National Voices Project
Understanding barriers
Measuring opportunities
Informing initiatives for change

For children – through the voices of adults in their communities

Local Impact Report
Alameda County, CA
2012-2015
Introduction

The NVP offers an unprecedented perspective on community-level opportunities for children throughout the country, in the domains of health and nutrition, education and learning, and economic security - through the eyes of adults whose occupations and volunteer work affect such opportunities. In other words, the NVP reflects the perceptions of individuals throughout the United States who are in a position to improve children's opportunities in the future. We generally use the word "children" throughout the report to describe children from age 0-18 years, unless otherwise noted.

With support and collaboration from the W.K. Kellogg Foundation through the America Healing Initiative, researchers at the University of Michigan are leading the National Voices Project (NVP) from 2011-2016. The central goals of the NVP are to examine the sources of racial/ethnic inequity and other disparities for children in the United States today and identify interventions that address disparities effectively.

Key Findings

• Over one hundred different residents of Alameda County responded to questions in each of the years of the National Voices Project (NVP) annual survey.

• Along with other communities participating in Collaboratives for Health Equity, a growing proportion of respondents from Alameda County perceived many racial/ethnic inequities over the years 2012-2015.

• In most years of the NVP surveys, residents in Alameda County most commonly perceived racial/ethnic inequities related to neighborhood safety and housing. They less commonly perceived racial/ethnic inequities related to food and nutrition. They reported all of these perceptions consistently more commonly than residents of other communities across the United States that do not participate in Collaboratives for Health Equity.

• In Alameda County, from 2012-2014 residents commonly perceived lots of opportunities for children to have neighborhoods without violence, but that optimism was reduced substantially in 2015. For teens, respondents consistently had the lowest perceptions of lots of opportunity to live in neighborhoods without violence.

• Respondents in Alameda County most commonly and consistently perceived the most availability of hospital care and primary care for children and teens, and much less availability for specialty care and mental health care.

• In Alameda County in most years of the NVP annual survey, about one-quarter of respondents rated multiple aspects of education and child care for young children as “excellent”. For young children, they were most positive about having a safe environment at elementary schools, and least positive about forms of financial support to help low-income families afford high quality child care. For teens, they were most positive about opportunities for advanced classes and least positive about school support for teens at risk of dropping out.

• With each year of NVP annual surveys, an increasing proportion of residents of Alameda County perceived that the financial situation of families in the community over the past year had gotten better. This proportion was consistently higher than among residents of other communities across the United States. However, in each survey year the proportion of Alameda County residents who perceived that family financial situations had worsened over the past year was as great or greater than the proportion that perceived they had improved.

• Among the programs the Collaboratives for Health Equity team nominated to present to respondents in Alameda County in a 2015 survey on boys and men of color, the majority of respondents had not heard of the programs. Two programs that had achieved substantially greater community-level awareness were Youth Uprising and East Oakland Building Healthy Communities.
Survey Respondents

<table>
<thead>
<tr>
<th>Number of Respondents</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Respondents</td>
<td>2,311</td>
<td>2,712</td>
<td>2,147</td>
<td>2,212</td>
</tr>
<tr>
<td>Collaboratives for Health Equity Only</td>
<td>1,096</td>
<td>1,107</td>
<td>1,103</td>
<td>1,139</td>
</tr>
<tr>
<td>Alameda County Only</td>
<td>212</td>
<td>223</td>
<td>132</td>
<td>167</td>
</tr>
</tbody>
</table>

Amount of Perceived Racial/Ethnic Inequities

The Importance of Perceptions of Inequities

Perceptions of inequities in communities are strongly associated with:
- Lower measures of "lots of opportunity" for health
- Less healthcare availability
- Lower ratings of "excellent" for aspects of quality education
- Barriers to school success
- Perceptions that financial situations have "gotten worse" over the last 12 months

