (FTE) workers in Contra Costa County.

Several economic indicators suggest the child care services industry should continue to steadily grow. Total revenue for child care services in the US jumped 6% from 2010 to 2011, while employment at child care facilities rose 1% in the same period. Government spending for child care has increased, and according to the Bureau of Labor & Statistics, accounts for as much as 35% of the industry's revenue. However, from 2004 to 2012, the number of available slots dropped nearly 2% and the number of service provider sites dropped by 20% in Contra Costa County.

### NEED FOR CHILD CARE

Since 1997, the California Child Care Resource and Referral Network has published the California Child Care Portfolio in an effort to standardize and distribute reliable data about the status of child care in California. As part of this effort, the Network reports on the potential demand and availability of licensed child care in each county. Potential demand for child care is assessed by looking at trends in population growth, including changes in the age distribution of children, the number of children with parents in the workforce, and the number of children living in poverty.

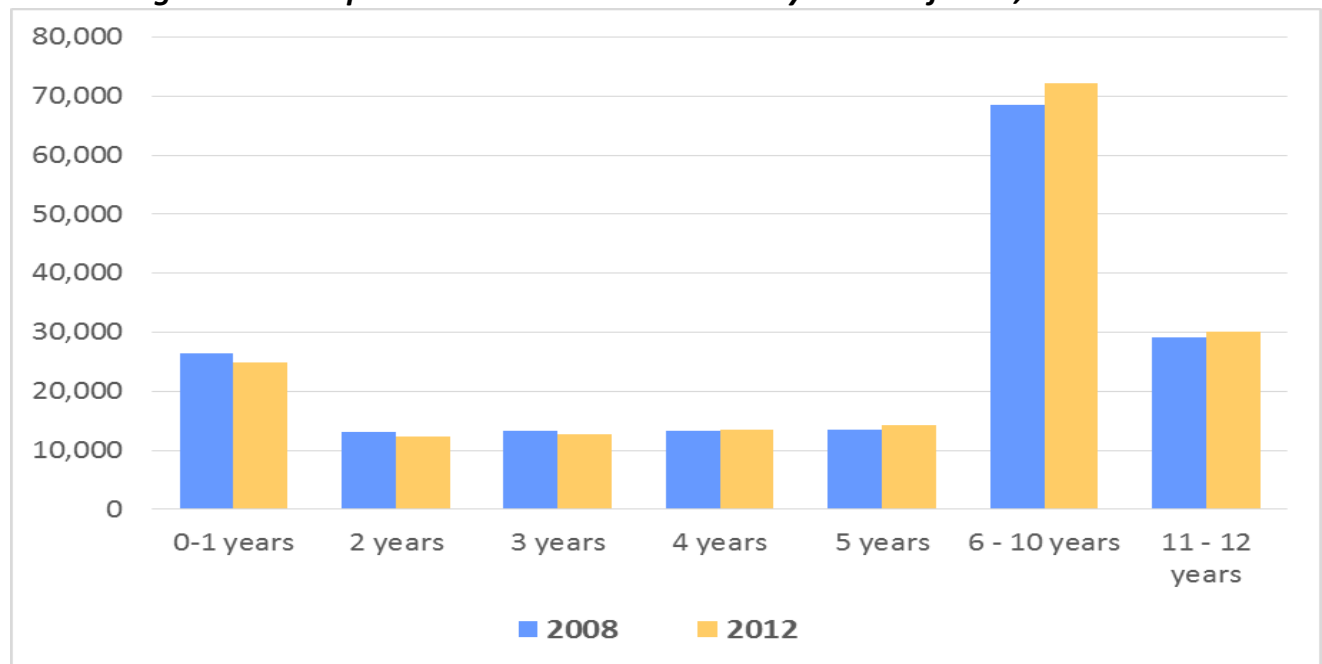
According to the 2013 California Child Care Portfolio for Contra Costa County, from 2008 to 2012 the number of children under age 5 in Contra Costa County decreased 4.0% from 66,140 in 2008 to 63,491 in 2012, a reduction of 2,649 children age 0-4. However, an estimated 66% of the county's 0-12 year olds have parents in the workforce in 2012, compared to just 64% statewide, and the county has seen a more than 25% increase in the number of 0-5 year olds living in poverty since 2008.

**Table 71 – Change in Child Population in Contra Costa County, 2008 – 2012**

	2008	2012	% Change
Total residents	1,053,710	1,069,803	1.5%
Number of employed residents	496,400	487,600	-1.8%
Number of children 0-12	177,216	179,899	1.5%
Under 2	26,427	24,885	-5.8%
2 years	13,104	12,365	-5.6%
3 years	13,269	12,772	-3.7%
4 years	13,340	13,469	0.9%
5 years	13,470	14,197	5.4%
6 - 10 years	68,402	72,193	5.5%
11 - 12 years	29,204	30,018	2.8%
Children 0-12 with Working Parents		118,320	
Children 0-5 Living in Poverty	9,988	12,520	25.4%

Source: California Child Care Portfolio, California Child Care Resource & Referral Network; <http://www.rnnetwork.org>

**Figure 25 – Change in Child Population in Contra Costa County and California, 2008 – 2012**



## NUMBER AND CAPACITY OF CHILD CARE FACILITIES

Available child care slots in licensed child care centers and family child care homes in Contra Costa County has declined from 38,237 slots at 1,835 sites in 2004 to 37,646 slots at 1,464 sites in 2012, representing a 2% decrease in the number of slots and a 20% decrease in the number of service sites.<sup>7</sup> In 2012, available child care slots have also continued to shift from Family Child Care Homes to Child Care Centers.

**Table 72 – Number of Licensed Facilities and Child Care Slots, Contra Costa County, 2004 - 2012**

Facility Type	2004		2006		2008		2010		2012	
	Facilities	Slots	Facilities	Slots	Facilities	Slots	Facilities	Slots	Facilities	Slots
Child Care Center	372	24,133	374	25,323	376	25,570	369	25,230	368	26,554
Family Child Care Home	1,463	14,104	1,273	12,488	1,094	11,022	1,081	10,704	1,096	11,092
<b>Total</b>	<b>1,835</b>	<b>38,237</b>	<b>1,647</b>	<b>37,811</b>	<b>1,470</b>	<b>36,592</b>	<b>1,450</b>	<b>35,934</b>	<b>1,464</b>	<b>37,646</b>

Source: California Child Care Portfolio, California Child Care Resource & Referral Network; <http://www.rrnetwork.org> as reported by [kidsdata.org](http://kidsdata.org)

Consistent with recent population shifts, parent requests for licensed child care for 0-2 year olds have declined slightly since 2010. Estimates in 2012 indicate 39% of all parent requests for licensed child care involved children less than 2 years of age. Requests for child care for 2 year olds (14%) and 3 year olds (12%) have remained constant in the past few years; however, the proportion of requests that involve 4 year olds have increased from 8% in 2010 to 11% in 2012.

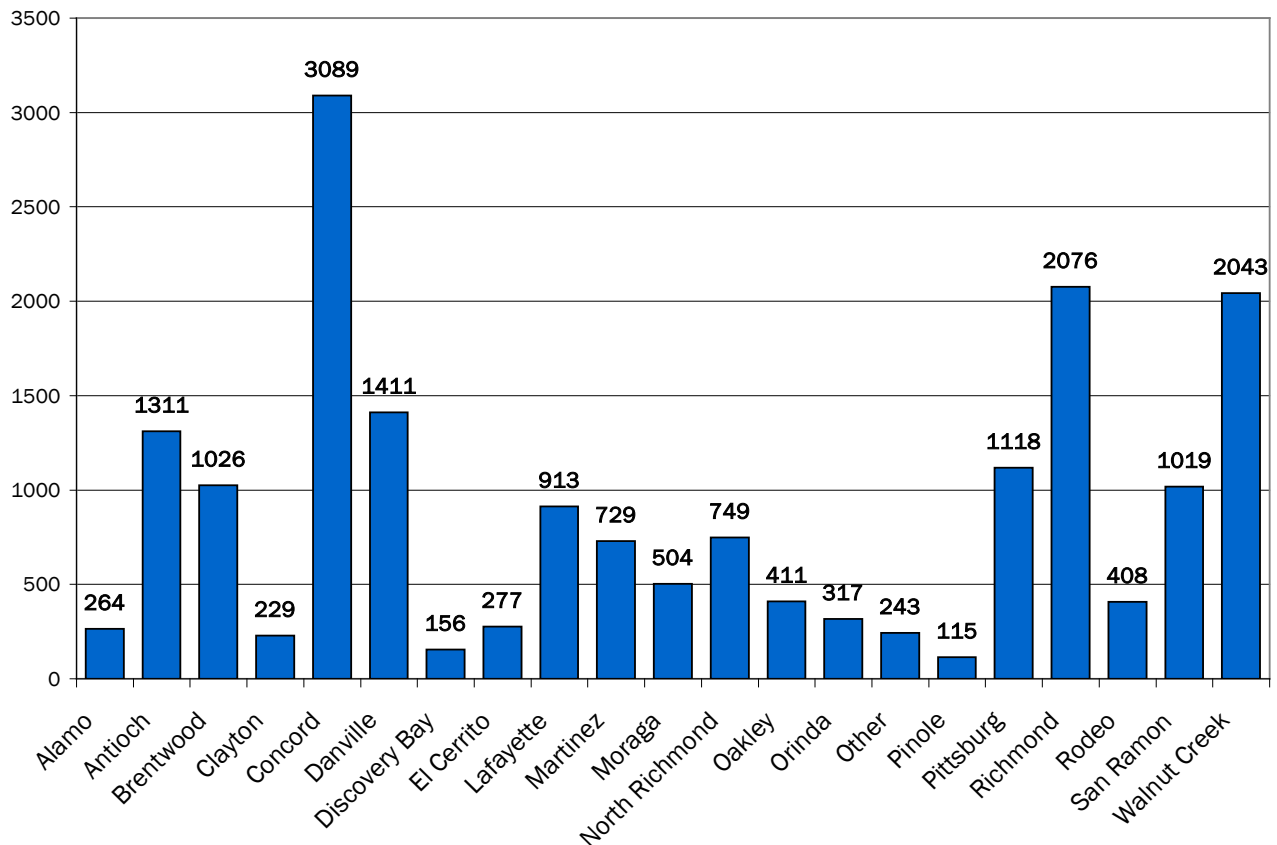
<sup>7</sup> California Child Care Resource and Referral Network, <http://www.rrnetwork.org>.

**Table 73 – Requests for Child Care by Age in Contra Costa County, 2010 - 2012**

Age of Child	2010	2012
Under 2 years	41%	39%
2 years	14%	14%
3 years	12%	12%
4 years	8%	11%
5 years	6%	7%

Source: California Child Care Portfolio, California Child Care Resource & Referral Network; <http://www.rrnetwork.org>

**Figure 26 – Child Care Slots Capacity at Licensed Centers in Contra Costa County, August 2012**



## BARRIERS TO CHILD CARE ACCESS

As child care slots in licensed childcare centers and family childcare homes in the county have declined 2% and the number of service sites has declined 20%, these capacity reductions disproportionately impact children who may be harder to place. Although the availability of childcare slots for Head Start and Early Head Start children is difficult to estimate, service providers do vary in their willingness to accept subsidized children. Cities with concentrations of low income households and a higher ratio of children to total population also have a disproportionately larger proportion of special needs and other hard-to-place children, such as children in protective services. The majority of special population children are in lower income communities of Antioch, Concord, Pittsburg, Richmond, and San Pablo.

Official countywide estimates of the number of children on child care subsidy waitlists from Centralized Eligibility Lists (CELs) have been unavailable since July 2011, when the Budget Act of 2011 cut county funding for these planning data. However, in their 2013 annual report, the Contra Costa County Child Care Council estimates that in July 2013, as many as 3,000 low income children were still waiting for child care.



In 2012, there was a licensed child care slot available for only 32% of children age 0-12 who have parents in the workforce. Although this represents a slight improvement over the 2010 availability estimate of 29%, the gap between availability and demand may be increasing in certain areas. Cities with the highest incomes and lowest child populations, such as Danville, Lafayette, Moraga, and Walnut Creek, tend to have a surplus of child care slots relative to demand. These cities tend to have more retirees, fewer people in the workforce, and higher average household incomes, and therefore, more ability to pay for childcare. In contrast, 83.4% of the county's 40,590 children in poverty are concentrated in the Antioch, Liberty, Mt. Diablo, Pittsburg and West Contra Costa school districts, and large increases in the number of children in poverty have occurred in the districts of Mt. Diablo (up 6,543), Antioch (up 4,228), West Contra Costa (up 4,195) and Pittsburg (up 2,945).

Finally, the gap between demand and the ability to pay for childcare continues to plague low income, high-need communities. Cost of care represents a critical barrier to access, even for middle class families earning the county's 2013 annual family median of \$94,208. Full-time care for infants now costs families approximately \$13,602, up \$952 or 7.5% from 2010 estimates.

**Table 74 – Child Care Costs by Age and Facility Type**

	LICENSED CHILD CARE CENTERS	LICENSED FAMILY CHILD CARE SITES
Full-time Infant Care	\$13,602	\$8,506
Full-time Preschool Care	\$9,705	\$7,920

Source: California Child Care Resource & Referral Network; <http://www.rrnetwork.org> as reported by kidsdata.org

Shortages will likely continue to impact families in communities where gaps between childcare availability and demand already existed (such as in high demand zip codes), where economic conditions have forced small business closures, and where the availability of slots have not kept pace with unanticipated child population growth. The majority of shortages will be for school-age care; however, estimated school-age shortages may not include a number of license-exempt facilities such as programs operated by libraries, private schools, community and faith-based organizations, and city parks and recreation departments.

## Foster Care

From 2003 to 2013, the rate of first entry into foster care per 1,000 children ages 0-17 in Contra Costa County has been considerably lower than that of the state. In 2013, the county's rate is 1.6 per 1,000 children, while the state's rate is 2.8. The county has experienced a general trend of declining foster care first entry rates since 2003, while the state rate has remained steady over the past 10 years.

**Table 75– Rate of First Entry into Foster Care**

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Contra Costa County</b>	2.5	2.5	2.0	2.3	2.3	1.9	1.5	1.3	1.7	1.7	1.6
<b>California</b>	2.8	2.8	3.0	3.0	2.9	2.6	2.7	2.6	2.6	2.7	2.8

Source: Child Welfare Services Reports for California, U.C. Berkeley Center for Social Services Research.

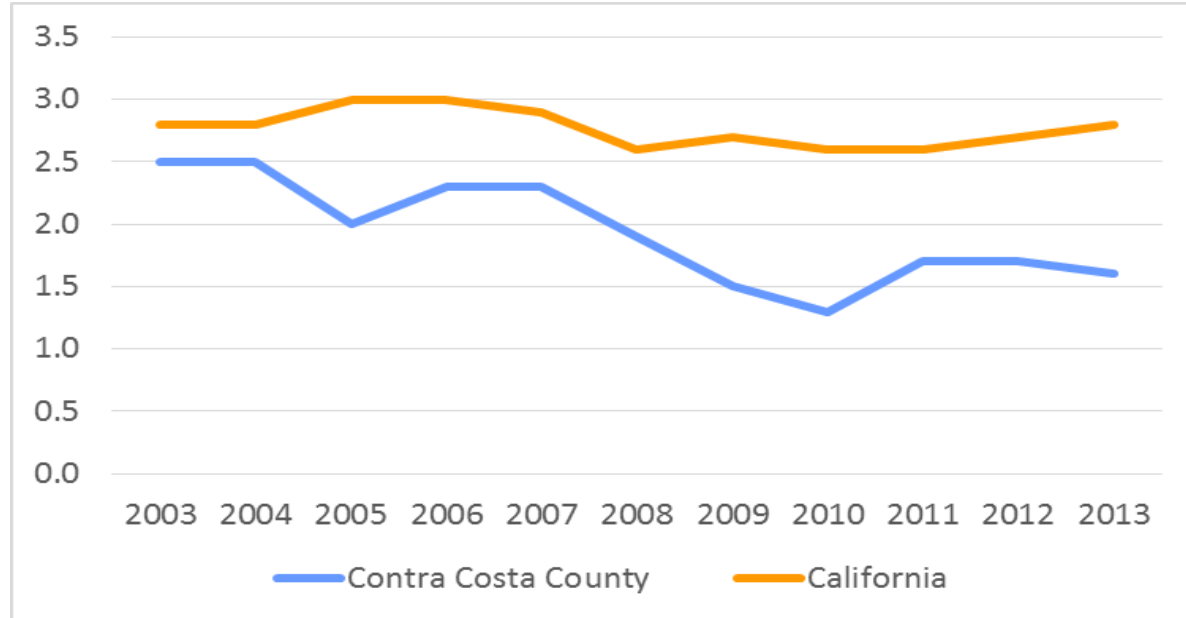
[http://cssr.berkeley.edu/ucb\\_childwelfare/](http://cssr.berkeley.edu/ucb_childwelfare/) as reported by kidsdata.org

Note: Rate is per 1,000 children (0-17 years)

In 2011-2013, the rate of first entry into foster care continued to be highest among African American children in the county (6.3 per 1,000 children). This rate was 4 times higher than the rate of first entry for Caucasians (1.6 per 1,000 children). The rate of entry among the county's African American children has risen from 5.6 per 1,000 in 2008-2010 to 6.3 per 1,000 in 2011-2013. The rate of first entry into foster care among Latino children in the county has dropped slightly from 1.6 in 2007-2009 to 1.3 per 1,000

children in 2011-2013. After dropping to 960 in 2010, the number of Contra Costa County children in foster care increased to 1,164 in 2013. About 28.1% of those in foster care in 2013 are 0-5 years old.

**Figure 27 – Rate of First Entry into Foster Care, Contra Costa County and California, 2003 – 2013**



**Table 76 – Rate of First Entry into Foster Care by Ethnicity, 2007 – 2013**

Race/Ethnicity	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
African American/Black	6.3	5.6	5.6	5.8	6.3
Asian/Pacific Islander	1.1	0.7	0.7	0.6	0.6
Latino	1.6	1.4	1.3	1.3	1.3
White	1.5	1.3	1.2	1.4	1.6

Source: [http://cssr.berkeley.edu/ucb\\_childwelfare/](http://cssr.berkeley.edu/ucb_childwelfare/)

Note: Rate per 1,000 children age 0-17. Rates are calculated over combined years to increase the sample size and thus improved the stability of the estimate.

**Table 77 – Children in Foster Care by Age, 2009 – 2013**

Age	2009	2010	2011	2012	2013
Under 1	70	44	57	48	62
Ages 1-2	112	97	102	101	129
Ages 3-5	132	103	115	124	136
Ages 6-10	247	177	191	198	234
Ages 11-15	405	332	293	304	321
Ages 16-20	263	207	222	240	282
<b>Total in Foster Care</b>	<b>1,229</b>	<b>960</b>	<b>980</b>	<b>1,015</b>	<b>1,164</b>

Source: Child Welfare Services Reports for California, U.C. Berkeley Center for Social Services Research.

[http://cssr.berkeley.edu/ucb\\_childwelfare/](http://cssr.berkeley.edu/ucb_childwelfare/) as reported by kidsdata.org

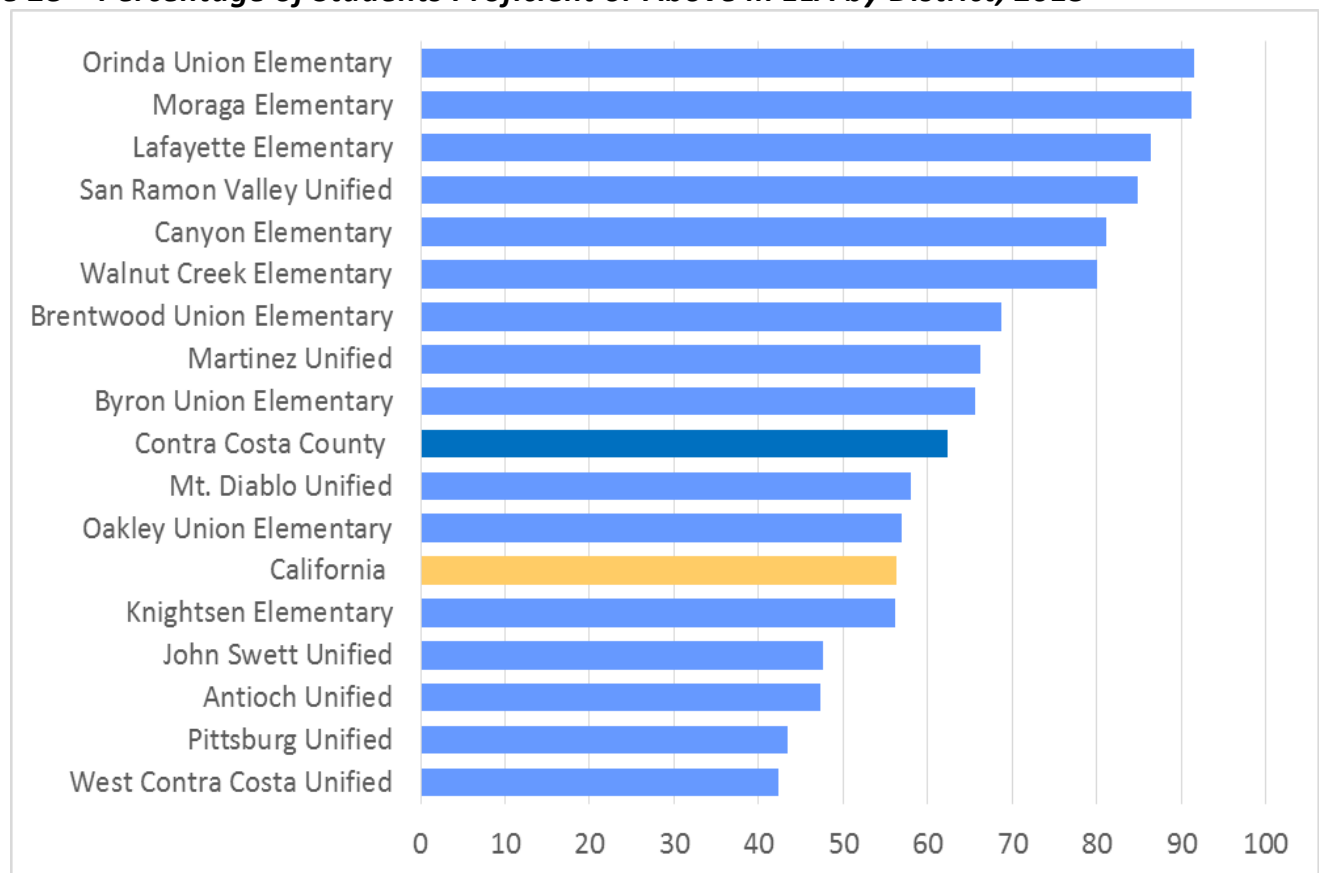
# Education and Training

## Academic Performance

All students, including English Learners (EL) and special education students, participate in the Standardized Testing and Reporting (STAR) program. The STAR Program has 5 performance levels: advanced, proficient, basic, below basic, and far below basic. Several factors contribute to higher performance on standard tests, including early childhood experiences such as quality licensed child care.

In 2013, the percentage of students who score proficient or above in English Language Arts (ELA) in Contra Costa County exceeds the statewide percentage (62.3% and 56.3%, respectively). However, percentages vary widely by district from 42.3% in West Contra Costa Unified, to 91.6% in Orinda Union Elementary. The percentage of students who score proficient or above in math in the county also exceeds the state (55.7% and 51.2%, respectively). Individual district proportions range from 37.7% proficient or above in math in West Contra Costa Unified, to 91.1% in Orinda Union Elementary. Contra Costa County also surpasses California in the percentage of students proficient or above in science (65.3% and 59.1%, respectively), with district proportions ranging from 44.1% in Pittsburg Unified, to 93.9% in Orinda Union Elementary.

