



KING COUNTY

1200 King County Courthouse
516 Third Avenue
Seattle, WA 98104

Signature Report

Motion 16252

Proposed No. 2022-0222.1

Sponsors Zahilay

1 A MOTION accepting the sixth annual report on the best
2 starts for kids initiative, in accordance with Attachment A
3 to Ordinance 18373.

4 WHEREAS, Ordinance 18088, providing for the submission of the best starts for
5 kids levy to the qualified electors of King County, was adopted by the metropolitan King
6 County council on July 20, 2015, and signed by the executive on July 23, 2015, and

7 WHEREAS, King County voters approved King County Proposition No. 1 on
8 November 3, 2015, authorizing a six-year property tax levy lid lift for the purpose of
9 funding prevention and early intervention strategies to improve the health and well-being
10 of children, youth and their communities, and

11 WHEREAS, on June 1, 2016, in accordance with Ordinance 18088, the executive
12 transmitted to the council for review and approval an implementation plan that identified
13 the strategies to be funded and outcomes to be achieved with the use of levy proceeds
14 described in Ordinance 18088, Section 5.C., and

15 WHEREAS, Ordinance 18373 approved the Best Starts for Kids Implementation
16 Plan, and

17 WHEREAS, the implementation plan requires that an annual report describing the
18 programs funded and outcomes for the children, youth, families and young adults served
19 be transmitted to the council, with the first report due by one year after the October 7,

Motion 16252

20 2016, effective date of Ordinance 18373, and that additional yearly reports be transmitted
21 no later than June 1 of each year through 2022, and

22 WHEREAS, the sixth annual report, which is the last of the annual reports,
23 entitled 2021 Best Starts for Kids Annual Report, is submitted by the executive;

24 NOW, THEREFORE, BE IT MOVED by the Council of King County:

25 The council accepts the sixth annual report on the best start for kids initiative,

Motion 16252

- 26 entitled 2021 Best Starts for Kids Annual Report, Attachment A to this motion, in
27 accordance with Attachment A to Ordinance 18373.

Motion 16252 was introduced on 6/14/2022 and passed by the Metropolitan King County Council on 12/13/2022, by the following vote:

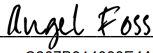
Yes: 9 - Balducci, Dembowski, Dunn, Kohl-Welles, Perry, McDermott, Upthegrove, von Reichbauer and Zahilay

KING COUNTY COUNCIL
KING COUNTY, WASHINGTON

DocuSigned by:

F8830816F1C4427...
Claudia Balducci, Chair

ATTEST:

DocuSigned by:

C267B914088E4A0...
Melani Pedroza, Clerk of the Council

Attachments: A. King County Best Starts for Kids 2021 Communities Building Impact



2021 Annual Report

Communities

Building Impact



Contents | Letter from the Executive | Letter from the Director

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PRIVACY

The stories in this report reflect the experiences of real people who accessed services through Best Starts for Kids community partners. They have consented to have their stories shared. Names and images may have been changed to respect their privacy.

FOR MORE INFORMATION

kingcounty.gov/BestStarts

ALTERNATE FORMATS

call 206-263-9100 or TTY Relay 711

THANKS TO OUR PARTNERS

Best Starts for Kids funds community partners across King County who lead, advise, and implement work through this initiative. These partners are recognized by name on page 85.

FOR BEST VIEWING EXPERIENCE

This report is intended to be read on screen and offers navigational links at the top of each page. For the best experience, we recommend using a PDF viewer rather than a web browser to navigate the report.

Cover photos (starting from top left): Jenjira Milan, Jenjira Milan, Jenjira Milan, Jenjira Milan, Gender Spectrum Collection, Adobe Stock

FROM THE KING COUNTY EXECUTIVE

To the King County community,

Every child deserves a strong start in life, and with your support, Best Starts for Kids reached more than 381,000 children, youth, and families in 2021.

While the COVID-19 pandemic continued to significantly affect the health and well-being of King County residents, the power of relationships inspired us. The strong and enduring relationships among children, youth, families, and communities inspired us. The ways in which our partners leveraged existing relationships and developed new ones to thoughtfully engage communities inspired us. The transformative power of relationships to support a more equitable King County in which everyone can achieve their full potential inspired us.

I am proud of what we have accomplished together over the last six years. In August 2021, King County voters overwhelmingly chose to renew the Best Starts for Kids levy and continue building toward our shared vision for our children, youth and families. Through Best Starts for Kids, we worked with our communities to make a better world for our children. The relationships that Best Starts and partners nurtured in 2021 and throughout the first Best Starts for Kids Levy will continue to be the backbone of our work going forward into the second levy.

I am pleased to share the 2021 Best Starts for Kids Annual Report and the data — including financial information, outcomes, and stories — that demonstrate the impact of our work together. Partnering with our community, we have built a strong foundation to support a generation of happy, healthy, safe and thriving babies, children, and young people.

We appreciate the ongoing commitment of our region, and the communities that make up King County to help young people flourish and thrive.

Sincerely,



Dow Constantine
King County Executive



FROM THE KING COUNTY STRATEGIC ADVISOR FOR CHILDREN AND YOUTH

To our community,

Best Starts for Kids is driven by the foundational value of centering the voices and lived experiences of communities across the region most impacted by systemic racism. In 2021, we continued to experience the impacts of the COVID-19 pandemic and ongoing racial injustice. Strong relationships among children, youth, families, and communities were critical to sustain us and create spaces to heal.

Within and across communities, we witnessed and worked with partners who demonstrated incredible creativity, perseverance, and flexibility, adapting programs to respond to evolving needs while navigating the latest public health guidance. As we plan for the next six years of Best Starts we will continue to inform our work with lessons learned and collaborate with community and systems partners on how to best support thriving communities across King County.

Since its inception, Best Starts has been committed to promoting positive outcomes for children, responding promptly when kids and families need support, and building on the deep knowledge, connections, and skills within King County communities. In 2021, Best Starts continued to deepen our relationships with community partners through our five investment areas: Investing Early, Sustaining the Gain, Communities Matter, Homelessness Prevention, and Capacity Building and Technical Assistance.

In the 2021 Best Starts for Kids Annual Report, we provide detailed information on these investments — how much we invested, community and system partners, and outcomes, along with links to additional information on the Best Starts website. We are pleased to share this detailed information and community-driven stories from this year. Throughout the report, we share stories of relationships among children, youth, families, and communities, among community and system partners and their collaborators, as well as all of us across the Best Starts for Kids community, as we learned, grew, and deepened our impact together.

I am honored by the dedication of our leadership, including Dow Constantine, King County Executive; Leo Flor, director of the King County Department of Community and Human Services; Dennis Worsham, director of Public Health — Seattle & King County; the King County Children and Youth Advisory Board; and the Communities of Opportunity Governance Group. To you, our community, we are deeply grateful for our relationship and for your commitment and support.

Sincerely,



Sheila Ater Capestany

King County Strategic Advisor for Children and Youth

Director, Children, Youth and Young Adult Division

King County Department of Community and Human Services



Photo: Roman de los Santos

BEST STARTS IN 2021

Centering relationships through the year's valleys and peaks

In a year that fluctuated between high hopes and continued struggles, strong relationships served as the backbone for communities across King County as we navigated the ongoing dual pandemic of COVID-19 and systemic racism. Building on deep connections, Best Starts for Kids' partners critically supported communities as they navigated the challenges of 2021 in the face of grief and uncertainty.

In 2020, Best Starts quickly pivoted to provide what community leaders said they needed most to navigate the COVID-19 crisis, including flexible emergency funds, technology, and resources for social emotional well-being and mental health. In 2021, Best Starts and its partners leaned into their established community ties to draw lessons from the first year of the pandemic. Best Starts and its partners strengthened and adapted community-led approaches to best support the emotional well-being and behavioral health of children, youth, and families. Best Starts' unwavering commitment to centering the voices and lived experiences of communities is critical to its ability to advance racial, geographic, and economic equity.

As Best Starts enters into the second levy and King County communities begin recovering from a long and difficult pandemic, Best Starts will continue to reinforce and expand our commitment to strengthening community ties, supporting the well-being of children, youth and families. By investing in community-designed and evidence-based approaches while expanding and updating resources in child care, older youth, and youth-serving facilities in the upcoming years, Best Starts is working towards ensuring a better, more equitable King County, where all can thrive.



Photo: Jenjira Nilar



Photo: Adobe Stock



Photo: TONL

WHAT WE DO

Giving kids the best start in life

Best Starts for Kids builds on the strengths of families and communities so babies are born healthy, children thrive and establish a strong foundation in life, and young people grow into happy, healthy adults. Best Starts promotes opportunities for kids to grow up healthy and happy and elevates efforts to provide support early when families need it. In 2021, Best Starts partnered with more than 370 organizations operating 569 programs to reach around 381,000 children, youth, and families across King County.

These community-driven investments had a powerful impact in 2021. Best Starts continued to center the leadership of and partnership between geographic, linguistic, cultural and other communities to support their vision of equity and the social emotional well-being of children, youth, and families. In 2021, our partners used Best Starts funding to deepen community connections and adapt programs to respond to community need.

When families and communities have the resources and support to help their kids have the best possible start:

- **Babies** are born healthy and given the foundation for a happy, healthy life.
- **People** have equitable opportunities to be safe, healthy and thriving.
- **Communities** offer safe and welcoming environments for their kids.
- **Children, teens and young adults thrive!**



The COVID-19 pandemic

and the effects of systemic racism have continued to disproportionately affect Black, Indigenous, and People of Color (BIPOC)* communities in King County. Families shared that they face **racism in public and professional settings** often. BIPOC families in most communities agreed that acts of racism commonly took place in schools and within healthcare systems. Best Starts for Kids responded by turning to our partners and trusting their leadership to identify successful strategies for sustaining culturally and linguistically responsive social supports for children, youth, and families.

* Best Starts and its partners acknowledge that not all communities represented in this report identify with BIPOC (Black, Indigenous and People of Color) as a meaningful identifier or lived experience. Best Starts and its partners encourage holistic interpretations of this term used throughout the report, serving as a point of reference, and include all individual and groups for whom any term aside from BIPOC (e.g. black and brown children, students of color, communities of color etc.) is a meaningful identifier or lived experience.

In 2021, Best Starts for Kids invested \$111.5 million in 569 programs delivering impact through strategies that reached more than 381,000 children, parents, caregivers, and community members in King County.

INVESTING EARLY

\$52.8M

Building a robust system of support for pregnant and parenting families, infants, very young children and caregivers that meets people where they are — at home, in the community and wherever children are cared for. In 2021, Best Starts supported community partners in meeting basic needs, connecting families to services, and caring for the well-being of young children and their families.

SUSTAINING THE GAIN

\$38.0M

Ensuring progress continues with school- and community-based opportunities to learn, grow, and develop through childhood and adolescence and into adulthood. In 2021, Best Starts flexed investments for community partners to help young people and families navigate remote learning, continue offering youth programming, and expand access to mental health supports.

COMMUNITIES MATTER

\$11.9M

Supporting communities through Communities of Opportunity (COO), as they build healthy, thriving places for children to grow up. In 2021, Best Starts invested in culturally rooted and place-based partnerships and organizations, building on community-driven policy and systems change under way. COO also supported COVID-19 response efforts and Black-led organizing.

HOMELESSNESS PREVENTION

\$3.5M

Complementing regional efforts to prevent and reduce homelessness by focusing on what each family needs to stay stably housed. In 2021, Best Starts rapidly responded to changing housing needs of families navigating lost income and abilities to work by innovating case management services to provide seamless supports to households in need. This support for families with children and young adults was an important element of county-wide efforts to maintain stability for households.

2021 PROGRESS

381,000

people reached

\$111.5M*

invested throughout King County

376

community partners

569

new and continuing programs

3.1M

diapers, carseats, and other basic items distributed

1,875

households remained housed

2,480

capacity building, community, and workforce development events brought communities together

10,285

hours of technical assistance and capacity building leveraged by communities

Additional data on work funded through Best Starts for Kids are available at www.kingcounty.gov/BestStarts.

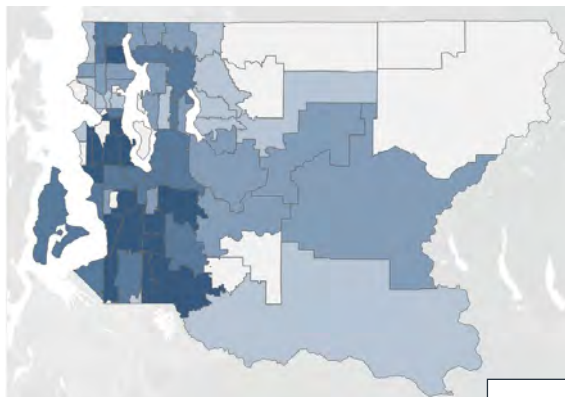
* Total includes evaluation and programming.

WHO WE SERVE

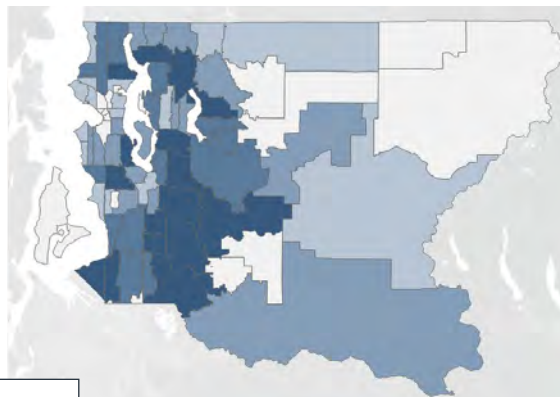
Best Starts for Kids serves youth, families, and communities throughout King County

Best Starts focuses investments to ensure equitable opportunity for all children. Best Starts furthers equity in communities throughout King County by supporting organizations that recognize and address inequities based on race, ethnicity, geography, immigration and refugee status, income, ability, gender, sexual orientation, and involvement in the child welfare system.

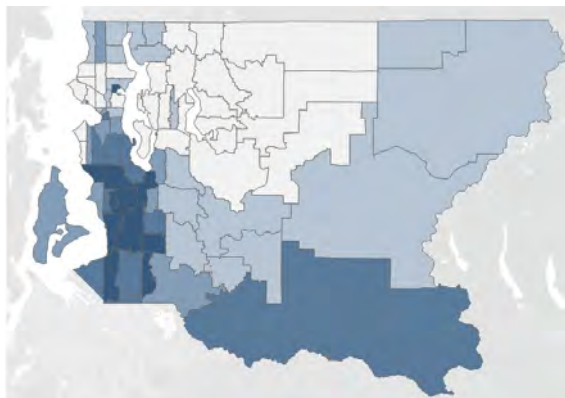
DISTRIBUTION OF PARTICIPANTS SERVED



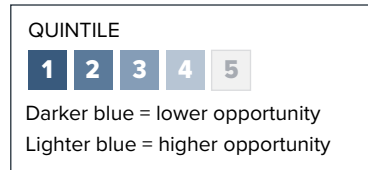
DISTRIBUTION OF POPULATION UNDER AGE 18



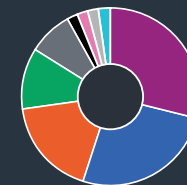
CHILD OPPORTUNITY INDEX



The **Child Opportunity Index (COI)** is a national index of neighborhood resources and conditions that help children develop in a healthy way. High-opportunity neighborhoods have quality schools, parks and playgrounds, clean air, access to healthy food, health care and safe housing. Low opportunity neighborhoods have few or none of these conditions.



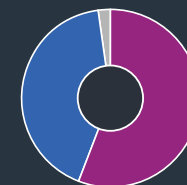
2021 BEST STARTS FOR KIDS DEMOGRAPHICS



RACE/ETHNICITY

- American Indian/Alaska Native: 2%
- Asian: 12%
- Black/African American: 27%
- Hispanic/Latinx: 18%
- Middle Eastern or North African: 2%
- Multiple races: 7%
- Native Hawaiian/Pacific Islander: 2%
- White: 27%
- Another race/ethnicity: 2%

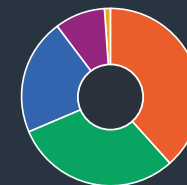
Race groups are mutually exclusive.



GENDER IDENTITY

- Female: 57%
- Male: 41%
- Another gender: 2%

Gender identity is not binary. Individuals included in “Another gender” reported an identity that is not among these response options. This includes but is not limited to persons identifying as transgender, non-binary, questioning, and/or gender-nonconforming.



AGE IN YEARS

- <5: 38%
- 5–17: 30%
- 18–24: 9%
- 25–54: 21%
- 55+: 1%

These data include children, parents and caregivers served.

Data are provided only for individuals for whom information is available and relevant. Individuals who are enrolled in more than one program may be duplicated in the demographic data. Totals may not add up to 100% due to rounding. Not all programs collect the “Middle Eastern or North African” race/ethnicity category or detailed gender identity data, which may lead to undercounting of these populations. See [full results online](#) for complete information.

OUR REACH**Best Starts across King County in 2021**

The community partners highlighted here give a sense of the scope of programming supported by Best Starts for Kids funding across King County.

**DISTRICT 1**

- A YouthCare**
Offering supports to youth and families at imminent risk of experiencing homelessness through case management and flexible funding.
- B Korean Community Services Center**
Providing community-based caregiver education classes and support groups to first through second-generation Korean American caregivers with children 0–5.

DISTRICT 2

- C Skyway Coalition**
Addressing the historic lack of investment, inequitable policies, and systems that directly impact the urban unincorporated community, including supporting policies and funding that support anti-displacement strategies, affordable housing, and economic development.
- D Amara**
Offering developmental screening, referrals, and case management to foster and kinship guardians with newly placed children.

DISTRICT 3

- E Hummingbird Indigenous Family Services**
Providing doula services across the reproductive spectrum including conception, termination, pregnancy loss, prenatal, labor, delivery, postpartum, and lactation support throughout the Eastside.
- F Empower Youth Network**
Establishing a multi-organization team to seek input and respond with supports that build and coordinate community leadership to promote health and wellness, including collating and communicating partner events and opportunities to connect and learn.

DISTRICT 4

- G Family Works**
Running Kaleidoscope Play and Learn groups for parents and caregivers to sing, read, and play together in support of their children's healthy growth and development.
- H Seattle CARES Mentoring**
Supporting parents, grandparents, foster parents, and other guardians who take care of youth who are at high risk of dropping out and or getting involved with the juvenile justice system.

STRATEGY AREAS

- Investing early
- Sustaining the gain
- Communities of Opportunity
- Homelessness prevention

DISTRICT 5

- I UTOPIA (United Territories of Pacific Islanders Alliance)**
Supporting the leadership of queer & trans Pacific Islanders in action and organizing work, including campaigns chosen by and for their health, safety, well-being, empowerment, and economic stability.
- J Riverton Park United Methodist Church**
Supporting youth and families at imminent risk of homelessness with flexible funds and case management.

(CONTINUED...)

“*Best Starts for Kids has been an essential investment for our programs serving children, youth and families. I am so glad the community passed another levy to support the ongoing work of organizations and to create opportunities for new organizations to participate in the grant making process. Best Starts is a resource model that is responsive to the needs of community and will have long-lasting positive impacts.*”

— Dr. Angela Griffin, King County Children and Youth Advisory Board,
CEO of Launch, Community Advocate

(...CONTINUED)

DISTRICT 6

K International Community Health Services (ICHS)

Providing primary healthcare access to students and their families in their community through both on-site care at a school-based health center and mobile van access.

L Centro Cultural Mexicano

Strengthening inclusive participation in education, culture, and society by focusing on the direct and estimated long-term effects of COVID-19 on low-income Latino children, including housing stability, education, food security, physical health, and social emotional well-being.

DISTRICT 7

M Open Doors for Multicultural Families

Offering after school and summer programming focused on social communication goals and physical health outcomes with elementary and middle school youth with disabilities.

N FW Black Collective

Supporting a cohort of South King County child care providers with training, coaching, and ongoing supports to learn and implement developmental screening and follow-up referrals.

DISTRICT 8

O Navos

Collaborating with agencies already serving families experiencing struggles with Attachment Vitamins, a strengths-based, trauma-informed parenting support intervention for parents and caregivers of children ages 0–5, seeking to improve the parent-child relationship.

P Southwest Youth and Family Services

Creating access and eliminating barriers for youth living in King County Housing Authority sites in White Center, SeaTac, and Burien, with the goal of increasing math and literacy, developing technological skills, and building confidence in elementary and middle school students.

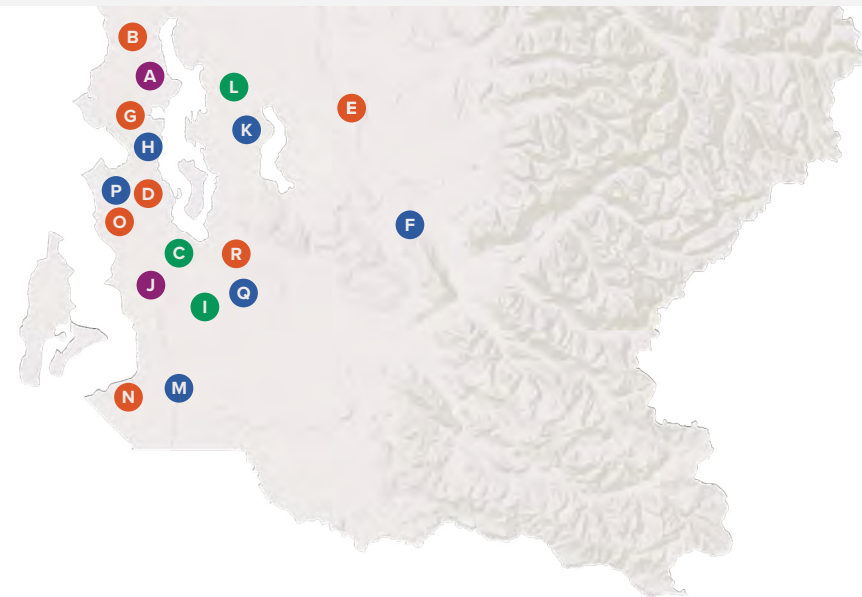
DISTRICT 9

Q BRAVE

Providing wraparound services for Black and Brown families with components that serve the family, including learning opportunities to strengthen relationships and increase self-love.

R East African Community Services

Supporting Somali parents and families who have children 0–5 in building healthy and quality relationships through their early childhood home-based prenatal program.



STRATEGY AREAS

- Investing early
- Sustaining the gain
- Communities of Opportunity
- Homelessness prevention

Investing Early

from prenatal care to the first day of kindergarten



By investing early, Best Starts for Kids supports communities so that:

- Babies are born healthy.
- Children grow up in households where they are safe and cared for.
- Children grow up resilient, curious and content.
- Children are socially, intellectually and physically ready for kindergarten and a lifetime of learning.
- **Children flourish and thrive!**

Creating change by centering the social emotional well-being of babies and their caregivers



Children thrive when their social, emotional, and physical needs are met with proper support and care from their adult caregivers. Yet, racial and ethnic inequities in infant and early childhood persist. Cultural and linguistic mismatches between providers and families, implicit bias among providers, and systemic barriers faced by families contribute to these inequities. According to findings from the latest [landscape analysis](#), practitioners of color voiced a strong need to feel supported within their practice. Large numbers of BIPOC families and communities expressed desires to be supported by folks within their own communities.

