Dear Friends,

It is my pleasure to welcome you to the 9th Annual Symposium on the Status of Children’s Health. At Healthier Kids Foundation, we believe that health and education are the foundation to success in today’s society. We know that children who are healthy are able to flourish in the classroom and in life.

The Symposium offers an opportunity for us to come together and reflect on the health and wellness of our kids. How are we doing as a community and where do we go from here?

Much progress has been made and we have a lot to be proud of, but as professor in the Sol Price School of Public Policy at the University of Southern California Dr. Dowell Myers will relay later today, the importance of our children is greater now more than ever.

A generational transition is underway between the aging baby boomers, who are beginning to retire, and a younger, more diverse generation that is being educated to replace them in the work force, among the taxpayers, and in the housing market. Dr. Myers’ recent study indicates a “doubled importance” of children in the post-Great Recession era—making strong advocates and resources critical to our children now more so than ever before.

In addition, we are very excited to have Dr. Paul Glassman, known as the “Rock Star” of dental care, as our keynote speaker. Dr. Glassman is renowned for his dedication to practical, evidence based changes to oral care. Oral health is key to the health of the entire body and the third largest contributor to healthcare spending in the United States.

No matter what the future holds for our kids, we will continue to be at the intersection of health and education, working side-by-side with families to identify and eliminate kids’ health issues. However, this important work cannot be done on our own. Progress can only be made with you—our committed partners. Together, we can ensure that every child receives the care that they need to thrive in the classroom and in life.

Kathleen M. King
Healthier Kids Foundation extends its gratitude to:

The Tseng Castaneda Family

Coming together for the health and wellness of our kids, every day.
More than 141,000 children, ages zero through five, lived in Santa Clara County in 2016. The number of children decreased by 11% between 2008 and 2014 and with the high cost of living in the county, this trend is expected to continue.

In California, children are 23% of our population and 100% of our future.
Children Living in Poverty

Santa Clara County has experienced a substantial decrease in the number of birth to five-year-olds living in poverty—from a high of over 20,000 in 2010 to a total of 12,070 in 2014. This represents a decline of over 40%, compared with a state-wide decline of just 2% in the same period, which has significant implications for subsidized early care and education programs.


Not all parents have the luxury of putting health first.
Nearly half (48%) of Santa Clara County children speak a language other than English at home.


<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Santa Clara County</th>
<th>San Mateo County</th>
<th>California</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td>2%</td>
<td>2%</td>
<td>5%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>32%</td>
<td>24%</td>
<td>11%</td>
</tr>
<tr>
<td>Latinx</td>
<td>36%</td>
<td>33%</td>
<td>52%</td>
</tr>
<tr>
<td>White</td>
<td>24%</td>
<td>34%</td>
<td>27%</td>
</tr>
<tr>
<td>Two or More Ethnicities</td>
<td>6%</td>
<td>8%</td>
<td>5%</td>
</tr>
</tbody>
</table>

Despite the falling birth rate, the overall population of Santa Clara and San Mateo counties continues to grow due to immigration.

<table>
<thead>
<tr>
<th>Births</th>
<th>2004</th>
<th>2015</th>
<th>% Drop</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>544,685</td>
<td>491,748</td>
<td>-10%</td>
</tr>
<tr>
<td>Santa Clara County</td>
<td>26,537</td>
<td>23,393</td>
<td>-12%</td>
</tr>
<tr>
<td>San Mateo County</td>
<td>10,089</td>
<td>9,040</td>
<td>-10%</td>
</tr>
</tbody>
</table>


In 2017, US births hit a 30-year low.
Nearly half of children in California and two-thirds in Santa Clara County have at least one foreign-born parent. In California, youth sense the rising fear and uncertainty of family stability at home or in their community, which over time can have negative impacts on emotional and physical health.

Without immigrant parents, Santa Clara County would have 64% fewer children, adding to an already documented shortage of children relative to adults. Fewer children means increasingly serious consequences for supporting the future labor force and sustaining an aging population. Each child—regardless of country of origin—is more important to our future than ever before. The health and well-being of all children should be our priority.

Even with San Jose’s minimum wage increase, it still takes 3.43 full-time workers to meet the Santa Clara County Self-Sufficiency Standard.

The U.S. minimum wage is $7.25. The current California minimum wage is $11.00 an hour, to be $15.00 an hour by 2022.

