JOHN MUIR HEALTH

2025
Report
Community Health Needs Assessment

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Top right: vaccination volunteers, John Muir Health

Top left: parent and children, Nathan Dumlao

Penultimate row, left to right: food delivery, Kampus Production; backpack drive, John Muir Health; food bank pick-up, John Muir Health; plant, Tamara Elnova

Bottom row, left to right: doctor/patient, John Muir Health; Pride parade, John Muir Health; family walking, Anastasia Shuraeva

Helping organizations discover and act on data-driven insights.

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Acknowledgements

The 2025 Community Health Needs Assessment report was prepared by the research firm Actionable Insights, LLC.

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1. Executive Summary

Community Health Needs Assessment Guiding Principles

These principles guided the approach and methodology of the CHNA, ensuring that it is comprehensive, inclusive and effective in achieving its intended outcomes:

- ✓ Community-informed
- ✓ Inclusive and representative
- ✓ Disparity and equity-focused
- ✓ Data-driven and evidence-based
- ✓ Collaborative and coordinated
- ✓ Accountable
- ✓ Compliant

Figure 1. John Muir Health's service area covers Contra Costa County, Northern Alameda County, and the Tri-Valley region.

CHNA Process and Methods

Figure 2. The core of the CHNA process comprises data collection, analysis and synthesis, culminating in the development of a community health needs list.

Conduct interviews and focus groups with community members and area experts in partnership with local nonprofits and other entities.

Collect statistical data from a variety of public sources, in partnership with local health departments.

Review statistics, analyze qualitative data to determine community priorities, and synthesize to generate needs list.

Apply needs identification criteria and rank-order list based on community priorities.

Figure 3. The assessment and implementation process stretches across the arc of a 3-year cycle.

Jan–Apr 2024	Mar–Nov 2024	Oct 2024–Jan 2025	Feb–Dec 2025	Apr–Dec 2025	Jan 2026–Dec 2028
Collaborative planning	Data collection	Data analysis and synthesis	Prioritization and reporting	Selection and strategic plan	Report on and implement plan
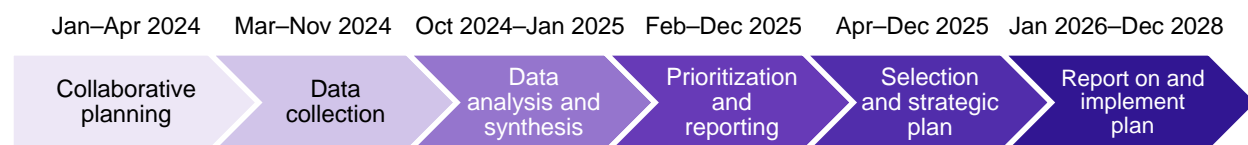
The 2025 CHNA was a collaborative effort shared by a number of nonprofit hospitals serving Contra Costa and Alameda counties. In addition, other local hospitals, health systems, public health departments, and organizations were essential partners in collecting primary and secondary data.

Primary data are data that were collected directly by hospitals and/or CHNA partners, and include key informant interviews and focus groups. Secondary data are data that were gathered by other organizations or agencies, such as the U.S. Census Bureau or the Centers for Disease Control and Prevention among other quantitative data sources, and include county and city data.

The CHNA process applied a social determinants of health framework and examined social, environmental, and economic conditions that impact health, as well as explored factors related to diseases, clinical care, and physical health. Analysis of this broad range of contributing factors resulted in identification of the priority health needs for John Muir Health.

Figure 4. How a Health Need Is Identified.
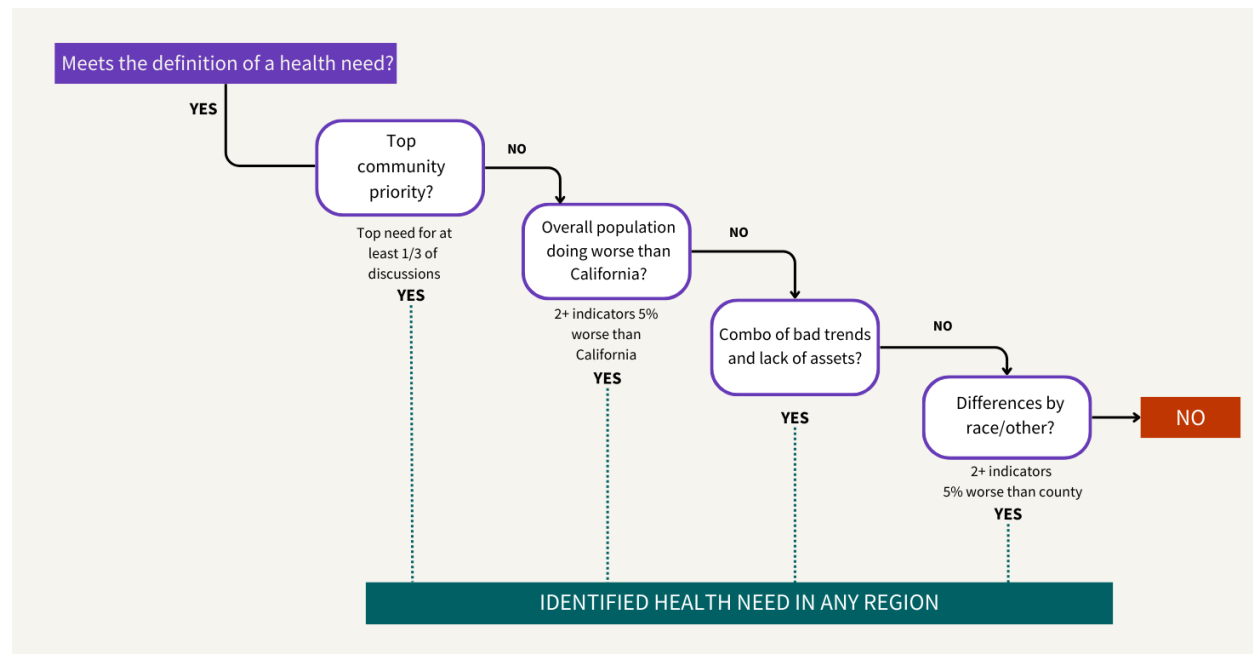
Prioritized 2025 Community Health Needs

1. Economic Stability[1]
2. Behavioral Health
3. Housing
4. Healthcare Access & Delivery
5. Structural Racism/Discrimination
6. Community & Family Safety
7. Climate/Natural Environment
8. Cancer (tied)
9. Heart/Stroke (tied)
10. Maternal/Infant Health
11. Sexual Health (tied)
12. Unintended Injuries (tied)

Next Steps

- Make publicly available this board-approved 2025 CHNA report on John Muir Health's Community Benefits webpage[2] and solicit written comments until two subsequent reports are published.

- Develop an implementation plan based on the CHNA results, which will be filed with the IRS by May 15, 2026.

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[1] Economic stability includes education, workforce development, and food security.

[2] See https://www.johnmuirhealth.com/about-john-muir-health/community-commitment.html.

2. CHNA Regulatory Requirements and Purpose

This CHNA, completed in fiscal year 2025 and described in this report, meets and exceeds all current State of California (SB 697) and federal (IRS) requirements.

Affordable Care Act 2010

Federal Requirements[3]

501(c)(3) hospitals must conduct a CHNA every three years and must document:

- Community served
- Partners involved
- Process and methods
- Identified and prioritized needs

CA Senate Bill 697 1994

State Requirements[4]

Private, nonprofit hospitals must conduct a CHNA every three years and annually describe in a report:

- How community was involved in identifying and prioritizing needs
- Activities hospital has taken to address identified needs

CHNA Purpose

The purpose of this triennial Community Health Needs Assessment (CHNA) is to identify and address the critical health needs of the community. The 2025 CHNA builds upon earlier assessments, using prior years' findings as a foundation for refining research protocols, refocusing the scope of various health needs, and filling information gaps. The CHNA also distills new qualitative and quantitative research, prioritizes current local health needs, and identifies areas for improvement. The findings will be used to develop strategies that address critical health needs and improve the health and well-being of community members. As with prior CHNAs, the 2025 assessment also highlights the assets and resources available in John Muir Health's service area to address the identified needs. The 2025 CHNA will serve as the basis for implementation strategies that are required to be filed with the IRS as part of John Muir Health's 2025 Form 990, Schedule H, four and a half months into the next taxable year.

Local CHNA Efforts

As part of the 2025 CHNA efforts, John Muir Health and other hospitals/health systems in Alameda and Contra Costa counties collaborated for the purpose of identifying critical health needs of the community.[5] In addition, these entities partnered informally with Contra Costa and Alameda counties' public health

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[3] U.S. Federal Register. (2014). *Department of the Treasury, Internal Revenue Service, 26 CFR Parts 1, 53, and 602.* Vol. 79, No. 250, December 31, 2014. See *Appendix 7: IRS Regulations Compliance Checklist* in this report. The CHNA serves as the basis for implementation strategies that are required to be filed with the IRS as part of the hospital's Form 990, Schedule H, four and a half months into the next taxable year.

[4] California Department of Health Care Access and Information (HCAI). (1998). *Not-for-Profit Hospital Community Benefit Legislation (Senate Bill 697), Report to the Legislature.* HCAI is formerly known as California Office of Statewide Health Planning and Development (OSHPD). The California Department of Health Care Access and Information (https://hcai.ca.gov) states: "HCAI is committed to expanding equitable access to healthcare for all Californians—ensuring every community has the health workforce they need, safe and reliable healthcare facilities, and health information that can help make care more effective and affordable."

[5] The collaborating entities are St. Rose Hospital, Stanford Health Care Tri-Valley, UCSF Benioff Children's Hospitals, and Washington Health, as well as Kaiser Foundation Hospitals and Sutter Health facilities.

departments, and with other organizations on data collection activities with the aim of extending their mutual reach and reducing the assessment burden on the community. Together, the collaborating entities conducted an extensive, compliant Community Health Needs Assessment (CHNA).

Brief Summary of 2022 CHNA Report

In 2022, John Muir Health participated in a collaborative process to identify significant community health needs in order to meet the aforementioned IRS and SB 697 requirements. The resulting 2022 CHNA report has been posted on John Muir Health's website.[6]

The health needs that were identified and prioritized through the 2022 CHNA process were as follows:

1. Behavioral Health
2. Housing and Homelessness
3. Economic Security
4. Structural Racism
5. Healthcare Access and Delivery
6. Community and Family Safety
7. Food Security
8. Education
9. Transportation

Written Public Comments to 2022 CHNA and Implementation Strategy

As a means of offering the public a way to provide written input on the 2022 CHNA report and most recently adopted implementation strategies, John Muir Health maintains an email account at Community.Benefit@johnmuirhealth.com. A link to this inbox is posted on the hospital's website.[6]

At the time this CHNA report was completed, John Muir Health had not received any written comments about the 2022 CHNA report or its most recent implementation strategies. The hospital will continue to track any submissions made and will ensure that all relevant comments are reviewed and addressed by appropriate hospital staff.

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[6] See https://www.johnmuirhealth.com/about-john-muir-health/community-commitment.html.

3. About John Muir Health and the Community

Mission, Vision, and Values

John Muir Health is guided by its charitable mission, which serves as the foundation for directing the organization's Community Benefit activities:

We are dedicated to improving the health of the communities we serve
with quality and compassion.

John Muir Health's eight core values guide its board of directors, management, and employees in all efforts:

- ✓ Excellence
- ✓ Honesty and Integrity
- ✓ Mutual Respect and Teamwork
- ✓ Caring and Compassion

- ✓ Commitment to Patient Safety
- ✓ Continuous Improvement
- ✓ Stewardship of Resources
- ✓ Access to Care

Community Commitment

John Muir Health's mission reflects community health efforts as a corporate leader and community partner. The community health leadership role is rooted in John Muir Health's excellence as a healthcare provider and commitment to building partnerships with organizations that also exemplify excellence. John Muir Health views its commitment to community benefit initiatives as core to its mission. This commitment is seen through every facet of the organization from volunteers to physicians and in emergency departments and outpatient centers.

About John Muir Health's Community Health Improvement

The Community Health Improvement department serves as a steward for John Muir Health's charitable purposes by assisting the community in achieving optimal health through improving access to care, supporting innovative health interventions, and by collaborating with local communities, community clinics, community-based organizations, and school districts. Its main role is to coordinate the John Muir Health Community Benefit planning process and to act as the liaison to the community-at-large, which enables John Muir Health to align resources and strategies to better impact the goal of creating healthy communities. Community Health Improvement accomplishes this by coordinating a grantmaking portfolio, supporting local nonprofit organizations via sponsorship funding, and contributing towards direct services that are offered at no cost to the community, such as the signature Mobile Health Clinic program. Community Health Improvement works to identify and address unmet health needs among vulnerable populations.

John Muir Health 2025

A locally governed, independent, community-based health system dedicated to improving the health of the communities we serve with quality and compassion. As a not-for-profit, we reinvest 100% back into caring for the community.

Physician practices throughout Contra Costa County as well as in Alameda and Solano Counties

Hospitals
- **Concord** Medical Center
- **Walnut Creek** Medical Center
- Acute Psychiatric Hospital in **Concord**
- **San Ramon** Regional Medical Center, a John Muir Health partner

989 🛏
Licensed hospital beds
(medical and psychiatric)

Outpatient Centers
with Primary Care, Specialists, Pediatrics, Urgent Care, Lab and Imaging
- **Berkeley** (in partnership with UCSF Health)
- **Brentwood**
- **Concord**
- **San Ramon**
- **Walnut Creek**

Urgent Care Centers
OPEN 7 days per week
- **Berkeley**
- **Brentwood**
- **Concord**
- **San Ramon**
- **Walnut Creek**

Comprehensive Clinical Care, *including:*

- **Cancer Care:** UCSF – John Muir Health Jean and Ken Hofmann Cancer Center at the Behring Pavilion, includes multi-disciplinary clinics for full-spectrum care

- **Cardiac Care:** Concord Medical Center Ranked #1 in California and #8 in U.S. for Heart Bypass Surgery Outcomes

- **Neurosciences:** Comprehensive Stroke Center (Walnut Creek) and Primary Stroke Center (Concord)

- **Trauma / Acute Care Surgery:** The county's only Trauma Center (Level II)

- **Women's Services:** Perinatal care, labor & delivery (including high-risk)

- **Children's Services (Partnership with Stanford Medicine Children's Health):** Level III NICU, pediatric subspecialty care

Nationally Recognized *for* EXCELLENCE in Healthcare

- **Hospitals:** Best Regional Hospitals, top 10% nationally, #2 in SF Metro Area (US News & World Report); Best Hospitals (Newsweek)

- **Physicians:** Standards of Excellence "Elite" Status for over a decade (America's Physician Groups)

- **Nurses:** Nursing Excellence – Magnet® Recognition

- **Specialty Care:** Nationally Ranked Specialties (US News & World Report, Healthgrades); Centers of Excellence – Robotic Surgery, Knee/Hip Replacement, Spine Surgery, Cardiac Care

- **Maternity Care:** Best Maternity Hospital (Newsweek); Designated Baby-Friendly® birth facility (Baby Friendly USA)

Visit **johnmuirhealth.com** for more information

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The People We Serve

Our Patients

Number of patients, 2024: **337,000**

We Care For:
Medicare: **90,000**
Medi-Cal: **55,000**

Our Physicians

Number of affiliated physicians: **1,200**

Family Medicine Residency Program training future physicians since 2017.

Looking for a new John Muir Health Physician?

johnmuirhealth.com/findadoctor.html

Our Employees

2025 – John Muir Health Named One of America's Greatest Workplaces in Health Care by Newsweek

Our diverse workforce of over 6,450 employees:

Percentage of Employees:

WORKING IN
- 98% Contra Costa County
- 58% Walnut Creek
- 34% Concord
- 1% Other Counties
- 1% Alameda County

BY ETHNICITY / RACE
- 38% White
- 28% Asian
- 17% Hispanic
- 7% Black
- 10% Other

RESIDING IN
- 72% Other cities or counties
- 9% Walnut Creek
- 19% Concord
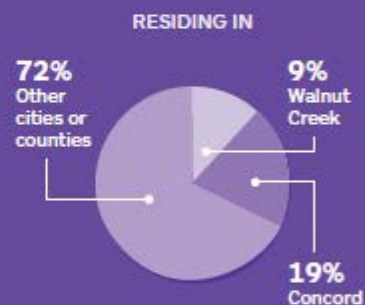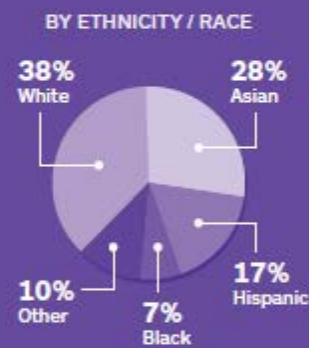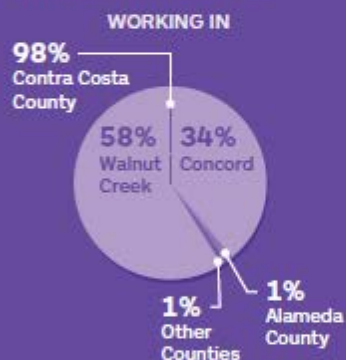
Benefits & Retirement

Medical (dental, vision and voluntary benefits), retirement benefits including a pension plan, and more.

Improving Community Health

We address top community needs by partnering with nonprofit organizations to provide medical and mental health services for uninsured and Medi-Cal patients, healthcare workforce training and other community services.

2024 Community Benefit Contributions:
$205 Million
Including $178M in unpaid costs of Medi-Cal.

JOHN MUIR HEALTH

Visit johnmuirhealth.com for more information

NOTE: Data is based on 2024 statistics

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Community Served

The Internal Revenue Service defines the "community served" as individuals residing within the hospital's service area. A hospital service area comprises all the inhabitants of a defined geographic area and includes low-income and underserved populations.

John Muir Health collaborated on the 2025 CHNA with other hospitals in Contra Costa and Alameda counties. Each collaborating hospital defines its hospital service area to include all individuals residing within a defined geographic area surrounding the hospital. For this collaborative CHNA, Alameda and Contra Costa counties were the overall service area, with each hospital adding additional focus on their respective geographic areas.

Figure 5. Map of Community Served
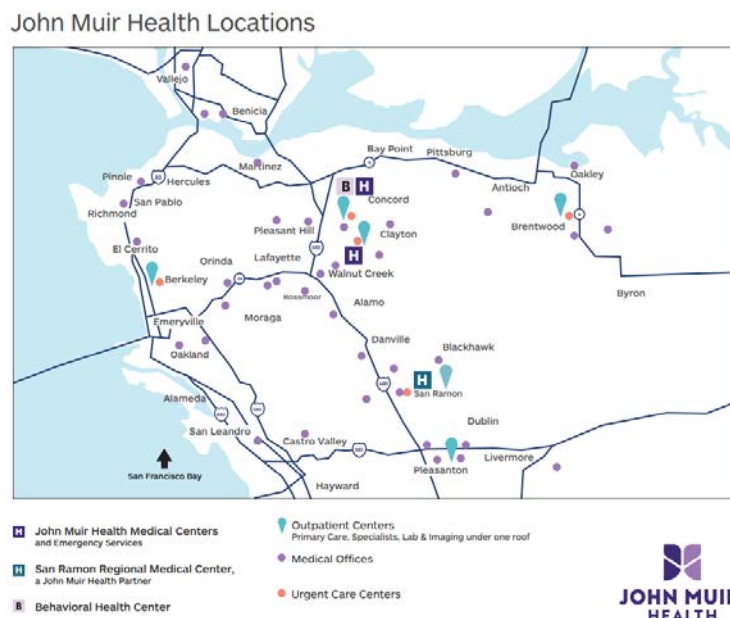
John Muir Health's primary and secondary service area extends from southern Solano County into Eastern Contra Costa County and south to San Ramon in Contra Costa County. John Muir Health also serves eastern Alameda County in the Tri-Valley area in joint venture with San Ramon Regional Medical Center and serves northern Alameda County in joint venture with University of California, San Francisco.[7]

John Muir Health's Community Benefit programs serve individuals within the broader scope of John Muir Health's service area and focus their efforts on the needs of vulnerable populations in Contra Costa County, the Tri-Valley region, and Northern Alameda County. Vulnerable populations are defined as experiencing evidenced-based disparities in health outcomes, significant barriers to care, and economic disparities.[8] Vulnerable populations include:

- Racial and ethnic groups experiencing disparate health outcomes
- Socially disadvantaged groups, including the following:
  - Unhoused populations
  - Communities with inadequate access to clean air and safe drinking water, as defined by an environmental California Healthy Places Index score of 50 percent or lower
  - People with disabilities
  - People identifying as LGBTQ+
  - Individuals with limited English proficiency

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[7] John Muir Health's Trauma Center serves all of Contra Costa County, Solano County, and Marin County and is also the backup trauma center for Alameda County.

[8] California Department of Health Care Access and Information (2022). *HCAI Factsheet Hospital Community Benefits Plans: Vulnerable Populations.*

Figure 6. Alameda County Demographics

A majority of community members are non-White.

11% Chinese
9% Asian Indian
5% Filipinx
7% Other Asian

White 34%
Asian 32%
Other 12%
Black 10%
Multi 10%
Native Am 1%
Pac Isl 1%
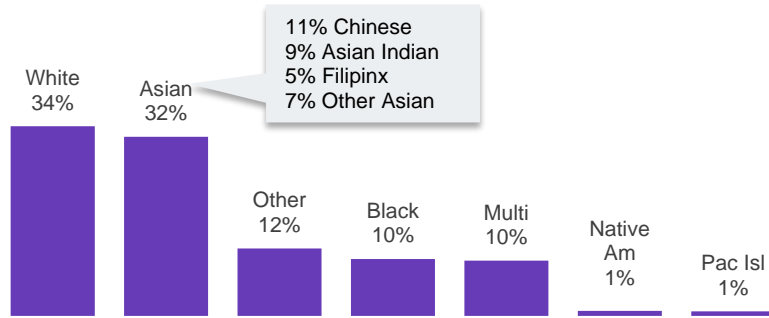
Over one in five are Latine.

22%

One in five people are children.

Under 18 20%
Aged 18-64 65%
Over 64 15%
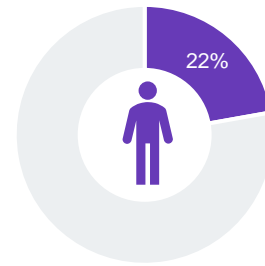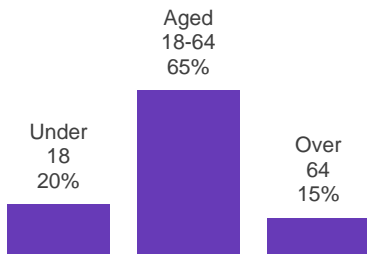
Over one-third of people are foreign-born.

36%
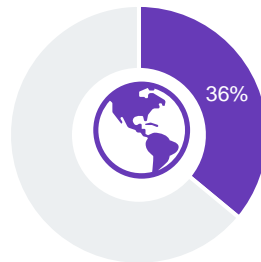
About one in five over age 5 speak limited English.

19%
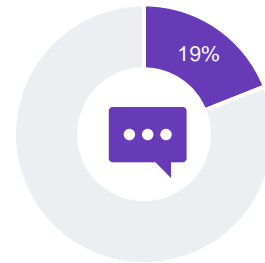
$121,703
household Real Cost Measure (RCM)

$1.0M
median home sale price

On average, close to one in three households lives below the Real Cost Measure.

29%
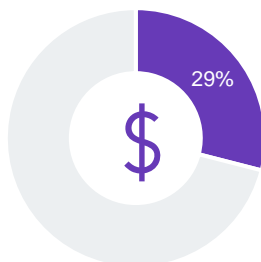
Over one in ten people lives with a disability.

11%
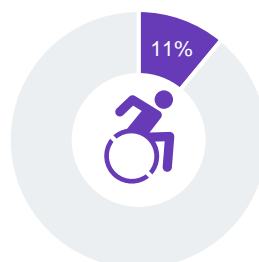
Nearly three in five people aged 25+ have earned at least a Bachelor's degree.

58%
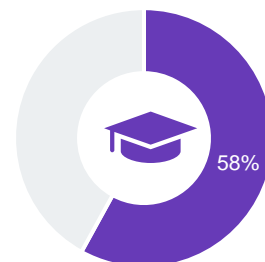
Sources: United Way: Real Cost Measure, 2021. Redfin.com: Median home sale price, 2024. U.S. Census Bureau: race and age, 2017-2022, other demographics, 2023.

Figure 7. Contra Costa County Demographics

A majority of community members are non-White.

White 47%

Asian 18%
- 5% Chinese
- 5% Filipinx
- 3% Asian Indian
- 5% Other Asian

Other 13%

Multi 12%

Black 9%

Native Am 1%

Pac Isl 1%
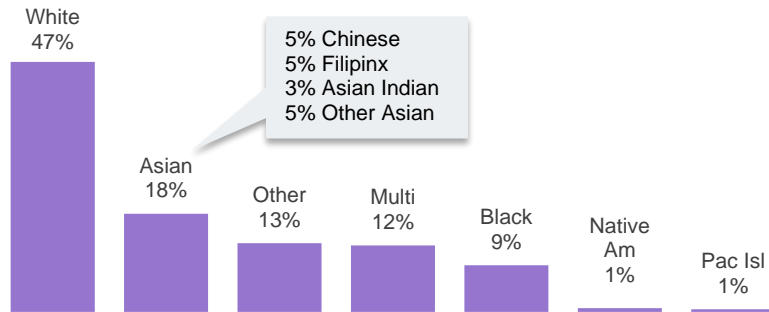
About one-quarter are Latine.

