Children's Leadership Council of Contra Costa County: Stakeholder Meeting #2

July 10, 2019 | 9:30 a.m. - 12:30 p.m.

Pleasant Hill Community Center, 320 Civic Dr, Pleasant Hill, CA 94523

Meeting Summary

Desired Results: (what we want to achieve by the end of the meeting)

- Build agreement on a framework for collective action
- Reach preliminary agreement on big, bold goals for the Children's Leadership Council (CLC)

Participants: 49 individuals (see attached list)



- 1. Welcome (Devorah Levine, Contra Costa Employment & Human Services Department)
 - Original purpose and vision for a Children's Leadership Council:
 - Create a single, broad, unified, highest-level entity that elevates the needs of children of all ages throughout the county, and advocates for the policies, reforms and revenues that are necessary to ensure that all children are safe, healthy, educated and, ultimately, successful
 - The health and well-being of children and families is a vital part of the county's infrastructure, as important as water and roads
 - Goal is to create an action plan by the end of this calendar year, have a blueprint for taking strategic, collective action to build child, family, and community resilience.
 - Will also support development of a countywide Child Well-being Dashboard that highlights dimensions of well-being and resilience, as well as gaps or inequities that warrant collective action
- 2. **Meeting Overview** (Nicole Young, Optimal Solutions Consulting)
 - Provided recap of March 27 kick-off meeting and CLC planning process and timeline
 - Reviewed agenda
 - Participant introductions
- 3. A Proposed Framework for Collective Action (Ruth Fernandez and Sean Casey, First 5 Contra Costa)
 - Reviewed draft Framework for Collective Action (Attachment 1), which is based on discussions about the need for a CLC, themes from the 3/27 kick-off meeting, and other established frameworks and models.
 - The draft Framework is a living document that will continue to be refined and serve as the basis of the eventual CLC action plan.
 - Many people in the room are already experts in these frameworks, doing the work on a daily basis. Others may be less familiar, this is a good opportunity to build shared knowledge and language.
 - CLC Purpose statement: To intentionally develop and strengthen the ecosystem that builds child, youth, family, and community resilience and well-being.
 - Focus on ecosystem (vs individual programs) because of The Pair of ACEs Tree, (Adverse Childhood Experiences and



- Adverse Community Environments), developed by the Building Community Resilience collaborative (Attachment 2: What's Equity Got to Do With It).
- Adverse Childhood Experiences include many types of abuse, neglect, and other potentially traumatic experiences that happen to children and youth under the age of 18, such as: domestic violence, substance abuse by caregivers, emotional and sexual abuse, maternal depression, physical and emotional neglect, divorce, mental illness, incarceration, and homelessness (Attachment 3: ACEs Infographic).
- o Adverse Childhood Experiences increase the chances of risky health behaviors, chronic health

conditions, low educational attainment and social mobility, and even early death. As the number of ACEs increases, so does the risk for these outcomes (Attachment 4: What Are ACEs?).

o The Pair of ACEs tree recognizes that adversity within a family doesn't occur on its own. The tree illustrates the relationship between adversity within a family and the conditions or environments that surround children and families – also known as social determinants of health.



- The community environments or social determinants of health are the soil that the tree is planted in. When the soil is unhealthy – Adverse Community Environments characterized by poverty, discrimination, community disruption, lack of opportunity, economic mobility, and social capital, poor housing quality and affordability, and violence – the roots of the tree won't have a chance to grow deep and strong, and the branches and leaves above ground are likely to be sparse or stunted.
- And many characteristics of adverse community environments are the result of policies and practices across multiple systems that produce and reinforce inequities.
- One strategy to address The Pair of ACEs is to shift policies and practices to focus on enhancing **Protective Factors**, as defined in the Center for the Study of Social Policy's Strengthening Families framework, that can prevent or mitigate adverse childhood experiences and serve as a protective buffer against adverse community environments. (Attachment 5: Core Meanings of the SF Protective Factors)
 - Parental Resilience
 - Social Connections
 - Knowledge of Parenting & Child Development
 - Concrete Support in Times of Need
 - Social & Emotional Competence of Children
- Important to simultaneously work on enhancing protective factors that are essential for healthy development and wellness throughout life AND creating the conditions that build community resilience