In Best Starts' Infant Mental Health Reflective Consultation project, about 97% of consultants are white, and many of the families served identify as BIPOC. To bridge this gap, Best Starts created the **BIPOC Community of Leaders in Reflective Practice** project to increase access to equity-centered, culturally, and linguistically responsive reflective practice for BIPOC Infant and Early Childhood Reflective Consultants.

During the project, participants ranging from pediatricians to community-based organization IT managers and clinicians engaged in individual and collective learning through quarterly large group trainings, monthly small group circles, and reflective journaling. The practice is called “Reflective Practice” as it centers connecting the head, heart, and the hands in all aspects of caregiving. It's the ability for providers to stop and reflect about how work is being done, how policies are created and how families are being served.

By centering the voices and experiences of BIPOC participants, the project supported 85 participants, including one group conducted in Spanish with Spanish-speaking providers and mentors. These leaders became change agents with established support systems within their networks of practice and new learnings to implement in their care and support for families. Through Reflective Practice, early childhood providers stop, think, challenge, and change their practices to incorporate new understandings in their work with children and families, empowering them to identify, understand, and unlearn implicit bias and decrease burnout and exhaustion.

Throughout the COVID-19 pandemic, BIPOC communities experienced heightened hardship and strain. Empowering providers of color who are supporting families of color to be together and learn together is essential, uplifting communities and furthering equitable systemic change.

Children have the best start in life when their families and communities have supports to help kids develop trusting relationships, grow up healthy, and thrive.

Led by and working with our community partners, Best Starts for Kids cultivates connection between families navigating their child's earliest years and King County's vibrant community of early childhood professionals. Our emphasis on promoting positive elements and preventing negative factors keeps healthy children healthy and allows for additional support to be provided for children and families who need it. Backed by a growing body of evidence, the Best Starts approach results in positive outcomes for the rich diversity of our region's children from birth to age five.

Best Starts Investing Early strategies reached more than 285,000 children, families, and their trusted providers in 2021. Many of these programs intentionally reach communities that historically and currently have lacked access to health and early learning services. These investments produce positive results across King County, including the creation of community-led systems to foster healthy childhood development for our youngest residents and those who take care of them.

Best Starts delivers impact across all investments, with all funded programs actively providing services and sharing [performance data](#) for the year.

\$52.8M total investments
in 2021

179 new and continuing
programs

See outcomes of Best Starts Investing Early investments across King County [here](#).



Photo: Jenjira Milan

“ [A] lot of these families did not know where to go or who to call for services. We did the whole process for them: calling agencies, checking insurance coverage, faxing paperwork, following up with families...we believe that meeting families where they are is key to succeed in this work.”

— Aicha Biaye, Early Learning Director,
West African Community Council

Help Me Grow

- **\$3.2M** invested in 2021
- **27** community partners, **3** system partners

Raising safe, happy, healthy, and thriving kids takes support. Help Me Grow connects families and caregivers with children under age 5 to community-based programs and services.

Help Me Grow partners leveraged relationships with one another to best support children, youth, and families to navigate referrals, needs related to COVID-19, food insecurity, and housing instability. Partners met with each other to build relationships and co-create solutions for concerns families they served commonly experienced.

2021 OUTCOMES

- The Help Me Grow King County Partnership Network supported 1,346 parents/caregivers and 2,227 children in 2021. 93 percent of children served were BIPOC.
- The majority of these families reached out with concerns related to basic needs — including diapers, clothes, baby formula, and food — developmental progress, and parent/caregiver support. To address these concerns, partners built relationships through at least 11,825 interactions with families over video, text, and phone, and completed 2,987 referrals for related services or resources. 21 percent received developmental screening.

- All participating families said that, because of the Help Me Grow King County Partnership Network, they experienced increased social connections. 99 percent said they had more concrete support — essential items, goods, information, and referrals for babies and families — from the network, and 89 percent said they increased knowledge of parenting and child development.

Developmental Promotion and Early Support

- **\$8.2M** invested in 2021
- **35** community partners

Children reach developmental milestones in their own way and at their own pace. When developmental delays in young children are identified early, interventions can have the most impact with services that are right for each family and child. That's why Best Starts provides a comprehensive approach — through early screening, social emotional development integration, and resources for caregivers — to ensure the well-being and development of children across King County.



Photo: Adobe Stock

“*[As] we continue to deepen relationships, [we] have a lot of families engaging who have not before, and other families feeling more welcomed to participate who have not done so in the past...more than anything it is a space to dream and see possibilities for the future. We feel excitement and [are] grow[ing] confidence in our skills.*”

— Kali Aguilera, Operations & Development Organizer, Comunidad Latina de Vashon

These programs remove barriers to culturally relevant services and developmental screening so that all families can celebrate developmental milestones with their kids.

In 2021, the programs funded by this strategy demonstrated a deep commitment and passion for the children and families in their communities by pivoting their programs to meet community needs. Programs adapted to meet the new reality of delivering services remotely, helping families gain access to basic necessities — including diapers, clothes, baby formula, and food — and serving as their trusted source of information and guidance to keep kids safe during COVID-19. Partners evolved from providing a supplemental early learning program to a resource knowledge center for their families.



Learn about Communities Rooted in Brilliance's Best Starts early learning programs (formerly Coalition for Refugees from Burma) [HERE](#)



2021 OUTCOMES

- 360 children were screened for developmental progress and 3,399 referrals were made post-screening through Help Me Grow Screening and Referral Services. 96 percent of families reported feeling confident in their next steps and 82 percent of families who received a referral established a service connection.
- 597 participants attended one of 72 Help Me Grow Workforce Improvement events and workshops. 97 percent of participants reported confidence in their ability to apply new knowledge gained in their work with families. One training participant shared, “My capacity to recognize Perinatal Mood and Anxiety Disorders (PMADs) feels much stronger now, and I think one of the biggest ways my capacity has changed is understanding the ways different PMADs can present and having more tools to treat them.”
- 457 providers participated in one or more Social-Emotional Well-being: Infant Mental Health Large Group Trainings. 97 percent of participants said the training content was meaningful to their work with children and families, and 93 percent reported confidence in their ability to apply something new they learned from the training to their work.

Supporting communities through intergenerational impact

As part of their early childhood programming, the Indian American Community Services (formerly India Association of Western Washington, IAWW) included grandparents from their senior programming in monthly informational sessions to address developmental challenges, stigmas around developmental issues, and strategies families can use to empower and support children with developmental challenges. Grandparents learned skills and strategies to connect with their grandchildren, and space to connect at IACS' pop-up community center through events such as intergenerational lunches, summer picnics, and meditative art workshops.

The approach to intergenerational programming is one of long-term impact and bridge building to ensure positive family connections, awareness of addressing stigmas, and taboos around timely supportive approaches to developmental challenges among toddlers. As IACS continues to work with multi-generational families, there is a slow but steady increase in awareness of timely access to support services, while continuing to address complex conversations around the stigma of developmental challenges and labeling.

- 13 community-based organizations served 5,349 children and their families through the Early Support for Infants and Toddlers (ESIT) program, which supports families whose children have developmental delays and disabilities, focusing on children up to age 3.
- 366 professionals (doulas, home visitors, child care providers and others) increased their skills to conduct screenings. Early screening helps identify the specific interventions and services that will best support a child and their family. 88 percent of these professionals reported increased confidence in their ability to discuss a developmental concern with a family.
- 409 providers participated in reflective consultation meetings to transform their practice and improve connection to babies, children, and families. 88 percent of providers reported that these sessions had a positive impact on their relationships with the babies, children, and families they serve.

5,349 children and families received support from 13 community-based organizations through ESIT/ Birth-to-Three Services

Workforce Development

- **\$2.4M** invested in 2021
- **1 system coordinator, 6 capacity builders, 9 community partners that accessed supports**

Professionals who work with children and families do their best work when they are supported with tools, resources, and connection to a community.

In 2021, Best Starts for Kids' Workforce Development strategy created and implemented 23 workshops reaching 731 workforce community members. Workshops emphasized the importance of healing from both individual and collective levels of trauma to improve relationships, and centered understanding and compassion to strengthen relationships across all stages of human development. More specifically, consultants designed several workshops to address participants' healing, with a focus on highlighting that a healthy workforce is crucial in supporting and promoting the healthy development of children. Offered in multiple cohorts, workshops supported flexible scheduling alternatives to ensure accessibility. For example, one workshop titled "Race Based Trauma and BIPOC Communities: Pathways to Coping and Healing" provided concrete tools to educate participants and help facilitate their understanding of racism and its harmful impact at interpersonal and systemic levels, offering practical methods to cope with race-based trauma. Workshop participants reported finding the shared tools and community healing provided through this workshop beneficial to their overall well-being.

“When parents are less worried about having enough to eat, they have time and energy to interact with their children. With the support of [Best Starts], Family Partners have helped parents succeed in developing relationships with their children through age-appropriate communication and parental guidance.”

— Marwa Sadik, Programs Manager and Operations Director, Iraqi Community Center

2021 OUTCOMES

- 93 percent of participants reported that the workshop training content was meaningful to their work with children and families. 92 percent reported confidence in their ability to apply something new they learned from the training to their work.
- 213 providers participated as members of a workforce collaborative, with over half identifying as new members. 93 percent of members reported training content met a need of the collaborative.

Home-Based Services

- **\$10.6M** invested in 2021
- **32** community partners, **8** technical assistance partners

Through home-based services, families with babies and young children gain access to home visitors — a nurse, a doula or a trained community member — who can be a family resource throughout the first years of a child's life. Home visitors develop relationships with multiple members of the family. They help families through the changes that come with a new baby, provide services that help the family nurture their child's development, and navigate systems such as housing and employment that promote family stability.

Home-based services adapted to the needs of families in 2021, with services transitioning from all virtual visits to a hybrid model depending on family preference. Partners increased basic needs assistance including applying for food, diapers, and housing.

“*In the last 6 months, the Perinatal Collaborative Partners have partnered with King County-based organizations, as well as collaborated with one another for various programming events. These partnerships and collaborations are deepening community relationships with the intent to bring awareness to the Collaborative programming and increase referrals to Perinatal and Lactation Services, education, and professional development opportunities.*”

— Farrah Rivera, MSM, CPM, LM; Perinatal Collaborative Director; Open Arms Perinatal Services

Families relied on this stable, trusted, culturally responsive source of support to navigate the challenges of another year of the COVID-19 pandemic.

2021 OUTCOMES

- Evidence-based and evidence-informed home-based programs served 989 caregivers, 835 children, and 760 families. 77 percent of caregivers reported increased positive interaction with children after participation.
- 10 community-designed home-based programs served 1,032 caregivers and reached 998 children through 9,987 home visits.
- 96 percent of families in community-designed home-based services received increased concrete support and 94 percent of families gained increased knowledge of parenting and child development.
- Through a partnership with United Way and the City of Seattle, [ParentChild+ Program](#) continued to deepen and expand its reach. The 16 funded programs made 42,774 visits to 1,147 children, and matched 92 percent of families with culturally relevant staff.

Community-Based Parenting and Peer Supports

- **\$4.5M** invested in 2021
- **35** community partners, **4** technical assistance partners

Through Community-Based Parenting and Peer Supports, community-based agencies and organizations support families with everything from food to information on child development. Communities lead these Best Starts investments, which is especially important for services like support for chestfeeding and for education and advocacy around maternal mortality. By standing behind these existing networks of support, Best Starts helps to build on community strengths, providing tools and resources a community can use to care for its kids and families.



Relationships are at the center of Community-Based Parenting and Peer Supports work. Partners are peers to families, reflecting families' lived experience, culture, and language. This dynamic establishes trusting, strong relationships that provide comfort in times of crisis. Families and community members reached out to our partners for information and supports throughout the COVID-19 pandemic. In 2021, our partners continued to identify emerging needs and responded to those needs with informed supports. Partners distributed tablets, personal protective equipment, supplies, and shared up-to-date COVID-19 information with families.

2021 OUTCOMES

- 38,932 families and children accessed basic necessities — including diapers, clothes, baby formula, and fresh fruits and vegetables. All 3.1 million requested items were distributed.
- 5,158 children, parents, and caregivers participated in Kaleidoscope Play and Learn groups. 93 percent felt more supported as a parent or caregiver in their community.
- 55 people received supportive pregnancy services and 295 people received lactation support services across King County. All pregnant people carried their babies to full term and 99 percent of new mothers were chestfeeding beyond initiation.
- 1,584 parents and caregivers participated in 672 group meetings or services through Parent/Caregiver Information and Supports programs. 97 percent of families reported increased social and emotional competence of children as a result of the program.

Public Health Programs

• \$12.9M invested in 2021

Managed by Public Health — Seattle & King County, Public Health programs build on proven practices and community-based solutions to support healthy outcomes at all ages. These programs provide a critical safety net for families, an essential support since the COVID-19 pandemic began.

As a core component of Best Starts for Kids' prenatal-to-five strategies, Public Health programs quickly adapted during the pandemic to ensure families had continued access to affordable and healthy food, reproductive health services and support with housing. Best Starts helped families impacted by the homelessness crisis by creating and expanding developmental screening and access to Early Supports for Infants and Toddlers for children in emergency shelters partnering with Boyer Children's Clinic and Mary's Place. For families facing rising food prices, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) delivered an expanded allowance for purchasing fresh fruit and vegetables.

In 2021, Public Health — Seattle & King County and community partners completed development of Family Ways, a new program that aims to advance health equity through improved systems coordination and family access and use of existing community resources. The program offers culturally relevant, participant-centered, strengths-based pregnancy and parenting services for families and children up to age five, centering

Fostering connection through play and nature

In 2021, Kaleidoscope Play and Learn at Greenplay Northwest continued to connect and educate children in King County and surrounding communities through play and nature. The program's dedication to relationship building in the outdoors has encouraged a major shift in comfort among young children and caregivers in their ability to connect with both nature and each other, creating powerful and meaningful social interaction despite the continued strain on relationships during the COVID-19 pandemic. With the support of their mostly outdoor program, Greenplay Northwest's Kaleidoscope Play and Learn fosters a sense of community from an early age, carrying an impact for generations.



Photo: Jenjira Milroy

U.S.-born Black/African American, American Indian/Alaska Native, and Native Hawaiian/Pacific Islander communities. The Family Ways Team will begin services in Spring 2022.

2021 OUTCOMES

- More than 33,000 people benefited from healthy, affordable food through the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).
- 11,502 pregnant people and infants received pregnancy and parenting support. The option of video and phone visits increased accessibility and helped alleviate isolation caused by the pandemic.
- 192 children and caregivers were linked to health services and assisted with telehealth visits, as well as connected to housing through a program for families in shelters and encampments who have significant health needs, 60 percent of whom were in permanent housing at completion.
- 98 percent of babies enrolled in the Perinatal Hepatitis B Prevention Program and tested in 2021 became immune to Hepatitis B. Best Starts communicated with families facing confusion and fear about managing the Hepatitis B vaccination for their infants during the pandemic, encouraging them to keep or reschedule their appointments.



View Open Arms Perinatal Services' Lactation and Perinatal Supports Library.

Reducing exposure to toxics across Best Starts for Kids strategies

Research correlates exposure to flame-retardant chemicals with adverse health effects including cancer, hormone disruption, and obesity. In 2021, Best Starts invested in \$300,000 worth of toxin-free nap mats ensuring healthy indoor environments for children by reducing exposure to toxins. Partnering with community-based organizations, Best Starts distributed 2,440 mats across 249 family child care homes and 67 family, friend, and neighbor (FFN) providers across King County. By serving child care providers in and across South King County, Best Starts provided support to communities especially impacted by the disruption of COVID, particularly low-income and BIPOC families.

In 2021, Best Starts prevented exposure to lead and toxics among families and caregivers across multiple language groups through their network of community partners and further increased blood-lead testing for children through partnerships with the healthcare system. Best Starts also improved access to effective, culturally relevant early childhood developmental services for children impacted by lead poisoning, and reduced exposures to lead and toxics by identifying current and emerging sources across King County.

- 4,099 people accessed sexual and reproductive health services through King County's Family Planning Program through telehealth services, curbside medication pickup, and clinic visits. 84 percent of family planning clients now use more effective contraception methods. Community-based health educators delivered education and outreach to over 185,000 youth and launched two internship groups for 34 students in South King County.
- The Nurse-Family Partnership served more than 800 children. Registered nurses regularly visited families at home or met via Zoom video visits to help them raise happy, healthy children. 99 percent of children received a developmental screening and 95 percent of parents initiated chestfeeding.



Photo: Adobe Stock

Vroom

- **\$210K invested in 2021**
- **2 community partners**

Vroom turns the science of brain development into simple, easy-to-use tips that parents and caregivers can incorporate into everyday life. Best Starts for Kids has extended Vroom's reach, partnering with Latinx and Somali Vroom Community Connectors who make Vroom accessible and relevant for families to develop their child's literacy, math, and social skills.

In 2021, there was a high demand for virtual Vroom materials. In response, Best Starts distributed Vroom to over 27 agencies and thousands of families and caregivers.

In the Latinx community, Vroom Connectors engaged with parents in Mexican supermarkets, flea markets, and parks. Connectors also introduced the Vroom application and activities while they shared toys and diapers with families.

2021 OUTCOMES

- Vroom Community Connectors held 82 outreach events and activities led by Latinx and Somali Vroom Community Connectors, an increase from 52 events in 2020. 89 percent of outreach participants became Vroom Messengers (people who share Vroom with other parents). 87 percent of organizations engaged through outreach integrated Vroom into their other programs, an increase from 28 percent in 2020.

Child Care Health Consultation

- **\$2.5M invested in 2021**
- **13 community partners**

Child care providers and caregivers strive to provide safe and healthy environments for children in their care. Child care health consultants support them in navigating these challenges through implementing best practices.

Best Starts for Kids supported seven community-based organizations in providing Child Care Health Consultation services, putting the resources of community health professionals, mental health specialists, nurses, nutritionists, health educators, and inclusion specialists at the fingertips of both licensed child care providers and FFN caregivers across King County.

An evaluation of Child Care Health Consultation services showed evidence of the program's effectiveness in supporting child care providers with more tools and resources to make the child care space safer and to promote children's health. In 2021, virtual consultation and communication in the provider's primary language were critical to following sanitation and hygiene best practices, understanding Centers for Disease Control and Prevention guidelines on COVID-19 prevention, and accessing information on financial assistance and grants.

Strong relationships between consultants and child care providers were critical when it came to sharing COVID-19 vaccine information and accessing vaccines.

“One major success in our program was recognizing caregivers' mental health needs and supporting them through isolating times. They appreciated that we check[ed] in with them, listen[ed] to them, and remind[ed] them to take care of themselves. The wellbeing of our caregivers is an important service component and goal of our program, as it is essential to create a healthy environment for young children.”

— Helen Zhang, Child Care Health Consultation Coordinator, CISC

2021 OUTCOMES

- Child Care Health Consultation reached 994 providers representing seven different race/ethnicity backgrounds. Consultants completed 6,478 consultation and training services at formal child care sites and informal sites where friends, families, and neighbors are caregivers. This represents a 67 percent increase of services from 2020.
- 95 percent of child care providers served by Child Care Health Consultation teams reported satisfaction with the services they received and 97 percent reported increased knowledge of community resources that enhanced the health and safety of the child care environment.

Innovation Fund

- **\$1.8M** invested in 2021
- **13** community partners,
2 technical assistance partners

The Best Starts for Kids Innovation Fund fuels innovation by kick-starting community-designed programs and approaches through the beginning stages of development and early implementation. The Innovation Fund supports projects that meet community-identified priorities and are co-created with community, drawing on the skills and strengths of the community itself to meet its unique needs. In 2021, technical assistance providers supported community-based organizations in planning for sustainability and scale of their innovation.

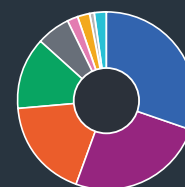
One example is Cowlitz Tribal Health Services (CTHS) & Partners for Our Children (P4C) at the University of Washington School of Social Work. CTHS and P4C collaborate to improve parent-child visits and maintain parent-child-community bonds. For example, in 2021, CTHS and P4C worked with community to adapt the Strive Supervised Family Time Program to provide culturally-responsive parent support and education to Native parents visiting with their children from birth to five years of age. Strive is a five-session program delivered by family time supervisors to enhance the quality of parent-child family time with children.

2021 OUTCOMES

- Innovation Fund projects held 465 meetings, trainings, and events. 93 percent of participants reported increased knowledge and skill because of these events.



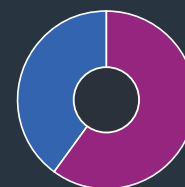
Photo: Adobe Stock

**INVESTING EARLY
2021 DEMOGRAPHICS**

Race groups are mutually exclusive.

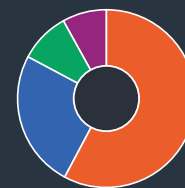
RACE/ETHNICITY

- American Indian/Alaska Native: 2%
- Asian: 13%
- Black/African American: 25%
- Hispanic/Latinx: 18%
- Middle Eastern or North African: 2%
- Multiple races: 6%
- Native Hawaiian/Pacific Islander: 2%
- White: 30%
- Another race/ethnicity: 1%

**GENDER IDENTITY**

- Female: 60%
- Male: 40%
- Another gender: <1%

Gender identity is not binary. Individuals included in “Another gender” reported an identity that is not among these response options. This includes but is not limited to persons identifying as transgender, non-binary, questioning, and/or gender-nonconforming.

**AGE IN YEARS**

- <5: 58%
- 5–17: 9%
- 18–24: 8%
- 25–54: 25%
- 55+: <1%

These data include children, parents and caregivers served.

Data are provided only for individuals for whom information is available and relevant. Individuals who are enrolled in more than one program may be duplicated in the demographic data. Totals may not add up to 100% due to rounding. Not all programs collect the “Middle Eastern or North African” race/ethnicity category or detailed gender identity data, which may lead to undercounting of these populations. See [full results online](#) for complete information.

Sustaining the Gain

from kindergarten through college and career



By sustaining early gains, Best Starts for Kids supports communities so that:

- Children learn social emotional skills that prepare them for a lifetime of success.
- Children and teens have the support to grow up curious, resilient, and confident.
- Children and teens graduate high school with their peers and go on to college or a career.
- Children, teens, and young adults are healthy and strong — and empowered to make healthy decisions about substance and alcohol use.
- **Children grow into thriving teens, and teens grow into thriving adults.**

Finding community, career, and hope in a pandemic



When children and young people are provided with the support they need to transition from adolescence to adulthood, they thrive. Val, a bright, warm, and hardworking 20-year-old, went from experiencing depression and chronic homelessness to pursuing a career in the medical field, with the help of **Friends of Youth's Clear Path to Employment Program**, funded through Best Starts' Transitions to Adulthood strategy.

"I got to a place in my life where I was just living a routine of just eat, sleep, work, repeat. I started experiencing depression...I told my friends and family but talking about mental health and those things isn't a part of my culture, so they told me it wasn't depression," Val says.

