



Strategic Plan

2026-2031



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A Message From the Executive Director

Dear Community Partners, Families, and Stakeholders,

It is with great pride and appreciation that I share the First 5 Shasta Strategic Plan for 2026–2031. For more than 25 years, First 5 Shasta has been dedicated to supporting the health, learning, and well-being of Shasta County’s youngest children, from prenatal through age five, and the families who care for them. This new strategic plan reflects both our longstanding commitment to children and our responsibility to adapt and respond as the needs of families and communities continue to evolve.

This plan was shaped through thoughtful review of data, community needs assessments, and most importantly, listening to families, partners, and local leaders across our county. It reflects a shared vision of a community where children are nurtured, families are supported, and every child has the opportunity to thrive. While it builds on the successes of our previous strategic efforts, it also acknowledges the current realities facing families today. These include economic uncertainty, rural access challenges, and the lasting effects of stress and adversity on young children and caregivers.

The 2026–2031 Strategic Plan is centered on three interconnected focus areas: **Maternal, Child & Family Health; Thriving Families; and Early Learning.** Together, these priorities guide

how First 5 Shasta will invest resources, support innovation, and collaborate with partners to strengthen systems that serve young children and families. While First 5 Shasta cannot meet these needs alone, we are committed to showing up as a trusted partner, aligning efforts, elevating family voices, and working across sectors to drive meaningful and lasting change.

Equity and inclusion are foundational to this plan. We recognize that families’ experiences and access to support vary widely across Shasta County, particularly for those in rural and underserved communities. We remain committed to working alongside families and partners to reduce barriers, expand opportunities, and ensure that services and systems are responsive, inclusive, and culturally grounded.

As we move forward, this Strategic Plan will serve as a framework that guides our decisions, informs our partnerships, and holds us accountable to the families we serve. I am deeply grateful to our Commissioners, staff, community partners, and families who generously shared their time, insight, and lived experience to help shape this work. Together, we will continue to champion strong beginnings and brighter futures for Shasta County’s children.

With gratitude and commitment,



Wendy Dickens, MSW
Executive Director
First 5 Shasta



Executive Summary

First 5 Shasta Strategic Plan 2026–2031

For more than 25 years, First 5 Shasta has served as a trusted partner and advocate for Shasta County’s youngest children, from prenatal through age five, and the families who support them. Guided by California’s Proposition 10, First 5 Shasta invests in early childhood systems that promote health, learning, and family well-being.

The July 1, 2026 to June 30, 2031 Strategic Plan reflects both continuity and change. While First 5 Shasta remains grounded in its long-standing mission, this plan responds to evolving community needs, shifting funding realities, and the voices of families and partners across Shasta County. Developed through data analysis, community needs assessments, and engagement with local stakeholders, the plan serves as a five-year roadmap to strengthen systems that support children and families.

Community Context

Shasta County is home to nearly 181,000 residents, with approximately 10,500 children under age six. Families across the county, particularly those in rural and underserved communities, face persistent challenges related to access to healthcare, childcare, transportation, housing stability, and economic security. Local data also point to elevated rates of adverse childhood experiences (ACEs), maternal mental health concerns, prenatal substance exposure, and limited availability of licensed childcare. At the same time, Shasta County benefits from strong community partnerships, engaged families, and a shared commitment to improving outcomes for young children.

Looking Ahead

The 2026–2031 Strategic Plan is both a roadmap and a living document, guiding decisions, strengthening partnerships, and reinforcing accountability to the families of Shasta County. Through collaboration, equity-centered practices, and shared commitment, First 5 Shasta will continue to champion strong beginnings and brighter futures for young children and families.





Who is First 5 Shasta?

First 5 Shasta serves as a convener, catalyst, and strategic investor in early childhood systems, focusing on strengthening and aligning community-wide efforts rather than delivering direct services. Established in 1998 following the passage of Proposition 10 (California Children and Families Act of 1998), First 5 Shasta is funded through a 50-cent tax on each pack of cigarettes and other tobacco products sold in California. These revenues are distributed to every county to support local initiatives that promote the healthy development of children from birth to age five.

Guided by research, best practices, and the expertise of early childhood development and education professionals, First 5 Shasta invests in evidence-informed strategies that advance child health and development, foster resilient families, strengthen the quality of early learning environments, and build coordinated, responsive systems of care. By bringing together educators, healthcare providers, family support organizations, and community leaders, First 5 Shasta ensures that programs and policies are grounded in both science and the lived experiences of families.