**Figure 28 – Percentage of Students Proficient or Above in ELA by District, 2013**



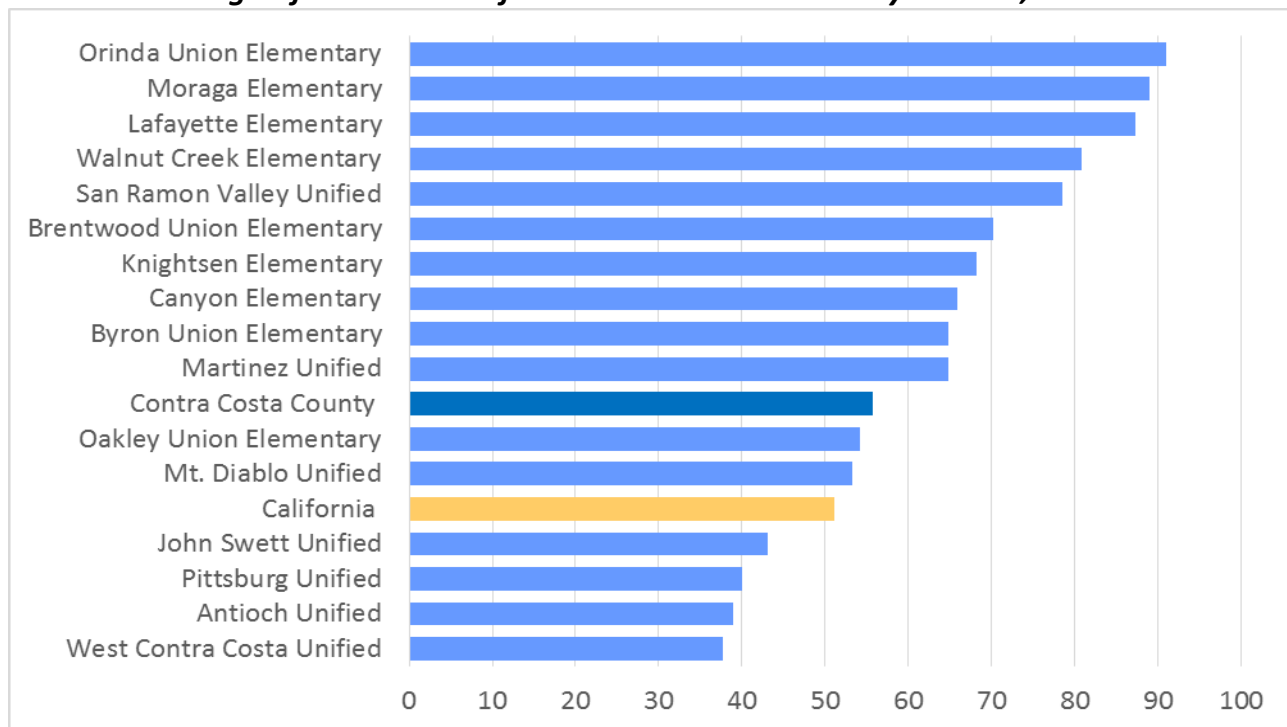
Source: <http://dq.cde.ca.gov/dataquest/>

**Table 78 – Student Performance by Subject and District, 2011 - 2013**

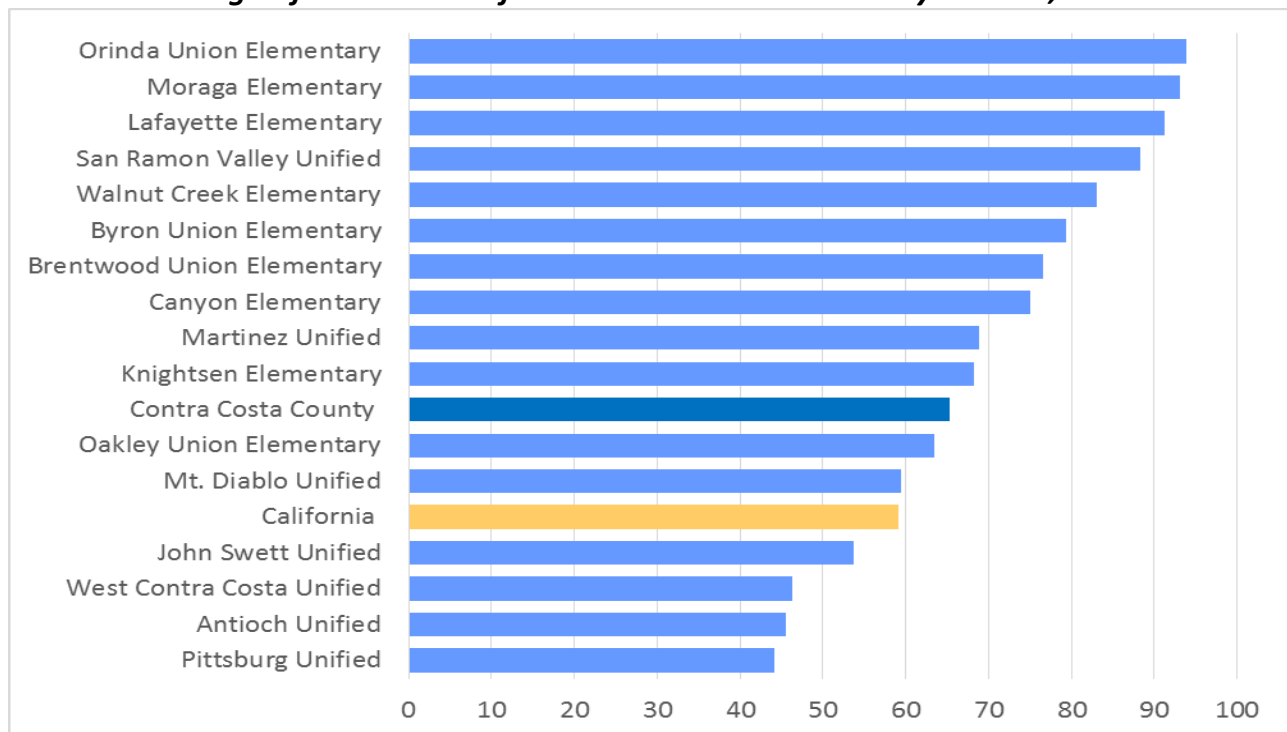
<b>2011</b>	<b>% Proficient or Above ELA (Grades 2-11)</b>	<b>% Proficient or Above Math (Grades 2-7)</b>	<b>% Proficient or Above Science (Grades 5,8,10)</b>
Antioch Unified	47.1	38.3	46.4
Brentwood Union	65.7	68.3	73.0
Byron Union Elementary	62.1	64.4	66.5
Canyon Elementary	79.6	70.4	86.7
John Swett Unified	46.4	42.1	55.4
Knightesen Elementary	64.4	68.4	71.8
Lafayette Elementary	85.3	85.4	90.8
Martinez Unified	66.8	62.3	67.4
Moraga Elementary	91.8	90.6	94.6
Mt. Diablo Unified	56.8	52.1	57.5
Oakley Union Elementary	55.9	52.9	62.2
Orinda Union Elementary	91.6	91.2	95.8
Pittsburg Unified	41.0	41.9	42.4
San Ramon Valley Unified	84.7	78.5	88.3
Walnut Creek Elementary	81.0	79.9	84.1
West Contra Costa Unified	42.0	37.8	42.5
<b>Contra Costa County</b>	<b>60.6</b>	<b>55.1</b>	<b>63.1</b>
<b>California</b>	<b>54.4</b>	<b>50.4</b>	<b>57.0</b>
<b>2013</b>	<b>% Proficient or Above ELA (Grades 2-11)</b>	<b>% Proficient or Above Math (Grades 2-7)</b>	<b>% Proficient or Above Science (Grades 5,8,10)</b>
Antioch Unified	47.3	38.9	45.6
Brentwood Union	68.7	70.3	76.6
Byron Union Elementary	65.6	64.9	79.3
Canyon Elementary	81.1	66.0	75.0
John Swett Unified	47.6	43.2	53.8
Knightesen Elementary	56.1	68.2	68.2
Lafayette Elementary	86.4	87.4	91.2
Martinez Unified	66.3	64.9	68.8
Moraga Elementary	91.2	89.1	93.1
Mt. Diablo Unified	58.0	53.3	59.5
Oakley Union Elementary	56.9	54.2	63.5
Orinda Union Elementary	91.6	91.1	93.9
Pittsburg Unified	43.4	40.0	44.1
San Ramon Valley Unified	84.9	78.5	88.3
Walnut Creek Elementary	80.1	80.9	83.1
West Contra Costa Unified	42.3	37.7	46.3
<b>Contra Costa County</b>	<b>62.3</b>	<b>55.7</b>	<b>65.3</b>
<b>California</b>	<b>56.3</b>	<b>51.2</b>	<b>59.1</b>

Source: <http://dq.cde.ca.gov/dataquest/>

**Figure 29 – Percentage of Students Proficient or Above in Math by District, 2013**



**Figure 30 – Percentage of Students Proficient or Above in Science by District, 2013**



## English Learners

The proportion of students in Contra Costa County who are English Learner (EL) has historically been lower than that of the state. For instance, in 2003-04 the percentage of EL students in the county was a little over half that of the state. According to the US Census Bureau, in 2010, 32.4% of all persons age 5 or more speak a language other than English at home in Contra Costa County, compared to 43.0% in California. However, this difference has steadily decreased over the past 10 years, and while the

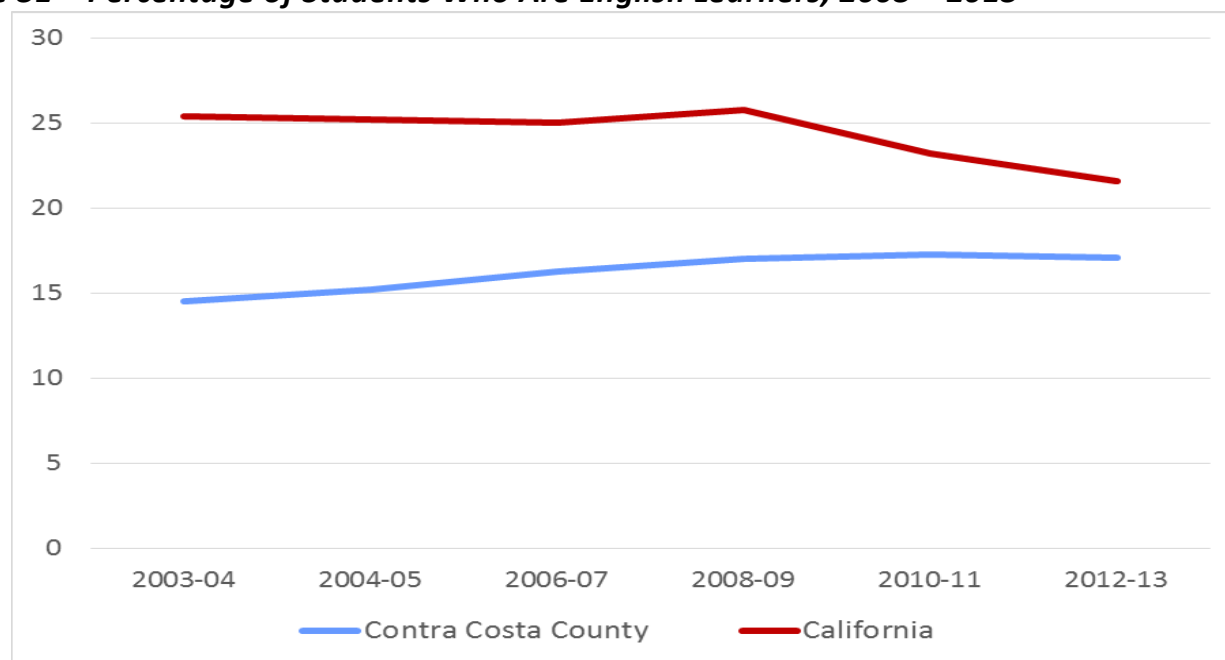
percentage of EL students in California public schools has dropped 3.8 points from 25.4% to 21.6% between 2003 and 2013, Contra Costa County has experienced a 2.6 point increase in the percentage of EL students. Thus, in 2012-13 the percentage of EL students in the county is now only 4.5 points less than that of the state.

**Table 79 – Number and Percentage of Students Who Are English Learners (EL), 2003 – 2013**

	2003-04	2004-05	2006-07	2008-09	2010-11	2012-13
<b>Number of EL Students</b> (Contra Costa County)	23,980	25,176	27,156	28,483	29,149	29,316
<b>Percent of EL Students</b> (Contra Costa County)	<b>14.5</b>	<b>15.2</b>	<b>16.3</b>	<b>17.0</b>	<b>17.3</b>	<b>17.1</b>
<b>Percent of EL Students</b> (California)	25.4	25.2	25.0	25.8	23.2	21.6

Source: <http://www.cde.ca.gov/ds/sd/cb/>

**Figure 31 – Percentage of Students Who Are English Learners, 2003 – 2013**



The most common languages spoken by English Learner students in 2012-13 remain virtually unchanged from prior school years, with 79.6% speaking Spanish, 2.8% speaking Tagalog, 1.5% speaking Vietnamese, and 1.5% speaking Farsi/Arabic.

**Table 80 – Top Languages Spoken by English Learners in Contra Costa County, 2012-2013**

LANGUAGE	PERCENT
Spanish	79.6
Filipino (Tagalog)	2.8
Vietnamese	1.5
Farsi (Arabic)	1.5
Mandarin	1.4
Punjabi	1.2
Cantonese	1.1

Source: <http://www.cde.ca.gov/ds/sd/cb/>

# Truancy Rates

Truancy (any unexcused absence or tardiness of 3 days or more) has many well-documented negative consequences on students, schools and communities. In recent years, truancy has been recognized as a serious, long-term threat to community health by several prominent local district attorneys, and judges, including California’s Attorney General, Kamala Harris. In California, nearly 90% of the students that struggle with chronic absenteeism are low income.<sup>8</sup> Truancy rates have been shown to predict future dropout rates, criminal activity, unemployment, gang affiliation, and drug and/or alcohol dependency. So established is the link between truancy and poor outcomes that, according to California Superior Court Judge Gloria Rhynes, the Department of Corrections and Rehabilitation uses third grade truancy rates to estimate the size of the future prison population.

**Table 81 – Percentage of Students Who are Truant by District, 2004 – 2013**

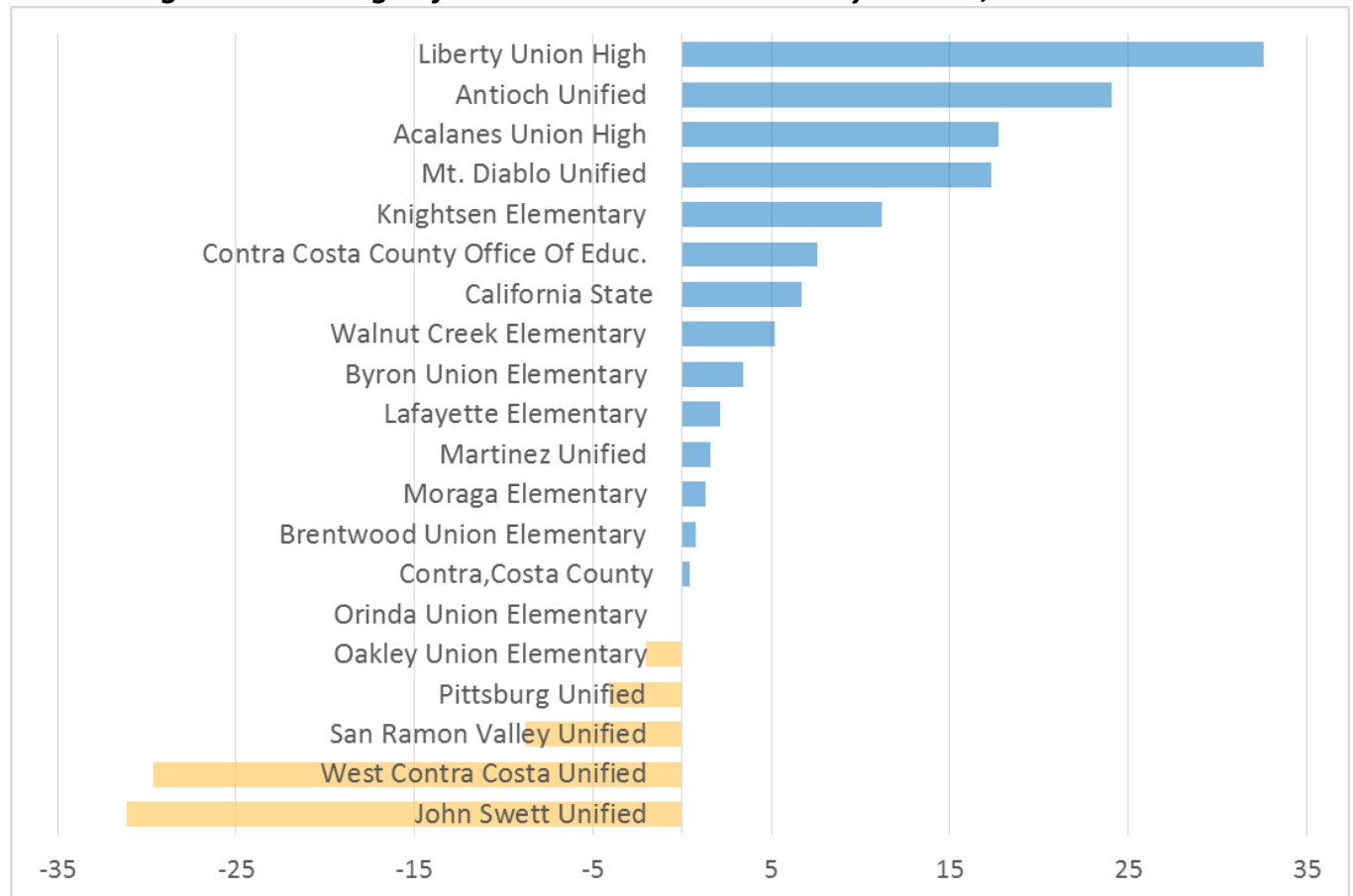
District	2004-2005	2006-2007	2008-2009	2010-2011	2012-2013
Acalanes Union High	4.3	7.2	23.0	11.6	22.0
Antioch Unified	9.6	46.6	52.6	35.2	33.7
Brentwood Union Elementary	17.0	19.7	29.6	25.2	17.8
Byron Union Elementary	21.6	32.1	30.9	21.8	25.0
Canyon Elementary	0.0	0.0	0.0	0.0	0.0
Contra Costa County Office Of Ed	11.8	12.6	5.7	41.8	19.4
John Swett Unified	52.4	63.4	30.8	56.7	21.3
Knightesen Elementary	3.2	2.7	3.0	2.3	14.4
Lafayette Elementary	14.2	12.5	16.2	14.9	16.3
Liberty Union High	1.9	1.8	0.9	0.4	34.5
Martinez Unified	27.3	22.2	19.7	24.7	28.9
Moraga Elementary	0.0	0.2	0.9	0.3	1.3
Mt. Diablo Unified	4.0	6.6	28.4	25.2	21.3
Oakley Union Elementary	34.5	38.7	37.5	26.4	32.5
Orinda Union Elementary	0.4	0.2	0.2	0.2	0.4
Pittsburg Unified	49.1	59.2	44.9	51.0	45.0
San Ramon Valley Unified	25.2	28.0	22.7	21.0	16.4
Walnut Creek Elementary	13.2	15.0	12.3	15.9	18.4
West Contra Costa Unified	88.8	45.1	47.6	66.9	59.2
<b>Contra Costa County</b>	<b>30.0</b>	<b>27.7</b>	<b>32.08</b>	<b>32.4</b>	<b>30.4</b>
<b>California</b>	<b>22.6</b>	<b>25.2</b>	<b>24.15</b>	<b>29.8</b>	<b>29.3</b>

Source: <http://www.cde.ca.gov/ds/sd/sd/filestd.asp>

Although in 2013 the average truancy rate in Contra Costa County has dropped to 30.4% (down 2 percentage points from 2011), the county’s truancy rate continues to exceed the state’s rate of 29.3%. However, truancy varies considerably by school district, with some districts, such as Orinda Union Elementary (0.4%) and Moraga Elementary (1.3%) achieving extremely low truancy rates, while West Contra Costa Unified (59.2%), Pittsburg Unified (45.0%), Liberty Union High (34.5%), Antioch Unified (33.7%), and Oakley Union Elementary (32.5%) have 2012-13 truancy rates that exceed the state average.

<sup>8</sup> In School and On Track 2014, The Attorney General’s Report on California’s Elementary School Truancy and Absenteeism Crisis, <https://oag.ca.gov/truancy/2014>

**Figure 32 – Change in Percentage of Students Who are Truant by District, 2004-05 – 2012-13**



Several districts saw marked improvements in truancy since 2010-11, as rates in John Swett Unified dropped 35.4 percentage points, Contra Costa County Office of Education dropped 22.4 points, and both West Contra Costa County Unified and Brentwood Union Elementary dropped just over 7 points. In contrast, 3 districts saw rates climb more than 10 points, including Acalanes Union High (up 10.4 points), Knightesen Elementary (up 12.1 points) and Liberty Union High (up 34.1 points). In 2013, the law that defines truancy was amended to allow school administrators discretion to excuse certain absences based on special circumstances, which may impact official truancy rates once this change is fully implemented.

## Dropout Rates

In the 13-year period from 2000 to 2013, Contra Costa County's overall 4-year derived dropout rate (dropouts per 100 high school students) remained well below state averages, but rose nearly 2 percentage points while the state's rate rose just 0.4 points. Dropout rates by district also vary considerably and 2012-2013 rates in three districts – Mt. Diablo Unified (12.4%), Pittsburg Unified (21.5%), and West Contra Costa Unified (13.3%) – exceed the state's rate of 11.4%.

Notably from 2001 to 2013, dropout rates improved for West Contra Costa Unified (from 16.5% to 13.3%), John Swett Unified (from 10.2% to 7.2%), San Ramon Valley Unified (from 1.3% to 0.4%), and Liberty Union High (5.2% to 4.5%).



