

# ATTACHMENT A (relevant to Recommendation #1)

## Vision Statement

Adopted by Framework Table on 9/16

LA County delivers an **equitable, community-driven, and holistic** prevention and promotion model to enable a safer, stronger, thriving, and more connected community.

- **Equitable:** addressing root causes that lead to inequitable life outcomes
- **Community-driven:** sharing decision-making and co-creating solutions in partnership with community members, with particular emphasis on lived expertise and marginalized communities
- **Holistic:** breaking down silos to provide a continuum of support and ensure everyone thrives across every stage of life

# ATTACHMENT B (relevant to Recommendation #2)

## LA County's Model for Prevention and Promotion

### Social Conditions

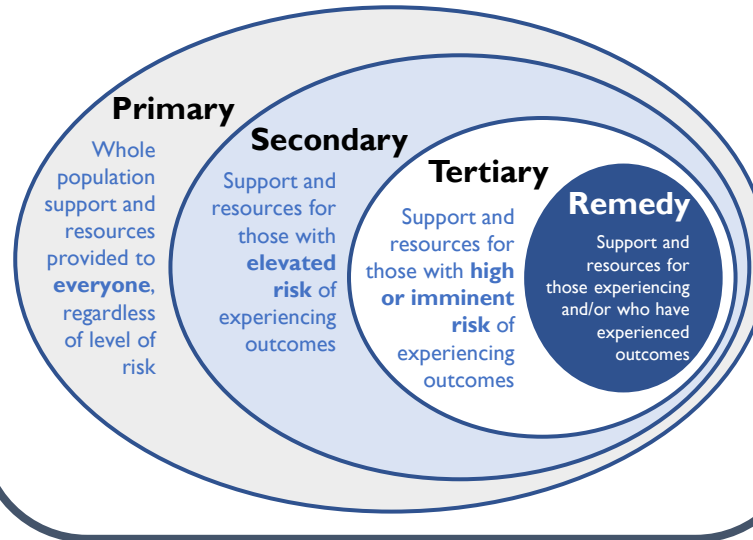
The intersecting structures and systems that shape our lives and influence our likelihood of experiencing positive and negative outcomes (i.e., level of risk).

These conditions are often created by and/or reinforced through government policy, resulting in both positive resources (e.g., public health, parks) and negative forms of harm and control (e.g., racism, ableism, concentrated poverty, environmental hazards, etc.).

### Equitable Decision-Making & Community Agency

Policies and practices to ensure community voices (especially those with lived expertise) inform and shape how we deliver support and resources, especially to historically marginalized communities.

### Levels of Risk & Prioritized Support



### Prevention

Support and resources to stop the occurrence and/or worsening of negative population outcomes, harm, and suffering.

### Promotion

Support and resources to strengthen the occurrence of positive population outcomes, well-being, and thriving.

*Prevention and promotion can decrease individuals' level of risk, as can addressing and mitigating harmful social conditions through equitable decision-making and community agency. Together, this can cultivate healing, restoration, and justice.*

# Adopted Guiding Principles

- Reduce racial disparities and increase equitable life outcomes for all races/ethnicities as well as close disparities in public investments to shape those outcomes
- Authentically engage residents, organizations, and other community stakeholders early to inform and determine interventions (e.g. policy and program) and investments that emphasize long-term prevention and promotion
- Develop and implement strategies that identify, prioritize, and effectively support the most disadvantaged geographies and populations
- Collaborate to align funding investments and promote systems change to reduce barriers to achieve effective family-centered services
- Use data and community-defined evidence to effectively assess and communicate equity needs and support timely assessment of progress
- Work collaboratively and intentionally across departments as well as across leadership levels and decision-makers
- Seek to provide early and tailored support to improve long-term outcomes, both intergenerationally (i.e. parent to child) and multi-generationally (i.e. grandparent to grandchildren)
- Act urgently, boldly and innovatively to achieve tangible results
- Disaggregate and streamline data collection as well as conduct analysis for different racial/ethnic and other demographic subgroup categories
- Be transparent about our goals and our impact

# ATTACHMENT D (relevant to Recommendations #4abc)

## Identified Coordinating Functions for a Community-Based Prevention & Promotion Delivery System

Degree of centralization in the governance model will be determined by **which entities holds accountability for key functions**

Function Group #1	Coordination, Collaboration & Communication	<ul style="list-style-type: none"> <li>Spearheading coordination efforts that span multiple agencies, reducing role confusion and duplication, braiding funding opportunities</li> </ul>
	Policy and Agenda Setting	<ul style="list-style-type: none"> <li>Advocacy and lobbying for key initiatives, including additional funding, and conducting federal, state, and local policy advocacy</li> </ul>
	Programming Decisions	<ul style="list-style-type: none"> <li>Owning program decisions in the relevant areas of opportunity (e.g., which programs to start, how to manage activities of existing programs)</li> </ul>
Function Group #2	Budgeting	<ul style="list-style-type: none"> <li>Operating a strategic approach to identify and maximize funding sources that will support the activities articulated in the vision</li> </ul>
	Funding Acquisition & Management	<ul style="list-style-type: none"> <li>Applying for grants, tracking outcomes, reporting to grantmaking agencies, and coordinating braided and bended funding</li> </ul>
	Contracting	<ul style="list-style-type: none"> <li>Leading contract efforts with partner organizations (e.g., NGOs and service providers) in addition to contracts with vendors and other parties</li> </ul>
	Legal	<ul style="list-style-type: none"> <li>Advising all functions on legal and compliance matters (e.g., funding restrictions, data sharing agreements)</li> </ul>
Function Group #3	Staffing for Coordination	<ul style="list-style-type: none"> <li>Overseeing staffing allocation and HR support for prevention services staff who oversee coordination efforts</li> </ul>
	Service Delivery	<ul style="list-style-type: none"> <li>Providing direct services to the community through on-the-ground case workers and community-based service providers</li> </ul>
Function Group #4	Co-Creating Solutions with Community	<ul style="list-style-type: none"> <li>Providing equitable support and compensation for community members who are co-creating policy and programming</li> </ul>
	Partnering with Community Organizations	<ul style="list-style-type: none"> <li>Establishing and managing partnerships with external community-based service providers who already provide holistic prevention services</li> </ul>
Function Group #5	Data Tracking / Metrics	<ul style="list-style-type: none"> <li>Identifying and monitoring key metrics that track progress made towards the successful outcomes for both prevention and promotion services</li> </ul>
	IT Systems	<ul style="list-style-type: none"> <li>Standing up new IT systems and managing existing systems that share data across multiple agencies</li> </ul>