After dealing with familial and financial hardship for several months on her own, Val was at a point where she needed to reach out for help. In September 2020, Val took that first step.

Friends of Youth ensures that young people's physical, financial, mental, and emotional safety are prioritized, providing support for youth overcoming barriers in their lives, particularly BIPOC and LGBTQ+ youth. Bilingual and bicultural service providers pair youth with wraparound supports from employment case managers to housing case managers and mental health professionals.

"It's about centering their voice, their experience and their needs. It's about their perspective and their input, and advocat[ing] for [those] things and design[ing] programs in collaboration with them, [centering] them in the process," says Tracy, Employment Program Coordinator at Friends of Youth.

Val believed her employment options were limited. However, working with her Employment Case Manager, Sam, Val completed her GED. She and Sam met weekly to hone Val's job search and interview skills. Val also volunteered at a local clinic to build connections and experience to add to her resume. "With Friends of Youth, it got to the point where I thought they were like my family. They taught me to advocate for myself and that my story was important," says Val.

Throughout the COVID-19 pandemic, many young people were concerned about frontline employment opportunities for health and safety reasons. Friends of Youth worked to meet this immediate need, creating remote internships within their programs.

Now beaming with confidence, Val is living on her own in an apartment in Redmond. At the end of 2021, the manager of the clinic where she volunteered during the pandemic approached her and encouraged her to apply for an open full-time position. She now has a full-time job at that medical clinic.

As Val says, "When you go through [a] dark path, you always feel like when you get to the very bottom [that] it's over, but somehow one door closes, another one opens, and there's just hope...hope for the best and hope to take one day at a time, because you never know what will happen the next day. Whenever you're in a dark place, there's always hope".

As children transition through adolescence and into adulthood, their futures are transformed by the opportunity to stay connected and engaged at school and in their communities.

In 2021, as young people's lives continued to be disrupted by COVID-19, ongoing social isolation led to increased feelings of depression, anxiety, and other mental health issues. Best Starts' community partners responded to this challenge by creating a support network, building on established trust between community partners and the young people they serve to help cope with changes throughout the year.

Best Starts for Kids' funding for programs aimed at ages 5 to 24 sustains the gains from early childhood investments. In 2021, 27,000 young people and youth-serving adults participated in programs that assist young people as they grow into healthy, happy, and thriving adults through Sustaining the Gain Strategies. Community partners build resilience in youth, amplify youth voice, encourage youth leadership, and foster a sense of belonging both within communities and deepened family engagements.

This work is essential to address young people's increased mental health and social emotional needs associated with the pandemic. Best Starts' continued focus on programs led and designed by BIPOC ensures that this support reaches those who are most vulnerable to these effects.

Best Starts delivers impact across all investments, with all funded programs actively providing services and sharing [performance data](#) for the year.

\$38M total investments
in 2021

176 new and continuing
programs

See outcomes of Best Starts "Sustaining the Gain" investments across King County [here](#).

Read Public Health — Seattle & King County's 2021 Report on Mental Health Among Youth and Young Adults [HERE](#)



Photo: Jenjira Milan

“ We created a new partnership with the City of Kent for a paid Youth Internship Program, where we got to hire 5 youth interns to work with us. [It] was an amazing opportunity as our youth gain[ed] firsthand experience working with our team part-time, learning essential job and life skills along the way.”

— David Lujano, Youth Program Manager,
St. Vincent de Paul of Seattle King County

Youth Development

- **\$4.0M** invested in 2021
- **30** community partners

Young people seek safe, supportive environments that provide a sense of belonging and purpose. Best Starts for Kids partners with schools and community-based organizations to invest in programs that meet those needs through mentoring, leadership, positive identity development, and healthy relationships. Our community partners focus on engaging marginalized youth and young people who face challenging life experiences, offering a broad range of programs to develop skills, form lasting relationships, and build self-confidence.

A growing concern before the pandemic, young people's anxiety, depression, trauma, and stress have reached high levels. In response to this increase, Best Starts community partners prioritized mental health and wellness support for BIPOC youth. Community partners sourced information and resources from community experts on youth mental health to meet the needs of the young people they serve.

“One of the pillars of our work is ensuring we recruit, hire and train emerging community leaders who are reflective of the community of youth and families we serve. [This] makes it easier to establish trusting relationships with our youth and families and is the key to the success of our work!”

— Yasmin Habib, Executive Director, Celebrating Roots (formerly World Mind Creation Academy)

2021 OUTCOMES

- 3,561 young people participated in culturally responsive programs supporting leadership development and identity formation, with 89 percent of young people actively engaging. In many instances, young people co-created curriculum, designing and facilitating workshops and elevating the voices of their peers.
- 383 young people, of whom 70 percent are BIPOC, enrolled in Youth Development Relationships programming. 94 percent of youth reported improved knowledge or skill related to healthy relationships, a 45 percent increase from 2020.
- 30 community partners continued to invest in young leaders. Participants led dialogues with their communities about environmental and social justice, hosted peer-to-peer training sessions on boundaries and healthy relationship skills, supported educators in understanding the needs of LGBTQ+ students, and advised on program policies to better serve young people during the pandemic.

When students are provided with the support they need to grow, they thrive.

Saria, a high school student in King County, formed a strong relationship with Friends of the Children Seattle mentor Tasha for academic support during the COVID-19 pandemic. Tasha helped Saria develop healthy study habits and increased Saria's confidence despite the strains COVID-19 placed on young people.

“This last year, Saria has learned a lot about herself. She has realized that she can do it — that she is capable of taking on tough tasks; she is capable of speaking up for herself and doing things she thinks are scary,” says Tasha.

Saria speaks very highly of the work she has accomplished towards reaching her goals with the help of her mentor Tasha. And with Tasha, family, and teachers cheering her on, Saria is prepared to continue striving towards her academic goals with confidence.



Video by Michael B. Maine



Learn about Atlantic Street Center's approach to youth-centered Best Starts programs [HERE](#)

School Partnerships

A school environment should promote the positive growth and development of every child or young person, regardless of race, ability, or family income. In 2021, remote school environments shifted to hybrid in-person models. Best Starts for Kids' work to strengthen partnerships between schools, school districts, community-based organizations, young people, and families provided a foundation for these partners to collectively identify how to continue offering services throughout the transition. Through our investments in Trauma-Informed and Restorative Practices in Schools, School-Based Health Centers, Out-of-School Time and School-Based Screening, Brief Intervention, and Referral To Services (School-Based SBIRT), Best Starts redefined how to maintain school-based services and partnerships in line with COVID-19 health and safety measures.



Photo: Hannah Johnson

Trauma-Informed and Restorative Practices in School Environments

- **\$6.0M** invested in 2021
- **30** community partners

Trauma-Informed and Restorative Practices works with 30 partners, including schools, school districts, and community organizations to implement innovative trauma-informed and restorative practices. Connecting with more than 70 schools in 10 school districts, partnerships strive to dismantle inequity in schools, placing focus on the impacts of trauma and racism. Partners' practices address, repair, restore, and support relationship building and healing among school personnel, students, families, and the community.

In 2021, community partner organizations participated in learning cohorts to co-create culturally relevant education beyond schools, providing resources to young scholars and families, and sharing successes and strategies to navigate challenges. Cohorts helped break down systemic barriers and move community partners towards transformative approaches, including sharing leadership, responsibility, and mutual accountability to fulfill a collective vision.

2021 OUTCOMES

- Trauma-Informed and Restorative Practices served 3,151 people from July through December 2021. Two-thirds of people served were BIPOC. 70 percent of youth reported a strong sense of cultural identity after participation.

School-Based Screening, Brief Intervention and Referral To Services (SBIRT)

- **\$4.4M** invested in 2021
- **12** community partners

When youth have an opportunity to process their concerns and share their hopes for the future, it can transform difficult days into positive experiences. Best Starts for Kids partners with 12 school districts across King County to identify youth who may benefit from additional resources early, using a teen-friendly screening process designed for middle school students. SBIRT reached 10,113 students in 2021.

SBIRT community partners participated in a learning collaborative, which facilitated district, school, and SBIRT staff's ability to support the ever-changing landscape and adjust when necessary. In these collaborative meetings, leaders developed protocols for remote SBIRT.

2021 OUTCOMES

- In September–December 2021 schools screened 5,752 students, significantly more than were screened in all of 2020. Of those screened, 2,215 students received at least one brief intervention and 965 received at least one referral in 2021.
- Among students who were provided with one or more referrals, 44 percent of referrals resulted in a successful connection to behavioral health or other type of service.

Out-of-School Time

- **\$3.3M** invested in 2021
- **29** community partners

High-quality Out-of-School Time programs directly correlate to children and youth's academic gains, social emotional well-being and improved health. Best Starts for Kids partners with School's Out Washington to fund **29 organizations that offer culturally relevant after school and summer programs** for youth in underserved areas of King County. School's Out Washington also provides coaching and training opportunities to support Out-of-School Time partners in strengthening program quality and incorporating best practices for how they interact with and engage youth.

Out-of-School Time continued to provide much needed support during the COVID-19 pandemic. Several Out-of-School Time partners built off their deep community relationships and trust to increase access to the COVID-19 vaccine and information through vaccine pop-ups and clinics. Many organizations reported high numbers of youth facing mental health challenges because of prolonged isolation, lack of academic support, and ongoing stressors due to the pandemic. To address this, several partners reintroduced in-person programming some or all of the time.

“With the support and mentorship of our staff, youth are becoming much more outgoing and seem to be moving out of some of the emotional stressors and impacts resulting from the pandemic and isolation.”

— Jillian Lowe, Outreach & Volunteer Coordinator, Boys & Girls Clubs of Bellevue

2021 OUTCOMES

- 2,102 children and youth participated in high-quality Out-of-School Time opportunities, a 38 percent increase in participation from 2020. 7,608 hours of virtual programming were provided.
- Out-of-School Time awardees distributed 736 technology devices to support youth in accessing Out-of-School Time programs and virtual schooling.
- 86 percent of partners reported gains for young people, including strengthening social emotional learning and academic skills.

School-Based Health Centers

- **\$1.7M** invested in 2021
- **10** community partners

School-based health centers (SBHCs) meet students where they are by offering confidential medical and mental health services at school locations.

SBHCs are geographically embedded in the communities they serve. This ultimately helps to increase community capacity and strengthen the partnership between the SBHC and the community.

New community partnerships developed during the 2021 school year providing various opportunities to expand resources to the SBHC communities.

A relationship between an SBHC, an optical company, and a local community-based organization helped provide eyeglasses to youth who did not have vision insurance. Other collaborations with community partners helped provide basic needs such as food, clothes, and affordable housing to families.

2021 OUTCOMES

- Students made 4,735 visits to school-based health centers for primary care, behavioral health, and preventive care.
- 992 people accessed services at school-based health centers.
- The new School-Based Behavioral Health Diversion Pilot served 135 youth (including 128 Black and Brown youth), which aims to support students with early signs of behavioral issues that could lead to discipline and suspension in schools. 49 percent of youth were referred to services, and 65 percent of youth achieved at least one goal, including academic or attendance-related goals and connections to behavioral health supports.



Family and Community Connections

Through the Healthy and Safe Environments, Family Engagement and Washington Child Health Improvement Partnership (formerly Adolescent Immunization) strategies, Best Starts for Kids builds connections between families, educators, health professionals, and others working to provide young people with health care, healthy food, and safe and secure places to live, learn, and play. With support from Best Starts, communities are changing policies, sharing skills and best practices, and forging new collaborations that help kids and teens flourish.

Healthy and Safe Environments

- **\$1.1M** invested in 2021
- **14** community partners

Best Starts for Kids works with community partners to create healthy and safe environments for children, youth, and families, with a focus on improving policies and practices to increase access to healthy food and physical activity, reduce exposure to unhealthy substances, and give residents the best chance to be safe and secure in their homes, work, and other places they spend time.

In 2021, Best Starts continued our investment with 14 community partners that in total created 20 policy changes, double the number of policy changes in 2020.

Community partners prioritized equity and shifted resources to wherever the greatest needs emerged. From updating policies to serve children of essential workers while in child care, to empowering youth leadership in racial justice initiatives, partners worked to create community-driven structural and institutional change. Overall, 111 partners successfully led projects affecting 45,935 young people and community members across all nine districts of King County.

2021 OUTCOMES

- 3,401 participants attended one of the 172 trainings and workshops hosted by partners. Through this work, 111 connections were made or strengthened, including new or expanded partnerships, and 102 systems and environments improved.
- Elementary physical education teachers in the Northshore School District partnered with Occupational and Physical Therapists for Early Learner Fitness curriculum training. The new curriculum reached 3,161 kindergarten and first grade students in the school district.

Washington Child Health Improvement Partnership

- **\$306K** invested in 2021
- **1** community partner

Washington Child Health Improvement Partnership (WA-CHIP; formerly Adolescent Immunizations) works to ensure young people have access to high-quality health care so they can grow

into happy, healthy adults. WA-CHIP facilitates structured learning activities with pediatric health care professionals aimed at improving care within clinic settings, while also bringing together key partners to address systemic barriers to health care.

Immunizations are a vital part of preventive care and a priority for this partnership. In a time of staffing shortages and increased COVID-19 demands, WA-CHIP Immunization Quality Improvement Coaches supported physician and nurse champions at ten clinics to focus on teen vaccinations. A post-intervention survey administered to all staff at participating clinics identified that 96 percent of respondents agreed that their participation in the project will lead to lasting improvement in patient care. The WA-CHIP partnership supported seven clinics, reaching 20,759 adolescents.



Photo: Adobe Stock

Family Engagement

- **\$3.0M** invested in 2021
- **20** community partners

Trusted adults in a young person's life increase the likelihood that youth will experience academic success, get a job, and make healthy choices. A consistent and supportive family presence can especially make a difference for a young person during times of transition.

Best Starts for Kids recognizes that "family" is broadly defined as the people who care for youth. Positive Family Connections' 20 community partners work to strengthen relationships between middle and high school-aged youth and their parents and caregivers.

With a focus on building protective and promotive factors, providing support in times of need, and increasing the knowledge of adolescent and social emotional development, youth — together with their parents and caregivers — can navigate changing relationships in a positive way.

91 percent of young people and **58** percent of parents/caregivers increased their connection to peers, family, culture, and/or community.



Photo: Marcela Gara

2021 OUTCOMES

- 2,970 parents/caregivers and 1,311 young people participated in programming designed to foster healthy adult-youth and parent/caregiver-parent/caregiver relationships, communication, and cultural connection.
- 91 percent of young people and 85 percent of parents/caregivers reported increasing their knowledge or skills related to strengthening family relationships.

Community-driven solutions to meet basic needs

The COVID-19 pandemic increased the need for basic resources, mental health referrals and navigation systems for families. The Family Engagement strategy supported establishing connections and building relationships between awardees to support in the allocation of resources needed for families in the community. \$90,000 worth of food assistance was distributed to family participants in response to rising food insecurity.

Transitions to Adulthood

- **\$3.3M** invested in 2021
- **12** community partners

King County offers opportunities for young adults just beginning their careers. To ensure those opportunities are accessible to all young people, Best Starts for Kids expands access to education, job training, and other services for youth and young adults to help them prepare for employment. Communities leverage Best Starts to complement existing efforts that help young people with behavioral health services, peer support, and programs focused on pathways to high school completion and post-secondary education.

In 2021, due to the continued impacts of the COVID-19 pandemic, there was a decline in school attendance and youth participation in programming. Jobs and paid internships for young people were difficult to obtain, and families saw an **increased need** for food assistance and other basic needs. To address these concerns, community partners provided laptops for student learning, food assistance, and basic resources. Community partners' established relationships at alternative learning sites contributed to a seamless inclusion of counseling and emotional support to help young people.

2021 OUTCOMES

- 482 young people (a 33 percent increase from 2020) accessed behavioral health or other services offered at re-engagement sites across King County to help them maintain stability while they completed post-secondary education.
- 540 young people enrolled in work-training education programs. Of those completing the program, 74 percent stayed in school, graduated, or enrolled in higher education.
- 286 young people enrolled in employment programs that connected them with internship and employment opportunities. 30 percent of young people were placed into paid internship, apprenticeship or employment opportunities despite the economic challenges presented by COVID-19 and a lack of youth employment opportunities.
- 142 young people engaged with peer connectors from their communities who helped them connect with one of King County's more than 30 education and employment programs for young adults. More than 40 re-engaged with school or employment.

“Our holistic approach with students compels us to explore the fullness of their experiences as they pursue post-secondary education, paying close attention to their passions, their imagination, and their dreams. As we coach them through their objectives, we also take note of their fears, emotional state, and the systemic barriers that influence their level of confidence. We believe each youth deserves access to experiences and opportunities that can positively foster principles of growth that cause their lives to thrive. We also uphold that youth uniqueness is to be celebrated and is part of the equation in their individual and communal successes.”

— Kim Lee, Youth Program Manager, Refugee Women's Alliance

Promoting healing through art

When children and young people have the resources, opportunities, and safe spaces to express themselves, they and their communities flourish. Funded by Best Starts' School-Based Partnerships strategy, Delridge Neighborhood Development Association partnered with Arts Corps. Through this partnership, young people experienced the transformative power of creativity and gained a deepened belief in their own capacity to learn, take risks, and achieve their goals. One of the teaching artists shared, “Students have been utilizing art as a way to interpret the world through colors and how different cultural art forms influence our perceptions of society and knowledge.”

As a result of the Arts Corps program, students have been open to learning new creative skills and sharing techniques with each other, forging strong relationships. During the ongoing pandemic, the Arts Corps program has served as a creative and healing practice allowing young people to share their experiences, abilities, and dreams with one another.



Stopping the School-to-Prison Pipeline

- **\$4.8M** invested in 2021
- **18** community partners

Best Starts for Kids invests in efforts to support young people and young adults in King County who, because of systemic and institutional racism, are more likely to be excluded from higher education and employment and pushed into the criminal legal system.

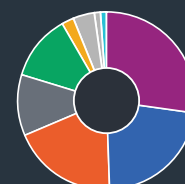
Community partners built trusting relationships with young people through engaging in meaningful conversations about their concerns, most stemming directly from the pandemic. Many of our partners were able to help young people address family conflicts resulting from the stressors of the pandemic. Community partners assisted in connecting young people and families most impacted by the pandemic and systemic racism to vaccination and other COVID-19 related resources. Together, these opportunities help give young people equitable access to trusted resources and partners that provide pathways from school to life success.

75 percent of participants in Stopping the School-to-Prison Pipeline's Community Supports program achieved their goals for school attendance, academic performance, or applying for or getting a job.

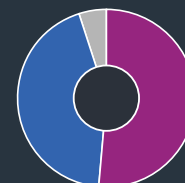
2021 OUTCOMES

- 1,147 young people participated in services that helped connect them to resources, a healthy system of support for meeting their goals, and advocates who can champion their voices. 75 percent of participants achieved one of their goals, such as increasing school attendance, improving academic performance, or applying for and getting a job.
- 71 young people involved in the legal system accessed education and legal services through a partnership between Best Starts, the King County Prosecuting Attorney's Office Truancy Team, Neighborhood House, Reconnect to Opportunity, and Youth Source — increasing the likelihood that they will remain in school and graduate into employment.
- Staff conducted outreach with 425 youth at the mall and 17 young people participated in Theft 3 and Mall Safety (T3AMS), part of a pilot project at Westfield Southcenter. T3AMS directs young people who make the mistake of shoplifting into mentoring and other support and out of the legal system. 64 percent of those who completed the program achieved a service plan goal.
- 59 young people involved in the legal system participated in the Community Empowered Disposition Alternative and Resolution (CEDAR) program. Of those who have completed the program, 85 percent received a recommendation for a reduction in charges or case dismissal, an increase from 67 percent in 2020.

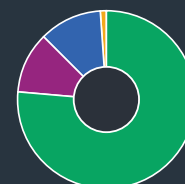
SUSTAINING THE GAIN 2021 DEMOGRAPHICS



Race groups are mutually exclusive.



Gender identity is not binary. Individuals included in "Another gender" reported an identity that is not among these response options. This includes but is not limited to persons identifying as transgender, non-binary, questioning, and/or gender-nonconforming.



These data include children, parents and caregivers served.

Data are provided only for individuals for whom information is available and relevant. Individuals who are enrolled in more than one program may be duplicated in the demographic data. Totals may not add up to 100% due to rounding. Not all programs collect the "Middle Eastern or North African" race/ethnicity category or detailed gender identity data, which may lead to undercounting of these populations. See [full results online](#) for complete information.

Communities Matter



By investing in community partnerships and power, **Communities of Opportunity** fosters collaboration so that:

- Community members, through civic engagement, express issues that affect them and lead in forming solutions.
- Community connections and relationships are strengthened, and community members are heard, acknowledged, and feel they belong.
- Anti-racism and equity principles are integrated into systems, policies, and practices at all levels.
- Children, youth, and families have access to what they need to be safe, healthy, and strong.
- **All people in King County have safe and affordable housing, economic power, and are healthy and active participants in community and civic life.**

Centering community and advancing equity

MEETING THE MOMENT:

creating a community of belonging

Communities of Opportunity (COO) brings people together through the building and shared understanding of greater equity in King County. One such opportunity was [Meeting the Moment: Community Conversations on Healing, Organizing and Building the Future We Want](#).

A virtual gathering of community leaders, activists, artists, organizers, storytellers, and experimenters, *Meeting the Moment* provided space to come together to foster critical connections and co-create spaces for healing, relationship, and innovation. The event highlighted innovative work and powerful organizing in communities across King County to support racial equity and well-being, centering three core values: 1) uplifting and sharing the work of COO partners, 2) addressing and dismantling anti-Blackness, as key to solidarity work and liberation, and 3) creating a community of belonging.

“*I think those are the values that we've taken to heart at Wa Na Wari and really [think] about. How does collective care, collective responsibility, collective creativity...how does that center in how we think about ownership? How we think about what we're doing? How do we think about our future, and how do we move forward with those values [that] really [define] us?*”

— Inye Wokoma, Wa Na Wari, Meeting the Moment Panel: Collective Ownership

Meeting the Moment highlighted the work of COO partners and aligned community organizations, while engaging community members and institutional stakeholders in strategic conversations about innovative strategies and approaches with local leaders in the field. The event gathered 238 attendees, hosted 10 sessions across 3 tracks (Connection & Healing, Organizing & Advocacy, and Future Visions), featured a keynote from Autumn Brown, storytelling with Fern Renville and Roger Fernandes, and ended with a guided art reflection by Mari Shibuya.

As COO continues to center and collaborate with communities in King County for greater equity, well-being, and belonging, *Meeting the Moment* serves as a reminder of one seed planted. One seed that will continue to be supported and grow over time, shifting the world from what it is to what it should be, creating sustainable spaces for thinking big, connecting, organizing, and building together while deconstructing transactional ways of being.

Meeting the Moment graphic,
Cascadia Consulting

Photo Courtesy of Wa Na Wari



[View the video](#) from *Meeting the Moment: Community Conversations on Healing, Organizing, and Building the Future We Want*

Communities matter if children, youth, and families are going to be healthy and thrive.