Many cities throughout Santa Clara and San Mateo counties have enacted a $15 minimum wage law to go into effect between 2018 and 2020.

For a family of four, one full time worker must make less than $16.65 an hour to qualify the family for no-cost Medi-Cal.

The basic monthly costs for a two-parent, two-child family in Santa Clara County amount to $8,915. Housing and childcare make up more than half of their monthly costs.

Health Coverage of Children

Children without Health Insurance, 2016

<table>
<thead>
<tr>
<th></th>
<th>Santa Clara County</th>
<th>San Mateo County</th>
<th>California</th>
<th>United States</th>
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</thead>
<tbody>
<tr>
<td>African American</td>
<td>2%</td>
<td>3%</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Asian American</td>
<td>2%</td>
<td>2%</td>
<td>4%</td>
<td>6%</td>
</tr>
<tr>
<td>Latinx</td>
<td>4%</td>
<td>5%</td>
<td>7%</td>
<td>10%</td>
</tr>
<tr>
<td>White</td>
<td>2%</td>
<td>2%</td>
<td>4%</td>
<td>5%</td>
</tr>
</tbody>
</table>

Santa Clara and San Mateo counties report a higher percentage of children having health insurance than California (94%). An estimated 13,050 children (3%) in Santa Clara County are uninsured and 2,434 children (1.5%) in San Mateo County are uninsured.

All children should have access to health insurance and the quality healthcare that they need to thrive. We have a “no wrong door” approach and available options. Children in Santa Clara and San Mateo counties whose families earn up to 400% of the Federal Poverty Level are eligible for free or subsidized health insurance through Medi-Cal, State Children’s Health Insurance Program, Healthy Kids Program, Valley Kids Program, Kaiser Child Health Program, and Health Plan of San Mateo.

The price we pay in California:

In 2014, over 73,000 kids visited the emergency room for asthma, especially in rural areas. Asthma hospitalizations cost $1 billion.

Asthma-related school absences are expensive. Parents lost $233 million in wages to care for kids who missed school due to asthma in 2010. Schools lost over $37 million in attendance revenue in 2009.


California kids miss over 1 million days of school each year because of asthma.

In Santa Clara County, almost one out of four (23%) emergency department visits are for children, ages 0 to 17.

Latinx children account for over half of all emergency room visits for children, and yet they represent 1/3 of the child population.

Source: Children’s Health Assessment, 2015.

### Emergency Department Visits among Santa Clara County Children, 2014

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percent of ER visits</th>
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<tbody>
<tr>
<td>African American</td>
<td>4%</td>
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<tr>
<td>Asian/Pacific Islander</td>
<td>16%</td>
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<tr>
<td>Latinx</td>
<td>55%</td>
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<tr>
<td>White</td>
<td>20%</td>
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</table>

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percent of ER visits</th>
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</thead>
<tbody>
<tr>
<td>Under 5</td>
<td>45%</td>
</tr>
<tr>
<td>5-11</td>
<td>30%</td>
</tr>
<tr>
<td>12-17</td>
<td>25%</td>
</tr>
</tbody>
</table>

Source: Office of Statewide Health Planning and Development, 2014 Emergency Department Data; Summarized by Santa Clara County Public Health Department.

Note: Two or more ethnicities not included.
Between 2007 and 2013, Santa Clara County’s youth suicide rate increased by 35%. Of those who are in need of counseling services in Santa Clara and San Mateo counties, 65% receive it.

In Santa Clara County, one in ten (11%) middle and high school students attempted suicide one or more times in the past 12 months.

Obesity in childhood can lead to health problems—often for life. In adults, having obesity is linked to increased risk of heart disease, type 2 diabetes, high blood pressure and other chronic conditions. Research shows that children with obesity are more likely to have obesity as an adult. An individual’s education and nutritional knowledge has more impact on their food choices than their proximity to grocery stores, suggesting that the idea of “food deserts” is misleading.


### Students Who Are Overweight or Obese in 5th Grade in California, Santa Clara County, and San Mateo County, 2017

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Mateo County</td>
<td>41%</td>
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<tr>
<td>Santa Clara County</td>
<td>34%</td>
</tr>
<tr>
<td>California</td>
<td>33%</td>
</tr>
</tbody>
</table>

### Santa Clara County 5th Grade Students Who are Overweight or Obese by Race or Ethnicity

- African American/Black
- American Indian/Alaska Native
- Asian/Pacific Islander
- Filipino
- Latinx
- Hawaiian
- White
- Two or More Ethnicities

A can of soda has more than a day’s worth of sugar.