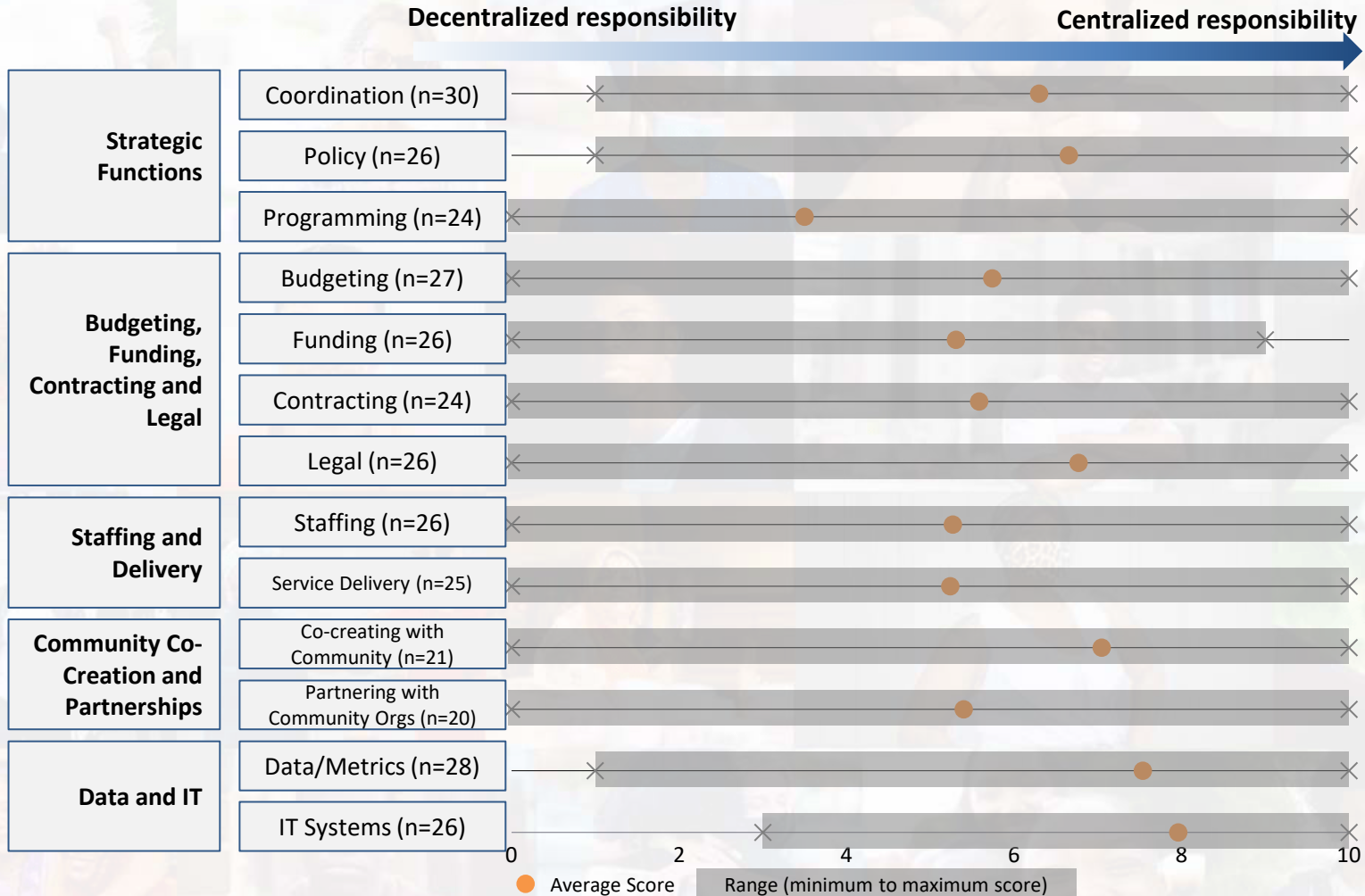
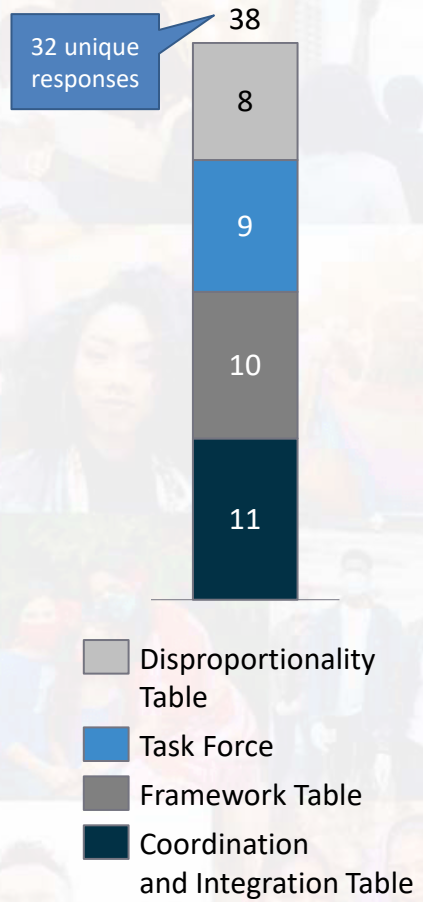
## Task Force/table member survey on coordinating functions

On average, survey respondents generally prefer at least some centralization across all functions, though there is a wide range of responses

Participant breakdown (n=32)<sup>1</sup>

To what degree should accountability for the function be centrally organized across agencies?

Key Insights



- ▶ Average responses (orange dots) are >5 across all functions except Programming Decisions, which suggests that there is broad interest in some centralization
- ▶ Most respondents favor centralized Data Tracking and IT systems
- ▶ There are wide response ranges which indicate a diversity of opinions for most of these functions

1. The total participant breakdown is greater than the number of respondents due to cross-membership on multiple tables; numeric responses from one outlier were excluded due to data quality issues; does not include 2 respondents who started, but did not fill out the survey beyond the first page



# Survey responses highlight a strong desire to align efforts, while leveraging the expertise of those closest to the work and ensuring a clear leadership role for the community

## Aligning efforts and reducing duplication

**By coordinating efforts, the County can better leverage its size for advocacy, and deliver more efficient, equitable services.**

“ All departments are in a unique position to and have their own expertise... but aligning on issues of shared interest will allow for stronger voice to push at every necessary lever.”

*Disproportionality Table Member*

“ ... it is clear there are a lot of overlapping programs across Departments. In light of this, improved coordination is critical to ensure that the services are equitably distributed and available.”

*Coordination and Integration Table Member*

## Building on the expertise of those closest to the work

**The people closest to the community and to service delivery are best positioned to make programming and other decisions.**

“ A centralized entity will not be close to the ground to know how to coordinate a communitybased service delivery. These decisions should be made by the agencies themselves who have a better understanding of what is happening on the ground and the needs of the community.”

*Framework Table Member*

## Promoting a clear leadership role for the community

**Given current and historic challenges with co-creating community solutions, this piece needs to be prioritized and clarified.**

“ By and large county staff are not very good at engaging community and not good at all in cecreating solutions (because many professionals have difficulty trusting that residents really do know what their problems are and how to solve them).”