Healthy, Supported Families Connected Systems & Supports Housing Economic Economic Transportation Transportation

• CLC Vision of Success:

- Set of aspirational statements about what success will look like, drafted based on themes from 3/27 visioning exercise, like the notion of "our" children and families (shared responsibility), safety, love, social-emotional skills, justice, partnerships, ecological framework
- o In every region of Contra Costa County:
 - Our children and youth are safe, healthy, loved, educated, and have the social-emotional skills to thrive throughout life.

- Our families are resilient, connected, and have the social and economic resources to raise thriving children and youth.
- Our neighborhoods are safe, just, and vibrant places for families to raise children and youth.
- Our partners in public, non-profit, private, and community-led groups and systems create the community conditions for resilience through collective action and upstream investments in children, youth, and families.

CLC Values & Guiding Principles

- Based on themes that emerged in the 3/27 CLC meeting, and draws from the Building Healthy Places Network Principles for Building Healthy and Prosperous Communities and Collective Impact Principles of Practice
- Each of the values/guiding principles are defined further in the Framework handout: Equity;
 Community voice and partnerships; Data for continuous improvement; and Integrated,
 sustainable investments in prevention

What We Do

- Examples of the types of activities and actions the CLC could take to effect change and fulfill its vision. This is not meant to be an exhaustive or hyper-specific list, but provides examples of "the how" – i.e. ways the CLC could work together to amplify existing efforts and initiatives and strengthen the ecosystem
 - Educate and engage
 - Convene partners
 - Coordinate change efforts
 - Align and leverage
 - Coalesce on common goals
- Meeting attendees provided feedback on the draft Framework via live polls. The majority of
 participants indicated they Loved or Liked the elements of the Framework. Some participants
 indicated they Could Live With various elements of the Framework. A very small percentage said
 they Don't Like the Vision and examples of What We Do.
- Feedback and suggestions from pairs discussion included:

Element	Feedback or Questions
Purpose	Communities are already resilient – support and recognize existing resilience
	• It should define children and youth . As it stands, it appears that the focus is on the full
	life cycle – from cradle to grave. How do we stretch the life cycle w/o diluting the impact?
	Should focus more on systems change and accountability
	• Think about resilience vs protection . Are we creating more protections by changes in
	the system or putting the onus on the individual by focusing on their ability to bounce
	back against institutional violence? I suggest we focus on protections.
Vision	Add: Our policy makers support measures and budgets that support children and
	families
	• Provide supportsto families, provide systems; Needs to be added to partners pieces;
	Need to get away from "superhero" mentality and recognize our communities are
	already strong, resilient, and empowered – we just need to provide the scaffolding;
	Move away from the missionary complex! "Our partners" → need to add "our system"
	after investments.
	 "Our families are resilient" → this implies that families aren't resilient to begin with;
	Many of these visions are focused on the recipients, not recognizing $\underline{\sf Us}$ \rightarrow how the
	system operates contributes to success, so we need something focusing on the
	system and actors → "partners" – we don't create resilience, needs to be "recognize"