Through strong partnerships with service providers and other early childhood experts across Shasta County, First 5 Shasta has positively impacted the lives of thousands of children and families each year, helping to create a more equitable, nurturing, and supportive foundation for lifelong learning and well-being.

Background

Each county in California has a designated First 5, with a set of appointed Commissioners who oversee the work being done and implementation of a strategic plan to monitor impact.

In the prior Strategic Plan 2019–2026, First 5 Shasta worked to bring forth change through three goals: Resilience is built and Adverse Childhood Experiences (ACEs) are reduced; All children 0–3 have healthy beginnings and optimal development; and All children will be prepared for and enter school ready to learn. Within those three goals several objectives were created along with indicators of success. Key highlights over the last period include implementation of Help Me Grow Shasta in partnership with Shasta County Office of Education, a system that supports families in healthy development through the Ages and Stages Questionnaire and support navigating systems of care. In addition, there was progress made to support caregivers through the Quality Counts California program, education on ACEs, expansion of the Next Stop Kindergarten Guide, and expansion of the Healthy Moms Healthy Babies program.

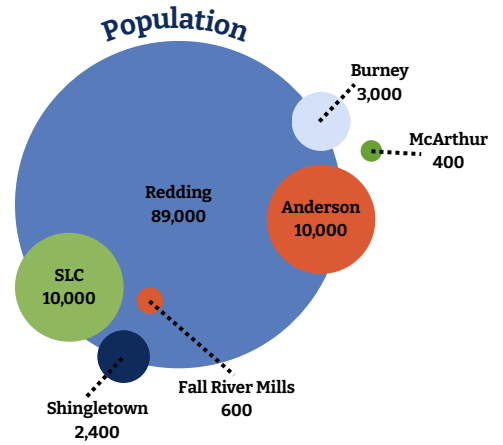
With knowledge and lessons learned from the last Strategic Plan, First 5 Shasta has identified the need to be flexible and develop strategies to support the changing landscape. The country, state, and community needs have evolved and with that brings a shift in needs for children 0–5 and families.

About Shasta County

Shasta County has close to 181,000 people.¹ With Interstate 5 running through the heart of the County the largest cities are Redding, Anderson, and Shasta Lake City. Eastern Shasta County includes more rural mountainous towns of Burney, Fall River Mills, McArthur and Shingletown. Shasta County is full of natural beauty with Whiskeytown and Shasta Lakes, the Sundial Bridge, and the Sacramento River

Roughly one in five residents are under eighteen, and about six percent are under age six². In Shasta County 27.8% of households have children and increasingly five percent of households are headed by grandparents (raising grandchildren). Among those households with children, a substantial portion (22%) are single-parent households, similar to the statewide average.

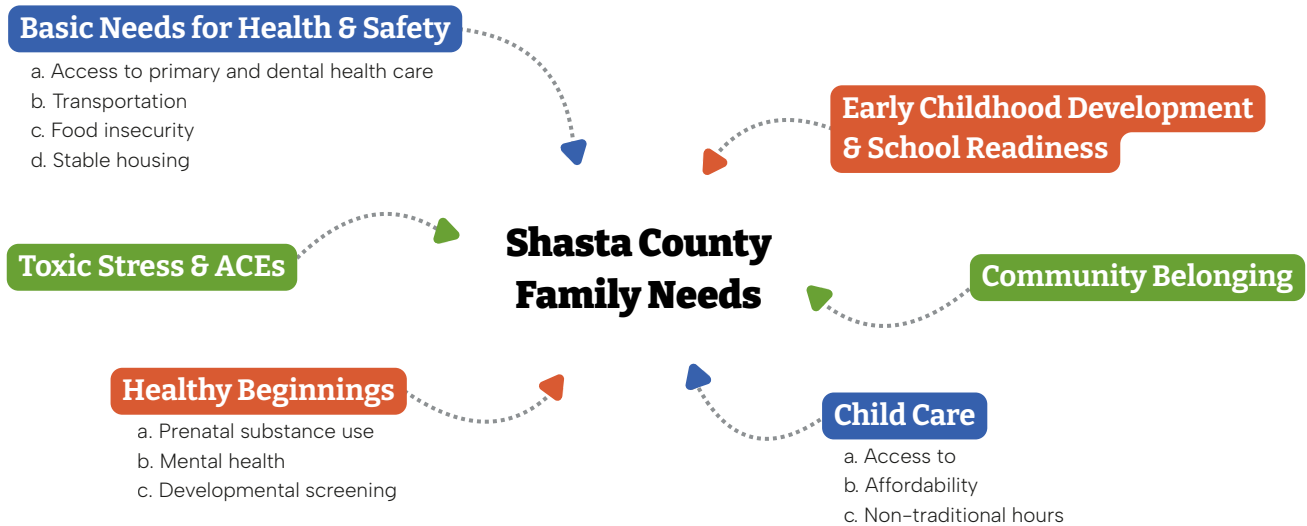
The median household income is \$72,000 in Shasta County compared to \$96,300 for California³. In terms of race and ethnicity, many residents identify as White (about 86.4%), with smaller shares of American Indian/Alaska Native, Asian, Black, and other racial or multiracial backgrounds; around 11–12% identify as Hispanic or Latino⁴.