*Coordination and Integration Table Member*

“ The process may be more time consuming, but I believe it will be much more effective if we include community members in the designing of services that will be provided to community members... rather than multiple meetings by individual departments where community members are asked similar questions and the rollout of programs is delayed.”

*Coordination and Integration Table Member*

Some current efforts in LA County are working well and should be preserved; however, existing issues and barriers will need to be addressed regardless of any structural change to ensure collaboration

There is no need to “reinvent the wheel”

**There is a desire to utilize and strengthen successful existing initiatives and coordinating bodies.**

“ We already have CEO LAIR - I think we can strengthen/build capacity for them to coordinate across systems.”

*Coordination and Integration Table Member*

“ To what extent are some departments doing this 'really well' already, and other departments not doing this at all. What pockets of engagement might be mandated already (e.g., MHSA).”

*Framework Table Member*

Regulatory and administrative barriers will need to be addressed

**Bureaucracy, staff capacity, as well as regulatory, contracting and legal requirements, pose significant barriers.**

“ Departments know what is best for their clients and capacities. Having to seek approval can create unnecessary delays that in turn, further burden the community.”

*Disproportionality Table Member*

“ ...a detailed fiscal analysis of funding streams looking at the unique interplay of LA, California, and the Feds is required because while "braided and blended funding" is easy to say, it is much more difficult to do.”

*Framework Table Member*

“ To facilitate the coordination that should go on across agencies we need to think about how we build time and funding into program staffing and job descriptions.”

*Framework Table Member*

Current cultural barriers and power dynamics also need to be addressed

**Any structural change that does not also address cultural barriers between departments and the CEO/Board is likely to fail.**

“ ... we've seen in multiple examples when one partner is made the lead, others check out of the conversation... I think we want to create an environment where [departments] want to come to the table and share in the responsibility of these things.”

*Task Force Member*

“ If CEO doesn't fund and organize around Board mandates then Department heads can either "hide" and do their own thing or get stuck in the middle and continue status quo.”

*Framework Table Member*

**DRAFT**  
**RECOMMENDATIONS**  
**TO ADDRESS**  
**OPERATIONAL**  
**BARRIERS**



relevant to Recommendations 4abc, 5 but also several others touching about coordination

**Structural barriers and status quo practices preventing a collaborative culture where there is shared accountability and coordination can be most effective**

(e.g., bureaucratic hurdles, lack of dedicated staff time and funding for coordination, ad hoc efforts not supported at scale)

- Framework Table and next phase of Task Force addressing this through governance discussion
- Recommend identification and analysis of coordinating groups/bodies that can strengthen collaboration and shared responsibility across departments
  - Example:  
Strengthening System of Care (SOC) to address this for children/families; SOC requires an Interagency Leadership Team of department leadership

## relevant to Recommendations 4a, 4b, 9

**Statutory requirements and regulatory limitations hampering multidepartmental coordination efforts, including braided/blended funding**

- Recommend departments identify federal/state/local policy changes needed (e.g., departments had flexibility under COVID/state of emergency to expedite many processes and get supports out to communities and organizations quickly) to permanently improve our business practices. Develop policy advocacy agenda to push for these changes at federal/state levels, as needed.
- Recommend piloting braided/blending funding across departments to support:
  - 2 Poverty Alleviation Initiative strategies: 1) supporting community-led initiatives and participatory budgeting research; and 2) piloting emergency fund program for families in need
  - High fidelity wraparound for all children with open DCFS cases (maximizing Medi-Cal funding for services and blending with IV-E and other child welfare funds as needed)
  - Expand Prevention & Aftercare Networks and other trusted community networks to provide upstream promotion/prevention services to children and families
- Recommend departments identify strategies/initiatives/programs to leverage each others' funds and/or staff to jointly serve clients and implement shared priorities (e.g., Health Neighborhoods)
- Recommend departments come together to review and discuss their interpretations of certain rules, regulations, and/or processes (e.g., funding regulations, contracting processes, etc.) to ensure there is consistency across departments, particularly in ways we can support community and organizations more flexibly

## relevant to Recommendation 19

Lack of capacity across systems in **data sharing and integration** to better serve clients

- Recommend CIO bring together County Counsel, department leads, and others to build data sharing/integration strategic plan for specific areas – e.g., SOC for children/families – as well as processes like universal informed consent for clients
  - Identify specific use cases for data and information sharing, as well as examples of missed opportunities, within the current state, where data sharing/integration could benefit our clients
  - Strengthen use of CIO's InfoHub to integrate client-level data across systems for shared metrics & outcomes tracking
  - Develop policy advocacy agenda to push for changes in data/information regulations at the federal/state levels, as needed
  - Identify data and outcomes needed to enable cost-benefit analyses of for the County for specific programs and investments

## relevant to Recommendations 11, 12

**User navigation barriers**  
hindering folks from accessing  
the array services available to  
them

- Recommend CIO and CEO leverage their work on the countywide Information, Referral, and Connection Platform and other similar efforts to develop next steps to streamline and address navigation and access barriers for the County's service array – especially so that community “helpers” can use them to support their clients
  - Ensure we understand user journey across various communities bc their needs are different and individualized
  - Ensure we build the capacity of organizations (County depts as well as community based organizations) to utilize resource navigation systems and tools
- Implement/support existing initiatives and strategies to improve resource navigation and access:
  - PAI/DPSS strategy to develop a person-centered service delivery system
  - DCFS State Block Grant pilot for cross-systems navigator



# relevant to Recommendations 13,14,15

**Lack of services tailored to client needs**  
(e.g., language access barriers, culturally appropriate and community-specific services)

**Community distrust/hesitancy engaging with government systems**  
(e.g., due to historical and ongoing marginalization and negative lived experiences)

**Ad hoc approach to community partnerships, which hinders meaningful relationships, shared decision making, and co-creation of effective solutions**

