AT A GLANCE
STATUS OF CHILDREN'S HEALTH
ANNUAL SYMPOSIUM

May 2023
Dear Friends,

I am honored to welcome you to the 12th Annual Symposium on the Status of Children's Health! We are delighted to host this event virtually again as it allows us to include speakers and attendees from near and far. The Symposium serves as an opportunity for us to reflect on and review the health and wellness of our kids. How are we doing as a community and what steps do we need to make for change?

The many struggles that we have faced these past few years have been extremely difficult for our families, especially our children. They need us now more than ever. I invite all parents, teachers, school administrators, community-based organizations, and providers to come together as strong advocates who can continue to meet the critical and evolving needs of our kids.

As we continue to support and inspire our families, let us be reminded that the difficulties in the past few years have helped us to become a stronger community. With the CalFresh Emergency Allotments being cut off by the federal government, the rise of inflation, and the Medi-Cal Redetermination process, there is no doubt in my mind that we will once again come together and use each other's strengths to collaborate on new projects. As quoted by Jim Morgan, author of Applied Wisdom for the Nonprofit Sector, “Bad news is good news—if you do something about it.” We can celebrate all the accomplishments we've made, however, there is still a lot to do.

Nevertheless, let’s explore the newest Census data that will be released this Spring and Summer. With this critical information at hand, we will be better equipped to serve our diverse community. While I am sad to leave Healthier Kids Foundation this year; all good things must come to an end and I am happy to pass the reigns to the next CEO, Melinda Snavely. I can’t think of anyone better suited to take Healthier Kids Foundation to the next level. No matter what the future holds for our kids. We will continue to be here, working toward a world where all Silicon Valley youth can achieve good health, educational equity, and success in life as productive community members.
Healthier Kids Foundation extends its gratitude to:

The Tseng Castaneda Family

United for the health and wellness of our kids, every day.
## Child Population

### Children by City, County and State

<table>
<thead>
<tr>
<th>City</th>
<th>Total Population 2021</th>
<th>Children Ages 0-17 2021</th>
<th>Percentage of Population that are Children 2021</th>
<th>Percentage of Children Population in 2010</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campbell</td>
<td>42,754</td>
<td>9,406</td>
<td>22%</td>
<td>22%</td>
<td>0%</td>
</tr>
<tr>
<td>Cupertino</td>
<td>58,622</td>
<td>14,656</td>
<td>25%</td>
<td>30%</td>
<td>-5%</td>
</tr>
<tr>
<td>East Palo Alto</td>
<td>28,847</td>
<td>6,923</td>
<td>24%</td>
<td>33%</td>
<td>-9%</td>
</tr>
<tr>
<td>Gilroy</td>
<td>58,101</td>
<td>16,849</td>
<td>29%</td>
<td>33%</td>
<td>-4%</td>
</tr>
<tr>
<td>Los Altos</td>
<td>30,700</td>
<td>7,675</td>
<td>25%</td>
<td>28%</td>
<td>-3%</td>
</tr>
<tr>
<td>Los Gatos</td>
<td>32,538</td>
<td>7,484</td>
<td>23%</td>
<td>26%</td>
<td>-3%</td>
</tr>
<tr>
<td>Milpitas</td>
<td>79,066</td>
<td>17,395</td>
<td>22%</td>
<td>26%</td>
<td>-4%</td>
</tr>
<tr>
<td>Morgan Hill</td>
<td>45,342</td>
<td>11,789</td>
<td>26%</td>
<td>31%</td>
<td>-5%</td>
</tr>
<tr>
<td>Mountain View</td>
<td>81,516</td>
<td>16,303</td>
<td>20%</td>
<td>20%</td>
<td>0%</td>
</tr>
<tr>
<td>Palo Alto</td>
<td>66,680</td>
<td>15,336</td>
<td>23%</td>
<td>25%</td>
<td>-2%</td>
</tr>
<tr>
<td>San Jose</td>
<td>983,489</td>
<td>216,368</td>
<td>22%</td>
<td>28%</td>
<td>-6%</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>127,151</td>
<td>24,159</td>
<td>19%</td>
<td>24%</td>
<td>-5%</td>
</tr>
<tr>
<td>Saratoga</td>
<td>30,163</td>
<td>6,033</td>
<td>20%</td>
<td>28%</td>
<td>-8%</td>
</tr>
<tr>
<td>Sunnyvale</td>
<td>152,258</td>
<td>31,974</td>
<td>21%</td>
<td>24%</td>
<td>-3%</td>
</tr>
<tr>
<td>Santa Clara County</td>
<td>1,885,508</td>
<td>395,957</td>
<td>21%</td>
<td>24%</td>
<td>-3%</td>
</tr>
<tr>
<td>San Mateo County</td>
<td>737,888</td>
<td>147,578</td>
<td>20%</td>
<td>22%</td>
<td>-2%</td>
</tr>
<tr>
<td>California</td>
<td>39,142,991</td>
<td>8,768,030</td>
<td>22%</td>
<td>25%</td>
<td>-3%</td>
</tr>
</tbody>
</table>