26%

Over one in five people are children.

Under 18 22%

Aged 18-64 61%

Over 64 16%
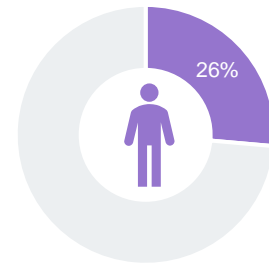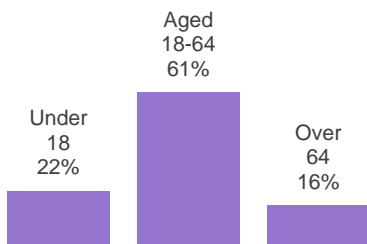
More than one in four people are foreign-born.

28%
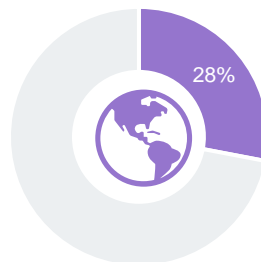
About one in six over age 5 speak limited English.

16%
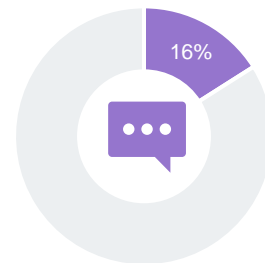
$109,770
household Real Cost Measure (RCM)

$795K
median home sale price

On average, more than one in four households lives below the Real Cost Measure.

26%
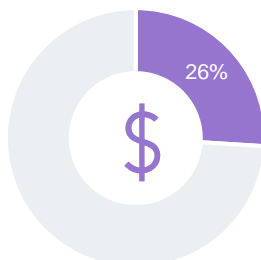
More than one in ten people lives with a disability.

11%
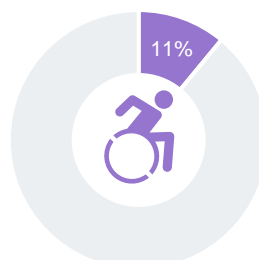
Just over half of people aged 25+ have earned at least a Bachelor's degree.

54%

In this assessment of the health needs in the community, there is a focus particularly on disparities within the community rather than simply in comparison to California or the nation as a whole. The Area Deprivation Index (ADI) is a composite of measures by neighborhood, which includes factors related to social determinants of health: income, education, employment, and housing quality.[9] Although the regionals have substantial resources (see *Appendix 5: Community Assets and Resources*), there is significant inequality in their populations' ADI metrics, which affects health outcomes.

Figure 8. Area Deprivation Index

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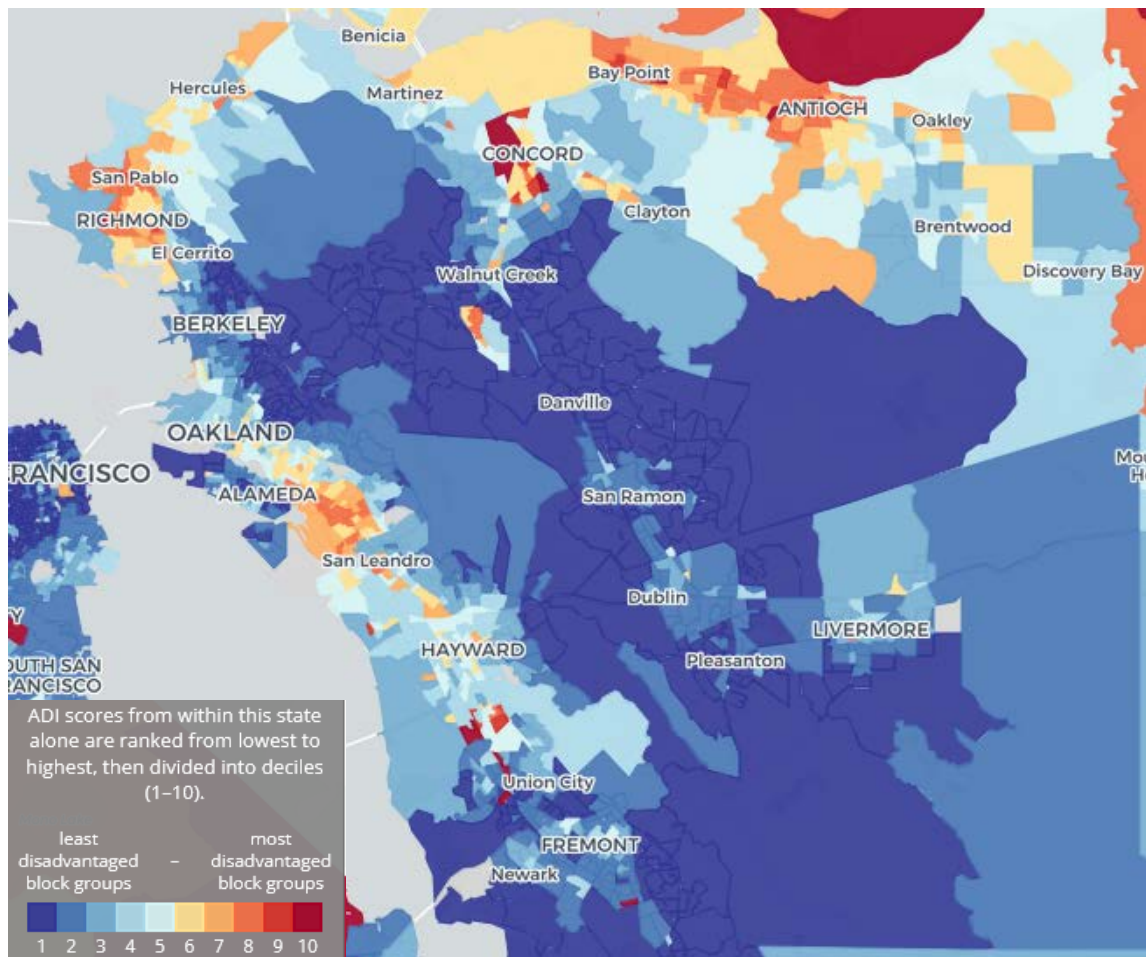
[9] The Area Deprivation Index ranks each Census block group in deciles from 1 to 10, compared to all other California Census block groups; higher deciles are considered worse. For more information, see originators:

Kind, A.J.H. and Buckingham, W. Making Neighborhood Disadvantage Metrics Accessible: The Neighborhood Atlas. New England Journal of Medicine, 2018. 378: 2456-2458. DOI: 10.1056/NEJMp1802313. PMCID: PMC6051533 and University of Wisconsin School of Medicine and Public Health. 2022 Area Deprivation Index v4. Downloaded from https://www.neighborhoodatlas.medicine.wisc.edu/. November 2024.

4. Assessment Team

Hospitals and Partner Organizations

John Muir Health collaborated with the following health systems and organizations to prepare the 2025 CHNA:

- St. Rose Hospital
- Stanford Health Care Tri-Valley
- UCSF Benioff Children's Hospitals
- Washington Health

This group (collectively, "the Collaborative") all contracted with Actionable Insights. Collaborative members also partnered with the following health systems, which consulted with Applied Survey Research (ASR).

- Kaiser Permanente
- Sutter Health

ASR provided data from transcripts of interviews and focus groups that were shared with Actionable Insights to reduce the assessment burden on the community.

Both Alameda and Contra Costa counties' public health departments worked in partnership to facilitate focus groups for the Collaborative.

Identity and Qualifications of Consultants

Actionable Insights, LLC, an independent local research firm, conducted the CHNA on behalf of the Collaborative. This consulting firm managed the assessment process from planning and conducting primary and secondary research through facilitating the identification and prioritization of community health needs and ultimately writing this report. Actionable Insights also shared data collection protocols and secondary qualitative data with CHNA consultants serving other hospitals in the same service areas in order to extend the reach of the assessment while not increasing community burden.

For this assessment, Actionable Insights fielded a team led by Jen van Stelle Brozzo, PhD, and Melanie Espino, the firm's co-founders and principals, along with Emma Schifsky, the firm's research and evaluation manager. Actionable Insights specializes in community health needs assessments, conducting 12 CHNAs for hospitals in the greater Bay Area during the 2024–2025 cycle. The firm also specializes in research and evaluation, helping organizations discover and act on data-driven insights.

More information about Actionable Insights is available on the company's website.[10]

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[10] See https://actionablellc.com/.

5. Process and Methods

The hospitals and health systems listed in Section 4 partnered together on the primary and secondary data requirements of the CHNA. John Muir Health's data collection process took place over nine months in 2024 and culminated in the composition of this report, written in late 2024 and early 2025.

Actionable Insights was contracted by the collaborative to gather primary qualitative data (through key informant interviews and focus groups) and secondary qualitative and statistical data. The phases of the CHNA process are depicted in Figure 9 and described in this section.

Figure 9. The CHNA process included data collection, synthesis, development of the needs list, ranking (prioritization) of needs, and report writing.

Primary Data Collection → Secondary Data Collection → Data Synthesis → Health Needs List → Prioritization → Report Writing

Primary Qualitative Data Collection (Community Input)

Qualitative data was collected to better understand certain topics and subpopulations that are not well understood through the statistical data.[11] Qualitative data were also relied upon to fill previously identified information gaps for which statistical data remain unavailable.

- Qualitative research was conducted through key informant interviews and focus groups. Three strategies for collecting community input were used:
  o Key informant interviews with health experts and community service experts
  o Focus groups with professionals who represent and/or serve the community
  o Focus groups with community members that were conducted by others (e.g., public health departments, other hospitals)

- Individuals representing vulnerable populations[12] were included (e.g., low-income, "minority" groups, or individuals with disabilities, and medically underserved[13]).

- Input from over 300 community members, community leaders, health experts and representatives of various organizations and sectors informed the 2025 CHNA. These representatives either work directly in the health field or in a community-based organization that focuses on improving health and quality-of-life conditions by serving those of vulnerable populations.

- In generating primary research protocols, prior CHNAs were consulted and built upon to focus and refine the protocol questions and topics.

- Both primary and secondary interviews and focus groups were recorded and translated/transcribed into English.

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[11] For example, the experiences of the LGBTQ+ population in Bay Area counties are often obscured by statistics that represent an entire county's population rather than the LGBTQ+ population as a particular sub-group. The 2025 CHNA convened focus groups of LGBTQ+ community members in both counties to better understand the health needs of the LGBTQ+ population in each county.

[12] "Vulnerable" populations, communities, and individuals were formerly referred to as "high-need" populations, communities, and individuals. This term has changed due to statewide regulatory changes under AB 1204. See: California Department of Health Care Access and Information (2022). *HCAI Factsheet Hospital Community Benefits Plans: Vulnerable Populations.*

[13] IRS §501(r)(3) requires that community input include the "low-income, minority, and medically underserved populations."

Key Informant Interviews and Focus Groups

Community members, leaders, and local experts/professionals participated in interviews and focus groups. Some interviews and focus groups gathered local information on a certain topic, such as substance use, and some were with vulnerable populations, such as unhoused individuals.

Consultation with Experts/Professionals/Representatives[14]

- From March to November of 2024, 59 **key informant interviews** and six **focus groups** were held with 123 experts, professionals, and/or representatives from various organizations in Alameda and Contra Costa counties. Interviews were conducted virtually via Zoom for about one hour.

- Prior to each encounter, participants were asked to complete a short online survey:
  - They were asked to identify the health needs they felt were the most pressing among the people they serve. Respondents could choose up to five needs from the list presented to them, which had been identified in their counties in 2022, or could submit needs that were not on the 2022 list.
  - The survey also explained to respondents how their data would be used and asked them to consent to participate and be recorded.[15]
  - Finally, participants were offered the option of being listed in the report and were asked, but not required, to provide some basic demographic information.

- The discussions centered around five questions for each health need that was prioritized by interviewees in the online pre-survey:
  1. How do you see this need playing out; what do you think creates these issues here?
  2. Which populations or geographic areas in the community are affected more than others?
  3. How has this community need changed in the past few years?
  4. What are the biggest challenges to addressing this need?
  5. What is needed in the community (including models/best practices/key resources) to better address this need?

Consultation with Community Members/Leaders

- Between June and October 2024, across Alameda and Contra Costa counties, 20 **focus groups** were conducted with a total of 195 **community members/leaders**.

- Community member focus group participants also provided responses to a pre-survey,[16] and discussions centered on the needs that had received the most votes from prospective participants in the pre-survey. The questions were identical to those asked of experts, but language was modified appropriately for each audience.

See *Appendix 3: Community Leaders, Representatives, and Members Consulted* for a list of individual focus group and interview details. See *Appendix 4: Qualitative Research Materials* for complete protocols used, including pre-surveys.

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[14] ASR conducted extra interviews in lieu of focus groups with experts/professionals or community leaders.

[15] Only individuals who consented to be recorded were interviewed.

[16] Only individuals who consented to be recorded were included in focus groups. To preserve their anonymity, community members are not listed in the report. Participants in community-member focus groups could take the pre-survey online or on paper. In some cases, participants in the focus groups that were conducted by the public health departments were not asked to provide any demographic information.

CHNA Participant Demographics

A total of 318 people participated in key informant interviews or focus groups for the CHNA. Over 90% of participants responded to a pre-survey requesting simple demographics. Figures 10 and 11 show the age ranges and race of respondents (note that individuals could choose more than one race).[17] Three-quarters of respondents identified as female, with nearly all remaining participants identifying as male (N=174).

Figure 10. The average respondent was 51 years old. (N=279)
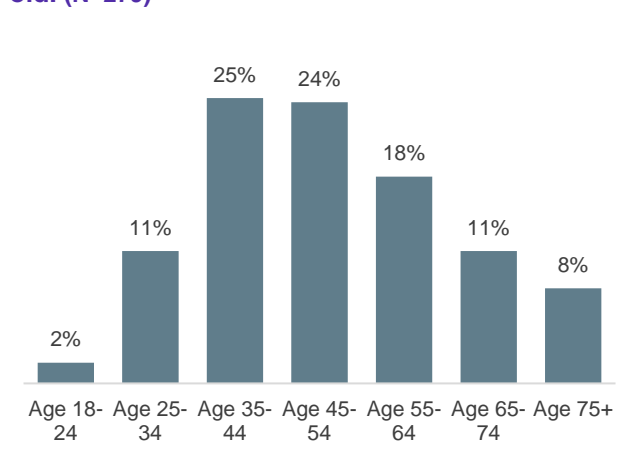
Figure 11. More than one third of respondents were Latine. (N≈290)
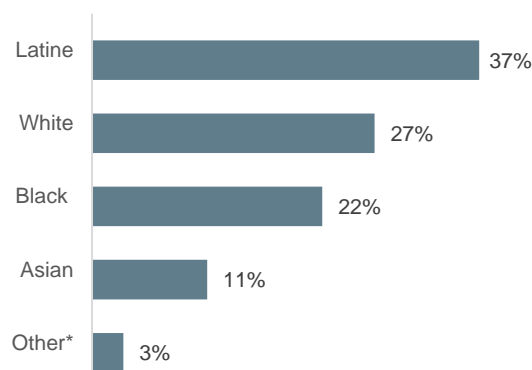
"Other" includes Middle Eastern, Native Am/AK Native, and Native HI/PI.

Community Assets

Professionals who participated in key informant interviews and focus groups were asked to review the assets list from the 2022 CHNA report as it related to their area of expertise and provide updates. This feedback was consolidated by Actionable Insights and updated assets lists are provided in *Appendix 5: Community Assets and Resources.* These assets lists, updated by CHNA participants, were consulted to assess the sufficiency of assets for each health need (see *Data Synthesis* later in this section).

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[17] N=approximately 290; exact number of respondents not available because only summary data were available for some focus groups conducted by Alameda County Public Health.

Secondary Statistical Data Collection

Data sources were selected to better understand general county-level health, specific vulnerable populations, and to fill previously identified information gaps. Additional data on potential health disparities by geographic area and ethnicity were also analyzed when available.

John Muir Health and its consultants (collectively, "the team") analyzed about 300 quantitative health indicators to assist with understanding health needs in Alameda and Contra Costa counties and assist with assessing priorities of the communities. The team collected statistical data from existing sources using County Health Rankings & Roadmaps, which is a public dataset supported by the Robert Wood Johnson Foundation and developed by the University of Wisconsin Population Health Institute.[18] Supplementary data were collected from other online sources such as the California Department of Public Health, KidsData.org, and the U.S. Census Bureau, as well as the two counties' public health departments. The team also used sub-county data when available and a variety of secondary reports and presentations (see *Appendix 1: Secondary Data Reports* and *Appendix 2: Indicators Index* for details).

Local quantitative data were compared to state benchmarks (California averages and rates) to help determine the severity of a health issue and to identify disparities. The following questions were asked:

- How do these indicators perform against accepted benchmarks?
- What are the inequitable outcomes and conditions for community members?

Alameda County Community Assessment, Planning, and Evaluation unit (AC CAPE) and Contra Costa Health Public Health Department (CCPHD) provided 2019-2023 mortality rates overall and by race/ethnicity for requested causes. However, public health departments face difficulty in providing comparable California rates because the specific diagnoses codes used in some published California mortality rates are not always available. In some cases, Actionable Insights used California mortality benchmarks provided by another county's public health department. For Alameda County, Actionable Insights also used the Public Health Department's 2024 report, "Examining Increases in Mortality and Disparities from 2018-2019 to 2020-2021," to gather rates that are comparable to California.

AC CAPE also provided rates for birth outcomes, emergency department visits, and hospitalization discharges (all by race/ethnicity). Again, in some cases Actionable Insights used corresponding California benchmarks provided by another county's health department. When benchmarks were missing for emergency department visit and hospitalization rates, Actionable Insights followed the guidance provided by county partners to give priority to the top preventable reasons for ED visits and hospitalizations (e.g., drug overdoses, asthma) in Actionable Insights' assessment of the statistical data.

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[18] County Health Rankings & Roadmaps. (2024). *Health Data.* Retrieved from https://www.countyhealthrankings.org/health-data.

Information Gaps and Limitations

In this CHNA cycle our study team had access to more statistical data than ever before. This was due in part to local public health departments' efforts to make their data readily accessible to the public, and their partnership in working with us to obtain that information in a format that was easy to use. However, there are some limitations to the data, which affect the ability to fully assess some health issues that were identified as community needs during the 2025 CHNA process:

1. **Differing local measures.** Overall, the study team was challenged with comparing local Emergency Department (ED) visit rates and hospitalization rates across counties and to readily available California benchmarks due to differing local measures. In addition, Contra Costa County lacked a publicly available data dashboard like that which was available in Alameda County. However, local public health departments are working on these issues for future assessments.

2. **Childhood diabetes prevalence.** Because childhood obesity has been a topic of concern in previous cycles, hospitals continue to seek data about childhood diabetes as well, but these data are not publicly available.

3. **Oral health data.** The counties lacked oral health data, including the number of dentists per capita who accept Denti-Cal, individuals with dental insurance, and prevalence of recent dental visits.

4. **Cognitive decline data**. In this assessment the team was able to access Alzheimer's disease (AD)/dementia mortality rates, but not data on the prevalence of cognitive decline by county. While California is among the 10 states with the highest prevalence of AD/dementia (12%), there is no indication that prevalence in the Bay Area is higher than in the state overall. Although the Alzheimer's Association recently studied prevalence in certain counties, it only published data on the five with the highest prevalence, none of which are Bay Area counties.

5. **Emerging or difficult-to-measure topics**. Lastly, some indicators are difficult to measure or are just emerging. For example, statistical information related to adult marijuana use is scarce. Additionally, health-related data are rarely broken out by income/socioeconomic status, limiting our ability to understand disparities by income level.

Data Synthesis: Identification of Community Health Needs

The definition of a community health need includes social determinants of health in addition to morbidity and mortality. For the purposes of this assessment, the definition of "community health" goes beyond traditional measures of the physical health of people residing in a service area to include broader social and environmental determinants of health, such as access to healthcare, affordable housing, childcare, education, and employment. This more inclusive definition reflects the hospital's understanding that many factors impact community health. John Muir Health is committed to supporting community health improvement through upstream (social determinants of health) and downstream (health condition) intervention.

Health Needs Identification Criteria

To be identified as one of the community's prioritized health needs, an issue had to meet certain criteria, depicted in Figure 12 and described below.

1. Meets the definition of a health need (see the *Definitions* box, right).

2. At least two data sources for the health issue are available for the service area.

3. Meets the community priority criterion: Prioritized (i.e., voted in top five to discuss) by at least one-third of all community input cases (interviews and focus groups combined).

4. Meets the statistical data criteria:

    a. Multiple indicators are worse than the state by 5% or more, or

    b. At least one indicator is worse (or worsening) and there are few available resources, or

    c. Multiple disparities by race/ethnicity or other factors (e.g., by income) are a concern.

DEFINITIONS

Data source: Either a statistical dataset, such as those found throughout the California Cancer Registry, or a qualitative dataset, such as the material resulting from interviews and focus groups.

Health risk: A behavioral, social, environmental, economic, or clinical care factor that impacts health. May be a social determinant of health.

Health need: A poor health *outcome* and its associated *risk(s)*, or a risk that may lead to a poor health outcome.

Health outcome: A snapshot of a disease/health event in a community that can be described in terms of both morbidity (illness or quality of life) and mortality (death).

Health indicator: A characteristic of an individual, a population, or an environment that can be measured (directly or indirectly) and used to describe one or more aspects of the health of an individual or population.

Figure 12. How a Health Need Is Identified.
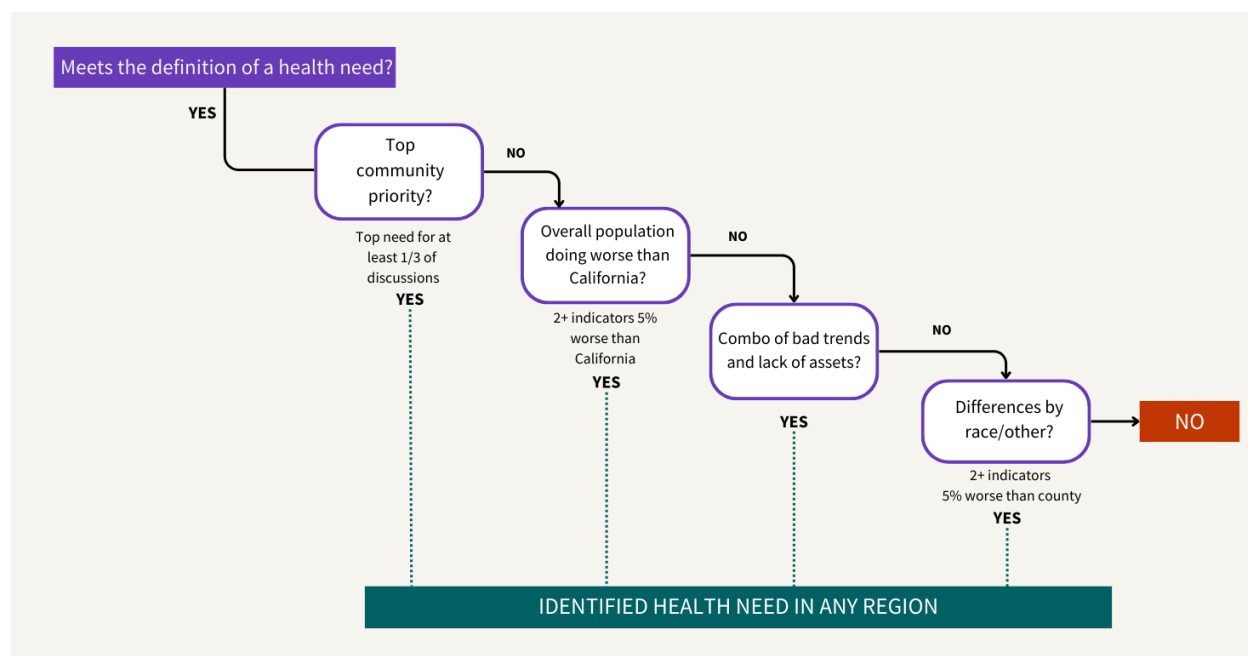
The team analyzed data on a variety of issues, including secondary statistical data (e.g., from County Health Rankings & Roadmaps) and primary and secondary qualitative data from key informant interviews and focus groups. Then, the criteria listed in Figure 12 were applied to the synthesized data for each

issue to evaluate whether each one qualified as a prioritized health need. All collaborating hospitals used the same criteria for needs identification. In 2025, this process led to the identification of 12 community health needs that met all of the criteria. The list of needs, in priority order, is found in Table 1 below. Note that John Muir Health's qualitative dataset was customized for its service area, as were most other local hospitals' qualitative datasets. Therefore, each hospital's health needs may have slightly different names from other hospitals' needs. For example, some hospitals chose to merge housing into the health need called "Economic Stability," while others chose to let housing stand alone as a separate need.

For further details about each of these health needs, including statistical data, see *Section 6: Prioritized 2025 Community Health Needs*.

Prioritization of Community Health Needs

Per IRS requirements, John Muir Health used the priorities expressed by the community to rank the health needs list generated from the Community Health Needs Assessment. Needs are rank-ordered by the extent to which they were prioritized as one of the top five needs by all key informants and focus groups combined. For the CHNA process, some hospitals elected to use additional criteria that added to the community prioritization ranking of their needs. Therefore, each hospital's list of health needs, for the same region, may be listed in a different order. The following 12 health needs are presented in community priority order (with 1 being the highest priority) according to the community input received by John Muir Health for each of its areas/regions. The 2025 community health needs were ranked similarly across John Muir Health's service area, with Economic Stability as the top community priority in every region except Tri-Valley, where it ranked second after Behavioral Health. (See *Section 6: Prioritized 2025 Community Health Needs* for a summarized description of each need.)