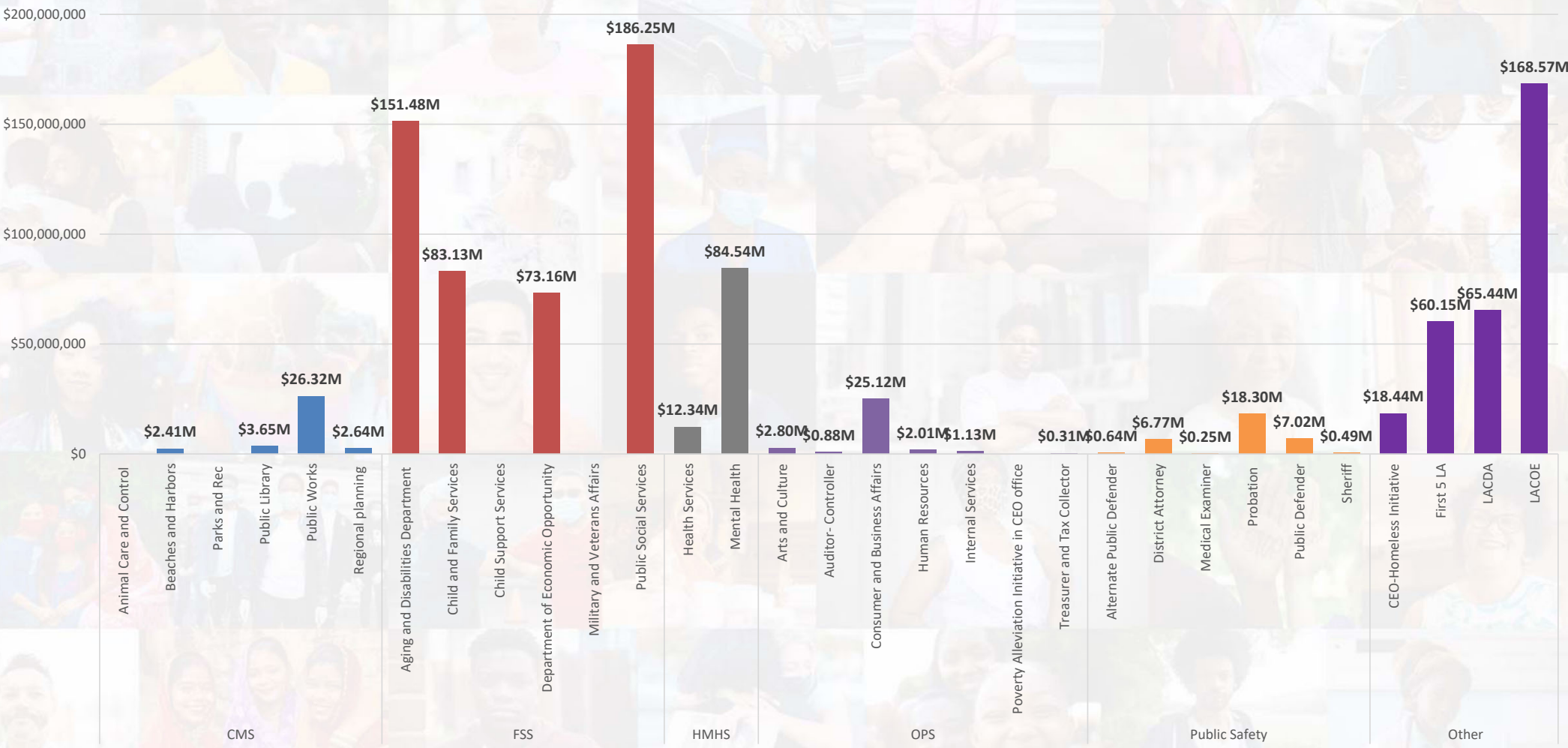
## Recommend developing:

- Countywide approach with dedicated funding to incorporate and compensate Community Members with Lived Expertise involved in policy and program development
- Countywide approach with dedicated staffing for language access, including translation, interpretation, and culturally-appropriate communication and outreach
- Countywide approach to partnering with community-based service providers; invest in supporting initiatives/strategies like Prevention & Aftercare Networks; Thriving Families, Safer Children; and Poverty Alleviation Initiative's strategy to fund community-led initiatives
  - Consider investing in ways to build capacity of community-based providers

# ATTACHMENT G (relevant to Recommendations #6,7,8,9)

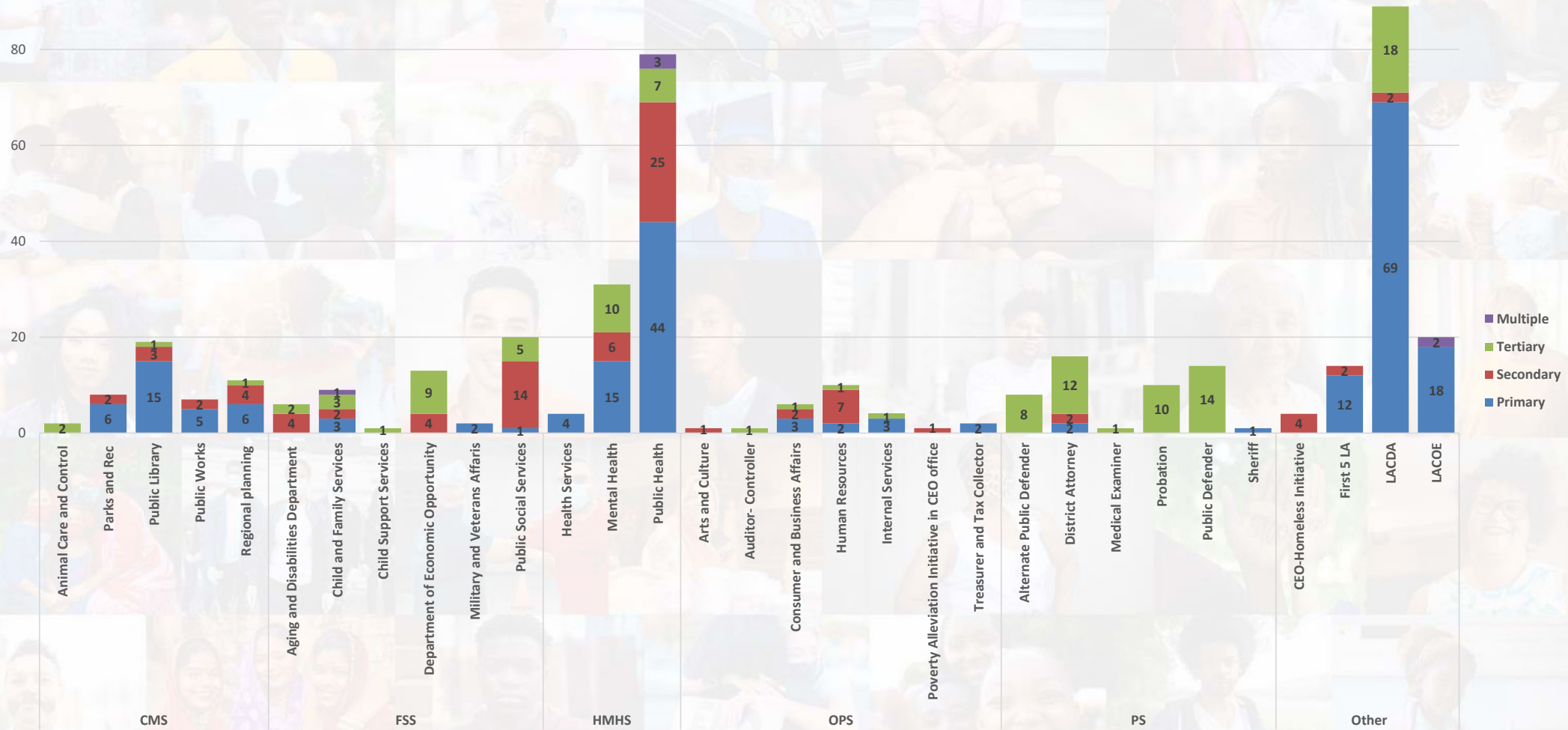
## Funding Streams Analysis Summary Charts