In the last decade, the number of children ages zero through five, has dropped by 10%. With the cost of living in the area, this trend is expected to continue.  

Source: California Department of Education Dataquest, 2017-2024 Santa Clara County Early Learning Master Plan

In Santa Clara County, children are 21% of our population and 100% of our future.  

Source: U.S. Census Bureau, American Community Survey, 2014-2021
• Birth rates continuously fall as women are having fewer children than expected.
• In a span of 20 years, the number of births in Santa Clara County dropped 30%.
• The global fertility rate plunged to 2.3 in 2021, and is expected to reach 2.1
• India is expected to replace China as the world’s most populous country later this year.

Source: Economist, 2022

Elbow Room
World Population
% change on previous year

The UN’s population forecast for 2100 has dropped by 1% over the projections in 2019.

Source: Economist, 2022
Due to birth rates falling, an aging boom is projected to happen over the next few decades.

About 333 million people live in America. 17% of those are age 65 or older.

By 2060, nearly one in four Americans is projected to be an older adult.

The share of the population that is 0-4 years old decreased by 1.1% from 2010 to 2021.

The share of the population that is 65 and older increased by 3.7% in 2021 since 2010.

Source: US Census, 2020 - 2021 ACS 1-Year Estimates Subject Tables, Age & Sex
The number of children in Santa Clara County schools dropped by 14.5% within the last eight years.

Compared to California's loss of nearly 40,000 students between this school year and last, the six-county Bay Area has lost students at nearly double the rate.

Santa Clara County had the steepest drop at 2% from one school year to the next.

Factors that could be the cause of decreasing public school enrollment: California's high cost of living which drives families out of the area, declining birth rates, and parents opting to enroll their children in private schools or home-schooling.

If the average school size is 599, a drop of 40,000 students could mean that we need 67 fewer schools in the county.
## School Enrollment

### 2017 to 2022 K-12 Enrollment by School District

<table>
<thead>
<tr>
<th>District</th>
<th>2016 - 2017 School Year</th>
<th>2022 - 2023 School Year</th>
<th>% Drop</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alum Rock Union</td>
<td>11,624</td>
<td>8,807</td>
<td>-24%</td>
</tr>
<tr>
<td>Cupertino Union</td>
<td>18,598</td>
<td>13,467</td>
<td>-28%</td>
</tr>
<tr>
<td>Franklin McKinley</td>
<td>10,735</td>
<td>8,107</td>
<td>-24%</td>
</tr>
<tr>
<td>Milpitas Unified</td>
<td>10,260</td>
<td>9,967</td>
<td>-3%</td>
</tr>
<tr>
<td>Palo Alto Unified</td>
<td>12,287</td>
<td>10,318</td>
<td>-16%</td>
</tr>
<tr>
<td>San Jose Unified</td>
<td>32,004</td>
<td>26,479</td>
<td>-17%</td>
</tr>
</tbody>
</table>

*Source: CA Department of Education, Data Quest, Enrollment Report, 2017-2022*

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"Health and education cannot be separated. They are integrally connected."