**Table 82 – High School Dropout Rates in Contra Costa County and California, 2000 – 2013**

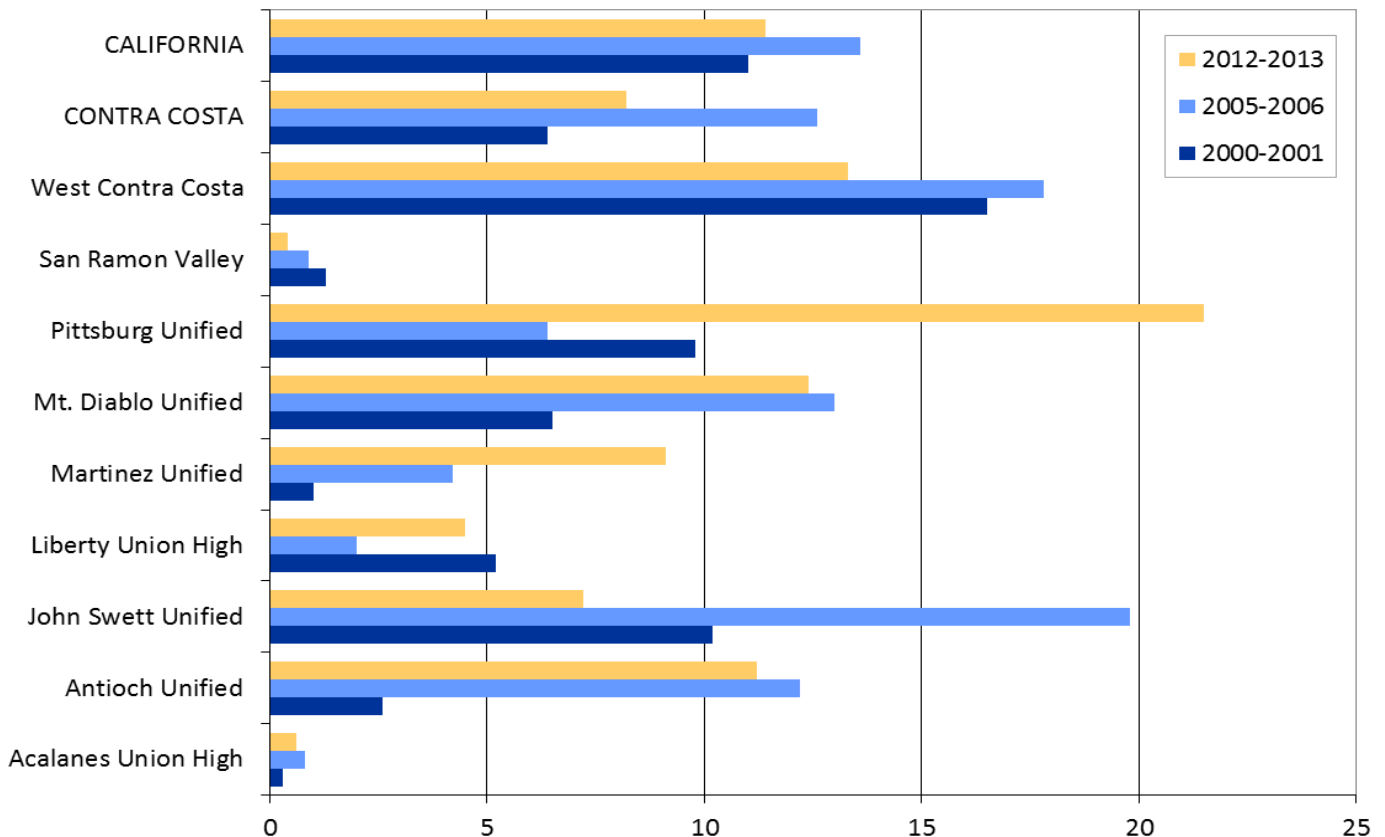
DISTRICT	2000-01	2005-06	2010-11	2012-13
Acalanes Union High	0.3	0.8	1.8	0.6
Antioch Unified	2.6	12.2	17.2	11.2
John Swett Unified	10.2	19.8	8.8	7.2
Liberty Union High	5.2	2.0	5.5	4.5
Martinez Unified	1.0	4.2	5.5	9.1
Mt. Diablo Unified	6.5	13.0	11.4	12.4
Pittsburg Unified	9.8	6.4	25.5	21.5
San Ramon Valley Unified	1.3	0.9	1.6	0.4
West Contra Costa Unified	16.5	17.8	20.5	13.3
<b>Contra Costa County</b>	<b>6.4</b>	<b>12.6</b>	<b>11.0</b>	<b>8.2</b>
<b>California</b>	<b>11.0</b>	<b>13.6</b>	<b>14.4</b>	<b>11.4</b>

Source: <http://dq.cde.ca.gov/dataquest/>

Note: Rates are 4-year derived dropout rates which estimate the percent of students who would dropout during a 4-year period based on data collected for a single year.

Dropout rates among students have fluctuated considerably and have varied by ethnicity in the past ten years. These posted rates are also highly subject to variability due to small numbers of students in ethnic categories and modifications in how ethnicity and dropout estimates are determined. However, considering only rates from 2004-05 and 2012-13, all ethnicities have experienced a reduction in dropouts over the past 8 years.

**Figure 33 – High School Dropout Rates by District, County and State, 2000 – 2013**



From 2004 to 2012, dropout rates among Caucasian, Asian and Filipino students have been the lowest in the county, while rates among African American, Latino, Native American and Pacific Islander students have been the highest. In the 2012-2013 school year, dropout rates for Asian (0.9%), Filipino (1.2%), and Caucasian (1.3%) students represent the county's lowest rates, while African American (5.0%) and Native American (4.6%) students have the highest rates.

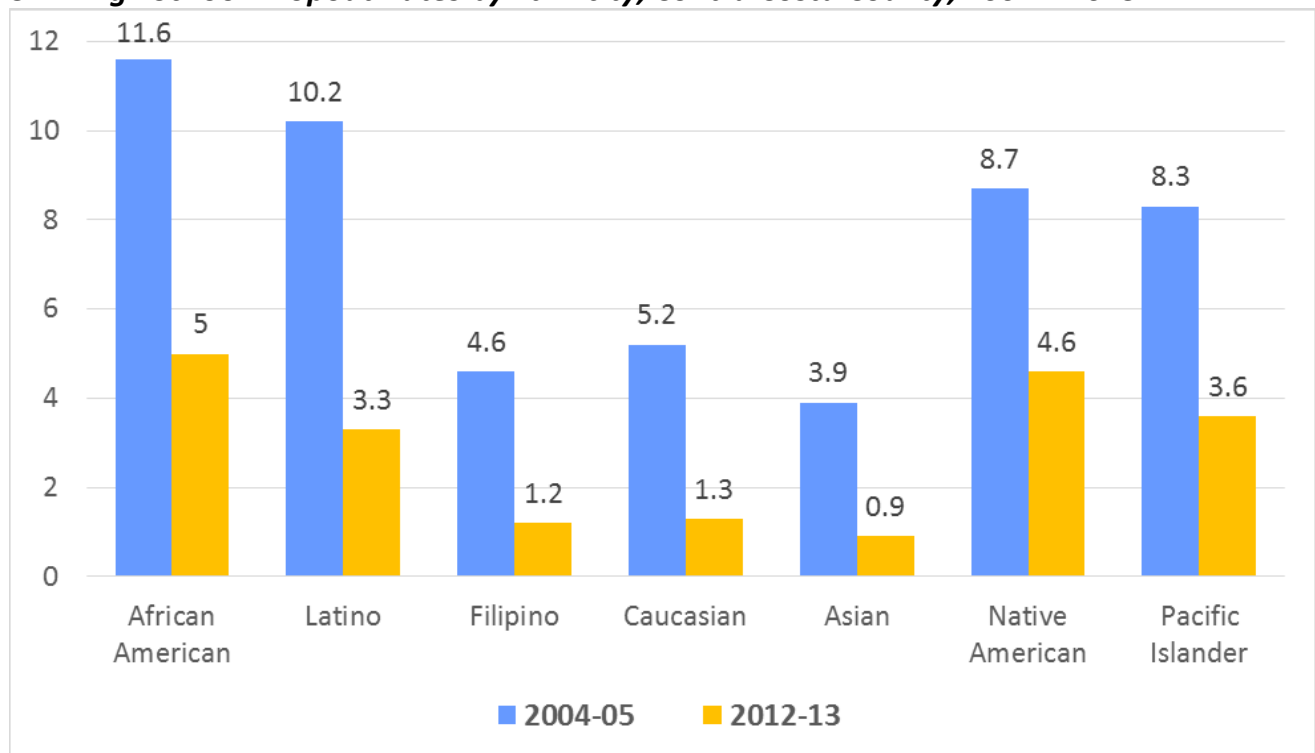
**Table 83 – High School Dropout Rates by Ethnicity, Contra Costa County, 2002 – 2013**

	2002-03	2004-05	2006-07	2008-09	2010-11	2012-13
<b>African American</b>	22.6	11.6	30.0	27.2	6.0	5.0
<b>Latino</b>	11.7	10.2	25.1	20.8	4.2	3.3
<b>Filipino</b>	13.4	4.6	13.7	6.7	1.1	1.2
<b>Caucasian</b>	3.4	5.2	10.0	7.6	1.2	1.3
<b>Asian</b>	7.5	3.9	8.9	5.6	1.2	0.9
<b>Native American</b>	*	8.7	26.7	23.0	6.2	4.6
<b>Pacific Islander</b>	*	8.3	25.4	19.8	4.8	3.6

Source: <http://dq.cde.ca.gov/dataquest/>

*Note: Rates are 4-year derived dropout rates which estimate the percentage of students who would dropout during a 4-year period based on data collected for a single year.*

**Figure 34 – High School Dropout Rates by Ethnicity, Contra Costa County, 2004 – 2013**



## Bullying

The incidence of bullying and harassment by classmates has received considerable attention as an underlying cause of poor academic performance and truant behaviors. Notably, teenage students in Contra Costa County report that they experience bullying in schools more often than California teens overall. In 2008-2010, an estimated 44.0% of 7th graders in the county experienced bullying compared to 41.7% statewide.

**Table 84 – Percentage of Students Who Were Bullied in the Past Year, 2008–2010**

	0 Times	1 Time	2-3 Times	4 or More Times
Contra Costa County	Percent	Percent	Percent	Percent
7th Grade	56.0	15.7	10.0	18.4
9th Grade	64.0	11.6	8.4	16.0
11th Grade	70.7	9.1	7.4	12.8
Non-Traditional	69.3	7.6	8.7	14.4
California	Percent	Percent	Percent	Percent
7th Grade	58.3	15.7	9.3	16.8
9th Grade	65.2	11.6	8.6	14.5
11th Grade	72.0	9.0	7.3	11.6
Non-Traditional	70.2	8.2	8.4	13.2

Source: California Department of Education, California Healthy Kids Survey (WestEd), 2008-2010 as reported by <http://www.kidsdata.org>

## Head Start

### HEAD START / EARLY HEAD START DEMOGRAPHICS

Early Head Start programs serve families in need with infants and toddlers age 0-3 years, while Head Start programs serve families in need with children age 4-5. Typically, about two thirds of families served are eligible for the programs because they live below the federal poverty level. According to the American Community Survey, 8.2% of all families live in poverty and 12.0% of all Contra Costa County families with children less than 5 years old live below FPL in 2013. Additionally, an estimated 6.1% of all individuals are less than 5 years of age (65,847), and 15.2% of individuals less than 5 years of age live below FPL. This translates into an estimated 10,009 children in Contra Costa County who are eligible for Early Head Start (5,786 0-2 year olds) or Head Start (4,223 3-4 year olds) based on income alone.

In the 2014-2015 school year, the county's Early Head Start program served 397 enrollees (including the children of 29 pregnant women), while the County's Head Start program served 1,625 enrollees, including new, continuing and turnover participants. About 41.1% of all program enrollees were 4 years of age.

**Table 85 – Percentage of Head Start / Early Head Start Enrollees by Age, 2014–2015**

	Early Head Start (ages 0-3)		Head Start (ages 4-5)	
	Number	Percent	Number	Percent
Pregnant women	29	7.3	0	0
Under 1 year	110	27.7	0	0
1 year old	127	32.0	0	0
2 years old	131	33.0	39	2.4
3 years old	0	0	621	38.2
4 years old	0	0	832	51.2
5 years and older	0	0	133	8.2
<b>Total Enrollment</b>	<b>397</b>	<b>100</b>	<b>1,625</b>	<b>100</b>

Source: Contra Costa County Head Start PIRs (includes delegate agency), 2014-15.

Note: Actual cumulative enrollment includes turnover. Totals may not sum to 100% due to rounding.

## HEAD START / EARLY HEAD START RACE AND ETHNICITY

Poverty rates in Contra Costa County, and thus Head Start eligible families, also vary considerably by ethnicity. Poverty rates for African American families (17.3%), Pacific Islander/Native Hawaiian families (17.1%) and Latino/Hispanic families (15.2%) were higher than rates for other families in the county; however at a poverty rate of just 6.0%, Caucasian families make up nearly half (47.8%) of the estimated 22,021 families living below the FPL in 2013.

**Table 86 – Estimates of Families Living Below Poverty by Ethnicity, 2013**

	All Families	Percent Below FPL	Families Below FPL	Proportion of All
Latino/Hispanic	53,107	15.2	8,072	36.7%
American Indian / Alaska Native	1,341	10.5	141	0.6%
African American	23,349	17.3	4,039	18.3%
Asian	40,812	5.9	2,408	10.9%
Caucasian	175,380	6.0	10,523	47.8%
Pacific Islander/ Native Hawaiian	1,090	17.1	186	0.8%
Multi-racial	8,196	8.0	656	3.0%
Other	15,137	14.7	2,225	10.1%
<b>Total Families</b>	<b>268,549</b>	<b>8.2</b>	<b>22,021</b>	

Source: <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

**Table 87 – Head Start and Early Head Start Enrollees by Race and Ethnicity, 2010 – 2014**

2010	Early Head Start (ages 0-3)		Head Start (ages 4-5)	
	Number	Percent	Number	Percent
Latino/Hispanic	372	68.0	1,362	65.2
Non-Latino/Hispanic	175	32.0	727	34.8
<b>Total Enrollees</b>	<b>547</b>	<b>100</b>	<b>2,089</b>	<b>100</b>
African American	102	18.6	455	21.8
Caucasian	348	63.6	1,386	66.3
Bi- or Multi-racial	78	14.3	164	7.9
Asian	13	2.4	69	3.3
Pacific Islander/ Native	3	< 1.0	12	< 1.0
American Indian / Alaska Native	3	< 1.0	3	< 1.0
<b>Total Enrollees</b>	<b>547</b>	<b>100</b>	<b>2,089</b>	<b>100</b>
2014	Early Head Start (ages 0-3)		Head Start (ages 4-5)	
	Number	Percent	Number	Percent
Latino/Hispanic	232	58.4	1,075	66.2
Non-Latino/Hispanic	165	41.6	550	33.8
<b>Total Enrollees</b>	<b>397</b>	<b>100</b>	<b>1,625</b>	<b>100</b>
African American	89	23.9	327	20.4
Caucasian	240	64.3	1,067	66.6
Bi- or Multi-racial	37	9.9	131	8.2
Asian	7	1.9	65	4.1
Pacific Islander/ Native	0	0.0	2	< 1.0
American Indian / Alaska Native	0	0.0	2	< 1.0
<b>Total Enrollees</b>	<b>397</b>	<b>100</b>	<b>1,625</b>	<b>100</b>

Source: Contra Costa County Head Start and Early Head Start PIRs (includes delegate agency), 2010 & 2014.

Note: Totals include turnover and pregnant women in Early Head Start. Totals may not sum to 100% due to rounding.

In 2014, 58.4% of all Early Head Start and 66.2% of all Head Start enrollees in the county are Latino, while 23.9% of Early Head Start and 20.4% of Head Start enrollees are African American. Caucasian enrollees make up nearly two thirds of Early Head Start (64.3%) and Head Start (66.6%) enrollees. Only 1.9% of Early Head Start and 4.1% of Head Start enrollees are of Asian ancestry, while less than 1% of enrollees in either program self-identify as Pacific Islander/Native Hawaiian or American Indian/Alaska Native.

## FAMILY CHARACTERISTICS OF ENROLLED CHILDREN

In the 2014-2015 school year, single-parent families represent 70.1% of all families with children enrolled in Early Head Start, down from 75.8% in 2010. Single-parent families represent just under two thirds (62.7%) of all families with children enrolled in Head Start.

**Table 88 – Percentage of Enrolled Families by Family Type, 2010–2014**

2010	Early Head Start (ages 0-3)		Head Start (ages 4-5)	
	Number	Percent	Number	Percent
Two-parent families	119	24.2	738	36.4
Single-parent families	373	75.8	1,291	63.6
<b>Total Families</b>	<b>492</b>	<b>100</b>	<b>2,029</b>	<b>100</b>
2014	Early Head Start (ages 0-3)		Head Start (ages 4-5)	
	Number	Percent	Number	Percent
Two-parent families	111	29.9	570	37.3
Single-parent families	260	70.1	960	62.7
<b>Total Families</b>	<b>371</b>	<b>100</b>	<b>1,530</b>	<b>100</b>

Source: Contra Costa County Head Start and Early Head Start PIRs (includes delegate agency), 2010 & 2014.

## HEAD START / EARLY HEAD START ENROLLMENT ELIGIBILITY TYPES

In 2014-15 as in prior years, the majority of children in both Head Start (64.1%) and Early Head Start (66.9%) were enrolled based on income eligibility, which represents an 4.8 percentage point increase for Head Start enrollees and a 10.4 increase for Early Head Start since 2010. For both Head Start and Early Head Start children, enrollment based on receipt of public assistance continues as the second largest group in 2014 (22.2% and 18.3%, respectively).

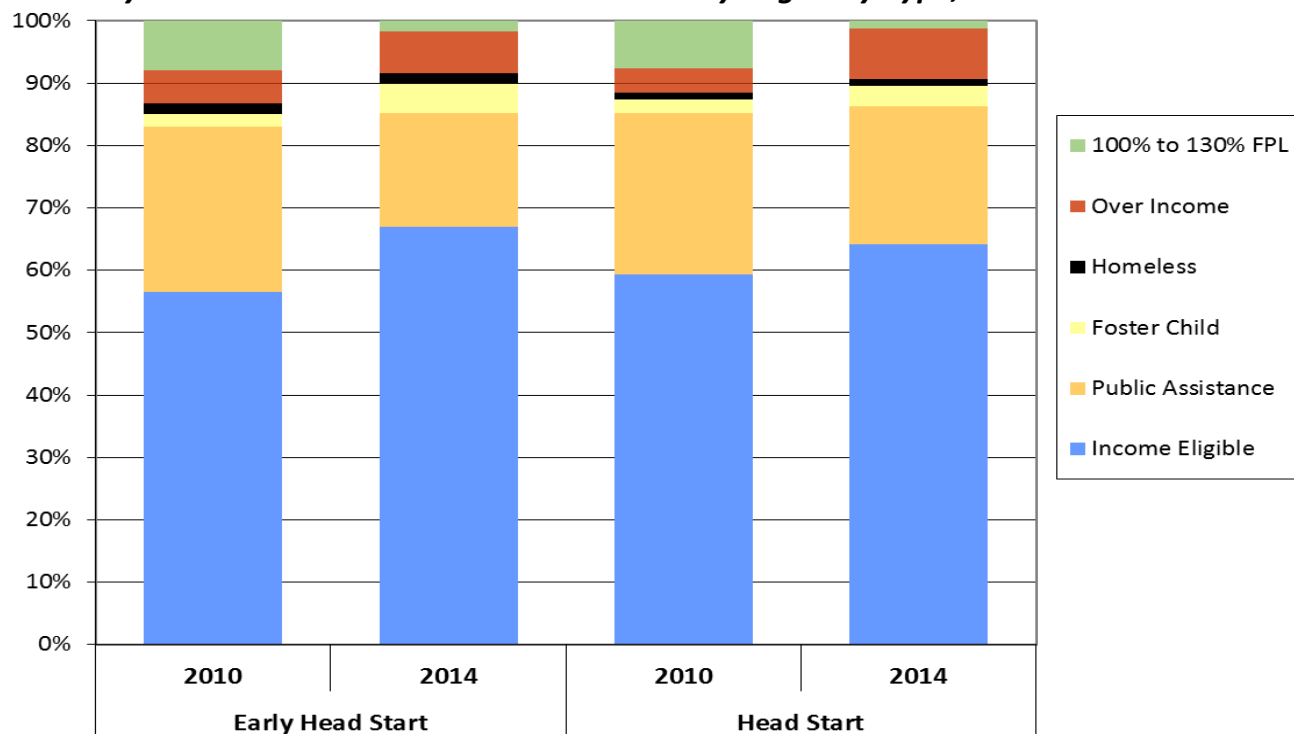
Both Head Start and Early Head Start enrollment in 2014 saw increases in eligibility based on being in foster care since 2010. The percentage of Head Start children in foster care increased from 2.1% in 2010 to 3.2% in 2014, while the percentage of Early Head Start foster children more than doubled from 2.0% in 2010 to 4.7% in 2014. The number and proportion of children in Head Start and Early Head Start based on homelessness has not changed considerably since 2010. The proportion of over-income enrollment has increased considerably in both programs since 2010.

**Table 89 – Early Head Start and Head Start Enrollment by Eligibility Type, 2014–15**

	Early Head Start		Head Start	
	Count	Percent	Count	Percent
Income Eligible	241	66.9	907	64.1
Public Assistance	66	18.3	314	22.2
Foster Child	17	4.7	46	3.2
Homeless	6	1.7	17	1.2
Over Income	24	6.7	115	8.1
Between 100% & 130% FPL	6	1.7	17	1.2
<b>Total</b>	<b>360</b>	<b>100.0</b>	<b>1416</b>	<b>100.0</b>

Source: Contra Costa County Head Start, PIR 2014; Actual enrollment includes turnover.

**Figure 35 – Early Head Start and Head Start Enrollment by Eligibility Type, 2010 – 2014**



## DISABILITY STATUS OF HEAD START CHILDREN

The number of disabilities among Head Start preschoolers has steadily decreased in the past 8 years due in large part to the implementation of the Response to Intervention (RtI) programming at the school districts. The number of disabilities diagnosed annually has dropped 48.9% from a high of 280 in 2007 to a 9-year low of 143 in 2014. In 2014, speech or language impairment continues to be the top disability of preschool age students in Head Start (n=123), representing 86.0% of all disabilities diagnosed. In contrast to findings from the last community assessment in which learning disabilities and orthopedic impairments followed speech or language impairment as the next most common disabilities, autism (n=6) and non-categorical developmental delay (n=5) represent the second and third most common disabilities in 2014. In 2014 there are 2,309 children in Contra Costa County less than 6 years of age with at least one disability, which represents a 3.3% decrease since the county's 2012 total of 2,387.