Table 1. Prioritized Health Needs by John Muir Health Service Area

Rank	Combined Service Area	Northern Alameda	Tri-Valley	Eastern Contra Costa	Central Contra Costa	Western Contra Costa
1	Economic Stability	Economic Stability	Behavioral Health	Economic Stability	Economic Stability	Economic Stability
2	Behavioral Health	Behavioral Health	Economic Stability*	Housing	Behavioral Health	Behavioral Health*
3	Housing	Housing	Housing*	Behavioral Health	Housing	Housing*
4	Healthcare Access & Delivery	Structural Racism/ Discrimination	Healthcare Access & Delivery	Healthcare Access & Delivery	Healthcare Access & Delivery	Structural Racism/ Discrimination
5	Structural Racism/ Discrimination	Healthcare Access & Delivery	Structural Racism/ Discrimination	Structural Racism/ Discrimination	Structural Racism/ Discrimination	Healthcare Access & Delivery
6	Community & Family Safety	Community & Family Safety	Community & Family Safety	Community & Family Safety	Community & Family Safety	Community & Family Safety

Rank	Combined Service Area	Northern Alameda	Tri-Valley	Eastern Contra Costa	Central Contra Costa	Western Contra Costa
7	Climate/Natural Environment	Climate/Natural Environment	Climate/Natural Environment**	Climate/Natural Environment	Climate/Natural Environment	Climate/Natural Environment
8	Cancer*	Cancer*	Heart/Stroke**	Cancer*	Cancer	Maternal/Infant Health**
9	Heart/Stroke*	Maternal/Infant Health*	Cancer	Maternal/Infant Health*	Maternal/Infant Health	Sexual Health**
10	Maternal/Infant Health	Heart/Stroke**	Maternal/Infant Health***	Heart/Stroke**	Heart/Stroke*	Cancer***
11	Sexual Health**	Sexual Health**	Sexual Health***	Sexual Health**	Sexual Health*	Heart/ Stroke***
12	Unintended Injuries**	Unintended Injuries**	Unintended Injuries	Unintended Injuries**	Unintended Injuries*	Unintended Injuries***

* Community priority level tied.
** Community priority level tied.
*** Community priority level tied.

6. Prioritized 2025 Community Health Needs

The processes and methods described in Section 5 resulted in the prioritization of 12 community health needs (see list in *Table 1*, previous page). Each description in this Section 6 summarizes the data, statistics, and community input collected during the Community Health Needs Assessment.

As noted in the introduction to this report, the definition of "community health" in this assessment extends beyond traditional measures of the physical health of community members to include broader social determinants of health, such as access to healthcare, affordable housing, education, and employment. This more inclusive definition reflects the understanding that many factors impact community health.

The assessment found that social determinants of health underlie many of the physical and behavioral health needs in addition to being identified as needs in and of themselves. Many participants highlighted housing insecurity and homelessness as significant barriers to health. Economic issues, including the high cost of living, income instability, and employment challenges were also commonly identified as major factors determining health.

When describing those who were most greatly affected by the needs, participants in all areas frequently named low-income individuals and families, BIPOC (Black, Indigenous, and People of Color, in particular Black and Latine) communities, individuals experiencing homelessness, older adults, people with disabilities (including wheelchair users and those with intellectual and developmental disabilities), refugees and immigrants (including the undocumented and people not proficient in English), single mothers, teenagers, and LGBTQ+ communities as the primary populations disproportionately affected.

Economic Stability

What is the issue?

Economic stability has been defined as the ability of people to cover their basic needs sustainably, in a manner that allows them dignity and self-respect.[19] Higher income and social status, often achieved through attainment of higher education, have each been linked to greater health. Research shows that access to economic stability programs such as CalFresh (formerly called food stamps) results in better long-term health outcomes.[20]

How was economic stability identified as a need?

Economic stability, including education, workforce development, and food security, was one of the highest-priority health needs in key informant interviews and focus group discussions. The high cost of living was a key theme among CHNA participants in all areas. Participants stated that wages from full-time employment were often insufficient to meet the costs of rent and living expenses. They indicated that this led to economic strain and forced people to work multiple jobs or cut back on essentials like healthy food. Many also pointed out the correlation between economic and food insecurity, with some noting a substantial increase in food insecurity since the 2020 pandemic.

"It used to be the cheaper food was the unhealthy food, but at this point I feel like the experience is all the food is expensive."

– Community Member Focus Group Participant, Alameda County

The populations of highest concern included individuals on fixed incomes (such as older adults), BIPOC individuals, families with children, and young adults who are newly attempting to establish themselves in the workforce.

*"People who are just starting, especially, like, 20 year olds...
the job market is just so flooded that most people who work at places
that were considered teenager jobs, like McDonald's,
it's all adults now, who need that kind of money."*

–Community Member Focus Group Participant, Contra Costa County

Regarding other specific populations, some participants noted that immigrants can face additional challenges due to documentation issues, which can consequently limit their employment opportunities. Some explained that other common economic challenges, such as needing to work multiple jobs, hinder students' ability to focus on education, effectively deterring or diminishing their long-term economic prospects.

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[19] International Committee of the Red Cross. (2020). *Economic Security Strategy 2020-2023.*

[20] Center on Budget and Policy Priorities. (2018). *Economic Security, Health Programs Reduce Poverty and Hardship, With Long-Term Benefits.*

"We have had countless students drop out of different training programs [like] nursing… because they need a job right now and [the training] is not paid. I had one student who was doing really well and then she was like, 'I just got an eviction notice. I have to drop out because I need to go get a job today, so I don't end up homeless.' …It's having to go through unpaid training, full time, all day, so it's difficult for them to work a second job or even work part time …and that's really making the healthcare field unattainable for a huge demographic of folks that could really, really thrive in this field."

–Focus Group Participant, Alameda County

Several participants felt economic instability is linked to broader systemic issues, such as hiring discrimination and inadequate local resources. Data show that there are greater gender pay gaps in both counties compared to California overall. There are also substantial disparities in median income by race/ethnicity in both counties.

Figure 13. Median household income varies substantially by race/ethnicity.
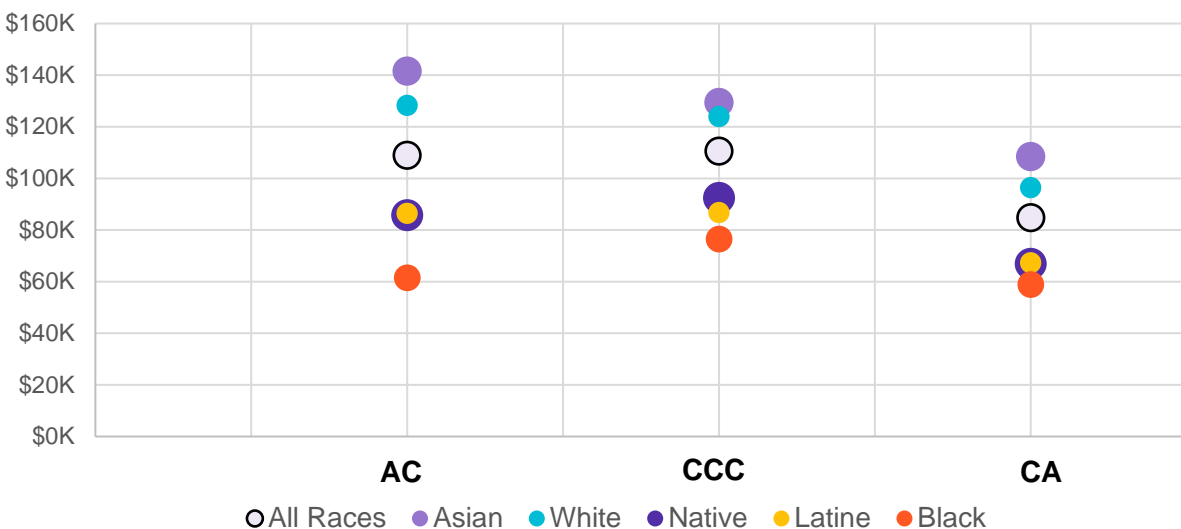
Notes: Dot size varies to show overlap. Source: U.S. Census Bureau Small Area Income and Poverty Estimates, 2021. Source: US Census Bureau Small Area Income and Poverty Estimates. Retrieved from County Health Rankings, June 2024.

In addition, statistical data gathered specifically for the Tri-Valley cities show clear variations in poverty rates by race/ethnicity versus the representation of each race/ethnicity in the cities. For example, while less than one in seven (13%) of Pleasanton's population identifies as Latine, close to one in four (23%) of those below the Federal Poverty Level are Latine (see *Figure 14*, next page).

Figure 14. Black and Latine individuals are overrepresented among people in living in poverty in the three Tri-Valley cities.
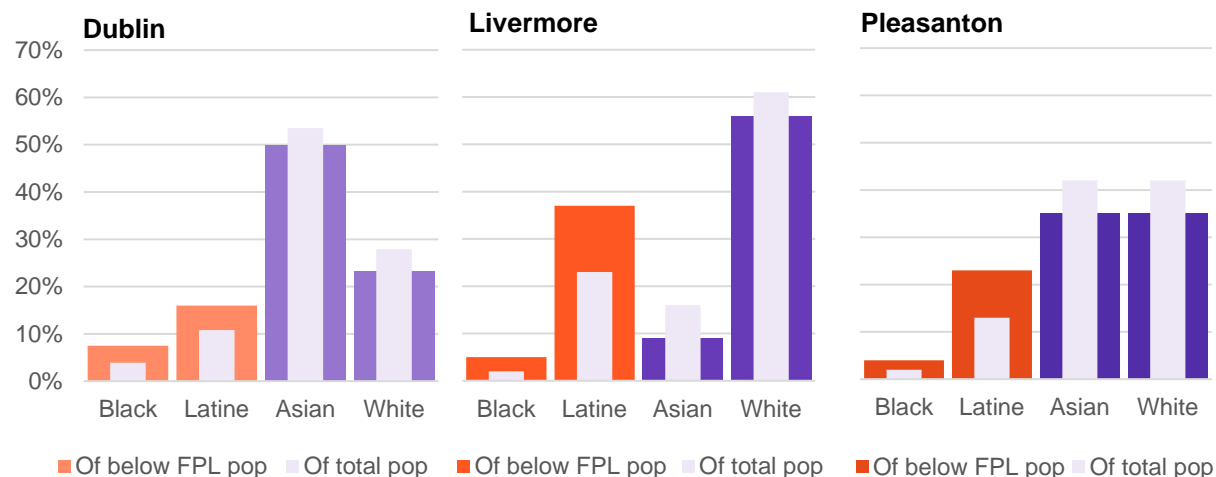
Source: Eastern Alameda County Human Services Needs Assessment, January 2024; data: U.S. Census Bureau ACS 5-year estimates, 2017–2021.

High dropout rates and lower academic performance compared to state and national averages were highlighted by some CHNA participants. There was also concern that the K-12 system focuses too much on graduation rates without adequately preparing students for post-secondary education or vocational training that leads to living-wage jobs.

In Alameda County, Latine students were more likely than students of other ethnic groups to drop out before graduation, while in Contra Costa County, Black students were the most likely to drop out. Math and reading performance are also notably worse among both counties' Black and Latine children. In the Tri-Valley cities, while high school graduation rates showed relatively high rates across all racial/ethnic groups, it is clear that there are disparities in college preparation rates, with Black and Latine students in the Tri-Valley substantially less likely to be prepared for college than their peers of other races/ethnicities. Education has generally and historically correlated directly with income, so educational statistics that differ by race/ethnicity are particularly concerning to CHNA participants.

*"You can't expect much from a student academically
if their other needs are not being met."*

–CHNA Interviewee, Contra Costa County

Figure 15. Math and reading performance is notably worse among Black and Latine students.

Math — Reading

Legend: California (yellow), Alameda County (purple), Contra Costa County (light purple)

Y-axis: Average Grade-Level Performance Among 3rd Graders (scale 1 to 4), "Expected" line at 3

Categories: Asian, White, Hispanic, Black
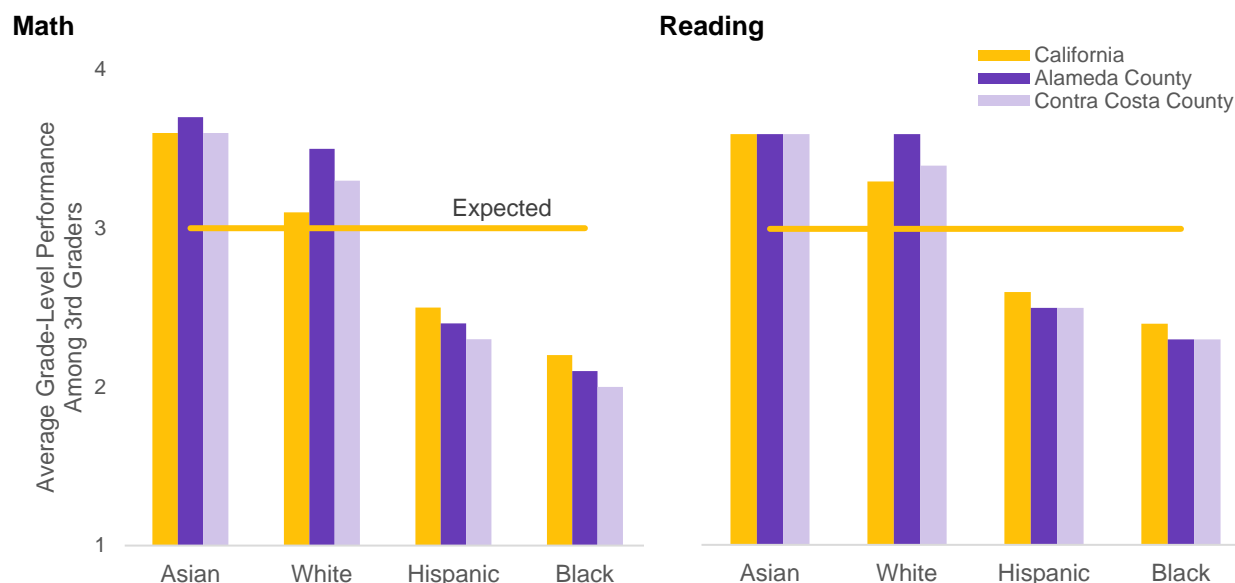
Source: California Dept. of Education, Test Results for California's Assessments. 2022. As cited on KidsData.org.

What was notable by geography?

Eastern Contra Costa County participants focused more than most other participants on low-income families (especially single parents) struggling with housing and economic instability, barriers like poor internet access, issues of affordability and availability of nutritious food, and uniquely on teacher turnover due to low pay.

Central Contra Costa County participants, more than most, emphasized income disparities and insufficient employment opportunities. They were unique in discussing distrust in formal education, a lack of teachers who reflect student backgrounds, and disparities in school resources.

Tri-Valley participants spoke about how pockets of economic need are overlooked due to the region's overall affluence, and were more likely to mention disparities in LGBTQ+ youth support across schools. There were also discussions about the need for after-school and language programs. They uniquely mentioned the lack of a school bus system and its impact on school access.

Western Contra Costa County participants spoke more than others about "food apartheid," which they explained was food insecurity seen as a systemic issue that is tied to economic and racial disproportionalities. They also focused more on biases in discipline, resulting in absenteeism and lower graduation rates for BIPOC students.

Northern Alameda County participants spoke more to the link of community violence and crime to absenteeism and academic performance, emphasizing the need for safe spaces in schools. They stressed the need for non-college pathways, like apprenticeships, to more effectively engage students. Participants emphasized challenges like underpaid workers needing multiple jobs and reliance on food banks despite employment. Like participants in Western Contra Costa County, they connected food insecurity to societal racism and systemic economic instability.

Behavioral Health

What is the issue?

Behavioral health refers to both mental health and substance use. Mental health—defined as social, emotional, and psychological well-being—plays a key role in a person's overall wellness, ability to have healthy and maintain healthy relationships, and function in society.[21] The use of substances such as alcohol, marijuana, and other legal or illegal drugs affects not only the individuals who use them, but also their families and communities.

How was behavioral health identified as a need?

Behavioral health was one of the highest-priority health needs in interviews and focus group discussions. Across all five areas, key informants and focus group participants expressed strong concern about poor mental health and substance use. Participants stated that stress, anxiety, and loneliness were some of the leading factors contributing to these issues, which had been exacerbated by the COVID-19 pandemic.

"I think the increase in loneliness and isolation has had a big impact on all kinds of behavioral health conditions."

– CHNA Interviewee, Alameda County

"Just seeing the impacts of isolation, particularly following the pandemic, …folks that already had very little community in their lives, that just absolutely decimated it."

– Focus Group Participant, Alameda County

"I'm mostly alone, I don't really have anyone to talk to. It's hard to find friends or …anyone to discuss anything with outside school."

– Youth Participant, Eastern Alameda County Needs Assessment

A number of participants indicated that social media and technology are contributing factors to mental health issues among teenagers. However, suicide mortality rates did not surpass the state rate (10 per 100,000) in either county overall.

CHNA participants discussed how they felt that the pandemic has led to an increase in substance abuse as a coping mechanism for stress and anxiety. Self-medication with substances is common among those struggling with mental health issues, which often leads to addiction. Experts who participated in the CHNA indicated that substance use is prevalent among the unhoused population, with high rates of co-occurring mental health and substance use disorders.

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[21] Substance Abuse and Mental Health Services Administration. (2023). *What is Mental Health?*

CHNA participants in both counties pointed out that there was a relative lack of behavioral healthcare access due to the insufficient supply of mental healthcare practitioners and substance use treatment options. The ratio of community members to mental health providers is notably higher (worse) in Contra Costa County (260:1) compared to the ratios in California overall (236:1) or Alameda County (140:1). Contra Costa County also has three Mental Health Professional Shortage Areas (HPSAs), while there are no mental health HPSAs in Alameda County.

A number of experts who participated in the CHNA described the lack of full integration of mental health and substance use services as a significant barrier to people receiving treatment, especially because substance use often co-occurs with mental health issues. This obstacle makes it difficult to address one without considering the other.

Statistics suggest that substance use is an issue to varying degrees in both counties. For example, in Contra Costa County, the proportion of people who engage in binge (or "excessive") drinking is higher than in California overall, as is the proportion of alcohol-impaired driving deaths. Also, tobacco use (current smoking) is higher in both Alameda and Contra Costa counties compared to the state. Opioid overdose mortality in Contra Costa County makes up more than half of all overdose mortality: There are 13.6 overdose deaths per 100,000 from opioids in Contra Costa County compared to 19.8 from all drugs.

What was notable by geography?

Eastern Contra Costa. The area's suicide rate (10.2 per 100,000) was higher than in other parts of the county. There are Mental Health Professional Shortage Areas (HPSAs) in Pittsburg and the eastern part of Brentwood. Deaths of despair (suicide, drug overdose, and alcohol-related liver disease) are highest here compared to the three regions (47.4 per 100,000). Opioid overdose mortality is also highest here.

Western Contra Costa. Central Richmond has a Mental HPSA.

Tri-Valley. Livermore community members have notably higher rates of depression (20%) and suicide (9.8 per 100,000) than Alameda County community members overall (16% and 8.6 per 100,000 respectively).[27]

Other regions did not have notable differences.

""The opioid overdose numbers in our county are part of a national trend... very high by historical standards."

– CHNA Interviewee, Contra Costa County

There was recognition of collective trauma within marginalized communities, especially among LGBTQ+ individuals facing societal discrimination and political challenges. Some participants pointed out that trauma, especially in childhood, plays a role in predisposing individuals to substance use. Concerns were raised by CHNA participants about substance use among youth, particularly related to fentanyl and the ease of access to drugs in general. Youth participants in the Eastern Alameda County Human Services Needs Assessment (2024, p. 70) "expressed frustration about the widespread substance use (smoking, vaping, drugs) in their schools." Both they and participants of JMH's CHNA emphasized non-stigmatizing education as critical.

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[22] Eastern Alameda County Human Services Needs Assessment report, January 2024; data: CDC BRFSS Places, 2021.

CHNA participants in all areas also described issues with appropriately tailored delivery of care. They stated that mental healthcare services are often not adapted or modified to the specific needs of individuals, which can lead to inadequate care and support for those who seek it. Addressing language barriers (especially for the Latine community) and cultural stigma were both mentioned in regard to tailored care. Additionally, there was a particular emphasis on the importance of mental health services for mothers.

Across all five areas, the common populations of concern related to behavioral health needs included LGBTQ+, Black and Latine communities, youth, unhoused individuals, and justice-involved individuals. For youth in Alameda and Contra Costa counties, mental diseases and disorders represented the highest proportions of child hospital discharges, more than double the next-highest primary diagnosis in each county.

Figure 16. The top reason for child hospitalizations is mental diseases and disorders.
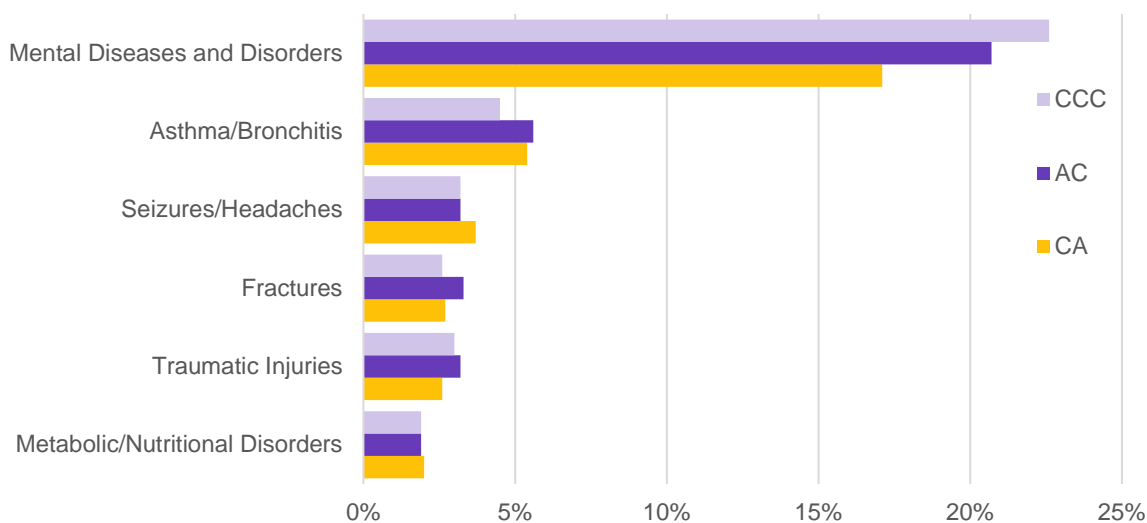
Source: California Dept. of Health Care Access and Information custom tabulation. 2021. As cited by KidsData.org.

Housing

What is the issue?

The physical condition of a home, its neighborhood, and the cost of rent or mortgage are strongly associated with the well-being, educational achievement, and economic success of those who live inside it.[23] Poor health can lead to homelessness, and vice versa. People experiencing homelessness suffer from preventable illnesses at a greater rate, require longer hospital stays, and have a greater risk of premature death than their peers with housing security.[24]

How was housing identified as a need?

Housing was one of the highest-priority health needs in interviews and focus group discussions. CHNA participants in all areas emphasized the lack of housing affordability. Participants spoke to rising rent costs and lack of affordable housing options as major issues for many community members, which they felt led to overcrowded living conditions. It was also mentioned that housing insecurity can force people to stay in unsafe situations (such as being exposed to domestic violence) or move into unsafe conditions (such as living in their car).

"A lot of people go homeless [but] don't talk about it. People hide it, like staying in the car or finding somewhere to live or even be with a family member that after a couple of days, they don't want you there."

– Community Member Focus Group Participant, Contra Costa County

Participants discussed barriers to housing, including high income requirements for rentals, discrimination against immigrants, and lack of tenant rights awareness. Several participants described the lingering effects of red-lining (residential segregation).[25] In both counties, data show that BIPOC populations are disproportionately represented among those who are rent-burdened.

What was notable by geography?

Eastern Contra Costa County participants focused more than others on the broader community impacts of housing problems and cross-sector support systems. There was a large increase in unsheltered individuals (31%) between 2023 and 2024, primarily in Antioch, Oakley, and Pittsburg.

Central Contra Costa County participants were more likely than others to mention poor living conditions, exploitation, and tenants' rights

Tri-Valley participants made larger systemic critiques of housing issues. Homeless count numbers in Livermore and Dublin rose in 2024 versus 2022. Livermore also has the highest proportion of cost-burdened renters (50%) compared to its two sister cities, higher even than Alameda County overall (47%).

Western Contra Costa County participants uniquely mentioned displacement due to economic pressures.

Northern Alameda County participants were more likely than others to discuss the complexity of housing programs and uniquely mentioned veterans as an affected population.

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[23] Pew Trusts/Partnership for America's Economic Success. (2008). *The Hidden Costs of the Housing Crisis.* See also: The California Endowment (2015). *Zip Code or Genetic Code: Which Is a Better Predictor of Health?*

[24] O'Connell, J.J. (2005). *Premature Mortality in Homeless Populations: A Review of the Literature.* Nashville, TN: National Healthcare for the Homeless Council.

