



ALL CHILDREN THRIVE CALIFORNIA (ACT/CA)

A one-time allocation of \$10 million in Proposition 63 administrative funds to prevent adverse childhood experiences, counter their effects, promote healing, and foster individual and community resilience to give all California children the opportunity to thrive.






the PROBLEM

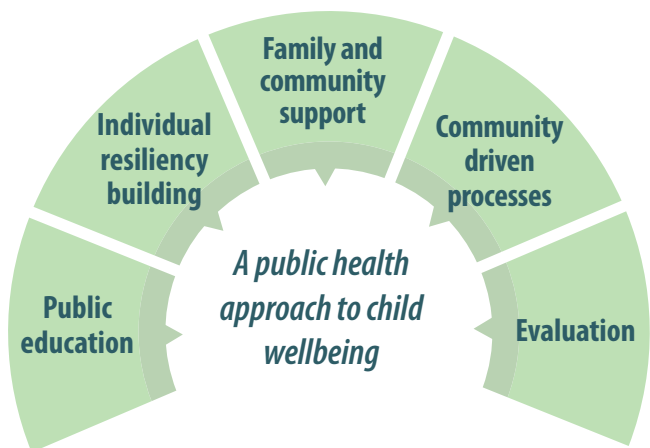
Trauma—physical and emotional abuse, neglect, and household dysfunction—profoundly affects a child’s ability to thrive emotionally, socially, and academically, increasing the likelihood of poor physical health and economic hardship later in life.

The community trauma inflicted by economic hardship, community violence, poor housing quality, institutional racism, and inadequate community infrastructure put low-income people and people of color at greater risk.

ACT/CA: A Public Health Response to Child Trauma

ACT/CA will begin in spring 2019 and will identify best practices from around the world to develop models for what cities can do to address these critical issues. ACT/CA objectives include:

-  Establish an ACT/CA Equity Advisory Group
-  Identify the most effective public health approaches currently in use around the world
-  Develop an ACT/CA Toolkit for cities
-  Educate city leaders throughout California and provide technical assistance
-  Evaluate impact, identify best practices, and develop options to spread ACT/CA throughout California



the PARTNERS

Public Health Advocates. ACT/CA expands Public Health Advocates’ existing Healthy Eating Active Living (HEAL) Cities Campaign to help cities develop policies and practices that prevent and heal trauma and promote child well-being.

UCLA Center for Healthier Children, Families & Communities. ACT/CA builds on UCLA’s national ACT initiative prioritizing children’s health in more than a dozen U.S. cities.

Community Partners offers expert guidance and a strong dose of passion to launch and grow creative solutions to community challenges.



PUBLIC HEALTH ADVOCATES
EVERYONE HAS THE RIGHT TO BE HEALTHY

For more information, contact:

Flojaune G. Cofer, PhD • Public Health Advocates
FC@PHAdvocates.org • 844.962.5900, x230

Modernizing Our Health System

Accountable Communities for Health (ACH) is a groundbreaking approach to transform a community's health by building a more expansive, connected and prevention-oriented health system.

Our Current Approach is Limited

Meet Elena — despite her best efforts, Elena continues to battle type 2 diabetes and is worried that her children will grow up to get the disease as well. She leaves her doctor's office with a prescription and a new diet plan but feels defeated. Where will she exercise? How can she make sure her family gets the nutritious food they need?

Elena, like so many of us, is facing a health care system that stops at the doctor's office and leaves patients with too little support, fighting environments that make health an uphill battle.

And There's a Better Way

Accountable Communities for Health (ACH) is a new model that transforms a health system to harness the power of a network of community-wide interventions that no single health organization could hope to match.

If Elena lived in a region with an ACH, her doctor visit would only mark the beginning of her care. Elena's doctor might also write a prescription for a walking club and refer her to the YMCA for their diabetes prevention program. She could join a parent group to advocate for healthy food policies at her children's school. A community health worker could add her indicators to a confidential database so the ACH is able to track patterns and continue to build strategies that safeguard the entire community's health.

ACH Model



Delivering Health

When multiple institutions across varying sectors work in alignment, we create better health outcomes for everyone. For Elena, her family, friends and neighbors, the ACH builds a comprehensive and sustainable strategy that helps everyone get and stay healthy.



Maximized Resources

ACH partnerships enable the best use of public and private resources by driving dollars toward the most impactful health solutions.



Health Equity

The ACH ensures that, regardless of income, every resident has a better chance to be healthy.



Prevention

Because keeping residents healthy is more compassionate and affordable than constant medical attention, ACH invests in prevention.



Center Community Voice



Multi-Sector Engagement



Align Systems and
Priorities

**Transformed
Systems**

**Healthier, Stronger,
More Equitable
Communities**

Improved health outcomes
More resilient systems
Greater equity

How CalFresh Benefits CALIFORNIA'S 1ST DISTRICT



85,000 DISTRICT RESIDENTS RELY ON CALFRESH

to supplement meagre food budgets so their families have enough to eat in order to work, study & contribute to society.



\$139 MILLION A YEAR IN DIRECT ECONOMIC IMPACT

More than \$139 million a year is pumped directly into the district's economy through the CalFresh program.

