



**2010-
2011**

Evaluation Results



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EXECUTIVE SUMMARY

In 1998, the California Children and Families Act (Proposition 10) was enacted. This proposition increased taxes on tobacco products to fund a comprehensive and integrated delivery system of information and services to promote early childhood development from prenatal to age five. This initiative has since become known as “First 5” to emphasize the importance of the first five years of life.

Over the years First 5 Glenn County participated in two of First 5 California’s match programs: School Readiness (SR) in Hamilton City and the Comprehensive Approaches to Raising Education Standards (CARES) program countywide. First 5 Glenn also started the Little Learners program using proven practices and curriculum designed to strengthen families and ensure children are ready to learn. During the past five years, First 5 Glenn has continued working collaboratively with public and nonprofit agencies in Glenn County and Butte County to leverage and extend resources to reach even more children and families throughout the county.

First 5 California has made some major changes in its funding strategies. In 2009, the First 5 California Commission approved the Project Legacy process to develop a roadmap for future investments, and establish a distinctive set of programs for children zero to five and their families. The recommendations were approved and the state commission’s signature programs established. First 5 Glenn was impacted by the redesign to the CARES program and the SR program. CARES match funding for Glenn County ended in 2009 and SR funding ended in 2010.

First 5 Glenn made changes to funding and local program investments starting in 2009 in anticipation of the sun-setting of state funding for these “match” programs. Local funds supporting the CARES Initiative were transitioned into the Program for Retention and Improvement in Developmental Environments (PRIDE), while some school readiness activities were consolidated into the Little Learners program operations. Staff and locations were consolidated and streamlined and collaborations with the Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Head Start to offer services for the Hamilton City families were further strengthened and expanded for Hamilton City children and families. First 5 Glenn County continues to direct its limited resources on expanding the Little Learners program beyond Willows and on building and expanding partnerships and service delivery system improvements for oral health and early development and mental health support services. This more focused strategy improves the service delivery system and builds sustainability as more community partners and “champions” for the County’s youngest residents are gathered around achieving specific results.

Program evaluation has continued to evolve as First 5 staff and AmeriCorps gained skills and confidence in implementing and tracking results. Funded programs continue to improve and become more comprehensive and responsive to children and caregivers in 2010 - 11. Additionally, staff conducted internal audits of program data for quality assurance and to make sure all children and families were being captured accurately.

Examples of how staff evolved related to evaluation include more consistent use of pre-tests, screening and assessment results that allowed program planning to meet individual children and family needs, and improvement and expansion of program operations. The data collection and program evaluation methods implemented in 2008 - 09 and utilized throughout 2010 - 11 captured information about changes in knowledge, skills, behaviors and attitudes of children and caregivers. Some of the tools focused on academic skills and others measured social, emotional, or behavioral health – all of which enable children to succeed in school settings.

First 5 Glenn County contracts with Social Entrepreneurs, Inc. (SEI) to develop evaluation plans for Little Learners and other program activities. SEI provides additional evaluation tools, templates, and technical support to program

and management staff. In addition, SEI designates an associate to review Little Learners data and milestones on a monthly and quarterly basis, which is then provided to Glenn County in a report.

Other tools used were linked to specific parent education curriculum and helped to gauge attitudes that may indicate “at-risk” parenting styles or “healthy parenting approaches.” Understanding where parents score on a continuum allows the program staff to provide lessons and information that strengthens “at-risk” parenting styles and supports existing positive skills of parents or caregivers enrolled. In addition, parent and provider satisfaction surveys, outreach reports and other locally developed tools provide a full picture of the effectiveness of commission-funded programs.

STRATEGIC DIRECTION LINKED TO EVALUATION RESULTS

First 5 Glenn County adopted its initial strategic plan in 2000. A second five-year plan was developed in 2006 to guide the organization through the end of fiscal 2011. A new five-year plan was drafted in May 2011, then reviewed and formally adopted in September 2011. The results and objectives of the First 5 Glenn Strategic Plan have been developed to meet the needs of Glenn County children and families, while upholding the strategic results universal to all commissions throughout the state. The four result areas identified for Glenn County and their respective goals are:

Improved Family Functioning

- Improve family stability by increasing the numbers of parents and other caregivers providing nurturing and positive supports to their children.

Improved Child Development

- Children come to school ready and able to learn (cognitive, physical motor development, emotional and social preparation).

Improved Child Health

- All children prenatal to five are ensured of entering school with the best possible physical and mental health.

Improved System Functioning

- The service delivery system is available, accessible, consumer driven and consumer focused.

The investments made by the First 5 Glenn Children and Families Commission are having a positive impact on children zero to five and their families, as shown by these result area highlights:

RESULT AREA 1: IMPROVED FAMILY FUNCTIONING

The Commission’s primary strategy for improving family functioning is the Little Learners program which was selected based on community outreach, engagement and planning in 2006 and 2007.

- At the conclusion of its fourth year in operation, the Little Learners program had:
 - Provided services to 306 children and families, exceeded the baseline set in 2007 - 08 by 126, and exceeded the numbers of people served in 2009 - 10 by 39 individuals.
 - Increased parents’ skills and reduced numbers at post testing for those who scored in the “high-risk” category. Almost all parents identified with high-risk behaviors (based on a standardized assessment

tool) at the beginning of services had increased skills and knowledge as a result of program participation, and moved out of the high-risk category by the follow up assessment.

- Increased collaboration and expanded reach of program services and supports:
 - Secured a new site at no cost (The Learning Center-North) and expanded Little Learner services, including outreach and support into Orland.
 - Established partnership with Grindstone Rancheria and continued to provide weekly playgroups in Willows, Orland, Hamilton City and Grindstone Rancheria.
 - Leveraged funding and retained AmeriCorps staffing with two individuals working part-time and three individuals at full time.
- Obtained additional grant funding through Child Welfare Service Referral Child Abuse Prevention, Intervention and Treatment program (CAPIT). The new funding:
 - Increased the ability of Little Learners staff to implement home visits, offer additional parenting classes and Little Learners Groups, and expand family engagement support into Orland and Grindstone Rancheria.
 - Provided the ability to support children zero to five in the Adult ESL program in Hamilton City.
 - Is expected to continue into the new fiscal year and allow for the provision of services and supports to reach increased numbers of fathers, pregnant women, teen parents, and children through referrals and access to oral health, kindergarten readiness assessments, and more intensive parent support services.

RESULT AREA 2: IMPROVED CHILD DEVELOPMENT

In previous years the Commission operated a school readiness program as part of First 5 California's school readiness matching grant program. When funding for that program ended, the Commission decided to integrate the services and activities it could into the Nurturing Parenting (Little Learners) program activities. During the past year:

- The Hamilton City school readiness site was completely re-organized. All School Readiness materials were moved to Willow's Nurturing Nest site and incorporated into existing activities and partnerships.
- The Little Learners program conducted 83 DECA assessments on children at the beginning of the school year. All 25 children who were identified with concerns related to development were referred for additional services and supports. At the follow up assessment, only 5 children were noted as having a concern.

RESULT AREA 3: IMPROVED CHILD HEALTH

Previously, child health activities were conducted through the School Readiness program, with funding to support collaboration with Mobile Dental Clinic. This past year those efforts were continued through collaboration. As a result of the partnership with the Northern Valley Indian Health's Mobile Dental Clinic and First 5 staff's coordination and organization, during the 2010 - 11 year, 88 children ages zero to five had their oral health needs addressed in Glenn County.

The MDC dentist and assistant also visited the Early Head Start classroom (infant/toddler) on Hamilton High School's campus and the Head Start preschool on Hamilton Elementary School campus. All children received oral health education and screenings, as well as teeth cleaning supplies.

The Mobile Dental Clinic provided services for Orland and every appointment was filled due to First 5 and partner agencies of the Dental Collaborative providing effective outreach and direct referrals. This was the same for the Nurturing Nest Willows site, where all available Mobile Dental Clinic appointments were filled.

RESULT AREA 4: IMPROVED SYSTEM FUNCTIONING

Achievements for activities were realized through improved system functioning and expanded collaborations and partnerships during the 2010 - 11 year. Achievements already noted under improved child health and improved child development resulting from collaboration efforts were reported under Result Areas two and three in alignment with First 5's new Strategic Plan. While both reflect improved system functioning, they relate more precisely to the objectives outlined in those two result areas. Achievements specific to improve system functioning over the past year include:

- Communication and outreach support to help the Family Resource Center in Hamilton City increase partnerships and service utilization.
- Continued outreach and expanded partnerships through CAPIT funding to serve high risk families more comprehensively through the Nurturing Parenting Program (NPP) Collaboration.
- The Nurturing Parenting program collaborated with nine schools and implemented assessments during kindergarten round-ups and registrations in the spring of 2011. At the end of the fiscal year, the program also began working with all Head Starts within the county. This included independent engagement for high-risk families and detained children who are in foster care, as well as travel throughout the county using Adult Adolescent Parenting Inventory (AAPI) with kindergarten teachers to assess skill bases.
 - The socio-emotional readiness for children entering kindergarten was identified, along with gaps in teacher and parent supports and skills that help children to be successful in home, school and life.
 - Nurturing Parents program staff could customize services and support to meet needs.
 - Parents were provided with copies of their child's assessment and teachers received graphs of aggregate needs of the class they were about to receive in the fall (upon universal release of information forms signed by parents).
 - Teachers were counseled with parents and a plan of action and training was developed for children with high-risk behavior and needs.
 - During the 2011 - 12 year, First 5 Glenn will review and take action to approve the county-wide DECA Assessments for pre-kindergarten, and for identifying children and families in need of Nurturing Parenting Services.

More detailed information about Glenn County, the population served, and the impacts achieved over the past year are contained in the remainder of the 2010 - 11 Evaluation Report.

GLENN COUNTY CONTEXT

Glenn County is a rural, relatively small county in Northern California bordered by Tehama, Butte, Colusa, Lake and Mendocino Counties. Educational services, health care and social assistance account for almost one fifth (19.6 percent) of the county's employment, followed by agriculture, forestry, fishing, hunting and mining (18.1 percent).¹ Recent estimates show the population of Glenn County at 28,299, of which 8.1 percent (2,292) were children zero to five years of age, higher than the average for the entire State of California (7.5 percent).²

With a 2010 population of 6,166, Willows, the county seat, is home to county and regional government offices. In 2010, Hamilton City had a population of 1,759, of which 8.9 percent (158) were children zero to five years of age.³ Orland, which has a population of 7,291, is the most populous city in Glenn County.⁴

Chart 1: Glenn County population, 2005, 2008, 2009

Year	Total population of Glenn County	Children ages 0-5 in Glenn County	Children ages 0-5 as a percentage of the population
2005	28,558	2,456	8.6%
2008	29,943	2,621	8.8%
2009	28,299	2,292	8.1%

The population in 2010 is predominantly white or Caucasian (71.1 percent) and Hispanic or Latino (37.5 percent). The table below shows the county's racial/ethnic composition from 2005, 2008 and 2010.

Chart 2: Glenn County population by ethnicity, 2005, 2008, 2010

Year	Total population of Glenn County	White/Caucasian	Hispanic/Latino	Asian	Pacific Islander	Black	American Indian	Multi-Race
2005	28,558	17,437	8,995	972	23	136	488	507
2008	29,943	17,921	9,779	1,022	23	144	505	549
2010	30,880 ⁵	18,235	10,322	1,057	23	152	512	579

¹ American Community Survey, 2007 - 09

² California Department of Finance

³ U.S. Census Bureau, 2010

⁴ U.S. Census Bureau, 2010

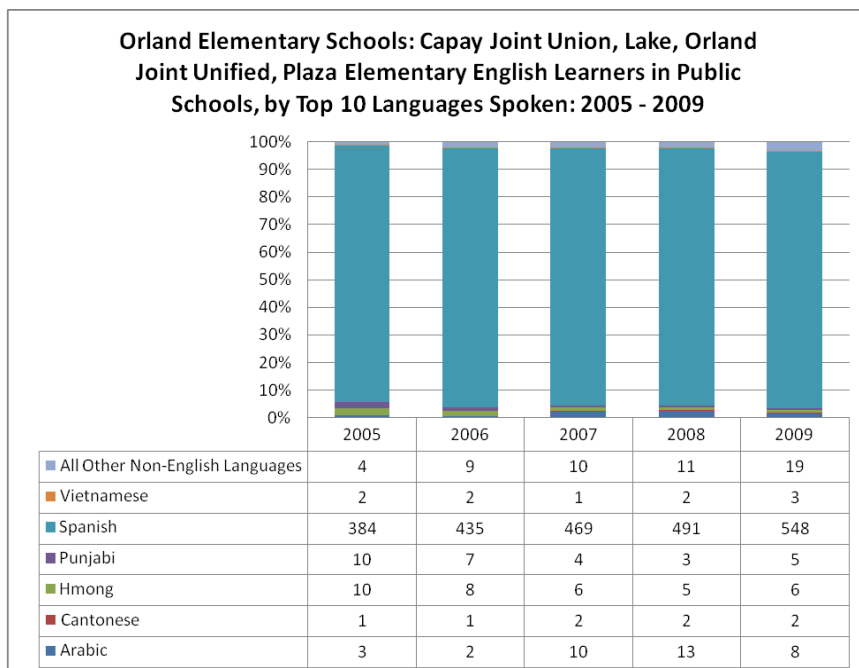
⁵ This count is taken from the California Department of Finance Demographic Research Unit. The US Census reports the total population in 2010 as 28,122.

