

# Impact of Cigarette Tax Money to Improve Health Outcomes for Predominantly Low-income Children of Color ages 0-5 in Northern California

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#### PRESENTER DISCLOSURES

### Susan Brutschy

(1)The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

"No relationships to disclose"





#### **PRESENTATION OUTLINE**

- Moving from Data to Action
- Background
- The Dilemma
- The Challenge
- The Process
- Health Findings
- School Readiness & School Readiness Findings
- Lessons Learned & Next Steps
- Arizona's First Things First
- Thank You









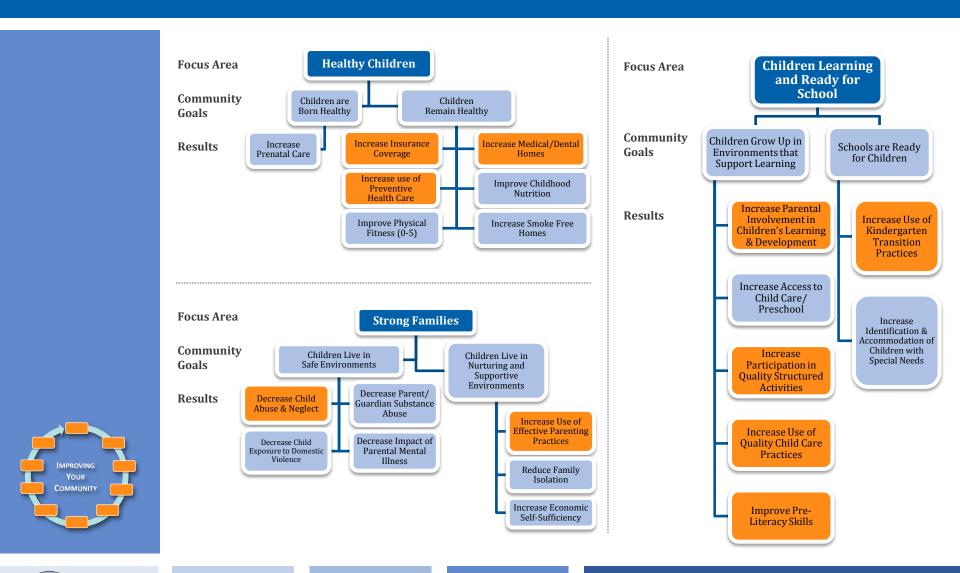
#### **COMMUNITY IMPROVEMENT CYCLE**





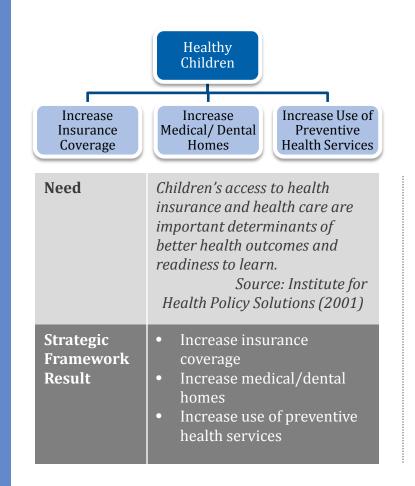


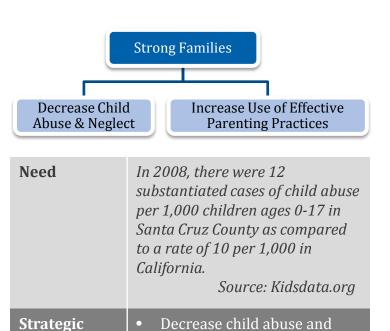
#### TAKING COORDINATED ACTION (FIRST 5 EXAMPLE)





#### **COORDINATING PROGRAMS**





neglect

Increase use of effective

parenting practices

Framework

Result



Your

COMMUNITY

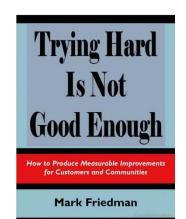


#### **BACKGROUND**

#### First 5 California

- This project began in 1998 when California voters
  passed Proposition 10, adding a 50 cents-per-pack
  tax on cigarettes to support children from birth to
  five years old in the areas of health, family support,
  and early childhood development.
- First 5 operates throughout California. Each of the 58 counties has their own First 5 Commission, made up of community leaders, who help decide how to allocate the tax money. There is also a statewide organization that helps to facilitate efforts of the state.





Mark Friedman, author of Trying Hard is Not Good Enough: How to Produce Measurable Improvements for Customers and Communities

- The desirable outcomes to be achieved by the funding in the Proposition 10 legislation was written by Friedman.
- His idea is to start with the outcomes that your community wants to achieve, and work backwards to determine the means to do so as well as the right indicators to measure.



#### THE DILEMMA

- Many First 5 Commissions struggle to demonstrate their impact on their communities.
   Some however lead the way, such as First 5 Santa Cruz County.
- Funding for First 5 California has been targeted for "sweeping" many times, including the last several budget cycles.
- It is important to be able to describe the impacts of First 5 funding in order to act regionally, build community and voter support.







