City of Pittsburg
Youth and Young Adult
Service Master Plan

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ACKNOWLEDGEMENTS

City Council
Jelani Killings, Mayor
Merl Craft, Vice Mayor
Holland Barrett White
Shanelle Scales-Preston
Juan Antonio Banales

City Clerk
Alice Evenson

City Treasurer
Nancy Parent

City Manager
Garrett Evans

Assistant City Manager
Fritz McKinley

City Staff
Kolette Simonton, Assistant Director of Economic Development and Recreation
Jordan Davis, Assistant to the City Manager

Consultants
Iris Archuleta, Emerald HPC
Keith Archuleta, Emerald HPC

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EXECUTIVE SUMMARY

The City of Pittsburg – along with partners such as Pittsburg Unified School District (PUSD), Mt. Diablo Unified School District (MDUSD), Los Medanos College (LMC), and numerous other non-profit agencies and religious institutions – has a long-standing and well-regarded history of providing services, programs, and educational opportunities to youth and young adults in the community. The City itself, through the Recreation Department, Police Department's Police Activities League (PAL), and the Pittsburg Arts and Community Foundation (PACF), operate, manage, and support over a dozen youth-oriented activities, from community service programs to sports, tutoring, and fine arts. In addition, the City provides financial support for specific youth programs that provide before and after school care and tutoring, as well as programs that provide young adults with life and career skills to help prepare them for the workforce.

However, as the City's population continues to grow – California Department of Finance estimates the population to exceed 90,000 by year 2040 – it will become increasingly critical for Pittsburg to effectively reach out to and provide services for the growing demographic of young people, and provide opportunities for them to enrich and enhance their lives, physical and mental health, and social development. The City can build on its previous successes and lessons learned, as well as the hard work of other agencies facing similar hurdles, to continue to grow the services and support provided to youth and young adults, and work to create a civic-minded populace.

Staff has researched other youth- and young adult-centered planning efforts, and seeks to include the most applicable and effective goals, policies, and initiatives to the City of Pittsburg's plan, while continuing to look to our public and private sector partners and peers to help inform and implement the strategies identified herein.

Based on the report prepared by Emerald HPC for the City in 2019, as well as research of other programs and City-led workshops, the goal of the City of Pittsburg through this effort is to:

- Identify gaps in service for youth and young adults;
- Promote health and wellness;
- Provide structure and support for youth during the time between the end of the school day and the return of guardians to the home;
- Increase capacity, collaboration, and effectiveness of all youth services offered in Pittsburg;
- Build life skills and civically responsible adults; and
- Enhance outreach efforts.

This Plan has been developed with input from City Council members, City staff, the Pittsburg Police Department, PUSD Board members and staff, MDUSD Board members, LMC staff, community members, community youth, and young adults.

BACKGROUND

The City of Pittsburg is located in east Contra Costa County, between the Cities of Concord and Antioch, along the Suisun Bay where the San Joaquin and Sacramento Rivers merge. With an estimate population of just over 72,000 as of 2019 – up from an estimated 63,000 in 2010 – the City is generally considered a suburb of some of the larger Bay Area cities. Pittsburg has historically been known as an industrial city,

with large employers such as USS-POSCO and Corteva Agriscience (formerly Dow Chemical Company) calling the northern waterfront home; however, in recent years, the City has begun to experience a greater outflow of its working population, as more residents head to larger job centers to the west.

Pittsburg has one public high school, one continuation school, three junior high schools, and twelve elementary or K-8 schools. These educational facilities are operated by PUSD and MDUSD, though a small portion of southeastern Pittsburg is within the Antioch Unified School District (AUSD) attendance area. The City has one public library, two BART Stations, and is served by the TriDelta Transit bus system. Pittsburg is also home to Los Medanos College (LMC), recently ranked in the top six for community colleges nationwide.

The City itself lacks some of the infrastructure helpful in providing youth services. Former youth centers along Crestview Drive have been closed since the late 1990s. The Pittsburg Youth Development Center, which offers youth classes and sports, is outdated and cannot meet the demand of a city the size of Pittsburg.

PLAN DEVELOPMENT

In May 2019, the City hired Emerald HPC to lead a roundtable discussion of representatives from the City, PUSD, MDUSD, and the Pittsburg Police Department. During the roundtable, the group listed the following common issues regarding the needs of Pittsburg youth:

- more places to gather;
- greater diversity of activities, particularly after school;
- time with parents, guardians, and positive role models/mentors; and
- employment and career pathway opportunities.

Following the roundtable discussion, Emerald HPC conducted additional demographic and background research, and identified several key consideration items that would help inform future policies, programs, or funding allocations targeting youth service. The key findings contained within the reports provided by Emerald HPC are summarized below:

- Many school age children lack supervision during the hours of 3:00 p.m. and 7:00 p.m., in part due to long commute times resulting from an imbalance of jobs in the area. Significant commutes leave less time for parents and caregivers to spend with their families and adversely affects the quality of life for children and youth.
- Social determinants are in part responsible for the unequal and avoidable differences in health status within and between communities.
- Collaboration between families, schools, and law enforcement is critical for youth, and therefore the future of communities, to prosper.
- There are predictable outcomes related to youth who become disengaged for a variety of factors. Adolescents and young adults are particularly sensitive to environmental influences, such as family, peer group, school, neighborhood, policies, and societal cues.
- Economic mobility is key, and poverty, unemployment, transportation, childcare, and homelessness greatly impact career/college preparation.

Following the fact-finding and research phase, staff and Emerald HPC worked together to identify a set of strategies, actions, and next steps. These include:

1. *Employment-focused skills training.* Investing in programs that train at-risk youth, reentry, and other populations in local industries will provide increased access to job opportunities close to home, thereby strengthening both the community and the local economy. Creating stronger partnerships with local community colleges and specialized employment skills training partners can help increase youth access to the skills needed for employment.

2. *Improve neighborhood health and mortality rates.* There is a need to improve the health of the people within low-income communities. This begins with neighborhood and health partnerships that include positive community education and advocacy. Once the campaign is ready for launch, there must be a strategic, facilitated outdoor community information and engagement forum with health professionals, city and county leaders and officials in partnership with respected neighborhood leaders.

3. *Community outreach and engagement to support neighborhoods and public schools.* Prior to the launch of a community outreach and engagement strategy, conversations with key stakeholders must be held so that they are sufficiently versed in agreed upon strategy. Sharing project implementation and success with the community will help residents champion the comprehensive strategy and own the commitment, effort and outcomes that support community health and prosperity.

A community outreach and engagement strategy may utilize volunteers who have sufficient interest in the strategy, sufficient time to participate, and collaborative training prior to involvement. These trained and certified volunteers can include parents, members of the religious community, relevant non-profits, school district student services staff, City employees that desire to participate, including those from the Police Department or PAL, and high school and college students enrolled Pittsburg High School and at Los Medanos College.

Per the direction provided by the Subcommittee members, staff attempted to identify the gaps in service needs. To do this, staff utilized the recommendations of Emerald HPC to complete an extensive list of programs, activities, and services available to youth of all ages in the City. Upon review, and in light of the challenges noted within Emerald HPC's factfinding efforts, staff has identified the most critical gap in service as high school-aged students between the hours of 3:00 and 7:00 p.m. While programs for this age group do exist, the number of spots are often limited, and programs may carry a fee.

Initial opportunities noted by the 2x2 Subcommittee members include getting youth involved/engaged in local government; coordinating a youth services network by collaborating with other agencies in informing youth of resources; helping enhance job skills training; and continue to help build capacity for existing organizations.

DEMOGRAPHICS AND STATISTICS

The City of Pittsburg has a diverse, and relatively young population, with a large percentage (35%) of residents under the age of 25. The median age of a Pittsburg resident is 35, several years younger than the county average of 40.

As described in the Conceptual Framework prepared by Emerald HPC, and per Contra Costa County Health Department data, in Contra Costa County, a child born in a low-poverty area in 2000 could expect to live more than six years longer than a child born in a high-poverty area. Life expectancy in low-poverty areas was 81.4 years, compared to 74.9 years in high-poverty areas. African Americans in Contra Costa, in particular, had a shorter life expectancy (73.1 years) than any other racial/ethnic group.

Not surprisingly, education levels also play into life expectancy, as it is widely recognized that higher education correlates to lower levels of poverty (U.S. Census Bureau) which, as described above, have a direct impact on life expectancy. Per the Conceptual Framework, a child born in a high-education area in Contra Costa (i.e., all census tracts with less than 5% of residents with less than a high school diploma) in 2000 could expect to live more than seven years longer than a child born in a low-education area (all census tracts with 25% or more residents with less than a high school diploma). As shown in Table 1.2, below, approximately 75% of Pittsburg students surveyed as part of the California Healthy Kids Survey (CHKS) 2016-17, for PUSD responded that their parents either did not have a college degree, or did not know the education level of their parents.

The City does face a poverty rate that exceeds that of the county, approximately 13.6% compared to 9.75%. As shown in Figure 1.2, residents identifying as "Hispanic," were the most common racial or ethnic group living below the poverty line.

Pittsburg youth also attend after school programs at a low rate. Based on CHKS 2016-17 data, more than 80% of students surveyed in grades 7, 9, and 11 did not attend after school programs at any point during the week.