**Table 90 – Number of Disabled Preschoolers in Head Start by Disability Type, 2006 – 2014**

TYPE OF DISABILITY	2006-07	2008-09	2010-11	2014-15
Speech or language impairment	217	220	180	123
Multiple disabilities (including deaf-blind)	2	7	2	3
Emotional/behavioral disorder	1	1	0	0
Learning disabilities	1	0	3	3
Health impairment	1	0	0	0
Orthopedic impairment	2	3	3	0
Non-categorical / developmental delay	9	3	0	5
Autism	0	2	1	6
Visual impairment (including blindness)	1	3	2	2
Mental retardation	2	0	0	0
Hearing impairment (including deafness)	1	0	2	1
Traumatic brain injury	0	0	0	0
<b>Total</b>	<b>237</b>	<b>236</b>	<b>193</b>	<b>143</b>

Source: Contra Costa County Head Start Program Information Reports, 2005-2011

## CSB Child Care Center Locations

**Ambrose** LIC: 073402849 3103 Willow Pass Rd., Bay Point 94565  
Phone: (925) 427-8463, 8464 Fax: (510) 427-8465

**Balboa** LIC: 073400249/IT073402613 1001 S. 57<sup>th</sup> St., Richmond 94804  
Phone: (510) 374-7025, 7026, 7027, 7028 Fax: (510) 374-7024



**Bayo Vista** LIC: 073402140 2 California St., Rodeo 94572  
Phone: (510) 374-7492 Fax: (510) 374-7512



**Brookside** LIC: 070213108 847 "B" Brookside Dr., Richmond 94801  
Phone: (510) 374-3732, 3733, 3736, 3765 Fax: (510) 374-3729

**Contra Costa College** LIC: 073404255 2600 Mission Bell Dr., Rm 118 & 121, San Pablo 94806. Phone: (510) 235-1277, 1251  
Fax: (510) 235-1244



**Crescent Park** LIC: 070211591 5050 Harnett Ave., Richmond 94804  
Phone: (510) 374-3701 Fax: (510) 374-3741

**George Miller** LIC: 73400252/IT073402545 3068 Grant St., Concord 94520  
Phone: (925) 646-5646 Fax: (925) 646-5054

**George Miller III** LIC: 073404440 300 S. 27<sup>th</sup> St., Richmond 94804  
Phone: (510) 374-3526 Fax: (510) 374-3553



**Las Deltas** LIC: 073404675/IT-070213144 135 W. Grove Ave., Richmond 94801  
Phone: (510) 374-3444, 3446, 3469, 3470  
Fax: (510) 374-3564



**Lavonia Allen** LIC: 073400254 94 ½ Medanos Ave., Bay Point 94565  
Phone: (925) 427-8270, 8272 Fax: (510) 427-8355

**Los Arboles** LIC: 073402350 240 Las Dunas Ave., Oakley 94561  
Phone: (925) 427-8930, 8931, 8932, 8933 Fax: (925) 427-8935



**Los Nogales** LIC: 073400495 321 Orchard Dr., Brentwood 94513  
Phone: (925) 427-8531, 8601 Fax: (925) 427-8594

**Marsh Creek** LIC: 073401411 7251 Brentwood Blvd., Brentwood 94513  
Phone: (925) 427-8576, 8577 Fax: (925) 427-8594



**Riverview** LIC: 073404270 227 Pacifica Ave., Bay Point 94565  
Phone: (925) 427-8340, 8341 Fax: (925) 427-8378

**Verde** LIC: 070212633 2000 Giaramita Ave., North Richmond 94801  
Phone: (510) 374 3008, 3009 Fax: (510) 374-3006



## Attachment G — CSB Annual Report for 2014

# 2014 Annual Report

Contra Costa County  
Employment & Human  
Services Department

Community  
Services Bureau





## Audits, Reviews & Compliance

EHSD Community Services Bureau			
2014 Audits and Reviews by Federal, State, and CPA Firms			
	Name of Agency	Purpose	Outcome
1.	State of CA Department of Community Services & Development	On-site Monitoring Visit 2014 LIHEAP Program	No findings
2.	State of CA Dpt. of Community Services & Development	On-site Monitoring Visit 2014 CSBG Program	No findings
3.	Marcum LLP	FY 2013-2014 Single Audit	No findings
4.	Badawi & Associates	FY 2013-14 State Child Development Audit	No findings

Fiscal Year 2014 – Compliance with Mandated Federal Head Start Reporting Requirements	
Public and private funds received, including amount & source for each – <b>included</b>	Percentage of enrolled children receiving medical & dental exams — <b>included</b>
Budgetary expenditures and proposed budget - <b>included</b>	Information regarding parent involvement activities - <b>included</b>
Children & families served, average monthly enrollment, and percentage of eligible children served - <b>included</b>	Kindergarten preparedness summary of agency's efforts – <b>included</b>
Results of the most recent Federal program review by the Secretary of the U.S. Dept. of Health and Human Services & the financial audit – <b>financial audits included; no Federal program reviews conducted in 2014</b>	Other information required by the Secretary of the U.S. Dept. of Health and Human Services. – <b>No additional information required</b>

Contra Costa County Employment & Human Services Department  
 Community Services Bureau  
 1470 Civic Court (formerly Enea Cir), Suite 200  
 Concord, CA 94520  
 Telephone: (925) 681– 6300  
 Website: ehsd.org





## Funding & Expenditures

FY 2013-14 Revenues	
Program Name	Amount
Head Start	17,791,842
Funding & Expenditures LIHEAP/Weatherization	2,000,342
Early Head Start	3,460,091
CDE Contracts (Stage II, CAPP, Child Development)	22,076,965
USDA/CCFP Meal Reimbursements	1,016,504
CSBG	766,428
County Contribution	632,449
<b>Total</b>	<b>47,744,621</b>

FY 2013-14 Expenditures	
Program Name	Amount
Head Start	18,395,203
Child Development	17,299,934
CAPP & Stage II	4,777,031
Early Head Start	3,460,091
USDA/CCFP Meal Reimbursements	1,017,847
CSBG	777,818
LIHEAP/Weatherization	2,016,697
<b>Total</b>	<b>47,744,621</b>

FY 2014-15 Budget			
Program Name	Expenditures	Revenues	Net County Cost
Head Start	15,689,730	15,689,730	-
CA Department of Education Contracts	15,384,680	15,384,680	-
Early Head Start	4,627,510	4,627,510	-
CA Dept. of Community Services Contracts	2,883,142	2,724,354	158,788
USDA/CCFP Meal Reimbursements	1,060,847	1,060,847	-
<b>Total</b>	<b>39,645,909</b>	<b>39,487,121</b>	<b>158,788</b>

## Letter from the Director

I am pleased to present the Community Services Bureau's 2014 Annual Report. As we celebrated our 50<sup>th</sup> year as the designated Head Start Community Action Agency for Contra Costa County, I am proud that we once again touched the lives of over 10,000 individuals in our community. Community Services Bureau (CSB) remained the largest childcare program in Contra Costa County, providing quality services to over 2,200 children and their families while our Alternative Payment, Energy Assistance and Weatherization Programs, and our many Community Action partnerships provided additional safety net services to those families in need.

This was also a year of rebuilding and reorganizing after several years of budget and program reductions. Our Crescent Park center in Richmond reopened, providing comprehensive services to an additional 60 children and their families; we reinstated our Early Head Start Home Visiting program partnerships, providing much needed support to pregnant women, teens and new parents; and we were able to fill several critical administrative and program positions, thereby extending our ability to serve our community more effectively.



Four successful audits and reviews this year in CSB's various programs highlight the continued quality and strong systems of our organization. Our success is due to the tireless commitment of CSB's staff and governing bodies, in conjunction with linkages to dozens of community partners throughout the county. Together we continue to fight poverty in multiple areas and across barriers that include language, literacy, disability, and disenfranchisement to ensure that our children are the best prepared for school and beyond.

Please share in our 2014 successes by taking a few minutes to look at the innovative work CSB has done and will continue to do in the years to come.

*Camilla*

Camilla Rand, Director  
Employment and Human Services Department  
Community Services Bureau



## Community Services Bureau

Community Services Bureau (CSB) is part of a national network of Community Action Agencies (CAAs) that was established by the 1964 War on Poverty to address the underlying conditions that cause poverty. In 2006, the Community Services Department was made a bureau within the Employment and Human Services Department (EHSD). We have an annual budget of close to \$48 million and we employ approximately 400 employees in 16 service locations across the county.

Our largest program is the Child Development Program funded through the State of California. It offers both part-day and full-day services with a core class curriculum that is developmentally, culturally, and linguistically appropriate for the children served. Each year, we combine federal Head Start, Early Head Start, and State Child Development funds to provide early childhood education services to over 2,200 children and their families.

CSB administers several other programs that serve economically vulnerable households and low income families: a) Low Income Home Energy Assistance Program (LIHEAP), b) Weatherization, and c) Child Care Alternative Payment Programs (CAPP). Through the federally-funded, state-administered Community Services Block Grant (CSBG), CSB is also able to fund a variety of community-based organizations operating poverty reduction programs in the county. The goals identified by CSB include:

- Assisting the low-income community to become more self-sufficient;
- Improving the conditions in which low-income people live;
- Community enhancement through greater participation of low-income populations;
- Expanding opportunities through community-wide partnerships.

In 2014, CSB served 2,477 Head Start and Early Head Start children and their families, which represented just over 27% of the eligible children in Contra Costa County. In compliance with federal Head Start regulations, our average monthly attendance was 86.47%; and we were fully enrolled throughout the year.



## Professional Development

CSB believes that continuing education and Training and Technical Assistance (T&TA) is critical in meeting or exceeding the Head Start Performance Standards, realizing program goals and objectives, determining priorities based on data and systems analyses, and achieving continuous improvement as an agency. The percentage of preschool teachers that have obtained an Associate's or Bachelor's degree has risen from 85% in 2013 to 91% in 2014. Detailed below are training highlights occurring during 2014.

Training Title	Training Description	Number & Position
Ages and Stages Questionnaire Social-Emotional	Screen children's social-emotional behavior	116 Teaching Staff
Creative Curriculum	Enhance the teacher's understanding of fundamental foundations to apply in the classroom	106 Teaching Staff
Project Approach	Understand in depth planning and implementation required on projects to support children's learning	115 Teaching Staff
Ready to Learn	Safe and developmentally appropriate environments and transitioning children to school	156 Teaching Staff
Second Step	Develop socio-emotional skills aimed at reducing impulsive and aggressive behaviors while increasing social competence	110 Teaching Staff
Cultural Sensitivity	Create authentic, healthy, equitable relationships with co-workers, colleagues, and families of young children	47 Teaching Staff
Program for Infant Toddler Care	Complete Social and Emotional Milestones Program on mental health and disabilities	40 Teaching Staff
Family Development Credential	Complete California Head Start Association credentialing program to enhance knowledge and skills to support families' development	11 Comprehensive Services Managers & Asst. Managers
Strengths Finder	Identify staffs' five (5) personal strengths to understand and apply these strengths for success in personal, educational, and professional endeavours	111 - Managers, Supervisors, Mental Health Interns, Clerks & Clerical Assistant Trainees

## Innovations

The primary innovation focus during 2014 was CSB's move to a new 17,960 square foot administrative center at 1470 Civic Court (formerly Enea Circle), Suite 200, in Concord. The new facility combined two separate administrative offices into one in order to achieve increased functionality, expand the organization's ability to serve students and their families, and realize cost savings associated with consolidation. The planning, facilities and functional design, and logistics took more than a year to complete with the end result — an administrative center that is fully integrated with program operations.

Various sized meeting and training rooms are equipped with state-of-the-art electronic equipment with the capability to link to tablets or computers, participate in a webinars or virtual classes, or facilitate trainings, and contributing to the goal of providing enhanced services to those enrolled in the various programs offered through CSB. In response to these facility changes and upgrades, CSB has been contacted by other agencies hoping to enhance the functionality of their sites or lowering operating costs.



### **CLOUDS (Child Location, Observation, and Utilization Data System)**

CLOUDS is a customized CSB electronic data management and student tracking information system designed in 2012 to address CSB's unique program-related needs, including electronic report generation and submission to oversight agencies. The 2014 approval by the California Department of Education (CDE) accept electronic submittals was the first in the state. This innovative model is expanding to organizations with a similar focus based on CSB's pioneering efforts. CSB continues to work with the CLOUDS' design team to create new reports or expand the capabilities of existing ones, such as advising state and federal agencies when a change in student status occurs, providing detailed demographic statistics by center or classroom or even by student, reporting on health screening activities and outcomes, and expanding disabilities reporting to identify and target services more effectively. Going forward, staff is working to develop trending capabilities that will allow CSB to more effectively target resources or apply for funding based on identified needs. By the end of June 2014, this technology was available at all CSB centers.

## Shared Governance

### **Board of Supervisors**

The Contra Costa County Board of Supervisors (BOS) is the policy-making body of county government that oversees the operations of departments and exercises executive and administrative authority through county government and the office of the County Administrator.

### **Policy Council**

The Policy Council (PC) is comprised of elected parent representatives of current and past children and local community representatives. They work with the Board of Supervisors and the Director of Program Services to achieve Head Start Performance Standards. The Policy Council is responsible for decisions regarding:

- Parent, family, and community engagement;
- Program recruitment, selection, and enrollment priorities;
- Funding applications and amendments;
- Budget planning, including reimbursement and participation in PC activities;
- PC by-laws;
- PC election procedures;
- Recommendations on delegates and service areas;
- Annual, monthly, and periodic reports;
- Approving/disapproving hires/terminations of staff



2014-2015 Policy Council Executive Committee (LtR): Marcela Cardenas (Secretary), Deena Jones (Vice Chair), Veronica Covarrubias (Chair), Janelle Lafrades (Parliamentarian)

*"Being a Head Start parent and a Policy Council Executive member has been a very rewarding experience for me. I've learned so much about how Head Start works, the ways I can be a better parent, and how to get my child ready for Kindergarten."*

- Deena Jones - Policy Council Vice Chair





### **Economic Opportunity Council**

The Economic Opportunity Council (EOC) is a tripartite advisory board to the BOS and CSB for the administration of the Community Services Block Grant (CSBG). The EOC board composition includes five members from the public/private non-profit sector, five members from the low-income sector, and five members of the Board of Supervisors or their designees.

### **Shared Decision Making**

Together, the BOS, the PC, the EOC, and the director of CSB, form the group responsible for shared decision making in Community Services.



### **EOC Member Activities in 2014:**

- EOC members participated in the following community service outreach projects in 2014:
  - \* Established community farm in the East Contra Costa County that donated fresh produce to Solano-Contra Costa Food Bank in July
  - \* Coached soccer at Antioch day camp in July
  - \* Participated in “Stop the Violence Walk” in July
  - \* Participated in “National Night Out” sponsored by Girls, Inc. and the Richmond Police Department
  - \* Participated in the new dog park (development, board members, and volunteers) and Wespac Energy Infrastructure Project discussions in the City of Pittsburg.
  - \* Developed an art project, “Dia de los Muertos” for the youth in the City of Oakley.
  - \* Established a youth basketball training program in the city of Antioch.



### **2014 CSBG Desk Review**

The California Department of Community Services and Development, conducted a desk review of CSBG Programs in the last week of May. There were no findings or concerns.

### **50 years of War on Poverty**

CSB participated in the 50 years of War on Poverty at the capitol in Sacramento.

### **Strengths Finder Training**

Darick Simpson, Executive Director of CAP Long Beach, conducted a Strengths Finder training in July. All EOC members were invited to participate in the training along with EHSD staff members.

### **Proclamation by the Board of Supervisors**

On May 7, CSB received a proclamation from the Board of Supervisors declaring May as Community Action month.

# Community Services Block Grant (CSBG) Funded Programs

## Community Action Partnership

The Community Action Partnership is a national, non-profit organization that works to strengthen, promote, represent, and serve its network of member Community Action Agencies (CAAs) to assure that the issues of poverty are effectively identified and addressed. Since their inception as part of the Economic Opportunity Act of 1964, CAAs have helped low-income Americans escape poverty and achieve economic security. Through programs such as Head Start, job training, housing, food banks, energy assistance, and financial education, CAAs tailor their services to meet the needs of the individuals and communities they serve. They put a human face on poverty, advocate for those who don't have a voice, and provide opportunities to receive an education, acquire essential services, or find employment. EHSD's CSB is the Community Action Agency for Contra Costa County.



## Clerical Assistant Trainee (CAT) Program

The Community Services Block Grant funds supported the professional growth and development of **25** low income individuals while they continued to work on their educational goals. Trainees were placed throughout the Bureau's administrative offices and child care centers to receive on-the-job vocational experiences, guidance, and mentorship. Trainees received specialized instruction in office practices and procedures, technical skills, and interpersonal skills to develop effective workplace habits that will lead to future employment opportunities.

## CSBG Subcontractors in 2014

As CSBG subcontractors, the following organizations received CSBG funding to address community needs and provide program participants with increased access to the following services:

- Bay Area Legal Aid – legal services to underserved populations
- Opportunity Junction – employment services
- Contra Costa Clubhouses – mental health services
- RYSE Youth Center – juvenile justice services
- Korean Community Center of the East Bay – healthcare services
- Loaves and Fishes – nutritional services

# Program Highlights: Early Childhood Education

## School Readiness Program Enhancements

Kindergarten readiness is supported by site-based activities, including visits from area kindergarten teachers, student field trips to local kindergarten classes, and visiting the experts – children who are currently enrolled in kindergarten. Staff are trained in the “Roadmap to Kindergarten,” an interactive process to prepare parents and their children for transition to kindergarten.

In November 2014, CSB received a grant for \$8,908 from the organization, Reading is Fundamental. Books were purchased for all infants, toddlers, and preschool children, and will be distributed at two special events in 2015.

The Quality Rating and Improvement System (QRIS) is a method to communicate indicators of quality to both parents and providers, and a system of assessing and supporting those indicators of quality. The QRIS is built on the California Race to the Top-Early Learning Challenge (RTT-ELC) framework, which includes the following indicators: a) child observation, b) child health and developmental screening, c) center lead teacher and center director levels of education, d) teacher-child ratio and group size, e) quality of environment, and f) classroom interactions. The incentives include site-based stipends, professional development opportunities, and an improvement plan based on self-assessments. All fifteen CSB childcare centers participate in QRIS.





## 2014 Classroom Assessment Scoring System Results

CSB staff continued to receive trainings in the Classroom Assessment Scoring System (CLASS), an observation tool that focuses on the effectiveness of classroom interactions among teachers and children. CLASS fosters interactions that promote a child's social, emotional, and cognitive development. Children thrive when teachers create nurturing, well-managed settings that provide frequent and engaging opportunities to learn. One of the CLASS goals is to help teachers learn how to interact more effectively with their students to provide higher level thinking and language skills.

Countywide Total Average Domain Score CSB Directly Operated and Partner Sites			
Domain	2014 Scores	2014 CSB Threshold	2014 Federal Threshold
Emotional Support	6.14	6	4
Classroom Organization	5.61	6	3
Instructional Support	3.22	3	2

## 2014 Desired Results Developmental Profile, Preschool

CSB uses the California Department of Education's assessment tool, the Desired Result Developmental Profile (DRDP), to assess the developmental progress of preschoolers three times per program year.

Figure 1a shows the mean scores by domain using the bolded abbreviations highlighted in the descriptions below for the Grantee in the 2013-14 program year. Children showed progress in all areas between assessments 1 and 3 as follows, with the highest scores in PD (4.58):

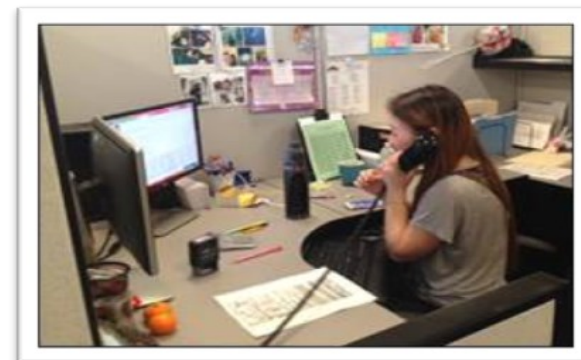
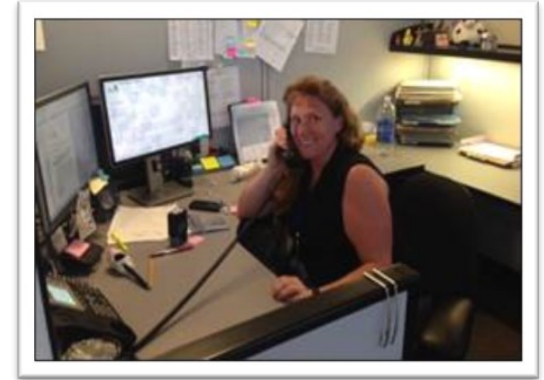
- Cognitive Development (COG) +30.86%;
- English Language Development (ELD) +27.22%;
- Health (HLTH) +27.38%;
- Language and Literacy Development (LLD) +33.12%;
- Math (MATH) +35.83%;
- Physical Development (PD) +21.49%;
- Self and Social Development (SSD) +33.13%

This pattern is consistent with 2013 Assessment 3 scores (Fig. 1b). Overall, children are performing within 0.13 points of the 2013 Assessment 3 scores in all areas.

## Low-Income Home Energy Assistance and Weatherization Programs

The Low-Income Home Energy Assistance Program (LIHEAP) is a federally-funded program that assists low-income households with their heating and cooling needs, while also protecting the health and safety of families in the household. Priority for funding and services is given to households with the highest energy burden, while also taking into consideration vulnerable populations, such as the elderly, disabled, or families with young children. In total, **5,599** households were funded by the program in 2014. Of these households, **2,938** had their energy services reinstated or avoided their services being disconnected.

The Weatherization Program is designed to improve energy efficiency of households, resulting in reduced energy usage and cost. Weatherization measures may include, but are not limited to, weather-stripping, insulation, caulking, water heater blankets, refrigerator replacement, heating and cooling repairs, and thermostat replacements. In 2014, CSB's weatherization program was able to service **289** residential units.



# Alternative Payment Programs

The CalWORKs Stage II Child Care Program (Stage II) and the Child Care Alternative Payment Program (CAPP) are designed to maximize parental choice in selecting child care alternatives that meet the needs of the child and family.

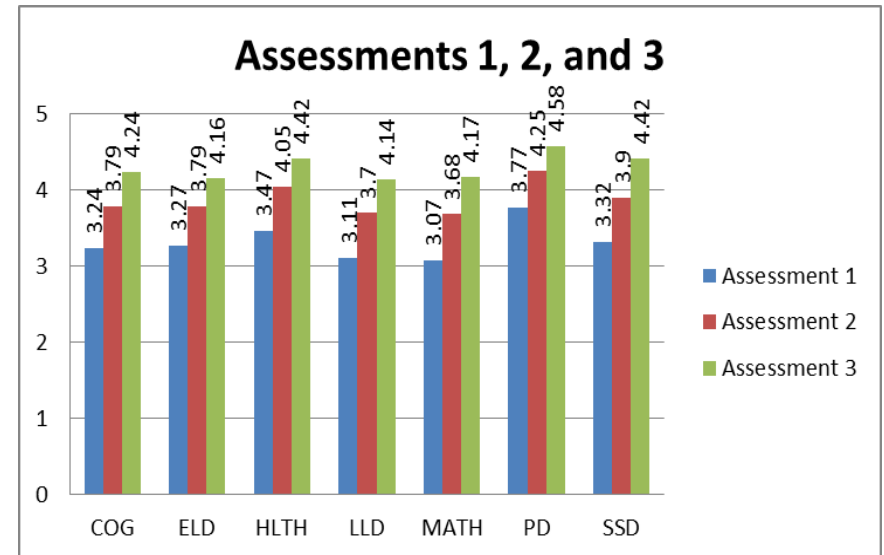
Parents can select licensed child care centers, licensed family child care homes, license-exempt, or in-



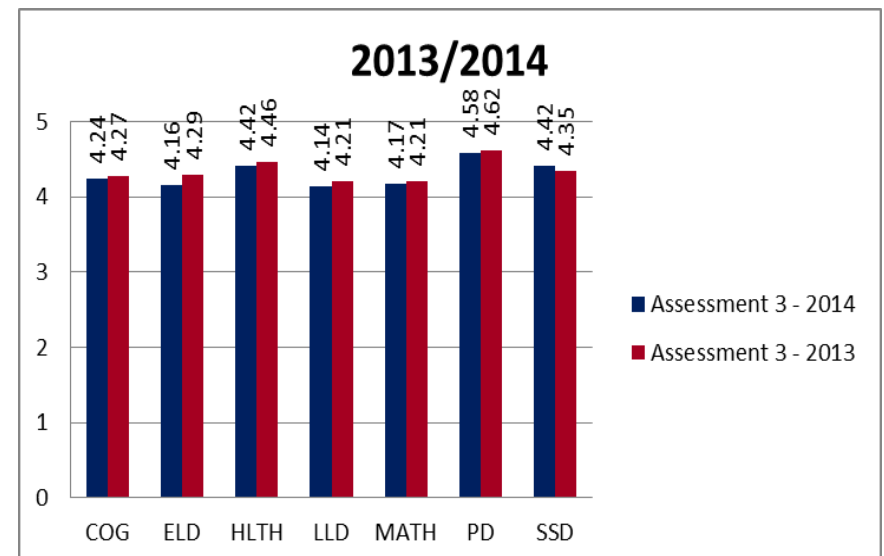
home providers. The age limit for child care provided through these programs is 0–12 years of age (with the age limit subject to extension under certain limited circumstances). Stage II is limited to parents who are in receipt of, or have received CalWORKs cash assistance, within the past 24 months. Alternatively, CAPP primarily assists families that have been referred by Children & Family Services. CSB served approximately **800** families and over **1,060** children, with a combined funding of \$4,384,428 for Stage II and CAPP.



**Figure 1a: Mean Scores by Domain for All Preschool Children - Assessment 3, 2014**



**Figure 1a: Mean Scores by Domain for All Preschool Children - Assessment 3, 2013/2014**



## 2014 Desired Results Developmental Profile, Infants and Toddlers

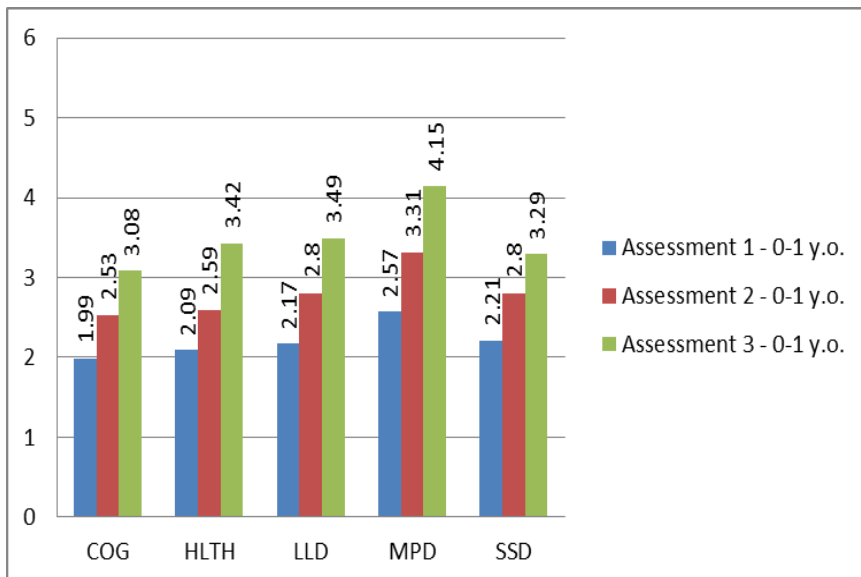
CSB uses the California Department of Education's assessment tool, the Desired Result Developmental Profile – Infant and Toddlers (DRDP-IT), to assess the developmental progress of infants and toddlers three times per program year.