[25] Knopov, A., Rothman, E.F., Cronin, S.W., Franklin, L., Cansever, A., Potter, F., Mesic, A., Sharma, A., Xuan, Z., Siegel, M. and Hemenway, D. (2019). The role of racial residential segregation in black-white disparities in firearm homicide at the state level in the United States, 1991-2015. *Journal of the National Medical Association.* 111(1): 62-75.

"The requirements... they're impossible to meet. Like right now, they're asking you for more than what you're making. And also the deposits, essentially you have to pay like three months of rent to get a place."

—Community Member Focus Group Participant, Contra Costa County

Housing quality has been shown to have a direct impact on health as well. For example, contact with lead from peeling paint in older homes can be very harmful to children's development. Larger proportions of children who were tested in Alameda and Contra Costa counties had high blood lead levels compared to children statewide.

Participants indicated that homelessness is also increasing as a consequence of the obstacles mentioned above and the lack of affordable housing. Overall homelessness is rising in Contra Costa County, while in Alameda County the proportion of individuals experiencing chronic homelessness is worsening. Many participants noted that homelessness is often linked to other issues like mental health problems and substance abuse.

Figure 17. Black and Latine renters face higher rates of housing cost burden than other groups. Cost burdened households spend more than 30% on housing costs. Severely-cost burdened households spend more than 50% on housing costs (darker shade).
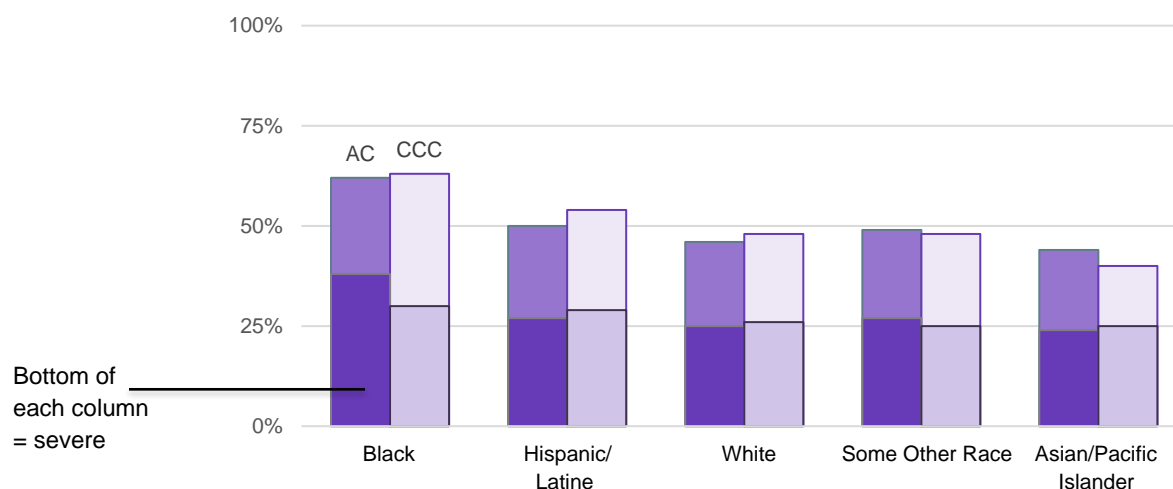
Source: California Housing Partnership, 2021-2022.

"Homelessness is increasing by the second, by the minute, by the hour, by the day. And [I see it] especially amongst our youth... Something has to change."

– Community Member Focus Group Participant, Contra Costa County

Healthcare Access and Delivery[26]

<div style="background-color:purple;color:white;">

What is the issue?

Access to affordable, comprehensive, quality healthcare is important for improving health and increasing quality of life.[27] For most people, access to care means having insurance coverage, being able to find an available primary or specialty care provider nearby and receiving timely delivery of care. Delivery of care involves the quality, transparency, and cultural competence/humility with which services are rendered. Limited access to care and compromised delivery affect people's ability to reach their full potential, diminishing their quality of life.

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How was healthcare access and delivery identified as a need?

Healthcare access and delivery was prioritized in about half of all interviews and focus groups. CHNA participants focused on the ever-present barriers to healthcare access, including lack of insurance coverage and economic obstacles (e.g., affordability of care). Some participants also mentioned long wait times for appointments (including for mental health services) and bureaucratic hurdles that persist in navigating the healthcare system in general.

"The whole system of health insurance doesn't meet the needs of low-income people... even when somebody has full insurance, because of the cost of copays and deductibles."

– CHNA Interviewee, Alameda County

"The cost of it is so prohibitive... There are people that just go without basic healthcare out of fear of being strapped with some bill."

—Service Provider Interviewee, Alameda County

"Why is healthcare just in general so much less expensive in places like Southeast Asia or Mexico? ...He needed a lot of dental work. He didn't have it done here. He went to Mexico."

– Community Member Focus Group Participant, Contra Costa County

Barriers also included geographic obstacles; rural or less-populated areas lack nearby hospitals, clinics, and specialty services like dental care, necessitating long travel distances for medical care when transportation can also be a barrier (e.g., where public transit access in rural areas is lacking).

"It does impose barriers when they're not able to get to that specialty appointment. You know, we can only do so much in primary care. When patients are really sick, not having access to specialty care just eventually leads to inpatient care at a hospital."

- Expert Interviewee, Alameda County

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[26] See *Behavioral Health* need description for issues related to mental healthcare and substance use treatment access.

[27] County Health Rankings & Roadmaps. (2024). *Access to Care*.

In addition to economic and geographic restrictions, some participants noted that undocumented immigrants face unique challenges in accessing healthcare due to legal and bureaucratic barriers.

Participants also spoke of shortages of healthcare providers, particularly within county health systems, leading to longer wait times and reduced access to care. It was mentioned that the increase in the number of patients enrolled in programs like Medicaid has not been matched by an increase in healthcare providers. On the subject of dental healthcare specifically, the sole designated Dental Health Professional Shortage Area (HPSA) in the two counties is in Richmond.

> *"[One of our students needed] several teeth pulled, and we worked on it for probably a year or 18 months to get the appointments."*
>
> *– Interviewee, Alameda County*

Statistics show that in both Alameda and Contra Costa counties, ratios of community members to primary care providers are better (lower) than the ratio among Californians overall. However, ratios of community members to other primary care professionals (e.g., physicians assistants) are worse (higher) in both counties compared to the state (see *Figure 18* below).

Figure 18. The ratio of community members to non-physician primary care providers are worse in both counties compared to California overall.

CA, 1256
AC, 1496
CCC, 1739

# of Community Members to Each Non-PCP Provider
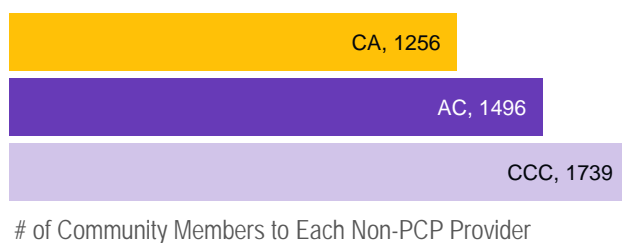
Source: Centers for Medicare & Medicaid Services, National Provider Identification, 2022.

What was notable by geography?

Eastern Contra Costa County participants focused more than others on healthcare delivery, being more likely to discuss racial disparities in access and treatment, language barriers (especially for dentistry), the issue of differences in cultural practices, and to emphasize the lack of access for individuals experiencing homelessness. Participants in this area were the most likely to mention the trend of people seeking healthcare abroad due to cost.

Central Contra Costa County participants were more likely than others to mention the need to educate the community about existing healthcare resources, and to highlight the "cliff effect," where small income increases disqualify individuals from programs like Medicaid.

Tri-Valley participants were more likely than most to talk about a relative lack of local specialists and the burden of traveling long distances for care, and were unique in mentioning a lack of childcare as an access barrier and in describing quality concerns regarding dental care. Ratios of community members to primary care nurse practitioners (NPs) are worse in Livermore (8,840 community members to each NP) and Dublin (4,107 per NP) compared to the state (2,324 per NP).

Western Contra Costa County participants emphasized more than others the shortage of healthcare workers as a major challenge to healthcare access, focused more on the need for patients to advocate for themselves (reflecting personal frustrations with the larger healthcare system), and highlighted how discomfort or pain from dental issues impacts educational performance, making the link between health and learning outcomes. There is a dental HPSA in Richmond.

Northern Alameda County participants were more likely than others to focus on a lack of trust in the healthcare system among communities of color, which they linked to institutional racism. They also emphasized more strongly than others the need for healthcare services in community settings like schools.

Access among public school students to school nurses is also worse in both counties compared to such access statewide.

In both counties, the rates of preventable hospitalizations are highest for BIPOC populations (especially Black and Latine). A higher rate of preventable hospital stays may be a sign of inequitable access to high-quality care.

Figure 19. In both counties, Latine and Black older adults are hospitalized for preventable causes significantly more often than in California overall.
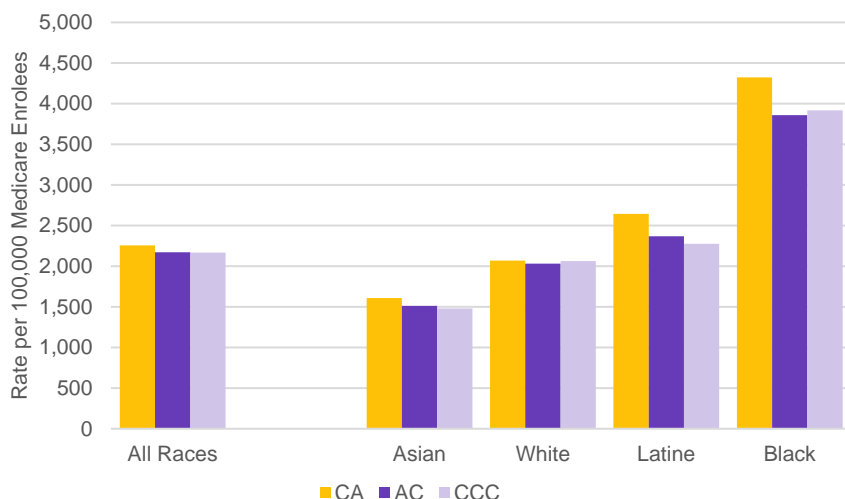
Definition: Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. Source: Mapping Medicare Disparities Tool, 2020.

With regard to healthcare delivery, some CHNA participants emphasized the need for healthcare services to be more culturally sensitive and considerate of personal preferences, noting that some of the common current practices often disregard cultural and individual differences. There were also concerns expressed about the quality of care, citing issues such as long wait times, lack of follow-up, and perceived indifference or outright disrespect by healthcare providers.

"Language is sometimes a barrier...
When we are lucky enough to understand each other, that's good, isn't it?
But when we are not—I have seen people who want to communicate with
the doctors, the nurses, but they [the providers] just don't."

—Community Member Focus Group Participant, Alameda County

Structural Racism/Discrimination

What is the issue?

Racism/discrimination, both interpersonal and systemic, has been shown to be one of the fundamental causes of health disparities and disease in the U.S. The impact of these disproportionalities on the health of Americans is as severe as it is extensive. Throughout the country and locally, racial and ethnic minority populations continue to experience higher rates of poor health and disease across a wide range of health conditions, especially when compared to their White counterparts.[28] Other populations, such as individuals with disabilities or those identifying within LGBTQ+ communities, also experience varying degrees and forms of discrimination. This assessment considers systemic racism and discrimination as a root cause of health disparities, detailed in the other health need descriptions.

How was structural racism/discrimination identified as a need?

In all five regions, close to half of all key informants and focus group participants identified racism/discrimination, whether interpersonal or systemic, as a community priority to be addressed. CHNA participants explained that such discrimination is a continuous and pervasive issue and can manifest in various forms, including higher levels of incarceration and under-resourced neighborhoods, which negatively impact health outcomes.

> *"Structural racism plays out near constantly, and it's pervasive...people of color experience a near-constant hypervigilance around our race."*
>
> *—CHNA Interviewee, Alameda County*

Participants stated that healthcare disparities are evident, with people of color, low-income individuals, and people with limited English proficiency receiving lower-quality care and facing stigmatization. Some participants indicated that institutional discrimination in healthcare directly results in poorer health outcomes for marginalized groups, such as higher infant mortality rates among Black women.

Additionally, some participants noted that the lack of representation and inclusivity in hiring practices within organizations serving communities of color is a significant issue, while others spoke about workplace discrimination against individuals with disabilities.

> *"For me, [being] Black, it's always discrimination. Discrimination is alive, and we're at the bottom of the totem pole."*
>
> *– Community Member Focus Group Participant, Alameda County*

> *"I think there's also an incredible bias against people in the IDD [Intellectual and Developmental Disabilities] community. People are judged before they walk in. Decisions are already made."*
>
> *— Community Member Focus Group Participant, Contra Costa County*

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[28] Centers for Disease Control and Prevention (CDC). (2021). *Racism and Health.*

Many noted that discrimination can intersect across race, disability, economic status, and sexual orientation, further compounding the challenges faced by individuals. Some said LGBTQ+-identifying individuals experience discrimination in housing, with landlords making it difficult for them to secure rentals. Youth in particular expressed concern about various forms of discrimination they experience among students while at school.

"Another thing I wish would not be present at school is the homophobia, the transphobia, racism, all of that hate. There's so much promotion of 'this is a safe space or inclusive.' But then I have walked across campus and heard one of my friends be called [derogatory terms] five times. And that's not something that anyone should have to experience."

– Youth Participant in Eastern Alameda County Needs Assessment

Some CHNA participants mentioned that historical policies like redlining have created long-lasting disparities in housing, leading to displacement and limited access to affordable long-term housing. Others spoke to economic barriers that disproportionately affect communities of color. Several stated specifically that racism is embedded in the criminal justice system, leading to higher incarceration rates for people of color that later translate into worse economic outcomes, such as homelessness. Another participant noted that educational disparities are perpetuated by under-resourced schools in communities of color, affecting BIPOC community members' long-term opportunities and outcomes. Participants indicated that addressing societal racism and discrimination requires broader systemic changes across multiple sectors, including housing, healthcare, education, and employment.

What was notable by geography?

Eastern Contra Costa County participants were more likely than others to mention gender discrimination and stigma experienced by individuals with mental health issues.

Central Contra Costa County participants focused more than others on disability discrimination and specific housing discrimination issues

Tri-Valley participants uniquely mentioned concerns about resistance to cultural events (e.g., festivals) and were more likely than others to discuss the long-term effects of disinvestment in infrastructure.

Western Contra Costa County participants spoke more than others to individual experiences of micro-aggressions (indirect or subtle acts of discrimination) as well as discussing implicit biases.

Northern Alameda County participants addressed systemic racism more broadly across sectors than participants in other areas and were more likely to mention discrimination against older adults.

Figure 20. Life expectancy is lowest for Black people in both counties.
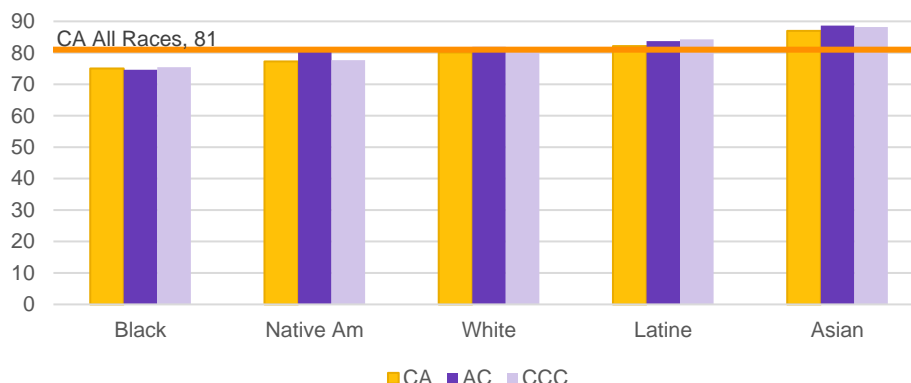
Source: National Center for Health Statistics - Mortality Files, 2018-2020, as cited by Community Health Rankings (Robert Wood Johnson Foundation).

Community Safety

<div>

What is the issue?

Crime, violence, and intentional injury are related to poorer physical and mental health for the victims, the perpetrators, and the community at large.[29] As reported by the World Health Organization, even apart from any direct physical injury, victims of violence have been shown to suffer from a higher risk of depression, substance use, anxiety, reproductive health problems, and suicidal behavior.[30] Additionally, exposure to violence has been linked to negative effects on an individual's mental health, including post-traumatic stress disorder, as well as a greater propensity to exhibit violent behavior themselves.[31]

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How was community safety identified as a need?

Community and family safety was prioritized in at least one-third of all interviews and focus groups. In all areas, participants expressed concerns about community and family safety, including domestic violence. A number expressed a persistent, general sense of fear and insecurity in their communities, often due to violence and crime. The constant threat of violence and crime has significant mental health implications, affecting individuals' ability to thrive and feel safe in their environments.

"We had a recent meeting where we talked about… health priorities and the stories that came from residents … that really touched everybody's heart were simple statements like, 'I want to be able to walk my kid to the park without fear of them being injured or hurt.' "

—CHNA Focus Group Participant, Alameda County

Some participants noted that increased reports of crime have led to greater isolation within communities. People are now less likely to know their neighbors or feel connected to their community, which generates or increases feelings of insecurity. Some participants also mentioned a lack of trust in the police, particularly among immigrant communities who may fear law enforcement.

"When there's violence in the home or there's violence in community, or we're living in fear of it, it stunts our ability to thrive."

— CHNA Interviewee, Alameda County

Participants felt that areas with limited resources (e.g., far eastern Contra Costa County) experience more significant safety issues. Overall, they said long-standing systemic issues such as lack of access to resources, poor infrastructure (e.g., lack of streetlights), discrimination, and inadequate policing intensify the shared safety concerns of families and communities.

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[29] Krug, E.G., Mercy, J.A., Dahlberg, L.L., & Zwi, A.B. (2002). The World Report on Violence and Health. *The Lancet*, 360(9339), 1083–1088.

[30] World Health Organization. (2017). *10 Facts About Violence Prevention.*

[31] Ozer, E.J. & McDonald, K.L. (2006). Exposure to Violence and Mental Health Among Chinese American Urban Adolescents. *Journal of Adolescent Health*, 39(1), 73–79.

"By and large, I'd say communities of color... they all talk about violence. All of them. And being concerned about it and being, it being a problem."

—CHNA Interviewee, Alameda County

Health experts in Alameda County felt community violence was a county-wide concern, with several interviewees in the Oakland area describing gun violence affecting youth and community-serving staff both directly and indirectly. Statistics show that the homicide rate is notably higher in Alameda County (8.0 per 100,000) compared to California's rate overall (5.9), and homicide deaths disproportionately occur among the Black population in Alameda County.[32]

Firearm mortality (intentional and accidental combined) is similarly higher in Alameda County (9.2 per 100,000) compared to the state rate (8.8) or to Contra Costa County's (8.2). In both Alameda and Contra Costa counties, firearm mortality is suffered disproportionately by the Black population.

Figure 21. There are a greater proportion of firearm-related deaths in Alameda County than in California overall.
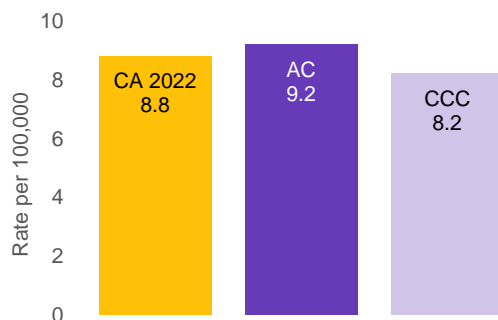
Source: National Center for Health Statistics - Mortality Files, 2016-2020.

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[32] Comparable data were not provided by Contra Costa County Health.

What was notable by geography?

Eastern Contra Costa County participants focused more than others on discrimination and over-policing as drivers of violence and safety concerns and uniquely emphasized the neurodevelopmental impact on children caused by intergenerational trauma from community violence. Firearm mortality is higher in this part of the county (10.9) compared to the county overall.

Central Contra Costa County participants were more likely than others to raise the issue of overcrowding as a source of family conflict and stress, a specific concern not as strongly explored elsewhere, They also uniquely mentioned landlords intimidating undocumented tenants, leading to fear and insecurity. Firearm mortality is lowest in this part of the county (4.5).

Tri-Valley participants uniquely identified the racial wealth gap and post-COVID economic instability as having a direct correlation to rising crime, including in previously safe areas. Violent crime is trending up in Livermore. Tri-Valley was also the only area to mention the need for educating parents and children alike about online dangers. Domestic violence crisis calls in the Tri-Valley area rose by 20-25% after pandemic shelter-in-place orders were lifted.

Western Contra Costa County participants focused more than most on fear, paranoia, and isolation arising from safety concerns, making a direct link to declining mental health. Participants pointed out that security cameras and other protective measures in the community feel insufficient, reflecting a perception of ongoing helplessness. They also uniquely critiqued slow response times among police, including the perceived prioritization of certain racial groups, further emphasizing community frustration with law enforcement. Firearm mortality is highest in this part of the county (11.0).

Northern Alameda County participants emphasized gun violence more than others, especially in East Oakland, and explicitly connected homelessness with increased violence and community instability. They highlighted systemic discrimination as a root cause of safety issues more distinctly than participants in other areas. It was also a uniquely shared theme among participants in this area that budget cuts to violence prevention programs create a barrier to community safety efforts.

Youth gang membership (11th graders) is somewhat higher in Contra Costa County and Alameda County versus California overall. A slightly larger percentage of youth (9th graders) in both counties also reported being bullied and harassed at school, compared to their statewide peers.

Figure 22. Slightly higher proportions of youth in both counties experience bullying or harassment than in California overall.

Any bullying/harassment

	Percent of Youth
CA	30%
AC	32%
CCC	31%

Bias-related* bullying/harassment

	Percent of Youth
CA	23%
AC	26%
CCC	25%
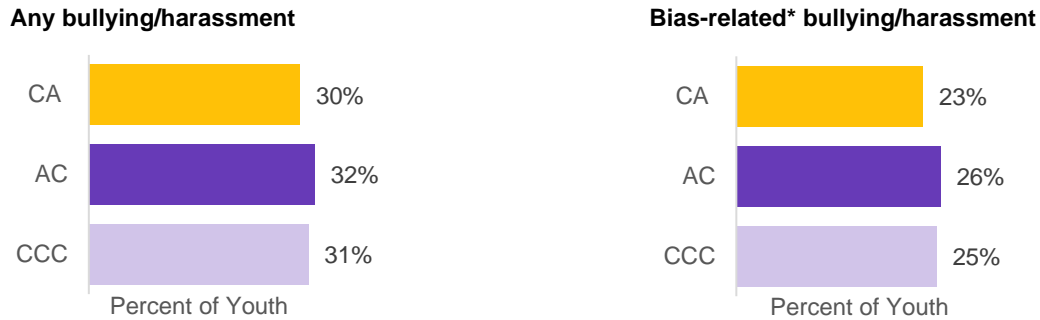
Source: WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS California Dept. of Education, 2020, as cited in KidsData.org. Note: * Bias because of gender, race/ethnicity or national origin, religion, sexual orientation, or a physical/mental disability.

Climate/Natural Environment

What is the issue?

The Office of Disease Prevention and Health Promotion reports that, worldwide, nearly 12 million deaths each year can be attributed to environmental issues. Those issues include air, water, food, and soil contamination, as well as natural and technological disasters. For those whose health is already compromised, exposure to negative environmental issues can compound their problems.[33]

How was climate identified as a need?

Indicators of air quality were poor in Alameda and Contra Costa counties alike.[34] Both counties had high rates of particulate matter (PM2.5), with Alameda County's rate being notably worse (9.4 micrograms per cubic meter of air) and Contra Costa County's rate somewhat worse (7.8 mcg/cu. m) than California's overall rate (7.1). Alameda County's diesel air pollution and overall traffic volume statistics were also higher than statewide measures, respectively.

CHNA participants in both counties, primarily community members, spoke about climate change concerns. Those who mentioned it mainly referred to either poor air quality or an increasing number of days of extreme heat. A health expert tied both issues to increasing rates of asthma.

With regard to air quality, participants in the East Bay raised their concerns with industrial pollution, making a connecting with historical housing segregation (i.e., lower-income families are more likely to live in areas affected by such pollution). Some individuals also mentioned being affected by wildfire smoke. Both counties are at major risk of wildfire, with a history of 10 wildfires in Alameda County and four in Contra Costa County in the past 35+ years, including the SCU Lightening Complex fire of 2020, which

Figure 23. Diesel air pollution is worst along major roads and in industrial areas.
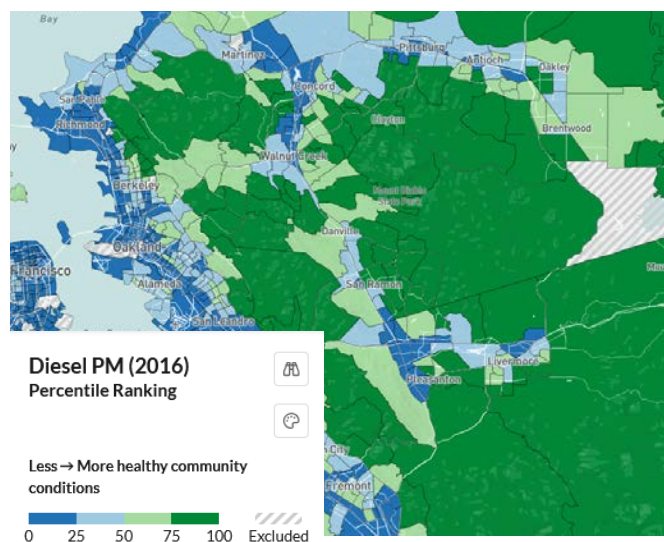
Figure 24. More properties in Eastern Contra Costa County are at extreme risk of poor air quality than in other regions of the county.
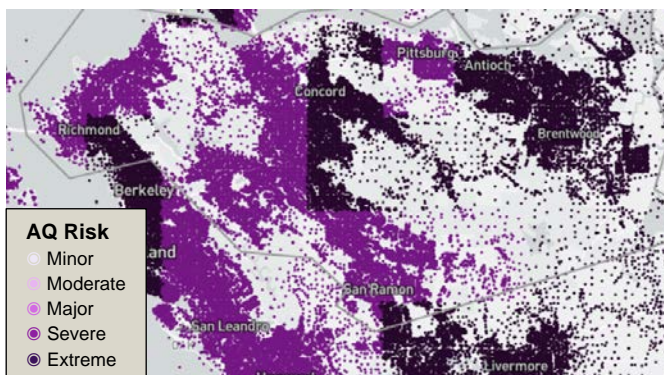
Properties where Air Quality Index > 100. Source: First Street Technology, Inc. 2025 via https://firststreet.org/county/contra-costa-county-ca/6013_fsid

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[33] U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2024). *Environmental Health.* And: Morris, G. & Saunders, P. (2017). The Environment in Health and Well-Being, *Oxford Research Encyclopedias*.