In 2010, 15 percent of the population lived in poverty. Glenn County ranked 48th out of 58 counties in California in the number of adults in food insecure households, and nearly eight percent of the population relied on food stamps. These figures underscore the degree to which families are struggling in the county.⁶

Glenn County has a growing number of children attending its public schools that are learning English as a second language.

The two charts below provide information on languages spoken by English Learners in Orland and Willows. This information provides context to the community and is helpful for the Commission as well as county kindergarten teachers in forecasting potential areas for growth. For additional information by school, turn to Appendix A. The graphs that follow provide enrollment by language and school. It is important to note that the number of Spanish-speaking students has been growing in numbers each year, as have other non-English language speakers.

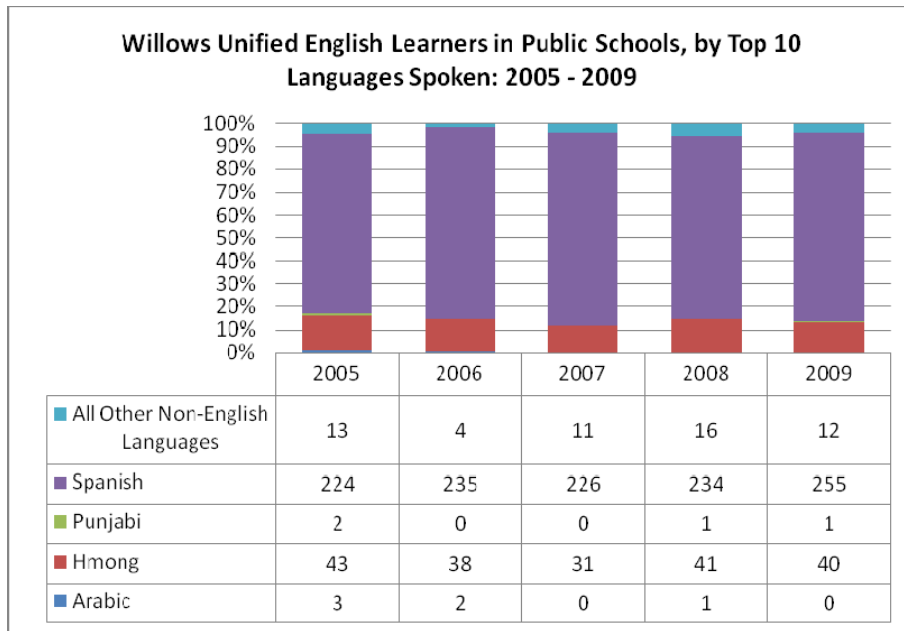
Chart 3: Orland Elementary Schools, Languages Spoken 2005 - 09⁷



⁶ California Food Policy Advocates, 2010 Food Insecurity Profile. Percentages based on a total population of 30,880.

⁷ As cited on kidsdata.org, California Department of Education, California Basic Educational Data System (CBEDS). Accessed online at <http://www.cde.ca.gov/ds/sd/cb/studentdatafiles.asp> (August 2009). 2010 and 2011 data is still unavailable.

Chart 4: Murdock and William Finch Elementary School, Languages Spoken 2005 - 09⁸



***Data inclusive of both schools in Willows

The 2011 - 12 Children Now California Report Card (The Scorecard), a project funded by the Annie E. Casey Foundation, rated Glenn County as a “C-” in Early Learning and Development.

The scorecard provides a comprehensive report of children’s issues and compares them to other counties in California. Glenn County’s scores compared to other counties in the state are shown on the following page. Glenn County’s change from the previous report card is shown in the “Trend” column.

⁸ As cited on kidsdata.org, California Department of Education, California Basic Educational Data System (CBEDS). Accessed online at <http://www.cde.ca.gov/ds/sd/cb/studentdatafiles.asp> (August 2009). 2010 and 2011 data is still unavailable.

Chart 5: Children Now California Report Card, 2011 - 12

Indicator		Bottom	Middle	Top	Trend	Latino	White	African Amer.	Asian	Other
Children who report "very good" to "excellent health" status	Range	48%	<--->	85%						
	Glenn	48%			-20%	38%	52%	NA	NA	87%
Children who have health insurance	Range	82%	<--->	99%						
	Glenn	90%			5%	84%	96%	NA	NA	88%
Children who see a dentist regularly	Range	76%	<--->	94%						
	Glenn		84%		15%	78%	87%	NA	NA	88%
Newborns who are breastfed exclusively while in the hospital	Range	13%	<--->	85%						
	Glenn			67%	12%	62%	77%	NA	NA	55%
Children who have asthma that does not require an Emergency Room visit	Range	44%	<--->	100%						
	Glenn	82%			-18%	NA	85%	NA	NA	NA
Children who are in a healthy weight zone	Range	61%	<--->	80%						
	Glenn	66%			-9%	61%	72%	NA	NA	NA
Children who live within walking distance to a park playground or open space	Range	63%	<--->	95%						
	Glenn	67%			-8%	NA	64%	NA	NA	NA
Children who have no report of maltreatment within six months of an initial report	Range	78%	<--->	100%						
	Glenn	83%			-11%	85%	79%	NA	92%	NA
Women who receive prenatal care by the end of the first trimester	Range	53%	<--->	91%						
	Glenn	74%			9%	76%	77%	NA	NA	NA
Three and 4-year-olds who are enrolled in preschool	Range	25%	<--->	81%						
	Glenn	41%			NA	NA	NA	NA	NA	NA

In addition, the following list describes both the needs as well as the advances made in the county since the last report card.

- 27 percent -- Children living in poverty (2005)
- 81 percent -- Children with dental insurance (2007)
- 403 -- Number of children who are on waiting list for childcare (2010)
- 81 percent -- 10th graders who pass the math section of the California High School Exit Exams (2010)
- 77 percent -- Number of three to five year olds that do NOT attend preschool, nursery school, or Head Start for at least 10 hours a week (2009)
- 59 percent -- Children who watch two or more hours of television (2007)
- 87 percent -- Children with continuous health insurance (2009)
- 18 percent -- Children who dropped out of high school (2009)
- 75 percent -- Teens who are NOT overweight/obese (2009)
- 11.2 -- Rate of children in foster care, per 1,000 (2010)
- 16.1 -- Rate of substantiated child abuse, per 1,000 (2010)

The information provided in the preceding pages illustrates the unique characteristics of Glenn County, which should be considered when reviewing the results contained in this 2010 - 11 Report.

EVALUATION APPROACH

The evaluation approach for the Glenn County Children and Families Commission is rooted in the results-based accountability (RBA) model. This framework is very effective in creating meaningful evaluation methods at the program level that connect to the higher-level goals and results defined in the First 5 Strategic Plan. Under this model, evaluation questions are posed in four quadrants that enable assessment of both the processes and activities conducted by a program (effort) and the results or outcomes achieved for children, families, communities and/or systems (effect). Glenn County's evaluation framework also assesses the level of activity that occurred (quantity) and the extent to which activities were performed effectively (quality).

In order to make evaluation meaningful to all stakeholders, First 5 Glenn's goal is to integrate evaluation into a program's regular processes and activities. For example, standardized screening and assessment tools are used for the implementation of the programs as a best practice. The results of the screening and assessments are used to target and individualize work with clients and to evaluate program results. This integrated approach allows program staff to manage their programs to meet individual needs while offering opportunities for data analysis, reflection and program planning at the operational levels. It also provides data and information at regular intervals that the program can use to communicate results and build community support.

Over the past six years, the Commission has continuously emphasized the importance of evaluation and its commitment to understanding the impact of its investments. First 5 Glenn County contracted with Social Entrepreneurs, Inc. (SEI) to develop evaluation plans for School Readiness, Little Learners, and CARES (School Readiness and CARES evaluation plans became inactive when funding for these projects ended).

The evaluation plan for Little Learners was updated in 2009-10, and further enhancements were identified in 2010-11 for the 2011-12 program year. It outlines timelines and expectations for a funded program to effectively and efficiently measure and report program results. SEI provides additional tools, templates, and technical support to program and management staff. In addition, SEI designates an associate to review Little Learners data and milestones on a monthly and quarterly basis, which is then provided to Glenn County in a report.

This level of support and analysis helps ensure that programs are making an impact in the result and goal areas, and that any new program staff are oriented to the expectation of data collection and data entry, and evaluation plans are updated to reflect changing requirements at the state or local level.

In order to improve system functioning and streamline evaluation processes, the Commission also invested in development, customization and refinement of a web-based, online data management system (ODM) for centralized data collection and analysis through Bailey Data Management in 2009. In 2010, additional system refinements were made to increase the readability and usability of the data. The system continues to function effectively and is in use today.

Over the past few years, program staff has shifted from tracking and reporting purely quantitative data or number totals to gathering more qualitative and results-oriented information. Programs submit quarterly reports to the Commission using templates that have been prepared by SEI in alignment with the evaluation plans and the Commission's strategic plan. This process provides the Commission with ongoing information about service delivery and also helps program staff identify opportunities for strengthening program results throughout the year. These quarterly reports are then aggregated to support the development of the annual evaluation report.

This type of ongoing data collection, reporting and discussion provides the Commission with current and historical data within the Glenn County context and shows changes in the desired behavior, attitude, knowledge and improvement in conditions targeted by the Commission. Finally, evaluation results are essential in developing and updating the strategic and long range financial plans on an annual basis.

AGGREGATE DATA TABLES FOR 2010 - 11

The charts presented in this section provide basic demographic data for all programs that is required for reporting to First 5 California. In total, 614 children of all ages were served by First 5 Glenn Children and Families Commission programs. In addition, another 164 parents/guardians were served by Little Learners and Mobile Dental Clinic projects. In total, 778 children of all ages and adults participated in First 5 funded activities.

Little Learners' school readiness programs both expanded their reach in 2010 - 11. The Little Learners program not only exceeded the baseline of 180 people set in 2007 - 08 by 126 individuals, but also exceeded the 2009 - 10 numbers of people served by 40 individuals.

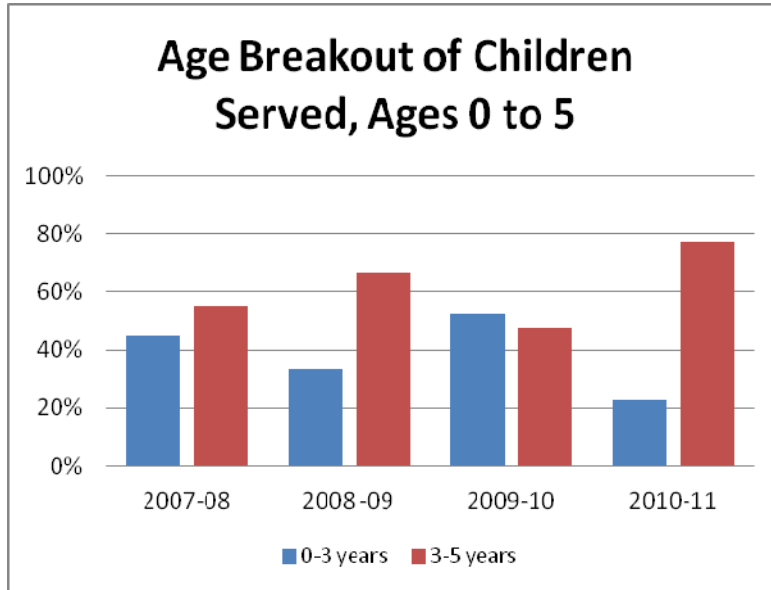
The countywide DECA assessments increased to 386 in 2010 - 11, an increase of almost 58 percent over the previous year 2010 - 11. In addition, the Mobile Dental Clinic serviced 108 individuals during the year.