COO supports community-led efforts in King County to build safe, healthy, and thriving environments for people furthest from health, housing and economic justice. As a network of residents, decision-makers, and funders, COO approaches social change through partnerships that work to shift policies, systems, and relationships toward a just and equitable future. Since its launch in 2014, COO has invested in initiatives to change conditions in communities through collaboration with more than 180 organizations to create more than 450 new partnerships and develop leadership in more than 2,000 community members.

The continued impacts of the COVID-19 pandemic and the call for transformational change from movements for racial justice brought new urgency to respond to the immediate needs of those most affected by systemic inequities. Increasing power within communities matters now, more than ever, to effectively respond to COVID-19 and deepening health and economic disparities. In 2021, Best Starts COO investments centered community strength through robust partnerships that innovatively addressed community needs, advanced equitable policies and practices, and provided flexible support to community partners.

Best Starts delivers impact across all investments. All funded programs are actively delivering services, and performance data measures may be found [HERE](#).

“*Kent Community Development Collaborative (KCDC) is the glue that brought us all together...we have developed stronger relationships and are able to share victories and overcome issues and problems [as one]. KCDC gave us an opportunity to partner on a more effective and authentic level...to move to systems change work.*”

— Kent Community Development Collaborative (KCDC)

2,480 capacity building, community, and workforce development events

67,040* community members participated in partner-sponsored events

858 community members took on leadership positions

142 new partnerships developed to support progress toward policy and/or systems change

215 community members hired into jobs as a result of COO activities

\$11.9M total investments in 2021

COO is a unique community-public-private partnership, funded jointly by Best Starts for Kids and Seattle Foundation that supports transformational change in communities through three interrelated strategies:

- 1) Place-based and Cultural Community Partnerships,**
- 2) Systems and Policy Change, and**
- 3) Learning Community.**

* Number may include duplicates. Reduction in participation compared to 2020 reflects move to hybrid engagement.

Place-Based and Cultural Community Partnerships

- **\$4.4M** invested in 2021
- **62** community partners

Best Starts for Kids builds on the expertise of community partners to drive change locally through geographic and cultural community partnerships. COO works with coalition partnerships in neighborhoods and cultural communities to advance better health, safe and affordable housing, increased economic opportunity, and stronger community connections for residents.

2021 OUTCOMES

- 112 community members participated in sustainable food systems trainings with Comunidad Latina de Vashon (CLV) including discussions of cooperative business models as supportive models for food security. CLV also began catalyzing health promotion models and economic development programs to create sustainable access to healthy and culturally relevant food.

“ We recognize that our vision may take many years. It requires growing and sustaining community power to overcome barriers. By building on our strengths, organizing community, and using our collective power to change policy and systems we can ensure our communities, businesses, centers of faith, and cultural institutions and organizations will thrive in place.”

— AJ McClure, SeaTac-Tukwila Community Coalition

CLV successfully implemented three “pop-up” markets, the last attended by over 400 people with over 40 community members participating as vendors and providing support and planning. CLV also held leadership trainings with over 50 community leaders and led a community conversation campaign reaching members from over 350 families to better understand communities’ ideas on mental health.

- Over 500 residents participated in Kent Community Development Collaborative (KCDC) workshops to share and receive information relevant to their communities, including health equity, housing justice, and civic engagement. 22 community members received training through the inaugural KCDC Leadership Institute. 8 residents served on the KCDC Community Advisory Council to give input and feedback on issues impacting Kent residents, plan for changes they wish to see in the community, and interface with other regional policy groups.

- Rainier Beach Action Coalition (RBAC) distributed over 6,000 pounds of free, fresh, culturally relevant produce through the Farm Stand program. RBAC also activated their new location, and modeled the intent of the (future) Food Innovation Center to support farmers from communities of color, providing access to fresh, healthy, affordable, and culturally relevant produce in the Rainier Beach area, and created leadership and employment opportunities for people in the community.
- SeaTac-Tukwila Community Coalition successfully launched a digital hiring hall with union partners and Partners in Employment (PIE) staff to do intakes and support workers applying for jobs. The Coalition also trained 20 youth in two cohorts, in partnership with the Machinists Institute Youth Academy (MIYA). The Coalition hosted 12 “know your rights” trainings on labor laws in five different languages reaching 22 participants in different industries. Finally, the Coalition launched a community housing team with 23 SeaTac resident members to engage on housing issues and policies.



Systems and Policy Change

- **\$2.6M** invested in 2021
- **87** community partners

Best Starts for Kids works to achieve racial, economic, and social justice so that communities are healthy and thriving. COO's policy and systems change investments help communities translate their ideas into actions through the promotion of equitable policies and practices that result in strong, inclusive communities.

In 2021, COO investments focused on community-designed and led COVID-19 response and resiliency actions and advancing racial equity by supporting Black-led organizations in leading policy change.

2021 OUTCOMES

- The UTOPIA WA Tautua Trans Leadership Cohort supported 34 trans women of color through leadership development and multiple trainings, workshops, and connection building events. These events supported and strengthened the leadership of those directly impacted by the systems needing to change while connecting to land and to cultural practices. This included participation in the Mala Ka Aina (Care for the Land) program, focused on effects and causes of climate change and "[Vaka: The Voyage](#)". The program was the culmination of a two-month process involving 50 transgender women engaging in traditional cultural practices and art, sharing Indigenous identity, cultural identity, and practices, as well as authenticity and freedom in their lived experiences.

- Muslim Community & Neighborhood Association (MCNA) trained 93 BIPOC community members in fundamental advocacy information and strategies, including sharing with local elected officials why it's important to hear from BIPOC, Muslim, and immigrant communities.
- Open Doors for Multicultural Families (ODMF) graduated two parent leadership cohorts. These 26 family members from 12 different cultural backgrounds received 75+ hours of ongoing training, mentoring, and support from ODMF staff to participate in advocacy and community events for language access, civic engagement, and disability justice.
- The Skyway Urban Food Systems Pact held 56 community and educational events, and developed a "Local Foods, Local Places" community action plan with over 100 community members. These events were part of an array of aligned activities to create an emergency food access system in Skyway that reflects the dignity of those it serves and is a model of community-led food access programs. The Skyway Urban Food Systems Pact transformed the traditional charity model of the food bank system to a platform for community building, community organizing, and real systems change.

Learning Community

- **\$3.2M** invested in 2021
- **19** community partners

Best Starts and COO invest in opportunities for communities to collaborate and coordinate

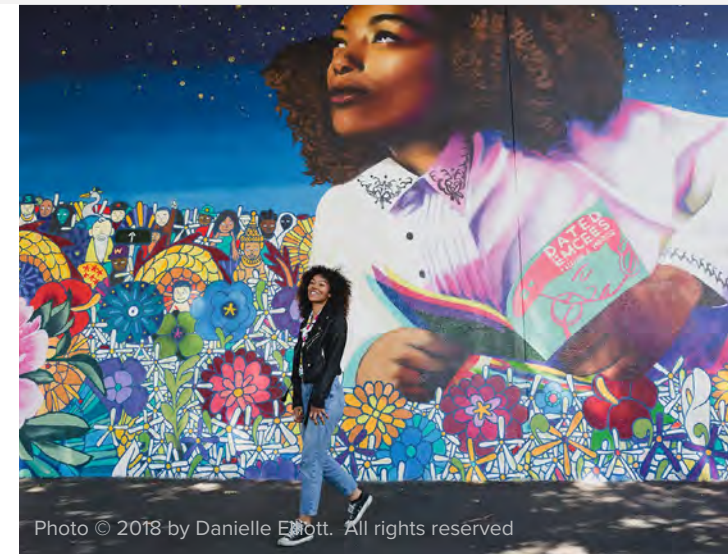


Photo © 2018 by Danielle Elliott. All rights reserved

efforts for the greater good. COO's Learning Community strategy leverages the power of collective knowledge to accelerate change. COO provides resources to support experiences and activities that deepen a shared understanding and analysis of the root causes of inequity. The Learning Community also creates a space to collaborate and learn about approaches and models being developed within King County and across the country to promote healthy and sustainable communities.

2021 OUTCOMES

Collaborations from the COVID-19 Data & Storytelling cohort project — [Centro Cultural Mexicano](#), [Collectivo de Pueblos Originarios](#), [King County Equity Now \(KCEN\)](#), [Tesfa Program](#), [Washington Dream Coalition \(WDC\)](#) — produced new data, findings, and recommendations on the impacts of COVID-19 within many communities. The project's work impacted Black, Indigenous, immigrant, and undocumented communities and the systemic changes needed to affect inequitable and unjust outcomes shaped by racism and marginalization.

Project outcomes included:

- Through the Learning Community, COO supported 56 virtual activities including 40 trainings, 7 ongoing cohorts, 6 coaching series, 1 mini grant process, and 1 helpline, with 1,731 attendees across all activities (1,213 unique attendees).
- **13 Months of Sunshine** podcast series from the Tesfa Program on the experiences of the local Amharic-speaking Ethiopian community, with a toolkit for healthcare and public health providers forthcoming.
- **Ya Es Tiempo (The Time is Now)**, a short documentary film from Centro Cultural Mexicano.



Cuidate/Care by
Hinojos & Jimenez Art

- **The Resilience of Indigenous Communities in Times of COVID-19**, a qualitative research and storytelling project on the impacts of COVID-19 on Nuu Savi, Purhepecha, and Kichwa diaspora community groups that make up the Collective de Pueblos Originarios.
- **Community Provides: Undocumented Communities in Washington State During the COVID-19 Pandemic**, a report and corresponding factsheets showcasing data and stories from over 78,000 undocumented immigrants who applied for state relief funds.
- **King County Equity Now**, engaging directly with incarcerated community members and their support networks to learn how COVID-19, amidst racial injustice and economic pandemics, has impacted them and what strategies and accessible pathways can be created to advance equity solutions and strengthen community relationships.

“Hearing from the other cohort members and from the guest speakers [and] experts has reinforced and strengthened our understanding that the story of the community must come through as a way to move the best practices and policies forward.”

— Tesfa Program

“The COVID-19 pandemic deepened the already heavy hardships of the undocumented community. It also spotlighted the power of community care. When we, as undocumented organizers and allies, stepped up to create supports for those who were left out, we saw how our systems can be reimagined and transformed.”

— Washington Dream Coalition



Community Provides: Undocumented Communities in Washington State During the COVID-19 Pandemic, WA Dream Coalition; cover image by Rommy Torrico

Homelessness Prevention



Finding refuge with the support of a close confidant



When families have access to stable, long-term housing, they thrive and can work towards their goals. In the fall of 2021, Brielle woke up her mother, Jody, to alert her to the fire sweeping through their family's apartment complex. Jody rushed to wake her two granddaughters — Lyra, age 8, and Bethany, age 11, and the family immediately evacuated their home. They safely made it out but had to leave behind all their personal belongings. Once again, the family was at imminent risk of becoming homeless.

In the chaos of the next morning, Jody knew who to reach out to — Thomas, a case manager from The Arc of King County. Thomas had previously supported the family's search for housing in early 2019 after they were forced to leave their living situation and partnered to support them as they transitioned to the new apartment. "After Jody started working full-time and the family was doing well in their living situation, we didn't need to connect as much. But once the fire happened, we were there to immediately support them again through this crisis," Thomas says.

The Youth and Family Homelessness Prevention Initiative (YFHPI) collaborates with community partners like The Arc of King County, which serves young people and families with intellectual and developmental disabilities, to identify the needs and gaps in support for families with young adults in crisis and intervenes quickly to assist with maintaining their housing. YFHPI helps to resolve immediate housing crises by combining professional, high-quality relational case management support with flexible financial assistance where needed.

For the next several weeks after the fire, Jody, Brielle, Lyra, and Bethany temporarily lived in a motel while staff from the The Arc of King County worked collaboratively to locate affordable, long-term rentals. The Arc was able to use YFHPI flexible funding to support the household's moving expenses, since the family did not have these resources. YFHPI case management not only works to resolve immediate housing instability but ensures households have connection over time to additional support when needed.

In mid-January 2022, the family moved into a new apartment overlooking the Cascade mountains — just in time to celebrate Brielle's 18th birthday. "The holidays were so challenging... but we got a small tree and found ways to celebrate despite the difficulties," Jody says. "There were times I felt so defeated... but I knew that The Arc of King County team was there believing in us and telling me that we could do it — that we would find something. It was important that we already had a strong relationship with our case manager Thomas. I knew I could rely on and trust him."

The traumatic experience of losing a home and navigating uncertainty is still present for Jody and the girls, but she says that she has a big goal she wants to continue to work up towards: buying a home. "I want to make sure that my kids and grandchildren have a place to call their own long-term and can continue to succeed."

The best opportunity to end homelessness in King County is preventing it.

COVID-19 and systemic racism exacerbated inequalities in housing and economic stability, straining many households already concerned with making ends meet. Best Starts for Kids' Youth and Family Homelessness Prevention Initiative provides critical resources to help youth and families at risk of homelessness stay housed and safe, with long-term benefits that strengthen and stabilize our communities.

Through Best Starts, King County is investing \$21 million towards preventing homelessness for children, youth, and their families. To date, of the more than 11,000 youth and families served by the Youth and Family Homelessness Prevention Initiative, 94 percent who exited the program did not need homelessness services within the next year. This investment is vital to how King County recovers and rebuilds together, fostering a healthy, thriving region where no young person or family lives in fear of housing instability and homelessness.

Best Starts delivers impact across all investments, with all funded programs actively providing services and sharing [performance data](#) for the year.



Photo: Adobe Stock

94% of participants did not require homelessness services within 12 months of exiting to permanent housing

82% of households served were households of color

\$3.5M total investments in 2021

See outcomes of Best Starts for Kids Homelessness Prevention investments across King County [here](#).

The most common reason families sought financial help was to pay rent so they could stay housed. It takes an average of **\$2,831** to meet that need for support.

Youth and Family Homelessness Prevention Initiative

- **\$3.1M** invested in 2021
- **25** community partners

The Youth and Family Homelessness Prevention Initiative works as part of a coordinated system to reduce the impact of homelessness on youth in King County by resolving housing crises before they result in housing loss. The initiative focuses on reaching communities at greatest risk, including families and youth from BIPOC communities, immigrant and refugee families and youth, LGBTQ+ youth, and victims of domestic violence, commercial exploitation, and human trafficking.

The initiative intentionally funds partners that serve these communities such as:

- **API Chaya**, a domestic violence agency empowering survivors of gender-based violence and human trafficking
- **The Arc of King County**, serving people with intellectual and developmental disabilities
- **Mother Africa**, supporting African refugee and immigrant women and their families
- **YouthCare**, dismantling systems of oppression that push young people, particularly BIPOC youth, into homelessness

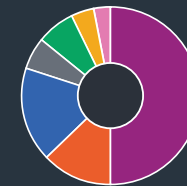
In collaboration with diverse community partners, the Youth and Family Homelessness Prevention Initiative identifies the needs and gaps in support for families with children and young adults in crisis, then intervenes quickly to help them maintain housing. Professional case management that integrates equity and social justice into its delivery of services, combined with flexible financial assistance where needed, helps to resolve immediate housing crises.

In 2021, our community partners adapted their approaches to providing case management services, following COVID-19 health and safety measures and guidelines. Case managers worked collaboratively to refer households between agencies through weekly remote case conferencing, ensuring services remained streamlined by using virtual technology, and working directly with King County staff to engage King County's Eviction Prevention and Rental Assistance teams.

2021 OUTCOMES

- The Youth and Family Homelessness Prevention Initiative served 3,202 individuals in 2021. This support included assisting with housing searches, connecting to employment resources, language and cultural support, working directly to resolve conflicts with landlords, and budgeting and housing stability planning.
- From 2017 to 2021, 94 percent who exited the program did not need homelessness services within the next year.

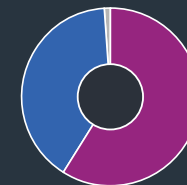
HOMELESSNESS PREVENTION 2021 DEMOGRAPHICS



Race groups are mutually exclusive.

RACE/ETHNICITY

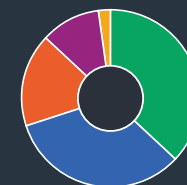
- American Indian/Alaska Native: 4%
- Asian: 7%
- Black/African American: 50%
- Hispanic/Latinx: 13%
- Multiple races: 6%
- Native Hawaiian/Pacific Islander: 3%
- White: 17%



GENDER IDENTITY

- Female: 59%
- Male: 40%
- Another gender: 1%

Gender identity is not binary. Individuals included in "Another gender" reported an identity that is not among these response options. This includes but is not limited to persons identifying as transgender, non-binary, questioning, and/or gender-nonconforming.



AGE IN YEARS

- <5: 17%
- 5-17: 37%
- 18-24: 11%
- 25-54: 33%
- 55+: 2%

These data include children, parents and caregivers served.

Data are provided only for individuals for whom information is available and relevant. Individuals who are enrolled in more than one program may be duplicated in the demographic data. Totals may not add up to 100% due to rounding. Demographic categories determined by federal guidelines.

See [full results online](#) for complete information.

Capacity Building and Technical Assistance



Growing the capacity of small organizations supports them to deliver high-quality services, resulting in more sustainable communities and equitable outcomes.

Small organizations grounded in communities often face systemic barriers and inequities in accessing public or private funds to build their capacity or infrastructure. To address this challenge, Best Starts centers community needs and meets them by providing culturally relevant resources and guidance to support community-based organizations both before and after they receive funding from the initiative. Technical assistance helps organizations become more competitive through the funding process, and capacity building helps Best Starts partners develop stronger infrastructure, increasing their ability to use funding effectively and to secure additional funding from private, state and federal sources.

Co-creation between Best Starts for Kids capacity builders and Best Starts partners was essential to implementing substantive changes within organizations in 2021. Some examples of projects that Best Starts partners were able to complete with capacity building support include migrating files from individual staff computers to the cloud, creating a new website that enables community members to enroll in services virtually, facilitating board trainings to ensure new board members understand their responsibilities, and helping to craft fund development plans that include social media giving strategies.

“*BSK's capacity building support has been one of the most supportive resources to grow our organization and expand our mission during the pandemic! My coach, Sarah Tran, aided me in establishing goals for board development and transition, leading us to onboard three new members. We also received support to develop and hire a new Operations and Finance Manager position that was critical to FEEST's infrastructural growth. Recently, we created a multi-year budgeting tool in order to strengthen our long-term planning, as well as sustainably and equitably grow staff and compensation.*”

— Jaimée Marsh, Executive Director of FEEST



Best Starts for Kids Evaluation in 2021

Best Starts for Kids is committed to evaluating all of our strategies and programs to ensure that we are moving toward our vision of happy, healthy, safe, and thriving youth and families.

Results Based Accountability (RBA) is fundamental to Best Starts. RBA is a plain-language framework that starts with the vision we are trying to achieve and works backward toward the strategies for getting there. The framework tracks the performance of Best Starts strategies, so that we know what is working and what may need adapting, through three types of performance measures.

1. How much did we do?
2. How well did we do it?
3. Is anyone better off?

Best Starts works together with all funded partners to identify performance measures.

Performance measures notes

When reviewing the following performance measure tables, it is important to note:

- Individuals may enroll in more than one program funded by Best Starts.
- Best Starts-funded programs often leverage funding from multiple sources.

In 2021, the COVID-19 pandemic continued to impact programming across Best Starts investments. Programs showed creativity, perseverance, and flexibility as they adapted programming to support the evolving needs of children, youth, and families while following the latest public health guidance.

Despite this hard work, the pandemic created several challenges for Best Starts programming that impacted data collection and [performance measures](#) in consistent ways across strategies.

1. **Engagement varied.** Youth and families experienced screen time fatigue and many programs were impacted by pandemic-related closures and restrictions, which reduced the number of participants for some programs. In other programs, participation was higher due to increased need, in-person engagement, and the accessibility of virtual programming.
2. **Data collection was challenging.** Demographic data collection and outcomes surveys are hard to conduct virtually, and youth and families were less comfortable sharing information when they had not made in-person connections. As a result, some surveys were not collected at all, and some had higher rates of participants choosing not to respond to questions.
3. **Population indicators were delayed.** Best Starts leverages population-level data collected by schools, and by state, and federal agencies. These institutions faced similar challenges, which delayed the availability of data. These data were not available at the time of drafting this report, but can now be [viewed online](#).

[Qualitative data from providers](#) show that where enrollment dropped, programs adapted by increasing outreach, making programs accessible through technology, and deepening supports by providing basic needs and public health resources.

Changes to performance measures for this year's report

Implementation and evaluation require occasional modifications as information becomes available over time. Listed below are changes to previously reported performance measures. Newly implemented performance measures resulting from the impact of COVID-19 are noted in the [performance measurement tables](#).