Respondents’ perceptions of inequities in their communities was more strongly associated with their perceptions of children’s and teens' opportunities than was respondents' age, gender, education, or household income.
Perceptions of Racial/Ethnic Inequities among Children and Teens

![Graph showing perceptions of inequities over time]

<table>
<thead>
<tr>
<th>Inequities</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food &amp; Nutrition</td>
<td>57%</td>
<td>40%</td>
<td>55%</td>
<td>45%</td>
</tr>
<tr>
<td>Health &amp; Healthcare</td>
<td>58%</td>
<td>44%</td>
<td>63%</td>
<td>45%</td>
</tr>
<tr>
<td>Education</td>
<td>61%</td>
<td>43%</td>
<td>58%</td>
<td>49%</td>
</tr>
<tr>
<td>Housing</td>
<td>70%</td>
<td>54%</td>
<td>70%</td>
<td>56%</td>
</tr>
<tr>
<td>Neighborhood Safety</td>
<td>59%</td>
<td>57%</td>
<td>65%</td>
<td>52%</td>
</tr>
<tr>
<td>Job Opportunities</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Justice System/Law Enforcement</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Note: Only respondents who perceived few/some/many racial ethnic inequities were asked about inequities in specific areas. Response options included "Yes," "No," and "Don't know"  
*P<.05 for comparison across Collaboratives for Health Equity in 2012  
+P<.05 for comparison across Collaboratives for Health Equity in 2013  
*aP<.05 for comparison across Collaboratives for Health Equity in 2014  
∞ P<.05 for comparison across Collaboratives for Health Equity in 2015
Perception of "Lots of Opportunity" for Health & Nutrition

Young Children

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Places to get Physical Activity</strong></td>
<td>Alameda</td>
<td>CC</td>
<td>Alameda</td>
<td>CC</td>
</tr>
<tr>
<td></td>
<td>44%</td>
<td>56%</td>
<td>53%</td>
<td>61%</td>
</tr>
<tr>
<td><strong>Neighborhoods without Violence</strong></td>
<td>38%</td>
<td>55%</td>
<td>38%</td>
<td>58%</td>
</tr>
<tr>
<td><strong>Fresh Fruits &amp; Vegetables</strong></td>
<td>46%</td>
<td>57%</td>
<td>58%</td>
<td>57%</td>
</tr>
<tr>
<td><strong>Clean Air, Water &amp; Outdoor Spaces</strong></td>
<td>47%</td>
<td>71%</td>
<td>60%</td>
<td>71%</td>
</tr>
</tbody>
</table>

Teens

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Places to get Physical Activity</strong></td>
<td>Alameda</td>
<td>CC</td>
<td>Alameda</td>
<td>CC</td>
</tr>
<tr>
<td></td>
<td>42%</td>
<td>67%</td>
<td>63%</td>
<td>64%</td>
</tr>
<tr>
<td><strong>Neighborhoods without Violence</strong></td>
<td>35%</td>
<td>58%</td>
<td>40%</td>
<td>58%</td>
</tr>
<tr>
<td><strong>Fresh Fruits &amp; Vegetables</strong></td>
<td>50%</td>
<td>62%</td>
<td>63%</td>
<td>63%</td>
</tr>
<tr>
<td><strong>Clean Air, Water &amp; Outdoor Spaces</strong></td>
<td>51%</td>
<td>73%</td>
<td>62%</td>
<td>71%</td>
</tr>
</tbody>
</table>

Note: Response options included "Lots of opportunity," "Some opportunity," and "Little or no opportunity"

