

FIRST 5 YUBA

**2014
EVALUATION
REPORT**

**Prepared for the
First 5 Yuba County
Commission**



**BARBARA AVED ASSOCIATES
Evaluation Consultants**

March 2015



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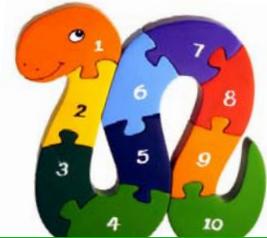


First 5 Yuba

2014 EVALUATION REPORT

The California Children and Families Act of 1998 established a large-scale, comprehensive approach to addressing the health, sustainability, and school readiness of the state's children and families. First 5 Yuba, an independent public entity governed by a seven-member commission, was created when California voters passed this Act (Proposition 10), adding 50 cents per pack tax on tobacco products.

With slightly over \$888,000 a year¹ allocated by the state in Proposition 10 funds, First 5 Yuba has supported a number of local programs that target physical and mental health, early literacy, parenting skills, school readiness and systems improvement all working together to strengthen children and families in Yuba County. Evaluating these efforts requires developing evaluation plans, identifying appropriate data collection tools and methods, and monitoring indicators linked to the Commission's strategic plan to provide information for the purpose of accountability, assessing outcomes, improving results, making policy and identifying future grant opportunities for community investments.



INTRODUCTION

The purpose of the First 5 Yuba (FFY) evaluation is to document grantee progress and measure changes resulting from grantee programs and services for children age 0-5 and their families. The evaluated projects ranged from support of early childhood literacy to transportation assistance to nutrition education classes that were addressed by the goals and objectives of the Commission's *2011-2016 Strategic Plan*.

This report provides the evaluation findings necessary to inform the Commission about its community investments, and assists in the statewide effort to compile results from all 58 First 5 counties in reporting to the Legislature each year. The evaluation report, along with the staff's annual report to First 5 California, allows First 5 Yuba Commissioners, funded partners and community stakeholders a comprehensive look at the Commission's notable outcomes for local programs in the current grant cycle.

¹ FY 2013-14 funds.

With few exceptions, the results achieved by funded programs were favorable and on par with the goals and objectives described in the grantees' evaluation plans.

This evaluation report was prepared by BARBARA AVED ASSOCIATES (BAA), a Sacramento-based consulting firm serving California First 5 Commissions and other health and human services organizations since 1986. BAA began serving as the evaluation contractor for FFY in January 2013.

Organization of the Report

Section I of the report, which begins on page 7, represents the annual evaluation of grantees for the FY 2013-14 grant cycle. The reporting period is *calendar* (not fiscal) year 2014 to align with grantees' quarterly reporting. The Commission funded 12 projects that are included in this report, with 8 projects generating some level of evaluation data for analysis and the remainder reporting "milestone" data* only. The report provides highlights of project-level results with recommendations for improvement, and describes the extent of each project's alignment with the Commission's *2011-2016 Strategic Plan*. Key indicators and population-based data most relevant to each project that can be tracked at the *community* (and in some cases, the *program* level) are also included. Systems findings regarding collaboration and leveraging of funds are presented at the end of this section.

Section II provides an *overall* summary of how the Commission's major grant funding aligns with its *Strategic Plan* to guide the Commission in considering areas for future community investments. And, summary conclusions and general recommendations are provided in Section III.

Evaluation Design and Data Methods

BAA assumed responsibility for the evaluation of First 5 Yuba programs after the grantees' evaluation plans had been prepared by a previous evaluation consultant, Davis Consultant Network. The plans included a set of mostly already-in-use tools (many of which had been developed by DCN), and data collection methods that First 5 and the grantees had agreed to use. In many cases, the tools collected both qualitative and quantitative data. While the tools were generally appropriate, we modified some of them—with grantee concurrence—to more closely match the activities of the projects. Because the evaluation tools were not used by more than one project but were unique to each project, the ability to evaluate common findings across projects is limited. Our previous recommendation to use additional evaluation tools that could have captured more robust and longer-term data was declined due to funding limitations.

The evaluation answers the following questions we generated that addresses grantees' unique project objectives.

First 5 Yuba	 Evaluation Questions for FY 2013-14	As Measured by
1,2,3 Grow Parent	How much did parents learn as a result of participating in this program? To what extent did children show increased skills in a range of developmental areas?	<ul style="list-style-type: none"> ▪ Family Survey ▪ Teaching Strategies GOLD assessment

* "Mini-grants are not included in this evaluation.



First 5 Yuba  Evaluation Questions for FY 2012-13		As Measured by
AmeriCorps Administration	To what extent did children show increased skills in a range of developmental areas?	<ul style="list-style-type: none"> Teaching Strategies GOLD assessment
Bring Me A Book (BMAB) - Yuba County	<p>To what extent did parents learn and use activities for improving their children's early literacy?</p> <p>To what extent did parents and other first teachers and preschool teachers learn from and express satisfaction with the workshops?</p> <p>How satisfied were classroom teachers with the BMAB program, and to what extent did their early literacy classroom resources and practices change?</p>	<ul style="list-style-type: none"> Parent survey First Teachers (Parents) Workshop Feedback Teachers Workshop Feedback Classroom Observation Form
The Depot Family Crisis Center, Children's Program	<p>To what extent did parents report learning and behaviors that promote early literacy and child health?</p> <p>To what extent did children show increased skills in a range of developmental areas?</p>	<ul style="list-style-type: none"> Linked Parent Survey ASQ (Ages & Stages) Infant ASQ Child
Gas Cards/ Vouchers for Special Needs- Medical/Dental Appointments	How many and what type of families benefitted who would otherwise have had difficulty keeping medical appointments?	Milestones report
Harmony Health Family Resource Centers	<p>To what extent did parents report learning and behaviors that promote early literacy and child health?</p> <p>To what extent did parents achieve the goals they identified at program enrollment?</p>	<ul style="list-style-type: none"> Parent Workshop Feedback Family Survey Family Development Matrix
Yuba County Library Literacy Program	To what extent did parents report learning and parenting behaviors that promote early literacy?	<ul style="list-style-type: none"> Parent Feedback Survey
Peach Tree Healthcare Eye Clinic	How many and what type of children benefitted who may not otherwise have received an eye examination?	Milestones report



First 5 Yuba  Evaluation Questions for FY 2012-13		As Measured by
Ponderosa Park Security/Fire Alarm & Sprinkler System/Grass Installation	To what extent have park facilities in Yuba County improved, and how many and what type of families and children have benefitted?	Milestones report
Olivehurst Public Utility District Aquatics Program	To what extent did children, including those with special needs, participate in the program and how did families hear about it?	<ul style="list-style-type: none"> Program Feedback Form
Recreational Scholarships	What type of programs or activities did children participate in and how satisfied were parents?	<ul style="list-style-type: none"> Program Feedback Form
School Readiness	<p>To what extent did parents and child care providers report learning to improve relationships with children?</p> <p>To what extent did parents achieve learning and positive behavioral goals that promote early childhood development and early literacy?</p> <p>How ready to enter kindergarten were children and to what extent had they accessed health services?</p>	<ul style="list-style-type: none"> Workshop Feedback Form Raising a Reader SR Program Family Survey Kindergarten Registration Family Survey

Data Analysis

BAA received raw data in hard copy from 17 different evaluation instruments from the funded projects over the course of the program year. The data were sent in quarterly batches to allow cleaning, coding and entry on a continuous basis.

The data were cleaned, coded and entered into Excel spreadsheets using standard data security measures. Data analysis was performed using IBM SPSS Version 21.0. Grantees were contacted when there were questions about data forms or accuracy issues and all were responsive to requests for clarification or follow-up.

The Evaluation Team and Acknowledgements

The evaluation team consisted of Barbara M. Aved, RN, PhD, MBA, Larry S. Meyers, PhD, Beth Shipley, MPH, and Elita L. Burmas, MA, representing a range of expertise in community and child health, early childhood development, and research and evaluation. BAA staff Michael Funakoshi provided research assistance and data entry. The consultants wish to thank the grantees for their participation in the evaluation process, and appreciate the collaboration with First 5 staff, particularly Karen Ewing and Claudia Contreras who translated some of the evaluation tools into Spanish. We also thank Ian Hadley of Prevent Child Abuse California who provided additional data results for two of the projects.

SECTION I.

PROGRAM-LEVEL EVALUATION FINDINGS AND RECOMMENDATIONS



County Overview

Yuba County is located in a relatively rural part of California’s northern Central Valley, along the Feather River, about 50 miles from Sacramento. About 21% of the county’s 73,439 residents live within the city limits of Marysville and Wheatland, another 20% live in other, smaller cities and towns while the balance, approximately 79%, live in unincorporated communities. Children age 0-5 make up 7,211 (9.8%) of the county’s population. An estimated 3%-4% of all children in the county live with grandparents who provide their primary care; and, about 15% live in households with a female head of house.

With an annualized (as of December 2014) unemployment rate of 10.5%—down from 12.2% at the same time last year but about one-and-a-half times higher than statewide—many Yuba County children and families struggle with economic as well as health-related challenges. These include low educational attainment, living in poverty, limited access to affordable child care, limited access to health care, and overall poor health.¹ Approximately one-third (32% or 2,285) of children age 0-5 were living in poverty in 2013 compared to 22% statewide. At the same time, Yuba County residents also enjoy living in a close, supportive community, a rural environment with relative access to more urban areas, geographic diversity, agricultural bounty, and expansive countryside.

Program Support

For the past 13 years, First 5 Yuba has played a vital role in building a cohesive, collaborative system of services for children and their families throughout the county. In FY 2013-14, programs served a total of 2,310 children (about 3% higher than the previous year), 1,186 parents or guardians (an increase of 2.2%), and 95 providers of services to young children or their families (about 16% fewer than the year before). These families resided in all areas of the county.

In FY 2013-14, First 5 Yuba expended a total of \$675,539 in programs in the following 4 First 5 result areas:

Family Functioning	449,451	66.5%
Child Development	28,639	4.2%
Child Health	153,562	22.7%
Systems of Care	43,887	6.5%
TOTAL	\$675,539	100.0%

¹ For greater detail, see *Identifying Priority Health Needs: Sutter and Yuba Counties Community Health Needs Assessment*, Barbara Aved Associates, September 30, 2013. available at <http://www.barbaraavedassociates.com>



A. Individual Project Findings and Recommendations



This section of the report provides project-level findings from 12 major grants along with conclusions and recommendations for improvement. The extent of each project's alignment with the Commission's *2011-2016 Strategic Plan*, and key indicators and population-based data most relevant to each project are also presented.



1, 2, 3 GROW PARENT

Project Purpose and Evaluation Design

The Camptonville Community Partnership offered a comprehensive range of early childhood enrichment programs and resources and referrals for parents in the rural community of Camptonville. The program components included the 1,2,3 Grow Parent Preschool Program three mornings a week during the school year for a minimum of 16 children age 0-5 and parent education classes. All participating children were screened for health insurance and immunization status and where needed referred for preventive services.

The Teaching Strategies GOLD[®] Assessment Tool,* along with the early childhood curriculum, was used by observers (AmeriCorps Members, funded through another FFY contract) to assess children's development at various time intervals. The tool addresses the domains of math, social-emotional and literacy and includes multiple objectives and dimensions under each domain. Parents also completed a Family Survey to provide feedback about their family's participation in the 1,2,3 Grow Parent Program.

Program Results

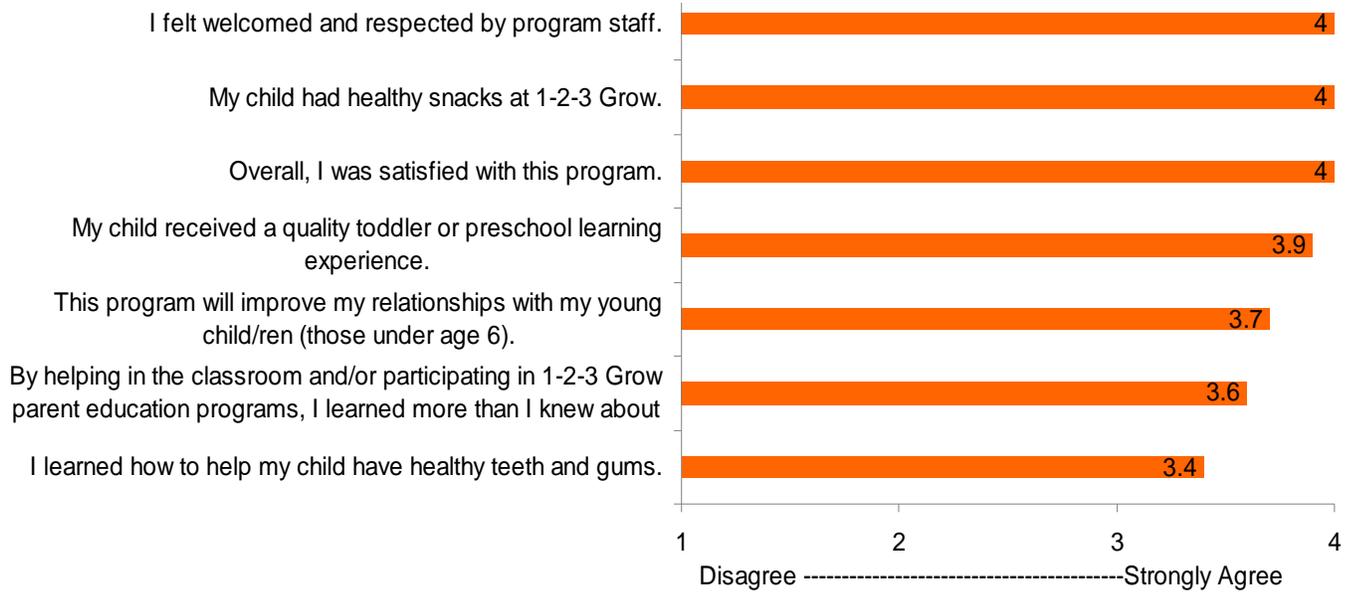
Based on the last half of 2014, the average number of days of programming per quarter for the infant/toddler classes was 21, and 18.5 days for preschool classes. Average daily attendance per quarter was 40 infants/toddlers and 92 preschoolers.

How much did parents learn as a result of participating in this program?

Parents were overwhelmingly positive and reported a great deal of satisfaction with the 1-2-3 Grow Program. They also believed their participation in the classroom provided more information than they'd been aware of about how children learn and grow (Figure 1 on the next page). All of them were unanimous in strongly agreeing that they felt welcomed and respected by the staff, that their child had healthy snacks, and that they were overall satisfied with the program (mean = 3.8 on a scale of 1 to 4 where 4 is most satisfied). Parents were also very pleased with the learning experience received by their children; they felt that the program improved their relationships with their young children, and that they learned more by helping/participating in the program themselves. They were satisfied with learning about dental care for their children as well though to a slightly lesser extent than the other areas of learning.

* The results from this assessment tool were provided by the Prevent Child Abuse California contractor.

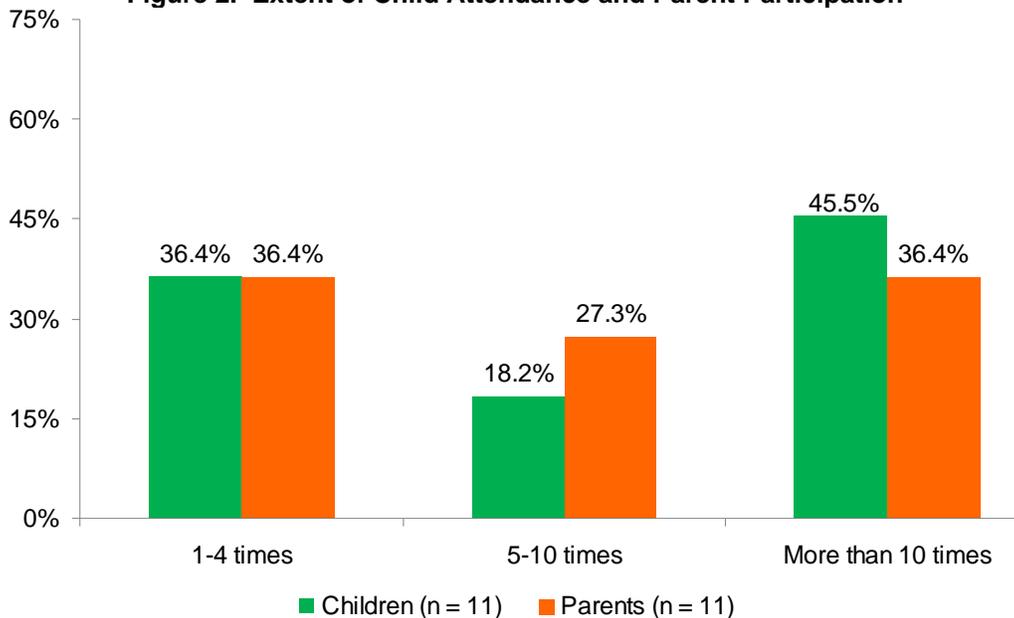
Figure 1. Parent Feedback About the Program



Means based on a scale of 1 to 4 where 4 is "strongly agree."

About half (46%) of the 11 parents responding reported their children attended the 1-2-3 Grow Program more than 10 times in the past three months. All of the parents helped out in the classroom during this time; 36% helped out up to 4 times and another 36% helped out more than 10 times (Figure 2). In addition, nearly three-quarters (73%) of the parents reported reading to or sharing books with their children almost daily or 3 to 4 times a week (18%), achieving one of the program goals for early literacy.

Figure 2. Extent of Child Attendance and Parent Participation



Examples of what parents liked best and learned most from the program, and the beneficial results they reported for their children, are shown in the chart below (Table 1) by frequency of mention. Their comments suggest these children are becoming well prepared for school success if parents continue to apply what they learned from the program. Some parents mentioned appreciating having "good" snacks as well as preschool teachers who spoke Spanish. Their suggestions for program improvement included having a separate day just for 4-5 year olds to prepare for kindergarten, reaching out more "to make more families attend," to have the sessions last a little longer, and "to attend to each child's independent educational needs."

Table 1. Parents' Report of Most Beneficial Outcomes From Program Participation

Children:

- Gaining independence to learn more control
- Learning social skills from interacting with other children
- Exhibiting more patience and acceptance of others during play with other children

Parents:

- Gaining knowledge about how to teach my child at home
- Children's brain development and the need for stimulation and challenge
- Learning new methods of more appropriate discipline
- Understanding more about healthier eating
- Learning new projects that can be done at home together (gardening, art)

To what extent did children show increased skills in a range of developmental areas?

GOLD[®] assessment observations were available for children in the areas of social-emotional development, math and literacy domains. Most of the data (provided by the Prevent Child Abuse California contractor) appear to be matched sets of children. As Table 2 shows, the percentage of children who met or exceeded the developmental expectations between the initial and last assessments improved for the literacy and social-emotional but not the math domain (similar to last year's findings). The PCAC contractor was not able to provide findings for the individual objectives under the 3 domains.

Table 2. Initial and Post GOLD[®] Assessment Results

Domain/ Objective		Initial Assessment			Last Assessment		
		% Below	% Meet	% Exceed	% Below	% Meet	% Exceed
		n=16			n=20		
Math	Use/Knowledge of:	31%	31%	38%	40%	40%	20%
Obj 1	Number concepts and operations						
Obj 2	Spatial relationships and shapes						
Obj 3	Comparisons and measurements						
Obj 4	Patterns						
		n=33			n=32		
Social-Emotional	Regulates/Establishes:	61%	27%	12%	32%	34%	34%
Obj 1	Emotions and behaviors						
Obj 2	Positive relationships						
Obj 3	Cooperative, constructive in groups						



Table continues on next page

		n=16			n=18		
Literacy	Demonstrates:	38%	38%	24%	22%	28%	50%
Obj 1	Phonological awareness						
Obj 2	Knowledge of alphabet						
Obj 3	Knowledge of print and its uses						
Obj 4	Comprehension of books/text						
Obj 5	Emergent writing skills						

Successes and Challenges

This school readiness project shared a number of examples of grantee successes as well as parent success stories over the course of the year. Having added a 3rd day to the weekly schedule has given the infant/toddlers 2 more hours a week where the classroom materials and activities more directly matched their developmental level. And, the preschoolers have their own day now to focus on science and art projects without interruptions from the younger age group. These projects have been immensely popular with both the children and the parents.

Particular examples of events that were meaningful to the agency as well as the community included several community gatherings sponsored over the course of the year, especially the Holiday Craft Faire where local businesses and craftspersons donated goods and various local clubs sold their wares. These kinds of events were said to demonstrate support and enhance interconnectedness of the community to enrich the lives of children and their families for the current as well as future generations—"the truest form of sustainability."

Parents also submitted written "stories" giving more detailed feedback about their family's experience in the program. A number of families remarked about the uniqueness of this early childhood education program ("none like it anywhere else") and how it helped prepare their children for school and provided a solid foundation and enthusiasm for learning. Some also commented on the value of the social skills the program taught and the self assurance their child gained as a result of participation. Parents also commented on the nutritious diets and one noted that she appreciated and valued the support of nutrition education messages from another source.

The major challenge staff encountered involved the physical infrastructure of the classroom and the fact that the portable classroom unit does not have its own bathroom. This has created many challenges for children, parents and staff in the area of potty training. Apparently there is no solution planned except for staff to continue to try to make this situation work as well as possible.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	① – support family resources centers
Improve family functioning	✓	① – programs that increase parent education and skills
Improve child development	✓	① – services that prepare children for school ② – programs that improve preschool quality ③ – programs that increase preschool availability
Improve the health of children	✓	① – programs that promote healthy eating and physical activity ② – programs that increase access to oral health services



Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The percent of children with a dental visit in the last 12 months.*

In FY 2013-14, 22.9% of children age 0-3 and 49.1% (down from 51.6% 2 years prior) of children age 4-5 with Medi-Cal in Yuba County made a dental visit within the past year, according to State Denti-Cal data. These proportions were lower than children statewide in these same age groups (27.3% and 64.2%, respectively).

- *The percent of 3-5 year olds enrolled in or who regularly attend pre-K programs.*

One-third (31%) of Yuba County parents reported in the 2011-12 California Health Interview Survey their children attended preschool or Head Start at least 10 hours a week, about double the proportion (15.5%) of children statewide. In 2012-13, enrollment in Early Head Start was 335 and in Head Start 1,138, according to Yuba County Head Start. The 2014-15 Children Now Scorecard shows 36% of Yuba County 3- and 4-year-olds attend preschool. The "demand" for children needing care (based on parents in the workforce) outstrips the available slots ("supply") for full-time preschool as well as infant/toddler care, according to the Child Care Planning Council of Yuba & Sutter Counties. The Council's needs assessment data found an undersupply of part-day preschool spaces in Yuba County even if every family who could afford to pay wanted their child to participate in a part-day preschool program.

Conclusions and Recommendations

A large majority of the parents who participated in this project increased their understanding of the importance of early literacy activities with their children and engaged in activities that promote school readiness, one of the outcome measures in the grantee's Evaluation Plan.

The results of the GOLD[®] assessment are intended to help preschool teachers focus on what matters most for children's success. Because the math domain again appears to be an area with less overall improvement, it is suggested that teachers examine how this part of the preschool curriculum (e.g., number concepts, comparisons and measurements, etc.) could be strengthened and work to make it stronger.

The project followed up on its plans to begin offering dental screening to children age 1-5 in 2014. Nine enrolled children were reported to have received a dental screening between July and December (no referrals were made).



AMERICORPS

Project Purpose and Evaluation Design

Harmony Health was contracted to coordinate placement of three AmeriCorps members as a part of the School Readiness/Prevent Child Abuse California Initiative. The AmeriCorps members were assigned to support the work of four FRCs in Yuba County. (Results for the Camptonville FRC site are described in the previous pages.) The members' scope of work included community outreach, preschool coaching (e.g., supporting young children in literacy and pre-math skills), family advocacy, volunteer coordination and linking families with events that combined fun and education. The total number of children reported by the project as having received school readiness activities and screened with the evaluation assessment tool during 2013 was 52.[‡]

The Teaching Strategies GOLD[®] Assessment Tool* was used by the AmeriCorps observers to evaluate children's development at various time intervals. The first assessment is done within the initial 5 hours of service and the second assessment is done after 35 hours of services have been provided. A third assessment over the course of a year is optional.