[34] Although the latest diesel particulate matter data are from 2016, the Healthy Places Index, source of the map in Figure 23, is the standard relied upon by HCAI in determining communities that are vulnerable to air pollution.

burned nearly 1,650 square miles of land and affected than 1,400 buildings. More than 80% of all properties in Contra Costa County and nearly 50% of properties in Alameda County are at some risk of being affected by wildfire in the next 30 years.[35]

Heat is also an issue with both counties. Both counties are expected to experience seven "hot" days (days in which the temperature feels as though it is over 88° F in Alameda County and over 95° F in Contra Costa County) in 2025. This number is expected to double to 14 days over the next 30 years.[35]

Source: First Street Technology, Inc. 2025 via https://firststreet.org/county/contra-costa-county-ca/6013_fsid

"It's the folks who live in places where cranking up the AC isn't a viable option for monetary reasons. It's people who are living in housing that has its own health issues."

—CHNA Interviewee, Alameda County

In addition, Contra Costa County's critical infrastructure (hospitals, police stations, fire stations, wastewater treatment facilities, etc.) is estimated to have an extreme risk of flooding within the next 30 years, which would have a very negative impact on community members.[35]

Finally, Contra Costa County has experienced water quality violations. This indicates that contaminants are present in drinking water, although the data provided do not identify the kind of contaminants. Drinking unsafe water can cause gastrointestinal illnesses and have other poor effects on health.

CHNA participants, primarily community members, discussed concerns surrounding climate change, stating that it exacerbates health issues such as allergies, respiratory infections, and mental health conditions like depression and anxiety. Additionally, extreme weather conditions, such as heatwaves and poor air quality that results from wildfires, were highlighted as significant health stressors. Participants also expressed concerns around environmental justice more generally. For example, participants noted that low-income communities and communities of color are often disproportionately affected by extreme weather and environmental hazards and have fewer resources to cope with the impacts.

What was notable by geography?
Eastern Contra Costa County has more properties at extreme risk of poor air quality and fire compared to other parts of the county.

Central Contra Costa County has a higher proportion of properties at extreme risk of fire compared to other parts of the county.

Tri-Valley has more properties at extreme risk of fire compared to other parts of Alameda County.

Northern Alameda County: Diesel air pollution was found to be especially high near the Oakland airport (in the bottom decile for such pollution).

Western Contra Costa County: Diesel air pollution was highest in the areas of Richmond and San Pablo (most tracts in the bottom two deciles).

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[35] Various climate data obtained from First Street, a public benefit corporation connecting climate risk to financial risk via advanced climate science: https://firststreet.org/county/contra-costa-county-ca/6013_fsid/fire.

Cancer

What is the issue?

Cancer is the second leading cause of death in the U.S., following heart disease.[36] High-quality screening can serve to reduce cancer rates, but various factors contribute to disparities in cancer incidence and death rates among different ethnic, socioeconomic, and otherwise vulnerable groups of people. The most important risk factors for cancer are lack of health insurance and low socioeconomic status.[37]

How was cancer identified as a need?

Cancer was the #1 cause of death in both counties in 2022. Although the counties' overall cancer mortality rates are on par or better than the state, statistical data for cancer mortality by race/ethnicity indicates substantial disparities. For example, overall cancer mortality rates among certain counties' Pacific Islander populations are much higher compared to Whites or Latine.

Figure 26. Pacific Islanders, Blacks, and community members of "other" ethnicities* have higher cancer mortality rates than other racial/ethnic groups.
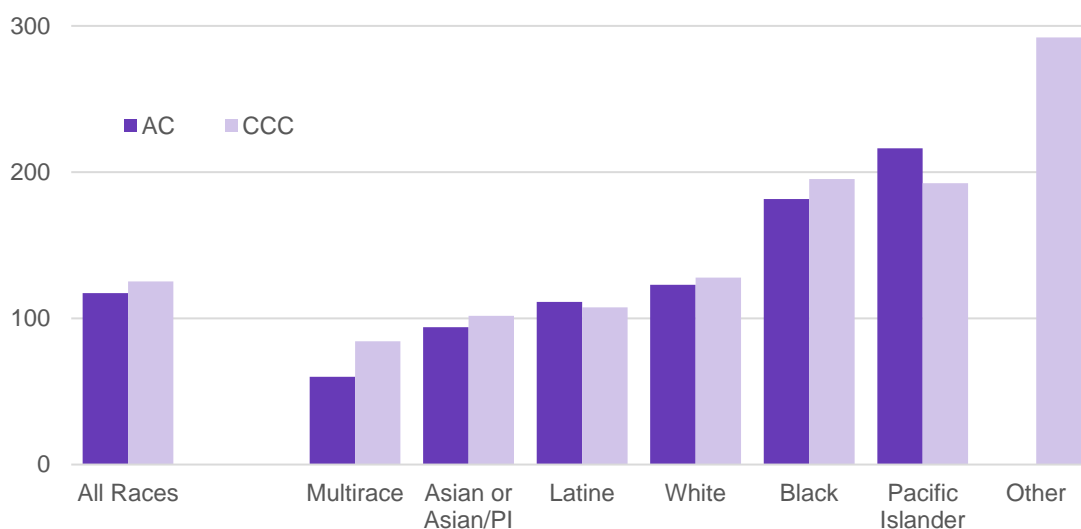
Source: Public health departments (by personal correspondence), 2019-2023. Note: "Other" is a U.S. Census category for ethnicities not specifically called out in data sets.

Statistical data indicate that female breast cancer and (male) prostate cancer incidence rates in Contra Costa County are worse than their respective California rates. In Alameda County, incidence rates for these same types of cancers are the same or slightly lower than state benchmarks. However, in both counties, at least one racial or ethnic group experiences significantly higher overall cancer incidence rates and worse rates for various specific types of cancer compared to the county's rates.

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[36] Centers for Disease Control and Prevention. (2017). *Leading Causes of Death.*

[37] National Cancer Institute. (2018). *Cancer Disparities.*

Figure 27. Whites and Blacks have higher overall cancer incidence rates than Latine or Asian/Pacific Islanders.
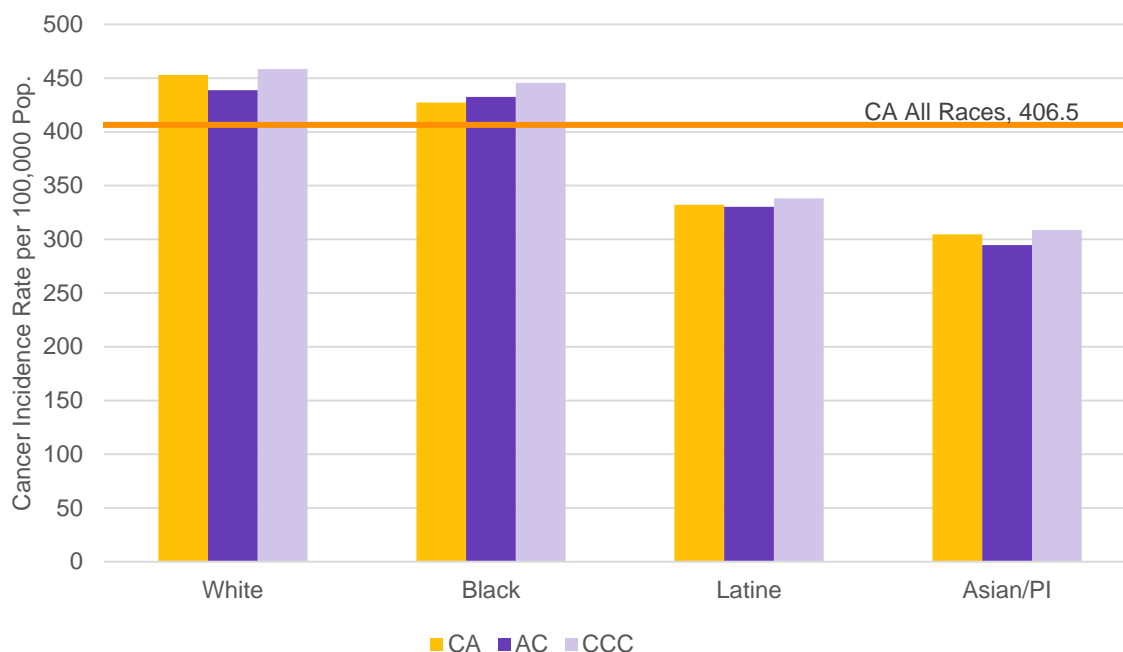
Source: California Health Maps, 2012-2021. Retrieved August 16, 2024 from https://www.californiahealthmaps.org.

With regard to specific forms of cancer, Latine in both counties have the highest incidence of liver cancer compared to their non-Latine peers, while Whites have the highest incidence of both breast cancer and melanoma (skin cancer) compared to any other group. Blacks in both counties have the highest incidence rates of lung, pancreatic, prostate, and uterine cancer compared to other racial/ethnic groups. Screening data suggest some areas of concern (e.g., colon cancer screening in Dublin, a city in the Tri-Valley).

While cancer was rarely prioritized on its own, community members' personal accounts illustrated potential gaps in timely and comprehensive cancer screenings. The financial burden of cancer treatment was a significant concern, with participants noting how it affects economic stability for patients and their families. Concerns were also raised about the accessibility and quality of healthcare services for cancer patients, including issues with insurance coverage and the cost of treatment.

"I had prostate cancer. That's expensive, you know what I mean? Doctors ain't gonna want to treat you for it. Because if you ain't got no insurance, they don't want to see you, man."

—Community Member Focus Group Participant, Alameda County

When cancer was discussed, participants frequently mentioned that cancer carries with it an emotional toll on both patients and their families, and that mental health support is needed in addition to physical treatment. Participants from several different areas also spoke of the need for more thorough cancer education within the community at large.

When asked about cancer:
"I just think that's like one of the more important health issues that's out right now. You should be more aware of it."

—Community Member Focus Group Participant, Tri-Valley

The National Cancer Institute has acknowledged socioeconomic and racial/ethnic disparities that exist in cancer detection, treatment, and outcomes. It attributes these disparities to a variety of factors, including institutional racism and conscious or unconscious bias among care providers, as well as barriers such as low income, low health literacy, lack of insurance, and lack of transportation. It also acknowledges the role geography plays in cancer risks (e.g., when a neighborhood has poor access to affordable healthy food, community members are more likely to be obese, which is a cancer risk factor). The Institute states, "Reducing or eliminating some cancer disparities in the pursuit of health equity will require policy changes to overcome systemic social, racial, and/or institutional inequalities."[38]

What was notable by geography?

Eastern Contra Costa County: Cancer mortality is highest in this part of the county (152.7 per 100,000).

Central Contra Costa County: Cancer mortality is lowest in this part of the county (109.9).

Tri-Valley: The percentage of Dublin community members who met the recommendation for colon cancer screening was lower (56%) compared to Alameda County overall (60%).

Western Contra Costa County: CHNA participants mentioned that Richmond historically has higher levels of industrial pollution; this can contribute to cancer.

Northern Alameda County: The percentage of Oakland community members who had a recent colon cancer screening was slightly lower (66%) compared to Alameda County overall (68%).

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[38] National Cancer Institute. (2020). *Cancer Disparities.*

Heart Disease and Stroke

What is the issue?

Nationally, about 84 million people suffer from a form of cardiovascular disease.[39] Heart disease is the #1 killer of both men and women,[40] while stroke is the fifth leading cause of death and a significant cause of serious disability for adults.[41] While some risk factors for heart disease and stroke are not controllable (age, race, gender), others can be controlled (high blood pressure, high cholesterol, obesity, excessive alcohol consumption, smoking, an unhealthy diet, lack of physical activity). Addressing risk factors early in life can help prevent chronic cardiovascular disease.[42]

How was heart disease and stroke identified as a need?

Heart disease and cerebrovascular diseases ranked among the top five causes of death in both counties in 2022, whereas the counties' cardiovascular disease (CVD) mortality rates are lower than the state's. Mortality rates for heart disease are much higher among both counties' Black population than other ethnic groups.[43] Although Whites also have a high CVD mortality rate, their rate is not as high as certain BIPOC populations.

Stroke mortality is somewhat worse among Contra Costa County community members (44.3 per 100,000) and slightly worse among Alameda County community members (43.4) than their statewide peers (42.1). In Contra Costa County, deaths from stroke are highest among Black population.

Figure 28. Contra Costa County stroke mortality is highest among the Black population.
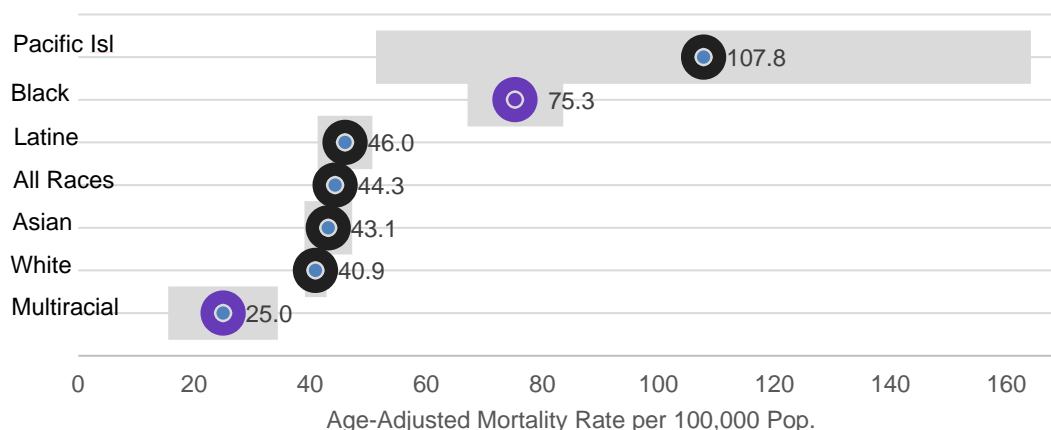
Source: Contra Costa Public Health Department, 2019-23.

The prevalence of hypertension, a precursor to both heart disease and stroke, is highest in Western Contra Costa and Northern Alameda counties, with some places of concern across the full-service area (see *Figure 29*, next page).

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[39] Johns Hopkins Medicine. (2018). *Cardiovascular Disease Statistics.*

[40] Centers for Disease Control and Prevention. (2017). *Heart Disease Facts.*

[41] Centers for Disease Control and Prevention. (2018). *Stroke.*

[42] The Mayo Clinic. (2016). *Strategies to Prevent Heart Disease.*

[43] Data on Pacific Islander stroke mortality in Alameda County are suppressed because N < 10.

Figure 29. The proportions of adults with high blood pressure are highest in Western Contra Costa and Northern Alameda.

Crude Prevalence (%)

- ☐ Insufficient Data (35)
- ☐ 6 - 24 (1641)
- ☐ 24 - 26 (1639)
- ☐ 26 - 28 (1549)
- ☐ 28 - 30 (1621)
- ☐ 30 - 56 (1555)
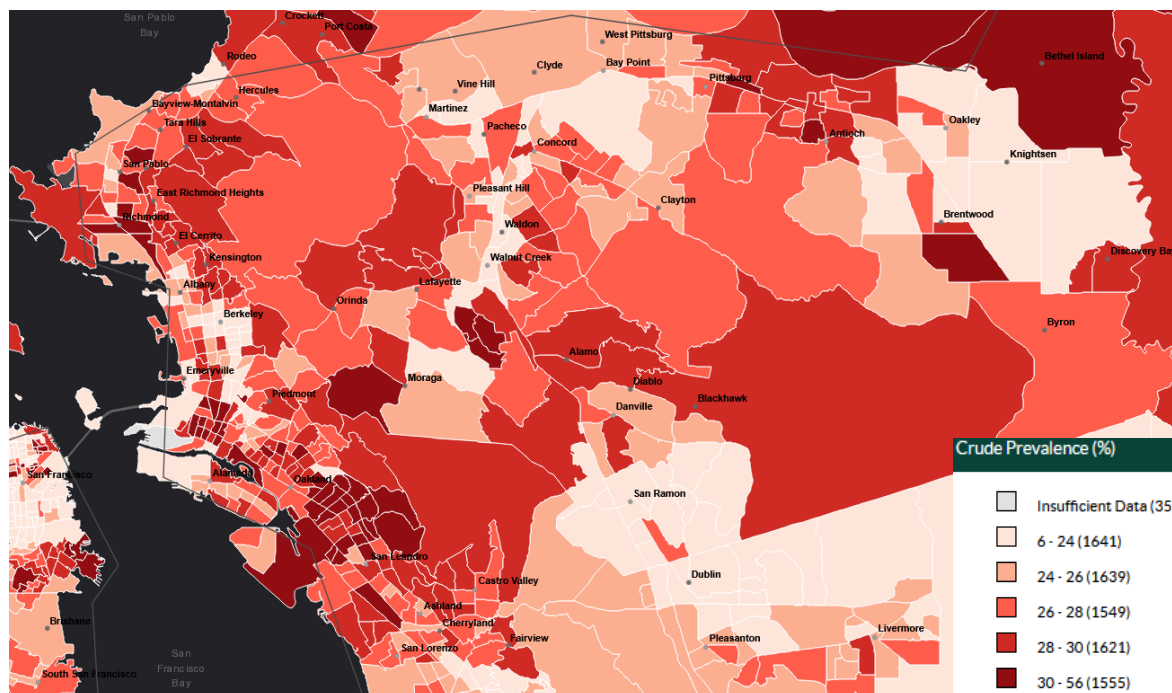
Source: Interactive Atlas of Heart Disease, Centers for Disease Control and Prevention. 2021.

Heart disease and stroke were prioritized by a small proportion of key informants and focus group participants; however, several CHNA participants noted a high prevalence of hypertension and diabetes within their communities, which are significant risk factors for heart disease and stroke. In both counties, hypertension ranked separately in the top 10 causes of death. Participants mentioned that chronic diseases such as heart disease and stroke have a substantial impact on individuals' quality of life and overall lifespan. Some highlighted the role that stress and mental health issues have in poor cardiovascular health outcomes, while others identified various social determinants of health (economic insecurity, transportation issues, and lack of healthcare access) as contributing factors.

"Hypertension and stroke is generally one of the areas where you do see a cultural implication. Our Hispanics and our African Americans are the ones most at risk."

- CHNA Interviewee, Alameda County

What was notable by geography?

Eastern Contra Costa County: Stroke mortality (61.8 per 100,000) and heart disease mortality (144.0 per 100,000) are highest in this part of the county.

Central Contra Costa County: This region has some pockets of concern, including portions of Concord and Walnut Creek.

Tri-Valley: The southern part of this region has some pockets of concern. Heart disease mortality for the Black population in Pleasanton (420.9 per 100,000) is nearly 4x the Alameda County rate for all races/ethnicities (110.8 per 100,000).

Northern Alameda County: This region has higher proportions of adults with high blood pressure than other regions.

Western Contra Costa County: This part of the county has higher proportions of adults with high blood pressure than other parts of the county.

Maternal and Infant Health

What is the issue?

Improving the well-being of mothers, infants, and children continues to be an important public health goal, especially as women in the U.S. now have a higher mortality rate from childbirth than their peers in other developed countries.[44] The risk of maternal and infant mortality and pregnancy-related complications can be reduced by increasing access to quality preconception (before pregnancy) and interconception (between pregnancies) care.[44] Moreover, healthy birth outcomes and early identification and treatment of health conditions among infants can prevent death or disability and enable children to reach their full potential.[44]

How was maternal and infant health identified as a need?

Certain maternal and infant health statistics were worse for particular populations compared to the state rates, including the proportion of premature births, low birth-weight births, and infant mortality. For example, infant mortality is substantially higher among both counties' Black, Native, and multiracial populations compared to infants of other ethnicities.

"We have seen that infant mortality and some of the sicknesses that infants are having is high amongst Native children… When they are getting the care that they need, we see less infant mortality and less children getting sick."

—CHNA Interviewee, Alameda County

Figure 30. Infant mortality is highest among Black and multiracial babies in both counties.
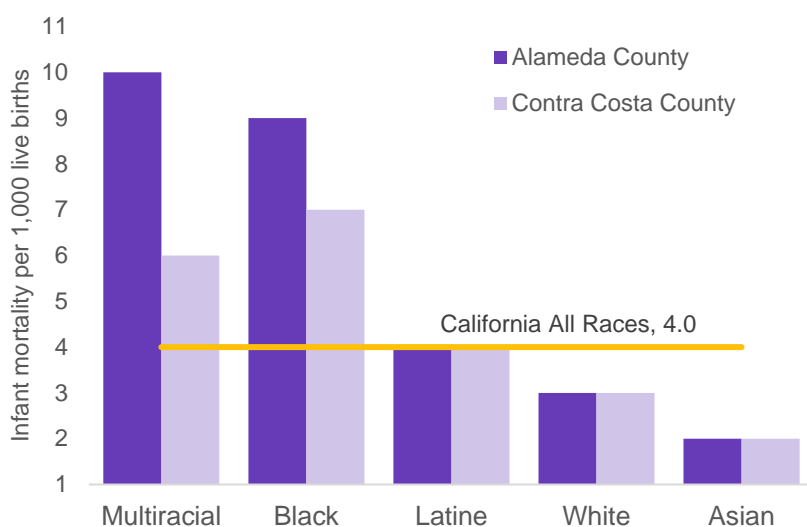
Source: National Center for Health Statistics - Natality and Mortality Files. 2015-2021. Data for Native American population unstable and therefore not provided.

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[44] U.S. Dept. of Health and Human Services, Office of Disease Prevention and Health Promotion. (2024). *Healthy People 2030.*

In statistical data specifically gathered for the three Tri-Valley cities, there were concerning findings in both Dublin and Livermore: In Livermore, the infant mortality rate (4.8 per 1,000) is higher than Alameda County overall (3.5), while in Dublin, the infant mortality rate (6.4) is almost twice as high as the county's. Dublin also had higher percentages of low birthweight babies and premature births versus the county.

In both Alameda and Contra Costa counties, the rate of severe maternal morbidity (unexpected and life-threatening events that can occur during childbirth) was notably higher than the California rate and was highest for Black mothers (229.2 in Alameda County).

Figure 31. Severe maternal morbidity rates are higher in both counties compared to the state, but notably higher in Alameda County.

Alameda 136.7	
Contra Costa 120.7	
California 108.0	

Source: California Department of Public Health, 2020-2022.

While maternal and infant health was rarely prioritized on its own, CHNA participants in multiple areas noted that low-income and BIPOC (especially Black) mothers face more challenges in accessing maternal/infant healthcare. Participants frequently mentioned barriers to accessing healthcare, such as prolonged wait times in emergency rooms and difficulties in obtaining necessary medical supplies (e.g., formula). Several participants additionally highlighted the importance of mental health support available to mothers, particularly for postpartum depression and anxiety.

Personal experiences of childbirth varied significantly, with some participants reporting excellent delivery of care while others detailed lack of communication and even neglect by healthcare providers. Several participants emphasized the need for healthcare professionals to be more culturally sensitive and aware of (or educated in) the specific needs of different communities.

"One of the more glaring examples of structural racism in healthcare is the degree to which people of color are marginalized in terms of their own health needs and offered less medical support. …Women in general, but women of color [in particular] also face … having their healthcare and their needs dismissed at a much higher rate. Obviously, we know black maternal healthcare is [like this]."

—CHNA Interviewee, Contra Costa County

One key informant described same-sex partners experiencing discrimination in maternal healthcare settings and thereafter avoiding pre-natal appointments as a result.

"Our LGBTQ population has a fear of being discriminated against. We do have some moms with same-sex partners that just don't want to deal with it, so they don't go [to an appointment]."

– CHNA Interviewee, Alameda County

Sexual Health

What is the issue?

Sexual health depends on individuals' access to complete and factual information about sex and sexuality, access to sexual healthcare, and knowledge of the risks and consequences of unprotected sex such as sexually transmitted infections (STIs). An environment that is supportive of sexual health contributes to this access and knowledge. STIs are caused by germs (e.g., viruses, bacteria) that are mainly passed on by direct sexual contact, while some, such as HIV/AIDS, can also be blood-borne. All STIs can be treated with medication, but not all can be cured. Protective barriers such as condoms are the primary means of both pregnancy and STI prevention. Vaccination is a strong deterrent against some STIs as well, most notably human papilloma virus (HPV).[45]

How was sexual health identified as a need?