**SELF-REPORTED PREVENTION PROGRAM SPENDING BY AGENCY (FY2022-23)**  
 DPH (\$1.36B) comprises 57% of reported County prevention funding and was removed for readability

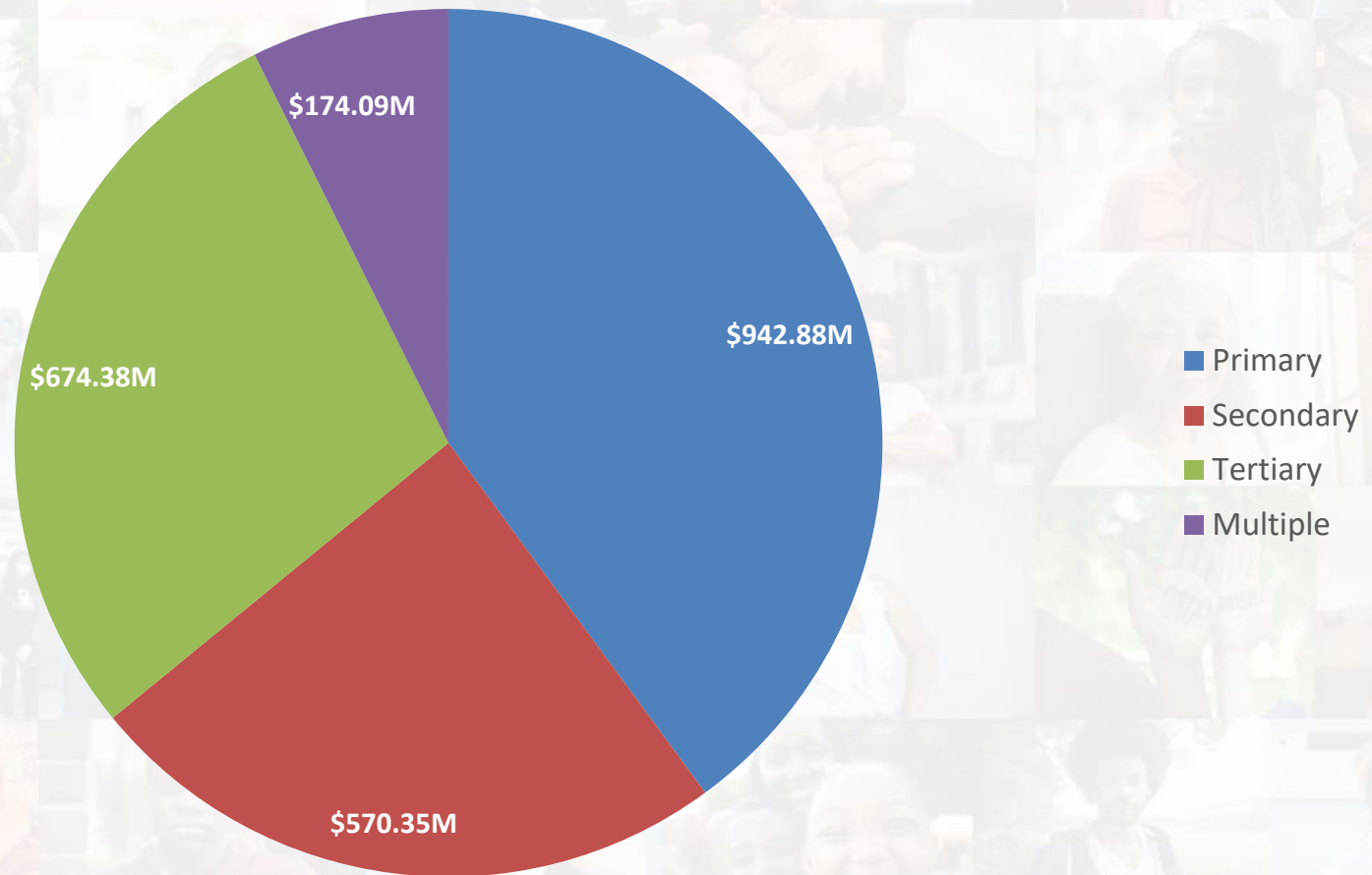


## SELF-REPORTED NUMBER OF PREVENTION PROGRAMS BY AGENCY (October 2022)

Prevention levels were self-identified based off of draft definitions from November 2021



**BUDGETED SPENDING BY PREVENTION LEVEL Preliminary; Prevention levels were self-identified  
FY 2022-23 Final Changes Budget**





# ATTACHMENT H (relevant to Recommendations #10,11,13,14,15 )

## TASK FORCE COMMUNITY ENGAGEMENT PROCESS ACTIVITIES (PLANNED AND ONGOING)

### Participatory Decision Making and Power Sharing

- Community Member Positions on Subject Area Tables (with stipends for participation and power sharing practices)
- Community-Based Organizations on Subject Area Tables

### Gathering Community-Defined Evidence with Priority Populations

- Focus Groups and User Journey Mapping with Priority Populations
- Community Member Panels and Guest Speakers
- Personal Stories, and Documented Testimonial

### Inclusion, Access, and Communication

- Transparency, Digital Access, and Language Access
- Targeted Outreach and Communications

### Community Consultation and Alignment

- Task Force Community Survey
- Sessions hosted by Task Force and partnered community-based organizations during key review periods

# GATHERING COMMUNITY-DEFINED EVIDENCE

**User Journey Mapping** – the experience that residents have seeking, accessing, and receiving services – is a crucial component to inform the development of a comprehensive prevention & promotion services delivery system.

To assist this process, we have identified the following 10 priority populations, for which we will conduct **focus groups each** comprising community members who would receive stipends for sharing their perspective and experiences:

**Foster/Transition Aged Youth (TAY)**

**Parents/guardians impacted by child welfare system**

**Older adults**

**People with disabilities**

**People who have accessed physical health services**

**People who have accessed mental health services (including substance abuse services)**

**Unhoused individuals / have experienced homelessness**

**Low-income individuals (general group)**

**Justice impacted individuals**

**Limited English proficiency communities**

# ATTACHMENT I (relevant to Recommendations #17,18)

Prevention and Promotion Metrics Summary Document

## North Star Outcomes

*Hold ctrl and mouse click to follow embedded links*

North Star Outcome	Age Span
<a href="#">Infant Mortality</a>	0-1
<a href="#">Socioemotional/cognitive readiness as children approach school age</a>	0-5
<a href="#">Age-Appropriate Socioemotional/Cognitive Proficiency for grades 1-6</a>	6-11
<a href="#">Child Maltreatment (within Family &amp; Systems)</a>	6-11
<a href="#">Good Physical &amp; Behavioral Health/Wellbeing</a>	12-20
<a href="#">Good Financial Wellbeing</a>	21-35
<a href="#">Adult First-Time Felony Convictions</a>	21-35
<a href="#">Attainment of a Postsecondary Credential w/ Significant Labor Market Value</a>	21-35
<a href="#">Stable Affordable Housing</a>	21-35
<a href="#">Stable Full-Time Employment among Individual Adults with incomes at or above 250% FPL</a>	21-65+
<a href="#">Family Income at 250% FPL (pegged to a family of 4)</a>	21-65+
<a href="#">Age in Place with Safety, Dignity &amp; Independence</a>	65+