Investing Early: prenatal to 5 years

| Previous performance measure | Revised performance measure | Rationale |
|---|---|---|
| Help Me Grow | | |
| Help Me Grow King County: Core Team | | |
| Percent of identified coordinated access partners contracted with finalized work plans | Measure removed | Removed process measure that is no longer relevant for current implementation phase. |
| Number of Collaborators the Help Me Grow King County Core Team partnered back and forth with representing coalitions and organizations in different sectors | Measure removed | Removed process measure that is no longer relevant for current implementation phase. |
| Number of large community events/gatherings the Help Me Grow King County Core Team hosted or attended | Total number of events/groups by the Help Me Grow King County: Partnership Network | Activities shifted to funded partners and are now reported by the Help Me Grow King County: Partnership Network. |
| Number of participants engaged through meetings/gatherings the Help Me Grow King County Core Team hosted | Number of participants engaged through meetings/gatherings the Help Me Grow King County: Partnership Network hosted | Activities shifted to funded partners and are now reported by the Help Me Grow King County: Partnership Network. |
| Percent of identified sectors engaged by Help Me Grow King County Core Team | Measure removed | Removed process measure that is no longer relevant for current implementation phase. |
| Help Me Grow King County: Partnership Network | | |
| Total number of families served by the Help Me Grow King County: Partnership Network | Measure removed | Refined measures to focus on number of individual parents/caregivers and children served, rather than number of families. |
| Total number of pregnant people served by the Help Me Grow King County: Partnership Network | Measure added | Partners requested a measure specifically for pregnant people. |

| Previous performance measure | Revised performance measure | Rationale |
|--|--|--|
| Workforce Development | | |
| Capacity Building | | |
| Number of Best Starts Learning Community Meetings for Trainers | Measure removed | Workforce Development: Capacity Building strategy ended in 2020 and funding was shifted to other Workforce Development programs. |
| Large Group Trainings | | |
| Percent of participants who reported an increase in knowledge related to the promotion of infant and early childhood mental health (IECMH) as a result of the training | Measure removed | Now reported with Social-Emotional Well-being: Infant Mental Health Large Group Trainings. |
| Innovation Fund | | |
| Innovation Fund | | |
| Number of people who participated in and/or received one of the innovation strategies | Number of participants served, Number of training or event attendees | Evaluation plan finalized in 2021, with new performance measures. |
| Number of people who helped to design or deliver one or more of the innovation strategies | Measure removed | Evaluation plan finalized in 2021, with new performance measures. |

Sustaining the Gain: 5 to 24 years

| Previous performance measure | Revised performance measure | Rationale |
|---|---|--|
| School Partnerships | | |
| Trauma-Informed and Restorative Practices (TIRP) | | |
| Number of people participating in TIRP programs | Number of students/scholars and adults served by the TIRP LV Program | Developed new collective measures for 2021 to align reporting across all grantees. |
| Number of TIRP events or sessions for youth, teachers/ school staff, and parents | Measure removed | Developed new collective measures for 2021 to align reporting across all grantees. |
| Percent of participants who increased their competencies, knowledge or skills | Measure removed | Developed new collective measures for 2021 to align reporting across all grantees. |
| Percent of participants who adopted trauma-informed practices/behavior | Measure removed | Developed new collective measures for 2021 to align reporting across all grantees. |
| Percent of participants who feel more connected, valued and/or safe | Measure removed | Developed new collective measures for 2021 to align reporting across all grantees. |
| Percent of participants who assess the program positively | Percent of students/scholars satisfied with the TIRP LV Program | Developed new collective measures for 2021 to align reporting across all grantees. |
| Percent of students with improved attendance | Measure removed | Developed new collective measures for 2021 to align reporting across all grantees. |
| Percent of participants reporting improved school climate and culture | Measure removed | Developed new collective measures for 2021 to align reporting across all grantees. |
| Percent of youth with strengthened sense of self, identity and empowerment | Percent of students/scholars reporting a strong positive cultural identity after participating in TIRP LV Programming | Developed new collective measures for 2021 to align reporting across all grantees. |
| School-Based Health Centers (SBHCs) | | |
| Percent of SBHC users with drug/alcohol issues receiving a brief intervention and/or referral | Percent of students served by SBHCs with positive substance use screening who received a brief intervention and/or referral | Revised language to more clearly reflect the desired outcome. |

| Previous performance measure | Revised performance measure | Rationale |
|---|--|--|
| Family and Community Connections | | |
| Family Engagement: Kinship Care | | |
| Percent of caregivers who rated staff's sensitivity to their culture as "good" or "excellent" | Percent of parents/caregivers satisfied with programming | Revised language to align with other Family Engagement programs. |
| Percent of caregivers who felt the kinship services improved their situation "a lot" | Measure removed | Removed measure to align with other Family Engagement programs. |
| Percent of caregivers who felt their familiarity with resources "improved a lot" as a result of their contact with kinship services | Percent of parents/caregivers increasing their knowledge or skills related to strengthening family relationships | Revised language to align with other Family Engagement programs. |
| Transitions to Adulthood | | |
| Transitioning to Post-secondary Education or Employment: Work Training Education | | |
| Percent of youth/young adults gaining employment or entering postsecondary education upon program completion | Percent of youth/young adults placed into employment | Revised language to more clearly reflect the desired outcome. |

Investing early (prenatal to 5 years) program changes, overall successes and challenges

Best Starts for Kids asks all partners to answer a standard set of questions in addition to providing performance measure data. This helps us understand the stories behind the numbers. These responses are analyzed through a rigorous process to identify common themes for each question. Below are the most common themes we heard in 2021 along with quotes that illustrate each theme:

What *changes* have BSK Partners made to programs or organizations to better serve children, youth, families, or communities?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|---|---|--|
| Program improvements and innovations | Partners shared examples of program improvements by expanding services, increasing accessibility, and utilizing partnerships. | <p>“We introduced the enhanced cohort to support providers from our previous cohorts. We have adapted our trainings and consultations; offer in depth support in the areas of trauma informed care, business management strategies, social & emotional development and provider health and wellness. Providers were very receptive of the enhanced trainings and a few of the trainings resonated well with them. More specifically, the depth of the content and space has allowed some [of] our providers to have breakthrough vulnerability. This group has openly shared their experiences and supported each other.”</p> <p>— Child Care Health Consultation partner</p> |
| Investments in staff | Partners led and participated in a wide range of training and professional development opportunities in addition to improving compensation for staff retention. | <p>“Our whole team went from being hourly to salary during this program year and that has led to improved programming in various ways. For example, we are able to attend trainings and do more detailed prep for visits, especially for families that need tailored visits...Two of us have joined the BIPOC Community of Leaders for Reflective Practice which has been amazing and 6 of us have nearly completed our Infant Mental Health Endorsement application.”</p> <p>— ParentChild+ partner</p> |
| Keeping up with COVID-19 | As the pandemic evolved, programs did too by offering hybrid in-person and virtual services, adding COVID-19 components, and regularly updating policies and protocols. | <p>“Over the past six months, we have been able to use Zoom and SharePoint as means of communication, providing daily lessons for children, and hosting parent engagement and educational events, as well as training opportunities for teachers. Through this new form of communication, we have been able to maintain quality education for at home-learning, while also providing quality parent education classes. Due to COVID-19, many parents and teachers were worried that remote learning and being socially distant would create a disconnect between parent and teacher, but since using Zoom and SharePoint as a mode of communication, we have noticed a better relationship among staff and parents.”</p> <p>— Parent Caregiver Information and Support partner</p> |

What did Best Starts for Kids partners feel were the main successes that helped to accomplish program goals?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|--|---|--|
| <p>Program adaptation and scaling</p> | <p>Partners began to sustain successful elements of their Best Starts work and apply their expertise more broadly.</p> | <p>“In the last six months, we began working with King County Early Support for Infants and Toddlers (ESIT) to plan for scaling and sustaining our program. Initially, we thought the program was ending at the end of 2021. Given that King County ESIT wanted to replicate our project across ESIT sites, we began meeting with them to share our learnings. We continued to join visits virtually and enrolled families into the program. We began working on an implementation guide for replication of the work and planned to scale it to new cultural groups and sought funding to sustain the current program.”</p> <p>— Innovation Fund partner</p> |
| <p>Impacts for communities</p> | <p>Partners supported families to achieve their goals through trusting relationships and strong connections within communities.</p> | <p>“We have successfully screened 87 children for the ASQ-3 and 33 children for the ASQ-SE. We have referred over 100 children to Kaleidoscope Play & Learn playgroups, and currently close to 40+ families who are actively participating. Referred 2 families for further evaluation and 1 family got connected to services though [a] transition program through [a partner organization]. At least 33 parents and children successfully completed the Promoting First Relationships fidelity program. The feedback we received from the parents is such that they are so happy that somebody visits with them to work alongside them to promote their child’s social-emotional well-being.”</p> <p>— Universal Developmental Screening partner</p> |
| <p>Triumph through the pandemic</p> | <p>Despite incredible challenges, partners have found ways to thrive and learn from the pandemic.</p> | <p>“One major success we would like to highlight is that we have 100% referral rate and 96% early intervention service rate of families who are still engaged in children’s early intervention and/or special education services in our program. This is especially remarkable during the COVID-19 pandemic which has made delivering early intervention and special education services more challenging, and disproportionately impacting communities of color and immigrant communities. Also notable is that national rates of retention are markedly lower than our program.”</p> <p>— Help Me Grow King County partner</p> |

What did Best Starts for Kids partners feel were the major *challenges* or *barriers* to accomplishing program goals?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|-------------------------------------|--|--|
| COVID-19 fatigue | The second year of the pandemic tested communities and partners who were already experiencing trauma, extreme demands, and burnout. | <p>“A continued theme within the Collaborative is the nuances surrounding COVID adaptations that include zoom fatigue, scheduling updates, and staffing challenges with ill individuals who were also experiencing deaths in families, planning around COVID mandates and canceling events. All of this adding another layer of burden for partners and their staff while implementing and carrying out program activities.”</p> <p>— Prenatal Support and Chestfeeding Peer Counseling partner</p> |
| Sustaining the workforce | With increased demand for services to address complex needs, partners struggled to keep workloads manageable and provide staff with enough supports to be healthy. | <p>“There are workforce issues in many fields. In behavioral health, in particular, coming out of a year+ pandemic and meeting the anticipated needs of communities in crisis has taken a serious toll on behavioral health providers. Our program has operated with half the staff we should have and with families presenting with much greater needs due to the pandemic.”</p> <p>— Evidence-Based and Evidence-Informed Home Visiting partner</p> |
| Frequent changes to services | Partners shared how complicated and stressful it could be to offer hybrid, in-person or virtual services that met both public health guidelines and community preferences. | <p>“It has been difficult to consider all viewpoints, stay current with county, state, and federal regulations and guidelines related to COVID, and ensure equitable opportunities for families when some staff members have been more reluctant to return to in-person service delivery. The reverse has also been true — some therapists have felt strongly that in-person services would be more effective for certain children, yet the family has not been ready. Morale of staff and families has been an ongoing issue, one none of us could have foreseen would extend beyond 2020.”</p> <p>— Early Support for Infants and Toddlers partner</p> |

In what ways did organizations make progress toward *changing policies, systems, and environments* as a result of their Best Starts for Kids programs?

What we heard

What does it mean?

Best Starts for Kids partners told us ...

Systems working in new ways to achieve outcomes

As partners strengthen their programs, they also strengthen their ability to influence the systems they work with and hold those systems accountable to families.

“In 2021, WIC staff at the local and state level promoted the national expansion of the fresh fruit and vegetable benefits for WIC families. The increase in fruit and vegetable benefits meant that over \$21 million extra WIC benefits were available for over 95,000 Washington families that were served by the WIC program from April 2021 to March 2022. In King County, WIC touched the lives of [many] of those families. We are partnering with many community hunger advocates throughout King County and Washington State to make the increase a permanent change to the WIC food package which would further decrease hunger and increase access to fresh fruits and vegetables in our community.”

— Public Health partner

Equity continues to drive changes

When partners explain the purpose of policy, system, and environment changes they strive towards, it is primarily in service of antiracism and equity for historically oppressed populations.

“Our organization has made progress towards changing the environment by providing more trainings geared towards Black, Indigenous, and People of Color, as well as a training only in Spanish. We also are trying to improve the registration experience for large group training participants whose primary language is Spanish by creating registration forms in Spanish.”

— Social-Emotional Well-being partner

Partnerships are key for creating healthier systems and environments

Partners have built new collaborations to meet the pandemic-related needs of families, especially with governmental, school, health care, housing, and community-based organizations.

“With the raging pandemic and the eviction moratorium ending, we predicted that calls for rental assistance coming to us would continue to rise. To better serve our families, we created a rental assistance team within [our organization] and became a community partner of the King County Eviction Prevention Rental Assistance Program and the City of Seattle Emergency Rental Assistance Program. We have been connecting those calling our early childhood resource line needing rental assistance directly to our internal team. Our [Help Me Grow] staff have also been meeting with these families to help them with the application paperwork, especially those with language barriers.”

— Help Me Grow King County partner

Sustaining the Gain (5 to 24 years) program changes, overall successes and challenges

Best Starts for Kids asks all partners to answer a standard set of questions in addition to providing performance measure data. This helps us understand the stories behind the numbers. These responses are analyzed through a rigorous process to identify common themes for each question. Below are the most common themes we heard in 2021 along with quotes that illustrate each theme.

What changes have Best Starts for Kids partners made to programs or organizations to better serve children, youth, families or communities?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|---|--|--|
| Improving programming through partnerships | Partners connected with community-based organizations or school districts to reach new populations and offer new services they otherwise would not be able to deliver. | <p>“One major success was being able to partner up with many agencies to better serve our youth, families, and communities. It has provided financial assistance and given the opportunity for case managers to fully support their youth due to a high volume of assistance needed within our communities. [Our] case managers were able to support their youth with DACA, financial support, college enrollment, career goals, etc. Despite the pandemic and ongoing struggles with families, youth, and communities, case managers are still communicating and consistently supporting them through their goals.”</p> <p>— Stopping the School to Prison Pipeline partner</p> |
| Using feedback to respond to community needs | Partners used participant and community feedback to inform how programs should expand and change, ensuring they were responsive to the community's needs. | <p>“[Our organization] is committed to using information from key stakeholders to improve our programming. Over the past year we completed a student survey that yielded over 300 responses. In addition, our leadership team conducted over 20 community listening sessions with community based organizations we partner with or would like to partner with in the future. Our leadership team took all of the great information we received through both of these efforts and is working to set organizational priorities and design improvements based on the feedback. This fits well with our strategic plan and allows [us] to make intentional program developments that accurately reflect the needs of our students and our community.”</p> <p>— Transitions to Adulthood partner</p> |
| Keeping up with COVID-19 | As the pandemic evolved, programs did too by offering hybrid in-person and virtual services, adding COVID-19 components, and constantly updating policies and protocols. | <p>“Changing situations with COVID-19 has meant that many students have changing schedules that coincide with whatever circumstances are happening around them. These circumstances are largely out of the students' control. This is one of the small areas where offering virtual classes has been a benefit. Because it takes less time, energy and transportation coordination for students and teachers to set up a lesson, the window that students are able to attend classes is adjustable in a way that allows for them to keep a higher attendance rate. We know that it is difficult to incorporate self improvement classes into your schedule when you are balancing jobs, children, family obligations, etc. So we want to make sure that we can do everything we can to be as flexible as we can.”</p> <p>— Family Engagement partner</p> |

What did Best Starts for Kids partners feel were the main *successes* that helped to accomplish program goals?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|--|---|--|
| <p>Incorporating youth voice and leadership</p> | <p>Young people increasingly became involved in program planning and design, often returning in leadership roles or as mentors to other young people.</p> | <p>“Over the past six months, we have successfully completed two [program] cohorts, graduating twenty-six youth from our program. Many of these youth have chosen to continue being involved through their participation in the leadership program, where youth have the chance to empower themselves to keep learning and working on bettering themselves. The commitment and dedication we have seen in the youth is something we have also noticed to be a huge success. Many have expressed that this program has really guided them towards making choices that are more positive and doing better academically, socially, and emotionally.”</p> <p>— Youth Development partner</p> |
| <p>Participants achieved important milestones</p> | <p>Despite the challenges brought on by the pandemic, participants achieved important milestones, including high school graduation, employment, and building positive identity.</p> | <p>“One major success that we have had in our program is the increase in student grades. On average, our students were either maintaining their GPA or increased it significantly. This has helped our program understand how supportive our curriculum is to student learning. This success also showed us that the program support that we provide (instructors and tutors) is beneficial for supporting students in grasping concepts that they are learning at school.”</p> <p>— Stopping the School to Prison Pipeline partner</p> |
| <p>Providing comprehensive services through collaboration</p> | <p>Collaborations with community-based organizations or school districts helped partners offer more comprehensive and equitable services for young people and their families.</p> | <p>“We were able to collaborate care with King County Probation, Federal Way School District, and Best Starts to ensure several of the students were supported with wraparound services. This enabled the students to complete obligations with all supports necessary while maintaining school requirements/attendance/presentations. A factor that contributed to this success is the consistent team meetings that were arranged to prevent gaps in care for the students.”</p> <p>— Transitions to Adulthood partner</p> |

What did BSK Partners feel were the major *challenges* or barriers to accomplishing program goals?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|--|--|---|
| Frequent changes to services | Partners frequently shared how complicated and difficult it was to offer hybrid, in person or virtual services that both met public health guidelines and community preferences. | <p>“With COVID restrictions changing and the governor’s mandate to reopen in-person school, [our] scholars and families struggled with the sudden transition. As a result, online attendance decreased, class schedules changed, and through intentional, open and honest conversations with our students and their families, we learned that Black and Brown parents struggled with the decision to allow their children to re-enter an educational environment that historically has a track record of being hostile towards children of color. [Our staff] worked with parents, students, and in-class teachers to support scholars with their transition. We continued to provide remote classes and culturally responsive curriculum and activities that help scholars adjust to returning to an in-person classroom environment.”</p> <p>— Trauma Informed and Restorative Practices partner</p> |
| Increased mental health needs and burnout | Forming and sustaining relationships continues to be a challenge on virtual platforms, resulting in staff burnout and mental health impacts for young people. | <p>“Youth often would voice that they felt depleted having to work virtually doing homework while also engaging with [our programs] over zoom. In the time of COVID, it is no surprise that youth can struggle with the lack the physical interaction. In-person group work and peer-sharing is essential to youth emotional wellbeing when it comes to building friendships, connecting with staff, and problem solving in real time. Finding adequate ways to help the youth with their virtual isolation has been a challenge, so [our staff] consistently focus on helping them grow in their Social Emotional Learning capacity so they can cope with these challenges.”</p> <p>— Healthy and Safe Environments partner</p> |
| Sustaining the workforce | With increased demand for services to address complex needs, partners struggled to keep workloads manageable and provide staff with enough supports to be healthy. | <p>“...We have learned that it is extremely important to support the wellness and wellbeing of staff at [our organization]. This was highlighted during staff-wide town halls and team meeting discussions where our staff expressed concerns related to mental health issues like burnout, stress and anxiety, which affected their relationships with youth and overall program delivery... Staff wellness has [therefore] become priority of our 2022-25 strategic plan moving forward. This includes plans for improving professional development opportunities, organizational culture, staffing structure, and increasing engagement with youth and families. Elevating the voices of our staff and prioritizing their wellness and development in order to direct our work will ensure our team members feel valued, learn and grow alongside our youth.”</p> <p>— Youth Development partner</p> |

In what ways did organizations make progress toward *changing policies, systems, and environments* as a result of Best Starts–funded programs?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|--|--|--|
| <p>Systems working in new ways to achieve outcomes</p> | <p>Collaboration between Best Starts partners, school districts, and institutions allowed Best Starts partners to influence systems, improve coordination, and achieve equitable outcomes.</p> | <p>“[Our program] significantly positively impacted the school culture and climate through the racial sensitivity curriculum changes in which we were able to lead the discussion. We served in 7 committees and actively worked with 29 teachers and staff... We provided in and out-of-class academic and social-emotional support to parents and students. We co-hosted an 8-week discussion series with our PTSA for parents on 'Race, Identity & Bias,' and a parent requested, 4-week series on 'How to Talk To Your Children About Race.' We created [a daily zoom program] on Race, Ethnicity, Biases, Cultural ethnic achievements, and cultural appropriation of a group's work... Students left with expanded knowledge and pride in their ethnic history. Parent comments and appreciation supported the relevancy of the program and materials presented.”</p> <p>— Trauma Informed and Restorative Practices partner</p> |
| <p>Equity continues to drive changes</p> | <p>Programs participated in community efforts to make systems more equitable and anti-racist, while changing internal policies to better support BIPOC, LGBTQ+, and additional communities.</p> | <p>“The SBHC team has continued its strong focus towards being an anti-racist program whose services support equity for all... SBHC and [our partner's Equity, Diversity, and Inclusion leadership] partnered to develop a 4-part curriculum for program staff, with interactive all-staff discussions focused on inequities and structural racism in the systems we inhabit (healthcare, education, housing and segregation, etc.)... SBHC teams and leadership also developed school year race and equity workplans, each focused on advocacy and action to reduce the racial opportunity and wellness gaps seen in our schools.... We are excited and determined to continue this work, being a champion and ally to our students as they seek equity in their own educational and healthcare experiences.”</p> <p>— School-Based Health Center partner</p> |
| <p>Creating healthier systems and environments through partnerships</p> | <p>Relationships with schools and other community partners were more important than ever during the pandemic. Program staff worked with organizations to reduce access barriers for youth and improve communication.</p> | <p>“We have been collaborating with [two organizations] to create postcards, letters, and a social media toolkit to help clinics and schools raise awareness about the importance of staying up to date on vaccinations and the COVID-19 vaccine for children 12 and older. The messages created encourage parents to ensure their children have all vaccines for their safety while playing in the sun this summer as well as getting the required vaccines for the upcoming school year... [We] have also arranged public facing media to discuss topics such as myocarditis and pericarditis post-vaccination.”</p> <p>— Washington Child Health Improvement Partnership partner</p> |

Communities Matter overall successes, challenges, and progress toward change

Communities of Opportunity asks partners to answer a standard set of questions in addition to providing performance measure data. This helps us understand the stories behind the numbers. These responses are analyzed through a rigorous process to identify common themes for each question. Below are the most common themes heard in 2021, along with quotes that illustrate each theme.