In both Alameda and Contra Costa counties, incidence rates of chlamydia and gonorrhea among youth aged 15-19 are much higher than the rates of these STIs statewide. Contra Costa Health reported that HIV/AIDS mortality by race is highest among the county's Black population and in the western part of the county.

Figure 32. Chlamydia and gonorrhea rates in Alameda and Contra Costa Counties are higher than California rates.
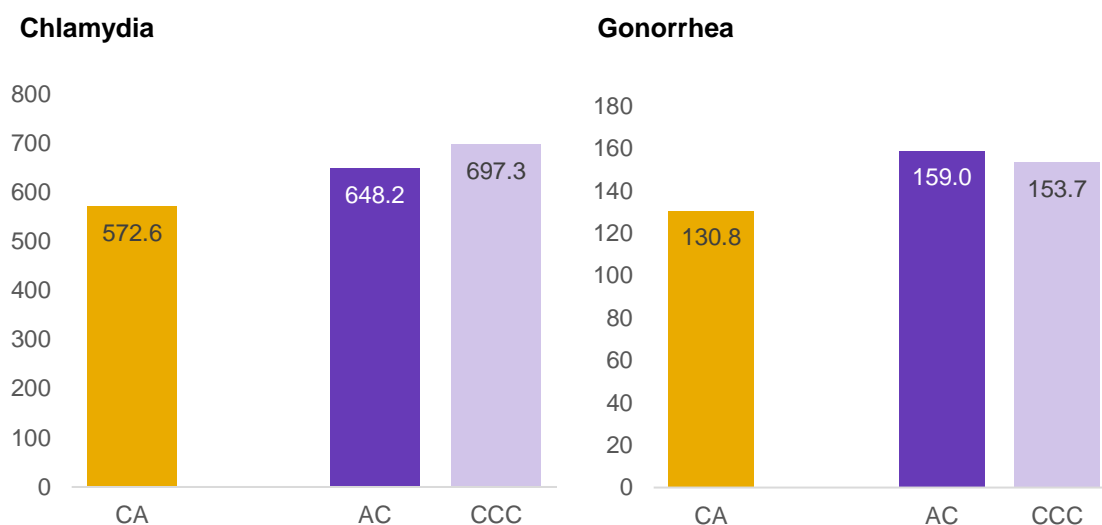
Source: California Department of Public Health. 2020.

Some CHNA participants shared a concern regarding the rising rates of STIs like syphilis and chlamydia. Participants in one of the LGBTQ+ focus groups specifically pointed out that current messages about sexual health conveyed by health providers and public health departments often misses individuals who do not identify strictly as gay, bisexual, or heterosexual but still engage in high-risk behaviors. This gap in messaging leads to a lack of awareness and preventive care measures among these groups.

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[45] Centers for Disease Control and Prevention. (2024). *Sexually Transmitted Infections (STIs).*

"There's a whole group of folks just kind of roaming about, who it doesn't even cross their mind that they're at risk for certain things because they don't see themselves fitting into the category [of people at risk]."

– Community Member Focus Group Participant, Alameda County

Figure 33. Teen births are much higher among Latinas in both counties compared to their peers of other ethnicities.

Hispanic/Latina — Alameda 68%, Contra Costa 68%
Black — Alameda 14%, Contra Costa 16%
White — Alameda 6%, Contra Costa 11%
Multiethnic — Alameda 3%, Contra Costa 4%
Asian — Alameda 2%

Legend: ■ Alameda ■ Contra Costa
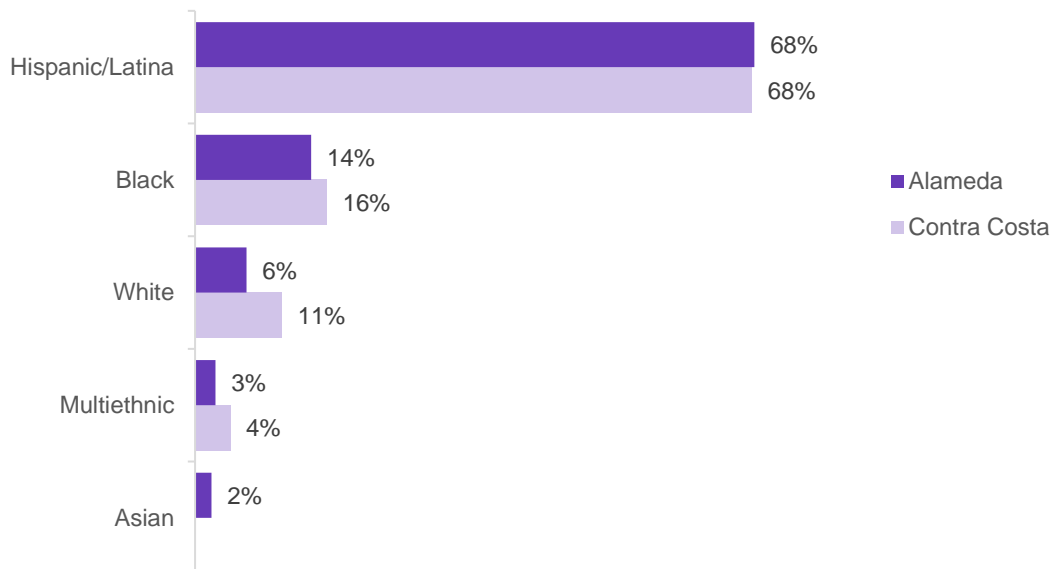
Source: California Department of Public Health, Adolescent Births Dashboard. 2020-2022. Ages 15-19.

The Centers for Disease Control and Prevention suggest that income inequality, poverty, lack of employment, relative lack of education, and distrust of the healthcare system (whether due to shame or stigma, experience or fear of discrimination, or other reasons) affect the ability of individuals to "stay sexually healthy."[46]

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[46] Centers for Disease Control and Prevention. (2020). *STD Health Equity.*

Unintentional Injury

What is the issue?

Unintentional injuries are defined as those not purposely inflicted, and are most often the result of accidents such as motor vehicle crashes, falls, and drowning. One's neighborhood, including elements such as a lack of sidewalks and streetlights, can lead to unintended injuries and deaths, as well as other poor health outcomes.[47] Although most unintentional injuries are predictable and preventable, they are a major cause of premature death and lifelong disability. Unintentional injury is the third leading cause of death for all ages in the U.S.[48]

How was unintentional injury identified as a need?

In both counties, the rate of mortality by race from all unintended injuries was highest for the Black population, followed by the Native American population. Further, the share of traumatic injury hospitalizations among children is somewhat higher in Alameda and Contra Costa counties compared to their peers in California overall (see chart of hospitalizations by primary diagnosis, *Figure 16* in the need description of *Behavioral Health*).

Accidents (unintentional injuries) were ranked among the top five causes of death in both counties in 2023. Alameda County's statistic of overall traffic volume was higher than that of California. Compared to the statewide rate, the rates of pedestrian deaths were also notably higher in both Alameda and Contra Costa counties. In both counties, motor vehicle crash mortality rates by race were highest for the Black population, followed by the Latine population. The Contra Costa County Black population's death rate due to motor vehicle crashes (16.2 per 100,000) was higher than the rate for their Black peers statewide (15.2 per 100,000).

Figure 34. Motor vehicle crash death rates are highest among the Black population in both counties.
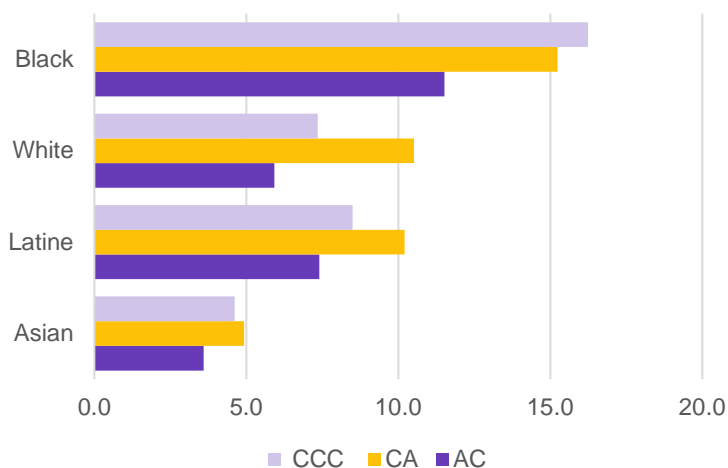
Source: National Center for Health Statistics - Mortality Files. 2020.

What was notable by geography?
Eastern Contra Costa County: Motor vehicle crash deaths are especially high (13.3 per 100,000) compared to other parts of the county.

Central Contra Costa County: Accident fatalities are primarily along the major arteries.

Tri-Valley: Participants expressed concern about workplace injuries and delays in accessing medical care.

Northern Alameda County: More pedestrian fatalities than in other regions (but also larger population).

Western Contra Costa County: Accident fatalities are primarily along the major arteries.

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[47] Iton, Tony B. (2021). *When It Comes to Your Health, Does Your Zip Code Matter More Than Your Genetic Code?* (Speech to the Texas Primary Care Consortium.)

[48] Centers of Disease Control and Prevention, National Center for Health Statistics. (2022). *Accidents or Unintentional Injuries.*

Racial disparities in accident rates has been found nationwide and is attributed in part to unequal access to safe transportation.[49] The absence of sidewalks in low-income neighborhoods is another factor related to national pedestrian accident rates.[50]

Figure 35. Fatal accidents, while few, appear to be clustered in certain areas, like the Tri-Valley.
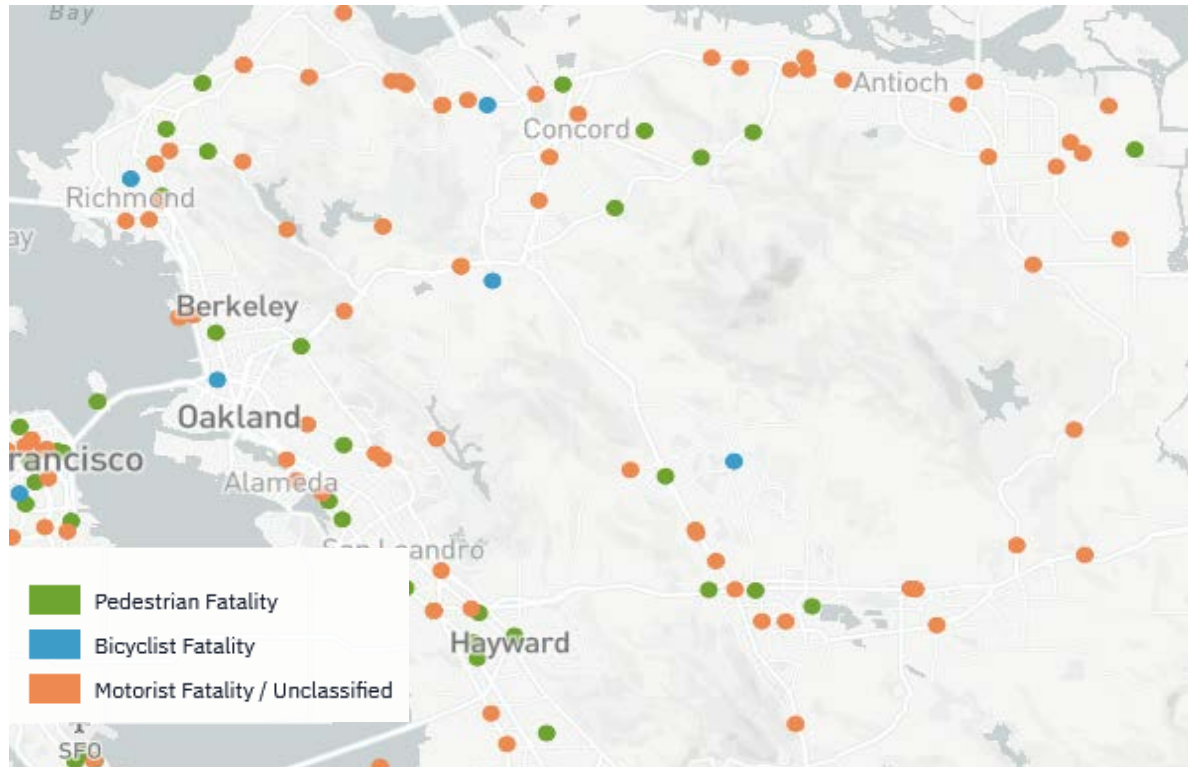
Source: Vital Signs, Metropolitan Transportation Commission. 2021. Note: Data for individual collisions reported by the California Highway Patrol (CHP) to the Statewide Integrated Traffic Records System (SWITRS). For case data, latitude and longitude information for each accident was geocoded by SafeTREC's Transportation Injury Mapping System (TIMS).

Although communities provided very little feedback on unintended injuries, concerns were expressed in one focus group in the Tri-Valley area around workplace injuries (e.g., in the construction or services industries), especially when there are inadequate safety measures. Undocumented workers may be especially at risk, they said. CHNA participants more generally noted that prompt access to medical care is important; delays in accessing medical care can worsen the outcomes of unintended injuries, leading to more severe health issues. Related to the concern about delays in access to care for unintended injuries, an interviewee mentioned that individuals experiencing homelessness may be more likely to delay care until absolutely necessary.

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[49] Hamann, C., Peek-Asa, C., & Butcher, B. (2020). Racial disparities in pedestrian-related injury hospitalizations in the United States. *BMC Public Health*, 20(1), 1-7.

[50] Lu, W., McKyer, E.L.J., Lee, C., Ory, M.G., Goodson, P., & Wang, S. (2015). Children's active commuting to school: an interplay of self-efficacy, social economic disadvantage, and environmental characteristics. *International Journal of Behavioral Nutrition and Physical Activity*. 12(1):29.

7. Evaluation Findings from 2023–2025 Implemented Strategies

John Muir Health's 2022 Prioritized Health Needs

In 2021–2022, John Muir Health participated in a Community Health Needs Assessment similar to the collaborative 2025 effort. The hospital's 2022 CHNA report is posted on the Community Commitment page of its public website.[51] As noted in that report, community leaders—including county health, partner hospitals, and community organization leaders—prioritized the health needs listed below. **John Muir Health chose to address four of the top five** in subsequent years through strategic initiatives.

1. **Behavioral Health**
2. **Housing and Homelessness**
3. Economic Security
4. **Structural Racism**
5. **Healthcare Access and Delivery**
6. Community and Family Safety
7. Food Security
8. Education
9. Transportation

Implementation Strategies for Fiscal Years 2023 and 2024

The 2022 CHNA formed the foundation for John Muir Health's implementation strategies for fiscal years 2023 and 2024, which were initiated in FY23. As previously stated, the IRS requires hospitals to report on the impact of these implementation strategies. The following sections describe the evaluation of John Muir Health's community benefit programs described as part of their implementation strategies. Due to timing constraints that require the adoption and public posting of this report by the end of the fiscal year, evaluation results for fiscal year 2025 are forthcoming and not yet available for inclusion at this time. For more information, see the Community Commitment webpage.[51]
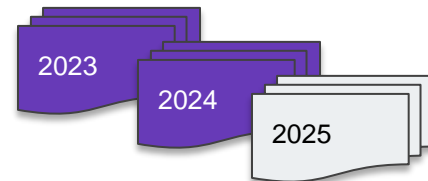
Community Benefit Investments in Fiscal Years 2023 and 2024

John Muir Health's annual community investment focuses on improving the health of its community's most vulnerable populations. To accomplish this goal, all community health investments in FY23–FY25 supported the four prioritized community health needs: Behavioral Health, Housing and Homelessness, Healthcare Access and Delivery, and Structural Racism. John Muir Health applied the last as a lens through which it made all of its investments in the other three needs. During this time period, John Muir Health provided additional grant support for all nonprofit organization grant recipients. This additional funding was allocated towards organization-selected interventions, trainings and development. Each organization selected an intervention that was pertinent to their organization, such as leadership, board and staff training, staff development, policy and procedure enhancement, among others. John Muir Health led annual Learners Cohort sessions that convened grantee partners and offered an educational

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[51] See https://www.johnmuirhealth.com/about-john-muir-health/community-commitment.html.

and supportive environment to cultivate learning. See *Appendix 6: Community Benefit Investments and Impact, Fiscal Years 2023–2025* for a list of community benefit programs and partnerships, and the impact of strategies John Muir Health implemented in fiscal years 2023 and 2024. Note that fiscal year 2025 was still underway at the time of this report's publication, and therefore no information was yet available on the impact of that year's strategies.

8. Conclusion

John Muir Health worked with local partners, combining expertise, guidance, and resources to conduct the 2025 Community Health Needs Assessment. By gathering secondary data and conducting new primary research with other healthcare facilities and local public health departments, the hospitals gained a shared understanding of how health indicator data for the John Muir Health service area compared to state benchmarks as well as the community's perception of health needs. This rich base of information informed the hospital's prioritization of health needs.

The 2025 CHNA was adopted by the John Muir Health Board of Directors on September 24, 2025. The 2025 CHNA builds upon prior assessments dating back to 1995 and meets federal (IRS) and California state requirements.

Figure 36. Next steps for John Muir Health.
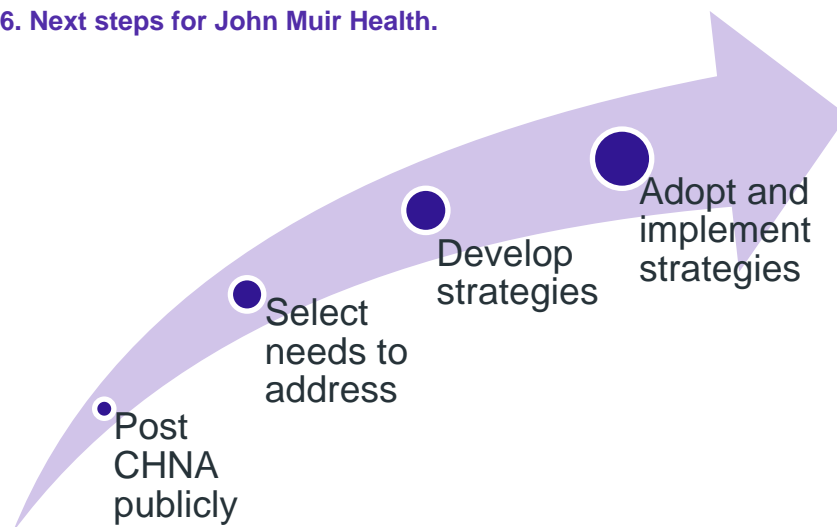
Next steps for John Muir Health:

- Ensure CHNA is publicly available on John Muir Health's website by December 31, 2025.[52]
- Monitor community comments on the CHNA report submitted to Community.Benefit@johnmuirhealth.com (an ongoing effort).
- Select priority health needs to address.
- Develop strategies to address priority health needs.
- Ensure strategies are adopted by the hospital Board of Directors and filed with the IRS by May 15, 2026.

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[52] See https://www.johnmuirhealth.com/about-john-muirhealth/community-commitment.html.

9. List of Appendices

1. Secondary Reports and Presentations Consulted
2. Secondary Data Indicators Index
3. Community Leaders, Representatives, and Members Consulted
4. Qualitative Research Materials
5. Community Assets and Resources:
   a. Alameda County
   b. Contra Costa County
   c. Tri-Valley
6. Community Benefit Investments and Impact, Fiscal Years 2023–2025
7. IRS Regulations Compliance Checklist

Appendix 1: Secondary Reports and Presentations Consulted

The Assessment Team consulted the reports and presentations listed below to further understand the community health needs.

Geography	Report or Presentation Title
Alameda County	Alameda County 2024 Point-in-Time Count Tableau Dashboard, 2024, Alameda County Public Health
Alameda County	Examining Increases in Mortality and Disparities from 2018-2019 to 2020-2021, 2024, Alameda County Public Health Department
Alameda County	Maternal, Paternal, Child, & Adolescent Health (MPCAH), 2024, Alameda County Public Health Department
Contra Costa County	Contra Costa County 2024 Point-in-Time Count Summary, 2024, Contra Costa Health
Tri-Valley	Eastern Alameda County Human Services Needs Assessment, 2024, John Snow, Inc.

Appendix 2: Secondary Data Indicators Index

Category	Indicator	Description	Source	Year(s)
BEHAVIORAL HEALTH	Deaths of Despair, Alameda County	NIH defines as suicide, alcohol-related liver disease and cirrhosis, and drug/alcohol poisoning. Age-Adjusted Rate per 100,000 Population. Regex Code(s): K70[0-4]|K7[3-4]|X4[0-5]|X[6-7]|X8[0-4]|Y1[0-5]|Y4[5,7,9]|Y870	Alameda County Public Health Department, CAPE Unit	2019–2023
BEHAVIORAL HEALTH	Deaths of Despair, Contra Costa County	NIH defines as suicide, alcohol-related liver disease and cirrhosis, and drug/alcohol poisoning. Age-Adjusted Rate per 100,000 Population. ICD-10 Codes X60-84,Y87.0,X40-45, Y10-15, Y45,Y47, Y49, K70, K73-74	Contra Costa Health	2019–2023
BEHAVIORAL HEALTH: ATOD[53]	Alcohol-Impaired Driving Deaths	Percentage of driving deaths with alcohol involvement.	Fatality Analysis Reporting System	2016–2020
BEHAVIORAL HEALTH: ATOD	Chronic Liver Disease and Cirrhosis Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019–2023
BEHAVIORAL HEALTH: ATOD	Current Adult Smokers	Percent of adults currently smoking (age-adjusted)	California Health Interview Survey (CHIS), as cited in Community Health Rankings	2020
BEHAVIORAL HEALTH: ATOD	Drug Poisoning (Overdose) Deaths	Number of drug poisoning deaths per 100,000 population.	National Center for Health Statistics - Mortality Files	2018–2020
BEHAVIORAL HEALTH: ATOD	Drug Poisoning (Overdose) Deaths Involving Any Opioid Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): T40[0-4,6]	Alameda County Public Health Department, CAPE Unit	2019–2023
BEHAVIORAL HEALTH: ATOD	Drug Poisoning (Overdose) Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): X4[0-4]|X6[0-4]|X85|Y1[0-4]	Alameda County Public Health Department, CAPE Unit	2019–2023
BEHAVIORAL HEALTH: ATOD	Drug Poisoning (Overdose) Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes X40-44, X60-64, X85, and Y10-Y14	Contra Costa County Health	2019–2023

[53] ATOD stands for Alcohol, Tobacco, and Other Drugs.

Category	Indicator	Description	Source	Year(s)
BEHAVIORAL HEALTH: ATOD	Drug Poisoning (Overdose) ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): T40[0-9]..(A|$|\b)	Alameda County Public Health Department, CAPE Unit	2020–2022
BEHAVIORAL HEALTH: ATOD	Drug/Alcohol Abuse & Dependence ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): F1[0-6,8-9]	Alameda County Public Health Department, CAPE Unit	2020–2022
BEHAVIORAL HEALTH: ATOD	Excessive Drinking	Percentage of adults reporting binge or heavy drinking (age-adjusted).	Behavioral Risk Factor Surveillance System	2020
BEHAVIORAL HEALTH: ATOD	Opioid Poisoning (Overdose) Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes X40-44, X60-64, X85, Y10-Y14 and T40.0 - T40.4, T40.6	Contra Costa County Public Health Department	2019–2023
BEHAVIORAL HEALTH: ATOD	Opioid Poisoning (Overdose) ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): ((T40[0-4].|T406[09])[1-4])(A|$|\b)	Alameda County Public Health Department, CAPE Unit	2020–2022
BEHAVIORAL HEALTH: ATOD	Sequelae Of Drug and Alcohol Abuse & Dependence Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): F1	Alameda County Public Health Department, CAPE Unit	2019–2023
BEHAVIORAL HEALTH: ATOD	Student Drinking	Students Who Have Consumed Alcohol 7 or More Times in Their Lifetimes (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
BEHAVIORAL HEALTH: ATOD	Student Recent Alcohol or Drug Use	Students Who Used Alcohol or Drugs in the Previous Month (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
BEHAVIORAL HEALTH: ATOD	Students Recent Marijuana Use	Students Who Used Marijuana 20-30 Days in the Previous Month (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
BEHAVIORAL HEALTH: MH[54]	Adult Depression	Percent of adults with depression (prevalence)	CDC BRFSS PLACES as cited in Eastern Alameda County Human Services Needs Assessment	2021
BEHAVIORAL HEALTH: MH	Adults with 1-3 Adverse Childhood Experiences	Percent of adults with 1-3 adverse childhood experiences	UC Davis Violence Prevention Research Program, tabulation of data from the CA BRFSS (Behavioral Risk Factor Surveillance System) and	2011–2017

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[54] MH stands for Mental Health.