Santa Clara County Middle and High School Students who Drank Soda One or More Times in the Past 24 Hours, 2016

<table>
<thead>
<tr>
<th>Group</th>
<th>0 tsp/day</th>
<th>20%</th>
<th>40%</th>
<th>60%</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td></td>
<td></td>
<td>45%</td>
<td></td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td></td>
<td>28%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Latinx</td>
<td></td>
<td></td>
<td>45%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td></td>
<td></td>
<td>41%</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td></td>
<td>43%</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
<td>33%</td>
<td></td>
</tr>
<tr>
<td>Santa Clara County</td>
<td></td>
<td></td>
<td>38%</td>
<td></td>
</tr>
</tbody>
</table>


Note: The American Heart Association recommends limiting the amount of added sugars you consume to no more than 6 tsp/day for children and women and 9 tsp/day for men.
10 Steps to a Healthier You! (10 Steps)

10 Steps is a three-workshop series combining evidence based recommendations with supportive structure and guidance for parents to implement and sustain healthy behaviors. The program offers tools and strategies to assist in creating an environment that is conducive to both physical and emotional health.

1. Eat fruits and vegetables every day*
2. Drink WATER instead of soda or other sweet drinks*
3. Choose to eat FRUIT instead of drinking juice
4. Choose a HEALTHY, NATURAL SNACK (e.g., fruit) instead of processed/packaged snacks
5. Eat children older than 2 YEARS of age drink low-fat (1%) or non-fat (skim) milk*
6. Eat family meals at REGULAR times*
7. Eat breakfast everyday and don’t skip meals
8. Be active/play outside at least 1 HOUR every day*
9. Have LESS THAN 1-2 HOURS of non-homework related screen time per day* (TV/computer/video game/tablet/texting)
10. Get enough SLEEP

Parents Identifying Recommended Proportion of Fruits/Vegetables for Child’s Dinner Plate
Pre-test v. Post-test

Parents Correctly Identifying Foods as Health/Unhealthy
Pre-test v. Post-test

Identified how much of a child’s dinner plate should be filled with fruits and/or vegetables (half).

Significant Increase in Knowledge:

We do what it takes to find health solutions for each family.
Workshop 1- 10 Steps to a Healthier You!:
Focus on lifestyle habits rather than body shape or weight.

Workshop 2- Developing Structure & Routines:
Experiential approach to establishing structure in the home specifically related to meal and bedtime routines.

Workshop 3- 5 Keys to Raising Healthy, Happy Eaters:
The division of responsibility for feeding young children.

So far:
- 6,500 unduplicated parents have attended workshops
- 6,800 children have been indirectly served by the workshops
- 700 workshops have been held at community sites

After attending a 10 Steps Workshop:
- 97% of parents felt they learned new things that would help them as a parent
- 96% of parents felt they were ready to go home and try new things
- 90% of parents felt the workshop was very or extremely valuable

“Healthier Kids Foundation’s 10 Steps class was so helpful. My family meals are going to change after what I have learned. We are going to focus on foods that are real.”

– Jerry, father
Healthier Kids Foundation, in partnership with local dentists, screens children for untreated dental issues and assists them with accessing follow-up dental care. Healthier Kids Foundation has screened over 67,000 kids for dental issues and the rate of referral for follow-up case management is continually increasing. Of children screened in fiscal year 2018-2019, a shocking 32% were referred for urgent or emergency dental needs, and the referral rate for children between 6 and 8 years old is disproportionately high (>35%). Healthier Kids Foundation case managers follow-up with each parent whose child has been referred to ensure they receive appropriate dental care.