Community Needs Assessment Summary

The initial phase of strategic planning began in 2025 and focused on reviewing and analyzing existing data related to pregnant women, young children, and their families. In recognition of the many strategic plans and data collection efforts already underway locally, regionally, and statewide staff prioritized the review of existing data sources, including outcomes from the First 5 Shasta Strategic Plan 2019–2026, community needs assessments, surveys, reports, and input from community partners.

Highlights from local needs assessments and community engagement include the following as identified needs for Shasta County families:



These needs directly informed the selection of the three focus areas that anchor this Strategic Plan:

- Maternal, Child & Family Health
- Thriving Families
- Early Learning

Strategic Plan Framework

The 2026–2031 Strategic Plan responds to the evolving needs of children and families across the county and reflects a shared vision. Local assessments, needs surveys, community feedback, combined with local data and statewide trends, guided the identification of needs and opportunities for the next five years. This strategic plan is organized into three main sections: why we show up, how we show up, and where we show up. Together these represent our vision, mission and values that inform the roles we will take as First 5 Shasta, and our areas of focus over the next five years.



Measuring Progress & Sustainability

Progress will be tracked annually using community-level indicators such as developmental screening rates, maternal health outcomes, family economic stability, child care availability, and early literacy. While First 5 Shasta does not solely control these outcomes, monitoring shared indicators provides insight into system performance and informs continuous improvement.

Recognizing declining tobacco tax revenues, this plan emphasizes sustainability through strategic investment, cross-sector collaboration, and a continued focus on systems change to maximize impact.

Equity and Inclusion Commitment

First 5 Shasta is committed to advancing equity by ensuring children, regardless of zip code, income, or background, have the opportunity to thrive. We recognize that families in rural and underserved communities face unique barriers, and we will work alongside partners to design responsive, culturally relevant solutions.

Through collaboration and systems-building, we will leverage resources, align partners, and influence policy to create a more connected and effective early childhood system across Shasta County.



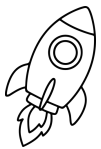
Why We Show Up: Mission, Vision, and Values

The mission, vision, and values are the foundational framework that defines why we show up, driving toward long-term goals and day-to-day activities that further the vision of tomorrow. Our values are a set of core principles and beliefs that guide actions, decision making, and culture.



Vision

A nurturing community where families and young children thrive.



Mission

We are committed to partnering with, advocating for, and investing in our community for the development and well-being of every young child and family.



Values

Every aspect of our work is guided by our underlying beliefs and commitments.

We believe

All parts of the community play a role; we are a piece not the whole of the solution.

We believe every family has dignity and worth and should have equal opportunity and access to high quality care.

We believe prevention is more cost efficient than intervention

We believe family, community & culture influence development and families are the experts on their own needs.

We believe children are the most important and valued members of our community.

So we will

Collaborate and build partnerships with the community, families and organizations.

So we will listen to their perspective and respect their needs while holding ourselves and our partners to the highest standards of quality.

So we will invest in children and families by prioritizing sustainable, evidence-based, innovative solutions that build on local strengths

So we will be culturally responsive, respectful, inclusive and equitable.

So we will Promote healthy child development.