Table 1.1: Population by Age

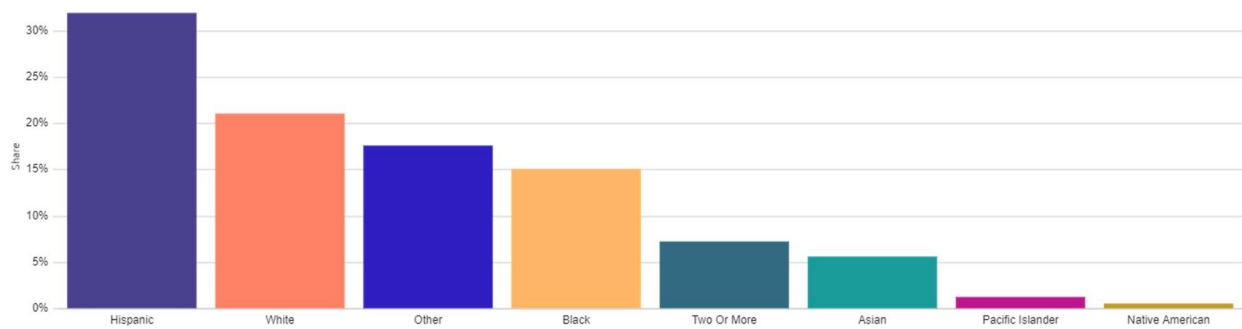|	Estimate	Percent
Total City population	69,449	--
Under 5 years	4,880	7.0%
5 to 9 years	5,226	7.5%
10 to 14 years	4,591	6.6%
15 to 19 years	4,176	6.0%
20 to 24 years	5,462	7.9%

(Sources: U.S. Census ACS 5-Year Estimates)

Figure 1.1: Race or Ethnicity (All Ages)
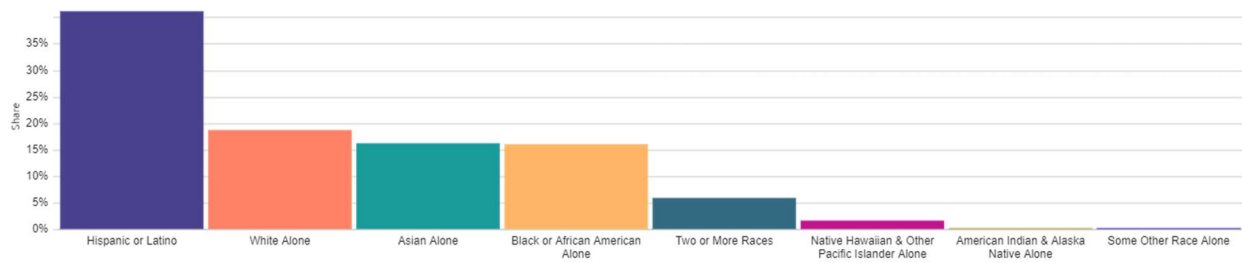
(Sources: U.S. Census ACS 5-Year Estimates, DataUSA)

Figure 1.2: Poverty by Race or Ethnicity (All Ages)

(Sources: U.S. Census ACS 5-Year Estimates, DataUSA)

Table 1.2: Highest Education of Parents

	Grade 7	Grade 9	Grade 11	NT[1]
Did not finish high school	13%	18%	25%	6%
Graduated from high school	20%	25%	23%	5%
Attended college but did not complete four-year degree	9%	15%	18%	6%
Graduated from college	25%	23%	24%	-
Don't know	34%	18%	9%	4%

1: NT includes continuation, community day, and other alternative school types. (Source: CHKS 2016-17)

Table 1.3: Number of Days Attending After School Programming

	Grade 7	Grade 9	Grade 11	NT[1]
0 Days	82%	87%	89%	95%
1 Day	1%	2%	2%	0%
2 Days	1%	5%	4%	0%
3 Days	2%	1%	1%	0%
4 Days	3%	0%	1%	0%
5 Days	10%	4%	3%	5%

1: NT includes continuation, community day, and other alternative school types. (Source: CHKS 2016-17)

PLAN VISION, OBJECTIVES, and STRATEGIES

The *Youth and Young Adult Service and Outreach Master Plan* is intended to implement the City's vision for a community the supports the education, health, and wellness of its youth and young adults and seeks to develop future generations of civic-minded residents that work and serve the City.

The established Vision of the *Plan* is reflective of the values of the City and its partners; the adopted Vision will be implemented through six over-arching *Plan* goals and multiple strategies that will rely on the City and key partners for implementation.

VISION:

Allow Youth and Young Adults in the City of Pittsburg to realize their full potential through programs and policies that support physical and mental health and wellness as well as economic opportunity.

The formulation of this Plan is a result of feedback gathered from stakeholders and research conducted by the City and via the City's consultant, Emerald HPC. The following objectives will frame the City's actions going forward and will establish strategies for reaching the identified outcome, help provide milestones for Plan implementation, and a gauge to help measure success. Implementation Strategies may include action steps that further break down tasks. This working document will direct the collective efforts of the City and its partners, as applicable. The objectives contained herein are intended to be fluid, and staff anticipates minor modifications as additional research and outreach is conducted.

The following Implementation Strategies have been grouped according to their estimated implementation timing rated on a scale of one to three to gauge the City effort and resources required for implementation; however, due to a variety of contributing factors, the City wishes to convey that the timing of implementation may need to be adjusted as funding, personnel resources, and other factors come to light. "Short term" strategies are likely to be implemented within the first year of Plan adopted, while "medium term" strategies likely will require additional funding, staff time, or outreach with a timeline of 2-5 years. "Long term" strategies require the most outreach, planning, and funding, and thus have the furthest horizon, likely in the 3-10 year range. Many of these strategies are contingent or rely heavily upon implementation of other initiatives, but also may be ongoing once initiated.

Potential funding mechanisms for programs include new tax and lease revenues from specific businesses or developments, private contributions, Pittsburg Power Company contributions, General Fund revenues, event sponsorship, and grants. Funding for facilities and capital projects, such as future recreation or other types of youth centers will likely come from community benefit contributions or other types of private sponsorship; however, staff will explore other financing options, such as enhanced infrastructure financing districts (EIFD) and grants.

OBJECTIVE 1:   IDENTIFY GAPS IN YOUTH AND YOUNG ADULT SERVICES

As part of this effort, the City seeks to help fill the voids facing certain groups of youth and young adults that may not benefit from or qualify for traditional after school and summer programs and services such as organized sports or child day care. Identifying these "gaps" will require input from several key partners, as noted below, each with a specific role and expertise. The City's goal is to identify the group or groups lacking options for unstructured downtime, what opportunities currently exist that may need to be expanded or receive additional support, and how the City's partners can help create a continuum or services that will guide youth in Pittsburg through their teen and young adult years.

KEY PARTNERS:	RESOURCES NEEDED:
City of Pittsburg	Information on existing programs throughout the
School District Representatives	City
Los Medanos College	Staff personnel to manage database(s)
Non-Profit Organizations	Volunteers for Youth Commission
Religious Institutions	

IMPLEMENTATION STRATEGIES:

Short Term

1.1   Establish a database of youth and young adult services to help identify underserved demographics.

Progress indicators: Database creation

1.2   Inventory public and privately-owned facilities within the City to identify needs and spaces for youth programming.

Progress indicators: Inventory completion

1.3   Convene a series of roundtables to discuss the needs of youth and young adults in the City. Align City efforts with local school districts, LMC, and private service providers.

Medium Term

1.4   Discuss workforce needs with area businesses to identify targets.

Progress indicators: Reach out to a minimum 20 businesses annually

1.5   Convene a working group with LMC to identify and address workforce development needs and required skills, as well as programs for teens and young adults.

1.6   Identify an organization or commission comprised of youth and/or young adults that can provide insights to service gaps.

Progress indicators: Establishment of Youth Commission and identifying of commission roles and responsibilities

OBJECTIVE 2:   PROVIDE A PROGRAM AND SYSTEM THAT SUPPORTS POSITIVE YOUTH DEVELOPMENT.

One of the most critical aspects of providing youth services is ensuring facilities that offer youth and young adults a safe and supportive space where they can learn new life, social, and career skills that will help them throughout their lives. City-operated programs and facilities should be designed to promote youth engagement and growth within underserved populations.

KEY PARTNERS: RESOURCES NEEDED:
City of Pittsburg Staff   Recreation center
City of Pittsburg Police Activates League (PAL) Operational and maintenance funding
Volunteers   Private funding

IMPLEMENTATION STRATEGIES:

Short Term

2.1   Inform and educate staff about accepted best youth development program planning practices.

Progress indicators: Short term: Seminar for staff on best practices; Long term: 75% approval rating for programs in relation to youth development

2.2   Establish local branches of youth support initiatives that provide mentorship for minority youth, including but not limited to My Brother's Keeper and Black Girls Code.

Progress indicators: Establishment of programs and identification of funding mechanisms.

Medium Term

2.3   Design and implement teen friendly spaces or venues in designated facilities and properties.

Progress indicators: Short term: Identification of what is considered "teen friendly"; Long term: Updates to guidelines for development of public spaces and facilities

2.4   Create opportunities through recreation programming for young people to enhance self-esteem, self-confidence, lifetime leisure skills, and connectedness to community.

Progress indicators: Staff will provide the City Council and Youth Commission with a report on which and how programs are designed to address these needs

2.5   Invest in programs that train at-risk youth, reentry, and other populations in local industries, strengthening both the community and the local economy.

Progress indicators: Staff will provide the City Council and Youth Commission with a report on which and how programs are designed to address these needs

2.6   Identify potential funding mechanisms to support operation of youth facilities and programs.

Long Term

2.7   Identify opportunities to partner with a private developer(s) or financier(s) to construct a community recreational center.

OBJECTIVE 3:   DEVELOP A MECHANISM FOR YOUTH AND YOUNG ADULT PARTICIPATION IN CIVIC AFFAIRS.

As the City seeks to provide additional opportunities for youth and young adult engagement and service, the participation of these groups in City affairs is critical in helping to create a new generation of civic-minded residents that will lead Pittsburg and other communities for the next several decades. Providing youth and young adults with further knowledge and experience in City operations will create additional transparency and provide valuable insights into how Pittsburg functions, while also contributing fresh ideas and perspectives that reflect emerging voices.

KEY PARTNERS: **RESOURCES NEEDED:**
City of Pittsburg Staff   Funding for programs such as Pilot City
Youth Volunteers   School facilities for program implementation
PUSD Staff

IMPLEMENTATION STRATEGIES:

Short Term

3.1   Establish a youth commission to allow younger Pittsburg residents a forum for providing recommendations on policies, needs, priorities, projects, and budget items.