Chart 6: Population served by program and age, 2010 - 11

First 5 Result Area	1	2	3	4	
Population Served/Service	Little Learners*		Mobile Dental Clinic	Countywide DECA/NPP	2010-11 Total
0-3 years	96		38	0	134
3-5 years	43		50	385	478
6+ years	4		6	1	11
Ages Unknown	10		0	0	10
Total Children 0-5 years	139		88	385	612
Total Children all ages	156		94	386	636
Total Parents/Guardians	150		14	-	328
Total served (children/adults)	306		108	386	800

*Only children that were served as a result of First 5 funding are reported to First 5 California in the annual report; children served as a result of First 5 Glenn's system improvements or collaborations are shown here as they would not have otherwise received services without First 5 Glenn's support, coordination and collaborative partnerships.

Chart 7: Ages of children served for 2007 - 08, through 2010 - 11



Applying the population served by age as provided in the table above, the chart to the left shows the age trends over the past three years. Specifically, those children ages zero to three decreased from 2007 - 08 to 2008 - 09, but in 2009 - 10 increased to a higher percentage than the first year. The percentage of those ages fell again in 2010 - 11 to 22 percent. In contrast, those children ages three to five years increased from the first year to the second, but then decreased in 2009 - 10 to a percentage lower than 2007 - 08. The percentage of ages three to five reached a new high of 77 percent in 2010 - 11.

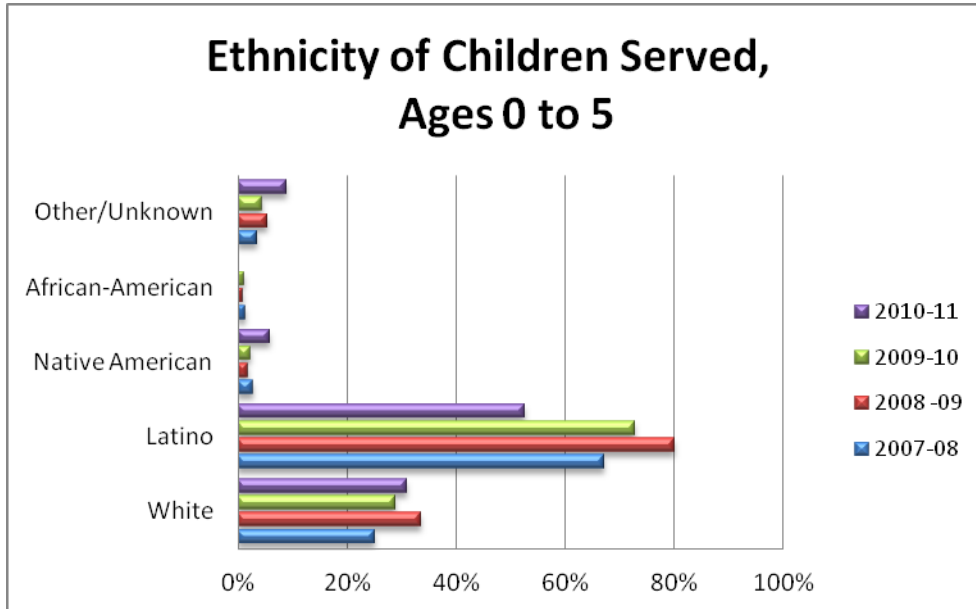
It is not only important to document those served by program and age, but also by ethnicity. By tracking this information, the Commission, program staff and area teachers can respond to trends through offering new classes and ensuring that language barriers are resolved. The chart below shows children ages zero to five according to ethnicity and program participation for Little Learners and the Mobile Dental Clinic.

Chart 8: Participant Ethnicity by Program, 2010-11

Ethnicity	Little Learners (children 0-5)	Mobile Dental Clinic (children 0-5)	Total (children 0-5)
White	33	37	70
Latino	69	50	119
Native American	13	---	13
Asian	3	---	3
African-American	0	---	0
Pacific Islander	1	---	1
Other/Unknown	20	1	107
Total Children 0-5 years	139	88	227
Total Children all ages	156	94	270

The chart below visually demonstrates that the majority of those served continue to be Latino children for both Little Learners and the Mobile Dental Clinic.

Chart 9: Ethnicity of children served for 2007 - 08, 2008 - 09, 2009 - 10, and 2010 - 11



Although the majority of children served were Latino, English is still spoken by more than half of the children in the Little Learners Program.

Chart 10: Language of children served in the Little Learners Program, 2010 - 11

Primary Language Spoken by Little Learners' Children	Number (children 0-5)	Percentage (children 0-5)
English	75	54%
Spanish	53	38%
Other	11	8%
Unknown	0	0%
Total Children 0-5 years	139	100%

RESULT AREA 1 AND 2 FINDINGS: LITTLE LEARNERS

INTRODUCTION

The Little Learners program emerged out of a community-driven, participatory process sponsored by First 5 Glenn County Commission in 2006. Community stakeholders met over several months to design a collaborative and integrated service delivery model that responded to community priorities for early intervention and supports to strengthen families. As a result, the Little Learners program was launched to impact the Commission's "Improved Family Functioning" result area. The Little Learners program provides universal access to preventative and supportive early mental health services designed to increase the skills of parents, increase healthy social interaction of families. Furthermore, Little Learners creates an environment that is more sensitive and educated about the early mental health needs of its children by increasing awareness and capabilities of children, parents and the broader community.

Little Learners uses the Nurturing Parenting curriculum, which can be described as parent education coupled with interactive parent/child sessions. This approach promotes an experience for families who recognize the need for parenting their own children in more positive ways than their own childhood experience. A portion of the topics for group sessions are determined according to the parents' and caregivers' immediate concerns. There is also a strong underlying component that promotes increased community and neighborhood involvement. One of the strengths of the Nurturing Parenting program is that the components can be adapted to special populations, including appropriate language and cultural content, while still maintaining its evidence-based validity and reliability. These special populations include Hmong families, Hispanic/Latino families, African American families, Christian families, Military families, and families in treatment of recovery. The success of Little Learners relies on the involvement and participation of each community's network of providers.

TOOLS

The tools used to evaluate the effectiveness of Little Learners include: (1) a participant demographic report, (2) Child Skills Survey (Renamed in 2010 to School Readiness Assessment by Prevention of Child Abuse California), (3) playgroup intake form(s), (4) parent satisfaction survey (English and Spanish), (5) group attendance report, (6) DECA aggregate report, (7) AAPI aggregate report and, (8) the online data management system (ODM), which is linked to the program activities and the short and long-term outcomes of the Little Learners Evaluation Plan. First 5 Glenn also conducts a review and analysis of changes in key indicators to show progress on an annual basis.

REPORTING RESULTS

The Little Learners program activities address two of the Commission's Result Areas: Improved Family Functioning and Improved Child Development. Service highlights and outcomes across both areas are described on the next page. Detailed information for each result area then follows.

LITTLE LEARNERS SERVICE HIGHLIGHTS AND OUTCOME RESULTS

The Little Learners program served more children between the ages of zero to six and their families this year than in the last two years. The program served 139 children between the ages of zero to five, and 150 parents or guardians in 2010 - 11. Another 16 children (six years or unknown) were present during service delivery, increasing the total number of children and adults served during the year to 306. Specific to children between the ages of zero and five served in 2010 - 11:

- ★ The average number of classes each Little Learners participant attended in 2010 - 11 was 6.1. This was down slightly from the previous year, but higher than the baseline year (2008 - 09).

Chart 11: Aggregate data of class attendance: 2008-09 through 2010-11

Year	2008-09	2009-10	2010-11
Class Sessions	423	273	437
Participant Contacts	2,284	1,938	2,654
Average Number Attended	5.4	7	6.1

Average is calculated as number of participant contacts/number of class sessions.

- ★ The 437 classes offered this past year included play groups, parent-child interactive groups, parenting classes and family events.
- ★ The average cost per participant contact was nearly \$70 (\$180,000 annual program budget/2,654 participant contacts).
- ★ One hundred percent of referrals resulted in a completed appointment with a professional. These referrals were to Parent-Child Interactive Therapy (PCIT), dental services and kindergarten consultations.
- ★ Eighty three Deveraux Early Childhood Assessments (DECA) pre assessments were given during 2010 - 11, which generated a total of 86 total concerns related to attachment, initiative, total protective, self control, and behavior.⁹ As a follow up, 43 post-tests were administered, which showed a total of only 19 concerns.
- ★ Between pre and post DECA tests, most children increased their skills as a result of program participation.
- ★ Fourteen children were diagnosed as having special needs or a developmental delay. This was an increase of 12 children receiving early diagnoses over the previous year.
- ★ All parents identified with high-risk behaviors in appropriate parental expectations, parental empathy, corporal punishment and appropriate parent-child roles at the initial Adult-Adolescent Parenting Inventory (AAPI) assessment had increased skills and knowledge as a result of program participation, and moved out of the high-risk category by the follow up assessment. Of the eight parents who exhibited concerns in the pre-test category of value of children’s power/independence, only four had remaining concerns in the post test.
- ★ English was the primary language spoken in the home in the current period for 54 percent of children ages zero to five, compared with 37 percent in 2009 - 10. Spanish was the primary language spoken in the home for 38 percent of children ages zero to five this year, compared with 17 percent last year.

⁹ A single child could display more than one concern, resulting in a total number of concerns higher than the total number of tests administered.

- ★ The number of parenting classes increased by 55 percent over the previous year, from 29 in 2009 - 10 to 45 in 2010 - 11.

Chart 12: Total populations served in 2008 - 09 through 2010 - 11

Total Population Served	2008-09		2009-10		2010-11	
	#	%	#	%	#	%
0-3 years	22	32%	63	71%	96	69%
3-5 years	47	68%	26	29%	43	31%
6+ years <u>and</u> ages unknown	69	--	55	--	16	--
Total Children 0-5 years	69	100%	89	100%	139	100%
Total Children all ages	138	--	134	--	155	--
Total Parents/Guardians	105	--	122	--	150	--
Total served (children/adults) Including children 0-5 years and adults.	174	100%	211	100%	289	--
Total served (children/adults) *including children 6+ and ages unknown.	243	--	266	--	305	100%

In the fourth year of this program, the service levels for children zero to five were higher than the prior two years, as shown in the chart to the left. In 2010 - 11, 139 children were served as compared to 89 in 2009 - 10 and 69 in 2008 - 09. It is worthwhile to note that the number of children between zero and three served in 2010 - 11 increased by 52 percent from the previous year, and those served ages three to five years increased by 58 percent. From last year to this year, 50 more children zero to five years were served and the program served 39 more children and parents of all ages.

When comparing the total numbers of children served for the program year, the percentage of children within the various ethnic groups shifted only slightly over the past two program years. There was a slight increase in the proportion of Latino, American Indian and "other/unknown" children served, and a decrease in the percentages of White children served. These variations are important to note as First 5 Glenn County program staff must ensure program flexibility with different ethnicities.

The chart that follows shows the racial/ethnic composition of children served. As in previous years, the number of Latino children served has continued to grow, with an increase of 17 percent over last year. A very positive trend is the increase in the number of Native American children served. Although overall numbers are low this reflects the continued focus on outreach and relationship building with the Native community.

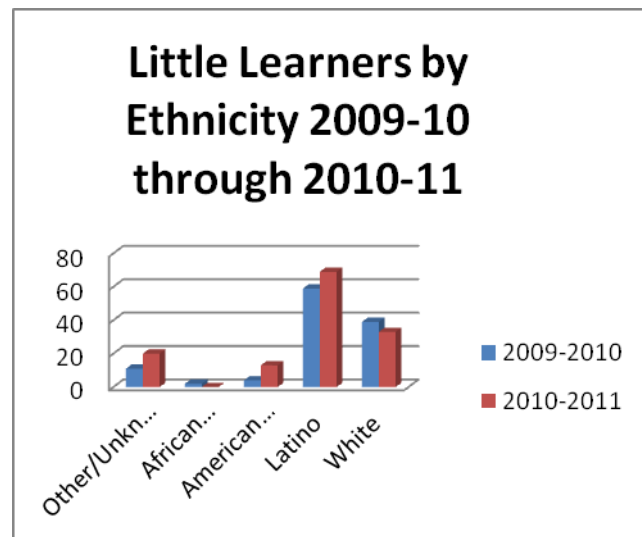


Chart 13: Ethnicity of children zero to five served in 2008 - 09, through 2010 - 11

Ethnicity of children served 0-5 years	2008-09		2009-10		2010-11		Change: 2008-09 to 2009-10		Change: 2009-10 to 2010-11	
	#	%	#	%	#	%	#	%	#	%
White	34	49%	39	44%	33	24%	+5	-5%	-6	-20%
Latino	26	38%	29	33%	69	50%	+3	-5%	+40	17%
Native American	2	3%	4	4%	13	9%	+2	1%	+9	5%
Asian	0	0%	3	3%	3	2%	+3	3%	+0	3%
African-American	1	1%	2	2%	0	0%	+1	1%	+2	-2%
Pacific Islander					1	<1%	N/A			
Other/Unknown	6	9%	12	14%	20	14%	+6	5%	+8	0%
Total Children 0-5 years	69	100%	89	100%	139	100%	+20	--	+20	--

The chart to the right shows the types of activities and services offered during the program year. With fiscal responsibility in mind, the Little Learners program decreased the number of classes offered to increase participation in each class. As a result of this strategy, the average number of classes each participant attended increased by almost two. In 2010 - 11, each participant attended an average of 6.07 classes during the year (2,654 contacts/437 class sessions). The 437 classes offered this past year included play groups, family events and parenting classes. One hundred percent of the referrals made resulted in a completed appointment with a professional.