-Dr. Dewan, County Superintendent of Schools
Santa Clara County Office of Education
Ethnicity of Children

Santa Clara County

- Latin/Hispanic: 34%
- Asian: 6%
- White: 30%
- Two or More Ethnicities: 2%
- Black: 1%
- Native Hawaiian/Pacific Islander: 1%

California

- Latin/Hispanic: 30%
- Asian: 5%
- White: 30%
- Two or More Ethnicities: 1%
- Black: 2%
- Native Hawaiian/Pacific Islander: 1%

San Mateo County

- Latin/Hispanic: 31%
- Asian: 7%
- White: 36%
- Two or More Ethnicities: 2%
- Black: 2%
- Native Hawaiian/Pacific Islander: 1%

Population that Speaks a Language Other than English at Home

<table>
<thead>
<tr>
<th></th>
<th>Santa Clara County</th>
<th>California</th>
<th>San Mateo County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latin/Hispanic</td>
<td>34%</td>
<td>48%</td>
<td>31%</td>
</tr>
<tr>
<td>Asian</td>
<td>30%</td>
<td>11%</td>
<td>23%</td>
</tr>
<tr>
<td>White</td>
<td>27%</td>
<td>30%</td>
<td>36%</td>
</tr>
<tr>
<td>Two or More Ethnicities</td>
<td>6%</td>
<td>5%</td>
<td>7%</td>
</tr>
<tr>
<td>Black</td>
<td>2%</td>
<td>5%</td>
<td>2%</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.3%</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau, American Community Survey, 2011-2021
Children of Immigrant Families

Children Living with Foreign-Born Parents, 2018

- Children of immigrant families are more likely to have low incomes than families of children with only US-born parents.
- The fear and uncertainty of family stability at home or in their community can negatively impact their emotional and physical health.

Source: Urban Institute, 2019

Children of Immigrant & US-Born Families Living Below the Poverty Level

In 2014–2018, 8% of California children lived in deep poverty.

Alameda County and Santa Clara County’s poverty rate dropped a combined 0.7% in 2014-2018.

Income and well-being are intricately linked. Poverty can negatively affect children’s developmental trajectories in cognitive, socio-emotional, and physical health.

Source: kidsdata.org, 2018

An estimated 20,642 families earned income below the poverty level in a 12-month period.

While poverty can have negative effects on children’s mental and physical health, so can the absence of parents who work long hours and multiple jobs in order to provide for their families.

Source: US Census, ACS Tables, 2021
Number of Households & Residents, by Self Sufficiency
Santa Clara County, 2021

<table>
<thead>
<tr>
<th>Households</th>
<th>Family Households with Children</th>
<th>Family Households with Preschool-Aged Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>348,020 (72%)</td>
<td>136,986 (63%)</td>
<td>21,086 (55%)</td>
</tr>
<tr>
<td>137,171 (28%)</td>
<td>79,472 (37%)</td>
<td>17,526 (45%)</td>
</tr>
</tbody>
</table>

Self-Sufficient (%) | Not Self-Sufficient (%)
---------------------|------------------------|
137,171 (28%) | 79,472 (37%) |
184,168 (38%) | 158,420 (42%) |
18,573 (46%) | 17,526 (45%) |

• More than 137,000 (28%) of Santa Clara County households lived below the Self-Sufficiency Standard in 2021.

• This includes about 79,500 families with children, 45% of which have at least one preschool-aged child.

Share of Household Living Below the Self-Sufficiency Standard, by Householder Characteristics
Santa Clara County, 2021

- While there are different household characteristics associated with insufficient income to meet basic needs, the one factor that seems to weigh most heavily is the presence of children.

Source: JointVenture.org, 2022
Minimum wage is no longer a living wage in Silicon Valley.

The estimated wage needed in order to meet a family’s most basic needs without assistance in Silicon Valley ranges from $19.65/hour for a two-adult household with no children to $35.12/hour per adult in a family of four (with two adults and two school-aged children).

A single adult with an infant and preschooler would need to make $81.36/hour ($169,000 annually) in order to be self-sufficient.

The federal government cut off CalFresh Emergency Allotments in April 2023. As a result, households on CalFresh will lose about $200 a month.

“I don’t have the $230 left over each month to compensate. I’m just not going to be able to afford food.” said a 69-year-old resident with Type II diabetes regarding the drop in aid.

A Silicon Valley single-parent with one preschooler and one school-aged child would be unable to eat out at restaurants, go to the movie theater, take a family vacation, or save for retirement without seeking outside support or incurring debt.
The cost of living is a major concern for Bay Area parents and guardians of young children under the age of five. In Silicon Valley, the annual average of in-home childcare for one child is $43,200.