Figures 1a, 1b, and 1c show the mean scores, by thematic area, by age for assessments 1, 2, and 3. Children in all age groups scored highest in Motor and Perceptual Development (MPD). The greatest areas of growth from assessments 1 to 3 are as follows:

- HLTH 63.64% (0-1 y.o.);
- COG 27.55% (1-2 y.o.);
- HLTH 26.17% (2-3 y.o.).



Figure 1a: Mean Scores by Domain by Age 0-1



## Health Services

CSB works to ensure that all children enrolled in the various programs receive high quality health care services. 100% of children received:



- Ongoing access to medical and dental services - **100%** of children obtained access to high quality services through a medical and dental home.
- Vision screenings of children Ages 3-5 – **100%** of children received vision screenings. **736** vision screenings were completed by the California Hawaii ELKS Vision Collaboration and CSB's Certified Vision Screeners with glasses obtained for anyone identified as *in need*.
- Hearing screenings of children Ages 3-5 - **100%** of children received screenings through their medical provider or CSB's Certified Audiometric Screeners with follow up provided to anyone identified as *in need*.
- Oral health education of children Ages 0-5 – **100%** of children received a toothbrush and oral health education at their initial home visit.
- Dental exams - free dental exams, fluoride varnish applications, and dental kits provided to **765** children. Free dental treatment provided to **48** children through the National-Give-Kids-a Smile-Day event.
- Collaborations - involving CSB, the Contra Costa Dental Society, the Children's Oral Health Program, the Loma Vista Dental Program, and local volunteer dentists to foster healthy oral health behaviors.



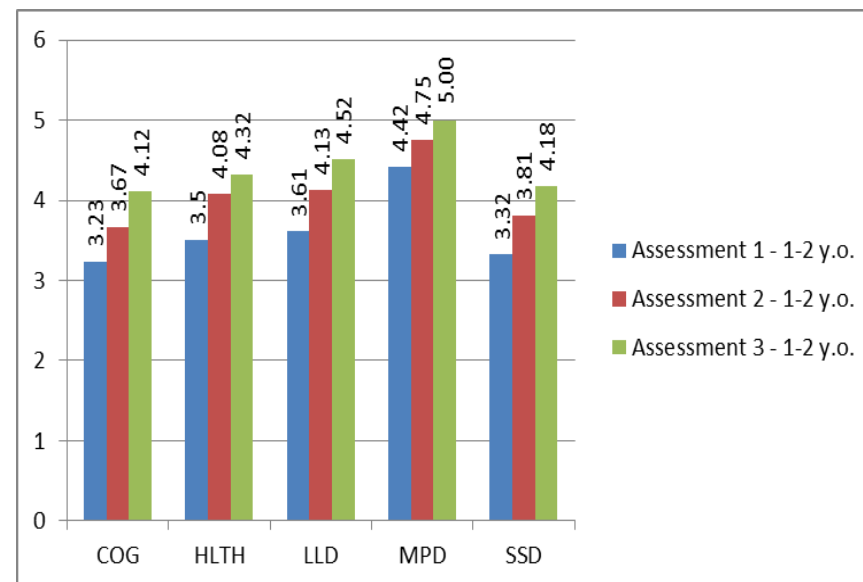


Nutrition highlights included:

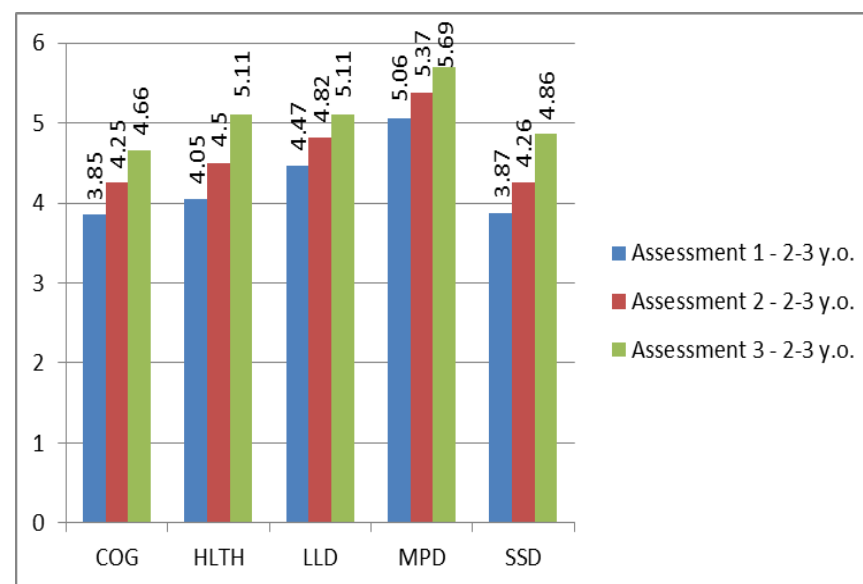
- Sugar Reduction and Early Onset Diabetes Prevention - “Rethink Your Drink”, a traveling display that helps children and parents learn about sugar content in typical drinks, such as sodas and fruit juices.
- “Contra Costa Health Services Fresh Approach” - nutrition-oriented, educational workshops to CSB families. Topics included *Healthy Eating on a Budget*, *Keeping Fit, Keeping Healthy*, and *My Plate*. County nutritionists contributed newsletter articles, such as *Extra Layers for Winter* and *Healthy Snacks for Your Children’s Teeth* to CSB’s parent newsletter. Educational resources were shared with families throughout the year in relevant subject areas ranging from *Get Your Kids Outside Every Day!* to *Use Your Card – It’s Easy to Get Fresh*, to *Healthy Food from Your Local Farmer’s Market Using Your EBT Card!*
- Smart Shopping Decisions — nutritionist-guided grocery store tours were held where 52 parents learned how to compare unit prices, identify whole grain foods, recognize three ways to purchase produce, and read and compare nutrition labels.
- *Celebrating Food Day* — CSB partnered with the Food Bank to bring fresh produce to our families. First 5 invited ten CSB staff to participate in a *Movement via Mindfulness Training* in March. The purpose was to learn how to instill healthy physical activity habits in children and help them learn self-regulation skills.
- UC Cooperative Extension - trained all home base educators using their 10-lesson Expanded Food and Nutrition Education Program (EFNEP).



**Figure 1b: Mean Scores by Domain by Age 1-2**



**Figure 1c: Mean Scores by Domain by Age 2-3**



# Program Information Report

Each year, CSB is required to submit a Program Information Report (PIR) to the Office of Head Start (OHS). The PIR survey measures how well programs are doing in relation to OHS's rules and regulations that govern the program and are referred to as Performance Standards. OHS compiles these reports regionally and nationally, subsequently sharing these ratings with Congress to inform them of their Head Start and Early Head Start decision making processes.

The chart below, separated for Head Start and Early Head Start, with the exception of Disability Services, confirms that CSB performed at or above the national average for most key indicators. The exception was health insurance for HS families, which was slightly lower than the national average. The exception is believed to be due to the high percentage of undocumented families in the county who are not eligible for health coverage.



Performance Indicators	National 2013-2014	CSB 2013-2014*
Health Insurance	HS-93.9% EHS-94.7%	HS-1739/1858=93% EHS-338/338=100%
Medical Home	HS- 93.1% EHS-94%	HS-1858/1858=100% EHS-338/338=100%
Immunizations Up to Date, Possible or Exempt	HS-94.9% EHS-90%	HS-1858/1858=100% EHS-338/338=100%
Dental Home	HS-83.6% EHS-66.9%	HS-1858/1858=100% EHS-338/338=100%
Disabilities Services – Mandate is 10%	ALL-12%	ALL-12%

\* Data does not include children enrolled for less than 45 days.

- Response to Intervention (RTI) is an approach to identify children with potential delays and provide services in a three-tiered approach:
  - \* Tier I - All **260** children at GMIII received instruction in language and literacy skills
  - \* Tier II - **40** children received small group instruction to support literacy and language skills
  - \* Tier III - **35** children received small group intervention instruction to support their Individualized Education Plan (IEP) goals
  - \* Over **300** children participated in RTI enhancement activities and referral support collaboration between CSB and WCCUSD

## Nutrition

CSB offers a comprehensive system of nutritional services for children and families. Recognizing that eating habits are formed in early childhood, nutrition services include:

- Serving well-balanced and nutritious meals;
- Nutritional screening and assessment;
- Individual nutrition counseling by a registered dietitian;
- Nutrition education;
- Integrated nutrition curriculum;
- Community collaborations





## Disabilities

CSB collaborated with seven Contra Costa school districts to increase services to children with disabilities in 2014.



Among the disability-focused program highlights, of the **2,477** children enrolled in CSB's HS and EHS centers during the past year, **256** were diagnosed with disabilities that are summarized below:

- Speech/language delays (72%)
- No categorical development delays (16%)
- Autism (7%)
- Other disabilities (5%)

Critical to CSB's success in addressing children with disabilities, the following early education and care services were provided through the following partnerships:

- Cameron Early Head Start Learning for Infants and Toddlers Together- **22** children
- Cameron Special Day Class at Balboa Center- **13** children
- Cameron Special Day Class at George Miller III - **5** children
- West Contra Costa Unified School District (WCCUSD) Full Inclusion Program at Brookside- **10** children

## *Parent, Family & Community Engagement*

Parent, family, and community engagement is about building relationships with families that support family well-being, strengthening relationships between parents and their children, and providing ongoing learning and development for both parents and children. The following page includes highlights for 2014.



Parent, Family, and Community Engagement 2014 Highlights		
<b>Male Empowerment Workshops</b> 71 participants learned about male involvement in their children's lives	<b>Financial Literacy Workshops</b> Wells Fargo worked with 100 parents on credit counseling, budgeting, savings, and money management skills	<b>Facilitative Leadership Training</b> 12 parents enhanced their leadership and facilitation skills as Policy Council representatives
<b>Policy Council Orientation</b> 33 parent representatives received instruction in Policy Council governance, roles, and responsibilities	<b>BOS/PC/EOC</b> 60 parents received training in Joint Governance that included interacting with members of the CCC Board of Supervisors	<b>Head Start Annual Parent Conference</b> PC Executive Committee members attended a conference in New Orleans to celebrate the 50th anniversary of Head Start
<b>CA Head Start Parent and Family Engagement and Education Conference</b> PC Chair and CSB's Education Team attended a conference in Los Angeles	<b>Head Start Conference Award</b> PC Chair, Veronica Covarrubias, was selected to receive the <b>2014 Parent of the Year Award</b>	<b>Strengths Finder Training</b> PC Executive Committee and EOC members received training to identify and utilize their top 5 strengths personally and professionally
<b>1,823 Volunteers Logged 25,125 Hours</b> Volunteers assisted in classrooms, on field trips, and as subject matter experts	<b>CSB Staff Recognized</b> 19 staff members were nominated by parents to receive recognition for their activities	<b>Quarterly Newsletters</b> Parents of HS and EHS students received program newsletters at all directly-operated and partner sites on health and nutrition
<b>Reading Advantage-Early Literacy (RA-EL)</b> 193 parents from directly-operated and partner sites participated in workshops and received free books for their children's home library	<b>Work Investment Network (WIN) Continues to Grow</b> WIN members worked with CSB to increase employment and training opportunities for CSB families	<b>Weekend Beautification Project</b> Parents participated in a community work day at CBS-operated centers
Directly Operated Sites – Operated by CSB Partner Sites – Sites contracting with CSB to provide HS, EHS, and other services		

## Comprehensive Services

Comprehensive Services (CS) is a team approach to ensure the success of all children enrolled in Head Start and Early Head Start by addressing those who may have special needs. By applying an early diagnosis and intervention strategy, CS makes resources and services available to families and children through a combination of ongoing staff observations, workshops to increase knowledge, and counselling or other services where needed. Areas in which services are focused include disabilities, early childhood education, health services, mental health, nutrition, and social skills with trainings provided to staff and parents.

### Mental Health (MH)

The MH unit supported children, families, and staff by processing a total of **102** referrals over the past year. Of these children, **60%** received direct service support through "Play Therapy" intervention, which involves using toys and sand trays to express hidden feelings and emotions, which can then be identified and referred for treatment. This is a needs-based Medi-Cal funded service and children who did not qualify for support were referred to other community agencies or received resources and strategies to manage the emotional needs of the child.

Staff and parents were provided training in the following areas:

- Child abuse prevention and awareness;
- Filial (child-parent) relationship therapy;
- *Habits of Healthy People* seminar;
- Strategies to address challenging behaviors;
- Children's mental health awareness;
- Stress management



## 2016-2017 CSBG/NPI CAP Projections

Contractor Name:	<u>Contra Costa County, Employment and Human Services Department/CSB</u>		
Contact Person and Title:	<u>Tom Stewart, ASA III</u>		
Phone Number:	<u>925-681-6347</u>	Ext. Number:	<u></u>
E-mail Address:	<u><a href="mailto:tstewart1@ehsd.cccounty.us">tstewart1@ehsd.cccounty.us</a></u>	Fax Number:	<u>925-313-8302</u>

***Goal 1: Low-income people become more self-sufficient.***

### **NPI 1.1: Employment**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

In 2014, Contra Costa County's economy showed growth; however, low-income families continue to struggle to achieve livable wages given the particularly high cost of living in Contra County. CSBG eligible families participating in CAP's program are among the most economically vulnerable in the region and often have many barriers hampering their ability to obtain employment due to challenges and barriers related to limited English proficiency, immigration issues, high cost of child care or limited child care resources, lack of affordable housing, adults timing out of CalWORKs, lack of transportation, limited skills/experience and education, substance abuse, cultural barriers and criminal convictions and some are faced with homelessness. Preliminary data from the most recent

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

Contra Costa CAP will be taking a closer look at its current role in administering employment services to CSBG eligible families and will continue to evaluate the outcomes of providing longer and more intensive case management services with additional employment supports. CAP has good working relationships with the local Onestop Career Centers and Welfare-to-Work contracted organizations, which they will continue to strengthen in an effort to support low-income individuals and families striving for self-sufficiency. As additional resources come to the region through the Workforce Investment Act (WIA) funding and new CalWORKs supportive services, Contra Costa CAP will continue to work with its community partners to determine how it can best support the goal of supporting low-income families on their journey to self-sufficiency.

<b>National Performance <u>Indicator 1.1</u></b>		<b>CAP 2 YEAR PROJECTIONS</b>	
		<b>Number of Participants Expected to Achieve Outcome</b>	
<b>Employment</b>			
The number and percentage of low-income participants who get a job or become self-employed, as a result of Community Action Assistance, as measured by one or more of the following:			
		<b>2016</b>	<b>2017</b>
<b>A.</b> Unemployed and obtained a job		425	450
<b>B.</b> Employed and maintained a job for a least 90 days		375	400
<b>C.</b> Employed and obtained an increase in employment income <b>and/or</b> benefits		45	50
<b>D.</b> Achieved "living wage" employment and/or benefits		25	30

*In the rows below, please include any additional indicators for NPI 1.1 that were not captured above.*

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## 2016-2017 CSBG/NPI CAP Projections

**Goal 1: Low-income people become more self-sufficient.**

### **NPI 1.2: Employment Supports**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

The high cost of living in the Bay Area requires single and married parents to work full-time, leading to an increased demand for full day early childhood education and child care for children ages birth to five so that parents can go to work or school. Even if child care is available, parents still must have the education, training and skills to obtain employment that will meet their living expenses.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

Families enrolled in EHSD CSB child care programs have the opportunity to pursue training and education as part of family supports of Head Start/Early Head Start, State Preschool, and CalWORKS Stage 2 AP program. These supports include access to health care, dental care, mental health early intervention and referrals. CSB's on-the-job training program fosters work experience while participants continue education to reach professional or vocational goals. Program participants may gain experience in many different track such as: food services, building services, clerical and early childhood education. The participants will work approximately 24 hours per week and be enrolled in a community college or vocational training program related to their track. The families also enrol in the programs provided by One Stop Consortium and our community partners.

<b>National Performance Indicator 1.2</b>  <b>Employment Supports</b>  The number of low-income participants for whom barriers to initial or continuous employment are reduced or eliminated through assistance from Community Action, as measured by <u>one or more</u> of the following:		<b>CAP 2 YEAR PROJECTIONS</b>  <b>Number of Participants Expected to Achieve Outcome</b> <small>(#)</small>	
		2016	2017
A. Obtained skills/competencies required for employment		725	775
B. Completed ABE/GED and received certificate or diploma			
C. Completed post-secondary education program and obtained certificate or diploma			
D. Enrolled children in "before" or "after" school programs			
E. Obtained care for child or other dependant		3,300	3,500
F. Obtained access to reliable transportation and/or driver's license			
G. Obtained health care services for themselves or a family member		20,000	20,000
H. Obtained safe and affordable housing			
I. Obtained food assistance			
J. Obtained non-emergency LIHEAP energy assistance		2,000	2,000
K. Obtained non-emergency WX energy assistance		400	400
L. Obtained other non-emergency energy assistance (State/local/private energy programs. Do Not Include LIHEAP or WX)			
In the rows below, please include any additional indicators for NPI 1.1 that were not captured above.			

## **2016-2017 CSBG/NPI CAP Projections**

***Goal 1: Low-income people become more self-sufficient.***

***NPI 1.3: Economic Asset Enhancement and Utilization***

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Many low-income working families fail to claim tax credits to which they are entitled. Those credits, if claimed, increase the self-sufficiency of families by lessening tax burdens or increasing the size of tax refunds. Additionally these families have not had access to financial literacy education and asset development strategies. Additionally with the availability of California State Earned Income Tax credit many more families will benefit and become more self-sufficient

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

CSB participates in Contra Costa County's private and public collaborative Family Economic Security Partnership (FESP) and Ensuring Opportunity with the United Way, First 5 Contra Costa and other community based organizations. This provides free tax preparation services through VITA (Voluntary Income Tax Assistance) at various locations throughout the county. CSB will continue to raise awareness about the EITC opportunity.

<b>National Performance</b> <b><u>Indicator 1.3</u></b> <b>Economic Asset Enhancement and Utilization</b> The number and percentage of low-income households that achieve an increase in financial assets and/or financial skills as a result of Community Action assistance, and the aggregated amount of those assets and resources for all participants achieving the outcome, as measured by <u>one or more</u> of the following:		<b>CAP 2 YEAR PROJECTIONS</b> <b>Number of Participants Expected to Achieve Outcome</b>	
		2016	2017
<b>ENHANCEMENT</b>			
<b>A.</b> Number and percent of participants in tax preparation programs who qualified for any type of Federal or State tax credit and the expected aggregated dollar amount of credits.		28,000	29,500
<b>B.</b> Number and percent of participants who obtained court-ordered child support payments and the expected annual aggregated dollar amount of payments.			
<b>C.</b> Number and percent of participants who were enrolled in telephone lifeline and/or energy discounts with the assistance of the agency and the expected aggregated dollar amount of savings.			
<b>UTILIZATION</b>			
<b>D.</b> Number and percent of participants demonstrating ability to complete and maintain a budget for over 90 days			
<b>E.</b> Number and percent of participants opening an Individual Development Account (IDA) or other savings account			
<b>F.</b> Number and percent of participants who increased their savings through IDA or other savings accounts and the aggregated amount of savings			
<b>G.</b> Number and percent of participants capitalizing a small business due to accumulated savings			
<b>H.</b> Number and percent of participants pursuing post-secondary education with accumulated savings			
<b>I.</b> Number and percent of participants purchasing a home with accumulated savings			
<b>J.</b> Number and percent of participants purchasing other assets with accumulated savings			
<i>In the rows below, please include any additional indicators for NPI 1.3 that were not captured above.</i>			

## 2016-2017 CSBG/NPI CAP Projections

Contractor Name: Contra Costa County, Employment and Human Services Department/CSB  
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 Phone Number: 925-681-6347 Ext. Number: \_\_\_\_\_  
 E-mail Address: tstewart1@ehsd.cccounty.us Fax Number: \_\_\_\_\_

***Goal 2: The conditions in which low-income people live are improved.***

**NPI 2.1: Community Improvement and Revitalization**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Many communities in the County lack sufficient resources and opportunities in their respective neighborhoods to generate community improvement and revitalization. As a result the quality of life for the residents of these communities is negatively impacted. The opportunities to improve their economic and social condition remain elusive. Working with CBOs and local City and County officials to focus on the living condition in certain neighborhoods will improve their living conditions.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

EHSD/CSB directly offers Head Start, Early Head Start, State Child Development, and school readiness activities to more than 2,000 children from low-income families as defined by the federal poverty guidelines each year. EHSD/CSB will also continue to work with the county Building Inspection Department, Ensuring Opportunity, and other partners to preserve and improve the community, create or save jobs from reduction or elimination. Also, the retention of CSB's Assistant Trainee program will also assist with the negative impact felt among communities.

<b>National Performance Indicator 2.1</b>  <b>Community Improvement and Revitalization</b>  Increase in, or safeguarding of, threatened opportunities and community resources or services for low-income people in the community as a result of Community Action projects/initiatives or advocacy with other public and private agencies, as measured by <u>one or more</u> of the following:	<b>CAP 2 YEAR PROJECTIONS</b>			
	<b>Number of Projects or Initiatives Expected to Achieve (#)</b>		<b>Number of Opportunities or Community Resources Preserved or Increased Expected to Achieve (#)</b>	
	<b>2016</b>	<b>2017</b>	<b>2016</b>	<b>2017</b>
<b>A.</b> Jobs created, or saved, from reduction or elimination in the community.	125	130	250	300
<b>B.</b> Accessible "living wage" jobs created, or saved, from reduction or elimination in the community.				
<b>C.</b> Safe and affordable housing units created in the community				
<b>D.</b> Safe and affordable housing units in the community preserved or improved through construction, weatherization, or rehabilitation achieved by community action activity or advocacy	15	20	15	20
<b>E.</b> Accessible and affordable health care services/facilities for low-income people created or saved from reduction or elimination				
<b>F.</b> Accessible safe and affordable child care or child development placement opportunities for low-income families created or saved from reduction or	15	18	15	18
<b>G.</b> Accessible "before school" and "after school" program placement opportunities for low-income families created or saved from reduction or elimination				
<b>H.</b> Accessible new or expanded transportation resources, or those that are saved from reduction or elimination, that are available to low-income people, including public or private transportation.				
<b>I.</b> Accessible or increased educational and training placement opportunities, or those that are saved from reduction or elimination, that are available for low-income people in the community, including vocational, literacy, and life skill training, ABE/GED, and post-secondary education	20	30	40	60

*In the rows below, please include any additional indicators for NPI 2.1 that were not captured above.*

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## **2016-2017 CSBG/NPI CAP Projections**

***Goal 2: The conditions in which low-income people live are improved.***

**NPI 2.2: Community Quality of Life and Assets**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

The demand for quality and safe community facilities is a consistent issue within the County. In many areas, buildings are available for rehabilitation/renovation but these facilities typically remain in poor condition, dilapidated and unavailable for use.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

EHSD/CSB will continue to help the community at large, fund, renovate or secure additional child care facilities to program eligible families, as well as increase the number of community facilities available to the public. In addition, EHSD/CSB will continue the support of the Spark Point Centers in East and West Contra Costa County as a way to increase neighborhood quality of life resources. The Spark Point Centers will operate in existing buildings that require either general repairs or significant renovation.