**\$249 MILLION
A YEAR
IN TOTAL
ECONOMIC
ACTIVITY**



ADDITIONAL \$110 MILLION A YEAR TO LOCAL BUSINESSES

An additional \$110 million a year is generated by CalFresh spending, helping farmers, grocers, truckers, packing sheds & other businesses in the district stay profitable and competitive.



\$119 MILLION A YEAR IN HEALTH CARE SAVINGS

By helping families with food, CalFresh keeps them healthy. CalFresh participants incur \$1,400 less in health care costs per year than non-participants, saving taxpayers \$119 million in our district.



BETTER PERFORMING SCHOOLS

Properly nourished students learn better & miss fewer school days. Since mostly families use CalFresh, the nutritious food helps youth learn & prepare to join the workforce.

The Supplemental Nutrition Assistance Program, known in California as CalFresh, is the nation's most important anti-hunger program. CalFresh provides critical support to low-income families while strengthening the local economy.



For more information: Kenneth Hecht • Nutrition Policy Institute, University of CA • (510) 409-6436 • kenhecht@ucanr.edu

Any opinions, findings, conclusions, or recommendations expressed are those of the author and do not necessarily reflect the view or position of the University of California.

A full list of references is available at <http://npi.ucanr.edu/CalFresh>.

CONTRA COSTA HEALTH SERVICES

Protecting, addressing & enhancing
the well-being of all Contra Costa



Health shapes everything
... and everything shapes health

For most, being healthy is something we take for granted. It's when you're sick that you appreciate the importance of protecting your health and safeguarding against those issues that could jeopardize your physical or emotional well-being.

At Contra Costa Health Services (CCHS), keeping a close eye on issues that shape your health is our job. We're dedicated to making Contra Costa the healthiest county in the nation and doing everything we can to help the people of Contra Costa reach their full potential, especially our most vulnerable residents.

With literally hundreds of health interventions at work in every part of the county, we focus on three areas to safeguard the health of you & your loved ones



**PREVENTION
& PROTECTION**

First and foremost, we want to make sure that everyone is safe. Whatever you breathe, drink, eat and experience in your daily life, we work with an array of community partners to make sure it's safe. But keeping you healthy also means tracking health issues, thoughtful planning and active promotion of policies, behaviors and opportunities to keep you feeling well, both physically and emotionally.



**HEALTH
COVERAGE**

As one of the largest insurers in the county, we have a unique insight into the needs of the community. Two out of every five children are insured through CCHS and one out of every five adults. That puts us in the ideal position to harness all the power of CCHS to tailor our work to meet your constantly evolving health needs.



**DIRECT
HEALTH SERVICES**

Having good, reliable and timely medical and behavioral health care is essential. From sprains and aches to more serious ailments, we've built a system of providers and clinics that stretches across the county to make access to medical and behavioral care not only convenient, but affordable. From vaccinations to special health clinics, we're constantly innovating new opportunities to help you embrace a healthier lifestyle.

Helping everyone in Contra Costa reach their full potential



PRENATAL



EARLY CHILDHOOD



SCHOOL-AGED YOUTH



TEENAGERS



YOUNG ADULTS



SENIORS



ADULTS

ORGANIZATIONAL FACT SHEET TEMPLATE:

The purpose of a fact sheet is to introduce your organization quickly and concisely. It should be brief (never more than two pages), avoid long sentences (best to rely on bullets wherever possible) and lead to action.

PROBLEM: Statement and some statistics describing the problem in your region. The more specific the better.

QUOTE: *From someone who has been in crisis about the challenges and need for support. If possible, picture is always good.*

COALITION INTRODUCTION: “Coalition name” brings together diverse and powerful organizations throughout (region) with a shared commitment to addressing opioid use disorder and treatment to save lives and help communities heal.

-or-

(Name of Coalition) was formed in 20XX as a place where key sectors of (region) impacted by the opioid crisis can share information, experiences and resources to magnify our impact and implement coordinated plans of action to save lives and provide healing.

- **MISSION STATEMENT:** Purpose, this may be captured in the introduction statement
- **KEY ORGANIZATIONS/SECTORS:**
- **HISTORY:** When founded, creates sense of stability
- **GEOGRAPHIC REPRESENTATION:**
- **HOW WE OPERATE:** Meeting schedule, Key Initiatives, Projects, Events

QUOTE: *from member about how they have enriched their work and success through the connections they've made and the opportunity to work in a coordinated way to magnify their impact.*

ACHIEVEMENTS: Outline three or four major accomplishments of working collectively to enhance impact. This serves as evidence of the coalition's successes and capacity.

- Activity or Accomplishment
- Activity or Accomplishment
- Activity or Accomplishment

INVITE: Join us. Make a difference.