Progress indicators: Establishment of a Youth Commission

Medium Term

3.2 Increase opportunities for youth civic engagement through service-learning projects and volunteerism.

Progress indicators: Staff will monitor increases in youth participation in civic events and projects

Long Term

3.3 Engage high school and college-aged students in development of smart solutions that seek to utilize technology to improve City services.

Progress indicators: Identification of a program geared toward high school age students and adopted of the student-created solution by the City

OBJECTIVE 4: ESTABLISH POLICIES THAT SEEK TO HELP REDUCE UNSTRUCTURED DOWNTIME AND ALLOW GUARDIANS TO SPEND THE MAXIMUM AMOUNT OF TIME WITH CHILDREN.

As discussed previously and conveyed through the Framework prepared by Emerald HPC, many school age children lack supervision during the hours of 3:00 p.m. and 7:00 p.m., in part due to long commute times resulting from an imbalance of jobs in the area; this period of time is commonly referred to as "unstructured downtime," and has been shown to be detrimental to youth and young adults and contribute to disengagement. Significant commutes leave less time for parents and caregivers to spend with their families and adversely affects the quality of life for children and youth.

KEY PARTNERS:
City of Pittsburg Staff
Economic Development Experts
Business Owners/Operators
Real Estate Professionals

RESOURCES NEEDED:
Grant funding for plan development
Private funding and development for
infrastructure improvements

IMPLEMENTATION STRATEGIES:

Medium Term

4.1 As part of the General Plan update process, establish goals and policies that seek to bring jobs to East Contra Costa County, reducing commutes and allowing more time at home.

4.2   Identify creative solutions and provide infrastructure that allows for telecommuting or satellite offices in Pittsburg.

Progress indicators: Increase in the number of homes accessing high speed internet

OBJECTIVE 5:   PROMOTE PHYSICAL AND MENTAL HEALTH AND WELLNESS CONCEPTS INTO ALL PROGRAMS AND FACILITIES.

Low income families and communities of color are disproportionately affected by lack of health care and availability of mental health and wellness services. As described above, there is a need to improve the health of the people within Pittsburg, and particularly children and young adults living in poverty. The City seeks to address these issues in part through neighborhood and health partnerships, community education, and advocacy. Input from youth and young adults regarding the challenges faced on a day-to-day basis is critical to properly address these issues.

KEY PARTNERS:
City of Pittsburg Staff
Health Experts
PUSD Psychology Staff
LMC Diversity Leaders

RESOURCES NEEDED:
Funding for review of City programs to address health and wellness, nutrition, etc.

IMPLEMENTATION STRATEGIES:

Short Term

5.1   Assess existing programs for health and wellness components.

Progress indicators: Staff will conduct a review of existing programs that support health and wellness

Medium Term

5.2   Incorporate health and fitness components throughout the Department's youth programs.

Progress indicators: Staff will include assessments regarding health and fitness when bringing items before the City Council for funding or updates

5.3   Establish General Plan goals and policies that encourage health and wellness, specifically for youth from lower-income families.

5.4   Form partnerships to conduct youth programs that promote active, healthy lifestyles and positive development.

Long Term

5.5   Integrate nutrition education throughout our program offerings.

Progress indicators: Staff will include assessments regarding nutrition education when bringing items before the City Council for funding or updates

OBJECTIVE 6:   COLLABORATE WITH PUBLIC AND PRIVATE ORGANIZATIONS TO COORDINATE EFFORTS AND INVOLVE TARGET DEMOGRAPHICS IN PROCESS OF MARKETING AND OUTREACH.

The City's community outreach and engagement strategy will include conversations with key stakeholders. Effectiveness of any adopted initiative will rely on the community, faith leaders, and residents to champion the strategies contained within the Plan.

A community outreach and engagement strategy may utilize volunteers who have sufficient interest in the strategy, sufficient time to participate, and collaborative training prior to involvement. These trained and certified volunteers can include parents, members of the religious community, relevant non-profits, school district student services staff, City employees that desire to participate, including those from the Police Department or PAL, and high school and college students enrolled Pittsburg High School and at Los Medanos College.

KEY PARTNERS:
City of Pittsburg Staff
PUSD Staff
LMC Staff
Community Leaders
Faith-Based Organizations
Private Youth Service Providers

RESOURCES NEEDED:
Multimedia budget
Volunteers and organizations to promote
        initiatives
Equipment and software for preparation of
        outreach materials

IMPLEMENTATION STRATEGIES:

Medium Term

6.1   Establish a marketing strategy that will ensure that youth, parents, and other stakeholders are aware of programs, facilities, services and the benefits of participation.

Progress indicators: Conducts follow-up assessments to gauge interaction and effectiveness.

6.2   Develop a comprehensive marketing plan for youth initiatives.

Progress indicators: Conducts follow-up assessments to gauge interaction and effectiveness.

6.3   Partner with a multimedia organization (for example, BRIDEGOOD) to establish an Inspire Pittsburg design challenge and use the process to market youth involvement and civic responsibility.

Long Term

6.4   Partner with LMC to design a campaign intended to promote college and career services to graduating high school seniors and young adults.

Progress indicators: Conducts follow-up assessments to gauge effectiveness.

OBJECTIVE 7:   REPORTING AND PROGRESS ON IMPLEMENTATION.

This Plan is intended to evolve along with the City, as well as the youth and young adults which it serves. To allow the Plan to continually address the needs of the City as it grows, additional input is received, and funding becomes available, consistent review and analyzing of the policies and strategies of this document will be critical.

KEY PARTNERS: RESOURCES NEEDED:
City of Pittsburg Staff   No additional resources required
City Council

IMPLEMENTATION STRATEGIES:

Ongoing

7.1   Provide quarterly updates on Plan implementation to the School District Subcommittee (2x2).

7.2   Provide biannual updates on Plan implementation to the City Council.

Appendix A:

Emerald HPC Conceptual Framework

City of Pittsburg
Youth Services Collaborative Strategy

Conceptual Framework

Building a High Performing Youth Serving Community

Stakeholder Collaboration

Positive and Impactful Youth Outcomes

Best Practice Ideas and Opportunities

Engaging and Empowering Youth Through Collaboration
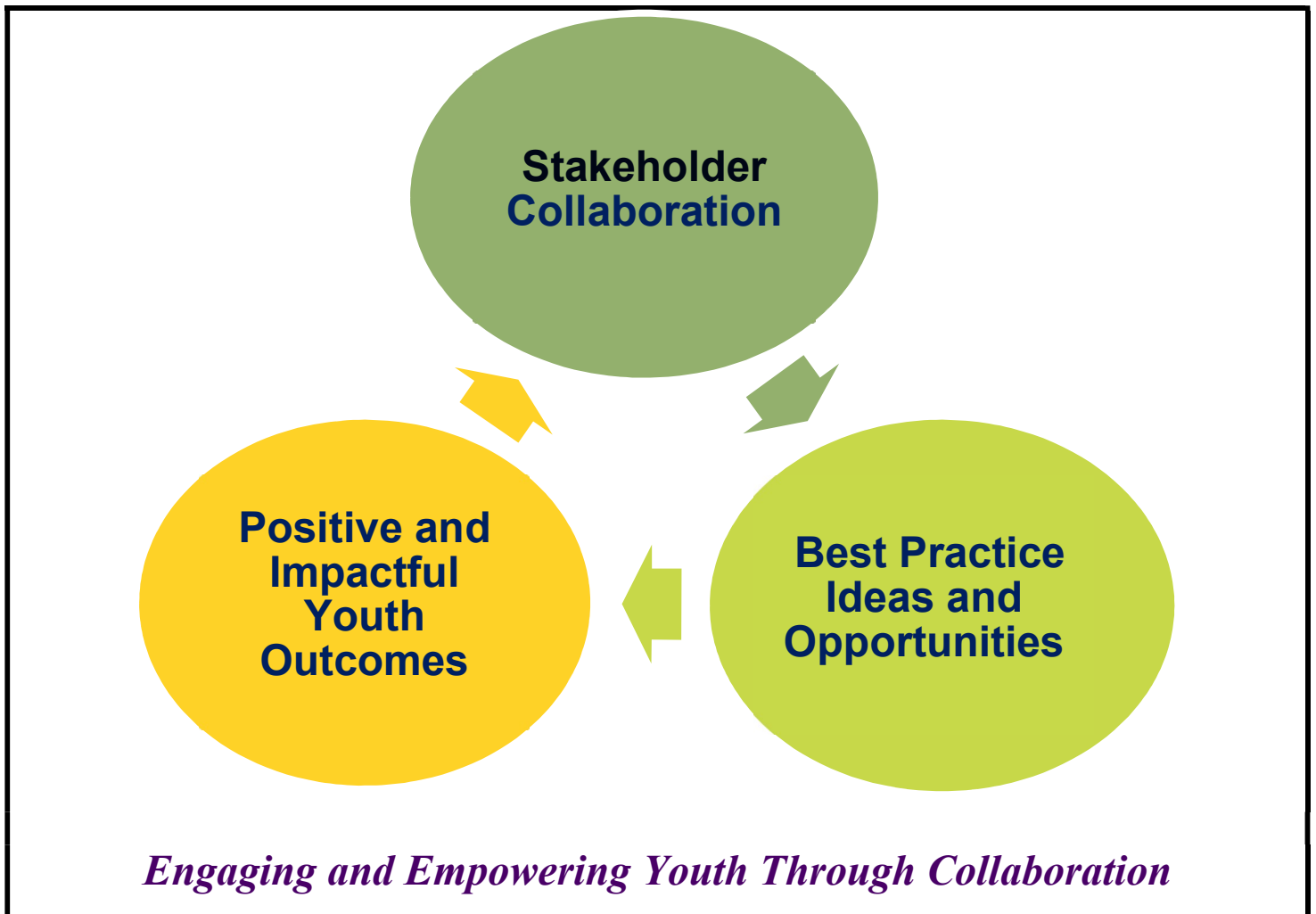
July 29, 2019
Keith & Iris Archuleta
Emerald HPC International, LLC

City of Pittsburg
Youth Services Collaborative Strategy

Conceptual Framework

Building a High Performing Youth Serving Community

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I. INTRODUCTION

Purpose

The City of Pittsburg has contracted with Emerald HPC International, LLC to develop a *Conceptual Framework* focused on the identification of fact-based issues facing youth, families and neighborhoods throughout the city of Pittsburg.