Element	Feedback or Questions		
	Would like to add empowerment to vision; that families don't feel need to adjust to		
	mainstream culture; acceptance of differences; empowerment in adversity		
	• Vision resonates – it's holistic ; What's missing – the advocacy efforts, what actions are		
	needed? Needs to be clarified; Improvement: words should be more assertive instead		
	of subjective (ex: Visions should not just be a wish list, more definitive)		
	• Who is defining this vision – CLC? EHSD? Families? How do we measure safety,		
	health, and connectedness? When do we know we have succeeded?		
	Need to be more clear that children/youth need to be able to be their full selves.		
	Systems now are oppressive; needs to change so kids can be fully who they are.		
	• Use of the word "our" – some people will read that to mean "all." Others will think more		
	narrowly of their own nuclear family or neighborhood. Critical to clarify "our" means		
	"all." Like it, though.		
Values	Data for Continuous Improvement: Need more than "disaggregate," How does this data		
	inform the work and next steps; Add a sentence explaining how this data is going to		
	be used and shared; Questions around the uniformity of the data, not sure this needs to		
	be added to the values but should be considered		
	Data: is it a means to a value?		
	• Value #4: don't lose sight of the opportunity to break the cycle through intervention in		
	addition to prevention		
What We	Add: Convene CLC partners <u>and policymakers/stakeholders</u> to learn, plan, and take		
Do	action together (be explicit that we need to involve key players who are not in the		
	room/part of the CLC)		
	Heal the Roots: Work as a collective; Focus on what can be improved at our own level		
	in order to improve as a whole; It can be overwhelming to focus on all areas of		
	improvement; Each improve our own entity		
	Suggestion: Educateengage partners in the CLC and foster an environment of		
	transparent collaboration		
	How do the values connect to What We Do?		
	How to prioritize What We Do?		
	Should be more actively oriented toward advocacy		
	• I personally look forward to more specificity around action . This section still feels very		
	aspirational. How will we measure success ? What are the short- and long-term		
	actions?		
	Clarify <u>where</u> and <u>how</u> we can embed "children in all policies"		
	• Educate and engage should include truth and reconciliation , truth-telling processes		
	around the history and names of systems; Learn from models of organizing and		
	movement-building (ACT UP!, Black Lives Matter, etc) in addition to conventional		
	health and wellness frames; Create a racial justice task force to address the structural		
	conditions impacting health and social inequities; Name white supremacy and racism		
	more explicitly		
	Create a Racial Justice Task Force to address w/children and youth		
	services/programs/institutions		
	How do we move from the big ideas in "What We Do" to actual actions and concrete		
	steps? Where is the funding to support this work?		
	Identify what other data is needed for a more complete picture		
	Call out need to build/align both political will and public will		
Other	Framework should be a living document		
	• Use tree visual – can help people create their own story, sticks more than "statements"		
	Appreciate the work that went into this		

Element	Feedback or Questions
	• Who is this document for? How will it be used? May need to make it more "digestible" if
	intended for a broader audience
	Simplify the language to connect to children and youth; Connecting the language to
	the community language
	Add words that are more action-driven , invite people to action.
	Use process to bring community/community voice/input into the framework itself.

4. Big, Bold Goals for the CLC

- At tables, participants discussed and selected **up to 3 Big, Bold Goals** they would like the CLC to pursue, then decided whether each goal was a:
 - Transformational Change ("needle-moving" shifts, might feel out of reach like a ballot measure
 to establish a dedicated children's fund, or local policies that prioritize funding for prevention and
 children's services versus treatment),
 - Modest yet Meaningful Gain (things that will take intentional, coordinated efforts, but are
 achievable and meaningful like creating data-sharing systems and agreements, or leveraging
 existing revenue streams in different ways);
 - Quick Win (low-hanging fruit, might seem small, but will still have significant positive ripple effect on the ecosystem – like training/professional learning on some of the models and frameworks we touched on today, like ACEs, Protective Factors, and equity.)
- Each table shared/posted their goals, then each participant had the opportunity to indicate what they would select as the 1st priority (green dot), 2nd priority (yellow dot), 3rd priority (blue dot) if the CLC only focused on three goals. The prioritization exercise was treated as a straw poll (versus an official decision-making process) to gauge where there is collective interest and energy to pursue specific goals i.e. further discussion and input will be needed before specific goals are adopted.