Chart14: Services provided, 2010 - 11

Little Learner Services	2009-10	2010-11
Number of classes/events offered	273	437
Number of class/event participants, all types	1,938	2,654
Number of play groups	212	227
Number of parenting classes	21	45
Number of referrals made	5	14
Number of referral follow ups	N/A	14 (100%)

Little Learners' program progress toward achieving specific objectives related to Improved Family Functioning and Improved Systems of Care result areas during the 2010 - 11 program year are discussed in the next section.

RESULT AREA 1: IMPROVED FAMILY FUNCTIONING

Outcome #1: Increased numbers of parents and other caregivers providing nurturing and positive supports to their children.

Indicators:

- Number/percentage of parents reporting their child has increased social skills as a result of program activities
- Number/percentage of parents that report increased awareness of child development domains as result of program activities
- Number/percentage of parents indicating positive changes in their child's behavior and interactions as a result of program activities

The Little Learners program uses a variety of tools to track and measure progress towards achieving the outcome that parents and other caregivers provide nurturing and positive supports to their children. Those tools include the Child Skills Survey (Renamed in 2010 to School Readiness Assessment by Prevention of Child Abuse California), Parent Satisfaction Surveys, the Devereux Early Childhood Assessment (DECA) and the Adult-Adolescent Parenting Inventory (AAPI).

Following are evaluation results organized around the three outcome indicators. This first section covers the School Readiness Assessment.

CHANGES IN INCREASED SOCIAL SKILLS AND POSITIVE BEHAVIORAL CHANGES IN CHILDREN

The School Readiness Assessment is the primary means of measuring gains in a child's social skills and positive behavioral changes. It is an 11-question survey looking at areas of safety routines, good personal health, social competence, and effective learning. The scores range from one through six. Skill level one is "exploring," skill level two is "developing," skill level three is "building," skill level four is "integrating," skill level five is "emerging," and skill level six is "not appropriate." The School Readiness Assessment was administered to 99 children at the beginning of the program, and all children (99) completed a post-program survey.

The chart that follows shows the percentage of children determined to be at level one (exploring) or level two (developing) according to survey questions both before and after participating in the Little Learners program. The greatest percent of change was documented in the safety routine skill area.

Chart 15: Skill area by level, 2010 - 11

Skill Area	Percentage of children at Levels one or two (Pre)	Percentage of children at Levels one or two (Post)	Percent of change to higher skill levels (three through six) ¹⁰
Child understands safety routines	58%	33%	25%
Child understands good personal health	49%	35%	14%
Child demonstrates social competence	57%	34%	21%
Child demonstrates effective learning	47%	29%	18%
Child practices safety routines	54%	30%	24%
Child practices good personal health	52%	37%	15%

Progression for developing skills moves from understanding a concept, to demonstrating it, to practicing it. Specifically, skill level one is “exploring,” skill level two is “developing,” skill level three is “building,” skill level four is “integrating,” skill level five is “emerging,” and skill level six is “not appropriate.”

RESULT AREA 2: IMPROVED CHILD DEVELOPMENT

CHANGES IN INCREASED AWARENESS OF CHILD DEVELOPMENT DOMAINS

There are three tools used to measure changes in knowledge and awareness of child development domains: 1) the Devereux Early Childhood Assessment (DECA), 2) the Parent Satisfaction Survey and, 3) the Adult-Adolescent Parenting Inventory (AAPI). Changes resulting from Little Learners program activities during the 2010 - 11 program years, as documented through each measure, follow.

The Devereux Early Childhood Assessment (DECA) is a standardized, reliable, strength-based assessment of children’s protective factors related to resilience. The DECA assesses five different areas, Behavioral Concerns (BC), Total Protective Factors (TPF), Attachment (AT), Self-Control (SC) and Initiative (IN) according to three different ranges that the child may fall into. These ranges are *concern*, *typical* and *strength*. The purpose and results of the assessment are discussed with parents in order to help them understand how their child is progressing developmentally so they can support learning and development.

The DECA is a behavioral rating scale that includes a total of 37 items - 27 of which assess a child's protective factors related to resilience (initiative, self-control and attachment) and 10 of which screen for behavioral concerns. Devereux describes the tool as an assessment of protective factors and a screener for behavioral concerns. Therefore, the tool is appropriate for use as a screening instrument, but in addition, provides valuable information about a child's protective factors. It is the unique aspect of assessing protective factors that makes the DECA such a strong choice for programs to use as their social/emotional screener. The DECA not only screens for behavior problems, but in addition, collects information about a child's resilience. Devereux's philosophy, which is supported by resilience research, is that intervention should not be put off until a child is displaying behavior problems, but rather, should begin if a child is showing a lack of protective factors. Resilience research indicates

¹⁰ Data for post assessments was taken in July, 2011

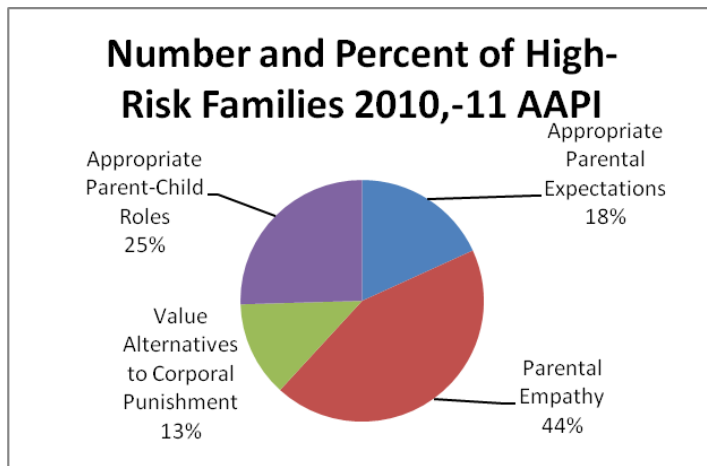
the importance of promoting children's protective factors as a means of preventing the development of emotional/behavioral problems.

Eighty-three children completed an initial DECA screening upon enrollment, and 43 children completed a follow-up screening later in the year. This is an increase of 65 initial and 35 follow-up screenings over the previous year.

Of the 83 children assessed at the beginning of the program, 34 percent (28) of the children were rated as having typical or strong protective factors related to their resilience, while nearly 40 percent (33) of children were noted as having concerns related to attachment, initiative, self control or behavior. Children with noted concerns were referred for follow up professional services. At the follow up assessment, only 19 children were noted as having a concern.

The DECA was also used to assess a broader group of children in Glenn County. Results of those findings are provided in the Increased Collaboration, System Enhancements and Sustainability section.

Chart 16: Number and Percent of High Risk Families 2010 - 11 AAPI



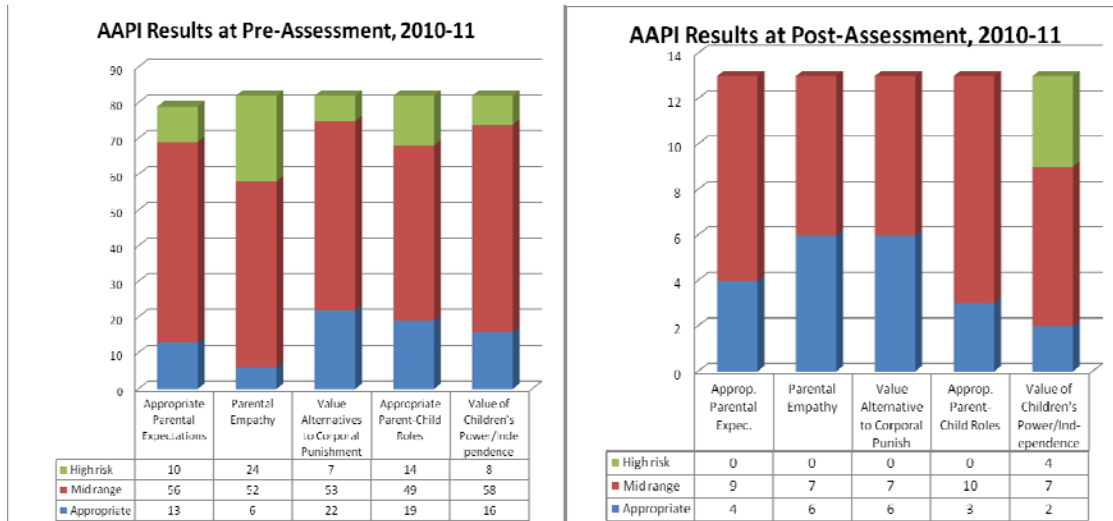
The Adult-Adolescent Parenting Inventory (AAPI) is used to measure attitudes and beliefs about parenting and assesses their knowledge of child development and appropriate expectations. An initial AAPI is conducted soon after enrollment in the program. This allows parents who are participating in Nurturing Parenting classes over a longer period of time to see their progress and reset individual and family goals. Additionally, regular implementation of this research-based tool allows Little Learners staff to track results over time and learn what interventions produced

the best results. The AAPI results are used to customize training topics and to identify families that may need additional referrals, support and guidance toward positive parenting and improved family functioning.

In 2010 - 11, initial AAPI assessments were conducted with 82 families participating. Low test scores generally indicate a high risk for abusive parenting behaviors, while high test scores typically indicate positive, nurturing parenting attitudes and low risk for abuse. At the initial assessment, most parents were found to be in the “appropriate” or “mid-range” levels, as shown on the next page. However, a significant number of parents were found to be high- risk in one or more areas. Follow up AAPI assessments were later conducted with 13 families that continued in the program. At the second assessment, all parents had moved out of high-risk levels. The chart above shows the number and percentage of parents with high risk scores at the initial AAPI in each of the areas assessed.

The charts and graphs displayed on this page demonstrate the composition of those assessed both pre and post, based on the area of potential risk and numbers of those in the appropriate, mid-range or high risk ranges.

Chart17: Initial AAPI results for all areas at pre and post assessment, 2010 - 11



CHANGES IN PARENT KNOWLEDGE AND AWARENESS

The third section describes the Parent Satisfaction Survey as the measurement tool for parent knowledge. The survey was issued to 106 parents at the beginning of the programs, and 64 parents completed the post-survey. This is an increase over the last year of 75 parents surveyed at the beginning, and 35 parents surveyed at the end. Parents were asked to choose: Not applicable, Poor, Fair, Good, or Excellent as a response to the following statements:

“Coming to this class has helped me...”

- “...learn something new about being a parent.”
- “...guide my child in positive ways.”
- “...have knowledge of and provide age appropriate activities for my child.”
- “...give my child my time and attention.”
- “...find ways to help my child learn.”

The following chart shows the changes between pre and post surveys for 2010 – 11.

Chart18: Comparison of Parent Satisfaction Survey Results, 2010 - 11

Coming to this class has helped me...	Pre-Test	Post-Test
Learn something new about being a parent	0=N/A 8%=Fair 81%=Good 10%=Excellent	0=Fair 9%=Good 91=Excellent
Guide my child in positive ways	5%=Fair 82% = Good 12%=Excellent	1%=Good 99%=Excellent
Have knowledge of and provide age appropriate activities for my child	8%=Fair 62%= Good 29%=Excellent	11%=Good 89%=Excellent
Give my child my time and attention	0%=N/A 4%=Fair 59%=Good 36%=Excellent	8%=Good 92%=Excellent
Find ways to help my child learn	0%=N/A 5%=Fair 72%=Good 22%=Excellent	0%=Fair 6%=Good 94%=Excellent

Overall, parents increased their total ratings for good and excellent ratings in all five areas. Respondents indicated that as a result of their involvement, ratings trended toward good and excellent for post-tests. More people indicated they felt their knowledge was good or excellent most in the following skill areas: (1) guiding my child in positive ways (99 percent rated as Excellent), (2) find ways to help my child learn (94 percent rated as Excellent), and (3) give my child my time and attention (92 percent rated as Excellent). In open-ended questions, parents listed favorable comments about the program.