How We Show Up: Our Roles in the Community

At our core, First 5 Shasta is a systems-focused organization dedicated to improving outcomes for families with young children. As the only entity in Shasta County exclusively dedicated to children prenatal through age five and their families, we are uniquely positioned to influence policy, align resources, and strengthen systems that support early childhood development. Rather than acting as a direct service provider, we are most effective when we lead in the following roles:



Partner

We intentionally bring people together, work collaboratively across sectors, and cultivate strong relationships to align efforts and improve community outcomes. Through meaningful partnership, we strengthen collective impact and shared accountability.



Advocate

We elevate the voices and needs of families with young children in every setting, ensuring they are visible, valued, and prioritized across policies, programs, and diverse community agendas.



Investor

We strategically invest in and contract for innovative, data-informed, and community-driven initiatives. By leveraging local, state, federal, and philanthropic resources, we respond to emerging needs and advance solutions when First 5 Shasta is uniquely positioned to do so.

Where We Show Up: Strategic Focus Areas

Our scope is broad and the need is vast. Acknowledging our finite staff time and resources, we will partner, advocate, and invest in the following areas over the next five years. We recognize the wide range of opportunities and challenges within each area and will work with our community and Commission to determine specific activities for each area throughout the life of the strategic plan.

To respond to these needs and opportunities, the Strategic Plan is organized around three interconnected focus areas:



Maternal, Child & Family Health

Promote healthy beginnings and ongoing developmental support through prevention, early identification, and access to quality health and mental health services.



Thriving Families

Strengthen family resilience by supporting basic needs, reducing stressors, fostering community connection, and expanding access to parenting education and resources.



Early Learning

Expand access to high-quality early learning and child care, support parents as children's first teachers, and promote school readiness and early literacy.

Together, these focus areas recognize that children thrive when families are supported, communities are connected, and systems work together effectively.

Shasta County at a Glance



10,500 children ages **0–5** call Shasta County home.⁵ More than **1 in 8** children under 18 are **growing up in poverty**.⁶

Maternal Health & Prenatal Care

80% of mothers received **prenatal care** beginning in the **first trimester**.⁷

16.9% of mothers report **Prenatal Depression Symptoms**.⁸

15.2% of mothers report **Postpartum Depression Symptoms**.⁸

Early Childhood & Family Stability

30.3% of children with **working parents** have **access to licensed childcare**.¹⁰

48% **decrease** in infant substantiated **abuse** since 2019¹¹

66.1% of **Shasta County** Teens report **having ACEs** compared to only 42.7% of California Teens.¹²

Infant Opioid Withdrawal

Neonatal abstinence syndrome is the **drug withdrawal** that occurs due to maternal use of opioids including heroin, methadone, prescription pain meds during pregnancy. In Shasta County **13.9 per 1,000 babies** are born with Neonatal abstinence syndrome, **5 times higher** than the California average.¹³

Shasta County
California



Harmful Substance Use While Pregnant

15.2% of mothers **use cannabis** during pregnancy.¹⁴

8% of mothers report **cigarette smoking** in the 3rd trimester.¹⁴

6.7% of mothers use **alcohol** in the 3rd trimester.¹⁴



Reading proficiently by the end of third grade is a critical indicator of future academic success and life outcomes. **In Shasta County 58.45% of 3rd Graders are below reading level.**⁹

Focus Area: Maternal, Child & Family Health

Goal: All children and families experience healthy beginnings and continuous developmental support.

Healthy beginnings are foundational to lifelong health, learning, and well-being. From prenatal care through early childhood, access to timely, high-quality physical, mental, and developmental health supports plays a critical role in shaping outcomes for both children and caregivers. In Shasta County, families face elevated risks related to maternal mental health, prenatal substance exposure, and barriers to early screening and care, particularly in rural and underserved communities.

First 5 Shasta will promote the physical, emotional, and developmental health of children and families by strengthening prevention efforts, supporting early identification of needs, and improving access to coordinated, family-centered services. Through partnership, advocacy, and strategic investment, First 5 Shasta will help build a more responsive and connected system of care for families with young children.

Priority Strategies

Prenatal, Postnatal, and Child Wellness

Promote maternal, paternal, and child health by supporting access to prenatal and postnatal care, maternal mental health services, child oral health, and substance use prevention and intervention efforts. First 5 Shasta will partner with healthcare and community organizations to advance practices that support healthy pregnancies, oral health, pediatric specialty care, reduce toxic stress, and promote positive parent–child relationships during the earliest years.