It is clear through research and assessment that, depending on the strategies that the City of Pittsburg decides to utilize in order to impact particular indicators, turning the dial on critical issues facing the city will most likely require extensive and outcomes-based collaboration between relevant city staff and potential partners, such as education leaders, existing and effective non-profits, law enforcement, county youth correction facilities, Los Medanos College, substance abuse programs, faith-based organizations and job training programs,.

Such a collaboration will need to be directed by individuals who have a comprehensive understanding of issues identified in this framework and include the involvement of city officials, school administration, youth, households, specific and relevant non-profits, political representatives and other regional stakeholders, through a process of articulating strategic opportunities and defining interlocking roles for the partner stakeholders.

With the assistance of a project leader, stakeholder participation should be facilitated through a process of articulating strategic opportunities and defining interlocking roles for partners.

Role of the Conceptual Framework in the Collaborative Planning Process

Core to our *High Performing Communities Framework™* (HPC) is the development of a conceptual framework that identifies and articulates potential strategies and interlocking roles of stakeholder partner organizations.

The design of a conceptual framework, in the HPC process, precedes development of a full-blown, operationalized plan. The facts and data within the framework help create pathways to addressing issues facing youth, families, and neighborhoods.

We define a conceptual framework as:

> *"a tool for making conceptual distinctions and organizing ideas to help guide a planning team in the process of articulating a strategy or strategies based on an identified set of interlocking roles assigned to organizations, assets and stakeholders, for the specific purpose of achieving measurable outcomes."* (*An animation of the HPC process can be found at* www.emeraldhpc.com/hpc-process.html.)

An initiative based on a conceptual framework requires general acknowledgement, acceptance, and agreement with a common set of facts and indicators among the stakeholders. This framework presents the groundwork for such an agreement.

The facts and data within this framework can help guide a tangible implementation process that begins with the immediate focus on a youth services collaborative strategy that builds and strengthens the partner relationships needed to achieve long term outcomes.

This framework may also help guide policy related to youth services funding that aligns with agreed-upon partner goals and provides long-term financial stability to encourage and enhance system cohesion, inter-locking partner roles, service integration, community trust and support, and advocacy for targeted youth and families.

II. FACT-FINDING, RESEARCH, & ANALYSIS: KEY INDICATORS

During the fact-finding phase of our work, we facilitated a roundtable discussion, hosted by the City of Pittsburg, with school district and city officials. This group listed the following common issues regarding the needs of Pittsburg youth: *more places to gather; greater diversity of activities, particularly after school; time with parents; and employment and career pathway opportunities.*

We have now conducted demographic research and analysis based on those issues.

As we translated the issues into research priorities, important underlying facts have been identified that help clarify needs and root causes. With a better understanding of root causation, the community can properly identify key indicators with potential strategies for change. This in turn can inform a facilitated collaborative process to oversee and implement the desired strategies and to measure impact outcomes.

It is important to avoid the promotion of assumptions, biases or fears based on false narratives, silos, competition or stereotypes about age, ethnicity, neighborhoods and income levels and to set additional or new goals based on factual as well as current and relevant data.

Identifying and working with the right stakeholder and planning team will help further dissect and understand root causes underlying the statistics, studies, and community perceptions. The city, professional stakeholders and residents must have the right perspective in order to really make a difference.

Health, Crime, Economic, and Education Indicators

We must note from the onset that East Contra Costa is home to over 300,000 people, with many residents living in historic high-poverty areas and long commute times due to a lack of jobs close to home. The average commute for many residents in the region is an hour and a half one way. This leaves less time for parents and caregivers to spend with their families and to become rooted and engaged in civic life and adversely affects the quality of life for children and youth.

Moreover, in our work, we have consistently found that impoverished neighborhoods are challenged with serious crime, health, and education problems that restrict the opportunities of those growing up and living in these communities. These barriers often thwart economic development and business growth efforts as well and can drive a wedge between the three groups that must be working in trust and unity for a community to grow and prosper. They are: *families, schools, and law enforcement.*

The data that we are providing is eye opening, and more importantly, helps to create a road map for understanding and changing key community dynamics in Pittsburg.

Health and Wellness
The following data is from: https://cchealth.org/health-data/population.php

In Contra Costa, greater wealth equates to longer life. A child born in a low-poverty area in 2000 could expect to live more than six years longer than a child born in a high-poverty area. Life expectancy in low-poverty areas was 81.4 years and 74.9 years in high-poverty areas.

African Americans in Contra Costa had a shorter life expectancy (73.1 years) than any other racial/ethnic group in the county. An Asian/Pacific Islander or Hispanic baby born between 2005 and 2007 in Contra Costa could expect to live more than 12 years longer than an African American baby born at the same time.

A child born in a high-education area in Contra Costa (i.e., all census tracts with less than 5% of residents with less than a high school diploma) in 2000 could expect to live more than seven years longer than a child born in a low-education area (all census tracts with 25% or more residents with less than a high school diploma).

Between 2005–2007, heart disease and cancer accounted for roughly half of all deaths in Contra Costa and California. Heart disease accounted for 22.7% of all deaths in Contra Costa, making it the second leading cause of death in the county after cancer.

Diabetes was the seventh leading cause of death in Contra Costa, accounting for 2.9% of all deaths in the county. People living in San Pablo, **Pittsburg**, Antioch and Richmond were more likely to die from diabetes compared to the county overall.

Social Determinants of Health

We cannot minimize the critical importance of including health in your strategy for youth and community development. Social determinants have a direct impact on health disparities among specific populations.

The data shows that ***race and ethnicity, gender, sexual identity, age, disability, socioeconomic status, and geographic location*** all contribute to an individual's ability to achieve good health.

According to the *Office of Disease Prevention and Health Promotion*, "**A range of personal, social, economic, and environmental factors contributes to individual and population health."** They go on to say: "People with a quality education, stable employment, safe homes and neighborhoods, and access to preventive services tend to be healthier throughout their lives. Conversely, poor health outcomes are often made worse by the interaction between individuals and their social and physical environment."

Concentrated pockets of residents suffering from poor physical conditions are a barrier to economic growth and stability. According to the *National Assessment of Adult Literacy*, African American, Hispanic, and American Indian or Alaska Native adults were significantly more likely to have below basic health literacy compared to their white and Asian or Pacific Islander counterparts. Hispanic adults had the lowest average health literacy score compared to adults in other racial and ethnic groups.

Social determinants are in part responsible for the unequal and avoidable differences in health status within and between communities. As a leading health topic, social determinants take into account the critical role of ***home, school, workplace, neighborhood, and community*** in improving health.

From infancy through old age, the conditions in the social and physical environments in which people are born, live, work, and age can have a significant influence on health outcomes as follows:

Prenatal

According to the *Journal of Public Health Management and Practice*, it is important to improve the prenatal health-related behaviors of women, "including reducing their use of cigarettes, alcohol illegal drugs and economic worry and pregnancy as well as related birth related complications."

Further, other documented benefits of prenatal care include longer intervals between the birth of the first and second child, longer relationships with current partner, and fewer months of using welfare and food stamps. The positive effects of proper prenatal care reduce the societal outcomes of crime, substance abuse, teen pregnancy, child abuse, child neglect, and domestic violence.

Children

Early and middle childhood provides the physical, cognitive, and social-emotional foundation for lifelong health, learning, and wellbeing. A history of exposure to adverse experiences in childhood, including exposure to violence and maltreatment, is associated with health risk behaviors such as smoking, alcohol and drug use, and risky sexual behavior, as well as health problems such as obesity, diabetes, heart disease, sexually transmitted diseases, and attempted suicide. Features of the built environment, such as exposure to lead-based paint hazards and pests, negatively affect the health and development of young children.

Adolescents

Because they are in developmental transition, adolescents and young adults are particularly sensitive to environmental influences. Environmental factors, including family, peer group, school, neighborhood, policies, and societal cues, can either support or challenge young people's health and wellbeing.

Addressing young people's positive development facilitates their adoption of healthy behaviors and helps to ensure a healthy and productive future adult population. Adolescents who grow up in neighborhoods characterized by poverty are more likely to be victims of violence; use tobacco, alcohol, and other substances; become obese; and engage in risky sexual behavior.

Adults
Access to and availability of healthier foods can help adults follow healthful diets.

For example, better access to retail venues that sell healthier options may have a positive impact on a person's diet. These venues may be less available in low-income or rural neighborhoods. Also, longer hours, compressed work weeks, shift work, reduced job security, and part-time and temporary work are realities of the modern workplace and are increasingly affecting the health and lives of U.S. adults. Research has shown that workers experiencing these stressors are at higher risk of injuries, heart disease, and digestive disorders.

Older Adults
Availability of community-based resources and transportation options for older adults can positively affect health status. Studies have shown that increased levels of social support are associated with a lower risk for physical disease, mental illness, and death.

Impact of Social Determinants on Social Emotional Youth Health Disparities
There are predictable outcomes related to youth who become disengaged because of family, school, and neighborhood disparities. As outlined above, key risk factors affect the physical, cognitive, and social-emotional foundation for lifelong health, learning, and wellbeing of youth and can lead to smoking, alcohol and drug use, and risky sexual behavior, as well as health problems such as obesity, diabetes, heart disease, sexually transmitted diseases, and attempted suicide. Adolescents and young adults are particularly sensitive to environmental influences, such as family, peer group, school, neighborhood, policies, and societal cues.

It is important to emphasize a focus on health and education indicators for children and adolescents when discussing youth development strategies and related assessment tools because youth are our economic, workforce and education pipeline for regional economic stability and their health and wellbeing is a predictor of future community health and prosperity.