Category	Indicator	Description	Source	Year(s)
			American Community Survey, as cited by KidsData.org	
BEHAVIORAL HEALTH: MH	Adults with 4 or More Adverse Childhood Experiences 2017	Percent of adults with 4 or more adverse childhood experiences	the CA BRFSS (Behavioral Risk Factor Surveillance System), as cited by KidsData.org	2011–2017
BEHAVIORAL HEALTH: MH	Children with 2 or More Adverse Experiences	Percent of children Ages 0-17 with 2 or More Adverse Experiences (Parent Reported)	Population Reference Bureau, analysis of National Survey of Children's Health and the American Community Survey, as cited by KidsData.org	2017–2021
BEHAVIORAL HEALTH: MH	Frequent Mental Distress	Percentage of adults reporting 14 or more days of poor mental health per month (age-adjusted).	Behavioral Risk Factor Surveillance System	2016–2019
BEHAVIORAL HEALTH: MH	Mental Health Hospitalizations among Children	Mental Health Hospitalization Discharges among Children Ages 5-14, 15-19.	California Dept. of Health Care Access and Information custom tabulation, as cited on KidsData.org	2021
BEHAVIORAL HEALTH: MH	Mental Health Provider Shortage Areas	Designated Healthy Provider Shortage Areas within counties	U.S. Department of Health & Human Services, Health Resources and Services Administration	2022
BEHAVIORAL HEALTH: MH	Mental Health Providers	Ratio of population to mental health providers.	Centers for Medicare & Medicaid Services, National Provider Identification	2022
BEHAVIORAL HEALTH: MH	Poor Mental Health	Percent of adults with poor mental health (prevalence)	CDC BRFSS PLACES as cited in Eastern Alameda County Human Services Needs Assessment	2021
BEHAVIORAL HEALTH: MH	Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted).	Behavioral Risk Factor Surveillance System	2020
BEHAVIORAL HEALTH: MH	Ratio of Students to School Psychologists	Ratio of Students to School Psychologists	California Dept. of Education, Staff Assignment and Course Data & DataQuest	2019
BEHAVIORAL HEALTH: MH	Ratio of Students to School Social Workers	Ratio of Students to School Social Workers	California Dept. of Education, Staff Assignment and Course Data & DataQuest	2019
BEHAVIORAL HEALTH: MH	Self-Harm ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): ((T3[6,7,9]9| T414|T427|T4[3,5,7,9]9)2.|(?!(T3[6,7,9]9|T41 4|T427|T4[3,5,7,9]9))(T3[6-9]|T4[0- 9]|T50)..2|((T5[1-4,6-9]| T6[0-	Alameda County Public Health Department, CAPE Unit	2020–2022

Category	Indicator	Description	Source	Year(s)
		3,5])9|(T58|T61)[01]|T64[08])2.|(?!((T5[1-4,6-9]|T6[0-3,5])9|(T58|T61)[01]|T64[0,8]))(T5[1-9]|T6[0-5])..2|(X7[1-9]|X8[0-3])...|T71..2|T1491.{0,1})(A|$|\b)		
BEHAVIORAL HEALTH: MH	Severe Mental Illness ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): F2[0-9]|F30[1-3,8-9]|F31[0-6]| F317[0-1,3,5,7] |F31[8-9]|F32[2-4]|F32[8-9]|F33[1-3]|F334[0-1]|F33[8-9]|F34|F39|F400|F4[1-2]|F431 |F4[4-5]|F48[1-2]|F60|F50|F53|F91	Alameda County Public Health Department, CAPE Unit	2020–2022
BEHAVIORAL HEALTH: MH	Severe Mental Illness ED Visits and Hospitalizations	ED Visits or Hospitalizations per 100,000 population. ICD-10 Codes: F2[0-9]|F30[1-3,8-9]| F31[0-6]| F317[0-1,3,5,7]| F31[8-9]| F32[2-4]| F32[8-9]| F33[1-3]| F334[0-1]| F33[8-9]| F34| F39| F400| F4[1-2]| F431| F4[4-5]| F48[1-2]| F60| F50| F53| F91	California Department of Health Care Access and Information (HCAI), Patient Discharge Data	2017–2021
BEHAVIORAL HEALTH: MH	Severe Mental Illness Related to Drug and Alcohol ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): F1[01,3-6,89][129][4-5]|F1[0,2-6,89]80|F12150|F12[29]5	Alameda County Public Health Department, CAPE Unit	2020–2022
BEHAVIORAL HEALTH: MH	Severe Mental Illness Related to Drug and Alcohol ED Visits and Hospitalizations	ED Visits or Hospitalizations per 100,000 population. ICD-10 Codes: F101[4-5]|F10180| F102[4-5] |F10280|F109[4-5]|F10980|F111[4-5]|F112[4-5]|F119[4-4],|F12150| F12180|F1225| F12280|F1295| F12980|F131[4-5]|F13180|F132[4-5]|F13280|F139[4-5]|F13980 |F141[4-5]| F14180| F142[4-5]|F14280|F149[4-5]| F14980|F151[4-5]| F15180|F152[4-5]|F15280|F159[4-5]|F15980|F161[4-5]|F16180|F162[4-5] |F16280 |F169[4-5]| F16980| F181[4-5]| F18180|F182[4-5]| F18280|F189[4-5]|F18980|F191[4-5]|F19180|F192[4-5]| F19280| F199[4-5]|F19980	California Department of Health Care Access and Information (HCAI), Patient Discharge Data	2017–2021
BEHAVIORAL HEALTH: MH	Social Associations	Number of membership associations per 10,000 population.	US Census Bureau, County Business Patterns	2020
BEHAVIORAL HEALTH: MH	Student Depression	Students Who Had Depression- Related Feelings in the Previous (Year 7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020

Category	Indicator	Description	Source	Year(s)
BEHAVIORAL HEALTH: MH	Student Suicidal Ideation the Previous Year	Students Who Seriously Considered Attempting Suicide in the Previous Year (9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
BEHAVIORAL HEALTH: MH	Students with a Low Level of Caring Relationships with Adults at School	Students with a Low Level of Caring Relationships with Adults at School (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
BEHAVIORAL HEALTH: MH	Suicide Among Leading Causes of Death	Rank among reasons for death within counties.	California Department of Public Health, 2024 Death Statistics File	2019–2023
BEHAVIORAL HEALTH: MH	Suicide Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): U03|X[6-7]|X8[0-4]|Y870	Alameda County Public Health Department, CAPE Unit	2019–2023
BEHAVIORAL HEALTH: MH	Suicide Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes X60-84	Contra Costa Health	2019–2023
CANCER	Breast Cancer (Female) Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Cancer Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019–2023
CANCER	Cancer Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes C00-C97	Contra Costa County Public Health Department	2019–2023
CANCER	Cancer Incidence Among Children Ages 0-19	Cancer Incidence among Children Ages 0-19	National Cancer Institute, Surveillance, Epidemiology, and End Results (SEER) Program Research Data; U.S. Cancer Statistics Working Group, U.S. Cancer Statistics Data Visualizations Tool	2018
CANCER	Cancer Incidence, All Sites	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Colorectal cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Kidney cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Liver cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Lung Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Lymph Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021

Category	Indicator	Description	Source	Year(s)
CANCER	Mammography Screening	Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening.	Mapping Medicare Disparities Tool	2020
CANCER	Melanoma Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Pancreas Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Prostate Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Thyroid Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Urinary Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CANCER	Uterine Cancer Incidence	Age-Adjusted Incidence Rate (AAIR) of new cancers per 100,000 for this site.	University of California, San Francisco. California Health Maps website.	2012–2021
CLIMATE	Air Pollution - Diesel	Average daily amount of particulate pollution from diesel sources	CalEnviroScreen 4.0	2016
CLIMATE	Air Pollution - Particulate Matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).	Environmental Public Health Tracking Network	2019
CLIMATE	Air Pollution - Particulate Matter	Annual average amount of fine particulate matter (PM2.5)	National Institute for Minority Health and Health Disparities.	2015–2017
CLIMATE	Change in Average Daily Temperature	Change in Average Daily Temperature (Degrees Fahrenheit)	First Street Technology	2025
CLIMATE	Commuters Who Carpool, Tri-Valley	Percent of commuters who carpool for Tri-Valley and Tri-Valley cities	US Census Bureau ACS 5-year 2017–2021, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021
CLIMATE	Commuters Who Drive Alone, Tri-Valley	Percent of commuters who drive alone, Tri-Valley for Tri-Valley and Tri-Valley cities	US Census Bureau ACS 5-year 2017–2021, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021
CLIMATE	Commuters Who Use Public Transit, Tri-Valley	Commuters Who Use Public Transit, for Tri-Valley and Tri-Valley cities	US Census Bureau ACS 5-year 2017–2021, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021

Category	Indicator	Description	Source	Year(s)
CLIMATE	Commuting Alone	Percentage of the workforce that drives alone to work.	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
CLIMATE	Drinking Water Contaminants	Index score combining information about 13 contaminants and 2 types of water quality violations found during drinking water sample testing. California Environmental Protection Agency (CalEPA) and is included in the CalEnviroScreen (CES).	California Environmental Protection Agency (CalEPA)	2011–2019
CLIMATE	Drinking Water Violations	Indicator of the presence of health-related drinking water violations. 'Yes' indicates the presence of a violation, 'No' indicates no violation.	Safe Drinking Water Information System	2021
CLIMATE	Extreme Heat Days (Projected)	Projected number of extreme heat days annually for 2050 and 2085. Extreme heat refers to 90 degrees or more.	CDPH California Building Resilience Against Climate Effects (CalBRACE)	2022
CLIMATE	Flood Risk	Flood risk now and in 30 years (minor to severe) by type (residential, commercial, infrastructure, social, and roads)	First Street Technology	2025
CLIMATE	High Temperature Days	Number of Days in excess of 95° (Projected)	First Street Technology	2025
CLIMATE	Poor Air Quality	The likely number of days with air quality considered to be "Unhealthy" or "Unhealthy for Sensitive Groups," based on the U.S. Environmental Protection Agency's Air Quality Index (AQI), for both today and 30 years in the future under the influence of climate change.	First Street Technology	2025
CLIMATE	Traffic Volume	Regional Studies	EJSCREEN: Environmental Justice Screening and Mapping Tool, as cited by Community Health Rankings	2019
CLIMATE	Wildfire Risk	Wildfire risk now and in 30 years (1=minimal; 10=extreme)	First Street Technology	2025
COMMUNITY SAFETY	Assault Deaths (Homicide)	Number of deaths due to homicide per 100,000 population.	National Center for Health Statistics - Mortality Files, as cited by County Health Rankings, as cited by County Health Rankings	2014–2020

Category	Indicator	Description	Source	Year(s)
COMMUNITY SAFETY	Assault Deaths (Homicide) Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019–2023
COMMUNITY SAFETY	Assault ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): ((T3[679]9|T414|T427|T4[3579]9)3.|(?!(T3[679]9|T414|T427|T4[3579]9))(T3[6-9]|T4[0-9]|T50)..3|((T5[1-46-9]|T6[0-35])9|(T58|T61)[01]|T64[08])3.|(?!((T5[1-46-9]|T6[0-35])9|(T58|T61)[01]|T64[08]))(T5[1-9]|T6[0-5])..3|T71..3|(X9[2-9]|Y0[0-68]|T7[46])...|Y07.{1,3}|Y09)(A|$|\b)	Alameda County Public Health Department, CAPE Unit	2019–2023
COMMUNITY SAFETY	Child Abuse or Neglect	The number of children under 18 years of age that experienced abuse or neglect in cases per 1,000 children. Rates are based on children with a substantiated maltreatment allegation.	California Child Welfare Indicators Project, CCWIP Reports. University of California at Berkeley & California Dept. of Social Services, as cited by KidsData.org	2020
COMMUNITY SAFETY	Domestic Violence-Related Calls	Domestic Violence-Related Calls for Assistance among Adults Ages 18-69	California Dept. of Justice Criminal Justice Statistics Center, Domestic Violence-Related Calls for Assistance.	2021
COMMUNITY SAFETY	Domestic Violence-Related Calls Increase, Tri-Valley	Percent increase in domestic violence crisis calls	Eastern Alameda County Human Services Needs Assessment	2024
COMMUNITY SAFETY	Felony Arrests among Juveniles Ages 10-17	Felony Arrests among Juveniles Ages 10-17	California Dept. of Justice, Crime Statistics: Arrests; California Dept. of Finance, Population Estimates and Projections	2021
COMMUNITY SAFETY	Firearm-Related Deaths	Number of deaths due to firearms per 100,000 population.	National Center for Health Statistics - Mortality Files, as cited by County Health Rankings	2016–2020
COMMUNITY SAFETY	Firearm-Related Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes W32-W34, X72-X74, X93-X95, Y22-Y24, U01.4	Contra Costa County Public Health Department	2019–2023
COMMUNITY SAFETY	Firearm-Related ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): ((W3[23][01]|(X74|X95|Y24)[89]|Y384)..|(	Alameda County Public Health Department, CAPE Unit	2020–2022

Category	Indicator	Description	Source	Year(s)
		(X7|Y2)[23]|X9[34])...|W34[01][09].|Y350[0-39].)(A|$|\b)		
COMMUNITY SAFETY	Foster Care - Length of Stay	Median Length of Stay in Foster Care among Children Ages 0-17 Entering Foster Care	California Child Welfare Indicators Project, CCWIP Reports. University of California at Berkeley & California Dept. of Social Services	2024
COMMUNITY SAFETY	Foster Care, Ages 0-21	Children Ages 0-21 in Foster Care	California Child Welfare Indicators Project, CCWIP Reports. University of California at Berkeley & California Dept. of Social Services	2024
COMMUNITY SAFETY	Juvenile Arrests	Rate of delinquency cases per 1,000 juveniles.	Easy Access to State and County Juvenile Court Case Counts, as cited by Community Health Rankings	2019
COMMUNITY SAFETY	Property Crime Rates, Tri-Valley	Incidents per 1,000, by Tri-Valley City	California Department of Justice, as cited in Eastern Alameda County Human Services Needs Assessment	2023
COMMUNITY SAFETY	Student Gang Affiliation	Students Who Consider Themselves Gang Members (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
COMMUNITY SAFETY	Students Bullied or Harassed at School	Students Bullied or Harassed at School in the Previous Year (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
COMMUNITY SAFETY	Students Bullied or Harassed at School because of Race/Ethnicity or National Origin	Students who were bullied or harassed at school in the previous year on the basis of their race/ethnicity or national origin, by race/ethnicity and number of occasions (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2017–2019
COMMUNITY SAFETY	Students Cyberbullied	Students Cyberbullied 4 or More Times in the Previous Year (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
COMMUNITY SAFETY	Students Fear Being Beaten Up at School	Students Who Feared Being Beaten Up at School on 4 or More Occasions in the Previous Year (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
COMMUNITY SAFETY	Students Who Feel Very Unsafe at School	Students Who Feel Very Unsafe at School (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020

Category	Indicator	Description	Source	Year(s)
COMMUNITY SAFETY	Violent Crime Rate	Definition not found.	County Health Rankings	2007–2016
COMMUNITY SAFETY	Violent Crime Rate, Tri-Valley	Incidents per 1,000, by Tri-Valley City	California Department of Justice, as cited in Eastern Alameda County Human Services Needs Assessment	2023
DEMOGRAPHICS	Kids Ages 0-17 Living in LEP Households	Children Ages 0-17 living in limited English-speaking households	Population Reference Bureau, analysis of U.S. Census Bureau American Community Survey public use microdata	2024
DEMOGRAPHICS	Percent Not Proficient in English	Percentage of population aged 5 and over who reported speaking English less than "well."	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
DEMOGRAPHICS	Percent of Population by Age 65 and Older	Percentage of population ages 0-18, 65 and older.	Census Population Estimates	2021
DEMOGRAPHICS	Percent of Population by Gender	Percentage of population by gender	Census Population Estimates	2021
DEMOGRAPHICS	Percent of Population by Race	Percentage of population self-identifying as American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, Black, or White	Census Population Estimates	2021
DEMOGRAPHICS	Percent of Population, Hispanic	Percentage of population self-identifying as Hispanic.	Census Population Estimates	2021
DEMOGRAPHICS	Percent Rural	Percentage of population living in a rural area.	Census Population Estimates	2010
DEMOGRAPHICS	Population	Total population.	Census Population Estimates	2021
DEMOGRAPHICS	Population by Age (including Median Age), Tri-Valley	Number and percent of the population by age group and median age, for Tri-Valley and Tri-Valley cities	US Census Bureau ACS 5-year estimates, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021
DEMOGRAPHICS	Population by Race/Ethnicity, Tri-Valley	Number and percent of the population by race/ethnicity, for Tri-Valley and Tri-Valley cities	US Census Bureau ACS 5-year estimates, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021
DEMOGRAPHICS	Population Change (2010-2021), Tri-Valley	Historic and predicted trends in the number of people by race/ethnicity	US Census Bureau ACS 5-year estimates, as cited in Eastern Alameda County Human Services Needs Assessment	N/A

Category	Indicator	Description	Source	Year(s)
DEMOGRAPHICS	Population Projections (2021-2030), Tri-Valley	Historic and predicted trends in the number of people by race/ethnicity	Cited in Eastern Alameda County Human Services Needs Assessment	N/A
DIABETES & OBESITY	Sufficient Fruit and Vegetable Consumption, Children Ages 12-17	Children Ages 12-17 Who Ate 5 or More Servings of Fruits and Vegetables in the Previous Day	UCLA Center for Health Policy Research, California Health Interview Survey	2020
DIABETES & OBESITY	Sufficient Fruit and Vegetable Consumption, Children Ages 2-11	Children Ages 2-11 Who Ate 5 or More Servings of Fruits and Vegetables in the Previous Day	UCLA Center for Health Policy Research, California Health Interview Survey	2020
ECON: [55] HOUSING	Apartment Rental Cost	Funds needed to rent a 2-bedroom apartment (U.S.)	Siliconvalleyindicators.org	2024
ECON: HOUSING	Average Rent, Livermore	Average Rent, Livermore	Livermore Housing Elements, as cited by County Health Rankings	Not stated
ECON: HOUSING	Blood Lead Levels, Kids 0-5	Children Ages 0-5 with moderate/very high blood lead levels among those tested. Moderate: 4.5-9.49 mcg/dL Very high: at least 9.5 mcg/dL	California Dept. of Public Health, Childhood Lead Poisoning Prevention Branch, California Blood Lead Data & California's Progress in Preventing and Managing Childhood Lead Exposure	2022
ECON: HOUSING	Blood Lead Levels, Kids/Youth	Children/youth Ages 6-20 with moderate/very high blood lead levels among those tested. Moderate: 4.5-9.49 mcg/dL Very high: at least 9.5 mcg/dL	California Dept. of Public Health, Childhood Lead Poisoning Prevention Branch, California Blood Lead Data & California's Progress in Preventing and Managing Childhood Lead Exposure	2022
ECON: HOUSING	Broadband Access	Percentage of households with broadband internet connection.	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
ECON: HOUSING	Children Ages 0-17 Living in Crowded Households	Children Ages 0-17 Living in Crowded Households	Population Reference Bureau, analysis of U.S. Census Bureau American Community Survey public use microdata	2022
ECON: HOUSING	Homelessness, Alameda County	Point-in-time count of homeless individuals, sheltered and unsheltered, with demographics (e.g. race and Age.)	Alameda County Homeless Census & Survey Executive Summary	2024
ECON: HOUSING	Homelessness, Contra Costa County	Point-in-time count of homeless individuals, sheltered and unsheltered, with demographics (e.g. race and age.)	Contra Costa County Homeless Point-in-Time Count & Survey Summary	2023

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[55] Econ stands for Economic Stability.

Category	Indicator	Description	Source	Year(s)
ECON: HOUSING	Homeownership	Percentage of owner-occupied housing units.	United States Census Bureau, American Community Survey, 5-year estimates, as cited by Community Health Rankings	2017–2021
ECON: HOUSING	Homeownership, Tri-Valley	Percent of population that are homeowners, for Tri-Valley and Tri-Valley cities, and by race	United States Census Bureau, American Community Survey, 5-year estimates, as cited by Community Health Rankings	2017–2021
ECON: HOUSING	Housing Cost-Burdened Homeowners, Tri-Valley	Percent of residents who are rent-burdened, including severely rent-burdened (by race, socioeconomic status)	United States Census Bureau, American Community Survey, 5-year estimates, as cited by County Health Rankings	2017–2021
ECON: HOUSING	Point-in-Time Count of Homeless Children	Point-in-Time Count of Homeless Children Ages 0-17 (multiple counties and California)	U.S. Dept. of Housing and Urban Development, Point-In-Time Estimates of Homelessness in the U.S.	2023
ECON: HOUSING	Point-in-Time Count of Homeless Youth	Point-in-Time Count of Homeless Youth Ages 18-24 (multiple counties and California)	U.S. Dept. of Housing and Urban Development, Point-In-Time Estimates of Homelessness in the U.S., as cited in KidsData.org	2023
ECON: HOUSING	Point-in-Time Count of Unsheltered Homeless Children	Point-in-Time Count of Unsheltered Homeless Children Ages 0-17 (multiple counties and California)	U.S. Dept. of Housing and Urban Development, Point-In-Time Estimates of Homelessness in the U.S., as cited in KidsData.org	2023
ECON: HOUSING	Point-in-Time Count of Unsheltered Homeless Youth	Point-in-Time Count of Unsheltered Homeless Youth Ages 18-24 (multiple counties and California)	U.S. Dept. of Housing and Urban Development, Point-In-Time Estimates of Homelessness in the U.S., as cited in KidsData.org	2023
ECON: HOUSING	Rent-Burdened	Percent of residents who are rent-burdened, including severely rent-burdened (by race, socioeconomic status)	California Housing Partnership	2022
ECON: HOUSING	Rent-Burdened, Tri-Valley	Percent of residents who are rent-burdened, including severely rent-burdened (by race, socioeconomic status)	United States Census Bureau, American Community Survey, 5-year estimates, as cited by County Health Rankings	2017–2021

Category	Indicator	Description	Source	Year(s)
ECON: HOUSING	Severe Housing Cost Burden	Percentage of households that spend 50% or more of their household income on housing.	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
ECON: HOUSING	Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.	Comprehensive Housing Affordability Strategy (CHAS) data	2015–2019
ECON: HOUSING	Students Recorded as Homeless at Some Point during the School Year	Students Recorded as Homeless at Some Point during the School Year	California Dept. of Education, Coordinated School Health and Safety Office custom tabulation & DataQuest	2023
ECONOMIC STABILITY	Annual Cost of Childcare for Infants Ages 0-2 in a Childcare Center	Annual Cost of Childcare for Infants Ages 0-2 in a Childcare Center	California Child Care Resource and Referral Network, California Child Care Portfolio	2023
ECONOMIC STABILITY	Annual Cost of Childcare for Preschoolers Ages 3-5 in a Childcare Center	Annual Cost of Childcare for Preschoolers Ages 3-5 in aChildcare Center	California Child Care Resource and Referral Network, California Child Care Portfolio	2023
ECONOMIC STABILITY	Child Care Cost Burden	Child care costs for a household with two children as a percent of median household income.	The Living Wage Calculator; Small Area Income and Poverty Estimates	2022 & 2021
ECONOMIC STABILITY	Children Ages 0-17 Living in Food Insecure Households	Children Ages 0-17 Living in Food Insecure Households	USDA Food Environment Atlas; Map the Meal Gap from Feeding America	2021
ECONOMIC STABILITY	Children Ages 0-17 without Secure Parental Employment	Children Ages 0-17 without Secure Parental Employment	Population Reference Bureau, analysis of U.S. Census Bureau American Community Survey public use microdata	2022
ECONOMIC STABILITY	Children Eligible for Free or Reduced-Price Lunch	Percentage of children enrolled in public schools that are eligible for free or reduced-price lunch.	National Center for Education Statistics, as cited by County Health Rankings	2020–2021
ECONOMIC STABILITY	Children in Poverty	Percentage of people under age 18 in poverty.	Small Area Income and Poverty Estimates, as cited by County Health Rankings	2021
ECONOMIC STABILITY	Children in Single-Parent Households	Percentage of children that live in a household headed by a single parent.	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
ECONOMIC STABILITY	Disconnected Youth	Percentage of teens and young adults ages 16-19 who are neither working nor in school.	United States Census Bureau, American Community Survey, 5-year estimates, as cited by County Health Rankings	2017–2021

Category	Indicator	Description	Source	Year(s)
ECONOMIC STABILITY	Food Insecurity	Percentage of population who lack adequate access to food.	USDA Food Environment Atlas; Map the Meal Gap from Feeding America, as cited by County Health Rankings	2020
ECONOMIC STABILITY	Gender Pay Gap	Ratio of women's median earnings to men's median earnings for all full-time, year-round workers, presented as "cents on the dollar."	United States Census Bureau, American Community Survey, 5-year estimates, as cited by County Health Rankings	2017–2021
ECONOMIC STABILITY	Income Inequality	Ratio of household income at the 80th percentile to income at the 20th percentile.	United States Census Bureau, American Community Survey, 5-year estimates, as cited by County Health Rankings	2017–2021
ECONOMIC STABILITY	Kids in Working Families for Whom Licensed Childcare is Available	Children Ages 0-12 in Working Families for Whom Licensed Childcare is Available	California Child Care Resource and Referral Network, California Child Care Portfolio; U.S. Census Bureau, American Community Survey public use microdata	2022
ECONOMIC STABILITY	Median Household Income	The income where half of households in a county earn more and half of households earn less.	Small Area Income and Poverty Estimates, as cited by Community Health Rankings	2021
ECONOMIC STABILITY	Median Household Income, Tri-Valley	The income where half of households in a county earn more and half of households earn less.	United States Census Bureau, American Community Survey, 5-year estimates, as cited by in Eastern Alameda County Human Services Needs Assessment	2017–2021
ECONOMIC STABILITY	Meeting Costs of Living	Percent of Bay Area residents who can consistently afford to pay their monthly expenses	2023 Silicon Valley Poll	2023
ECONOMIC STABILITY	Poverty, Tri-Valley	Number and percent of the population living below the Federal Poverty Level, by Tri-Valley City and Race/Ethnicity	United States Census Bureau, American Community Survey, 5-year estimates, as cited by in Eastern Alameda County Human Services Needs Assessment	2017–2021
ECONOMIC STABILITY	Real Cost Measure	Funds needed to afford the cost of living based on the cost of housing, childcare, food, health care, transportation, taxes and other miscellaneous things.	United Ways of California, Real Cost Measure Interactive Data Dashboard. United Way https://unitedwaysca.org/realcost.	2023
ECONOMIC STABILITY	Unemployment	Percentage of population ages 16 and older unemployed but seeking work.	Bureau of Labor Statistics	2024