Program Results

To what extent did children show increased skills in a range of developmental areas?

This evaluation question was not able to be answered this year. GOLD[®] assessment data that AmeriCorps members serving at Harmony Health reported entering were not able to be found in the assessment system. According to the Prevent Child Abuse California contractor, it is possible that members could have entered observations or documentation which supports assessment levels without having actually selected the checkpoint scores associated, although Harmony Health indicates this was not the case. However, when explored further, the PCAC contractor reported they found no children entered in the system, nor any documentation, checkpoints or assessments, and no orphaned data or observations.

[‡] AmeriCorps is on a different calendar than other projects, September through August.

* The results from this assessment tool were provided by the Prevent Child Abuse California contractor.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	<ul style="list-style-type: none"> ❶ – support family resources centers ❷ – collaboration with partners and services providers
Improve family functioning	✓	<ul style="list-style-type: none"> ❶ – programs that increase parent education and skills ❷ – support free community events for families
Improve child development	✓	<ul style="list-style-type: none"> ❶ – services that prepare children for school ❷ – programs that improve preschool quality ❸ – programs that increase preschool availability
Improve the health of children	✓	<ul style="list-style-type: none"> ❶ – programs that promote healthy eating and physical activity ❷ – programs that increase access to oral health services

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The percent of young children who are read to often.*

According to the 2011-12 California Health Interview Survey (CHIS), 43.0% of Yuba County parents of children 0-5 (compared to 62.2% statewide) reported reading to their children every day. However, the proportion in the county who read 3-6 days of the week, 52.3%, was double that amount of weekly reading among parents statewide.

- *The percent of children with a dental visit in the last 12 months.*

In FY 2013-14, 22.9% of children age 0-3 and 49.1% (down from 51.6% 2 years prior) of children age 4-5 with Medi-Cal in Yuba County made a dental visit within the past year, according to State Denti-Cal data. These proportions were lower than children statewide in these same age groups (27.3% and 64.2%, respectively).

Conclusions and Recommendations

The issue of "missing data" needs to be resolved between FFY, the grantee and the PCAC contractor in order to be able to provide evaluation data about the extent to which children served by Harmony Health FRCs showed improvement in the 3 developmental domains assessed by the GOLD® screening. The multiple communications between the grantee and the PCAC contractor to "find" the data were not successfully resolved.



BRING ME A BOOK (BMAB) - YUBA COUNTY

Project Purpose and Evaluation Design

The Bring Me a Book (BMAB) project is designed to improve children's early literacy and involves four components: enhancing a children's library and providing take home books, and workshops for parents and Head Start classroom teachers. A Classroom Observation and pre/post Parent Survey forms were developed to capture findings about a variety of learning goals. Additionally, feedback forms were developed for Teachers who implemented the BMAB program in their preschool programs, and First Teachers (parents and childcare providers) who attended BMAB trainings.

Program Results

To what extent did parents and other first teachers and preschool teachers learn from and express satisfaction with the workshops?

Most of the 62 parent/first teacher participants (81%) reported being at the workshop to learn about their child or children in their families. A few of them also stated that they were there to learn about children they cared for professionally (3%) or "other" reason (5%). About 82% reported that the children were of preschool age between 3 and 5 years old (Figures 3 and 4).

Figure 3. Purpose for Attending the Workshop

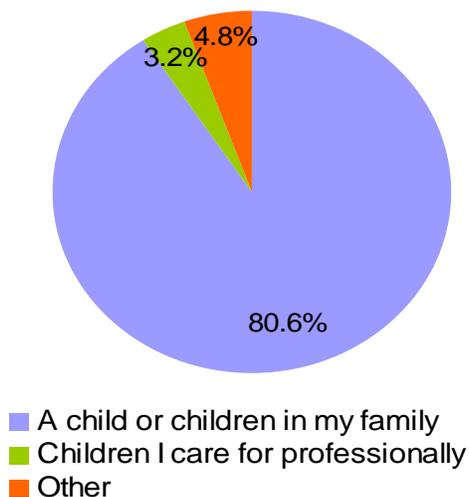
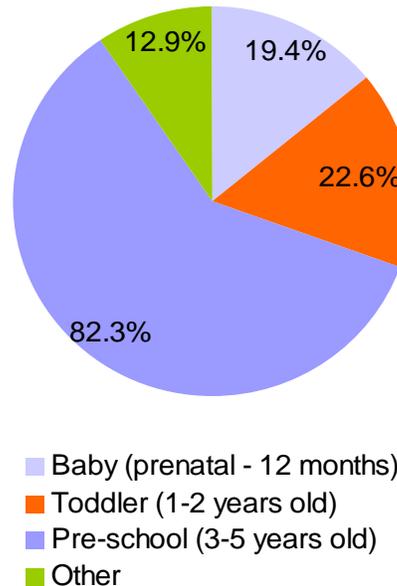
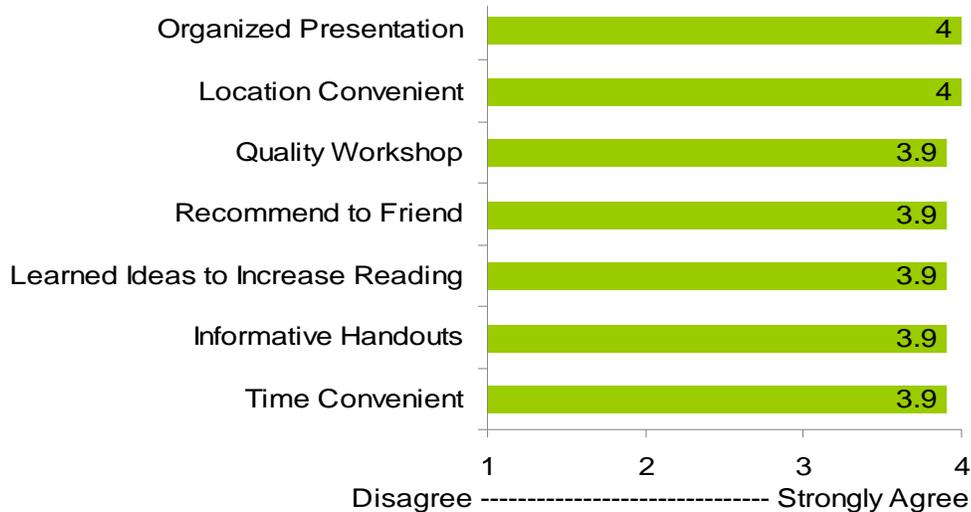


Figure 4. Age of Children Benefiting from the Program



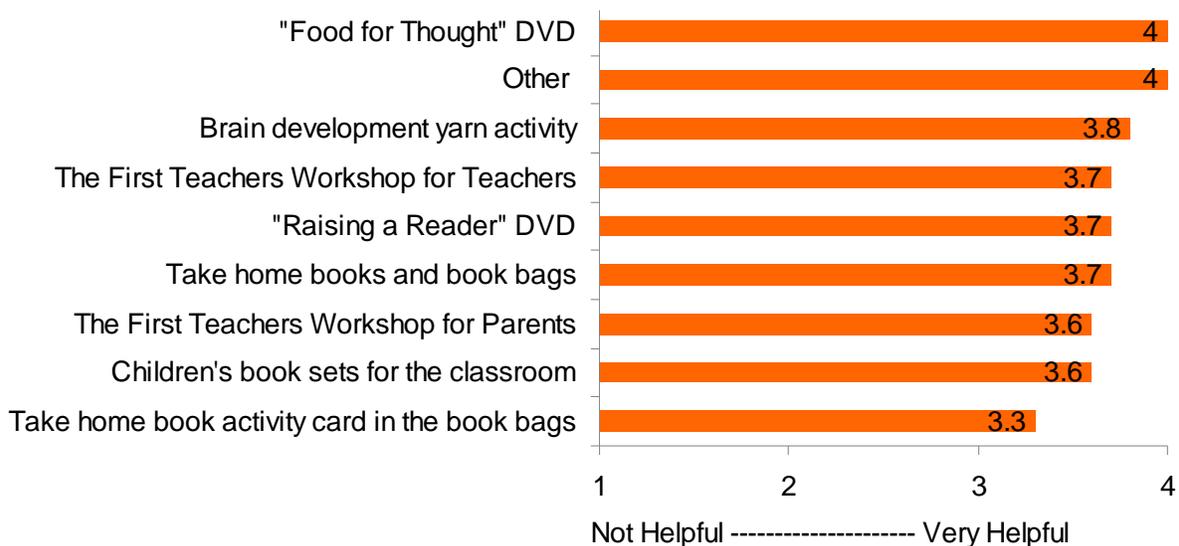
The workshop participants were virtually uniformly in agreement that the workshop was extremely valuable and informative for them across all of the evaluation areas (Figure 5). Given the relatively large sample size, the strength of this endorsement is very notable.

Figure 5. Participants Level of Agreement About Workshop Features



There were 8 teachers who completed the BMAB Teachers Workshop Feedback questionnaires after the program. Of the 6 who answered the question about the value of the workshop, all of them responded that the workshop was useful in their program. The respondents felt that all the pieces of the toolbox were helpful in increasing positive behavior at home and in the classroom (mean = 3.71). Several were judged as very helpful such as the "Food for Thought" DVD, yarn activity (Figure 6).

Figure 6. Participants Level of Agreement About Usefulness of Toolbox



When asked how often they engaged in certain behaviors in their classrooms, the majority of the teachers reported that they performed the behaviors every day or on most days (Table 3).

Table 3. Frequency of Teacher Behaviors After Workshop

Behavior	<i>n</i>	%
<i>In my classroom...</i>		
<i>I read aloud to the class.</i>		
Sometimes	-	-
At Least Weekly	-	-
Most Days	2	25.0
Everyday	6	75.0
<i>Children have opportunities to be read to in small groups.</i>		
Sometimes	-	-
At Least Weekly	1	12.5
Most Days	2	25.0
Everyday	5	62.5
<i>We sing songs.</i>		
Sometimes	-	-
At Least Weekly	-	-
Most Days	-	-
Everyday	8	100
<i>I ask questions about what we are reading.</i>		
Sometimes	-	-
At Least Weekly	-	-
Most Days	1	12.5
Everyday	7	87.5
<i>We play with rhymes.</i>		
Sometimes	-	-
At Least Weekly	1	12.5
Most Days	1	12.5
Everyday	6	75.0

To what extent did parents learn and use activities for improving their children's early literacy?

This year both pre- and post-surveys regarding parent learning were available and the sample size was large enough for analysis. Some of the findings are statistically significant, and Table 4 on the next page displays the results. There were no significant differences between the pretest and posttest on what the children did during the day. More than 80% of the children sang songs most days, close to half acted out songs, a little more than half pretended to read out loud, and more than half made up words/rhymes (parents could check all that applied on the form). At the pretest, approximately 72% of the children engaged in 2 or more of the activities; at the posttest, approximately 74% checked more than 1 activity.



There were also no significant differences between the two survey periods on what the children did when reading. When reading, between two-thirds and three-quarters of the children talked about the book, somewhat less than two-thirds asked questions about the book, a little more than half were animated in some way, and a little less than half of the children pretended to read to the parents. At the pretest, approximately 64% of the children engaged in 2 or more of the activities compared to 69% at the posttest.

For both the pretest and posttest, after reading, more than 80% of the children wanted more and a little less than half liked to talk about what was just read. There was significant pretest-posttest difference regarding drawing pictures. At the pretest, about 14% liked to draw pictures related to the story; a significantly ($p < .05$) greater proportion of them (26%) liked to do so at the posttest. At the pretest, approximately 41% of the children engaged in 2 or more of the activities; at the posttest, approximately 44% checked more than 1 activity

For both the pretest and posttest on the issue of the favorite part of reading to their children, about half felt that it was the child being able to sit for 15 minutes and a third felt that it was the physical contact with the child. There were significant pretest-posttest differences on 2 favorite parts of reading to their children that are important; these are marked in red text in the table on the next page. First, 44% indicated at the pretest that their favorite part was the focus on reading; this increased significantly ($p < .05$) at the posttest to about 58%. Second, 73% indicated at the pretest that their favorite part was teaching their child to read; this decreased significantly ($p < .05$) at the posttest to 59%. At the pretest, approximately 56% of the children engaged in 2 or more of the activities; at the posttest, approximately 51% checked more 1 one activity

For both the pretest and posttest on the issue of the benefits of interacting with their children, about three-quarters felt that it would help the children learn language and more than half felt that it enhances brain development. There were significant pretest-posttest differences on 2 effects of interacting with their children. First, 83% indicated at the pretest that interacting would help the children learn to read; this decreased significantly ($p < .05$) at the posttest to 68%. Second, 77% indicated at the pretest that interacting would facilitate the child transitioning to school; this decreased significantly ($p < .05$) at the posttest to 60%. At the pretest, approximately 77% of the children engaged in 2 or more of the activities; at the posttest, approximately 62% checked more than 1 activity

Table 4. Parents' Observations About Early Literacy Activities, Pretest (n=78)

Survey Question	Pre		Post	
	n	% ^a	n	% ^a
<i>Most days, I notice my child:</i>				
Singing songs	66	84.6	63	80.8
Acting out songs	35	44.9	38	48.7
Pretending to read out loud	44	56.4	47	60.3
Making up new words, rhymes, songs or word games	40	51.3	50	64.1
Did not mark any	1	1.3	1	1.3
<i>When we are reading my child likes to:</i>				
Talk about the book during our reading time	51	65.4	55	70.5
Ask questions as we are reading	45	57.7	51	65.4
Make sounds, points to letters and pictures	44	56.4	43	55.1
Pretends to read to me	37	47.4	34	43.6
Does not apply	7	9.0	2	2.6

Table continues on next page



<i>After we read books my child:</i>				
Wants more books read to him/her	64	82.1	67	85.9
Likes to talk about the books read	38	48.7	36	46.2
Likes to draw a picture related to the story*	11	14.1	20	25.6
Connects experiences to books that have been read ^b	-	-	0	-
Other	3	3.8	0	-
Does not apply*	7	9.0	21	26.9
<i>My favorite part of reading to my child is:</i>				
That my child will sit for 15 minutes or more to listen to a story	36	46.2	39	50.0
Very focused on what we are reading*	34	43.6	45	57.7
That she/he is on my lap or touching me	26	33.3	25	32.1
That I feel great I'm teaching how fun it is to learn to read*	57	73.1	46	59.0
Did not mark any	0	0	8	10.3
<i>I think reading aloud, playing, singing and talking with my young child can:</i>				
Help my child learn language	62	79.5	56	71.8
Prepare my child to learn to read*	65	83.3	53	67.9
Help my child do well when he/she starts school*	60	76.9	47	60.3
Affects how my child's brain is developing in preparing for school	49	62.8	42	53.8
Other	3	3.8	2	2.6
Did not mark any	1	1.3	8	10.3

^aPercentages may not add up to 100% as respondents were allowed to check all that applied.

^bThis question was not asked on pretest.

* $p < .05$.

In addition, parents responded to questions about the frequency with which they engaged in early literacy activities at home. These findings are shown in Table 5 on the next page. Almost a third of the respondents (32%) on the pretest indicated that they like to read books as a family 3 to 4 times a week and about 43% said that they like to do so on a daily basis. On the posttest, over a third (36%) said that they like to read books as a family 3 to 4 times and almost half (47%) of the respondents said that they like to do so on a daily basis. A repeated measures analysis of variance showed no statistical difference ($p < .05$) between the pre and post responses when the frequency categories were coded from 1 ("about once a month") to 4 ("daily").*

Over half of the parents (60%) on the pretest and almost two-thirds (61%) on the posttest said that they ask questions about what they are reading all the time. A repeated measures analysis of variance showed no statistical difference ($p < .05$) between the pre and post responses to this question (the frequency categories were coded from 1 ("never") to 4 ("all the time").

Parents also described what their child usually did after the parent had finished reading the book. Most often, parents said, children liked to "re-read" the story back to the parent, ask to have the book read to them again, make up his/her own story about the book, act it out, and bring up book events in real life events.

* A relatively large number of matched surveys allowed for a more sensitive evaluation of any change on this and the subsequent question that might have resulted from participating in the program.

Table 5. Family Reading Experience at Home (n=72)

Survey Question	Pre		Post	
	n	%	n	%
<i>At home our family likes to read books together:</i>				
About once a month	2	2.8	2	2.8
1 to 2 times a week	16	22.2	9	12.5
3 to 4 times a week	23	31.9	26	36.1
Daily	31	43.1	35	48.6
<i>When we read books I ask questions about what we are reading:</i>				
Does not apply	0	-	0	-
Never	0	-	0	-
Rarely	4	5.4	1	1.4
Sometimes	26	35.1	28	37.8
All the time	44	59.5	45	60.8

Parents described a number of effects they felt they were teaching their child and what their child was learning when they or a family member read to him or her (Table 6).

Table 6. Parent Perceptions About the Value of Reading to Their Child

- Better language skills
- Learning how to recognize words and build a vocabulary
- Learning new facts
- Increased use of imagination
- More capacity for concentration
- Learning patience
- Learning about things that happen in the world
- Motivation to learn more
- Learning that family time is important
- Understanding that reading is better than watching TV
- Teaching the love of books and reading (for people of all ages)

How satisfied were classroom teachers with the BMAB program, and to what extent did their early literacy classroom resources and practices change?

Bookcases pre-loaded with specific children's books were made available to a number of preschool, Head Start and Early Head Start classrooms in Yuba County such as Olivehurst Head Start, Kynoch Preschool and Yuba College Child Development Center. Classroom observers recorded baseline information about the classroom environment *before* the bookcases were delivered, and recorded

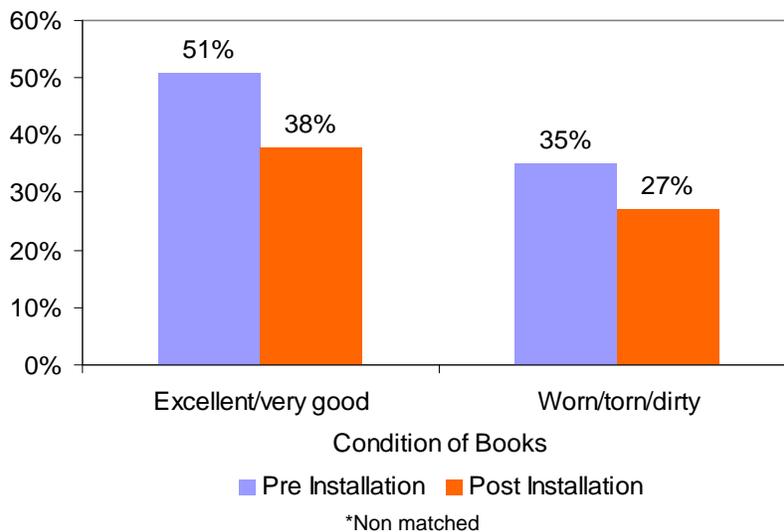


follow-up information about these resources and how they were used and contributed to new activities or literacy practices in the classrooms about 6 months *after* the bookcases were installed.

We received a total of 9 completed "pre" and 13 completed "post" observation forms. However, because there were no *matched* pre/post observation sets among them, we were not able to note the changes the tool was designed to capture. Consequently, the results are reported for both groups separately.

Prior to new bookcases being delivered, 8 teachers reported there were a total of 468 books in the existing classroom bookcases. Following the installation, 13 teachers reported having 476 books in bookcases. The teachers were also asked to estimate the condition of the classroom books both pre- and post installation. (Some of them placed check marks next to the response choices rather than providing actual estimates as requested so their responses could not be counted.) The responses are questionable as they suggest *more* books after installation were in "worn, torn, or dirty" condition than prior to installation, and *fewer* books after installation were in "excellent or very good" condition (Figure 7).

Figure 7. Condition of Classroom Books Before and After Installation of New Bookcases*



After installation of the new bookcases, all of the teachers reported placement of the bookcase was visible, accessible to children, and adjacent to a comfy reading area. With 2 exceptions, this had also been the case reported for the classrooms prior to receiving the new bookcases. All of the respondents (both pre and post periods) verified that there was a designated reading space with children's chairs or pillows in the classroom. It was clear that children actively responded to all available books and stories both before the new bookcases were installed and following. Drawing pictures from stories told in the books, taking turns "reading" and listening, and touching and examining illustrations in books were among the activities reported as being visible in the classroom related to the books and children's reaction to the activities.

Successes and Challenges

The agency did not provide any grantee/provider or family/child success stories or challenges this year for us to draw upon for this evaluation report.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care		
Improve family functioning	✓	❶ – programs that increase parent education and skills
Improve child development	✓	❶ – services that prepare children for school
Improve the health of children		

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The percentage of young children who are read to often.*

According to the 2011-12 California Health Interview Survey (CHIS), 43.0% of Yuba County parents of children 0-5 (compared to 62.2% statewide) reported reading to their children every day. However, the proportion who read 3-6 days of the week, 52.3%, was double that amount of weekly reading among parents statewide.

- *The percentage of 3rd graders who read at grade level.*

In Yuba County, 47% of 3rd grade students (compared to 46% of California 3rd graders) were reported reading at grade level in 2013, ranking 15th best among the state's 58 counties according to California Department of Education Standardized Testing and Reporting (STAR) Results.

- *The percent of mothers who completed high school or its equivalency.*

Maternal education level has an impact on many measures of child well being. For instance, young children are more likely to be read to if their mothers have completed higher levels of education, and children of mothers with high levels of education stay in school longer. In 2010, the last year for which this data is available, 78.0% of mothers giving birth in Yuba County (compared to 81.8% statewide) had a HS diploma or GED.

Conclusions and Recommendations

The descriptions parents gave of the effects of reading to their children clearly show these parents understood the value of early literacy activities and the important role they played in promoting it in their homes. They felt there was value in being the first teachers of their children as well as the bonding these home activities encouraged. What should be investigated by program staff, however, are the seemingly contradictory negative findings from some of the survey posttest questions. Why, for instance, did parents agree *less* after participating in the workshop that interacting (reading, singing, talking) with their child would help the child do well when they start school or prepare the child to learn to read? And, why would parents report feeling *less* great in the post-survey about the fun it was to teach their child to read?

The project was challenged again in not being able to submit matched pre/post evaluation forms for the bookcase component of the program for FFY to learn more about the benefit of this resource for the Head Start sites. It made it difficult for us to interpret why a lower proportion of the books were described as excellent/very good after the bookcases had been installed than before.



THE DEPOT FAMILY CRISIS CENTER CHILDREN'S PROGRAM

Project Purpose and Evaluation Design

The Salvation Army Depot Family Crisis Center, a residential treatment program, provided a range of mental health, child care, parenting classes, and health access services for children ages 0-5 and their parents who were enrolled in the program. Parents completed surveys at the time of enrollment to provide baseline information about certain knowledge, behaviors and goals, and again 90-180 days later at program exit to assess the extent of change in those areas. Children in the program were screened using the Ages & Stages Questionnaire (ASQ). The ASQ is an empirically valid, reliable, and culturally sensitive tool used by observers to assess infants and young children for developmental delays during the first 5 years of life. Observers' ratings indicate areas of concern in the developmental domains of communication, gross motor, fine motor, problem solving, and social-emotional development.

Program Results

Various speakers offered a total of 33 parenting classes on child development and other parenting topics to a total of 15 enrolled parents. The project also reported providing counseling services to 12 individuals and 12 counseling sessions for group counseling for a total of 468 hours of therapeutic services.

The 15 parents and their children (13 of whom were ages 0-5) also participated in 6 different supervised family outings and activities (off premises) such as visiting a pumpkin patch which, according to parent feedback, was very meaningful to and much appreciated by the families. Nearly all of the parents contributed to the 46 reported volunteer hours in either the child care program or on the onsite and various outings.