What did COO partners feel were the main successes that helped to accomplish program goals?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|---|--|---|
| Working in partnership to further goals | Partners described the value of working in partnership, developing new or strengthening existing connections to further their equity work. | <p>“Continuing to develop and deepen partnerships with community members, organizations, and groups has been key to increasing our impact, building power for systems change, and better supporting our communities. We recognize that [our organization] and our community partners are interrelated and interdependent. Our community is best served if we all work together as part of a larger ecosystem to collectively work for systems changes to create a more just society.”</p> <p>— Place-Based and Cultural Community Partnership partner</p> |
| Building community power | Partners stressed the importance of building community power and leadership to effect meaningful, sustainable, equitable change. | <p>“...the most important has been galvanizing a sense of possibility for Black-led solutions. This starts with our organizing and research team members. With the exception of one person, our entire core organizing and research team are members of the Black community. All of them have experienced the effects of displacement first hand. Many of them have either lost family homes in the Central District or know someone close to them who have. Being a part of creating this work has given them a sense of possibility and empowered them with real tools and strategies to be a part of the solution. It is with this energy that they have engaged in doing the internal capacity building and development work, and the community outreach. Every time we have gone out into the community to talk about our work the response has been tremendous.”</p> <p>— Systems and Policy Change partner</p> |
| Ability to adapt, be responsive to community needs | Partners demonstrated flexibility and strength as they supported community needs and continued their work. | <p>“We are particularly proud of our work to make meaning from the many crises that have engulfed our lives these last two years... staff and members have been increasingly successful in situating the day-to-day emergencies and struggles of everyday people into the larger crises that are intertwined, the systemic forces that have created and profited from this mass misery, and invitation to work together... the process of making meaning of the crises in a way that validates people’s lived experiences, while building bonds of solidarity and commitment to ongoing action has been strengthened in all areas of our work the last two years...”</p> <p>— Systems and Policy Change partner</p> |

What did COO partners feel were the major challenges or barriers to accomplishing program goals?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|--|---|---|
| Ongoing challenges related to COVID | COVID-19 continued to impact partners' efforts with ongoing support to meet community basic needs and the continuation of remote activities. | <p>"...the most significant challenge we have faced (and continue to face) is related to the many competing priorities inherent in our work, particularly throughout this time of crisis. For example, as relief and recovery resources have come available, we have been called upon to identify community priorities and to help increase access to governmental and philanthropic resources for especially hard-hit BIPOC communities."</p> <p>— Systems and Policy Change partner</p> |
| Stress on organizational and staff capacities | Partners described staff burnout because of efforts to meet communities' heightened needs during the pandemic and challenges to effectively engage community through remote activities. | <p>"We also had to problem solve the burnout and fatigue we were noticing amongst our leaders. In the beginning of the year we were moving at a very fast pace, and that impacted our leaders in the cohort and their commitment to the work. As people who also experience many of the same socio-economic barriers of our community, we, too, had to juggle the impacts of the pandemic on our personal lives and families..."</p> <p>— Systems and Policy Change partner</p> |
| Developing, deepening relationships virtually | Virtual interactions made relationship and trust building with community members and other organizations more difficult and time-consuming, compared to in-person meetings. | <p>"Virtual organizing has been a challenge for us because it does not foster the same relationship building and community connection that in-person events and meetings do. While we worked to center culture in our meetings and events, there is a relational component that is lost in virtual organizing."</p> <p>— Systems and Policy Change partner</p> |

In what ways did COO organizations or partnerships make progress toward changing policies, systems, and environments as a result of their Best Starts for Kids–funded activities?

| What we heard | What does it mean? | Best Starts for Kids partners told us ... |
|--|---|---|
| Strengthened community power for systemic change | Partners developed and strengthened community leaders and connections to mobilize and push for equitable systems and policy change. | <p>“With this funding, we were able to pay our Black community organizers for their time, labor, vision, and expertise... We have the privilege and responsibility to organize within the Black community, leveraging our collective community power to improve conditions. The need for accountable Black leadership to be at the forefront and the tremendous resources needed remains an ongoing lesson.”</p> <p>— Systems and Policy Change partner</p> |
| Successfully pushed for equitable systems and policies | Heightened awareness of inequities in COVID-19's impact and racial injustice contributed to partners' momentum and successes in equitable systems and policy changes. | <p>“It is not possible to separate the social, economic, and racial impacts from the pandemic, nor from our housing efforts associated with this grant. These impacts galvanized our communities and gave focus to our [work]. At the same time, [these impacts] confronted us with the opportunity to slow down, to be more intentional regarding the frequency, mode and agenda of our meetings, and to reframe our work such that there is real congruency between our external goals and our internal infrastructure, vis a vis the capacity of our staff.”</p> <p>— Systems and Policy Change partner</p> |
| Developed systems for equitable systems and opportunities | Several partners and partnerships made progress in efforts to improve food systems, housing, and/or economic opportunities. | <p>“This project has focused on establishing a small local food system. We have managed garden spaces which serve as outdoor classrooms, both teaching people how to grow food, and distributing that same fresh food directly in the community. We have distributed resources such as seeds, soil, and plant starts to community members who might not have had access to them otherwise. And, we have hired and worked with community members to make this all possible. From seed to table, this system, albeit small, has made an impact on the larger industrial food complex and planted seeds of knowledge for community members through classes, inspiration, and participation.”</p> <p>— Place-Based and Cultural Community Partnership partner</p> |

Investing Early (prenatal to 5 years) outcomes

Help Me Grow

Help Me Grow King County: Partnership Network

| | | |
|-------------------------------|--|-------------------|
| How much did we do? | Number of participants engaged through meetings/gatherings the Help Me Grow King County Collaborative CBO Partnership hosted | 2,469 |
| | Total number caregivers/parents served by the HMG KC Collaborative CBO Partnership | 1,346 |
| | Total number of children served by the HMG KC Collaborative CBO Partnership | 2,227 |
| | Total number of children who received a developmental screening by the HMG KC Collaborative CBO Partnership | 478 |
| | Total number of concerns identified by the HMG KC Collaborative CBO Partnership | 3,646 |
| | Total number of events/groups by the HMG KC Collaborative CBO Partnership | 170 |
| | Total number of interactions by the HMG KC Collaborative CBO Partnership | 11,825 |
| | Total number of pregnant people served by the HMG KC Collaborative CBO Partnership | 121 ^a |
| | Total number of service referrals completed by the HMG KC Collaborative CBO Partnership | 2,987 |
| How well did we do it? | Percent of parents/caregivers who are satisfied with quality of services/supports from HMG KC | 97% ^a |
| Is anyone better off? | Percent of families with increased concrete support | 99% ^a |
| | Percent of families with increased knowledge of parenting and child development | 89% ^a |
| | Percent of families with increased social connections | 100% ^a |
| | Percent of family members who received a referral and go on to establish a service connection | 58% ^a |
| | Percent of parents/caregivers with improved protective factors | 99% ^a |

Developmental Promotion and Early Support

Help Me Grow King County: Screening and Referral Services

| | | |
|-------------------------------|---|--------------------|
| How much did we do? | Number of children screened for developmental progress | 360 ^b |
| | Number of families who receive a referral that go on to establish connections to evaluation and supportive services | 85 ^b |
| | Number of referrals made post-screening by type | 3,399 ^b |
| How well did we do it? | Percent of children under 6 that receive screening for developmental progress | 68% ^{a,b} |
| | Percent of families (with identified need) who report satisfaction with referral | 91% ^{a,b} |
| | Percent of families that report resource or systemic barriers to accessing referred service/program | 78% ^{a,b} |
| | Percent of families who report confidence in next steps | 96% ^{a,b} |
| | Percent of families with identified concerns who receive referral | 57% ^{a,b} |

| | | |
|------------------------------|--|--------------------|
| Is anyone better off? | Percent of families report receiving translation and/or interpretation when needed (materials or interpreter as appropriate) | 40% ^{a,b} |
| | Percent of families that report understanding of neurodiversity | 93% ^{a,b} |
| | Percent of families who received referral that go on to establish service connection | 82% ^{a,b} |

Help Me Grow King County: Workforce Improvements

| | | |
|-------------------------------|---|--------------------|
| How much did we do? | Number of workshop/event participants | 597 ^b |
| | Number of workshops/events focused on early childhood development topics | 72 ^b |
| How well did we do it? | Percent of participants who report workshop/event content was meaningful to their work with children and families | 94% ^{a,b} |
| Is anyone better off? | Percent of participants who report confidence in their ability to apply new knowledge as a result of the workshop/event | 97% ^{a,b} |
| | Percent of participants who reported an increase in knowledge related to equity as a result of the workshop/event | 91% ^{a,b} |

Universal Developmental Screening: Ages and Stages Questionnaire (ASQ)/Ages and Stages Questionnaire: Social Emotional (ASQ:SE) Provider Training

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of providers trained to administer the ASQ and/or ASQ:SE | 366 |
| How well did we do it? | Percent of providers with increased confidence in their ability to explain why screening is important | 88% |
| | Percent of providers with increased confidence in their ability to discuss a developmental concern with a family | 88% |
| Is anyone better off? | Percent of providers that received foundational information on how to use ASQ/ASQ:SE with families, discuss results, and connect them with resources | 86% |

Early Support for Infants and Toddlers (ESIT)^c

| | | |
|-------------------------------|--|------------------|
| How much did we do? | Number of children provided services | 5,349 |
| How well did we do it? | Percent of children with evaluation and service plan in place within 45 days from initial contact | 94% ^d |
| | Percent of children with service start within 30 days | 99% |
| | Percent of children with transition meeting at least 90 days prior to child turning 3 to determine eligibility for school services | 93% ^d |
| Is anyone better off? | Percent of children with progress acquiring knowledge/skills | 74% |
| | Percent of children with progress in positive social emotional development | 74% |
| | Percent of children with progress in taking action to meet needs | 72% |

Social-Emotional Well-being: Infant Mental Health Large Group Trainings^e

| | | |
|----------------------------|---|-------|
| How much did we do? | Number of large group trainings | 18 |
| | Number of newly contracted trainers | 9 |
| | Number of providers who participated in one or more large group training (duplicated) | 1,039 |
| | Number of providers who participated in one or more large group training (unduplicated) | 457 |

| | | |
|-------------------------------|--|-----|
| How well did we do it? | Percent of participants who reported the training considered equity related to participant's diverse needs and experiences | 96% |
| | Percent of participants who reported training content was meaningful to their work with children and families | 97% |
| Is anyone better off? | Percent of participants who reported an increase in knowledge related to equity as a result of the training | 91% |
| | Percent of participants who reported confidence in their ability to apply something new they learned from the training to their work | 93% |
| | Percent of participants who reported an increase in knowledge related to the promotion of Infant and Early Childhood Mental Health (IECMH) as a result of the training | 92% |

Social-Emotional Well-being: Infant Mental Health Endorsement

| | | |
|-------------------------------|---|-----|
| How much did we do? | Number of providers who initiated the endorsement process | 110 |
| How well did we do it? | Percent of grantees who reported the endorsement process was responsive to their needs and experiences | 87% |
| Is anyone better off? | Percent of grantees who reported an increase in confidence in their roles as an Infant and Early Childhood Mental Health (IECMH) provider | 71% |
| | Percent of grantees who reported the endorsement process increased their effectiveness in their role with families | 82% |
| | Percent of grantees who reported the endorsement process increased their preparedness to work with families | 82% |

Social-Emotional Well-being: Infant Mental Health Reflective Consultation

| | | |
|-------------------------------|--|------------------|
| How much did we do? | Number of reflective consultants | 20 |
| | Number of reflective consultation participants | 409 ^f |
| How well did we do it? | Percent of participants reporting increased confidence to talk about social and emotional development with families | 78% |
| | Percent of participants who reported that reflective consultation was respectful of their community's needs and experiences | 97% |
| Is anyone better off? | Percent of participants who reported a positive impact on their relationship with children and families | 88% |
| | Percent of participants who reported an increase in awareness of their own implicit biases as a result of participating in reflective consultation | 73% |

Workforce Development

Large Group Trainings^g

| | | |
|----------------------------|--|-----|
| How much did we do? | Number of large group trainings | 23 |
| | Number of providers who participated in one or more large group trainings (duplicated) | 752 |
| | Number of providers who participated in one or more large group trainings (unduplicated) | 731 |
| | Number of trainers | 7 |

| | | |
|-------------------------------|--|-----|
| How well did we do it? | Percent of participants who reported the training considered equity related to participants' diverse needs and experiences | 94% |
| | Percent of participants who reported training content was meaningful to their work with children and families | 93% |
| Is anyone better off? | Percent of participants who reported an increase in knowledge related to equity as a result of the training | 90% |
| | Percent of participants who reported confidence in their ability to apply something new they learned from the training to their work | 92% |

Workforce Collaboratives

| | | |
|-------------------------------|--|------------------|
| How much did we do? | Number of providers who were members of a workforce collaborative | 213 |
| | Number of providers who were new members of a workforce collaborative | 122 ^a |
| | Number of Workforce Collaborative sessions on each topic area | 59 ^a |
| How well did we do it? | Percent of members who reported the training content met a need of their Workforce Collaborative | 93% |
| Is anyone better off? | Percent of members who reported increased confidence that they have the skills to help families support their child's development as a result of the Workforce Collaborative | 88% |
| | Percent of members who reported increased peer support as a result of the workforce collaborative | 80% |
| | Percent of members who reported they have been able to apply learnings from the Workforce Collaborative to their work | 91% |

Post-workshop Support Group^e

| | | |
|-------------------------------|--|------|
| How much did we do? | Number of organizations that received post-workshop support | 24 |
| | Number of post workshop activities for organizations | 26 |
| How well did we do it? | Percent of agencies that reported the organization improved its ability to support children and families | 100% |
| Is anyone better off? | Percent of agencies that reported the organization developed additional ways to support working with diverse children and families | 80% |

Post-workshop Support Individual^e

| | | |
|----------------------------|--|---|
| How much did we do? | Number of individuals who received post-workshop support | 6 |
| | Number of post workshop activities for individuals | 6 |

Home-Based Services

Evidence-Based and Evidence-Informed Home Visiting

| | | |
|----------------------------|---|-----|
| How much did we do? | Number of caregivers served | 989 |
| | Number of children screened using the ASQ | 621 |
| | Number of children served | 835 |
| | Number of families served | 760 |

| | | |
|-------------------------------|--|-----|
| How well did we do it? | Percent of children enrolled in home visiting with a timely screen for developmental delays using ASQ | 54% |
| | Percent of children that received the model recommended number of home visits during the reporting period | 72% |
| | Percent of clients enrolled from focus populations | 97% |
| | Percent of primary caregivers who receive an observation of caregiver-child interaction using a validated tool | 45% |
| Is anyone better off? | Percent of caregivers who show greater positive interaction with children than at baseline | 77% |
| | Percent of families referred and/or connected to services based on model requirements | 52% |
| | Percent of mothers who initiated breastfeeding | 76% |

ParentChild+^h

| | | |
|-------------------------------|---|--------|
| How much did we do? | Number of children served by ParentChild+ | 1,147 |
| | Number of families served by ParentChild+ | 1,147 |
| | Number of referrals to support services | 691 |
| | Number of visits completed by ParentChild+ | 42,774 |
| How well did we do it? | Percent of ParentChild+ children transitioning to other early learning settings | 100% |
| | Percent of ParentChild+ families completing year 1 | 80% |
| | Percent of ParentChild+ families completing year 2 | 85% |
| | Percent of ParentChild+ families enrolled from focus populations | 100% |
| | Percent of ParentChild+ families matched with culturally relevant staff | 92% |
| | Percent of ParentChild+ families receiving required dosage of visits | 100% |
| | Percent of ParentChild+ partner organizations maintaining appropriate supervisor-to-staff ratios | 93% |
| | Percent of ParentChild+ staff receiving twice annual coordinator observations and debriefs | 84% |
| Is anyone better off? | Percent of children who met target Child Behavior Traits score of 3 or higher at beginning of the program | 49% |
| | Percent of children who met target CBT score of 3 or higher at the end of the program | 81% |
| | Percent of parents who met target Parent and Child Together assessment score of 3 or higher at beginning of the program | 60% |
| | Percent of parents who met target PACT score of 3 or higher at the end of the program | 89% |

Community-Designed Home-Based Programs and Practices

| | | |
|----------------------------|---------------------------------|-------|
| How much did we do? | Number of caregivers served | 1,032 |
| | Number of children served | 998 |
| | Number of families served | 865 |
| | Number of home visits completed | 9,987 |

| | | |
|-------------------------------|---|------------------|
| How well did we do it? | Percent of caregivers who achieve their goals | 98% |
| | Percent of caregivers who are utilizing information from the program | 93% |
| | Percent of caregivers who were satisfied with services or would recommend services to a friend | 98% |
| | Percent of enrolled in home visiting with a screen for developmental delays using a validated parent-completed tool (ASQ) | 81% ^b |
| Is anyone better off? | Percent of families with increased concrete support | 96% |
| | Percent of families with increased knowledge of parenting and child development | 94% |
| | Percent of families with increased parental resilience | 91% |
| | Percent of families with increased social and emotional competence of children | 97% |
| | Percent of families with increased social connections | 95% |
| | Percent of mothers with positive birth outcomes | 96% |

Community-Based Parenting Supports

Basic Needs Resource Brokering: Basic Needs Resources: Food¹

| | | |
|-------------------------------|---|--------------------|
| How much did we do? | Number of families receiving Good Food Bags | 377 ¹ |
| | Number of Good Food Bags distributed | 3,014 ¹ |
| | Number of sites participating in Good Food Bag program | 2 |
| How well did we do it? | Percent of survey respondents who rate overall experience with Good Food Bags as excellent | 53% |
| | Percent of survey respondents who report being food insecure in the past 12 months | 57% |
| | Percent of survey respondents who report usually using all fruits and vegetables in Good Food Bag | 59% |
| | Percent of survey respondents who think program is a good way to increase healthy food access | 100% |
| Is anyone better off? | Percent of survey respondents who report eating more fruits and vegetables | 88% |
| | Percent of survey respondents who report positive effects of Good Food Bags for their children | 86% |

Basic Needs Resource Brokering: Basic Needs Resources: Goods

| | | |
|-------------------------------|--|-----------|
| How much did we do? | Number of children and youth for whom partners request and receive resources | 38,932 |
| | Number of different types of program sites requesting and receiving resources | 338 |
| | Number of households for whom partners request and receive resources | 7,389 |
| | Number of partner agencies, programs, and program sites requesting and receiving resources | 138 |
| How well did we do it? | Number of individual items/products distributed in King County | 3,126,689 |
| | Percent of items/products distributed to South Region zip codes/focus communities | 43% |
| | Percent of partner agencies sustaining partnership with resource broker over one year | 56% |
| | Percent of requested items distributed | 100% |

| | | |
|------------------------------|---|-----|
| Is anyone better off? | Percent of provider partners who agreed or strongly agreed that the provided goods has helped to reduce the number of missed client visits | 53% |
| | Percent of provider partners who agreed or strongly agreed that the provided goods has kept clients in their program longer | 65% |
| | Percent of provider partners who agreed or strongly agreed that the provided goods increased communication by clients between scheduled visits | 82% |
| | Percent of provider partners who agreed or strongly agreed that the provided goods positively influenced their organization and program budgets | 71% |

Kaleidoscope Play and Learn^k

| | | |
|-------------------------------|--|-------|
| How much did we do? | Number of children, parents, and caregivers attending Kaleidoscope Play & Learn Groups (unduplicated) | 5,158 |
| | Number of children attending Kaleidoscope Play & Learn groups | 2,505 |
| | Number of Family, Friend and Neighbor caregivers attending Kaleidoscope Play & Learn groups | 503 |
| | Number of parents attending KP&L groups (unduplicated) | 2,150 |
| How well did we do it? | Percent increase in access (number of groups available) in Kaleidoscope Play & Learn Groups | 45% |
| | Percent increase in participation (number of people attending) in Kaleidoscope Play & Learn Groups | -48% |
| Is anyone better off? | Percent of parents and caregivers who feel more supported as a parent or caregiver in their community | 93% |
| | Percent of parents and caregivers who increased understanding of their role in helping the child in their care be ready for kindergarten | 89% |
| | Percent of parents and caregivers who read, look at books, or tell stories more often with the child in their care | 87% |

Parent Caregiver Information and Supports (PCIS)

| | | |
|-------------------------------|---|--------------------|
| How much did we do? | Number of caregivers served | 1,584 ^l |
| | Number of families served | 1,045 |
| | Number of group meetings/services held | 672 |
| How well did we do it? | Percent of caregivers enrolled from focus populations | 100% |
| | Percent of caregivers who are satisfied with services or activities, or would recommend services or activities to friends | 96% |
| | Percent of caregivers who completed program according to program design | 79% |
| Is anyone better off? | Percent of families with increased concrete support | 72% |
| | Percent of families with increased knowledge of parenting and child development | 53% |
| | Percent of families with increased parental resilience | 86% |
| | Percent of families with increased social and emotional competence of children | 97% |
| | Percent of families with increased social connections | 73% |

Prenatal Support and Chestfeeding Peer Counseling Services

| | | |
|-------------------------------|---|------------------|
| How much did we do? | Number of educational engagements provided | 272 |
| | Number of professional development opportunities | 392 |
| | Number of referrals between partners | 241 |
| | Number of unique clients served through lactation support services | 295 |
| | Number of unique clients served with supportive pregnancy | 55 |
| How well did we do it? | Percent of clients who found lounge participation helpful to support chestfeeding | 100% |
| | Percent of participants who attended the model recommended number of supportive pregnancy care sessions | 54% ^m |
| | Percent of partners who report increase in their capacity to provide perinatal services as a result of technical assistance and capacity building support | 80% |
| Is anyone better off? | Percent of babies carried to full term | 100% |
| | Percent of clients chestfeeding beyond initiation | 99% |
| | Percent of LSPC enrolled clients who receive multiple (at least two) services over the perinatal period | 64% |

Public Health Programs**Perinatal Hepatitis B Prevention Program**

| | | |
|-------------------------------|---|------------------|
| How much did we do? | Number of infants completing postvaccination serology testing | 117 ⁿ |
| | Number of outreach sessions held with partners | 0 ^o |
| | Number of pregnant persons enrolled | 99 |
| | Number of pregnant persons enrolled before delivery | 95 ^p |
| | Number of pregnant persons identified through enhanced lab reporting | 76 |
| How well did we do it? | Percent of infants completing postvaccination serology testing | 71% ⁿ |
| | Percent of pregnant persons enrolled before delivery | 96% ^p |
| | Percent of pregnant persons identified through enhanced lab reporting | 77% |
| Is anyone better off? | Number of infants completing postexposure prophylaxis (PEP) | 120 ^a |
| | Percent of infants completing postexposure prophylaxis (PEP) | 89% ^a |
| | Percent of infants who became immune to hepatitis B | 98% |

Maternity Support Services and Infant Case Management (MSS/ICM)^r

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|----------------------------|-------------------------------------|--------|
| How much did we do? | Number of clients served by MSS/ICM | 11,502 |
| | Visits delivered by MSS/ICM | 30,946 |

| | | |
|--|--|---|
| How well did we do it? | Number of linkages to ancillary support services | 928 |
| | Percent of total MSS/ICM provided by Public Health | Not yet available, reported by Washington State Health Authority |
| Is anyone better off? | Birth outcome: low birth weight (<2,500 grams) | 7% |
| Nurse-Family Partnership^r | | |
| How much did we do? | Number of children served by NFP | 817 |
| | Number of pregnant people served by NFP | 606 |
| How well did we do it? | Average number of service linkages | Not available from source |
| | Avg visit length (minutes) | 50 |
| | Number of attempted visits to the mother | 613 |
| | Number of completed visits to the mother | 9,387 |
| | Number of telephone calls to the mother | 6,038 |
| | Number of visits to the mother cancelled by the client | Not available from source |
| | Number of visits to the mother cancelled by the nurse | Not available from source |
| | Referrals to other assistance (service linkages) | 587 |
| | Total visit contact time (hr) | Not available from source |
| | Is anyone better off? | Birth outcomes: low birth weight (<2500 grams) |
| Birth outcomes: preterm birth | | 13% |
| Child health and development outcomes: child hospitalized 1+ times for injury or ingestion (among children 0–6) | | 0 |
| Child health and development outcomes: child visited emergency room 1+ times for injury or ingestion (among children 0–6 months) | | 2 |
| Child health and development outcomes: child visited urgent care 1+ times for injury or ingestion (among children 0–6 months) | | 0 |
| Child health and development outcomes: current with immunizations | | 34% ^s |
| Child health and development outcomes: developmental screening | | 99% |
| Child health and development outcomes: initiated breastfeeding | | 95% |
| Child health and development outcomes: number of children who may need further evaluation | 5% ^t | |

Women, Infants and Children (WIC) supplemental nutrition program

| | | |
|-------------------------------|---|-----------------------------------|
| How much did we do? | Number of clients receiving WIC | 33,494 |
| How well did we do it? | Number of nutrition education services | Unable to measure due to COVID-19 |
| | Number of referrals to preventive services | Unable to measure due to COVID-19 |
| Is anyone better off? | Chestfeeding duration >6 months | Unable to measure due to COVID-19 |
| | Children BMI 95%+ (among children ages 2–4 years old) | Unable to measure due to COVID-19 |
| | Total food dollars for fresh fruits and vegetables | Not available from source |
| | Total food dollars for WIC Farmers Market Nutrition Program | Not available from source |
| | Total food dollars redeemed | Not available from source |

Family Planning: Family Planning Education^u

| | | |
|-------------------------------|--|---------------------------|
| How much did we do? | Number of clients reached through direct education & outreach to youth | 185,350 ^v |
| | Number of direct education sessions and outreach activities | 360 |
| | Number of Technical Assistance & Professional Development services sessions | 110 |
| | Number of youth-serving professionals provided Technical Assistance & Professional Development services | 1147 |
| How well did we do it? | Percent of training participants that report health education trainers 'created an effective learning environment' | Not available from source |
| Is anyone better off? | Training participants increase skills | Not available from source |

Family Planning: Family Planning Services^w

| | | |
|-------------------------------|---|-------------|
| How much did we do? | Number of clients served by Family Planning Services | 4,099 |
| How well did we do it? | Percent of clients on a more effective contraceptive method | 84% |
| | Percent of contraceptive users | 89% |
| Is anyone better off? | Number of abortions prevented | 250 |
| | Number of chlamydia infections prevented | 60 |
| | Number of unintended pregnancies prevented | 750 |
| | Number of unplanned births prevented | 350 |
| | Total dollars of net savings | \$3,983,630 |

Kids Plus^r

| | | |
|-------------------------------|---|-----|
| How much did we do? | Number of adults served by Kids Plus | 79 |
| | Number of children served by Kids Plus | 113 |
| | Number of clients (adults and children) served by Kids Plus | 192 |
| | Number of households served by Kids Plus | 63 |
| How well did we do it? | Percent of children receiving a developmental screening or linked to early intervention | 59% |
| Is anyone better off? | Percent of children and adults in permanent housing/positive destination | 60% |

Vroom**Community Connectors**

| | | |
|-------------------------------|--|-----------------------------------|
| How much did we do? | Number of outreach events led by Latinx and Somali Vroom Community Connectors | 82 |
| | Number of parents and caregivers introduced to Vroom as a result of community engagement | 5,417 |
| How well did we do it? | Percent of outreach participants reached who became Vroom Messengers | 89% |
| | Percent of organizations engaged through outreach who became Vroom Partners | 87% |
| Is anyone better off? | Percent of Vroom Messengers or Parents using the Vroom tools to engage with children | Unable to measure due to COVID-19 |
| | Percent of Vroom Messengers or Parents integrating Vroom into their everyday work | Unable to measure due to COVID-19 |
| | Percent of Vroom Messengers or Parents who report Vroom increases their focus on early brain development when working with parents | Unable to measure due to COVID-19 |
| | Percent of Vroom Messengers or Parents integrating Vroom into existing programs that reach parents and caregivers | Unable to measure due to COVID-19 |

Child Care Health Consultation^r**Service Delivery**

| | | |
|-------------------------------|---|-------|
| How much did we do? | Number of child care sites served by CCHC teams | 681 |
| | Number of providers served by child care health consultant teams | 994 |
| | Number of services provided by CCHC teams | 6,478 |
| How well did we do it? | Percent of child care providers and administrative staff served by CCHC teams that are satisfied with the services they received | 95% |
| Is anyone better off? | Percent of child care providers that report an increase in their ability to implement strategies that enhance the health and safety of the child care environment | 90% |
| | Percent of child care providers that report increased knowledge of community resources | 96% |
| | Percent of child care providers that report increased knowledge of consultation and training topics | 97% |

Innovation Fund**Innovation Fund^e**

| | | |
|-------------------------------|--|---------------------|
| How much did we do? | Number of meetings, trainings, or events held | 465 ^b |
| | Number of participants served | 281 ^b |
| | Number of times a product was viewed | 61,466 ^b |
| | Number of training or event attendees | 1,099 ^b |
| How well did we do it? | Percent of participants who are satisfied with services | 95% ^b |
| Is anyone better off? | Percent of participants reporting an increase in knowledge or skills | 93% ^b |

^a New measure for 2021.