Type of Goal	Suggested Goal	Priority Level
Quick Wins	• Roll-out Trauma Informed Training (next 3 years),	1 st = 1
	especially within Health Systems; Begin planning	2 nd = 4
	to implement ACEs screenings at well-child	$3^{rd} = 2$
QUICK WINS	checks and by pediatricians	Total dots: 7
	• Identify gaps in services for specific age groups	1 st = 1
		$2^{nd} = 2$
		$3^{rd} = 2$
		Total dots: 6
	• Engage parents and caregivers in accessible	1 st = 1
	ways – tell their story	$2^{nd} = 2$
		3 rd = 1
		Total dots: 4
The same of the sa	• Engage more elected officials and their staff	Total dots: 0
Modest Yet	Identify existing funding streams and ensure they	1 st = 4
Meaningful Gains	are leveraged across partners and support the	2 nd = 5
	CLC vision	$3^{\text{rd}} = 5$
		Total dots: 14
	• CLC act as an advisory role for policy makers (to	2 nd = 4
	be a tool, to help advocate, to hold expertise/be a	$3^{rd} = 2$
	think tank in the County)	Total dots: 6
	Develop or identify a platform for identifying	2 nd = 1
	collaborative partners (doing similar or connected	3 rd = 4

Type of Goal	Suggested Goal	Priority Level
20	work, who does what); "mini phone book" or "a	Total dots: 5
NODEST YET MEANINGFUL GAINS	marketplace" to move the need of projects	
GAMES	Have platform/roadmaps/phone book of	3 rd = 3
	meaningful resources for families , can be utilized	Total dots: 3
	by service providers and families (different than	
Section of the sectio	211, need a contact relationship)	
	• Identify barriers to ECE/child care facilities (i.e.	2 nd = 1
	licensing)	Total dots: 1
	Our county develops a prevention plan of	Total dots: 0
	services, resources, and interventions that support	
	all children and families in the county	
Transformational	Develop a funding stream to achieve overarching	1 st = 9
Changes	goals (e.g. Businesses within county pay money to	2 nd = 9
	children's fund; Pooling resources); Dedicated	3 rd = 6
t constant Cuarco	funding source from SSB and/or marijuana tax;	Total dots: 24
TRANSFORMATIONAL CHANGES	Expansion of funding for affordable child care and	
STATE OF THE PROPERTY OF THE P	after school care; More resources to scale up	
AND	existing services	1 st = 6
	Every family with a newborn receives the Supports they need I salk at all demains of that	$2^{nd} = 1$
	supports they need. Look at all domains of that child's life – e.g. universal home visiting,	$3^{rd} = 3$
2007(4):20	connecting families to resources, develop new	Total dots: 10
	resources to fill gaps	Total dots. 10
	Advocate for and adopt policies that look to the	1 st = 5
	future; inclusive policies that support families,	2 nd = 2
	children and their future; Changing the social	3 rd = 1
	conversation to focus on early childhood	Total dots = 8
	Data Dashboard: agreement among multiple	1 st = 3
	disciplinary groups to share and collect data;	2 nd = 2
	identify key data indicators; dedicated funding for	3 rd = 4
	person/team to support work	Total dots: 8
	All families have access to Triple P parenting	1 st = 5
	resources/strategies	2 nd = 1
	Black Census Project (collecting data from	3 rd = 1
	underrepresented sources, methodology to	Total dots: 7
	ensure counting underrepresented groups)	

- Overall, many in the group liked the categories as a way to think of goals along a spectrum of Quick Wins to Transformational Change.
- Suggestion: break down goals for Transformational Change in similar way large-scale changes occur because of a series of/cumulative impact of Quick Wins; can help plan and gain traction.
- Results from this exercise will help the CLC Leadership Team plan next steps in the process and the focus of the next CLC convening.

5. Next Steps & Closing

- Next convening anticipated in October (watch for save-the-date)
- View CLC information and resources on EHSD's web site: https://ehsd.org/overview/clc/?highlight=children%26%23039%3Bs%20leadership%20council