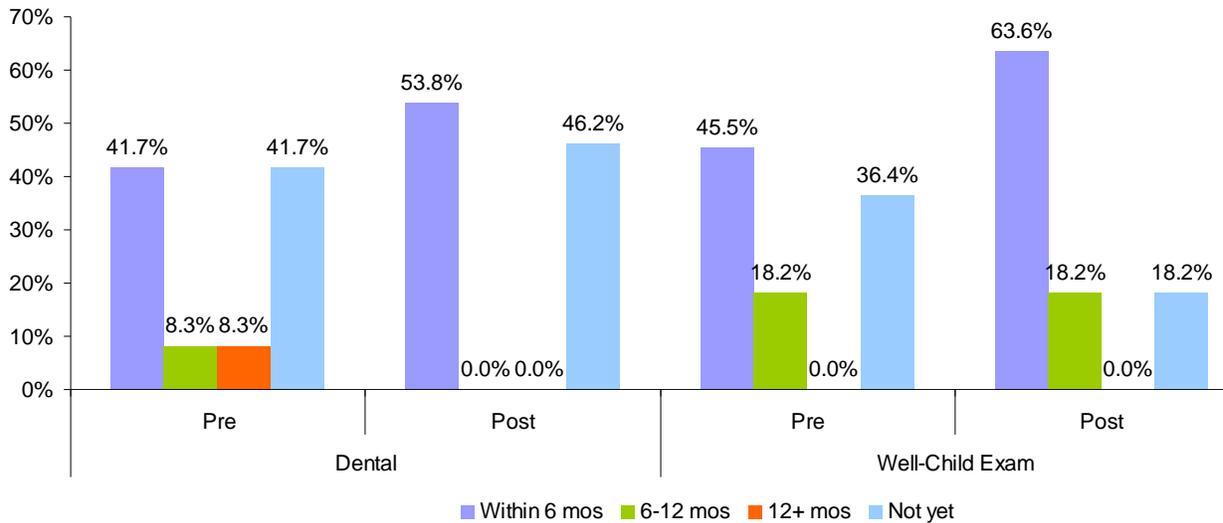
Very few of the 10 parents who provided evaluation information responded to the question about custody. One parent said that he/she had custody of his/her own children at the time of the initial survey, and 5 said that they had custody on the post survey

To what extent did parents report learning and behaviors that promote child health and early literacy?

To promote awareness and track utilization, parents were asked to report their child(ren)'s (under age 6) last *dental* and *well-child* visits, if they had had one. There were 10 parents who reported on a total of 12 children (some parents had more than one child) regarding dental visits on the pretest and then on 13 children on the posttest. These 10 parents also reported on 11 children regarding well-child visits for the pretest and posttest.

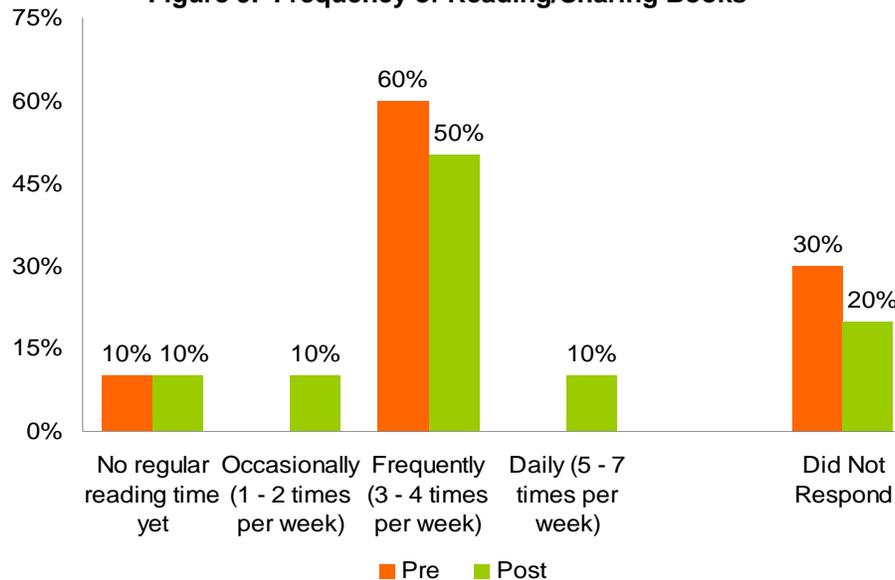
As Figure 8 shows, on the pretest 50% of the children had a dental visit in the prior 12 months and about 42% of the children had not had a visit yet. On the posttest, just over half (54%) of the children had a dental visit in the last 12 months but almost half (46%) still had not had a dental visit. For the well-child visits, parents on the pretest reported that almost half (46%) of the children had a well-child visit in the prior 6 months and a little over a third (36%) had not had a visit yet. On the posttest, almost two-thirds (64%) of the children had a well-child visit within the prior 6 months and less than 20% had not been to a well-child visit yet.

Figure 8. Children's (Age 6 and Under) Last Dental and Well-Child Visits,



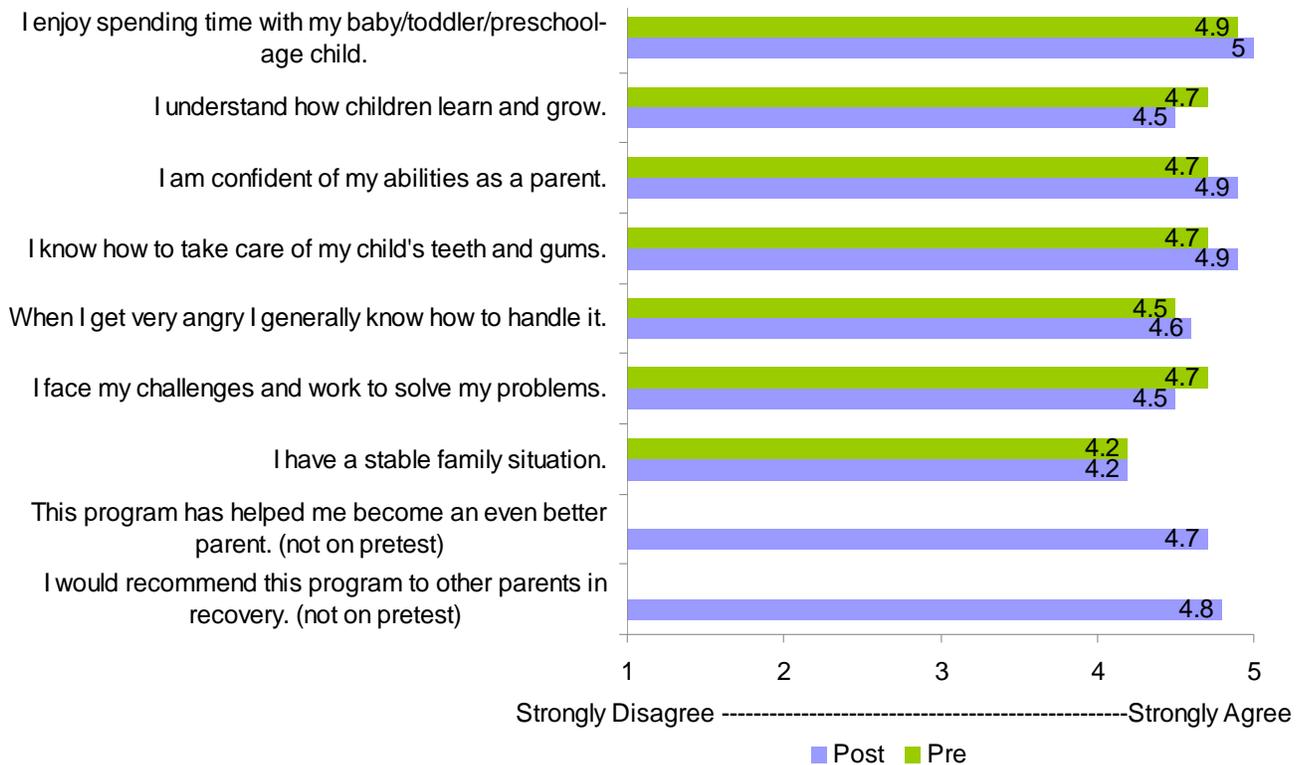
The parents were also asked about whether they or another household member shared or read books with the children. At the time of the pretest, parents indicated that 10% did not schedule such time and about two-thirds did so 3 to 4 times a week. No one at the pretest reported that they read or shared books daily. On the posttest, 10% still did not have any regular reading time yet, another 10% reported they did so occasionally, and half did so frequently. Ten percent reported that they now shared or read books on a daily basis.

Figure 9. Frequency of Reading/Sharing Books



The survey also asked parents to self-evaluate on a number of diverse parenting areas. Overall, they agreed with the statements relatively strongly at the pretest, and there was little room for improvement at the posttest; thus, no statistically significant differences between pretest and posttest were observed ($p > .05$). Parenting issues with the strongest agreement ratings concerned enjoying spending time with their young children, being confident in their abilities as parents, and knowing how to take care of the children's teeth and gums. The weakest area of agreement, although still quite positive, was having a stable family situation (Figure 10).

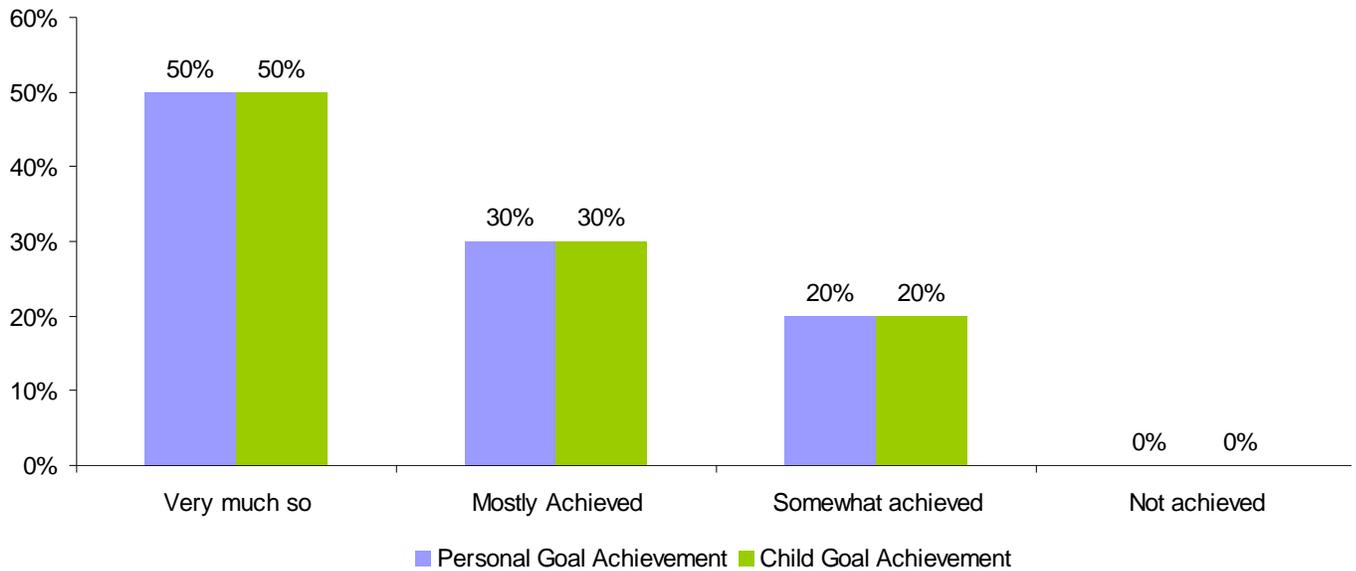
Figure 10. Parents' Level of Agreement About Various Areas of Parenting, at Program Start



At the time they enrolled in the recovery program, as well as at program exit (for those who completed post-surveys), parents stated their goals and hopes for themselves as a parent was "to be a better parent." They expressed this as, for example, "becoming more tolerant and patient," "to be happy and strong," and "to stay clean and sober and take care of my family." In terms of goals and hopes for their children, the parents' pretest responses focused on growth and learning specific behaviors whereas the posttest responses had to do with improving parent-child interaction. When asked at program exit to think of the progress that had occurred on those goals, of the 10 parents who provided posttest information, 80% felt that their goal as well as the goal they had for their children were very much or mostly achieved (Figure 11).



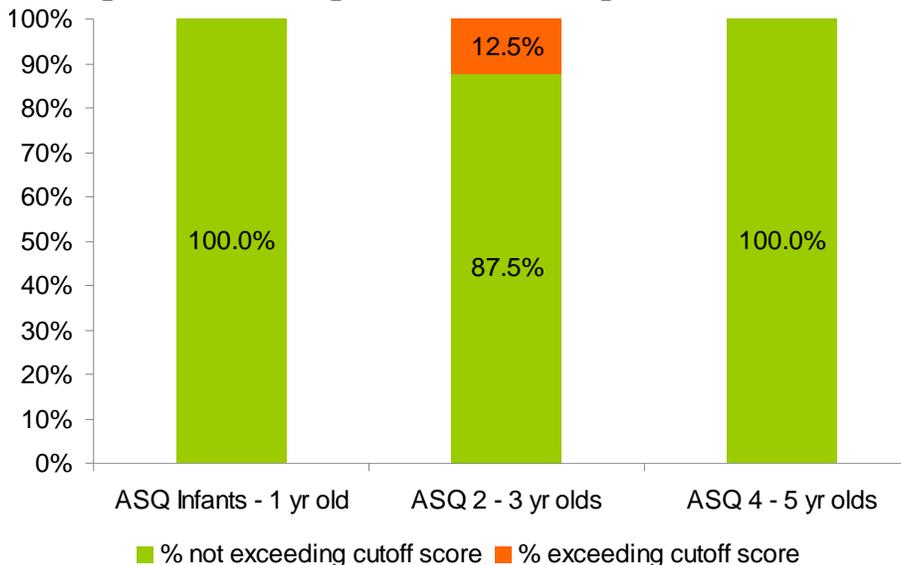
Figure 11. Extent to Which Parents Reported Goals for Self and Child Were Achieved, Post-Survey



To what extent did children show increased skills in a range of developmental areas?

The project reported screening 18 children ages 0-5 using the ASQ tool which identifies children at risk for developmental or social-emotional delay and assessing the possible need for further mental health evaluation. Different cutoff scores were established for different age groups. Children who exceeded the cutoff score were to be referred for further mental health evaluation after considering a set of other factors. Five of the surveys were from parents of "Infants - 1 year old" children and none met the cutoff of 45 points. Eight of the surveys were from the "2 - 3 years old" age group and 1 child exceeded the cutoff score of 50 for this age group (Figure 12). The remaining 5 surveys were from the "4 - 5 years old" age group and none in this age group reached the cutoff score of 70.

Figure 12. Percentage of Children Meeting ASQ Cutoff Score



Note: Not meeting the cutoff score indicates no further evaluation of the child is needed.



Successes and Challenges

The program reported success in helping parents to learn about and use community-based health and social services for themselves and their children. Staff noted that the family outings, which for some parents was "a different way of life," seemed to give parents more opportunity to think about how life can be when they are sober and drug free. Several of the parents described in detail how "amazing" it was to spend time with their child at the pumpkin farm outing "with so much joy and warmth in [my] heart' from the experience and "with memories that will last a life time." No grantee/project challenges or successes were noted by staff this year.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	② – collaboration with partners and service providers
Improve family functioning	✓	① – programs that increase parent education and skills ② – support free community events for families ③ – programs that support child and parent mental health
Improve child development	✓	① – programs that prepare children for school ② – programs that improve childcare/preschool quality ③ – programs that increase childcare/preschool availability
Improve the health of children		

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The rate of births to mothers aged 15-19.*

In 2010-12, the birth rate for adolescents aged 15-19 in Yuba County was 41.1 (down from 47.6 in 2009-11) compared to 28.3 (down from 31.5) in California, a county ranking of 49th worst of 58 counties.

- *Prevalence of emotional or mental disturbance among children.*

The prevalence of "serious emotional disturbance" and "serious mental illness" among Yuba County children age 0-5, according to California Department of Mental Health estimates for needed services, is 8.12%. The figure rises to 8.97% for those at <200% federal poverty level. These proportions are very similar to statewide averages for this age group. The estimate of need for mental health services for youth 0-17 in Yuba County is 7.98% of the total population according to the 2014-1017 California Child and Family Services Review.

- *The percent of reports of suspected and substantiated child abuse and neglect cases.*

In 2013-14, 127 (20.8%) of the 612 allegations of abuse/neglect among Yuba County children ages 0-5 were substantiated as reported by UC Berkeley California Child Welfare Indicators

Project. General neglect was the most commonly reported type of substantiated charge, at 67.5% of the allegations.

- *The percent of children with no recurrence of maltreatment*

Of all Yuba County children ages 0-5 who were victims of a substantiated maltreatment allegation during a 6-month period in 2013-14, 88.0% of <age 1, 96.0% of 1-2 year-olds, and 91.7% of 3-5 year-olds were not victims of another substantiated maltreatment allegation within the next 6 months. The national standard for this measure is 94.6%.

- *The number of domestic violence-related calls for assistance.*

According to the Yuba County Children's Council, domestic violence is the number one reason for homelessness in women and children, and is the leading cause of emergency room visits for women in the U.S. Data reported to the California Department of Justice show there were 428 calls reported for domestic violence assistance in Yuba County in 2013. More than 1 in 5 (22%) of the calls involved some type of weapon. Younger women, 18-24 years of age, were significantly more likely to be victims of physical intimate partner violence than women in other age groups.

Conclusions and Recommendations

This residential treatment program provided a range of beneficial support services for parents of young children, and the funding from FFY has enabled them to expand mental health as well as early childhood services. The parents who participated expressed a great deal of satisfaction and credit the program with learning positive parenting behaviors and setting goals for closer parent-child interactions and getting their children back.



GAS CARDS FOR SPECIAL NEEDS-MEDICAL/DENTAL APPOINTMENTS

Project Purpose and Evaluation Design

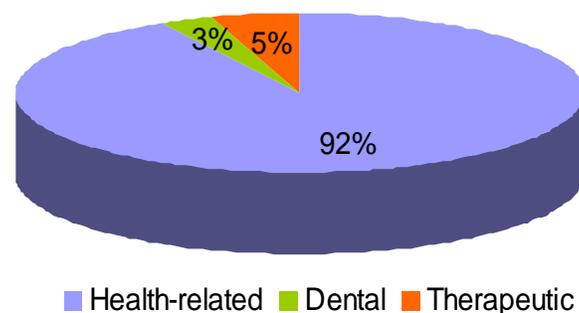
The Yuba County Office of Education (YCOE) provided gas cards or vouchers to families who had to drive out of county to receive specialty medical care for their child with special needs. All of the FFY grant dollars went directly for the gas cards or vouchers as YCOE covered the administrative costs. The program outreached to targeted agencies, programs and hospitals in Yuba County that serve these families to increase awareness of the opportunity for referrals to the program.

Program Results

How many and what type of families benefitted who would otherwise have had difficulty keeping medical appointments?

The program distributed 181 vouchers or gas cards for special needs children, all of whom were screened and had some form of private or public health insurance coverage. Appointments for health-related issues such as prematurity, burns, epilepsy, diabetes, club foot, and brain disorders made up the greatest (92%) use of gas cards, followed by therapeutic services (speech and language) and dental services (Figure 13). Dental services were described primarily as being needed for children with extensive tooth decay that required oral surgery and sedation.

Figure 13. Types of Services Families Accessed Using Gas Cards



Successes and Challenges

Families expressed great appreciation for the assistance and the relationships staff built with them, particularly in cases where the family needed on-going medical support available only out of town (Sacramento or beyond). The program expects to establish linkages with other medical centers (e.g., UC Davis) in the coming year to create a referral process for families. One of the ongoing challenges noted and described as partially resolved was finding a resource for communicating with families who did not speak English.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	③ – transportation options to increase access to services ④ – services for children with disabilities and their families
Improve family functioning		
Improve child development		
Improve the health of children		

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The percent of children with some form of health insurance.*

The 2011-12 California Health Information Survey shows that 98%--about the same proportion as statewide—of children 0-5 are insured either through their families' employer- based coverage or through Medi-Cal or another public program. However, children in the county have lower rates of employment-based coverage and correspondingly higher rates of Medi-Cal coverage.

- *The proportion of children with special health care needs and other disabilities.*

According to 2009-11 American Community Survey data, Yuba County had a higher rate of children with major disabilities—including hearing, vision, cognitive and ambulatory ability—than children statewide, 3.8 vs. 3.0. The percentage of children 0-5 who comprise the total special education enrollment in Yuba County was 10% (compared to 12% statewide) in 2009-10, according to the California Department of Education.

Conclusions and Recommendations

The gas card program has been an essential resource for supporting families who would otherwise be challenged in accessing specialty medical care not locally available for their child. The program is well received by eligible participants, and continued to increase the number of special needs children who were able to access health care.



Harmony Health Family Resource Centers

Project Purpose and Evaluation Design

Harmony Health FRCs, a long-standing safety net community provider of medical and a range of health education and support services to families, was funded to offer support services for children ages 0-5 and their families at three Family Resource Centers—Harmony Health, Ella and Cedar Lane—with priority for the Cedar Lane, Ella and Linda School catchment areas.

To assess the extent of parent learning and adoption of desired parenting behaviors, parents served through this project completed a pre/post Family Survey at enrollment in the FRC and again at the time of follow-up. The parents also completed Workshop Feedback forms for assessing knowledge gain for the various parent education classes they attended. The workshops included topics such as information about breastfeeding, sensory play and oral hygiene. New this year was a One-Time Workshop Feedback form FFY developed for a parent workshop that was delivered in one session. The project also used its own FRC Quick Survey which it administered periodically and reviewed to gain more immediate feedback about parents' satisfaction with the workshops.

Also new this year, Harmony Health, along with many FRCs statewide, began to participate in the Family Development Matrix (FDM)/Pathway Project. This project facilitates participation by the family and the worker in case management and measures over time the progress of family outcomes and the effectiveness of interventions. The FDM is especially appropriate, but not exclusive, for use with families that are referred for risk of child abuse and/or neglect. Assessment data from the FDM tool were entered by project staff into an internet-based system, for the purpose of goal setting and assessing family strengths and issues of concerns.

Program Results

To what extent did parents report learning and behaviors that promote early literacy and child health?

Because we received only a couple of feedback forms for some workshops the grantee delivered, the decision was made to report on only the ones with a minimum sample size of 4 attendees. Tables 7-18 below display the results of these 12 workshops. Each had slightly different learning objectives, so the feedback form was modified for each workshop. The titles of the tables are those given by the grantee to the individual workshops. A graph (Figure 14) follows these tables that shows the results for the 3 questions that were common across all 12 forms.

The "ITEW in Collaboration with Empowering Mom's Group" workshop was evaluated extremely favorably on all dimensions. Respondents unanimously marked "strongly agree" on all the measures (Table 7 on the next page).

Table 7. ITEW in Collaboration with Empowering Mom's Group

Survey Question	n	M	SD
I learned ideas that will help with relationship with child.	5	5.0	-
I learned at this workshop it is fun to do activities with preschool age children.	5	5.0	-
I learned that this activity helps my child with color recognition.	4	5.0	-
I learned that this activity helps with fine motor skills.	5	5.0	-
I learned interacting with other children promotes social competency for my child.	5	5.0	-
I would recommend these workshops to a friend.	5	5.0	-
Overall Mean	5	5.0	-

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The AmeriCorps Movement and Marching workshop was also evaluated extremely favorably by parents on all the dimensions.

Table 8. AmeriCorps Movement and Marching

Survey Question	n	M	SD
I learned children enjoy using familiar materials in new ways.	4	5.0	-
I learned ways to help my child enjoy textures.	4	5.0	-
I learned playing with sensory materials have a calming effect on many children.	4	5.0	-
I would recommend these workshops to a friend.	4	5.0	-
I learned ideas that will help with relationship with child.	4	4.8	.5
What I learned at this workshop will help me be a better parent.	4	4.8	.5
Overall Mean	4	4.9	.2

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Sensory Play: Bubbles and Balls and Funny Smells workshop was evaluated very highly by the four participants. All the participants unanimously marked "strongly agree" on all the measures.