Alameda County, CA
Perception of "Lots of Availability" of Healthcare

Young Children

Teens

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Young Children</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Care</td>
<td>38%</td>
<td>55%</td>
<td>42%</td>
<td>55%</td>
</tr>
<tr>
<td>Mental Health Care</td>
<td>19%</td>
<td>31%</td>
<td>24%</td>
<td>31%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>33%</td>
<td>51%</td>
<td>43%</td>
<td>50%</td>
</tr>
<tr>
<td>Specialty Care</td>
<td>27%</td>
<td>40%</td>
<td>34%</td>
<td>36%</td>
</tr>
<tr>
<td>Hospital Care</td>
<td>38%</td>
<td>64%</td>
<td>44%</td>
<td>56%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Teens</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Care</td>
<td>38%</td>
<td>66%</td>
<td>42%</td>
<td>57%</td>
</tr>
<tr>
<td>Mental Health Care</td>
<td>19%</td>
<td>30%</td>
<td>24%</td>
<td>34%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>37%</td>
<td>52%</td>
<td>43%</td>
<td>50%</td>
</tr>
<tr>
<td>Specialty Care</td>
<td>25%</td>
<td>40%</td>
<td>39%</td>
<td>39%</td>
</tr>
<tr>
<td>Hospital Care</td>
<td>37%</td>
<td>55%</td>
<td>43%</td>
<td>56%</td>
</tr>
<tr>
<td>Reproductive Care</td>
<td>22%</td>
<td>34%</td>
<td>39%</td>
<td>34%</td>
</tr>
</tbody>
</table>

Note: Response options included "Lots of availability," "Some availability," and "Little or no availability"
**Education Opportunities Rated as "Excellent"**

**Young Children**

![Graph showing education opportunities rating over years]

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alameda</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Safe Environment at Elementary Schools</strong></td>
<td>19%</td>
<td>28%</td>
<td>39%</td>
<td>22%</td>
</tr>
<tr>
<td><strong>Scholarships, Vouchers, or other Financial Support to Help Low-Income Families Afford High-Quality Child Care</strong></td>
<td>10%</td>
<td>14%</td>
<td>18%</td>
<td>6%</td>
</tr>
<tr>
<td><strong>Classroom Resources</strong></td>
<td>11%</td>
<td>20%</td>
<td>28%</td>
<td>19%</td>
</tr>
<tr>
<td><strong>Cultural Diversity Programs</strong></td>
<td>17%</td>
<td>19%</td>
<td>29%</td>
<td>18%</td>
</tr>
<tr>
<td><strong>Overall Quality of Child Care</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Overall Quality of Preschools</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Overall Quality of Elementary Schools</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Opportunities to Participate in Extracurricular Activities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Availability of After-School Care</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Response options included "Excellent," "Good," "Poor," and "Don't know"

*P<.05 for comparison of Collaboratives for Health Equity respondents across all response options in 2012
*P<.05 for comparison of Collaboratives for Health Equity respondents across all response options in 2013
*P<.05 for comparison of Collaboratives for Health Equity respondents across response option rated as "Excellent" in 2014
*P<.05 for comparison of Collaboratives for Health Equity respondents across all response options in 2015

Alameda County, CA
### Education Opportunities Rated as "Excellent"

#### Teens

![Graph showing education opportunities for teens over the years 2012 to 2015. The graph visualizes the percentage of respondents rating each opportunity as "Excellent".](image)

#### Table: Education Opportunities Rated as "Excellent" for Teens

<table>
<thead>
<tr>
<th>Year</th>
<th>Safe Environment at Middle and High School*+∞</th>
<th>Cultural Diversity Programs+∞</th>
<th>Classroom Resources*†</th>
<th>Overall Quality of Education for Teens*†</th>
<th>Opportunities to Participate in Extracurricular Activities*†+∞</th>
<th>School Support for Teens at Risk of Dropping Out</th>
<th>Opportunities for Advanced Classes*∞</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>14%</td>
<td>14%</td>
<td>11%</td>
<td>12%</td>
<td>18%</td>
<td>9%</td>
<td>-</td>
</tr>
<tr>
<td>2013</td>
<td>30%</td>
<td>17%</td>
<td>17%</td>
<td>27%</td>
<td>22%</td>
<td>17%</td>
<td>-</td>
</tr>
<tr>
<td>2014</td>
<td>19%</td>
<td>17%</td>
<td>17%</td>
<td>15%</td>
<td>21%</td>
<td>16%</td>
<td>-</td>
</tr>
<tr>
<td>2015</td>
<td>24%</td>
<td>14%</td>
<td>24%</td>
<td>23%</td>
<td>23%</td>
<td>18%</td>
<td>-</td>
</tr>
</tbody>
</table>