## Contributing Outcomes

Contributing Outcome	Age Span
<a href="#">Preterm Birth</a>	0-5
<a href="#">Low Birthweight</a>	0-5
<a href="#">Early childhood disability</a>	0-5
<a href="#">Asthma</a>	0-5
<a href="#">Diabetes</a>	0-5
<a href="#">Elevated Blood Lead Levels</a>	0-5
<a href="#">Early Childhood trauma</a>	0-5
<a href="#">Toxic Stress</a>	0/5
<a href="#">Healthy Diet</a>	0-5
<a href="#">Attends Pre-K</a>	0-5
<a href="#">Secure/Insecure Attachment</a>	0-5
<a href="#">Externalizing or Internalizing Behavior</a>	0-5
<a href="#">General Health Status</a>	6-11

Prevention and Promotion Metrics Summary Document

Contributing Outcome	Age Span
<a href="#"><u>Asthma</u></a>	6-11
<a href="#"><u>Diabetes</u></a>	6-11
<a href="#"><u>Disability</u></a>	6-11
<a href="#"><u>Elevated Blood Lead Levels</u></a>	6-11
<a href="#"><u>Overweight or Obese</u></a>	6-11
<a href="#"><u>Pubertal Timing (early puberty onset)</u></a>	6-11
<a href="#"><u>Chronic Stress</u></a>	6-11
<a href="#"><u>Childhood trauma</u></a>	6-11
<a href="#"><u>School Engagement</u></a>	6-11
<a href="#"><u>Externalizing Behavior</u></a>	6-11
<a href="#"><u>Self-Regulation</u></a>	6-11
<a href="#"><u>Depressed/Internalizing Behavior</u></a>	6-11
<a href="#"><u>Social Isolation</u></a>	6-11
<a href="#"><u>School Suspensions</u></a>	6-11
<a href="#"><u>School Absences</u></a>	6-11
<a href="#"><u>General Health Status</u></a>	12-20
<a href="#"><u>Allostatic Load</u></a>	12-20
<a href="#"><u>Chronic Stress</u></a>	12-20
<a href="#"><u>Substance use/abuse</u></a>	12-20
<a href="#"><u>Proficient in 8th Grade Math and ELA Tests</u></a>	12-20
<a href="#"><u>Middle School Grades</u></a>	12-20
<a href="#"><u>Passing courses in ninth grade</u></a>	12-20
<a href="#"><u>Participation in Arts Education</u></a>	12-20
<a href="#"><u>Grade Retention</u></a>	12-20
<a href="#"><u>High School GPA</u></a>	12-20
<a href="#"><u>College Readiness (course-taking)</u></a>	12-20
<a href="#"><u>A-G Completion</u></a>	12-20
<a href="#"><u>High School Graduation/Dropout</u></a>	12-20
<a href="#"><u>Postsecondary Enrollment</u></a>	12-20
<a href="#"><u>Enrollment in a For-Profit College</u></a>	12-20
<a href="#"><u>Enrollment in High-Mobility College</u></a>	12-20
<a href="#"><u>Youth Disconnection</u></a>	12-20
<a href="#"><u>Gender Identity &amp; Expression</u></a>	12-20



Prevention and Promotion Metrics Summary Document

Contributing Outcome	Age Span
<u>Sexual Orientation</u>	12-20
<u>Social Isolation</u>	12-20
<u>Socioemotional Development</u>	12-20
<u>School Suspensions</u>	12-20
<u>Expulsions</u>	12-20
<u>School Absences</u>	12-20
<u>Juvenile Delinquency</u>	12-20
<u>Juvenile Felony Arrest</u>	12-20
<u>Juvenile Misdemeanor Arrest</u>	12-20
<u>Incarceration in Secure Juvenile Facility</u>	12-20
<u>Early childbearing</u>	12-20
<u>General Health Status</u>	21-35
<u>Behavioral Health</u>	21-35
<u>Allostatic Load</u>	21-35
<u>High BMI</u>	21-35
<u>Postsecondary Completion/Dropout</u>	21-35
<u>Full-Time Employment</u>	21-35
<u>Stable Employment</u>	21-35
<u>Employment in High Demand Industry or Sector</u>	21-35
<u>Has childcare arrangement</u>	21-35
<u>Child support debt (TANF)</u>	21-35
<u>Work Disability</u>	21-35
<u>Inability to Pay Bail</u>	21-35
<u>Incarceration</u>	21-35
<u>Adequate Prenatal Care</u>	21-35
<u>Physical Limitations</u>	35-65+
<u>Income</u>	65+
<u>Social Isolation</u>	65+

## Ecological-Institutional Factors

<b>Contributing Outcome</b>	<b>Age Span</b>	<b>Pg #</b>
Mother smoking during pregnancy	Pregnancy/Infancy	49
Obesity During Pregnancy	Pregnancy/Infancy	49
Mother drinking during pregnancy	Pregnancy/Infancy	49
Maternal diabetes, hypertension, asthma or depression	Pregnancy/Infancy	50
Timing of prenatal care	Pregnancy/Infancy	50
Adequacy of perinatal care	Pregnancy/Infancy	50
Domestic Violence/IPV	Pregnancy/Infancy	52
Physician-Patient Racial Concordance	Pregnancy/Infancy	53
Cesarean Section Delivery	Pregnancy/Infancy	53
Inter-pregnancy interval	Pregnancy/Infancy	53
Maternal chronic worry about discrimination	Pregnancy/Infancy	54
Neighborhood Concentrated Disadvantage	0-65+	54
Neighborhood Concentrated Imprisonment	0-65+	55
Neighborhood Mobility Score	0-65+	56
Formerly Redlined Neighborhood	0-65+	56
Environmental pollutants (e.g. lead top soil, air pollution)	0-65+	56
Community Violence	0-65+	57
Affordable Housing availability	0-65+	58
Neighborhood Physical Disorder	0-65+	59
Community Cohesion/Collective Efficacy	0-65+	60
Aggressive Policing	0-65+	61
Police Violence	12-20	62
Racial Discrimination	0-65+	62
ACEs	0-20	63
Family Income/Poverty	0-20	63
Persistent Child Poverty	0-20	64
Family Income Volatility	0-20	64
Parental Wealth	0-20	65
Health insurance Coverage	0-20	65
Parents' Education	0-20	65
Family Structure/Living Arrangements	0-20	66