^b Not all programs report this performance measure.

^c Best Starts for Kids funding was a portion of total King County funding for ESIT services to children and families in 2021.

^d Methodology for this measure changed in 2020 and caution should be used when comparing to prior years.

^e All measures are new for 2021.

^f Methodology for the total count of participants changed in 2021. Use caution when comparing to prior years.

^g Prior to 2021, large group trainings also included trainings for the Infant and Early Childhood Mental Health strategy. Use caution when comparing data across multiple years.

^h Better Off data includes children who completed years 1 & 2.

ⁱ How Well and Better Off data is collected with Tilth Good Food Bag Survey (n=51).

^j Lower than 2020 since one partner is no longer conducting drive-through bag pick-ups.

^k How Much data includes all clients regardless of funding. How Well data is collected with a Caregiver Feedback Survey (King County responses only; n=121); includes braided funding sources. Better Off data was impacted by the COVID-19 pandemic since virtual programming affected participation in the caregiver survey.

^l COVID-19 innovations increased enrollment as programs provided additional case management support.

^m The definition for model recommended number of sessions changed from n=10 to n=6 in consultation with March of Dimes.

ⁿ Postvaccination serology testing confirms infants' hepatitis B protection status.

^o Unable to take place because of COVID-19. Outreach sessions are held with healthcare providers and other partners to improve referral processes and patient care.

^p Enrolling pregnant people before delivery provides the best opportunity for follow-up and support.

^q Completing postexposure prophylaxis protects infants from contracting hepatitis B.

^r How Much measures included all clients regardless of funding

^s Children are assessed at 6mo, 12mo, 18mo, and 24mo. Infants under 6 months old are not included. Objective is that 90% are immunized; COVID has led to delays in immunizations.

^t Among children eligible to receive an age appropriate IHC or ASQ screening. Children are assessed at 4mo, 10mo, 18mo, and 24mo.

^u How Well and Better Off measures were impacted by the COVID-19 pandemic as in-person, full-day trainings were put on hold during the 2021 reporting period.

^v Includes social media reach.

^w How Well measures have changed from previous years due to a change in data source.

^x How much data are deduplicated for each 6 month reporting period. How well and Better off data is collected with an annual survey (n=147) of child care providers receiving CCHC services.

Sustaining the Gain (5 to 24 years) outcomes

Youth Development

Youth Development: General

| | | |
|-------------------------------|--|-------|
| How much did we do? | Number of youth/young adults enrolled | 3,561 |
| How well did we do it? | Percent of youth/young adults who completed services | 48% |
| | Percent of youth/young adults who engaged in programming | 89% |
| Is anyone better off? | Percent of youth/young adults who feel hopeful and optimistic about the future | 26% |
| | Percent of youth/young adults with improved knowledge or skills | 35% |

Youth Development: Relationships

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of youth/young adults enrolled | 383 |
| How well did we do it? | Percent of youth/young adults who completed services | 64% |
| | Percent of youth/young adults who engaged in programming | 79% |
| Is anyone better off? | Percent of youth/young adults with improved knowledge or skills related to healthy relationships | 94% |

School Partnerships

Trauma-Informed and Restorative Practices (TIRP) in School Environments^{a,b,c}

| | | |
|-------------------------------|--|-------|
| How much did we do? | Number of students/scholars and adults served by the Trauma Informed and Restorative Practices Liberated Village Program | 3,151 |
| How well did we do it? | Percent of students/scholars satisfied with the Trauma Informed and Restorative Practices Liberated Village Programming | 76% |
| Is anyone better off? | Percent of students/scholars reporting a strong cultural identity after participating in Trauma Informed and Restorative Practices Liberated Village Programming | 70% |

School-Based Screening, Brief Intervention, and Referral To Services (SBIRT)^a

| | | |
|-------------------------------|--|--------------------|
| How much did we do? | Number of middle school students referred to services or resources | 965 |
| | Number of youth screened at SB-SBIRT middle schools | 5,752 ^d |
| | Number of youth who received at least 1 Brief Intervention (BI) meeting | 2,215 |
| How well did we do it? | Percent of referrals provided with a status of “connected” | 44% ^e |
| | Percent of Tier 2 middle school students who received at least 1 Brief Intervention (BI) meeting | 77% ^f |
| | Percent of Tier 3 middle school students who received at least 1 Brief Intervention (BI) meeting | 83% ^g |
| Is anyone better off? | Percent of students with a new need identified as part of SB-SBIRT | 17% |

Out-of-School Time (OST)

| | | |
|-------------------------------|---|--|
| How much did we do? | Average number of youth served daily | 1,390 ^{h,j} |
| | Number of hours of virtual programming offered | 7,608 |
| | Number of learning kits (e.g., STEM, art, cooking) distributed to youth | 4,704 |
| | Number of technology devices distributed to youth to support learning (e.g, laptops, tablets, hotspots) | 736 |
| | Number of youth served by program | 2,102 ^{h,j} |
| How well did we do it? | Percent of OST awardees participating in quality supports | 97% ^k |
| Is anyone better off? | Percent of OST awardees meeting goals or reporting gains around youth-level outcomes | 86% ^{l,m} |
| | Percent of OST awardees who improved in one or more of their goals around social-emotional learning staff practices | Unable to measure due to COVID-19 ^m |

School-Based Health Centers (SBHCs)

| | | |
|-------------------------------|---|-----------------------------------|
| How much did we do? | Number of student SBHC visits for medical and mental health services | 4,735 |
| | Number of students who received SBHC medical and/or mental health services | 992 |
| How well did we do it? | Percent of students served by SBHCs who received a standardized risk assessment | 56% |
| | Percent of students served by SBHCs with positive depression screening who received mental health counseling | 73% |
| | Percent of students served by SBHCs with positive substance use screening who received a brief intervention and/or referral | 86% ⁿ |
| Is anyone better off? | Percent of students served by SBHCs who are passing all classes | Unable to measure due to COVID-19 |
| | Percent of students served by SBHCs with less than 10 absences per school year | Unable to measure due to COVID-19 |

School-Based Behavioral Health Diversion Pilot^a

| | | |
|-------------------------------|--|------------------|
| How much did we do? | Number of Black and Brown youth screened for behavioral health needs | 98 |
| | Number of Black and Brown youth served | 128 |
| | Number of youth served | 135 |
| How well did we do it? | Percent of youth who accessed school-based health centers | 21% ^o |
| | Percent of youth who were referred to services | 49% ^p |
| Is anyone better off? | Percent of Black and Brown youth who achieved at least one goal | 65% ^q |
| | Percent of youth who achieved at least one goal | 65% ^r |

Family and Community Connections

Healthy and Safe Environments

| | | |
|-------------------------------|---|--------|
| How much did we do? | Number of people trained | 3,401 |
| | Number of trainings, workshops | 172 |
| How well did we do it? | Number of connections made or strengthened | 111 |
| | Number of systems and environments improved | 102 |
| Is anyone better off? | Number of people impacted | 45,935 |
| | Number of policies changed | 20 |

Washington Child Health Improvement Partnership (formerly Adolescent Immunizations)

| | | |
|-------------------------------|---|--------|
| How much did we do? | Number of adolescent patients | 20,759 |
| | Number of clinics participating in a learning collaborative | 7 |
| How well did we do it? | Percent of participants who agreed their participation in the project will lead to lasting improvement in patient care | 96% |
| | Percent of participating clinics who complete trainings | 100% |
| Is anyone better off? | Percent of adolescent patients up to date on their recommended immunizations | 34% |
| | Percent of adolescent patients who have completed HPV vaccination | 34% |
| | Percent of adolescent patients who have received at least one dose of HPV vaccination | 66% |
| | Percent of adolescent patients who have received their meningococcal vaccine | 75% |
| | Percent of adolescent patients who have received their Tdap (tetanus, diphtheria, and pertussis) vaccine | 85% |
| | Percent of adolescent patients who were eligible for a recommended vaccine when they saw their healthcare provider and did not receive one (also called "missed opportunities") | 28% |

Family Engagement: Kinship Care

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of parents/caregivers enrolled | 374 |
| How well did we do it? | Percent of parents/caregivers satisfied with programming | 99% |
| Is anyone better off? | Percent of parents/caregivers increasing their knowledge or skills related to strengthening family relationships | 68% |

Family Engagement: Positive Family Connections

| | | |
|-------------------------------|--|------------------|
| How much did we do? | Number of parents/caregivers enrolled | 2,596 |
| | Number of youth/young adults enrolled | 1,311 |
| How well did we do it? | Percent of parents/caregivers engaged in programming | 89% ^s |
| | Percent of parents/caregivers satisfied with programming | 96% ^s |
| | Percent of youth/young adults engaged in programming | 97% ^s |
| | Percent of youth/young adults satisfied with programming | 92% ^s |
| Is anyone better off? | Percent of parents/caregivers increasing connection to peers, family, culture, and/or community | 58% ^s |
| | Percent of parents/caregivers increasing their knowledge or skills related to strengthening family relationships | 86% ^s |
| | Percent of youth/young adults increasing connection to peers, family, culture, and/or community | 91% ^s |
| | Percent of youth/young adults increasing their knowledge or skills related to strengthening family relationships | 91% ^s |

Transitions to Adulthood**Behavioral Health Services at Youth Re-engagement Centers**

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of youth/young adults screened | 482 |
| How well did we do it? | Percent of youth/young adults making progress toward their service plan | 22% |
| | Percent of youth/young adults with an individual service plan within 30 days of enrolling in the program | 90% |
| Is anyone better off? | Percent of youth/young adults with reduced substance use and/or clinically improved depression and anxiety | 16% |

Transitioning to Post-secondary Education or Employment: Career Launch Pad

| | | |
|-------------------------------|--|------|
| How much did we do? | Number of youth/young adults enrolled | 63 |
| How well did we do it? | Percent of youth/young adults who completed job readiness training | 52% |
| Is anyone better off? | Percent of youth/young adults placed into employment | 22% |
| | Percent of youth/young adults placed into employment who are earning more than Washington state minimum wage | 100% |

Transitioning to Post-secondary Education or Employment: Clear Path to Employment

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of youth/young adults enrolled | 161 |
| How well did we do it? | Number of youth/young adults completing subsidized employment | 13 |
| | Number of youth/young adults who completed pre-employment activities | 118 |
| Is anyone better off? | Number of youth/young adults placed into unsubsidized employment at program completion | 36 |

Transitioning to Post-secondary Education or Employment: Work Training Education

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of youth/young adults enrolled | 540 |
| How well did we do it? | Percent of youth/young adults assessed within 30 days of enrollment | 57% |
| Is anyone better off? | Percent of youth/young adults who enroll into college or advanced training upon completing the program | 47% |
| | Percent of youth/young adults who stay in school or graduate upon completing the program | 27% |

Transitioning to Post-secondary Education or Employment: Work Training Employment

| | | |
|-------------------------------|---|------|
| How much did we do? | Number of youth/young adults enrolled | 62 |
| How well did we do it? | Percent of youth/young adults who completed job readiness training | 40% |
| Is anyone better off? | Percent of youth/young adults gaining employment who make \$20 or more per hour | 92% |
| | Percent of youth/young adults placed into employment | 100% |

Peer Connectors Project

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of youth/young adults referred to the program | 142 |
| How well did we do it? | Percent of youth/young adults who re-engaged in school or employment | 32% |

Stopping the School-to-Prison Pipeline**Project SCOPE**

| | | |
|-------------------------------|--|----|
| How much did we do? | Number of youth/young adults enrolled | 71 |
| How well did we do it? | Number of youth/young adults making progress toward their High School Diploma or GED | 38 |
| | Number of youth/young adults placed in an internship or summer program | 24 |
| Is anyone better off? | Number of youth/young adults completing internships or summer program placements | 13 |
| | Number of youth/young adults gaining employment and/or attending college at program completion | 23 |

Community Supports

| | | |
|-------------------------------|---|------------------|
| How much did we do? | Number of youth/young adults enrolled | 1,147 |
| How well did we do it? | Percent of enrolled youth/young adults who were assessed within three sessions after enrollment | 90% |
| | Percent of enrolled youth/young adults with a service plan within six sessions after enrollment | 95% |
| | Percent of youth/young adults who engaged in programming | 94% ¹ |
| Is anyone better off? | Percent of youth/young adults achieving goal upon program completion | 75% |

Theft 3 and Mall Safety Project (T3AMS)

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of youth/young adults contacted through outreach services | 425 |
| | Number of youth/young adults offered outreach services that subsequently enrolled in the program | 17 |
| How well did we do it? | Percent of all enrolled youth/young adults who made progress towards their service plan | 12% |
| Is anyone better off? | Percent of youth/young adults who achieved a service plan goal upon exit | 64% |

Community Empowered Disposition Alternative and Resolution (CEDAR Program)

| | | |
|-------------------------------|--|-----|
| How much did we do? | Number of youth/young adults enrolled | 59 |
| | Number of youth/young adults referred to the program | 89 |
| How well did we do it? | Percent of youth/young adults with 45 days or less between referral and case plan date | 7% |
| Is anyone better off? | Percent of youth/young adults with a lower disposition recommendation upon exiting the program | 85% |

^a All measures are new for 2021.

^b Data are September through December 2021.

^c In 2021, the Trauma-Informed and Restorative Practices/Liberated Village Program reported on new collective Performance Measures, therefore data is not comparable to 2020 or 2019.

^d Two school districts did not screen any students during this reporting period.

^e Includes the total number of referrals provided because a student could receive more than one referral type.

^f Tier 2 includes students who had at least 1 yellow flag, but no red flags identified during screening.

^g Youth who had at least 1 red flag identified during screening were considered Tier 3.

^h Data are July through December 2021.

ⁱ Daily attendance at virtual and in-person programming.

^j Total served through virtual and in-person programming.

^k Program quality supports include coaching, professional development, and assessments designed to strengthen the quality of OST programs and increase positive outcomes for youth. Though many OST programs offered virtual programs due to COVID in 2021, some were able to re-open sites and offer in-person program opportunities to youth. In-person assessments of staff practices were not performed in 2021 and so are not reported here, and outcomes data collection was interrupted at many sites.

^l Six awardees were not able to collect and report data on their youth outcomes goals due to COVID-19.

^m Though many OST programs offered virtual programs due to COVID in 2021, some were able to re-open sites and offer in-person program opportunities to youth. In-person assessments of staff practices were not performed in 2021 and so are not reported here, and outcomes data collection was interrupted at many sites.

ⁿ One site was not able to report this data due to electronic-medical record (EMR) structure and staff capacity during COVID-19.

^o This includes youth who accessed any SBHC in the district in 2021. Given the limitations in medical and mental health providers as well as in-person care, students may have opted for virtual care across SBHCs in other schools.

^p This includes all youth served, including youth who could not be engaged in services for various reasons. This measure looks at the number of youth who were referred externally for services.

^q This measure only includes the total number of Black and Brown youth who established a goal.

^r This measure only includes the total number of youth who established a goal.

^s Not all programs report this performance measure.

^t New measure for 2021.

Communities Matter (Communities of Opportunity) outcomes

Communities of Opportunity

Communities of Opportunity

| | | |
|-------------------------------|---|---------------------|
| How much did we do? | Events that COO partners held or participated in | 2,480 ^a |
| | Number of people participating in COO events | 67,040 ^b |
| How well did we do it? | Resident leaders developed through COO | 858 ^c |
| Is anyone better off? | New partnerships developed in progress toward systems and/or policy change | 142 |
| | New relationships or connections made in progress toward systems and/or policy change | 460 |
| | Number of policies changed | 15 ^d |
| | People hired into jobs as a result of COO activities | 215 ^e |

^a Capacity-building events include workshops, trainings, seminars, and other learning or skills building opportunities. Community events include volunteering, community organizing, celebrations, mentoring, and civic engagement activities like town hall meetings.

^b Number of people participating may include duplicates across events; high 2020 virtual engagement changed as partners shifted to hybrid engagement opportunities in 2021.

^c Adult and youth community leaders are residents who are supported by COO partner organizations to participate in work groups, boards, or school leadership, or are supported in their roles as community liaisons or mentors.

^d Includes policy change efforts of Communities of Opportunity's Seattle Foundation-funded partners.

^e Not all programs report this performance measure due to COVID-19.

Homelessness Prevention (Youth and Family Homelessness Prevention Initiative) outcomes

Youth and Family Homelessness Prevention Initiative

Preventions

| | | |
|-------------------------------|---|-------------|
| How much did we do? | Number of households enrolled in YFHPI | 1,222 |
| | Number of individuals enrolled in YFHPI | 3,202 |
| How well did we do it? | Average financial assistance per household during their time in the program | \$2,831 |
| | Total amount of financial assistance to help with past due rent | \$1,649,997 |
| Is anyone better off? | Percent of households who enrolled in YFHPI and stayed in stable housing | 94% |

Capacity Building and Technical Assistance outcomes

Capacity Building and Technical Assistance

Capacity Building

| | | |
|-------------------------------|--|--------|
| How much did we do? | Number of hours of capacity building services provided | 10,285 |
| | Number of partners receiving capacity building | 97 |
| How well did we do it? | Percent of capacity building recipients who felt their capacity builder understood their cultural needs | 85% |
| | Percent of capacity building recipients who met their project goals | 83% |
| | Percent of capacity building recipients who were satisfied with the services they received | 86% |
| Is anyone better off? | Percent of capacity building recipients whose organizational infrastructure was improved | 79% |
| | Percent of capacity building recipients whose staff learned new skills | 74% |
| | Percent of capacity building recipients whose staff, board, or volunteers were able to be more effective | 79% |

Investment index

Over six years, Best Starts invested nearly \$390 million across four investment areas that promote the health and well-being of King County children, youth, families and communities. Responding to community input, Best Starts made multi-year investments in each strategy within these investment areas. Below is an accounting of those multi-year commitments as well as investment actuals in 2021. Higher spending levels for some strategy areas in 2021 fulfilled Best Starts' multi-year commitments and ensured that overall 2016–2021 program spending and reserves aligned with six-year levy revenue.

| Investments, by investment area and strategy | Unspent funds 2016–2020 | 2021 budget | 2021 expenditures | Years of investment | Total invested 2016–2021 ¹ |
|--|----------------------------|---------------------|----------------------|-----------------------|--|
| Invest early: Prenatal to 5 years | \$6,462,991 | \$47,765,763 | \$52,781,383 | — | \$182,348,382 |
| Help Me Grow | \$1,032,713 | \$1,856,530 | \$3,153,552 | 1/2016–12/2021 | \$4,930,856 |
| Developmental Promotion/Early Supports | \$1,875,036 | \$6,749,631 | \$8,194,044 | — | \$28,571,060 |
| Development Promotion | \$701,858 | \$1,903,253 | \$2,267,743 | 11/2018–12/2021 | \$7,981,147 |
| Early Support for Infants and Toddlers | \$326,923 | \$4,052,253 | \$4,373,051 | 7/2016–12/2021 | \$17,647,263 |
| Infant Mental Health System | \$846,255 | \$794,125 | \$1,553,250 | 11/2017–12/2021 | \$2,942,650 |
| Workforce Development | \$1,575,180 | \$1,123,880 | \$2,360,526 | 1/2019–12/2021 | \$3,910,697 |
| Home-Based Services | — | \$9,479,938 | \$10,566,708 | — | \$36,883,636 |
| Community-Designed Home-Based Programs and Practices | — | \$1,700,000 | \$3,019,205 | 9/2018–12/2021 | \$9,036,731 |
| Evidence-Based and Evidence-Informed Home Visiting | — | \$2,945,824 | \$2,973,217 | 1/2018–12/2021 | \$10,052,760 |
| Parent-Child Plus | — | \$4,221,477 | \$4,296,477 | 1/2018–12/2021 | \$17,143,917 |
| Capacity Building (for Home-Based programs only) | — | \$612,637 | \$277,809 | 7/2018–12/2021 | \$650,228 |
| Community-Based Parenting and Peer Supports | \$945,209 | \$3,904,648 | \$4,546,520 | — | \$12,728,998 |
| Basic Needs Resource Brokering | \$173,920 | \$678,222 | \$770,979 | 3/2018–12/2021 | \$2,342,156 |
| Kaleidoscope Play and Learn | \$251,631 | \$796,766 | \$1,075,008 | 7/2018–12/2021 | \$3,388,679 |
| Parenting Caregiver Information and Support | \$276,332 | \$1,378,410 | \$1,226,551 | 11/2018–12/2021 | \$3,721,322 |
| Prenatal Support and Chestfeeding Peer Counseling | \$243,326 | \$1,051,250 | \$1,473,982 | 11/2018–12/2021 | \$3,276,841 |
| Public Health Direct Service | — | \$13,140,730 | \$12,893,312 | — | \$49,626,436 |
| Maternal and Child Health — PHSKC | — | \$12,853,157 | \$12,619,233 | 1/2016–12/2021 | \$48,571,531 |
| Perinatal Hepatitis B Prevention Program | — | \$287,573 | \$274,079 | 1/2017–12/2021 | \$1,054,905 |
| Vroom | — | \$210,000 | \$210,000 | 7/2018–12/2021 | \$458,250 |