Early Screening & Developmental Supports

Support community-wide efforts to ensure children and families receive timely developmental, behavioral, and social-emotional screening, along with effective referral and follow-up supports. Emphasis will be placed on strengthening screening pathways, improving coordination across systems, and reducing barriers to access, especially for families in rural areas.

Why This Focus Area Matters

Local data underscore the importance of this work. While most women in Shasta County receive prenatal care in the first trimester, significant numbers experience prenatal and postpartum depression, and rates of prenatal substance exposure and neonatal abstinence syndrome exceed state averages. These conditions increase the risk of developmental delays, family stress, and long-term health challenges for children.

By investing in prevention, early identification, and coordinated systems of support, First 5 Shasta seeks to reduce risk, strengthen protective factors, and improve outcomes for children and families during the most critical period of development.

Focus Area: Thriving Families

Goal: All families have the knowledge, confidence, and resources to nurture their children's growth and development.

Families are the most powerful influence in a child's early life. When caregivers are supported, connected, and able to meet their basic needs, children are more likely to experience stability, positive relationships, and healthy development. In Shasta County, many families face ongoing stressors related to economic insecurity, housing instability, transportation barriers, and the lasting effects of adverse childhood experiences (ACEs). These challenges are often intensified for families living in rural and underserved communities.

First 5 Shasta will strengthen families by supporting resilience, reducing stressors, and fostering connection to community resources. Through systems-focused partnerships and strategic investment, First 5 Shasta will help ensure families are supported early, consistently, and in ways that reflect their lived experiences and cultural strengths.

Priority Strategies

Safety & Basic Needs for Families

Collaborate with partners to address foundational needs such as food security, housing stability, transportation, child safety (car seats, safe sleep), and family safety. While First 5 Shasta does not directly provide these services, it will support coordinated systems that reduce barriers and improve access for families with young children.

Family Resilience & Parent Education

Support access to evidence-informed parenting education, peer support, and trauma-informed approaches that build caregiver confidence, strengthen protective factors, and promote positive parent-child relationships. Efforts will focus on prevention and early support, particularly for families experiencing high levels of stress.

Community Connection & Belonging

Promote opportunities for families to build social connections and access trusted, community-based supports. First 5 Shasta will partner with local organizations to strengthen referral pathways, reduce isolation, and increase awareness of available resources across the county.

Why This Focus Area Matters

Local data show that a significant proportion of children in Shasta County live in poverty and that teens report higher rates of ACEs compared to statewide averages, indicators of long-term stress that can affect families across generations. By strengthening family resilience and addressing root causes of stress, this focus area aims to reduce risk factors while amplifying the strengths that already exist within families and communities.

Focus Area: Early Learning

Goal: All children have equitable access to early learning opportunities that prepare them for success in school and beyond.

Early learning experiences lay the foundation for children’s cognitive, social-emotional, and language development. High-quality early care and education, combined with supportive home learning environments, are critical to school readiness and long-term academic success. In Shasta County, limited availability of licensed child care, affordability challenges, and access issues, especially in rural areas, create barriers for families seeking early learning opportunities for their children.

First 5 Shasta will work to expand access to quality early learning environments and support parents and caregivers as children’s first and most important teachers. By collaborating across early care, education, and family-serving systems, First 5 Shasta will help strengthen a coordinated early learning landscape that meets the diverse needs of families.

Priority Strategies

Early Literacy & Home Learning

Advance early literacy and language development by supporting programs and partnerships that encourage reading, storytelling, and learning at home. Emphasis will be placed on culturally responsive approaches that honor family strengths and promote equitable access to learning resources.

Quality Early Learning & Child Care Availability

Support efforts to increase access to high-quality early care and education by strengthening provider capacity, supporting workforce development, and advancing system-level strategies that address availability and sustainability of child care across the county.

Kindergarten Readiness

Promote alignment between early learning settings, families, and schools to support smooth transitions into kindergarten. First 5 Shasta will invest in strategies that help children enter school ready to learn and families prepared to navigate the education system.

Why This Focus Area Matters

Local indicators show that many children in Shasta County struggle with early literacy, and child care capacity meets the needs of only a fraction of families with young children. These gaps can have lasting impacts on educational outcomes if left unaddressed. By investing in early learning systems and supporting families as partners in their child’s education, this focus area seeks to improve readiness, reduce disparities, and promote long-term success.

