Our Shared Premise for Our Building Healthy Communities Effort:

Our children should dream about their futures - and those dreams should be framed by family, health, safety, economic security, education and hope. We believe that their dreams are our community responsibility. We believe that early intervention and prevention are the critical keys to strengthening families, ensuring the economic assets of the families, preventing families from entering the justice and child welfare systems, instilling a life-long love of learning, and enhancing the health of every resident.

Outcome 3: Our children grow up to be healthy, productive and successful adults in a community that promotes their well-being – through prevention, education and positive direction from their earliest days.

Targeted Change:
1. The health and human services systems prioritize prevention and applies this approach in safe and respectful environments.

Targeted Change:
2. The health and human services system provides multiple pathways for community based prevention education and delivery of services.

Targeted Change:
3. The lifelong education continuum (serving persons aged zero to end of life) in DNATL provides aligned, powerful and motivating opportunities to reduce poor achievement levels and increase success.

Resources and Capacities
In Place:
Collaboration between Health Care District, Sutter Coast Hospital, Chamber of Commerce and others in physician recruitment and retention efforts; health care facilities serving a wide range of constituents (private practices, United Indian Health Services, Sutter Coast Hospital and Clinic, the Wellness Center)

Need:
Greater collaboration between the health and human service systems; base point from which to assess the degree to which the health and human services systems are or are not engaging with constituents in a culturally appropriate manner; base point from which to assess the degree to which prevention is utilized in delivery of care and services.

Change Strategy:
A. DNATL has an adequate range and supply of health care providers and treatment programs focused on prevention.

Change Strategy:
B. Health and human service entities have a shared vision, sense of ownership/responsibility, and partner together to achieve excellent services producing successful outcomes for families that start with education and prevention.

Change Strategy:
C. Parent education and community health outreach programs collaborate together to ensure families are equipped and educated to make healthy decisions about their children from before birth to adulthood.

Change Strategy:
D. Policy leaders and decision-makers work collaboratively with the community to create, change, and improve systems to support healthy families and prevent removal of children from homes.

Change Strategy:
E. All parts of the education continuum partner to align curricula, services, policies and resources to support healthy lifestyles.

Change Strategy:
F. Education systems involve families, employers, and community members in the design, delivery and evaluation of education.

Change Strategy:
G. From birth, our children have sufficient access to high-quality, affordable childcare and early education experiences that promote healthy development and learning.

Need:
The number of facilities providing early education experiences are inadequate and not available in all parts of the community; residents need to be engaged in greater dialogue and collaboration with the education system concerning curriculum and evaluation.

Resources and Capacities
In Place:
Collaboration between the Family Resource Center and Sutter Coast Hospital to provide prenatal parenting class to expecting parents; government agencies, tribal governments and nonprofit organizations addressing child welfare issues; data concerning child welfare cases (Department of Health and Human Services); capacity to interact with expecting parents via Sutter Coast Hospital is nearly 100% as the majority of births for the community occur at this facility.

Need:
Best practice and/or community engagement efforts to create norm and systems change to support healthy families and prevent children from being removed from homes.

Resources and Capacities
In Place:
Best practice developmental early education models are available and used (Head Start, Early Head Start); nonprofit and faith-based organizations offer early education instruction, materials and facilities; existence of parent/resident organizations that engage with the education system.

Need:
The number of facilities providing early education experiences are inadequate and not available in all parts of the community; residents need to be engaged in greater dialogue and collaboration with the education system concerning curriculum and evaluation.
Outcome 5:
Our children grow up to be safe and secure in a community that values their lives and teaches and demonstrates respect for one another. Children and families are safe from violence in their homes and neighborhoods.

Targeted Change:
1. Neighborhoods and educational organizations are free of drugs, alcohol, crime and violence.

Change Strategy:
A. Our community norm changes to ensure that parents, residents, decision-makers and first responders understand how violence and witnessing violence, illicit drug use, and all forms of abuse impact young children.

Change Strategy:
B. The education and health and human service systems change to implement strategies for parents and children, focused on all kinds of violence and abuse prevention from early childhood on.

Change Strategy:
C. Stores prevent youth from easily accessing drugs, alcohol, tobacco products, and other commonly abused substances.

Change Strategy:
D. Residents advocate for and collaborate with educational institutions and public agencies to have access to existing facilities that offer recreation and activities (such as school gyms) outside of regular operating hours (evenings, weekends and during school breaks).

Change Strategy:
E. Residents are empowered to advocate for and develop in conjunction with public agencies, local government, law enforcement, and other entities, to establish of community support and protection programs in every neighborhood.

Need:
Engagement with community to create a change in norms; literature, research and information concerning violence, substance abuse and the impacts on children needs to be made available to those in the BHC process.

Resources and Capacities
In Place:
Example of residents collaborating with educational institutions already occurring; neighborhood watch programs are successfully running in some parts of the community.

Identification of existing facilities that could serve as community gathering places; MOU development between residents and school district; extend the collaboration between educational institutions and residents already occurring; engagement and empowerment of residents to form neighborhood support mechanisms; engagement of residents with law enforcement.