Table 9. Sensory play: Bubbles and Balls and Funny Smells

Survey Question	n	M	SD
I learned ideas that will help with the relationship with my child.	4	5.0	-
I learned at this workshop it is fun to do activities with preschool child including those that encourage sensory experiences.	4	5.0	-
I learned bubbles and kitchen smell activities are fun to do with my child.	4	5.0	-
I learned my child benefits from interactions with other children.	4	5.0	-
I learned that learning to work alongside other children is a developmental skill important for child's growth.	4	5.0	-
I would recommend these workshops to a friend.	4	5.0	-
Overall Mean	4	5.0	-

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Sensory Play: Marching and Silly Sounds workshop was evaluated extremely favorably on all rated dimensions. All the participants unanimously marked "strongly agree" on all the measures.

Table 10. Sensory play: Marching and Silly Sounds

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
I learned ideas that will help with the relationship with my child.	7	5.0	-
I learned at this workshop it is fun to do activities with my preschool age child including sorting that encourage sensory experiences	7	5.0	-
I learned music and marching activities are fun to do with my child.	7	5.0	-
I learned my child benefits from interactions with other children.	7	5.0	-
I learned that learning to work alongside other children is a developmental skill important for child's growth.	7	5.0	-
I would recommend these workshops to a friend.	7	5.0	-
Overall Mean	7	5.0	-

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The AmeriCorps: Small Manipulative/Colors/Shapes workshop was evaluated extremely favorably on all rated dimensions. All the participants unanimously marked "strongly agree" on all the measures.

Table 11. AmeriCorps: Small Manipulative/ Colors/ Shapes

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
I learned ideas that will help with the relationship with my child.	5	5.0	-
What I learned will help me be a better parent.	5	5.0	-
I learned children enjoy using familiar materials in new ways.	5	5.0	-
I learned ways to help my child identify colors.	5	5.0	-
I learned knowing shapes of objects is a pre-math skill.	5	5.0	-
I would recommend these workshops to a friend.	5	5.0	-
Overall Mean	5	5.0	-

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Moms Group workshop was evaluated extremely favorably on all dimensions (Table 12) on the next page.



Table 12. Moms Group

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
I would recommend these workshops to a friend.	12	4.9	.3
Learned how to make new friendships.	12	4.8	.4
Learned different ways to be creative.	12	4.8	.5
I learned ideas that will help with the relationship with my child.	12	4.7	.5
What I learned in workshop will help me be a better mom.	12	4.7	.5
Learned different ways to reduce my stress.	12	4.6	.7
Overall Mean	12	4.7	.4

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Scrapbooking, Domestic Violence, and Crafts workshop was evaluated very favorably on all the items.

Table 13. Scrapbooking, Domestic Violence, Crafts

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
What I learned in this workshop will help me be a better mom	19	5.0	-
I learned new information on the development of kids.	19	5.0	.2
I would recommend these workshops to a friend.	18	4.9	.2
I learned new ways on how to reduce my stress.	19	4.9	.3
I learned ideas that will help with the relationship with my child.	19	4.8	.4
I learned how to make new friendships and be creative.	19	4.8	.4
Overall Mean	19	4.9	.2

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Oral Hygiene workshop was evaluated very favorably on all four measures.

Table 14. Oral Hygiene

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
I learned what cavities are.	21	4.7	.5
I learned what causes cavities.	21	4.7	.5
I learned where to go for resources and dental care.	21	4.7	.5
I learned how to prevent cavities.	21	4.6	.5
Overall Mean	21	4.7	.5

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Family Resource Center Services workshop was evaluated extremely favorably on most of the rated dimensions. Although still rated favorably, the question regarding learning about specific programs serving children under 5 years of age was somewhat less favorably rated by the participants.

Table 15. Family Resource Center Services

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
I learned about community services available.	6	4.8	.4
I learned about AmeriCorps and the community service they provide.	6	4.8	.4
I would recommend this informational workshop to a friend.	6	4.8	.5
I learned about other community resources that may help me and/or my family.	6	4.7	.5
I learned about Covered CA services.	6	4.5	.8
I learned about specific programs that serve children 0-5 years of age.	6	4.2	1.6
Overall Mean	6	4.6	.5

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Cycle of Domestic Violence workshop was evaluated extremely favorably on most of the rated dimensions, with the issue regarding domestic violence rated somewhat less favorable (but still quite positively rated).

Table 16. The Cycle of Domestic Violence

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
I learned the services that are offered in the Casa de Esperanza.	7	5.0	-
I received information that I am able to share with my friends or family.	7	4.9	.4
I recommend this workshop.	7	4.9	.4
I learned what domestic violence is.	7	4.6	.8
I learned the cycle of domestic violence.	7	4.4	1.5
Overall Mean	7	4.7	.6

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Breastfeeding Awareness workshop was evaluated extremely favorably on all rated dimensions (Table 17 on the next page).



Table 17. Breastfeeding Awareness

Survey Question	<i>n</i>	<i>M</i>	<i>SD</i>
I learned why breastfeeding education and support are essential for success.	9	4.9	.3
I learned to identify what common problems that occur with breastfeeding.	9	4.9	.3
I learned where I can refer to for breastfeeding support.	9	4.9	.3
I would recommend these workshops to a friend.	9	4.9	.3
I learned what the importance of breastfeeding is.	9	4.8	.4
I learned about the benefits of breastfeeding.	9	4.8	.4
Overall Mean	9	4.9	.3

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

The Communication in the Family workshop was evaluated extremely favorably on all rated dimensions.

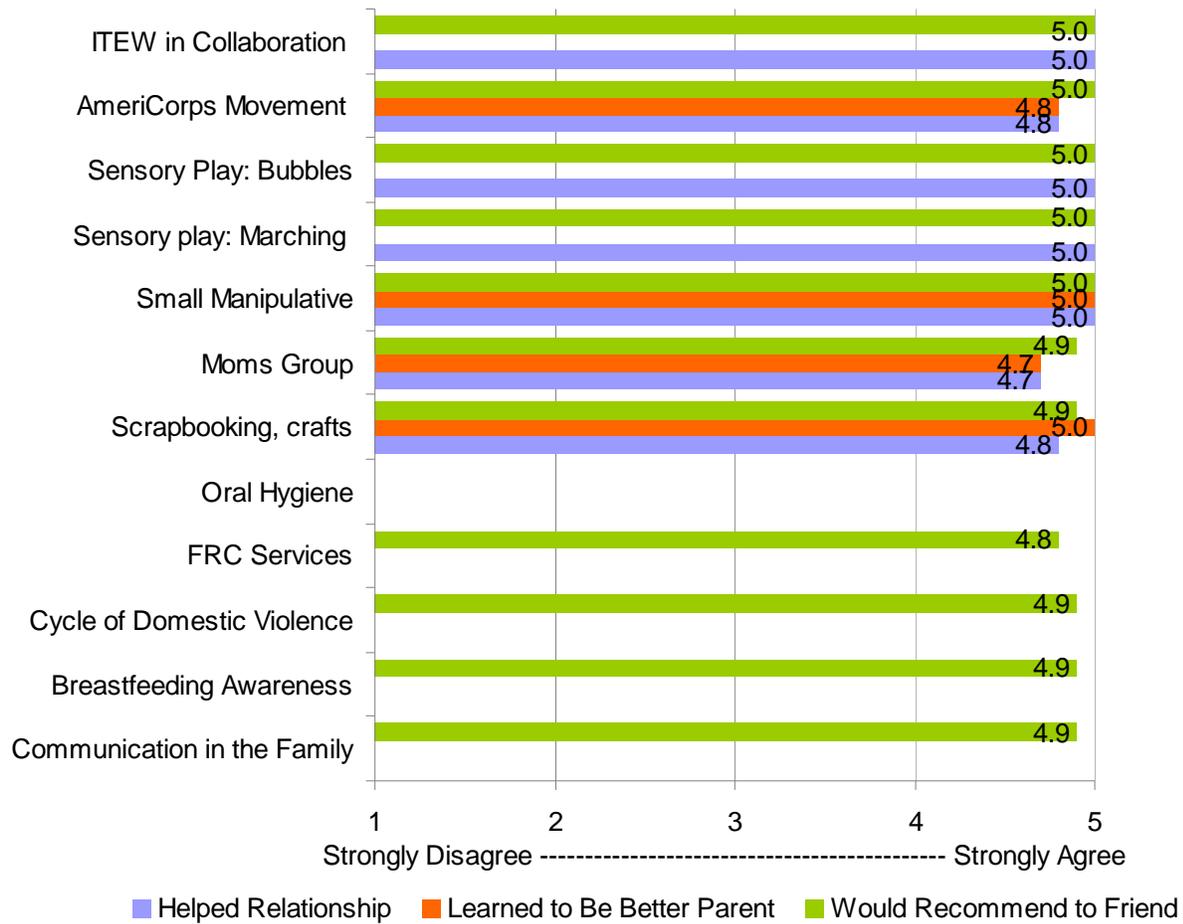
Table 18. Communication in the Family

Survey Question)	<i>n</i>	<i>M</i>	<i>SD</i>
I learned the different ways parents communicate.	10	4.9	.3
I learned the importance of valuing the feelings of my children.	10	4.9	.3
I received information that I am able to share with my family or friends.	10	4.9	.3
I would recommend this workshop.	10	4.9	.3
I learned the importance of communication with kids.	10	4.7	.5
Overall Mean	10	4.9	.3

Note. Item mean scores based on a scale of 1 to 5 where 5 is "Strongly Agree."

Three rating dimensions (recommending the workshop, learning to be a better parent, and helping relationships) were common to many or most of the workshops. As the graph on the next page (Figure 14) shows, generally, these items were all rated as very positive, suggesting that all of the workshops were perceived as valuable by the parents.

Figure 14. Parents' Satisfaction with Common Workshop Goals, by Workshop



One-Time Workshop

In the exit survey of the one-time workshop, parents were asked to rate how they felt about their knowledge, skills, and confidence levels before and after participating in the workshop. A series of repeated measures analyses of variance (ANOVA) indicated that the parents rated themselves significantly higher in 5 of the 7 areas ($p < .05$) after the workshop. There were no significant differences in how the parents rated themselves pre-workshop and post-workshop on the other 2 areas, which were: knowing how to meet their children's needs and knowing how to be a good parent (Table 19 and Figure 15 on the next page). Overall, parents were quite positive in how they felt about themselves before the workshop but were even more so when rating themselves after the workshop.



Table 19. Parents' Self-Rating of One-Time Workshop

Measure	n	Rating Before		Rating After	
		M	SD	M	SD
<i>How would you rate your knowledge, skills, and confidence before and after the workshop in the following areas:</i>					
a. I know how to keep my child healthy. *	20	3.3	.7	3.8	.4
b. I know how to guide my child's behavior.*	17	3.3	.8	3.7	.5
c. I know how to meet my child's needs.	18	3.6	.5	3.6	.5
d. I know what my child should be able to do at this age.*	20	3.4	.7	3.7	.5
e. I can get the services my family needs.*	18	3.3	.7	3.7	.6
f. I know how to help my child learn.*	18	3.2	.7	3.7	.5
g. I know how to be a good parent.	20	3.6	.5	3.8	.4
Overall Mean*	21	3.4	.5	3.7	.4

Note. Item mean scores reflect the following response choices: 1 = Poor, 2 = Fair, 3 = Good, 4 = Excellent.
 *Statistically significant, $p < .05$.

Figure 15. Agreement Levels Before and After the Workshop



Parents indicated that besides their children, other family members such as older siblings and grandparents would benefit from this workshop (Table 20), 44% of whom were children ages 0-5.

Table 20. Program Participation Beneficiaries

Participant Type	n
<i>How many people in your family will benefit from this workshop?</i>	
Children Younger than 3	17
Children Ages 3 - 5	11
Parents (Only parent counted per family)	16
Other family members (Older siblings and grandparents)	20

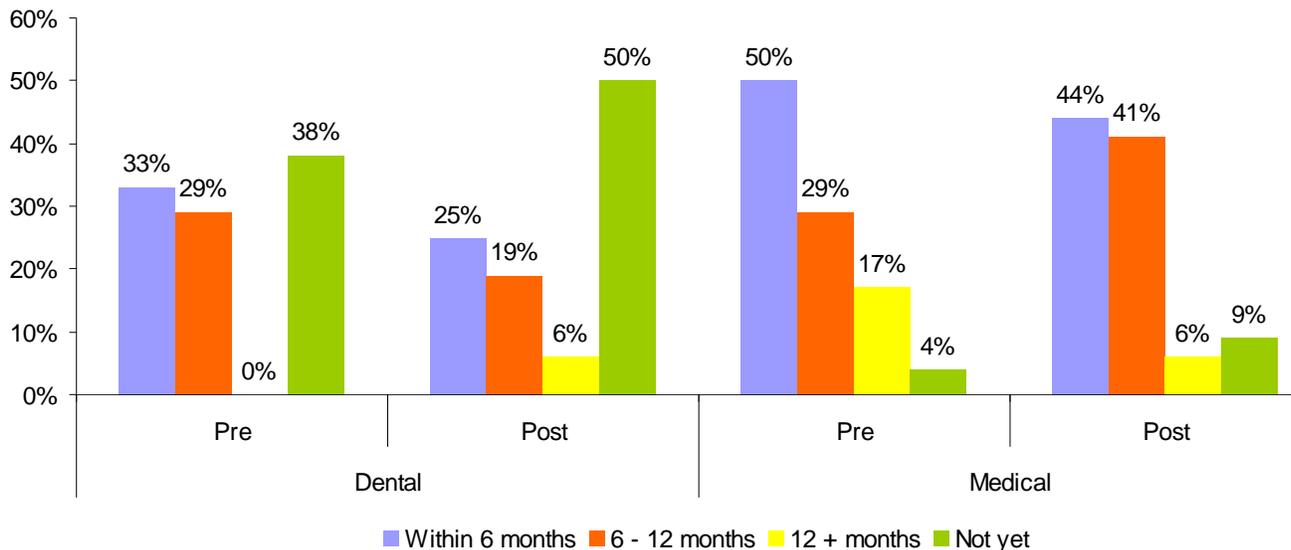
To what extent did parents achieve the goals they identified at program enrollment?

There were 46 Family Surveys completed. Of those, 21 had both a pre and a post. The following results were analyzed for the matched group of 21 cases.

To promote awareness and track utilization of health services, parents were asked to report their child(ren)'s (under age 6) last *dental* and *well-child* visits, if they had had one. As Figure 16 shows, one-third of the children had a dental visit in the last 6 months, 29% had a visit within the last 6 to 12 months, and approximately 38% had not visited a dentist yet. At the time of the posttest, parents reported less recent or no dental visits overall.

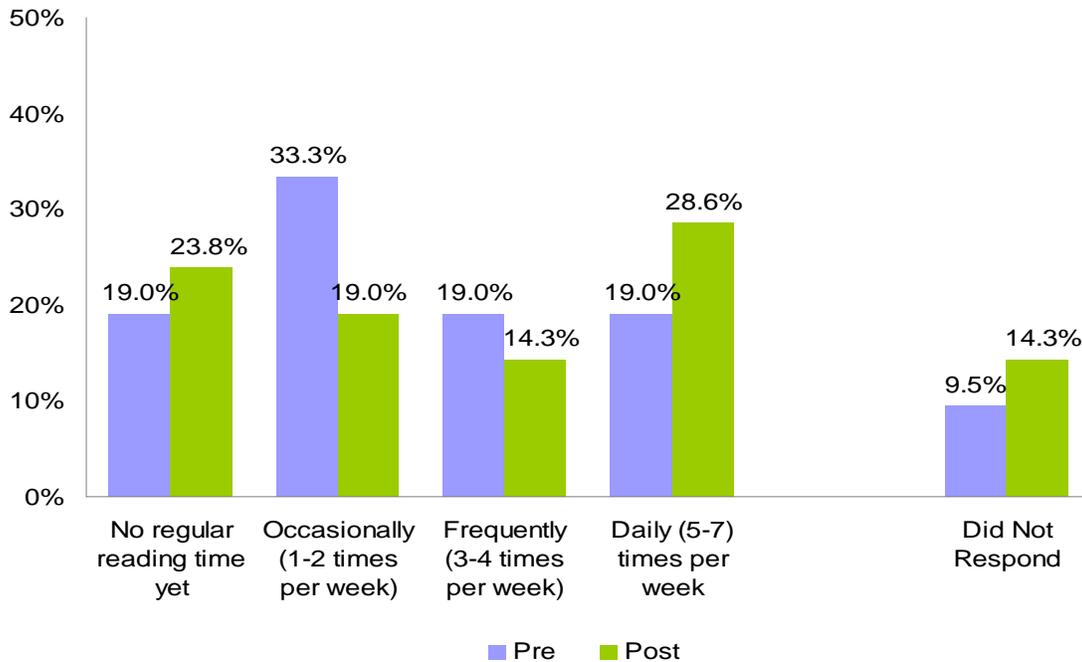
Concerning the last well-child visit, parents on the pretest reported that half of the children had made a well-child visit within the past 6 months and 29% had done so in the prior 6 to 12 months. At the time of the posttest, parents reported less recent or no well-child visits overall.

Figure 16. Children's (Age 6 and Under) Last Dental and Well-Child Visits



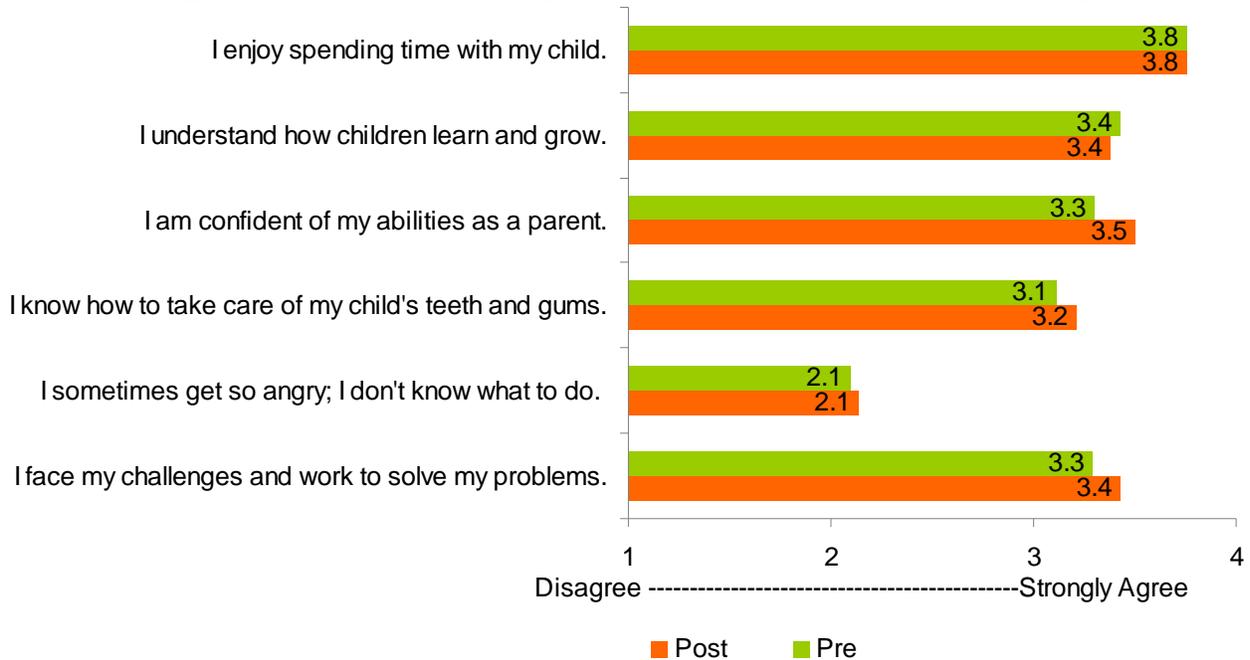
The families were also asked about whether they or another household member shared or read books with the children. On the pretest, most of the 21 parents (33.3%) reported that they only occasionally shared or read books with their children on a weekly basis. About 20% said that they read or shared books on a daily basis and another 19% reported not having a regular reading time with their children yet (Figure 17). On the posttest, the parents indicated that almost 30% read or shared books with their children on a daily basis and almost a quarter (23.8%) said that they still did not have a regular reading time yet with their children. A repeated measures ANOVA indicated that the changes from pretest to posttest were not statistically significant ($p > .05$).

Figure 17. Frequency of Reading/Sharing Books (n=21)



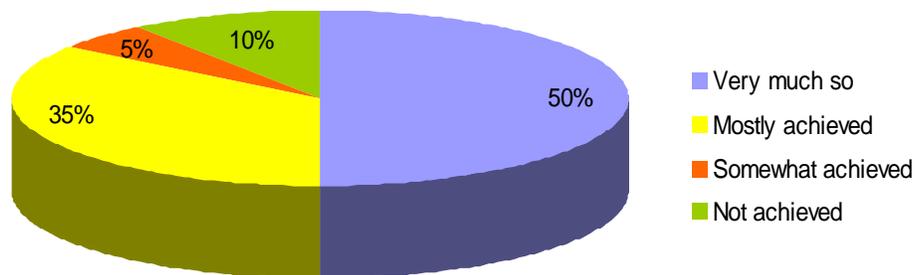
The survey also asked parents to self-evaluate on a number of diverse parenting areas (Figure 18 on the next page). They very strongly agreed that they enjoyed spending time with their children. They agreed that they understood how children learned and grew, that they were confident in their abilities as a parent, and believed that they faced their challenges and worked to solve their problems. They were less enthusiastic about agreeing that they knew how to take care of their children's teeth and gums. They somewhat agreed that they didn't know what to do when they got angry. The changes between pretest and posttest were not statistically significant ($p > .05$).

Figure 18. Parents' Level of Agreement About Various Areas of Parenting



At the time of the initial survey, as well as after receiving program services, parents stated their goals for themselves as a parent. Of the 20 parents who answered this question on the posttest, 85% believed that they definitely achieved or mostly achieved their goal(s).

Figure 19. Level of Parent Goals Met After Program Participation



Family Development Matrix: Program Participant Data

FDM assessment data for 31 family cases were entered by project staff and submitted for analysis. Our analysis is based on the FDM Theory of Change: family participation; follow-up empowerment plan; and barriers. Staff indicated that 46 total visits were completed with these families during the project period; goals were recorded for 34 (76%) of the cases as part of the families' empowerment plans.



As Table 21 shows, the goals that the families identified were quite diverse but the majority centered on getting help for children's behaviors and strengthening family relationships.

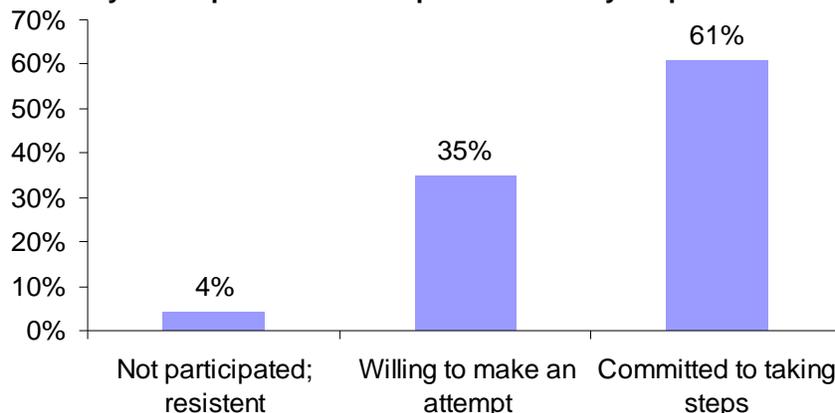
Table 21. Initial Goals and Concerns Identified by Families

Major Goal	n	Concerns Related to Goal Success
Receiving family/child counseling	7	<ul style="list-style-type: none"> ▪ Not knowing how/where to get started. ▪ Transportation difficulties ▪ Coping with child's challenging behaviors ▪ Worried about cost of services ▪ Anxiety/fear of failure ▪ "Rocky" relationship with spouse/partner ▪ Lack of family support to pursue goal ▪ Problems related to pregnancy ▪ Coping with a family death
Finding employment	4	
Receiving individual counseling	4	
Learning better parenting skills	4	
Locating preschool	3	
Help with substance abuse	3	
Other	3	
Learning how to budget	2	
Finding housing	2	
Finding medical/dental insurance or provider	2	

Staff recorded the various steps they planned to take toward helping the family achieve its goals and used the assessment tool to record progress toward meeting the goals. Examples of staff activities included linking parents to parenting classes and support groups, making referrals, helping family members use library services to learn English, intervening with a landlord to improve housing conditions, helping with breastfeeding issues, and assisting with the Medi-Cal application process. In about two-thirds of the cases it was noted that staff reviewed progress toward goals, and when positive developments occurred celebrated success with the family.