Indicators of Progress

As one component of the broader early childhood system in Shasta County, First 5 Shasta relies on strong partnerships to collectively meet the needs of families with young children. Meaningful systems change requires shared responsibility, aligned efforts, and a common understanding of progress across the community.

In addition to tailored evaluation activities for specific First 5 Shasta investments, we will monitor community-developed performance measures and locally available data to assess countywide progress within each strategic focus area. As part of the Strategic Plan’s annual review process, we will report on these indicators and tailored evaluation activities in order to support transparency, learning, and continuous improvement. These indicators not only help track progress over time, but also demonstrate the broader impact of collective efforts within each strategic focus area by reflecting changes in conditions, systems, and outcomes for children and families across Shasta County. Examples include, but are not limited to:

Community Indicators	Related Focus Area
Number of children 0–5 who received a standardized developmental screening	Maternal, Child & Family Health
Infant mortality rates	Maternal, Child & Family Health
Mothers receiving prenatal care	Maternal, Child & Family Health
Postpartum depression	Maternal, Child & Family Health
Families living in poverty	Thriving Families
Substantiated child abuse rates (0–5 population)	Thriving Families
Adverse Childhood Experiences (ACEs) reports in teens/youth	Thriving Families
Number of licensed early care sites and childcare availability	Early Learning
Third grade literacy levels	Early Learning

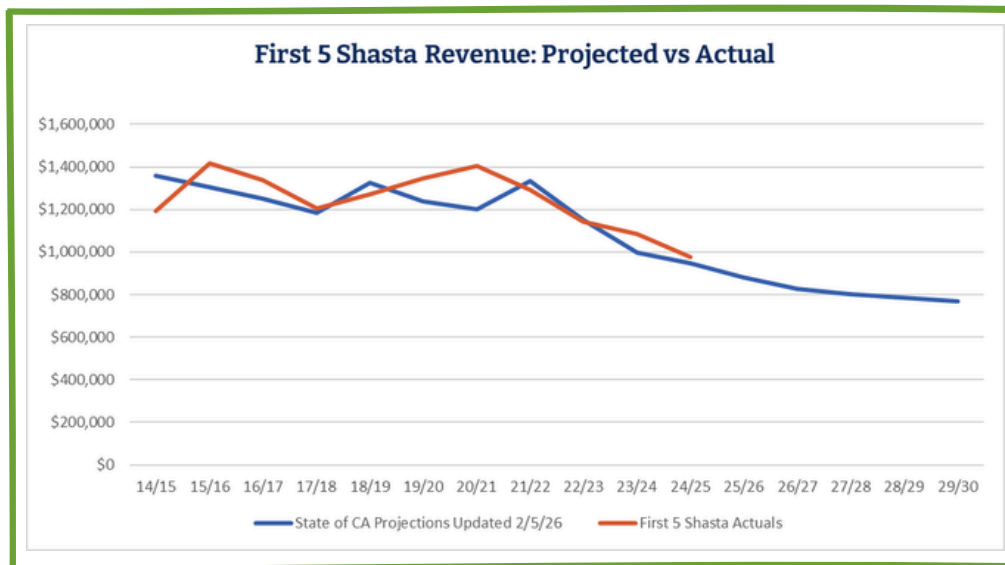
First 5 Shasta helps to focus on system change to support children from prenatal period through age five. We remain committed to understanding and strengthening the collective impact we achieved through our investments and partnerships. To do this, we will track publicly available data over time, we will maintain a consistent countywide view of conditions influencing and affecting young children and families. While First 5 Shasta alone cannot be solely accountable for changes reflected in these indicators, they offer valuable insights to inform decision-making, guide strategic adjustments and help align community efforts toward shared outcomes.



Funding

First 5 Shasta is primarily funded through Proposition 10 Tobacco tax revenues, which have experienced an annual decline at approximately 1% to 5% as Californian’s consumption of nicotine products continues to fall and new anti-tobacco legislation is implemented. In response to this long-term funding trend, First 5 Shasta has proactively managed declining revenues through the strategic use of reserve funds, thoughtful allocation of resources, leveraging state and local funding, and ongoing improvements to internal efficiencies.

In addition, First 5 Shasta has leveraged state and local funding opportunities and pursued state and philanthropic grants that align with and advance the organization’s mission and vision. These strategies have enabled First 5 Shasta to maintain stability, maximize impact, and continue investing in early childhood systems despite a challenging and evolving funding landscape.