Everyday, 2,000 children in Santa Clara County go to school with pain, infection, or severe cavities.
According to the American Academy of Pediatric Dentistry, pregnant women and children should follow the recommendations below as an oral health guideline:

### Recommendations

<table>
<thead>
<tr>
<th>Prenatal</th>
<th>Have an oral evaluation, be counseled on proper oral hygiene, and be referred for preventive and therapeutic oral health care. Use xylitol gum at least 2 to 3 times per day, evidence significantly decreases the future child’s caries rate.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborns</td>
<td>As soon as first tooth erupts, brush twice daily with small soft brush. For children at moderate to high risk of caries, use a smear of fluoridated toothpaste. Begin flossing when adjacent tooth surfaces cannot be cleansed with a toothbrush.</td>
</tr>
<tr>
<td>Child’s First Dental Visit</td>
<td>First visit by first birthday, within 6 months of eruption of first tooth and no later than 12 months of age.</td>
</tr>
<tr>
<td>Professional Application of Topical Fluoride</td>
<td>For children at moderate caries risk, apply once every 6 months; for children at high risk, apply once every 3 to 6 months.</td>
</tr>
<tr>
<td>Primary Teeth</td>
<td>Apply sealants on pits and fissures. For caries-susceptible primary molars, place as soon as possible after eruption.</td>
</tr>
<tr>
<td>Permanent Teeth</td>
<td>Apply sealants on pits and fissures. For permanent molars, premolars, and anterior teeth with deep pits and fissures, place as soon as possible after eruption. Toothbrushes should be replaced every 3 months.</td>
</tr>
</tbody>
</table>

Dental caries, or cavities, is the single most common chronic childhood disease in the United States. It develops when a child’s mouth is infected by acid producing bacteria that is passed from parent to child through saliva. 

Source: Healthychildren.org, How to Prevent Tooth Decay in Your Baby

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Healthier Kids Foundation’s VisionFirst program uses a high-tech photo optic scan camera to screen children for untreated vision issues. Healthier Kids Foundation has provided over 112,400 vision screenings to children, of which, 14% were identified as having a potential vision problem.

A vision screening is only useful if the child identified with a vision problem actually gets glasses. Healthier Kids Foundation case managers follow-up with the parents of those children who receive a referral to ensure that they have insurance and obtain appropriate treatment. Healthier Kids Foundation’s case managers have assisted over 6,400 children in obtaining glasses.
A 2019 evaluation conducted on the DentalFirst and VisionFirst programs found that both programs provide value to the families and demonstrate sustained positive impacts from services provided over a year prior. The programs build families’ awareness of:

1. Insurance services that families are entitled to and how to access them.
2. How dental and vision care impact children’s educational outcomes if not identified and addressed early.

3. The importance of healthy habits for all children within a family, not just the child that Healthier Kids Foundation worked with.

The evaluation showed that awareness became sustained practice, once parents became aware of their children’s vision and dental needs and are connected to care, they continue taking their children for preventative treatment appointments, even after supportive case management services end.

93% of those surveyed said that they had been to the dentist within the last 12 months. Of which, 84% indicated that it was for routine dental care. Medi-Cal covers a dentist visit once every 6 months.

97% of those surveyed said that they had been to the eye doctor within the last 3 years. Of which, 77% indicated that it was for a regular check-up. Medi-Cal covers an optometry appointment once every 2 years.
Using the AuDX Pro OAE screening device, Healthier Kids Foundation screens children for undetected hearing issues and assists them with obtaining hearing services and treatment. Healthier Kids Foundation has screened over 49,500 kids for untreated hearing issues and of those children, 9% were identified as having a potential hearing problem. Healthier Kids Foundation’s case managers followed-up with their parents and assisted more than 3,400 kids in obtaining appropriate hearing services.
While the rate of student enrollment is decreasing in Santa Clara County, the rate of special education enrollment continues to increase.
Chronic absence is defined as missing 10% or more of school days for any reason.

In 2017-18, the chronic absence rate for students K-12 in Santa Clara County was 9%, statewide 11%.

The rate of absenteeism is disproportionately high for socioeconomically disadvantaged students in Santa Clara County at 15%.

Over 11% of kindergarteners are chronically absent in Santa Clara County and therefore are three times more likely to repeat a grade.

In 2014-15, school districts statewide lost over $1 billion due to student absences.

Healthy Kids do Better in School

Children may have a health problem that you do not know about. Or maybe they need help with a health problem you do know about. Health problems should not hold children back.

These health problems make it harder for children to go to school, pay attention, and learn.

Seeing – All kids need an eye exam every year.

Hearing – All kids need to be hearing screened.

Tooth Pain – All kids need to see a dentist once every six months and to have sealants put on their molars.

Feeling Sleepy – All kids need 10 hours of sleep a night.

Hunger – All kids need to eat breakfast at home or at school each morning.