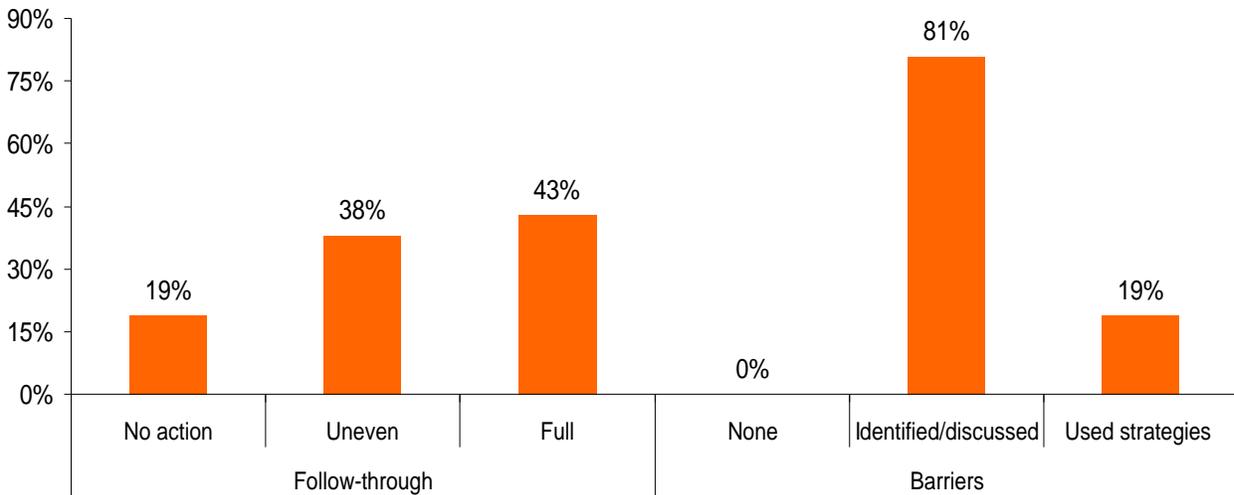
Nearly all (96%) of the cases where subsequent family-driven goals were identified—based on earlier assessments and family interests—demonstrated a high degree of family participation in the process and commitment to taking the necessary steps to achieve goals (Figure 20). The staff worked primarily with mothers. In every case the worker had noted the mother was present for answering the worker's questions; in 55% of the cases the father was also marked as participating or was noted as living in the household. No other family members such as grandparents or other adults such as siblings and foster parents participated in answering questions or were noted as living in the household.

Figure 20. Family Participation in Development of Family Empowerment Plan (n=21)



About one-fifth of the families had taken no action on their empowerment plan when follow-through was assessed, 38% were noted as having "uneven follow-through" and 43% as "full participation by family" in following through (Figure 21). All of the families had experienced some type of barrier to follow-through, with the majority (81%) having discussed their barrier(s) with the worker, and 19% having "used strategies to overcome barriers."¹ In all of these cases, the families were noted to have increased some supports or increased all supports in establishing family/community supports after beginning the program.

Figure 21. Family Follow-Through and Response to Barriers (n=21)



Successes and Challenges

Family Advocate and other staff provided several examples where working with high risk/multiple-needs families, while challenging, had "life changing results." For example, one father who was homeless and on a path to recovery from drug use requested help in learning new parenting skills as he was now the primary caregiver (his wife had recently been incarcerated); he was also eager to learn to communicate better with his children. After helping this family acquire housing, staff helped to get all of his children's physical exams done so that they could be enrolled and attend school. After connecting this father with the Men's Group at Harmony Health and Father's First; he went on to enroll into Yuba College full time. His wife is now back home with her family and she is actively participating in the First Steps program working on her recovery from drug use.

Another example of project success is the Empowering Mom's Group where subjects such as culture, a child's brain development and why attention/affection is crucial for healthy growth are discussed. The participants have an opportunity to create relationships, work together and to learn from each other by sharing their strengths and talents.

Transportation continues to be a challenge for many of the families, and for staff. Some families continue to travel to Sacramento to see specialists since access to specialty services for those on Medi-Cal is so limited in Yuba County. Other families have expressed concern due to the lack of sidewalks and therefore have not been able to make it to some of the workshops because of safety

¹ The tool unfortunately forces a choice so that it isn't possible to note when families *both* identified barriers *and* used strategies to overcome barriers.



concerns. The grantee has tried to overcome some of these challenges, in one case creatively implementing a lending library for parents by bringing age-appropriate books and videos (e.g., Read Aloud video by the Raising a Reader literacy curriculum) during home visits and lending them out so that parents could use them in their homes.

A challenge noted for the Home Visitation program has started to be addressed with some solutions unfolding. Staff has been successful in coming together as a team and restructuring past practices with more efficient and applicable practices and making case management of families more structured and intentional. Attempting to maximize the time of 2 part-time home visitors with data collection, home visiting, attending outreach events, attending trainings for professional growth, and providing workshops to families has become a greater challenge.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	<ul style="list-style-type: none"> ❶ – support family resources centers ❷ – collaboration with partners and services providers
Improve family functioning	✓	<ul style="list-style-type: none"> ❶ – programs that increase parent education and skills ❷ – support free community events for families
Improve child development	✓	<ul style="list-style-type: none"> ❶ – services that prepare children for school ❷ – programs that improve childcare/preschool quality ❸ – programs that increase childcare/preschool availability
Improve the health of children	✓	<ul style="list-style-type: none"> ❶ – programs that promote healthy eating and physical activity ❷ – programs that increase access to oral health services ❸ – programs that increase access to health care services

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The percentage of infants whose mothers received prenatal care in the first trimester of pregnancy.*

According to state public health data, 72.0% (up from 66.6%) of women who gave birth in Yuba County in 2010-2012 initiated prenatal care in the first trimester; 84% did so statewide. Yuba County ranks 46 of 58 counties on this measure.

- *The percent of children fully immunized by entry into kindergarten.*

The proportion of Yuba County children who entered kindergarten with all required immunizations in 2013-14 was 92.2% (up from 87.6%), a similar percentage to children statewide.

- *The percent of children and their families who have adequate food in their homes.*

44.3% of low-income (<200% federal poverty level) adults in Yuba County reported not being able to afford enough food ("food insecurity") in 2011-12, according to CHIS, a slightly higher proportion than for California at 41.7%. 2012 data reported by the nonprofit group Feeding America shows food insecurity overall in Yuba County as 20.0% and among *children* as 31.2%.



- *The percent of children with a dental visit in the last 12 months.*

In FY 2013-14, 22.9% of children age 0-3 and 49.1% (down from 51.6% 2 years prior) of children age 4-5 with Medi-Cal in Yuba County made a dental visit within the past year, according to State Denti-Cal data. These proportions were lower than children statewide in these same age groups (27.3% and 64.2%, respectively).

Conclusions and Recommendations

This organization continues to be an important safety net provider for Yuba County residents, serving a high-need population with many challenges. Parents and other caregivers who participated in the various components of this program expressed a great deal of satisfaction with programs and services and their feedback indicated they had put into practice some of the health information and parenting skills they learned. The FDM appears to be a useful addition to the agency's case management capacity for assessing and responding, in partnership with families, to identified family needs, barriers and solutions.

Because the FRC also provides health care services, there is more likelihood the children it serves would be current in their well-child and dental exams (although utilization of dental services in the county as a whole is very low). It is therefore confusing that at the time of the family survey posttest parents reported less recent or no dental and medical visits overall than they had at the program start. We suggest staff look into this issue to examine what factors may account for the findings.

Because the FRC Quick Survey was again not used in the evaluation, by agreement, it is up to the agency if it wishes to continue to use this form for its own purposes.



YUBA COUNTY LIBRARY – LITERACY PROGRAM

Project Purpose and Evaluation Design

The goal of this project is to provide access for all prekindergarten children to free family literacy activities through parent/child support, information and activities that encourage early literacy skills and increase parenting knowledge and skills.

In addition to offering an Early Childhood Ready to Read (ECRR) workshop for library staff and promoting community awareness strategies on early literacy via ECRR posters, bookmarks, brochures and other marketing activities, the project offers two different programs: *Learn & Grow Story Time* activities for children ages 3 to 5 years, focusing on the “Parent & Child” learning and literacy experience; and, *Tiny Tots Story Time* activities for children ages birth to 2 years focusing on teaching parents how to incorporate early learning into everyday activities. These two programs are presented by a professional early childhood educator. Parents who attend the programs complete a Parent Workshop Survey to solicit feedback about the program and possible influence on early literacy behaviors.

Program Results

Of the 31 children ages 3-5 who participated in the program, 6 (19%) parents completed an evaluation form; 15% of the 26 parents of children ages 0-2 completed an evaluation form.

To what extent did parents report learning and parenting behaviors that promote early literacy?

Learn & Grow Story Time (Ages 3-5)

All of the parents indicated that their child had more rapport with other children and a greater interest in listening to stories at home and looking at books since participating in the program (Table 22 that begins on this page). The respondents were more divided when asked if their child had more interest in coming to the library after the program. Only half said that their child was more interested in coming to the library, and only one respondent said their child had a longer attention span after the program.

Table 22. Parents' Reported Program Influence on Children (n=6)

Item	n	%
<i>My child has a greater interest in listening to stories at home since participating in the program</i>		
Yes	6	100
No	0	-

Table continues on next page



<i>My child has a greater interest in looking at books since participating in the program</i>		
Yes	6	100
No	0	-
<i>My child is more interested in coming to the library since participating in the program</i>		
Yes	3	50.0
No	3	50.0
<i>My child has more rapport with other children since participating in the program</i>		
Yes	6	100
No	0	-
<i>My child has a longer attention span since participating in the program</i>		
Yes	1	16.7
No	5	83.3

Only one-third of the parents indicated that they used ideas at home that had been presented by the program such as "reading to my child" and "craft ideas." All of them felt that the materials and activities were suitable for the age range, however. All of the parents said that they would be interested in another morning preschool program (Table 23).

Table 23. Parents' Opinions About Program Resources and Future Use (n=6)

Item	<i>n</i>	%
<i>Have you used any of the ideas presented at home?</i>		
Yes	2	33.3
<i>Please explain:</i>		
Reading to my child	1	-
Craft Ideas	1	-
No	4	66.7
<i>Did you think the materials and activities were suitable for the age range?</i>		
Yes	6	100
No	0	-
<i>Currently the library offers one preschool program a week. Would you be interested in another program in the mornings?</i>		
Yes	6	100
No	0	-

Tiny Tots Story Time (Ages 0-2)

All of the parents indicated that their children had a greater interest in looking at books and had more rapport with other children after attending the program. Only half said that their children had a greater interest in listening to stories at home after the program (Table 24 on the next page).

Table 24. Parents' Reported Program Influence on Children (n=4)

Item	n	%
<i>My child has a greater interest in listening to stories at home since participating in the program</i>		
Yes	2	50.0
No	2	50.0
<i>My child has a greater interest in looking at books since participating in the program</i>		
Yes	4	100
No	0	-
<i>My child has more rapport with other children since participating in the program</i>		
Yes	4	100
No	0	-

None of the respondents reported using any of the ideas at home although they did find that the materials and activities were suitable for their children's age range (Table 25). The majority of the parents (75%) said that they would be interested in another morning program if the library offered one.

Table 25. Parents' Opinions About Program Resources and Future Use (n=4)

Item	n	%
<i>Have you used any of the ideas presented at home?</i>		
Yes	0	-
No	4	100
<i>Did you think the materials and activities were suitable for the age range?</i>		
Yes	4	100
No	0	-
<i>Currently the library offers one Tiny Tots program a week. Would you be interested in another program in the mornings?</i>		
Yes	3	75.0
No	1	25.0

The 8 parents (of mixed ages, age 0-5) responding to the Parent Survey strongly agreed that the library is important in preparing their children to be successful readers, that their children needed help in getting ready to read, and that they enjoyed the workshop (Figure 22 on the next page). These parents generally agreed that they had learned ways to help their children develop early literacy skills, that they will be attending other programs and workshops to help their children get ready to read, and that their children enjoyed the activities of the program.

Figure 22. Parents' Agreement Levels About Program



Successes and Challenges

The Library successfully promoted the programs via the local media, county agencies and school districts within Yuba County, as well as advertised directly to local child care facilities. The grantee believed attendance was high, primarily due to the fact that the Library was holding the annual Summer Reading program and parents were visiting the Library more often with their preschool and older children. Staffing was a little challenging during the grant period which affected the number of sessions that could be offered. Fewer than one-quarter of the participating parents completed a post-program evaluation form.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	② – collaboration with partners and services providers
Improve family functioning	✓	① – programs that increase parent knowledge and skills ② – programs support free community events for families
Improve child development	✓	① – programs that support school readiness services
Improve the health of children		

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.



The percentage of young children who are read to often.

According to the 2011-12 California Health Interview Survey (CHIS), 43.0% of Yuba County parents of children 0-5 (compared to 62.2% statewide) reported reading to their children every day. However, the proportion who read 3-6 days of the week, 52.3%, was double that amount of weekly reading among parents statewide.

- *The percentage of 3rd graders who read at grade level.*

In Yuba County, 47% of 3rd grade students (compared to 46% of California 3rd graders) were reported reading at grade level in 2013-2014, ranking 15th best among the state's 58 counties according to California Department of Education Standardized Testing and Reporting (STAR) Results.

- *The percent of mothers who completed high school or its equivalency.*

Maternal education level has an impact on many measures of child well being. For instance, young children are more likely to be read to if their mothers have completed higher levels of education, and children of mothers with high levels of education stay in school longer. In 2010, the last year for which this data is available, 22% of mothers giving birth in Yuba County did not have a HS diploma or GED.

Conclusions and Recommendations

In general, the 2 programs appear to have been effective in influencing children's early interest in literacy, and parents believed in the suitability of the materials and activities for their child's age range. Parents were also appreciative of the program and valued it. However, it is perplexing why the majority of parents, particularly for the youngest age group, reported not using any of the ideas presented at home. This question should be explored further and revisions or adaptations of the curricula made based on parent feedback. Additionally, a greater proportion of the participating parents should be asked to complete program evaluation forms to more fully capture the evaluation results and reduce any likelihood of response bias from so small a proportion of program participants responding.



PEACH TREE HEALTHCARE EYE CLINIC

Project Purpose and Evaluation Design

Peach Tree Healthcare received a grant to supplement the costs of providing vision care services to children and for purchasing necessary equipment to perform eye exams. The original plan was to modify the Peach Tree Clinic site for optometry services, but the costs for doing so far exceeded the agency's budget estimates. As an alternative solution, the Live Oak Clinic site was modified to be available for both Yuba and Sutter Counties.

Program Results

How many and what type of children benefitted who may not otherwise have received an eye examination?

Evaluation activities were reported to FFY during the first quarter of CY 2014 only. During that time, Peach Tree Healthcare provided a total of 57 eye exams to children age 0-5, 14 (25%) of whom received free or low-cost eyeglasses.

Successes and Challenges

Because the project started later than anticipated it did not see as many children as hoped for. However, Peach Tree continued to outreach through all of its sites by informing patients of the service and setting up appointments. The grantee also continued to advertise through its website and social networks. For example, a promotional flyer in English and Spanish was periodically distributed into the community to pediatric offices, day care centers and other appropriate venues. Peach Tree's contracted provider (Ridge Eye Care) also did a TV commercial on local channels in early 2014.

One of the challenges the project faced was that patients with Medi-Cal can only have one visit per day. Therefore, the clinic could not schedule a medical and eye care appointments on the same day, causing an inconvenience for those who have transportation difficulties and have to take time off from work. Another challenge was that some patients were not able to afford glasses even as low as \$40. Ridge Eye Care graciously provided these glasses for no charge to those patients that showed a real hardship and were in great need for glasses.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	② – collaboration with partners and services providers
Improve family functioning		
Improve child development		
Improve the health of children	✓	③ – programs that increase access to health care services

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The percent of children with some form of health insurance.*

Access to health care refers to having health insurance coverage, but also having a usual source of care. American Community Survey data for 2011-2013 indicates that 94.5% of Yuba County children ages 0-17 had health insurance coverage. The 2011-12 California Health Information Survey, CHIS, shows that 98%--about the same proportion as statewide--of children ages 0-5 were insured either through their families' employer- based coverage or through Medi-Cal or another public program. However, children in the county have lower rates of employment-based coverage and correspondingly higher rates of Medi-Cal coverage compared to children statewide.

Conclusions and Recommendations

This project provides an important resource for low-income families of young children, and with the outreach efforts and creating more awareness the grantee undertook it is likely that more children received eye exams and eyeglasses during CY 2014.



PONDEROSA PARK FACILITIES IMPROVEMENT PROJECT

Project Purpose and Evaluation Design

The Yuba Feather Community Services Recreation Committee ("Committee") was awarded a 2-year facilities improvement grant to update Ponderosa Park in Brownsville so that more families with children ages 0-5 and their families could benefit by using the park and attending public events. The work called for leveling the fields, installing a sprinkler system, installing grass, and installing a security and fire alarm system.

Program Results

To what extent have park facilities in Yuba County improved, and how many and what type of families and children have benefitted?

Ponderosa Park is still utilizing the funding they received in FY 12/13 (a \$60,000 advance—44% of their grant amount) but the organization did not have any activity on their project during the 2014 evaluation year. In the early part of 2013, the Committee reported it had installed security lighting and electrical system upgrades for cameras at the upper snack bars/bathrooms area. They also reported working with the Yuba County Sheriff's Office to arrange for clean-up by those with county probation time to work off and with community members who also volunteer their time to clean and make improvements to the park. Additionally, local businesses and other organizations renewed or purchased banners to be placed on the outfield fence, resulting in a modest amount of leveraged funds last year.

Everyday playground use, an Easter egg hunt and baseball games reported in the spring, which served about 60-75 children ages 0-5, have helped to draw families to the park, many of whom noticed and made positive comments about some of the improvements that were able to be made.

Successes and Challenges

The Committee reported last year it had been challenging trying to work with new members who had not necessarily agreed with some of the plans for improving the facilities. One of the major stumbling blocks was a concern about installing security cameras; unease was expressed about lack of privacy from having families' actions and activities "recorded." As a result, the project made the decision to slow down and try to work through those challenges until it could identify solutions to moving forward. Now the installation of the security lighting and cameras around the upper park has been completed—largely as a result of volunteer labor. Additional lighting and cameras that have already been purchased are to be installed as volunteer time is available.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	② – collaboration with partners and services providers ③ – support recreational programs for children with disabilities
Improve family functioning		
Improve child development		
Improve the health of children	✓	④ – provide safe play areas

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan*

- *The proportion of children who are overweight or obese.*

According to the 2010 California Pediatric Nutrition Surveillance, the obesity prevalence rate for children 0-5 in Yuba County was 12.9%; the proportion of overweight ≤ 2 years was 15.1%. Low hemoglobin (anemia), another nutritional indicator, was reported at 15.3%. California Department of Education California Physical Fitness Test data for 2013-14 for Yuba County show that 16.2% of 5th grade students fall into the "needs improvement/health risk" for body composition (e.g., body mass index, or BMI); the proportion for 9th graders is one-and-a-half times higher or 23.6%. While the indicator for the county's 5th graders is more favorable than for the state (63% of Yuba County children in 5th grade are considered in a healthy weight zone compared to California 5th graders at 60%), for 9th graders, Yuba County students fare worse than students statewide.

- *The number of days children are physically active in the past week.*

Physical inactivity contributes to obesity risk. About half (51.7%) of Yuba County children age under age 8 reported in the 2011-12 California Health Interview Survey being physically active for at least an hour 7 days in the past week; 12%% reported "4 days," 9% reported "3 days," and 19% reported "2 days"—higher proportions than for the state.

Conclusions and Recommendations

We understand the contract with this grantee ended in December 2014. However, if FFY considers extending the contract because of the importance of this recreational resource, the grantee should be encouraged to build more support for and make *substantial* progress in implementing the planned improvements—and not lose the opportunity of the grant support to benefit the whole community.



OLIVEHURST PUBLIC UTILITY DISTRICT (OPUD) AQUATICS PROGRAM

Project Purpose and Evaluation Design

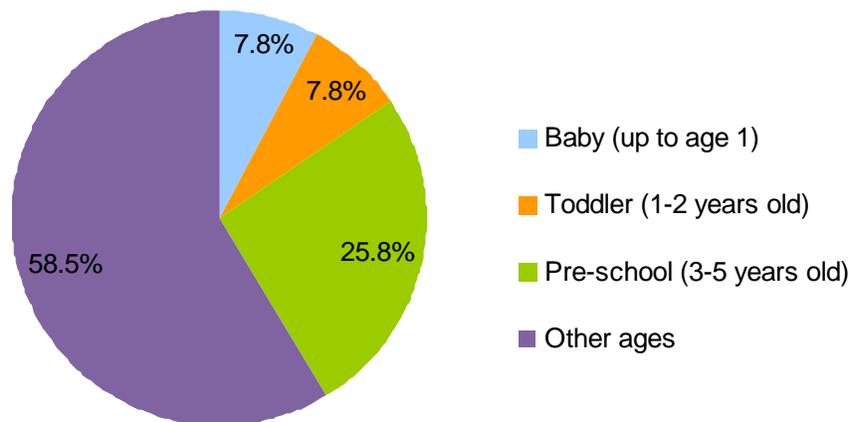
The Olivehurst Public Utility District (OPUD) was provided a grant for a summer 2013 aquatics program that offered free swimming lessons and entrance to the pool for children age 5 and under in Yuba County. In addition to a large, in-ground outdoor pool, the OPUD facilities also feature a shallow wading pool with a shade structure for younger children. The OPUD aquatic facility is located adjacent to the Olivehurst Community Park. A Participant Feedback Form was developed and distributed to an adult family member accompanying a child 0-5 who was asked to complete it at the end of the first visit, generally at the same time a season pass was issued.

Program Results

To what extent did children, including those with special needs, participate in the program and how did families hear about it?

The program reported serving 217 children. More than half (59%) who participated in the Aquatics Program were older than 5 years of age and a little over a quarter of them were of preschool age. Babies and toddlers each comprised close to 8% (Figure 23).