<b>National Performance Indicator 2.2</b>  <b>Community Quality of Life and Assets</b>  The quality of life and assets in low-income neighborhoods are improved by Community Action initiative or advocacy, as measured by <u>one or more</u> of the following:	<b>CAP 2 YEAR PROJECTIONS</b>			
	<b>Number of Program Initiatives or Advocacy Efforts Expected to Achieve (#)</b>		<b>Number of Community Assets, Services or Facilities Preserved or Increased Expected to Achieve (#)</b>	
	<b>2016</b>	<b>2017</b>	<b>2016</b>	<b>2017</b>
<b>A.</b> Increases in community assets as a result of a change in law, regulation, or policy, which results in improvements in quality of life and assets				
<b>B.</b> Increase in the availability or preservation of community facilities	1	2	1	2
<b>C.</b> Increase in the availability or preservation of community services to improve public health and safety				
<b>D.</b> Increase in the availability or preservation of commercial services within low-income neighborhoods				
<b>E.</b> Increase or preservation of neighborhood quality-of-life resources	15	18	15	18

*In the rows below, please include any additional indicators for NPI 2.2 that were not captured above.*

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## 2016-2017 CSBG/NPI CAP Projections

**Goal 2: The conditions in which low-income people live are improved.**

### **NPI 2.3: Community Engagement**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Low income residents of the community often have limited opportunities to volunteer and have access to decision making bodies and advisory bodies that impact their lives.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

EHSD/CSB will provide low income residents of Contra Costa County volunteer opportunities to ensure that they are engaged and have access to decision making/advisory bodies such as Head Start/Early Head Start Policy Council, child care site based parent committees, and the Economic Opportunity Council. Low income residents will have the opportunity to serve as positive role models for children enrolled in Contra Costa County Employment and Human Services, Community Services Bureau.

National Performance <u>Indicator 2.3</u>		CAP 2 YEAR PROJECTIONS	
Community Engagement		Number of Total Contribution by Community Expected to Achieve (#)	
The number of community members working with Community Action to improve conditions in the community.		2016	2017
A. Number of community members mobilized by Community Action that participate in community revitalization and anti-poverty initiatives		55	60
B. Number of volunteer hours donated to the agency (This will be All volunteer hours)		85000	90000
In the rows below, please include any additional indicators for NPI 2.3 that were not captured above.			

## **2016-2017 CSBG/NPI CAP Projections**

Contractor Name:	Contra Costa County, Employment and Human Services Department/CSB		
Contact Person and Title:	Tom Stewart, ASA III		
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E-mail Address:	tstewart1@ehsd.cccounty.us	Fax Number:	925-313-8302

***Goal 3: Low-income people own a stake in their community.***

### **NPI 3.1: Community Enhancement Through Maximum Feasible Participation**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

A root cause of poverty and its perpetuation is the lack of participation by low income residents in community organizations, boards, and councils that impact their lives. Low income participation is essential for these bodies to be effective for the low-income communities that they serve.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

Most parent volunteers within Community Services Bureau come from low income backgrounds. Low-income residents will have opportunity to volunteer and provide valuable support to community action agency programs such as Early Head Start/Head Start classrooms, parent meetings, Policy Council, , Economic Opportunity Council, and Child Development program.

<b>National Performance Indicator 3.1</b>  <b>Community Enhancement Through Maximum Feasible Participation</b>  The number of volunteer hours donated to Community Action.		<b>CAP 2 YEAR PROJECTIONS</b>  <b>Total Number of Volunteer Hours Expected to Achieve (#)</b>	
		2016	2017
<b>A.</b> The total number of volunteer hours donated by low-income individuals to Community Action. (This is ONLY the number of volunteer hours from individuals who are low-income.)		82,000	87,500
<i>In the rows below, please include any additional indicators for NPI 3.1 that were not captured above.</i>			

## **2016-2017 CSBG/NPI CAP Projections**

**Goal 3: Low-income people own a stake in their community.**

### **NPI 3.2: Community Empowerment Through Maximum Feasible Participation**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

A root cause of poverty and its perpetuation is the lack of participation by low income residents in community organizations, boards, and councils that impact their lives. Low income participation is essential for these bodies to be effective for the low-income communities that they serve.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

Low-income residents will have opportunity to volunteer and provide valuable support to community action agency programs such as Early Head Start/Head Start classrooms, parent meetings, Policy Council, , Economic Opportunity Council, and Child Development programs.

<b>National Performance</b> <b><u>Indicator 3.2</u></b> <b>Community Empowerment Through Maximum Feasible Participation</b>		<b>CAP 2 YEAR PROJECTIONS</b> <b>Number of Low-Income People Expected to Achieve (#)</b>	
The number of low-income people mobilized as a direct result of Community Action initiative to engage in activities that support and promote their own well-being and that of their community, as measured by <u>one or more</u> of the following:		2016	2017
<b>A.</b> Number of low-income people participating in formal community organizations, government, boards, or councils that provide input to decision making and policy setting through Community Action efforts		60	60
<b>B.</b> Number of low-income people acquiring businesses in their community as a result of Community Action assistance			
<b>C.</b> Number of low-income people purchasing their own home in their community as a result of Community Action assistance			
<b>D.</b> Number of low-income people engaged in non-governance community activities or groups created or supported by Community Action			
<i>In the rows below, please include any additional indicators for NPI 3.2 that were not captured above.</i>			

## 2016-2017 CSBG/NPI CAP Projections

Contractor Name:	Contra Costa County, Employment and Human Services Department/CSB		
Contact Person and Title:	Tom Stewart, ASA III		
Phone Number:	925-681-6347	Ext. Number	
E-mail Address:	tstewart1@ehsd.cccounty.us	Fax Number:	925-313-8302

***Goal 4: Partnerships among supporters and providers of services to low-income people are achieved.***

**NPI 4.1: Expanding Opportunities through Community-Wide Partnerships**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

In a geographically and ethnically diverse County, matching and leveraging increasingly stretched community based resources to the diverse needs of a population can be challenging. Community based organization and governmental institutions frequently operate in silos, increasing the risk of duplicating services or leaving service gaps unaddressed.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

EHSD/CSB is organized internally to support collaborative relationships between the other community based providers and the citizens of the County. CSB has valuable partnerships with Opportunity Junction, First 5, Health Services Department, Ensuring Opportunity, and more than 100 non-profit community based, faith based and governmental organizations.

<b>National Performance Indicator 4.1</b>  <b>Expanding Opportunities Through Community-Wide Partnerships</b>  The number of organizations, both public and private, Community Action actively works with to expand resources and opportunities in order to achieve family and community outcomes.	<b>CAP 2 YEAR PROJECTIONS</b>			
	<b>Number of Organizations Expected to Achieve (#)</b>		<b>Number of Partnerships Expected to Achieve (#)</b>	
	2016	2017	2016	2017
<b>A. Non-Profit</b>	100	110	100	110
<b>B. Faith Based</b>	10	12	10	12
<b>C. Local Government</b>	1	1	1	1
<b>D. State Government</b>	1	1	1	1
<b>E. Federal Government</b>	1	1	1	1
<b>F. For-Profit Business or Corporation</b>				
<b>G. Consortiums/Collaboration</b>	6	7	6	7
<b>H. Housing Consortiums/Collaboration</b>				
<b>I. School Districts</b>	5	5	5	5
<b>J. Institutions of post secondary education/training</b>				
<b>K. Financial/Banking Institutions</b>	1	2	1	2
<b>L. Health Service Institutions</b>	3	4	3	4
<b>M. State wide associations or collaborations</b>	3	3	3	3

## 2016-2017 CSBG/NPI CAP Projections

*In the rows below, please add other types of partners with which your CAA has formed relationships that were not*

<b>N. Total number of organizations and total number of partnerships CAAs work with to promote family and community outcomes (automatically calculates)</b>	<b>131</b>	<b>146</b>	<b>131</b>	<b>146</b>

## 2016-2017 CSBG/NPI CAP Projections

Contractor Name:	Contra Costa County, Employment and Human Services Department/CSB		
Contact Person and Title:	Tom Stewart, ASA III		
Phone Number:	925-681-6347	Ext. Number:	
E-mail Address:	tstewart1@ehsd.cccounty.us	Fax Number:	925-313-8302

### *Goal 5: Agencies increase their capacity to achieve results.*

#### **NPI 5.1: Agency Development**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Agency staff require professional development, training, and technical assistance to perform at optimal levels. No Staff and Board Members to be ROMA Certified

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

The EHSD Community Services Bureau has a highly developed professional development program that increases agency capacity by contributing to the expertise and productivity of staff. CSB has access to the EHSD training unit for general training and maintains contractual relationships with a number of local colleges and universities to provide content specific training to staff. There is also an annual orientation for members of the Board of Supervisors and the Head Start Policy Council and the Economic Opportunity Council. Additionally there is an annual two hour training for the Board of Supervisors, the Policy Council and the Economic Opportunity Council each spring. The agency also sends representatives to trainings and conferences throughout the year. Each EOC General meeting and Executive team meeting also have a training component. Plan to get some staff & board members ROMA certified

<b>National Performance Indicator 5.1</b>  <b>Agency Development</b>  The number of human capital resources available to Community Action that increase agency capacity to achieve family and community outcomes, as measured by one or more of the following:		<b>CAP 2 YEAR PROJECTIONS</b>  <b>Number of Resources in Agency Expected to Achieve (#)</b>	
		2016	2017
<b>A.</b> Number of Certified Community Action Professionals		1	1
<b>B.</b> Number of ROMA Trainers		2	2
<b>C.</b> Number of Family Development Trainers		3	3
<b>D.</b> Number of Child Development Trainers		3	3
<b>E.</b> Number of staff attending trainings		350	375
<b>F.</b> Number of board members attending trainings		55	55
<b>G.</b> Hours of staff in trainings		5,800	6,000
<b>H.</b> Hours of board members in trainings		250	250

*In the rows below, please include any additional indicators that were not captured above.*

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## 2016-2017 CSBG/NPI CAP Projections

Contractor Name: Contra Costa County, Employment and Human Services Department/CSB  
 Contact Person and Title: Tom Stewart, ASA III  
 Phone Number: 925-681-6347 Ext. Number: \_\_\_\_\_  
 E-mail Address: tstewart1@ehsd.cccounty.us Fax Number: 925-313-8302

**Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.**

### **NPI 6.1: Independent Living**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Many low income individuals and families in Contra Costa County lack family support as well as a supportive environment that is required to be able to maintain a comfortable and independent living environment. For the County's senior citizens and individuals with disabilities, the lack of family support makes it much more challenging for these groups to sustain an adequate and independent living environment.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

The EHSD/Community Services Bureau will continue to prioritize the eligibility requirements for the LIHEAP and Weatherization services for program eligible senior citizens and individuals with disabilities to ensure that both vulnerable groups continue to receive these services throughout the program year, and the LIHEAP fast track program while funds are available. Additionally, disabled individuals and Grandparents raising Head Start children are beneficiaries of the full range of Head Start comprehensive services and case management.

National Performance <u>Indicator 6.1</u>		CAP 2 YEAR PROJECTIONS	
<b>Independent Living</b>  The number of vulnerable individuals receiving services from Community Action who maintain an independent living situation as a result of those services:		<b>Number of Vulnerable Individuals Living Independently Expected to Achieve (#)</b>	
		<b>2016</b>	<b>2017</b>
<b>A.</b> Senior Citizens ( <i>seniors can be reported twice, once under Senior Citizens and again, if they are disabled, under Individuals with Disabilities, ages 55-over. )</i>		1,100	1,200
<b>B.</b> Individuals with Disabilities			
<b>Ages:</b>			
<b>a.</b>	0-17	525	550
<b>b.</b>	18-54	225	240
<b>c.</b>	55-over	260	270
<b>d.</b>	Age Unknown		
<b>Total Individuals with Disabilities:</b>		<b>1,010</b>	<b>1,060</b>

*In the rows below, please include any additional indicators for NPI 6.1 that were not captured above.*

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## 2016-2017 CSBG/NPI CAP Projections

**Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.**

### **NPI 6.2: Emergency Assistance**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Frequently, low income residents and other vulnerable individuals require safety net services such as food supports, energy assistance, disaster relief, and protection from domestic violence.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

EHSD/Community Services Bureau comprehensive services staff assist families to access emergency services to provide supplemental support to clients. CSB will also continue the outreach informing the community about the availability of emergency LIHEAP services.

<b>National Performance Indicator 6.2</b>  <b>Emergency Assistance</b>  The number of low-income individuals served by Community Action who sought emergency assistance and the number of those individuals for whom assistance was provided.	<b>CAP 2 YEAR PROJECTIONS</b>	
	<b>Number of Individuals Expected to Achieve (#)</b>	
	<b>2016</b>	<b>2017</b>
<b>A.</b> Emergency Food	1,500	1,600
<b>B.</b> Emergency fuel or utility payments funded by LIHEAP or other public and private funding sources	2,000	2,100
<b>C.</b> Emergency Rent or Mortgage Assistance		
<b>D.</b> Emergency Car or Home Repair (i.e. structural appliance, heating systems, etc.)		
<b>E.</b> Emergency Temporary Shelter	100	105
<b>F.</b> Emergency Medical Care		
<b>G.</b> Emergency Protection from Violence		
<b>H.</b> Emergency Legal Assistance	1,100	1,150
<b>I.</b> Emergency Transportation		
<b>J.</b> Emergency Disaster Relief		
<b>K.</b> Emergency Clothing		

*In the rows below, please include any additional indicators for NPI 6.2 that were not captured above.*

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## 2016-2017 CSBG/NPI CAP Projections

**Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.**

### **NPI 6.3: Child and Family Development**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

The shortage of quality, affordable child and family development services County-wide has had a negative impact on the ability for both children and families to break the bonds of poverty as well as the lack of financial services that focuses on long-term stability and economic security.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

The EHSD/Community Services Bureau provides an array of comprehensive services to low-income parents and children through its child care programs that help strengthen and enhance the family environmental structure. The bureau will partner with local entities to provide both employment and training to several low-income sectors of the community, including youth. CSB is also a partner in the Spark Point initiative which focuses on long-term stability and economic security.

National Performance Indicator 6.3		CAP 2 YEAR PROJECTIONS	
Child and Family Development		Number of Participants Expected to Achieve Outcome (#)	
		2016	2017
INFANTS & CHILDREN			
A. Infants and children obtain age appropriate immunizations, medical, and dental care		3,200	3,300
B. Infant and child health and physical development are improved as a result of adequate nutrition		3,200	3,300
C. Children participate in pre-school activities to develop school readiness skills		3,200	3,300
D. Children who participate in pre-school activities are developmentally ready to enter Kindergarten or 1st Grade		1,000	1,050
YOUTH			
E. Youth improve health and physical development		55	60
F. Youth improve social/emotional development		55	60
G. Youth avoid risk-taking behavior for a defined period of time		55	60
H. Youth have reduced involvement with criminal justice system		55	60
I. Youth increase academic, athletic, or social skills for school success		55	60
PARENTS AND OTHER ADULTS			
J. Parents and other adults learn and exhibit improved parenting skills		2,400	2,450
K. Parents and other adults learn and exhibit improved family functioning skills		2,400	2,450

*In the rows below, please include any additional indicators for NPI 6.3 that were not captured above.*

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## 2016-2017 CSBG/NPI CAP Projections

**Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.**

### **NPI 6.4: Family Supports**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Family supports are unavailable to vulnerable populations resulting in family stress, mental health issues and domestic violence.

**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

EHSD/CSB will offer supports to families in the form of energy assistance as well as parent education, mental health consultation and referrals, domestic violence reduction approaches both directly and in partnership with community based organizations and programs within local government agencies.

<b>National Performance Indicator 6.4</b>  <b>Family Supports (Seniors, Disabled and Caregivers)</b>  Low-income people who are <b>unable to work</b> , especially seniors, adults with disabilities, and caregivers, for whom barriers to family stability are reduced or eliminated, as measured by one or more of the following:	<b>CAP 2 YEAR PROJECTIONS</b>  <b>Number of Participants Expected to Achieve Outcome (#)</b>	
	2016	2017
<b>A.</b> Enrolled children in before or after school programs		
<b>B.</b> Obtained care for child or other dependent		
<b>C.</b> Obtained access to reliable transportation and/or driver's license		
<b>D.</b> Obtained health care services for themselves or family member		
<b>E.</b> Obtained and/or maintained safe and affordable housing		
<b>F.</b> Obtained food assistance		
<b>G.</b> Obtained non-emergency LIHEAP energy assistance	2,500	2,500
<b>H.</b> Obtained non-emergency WX energy assistance	600	600
<b>I.</b> Obtained other non-emergency energy assistance. (State/local/private energy programs. Do Not Include LIHEAP or WX)		
<i>In the rows below, please include any additional indicators for NPI 6.4 that were not captured above.</i>		

## 2016-2017 CSBG/NPI CAP Projections

**Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.**

### **NPI 6.5: Service Counts**

**Problem Statement:** (If additional space is needed, please attach a separate sheet.)

Low-income and vulnerable residents of Contra Costa County may lack information about access to services. They may require emergency food, clothing and referrals to services provided by County Government and community based organizations and are unaware of how to obtain these services.

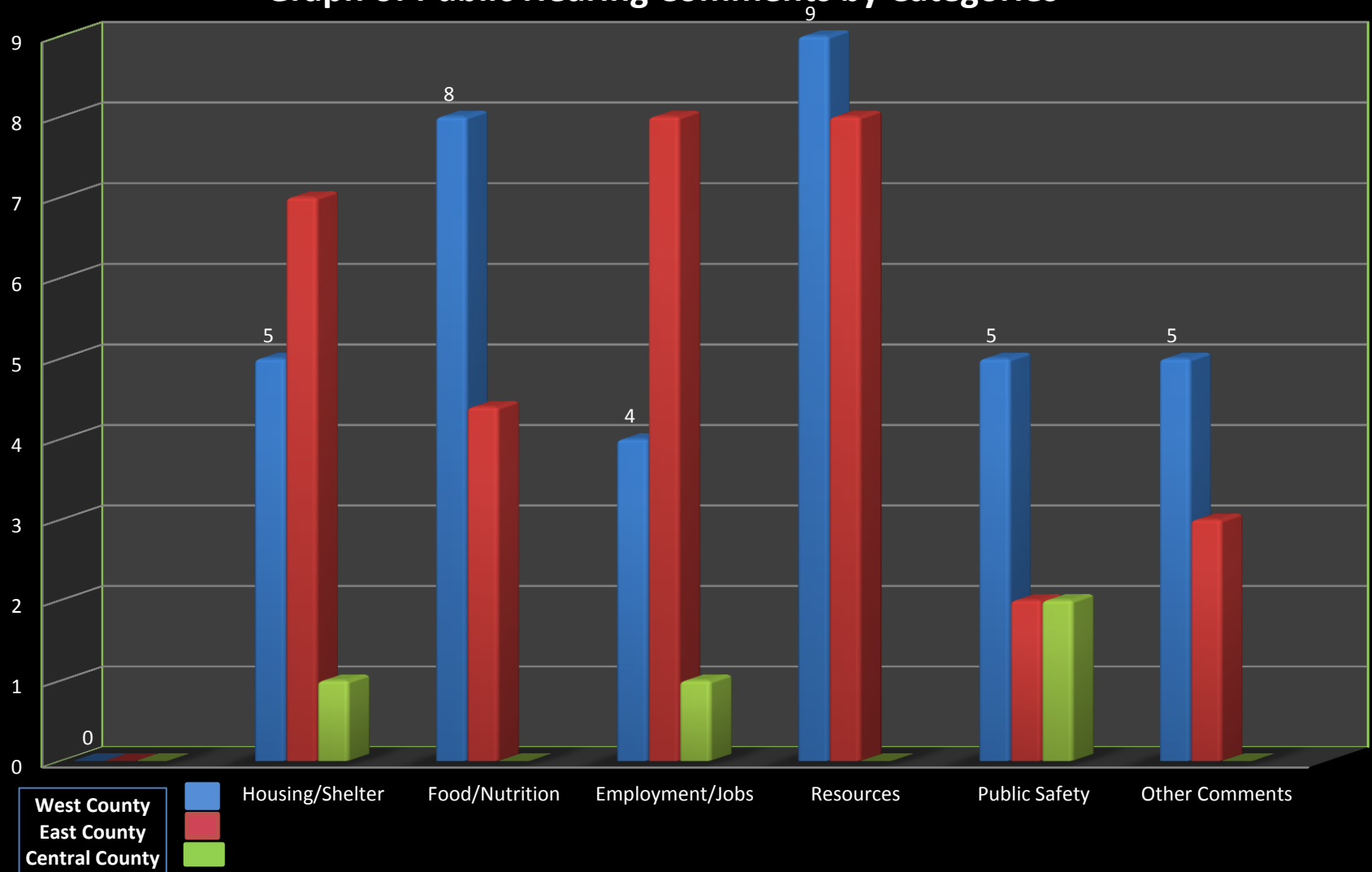
**Program Activities and Delivery Strategies:** (If additional space is needed, please attach a separate sheet.)

Participants in EHSD CSB programs have access to emergency food and clothing throughout partnership with VESTIA a 501c(3) non-profit that manages food pantries and the distribution of food boxes.

<b>National Performance Indicator 6.5</b>		<b>CAP 2 YEAR PROJECTIONS</b>	
		<b>Number of Services Expected (#)</b>	
<b>Service Counts</b>  The number of services provided to low-income individuals and/or families, as measured by one or more of the following:		<b>2016</b>	<b>2017</b>
<b>A.</b> Food Boxes		1,250	1,300
<b>B.</b> Pounds of Food		4,950	5,200
<b>C.</b> Units of Clothing			
<b>D.</b> Rides Provided			
<b>E.</b> Information and Referral Calls			
<i>In the rows below, please include any additional indicators for NPI 6.5 that were not captured above.</i>			

Attachment I  
Summary of West, East, and Central Public Hearing Comment Cards

**West, East, & Central Contra Costa County  
Graph of Public Hearing Comments by Categories**



# Attachment J

## Public Hearings 1-2-3 - Questions & Comments

West Contra Costa County Public Hearing - Richmond Public Library – Thursday, 03/26/15, 6:00-8:00 p.m.

East Contra Costa County Public Hearing - Los Medanos College - Thursday, 04/23/15, 6:00 to 8:00 p.m.

Central Contra Costa County Public Hearing - County Building (500 Ellinwood) – 05/2015, 6:00 to 8:00 p.m.

Comment/Concern	Was the concern addressed in the CAP?	If so, page #	If not, indicate the reason
PH1.P1- Education, Training, good paying jobs, employable resident, encourage on the job training with tax breaks, match ability with opportunities.	yes	ii Education and Training, iii Employment and Jobs	
PH1.P2- Do we monitor people in power? Why do we allow CPS to play God? They brag-they do.	No	Not Addressed in the CAC <sup>i</sup>	Comment or observation only, or not related to a specific factor contributing to poverty.
PH1.P3-South Asians feel left behind for health and housing.	Yes	iv Health and Mental Health	
PH1.P4- Do you plan to expand funding for targeted minorities nonprofit organizations? Please answer!	yes	v Resources and Funding	
PH1.P5- Funding for culturally specific domestic violence programs is needed.	yes	vi Safety and Crime	
PH1.P6-If people don't qualify for unemployment and get no disability how do people with no income survive?	yes	iii Employment and Jobs	
PH1.P7-There is a shortage of afterschool programs for most of our youth in our communities! We definitely need funding to appropriate fast demand.	yes	ii Education and Training	
PH1.P8-There is a shortage of mental health services/funding for South Asian seniors and children in their cultural and linguistic context.	Yes	iv Health and Mental Health	
PH1.P9-People-Police confrontations ways to control	Yes	vi Safety and Crime	
PH1.P10-What are we doing for the young people of Contra Costa: Housing/Jobs/medical?	Yes	iii Employment and Jobs	
PH1.P11-Where's our voice of conscience and voice of people?	No	Not Addressed in the CAC <sup>i</sup>	Comment or observation only, or not related to a specific factor contributing to poverty.