Asthma – Asthma causes kids to cough at night and might make them tired in school. Talk to a doctor about appropriate treatment or medication.

Stress – If a child is very afraid, sad, or worries a lot, talk to a doctor or counselor.

Behavior – If it is difficult to manage a child’s behavior, talk to a doctor or counselor.

Addressing these barriers to learning may help children succeed in school. Every day matters!

Children who miss two or more days of school a month have a harder time learning to read and may have to repeat a grade.

Source: Childrenshealthfund.org Healthier kids do better in school, 2018.
Healthier Kids Foundation is a family forward health agency that gives children and those who love them the education and cutting edge tools they rightfully deserve to live a healthy life.

At Healthier Kids Foundation, we believe preventative care at an early age makes things fair. Every day, we work side-by-side with families to identify and eliminate kids’ health issues before they even begin. Because without us, barriers that could be corrected may stand in the way of kids joyfully climbing the ladder of life.

“About a month after my son got his glasses, he came home from school with a certificate of recognition for his academic improvement—he was honored in front of the entire school. Seeing my son’s smiling face that day made me and my husband super proud!”

- Alex, mother

“Now that my daughter has received her dental treatment she is more comfortable and can eat apples and hard tacos! I am so happy for her because now she is able to enjoy her food.”

- Maria, mother

“Post-surgery, my son’s speech development improved immediately. He heard people calling my name, Yolanda. Moments later he called for me, ‘Yolanda!’ I began to cry, hugged him and said, ‘Yes, I am Yolanda, your mommy.’ He responded, ‘Mommy.’ My son’s transformation is a miracle.”

- Yolanda, mother

“The 10 Steps workshops taught me how to respect my children. I try to consider what they want as often as possible since they too are a part of the family. Overall the workshops made us healthy and also happy.”

- Jorge, father
Healthier Kids Foundation

Vision Fýrst
Screens children for undetected vision issues and assists with accessing follow-up care

Hearing Fýrst
Screens children for undetected hearing issues and assists with accessing follow-up specialty care

Dental Fýrst
Screens children for undetected dental issues and assists with accessing follow-up care

Actively supports the well-being of children and families in the City of Santa Clara by nurturing and facilitating community relationships

COPE
Identifies uninsured children and assists parents in obtaining subsidized health coverage

Three-class series for parents and caregivers that focuses on integrating healthy lifestyles within the home

Baby Gateway
Ensures newborns secure a medical home prior to being discharged from the hospital

For more information regarding Healthier Kids Foundation’s programs, please contact us at 408.564.5114

10 Steps

Challenge Team
Our Ninth Annual Symposium on the Status of Children’s Health continues to be an opportunity to raise awareness of the importance of the health of our children and the critical health needs that still need to be addressed. The intent of the Symposium is to facilitate conversations so that we, as a collective and diverse community, can build a strong, effective plan to address the health deficiencies among our children.

Hundreds of organizations, including Healthier Kids Foundation, work side-by-side in our community to address the health needs of children to ensure that they all have the opportunity to thrive. Now, let’s all collaborate to create a healthier community for our children!

For more information regarding the presentations provided during our Ninth Annual Symposium, please visit Healthier Kids Foundation’s website at www.hkidsf.org.

### Ninth Annual Symposium

<table>
<thead>
<tr>
<th>Presenter</th>
<th>Topic</th>
<th>E-mail</th>
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</thead>
<tbody>
<tr>
<td>Keynote Speaker:</td>
<td>On the Road to Value in Oral Health</td>
<td><a href="mailto:pglassman@pacific.edu">pglassman@pacific.edu</a></td>
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<tr>
<td>Paul Glassman, DDS, MA, MBA</td>
<td></td>
<td></td>
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<tr>
<td>Jessica Ray, RDH, DMD</td>
<td>DentalFirst</td>
<td><a href="mailto:drjessicaray@comcast.net">drjessicaray@comcast.net</a></td>
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<tr>
<td>Dowell Myers, PhD</td>
<td>The Doubled Importance of Children Under Present Trends</td>
<td><a href="mailto:dowell@price.usc.edu">dowell@price.usc.edu</a></td>
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<td>Stephen Black</td>
<td>Creating a Culture of Engaged Empathy in a Polarized Nation</td>
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</table>
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Healthier Kids Foundation
4040 Moorpark Avenue, Suite 100
San Jose, CA 95117
408.564.5114
hkidsf.org