#### Note:
- Response options included "Excellent," "Good," "Poor," and "Don't know".
- *P<.05 for comparison of Collaboratives for Health Equity respondents across all response options in 2012.
- +P<.05 for comparison of Collaboratives for Health Equity respondents across all response options in 2013.
- †P<.05 for comparison of Collaboratives for Health Equity respondents across response option rated as "Excellent" in 2014.
- ∞P<.05 for comparison of Collaboratives for Health Equity respondents across all response options in 2015.
Change in Family Financial Situation over the Past 12 Months

Gotten Better

Gotten Worse

Note: Response options included "got much worse/got slightly worse," "stayed the same," and "got slightly better/got much better."
Change in Job Opportunities for Teens from Low Income Families in the Next 12 Months

Job Opportunities Will Get Better

Job Opportunities Will Get Worse

Note: Response options included "will get better," "will stay the same," and "will get worse."
2015 Boys and Men of Color Survey: Collaboratives for Health Equity Initiatives

Survey Question:
How familiar are you with these programs in Alameda County?

◆ Planting Justice
◆ The Gamble Institute
◆ Policy Link
◆ Office of Urban Male Health (Alameda County Public Health Department)
◆ Centerforce
◆ PUEBLO
◆ The Mentoring Center
◆ Youth Uprising
◆ East Oakland Building Healthy Communities (Alameda County Public Health Department)

Awareness of Programs in Alameda County

- Know Someone Who Has Benefited
- Have Heard of This Program
- Have Not Heard of This Program

<table>
<thead>
<tr>
<th>Program</th>
<th>Know Someone</th>
<th>Have Heard of</th>
<th>Have Not Heard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Planting Justice</td>
<td>4%</td>
<td>20%</td>
<td>76%</td>
</tr>
<tr>
<td>The Gamble Institute</td>
<td>12%</td>
<td>86%</td>
<td>86%</td>
</tr>
<tr>
<td>Policy Link</td>
<td>2%</td>
<td>14%</td>
<td>86%</td>
</tr>
<tr>
<td>Office of Urban Male Health</td>
<td>2%</td>
<td>18%</td>
<td>80%</td>
</tr>
<tr>
<td>Centerforce</td>
<td>3%</td>
<td>19%</td>
<td>78%</td>
</tr>
<tr>
<td>PUEBLO</td>
<td>7%</td>
<td>22%</td>
<td>71%</td>
</tr>
<tr>
<td>The Mentoring Center</td>
<td>8%</td>
<td>23%</td>
<td>69%</td>
</tr>
<tr>
<td>Youth Uprising</td>
<td>5%</td>
<td>37%</td>
<td>58%</td>
</tr>
<tr>
<td>East Oakland Building Healthy Communities</td>
<td>9%</td>
<td>43%</td>
<td>48%</td>
</tr>
</tbody>
</table>

Alameda County, CA
Boys & Young Men of Color (BYMOC) Qualitative Analysis
Alameda County, CA
n = 144

Research Question: How is your community creating opportunities for boys and young men of color?