Youth Arrests and Incarceration
Youth incarceration is typically a result of family, school, and community disconnect created by poverty and the adult response to the health and social disparities discussed above. The interlocking roles these dynamics play is important to consider when determining a collaborative strategy. They are not independent issues.

The data below is related to youth arrests in Pittsburg and in the county in general. *Please use the attached links provided for further information.*

In Pittsburg, **Juvenile Arrests in Pittsburg are up 34%,** comparing January - May 2018 to January - May 2019.
   http://www.ci.pittsburg.ca.us/Modules/ShowDocument.aspx?documentid=11129

Within Contra Costa County, the incarceration rates reveal a similar stark disparity: 16 youth incarcerated for every 1,000 black youth compared to 1 for every 1,000 white youth. Interestingly, in Alameda the disparity is not quite so dramatic when it comes to incarceration: 5 black youth incarcerated for every 1,000 compared to 0 per 1,000 for whites. *https://youthlaw.org/publication/powerful-new-tool-for-examining-the-youth-incarceration-data-reveals-the-depth-of-the-problem-in-the-united-states/*

Per 100,000 youth, Contra Costa has only 330 youth felony arrests compared to the California average of 478. However, Contra Costa has a youth state confinement rate of 107 youth for every 100,000 compared to California's average of only 34. This may be indicative of an issue with how we as a community deal with behavior from youth that is deemed undesirable. *http://casi.cjcj.org/Juvenile/Contra-Costa*

Youth who have contact with the juvenile justice system are at increased risk for a number of negative long-term outcomes—such as injury, substance use and dependency, dropping out of school, and early pregnancy—when compared with the general youth population. Youth who have been detained also may face difficulty gaining the educational credentials they need to obtain sustained employment and may be more likely to engage in criminal behavior as adults. Conditions that increase the likelihood of involvement with the juvenile justice system include family poverty, separation from family members including parental incarceration, a history of maltreatment, and exposure to violence in the home and community. *https://www.kidsdata.org/export/pdf?cat=30*

In 2015 in Contra Costa, 1.6 per every 1,000 white youth was placed on "electronic monitoring" also known as an ankle monitor, compare this to 17.6 per 1000 for black youth. Statewide for every 1 white youth referred to probation there were 1.2 Latino youth and 3.1 black youth in 2006. By 2015 the gap actually widened to 1.4 Latino youth and 3.8 black youth for every 1 white youth referred to probation.
   http://casi.cjcj.org/Juvenile/Contra-Costa

Within California in 2014, for every 1 white youth tried as an adult there were 3.3 Latino youth and 11.3 black youth tried as an adult. In 2014, Contra Costa filed 8 white youth, 5 Latino youth and 98 black youth into the adult court system. *http://www.cjcj.org/uploads/cjcj/documents/the_prosecution_of_youth_as_adults.pdf*

An evaluation of a restorative justice program in Alameda County shows restorative justice diversion works. Youth who participated in a diversion process were 44% less likely to recidivate compared to youth who were processed through the juvenile legal system.
   https://www.acgov.org/probation/documents/AlamedaJJCPresentation10.10.18.pdf

Obstacles to Economic Mobility: Poverty, Unemployment, Transportation, Childcare, Homelessness
It is important to understand how personal, social, educational and environmental factors contribute to economic barriers in the region that impact opportunities for youth and families. The following information is critical to ensure that Pittsburg effectively addresses service gaps and does not miss serving those most in need because of stereotypes and misinformation about residents and especially youth of color.

Poverty

The 2008 economic recession forced millions of Americans into poverty, up from 11% in 2000 to about 15%. Poverty rates actually improved under the Obama administration, going down to 12.7% in 2016. Of the 39.5 million people living below the poverty line who rely on food stamps, 43% are white and only 23% are black.

And, when we look at the 20 million people living in extreme poverty (those households making less than 50 percent of the poverty threshold), 42% are white and 26% are black.

With that said, through our research we found the following additional facts regarding poverty:

A *Stanford University* study shows that in 1970, 65 percent of America's families lived in "middle- income" situations. By 2008, only 43 percent of U.S. families lived in middle-income neighborhoods.

Meanwhile, over that same period of time, the share of families living in either poor or rich neighborhoods essentially doubled. *(The book "Coming Apart" draws on five decades of statistics and research that describes these findings.)*

Further, it was once thought that poverty was mostly a problem for minorities in urban neighborhoods, or those living in the rural areas, particularly in Southern states. But the reality is that poverty is beginning to devour what was a majority of white middle-class families in major suburban areas.

Our work has required developing a deeper understanding of the effects of concentrated poverty on neighborhoods in this region. Neighborhoods with concentrated poverty oftentimes isolate their residents from the resources and networks they need to reach their potential and deprive the larger community of the neighborhood's human and social capital.

With both the rise of poverty in urban communities such as Pittsburg and suburban areas throughout the United States, researchers have sought to interpret the dynamic between neighborhoods and residents in communities of concentrated poverty.

Impoverished neighborhoods are challenged with serious crime, health, and education problems that, in turn, further restrict the opportunities of those growing up and living in them, and thwart business development and business acquisition efforts.

Pittsburg has no alternative but to take seriously the economic status of populations within the city. **As the chart below indicates, Pittsburg's poverty rate is 13.6%** (people living below poverty level).
http://worldpopulationreview.com

City/Municipality	Population	# of Businesses	Poverty Rate
Hercules	25,545	1,630	5.5%
Rodeo	10,400	15	15.23%
Crockett (unincorporated)	3,044	(n/a)	9.2%
Martinez	38,402	3, 489	5.6%
Walnut Creek	70,667	19,176	7.0%
Concord	130,559	10,859	11.2%
Bay Point (unincorporated)	21,349	1,268	21.7%
Pittsburg	*72,141*	*4,367*	*13.6%*
Antioch	112,635	6,018	14.6%

(Note: Antioch's 94509 zip code has a population of 67,279 & a poverty rate of 18.1%; while Antioch's 94531 zip code has a population of 45,356 & a poverty rate of 9.3%. https://factfinder.census.gov.)

Brentwood	65,288	4,106	7.7%
Oakley	43,051	1,902	7.5%

Contra Costa County has a population of 1,150,215 and an overall poverty rate of 9.8%.

A key barrier to economic mobility in Pittsburg and East Contra Costa is the lack of industry and work opportunities near home.

African Americans and Hispanics are more likely to be unemployed compared to their white counterparts. Further, all adults with less than a high school education are three times more likely to be unemployed than those with a bachelor's degree.

Inequitable access to high-quality education contributes to achievement gaps across racial, ethnic, and economic lines and to the decline of student achievement across the U.S. compared to other industrialized nations. Creating skilled workers for an economy that is constantly changing requires strategic investments and better education and workforce development programs, which must be coordinated and aligned with employers' needs.

While providing access to college should remain a high priority, the majority of jobs will continue to require more than a high school diploma but less than a four-year degree, making education beyond high school increasingly essential.

The following data is from: https://datausa.io/profile/geo/pittsburg-ca/

In Pittsburg, 36,395 are employed out of an adult labor force of 38,145. However, with a population of over 70,000, there is a need for more jobs locally, especially for teens and transitional aged youth who will find it more difficult to make a long commute. Of those adults employed:

- **6,915 (19.0%)**   live and work in Pittsburg
- **25,039 (68.8%)**   work elsewhere in Contra Costa
- **4,440 (12.2%)**   work outside of Contra Costa
- **1,017 (3.2%)**   (of all workers) work at home

The largest industries in Pittsburg are *Health Care & Social Assistance* (5,608 people), *Retail Trade* (3,509 people), and *Administrative & Support & Waste Management Services* (2,872 people).

The highest paying industries are *Utilities* ($73,301), *Mining, Quarrying, & Oil & Gas Extraction* ($70,313), and *Professional, Scientific, & Technical Services* ($61,639). *Read more at: http://www.city-data.com/work/work-Pittsburg-California.html*

Possible solutions would include increasing employment-focused skills training opportunities for underserved populations in local high-demand occupations and industries. This would be more beneficial than providing training in occupations that would require a longer commute for employment.

Programs that train at risk youth, reentry, and homeless populations in local industries will provide increased access to job opportunities close to home, thereby strengthening both the community and the local economy.

In addition, creating incentives and opportunities for business expansion and small business start-ups would increase the number of local jobs available to the local workforce, create supply chain companies, develop more qualified local contractors and subcontractors and help to revitalize the local economy.
Conceptual Framework for Community and Human Capital Development Strategy(Emerald HPC International, LLC as presentation to the Northern Waterfront Economic Development Initiative Ad Hoc Community in May 2018)

Another barrier to economic mobility in Pittsburg and East Contra Costa is transportation.

Low-income minorities on average spend more time traveling to work and other daily destinations than do low-income whites because they have fewer private vehicles and use public transit and car pools more frequently. In Pittsburg, using averages, employees have a longer commute time (41.3 minutes) than the normal US worker (25.1 minutes).

Additionally, 12% of the workforce in Pittsburg have "super commutes" in excess of 90 minutes. In 2017, the most common category of travel for workers in Contra Costa was *Drove Alone*, followed by those who *Carpooled* and those who rode *Public Transportation*.

Detailed information can be found at: https://datausa.io/profile/geo/contra-costa-county-ca https://datausa.io/profile/geo/pittsburg-ca/

Many Contra Costa youth don't drive and have parents that work distances away from Contra Costa, leaving few options for youth to travel to work and class during the day. The lack of a strong public transit system is a barrier for adults without a car as well, particularly those wishing to find employment out of town.

Possible solutions would include things such as: pushing for more frequent buses to schools, colleges, etc. and increasing employment and training opportunities closer to home.

Affordable childcare for working mothers and parents living under the poverty line is another barrier to economic mobility.

The following data is from:
https://uwba.org/wp-content/uploads/2017/10/ContraCosta-Snapshot.pdf
https://datausa.io/profile/geo/pittsburg-ca/

In Pittsburg, 13.6% of the population (9,800 out of 72,000 people) live below the poverty line. The largest demographic living in poverty are females: ages 35 - 44, followed by males: ages 6 – 11, and then females: ages 25 - 34.