Investment index | Communities of Opportunities awards

| Investments, by investment area and strategy | Unspent funds 2016–2020 | 2021 budget | 2021 expenditures | Years of investment | Total invested 2016–2021 ¹ |
|---|----------------------------|---------------------|----------------------|-----------------------|--|
| Invest early: Prenatal to 5 years (continued) | | | | | |
| Child Care Health Consultation | \$701,914 | \$2,060,798 | \$2,518,652 | — | \$10,023,077 |
| Service Delivery | \$701,914 | \$1,810,776 | \$2,518,652 | 5/2018–12/2021 | \$9,273,099 |
| Systems Development | — | \$250,022 | — | 5/2018–12/2021 | \$749,978 |
| Innovation Fund | \$332,939 | \$1,607,730 | \$1,774,014 | 5/2018–12/2020 | \$7,264,725 |
| Prenatal to Five Direct Program Staff | — | \$3,485,155 | \$3,493,396 | 1/2016–12/2021 | \$14,865,051 |
| Prenatal to Five Administration | — | \$4,146,723 | \$3,070,658 | 1/2016–12/2021 | \$13,085,595 |
| Sustain the gain: 5 to 24 years | | | | | |
| Youth Development² | — | \$3,952,473 | \$3,952,473 | 1/2018–12/2021 | \$16,088,339 |
| School Partnerships | \$1,051,907 | \$15,876,760 | \$15,600,976 | — | \$56,415,086 |
| Trauma-Informed and Restorative Practices in Schools | \$989,277 | \$5,853,506 | \$6,014,709 | 9/2017–12/2021 | \$21,912,594 |
| Timely Response to Adverse Childhood Experiences | \$24,800 | \$250,000 | \$279,514 | 2/2018–12/2021 | \$609,782 |
| School-Based Health Centers | \$37,830 | \$1,771,727 | \$1,661,145 | 9/2017–12/2021 | \$7,096,800 |
| Out-of School-Time | — | \$3,528,856 | \$3,286,581 | 8/2017–12/2021 | \$16,480,345 |
| Screening, Brief Intervention, and Referral to Services (SBIRT) | — | \$4,472,671 | \$4,359,026 | 10/2017–12/2021 | \$10,315,565 |
| Family and Community Connections | \$963,625 | \$4,423,739 | \$4,408,390 | — | \$11,622,251 |
| Healthy and Safe Environments | — | \$1,219,846 | \$1,097,290 | 7/2017–12/2021 | \$4,979,598 |
| Adolescent Immunization Improvement Partnership | — | \$397,538 | \$306,351 | 11/2017–12/2021 | \$812,222 |
| Family Engagement | \$963,625 | \$2,806,355 | \$3,004,749 | 9/2018–12/2021 | \$5,830,431 |
| Transitions to Adulthood | — | \$3,596,516 | \$3,321,542 | — | \$14,275,355 |
| Helping Young Adults Transition to Adulthood | — | \$1,211,489 | \$1,557,938 | 1/2018–12/2021 | \$6,470,790 |
| Clear Path to Employment | — | \$985,027 | \$397,459 | 7/2017–12/2021 | \$2,979,900 |
| Career Launchpad | — | \$900,000 | \$1,126,388 | 8/2018–12/2021 | \$3,776,103 |
| Peer Connectors Project | — | \$500,000 | \$239,757 | 8/2018–12/2021 | \$1,048,562 |
| Stopping the School to Prison Pipeline | — | \$6,198,351 | \$4,785,978 | — | \$17,551,421 |
| Community Supports and Outreach and Case Managements | — | \$3,460,875 | \$4,250,174 | 2/2018–12/2021 | \$14,022,677 |
| Project SCOPE | — | \$601,082 | \$151,077 | 6/2017–12/2021 | \$600,974 |
| Theft 3 and Mall Safety Project (T3AMS) | — | \$1,936,394 | \$384,727 | 2/2017–12/2021 | \$2,712,961 |
| CEDAR Program | — | \$200,000 | — | 1/2019–12/2020 | \$214,809 |

Investment index | Communities of Opportunities awards

| Investments, by investment area and strategy | Unspent funds 2016–2020 | 2021 budget | 2021 expenditures | Years of investment | Total invested 2016–2021 ¹ |
|---|----------------------------|----------------------|----------------------|------------------------|--|
| Sustaining the gain: 5 to 24 years (continued) | | | | | |
| Five to 24 Direct Program Staff | — | \$2,688,968 | \$2,292,637 | 1/2016–12/2021 | \$6,715,120 |
| Five to 24 Administration | — | \$1,684,917 | \$1,627,034 | 1/2016–12/2021 | \$7,237,180 |
| Technical Assistance and Capacity Building (PN–5 & 5–24) ³ | \$83,783 | \$2,122,699 | \$1,967,775 | 9/2017–12/2021 | \$4,255,679 |
| Communities Matter | \$1,835,879 | \$10,126,904 | \$11,915,792 | — | \$36,487,153 |
| Communities of Opportunity | \$1,210,934 | \$8,905,059 | \$10,193,982 | — | \$30,274,181 |
| Place-Based and Cultural Community Partnerships | \$520,155 | \$3,845,099 | \$4,378,807 | 9/2017–12/2021 | \$16,283,852 |
| Systems and Policy Change | \$311,821 | \$2,305,053 | \$2,625,000 | 2/2018–12/2021 | \$9,207,459 |
| Learning Community | \$378,958 | \$2,754,907 | \$3,190,175 | 1/2019–12/2021 | \$4,782,870 |
| Communities of Opportunity Direct Program Staff | \$624,945 | \$775,055 | \$1,363,541 | 1/2016–12/2021 | \$4,723,583 |
| Communities of Opportunity Administration | — | \$446,790 | \$358,269 | 1/2016–12/2021 | \$1,489,388 |
| Homelessness Prevention | — | \$4,467,000 | \$3,488,859 | — | \$19,524,424 |
| Youth and Family Homelessness Prevention Initiative (YFHPI) | — | \$3,900,000 | \$3,085,120 | 10/2016–12/2021 | \$18,007,808 |
| YFHPI Direct Program Staff | — | \$567,000 | \$403,739 | 6/2016–12/2021 | \$1,516,616 |
| Evaluation⁴ | — | \$4,898,064 | \$5,399,877 | 10/2016–12/2021 | \$17,335,551 |
| Elections⁵ | | | | | \$117,276 |
| TOTAL INVESTMENT through December 31, 2021 | \$10,398,185 | \$107,802,154 | \$111,542,715 | — | \$389,973,219 |

¹ Amount invested includes all 6 years of expenditures; original Implementation Plan budget was \$400M and includes legally required levy fund reserves.

² Programs Include Mentoring, Youth Leadership, Positive Identity Development, and Healthy Relationships and DV Prevention.

³ Technical Assistance and Capacity Building funding was blended between Investing Early and Sustain the Gain with most service providers.

⁴ Evaluation Total includes Metropolitan Parks District prorationing expenditures from 2016.

⁵ Elections Total is for 2015 Prop 1 Levy General Election expenditures in 2016.

Note on all expenditures that exceeded 2021 budget: Strategies and programs within the Best Starts for Kids Levy intentionally spent up to their full 6-year implementation plan amounts in 2021 in order to meet the ordinance-required allocations and community commitments. Spending should be considered within the context of the full 6 years, or total amount invested.

Note on expenditures that exceeded 2021 budget plus 2016–2020 unspent funds: Best Starts for Kids responded to community feedback and needs by using flexibility within its budget structure to intentionally reallocate some funds within investment areas (such as Invest Early).

Communities of Opportunities awards

All Best Starts for Kids annual reports are required to include a chart with information on any awards made under Communities of Opportunity (COO) since the last reporting cycle, in accordance with the requirements of the Best Starts for Kids Implementation Plan. COO did not make any new awards in 2021. The last set of COO awards can be seen on pages 88–98 of the [2020 Annual Report](#).

Community Partners

Best Starts for Kids encourages collaboration and partnership between organizations. While this list reflects the primary agencies holding contracts with Best Starts for Kids, many others carry out the work in partnership with these organizations.*

501Commons

A Supportive Community for All

- Empower Youth Network
- Encompass
- Hopelink
- Mt. Si Senior Center
- Snoqualmie Valley Food Bank

African Community Housing and Development

Africans on the Eastside

Africatown Center for Education & Innovation

Africatown Community Land Trust

Alan T. Sugiyama High School

Alianza

Alliance for Gun Responsibility

Alta - Alternative Learning and Therapeutic Avenues

alterNative Consulting

Amara

ANEW

API Chaya

Arts Corps

Asian Counseling and Referral Service

Asian Pacific Islander Coalition

Advocating Together for Health

Atlantic Street Center

Auburn School District

Austin Foundation

Being Empowered Thru Supportive Transitions

Bella's Creative Learning Center

Bellevue Boys and Girls Club

Bellevue School District

Birth to Three Developmental Center

Black Star Alliance

Black Star Line African Family

Boyer Children's Clinic

BRAVE (Building Resilience Awareness & Variations of Excellence)

Bridging Cultural Gaps

Bulle Consulting

Business Impact NW

Cambodian Cultural Alliance of Washington

Cardea

Casa Latina

Cascade Middle School

Cascadia Consulting Group

Catholic Community Services

Celebrating Roots

Center for Human Services

Center for MultiCultural Health

Central Area Youth Association

Centro Cultural Mexicano

Cham Refugees Community

Chief Seattle Club

- Labateyah Youth Home
- Mother Nation
- Native American Women's Dialog on Infant Mortality
- Seattle Indian Health Board
- Seattle Indian Services Commission
- Seattle Public Schools Huchoosedah Indian Education

- United Indians of All Tribes Foundation
- Urban Indian Health Institute

Child Care Resources

Childhaven

Children's Home Society of Washington

Children's Therapy Center

ChildStrive

Chinese Information and Service Center

CHOOSE 180

- Collective Justice
- Community Passageways
- Creative Justice

City of Renton

City of Shoreline

City of Tukwila

Collective Justice

Collectivo de Pueblos Originarios

Communities Count

Communities in Schools of Kent

Communities of Rooted Brilliance

Communities Rise

Community Health Board Coalition

- Afghan Health Initiative
- African Leaders Health Board
- African-American Health Board
- Afrodescent and Indigenous Health Board
- Cham Health Board
- Congolese Health Board
- Eritrean Health Board
- Ethiopian Health Council Health Board
- Filipino Community Health Board
- Iraqi/Arab Health Board
- Khmer Health Board
- Pacific Islander Health Board of Washington
- Somali Health Board
- Vietnamese Health Board
- WA LatinX Health Board

Community Network Council

Community Passageways

Comunidad Latina de Vashon

Comunidad Latina de Vashon

- Latino Community Fund
- Puentes

Congolese Integration Network

Contacto Consulting

Crescent Collaborative

- Africatown Community Land Trust
- Byrd Barr Place
- Capitol Hill Housing
- Friends of Little Saigon
- Seattle Chinatown-International District Preservation and Development Authority

Crux Consulting Consortium

Dare2Be Project

- New Birth Center for Community Inclusion
- Skyway Community Advocates Cohort
- Urban Food Systems Pact

Debbie Peterson

Dr. Debra Sullivan

Delridge Neighborhoods Development Association

Denise Louie Education Center

Dick Scobee Elementary School

Dimmit Middle School

Dispute Resolution Center of King County

Divine Alternatives for Dads Services (D.A.D.S.)

Dr. Sharon Knight

Duwamish Tribal Services

East African Community Services

Eastside Baby Corner

Eastside Pathways

Education for All

El Centro de la Raza

Empower Youth Network

Empowering Youth & Family Outreach

Encompass

Eritrean Association of Greater Seattle

Families of Color Seattle

FamilyWorks

Federal Way Black Collective

Federal Way Public Schools

Federal Way Youth Action Team

| | | | |
|--|---|---|--|
| FEEST | International Community Health Services | Multi-Service Center | Phenomenal She |
| Filipino Community of Seattle | Intiman Theatre | Muslim Community & Neighborhood Association | Potlatch Fund |
| First Five Years and Beyond | Iraqi Community Center of Washington | Na'ah Illahee Fund | Pride Foundation |
| Food Innovation Network | J.J. Smith Birth to Five Center | National Development Council | Program For Early Parent Support (PEPS) |
| ForFortyTwo | Johnnie McKinley Associates LLC | - BDS Planning and Urban Design | Progress House |
| - Glover Empower Mentoring | Kaiser | - Craft3 | Puget Sound Sage |
| - Kent Black Action Commission | Kandelia | - Moving Beyond | Rainier Beach Action Coalition |
| Freedom Project | Kennedy High School | National Urban Indian Family Coalition | Rainier Beach Community Empowerment Coalition |
| - Beyond the Blindfold Project | Kent Community Development Collaborative | Native Action Network | Rainier Valley Midwives |
| - Freedom Project East | - Being Empowered Thru Supportive Transitions | Native American Women's Dialog on Infant Mortality | Rainier Valley Partnership |
| Friends of the Children Seattle | - Centro Rendu - St. Vincent de Paul | Navos | - HomeSight |
| Friends of Youth | - Communities in Schools of Kent | Neighborcare Health | - Multicultural Community Coalition (MCC) |
| Gage Academy of Art | - Communities of Rooted Brilliance | Neighborhood House | - On Board Othello (OBO) |
| Gay City | - Community Network Council | New Economy Washington | - Rainier Beach Action Coalition (RBAC) |
| Geeking Out Kids of Color | - Mother Africa | - Front and Centered | - Puget Sound Sage |
| Gender Justice League | Kent School District | - People's Economy Lab | - South Communities Organizing for Racial & Regional Equity |
| - Black Trans Taskforce | Kent Youth & Family Services | - Statewide Poverty Action Network | - The Beet Box |
| - Heartspark Press | Kent Youth and Family Services | - Washington Budget and Policy Center | Ratnesh Nagda |
| Global Perinatal Services | KidsQuest Children's Museum | New Horizons Ministries | Red Eagle Soaring |
| Global to Local | Kinderling | Northshore School District | Replanting Roots, Rebuilding Community |
| Got Green | King County Equity Now | Northshore Youth and Family Services | - Africatown Center for Education & Innovation |
| Greater Maple Valley Community Center | Korean Community Service Center | Northwest Center | - Africatown Central District Preservation & Development Association |
| Greater Seattle Business Association | La Roxay Productions | Northwest Education Access | - Black Community Impact Alliance |
| Greenplay Northwest | Lake Washington School District | Northwest Health Law Advocates | - Cultural Reconnections |
| Harborview Medical Center | Lambert House | Northwest Justice Project | - Institute for African Centered Thought |
| Hazelwood Elementary School | Latino Community Fund | Northwest School for Deaf and Hard-of-Hearing Children | - Umoja PEACE Cente |
| Headwater People | Latinos in Tech | Not This Time | - Village Spirit Center |
| Healthpoint | Life Enrichment Group | Odessa Brown Children's Clinic | Refugee Women's Alliance of Washington |
| Hearing, Speech and Deaf Center | LifeWire | OneAmerica | Renton Innovation Zone Partnership |
| Highline School District | Listen and Talk | Open Arms Perinatal Services | Resource Media |
| HopeCentral | Living Well Kent | Open Doors for Multicultural Families | Restore Assemble Produce (RAP) |
| Hopelink | Longhouse Media | Para Los Niños | Rethinking Schools |
| Horn of Africa Services | Look, Listen and Learn | Partners for Educational Reform and Student Success (PERSS) | Riverton Park United Methodist Church |
| Hummingbird Indigenous Doula and Family Services | Luther Memorial Lutheran Church | Partners for Our Children, University of Washington School of Social Work | Rooted in Vibrant Communities (RVC) |
| Indian American Community Services | Mercer Island School District | People of Color Against AIDS Network (POCAAN) | RHL Consulting LLC |
| Ingersoll Gender Center | Mother Africa | Perinatal Support Washington | Ryther |
| Institute for African Centered Thought | Mother Nation | | SafeFutures Youth Center |
| Institute for Community Leadership | MPHI | | |
| InterCultural Children and Family Services | Multicultural Community Coalition | | |
| InterIm Community Development Council | | | |

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| Sama Praxis | - West Hill Community Association | Tilth Alliance | WAPI Community Services |
| School Readiness Consulting | Snoqualmie Valley Food Bank | Tiny Trees Preschool | Washington Association for Infant Mental Health |
| School's Out Washington | Snoqualmie Valley School District | TransFamilies | Washington Building Leaders of Change (WA-BLOC) |
| SeaTac-Tukwila Community Coalition | SnoValley Tilth | TRANSform Washington | Washington Chapter of the American Academy of Pediatrics |
| - Congolese Integration Network | SOAR | Transgender Economic Empowerment Coalition | Washington Dream Coalition |
| - Food Innovation Network | Somali Family Safety Task Force | - GSBA - Greater Seattle Business Association | Washington NAACP |
| - Global to Local | Somali Health Board | - POCAAN — People of Color Against Aids Network | We. Act. Present. Perform. (We.APP) |
| - Partner in Employment | Somali Youth and Family Club | - TransFamilies | Wellspring |
| - Somali Health Board | South Communities Organizing for Racial & Regional Equity | - UTOPIA Washington | West African Community Council |
| - Somali Youth and Family Club | South Seattle Women's Health Foundation | Treehouse | WestEd |
| Seattle CARES Mentoring Movement | Southeast Youth and Family Services | Tukwila School District | WestSide Baby |
| Seattle Children PlayGarden | Southwest Youth and Family Services | United Indians of All Tribes Foundation | White Center Partnership |
| Seattle Children's Hospital | St. Vincent de Paul of Seattle and King County | United Way of King County | - Cambodian Cultural Alliance of Washington |
| Seattle Colleges | Start Early | University of Washington | - Cham Refugees Community |
| Seattle Counseling Services | Statewide Poverty Action Network | University of Washington School Mental Health Assessment Research and Training (SMART) Center | - Education for All |
| Seattle Foundation | STEM Paths Innovation Network | University of Washington, Experimental Education Unit, Haring Center | - FEEST |
| Seattle Indian Health Board | Surge Reproductive Justice | Unkitawa | - Partner in Employment (PIE) |
| Seattle Parks and Recreation | - Black Birth Workers Collective | Unleash The Brilliance | - Southwest Youth and Family Services |
| Seattle Public Schools | - Families of Color Seattle | Upower | - Trusted Advocates |
| Seattle Urban Native Nonprofits (SUNN) | Swedish Health Services | Urban Family | - Village of Hope |
| - Chief Seattle Club | Tahoma School District | Urban League of Metropolitan Seattle | - White Center Community Development Association |
| - Duwamish Tribal Services | Techbridge Girls | Urban Native Education Alliance | - YES!Foundation of White Center |
| - Indigenous Showcase | Tenants Union of Washington State | UTOPIA (United Territories of Pacific Islanders Alliance) Washington | - YWCA Seattle King Snohomish |
| - Na'ah Illahee Fund | Tesfa Program | Vashon Island School District | White Center Community Development Association |
| - Native Action Network | The Arc of King County | Vashon Youth and Family Services | WithinReach |
| - Native American Women's Dialog on Infant Mortality | The Capacity Collective | Ventures | Wonderland Child and Family Services |
| - Nia Tero | The Church Council of Greater Seattle | Village of Hope | World Relief Seattle |
| - Northwest Justice Project - Native American Sector | The Community Café Collaborative | Village Spirit Center | Y Social Impact Center (YMCA) |
| - Potlatch Fund | The Dove Project | Vision Change Win | YES! Foundation of White Center |
| - Red Eagle Soaring | The Imagine Institute | Voices of Tomorrow | YMCA of Greater Seattle |
| - United Indians of All Tribes Foundation | The Joseph Project | Wa Na Wari | YWCA Seattle King Snohomish |
| - Urban Native Education Alliance | The Maternal Coalition | - Africatown Community Land Trust | Young Women Empowered |
| Sisters in Common | The Mockingbird Society | - CD Brothers and Sisters | Youth Eastside Services |
| Skykomish School District | The Northwest Network | - Keep Your Habitat | YouthCare |
| Skyway-Westhill Coalition | The North Youth | - King County Equity Now | Zeno |
| - African Community Housing & Development | The University of California, San Francisco | Walk Away City Collaborative | |
| - Renton Area Youth and Family Services | Therapeutic Health Services | | |
| - Renton Innovation Zone Partnership | | | |
| - Renton School District | | | |
| - Skyway Solutions | | | |
| - Somali Parent Education Board | | | |
| - Urban Family | | | |

* Contracted partner names may differ because of organizational or individual name changes.

Making King County a welcoming community where every person can thrive.

Best Starts for Kids

Best Starts for Kids strengthens families and communities so that babies are born healthy, children thrive and establish a strong foundation for life, and young people grow into happy, healthy adults.

MIDD Behavioral Health Sales Tax Fund

MIDD supports equitable opportunities for health, wellness, connection to community, and recovery for King County residents living with or at risk of behavioral health conditions, through a continuum of care that includes prevention, early intervention, crisis diversion, recovery, and reentry.

Veterans, Seniors and Human Services Levy

The King County Veterans, Seniors and Human Services Levy connects servicemembers and veterans, residents age 55 or older, and resilient communities to programs and services that help them live healthy, productive and meaningful lives. It helps individuals and families transition to affordable housing, get job training, find employment, receive behavioral health treatment, and more.



King County

401 Fifth Avenue, Suite 500, Seattle, WA 98104

Phone: 206-263-9100

kingcounty.gov/BestStarts

Certificate Of Completion

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| Envelope Id: 8D42E3158F32463FBEDBFA085E88081C | Status: Completed |
| Subject: Complete with DocuSign: Motion 16252.docx, Motion 16252 Attachment A.pdf | |
| Source Envelope: | |
| Document Pages: 3 | Signatures: 2 |
| Supplemental Document Pages: 88 | Initials: 0 |
| Certificate Pages: 5 | Envelope Originator: |
| AutoNav: Enabled | Cherie Camp |
| Envelopeld Stamping: Enabled | 401 5TH AVE |
| Time Zone: (UTC-08:00) Pacific Time (US & Canada) | SEATTLE, WA 98104 |
| | Cherie.Camp@kingcounty.gov |
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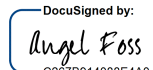
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 Angel.Foss@kingcounty.gov
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 Signed: 12/16/2022 11:23:58 AM

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Supplemental Documents: Motion 16252 Attachment A.pdf

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