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**Current Early Care and Education in Santa Clara County**

- 3-5yr old population: 71,000
- Enrolled in Early Care/Education Programs: 34,000
- Enrolled in Kindergarten/TK: 15,000
- Not Enrolled in Early Care/Education Programs: 22,000

- 28% of Santa Clara County households live below Self-Sufficiency Standards
- It’s nearly impossible for low-income families with children ages 3-5 to receive any early care and education.

**Average In-Home Childcare Costs**

**Costs of Full-Time Care for One Child | 2022**

<table>
<thead>
<tr>
<th>Location</th>
<th>Monthly</th>
<th>Annual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Silicon Valley</td>
<td>$3,600</td>
<td>$43,200</td>
</tr>
<tr>
<td>San Francisco</td>
<td>$4,200</td>
<td>$50,400</td>
</tr>
<tr>
<td>California</td>
<td>$3,600</td>
<td>$43,100</td>
</tr>
<tr>
<td>National Average</td>
<td>$3,000</td>
<td>$36,100</td>
</tr>
</tbody>
</table>

“*We’ve seen a trend toward Silicon Valley becoming a less conducive environment to start and raise a family, “*

-Rachel Massaro, Vice President and Director of Research at Joint Venture
In a research study conducted by the Silicon Valley Institute for Regional Studies, in partnership with the University of Washington School of Social Work, Center for Women’s Welfare, a model demonstrates the impacts of Universal Preschool and how it can benefit the well-being of Santa Clara County families.

- A universal preschool implementation covering full-day/year-round care would lead to an estimated 7,000 households and 31,000 people lifted to household income adequacy.
- It can be an effective tool to increase preschool enrollment – particularly among lower-income families struggling to overcome childcare’s high/rising costs.
- Provides community-wide benefits such as increases in preschool education jobs, overall labor income, household spending, and indirectly-created jobs supporting the local economy.

**Self-Sufficiency Rates**
Santa Clara County, 2021 & Modeled Scenario

- **% Households**
  - 2021: 70%
  - Modeled: 80%

- **% Family Households with Children**
  - 2021: 60%
  - Modeled: 70%

- **% Households with Preschool-Aged Children**
  - 2021: 40%
  - Modeled: 50%

- **% Children in Households with at least one Preschool-Aged Child**
  - 2021: 50%
  - Modeled: 60%

- **% Households with Preschool-Aged Children**
  - 2021: 40%
  - Modeled: 50%

Note: Based on the 2021 Self-Sufficiency Standard, applied to the 2016-2020 demographic profile of the region; Modeled Scenario eliminates childcare costs for preschool-aged children (ages three and four, including after school and summer care).

Data Source: American Community Survey, 2016-2020 5-Year Estimates
Analysis: University of Washington, Center for Women's Welfare; Silicon Valley Institute for Regional Studies

Source: Joint Venture Silicon Valley, 2022
Mental Health

• Around 32% of students in Santa Clara & San Mateo Counties experienced chronic sadness and/or hopelessness in 2019-21.
• 16% of students in middle and high school have considered suicide prior to the pandemic.
• A major factor that determines students' level of sadness is whether or not they have caring adult relationships.
• The number of students who experienced sadness increased from 13% to 27% in a span of 2 years.

Student’s Mental Health
Santa Clara County & San Mateo Counties

<table>
<thead>
<tr>
<th>Year</th>
<th>Experiencing chronic sadness/hopelessness</th>
<th>Considered suicide</th>
<th>Overall</th>
<th>Students lacking caring adult relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015-16</td>
<td>15%</td>
<td>20%</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>2016-17</td>
<td>20%</td>
<td>25%</td>
<td>0%</td>
<td>25%</td>
</tr>
<tr>
<td>2017-18</td>
<td>25%</td>
<td>30%</td>
<td>0%</td>
<td>30%</td>
</tr>
<tr>
<td>2018-19</td>
<td>30%</td>
<td>35%</td>
<td>0%</td>
<td>35%</td>
</tr>
<tr>
<td>2019-20</td>
<td>35%</td>
<td>40%</td>
<td>0%</td>
<td>40%</td>
</tr>
</tbody>
</table>

In California...

Mental health is the #1 reason children ages 0-17 are hospitalized.

Suicide is the #2 cause of death for youth ages 10-24.

1 in 5 children live with a mental health diagnosis.

58% of adolescents with family incomes below the poverty line reported moderate to serious psychological stress.

More than 284,000 youth cope with major depression—66% of them do not receive treatment.