Sustainability

In light of the ongoing fiscal realities faced by First 5 commissions across California, First 5 Shasta reaffirms through this Strategic Plan its commitment to sustainable and responsible investment. Central to this commitment is the continued pursuit of opportunities to leverage funding through partnerships that amplify impact and advance shared outcomes for children and families.

This Strategic Plan emphasizes an increased focus on investments that drive systems change, strengthening coordination, effectiveness, and equity across the system of care serving young children and their families. By prioritizing systems-level strategies, First 5 Shasta is positioned to maximize community-wide impact despite declining revenues.

First 5 Shasta will continue to collaborate with local leaders, public agencies, and community partners to proactively identify and secure new funding opportunities and to leverage existing resources in support of the early childhood system in Shasta County. Guided by data, evaluation, and community input, First 5 Shasta remains adaptable and innovative, piloting new approaches, scaling strategies that demonstrate impact, and sunsetting investments as needed to ensure alignment with strategic priorities.

All program funding allocations are subject to Commission approval, the availability of public and private partner funding, and demonstrated project needs.

Acknowledgements

First 5 Shasta wishes to acknowledge the contributions of the many people who made this plan possible. Our deepest respect and appreciation to those who were able to take time to think about how to best use First 5 Shasta's public resources and to envision an early childhood system where children and families can thrive.

First 5 Shasta Commission and Staff

Cindy Bishop, <i>Chair</i>	Wendy Dickens, <i>Executive Director</i>
Tara Shanahan, <i>Vice Chair</i>	Elizabeth Poole, <i>Deputy Director</i>
Joe Ayer, <i>Secretary</i>	Amber Condrey, <i>Data and Evaluation Coordinator</i>
Brian Cole, <i>Commissioner</i>	Tia Diaz, <i>Marketing and Communications Coordinator</i>
Elisabeth Cooper, <i>Commissioner</i>	Nicole Godman, <i>Fiscal and Contract Analyst</i>
James Mu, <i>Commissioner</i>	Tristen Grantham, <i>Administrative Coordinator</i>
Kevin O'Rorke, <i>Commissioner</i>	Megan Johnson, <i>Program Coordinator</i>
Matt Plummer, <i>Commissioner</i>	Jackie Scott, <i>Grant Coordinator</i>
Chere Sullivan, <i>Commissioner</i>	

Appendices or Reference & Source Documents

(1,2,3,4) United States Census Bureau: <https://www.census.gov/data.html>

(5) United States Census Bureau: <https://data.census.gov/table/ACSDPIY2024.DP05?q=shasta+county+california,+population+count>

(6) United State Census Bureau: <https://censusreporter.org/profiles/05000US06089-shasta-county-ca/>

(7) California Department of Public Health, Maternal, Child & Adolescent Health Division, Prenatal Care <https://www.cdph.ca.gov/Programs/CFH/DMCAH/surveillance/Pages/Prenatal-Care.aspx>

(8) California Department of Public Health, Maternal, Child & Adolescent Health Division, Maternal Mental Health <https://www.cdph.ca.gov/Programs/CFH/DMCAH/surveillance/Pages/Maternal-Mental-Health.aspx>

(9) North State Together, Early Grade Reading Regional Data <https://northstatetogether.org/regional-data/early-grade-reading-data/>

(10) Kids Data, Availability of Child Care for Working Families <https://www.kidsdata.org/topic/99/child-care-availability/map#loct=3&fmt=262&tf=164&ch=1247¢er=-13325098.893387,4509031.392449&zoom=1>

(11) California Child Welfare Indicators Project <https://ccwip.berkeley.edu/childwelfare/reports/SubstantiationRates/MTSG/cws/cwsCw/>

(12) County of Shasta, Health & Human Services Agency, Shasta Families Belong <https://www.shastacounty.gov/health-human-services/page/shasta-families-belong>

(13) California Department of Public Health, Maternal, Child & Adolescent Health Division, Neonatal Abstinence Syndrome <https://www.cdph.ca.gov/Programs/CFH/DMCAH/surveillance/Pages/Neonatal-Abstinence-Syndrome.aspx>

(14) California Department of Public Health, Maternal, Child & Adolescent Health Division, Dashboard <https://www.cdph.ca.gov/Programs/CFH/DMCAH/MIHA/Pages/Data-Snapshots-Dashboard.aspx>