COMMUNITY IMPACT OF THE LITTLE LEARNERS PROJECT

During the 2010 - 11 program year the Little Learners program impacted the community in a number of areas, including:

- The program has reduced the causes and conditions of child abuse and neglect. Improved parenting skills and child development knowledge, moving all high-risk families into either the acceptable or mid-range on the AAPI in the areas of: 1) inappropriate parental expectations of the child, 2) lack of empathy towards children’s needs, 3) parental value of physical punishment, 4) parental role reversal, and, 5) oppressing children’s power and independence. By increasing parents’ skills, Little Learners has improved parenting and childrearing practice that support a child’s well being and development.
- The Commission has successfully integrated many school readiness activities under the Little Learners umbrella to continue First 5 Glenn’s reach throughout the county.

RESULT AREA 3: IMPROVED CHILD HEALTH

DENTAL HEALTH SERVICES

Research has shown the link between good oral health and school attendance and learning outcomes. The Commission therefore felt it was essential that pregnant moms and children zero to five could receive age appropriate dental health screenings and assessments. Over the past four years the Commission has partnered with the Mobile Dental Clinic (MDC) to provide care to children ages zero to five, their older siblings, and pregnant women in Glenn County. The MDC project was supported in part through one-time funding from First 5 Glenn, which started late in program year 2007 - 08 and continued through 2010 - 11.

A total of 1,120 services were provided through 313 patient visits to the Mobile Dental Clinic (MDC). As shown in the charts at right and below, these visits included:

- Exams, X-rays
- Cleanings
- Sealants, varnish
- Oral hygiene information
- Fillings, extractions
- Referrals



Chart 19: Patients served in 2010-11

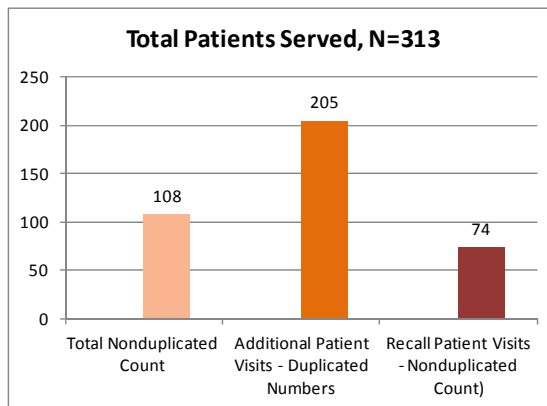
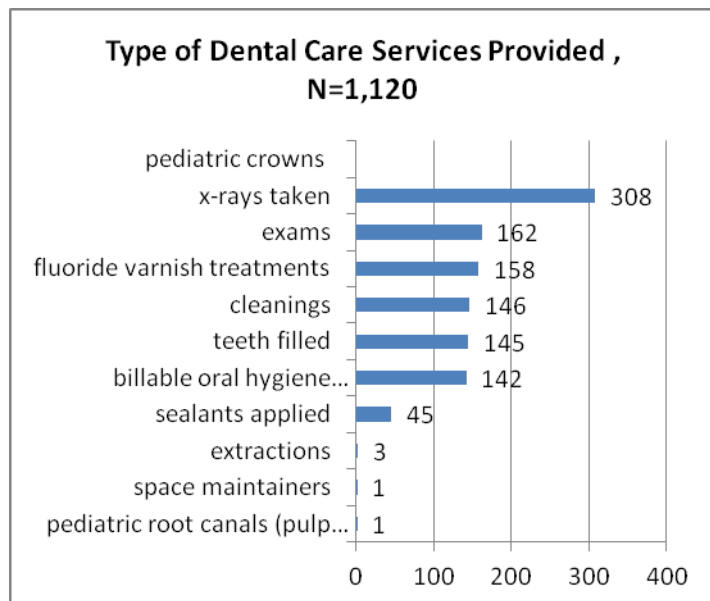


Chart 20: Dental Care Provided by MDC 2010-11



During the program year, the First 5 staff referred 39 children ages zero to five for services through the Mobile Dental Clinic (MDC) project.

Over the past four years the MDC has served 286 patients. It has more than doubled the number served in the first year, as shown in the chart below.

Chart 21: Mobile Dental Unit patients, 2007 - 08, 2008 - 09 and 2009 - 10

	2007-08	2008-09	2009-10	2010-11
Mobile Dental Clinic patients	52	87	39	108

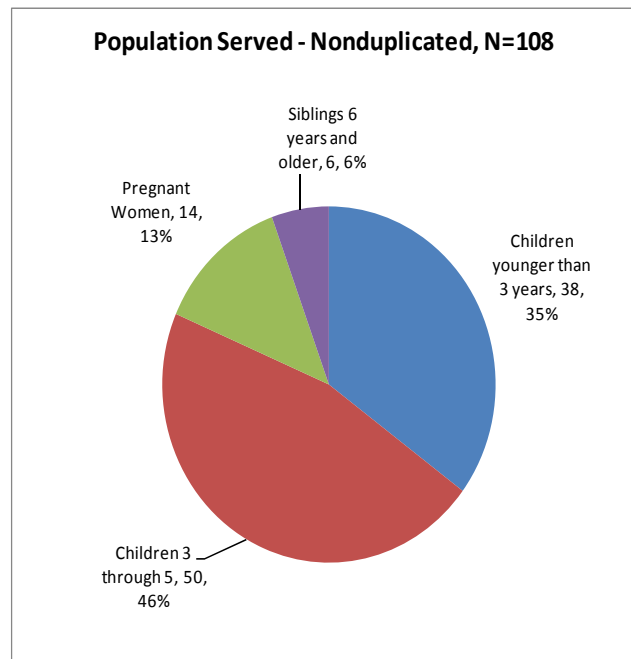


First 5 Glenn County developed partnerships to continue services of the Mobile Dental Clinic to provide expanded areas of the community. In the 2010 - 11 fiscal years, the Commission began expansion from Hamilton City into Orland and Willows. To accomplish this, First 5 Glenn worked with the state preschools and Head Start agencies to go into the classrooms and screened children. Those needing services were referred to the MDC.

Chart 22: Nonduplicated Patients Served, 2010-11

This past year 108 patients were served, comprised of 88 children zero to five, six siblings older than six years, and 14 pregnant women.

The majority (57 percent) of children served were of Hispanic/Latino ethnicity while others were of White ethnicity (43 percent). Most of the children (57 percent) spoke Spanish at home and the other (43 percent) spoke English.



RESULT AREA 4: IMPROVED SYSTEM FUNCTIONING

Outcome #1: Children receive age appropriate dental health screening and treatment.

Indicators:

- Number/percent of children receiving preventative and ongoing dental health services, including follow up services
- Number/percent of follow-through on referrals for dental services

The impact of First 5 goes far beyond increasing the type or amount of services for children and families. A critical role for First 5 is helping make services work better so that they are more accessible and effective for families.

During the 2010 - 11 program year, Little Learners referred 14 children to other programs for additional services and supports. Of those referrals, 100 percent completed follow ups.

Early detection of developmental delays and intervention prior to kindergarten has huge social and economic benefits. Studies have shown that children who receive early

treatment for developmental delays are more likely to graduate from high school, hold jobs, live independently, and avoid teen pregnancy, delinquency, and violent crime. These improvements in life outcomes created by early intervention for developmental delays produce savings to society ranging from \$30,000 to \$100,000 per child. Put another way, for every \$1 we spend on early intervention, society saves \$13 – a savings so substantial that countries such as Great Britain fund early intervention programs directly from their national treasury.

The First 5 Glenn Commission also believes early detection is important and works collaboratively with parents, schools and other partners to conduct early screening and developmental screenings and provides coaching and referrals for follow up services and supports.

Outcome #2: [Collaborative partners/service providers'] programs show evidence of increased collaboration and ongoing communication.

Indicators:

- Number/percentage of parents and children referred to other programs for additional services and supports
- Number/percentage of parents and children referred receiving additional services and supports

There are three investments by First 5 that had significant impact on improving the systems of care for children in Glenn County: 1) expanded DECA implementation to reach children from Elk Creek, Hamilton City, Lake, Murdock, Plaza, William Finch Charter School, Capay, Mill Street, and Princeton Elementary Schools, 2) the Mobile Dental Clinic, and 3) the Nurturing Parenting Collaborative. Since the Mobile Dental Clinic has already been described in this document (Improved Health) only the expanded DECA implementation and the Nurturing Parenting Collaborative are discussed in this section.

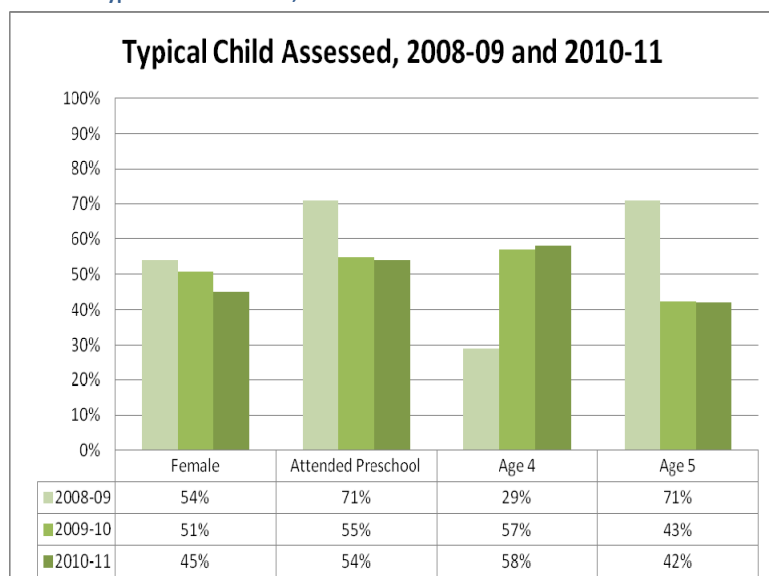
INCREASED COLLABORATION: EARLY SCREENING

EARLY SCREENING THROUGH DECA IMPLEMENTATION

The Devereaux Early Childhood Assessment (DECA) is a standardized, reliable, strength-based assessment of children’s protective factors related to resilience. The DECA assesses five different areas, Behavioral Concerns (BC), Total Protective Factors (TPF), Attachment (AT), Self-Control (SC) and Initiative (IN) according to three different ranges that the child may fall into. These ranges are *concern*, *typical* and *strength*. As mentioned earlier in this report, the DECA not only screens for behavior problems, but in addition, collects information about a child’s resilience. Resilience research indicates the importance of promoting children’s protective factors as a means of preventing the development of emotional/behavioral problems.

Due to behavior induced suspensions of young elementary school children that prompted the DECA implementation in April 2008, the schools have been eager to learn about assessment tools to identify children with needs early on. In response, First 5 staff, partners and teachers were trained on, and implemented the DECA Assessment universally as part of the 2009 Kindergarten Roundup. This was so successful that additional schools wanted to be involved in 2010. By the end of the 2010 - 11 school year all public elementary schools wanted to participate in the partnership. They understood the value and importance of using the DECA assessment to help identify development and learning needs of young children and to provide counseling and follow up supports for teachers and parents working with children. These DECA’s were completed in addition to the DECA’s completed by the Little Learners program.

Chart 23: Typical Child Assessed, 2008 - 09 to 2010 - 11



The DECA implementation process and results are described below. For this program year, 3 AmeriCorps staff members and 3 Glenn County employees assisted First 5 in organizing assessments.

The DECA was completed on 386 children during the year – an increase of over 58 percent. This brings the total number of DECA’s completed through First 5 Glenn County to 512 when combined with the number of DECA’s completed by the Little Learners Program. The majority of the children spoke English (69.1 percent), although this was down from 82.4

percent last year. Spanish was the second-highest language spoken (30.9 percent) and it was up from 17.6 percent in 2009 - 10. Slightly more males were assessed (54.5 percent males and 45.5 percent female), and most children were age four (57.7 percent versus 42.0 percent age five). Additionally, most children were assessed at Mill Street Elementary School. Of those that responded to the question that asked whether the child attended preschool, the majority of these children did attend (53.9 percent). All DECA screenings were completed between February 4, 2011 and May 4, 2011. Eighty six percent (311) of those filling out the form were the child’s mother. The table

below demonstrates the DECA scores of all children assessed. Almost all children were assessed as typical in at least one area, while roughly half were assessed as either a concern or strength in at least one area.

The two charts that follow show how DECA scores compared for 2009 - 11 and 2010 - 11 program years. Overall, more children in the 2010 - 11 scored in the “typical” range of development, and a smaller percentage of children assessed had concerns related to self-control or behavior.

Chart 24: DECA Assessment Scores, 2009-10

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	28.3% (32)	20.4% (23)	46.0% (52)	29.2% (33)	67.3% (76)	113
Typical	62.3% (127)	54.9% (112)	59.3% (121)	59.8% (122)	60.8% (124)	204
Strength	53.4% (63)	73.7% (87)	41.5% (49)	56.8% (67)	18.6% (22)	118

Chart 25: DECA Assessment Scores, 2010 - 11

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	25.7% (47)	13.7% (25)	53% (97)	30.1% (55)	61.7% (113)	183
Typical	65.5% (222)	59.3% (201)	59.3% (200)	63.4% (215)	58.4% (198)	339
Strength	51.5% (94)	74.5% (137)	35.9% (66)	50.5% (93)	27.7% (51)	184

Over half of the children (183) needed follow up for concerns in one or more developmental areas.