According to the California Self-Sufficiency System (SSS), 61% of single mothers in Contra Costa County are living below the minimum standard for self-sufficiency.

Possible solutions would include a program for affordable or free childcare for working mothers/caregivers that are struggling with poverty. A service such as this can help alleviate the financial burden of childcare on the already struggling mother and by proxy help their children grow up in an environment where they have access to the necessities required for success.

Another factor related to economic mobility is homelessness.

In Contra Costa County on January 25, 2017 (*https://cchealth.org/h3/coc/pdf/PIT-report-2017.pdf*):
there were 1,607 persons experiencing homelessness; 57% of them were unsheltered. The population included 381 with *Substance Use Disorder*, 368 with a *Mental Health Disability*, 331 *Chronically Homeless*, 224 *Victims of Domestic Violence*, 99 *Veterans*. Among those counted were 84 families and 160 minors.

In Contra Costa County on January 23, 2018 (*https://cchealth.org/h3/coc/pdf/PIT-report-2018.pdf*):
There were 627 more individuals experiencing homelessness than the previous year's count of 1,607.

This increase reflects a similar growth in homeless populations over recent years in California and across the Bay Area. Rising rents and scarcity of affordable housing contribute greatly to the housing crisis resulting in more persons seeking homeless-related services.

The number of persons accessing homeless services last year in Contra Costa increased by 13%. Within the homeless population of Contra Costa County in 2018 there were 89 families living with children. In Contra Costa County from 2017 to 2018 there was a 39% increase in individuals identified as homeless

Possible solutions would include, first of all, a survey of the homeless population in Pittsburg. Exploring the prospect of alternative housing of any sort would be beneficial here for both youth and adults - anything from a regular home to repurposed RV's or shipping containers, tiny homes etc. could help.

Also, measures to prevent homelessness in at risk communities, such as programs for subsidized housing, childcare, drug rehab, therapy for veterans etc., could help by addressing the root causes of homelessness before it happens for many.

Student Engagement

Youth engagement in the educational process, particularly as it impacts career/college preparation, is probably the single most important issue facing the city of Pittsburg.

As previously stated in the section on the *Social Determinants of Health:*

> There are predictable outcomes related to youth who become disengaged because of family, school, and neighborhood disparities. Because they are in developmental transition, adolescents and young adults are particularly sensitive to environmental influences, such as family, peer group, school, neighborhood, policies, and societal cues.

> These factors can affect the physical, cognitive, and social-emotional foundation for the lifelong health, learning, and wellbeing of youth and can lead to smoking, alcohol and drug use, and risky sexual behavior, as well as health problems such as obesity, diabetes, heart disease, sexually transmitted diseases, and attempted suicide.

> Addressing young people's positive development facilitates their adoption of healthy behaviors and helps to ensure a healthy and productive future adult population. Therefore, it is important to emphasize a focus on health and education indicators for children and adolescents when discussing youth development strategies because youth are our economic, workforce and education pipeline for regional economic stability, and their health and wellbeing is a predictor of future community health and prosperity.

Considering the factors above, it is important to review the current stats related to Pittsburg and Contra Costa youth.

For comparison purposes, we will start with Contra Costa data related to *School Connectedness, Community Connectedness, and Emotional/Mental Health.* We will then follow with similar and additional data related to the Pittsburg Unified School District (PUSD).

California Healthy Kids Survey (CHKS), 2016-17
Contra Costa County

1. School Connectedness

Binge Drinking in Past Month (Student Reported)

Contra Costa County	Percent					
Level of Connectedness to School	0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
High	92.5%	2.7%	1.6%	1.8%	0.5%	0.8%
Medium	88.0%	4.0%	2.4%	3.1%	1.1%	1.4%
Low	77.0%	4.7%	5.0%	4.5%	2.8%	6.1%

Race/Ethnicity	0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
African American/Black	90.9%	2.7%	1.9%	1.8%	0.6%	2.1%
American Indian/Alaska Native	87.9%	3.2%	1.3%	2.3%	2.1%	3.1%
Asian	96.0%	1.4%	0.8%	0.8%	0.2%	0.8%
Hispanic/Latino	86.5%	4.2%	2.8%	3.0%	1.4%	2.2%
Native Hawaiian/Pacific Islander	88.0%	3.7%	2.0%	2.8%	1.1%	2.4%
White	88.0%	3.7%	2.7%	3.5%	1.0%	1.0%
Multiracial	89.9%	3.5%	1.7%	2.2%	0.9%	1.7%
Other	91.7%	2.7%	2.3%	1.3%	0.3%	1.7%

Drinking and Driving or Riding with a Driver Who Had Been Drinking (Student Reported)

Contra Costa County	Percent				
Level of Connectedness to School	Never	1 Time	2 Times	3-6 Times	7 or more times
High	84.8%	5.4%	3.9%	3.2%	2.7%
Medium	78.3%	7.2%	4.8%	5.0%	4.7%
Low	69.4%	6.1%	6.1%	6.5%	11.8%

Race/Ethnicity	Never	1 Time	2 Times	3-6 Times	7 or more times
African American/Black	82.0%	5.6%	3.9%	3.4%	5.2%
American Indian/Alaska Native	76.6%	7.7%	5.0%	2.4%	8.3%
Asian	89.0%	4.2%	2.2%	2.1%	2.5%
Hispanic/Latino	76.2%	6.6%	5.2%	5.8%	6.2%
Native Hawaiian/Pacific Islander	80.9%	4.3%	7.1%	4.7%	3.1%
White	80.6%	7.1%	4.8%	4.0%	3.5%
Multiracial	82.2%	5.7%	4.0%	3.9%	4.3%
Other	77.0%	9.8%	4.6%	3.3%	5.4%

Cigarette Use in Lifetime (Student Reported)

Contra Costa County	Percent					
Level of Connectedness to School	0 Times	1 Time	2 Times	3 Times	4-6 Times	7 or more times
High	93.1%	2.4%	0.9%	0.7%	0.7%	2.2%
Medium	85.5%	3.8%	1.9%	1.6%	1.7%	5.5%
Low	73.7%	5.3%	2.7%	2.1%	3.0%	13.1%

Race/Ethnicity	0 Times	1 Time	2 Times	3 Times	4-6 Times	7 or more times
African American/Black	87.7%	4.6%	1.4%	1.1%	0.7%	4.5%
American Indian/Alaska Native	82.7%	8.2%	0.5%	0.9%	0.8%	6.9%
Asian	94.4%	1.8%	0.6%	0.7%	0.5%	2.0%
Hispanic/Latino	85.0%	4.2%	2.0%	1.6%	1.7%	5.4%
Native Hawaiian/Pacific Islander	85.7%	5.6%	2.4%	0.5%	1.7%	4.2%
White	88.8%	2.5%	1.2%	1.0%	1.4%	5.0%
Multiracial	87.9%	2.9%	1.5%	1.2%	1.4%	5.1%
Other	87.6%	1.8%	1.6%	0.7%	1.5%	6.8%

Marijuana Use in Past Month (Student Reported)

Contra Costa County	Percent					
Level of Connectedness to School	0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
High	90.7%	2.5%	1.5%	2.2%	1.1%	2.0%
Medium	82.5%	3.5%	2.7%	4.4%	2.5%	4.4%
Low	69.3%	5.0%	3.3%	6.2%	4.0%	12.0%

Race/Ethnicity	0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
African American/Black	79.9%	3.5%	2.9%	4.3%	2.9%	6.5%
American Indian/Alaska Native	85.3%	3.3%	2.3%	3.7%	1.2%	4.2%
Asian	94.8%	1.3%	0.9%	1.0%	0.6%	1.3%
Hispanic/Latino	81.8%	3.8%	2.6%	4.3%	2.6%	4.9%
Native Hawaiian/Pacific Islander	85.4%	3.2%	2.0%	3.8%	1.4%	4.2%
White	85.9%	3.1%	2.2%	3.6%	1.8%	3.5%
Multiracial	84.8%	3.3%	2.2%	3.4%	1.8%	4.4%
Other	86.5%	3.7%	0.9%	3.8%	2.2%	2.9%

Recreational Use of Prescription Drugs in Lifetime (Student Reported)

Contra Costa County	Percent	
Level of Connectedness to School	**Any**	**None**
High	9.1%	90.9%
Medium	16.2%	83.8%
Low	29.1%	70.9%

Race/Ethnicity	Any	None
African American/Black	16.6%	83.4%
American Indian/Alaska Native	17.2%	82.8%
Asian	7.2%	92.8%
Hispanic/Latino	16.8%	83.2%
Native Hawaiian/Pacific Islander	14.3%	85.7%
White	13.4%	86.6%
Multiracial	16.5%	83.5%
Other	16.6%	83.4%

Combination Alcohol/Drug Use in Past Month (Student Reported)

Contra Costa County	Percent	
Level of Connectedness to School	**Any**	**None**
High	17.3%	82.7%
Medium	28.2%	71.8%
Low	41.6%	58.4%

Race/Ethnicity	Any	None
African American/Black	26.5%	73.5%
American Indian/Alaska Native	23.1%	76.9%
Asian	10.3%	89.7%
Hispanic/Latino	29.8%	70.2%
Native Hawaiian/Pacific Islander	25.3%	74.7%
White	24.1%	75.9%
Multiracial	23.6%	76.4%
Other	20.8%	79.2%

Usual Level of Alcohol Intoxication (Student Reported)

Level of Connectedness to School	I don't drink alcohol	Just a sip or two	Enough to feel it a little	Enough to feel it moderately	Until I feel it a lot or get really drunk
High	70.7%	11.6%	6.6%	7.5%	3.5%
Medium	57.9%	14.9%	10.1%	10.8%	6.4%
Low	48.0%	12.7%	11.2%	11.6%	16.5%