#### THE CHALLENGE

- ASR was asked to collect, analyze data, and report on outcomes for the 12 First 5 commissions in the Greater Bay Area of Northern California including:
  - → Alameda → Contra Costa → Marin → Monterey → Napa
  - → San Benito → San Francisco → San Mateo → Santa Clara
  - --- Santa Cruz --- Solano --- Sonoma
- The majority of the children 0-5 were from extremely low income families and were children of color (Latino, African-American, and Asian populations).







#### THE PROCESS

- ASR collected and analyzed data about dozens of indicators, and determined there are some similarities in the data.
  - Including providing health care assistance to sign up for health care and to fund health care, dental care, early childhood screenings, and early childhood education.
- Many areas where many First 5's do not overlap were also discovered
  - Such as, working with pregnant substance abusing women and preventing violence towards children







#### **HEALTH FINDINGS**

Including data from the 12 Bay Area First 5 commissions, and data from California Health Surveys

- Bay Area First 5s enrolled over 17,000 predominantly low-income CHILDREN OF COLOR IN HEALTH INSURANCE.
- 14,428 children RECEIVED DENTAL CARE.
- 97% of young children in the 12 Bay Area Counties
  HAD A "MEDICAL HOME" IN 2007.1



• Almost 35,000 children got checked for special needs such as Autism, Hearing and Speech Problems.

 Children from low-income working families were less likely to end up in the emergency room (ER) over time.<sup>2</sup>



Bay Area Children Seeking Emergency Room Services Dropped From 2005 To 2007

 After First 5 funded services, emergency medical visits by children with asthma dropped in Alameda County.



<sup>1</sup> California Health Interview Survey (CHIS) for the 12 Bay Area Counties, for ages 0-5, 2007.

<sup>2</sup> For children ages 0-5 in families 200%-299% of the Federal Powerty Level (CHIS) for the 12

 $^2$  For children ages 0-5 in families 200%-299% of the Federal Poverty Level, (CHIS) for the 12 Bay Area Counties, 2005 and 2007.

All other data come from Bay Area First 5 Commissions for 2007-2008.





#### **SCHOOL READINESS**

Aside from health, ASR also examined outcomes in the area of school readiness.

Social Determinants of Health –
 Correlations between education and health outcomes

Life expectancy is growing overall in the United States

Leads to increasing differences between those with and without a college education

They are also less likely to smoke, binge drink or to be obese and to use illegal drugs

More educated people are less likely to report anxiety and depression



All data from National Poverty Center at the University of Michigan, Education and Health Brief, 2007.





### SCHOOL READINESS FINDINGS

- 300,000 MORE

  CALIFORNIAN CHILDREN

  Attended preschool

  in 2005 than in 2003.1
- Almost 31,000

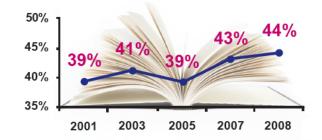
  BAY AREA CHILDREN WERE HELPED to get **READY** for school.
- Bay Area First 5s
   Paid for FREE preschool
   To nearly 4,000
   CHILDREN IN 2007-2008.

\* 8 out of 10 new kindergarten students had gone to preschool in 2008. 2

Percentage Of San Mateo & Santa Clara County Kindergarteners Who Had Attended Preschool  First 5s gave out 92,000 books to Bay Area children in one year.



 There are indications that children are doing well in English who have benefitted from First 5 and school efforts.<sup>3</sup>



Percentage Of 3<sup>rd</sup> Grade Children In First 5 Bay Area Counties Who Are Reading Proficiently Or Better

All other data come from Bay Area First 5 Commissions for 2007-2008.



<sup>&</sup>lt;sup>1</sup> UCLA Center for Health Policy Research, "Trends in the Health of Young Children in California," 2008.

<sup>&</sup>lt;sup>2</sup> ASR, School Readiness Assessment Data, San Mateo and Santa Clara Counties, 2005, 2008.

<sup>&</sup>lt;sup>3</sup> California Department of Education, STAR District/School Summary Report, 2001, 2003, 2005, 2007, 2008.



#### **LESSONS LEARNED AND NEXT STEPS**

It is **critical** for programs to show outcomes, especially during difficult economic times.



- First 5 funding has consistently been threatened by lawmakers over the years.
- First 5s have generally not done a great job of demonstrating their impact. Often only highlighting the inputs and not the outcomes.
- This study in Northern California, aggregating data across 12 different counties, was the first of its kind.
- Findings showed many substantial improvements in the areas of health and education for children 0-5.

Two Briefing Papers were created to share with a larger audience. One on health and the other on school readiness.



First 5s have shared these documents with their Commissions and with community members and elected officials.

The briefs were short and written in very easy to understand language. Thus easily digestible for a wide audience.





#### **A**RIZONA'S FIRST THINGS FIRST

- In November, the state of Arizona voted on their equivalent of California's First 5 initiative, First Things First.
- ASR analyzed data in six areas of Arizona, focusing on outcomes for children 0-5.
  - Many were low-incomefrom diverse communities
  - Including strong Latino populations and several Native American Indian tribes.
- Data is available upon request.







FIRST THINGS FIRST

## THANK YOU

For More Information:

Susan Brutschy, President

susan@appliedsurveyresearch.org

Applied Survey Research (ASR) is a nonprofit, social research firm dedicated to helping people build better communities by collecting meaningful data, facilitating information-based planning and developing custom strategies.