- One hundred thirteen children were assessed with Behavioral Concerns. Seventeen of these children also had a concern in Initiative, 13 had a concern in Self-Control, 36 had a concern in Attachment, and 22 were assessed with a concern in Total Protective Factors.
- Of the 97 children assessed with Attachment concerns, 36 also had concerns with Initiative, 14 with Self-Control, 45 with Total Protective Factors and 36 also had a concern in Behavior.
- Forty Seven children were assessed with a concern in Initiative. Many children assessed with an Initiative concern were also assessed with other concerns, including Self-Control (15), Attachment (36), Total Protective Factors (36), and Behavioral Concerns (17).
- Of the 55 children assessed with Total Protective Factors concerns, 36 children also had concerns in Initiative, 20 in Self-Control, 45 in Attachment, and 22 had concerns in Behavior.
- Twenty five children were assessed with a Self-Control concern. Many of these children were assessed with additional concerns, including Initiative (15), Attachment (14), Total Protective Factors (20) and Behavioral Concerns (13).

The largest number of students surveyed (152) were assessed at Mill Street Elementary School, while 83 were assessed at Hamilton City Elementary. As shown in the chart that follows, the number and percent of children attending preschool dramatically dropped in 2009 - 10, but bounced back to some degree in 2010 - 11.

Chart 26: Glenn County DECA Assessment Percent of Children Attending Preschool, 2008 - 09, 2009 - 10, and 2010 - 11

School	2008-09	2009-10	2010-11
Capay	N/A	N/A	7 children or 70% attended preschool
Elk Creek	NA	8 or 88.9% attended preschool	1 child or 20% attended preschool
Hamilton	39 children or 91% attended preschool	14 children or 34.1% attended preschool	27 children or 51.9% attended preschool
Lake	NA	NA	1 child or 4.8% Attended preschool
Mill Street	NA	NA	67 children or 44.1% attended preschool
Murdock	68 children or 56% attended preschool	40 children or 32% attended preschool	53 children or 64.6% attended preschool
Plaza	NA	3 children or 20% Attended preschool	11 children or 73.3% attended preschool
Princeton	NA	NA	2 children or 16.7% attended preschool
William Finch Charter School	NA	NA	21 children or 95.5% attended preschool

The reason for the drop in preschool attendance in 2009 - 10 and its partial recovery in 2010 - 11 is unknown, but it will be important to track this trend and try to determine if it is related to the economy, parent's value of preschool involvement, or other types of factors.

The tables and charts below demonstrate the difference in DECA scores for those children who attended preschool versus those who did not in 2010 - 11. Of the 364 children assessed, 195 (54 percent) indicated whether or not they attended preschool.

Chart 27: Children attending preschool, 2010 - 11

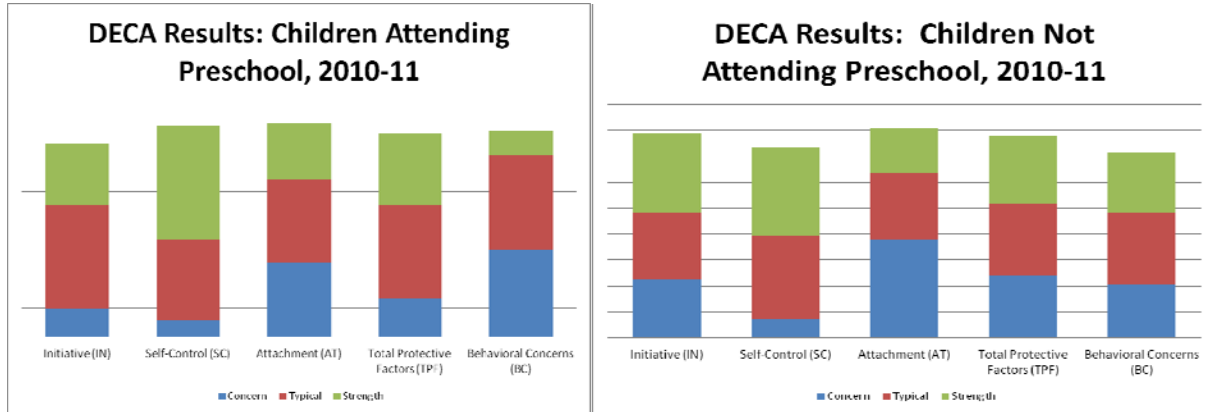
	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	19.4% (20)	11.7% (12)	51.5% (53)	27.2% (28)	60.2% (62)	103
Typical	71.4% (145)	55.7% (113)	57.1% (116)	63.1% (128)	64.5% (131)	203
Strength	42% (47)	77.7% (87)	38.4% (43)	50.0% (56)	17% (19)	112

Chart 28: Children not attending preschool, 2010 - 11

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	44.8% (13)	13.8% (4)	75.9% (22)	48.3% (14)	41.4% (12)	29
Typical	51.0% (26)	64.7% (33)	51% (26)	54.9% (28)	54.9% (31)	51
Strength	62.5% (20)	68.8% (22)	34.4% (11)	53.1% (17)	46.9% (15)	32

The two graphs below visually demonstrate the comparison of DECA results for children attending preschool and those who do not in 2010 - 11.

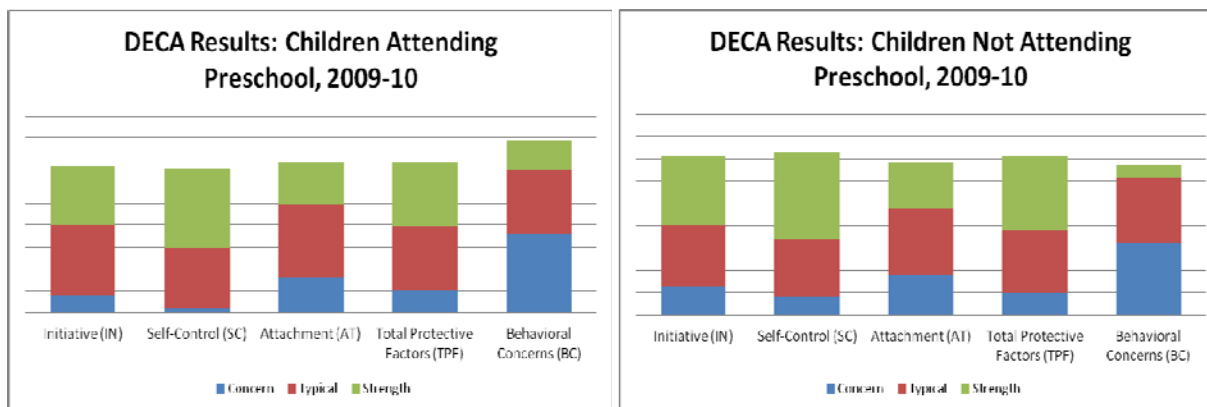
Chart 29: Comparison of DECA results for children attending preschool with those that do not in 2010 - 11



In 2010 - 11, children who attended preschool were less likely to exhibit concerns in initiative, attachment, and total protective factors. However, they were more likely to exhibit behavioral concerns.

The results from the period 2009 - 10 show similar, but less pronounced results. Like the children in the 2010 - 11, those who attended preschool were less likely to exhibit concerns in initiative and attachment. However, they were more likely to exhibit behavioral concerns.

Chart 30: Comparison of DECA results for children attending preschool with those that do not in 2009 - 10



DECA scores can also be considered according to the site children were assessed. For specific numbers of children assessed by school, please refer to Appendix B: DECA Scores by School.

INCREASED COLLABORATION: ADDITIONAL SERVICES AND SUPPORTS

PARENTS AND CHILDREN REFERRED RECEIVING ADDITIONAL SERVICES AND SUPPORTS: NURTURING PARENTING PROGRAM

First 5 Glenn County has made significant improvements in system functioning through Little Learners and the Nurturing Parenting program (NPP). A five-partner collaborative was formalized in 2007, consisting of First 5 Glenn County, Glenn County Health Services Agency, Glenn County Human Resource Agency, Glenn County Office of Education, and the Glenn County Probation Department. A sixth partner, Remi Vista, Inc., joined the group. Initially supporting Nurturing Parenting, the purpose of the county-wide collaborative is to coordinate and integrate child maltreatment prevention, intervention and treatment services using a uniform and evidence-based, best-practice methodology (NPP). First 5 Glenn County and the Glenn County Human Resource Agency have kept the Nurturing Parenting Program at the forefront for this collaborative.

Since 2007, Little Learners has used the Nurturing Parenting curriculum, which can be described as parent education coupled with interactive parent/child sessions. This approach promotes an experience for families who recognize the need for parenting their own children in more positive ways than their own childhood experience. A portion of the topics for group sessions are determined according to the parents' and caregivers' immediate concerns. There is also a strong underlying component that promotes increased community and neighborhood involvement. One of the strengths of the NPP is that the components can be adapted to special populations, including appropriate language and cultural content, while still maintaining its evidence-based validity and reliability. These special populations include Hmong families, Hispanic/Latino families, African American families, Christian families, Military families, and families in treatment of recovery.

First 5 Glenn County has implemented creative fiscal strategies to achieve financial objectives and provide the financial resources necessary to carry out their strategic plan. These include (1) partnering with identified public and private agencies to develop funding proposals to maintain and expand Little Learners and other partners' programs/activities resources benefitting the health, development and school readiness of children ages zero to five, (2) cost negotiation and cost sharing among partners and collaborators in order to contain or reduce expenses for operating Commission programs in Hamilton City, Willows, Orland or other locations, as programs expand, and (3) looking for ways to coordinate activities and implement best practice strategies with other public or private agencies through continuing the Nurturing Parent Program (NPP). This will help extend program reach to other areas of the county and create a shared means of reporting impact and results.

To these ends, the Commission has already accomplished cost sharing of space in Hamilton City with Women, Infants and Children (WIC) and Head Start, and has been partnering with public and private agencies to develop funding proposals to maintain and expand Little Learners and other partners' programs or activities. Specifically, the Commission developed the Child Abuse Prevention, Intervention and Treatment (CAPIT) proposal and the National Responsible Fatherhood Capacity Building Initiative proposal to maintain the Nurturing Parenting Program. The Collaborative received CAPIT funding for 2010 - 11 and again for 2011 - 12. This funding increased the ability of Little Learners staff to implement home visits, offer additional parenting classes and Little Learners Groups, and expand family engagement support into Orland and Grindstone Rancheria. It also provided the ability to support children zero to five in the Adult ESL program in Hamilton City.

FIRST 5'S COMMUNITY IMPACT

Birth to five is a period for dramatic changes to the brain, and children learn faster at this time than at any other time in their lives. Recent scientific advances in knowledge about child development and brain development reveal that experiences and conditions during early childhood can have long-term consequences. School readiness activities, including those conducted through the Little Learners programs, have a significant positive effect on the community. The need for parents and guardians to effectively support their child's development at home is underscored by data showing that children in Glenn County who attend a preschool are better prepared to enter kindergarten. Estimates show that for every dollar invested in high-quality early childhood education, \$4 to \$17 in returns is generated for the public.¹¹

The Harvard Family Research Strategies (Golan, Spiker, and Sumi 2005) recommend investments in family support and education services as strategies to "improve children's services." The Harvard Report indicates that a child's competencies are directly related to good health, parental concerns, preschool participation and family literacy levels. Further they state that early childhood systems must include five essential elements. 1) Mental health and social-emotional development including screenings for children, 2) high quality early childhood and/or child care programs, 3) Access to health (medical and dental) insurance and medical homes, 4) parent education and family literacy, and 5) family support services.

There are several early literacy skills including vocabulary, interest in books, and understanding about printed words, knowing letters, storytelling and phonetics that are important to develop before children enter kindergarten. First 5 Glenn incorporates these types of literacy activities into its school readiness and family support activities. Over the past two years, these efforts have had an impact on the number of families that make reading and storytelling an active part of their lives – leading to improved child literacy skills.

Academic research on the causes and conditions of child abuse and neglect have identified a number of common parenting and childrearing practices, including inappropriate parental expectations of the child, lack of empathy towards children's needs, parental value of physical punishment, parental role reversal, and oppression of children's power and independence. Since all learning is linked (e.g., emotional, social, intellectual, language, and motor skills) and each area of development depends on and influences the other areas, it is critical that parents have the knowledge and skills to effectively parent their children as well as understand their child's development process and milestones.¹² Intensive parent support (PCIT) and Nurturing Parenting sessions both provide parents with this knowledge and a safe environment to grow and practice skills.