Sources: Child Mind Institute, 2023, The Mercury News, 2023, Children & Youth Behavioral Health Initiative, CalHHS.gov, 2022
Mental Health

U.S. Data

• In 2021, one in five US high school students have considered suicide, up from 14% in 2009.
• 9% attempted to end their life, rising 3% in 12 years.
• Suicide is the 2nd leading cause of death among adolescents in the United States (US).
• Over one-quarter of Santa Clara County decedents from suicide were diagnosed with depression.

Suicide per 100,000 population, by age group

Source: The Economist, 2022

Youth Death by Suicide (ages 15-24)

Source: CA Dept of Public Health, 2010-2021

Mental Health Diagnosis of Persons Who've Died by Suicide, Santa Clara County (2020)

Source: Santa Clara County Behavioral Health Services, 2020

High-school students, % who in the past year

Source: Santa Clara County Behavioral Health Services, 2020
• Eight years after smartphones were introduced (2007), 92% of teens and young adults owned a smartphone.

• 66% of teenage users who spend the most time on Instagram, Facebook, and other platforms were reported to have depression than those who spent the least amount of time (13%).

• In a 2017 study of over half a million eighth through 12th graders, the number of students who experienced high levels of depressive symptoms increased by 33% between 2010 and 2015. In the same period, the suicide rate for girls in that age group increased by 65%.

• Another common contributor to depression in teenagers is sleep deprivation, which can be caused by social media. 60% of adolescents are looking at their phones in the last hour before sleep, and get an hour less sleep than their peers who don’t use their phones before bed.

Evidence shows a link between social media and depression. While it may not be the cause, studies show a correlation that an increase in depression occurred in tandem with the rise in smartphone use.

Source: Child Mind Institute, 2023

While the total number of pediatric and young adult ED visits has remained relatively stable from 2011 to 2020, the proportion of visits for mental health reasons has approximately doubled, including a 5-fold increase in the proportion of visits for suicide-related symptoms.

Source: JAMA Network, 2023
Santa Clara County has plans to construct and operate a new mental health inpatient/outpatient building called the Child & Adolescent Psychiatric Facility | Behavioral Health Services Center (BHSC) within the Santa Clara Valley Medical Center (SCVMC) campus. The goal for the project is to complete construction and achieve occupancy by October 2024.

**Vision Statement**

Provide a safe, friendly, attractive place with age-appropriate facilities, indoor and outdoor therapeutic environments emphasizing the care community.

- Pharmacy
- Administrative Offices
- (2) Adult Inpatient Units
- Adolescent Inpatient Unit
- Child Inpatient Unit
- Rooftop Basketball Court
- Bridge Connection to Hospital Emergency Department
- Emergency Psychiatric Services (EPS)
- Urgent Care – Adult and Minor
- Administrative Offices
• In 2021, California suffered nearly 6,000 tragic deaths caused by fentanyl overdoses.
• 230 of those deaths were among teens, ages 15-19 years old.
• In 2019, 4% of adults in the US had both a substance use disorder (SUD) and any mental illness.
• 1% had both a SUD and a serious mental illness.
• Adults between ages 18-25 were more likely to have these co-occurring conditions than older adults.

**Substance Use Disorder and Mental Illness, Adults by Age Group, United States, 2019**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Any Mental Illness</th>
<th>Serious Mental Illness</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 to 25</td>
<td>2.8%</td>
<td>0.5%</td>
<td>1.4%</td>
</tr>
<tr>
<td>26 to 49</td>
<td>2.0%</td>
<td>1.5%</td>
<td>1.4%</td>
</tr>
<tr>
<td>50+</td>
<td>7.6%</td>
<td>5.2%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Percentage of Population</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Overdose Deaths in Santa Clara County**

Fentanyl-related overdose deaths are increasing at an unprecedented rate in Santa Clara County. Around 30 of the 68 fentanyl-related overdose deaths in 2020 were youth ages 16-29. Addiction (Substance Use Disorder) is a disease that often begins in early adolescence and can be related to depression and mental illness.

**Fentanyl-Related Overdose Deaths by Age Groups, California**

Source: CDPH Dashboard, 2021

Source: National Survey on Drug Use and Health Detailed Tables, 2019

Source: SCCOE.org, 2020
Healthier Kids Foundation’s My HealthFirst program provides emotional wellness checks and is intended to complement the existing physical health screening programs—moving toward a whole-child approach—because the mental wellness of students is just as important to their overall well-being and ability to learn as their physical health.