Most Commonly Reported Efforts:
- Education/job training
- City partnerships/involvement of organizations
- Sports programs/rec centers/after school programs

“Oakland is working on addressing the school achievement gap...Civicorps runs a high school diploma program...California Endowment supports a [BYMOC] program.”
- Asian American/Pacific Islander Respondent, Oakland

“I think they have opportunities just like everyone. If they stay in school, get good grades, they can do anything that they want.”
- White Respondent, Oakland

“Oakland is a witness to limited opportunities [for] young people of color...”
- African American Respondent, Oakland

BYMOC are helped by...
- Education/job training
- City partnerships/involvement of organizations
- School programs
- Sports programs/rec centers/after school programs
- Mentors

No differences by race
No different opportunities regardless of color

Other themes
Don’t know/I am the wrong person to ask
Opportunities are not being created
Not enough is being done

Race/ethnicity of respondent
- African American
- American Indian/Alaskan Native
- Asian American/Pacific Islander
- Hawaiian Native
- Hispanic/Latino
- White
- Other

Each figure represents one comment. Views with at least four comments are displayed.
Mission of the National Voices Project

Led by researchers at the University of Michigan, the National Voices Project (NVP) is an effort to bring the perspectives of thousands of people in communities across the United States to the national dialogue about opportunities and barriers for children related to race/ethnicity.

Boys and Young Men of Color (BYMOC) Survey

The BYMOC survey was conducted in January-February 2015 via GfK, a survey research organization that maintains KnowledgePanel®, a nationally representative web-enabled panel of adult members of households across the U.S.

GfK invited 11,644 people 18 years or older to participate. 2,081 respondents completed the survey and indicated they have jobs and/or volunteer in ways that affect education, health/healthcare/nutrition, economic opportunities, social justice or community and civic engagement for children.

This qualitative summary was conducted with respondents residing in the following Place Matters locations: Cook County (IL), Alameda County (CA), Wayne County (MI), Fresno County (CA), King County (WA), Suffolk County (MA), and Bernalillo County (NM).

Methods

Open-ended responses were analyzed to assess for themes and sentiment of the responses from this question: “How is your community creating opportunities for BYMOC?” Each question was coded by two reviewers. All discrepancies between the two reviewers were discussed and recoded as necessary. If a reviewer decided not to change their coding, a third reviewer was invited to decide how the response should be coded. Responses were broken down into 22 main themes:

- Education/jobs/skills training
- School programs
- Volunteer opportunities
- Sports/rec centers/ afterschool clubs
- Mentors
- Community events
- Organizations/other sectors (religious, civic, etc.)
- Social programs
- Policy changes
- No different opportunities regardless of color
- No differences, great education for all
- No differences, EEO
- No differences, equal access
- Opportunities not created
- Parent’s role
- Teachers/discipline limitations
- Not enough is being done
- Effort is needed by BYMOC
- BYMOC get better opportunities than other races
- They are doing everything they can
- Nationwide issue
- Don’t know/wrong person to ask

Partner: National Collaborative for Health Equity

For this BYMOC survey, NVP partnered with the National Collaborative for Health Equity (NCHE). The mission of the NCHE is to promote health equity by catalyzing collaboration among racial equity advocates, grassroots and community-based organizations, researchers, public health professionals, and other key stakeholders. For more information, visit their website: NationalCollaborative.org.

National Voices Project Team

Director: Matthew M. Davis, MD, MAPP
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Project Manager: Dianne C. Singer, MPH
Web Administrator: Anna Daly Kauffman, BA
Data Analyst: Amilcar Matos-Moreno, MPH
Research Associate: Sara L. Schultz, BA

National Collaborative for Health Equity Team

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Senior Fellow, Boys and Men of Color: Jermane Bond, PhD
Program Director: Autumn Saxton-Ross, PhD

Funding for the National Voices Project is provided by the W.K. Kellogg Foundation as part of the America Healing initiative.
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Led by researchers at the University of Michigan, the National Voices Project is an effort to bring the perspectives of thousands of people in communities across the United States to the national dialogue about opportunities and barriers for children related to race/ethnicity.

The National Voices Project conducts major national surveys twice each year among adults who work and volunteer on behalf of children. These surveys focus on racial/ethnic inequities at the community level that affect children’s health, education, and economic security. For more information, visit the project website: NationalVoicesProject.org.

The National Voices Project team is grateful for the support and collaboration of the W.K.Kellogg Foundation, through the America Healing Initiative.

The Team

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