The community impact regarding screenings and assessment provides a consistent and research based methodology for the early identification of delays in both family functioning and in the children of high risk families. Early detection of developmental delays and intervention prior to kindergarten has been shown to produce large social and economic benefits. Various studies find that children who receive early treatment for

¹¹ Children Now 2008 California Data Book, http://publications.childrennow.org/publications/invest/scorecard08/scorecard08_lassen.htm

¹² Zero to Three, <http://www.zerotothree.org>.

developmental delays are more likely to have better life outcomes, including high school graduation, job retention, an ability to live independently, and avoidance of early pregnancy. Furthermore, research noted First 5 Northwest Region and First 5 Sacramento Region Impact Reports note that for every \$1 spent on early intervention, it is estimated that society saves \$13.¹³ First 5 Glenn assessment and screening activities have allowed for earlier referral to comprehensive services for children (i.e., Behavioral Health Specialists, Parent Child Interactive Therapy) and to a broad spectrum of resources that support family functioning and stability. Families with high risk conditions have a comprehensive case management and family education system in place to help improve their outcomes as well as help them help their children be ready to learn by the time they enter kindergarten.

The strategies implemented by First 5 Glenn either directly or through partnerships address the elements mentioned above and support families by providing access to health, developmental screenings, parent education and literacy and high quality early childhood programs.

¹³ Glascoe, F. P., Shapiro, H. L. (2004, May 27). *Introduction to Developmental and Behavioral Screening*. Developmental Behavioral Pediatrics online (accessible at <http://www.dbpeds.org/articles/detail.cfm?id=5>) as cited in the First 5 Northwest Region Impact Report

APPENDIX A: POPULATION, ETHNICITY AND PRIMARY LANGUAGE BY SCHOOL

The charts provided below describe population, ethnicity and primary language by school.

IMPORTANT NOTE: The “English Learners in Public Schools, by Top 10 Languages Spoken” data was not available in 2010 and 2011. However, the historical data still serves as an important resource and has therefore been included in this report.

WILLOWS UNIFIED PUBLIC SCHOOL

Chart 31: Willows Unified Public School Enrollment, by Race/Ethnicity: 2005 - 11¹⁴

Public School Enrollment, by Race/Ethnicity							
Race/Ethnicity	2005	2006	2007	2008	2009	2010	2011
African American/Black	2.7%	1.3%	1.1%	0.8%	0.6%	1.1%	1.2%
Asian American	8.7%	8.3%	7.1%	7.1%	7.3%	7.1%	6.2%
Caucasian/White	49.7%	50.8%	50.6%	48.5%	49.6%	48.2%	45.6%
Filipino	2.0%	0.2%	0.2%	0.2%	0.2%	0.2%	0.3%
Hispanic/Latino	33.1%	35.9%	37.5%	39.5%	38.4%	39.2%	43.6%
Native American/Alaska Native	3.2%	3.3%	3.0%	3.3%	3.2%	3.0%	2.6%
Pacific Islander	0.3%	0.3%	0.5%	0.4%	0.4%	0.4%	0.4%

Chart 32: Willows Unified English Learners in Public Schools, by Top 10 Languages Spoken: 2005 - 09¹⁵

English Learners in Public Schools, by Top 10 Languages Spoken						
Language Spoken	2005	2006	2007	2008	2009	2010 ¹⁶
Arabic	3	2	0	1	0	
Armenian	0	0	0	0	0	
Cantonese	0	0	0	0	0	
Filipino	0	0	0	0	0	
Korean	0	0	0	0	0	
Hmong	43	38	31	41	40	
Mandarin	0	0	0	0	0	
Punjabi	2	0	0	1	1	
Spanish	224	235	226	234	255	
Vietnamese	0	0	0	0	1	
All Other Non-English Languages	13	4	11	16	12	

14 As cited on kidsdata.org, California Department of Education, California Basic Educational Data System (CBEDS).

15 As cited on kidsdata.org, California Department of Education, English Learners by Grade and Language Data Files.

16 2010 data has not yet been released for this period.

Chart 33: Capay Joint Union Elementary Public School Enrollment, by Race/Ethnicity: 2005 - 11¹⁷

Public School Enrollment, by Race/Ethnicity							
Race/Ethnicity	2005	2006	2007	2008	2009	2010	2011
African American/Black	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%
Asian American	1.6%	1.6%	2.9%	1.4%	2.1%	2.4%	2.6%
Caucasian/White	72.0%	74.4%	75.2%	76.6%	76.0%	70.2%	70.5%
Filipino	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0%
Hispanic/Latino	26.4%	24.0%	21.9%	21.4%	21.9%	26.2%	25.3%
Native American/Alaska Native	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pacific Islander	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Chart 34: Lake Elementary Public School Enrollment, by Race/Ethnicity: 2005 - 11¹⁸

Public School Enrollment, by Race/Ethnicity							
Race/Ethnicity	2005	2006	2007	2008	2009	2010	2011
African American/Black	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Asian American	0.0%	0.7%	0.8%	0.8%	0.8%	2.8%	2.6%
Caucasian/White	79.9%	80.0%	76.7%	74.2%	72.6%	72.9%	67.7%
Filipino	0.0%	0.0%	0.0%	1.5%	0.8%	0.0%	0.0%
Hispanic/Latino	20.1%	19.3%	18.0%	22.7%	25.8%	23.6%	29.0%
Native American/Alaska Native	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pacific Islander	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Chart 35: Orland Joint Unified Public School Enrollment, by Race/Ethnicity: 2005 - 11¹⁹

Public School Enrollment, by Race/Ethnicity							
Race/Ethnicity	2005	2006	2007	2008	2009	2010	2011
African American/Black	1.2%	1.0%	1.0%	1.1%	1.2%	1.1%	0.7%
Asian American	2.4%	2.5%	2.7%	3.0%	3.2%	3.5%	3.0%
Caucasian/White	45.8%	45.0%	43.0%	40.8%	38.0%	38.2%	38.3%
Filipino	0.2%	0.2%	0.3%	0.3%	0.3%	0.3%	0.2%
Hispanic/Latino	45.8%	48.0%	49.4%	51.2%	53.6%	55.5%	56.3%
Native American/Alaska Native	1.3%	1.2%	1.3%	1.1%	0.8%	0.9%	1%
Pacific Islander	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0%

¹⁷ As cited on kidsdata.org, California Department of Education, California Basic Educational Data System (CBEDS). Accessed online at <http://www.cde.ca.gov/ds/sd/cb/studentdatafiles.asp> (August 2009).

¹⁸ As cited on kidsdata.org, California Department of Education, California Basic Educational Data System (CBEDS). Accessed online at <http://www.cde.ca.gov/ds/sd/cb/studentdatafiles.asp> (August 2009).

¹⁹ As cited on kidsdata.org, California Department of Education, California Basic Educational Data System (CBEDS). Accessed online at <http://www.cde.ca.gov/ds/sd/cb/studentdatafiles.asp> (August 2009).

Chart 36: Plaza Elementary Public School Enrollment, by Race/Ethnicity: 2005 - 11²⁰

Public School Enrollment, by Race/Ethnicity							
Race/Ethnicity	2005	2006	2007	2008	2009	2010	2011
African American/Black	0.0%	0.0%	0.0%	0.0%	0.0%	0.0	0.0
Asian American	6.3%	6.0%	5.9%	5.8%	4.4%	4.9	5.8
Caucasian/White	67.1%	69.4%	68.4%	65.9%	71.1%	68.3	66.4
Filipino	0.0%	0.0%	0.0%	0.0%	0.0%	0.0	0.0
Hispanic/Latino	25.2%	23.1%	22.1%	25.4%	21.5%	23.9	24.8
Native American/Alaska Native	1.4%	1.5%	2.2%	2.2%	2.2%	0.0	0.0
Pacific Islander	0.0%	0.0%	1.5%	0.7%	0.7%	0.7	0.7

Chart 37: Capay Joint Union Elementary English Learners in Public Schools, by Top 10 Languages Spoken: 2005 - 09²¹

English Learners in Public Schools, by Top 10 Languages Spoken					
Language Spoken	2005	2006	2007	2008	2009
Arabic	0	0	0	0	0
Armenian	0	0	0	0	0
Cantonese	0	0	0	0	0
Filipino	0	0	0	0	0
Korean	0	0	0	0	0
Hmong	0	0	0	0	0
Mandarin	0	0	0	0	0
Punjabi	0	0	0	0	0
Spanish	10	16	15	17	21
Vietnamese	0	0	0	0	0
All Other Non-English Languages	0	0	0	2	2

Chart 38: Lake Elementary English Learners in Public Schools, by Top 10 Languages Spoken: 2005 - 09²²

English Learners in Public Schools, by Top 10 Languages Spoken					
Language Spoken	2005	2006	2007	2008	2009
Arabic	0	0	0	0	0
Armenian	0	0	0	0	0
Cantonese	0	0	0	0	0
Filipino	0	0	0	0	0
Korean	0	0	0	0	0
Hmong	0	0	0	0	0
Mandarin	0	0	0	0	0
Punjabi	0	0	0	0	0

²⁰ [As cited on kidsdata.org](http://www.cde.ca.gov/ds/sd/cb/studentdatafiles.asp), California Department of Education, California Basic Educational Data System (CBEDS). Accessed online at <http://www.cde.ca.gov/ds/sd/cb/studentdatafiles.asp> (August 2009).

²¹ [As cited on kidsdata.org](http://www.cde.ca.gov/ds/sd/lc/fileseelsch.asp), California Department of Education, English Learners by Grade and Language Data Files. Accessed online at <http://www.cde.ca.gov/ds/sd/lc/fileseelsch.asp> (October 2009).

²² [As cited on kidsdata.org](http://www.cde.ca.gov/ds/sd/lc/fileseelsch.asp), California Department of Education, English Learners by Grade and Language Data Files. Accessed online at <http://www.cde.ca.gov/ds/sd/lc/fileseelsch.asp> (October 2009).

English Learners in Public Schools, by Top 10 Languages Spoken					
Language Spoken	2005	2006	2007	2008	2009
Spanish	11	13	9	16	10
Vietnamese	0	0	0	0	0
All Other Non-English Languages	0	0	0	0	0

Chart 39: Orland Joint Unified English Learners in Public Schools, by Top 10 Languages Spoken: 2005 - 09²³

English Learners in Public Schools, by Top 10 Languages Spoken					
Language Spoken	2005	2006	2007	2008	2009
Arabic	3	2	10	13	8
Armenian	0	0	0	0	0
Cantonese	1	1	2	2	2
Filipino	0	0	0	0	0
Korean	0	0	0	0	0
Hmong	10	8	6	5	6
Mandarin	0	0	0	0	0
Punjabi	6	4	3	1	2
Spanish	351	391	429	451	512
Vietnamese	2	2	1	2	3
All Other Non-English Languages	4	9	10	11	19

Chart 40: Plaza Elementary English Learners in Public Schools, by Top 10 Languages Spoken: 2005 - 09²⁴

English Learners in Public Schools, by Top 10 Languages Spoken					
Language Spoken	2005	2006	2007	2008	2009
Arabic	0	0	0	0	0
Armenian	0	0	0	0	0
Cantonese	0	0	0	0	0
Filipino	0	0	0	0	0
Korean	0	0	0	0	0
Hmong	0	0	0	0	0
Mandarin	0	0	0	0	0
Punjabi	4	3	1	2	3
Spanish	12	15	16	7	5
Vietnamese	0	0	0	0	0
All Other Non-English Languages	0	0	0	1	0

²³ As cited on kidsdata.org, California Department of Education, English Learners by Grade and Language Data Files. Accessed online at <http://www.cde.ca.gov/ds/sd/lc/fileseisch.asp> (October 2009).

²⁴ As cited on kidsdata.org, California Department of Education, English Learners by Grade and Language Data Files. Accessed online at <http://www.cde.ca.gov/ds/sd/lc/fileseisch.asp> (October 2009).