Referrals by Type

<table>
<thead>
<tr>
<th>Program Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>6,296 Wellness Checks</td>
</tr>
<tr>
<td>200 In Imminent Risk (3%)</td>
</tr>
<tr>
<td>2,541 Have Unmet Needs (40%)</td>
</tr>
<tr>
<td>2,004 Parents Participated in Parent Support Call</td>
</tr>
<tr>
<td>239 Referred to Behavioral Health</td>
</tr>
<tr>
<td>2,541 Referred to Basic Needs/Support Services</td>
</tr>
</tbody>
</table>

“I talk to my son all the time, but he often would not express what makes him angry or sad. Instead, he shuts down. Through this program, my child was able to receive behavioral health services. My son has a great time with his counselor. Healthier Kids Foundation staff also helped me with food resources. I am very thankful to have had assistance with food since right now, I am the only one working in the house.”

- Parent
Research has shown that oral health impacts self-esteem and body image in children.

Good oral health and hygiene routines have been associated with:

- Increased self esteem
- Positive body image
- Decreased social anxiety and insecurity
- Lowered anxiety and depression
- Less reported mental stress caused by ongoing tooth pain
- Increased school performance and motivation

Local Oral Health Program

Public Site
https://publichealth.sccgov.org/health-information/oral-health

Provider Site
https://publichealth.sccgov.org/health-information/oral-health

During the 2021-2022 school year, 44% of children (grades K-6th) referred during school-based screenings had visible decay.

Source: Data from Healthier Kids Foundation, 2022

Children under 16 years reported low self-esteem (80.3%) in relation to their oral health.

Source: Self-esteem and oral health behavior in adolescents by Costa Pazos, et. al.
According to the American Academy of Pediatric Dentistry, pregnant women and children should follow these recommendations as an oral health guideline.

**Recommendations**

**Prenatal** 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.

**Newborns** 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.

**Child’s First Dental Visit**
First visit by first birthday, within 6 months of eruption of first tooth and no later than 12 months of age.

**Professional Application of Topical Fluoride**
For children at moderate caries risk, apply once every 6 months; for children at high risk, apply once every 3 to 6 months.

**Primary Teeth** Apply sealants on pits and fissures. For caries-susceptible primary molars, place as soon as possible after eruption.

**Permanent Teeth** 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.

*Source:* (1) American Academy of Pediatric Dentistry, 2021-2022; and (2) U.S. Department of Health and Human Services, 2000

**Tooth decay is the most common chronic infectious disease of childhood and develops when a child’s mouth is infected by acid producing bacteria that is passed from parent to child through saliva.**
SmileFirst is an interactive and informative presentation for all ages about oral health, dental hygiene, and preventing tooth decay. The program provides families and children with the tools and resources to help maintain a good oral hygiene routine, positive and preventative behaviors.

How can we prevent cavities?

- Have healthy snacks.
- Drink water and stay away from sugary drinks.
- Remove ALL food from your teeth before sleeping (wipe infant’s mouth, brush & floss).
- Visit the dentist every 6 months.

A total of 32,355 children and adults have attended our Oral Health Workshop.

Overall Annual Goal:
- Funded Goal: 8374 participants
- Stretch Goal: 9000 participants
- Current Progress as of 5/9/2022: 10,830 participants

572 student presentations and parent workshops conducted.

It’s best to start good oral health habits as soon as possible!
During the 2022-2023 school year, of the 20,000 children screened by dentists in underserved areas, 38% of students received a referral for serious dental issues, up 27% over pre-pandemic screening results.
Families deserve a partner in advocating for their children’s health.

“When I received the results from Healthier Kids Foundation four years ago both my husband and I were in denial that our daughter had any hearing conditions. We could not believe that Elizabeth had hearing problems. Since Kaiser diagnosed her with mild hearing loss and Elizabeth also did not pass the Healthier Kids Foundation hearing screening, it made me realize my daughter’s hearing loss was real.

The staff member along with the CEO provided me with an Audiology appointment and accompanied me to Elizabeth’s first appointment. This meant a lot to me because my husband was in denial about our daughter’s hearing loss and I did not have his support through this tough journey. The staff accompanied me to all of Elizabeth’s audiology appointments and were there when Elizabeth received her hearing aids. After my child received her hearing aids I noticed a huge difference in my daughter.