Figure 23. Ages of Children Participating in Aquatics Program (n=217)



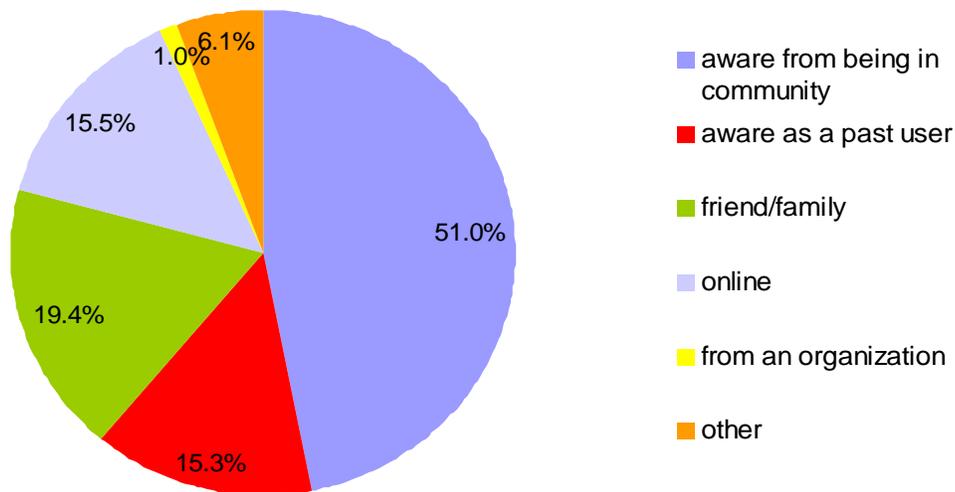
There was also a place on the form for the parents to check if any of the 217 children were special needs children. There were 13 parents who indicated that they had brought a total of 23 special

needs children to the program. Of these special needs children, almost half (48%) were older than 5 years of age and a little over a quarter of them were of preschool age.

Of the 94 respondents to this question of the purpose of their visit, 28 of them (29.8%) indicated that the children were there for swimming lessons, 44 (46.8%) said they were there for open swim, and 21 (22.3%) brought children for both swimming lessons and open swim. One respondent stated that he/she was there for other reasons but did not specify for what.

When asked how they heard of the program, 98 of the family members mentioned hearing about it from just being in the community (51%), from friends/family (19%), and from being a past user of the program (15%). The least mentioned source was "from an organization in the community" (Figure 24).

Figure 24. Source of Awareness About of the Program



Over 95% of the children participating in the program resided in Yuba County.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	② – collaboration with partners and services providers ③ – support recreational programs for children with disabilities
Improve family functioning	✓	② – support free community events for families
Improve child development		
Improve the health of children	✓	① – support organized outdoor physical activity



Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The proportion of children who are overweight or obese.*

According to the 2010 California Pediatric Nutrition Surveillance, the obesity prevalence rate for children 0-5 in Yuba County was 12.9%; the proportion of overweight ≤ 2 years was 15.1%. Low hemoglobin (anemia), another nutritional indicator, was reported at 15.3%. California Department of Education California Physical Fitness Test data for 2013-14 for Yuba County show that 16.2% of 5th grade students fall into the "needs improvement/health risk" for body composition (e.g., body mass index, or BMI); the proportion for 9th graders is one-and-a-half times higher or 23.6%. While the indicator for the county's 5th graders is more favorable than for the state (63% of Yuba County children in 5th grade are considered in a healthy weight zone compared to California 5th graders at 60%), for 9th graders, Yuba County students fare worse than students statewide.

- *The number of days children are physically active in the past week.*

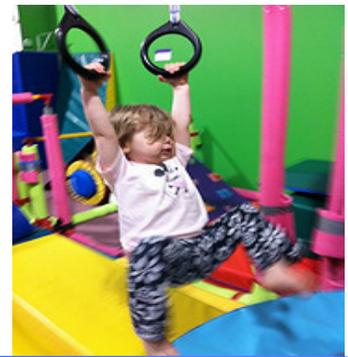
Physical inactivity contributes to obesity risk. About half (51.7%) of Yuba County children age under age 8 reported in the 2011-12 California Health Interview Survey being physically active for at least an hour 7 days in the past week; 12%% reported "4 days," 9% reported "3 days," and 19% reported "2 days"—higher proportions than for the state.

- *The frequency children are taken out of the home to a family activity in a typical week.*

About one-quarter (23%) of Yuba County parents of children 0-5 (compared to 30% of parents statewide) reported in the California Health Interview Survey taking their children out of the home to the park, store, or playground every day in a usual week. Another 60% of parents, however, said their children went along on a family activity 3-6 times a week.

Conclusions and Recommendations

This project successfully met its targets during the summer months, though over half of the children who benefitted from the program were older than the 0-5 age group. The revision of the participant feedback form this year made it possible to capture a more accurate number and more information about children with special needs.



RECREATIONAL SCHOLARSHIPS

Project Purpose and Evaluation Design

Yuba County Public Works implemented a recreation scholarship program this year to support recreational opportunities for more children ages 0-5 in Yuba County. A Program Feedback Form was developed for administration to families of young children to assess the types of programs they accessed and their opinions about and satisfaction with the services.

Program Results

What type of programs or activities did children participate in and how satisfied were the families?

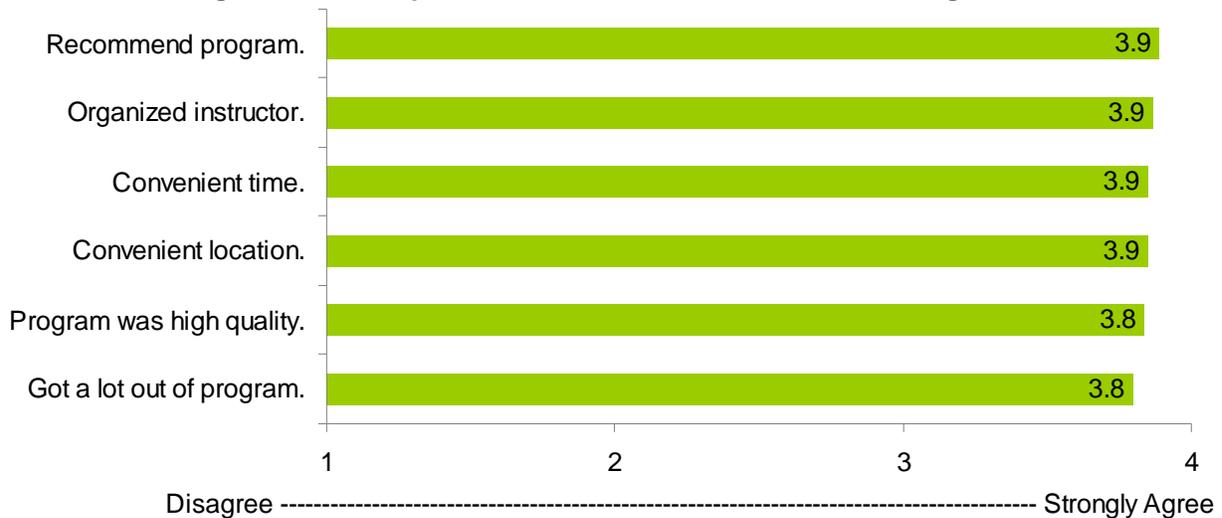
Almost half (46%) of the 61 children were of preschool age (Table 26). Half of them (51%) participated in activities other than swim lessons or gymnastics. Tae Kwon Do, cheer, and/or football were the most popular activities. Almost all of the participants (96%) were from Yuba County.

Table 26. Program Participation Characteristics (n=61)

Characteristic	<i>n</i>	%
<i>Age of Children Served</i>		
Baby (up to age 1)	4	6.6
Toddler (1 - 2 years old)	2	3.3
Pre-school (3 - 5 years old)	28	45.9
Other (as specified below)	27	44.3
6-7 years old	10	-
8-11 years old	10	-
12-15 years old	7	-
<i>Programs/activities children participated in</i>		
Swim lessons	4	6.7
Gymnastics	10	16.7
Tae Kwon Do/Martial Arts	16	26.0
Other	30	51.6
<i>Family County of Residence</i>		
Sutter County	2	3.6
Yuba County	54	96.4

Overall, the participants evaluated the recreation programs quite positively (Figure 25). There were no statistically significant differences between the satisfaction ratings of the 3 swimming, gymnastics and "other" recreational use participant groups ($p > .05$).

Figure 25. Participants' Amount of Satisfaction with the Programs



Successes and Challenges

After some initial challenges in making the community aware that the scholarships were available by distributing flyers to schools, the project had success in meeting its goals. Utilization was highest during the summer months because of swimming opportunities. In addition to taking advantage of the local summer swimming programs at the Olivehurst Community Pool and at the Gauche Aquatic Center and learning new skills, the children gained self confidence and endurance through the dance classes according to project staff. They also learned discipline and how to establish good relationships with one another and their instructors.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	② – collaboration with partners and services providers ④ – support recreational programs for children with disabilities
Improve family functioning	✓	② – support free community events for families
Improve child development		
Improve the health of children	✓	④ – provide safe play areas



Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The proportion of children who are overweight or obese.*

According to the 2010 California Pediatric Nutrition Surveillance, the obesity prevalence rate for children 0-5 in Yuba County was 12.9%; the proportion of overweight \leq 2 years was 15.1%. Low hemoglobin (anemia), another nutritional indicator, was reported at 15.3%. California Department of Education California Physical Fitness Test data for 2013-14 for Yuba County show that 16.2% of 5th grade students fall into the "needs improvement/health risk" for body composition (e.g., body mass index, or BMI); the proportion for 9th graders is one-and-a-half times higher or 23.6%. While the indicator for the county's 5th graders is more favorable than for the state (63% of Yuba County children in 5th grade are considered in a healthy weight zone compared to California 5th graders at 60%), for 9th graders, Yuba County students fare worse than students statewide.

- *The number of days children are physically active in the past week.*

Physical inactivity contributes to obesity risk. About half (51.7%) of Yuba County children age under age 8 reported in the 2011-12 California Health Interview Survey being physically active for at least an hour 7 days in the past week; 12%% reported "4 days," 9% reported "3 days," and 19% reported "2 days"—higher proportions than for the state.

- *The frequency children are taken out of the home to a family activity in a typical week.*

About one-quarter (23%) of Yuba County parents of children 0-5 (compared to 30% of parents statewide) reported in the California Health Interview Survey taking their children out of the home to the park, store, or playground every day in a usual week. Another 60% of parents, however, said their children went along on a family activity 3-6 times a week.

Conclusions and Recommendations

Additional community outreach increased awareness of this resource as the agency more fully utilized the grant this year. The grant provided an opportunity for a larger number of families this year than last year to participate in a recreational opportunity for their children. The program served a greater proportion of older children (slightly fewer than half, 46%, were children 0-5), but serves as one of the valued community resources for Yuba County families.



SCHOOL READINESS

Project Purpose and Evaluation Design

Marysville Joint Unified School District (MJUSD) administers the School Readiness (SR) initiative that provides outreach and other direct services to young children and their families in 3 catchment areas: Cedar Lane, Ella, and Linda Elementary Schools. The activities of this comprehensive program included delivering Parents as Teachers workshops, implementing the Raising a Reader early literacy program which prepares children ages 0-8 to enter kindergarten with a love of books and ready to learn (and provides many children and low-income families with their first exposure to books and reading); and Parents as Teachers Home Visiting program with an emphasis on family literacy, health screenings and referrals.

Four evaluation tools were used in the evaluation plan for this project. A Workshop Feedback form, designed to assess participant satisfaction and what parents self-reported as knowledge gain, was administered to parents at the end of each series of workshops. A Family Survey form was administered as part of the parents-as-teachers home visiting program at the end of the program year to learn about achievement of learning goals and other effects of exposure to the project's activities. The evaluation for the Ready to Read program used the short Parent Survey that was developed by the Raising a Reader organization. Parents were asked to complete the survey at the beginning of the program prior to exposure of the curriculum and then again afterwards. A Kindergarten Registration Family Survey, developed by MJUSD, was administered to families one time before their child entered kindergarten (generally between April and August). The results of this survey are intended to help teachers prepare for their new classes of children, including assessing their access to and utilization of health screening services.

Program Results

To what extent did parents and child care providers report learning to improve relationships with children?

Of the 44 parents who completed a workshop post-survey, 30 answered the question of why they had attended the workshop. About three-quarters (73%) said that they came to obtain help for children in their family rather than for the purpose of caring for other children professionally. A little over a quarter (27%) said that they were attending for other reasons (Figure 26). The parents had children ranging from infants to 14 years of age. Approximately half of these children were of pre-school age, about 18% were toddlers, about 3% were babies, and about 30% were 6 years of age or older (Figure 27).

Figure 26. Purpose for Attending the Workshop (n=30)

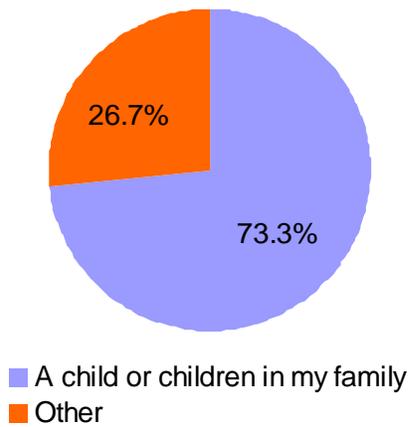
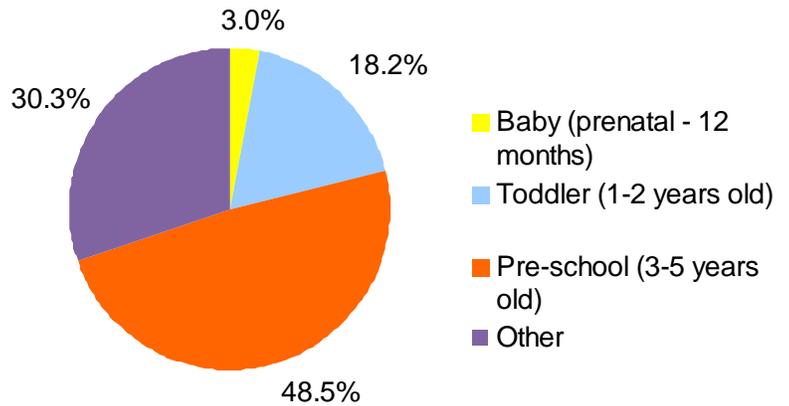


Figure 27. Age of Children Benefitting from the Workshop (n=33)



The workshop participants were nearly uniformly in "strong agreement" that the workshop was extremely valuable and informative for them across all of the areas the survey asked about (Figure 28). Given the relatively large sample size, the strength of this endorsement is very notable.

Figure 28. Participants Level of Agreement About Workshop Features (n=44)

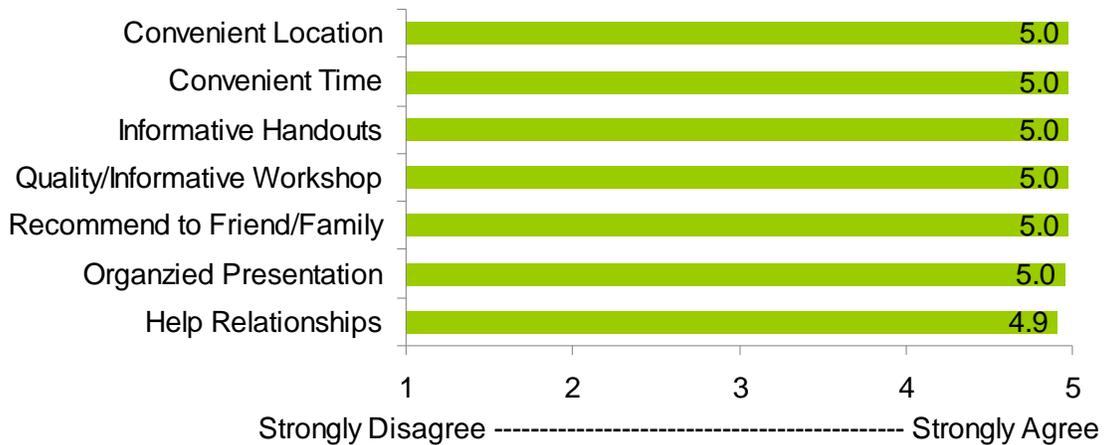


Table 27 on the next page summarizes what parents found most informative and shows some examples of how they said this will change what they do in the future as a parent. Their responses to the question of how the workshop could be improved (which about one-third answered) were primarily "everything was good" and that more of these types of workshops be offered, although a small number suggested more convenient times, the need to do more activities (without specifying what those might be), and provide more handouts with information.



Table 27. Parent Feedback about Workshop Learning and What They Will Do Differently

What was most informative?

- Helped me know how to teach my child
- Helped me know how to communicate better with my child
- How important it is to support kids so they can have a better future
- Ways to talk to kids to prevent family problems
- Knowing what to do to help child be ready for school

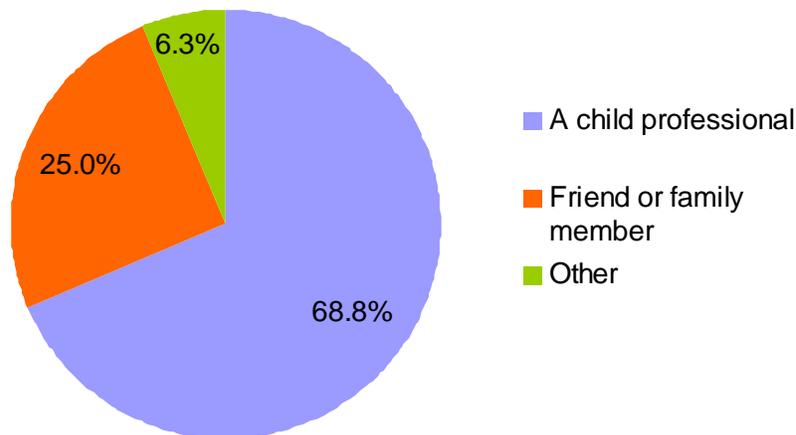
What will you do differently?

- Give kids healthier meals/snacks ("more fruits and vegetables;" "less sugar food")
- Read more to my children
- Try to have more patience with kids (and not yell at them so much)
- Give my children more respect

To what extent did parents achieve learning and positive behavioral goals that promote early childhood development and early literacy?

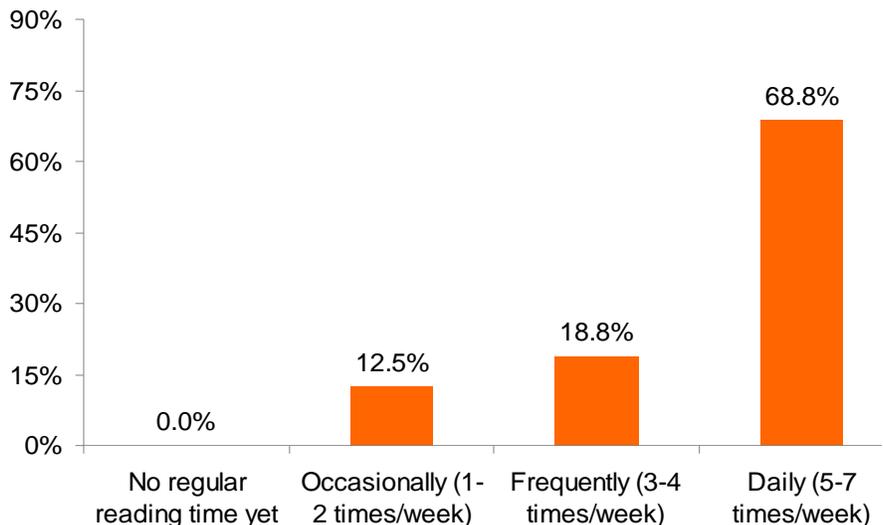
The Outreach Specialists worked with 36 families at all three school sites, making a total of 269 home visits (average = 2.89 visits per family) in the Parents as Teachers program in 2014 (based on data submitted for 3 quarters). To learn about achievement of learning goals and other effects of exposure to the project's activities, families completed a Family Survey at the end of the program. Sixteen (17%) of the parents completed a survey. Most (three-quarters) of the parents indicated they had heard about the home visitation program from a community child professional (Figure 29).

Figure 29. How Parents Heard About the Home Visiting Program (n=16)



Over two-thirds of the families indicated that they or a household member read or shared books with their children on a daily basis, while another 19% of them indicated that they did so frequently during the week. About 13% said that they engaged in this activity only occasionally (Figure 30).

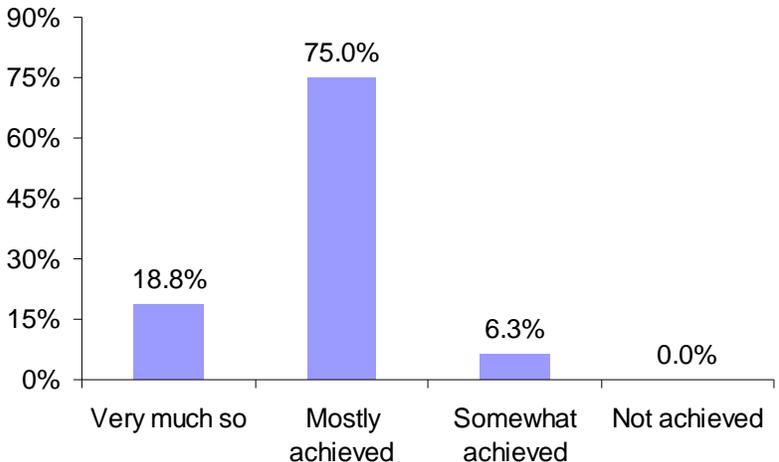
Figure 30. Frequency of Parents' Reading or Sharing Books with Children (n=16)



Four parents described the hopes and goals and what they hoped would change as a result of working with the program. Their comments center on helping their child learn for school success such as establishing a schedule for reading, reading more, and hoping that their child would "connect and relate to other kids."

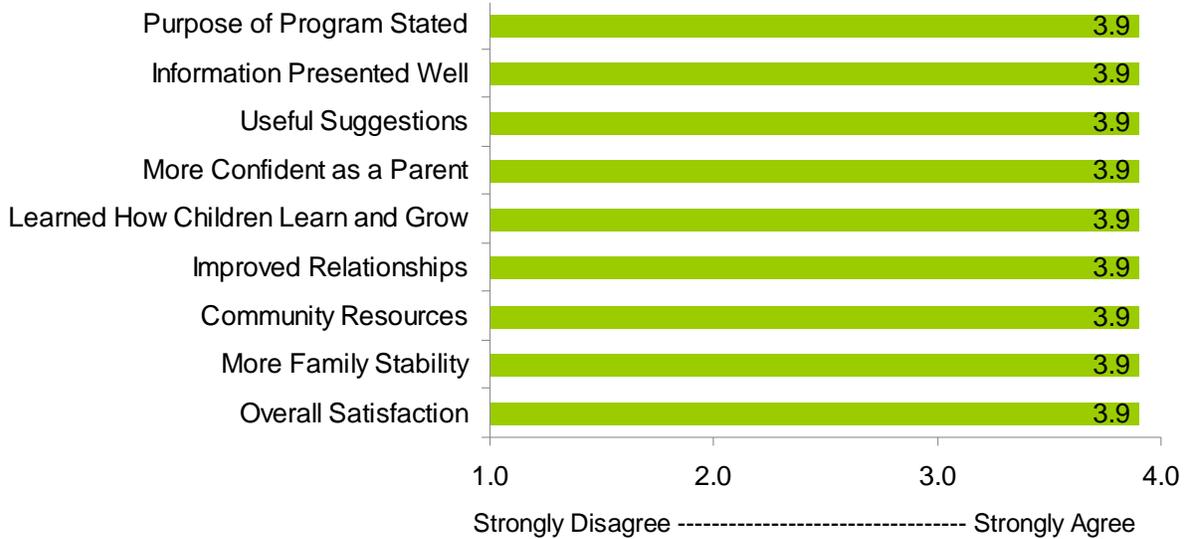
For the most part, the goals set by parents at the time of enrollment were met by more than 95% of the parents (Figure 31).