Prevention and Promotion Metrics Summary Document

<b>Contributing Outcome</b>	<b>Age Span</b>	<b>Pg #</b>
Family Instability	0-20	66
Maternal Age at Birth	0-20	67
Maternal Depression	0-20	67
Child Maltreatment	0-20	67
Parent Cognitive Stimulation & Emotional Supportiveness (HOME)	0-20	68
Language spoken at home	0-20	69
Extended family members	0-5	69
Family Learning Activities	0-20	69
Access to prenatal and perinatal care	0-20	70
Overcrowded housing	0-20	71
Housing stability/Residential Mobility	0-20	71
Household debt	0-20	72
Food Insecurity	0-20	72
Parental substance use disorder	0-20	72
Parental Trauma History	0-20	72
Availability of Preschool Centers	0-5	73
Availability of Quality Childcare	0-5	73
Foster Care Placement	0-20	74
Parent Expectations	6-11	74
Parental Incarceration	6-11	75
Death of a Family Member	6-11	75
School Mobility	6-11	76
Out-of-School Care/Activities	6-20	76
Usual Source of Health Care/Medical Home	0-20	76
School Funding	0-20	77
Class size	0-20	77
School poverty levels	0-20	78
School Segregation	0-20	78
Teacher Quality	0-20	78
Teacher-Student Racial Match	0-20	79
Mentor/Developmental Relationships (Caring Adult)	0-35	80
School Climate	0-20	81
Ethnic Studies Courses	0-20	82

Prevention and Promotion Metrics Summary Document

<b>Contributing Outcome</b>	<b>Age Span</b>	<b>Pg #</b>
School Disciplinary Practices	0-20	82
Bullying Victimization	12-20	82
School Tracking	12-20	83
School and neighborhood peer groups	6-20	83
Summer Jobs Availability	12-20	85
Job Networks/Social Capital	21-35	85
Access to Managerial Jobs	21-35	86
Union Job	21-35	87
Precarious employment/Gig Economy	21-35	87
Affordable Senior Housing	36-65+	88
Family Social Support	36-65+	88
Housing Costs	65+	89
Children Moving out of the Home	65+	89
Home Equity	65+	89
Relatives in close proximity	65+	89
Local Unemployment Rates	65+	90
Home Disrepair	65+	90
Age-Friendly Communities	65+	90

## North Star Outcomes

North Star Outcome	Measure	Other North Star Outcomes Impacted	Predictor/Causal Studies
<b>Infant Mortality</b>	<p>Number of infant deaths for every 1,000 live births</p> <p>Age Span: 0-5</p>		
<b>Socioemotional/cognitive readiness as children approach school age</b>	<p>Desired Results Developmental Profile-Kindergarten© (DRDP-K)</p> <p>Age Span: 0-5</p>	<ul style="list-style-type: none"> <li>• Age-appropriate Cognitive and Socioemotional Proficiency for Grades 1-6</li> <li>• Completion of a Postsecondary Credential w/ Significant Labor Market Value</li> </ul>	<ul style="list-style-type: none"> <li>• “School Readiness and Later Achievement.” <i>Developmental Psychology</i> 43(6): 1428–46;</li> <li>• Rabiner, D. L., Godwin, J., &amp; Dodge, K. A. (2016). Predicting Academic Achievement and Attainment: The Contribution of Early Academic Skills, Attention Difficulties, and Social Competence. <i>School Psychology Review</i>, 45(2), 250–267.</li> <li>• Owens, J. (2016). Early Childhood Behavior Problems and the Gender Gap in Educational Attainment in the United States. <i>Sociology of Education</i>, 89(3), 236–258;</li> <li>• Stressing Out the Poor Chronic Physiological Stress and the Income-Achievement Gap: Toward a new biology of social adversity; Duncan, G. and Magnuson, K. (2011)</li> <li>• "Chapter 3: The Nature and Impact of Early Achievement Skills, Attention Skills and</li> </ul>



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			<p>Behavior Problems," in Duncan, G. J., &amp; Murnane, R. J. (Eds.) Whither Opportunity?:</p> <ul style="list-style-type: none"> <li>• Rising Inequality, Schools, and Children’s Life Chances. Russell Sage Foundation;</li> <li>• Long-Term Outcomes of ADHD: Academic Achievement and Performance;</li> <li>• Williams, P. G., Lerner, M. A., Sells, J., Alderman, S. L., Hashikawa, A., Mendelsohn, A., ... &amp; Weiss-Harrison, A. (2019). School readiness. Pediatrics, 144(2).</li> </ul>
<p><b>Age-Appropriate Socioemotional/Cognitive Proficiency for grades 1-6</b></p>	<p><a href="#">Cognitive</a> Met or Exceeded standard for 3rd, 4th, 5th and 6th Grade ELA and Math for California Smarter Balanced Summative Assessments</p> <p><a href="#">Socioemotional Behavior Assessment for Children, Second Edition (BASC-2): Child Version</a></p> <p>Age Span: 6-11</p> <p><u>Measure-Related Studies</u></p> <ul style="list-style-type: none"> <li>• Socioemotional Skills in Education and Beyond:</li> </ul>	<ul style="list-style-type: none"> <li>• Completion of a Postsecondary Credential w/ Significant Labor Market Value</li> </ul>	<ul style="list-style-type: none"> <li>• Middle Childhood Success and Economic Mobility; Magnuson, K., Duncan, G., Lee, K. T., &amp; Metzger, M. (2016). Early School Adjustment and Educational Attainment. American educational research journal, 53(4), 1198–1228.</li> </ul>

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	<p>Recent Evidence and Future Research Avenues;</p> <ul style="list-style-type: none"> <li>The Assessment of Psychological, Emotional, and Social Development Indicators in Middle Childhood in Key Indicators of Child and Youth Well-Being</li> </ul>		
<p><b>Child Maltreatment (within Family &amp; Systems)</b></p>	<p><a href="#">Comprehensive Child Maltreatment Scale (CCMS) for Parents</a></p> <p>Age Span: 0-11</p>	<ul style="list-style-type: none"> <li>Age-appropriate Socioemotional Proficiency for Grades 1-6</li> <li>Good Physical &amp; Behavioral Health/Wellbeing</li> </ul>	<ul style="list-style-type: none"> <li>Is developmental timing of trauma exposure associated with depressive and post-traumatic stress disorder symptoms in adulthood;</li> <li>The Legacy of Early Abuse and Neglect for Social and Academic Competence from Childhood to Adulthood;</li> <li>Comparing early adult outcomes of maltreated and non-maltreated children, A prospective longitudinal investigation;</li> <li>"The Long-Term Health Consequences of Child Physical Abuse, Emotional Abuse, and Neglect: A Systematic Review and Meta-Analysis" (2012) in PLOS Medicine</li> </ul>