- Contact Info for more information
- Website



Healthy eating is the most powerful tool we have to prevent the onset of disease

HEALTHY RETAIL

- Only 11% of stores in the Canal and 0% of stores in Marin City met “Neighborhood Food Store Quality” standards.²
- Marin City does not have a single grocery store for its residents. It is a food desert. Residents have poor diets and 86% of the adults are overweight or obese which contributes to common diet-related diseases including heart disease and diabetes.³
- Not a single retail food store in West Marin accepts WIC.²

FOOD ASSISTANCE

- Only about half of eligible Marin County residents are enrolled in CalFresh (also known as ‘food stamps’).⁴
- Marin County ranks 55 out of 58 counties in enrolling eligible people onto CalFresh.⁵
- Marin County is missing out on \$21.6 million in federally funded CalFresh benefits every year, representing \$38.6 million annually in lost economic activity.⁶

COMMUNITY FOOD PRODUCTION

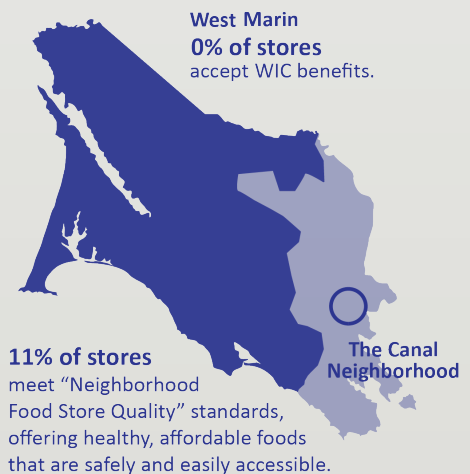
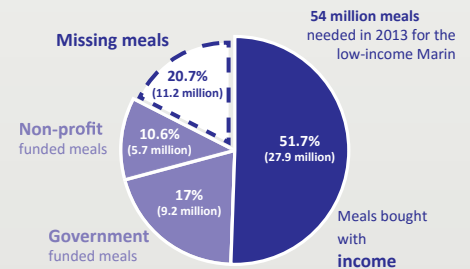
- Urban agriculture has been shown to raise home values, improve health, teach ecological stewardship, and build positive communities, raising the level of food security in low-income communities.⁷
- Up and down Marin’s 101 corridor, demand for community garden plots outpaces supply.⁸

1. Quote at the top of the page: <http://health.gov/news/dietary-guidelines-digital-press-kit/2016/01/top-10-things-you-need-to-know/>
2. CX3 (Communities of Excellence in Nutrition, Physical Activity, and Obesity Prevention)
3. California Health Interview Survey, UCLA
4. California Food Policy Advocates
5. 2013 Program Access Index scores from California Food Policy Advocates
6. California Food Policy Advocates, Lost dollars Empty Plates (2015) <http://cfpa.net/CalFresh/Media/PAI-LDEP-PressRelease-Marin-2015.pdf>
7. UCANR files, Annotated Biblio: <http://ucanr.edu/sites/UrbanAg/files/185843.pdf> (Lit Review on Urban Ag: <http://ucanr.edu/sites/UrbanAg/files/185846.pdf>)
8. UCCE Marin. 2010. “Marin County Community Garden Needs Assessment.” (<http://cemarin.ucdavis.edu/files/66838.pdf>)



In Marin County, **1 in 5** residents is at risk of **food insecurity**.

Low-income households in Marin County were missing 11.2 million meals in 2014



Growing Demand for Long-Term Care

IMPACT ON THE STATE OF CALIFORNIA

As California's population ages over the next 10 years, the state will face significant infrastructure and fiscal challenges. California currently lacks the capacity to meet the future needs of its aging population. Continued increases in state spending for long-term care could soon overshadow some of the state's competing priorities.



CALIFORNIA PARTNERSHIP FOR
LONG-TERM CARE

Read the full *Will Boomers Bust the Budget?* Issue Brief from the California Partnership from Long-Term Care and University of California, Berkeley at www.RUReadyCA.org.

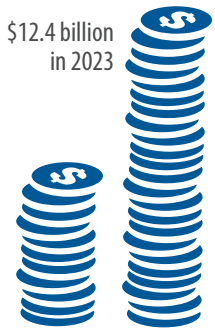
With institutional care facilities already 85 percent full, California's current infrastructure cannot support sharp rises in demand



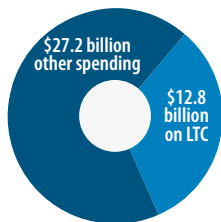
Long-term care costs could increase 88 percent over the next 10 years

\$12.4 billion in 2023

\$6.6 billion in 2013



Long-term care accounted for one-third of the \$40.8 billion California spent on Medi-Cal in 2009



THE \$12.8 BILLION SPENT ON LONG-TERM CARE INCLUDED:

- \$4.4 billion for nursing home care
- \$5.2 billion for home health and personal care
- \$3.2 billion for other long-term care services

Greater pressure for increased Medicaid spending because of increased long-term care needs could lead to:



Reduced provider payment rates

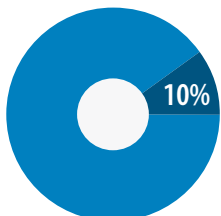


Reduced benefits



Restricted eligibility

2009-10 State Budget



10% Medi-Cal's spending on long-term care

Continued growth in the state's long-term care spending will increasingly cut into spending on other priorities, including:



Education



Transportation



Corrections