In Place:
Literature, research, information and instruction materials pertaining to the impact of violence on children is available (Family Resource Center, First 5, Department of Health and Human Services, Court Appointed Special Advocates); nonprofit organizations operating in the community addressing violence, substance abuse and impacts on children and families; current youth led campaigns are working with stores to reduce the accessibility of alcohol; collaboration between the Family Resource Center and Sutter Coast Hospital to provide prenatal parenting class to expecting parents; high community readiness to reduce substance abuse.

Need:
Engagement with community to create a change in norms; literature, research and information concerning violence, substance abuse and the impacts on children needs to be made available to those in the BHC process.
Outcome 7: Neighborhood and school environments support improved health and healthy behaviors.

Targeted Change: 1. Children and families have access to healthy, affordable food options in every neighborhood.

Change Strategy: A. Education entities partner with local food producers and business to provide healthy and affordable food options and decrease access to unhealthy food.

Targeted Change: 2. All residents are safe from environmental and health hazards in their homes and neighborhoods.

Change Strategy: B. A coordinated food system exists to ensure access to healthy, local food in every neighborhood (community gardens, community based agriculture, grocery stores, farmer’s markets...).

Change Strategy: C. Families are knowledgeable of potential health and safety hazards in and around their homes and are empowered to advocate for and make changes.

Change Strategy: D. Adequate affordable housing, that meets health and safety standards is available including temporary housing for homeless persons and families.

Change Strategy: E. Community members and decision-makers collaborate to rectify infrastructure needs to ensure walking paths and lighting are adequate, bus stops are covered and dangerous roadways are safe for pedestrians and bicycles.

Targeted Change: 3. DNATL has safe and sufficient multi-modal transportation options and routes for children, youth, individuals and families, including to and from school.

Resources and Capacities

In Place:
School District acknowledgement that improvements to school lunches are needed; existing collaboration of residents, parents, district employees and physicians to improve school meals (Children’s Health Collaborative); regional data documents area as a food desert (high need); scattered community garden sites and efforts exist (Community Assistance Network, gardens at schools and churches, other community garden sites)

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Needed:
School district facilities are not equipped to prepare fresh meals at all sites in the community; grocery stores and fresh food options do not exist in all neighborhoods; greater collaboration between public, private and governmental entities to create a coordinated food system; a food system assessment to determine the extent of need and acquire data and eligibility necessary for federal grants

Resources and Capacities

In Place:
Existing resources available to assist families with health and safety inspection of their homes (Staff members of Smith River Rancheria); data available pertaining to homeless children, youth, families and individuals (School District, Community Assistance Network, County of Del Norte, federal data)

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Needed:
greater information to determine who is served by existing resources and the population base these resources are serving; number of affordable housing units are inadequate; data and expertise pertaining to housing and homelessness need to be made available and utilized by the BHC process

Resources and Capacities

In Place:
Resident, parent and nonprofit groups are present in the community; local tragedy has highlighted the need for safe school bus stops on dangerous roadways

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Needed:
conduct an infrastructure assessment community wide and in every neighborhood to determine need; engage residents and decision-makers in change strategies and development of solutions

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Outcome 8: Our community believes that health is intrinsically tied to a strong economy. Our local economy is strengthened because of our focus on locally determined strategies that reduce poverty, promote hard-work, risk-taking, creativity and enjoyment of work.

Targeted Change:
1. The education continuum partners with employers to identify the key 21st century jobs, including health careers, for which programs, policies, education curricula and other supports are developed and implemented.

Change Strategy:
A. The infrastructure of our education continuum ensures students achieve academic and career-based learning objectives focused on excellence and defined by the community, including data about growing careers/industries, with the collaboration of health employers, colleges and universities.

Resources and Capacities
In Place:
Regional data available documenting growing careers/industries; health career pathways promoted and supported by community college and local hospital; alternative education delivery model operating in the community; community desire for improvement to education system particularly around career readiness, mentoring and vocational training for youth; decision-makers within education system open to change for improvements

Needed:
Greater community engagement; collaboration between local business owners and education system; exploration of best-practice and alternative education models

Targeted Change:
2. Local businesses and employers are successful, sustainable and able to create living wage jobs, provide mentoring, and participate in programs to support local talent.

Change Strategy:
B. The education system changes to meaningfully and regularly connect youth to local mentors who support academic, community and work-world achievements in growing industries, including health careers.

C. Economic development agencies, business owners, government agencies and tribal government, collaborate in the development of best practice strategies to support infrastructure development and economic expansion.

D. Detailed, strategic, business district development plans are successfully implemented to improve the quality, access, and beauty of local business districts, as well as resident and visitor use.

Change Strategy:
B. The education system changes to meaningfully and regularly connect youth to local mentors who support academic, community and work-world achievements in growing industries, including health careers.

Resources and Capacities
In Place:
Existing collaborations in place with data and economic development plans. Such as: The Council of Economic Advisors (HAS199.com); The Tri-Agency Economic Development Authority (Comprehensive Economic Development Strategy); Hwy 101 Beautification Project. Support for businesses available through: The Chamber of Commerce, Small Business Development Center. Strong desire for local business development. Regional data and strategies available to support the development and expansion of local business.

Needed:
Engagement between residents and business community; improved communication between business infrastructure development needs and necessary policy change; need greater communication between those with knowledge and those in the BHC process; the necessary expertise needed to lead, manage and adapt the work surrounding economic development is lacking

Targeted Change:
2. Local businesses and employers are successful, sustainable and able to create living wage jobs, provide mentoring, and participate in programs to support local talent.