Elizabeth can now communicate with others; her speech became clearer and is more attentive in class. My husband who was in denial about our daughter’s mild hearing loss saw a difference after she received her hearing aids.”

- Mother

• 119,604 hearing screenings occurred with OAE equipment
• 7% required a follow-up and 6,217 (5%) received services
VisionFirst Screenings and Results

- 179,486 screenings
- 15% referred for untreated vision issues.
- Over 10,000 kids received glasses
- 73% of children went to an eye doctor following their screening
Obesity

Student Obesity by School District

- 18.9% of obese children and adolescents aged 2-19 years were found to be among the lowest income group, 19.9% in the middle-income group, and 10.9% among those in the highest income group.

- Between 2017-2020, obesity affected about 14.7 million children and adolescents in the United States.

- Obesity prevalence was 26.2% among Hispanic children, 24.8% among Black children, 16.6% among White children, and 9% among Asian Children.

Santa Clara County Students Who Are Overweight or Obese, by Grade Level: 2019

Source: Santa Clara County Public Health Data Portal, 2018

Source: Kidsdata.org, 2019

Source: CDC.gov, 2022
10 Steps to a Healthier You! is a free, five-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.

99% of participants...
Felt they were ready to implement the things they learned from the workshop at home.
Would recommend this class to a family member or friends.

95% of participants felt confident in their ability to serve their children healthy foods.
10 Steps to a Healthier You!

This free, five-workshop series provides strategies to parents and caregivers for implementing healthy habits in the home through the delivery of upstream messages with the intent of providing primary prevention of childhood and adolescent obesity.

**Workshop 1 – 10 Steps to a Healthier You!**
Implements healthy habits in your home

**Workshop 2 – Structure and Routine**
Develops and implements strategies around mealtime and bedtime.

**Workshop 3 – 5 Keys to Raising a Healthy, Happy Eater**
Divides responsibilities for feeding young children.

**Workshop 4 – Boosting Healthy Habits**
Empowers caregivers to continue practicing healthy habits.

**Workshop 5 – Learning Steps**
Implements learning through play.

“Before taking this class, I did not know that store-bought 100% fruit juice contained high portions of sugar and that granola bars are unhealthy. Attending the 10 Steps workshop helped me learn new information. I am now more aware of what my children and I are consuming.

Throughout these classes, I’ve learned to give them homemade foods, while still exposing them to vegetables. It will help them to be curious and take the initiative to try them. It gave me a sense of relief to know that I am not the only one out there facing challenges and wanting to improve my family's health. I was happy to attend the workshop and felt that the information shared was valuable.”

-Mother of two

Are you interested in the 10 Steps Program?
Please email 10steps@hkidsf.org

97% of 10 Steps participants have learned new things that will help them as a parent or caregivers.
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 year’s work.

Source: Childrenshealthfund.org Healthier kids do better in school, 2018.
The total number of COVID-19 cases reached 104,618,913 in the United States since January 2020.

Total deaths in the U.S. equal 1,131,819

16.9% of people in the U.S. are currently vaccinated with the updated booster dose

As of May 2023, Santa Clara County’s community level of COVID-19 is labeled as low with a 32.68 case rate and 4.6 new COVID-19 admissions per 100,000 population.
Santa Clara County Residents Who Have Completed Primary Series Vaccinations (By Age Group)

- 1,705,641 (88.5%) Santa Clara County residents (all ages) have completed the primary series of vaccinations.
- 1,138,484 (68%) of residents (ages 5+) received the first booster
- 582,992 (34%) of residents (all ages) received both boosters.

COVID-19 Vaccinations Administered in United States

- 1.99M Children over the age of 5 in the U.S. are vaccinated with at least one dose since June 2022.
- 29.5M California residents have completed a primary series of vaccinations as of May 2, 2023.
- 8M have received the updated bivalent booster.

Source: SCC Public Health Dashboard, 2023
Source: CDC Trends in Number of COVID-19 Vaccinations in the US, 2023
“As the wealth gap in the region continues to grow, more young people are being pushed into homelessness even if they work full time.”

-Robert Aquirre, former unhoused resident turned advocate

• In 15 years, Santa Clara County’s unhoused population increased by 28%.