APPENDIX B: DECA SCORES BY SCHOOL

DECA scores can also be considered according to the site children were assessed. The findings for schools that participated are as follows.²⁵

Chart 41: Elk Creek DECA scores 2011

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)	100.0% (2)	2
Typical	6.0% (3)	100.0% (5)	60.0% (3)	80.0% (4)	60% (3)	5
Strength	100.0% (2)	0.0% (0)	100.0% (2)	50.0% (1)	0.0% (0)	2

Chart 42: Capay DECA scores 2011

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	0.0% (0)	0.0% (0)	75% (3)	0.0% (0)	50% (2)	4
Typical	88.9% (8)	33.3 (3)	55.6 (5)	77.8% (7)	66.7% (6)	9
Strength	28.6% (2)	100% (7)	28.6% (2)	42.9% (3)	28.6% (2)	7

Chart 43: Princeton DECA scores 2011

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	20% (1)	20% (1)	80% (4)	20% (1)	60% (3)	2
Typical	90.9% (10)	45.5% (5)	45.5% (5)	63.6% (7)	72.7% (8)	11
Strength	16.7% (1)	100% (6)	50.0% (3)	66.7% (4)	16.7% (1)	6

Chart 44: Hamilton City DECA scores

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	29% (9)	19.4% (6)	54.8% (17)	29% (9)	51.6% (16)	31
Typical	66.7% (32)	58.3% (28)	60.4% (29)	68.8% (33)	54.2% (26)	48
Strength	43.5% (10)	73.9% (17)	21.7% (5)	39.1% (9)	39.1% (9)	23

Chart 45: Lake DECA scores

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	0% (0)	11.1% (1)	11.1% (1)	0% (0)	100% (9)	9
Typical	83.3% (10)	75% (9)	83.3% (10)	83.3% (10)	25% (3)	12
Strength	75% (3)	75% (3)	50% (2)	75% (3)	25% (1)	4

²⁵ Note that children may have been assessed at one school, but were enrolled at another. Therefore, these findings are more indicative of the children of Glenn County than of the schools in particular.

Chart 46: Mill Street

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	31.6% (24)	10.5% (8)	61.8% (47)	35.5 (27)	60.5% (46)	76
Typical	59.6% (84)	59.6% (84)	58.2% (82)	60.3% (85)	56.7% (80)	141
Strength	54.3% (44)	74.1% (60)	28.4% (23)	49.4% (40)	32.1% (26)	81

Chart 47: Murdock DECA scores

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	23.3% (10)	20.9% (9)	46.5% (20)	34.9% (15)	62.8% (27)	43
Typical	67.5% (52)	58.4% (45)	61% (47)	61% (47)	57.1% (44)	77
Strength	51.2% (21)	70.7% (29)	39% (16)	51.2% (21)	26.8% (11)	41

Chart 48: Plaza DECA scores

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	33.3% (3)	0.0% (0)	55.6% (5)	33.3% (5)	44.4% (4)	9
Typical	50.0% (7)	85.7% (12)	50% (7)	64.3% (7)	71.4% (10)	14
Strength	71.4% (5)	42.9% (3)	42.9% (3)	42.9% (3)	14.3% (1)	7

Chart 49: William Finch Charter School DECA scores

	Initiative (IN)	Self-Control (SC)	Attachment (AT)	Total Protective Factors (TPF)	Behavioral Concerns (BC)	Response Count
Concern	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)	100.0% (4)	4
Typical	72.7% (16)	45.5% (10)	54.5% (12)	59.1% (13)	81.8% (18)	22
Strength	46.2% (6)	92.3% (12)	76.9% (10)	69.2% (9)	0.0% (0)	13

APPENDIX C: PUBLIC SCHOOL ENROLLMENT BY ETHNICITY

The charts that follow provide information on public school enrollment by ethnicity in Orland and Willows.

Chart 50: Capay Joint Union Elementary School Enrollment, by Race/Ethnicity 2005 - 11

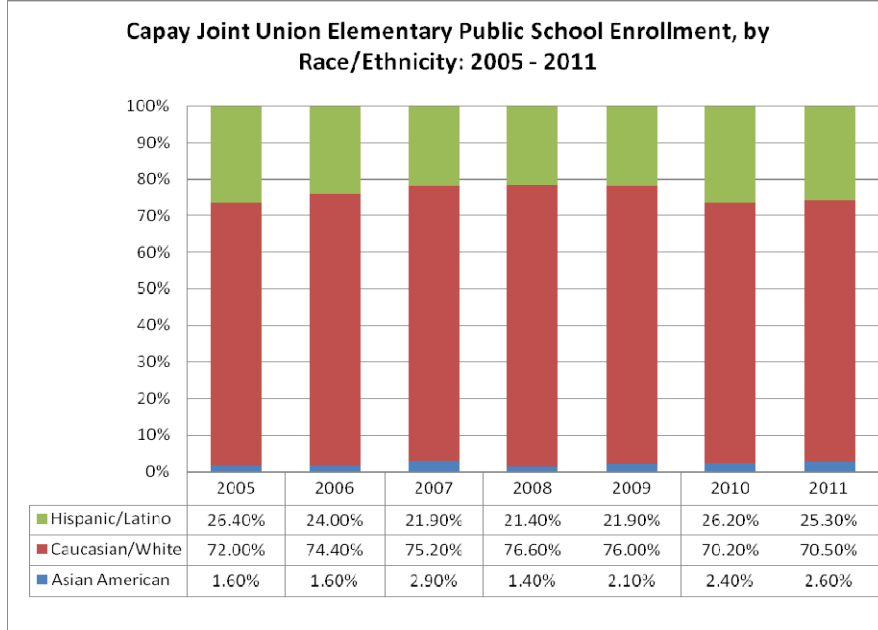


Chart 51: Lake Elementary School Enrollment, by Race/Ethnicity 2005 - 11

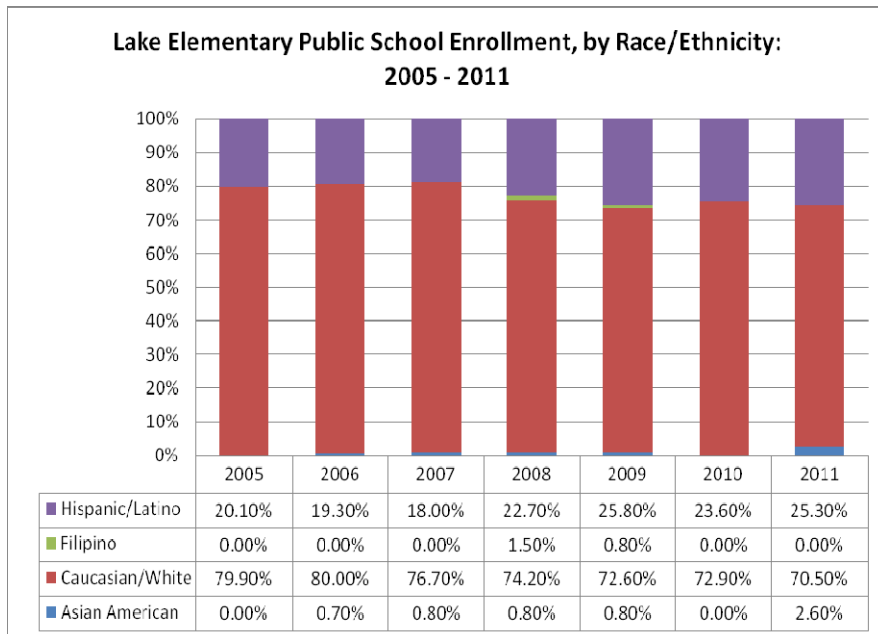


Chart 52: Orland Joint Unified Elementary School Enrollment, by Race/Ethnicity 2005 – 11

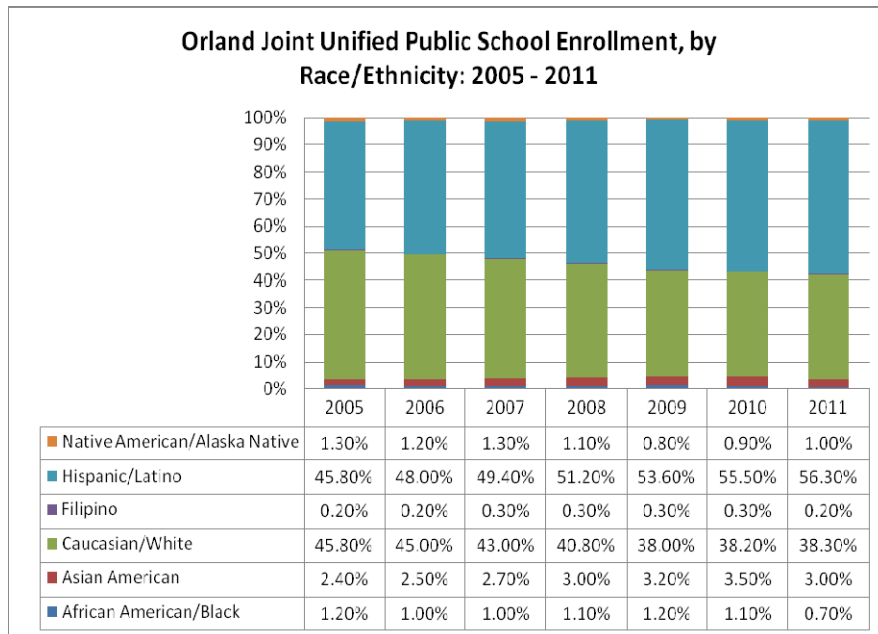


Chart 53: Plaza Elementary School Enrollment, by Race/Ethnicity 2005 – 11

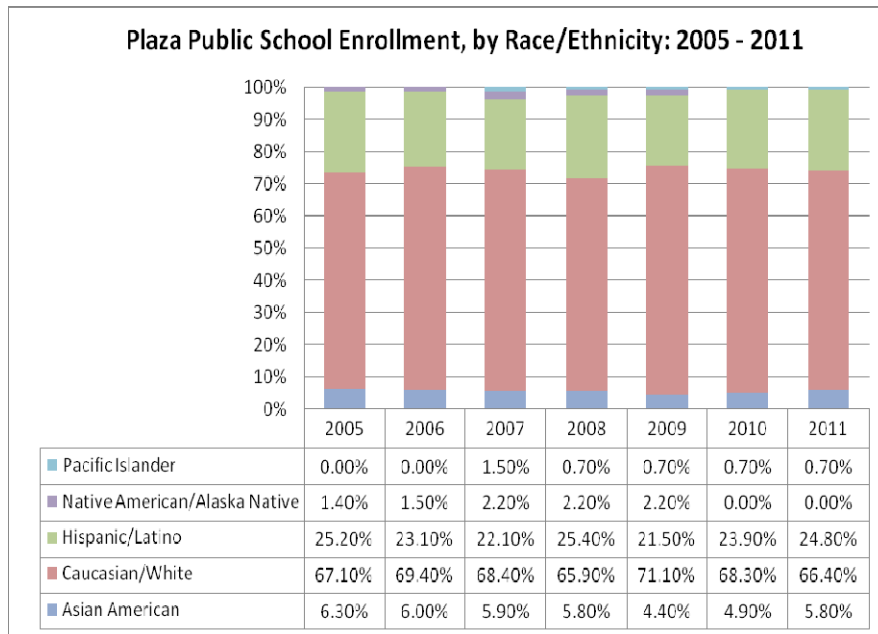
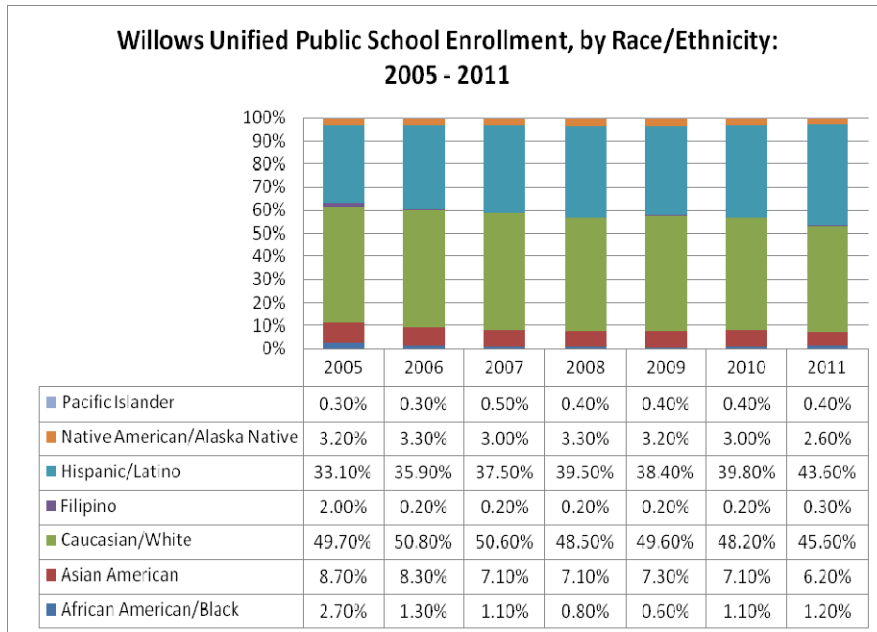


Chart 54: Willows Unified Public School Enrollment, by Race/Ethnicity 2005 - 11





For more information about First 5 Glenn County, please
visit our website at <http://www.first5glenncounty.com>, call (530) 934-6885, or visit us at
1035 West Wood Street, Willows, CA 95988