Comment/Concern	Was the concern addressed in the CAP?	If so, page #	If not, indicate the reason
PH1.P12-Speak out world! Speak out America	No	Not Addressed in the CAC <sup>i</sup>	Comment or observation only, or not related to a specific factor contributing to poverty.
PH1.P13.1-Pivotal point; Institutions that contribute to homelessness: Prisons and jail systems, foster care, mental health, healthcare, substance/chemical dependency, armed forces/military. Institutions are disengaged from the issue because they see it as unsolvable but PH1.P13.1 Continued- in fact can be eradicated with long term leadership community engagement and political will to enact policies leverage causes. Consider creative methods for creating housing 1.) Acquisition/rehab new construction (short term financial assistance to those at risk to create permanent housing 2.) Tenant based housing subsidies using existing housing. Another consideration move from managing homelessness and address presenting and eliminating it.	Yes	vii Housing and Shelter, iv Health and Mental Health	
PH1.P13.2 – Human and financial cost are enormous, the cost of not solving the problem are great. Impacts of people in crisis, community and social systems/CBO providing the services. Goals: prevent homelessness, increase housing opportunities, support services not rigid/fragmented, measure outcons, long term leadership and political will.	Yes	vii Housing and Shelter	
PH1.P13.3- 900+ youth and young adults here in Contra Costa County between ages of 15-21 involved in the foster care system. 676 are between PH1.P13.3 Cont. - the ages of 18-21 and are at risk of homelessness. Only less than 10% are getting transitional housing.	Yes	vii Housing and Shelter	
PH1.P14 – I belong to West County Regional Group sponsored by First 5. We would like to work with you to provide our community especially for our children to be more active to prevent childhood obesity. We need to be more active and healthier. We need your support.	Yes	iv Mental Health and Health	
PH1.P15 –I would like Richmond to offer classes at a low cost for children five years and over. Maybe this is not relevant to this organization but there is much to do in the community for example: Fix the streets, more surveillance. <i>(translated)</i>	Yes	ii Education and Training	

Comment/Concern	Was the concern addressed in the CAP?	If so, page #	If not, indicate the reason
PH1.P16- I would like a committee where entrusted people help to monitor the homeowners so they do not rent houses in bad conditions. Also, I would like public schools to help our children with more activities such as: Art, music, paint, science, history. We need to have good mental health if we want to create a better future; we have to start working on leaving a better future for our children. <i>(translated)</i>	Yes	ii Education and Training, iv Health and iv mental Health , vii Housing and Shelter	
PH1.P17- We have to find the way for Richmond and surrounding cities to reduce cost of rent, because people are living in a destitute area and Contra Costa County is very expensive. I believe that their funds could support more programs and not only three to have more impact on the lives of families. <i>(translated)</i>	Yes	vii Housing and Shelter	
PH1.P18-We need more security in the streets of the schools for example more safety signs, more lighting and the have physical activities in the parks. More programs for children 0-16 where they can engage in health & activities like walking, dancing, art music. Etc. <i>(translated)</i>	Yes	vi Safety and crime, iv Health and mental Health	
PH1.P19- 1) in the future helps organization of parents who want to help the community. 2.) Help reduce cost of rent in Richmond. 3.) Consider that most programs are for older children and it is important that you give small children an opportunity to be active. Poor families do not have enough money to pay for classes so that would be great if we could get families more active. <i>(translated)</i>	Yes	ii Education and Training, v Resources and Funding. vii Housing and Shelter, Resources and Funding	
PH2.P1- Affordable Housing High rents in high-cost of living Developers building only for middle class and avoid building starter homes.	Yes	vii Housing and Shelter, v Resources and Funding	
PH2.P2- Need a homeless shelter – “ Housing first”	Yes	vii Housing and Shelter	
PH2.P3- Population shift to East County means it needs more attention from the county’s departments.	No	<sup>1</sup> Not addressed in the CAC	Comment or observation only, or not related to a specific factor contributing to poverty
PH2.P3- money needs to be allocated to the schools and extracurricular.	Yes	ii Education and Training	
PH2.P3- Mental health needs more attention	Yes	iv Health and Mental Health	

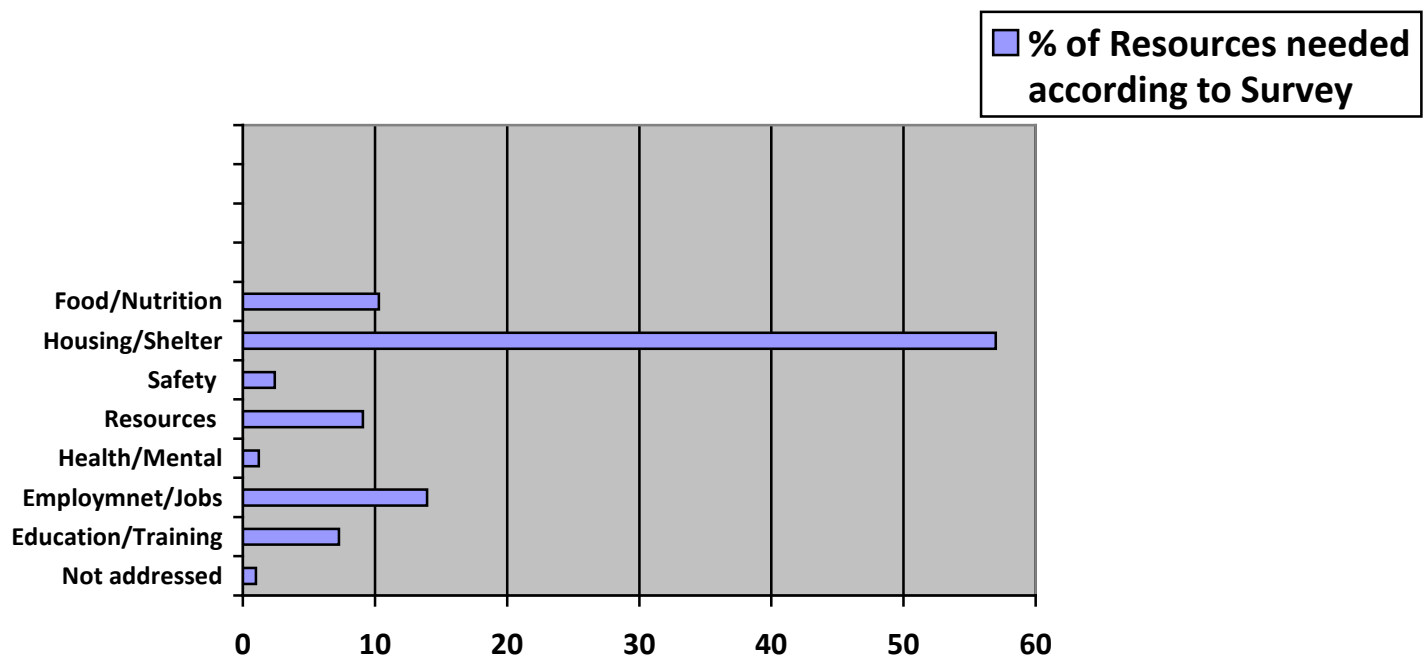


Comment/Concern	Was the concern addressed in the CAP?	If so, page #	If not, indicate the reason
PH2.P4- Community Development and better outlets for healthy eating and living.	Yes	viii Food and Nutrition	
PH2.P5- I am a LMC Student and I think that money should be invested in afterschool programs for the youth to increase a higher chance for kids to succeed in their future goals.	Yes	ii Education and Training	
PH2.P6 - I would like to see action in helping the homeless LGBT community. A lot of troubled teenagers are pushed and neglected due to their orientation. Teaming up and/or funding an organization to help homeless LGBT youth is what I'd like to see and be a part of.	Yes	vii Housing and shelter	
PH2.P7- Bay point has one of the worst ratios of healthy VS. Unhealthy food sources (retail food environment index – RFEI) in the County. County wide 5.4, Bay Point 1.7	Yes	viii Food and Nutrition, iv Health and Mental Health	
PH2.P8- Low-income residents face a skills gap and a lack of confidence in starting careers despite the economic recovery, unemployment is still high in East Contra Costa – up to 10% in Bay Point.	Yes	ii Education and Training	
PH2.P9- Employment rates over 10% here in East County. Education gap to get employment.	Yes	ii Education and training, iii Employment and Jobs	
PH2.P10- Honestly-How is we as a county trying to have rent control? I see a lot of our senior citizens and low income families being pushed out.	Yes	vii Housing and Shelter	
PH2.P11 - Homelessness services – Mental Health, housing, and employment, Housing ,Jobs- local , Livable wages ,Foster youth – transitional age housing, in school foster youth advocates/liaisons/counselors	Yes	ii Education and Training, vii Housing and Shelter, iii Employment and Jobs, iv Health and Mental Health	
PH2.P12- Significant issues – Low income – have to choose between rent and healthy food, food is one area of a budget that PH2.P12 CONT. - can be cut and often is. Health is affected, child development is affected which perpetuates the cycle of poverty	Yes	vii Housing and Shelter, v Resources and Funding, iv Health and Mental Health	

Comment/Concern	Was the concern addressed in the CAP?	If so, page #	If not, indicate the reason
PH2.P13 - families need to have access to affordable: Child care, Housing, employment in the county. 0-5 year's children of incarcerated parents. They live work and worship in. Have a safe place to give their input in their neighborhoods!	Yes	ii Education and Training, vii Housing and Shelter	
PH2.P13 - Access to living wage careers, access to job training to be eligible for the jobs to address the skills gap and ongoing support services. Also, affordable childcare beyond 5-6pm for those who must work out of the area.	Yes	ii Education and Training	
PH2.P14- Working with partners to have training opportunities to teach community members skills to help education for employment.	Yes	ii Education and Training, iii Employment and Jobs	
PH2.P15- More trade schools for males through grant money. More youth employment to teach life skills and training which is supported by the county.	Yes	ii Education and Training	
PH2.P16-Youth employment – By using grant funding surrounding businesses in the city	Yes	iii Employment and Jobs	
PH2.P17- The key to ending poverty is through education and either at the high school level and community college. Develops programs in job training not money. Build retail industry grow opportunity.	Yes	ii Education and Training, iii Employment and Jobs	
PH2.P18- Increase collaboration amount EHSD divisions. Great work is being done by each division. To what exult are we working together to address the whole person?? Employment and head start and child welfare Cal fresh and mental health... on and on.	Yes	ii Education and Training, iii Employment and Jobs, iv Health and Mental Health	
PH2.P19- Question related to how resource service providers are verified for capacity/effectiveness.	No	<sup>1</sup> Not addressed in the CAC	Comment or observation only, or not related to a specific factor contributing to poverty
PH2.P20- Does the county have a working relationship with the school districts? If not, why? Does this (illegible) have any concerns about incarceration of youth within this county?	Yes	ii Education and Training	
PH3.P1- I live in Richmond and there are many necessities there is a lot of garbage in the streets, there are a lot of holes in the pavement. Streets are dark and that is dangerous to walk. In the parks there is no security and there are many people smoking drugs. (translated)	Yes	vi Safety and Crime	

Comment/Concern	Was the concern addressed in the CAP?	If so, page #	If not, indicate the reason
PH3.P2- I would like to know how the EOC is helping on a big need of housing which I think is a big priority especially in Richmond and myself being a single mom with a full time job and two kids, I can't afford housing, living in a shelter.	Yes	vii Housing and Shelter	
Organize and outreach. Information about free home based online learning opportunities for the parents and other adults dealing with poverty/low income. Many such programs already exist. Their children will/are tech savvy I will be able to assist their parents. <sup>1</sup>	Yes	ii Education and Training, vi Safety and Crime	

PH - Public Hearing
1- West Count
2- East County
3- Central County
P(#)- Public Comment # signifies different member of public
Example: PH1.P1
↓
Public Hearing West County /Public 1st person



<sup>i</sup> Not addressed in the CAC – Comment or observation only, or not related to a specific factor contributing to poverty.

<sup>ii</sup> Education and Training – 5,10,12,19,21,25,26,28,31,35 & 38

<sup>iii</sup> Employment and Jobs – 10,12,**15,18**,19,25,**28**,30 & 35

<sup>iv</sup> Health and Mental Health -**9,10**,12,25,**28**,29 & 36

<sup>v</sup> Resources and Funding – **10**,12,15,29,33 & 35

<sup>vi</sup> Safety and Crime - 17,35

<sup>vii</sup> Housing and Shelter-8,**10**,18,25,28 & **35**

<sup>viii</sup> Food and Nutrition- 12,**20**,28,**29**,34 & 35

Pages noted in **bold** refer to programs or activities descriptions as contrasted with references to agencies or organizations.

**Attachment K**  
**Survey Comments & Results for 2016-2017 Community Action Plan**

From your perspective, what are the top three (3) issues facing those living in poverty (for example, you might identify food, shelter, housing, etc.)?

Answer Options	Response Percent	Response Count
1.	100.0%	165
2.	99.4%	164
3.	93.9%	155
<i>answered question</i>		<b>165</b>
<i>skipped question</i>		<b>3</b>

From your perspective, what are the top three (3) issues facing those living in poverty (for example, you might identify food, shelter, housing, etc.)?

1.	2.	3.
Access to healthy food	Access to affordable housing	Access to healthcare/dental care for undocumented individuals
Access to vocational programs	Access to affordable, high quality child care	Access to mental health services
Addiction	Access to enough healthy food	access to nutritious whole food.
Affordable health & mental health services	access to healthy food	accountability
Affordable Housing	Adequate shelter	affordable housing
affordable housing	affordable health care	Affordable Groceries
affordable housing	Affordable Housing	affordable healthcare
AFFORDABLE HOUSING	Affordable Housing	affordable housing
Affordable housing	affordable housing	Affordable Housing
Affordable Housing	Affordable housing	affordable housing
affordable housing	Affordable housing	affordable housing/child care & daycare hours
Affordable housing	Affordable Housing	affordable quality childcare
affordable housing	affordable quality child care	affordable/quality child care
affordable housing	affordable transportation	bay area cost of living
Affordable Housing	Availability of Healthy Food from local store	child care
affordable housing	Child Care	Child Care
affordable housing	child care	Child Care
Affordable housing	child care costs	Child care
affordable housing	Childcare	child care and other economic support
affordable housing	Crime	Child care with cultural context
After school program and activities for youth	Crime/Violence	childcare
Child Care	CRIMINAL BACKGROUND	childcare
Child Care	criminal records	Clothing
Child care	Day care	Cost of living
cost of housing	Day care for children	debt
Cost of Rental Housing	Dental services for seniors	Drug Abuse

From your perspective, what are the top three (3) issues facing those living in poverty (for example, you might identify food, shelter, housing, etc.)?

1.	2.	3.
crime	domestic abuse	Education
drug and alcohol abuse	Drugs/Crimes	Education
Drugs and Alcohol	Education	Education
Education	Education	education
Education	Education	education
education	Education	Education and Childcare
Education	employment	Education/job
Education	employment	EMPLOYMENT
education	employment	Employment
education	Employment	employment
education	employment opportunities	employment
education	Employment/Small Business Opportunities	EMPLOYMENT
education on how to stop the welfare cycle	Food	Employment
employment	Food	Employment
EMPLOYMENT	FOOD	employment
Employment	Food	employment
Employment	FOOD	Employment training for available job opportunities
Employment opportunities	food	employment
employment or wages	food	expensive housing
Food	food	fair wage
Food	food	Few Job Opportunities
Food	Food	Financial Illiteracy
Food	Food	Food
food	food	Food
food	Food	food
Food	Food	Food
food	food	food
food	food	Food
food	Food & Clothing	food
Food	food & nutrition	Food
Food	food (nutritious)	food access
Food	Food and water	food costs
Food	Food insecurity	Food prices
Good paying Jobs	full-time employment	Giving them work in exchange for food benefits, etc.
Healthy Food	health care, including mental health support	health and safety issues
Healthy food	healthy food	Health care
high housing costs	high rents	Health Care
HORRIFICALLY high housing/ cost of living	homelessness	Health Care
Housing	Housing	health care
housing	Housing	Health Care

From your perspective, what are the top three (3) issues facing those living in poverty (for example, you might identify food, shelter, housing, etc.)?

1.	2.	3.
Housing	housing	Health care
Housing	Housing	healthcare
Housing	housing	Healthcare
housing	housing	healthy food
Housing	housing	High housing costs/homelessness
Housing	housing	Housing
housing	Housing	housing
housing	housing	HOUSING
Housing	Housing	housing
housing	housing	Housing
housing	housing	Incentive
housing	Housing	involvement in drugs/crime
Housing	housing costs	Job
housing	housing in safe neighborhoods	job opportunities
housing	housing instability	JOB READINESS/MENTAL HEALTH
Housing	Housing/Shelter	Job ready attire/ training
Housing	income inequality	job retention
housing	Insufficient income.	job training
Housing	isolation and loneliness	Jobs
HOUSING	job	Jobs are paying too little
Housing	Job Training	lack of education/ training for available jobs
housing	jobs	lack of jobs
housing	Jobs	LACK OF NECESSARY JOB SKILLS
housing	jobs	Lack of public transportation
HOUSING	jobs	lack of resources
Housing	Jobs	Lack of skills to get a livable wage
Housing	Jobs	Lack of transportation
Housing	jobs	LACK OF TRANSPORTATION AND ITS COST
housing	jobs	Lack on inspiring education
housing	Job's	limited child care/pre-school opportunities
housing	lack of available jobs	livable wage
Housing	lack of education/job skills	Low minimum wage
Housing	lack of education/training/job skills experience	Meaningful Employment
Housing	Lack of employment	medial services
housing	LACK OF EMPLOYMENT OPPORTUNITIES	Medical Attention
Housing	Lack of Higher education opportunities	Medical Care
Housing	lack of local jobs	medical care
Housing	lack of training / education	medical care
housing	Limited Food Pantries	Medical Care

From your perspective, what are the top three (3) issues facing those living in poverty (for example, you might identify food, shelter, housing, etc.)?

1.	2.	3.
housing	little opportunities for higher wage jobs- corporations out source work to other countries leaving US citizens in the dust	Medications
Housing	living wage job opportunities in our area	Mental Health
Housing	Living wage jobs. - When the minimum wage increases, so does the cost of goods and food so the individual still has a hard time to make ends meet.	mental health care
housing	low income jobs	mental health services
housing	low performing schools in poorer areas	money
Housing affordability, rent and housing prices have increased substantially	medical services	more after school child care at the schools
Housing affordable	mental health	more low affordable housing and child care
housing cost	Mental Health	More outreach to County programs & retention assistance
Housing costs	mental health and substance abuse	no community support
Housing Costs and Quality	mental health care	not enough money
Housing costs.	Mental health services	nutrition
housing- the rent is too high- affordable housing is not really that affordable in these areas	Mental Health Services	Nutritious Food
housing/ shelter	Mental Illness	Opportunities for betterment of self/community
Housing/Shelter	mental illness	Out-of-date minimum wage
income	mental/behavioral health treatment	parenting items (diapers, babycare equipment and adaptations)
inhabitable living situations	Money	Personal Hygiene Items
Jobs	more job offer to people had criminal history	Plain Homelessness
jobs	No education on how to buy affordable healthy food	poor food choices
jobs	no money	prostitution
Jobs	Opportunnity	quality inexpensive food
Jobs	Pay equality	raising rent
lack of income	poor health	reasonable employment
lack of job	Poor health care access & services	resources
lack of shelter	proper nutrition	Resources to treat the above
Lack of support (personal)	Public safety	safety
lack of work	raising transportation costs, ie gasoline	Security/safety from violence
Local ownership	recreational activities	services
low wages	Rental amounts well above pay	shelter
Low wages/unemployment	Residivism	shelter
Iviing wages	Safe well-designed housing	shortage of medical providers
Mental Health Issues	Safety	Substance Abuse



From your perspective, what are the top three (3) issues facing those living in poverty (for example, you might identify food, shelter, housing, etc.)?

1.	2.	3.
Mentorship for those from families without education	Shelter	Sustainable employment.
money	Shelter	too many generic educational programs such as medical/dental assisting that in the end leave people with high debt and low wages
Nutritious food	Shelter	Training/Education for Jobs
Obtaining Employment	shelter	Transportation
Rehab/Job Placement Programs	Shelter	transportation
safe place to live/housing	shelter costs	Transportation
safe, affordable adequate housing	Shelter/Housing	transportation
shelter	Shelter/Housing	transportation
SHELTER	stability within the home	transportation
Shelter	Substance abuse rehab	transportation
Shelter	Support with food and housing while attending school	Transportation
shelter	The inability to find well-paying, stable jobs	transportation
Shelter	transportation	transportation
Shelter	Transportation	transportation
shelter	TRANSPORTATION	transportation accessibility and cost
shelter	transportation	Transportation between communities
Shelter	transportation	Transportation Cost
Shelter	transportation	transportation to get to school/work
Shelter - There isn't enough affordable housing nor is the housing in existence spacious enough.	transportation	Unemployment
SHELTER COST	Transportation Accessibility and Frequency	
Shelter from elements	Transportation for seniors	
Shelter is unaffordable	underemployed	
stable housing	Undiagnosed/unaddressed mental health issues	
substance abuse	Unemployment	
Transportation (especially to work)	UNEMPLOYMENT	
unemployment	vagrancy laws	
Unemployment & underemployment	we need more homeless shelters	
Wages	work	
wages that support living		

## Survey Input for 2016-2017 Community Action Plan

For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).

Answer Options	Response Percent	Response Count
1.	100.0%	162
2.	95.7%	155
3.	88.9%	144
<i>answered question</i>		<b>162</b>
<i>skipped question</i>		<b>6</b>

For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).

1.	2.	3.
More help with housing	Larger supply of food stamps	More help in community (accessible)
Job readiness & skills training	College readiness	ESL (for the workspace)
Participants should have to participate and be held accountable for self-improvement, efforts & participation	Having been in the shelter system twice! Should be a stepping stone not permanent support!!	
more help to those who can't find work	raise minimum wage	lower prices
Drug and Alcohol treatment facility	Counseling and treatment facility	More Community Outreach with resources
subsidized housing/rental assistance	job training	subsidized childcare - expand current programs
Vouchers for permanent housing. Housing cost is high.	Training and work after training	Medical cards for those that need it
Affordable housing	Investment	
Housing that is affordable	Access to healthy food and nutrition and health education	Career tech training via after-school program. Partnership with non-profit, govt, and small business sector
Build affordable housing	Encourage collaboration between child care centers providers and schools	Encourage collaboration between schools and CBO's
Collaborative and frequent community forums	Youth Programs	Spark Point Centers and Financial Management Assistance
Federal and local assistance to level costs	bring back employers	offer incentives to get those in need the education/training needed
subsidized housing	regular, easy access to nutritious foods that are either within budget or free	not sure I can get specific, but support services that might help people navigate issues of transportation, healthcare, education, and utilities

**For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).**

1.	2.	3.
open the rarely-used military housing (Olivera Rd) to low income renters		
Free Mental Health "clinics" to determine a course of action	Basic job training	Media campaign promoting GED/High School Diplomas and Community Colleges.
A HOUSING DEVELOPMENT	FUNDING TO EXPAND EXISTING SHELTERS	INCENTIVES FOR EMPLOYMENT
Affordable Housing	Vocational Schools	Accessible job placing agencies
The after school program or activities give youth a safe place to do healthy activities instead hanging out on the street with the wrong crowd. This group of youth will more likely pursue higher education in the future and therefore both poverty and criminal ratio will decrease.	There is hardly to find employer who would like to hire people with criminal history and the criminal rate is high among the group of people in poverty. If employers are not discriminated against this group of people, they can be hired and get out of poverty.	Housing cost is very high in the Bay Area. Many people live pay check to pay check and their majority of income goes to housing. More affordable housing available to them is a great help for them to get out of poverty
Vouchers	Increased temporary shelter options w/case management that helps people get into permanent housing	
cheaper housing	food coupons	training and employment development skills
More low cost housing		
Life skill classes, tutoring program, affordable after school programs, full day and affordable summer camps to keep kids active and out of mischief (Benicia has a good summer camp model).	Transition programs to help a person find employment, housing, counseling, etc after released from jail/prison.	Drug counseling & prevention.
Vouchers for temporary Housing	Vouchers for Food	
Discounted price on food and or offering of generic food products	Safe place to sleep for those who have no place to go	Patrol and identify safety presence in neighborhoods
more affordable housing	better pay	child care, transportation, food
More Job/Club programs and/or Rehab or Mental Health programs	Food Pantries need to be more accessible, there are many time limitations & few Pantries	Need more Eligibility workers to be in the community to assist clients on how to apply for benefits
jobs	temp jobs	odd jobs
Cal Fresh applications to those that are hungry, standing at the end of freeway on ramps or at stop lights		
temporary housing	increased public transportation options	child care subsidies, more providers
Additional low income housing apartments rent subsidies for people who are working but earn less than 200% fpl	Mental health outreach and services along with Medical approvals to be able access the services	Transportation outreach and discounted Bart and bus passes for people receiving public assistance

**For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).**

1.	2.	3.
more low cost housing. There is not enough housing for the impoverished families in our county	Transportation is a major burden for people with children. It's expensive, not timely and travel time is long	Not enough emphasis on getting an education. Failure to get a education is the biggest contributor to poverty
Need to develop low income housing that has a treatment or employment component		
Provide training so people can qualify for jobs	More community housing	More food programs
Healthy food distribution	Vouchers for housing	Job training
Rent control, how about if every new subdivision and apartment and condo project had to contain subsidized housing - not so much as to disturb the class structure of the project but certainly more than one or two grants for low income families to send their children to private/charter schools	Retraining on a grand scale for those who want it - not just necessarily low income but middle class as well, and a massive major effort to get people into the retraining - really make sure everyone in this county knows this is available	Fix the current system - I don't know how but I see people on the street every day with mental issues that need help
access to affordable housing/resources to keeping housing	rent-controlled apartment developments	larger community provider network
rent control	access to job counselors	
	accountability by the providers and producers	vouchers/assistance with childcare
VOUCHERS	FOOD PANTRIES	UNEMPLOYMENT TRAINING AND PLACEMENT, INCLUDING INDIVIDUALS WITH MENTAL HEALTH ISSUES
Vouchers for homeless or more shelter beds.	Doctors willing to give patients meds and meet with them on monthly basis.	Housing costs have gone up and we need to find affordable housing for clients because the standard of living has increased and so has the amount of homeless people in Contra Costa County.
senior affordable housing	discounted transportation	community gardens
Higher minimum wages	Higher Amounts Supplemental Aid	Lower economic requirements to receive aid.
More low income rentals/homes	Easier, user friendly ways to get food & clothing	more bus routes
internships, jobs, jobs, jobs		
FAMILY shelters; for the complete family, father, mother, children, pets	job search, on the job trainings, interviewing techniques, resume writing	affordable childcare for working families, raise the childcare income limits, emergency childcare needed,
more housing programs, more security/officer patrol programs	Education on healthy eating, resources to healthy and affordable food	bus programs for adults and children, vehicle assistance program
section 8 type vouchers	more food stamps	better outreach for employment opportunities
Re-evaluate some people in housing that shouldn't be getting it and give priority to elderly and Vets.	Go out into the community and give tax breaks to smaller companies willing to employ these people	Provide bus passes for the first 3 months of work, until they get established with work.