Race/Ethnicity					
African American/Black	66.2%	12.6%	8.5%	7.1%	5.6%
American Indian/Alaska Native	65.4%	15.4%	6.4%	5.9%	6.9%
Asian	79.2%	9.6%	4.9%	4.2%	2.1%
Hispanic/Latino	56.5%	15.0%	11.2%	10.1%	7.3%
Native Hawaiian/Pacific Islander	63.7%	12.1%	7.4%	11.0%	5.8%
White	61.9%	12.6%	7.3%	11.5%	6.7%
Multiracial	65.1%	12.5%	8.1%	8.4%	5.9%
Other	68.5%	13.5%	6.3%	7.9%	3.9%

2. *Community Connectedness*

Meaningful Participation in the Community (Student Reported)

Race/Ethnicity	High	Medium	Low
African American/Black	46.6%	37.8%	15.6%
American Indian/Alaska Native	51.5%	32.5%	16.0%
Asian	58.4%	32.5%	9.1%
Hispanic/Latino	40.6%	39.7%	19.6%
Native Hawaiian/Pacific Islander	58.9%	30.3%	10.8%
White	67.0%	25.9%	7.1%
Multiracial	55.3%	34.1%	10.5%
Other	43.9%	43.6%	12.5%

3. *Emotional/Mental Health*

Depression-Related Feelings (Student Reported)

Contra Costa County	Percent	
Level of Connectedness to School	Yes	No
High	19.9%	80.1%
Medium	33.4%	66.6%
Low	47.1%	52.9%

Race/Ethnicity	Yes	No
African American/Black	25.9%	74.1%
American Indian/Alaska Native	27.0%	73.0%
Asian	24.7%	75.3%
Hispanic/Latino	32.2%	67.8%
Native Hawaiian/Pacific Islander	32.9%	67.1%
White	24.6%	75.4%
Multiracial	29.5%	70.5%
Other	24.5%	75.5%

California Healthy Kids Survey (CHKS), 2016-17
Pittsburg

The following data is from the most recent *California Healthy Kids Survey (CHKS), 2016-17, for the* **Pittsburg Unified School District (PUSD).**

We have provided in this document the most relevant tables. The link to the full report is provided below:

https://data.calschls.org/resources/Pittsburg_Unified_1617_Sec_CHKS.pdf

The report is prepared annually by WestEd, a research, development, and service agency, in collaboration with Duerr Evaluation Resources, under contract from the California Department of Education Coordinated School Health and Safety Office. The youth survey modules consist of key questions, identified by an expert advisory committee, that are considered most important for schools to guide improvement of academic, health, and prevention programs and promote student achievement, college and career readiness, positive development, and well-being. Student identities are protected.

1. Summary of Key Indicators

Table A2.1

Key Indicators of School Climate and Student Well-Being

	Grade 7 %	Grade 9 %	Grade 11 %	NT[A] %	Table
School Engagement and Supports					
School connectedness (high)	35	33	32	56	A4.5
Academic motivation (high)	27	23	23	35	A4.5
Truant more than a few times^T	2	4	6	26	A4.2
Caring adult relationships (high)	25	23	33	40	A4.4
High expectations (high)	42	34	42	56	A4.4
Meaningful participation (high)	10	10	11	19	A4.4
School Safety and Substance Use					
School perceived as very safe or safe	56	45	55	68	A5.1
Experienced any harassment or bullying^T	37	29	23	25	A5.2
Had mean rumors or lies spread about you^T	42	31	29	16	A5.3
Been afraid of being beaten up^T	17	14	8	5	A5.4
Been in a physical fight^T	19	8	7	8	A5.4
Seen a weapon on campus^T	20	18	14	21	A5.6
Been drunk or "high" on drugs at school, ever	4	6	10	37	A6.10
Mental and Physical Health					
Current alcohol or drug use‡	14	13	20	44	A6.4
Current binge drinking‡	3	3	5	18	A6.4
Very drunk or "high" 7 or more times	1	5	8	49	A6.6
Current cigarette smoking‡	2	2	1	8	A7.3
Current electronic cigarette use‡	6	2	4	12	A7.3
Experienced chronic sadness/hopelessness^T	30	30	31	46	A8.4
Considered suicide^T	na	14	13	8	A8.5

Past 12 months; ‡Past 30 days; na—Not asked of middle school students.

Table numbers refer to tables with item-level results for the survey questions that comprise each scale.

Note: ^{A}NT includes continuation, community day, and other alternative school types.

2. Demographic Summary

Table A1.1
Student Sample Characteristics

	Grade 7	Grade 9	Grade 11	NT
Target Sample	828	990	749	301
Final Number	703	502	430	44
Average Response Rate	85%	51%	57%	15%

Table A3.1
Gender of Sample

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
Male	51	49	48	59
Female	49	51	52	41

Table A3.2
Hispanic or Latino

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
No	34	37	36	23
Yes	66	63	64	77

Table A3.3
Race

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
American Indian or Alaska Native	2	2	3	12
Asian	8	8	14	0
Black or African American	13	15	16	12
Native Hawaiian or Pacific Islander	4	6	7	3
White	7	14	14	6
Mixed (two or more) races	67	55	46	67

Table A3.4
Living Situation

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
A home with one or more parents or guardian	82	88	89	86
Other relative's home	3	2	5	5
A home with more than one family	8	6	5	2
Friend's home	0	1	0	0
Foster home, group care, or waiting placement	1	0	0	2
Hotel or motel	0	0	0	0
Shelter, car, campground, or other transitional or temporary housing	0	0	0	2
Other living arrangement	5	3	1	2

Table A3.5
Highest Education of Parents

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
Did not finish high school	13	18	25	6
Graduated from high school	20	25	23	5
Attended college but did not complete four-year degree	9	15	18	6
Graduated from college	25	23	24	
Don't know	34	18	9	4

Table A3.6
Free or Reduced-Price Meals Eligibility

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
No	20	25	28	29
Yes	59	59	60	57
Don't know	22	16	12	14

Table A3.7
Participation in Migrant Education Program, Past 3 Years

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
No	53	68	84	66
Yes	2	4	1	2
Don't know	45	28	14	32

Table A3.8

Language Spoken at Home

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
English	50	50	49	68
Spanish	43	43	43	32
Mandarin	0	1	0	0
Cantonese	0	0	0	0
Taiwanese	0	0	0	0
Tagalog	2	3	3	0
Vietnamese	1	1	1	0
Korean	0	0	0	0
Other	3	2	4	0

Table A3.9

English Language Proficiency – All Students

	Grade 7 mean/%	Grade 9 mean/%	Grade 11 mean/%	NT mean/%
English Language Proficiency				
Average Scale Score	3.78	3.79	3.85	3.89
How well do you...				
understand English?				
Very well	88	89	92	93
Well	12	8	7	7
Not well	0	2	1	0
Not at all	0	1	0	0
speak English?				
Very well	80	83	89	91
Well	18	13	9	9
Not well	2	3	2	0
Not at all	1	1	0	0
read English?				
Very well	79	83	87	91
Well	19	13	12	7
Not well	2	3	1	2
Not at all	0	1	0	0
write English?				
Very well	76	81	82	86
Well	22	16	17	12
Not well	2	3	1	2
Not at all	0	1	0	0
English Language Proficiency Status				
Proficient	77	81	86	88
Not proficient	23	19	14	12

Table A3.10

English Language Proficiency – Students Speaking A Language Other Than English at Home

	Grade 7 mean/%	Grade 9 mean/%	Grade 11 mean/%	NT mean/%
English Language Proficiency				
Average Scale Score	3.69	3.67	3.76	3.77
How well do you...				
understand English?				
Very well	79	82	86	79
Well	20	12	12	21
Not well	1	5	2	0
Not at all	0	1	0	0
speak English?				
Very well	71	75	82	85
Well	28	19	15	15
Not well	1	4	3	0
Not at all	0	2	0	0
read English?				
Very well	71	75	78	77
Well	27	19	19	15
Not well	3	5	2	8
Not at all	0	1	0	0
write English?				
Very well	67	73	74	77
Well	29	22	23	15
Not well	4	5	2	8
Not at all	0	1	0	0
English Language Proficiency Status				
Proficient	68	73	78	77
Not proficient	32	27	22	23

Table A3.11
Number of Days Attending Afterschool Program

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
0 days	82	87	89	95
1 day	1	2	2	0
2 days	1	5	4	0
3 days	2	1	1	0
4 days	3	0	1	0
5 days	10	4	3	5

Table A3.12
Military Connections

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
No	90	91	94	80
Yes	5	5	2	6
Don't know	5	4	3	14

Table A3.13
Sexual Orientation and Gender Identification

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
Heterosexual (straight)	79	80	82	83
Gay or Lesbian	1	2	3	6
Bisexual	6	9	7	3
Transgender	0	1	1	0
Not sure	6	7	4	6
Decline to respond	13	12	10	8

3. School Performance, Supports, and Engagements

Table A4.1
Grades, Past 12 Months

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
Mostly A's	14	13	10	7
A's and B's	32	32	32	30
Mostly B's	6	6	9	7
B's and C's	25	23	25	33
Mostly C's	6	7	9	2
C's and D's	12	11	12	14
Mostly D's	1	4	1	5
Mostly F's	4	4	1	2

Table A4.2
Truancy, Past 12 Months

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
0 times	73	71	60	36
1-2 times	14	15	19	14
A few times	11	11	15	24
Once a month	1	1	1	7
Once a week	1	2	2	5
More than once a week	0	1	4	14

Table A4.3
Reasons for Absence, Past 30 Days

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
Does not apply, I didn't miss any school	36	34	25	10
Illness (feeling physically sick), including problems with breathing or your teeth	50	52	63	56
Felt very sad, hopeless, anxious, stressed, or angry	9	10	19	12
Didn't get enough sleep	10	8	19	32
Didn't feel safe at school	3	2	1	2
Had to work	1	1	2	2
Had to take care of or help a family member or friend	9	6	9	24
Wanted to spend time with friends who don't go to your school	1	1	1	5
Wanted to use alcohol or drugs	1	1	1	10
Were behind in schoolwork or weren't prepared for a test or class assignment	2	5	15	7
Were bored with or uninterested in school	4	3	7	12
Were suspended	5	2	2	2
Other reason	20	17	16	29

Total percentages may exceed 100% for "mark all that apply" items.