Figure 31. Extent Parents Thought They Achieved Their Pre-Program Goals (n=16)



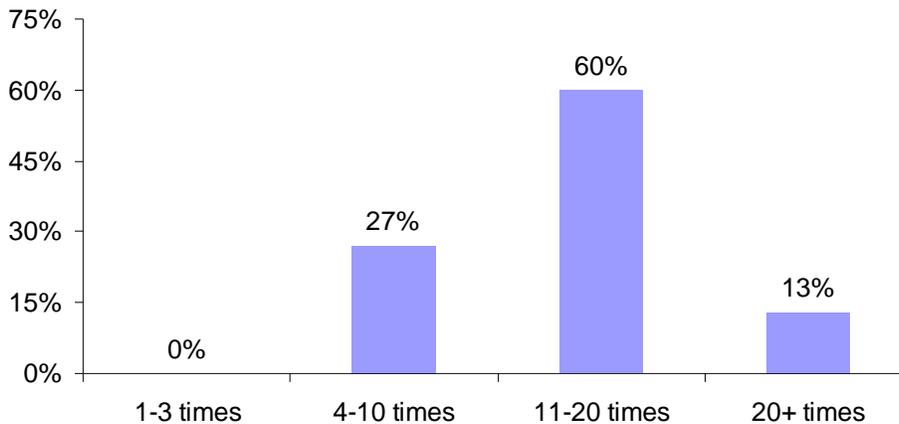
There was universal "strong agreement" that the home visiting program successfully met its objectives on all of the features parents were asked to rate (mean of 3.9 of 4.0).

Figure 32. Parents' Rating of Home Visiting Program (n=16)



About three-quarters (73.3%) of the parents indicated their children had extensive contact with staff (11 or more times) and a little over a quarter (26.7%) said that they or their children had had less contact (4 - 10 times) (Figure 30).

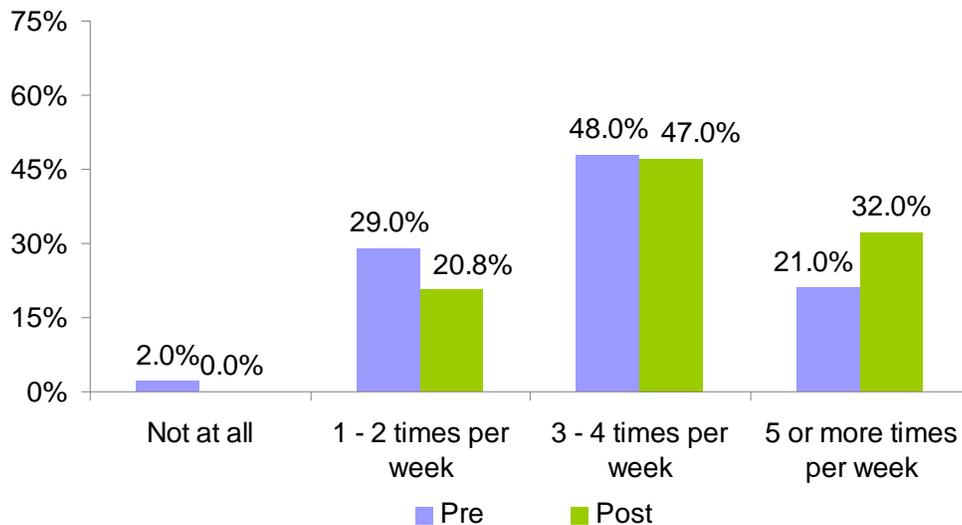
Figure 33. Frequency of Contact Between Program Staff and Child (n=15)



A total of 348 completed Ready to Read (RAR) early literacy and family engagement program surveys were submitted for analysis. We are reporting results for 103 who had submitted both a pre and a post (162 of them had only a pre and 83 of them had only a post).

Before participating in the program, approximately 29% of the parents reported that their children looked at books 1 - 2 times per week, almost half reported that their children looked at books 3 - 4 times per week, and about 21% reported that their children looked at books 5 or more times per week. After the program, there was a decrease in the number of children in 1-2 times per week that corresponded with an increase in the 5 or more times per week (Figure 34). A repeated measures analysis of variance (ANOVA) showed a statistically significant ($p < .05$) increase in the children's reading frequency from the pretest to the posttest as a result of participation in the program. The mean changed from 2.8 to 3.1 indicating that the number of times children looked at books reliably increased from less than 3-4 times per week to more than 3-4 times per week.

Figure 34. Number of Times Child Looked at Books with Parent/Other Household Member (n=100)



With respect to the frequency with which children *asked* to look at books at the pretest, approximately 34% reported that their children asked to look at books 1 - 2 times per week, about 45% reported that their children asked to look at books 3 - 4 times per week, and about 15% reported that their children asked to look at books 5 or more times per week. In the posttest, the "not at all" choice decreased somewhat in frequency and the "5 times or more" choice appeared to increase (Figure 35). There was a statistically significant ($p < .05$) increase in the frequency of children asking to look at books from the pretest to the posttest as a result of participation in the program. The mean changed from 2.6 to 2.8 indicating that the number of times children asked to look at books reliably increased from halfway between 1-2 times per week and 3-4 times per week to closer to 3-4 times per week after the program.



Figure 35. Number of Times Child Asked to Look at Books with Parent/Other Household Member (101)

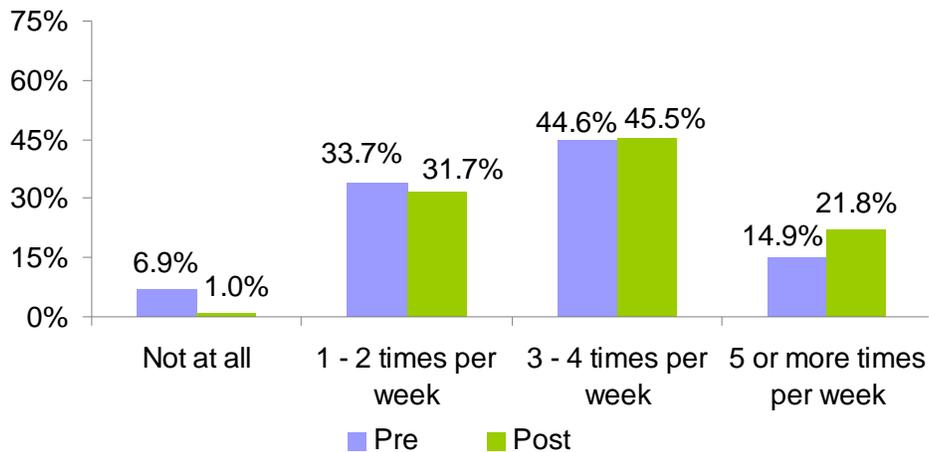


Table 28 shows the children's responses the last time they looked at books with a family member. The number of positive reading/listening behaviors appeared to be relatively high even in the pretest and increased in every category in the posttest. All of these positive behaviors were endorsed at least half of the time with the exception of the child actively conveying a story to the parent which was endorsed by about 40% of the parents in the pretest and by about 43% in the posttest. The "None of these" category appeared to be somewhat less endorsed in the posttest.

Each behavioral category was evaluated separately by repeated measures ANOVA. The frequency of endorsement for any of the behaviors was not statistically different ($p > .05$) from the pretest to the posttest.

Table 28. Child's Response Last Time They Looked at Books with Family (n=103)

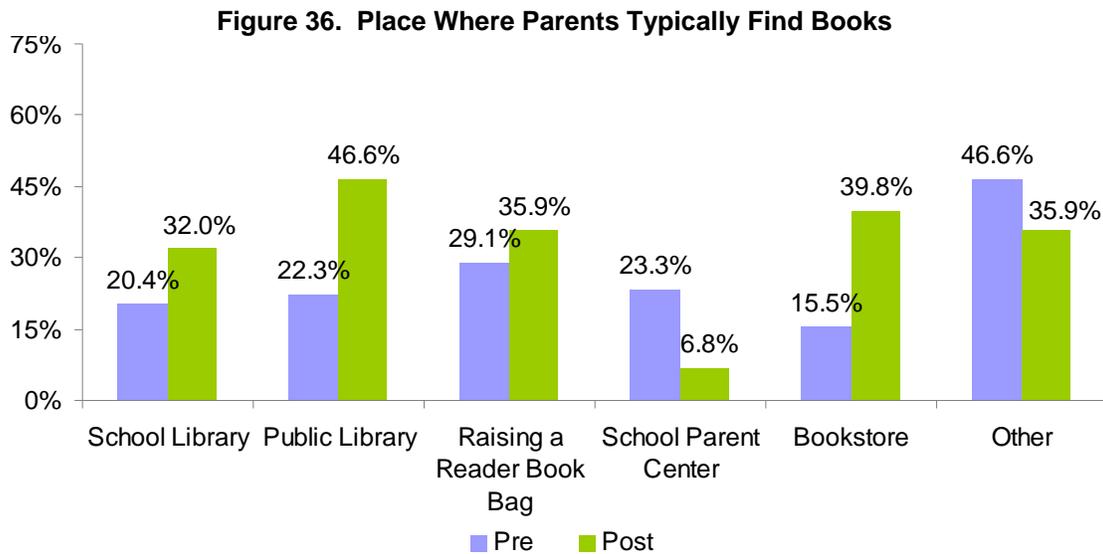
Survey Question	Pre		Post	
	n	%*	n	%*
My child paid attention to the story most or all the time.	64	62.1	69	67.0
My child turned the pages of the book.	70	68.0	71	68.9
My child talked about the story.	57	55.3	64	62.1
My child asked questions about the story or the book.	52	50.5	57	55.3
My child "read" the book to me or told me a story about the pictures.	41	39.8	44	42.7
None of these.	5	4.9	3	2.9

*Percentages may total over 100% because participants were asked to "check as many as happened." Approximately 74% of the respondents in the pre group chose 2 or more items and 80% of the post group chose 2 or more items.

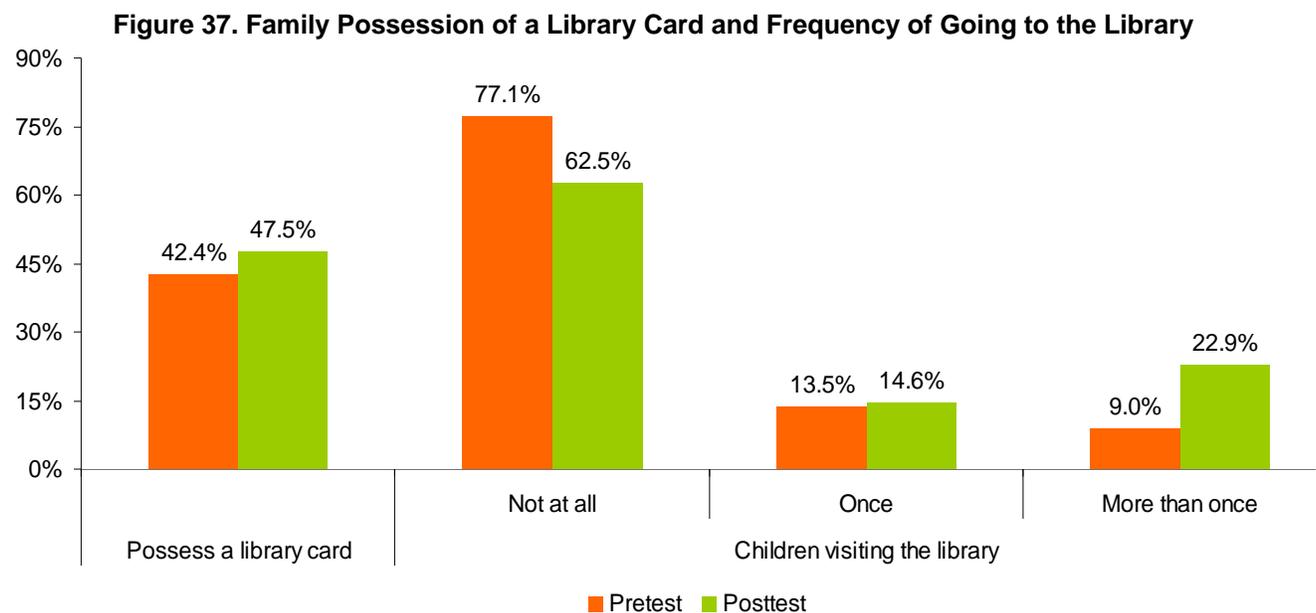
RAR asks parents to identify the places they typically find books to read with their child. Each of the sources shown in Figure 36 on the next page was evaluated separately by repeated measures ANOVA. All of the sources except using the "Raising a Reader Book Bag" and "Other" yielded significant changes from the pretest to the posttest:

- There was a significant ($p < .05$) increase of using the school library to find books from 20% of the parents in the pretest to 32% of the parents in the posttest.

- There was a significant ($p < .001$) increase of using the public library to find books from 22% of the parents in the pretest to 47% of the parents in the posttest.
- There was a significant ($p < .001$) decrease of using the school parent center to find books from 23% of the parents in the pretest to 7% of the parents in the posttest.
- There was a significant ($p < .001$) increase of using the bookstore to find books from 16% of the parents in the pretest to 40% of the parents in the posttest.



Having a library card and visiting the library both increased at the time of the post-survey (Figure 37), though only the frequency with which children visited the library was statistically significant ($p < .05$). The mean changed from 1.32 to 1.60.



Although there was already a good deal of enjoyment in reading to their children at the time of the pretest, there was a slight increase in the respondents' level of enjoyment at the time of the posttest. The increase however was not statistically significant ($p > .05$). The importance of reading to their children was also highly endorsed at the pretest and again at the posttest. The pre/post differences in these 2 activities were not statistically significant ($p > .05$) (Table 29).

Table 29. Parents' Rating of Early Literacy Activities

Survey Item	n	PRE		POST	
		M	SD	M	SD
Enjoyment reading with child	91	8.6	2.0	8.8	1.8
Importance of reading and sharing books with child	87	9.4	1.3	9.5	1.4

Note. Scale was from 1 to 10; pre and post samples are matched.

Since TV watching can impact the home literacy environment we modified the RAR form to add questions about the frequency of TV and TV-watching behaviors. Table 30, which begins on this page, displays these results. At the pretest, over half (52.2%) of the parents reported that their children watched 2 hours or less of television a day. At the posttest, almost two-thirds (62.3%) of the parents reported that their children watched 2 hours or less a day. A repeated measures ANOVA ($p < .01$) showed pre/post differences in TV watching were statistically significant.

At the pretest, about 71% of the respondents indicated that they always selected the TV programs their children watched whereas at the posttest about 65% always select the TV programs. At both the pretest and posttest, about two-thirds of the respondents said that they sometimes watched the TV programs with their children. At the pretest almost half (47%) said that they sometimes asked their children about the TV programs, whereas at the posttest more than half (56%) did so. There were no statistically significant differences ($p > .05$) between any of these pre- and posttest responses.

Table 30. Families' TV Watching Experiences

Survey Question	Pre		Post	
	n	%	n	%
<i>About how many hours a day do your children watch TV? (n=69)</i>				
1 hour or less	8	11.6	14	20.3
1 - 2 hours	28	40.6	29	42.0
2 - 3 hours	15	21.7	17	24.6
3 - 4 hours	13	18.8	7	10.1
4 or more hours	5	7.2	2	2.9
<i>When your children watch TV do you...?</i>				
<i>Select the TV programs your children watch? (n=69)</i>				
Always	49	71.0	45	65.2
Sometimes	18	26.1	23	33.3
Never	2	2.9	1	1.4

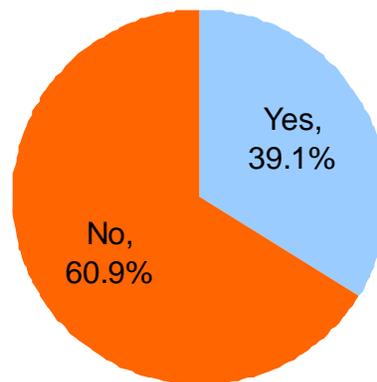
Table continues on next page



<i>Watch the TV programs with your children? (n=62)</i>				
Always	18	29.0	20	32.3
Sometimes	42	67.7	40	64.5
Never	2	3.2	2	3.2
<i>Ask your children questions about the TV program? (n=57)</i>				
Always	24	42.1	22	38.6
Sometimes	27	47.4	32	56.1
Never	6	10.5	3	5.3

The majority (60.9%) of the families stated that they had not participated in the RAR book-bag program before entering the program (Figure 38). (This question was only asked in the pre-survey.)

Figure 38. Had Family Participated in the RAR Book Bag Program Before? (n=253)



How ready to enter kindergarten were children and to what extent had they accessed health services?

Close to 172 completed Kindergarten Registration Family Surveys were submitted for the evaluation this year. These findings, as summarized in this report, help to provide a picture of the family and child that can help teachers in understanding the children as they prepare for their new classes as well as give an indication of the children's access to and utilization of health screening services.

The vast majority of families (about 83%) did not participate in any of the three specified programs described in the survey (Table 31 on the next page). Approximately 6% had participated in the School Readiness Weekly Workshops, 6% had participated in the School Readiness Monthly Meetings, and about 1% had participated in the Whistle Walkers Program (which does not exist as a formal program currently).



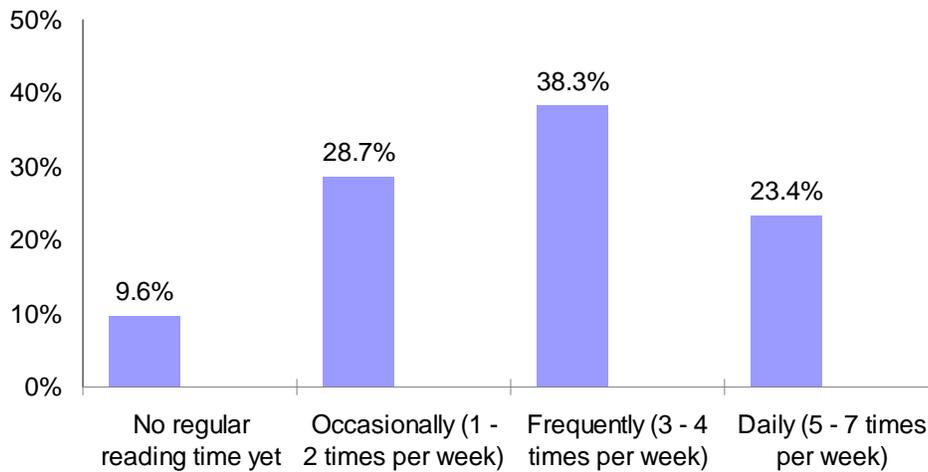
Table 31. Children's Prior School Readiness Experience (n=172)

Survey Question	n	%*
School Readiness Weekly Workshops	11	6.4
School Readiness Monthly Meetings	11	6.4
Whistle Walkers Program	2	1.2
None of these	143	83.1

*The sum of the percentages slightly exceeds 100% because respondents could check more than one choice.

The parents indicated that almost a quarter (23.4%) read or shared books with their children on a daily basis, 38% of them indicated that they did so several times per week, and about 29% said that they engaged in this activity only occasionally. Almost 10% reported that they had no regular reading time set aside (Figure 39).

Figure 39. Frequency of Reading or Sharing Books With Child



Almost half of the children (46%) had attended a state preschool. Somewhat over a quarter of the respondents (29%) indicated that their children had not attended preschool or childcare for longer than six months. Of the 169 respondents, 12 of them reported that their children had attended two of the programs, two of them reported that their children had attended three of the programs, and one reported that their child had attended all six types of programs (including "other") (Table 32).



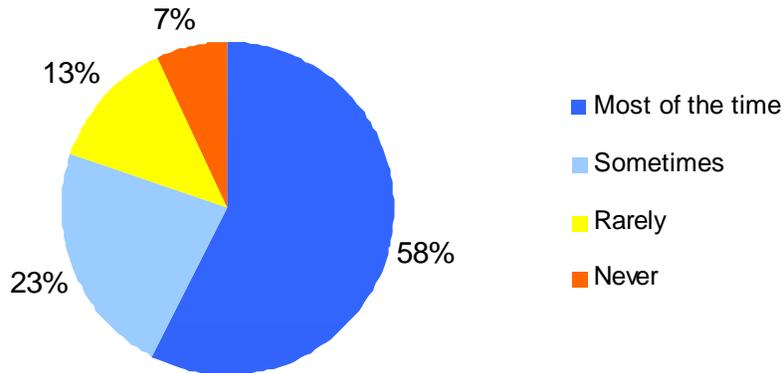
Table 32. Children's Attendance (for at Least 6 Months) in Preschool or Child Care*

Survey Question	<i>n</i>	%
<i>Has your child attended preschool or childcare for more than 6 months?</i>		
No	49	29.0
State Preschool	78	46.2
Head Start	36	21.3
Private preschool	7	4.1
Family Child Care	9	5.3
Center Based Child Care	4	2.4
Other	7	4.1
East Gridley Learning Center	1	
Kindergarten	1	
Literacy Program	1	
Migrant Education	1	
Tk Program	1	

Note. Percentages may total over 100% as respondents were instructed to "check all that apply."

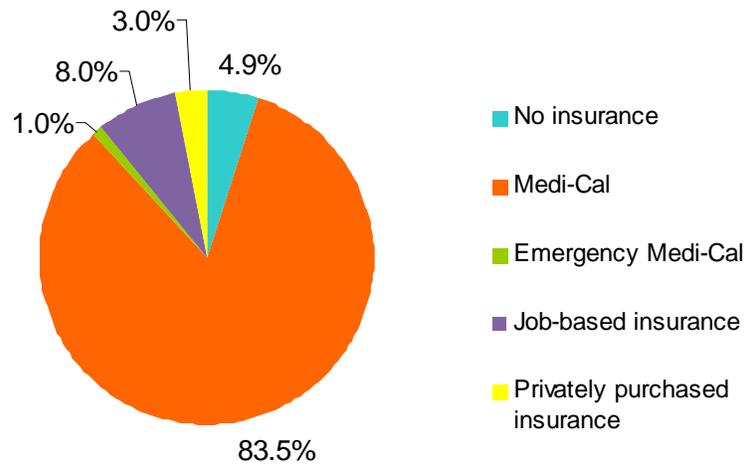
Families were also asked whether when they needed help, support or guidance, how often they had family, friends or someone they could turn to. More than half (58%) of the respondents indicated that they had support most of the time when it was needed, and another approximately 23% said they had such support sometimes. However, about 7% of the parents effectively had no support at all in times of need (Figure 40).

Figure 40. Availability of Support When Needed by Parent/Caregiver



Because the families that enroll their children in kindergarten in the Marysville Joint Unified School District are generally low-income, over 83% of the respondents reported that they had Medi-Cal health coverage and another 8% had job-based insurance. Only 5% said that they had no health insurance (Figure 41).

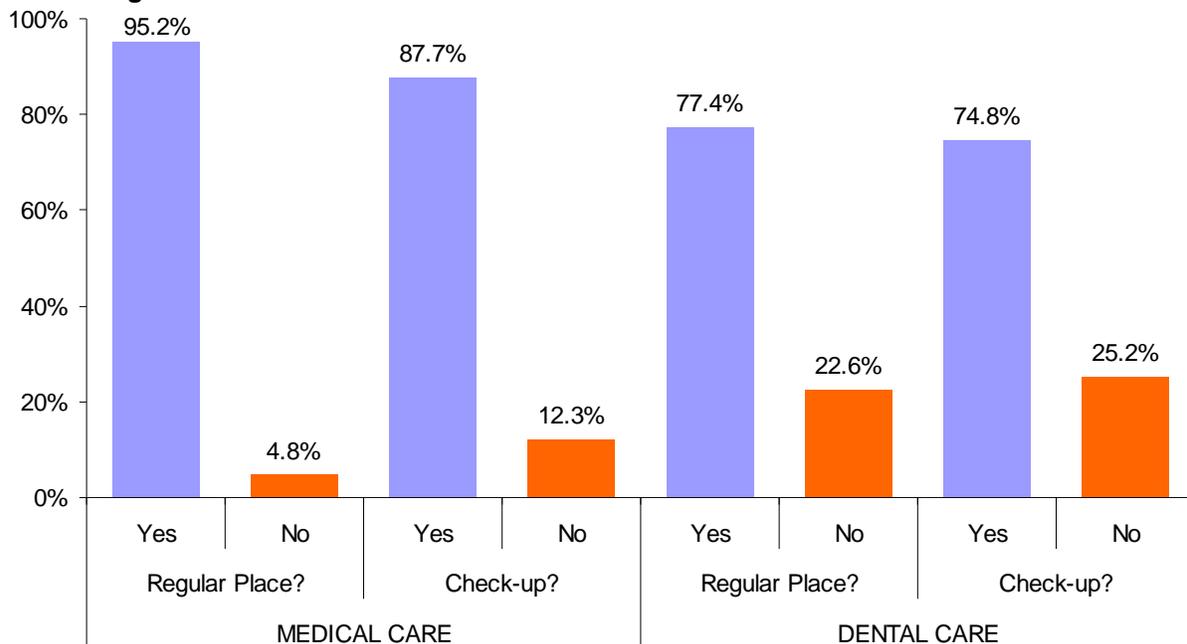
Figure 41. Type of Health Insurance Coverage for the Child



Children's access to and utilization of health care services are shown in Figure 42. More than 95% of the families said that they had a regular place to take their child for *medical care*, and about 88% of them said that their children had had a well-child check (seen by a doctor when the child was not sick) in the last year. Of the 8 respondents who stated they do not have a regular place to take their child for medical care, 2 of them (25%) also stated that they had not brought in their child for a well-child check-up.

