Introduction

This evaluation framework is the result of months of deliberation by the Measure X Community Advisory Board (MXCAB) and a dedicated workgroup that steered this effort. We propose that the County implement a Measure X results-based accountability approach to develop data-informed processes that assess progress, outcomes, and success. This methodology centers the experiences and needs of the County's most vulnerable communities. It will assist in answering two vital questions: (1) What is the lived and human impact of the millions of dollars invested through Measure X and (2) Are Measure X investments achieving intended results, and if not, how can we refine our strategies and investments to promote better outcomes for **all** residents? MXCAB is providing this initial framework for consideration to the Board of Supervisors.

MXCAB Role

As a community asset, the Measure X Community Advisory Board (MXCAB) strives to expand our county's collective capacity to address entrenched inequities; resource, opportunity, and outcomes gaps; and sustained generational harms. We seek to work in collaboration with Supervisors, County staff, community service providers, and residents to support thriving, healthy, fulfilled individuals, families, and communities.

The MXCAB is committed to elevating the safety, health, and well-being of all Contra Costa County residents. We activate this commitment through prioritizing resident voice and transparent discussion, making well-informed and strategic funding recommendations to the Board of Supervisors, and holding ourselves accountable to the ballot measure's priorities and our shared values of inclusive belonging, equity, and transformative action.

We believe that Contra Costa County residents cannot experience safety, health, and well-being when communities of color and low-income residents experience it at disproportionately lower rates. Therefore, we have consistently sought to maximize the impact of limited funds by targeting resources to the priority populations and areas identified in the ballot measure and elevating equity to address urgent issues, service gaps, and outcomes disparities.

The MXCAB continues to elevate the core values and operating principles that have guided the body's work since its inception. These inform both internal conduct and external decision-making and are reflected in the evaluation framework we propose below.

These values and principles include:

1. Holding a shared responsibility to practice core values of equity, justice, inclusion, and compassion
2. Recognizing the importance of a strong safety net
3. Addressing prevention as well as current system gaps
4. Actively seeking transformational ideas
5. Leveraging other funding sources
6. Prioritizing the perspectives of residents most impacted by community needs, with a recognition that solutions must be interconnected and intersectional
7. Naming inequities and disparities, and recognizing those most harmed
8. Recognizing that economic opportunity and equity are at the heart of our work
9. Creating a culture of inclusion, welcoming, and belonging

The Framework

The evaluation framework draws from MXCAB's expertise in needs assessment, shared learning on results-based accountability methodology, experience developing Measure X priority funding recommendations, and deep connections to various communities.

This rubric fuses the ballot measure's named priorities with the MXCAB operating principles to create an accountable and actionable assessment framework that applies rigor to a person-centered process. It seeks to help us discern whether Measure X's strategies and investments are working, or not, and pushes us to explore how we can collaborate to ensure that the measure's public benefits are apparent and experienced.

The framework proposes a set of population-level (or community-level) high-level indicators that help assess progress toward desired conditions of well-being and equitable outcomes. These indicators can be tracked through readily available data sources coupled with more intentional, disaggregated, and deep information collection that provides targeted, real-time, and/or longitudinal evaluation of a given issue or intended outcome. Overall, our proposed indicators are accessible, accurate, and relevant to Measure X's priorities and principles.

A Framework for Assessing and Elevating the Equity Impacts of Measure X-Funded Projects

Operating Principle/Ballot Language	Condition of Well-being	Population-level Indicators
Shared practice of equity, justice, inclusion, and compassion	All residents—especially those historically excluded and/or impacted by structural racism—have access to preventative and emergency care that is	**Equity, Justice, Inclusion, and Compassion** 1. % of County Departments with active race equity implementation plans.

Sustain strong social safety net = health and prosperity for all Fund emergency response	affordable, culturally responsive, trauma-informed, and geographically accessible. All residents receive equitable and rapid response in crisis situations (health, fire, disaster, etc.). Attention is paid to humanizing processes and eliminating barriers.	2. % of residents reporting positive experience with public systems (health, housing, justice). 3. % of County-funded programs contracting with BIPOC-led and BIPOC-operated CBOs. **Strong Social Safety Net & Hospital Access** (Strengthen programs that serve low-income, marginalized populations across sectors - health, housing, mental health, etc. and track continued outcomes and staffing of Contra Costa Regional Medical Center, especially for users of Medi-Cal) 4. Preventable emergency room visit rates by zip code. 5. % of Medi-Cal patients with consistent primary care. 6. % of Black mothers that receive first trimester care that leads to better outcomes for those mothers and their babies. 7. Ensure hospital staffing reflects community and patient demographics and carry cultural values to promote the best outcomes. 8. Track access by race/language/insurance status. 9. Prioritize services that reach high-need census tracts. 10. Track racial disparities in who receives services and outcomes. **Prioritize Prevention** 11. Number and % of 5150 holds diverted to community care. 12. Suicide ideation/hospitalization rates (youth, by race & geography). 13. % of residents connected to culturally responsive health, mental health and social services, disaggregated by race, economic status, geography, age group, housing status, education levels, and other meaningful dimensions. **Fund Community Health Centers – Equity Lens: Preventative, Community-based care in Underserved Areas** 14. Fund community-based care as upstream prevention by supporting Federally Qualified Health Centers (FQHC),