• For every 100,000 San Jose residents who are between 18-24 years old, nearly 85 are unhoused, landing in the No. 1 spot in the country with the highest number of unhoused young adults per capita.

• The number of children under 18 experiencing homelessness is about 37 (per 100K)

• According to data from 2021, 28% of unhoused San Jose residents ages 18-24 experienced homelessness for the first time and has doubled since 2017

Source: San Jose Spotlight, San Jose: The No. 1 U.S. city in youth homelessness, 2023

Source: SCC Point-In-Time Count

Unhoused Population in Santa Clara County by Year

Age When Experienced Homelessness for the First Time (San Jose)
Attention Medi-Cal Beneficiaries!

Californians who depend on Medi-Cal will need to once again go through a redetermination process to renew their eligibility and keep their Medi-Cal coverage. The renewal waiver ended on March 31. There are two ways you can renew your benefits: through the mail or online at the Medi-Cal website.

The deadline to renew is different for everyone. It is based on your Medi-Cal “anniversary.”

• If you had Medi-Cal before 2020, your anniversary is the date when you last renewed your coverage before the pandemic.
• If you enrolled after 2020 and haven’t gone through the renewal process yet, your anniversary falls on the date you first applied.

Don’t Miss Out!
Contact COPE@hkidsf.org for assistance

What is the Public Emergency?
During the COVID-19 Public Health Emergency (PHE), the federal government temporarily waived Medi-Cal and Children’s Health Insurance Program requirements for annual eligibility redetermination. As a result, Medi-cal members kept their health coverage continuously during the PHE.

When will PHE expire?
The Public Health Emergency expires March 31, 2023. Starting April 1, 2023, Medi-Cal will resume its normal renewal process.
“When I found out about the Baby Gateway program, I was surprised by how easy it was going to be to enroll my daughter. The day after she was born, a counselor came to my hospital room and filled out paperwork on my behalf. It was fast. I was relieved that I didn’t have to go to Social Services because I usually have to spend half of my day at the office to be assisted.”

– Mom of newborn daughter

26,407 babies were enrolled into Medi-Cal before being discharged from the hospital.

5,868 uninsured children ages 0-5 have been identified and supported with Medi-Cal enrollment.

For medical coverage assistance, please email baby@hkidsf.org or COPE@hkidsf.org
Healthier Kids Foundation

SCREENS CHILDREN FOR UNDETECTED VISION, HEARING AND DENTAL ISSUES; AND ASSISTS WITH ACCESSING FOLLOW-UP CARE

ENSURES NEWBORNS SECURE A MEDICAL HOME PRIOR TO BEING DISCHARGED FROM THE HOSPITAL

IDENTIFIES UNINSURED CHILDREN AND ASSISTS PARENTS IN OBTAINING SUBSIDIZED HEALTH COVERAGE

FIVE-CLASS SERIES FOR PARENTS AND CAREGIVERS THAT FOCUSES ON INTEGRATING HEALTHY LIFESTYLES WITHIN THE HOME

A FREE, INFORMATIVE CLASS THAT FOCUSES ON ORAL HEALTH EDUCATION DURING PREGNANCY AND CONNECTS PREGNANT PERSONS TO DENTAL CARE SERVICES THROUGH TAILORED, INDIVIDUALIZED CARE COORDINATION

A FREE WORKSHOP FOR STUDENTS AND PARENTS THAT FOCUSES ON ORAL HYGIENE, DENTAL CARE ROUTINE, AND THE PREVENTION OF TOOTH DECAY FOR THE WHOLE FAMILY

OUR COMMITMENT TO SERVING AND SUPPORTING OTHER AGENCIES, AND APPLYING OUR LEADERSHIP CAPABILITIES TO BOOST POSITIVE OUTCOMES ACROSS THE COMMUNITY.
Conclusion

Our 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 the 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 Annual Symposium, please visit Healthier Kids Foundation’s website at [www.hkidsf.org](http://www.hkidsf.org)

### Annual Symposium

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Vision

All Silicon Valley youth achieve good health, educational equity, and success in life as productive community members.

Mission

Healthier Kids Foundation removes health barriers impacting the learning and life success of Silicon Valley youth.

Three Key Strategies

1. Improving healthcare access and utilization.
2. Changing health behavior through education.
3. Advocating for health policy and systems change.

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

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