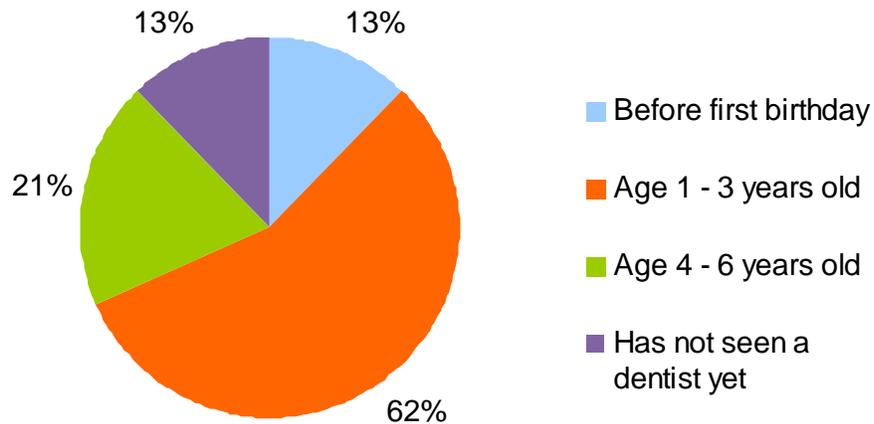
Ability to access *dental services* was less favorable than medical services, although about 77% of the respondents said that they had a regular place for their children's dental care (a slightly lower proportion than last year), and three-quarters of them said their children had a dental visit in the last year. Of the 37 parents who stated that they did not have a regular place to take their child to for dental care, 25 (67.6%) also stated that their child had not had a dentist visit in the past 12 months.

Figure 42. Children's Access to and Utilization of Medical and Dental Services



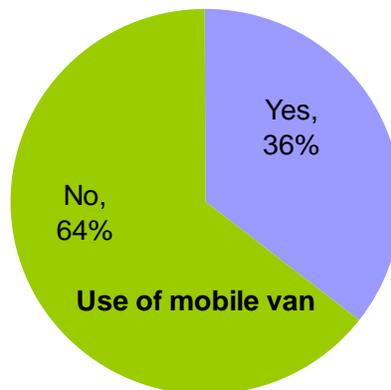
Because of the importance of children having a dental visit "with the first tooth or first birthday,"* we added a question to the RAR form about the age of the child at its first dental exam. Over half of the children did not meet the national recommendation for an oral health exam. Close to two-thirds (62%) of the parents reported that their children were between 1 and 3 years of age for their first dental exam, and about 21% reported that their children were between 4 and 6 years of age for their first exam. About 4% brought their children to a dentist before their first birthday, and about 13% stated that their child had not received a dental exam yet (Figure 43).

Figure 43. Age of Child at First Dental Exam (n=164)



About one-third of parents reported their child had ever used the services of the Happy Tooth Mobile (Yuba County Children’s Dental Van) (Figure 44).

Figure 44. Ever Use of Happy Tooth Mobile Van (n=163)



* Policies and guidelines of the American Academy of Pediatric Dentistry, American Academy of Pediatrics, et al.



Successes and Challenges

An example of one of the classes the Health Specialist taught to preschool children this year concerned the importance of hand washing. She provided the 30-minute class to over 500 preschool children, using a song to help them remember how to wash correctly including knowing how to track the time as they wash, and a stuffed dog with pretend germs which can only be seen with a "magic" black light. Additionally, she sent hand-washing instructions and "cover your cough" information home for the children and parents to use together. No examples of grantee/project successes or challenges were submitted by staff this year for us to draw upon for the evaluation report.

Extent of Direct Alignment with Strategic Plan

Result Area	Primary Impact	Strategy/Objective Addressed
Improve systems of care	✓	<ul style="list-style-type: none"> ② – collaboration with partners and services providers ④ – services for children with disabilities and their families
Improve family functioning	✓	<ul style="list-style-type: none"> ① – programs that increase parent education and skills
Improve child development	✓	<ul style="list-style-type: none"> ① – services that prepare children for school ② – programs that improve preschool quality ③ – programs that increase preschool availability
Improve the health of children	✓	<ul style="list-style-type: none"> ① – programs that promote healthy eating and physical activity ② – programs that increase access to oral health services

Relevant Strategic Plan Indicators

The following indicators have the most relevance to this project, link with the *Strategic Plan* strategies, and are able to be tracked at the community level.

- *The percent of 3-5 year olds enrolled in or who regularly attend pre-K programs.*

One-third (31%) of Yuba County parents reported in the 2011-12 California Health Interview Survey their children attended preschool or Head Start at least 10 hours a week, about double the proportion (15.5%) of children statewide. In 2012-13, enrollment in Early Head Start was 335 and in Head Start 1,138, according to Yuba County Head Start. The 2014-15 Children Now Scorecard shows 36% of Yuba County 3- and 4-year-olds attend preschool. The "demand" for children needing care (based on parents in the workforce) outstrips the available slots ("supply") for full-time preschool as well as infant/toddler care, according to the Child Care Planning Council of Yuba & Sutter Counties. The Council's needs assessment data found an undersupply of part-day preschool spaces in Yuba County even if every family who could afford to pay wanted their child to participate in a part-day preschool program.

- *The percent of children with health insurance.*

Access to health care refers to having health insurance coverage, but also having a usual source of care. American Community Survey data for 2011-2013 indicates that 94.5% of Yuba County children ages 0-17 had health insurance coverage. The 2011-12 California Health Information Survey, CHIS, shows that 98%--about the same proportion as statewide--of children ages 0-5 were insured either through their families' employer- based coverage or

through Medi-Cal or another public program. However, children in the county have lower rates of employment-based coverage and correspondingly higher rates of Medi-Cal coverage.

- *The percent of children with a dental visit in the last 12 months.*

In FY 2013-14, 22.9% of children age 0-3 and 49.1% (down from 51.6% 2 years prior) of children age 4-5 with Medi-Cal in Yuba County made a dental visit within the past year, according to State Denti-Cal data. These proportions were lower than children statewide in these same age groups (27.3% and 64.2%, respectively).

- *The percent of public school students tested in 3rd grade who scored proficient or advanced on the English Language Arts (ELA) California Standards Test.*

In 2013, 47% (up from 46% in 2012) of 3rd grade students in Yuba County scored proficient or advanced on the ELA, slightly higher than 45% of all California 3rd-graders.

Conclusions and Recommendations

Feedback from multiple workshops, home visits, assistance with linkages to medical homes and other program activities validates the many benefits families received from this comprehensive school readiness project which has become an important resource for families with young children in the target schools. On all dimensions, the parents evaluated the program in the most positive of terms. The impact on families from this grant has been significant—from receiving supplies of food when they are in dire need of assistance to dealing with getting health coverage and needed medical attention to learning about early literacy and more positive ways of parenting.

The findings from the kindergarten assessment again point to the importance of ensuring access to dental care in early childhood for the youngest children in Yuba County and the role school districts can play in parent education about its importance.

B. Systems Findings

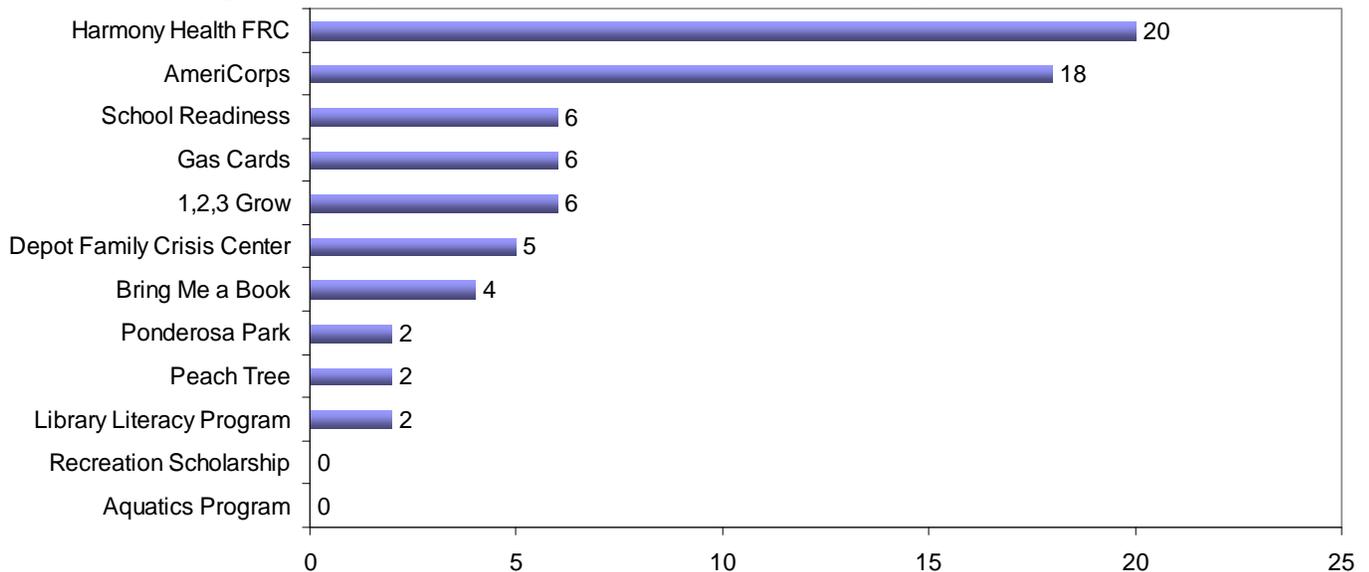


Each major grantee reported how it leveraged resources and collaborated with other community partners.

IN-KIND SUPPORT

Grantees named over 70 individual sources of support for their projects. These included parents and other community volunteers as well as staff time, supplies, equipment and products from county and non-profit agencies, private businesses, educational and training institutions and partners from Yuba and adjacent counties. Figure 45 displays the reported number of individual sources of non-cash (in-kind) support they received during 2014. Examples of the type of support included food, art supplies, labor for construction, and professional medical services.

Figure 45. Reported Number of Sources of Non-Cash Support (In-Kind)



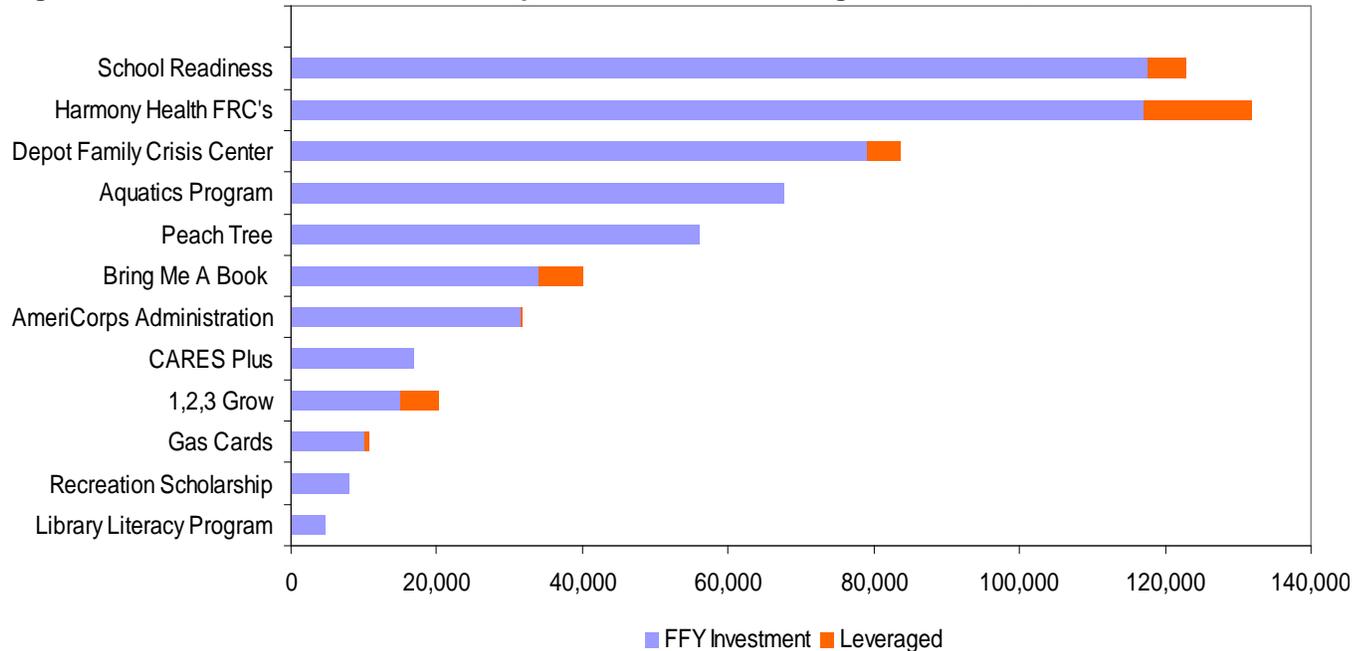
Note: Some sources contributed more than one activity or product during the calendar year.

LEVERAGED FUNDS

The major grantees were asked to report how their FFY grant helped them leverage additional resources, specifically the success with which their FFY grant attracted other grants and cash donations that helped to support the program. Together, these programs reflected a total community dollar investment of \$594,700 in 2014 that represents about a 7% leveraging of FFY funds by the grantees (Figure 46 and Table 33 below), a lower proportion than in 2013. Note that

this information reflects what the grantees understood as the meaning of "leveraged funds," which despite guidance from FFY could be inconsistent from agency to agency.

Figure 46. FFY Grant Investment and Reported Additional Leveraged Resources, Calendar Year 2014*



*Note: Chart excludes CARES Plus as it was not included in this evaluation.

Table 33. FFY Grant Investment and Reported Additional Leveraged Resources, Calendar Year 2014

	FFY Dollar Investment	Leveraged Resources (reported cash)	Total Community Investment	% of FFY Investment Leveraged
1,2,3 Grow	\$15,072	\$5,186	\$4,718	34%
AmeriCorps Administration	\$31,554	\$80	\$8,044	.2%
Aquatics Program	\$67,811	\$0	\$10,672	0%
Bring Me A Book	\$33,960	\$6,000	\$20,258	18%
CARES Plus	\$16,952	\$0	\$16,952	0%
Depot Family Crisis Center	\$79,020	\$4,653	\$31,634	6%
Gas Cards	\$10,001	\$671	\$39,960	7%
Harmony Health FRC's	\$116,996	\$14,881	\$56,210	13%
Library Literacy Program	\$4,718	\$0	\$67,811	0%
Peach Tree	\$56,210	\$0	\$83,673	0%
Recreation Scholarship	\$8,044	\$0	\$131,877	0%
School Readiness	\$117,566	\$5,325	\$122,891	5%
Total	\$557,904	\$36,796	\$594,700	7%



SECTION II.

OVERVIEW OF GRANT ALIGNMENT WITH FFY 2011-16 STRATEGIC PLAN RESULT AREAS



The four overarching result areas in the 2011-2016 Strategic Plan are consistent with the focus and intent of the Children and Families Act and include the following areas: improve systems of care, improve family functioning, improve child development, and improve child health. The chart below summarizes the extent to which the major programs funded during 2013-14 and included in the evaluation were most directly aligned with the Strategic Plan,* and hence were areas where Commission funding impacted specific strategies and objectives.

Table 34. Summary of Direct Alignment with Strategic Plan and Reach of Commission Funding

	1,2,3 Grow Parent	AmeriCorps	BMAB	The Depot	Gas cards	Harmony Health FRC	Library Literacy	Peachtree	Ponderosa Park	OPUD Aquatics	Recreation Scholarships	SR
Improve Systems of Care												
#1: Support FRCs												
a) Support culturally appropriate FRC services	•	•				•						
b) Support collaboration between FRCs and schools	•	•				•						
#2: Collaborate with partners and service providers												
a) Convene to identify strategies in high-need areas		•		•		•	•	•				•
b) Convene to ensure outreach/messaging		•		•		•	•	•	•	•	•	•
c) Convene to discuss and identify duplications		•		•		•	•	•				•
#3: Support transportation												
a) Support vouchers					•							
b) Advocate at Unmet Transit Needs Hearings					•							
c) Convene to discuss informal transportation methods					•							
#4: Support families with children with disabilities												
a) Increase awareness and access					•							•
b) Leverage resources w/ partners for playground equipment									•	•		
c) Support recreational programs for children with disabilities							•		•	•	•	•
Improve Family Functioning												
#1: Support increased parent knowledge and skills												
a) Increase culturally appropriate education and info resources	•	•	•	•		•	•					•
b) Support programs throughout the county	•	•	•	•		•	•					•
c) Support formation of coalitions of service providers	•	•		•		•						•

* Although other grant-funded activities were related to many of the Strategic Plan areas, they were not directly aligned.



	1,2,3 Grow Parent	Americorps	BMAB	The Depot	Gas cards	Harmony Health FRC	Library Literacy	Peachtree	Ponderosa Park	OPUD Aquatics	Recreation Scholarships	SR
Improve Family Functioning (continued)												
#2: Support free community events for families												
a) Support free community events with educational programs		•		•		•	•		•	•	•	
b) Attend community events to educate residents about FFY		•		•		•	•		•	•	•	
#3: Support child and parent mental/behavioral health												
a) Increase community awareness and access to programs				•								
b) Advocate for substance abuse treatment and MH programs				•								
c) Support MH programs, including for postpartum depression				•								
Improve Child Development												
#1: Support school readiness services												
a) Support a range of services to prepare children for school	•	•	•	•		•	•					•
b) Support availability of child dev behavioral specialists	•	•		•		•						•
c) Support family literacy	•	•	•	•		•	•					•
d) Support parental involvement activities	•	•	•	•		•	•				•	•
#2: Support child care and preschool quality												
a) Support ECE workforce development	•	•		•		•						•
b) Support education/training for challenging behaviors	•	•		•		•						•
c) Work with partners to help family/non-traditional providers	•	•		•		•						•
#3: Support increased availability of child care/preschool spaces												
a) Support increased subsidized/non-subsidized spaces	•	•		•		•						•
b) Initiate conversation with CHS and CCPC to address needs	•	•		•		•						•
Improve Child Health												
#1: Support healthy eating and physical activity												
a) Work with community partners to establish programs	•	•				•						•
b) Develop childhood obesity educational materials to distribute	•	•				•						•
c) Continue to support organized in- and outdoor rec programs	•	•				•			•	•	•	•
#2: Support increased access to oral health services												
a) Support oral health programs, including community fluoridation	•	•				•						•
b) Survey DDSs/conduct key informant interviews re. anesthesia												
c) Work with FRCs re. feasibility of adding Dental Outreach Wrkr						•						•
#3: Support increased access to health care services, including enrollment												
a) Establish a task force to develop health access improvement												
b) Work with FRCs to increase application/enrollment assistance						•						
#4: Support the provision of safe play areas												
a) Support increased sun-protected outdoor play areas over								•	•			
b) Identify opportunities to create indoor safe play areas										•		

To the extent that programs continue to be funded in the areas with high alignment, First 5 Yuba, along with other Yuba County partners and stakeholders, can track and monitor progress for children 0-5 and their families as an indication of the long-term effectiveness of its work. The result areas with relatively little or no direct alignment suggest opportunities for future strategic planning and grantmaking.



SECTION III.

GENERAL RECOMMENDATIONS TO STRENGTHEN EVALUATION



These recommendations are based on our observations during 2013 and 2014, experience as evaluators and child health and education professionals and our knowledge of similar programs elsewhere in the state, and are provided to strengthen future FFY evaluations. Several Commission seats have turned over since we presented our last evaluation report. Besides resulting in new leadership and ideas this affords us an opportunity to offer some of the same recommendations we made last year that are still relevant and aligned with the Commissions Strategic Plan.

Having the grant funding cycle on a fiscal year (July 1 – June 30) and the evaluation on a calendar year (January 1 – December 31) made it very challenging to obtain some of the pre- and post-surveys and line up information in the Milestones reports during the same evaluation reporting period. We understand FFY plans to change the evaluation reporting periods to coincide with grant periods in the future, and this will be beneficial.

We've appreciated the collaborative relationship we developed with FFY and its grantees and the progress that was made to improve the quality and timing of the data that was collected. We also appreciated FFY staff facilitating requests to resolve certain reporting issues. The improvements helped to increase accuracy and our ability to analyze the data.

There is room for evaluation improvement, however, as well as opportunities to increase the robustness of the data First 5 projects can capture. Because BAA became the evaluation contractor (January 2013) after most of the evaluation tools prepared by a previous contractor were already in use, we suggested only minor modifications to the forms. Grantee budgets also did not accommodate the addition of other evaluation tools that could have added value to the program. For example, many local First 5s use the CA Office of Education DRDP (Desired Results Developmental Profile) Infant/Toddler and Preschool forms for pre/post assessment of children's developmental growth in language, literacy, emotional-social, math concepts and other domains. The Commission may wish to consider incorporating this tool into several relevant FFY projects if there is grant support for it, though a marginal increase in costs could be likely. We also suggest looking for opportunities to capture the long-term impact of community investments where this is possible. Although we saw an opportunity for one project to document the impressive long-term impact their project was making, it wasn't possible to incorporate that into their evaluation plan.

Whenever new grantees are funded or new evaluation tools are being considered for current grantees, it will be beneficial to ask the evaluation contractor to have an early heads up to catch any missing information (for example, some forms don't contain a client identifier), errors in structure (such as yes/no questions included in a list of scaled response questions), differences between English and Spanish versions that could preclude combining results, and so forth.

The turnover of staff in some agencies resulted in the loss of evaluation information. In addition to ensuring grantees have back-up databases for program data storage, we recommend new staff at every program site who are responsible for administering and collecting evaluation tools always be oriented in understanding and using the evaluation forms, including ensuring that old forms are destroyed and only current ones are being used at each program site.

Our review of the relevant child health and other community indicators that align with the Commissions Strategic Plan, as well as some of the larger projects' findings, suggest areas of need in Yuba County for future priorities. We've described some of these need areas in the above individual grantee reports, but want to again reiterate as one example access to early oral health services as an important area where the Commission could focus. The percentage of Medi-Cal children 0-5 receiving dental care in California as a whole is not impressive (the state's Medi-Cal dental rates are 48th worst of 50 states making it extremely difficult to find dentists to participate), but while nearly two-thirds (64%) of California children 0-5 utilized a dental service last year, only about half (49%) did so in Yuba County.

Prior to the next major grant cycle—and before the next strategic plan update—we again recommend the Commission support a First 5-focused needs assessment/gap analysis, particularly addressing the indicators with the greatest local variance from state and national benchmarks. For example, while over 83.6% of women statewide began prenatal care in their first trimester of pregnancy as recommended (2010-2012 average), only 69.8% of pregnant women in Yuba County did so, ranking the county 49th of 58 counties, but offering an opportunity to direct more strategic grant support for improving birth outcomes through better prenatal care.

Finally, we again suggest the Commission sponsor a learning forum among the FY 2014-15 grantees to discuss the results of this evaluation report, share additional outcomes not captured here, and use the information to make recommendations about program strategies that can enhance future grantmaking as well as evaluation.