		mobile clinics, and integrated behavioral health. 15. # of residents served at FQHCs and clinics in high-need census tracts. 16. % of residents who report a health home and access to primary care provider. 17. Community Health Center utilization rates, disaggregated by race and income. 18. # of culturally competent providers serving identified priority populations. **Emergency Response** 19. Ensure emergency services are available and equitable in their response across communities. 20. % of mental health crisis calls diverted to non-police response models. 21. % of low-income neighborhoods with fire prevention programming or community resilience plan. 22. Households in climate-vulnerable zones with access to fire mitigation and community awareness on house hardening practices.
Investments prioritize prevention and address current system gaps Name inequities and those most harmed, especially Black and Latinx. Additionally, residents with mental needs, Indigenous peoples, Asian American Pacific Islanders, seniors, people with disabilities, children and youth, immigrants, unsheltered, rural communities, LGBTQ+, and people in poverty. Economic opportunity and equity are at the heart of MXCAB purpose Seek transformative solutions, in addition to filling current service gaps Invest in early childhood services	All residents have access to educational, housing, and employment opportunities that foster positive development, redress structural inequities, and disrupt generational poverty. Public investments shift root causes, not just address symptoms, by delivering targeted support and resources to those who have been historically under-resourced and most harmed. Holistic and high-quality services and supports are provided for children's development and family well-being.	**Economic Opportunity & Equity** 1. Unemployment rates by race and census tract. 2. Education levels/degree completion by race and census tract. 3. Median household income increase in priority equity zones. 4. % of MX-funded programs that hire from high-barrier communities. 5. Eviction filings per 1,000 residents in priority census tracts. 6. % of Black, Latinx, Indigenous, older adult, and other vulnerable households in stable, long-term housing. 7. Youth and young adult homelessness rate in County districts. 8. Reductions in school disciplinary actions for BIPOC youth. 9. % of programs designed for disability access or language justice.

		10. % of MX contracts awarded to BIPOC-led grassroots community organizations. **Integrate Transformative Solutions** 11. % of County-funded programs investing in innovative and transformative initiatives, e.g., healing justice, community land trusts, diversion, etc. 12. % of MX funding supporting multi-sector partnerships or place-based pilots. 13. % of programs demonstrating structural change (e.g. policy change, co-governance models). **Protect the Vulnerable – Support Programs for People at Risk: Unsheltered, Disabled, LGBTQIA+, Elders, Youth, Justice-involved, and Immigrants and Refugees** 14. Ensure investments reach those disproportionately harmed by systemic racism (reentry, senior services, housing navigation, LGBTQIA+ affirming programs). 15. Track safety, housing, transportation, environmental health and climate justice and stability outcomes across demographic lines. 16. Require partnerships with residents and organizations from impacted communities. **Invest in Early Childhood Services** 17. Availability of child care for working parents. 18. Attendance in early learning settings for children ages 3+ in the most marginalized county zip codes, identified as those with low child opportunity scores. 19. % of Medi-Cal enrollees (in Contra Costa Health Plan and Kaiser) who receive a valid developmental screening between 0-3 years of age. 20. Childhood immunization rates. 21. Well-child visits in first 30 months. 22. Lead screening.
Needs and issues are intersectional and interconnected. Take the resident point of view.	Community members are given a meaningful opportunity to voice their needs and propose solutions for how they can be met. Residents are engaged as thought partners, decision makers, and lived experience experts, as reflected in a	Residents are engaged as thought partners, decision makers, and lived experience experts, as reflected in a significant percentage of MX-funded programs co-designed with community input, inclusion of residents in request for proposals processes, and evaluations conducted with

	significant percentage of MX-funded programs co-designed with community input, inclusion of residents in request for proposals processes, and evaluations conducted with success metrics defined by lived experience experts.	success metrics defined by lived experience experts identified by the community.
Foster a culture of inclusion, welcoming, and belonging demonstrates our commitment to equity and will improve our work progress and outcomes	All communities see themselves reflected in the County's processes, advisory bodies, and outcomes (e.g., % of programs demonstrating structural change, influencing policy change, and/or led by co-governance models)	1. % of programs demonstrating structural change, influencing policy change, and/or led by co-governance models. 2. % of programmatic and funding decisions made in response to CAB recommendations. 3. % of public comment participants from high-need zip codes. 4. % of MX programs with community advisory or feedback loops.

Conclusion

We offer this framework as a tool to help all County stakeholders—elected officials, department staff, community service providers, and residents—identify, celebrate, and scale up successful Measure X-funded programs and strategies; refine implementation and investment when outcomes aren't being met; and cultivate a culture of collective reflection that pushes us to create systems and services that are more responsive and robust.

We hope this framework can be considered as a tool for the upcoming evaluation to more actionably and accountably address a longer-term goal to review the data, determine opportunities to interrupt root causes or outcomes, clarify whether we are achieving Measure X priorities (e.g., all Contra Costa residents are healthy), and create concrete strategies to address the gaps between intent and impact. As always, we commit to partnering with the Board of Supervisors to help create a culture of equity and excellence throughout Contra Costa County.