Table A8.3
Eating Breakfast

	Grade 7 %	Grade 9 %	Grade 11 %	NT %
No	42	47	41	63
Yes	58	53	59	37

Key indicators identified through the *California Healthy Kids Survey (CHKS), 2016-17* for Pittsburg:

School Engagement and Supports

School Connectedness:
Only 35% of 7th graders; 33% of 9th graders, and 31% of 11th graders felt a high degree of school connection.

Caring Adult Relationships:
Only 23% of 7th graders; 23% of 9th graders, and 33% of 11th graders felt a high degree of caring adult relationships.

Meaningful Participation:
Only 10% of 7th graders; 10% of 9th graders, and 11% of 11th graders felt a high degree of meaningful participation.

School Safety

School Perceived to Be Safe:
Only 56% of 7th graders; 45% of 9th graders, and 55% of 11th graders felt a high degree of school safety.

Mental and Physical Health Risks

Current Alcohol or Drug Use:
14% of 7th graders; 13% of 9th graders, and 20% of 11th graders reported current alchohol or drug use.

Ate Breakfast
42% of 7th graders; 47% of 9th graders, 41% of 11th graders, and 63% of *continuation, community day, and other alternative school* students reported not eating breakfast on school days.

Experienced Chronic Sadness/Hopelessness:
30% of 7th graders; 30% of 9th graders, and 31% of 11th graders said they had recently experienced sadness or hopelessness.

Suspensions, Expulsions, and Chronic Absenteeism
In addition to the California Healthy Kids Survey, we looked at data from the *California Department of Education*: *www.caschooldashboard.org*.

Looking at data pulled from the California Department of Education California School Dashboard for the 2017-2018 school year, Pittsburg Unified School District had:
   • A 90.8% graduation rate (increased by 3.8% from the last year)
   • A 49.3% college/career preparation rate (increased by 23.3% from the last year)

However, the district also had:
   • A 7.7% suspension rate (increased by .5% from the last year)
   • A 11.4% chronic absenteeism rate (increased by 1.4% from the last year)

A deeper dive into California Department of Education data indicates that the ***suspension*** rate of 7.7% is higher than both the county average of 4.1% and statewide average of 3.5%. Of the students suspended, African Americans have the highest suspension rate at 16.7%. Hispanic students made up 63.5% of the student population and accounted for 48.2% of suspensions. African American students made up only 17.1% of the student population but accounted for 37.3% of total suspensions.

In addition, the district had a 0.06% ***expulsion*** rate. This is higher than the county average of 0.04% but lower than the statewide average of 0.08%. Of the 7 students expelled 3 were black/African American, 3 were Hispanic/Latino and 1 was Filipino.

According to the **U.S. Department of Health and Human Services** and the **U.S. Department of Education**:

"Suspension and expulsion can influence a number of adverse outcomes across development, health, and education. **Young students who are expelled or suspended are as much as 10 times more likely to drop out of high school, experience academic failure and grade retention, hold negative school attitudes, and face incarceration than those who are not**. Not only do these practices have the potential to hinder social-emotional and behavioral development, they also remove children from early learning environments and the corresponding cognitively enriching experiences that contribute to healthy development and academic success later in life."

"Expulsion and suspension practices may also delay or interfere with the process of identifying and addressing underlying issues, which may include disabilities or mental health issues. Some of these children may have undiagnosed disabilities or behavioral health issues and may be eligible for additional services, but in simply being expelled, they may not receive the evaluations or referrals they need to obtain services. For example, **the source of challenging behavior may be communication and language difficulties,** skills that can be improved through early assessment and intervention services. In these cases, appropriate evaluation and follow-up services are critical, but less likely if the child is expelled from the system."

"Finally, **expulsions may contribute to increased family stress and burden**. Even where assistance is offered, *often there is a lapse in service which leaves families, especially working families, in difficult situations."*
– U.S. Department of Health and Human Services and U.S. Department of Education, *Policy Statement on Expulsion and Suspension Policies in Early Childhood Settings* **(Dec. 10, 2014)**

Statistics related to suspensions and expulsions with a focus on the "defiance" disciplinary code is included for two reasons. The first is that it shows a huge population disparity related to children and adolescents of color. The second is that as mentioned above, suspensions and expulsions can lead to academic failure, dropouts, and prison; all of which have impact on social determinants related to the health of children and adolescents whose negative affects follow them into adulthood.

Further, as stated by **former U.S. Attorney General Eric Holder:**
"**We've seen that severe discipline policies often increase the numbers of suspensions and expulsions without effectively making schools safer or creating better learning environments.** And we've seen that the impacts of exclusionary policies are not felt equally in every segment of the population – with students of color and those with disabilities often receiving different and more severe punishments than their peers."
– Eric Holder, now former U.S. Attorney General: Remarks at the U.S. Department of Justice and U.S. Department of Education *School Discipline Guidance Rollout* **at Frederick Douglass High School in Baltimore, Maryland (Jan. 8, 2014)**

Moreover, according to the **National Education Association:**
"A suspension can be life altering. It is the number-one predictor – more than poverty – of whether children will drop out of school and walk down a road that includes a greater likelihood of unemployment, reliance on social-welfare programs, and imprisonment."
– *The School-to-Prison Pipeline: Time to Shut It Down*, NEA Today (Jan. 5, 2015)

"Far too many of our most vulnerable students are excluded from class for minor, non-violent behavior, which puts them at great risk for academic failure, dropping out, and an unnecessary journey down the school to prison pipeline."
Dennis Van Roekel, former President, *Let's Stop the School-to-Prison Pipeline* **(Mar. 13, 2014)**

III. INITIATIVE FOCUS AND COLLABORATIVE STRATEGY BASED ON FACT-BASED INDICATORS

We have identified above the key indicators underlying critical issues that can inform an initiative focus and outcome-based strategy or set of strategies to impact priority issues facing the city.

This conceptual framework can help guide a facilitated collaborative process to oversee and implement the desired strategies and to measure outcomes.

This framework can also help guide policy related to youth services funding that aligns with agreed-upon partner goals and provides long-term financial stability to encourage and enhance system cohesion, inter-locking partner roles, service integration, community trust and support, and advocacy for targeted youth and families.

Next Steps

Determine Initiative Focus and Outcome-Based Strategy
The immediate next step in this process is for the City of Pittsburg to review the data and the identified indicators underlying critical issues of concern and decide on an initiative focus and outcome-based strategy or set of strategies that will impact particular priority issues facing the city.

Determine Initiative Goals and Outcome Measures
Determining goals and projected outcomes for the initiative and how they will be measured will be an important consideration in designing an initiative focus and strategies.

For example, based on the indicators described above, projected outcomes of an initiative could include one or more of the following sample measures:

- Improvement in key health and education indicators for youth and young adults
- Training opportunities and variety of training options are increased and result in an increase in local employment in areas of labor leakage
- Crime stats show a significant reduction in violent and property crimes because of an increase in employment and community revitalization projects
- Social capital and collaboration are significantly increased and evidenced by the establishment of and participation in local community organizations and efforts

Determine Initiative Partners and Stakeholders
Depending on the initiative focus and key strategies that the City of Pittsburg decides to utilize in order to impact particular indicators, the appropriate stakeholders and collaborative partners would need to be identified through conversation with the planning team. Therefore, we are not listing particular individuals in this document.

Collaborative vs. Collective

We emphasize the **collaborative** approach because it allows for concerted and intentional engagement, the creation of interlocking roles for sustainability, and shared accountability for outcomes that have been mutually agreed upon. Having these interlocking roles and mutual accountability memorialized in writing will create a basis for strategy implementation and support the success of the initiative.

Emerald frequently uses the charts below to emphasize why we suggest *Collaborative* vs *Collective* project engagement.
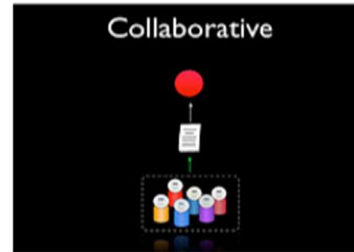

Collective vs. Collaborative
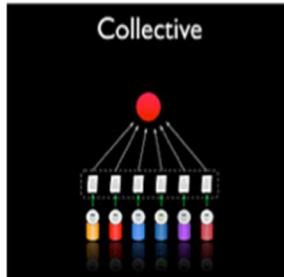
Collective

We describe a collective as an aggregation of efforts where the parties are working towards a common goal, with an agreed upon core set of principals and values to which they have all contributed, but have no mutual accountabilities in the form of interlocking roles.

Collaborative vs. Collective

Collaborative

We describe a collaborative as a group of entities and/or individuals, working together towards a common goal with mutual accountability to one another, in the form of interlocking roles, to accomplish a single mutually agreed upon outcome and to strengthen the capacity of both the individual organizations and the eventual network.

IV. Final Thoughts

To create a plan that carries a ***shared vision and common ground*** through an interactive process, your team must absolutely, completely, and stubbornly avoid "habitus."

Habitus is public enemy #1 in any planning process.
Habitus is the compilation/field of behaviors, history, beliefs, attitudes, and practices that support the continuation, maintenance and empowerment of biased thinking surrounding a problem or issue.

Habitus acts as a strong catalyst for resistance to change.
In other words, it is the stuff that fuels silos, irrational fears, prejudice, exclusion, inflexibility, and negative competition.

However, fact-finding as a key element of the planning process helps reduce the power of habitus.
Fact-finding helps fight habitus and fuels a credible strategy and approach that will draw support, gain wider acceptance, spark excitement, and get results.

Pittsburg has an opportunity to change health, education, and economic outcomes in for all residents, including English learners, people living in poverty and low wage work, youth who are disengaged, homeless people, formerly incarcerated people, people of color, veterans, residents commuting long hours, and recent immigrants.

It's totally possible with the right strategy.

To do so would be amazing and have a transformative impact on the city of Pittsburg and the region.