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<p><b>Good Physical &amp; Behavioral Health/Wellbeing</b></p>	<p><a href="#">RAND 36-Item Short Form Survey (SF-36)</a></p> <p>Age Span: 12-35</p> <p><u>Measure-Related Studies</u></p> <p><a href="https://www.rand.org/health-care/surveys_tools/mos/12-item-short-form.html">https://www.rand.org/health-care/surveys_tools/mos/12-item-short-form.html</a></p>	<ul style="list-style-type: none"> <li>• Completion of a Postsecondary Credential w/ Significant Labor Market Value</li> </ul>	<ul style="list-style-type: none"> <li>• Long-term effects of mental disorders on educational attainment in the National Comorbidity Survey ten-year follow-up</li> </ul>
<p><b>Good Financial Wellbeing</b></p>	<p><a href="#">Household income at 50th percentile or higher AND No household debt in collections</a></p> <p>Age Span: 21-35</p>		
<p><b>Adult First-Time Felony Convictions</b></p>	<p><a href="#">Receipt of an adult felony conviction</a></p> <p>Age Span: 21-35</p>	<ul style="list-style-type: none"> <li>• Stable Full-Time Employment at 250% FPL for individuals</li> <li>• Family Income at 250% FPL (pegged to a family of 4)</li> </ul>	<ul style="list-style-type: none"> <li>• Apel, R., and Sweeten, G. (2010). The impact of incarceration on employment during the transition to adulthood. <i>Social Problems</i>, 57(3), 448-479;</li> <li>• Mueller-Smith, M., &amp; Schnepel, K. T. (2020). Diversion in the Criminal Justice System. <i>The Review of Economic Studies</i>.</li> <li>• Craigie, T., Grawert, A., Kimble, C. and Stiglitz, J. E. (2020). Conviction, Imprisonment and Lost Earnings: How Involvement with the Criminal Justice System Deepens Inequality. Brennan Center for Justice. <a href="https://www.brennancenter.org">https://www.brennancenter.org</a>.</li> </ul>

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			<p>org/our-work/research-reports/conviction-imprisonment-and-lost-earnings-how-involvement-criminal;</p> <ul style="list-style-type: none"> <li>• Apel, R., and Powell, K. (2019). Level of Criminal Justice Contact and Early Adult Wage Inequality.” RSF: The Russell Sage Foundation Journal of the Social Sciences 5(1): 198–222</li> </ul>
<p><b>Attainment of a Postsecondary Credential w/ Significant Labor Market Value</b></p>	<p>Attainment of bachelor’s degrees from four-year nonprofit or public universities as well as the attainment of associates degrees or vocational certificates from nonprofit or public colleges in high-earning subject fields that include Health Sciences, Business, Computers/IT, and Engineering/Drafting.</p> <p>Age Span: 21-35</p> <p><u>Measure-Related Studies</u></p> <ul style="list-style-type: none"> <li>• The Missing Manual: Using National Student Clearinghouse Data to Track Postsecondary Outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• Stable Full-Time Employment at 250% FPL for individuals</li> <li>• Family Income at 250% FPL (pegged to a family of 4)</li> </ul>	<ul style="list-style-type: none"> <li>• Bayer, P., &amp; Charles, K. K. (2018). Divergent paths: A new perspective on earnings differences between black and white men since 1940. The Quarterly Journal of Economics, 133(3), 1459-1501;</li> <li>• Thompson, O. (2021). Human Capital and Black-White Earnings Gaps, 1966-2017 (No. w28586). National Bureau of Economic Research;</li> <li>• Carnevale, A. P., Strohl, J., Gulish, A., Van Der Werf, M., &amp; Peltier Campbell, K. (2019). The unequal race for good jobs: How Whites made outsized gains in education and good jobs compared to Blacks and Latinos. Center for Education and the Workforce, Georgetown University;</li> <li>• Carnevale, A. P., Rose, S. J. &amp; Cheah, B. (2011) The College Payoff: Education, Occupations, Lifetime Earnings. The Georgetown University Center on Education and the Workforce;</li> </ul>

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			<ul style="list-style-type: none"> <li>Kim, C., &amp; Tamborini, C. R. (2019). Are they still worth it? The long-run earnings benefits of an associate degree, vocational diploma or certificate, and some college. RSF: The Russell Sage Foundation Journal of the Social Sciences, 5(3), 64-85.</li> </ul>
<b>Stable Affordable Housing</b>	<p>Housing costs comprising greater than 30% of household income AND Moving two times or more in the prior five years OR experiencing homelessness.</p> <p>Age Span: 21-35</p>	<ul style="list-style-type: none"> <li>Stable Full-Time Employment at 250% FPL for individuals</li> </ul>	<ul style="list-style-type: none"> <li>Desmond, M., &amp; Gershenson, C. (2016). Housing and employment insecurity among the working poor. Social Problems, 63(1), 46-67</li> </ul>
<b>Stable Full-Time Employment among Individual Adults with incomes at or above 250% FPL</b>	<p>The percentage of adults engaged in stable (i.e. working for 50-52 weeks out of the year) full-time employment (i.e. equal to or greater than 35 hours per week) with incomes equal to or greater than 250% of the Federal Poverty Level (FPL) for individuals, which in 2019 equaled \$31,225.</p> <p>Age Span: 21-65+</p>	<ul style="list-style-type: none"> <li>Family Income at 250% FPL (pegged to a family of 4)</li> </ul>	<ul style="list-style-type: none"> <li>Weisshaar, K., &amp; Cabello-Hutt, T. (2020). Labor force participation over the life course: The long-term effects of employment trajectories on wages and the gendered payoff to employment. Demography, 57(1), 33-60;</li> <li>Schultz, M. A. (2019). The Wage Mobility of Low-Wage Workers in a Changing Economy, 1968 to 2014. RSF: The Russell Sage Foundation Journal of the Social Sciences, 5(4), 159-189</li> </ul>

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<p><b>Family Income at 250% FPL (pegged to a family of 4)</b></p>	<p>The percentage of families with incomes equal to or greater than 250% the Federal Poverty Level (FPL) (pegged to a family of 4, which is the average family size in the County). In 2019 this equaled \$64,375. Due to the high cost of living in Los Angeles County, the income-poverty is pegged to a family of four even if a family is comprised of 2, 3, 5, or more individuals.</p> <p>Age Span: 21-65+</p>	<ul style="list-style-type: none"> <li>Age in Place with Safety, Dignity &amp; Independence</li> </ul>	
<p><b>Age in Place with Safety, Dignity &amp; Independence</b></p>	<p>Person-Place Fit Measure for Older Adults (PPFM-OA)</p> <p>Age Span: 21-65+</p> <p><u>Measure-Related Studies</u></p> <ul style="list-style-type: none"> <li>Developing the Person-Place Fit Measure for Older Adults: Broadening Place Domains;</li> <li>Supporting Aging-in-Place Well: Findings From a Cluster Analysis of the</li> </ul>		