For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).

1.	2.	3.
educated children at a young age	provide flyers with information about all types of domestic abuse	patrol the streets
Provide a location with on the job training, in all areas of operation. Providing food distribution warehouse, kitchen/ food servcices, temp.shelter, showering facilities, child care for working/looking for wk mothers,with on site office for clerical training,which will give them the tools they need to lift them up from poverty and county rolls.	continued giving them supervised training, manned by those who need training to get jobs, which in turn is keeping costs down by manning the location with trainees and giving them pride in what they do and self esteem	this is a solution which gives those in need a way to ensure job references, instill work ethic, and create new work possibilities for the homeless and jobless.
Streamline application/approval process	Exploration into new job opportunities and more stress on self-employment	Reevaluation of transit system (Eg: there are no busses that go to direct to both Winco Stores
Affordable Housing	Free substance abuse counselling	Subsudized child care
minimum wage required for all businesses	streamline paperwork and use understandablae language	more low income housing resources
More affordable housing, maybe more supported housing projects similar to Shelter Inc.	More education, a less stringent/lengthy, more private process to access mental health services.	Better education, more resources, more incentives to work, stronger sanctions.
calfresh	housing projects/affordable housing	medi-cal
more affordable housing options (like family stabilization program)	increase minimum wage without reduction in eligible services (increase ratio)	increase access and support to training/education
mobile food vans may be help get food to families/persons who cant get to food banks	more local shelters in the east bay	vouchers for public transportation
More subsidized housing options	Expanded CalFresh to include students and more seniors	Review and expansion of existing bus lines and BART, possibly transportation subsidies
assistance with rent	incentives for grocery stores to open in food deserts or corner stores to sell fresh produce, or creating community grocery stores	better public service, safer streets for walking or bicycling
change the Employment Specialist job description to incorporate teaching/training/assisting CL's	readily available classes & doctors	provide helpfull classes on how to get and keep a valuable job
affordable housing spread out rather than concentrated in one area. Follow up on people breaking rules of affordable housing.	Raise income guidelines for child care council vouchers. Child Care costs take up over 1/3 of my paycheck.	more education on ways to cook with healthy food
Guidance counseling.	Limit the way debit card can be used. If returning products to store money can only be placed back on the card. The client can not recieve fiscal dollars that they can use for other things other than food.	Guidance counseling for those that need help. Monitor the income levels and who is in the home. If and when the person that qualified for housing is gone it should not be handed down to another relative. Not fair to other people that are in need.

**For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).**

1.	2.	3.
inhouse treatment for substance abuse / dual diagnosis that is not less than 90 days	affordable housing similar to the plan developed by the State of Utah	classes/training in how to achieve and sustain employment
housing	Home ownership for those working consistently and have bad credit	more food programs
Affordable housing for seniors, low and middle income residents.	Job training for sustainable jobs.	Housing services to minimize homelessness.
more Section 8 vouchers as there is not enough affordable housing to meet the need	increase Cal Fresh benefits as clients do not get enough to eat right	increase compensation for doctors to encourage them to accept Medi-Cal patients
Start a program like our mentorship program to build these people up.	Change CalFresh regulations to exclude students from the work requirement and temporary housing.	Bring ABAD back.
foor pantries more accesible	better transportation for elder and disable	more community resources. Too many homeless in the street
Smaller classrooms, lower tuition in community college	More life skills forums/ job training to gain skills, experience	Time limited assistance/housing
accept treatment or no benefits	low cost (not free) courses	food pantrys and homeless shelters
Subsidies for rental costs, access to information about low cost housing in area or outside the County	Support for those seeking employment - transportation, clothing vouchers, access to info about Jobs.	Affordable school programs & childcare w/ extended AM/PM hrs.
Lower cost of education	Increase entry level jobs	Lower cost of living
More low income housing in various neighborhoods	County Jobs need to raise salaries and benefits to match neighboring counties and hire county residents.	Bring in more jobs for various skill levels to increase incomes and pay.
On the Job Training & School to certify you into a position Childcare provided or reimbursement	Getting them involved in an activity, events or volunteer in the community to feel self worth.	Another option other than Section 8 with higher limits, yet more regulations. Yet if they get obtain a job & don't do drups then they could have a better chance in finding a place to live
JOB OPPORTUNITIES FOR PEOPLE WITH CRIMINAL BACKGROUNDSET	PROGRAMS FOR PEOPLE ENTERING THE WORKFORCE WITH NO EXPERIENCE.	VOUCHERS FOR PEOPLE WITH GOOD JOBS BUT BAD CREDIT FROM THE PAST.
MORE AFFORDABLE INCOME HOUSING	PROGRAMS THAT ARE MANDATED FOR JOB SEARCH/HIRING	
Housing assistance/vouchers	Crime prevention/diversion	Community enrichment
More affordable housing units/rent control	Increased access to free/low-cost childcare and healthcare to offset high cost of living	
Create livable wage jobs	help with obtaining high school diplomas & short term trainings	Construction of affordable housing & opening up Section 8 & issuing Section 8 vouchers
more low income housing	more homeless shelters	more after school child care at the schools

**For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).**

1.	2.	3.
low income housing, temporary financial assistance for those working, but unable to secure affordable housing immediately	cooperation/collaboration with local businesses to provide jobs	assistance/resources available at low/no cost, so people don't have to turn to drugs or crime
vouchers to provide temporary shelter for those who are homeless	food bank	East Bay Works
More shelters in the County	Food Bank Trucks for the homeless - If they don't have them already	Donations from Volunteer Services for Personal Hygiene Items
more low income housing	Job training, and skill training	More public transportation
more access to low income housing, more shelters for families	Jobs programs that connect with real jobs with on the job coaching, Bring in more industries	More free clinics, more outreach programs
more incentives to keep our children and parents engaged	publicis/ community awareness on all activities that are available	same as above
affordable housing	exemption/fee reduction/reentry services	minimum wage advocacy
More homeless shelters or homes provided for those that have children.	Create more jobs	Vouchers for food
Don't allow those who rent or lease properties of all types to charge such high prices, no matter what their reason is.	Goods and services shouldn't be able to exceed affordability.	Buildings that are no longer used for what ever reason, should be turned into different types of housing. Exp.: At the Presidio in San Francisco there are a lot of old buildings just sitting there un used, can't they be turned into liveable shelter of some kind?
More affordable housing available	Classes on how to stretch a dollar for healthy eating for the family	
LOW INCOME HOUSING, HOUSING ASSISTANCE OR CAPS ON RENT	MORE BUSES WITH DIFFERENT ROUTES FOR HOMES, TRANSPORTATION ASSISTANCE	HOW TO LOOK FOR WORK, HOW TO APPLY FOR WORK, BILINGUAL SERVICES & BASIC COMPUTER SKILLS
temporary shelter; long range safe housing	voucher	subsidized health care
Section 8, rent controls, and affordable mixed income housing needs to be expanded.	Parts of West Contra Costa County are greatly underserved by BART and bus. Expand AC Transit and WestCat.	More quality job training, higher minimum wage (at least \$15/hr, if not higher), more job fairs.
revise the housing authority and open up the section 8 housing.	Better education	make healthy food affordable
more places willing to hire people with a criminal past	Vouchers	people in community need to do more to help those without
Programs specifically to partially subsidize rent for those under a certain income threshold	Programs focused on building a relationship between law enforcement and the poor and youth	An increase in the amount of foodstamps that our clients receive, or special vouchers for fresh produce

For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).

1.	2.	3.
More affordable housing build and keep in good shape	We need to create more job and coalicions with businesses	have a rental cars for those parents that have odd hours to works
vouchers or gift cards for food	invest in more low income housing	more temporary shelter
more schools		
more section 8 vouchers and landlords willing to accept them	more community policing	food co-ops or other collective purchasing arrangements to leverage spending power
Affordable Housing Options	Employment Training	Easier application/approval process for medical coverage
More Low income/Section 8 housing - remove families that no longer need it	Fewer barriers to food stamps and increased allotments	Vouchers for clothing/School uniform funding
Easy and short forms to complete	Instead of EBT cards more soup kitchens where they can get a hot meal.	More services to help the working poor, i.e. rent assistance so they dont end up homeless.
more lottery places for subsidized housing	increase funding to low performing schools	health clinics and more police presence
More low-income housing	training programs so residents can get jobs using computers especially in programming	
more low income or affordable housing (new housing!)- even if it's public housing	Promotion of CalFresh program and food vochers	Public transportation stipends-- people need transportation to work
more services for low income housing and rent help.	more subsidized slots for licensed early care, especially infant care	bring in business and keep business local
vouchers	temporary and permanant shelter	safe living environment
homeless shelter facility	access to medical clinics	food bank services
affordable housing with support services	transportation vouchers and more reliable and robust transportation	job training, apprenticeships, educational programs and support
More affordable housing/Vouchers for homeless	Outreach so people know where and how to get food and/or food stamps	Smaller buses that run more frequently
integrated food & housing programs		
city ordinances that require landlords to submit documentation periodically that rentals are habitable or face stiff fines.	more shelters, and shelters that accept someone with multiple health disorders.	Healthcare for everyone (undocumented citizens need preventative care)
Temporary housing units	More decent job openings	Vouchers
Streamline building process so more housing built	Job Centers/Training on how to Find Jobs	Working with Middle and high Schools to create job training
Case Management	Vocational training programs	Emotional Support programs
jobs	jobs	jobs
government sponsored Work/Trade for housing subsidies, incentivise private affordable housing developments.	fully subsidized health care as in Europe, Canada	Universal breakfast in all schools, especially High Schools--see Berkeley Unified school district.



**For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).**

1.	2.	3.
Increase minimum wage	Increase minimum wage	Provide more child care centers
Food Bank support	affordable housing	easy access to covered California
tax the rich. use fir social svcs	raise minimum wage	campaign finance reform
Assistance with child care.	Free adult education classes on parenting, budgeting, cooking, etc. with financial incentives to attend.	Free treatment.
build housing and give it to the homeless -- nothing solves poverty like getting someone into a home	eliminate bans on public camping etc., and develop a public-care agency that would bring services to the homeless	tax breaks for certain businesses (manufacturing, for example) that have a majority of their employees living in Contra Costa
require developers to include affordable housing	something similar to rent control	
Vouchers	Transportation to care center	Mental health evaluation
employer incentives	education benefits	raise minimum wage
vouchers for schools	drug and alcohol recovery program vouchers	low level debt forgiveness.
yes vouchers ,temporary;-another homeless shelter,bigger.or two	outsourcing jobs, locals work here,but contracts are from out of state.(DMV)example	act of congress to get eligible for LINK disabled bus,4 medical appts-jobs-shopping
I don't think rent control works. Need more affordable housing	Encourage (les govt resrtion) mare small groceries where needed	Lower-cost transportation (e.g vouchers) for low-income residents
vouchers for low income housing that does not have long wait	passes for public transportation or deeper discount	increase to living wages
shelter vouchers; affordable housing realtive to income; rental assistance; higher capacity in homeless shelters	increased subsidized child care; professional development training for family child care workers	increase minimum wage
increase subsidies for families to obtain housing	increase child care clots, particularly for infants and toddlers	raise the minimum wage to at least \$15/hr
Access to employment opportunities	Vouchers and protective housing for families with children	Affordable Access to Mental Health Services
Vouchers to assist with rent with a long term plan for to maintain housing without assistance	More daycare programs for low income families	Low cost/no cost training
Discounts for BART and buses. 24 -hour BART and buses	Subsidized day care and paid sick leave.	Higher minimum wage
Job training	Education grants and scholarships	Food distribution
Food banks	Low income senior housing	Funding sufficient programs, particularly in West County, for seniors and the disabledcd
housing subsidies	wrap-around services	vouchers or shuttles
Emergency food and access to Cal Fresh benefits	Construction of low-income housing	Programs to develop job skills

For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).

1.	2.	3.
Provide jobs and transportation specially for low-income and individuals requiring mental health services	Make mental health services and transportation more accessible	Provide child care services for individuals receiving mental health service
raise minimum wage to living wage, fund education and job training	Help more eligible people enroll in CalFresh; Improve availability of fresh, healthy, affordable food	get involved with 0/2016;
more affordable and accessible housing	vouchers for transportation	vouchers for babycare equipment or services that include babycare adaptations
assistance in finding and keeping low cost housing	assistance in training and find jobs that will get people out of the hole	checks and balances that show the person is working toward the goal -- they stop they loss benefits completely
Child care for employed and seeking employment	employment counseling	low income housing opportunities
affordable housing	raising minimum wage	affordable transportation
Vouchers to buy high quality food and food preparation classes	Transitional housing and housing vouchers	Better integration of education with employment opportunities. Children should be exposed to a wider range of occupations through internships and apprentice programs.
Low income housing	Counseling on how to continue their education	Provide vocational training to secure jobs
Rent caps	Denture repair for seniors	
More housing	More mental Heath providers	More childcare
affordable housing NEAR services	efficient transportation that gets them to where they need to get in a reasonable time	services that don't take all day to get
more job training/placement programs	more funding for housing	more outreach
transitional housing	one stop support for GED, job training, resume help	support services at on site housing locations
living wage jobs - county contracts could require nonprofits pay living wage jobs and then fund at that level	Additional rental assistance	increase availability of aces to Cal Fresh
access to fresh foods, with education on use and preparation	expanded housing for low income families (new development)	expanded child care services (increase infant- toddler slots, expand subsidy slots)
Job Training	subsidized childcare	affordable housing
rent control	regulations for companies to keep jobs here in US	adult education on in demand jobs, wages, and expected debt to complete programs... more community college course openings
State funding	Rent Control and better assessment about low income rentals, I don't consider \$1200 for a 2 bedroom low income rentals	Vouchers of some sort so low income residents who need to use public transportation do not have to pay for it
Public/private employment development	Health Care 4 All, shift in health financing	Pay bonuses to teachers in poor areas

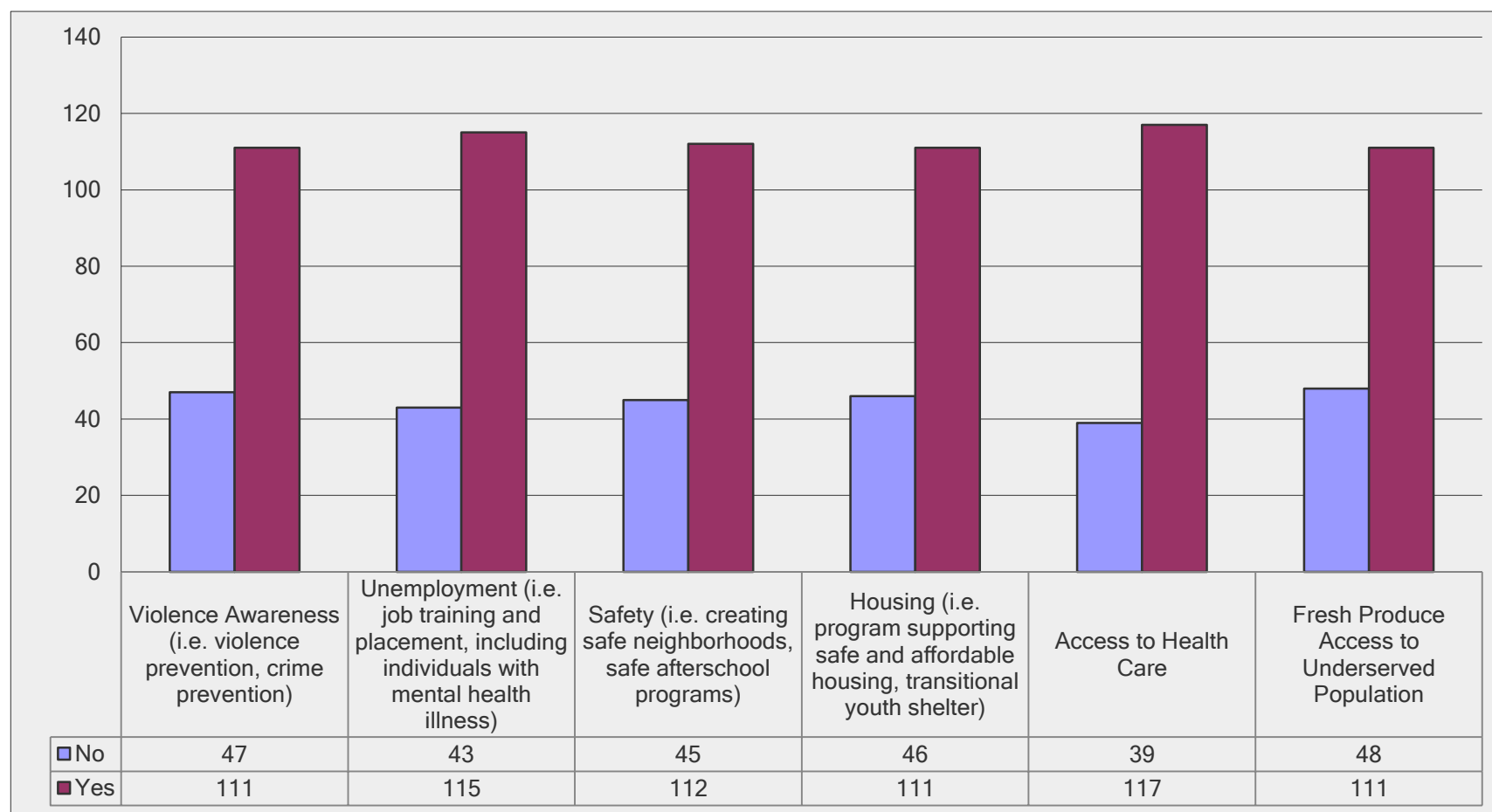
**For each of the issues you identified above, please describe the services that you believe should be provided to address this need (for example, vouchers to provide temporary shelter for those who are homeless).**

1.	2.	3.
more "HUD" like housing	more volunteers who can visit and provide freindship	Expand the food stamps program (can't think of the new name)
Increased supply and subsidies	Rental assistance	Job training and support
temporary to address those who are homeless or in crisis, transition for those moving to permanent, and permanent with a sustainable cost direct job placement through a paid internship/ job skill training and placement	Nutrition education, access to food from a variety of sources, and signing up for CalFresh housing construction subsidy, work with Habitat for Humanity, temporary housing	Signing up to receive services funded through the federal Obamacare program  direct food hand out/

## Survey Input for 2016-2017 Community Action Plan

Do you believe that the 2014-2015 Community Action Plan priority areas still fit the needs of your community?

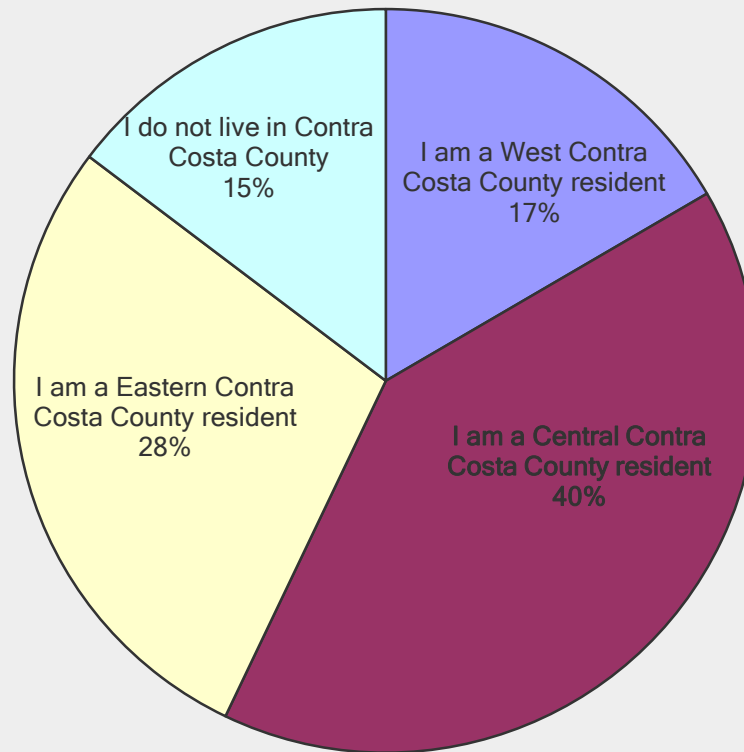
Answer Options	Yes	No	Response Count
Violence Awareness (i.e. violence prevention, crime prevention)	111	47	158
Unemployment (i.e. job training and placement, including individuals with mental health illness)	115	43	158
Safety (i.e. creating safe neighborhoods, safe afterschool programs)	112	45	157
Housing (i.e. program supporting safe and affordable housing, transitional youth shelter)	111	46	157
Access to Health Care	117	39	156
Fresh Produce Access to Underserved Population	111	48	159
<i>answered question</i>			161
<i>skipped question</i>			7



## Survey Input for 2016-2017 Community Action Plan

From the list below, select those responses that best describe your current situation (select one):

Answer Options	Response Percent	Response Count
I am a West Contra Costa County resident	16.6%	27
I am a Central Contra Costa County resident	40.5%	66
I am a Eastern Contra Costa County resident	28.2%	46
I do not live in Contra Costa County	14.7%	24
<b><i>answered question</i></b>		<b>163</b>
<b><i>skipped question</i></b>		<b>5</b>



Survey Input for 2016-2017 Community Action Plan

Please select those responses that best describe your current situation (select all that apply):		
Answer Options	Response Percent	Response Count
I currently receive services in one or more of the areas I listed in responding to Question 1.	5.2%	8
I need, but do not currently receive services in one or more of the areas I listed in responding to Question 1.	14.2%	22
I know of someone in my community that does not currently receive, but needs services in one or more of the areas I listed in responding to Question 1.	45.2%	70
I work for a non-profit organization that provides services to Contra Costa County residents in one or more of the areas I listed in responding to Question 1.	22.6%	35
I work for a governmental agency that provides services to Contra Costa County residents in one or more of the areas I listed in responding to Question 1.	61.9%	96
answered question		155
skipped question		13