Category	Indicator	Description	Source	Year(s)
ECONOMIC STABILITY	Unemployment, Tri-Valley	Percent of total civilian labor force age 16 and over that is unemployed in each area, by Tri-Valley city	United States Census Bureau, American Community Survey, 5-year estimates, as cited by in Eastern Alameda County Human Services Needs Assessment	2024
ECON: EDUCATION	Child Care Centers	Number of child care centers per 1,000 population under 5 years old.	Homeland Infrastructure Foundation-Level Data, as cited by County Health Rankings	2010–2022
ECON: EDUCATION	Chronic Absenteeism Rates by Student Race/Ethnicity, Tri-Valley	Percent of students who were chronically absent, by Tri-Valley city and race	California Department of Education, DataQuest, as cited by in Eastern Alameda County Human Services Needs Assessment	2023
ECON: EDUCATION	Education Levels, Tri-Valley	Percent of the population by educational attainment: Less Than 9th Grade, 9th-12th Grade, High School Degree, Some College, Associate's Degree, Bachelor's Degree, Graduate Degree) for Tri-Valley, Tri-Valley cities by race	United States Census Bureau, American Community Survey, 5-year estimates, as cited by in Eastern Alameda County Human Services Needs Assessment, as cited by in Eastern Alameda County Human Services Needs Assessment	2017–2021
ECON: EDUCATION	High School Completion	Percentage of adults ages 25 and over with a high school diploma or equivalent.	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
ECON: EDUCATION	High School Graduates Completing College Preparatory Courses	Percent of high school graduates across Tri-Valley schools who met requirements	California Department of Education, DataQuest	2024
ECON: EDUCATION	High School Graduation	Percentage of ninth-grade cohort that graduates in four years.	EDFacts	2019–2020
ECON: EDUCATION	High school Graduation Rate, Tri-Valley	Percent of students across Tri-Valley schools who graduated from high school	California Department of Education, DataQuest	2024
ECON: EDUCATION	Math Scores	Average grade level performance for 3rd graders on math standardized tests.	Stanford Education Data Archive	2018
ECON: EDUCATION	Ratio of Students to School Counselors	Ratio of Students to School Counselors	California Dept. of Education, Staff Assignment and Course Data & DataQuest	2019
ECON: EDUCATION	Reading Scores	Average grade level performance for 3rd graders on English Language Arts standardized tests.	Stanford Education Data Archive	2018

Category	Indicator	Description	Source	Year(s)
ECON: EDUCATION	School Funding Adequacy	The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.	School Finance Indicators Database	2020
ECON: EDUCATION	School Segregation	The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. Index 0 to 1; 0=school composition that approximates race and ethnicity distributions in the student populations within the county;1=more segregation	National Center for Education Statistics	2021–2022
ECON: EDUCATION	Some College	Percentage of adults ages 25-44 with some post-secondary education.	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
ECON: EDUCATION	Students Meeting English Language Standards	11th Graders Meeting or Exceeding Grade-Level CAASPP Standard in English Language Arts	California Dept. of Education, Test Results for California's Assessments	2022
ECON: EDUCATION	Students Meeting Math Standards	11th Graders Meeting or Exceeding Grade-Level CAASPP Standard in Mathematics	California Dept. of Education, Test Results for California's Assessments	2022
ECON: EDUCATION	Students Not Completing High School	Students Not Completing High School	California Dept. of Education, Dropouts by Race and Gender & Adjusted Cohort Graduation Rate and Outcome Data	2022
ECON: EDUCATION	Students with a Low Level of Meaningful Participation at School	Students with a Low Level of Meaningful Participation at School (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
ECON: EDUCATION	Students with a Low Level of School Connectedness	Students with a Low Level of School Connectedness (7th Graders, 9th Graders, 11th Graders)	WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education	2020
GENERAL HEALTH/ MORTALITY	All-Cause Mortality, Alameda County	Mortality for all causes, age-adjusted rate per 100,000	Alameda County Public Health Department, CAPE Unit	2019–2023

Category	Indicator	Description	Source	Year(s)
GENERAL HEALTH/ MORTALITY	Child Mortality	Number of deaths among residents under age 18 per 100,000 population.	National Center for Health Statistics - Mortality Files	2017–2020
GENERAL HEALTH/ MORTALITY	Child/Youth Mortality (Ages 1-24)	Deaths among Children and Youth Ages 1-24	California Dept. of Public Health, Death Statistical Master Files; California Dept. of Finance, Population Estimates and Projections; CDC WONDER Online Database, Underlying Cause of Death	2020
GENERAL HEALTH/ MORTALITY	Frequent Physical Distress	Percentage of adults reporting 14 or more days of poor physical health per month (age-adjusted).	Behavioral Risk Factor Surveillance System	2020
GENERAL HEALTH/ MORTALITY	Insufficient Sleep	Percentage of adults who report fewer than 7 hours of sleep on average (age-adjusted).	Behavioral Risk Factor Surveillance System	2020
GENERAL HEALTH/ MORTALITY	Life Expectancy	Average number of years a person can expect to live.	National Center for Health Statistics - Mortality Files, as cited by County Health Rankings	2018–2020
GENERAL HEALTH/ MORTALITY	Life Expectancy, Alameda County	Average number of years a person can expect to live.	Alameda County Public Health Department, CAPE Unit	2019–2023
GENERAL HEALTH/ MORTALITY	Mortality Rates and Rank, Alameda County	Mortality counts and age-adjusted rates per 100,000	Alameda County Examining Increases in Mortality and Disparities from 2018-2019 to 2020-2021, Alameda County Public Health Department	2020–2021
GENERAL HEALTH/ MORTALITY	Mortality Rates and Rank, California and by County	Mortality counts and age-adjusted rates per 100,000, ranked.	California Dept. of Public Health, Death Statistical Master Files.	2022
GENERAL HEALTH/ MORTALITY	Poor or Fair Health	Percentage of adults reporting fair or poor health (age-adjusted).	Behavioral Risk Factor Surveillance System	2020
GENERAL HEALTH/ MORTALITY	Poor Physical Health Days	Average number of physically unhealthy days reported in past 30 days (age-adjusted).	Behavioral Risk Factor Surveillance System	2020
GENERAL HEALTH/ MORTALITY	Premature Death	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	National Center for Health Statistics - Mortality Files, as cited by County Health Rankings	2018–2020

Category	Indicator	Description	Source	Year(s)
GENERAL HEALTH/ MORTALITY	Premature Mortality	Number of deaths among residents under age 75 per 100,000 population (age-adjusted).	National Center for Health Statistics - Mortality Files	2018–2020
GENERAL HEALTH/ MORTALITY	Total Deaths, Contra Costa County	All deaths	Contra Costa County Public Health Department	2019–2023
GENERAL HEALTH/ MORTALITY	Total Population	Total population of each county.	U.S. Census Bureau, American Community Survey, 5-year Estimates	2017–2021
HEALTHCARE ACCESS & DELIVERY	Children in Limited English Households	Percent of Children Living in Limited English-Speaking Households	U.S. Census Bureau, American Community Survey, as cited in KidsData.org	2021
HEALTHCARE ACCESS & DELIVERY	Children with Health Insurance Coverage	Children Ages 0-18 with Health Insurance Coverage	Population Reference Bureau, analysis of U.S. Census Bureau American Community Survey public use microdata	2024
HEALTHCARE ACCESS & DELIVERY	Health Provider Shortage Areas: Primary Care	Designated Healthy Provider Shortage Areas within County	U.S. Department of Health & Human Services, Health Resources and Services Administration	2022
HEALTHCARE ACCESS & DELIVERY	Households without a Vehicle	Percent of Households without a vehicle, for Tri-Valley and Tri-Valley cities	United States Census Bureau, American Community Survey, 5-year estimates, as cited by in Eastern Alameda County Human Services Needs Assessment	2017–2021
HEALTHCARE ACCESS & DELIVERY	Limited English Proficiency (LEP) by ZIP Code	Map of Zip Codes Where the Proportion of LEP Individuals is More or Less than 20% of the California Benchmark	Kaiser Permanente Community Health Data Platform	2021
HEALTHCARE ACCESS & DELIVERY	Location And Type of Services, Tri-Valley	Not available	Cited in Eastern Alameda County Human Services Needs Assessment	2024
HEALTHCARE ACCESS & DELIVERY	Non-Physician Primary Care Providers Ratio	Ratio of population to primary care providers other than physicians.	CMS, National Provider Identification	2022
HEALTHCARE ACCESS & DELIVERY	Percent of the Population with Public Health Insurance, Tri-Valley	Percent of the Population with Public Health Insurance	US Census Bureau ACS 5-year estimates, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021

Category	Indicator	Description	Source	Year(s)
HEALTHCARE ACCESS & DELIVERY	Preventable Hospital Stays	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.	Mapping Medicare Disparities Tool, as cited by County Health Rankings	2020
HEALTHCARE ACCESS & DELIVERY	Primary Care Physicians	Ratio of population to primary care physicians.	Area Health Resource File/American Medical Association	2020
HEALTHCARE ACCESS & DELIVERY	Provider To Patient Ratio, Tri-Valley	Number of OB/GYNs to every patient, for Tri-Valley cities	National Plan and Provider Enumeration System National Provider Identifier records, as cited in Eastern Alameda County Human Services Needs Assessment	2022
HEALTHCARE ACCESS & DELIVERY	Provider To Patient Ratio, Tri-Valley	Number of primary care physicians to every patient, for Tri-Valley cities	National Plan and Provider Enumeration System National Provider Identifier records, as cited in Eastern Alameda County Human Services Needs Assessment	2022
HEALTHCARE ACCESS & DELIVERY	Provider To Patient Ratio, Tri-Valley	Number of primary care nurse practitioners to every patient, for Tri-Valley cities	National Plan and Provider Enumeration System National Provider Identifier records, as cited in Eastern Alameda County Human Services Needs Assessment	2022
HEALTHCARE ACCESS & DELIVERY	Provider To Patient Ratio, Tri-Valley	Number of dentists to every patient, for Tri-Valley cities	National Plan and Provider Enumeration System National Provider Identifier records, as cited in Eastern Alameda County Human Services Needs Assessment	2022
HEALTHCARE ACCESS & DELIVERY	Public Health Insurance (Number of People), Tri-Valley	Number of people with public health insurance	US Census Bureau ACS 5-year estimates, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021
HEALTHCARE ACCESS & DELIVERY	Ratio of Students to School Nurses	Ratio of Students to School Nurses	California Dept. of Education, Staff Assignment and Course Data & DataQuest	2019
HEALTHCARE ACCESS & DELIVERY	Ratio of Students to School Speech/Language/Hearing Specialists	Ratio of Students to School Speech/Language/Hearing Specialists	California Dept. of Education, Staff Assignment and Course Data & DataQuest	2019

Category	Indicator	Description	Source	Year(s)
HEALTHCARE ACCESS & DELIVERY	Uninsured	Percentage of population under age 65 without health insurance.	Small Area Health Insurance Estimates	2020
HEALTHCARE ACCESS & DELIVERY	Uninsured (Number of People), Tri-Valley	Number of uninsured people	US Census Bureau ACS 5-year estimates, as cited in Eastern Alameda County Human Services Needs Assessment	2017–2021
HEALTHCARE ACCESS & DELIVERY	Uninsured Adults	Percentage of adults under age 65 without health insurance.	Small Area Health Insurance Estimates	2020
HEALTHCARE ACCESS & DELIVERY	Uninsured Children	Percentage of children under age 19 without health insurance.	Small Area Health Insurance Estimates	2020
HEALTHCARE ACCESS: ORAL HEALTH	Dentists	Ratio of population to dentists.	Area Health Resource File/National Provider Identifier Downloadable File	2021
HEALTHCARE ACCESS: ORAL HEALTH	Health Provider Shortage Areas: Dental Health	Designated Healthy Provider Shortage Areas within County	U.S. Department of Health & Human Services, Health Resources and Services Administration	2022
HEART/ STROKE	Acute Myocardial Infarction Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I2[1-2]	Alameda County Public Health Department, CAPE Unit	2019–2023
HEART/ STROKE	Acute Myocardial Infarction ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I2[1-2]	Alameda County Public Health Department, CAPE Unit	2020–2022
HEART/ STROKE	All Heart Disease Deaths, Alameda County	Deaths from heart disease	Alameda County Public Health Department, CAPE Unit	2019–2023
HEART/ STROKE	Cardiac Dysrhythmia Deaths, Alameda County	Deaths from cardiac dysrhythmia	Alameda County Public Health Department, CAPE Unit	2019–2023
HEART/ STROKE	Cardiac Dysrhythmia ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I4[7-9]	Alameda County Public Health Department, CAPE Unit	2020–2022
HEART/ STROKE	Cardiovascular Disease Deaths	Deaths from cardiovascular disease	Alameda County Public Health Department, CAPE Unit	2019–2023
HEART/ STROKE	Cardiovascular Disease ED Visits and Hospitalizations	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I[0-6]|I7[0-8]	Alameda County Public Health Department, CAPE Unit	2020–2022
HEART/ STROKE	Cerebrovascular Diseases Among Leading Causes of Death,	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019–2023

Category	Indicator	Description	Source	Year(s)
HEART/ STROKE	Cerebrovascular Diseases Deaths, Alameda County	Deaths from cerebrovascular disease	Alameda County Public Health Department, CAPE Unit	2019– 2023
HEART/ STROKE	Essential Hypertension and Hypertensive Renal Disease Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019– 2023
HEART/ STROKE	Heart Disease Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes I00-I09, I11, I13, I20-I51	Contra Costa County Public Health Department	2019– 2023
HEART/ STROKE	Heart Disease ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I0[0-9]|I1[1,3]|I[2-4]|I5[0,1]	Alameda County Public Health Department, CAPE Unit	2020– 2022
HEART/ STROKE	Heart Diseases Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019– 2023
HEART/ STROKE	Heart Failure ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I0981|I1[1,3]0|I132|I50[1-4,8-9]	Alameda County Public Health Department, CAPE Unit	2020– 2022
HEART/ STROKE	Heart Failure MCOD Deaths, Alameda County	Multiple causes of death: Age-Adjusted Rate per 100,000 Population. Regex Code(s): I50	Alameda County Public Health Department, CAPE Unit	2019– 2023
HEART/ STROKE	Hemorrhagic Stroke Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I6[0-2]	Alameda County Public Health Department, CAPE Unit	2019– 2023
HEART/ STROKE	Hemorrhagic Stroke ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I6[0-2]	Alameda County Public Health Department, CAPE Unit	2020– 2022
HEART/ STROKE	High Blood Pressure Prevalence	Percent (Crude Prevalence) of Population with High Blood Pressure	CDC Interactive Atlas of Heart Disease and Stroke (BRFSS)	2021
HEART/ STROKE	Hypertension Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I1[0-3]	Alameda County Public Health Department, CAPE Unit	2019– 2023
HEART/ STROKE	Hypertension ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I1[0-5]	Alameda County Public Health Department, CAPE Unit	2020– 2022
HEART/ STROKE	Hypertension MCOD Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I1[0-5]	Alameda County Public Health Department, CAPE Unit	2019– 2023
HEART/ STROKE	Ischemic Heart Diseases Deaths, Alameda County	Per Mayo clinic: A life-threatening condition that occurs when blood flow to the brain is blocked. This prevents brain tissue from getting oxygen and nutrients,	Alameda County Public Health Department, CAPE Unit	2019– 2023

Category	Indicator	Description	Source	Year(s)
		which can lead to brain cell death. Ischemic strokes are the most common type of stroke. Age-Adjusted Rate per 100,000 Population. Regex Code(s): I2[0-5]		
HEART/ STROKE	Ischemic Heart Diseases ED Visits and Hospitalizations	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I2[0-5]	Alameda County Public Health Department, CAPE Unit	2020–2022
HEART/ STROKE	Ischemic Stroke Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I6[3,5-6]	Alameda County Public Health Department, CAPE Unit	2019–2023
HEART/ STROKE	Ischemic Stroke ED Visits and Hospitalizations	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I6[3,5-6]	Alameda County Public Health Department, CAPE Unit	2020–2022
HEART/ STROKE	Stroke Deaths, Contra Costa County	Nontraumatic subarachnoid hemorrhage, nontraumatic intracerebral hemorrhage, other and unspecified nontraumatic intracranial hemorrhage, cerebral infarction, occlusion and stenosis of precerebral arteries, not resulting in cerebral infarction, occlusion and stenosis of cerebral arteries, not resulting in cerebral infarction, other cerebrovascular diseases, cerebrovascular disorders in diseases classified elsewhere, sequelae of cerebrovascular disease	Contra Costa County Public Health Department	2019–2023
HEART/ STROKE	Stroke ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): I6	Alameda County Public Health Department, CAPE Unit	2020–2022
MATERNAL/ INFANT HEALTH	Babies Breastfed in Hospital	Babies Breastfed in Hospital	California Dept. of Public Health, In-Hospital Breastfeeding Initiation Data, as cited by KidsData.org	2021
MATERNAL/ INFANT HEALTH	Babies Breastfed in Hospital Exclusively	Babies Breastfed Exclusively in Hospital	California Dept. of Public Health, In-Hospital Breastfeeding Initiation Data, as cited by KidsData.org	2021
MATERNAL/ INFANT HEALTH	Early Prenatal Care	Babies Born to Mothers Who Received Prenatal Care in the First Trimester	California Dept. of Public Health, California Vital Data (Cal-ViDa) Query Tool and Birth Statistical Master Files	2022

Category	Indicator	Description	Source	Year(s)
MATERNAL/ INFANT HEALTH	Experiences Of Racism and Discrimination in Healthcare	Among Alameda County Maternal, Paternal, Child, and Adolescent Health (MPCAH) population	Alameda County Title V Local MPCAH Needs Assessment	2024
MATERNAL/ INFANT HEALTH	Infant Mortality	Number of infant deaths (within 1 year) per 1,000 live births.	National Center for Health Statistics - Mortality Files, as cited in KidsData.org	2014–2020
MATERNAL/ INFANT HEALTH	Infant Mortality, Alameda County	Number of infant deaths (within 1 year) per 1,000 live births.	Alameda County Public Health Department, CAPE Unit	2019–2023
MATERNAL/ INFANT HEALTH	Infant Mortality, Contra Costa County	Infant death = Death of person who resided in Contra Costa county with age < 1 year registered in any California county	Contra Costa County Public Health Department	2019–2023
MATERNAL/ INFANT HEALTH	Low Birthweight Babies	Percentage of live births with low birthweight (< 2,500 grams).	National Center for Health Statistics - Natality files, as cited by County Health Rankings	2014–2020
MATERNAL/ INFANT HEALTH	Maternal Mortality by Race, by County	Rate per 10,000 live births. Pregnancy-related death is a death while pregnant or within one year of the end of pregnancy – regardless of the outcome, duration or site of the pregnancy – from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes.	The California Pregnancy Mortality Surveillance System (CA-PMSS)	2021
MATERNAL/ INFANT HEALTH	Severe Maternal Morbidity by Race (per 10,000 labor hospitalizations)	Rate of SMM events per 10,000 labor hospitalizations among females, aged 12 to 55 years	The California Pregnancy Mortality Surveillance System (CA-PMSS)	2021
MATERNAL/ INFANT HEALTH	Singleton Low Birth Weight, Alameda County	Singleton Low Birth Weight (LBW) = Live birth with birthweight less than 2500g, excluding all multiple births	Alameda County Public Health Department, CAPE Unit	2019–2023
MATERNAL/ INFANT HEALTH	Singleton Low Birth Weight, Contra Costa County	Singleton Low Birth Weight (LBW) = Live birth with birthweight less than 2500g, excluding all multiple births	Contra Costa County Public Health Department	2019–2023
MATERNAL/ INFANT HEALTH	Singleton Premature Birth, Alameda County	Singleton Preterm birth = Live birth with estimated gestational age < 37 weeks, excluding all multiple births	Alameda County Public Health Department, CAPE Unit	2020–2021
MATERNAL/ INFANT HEALTH	Singleton Premature Birth, Contra Costa County	Singleton Preterm birth = Live birth with estimated gestational age < 37 weeks, excluding all multiple births	Contra Costa County Public Health Department	2019–2023

Category	Indicator	Description	Source	Year(s)
MATERNAL/ INFANT HEALTH	Teen Birth Rate, Alameda County	Number of births per 1,000 female population ages 15-19.	Alameda County Public Health Department, CAPE Unit	2019–2023
MATERNAL/ INFANT HEALTH	Teen Birth Rate, Contra Costa County	Teen Birth = Live birth to woman age 15-19, births before age 15 are not included	Contra Costa County Public Health Department	2019–2023
MATERNAL/ INFANT HEALTH	Top 3 Priorities for Adolescent Health	Among Alameda County Maternal, Paternal, Child, and Adolescent Health (MPCAH) population	Alameda County Title V Local MPCAH Needs Assessment	2024
MATERNAL/ INFANT HEALTH	Top 3 Priorities for Child Health	Among Alameda County Maternal, Paternal, Child, and Adolescent Health (MPCAH) population	Alameda County Title V Local MPCAH Needs Assessment	2024
MATERNAL/ INFANT HEALTH	Top 3 Priorities for Children/Youth with Special Health Care Needs	Among Alameda County Maternal, Paternal, Child, and Adolescent Health (MPCAH) population	Alameda County Title V Local MPCAH Needs Assessment	2024
MATERNAL/ INFANT HEALTH	Top 3 Priorities for Paternal Health	Among Alameda County Maternal, Paternal, Child, and Adolescent Health (MPCAH) population	Alameda County Title V Local MPCAH Needs Assessment	2024
MATERNAL/ INFANT HEALTH	Top 3 Priorities for Perinatal/Infant Health	Among Alameda County Maternal, Paternal, Child, and Adolescent Health (MPCAH) population	Alameda County Title V Local MPCAH Needs Assessment	2024
MATERNAL/ INFANT HEALTH	Top 3 Priorities for Women/Maternal Health	Among Alameda County Maternal, Paternal, Child, and Adolescent Health (MPCAH) population	Alameda County Title V Local MPCAH Needs Assessment	2024
RESPIRATORY HEALTH	Asthma Deaths, Alameda County	Deaths from asthma	Alameda County Public Health Department, CAPE Unit	2019–2023
RESPIRATORY HEALTH	Asthma ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): J45	Alameda County Public Health Department, CAPE Unit	2020–2022
RESPIRATORY HEALTH	Asthma Hospitalizations Among Children Ages 0-4	Asthma Hospitalizations among Children Ages 0-4	California Breathing, tabulation of data from the California Dept. of Health Care Access and Information, as cited on KidsData.org	2021
RESPIRATORY HEALTH	Asthma Hospitalizations Among Children Ages 5-17	Asthma Hospitalizations among Children Ages 5-17	California Breathing, tabulation of data from the California Dept. of Health Care Access and Information, as cited on KidsData.org	2021

Category	Indicator	Description	Source	Year(s)
RESPIRATORY HEALTH	Asthma Prevalence, Children	Children Ages 1-17 Ever Diagnosed with Asthma	UCLA Center for Health Policy Research, California Health Interview Survey, as cited on KidsData.org	2022
RESPIRATORY HEALTH	Asthma/Bronchitis as Reason for Child Hospitalization	Based on percentage of hospital discharges among children ages 0-17 for the 11 most common primary diagnoses, excluding childbirth.	California Dept. of Health Care Access and Information custom tabulation, as cited on KidsData.org	2021
RESPIRATORY HEALTH	Chronic Lower Respiratory Diseases Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019–2023
RESPIRATORY HEALTH	Chronic Lower Respiratory Diseases Deaths, Alameda County	Deaths from chronic lower respiratory disease	Alameda County Public Health Department, CAPE Unit	2019–2023
RESPIRATORY HEALTH	Chronic Lower Respiratory Diseases ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): J4[0-7]	Alameda County Public Health Department, CAPE Unit	2020–2022
RESPIRATORY HEALTH	COVID-19 Death Rate, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes U07.1	Contra Costa Health	2019–2023
RESPIRATORY HEALTH	COVID-19 Deaths, Alameda County	Deaths from COVID-19	Alameda County Public Health Department, CAPE Unit	2019–2023
RESPIRATORY HEALTH	Covid-19 Deaths, ED Visits and Hospitalizations, Alameda County	Age-adjusted rate per 100,000 Population. Regex Code(s): U071	Alameda County Public Health Department, CAPE Unit	2019–2023
RESPIRATORY HEALTH	Flu Vaccinations	Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.	Mapping Medicare Disparities Tool	2020
RESPIRATORY HEALTH	Influenza and Pneumonia Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019–2023
RESPIRATORY HEALTH	Kindergarteners with All Required Immunizations	Kindergarteners with All Required Immunizations	California Dept. of Public Health, Immunization Branch, Reporting Data for Kindergarten/7th Grade	2022
RESPIRATORY HEALTH	Tuberculosis Case Rate	Tuberculosis Cases, Rates per 100,000 Population, and Rank	California Department of Public Health, Tuberculosis Control Branch	2022

Category	Indicator	Description	Source	Year(s)
RESPIRATORY HEALTH	Tuberculosis Case Rate and Rank	Tuberculosis Cases, Rates per 100,000 Population, and Rank	California Department of Public Health, Tuberculosis Control Branch	2022
SEXUAL HEALTH	Chlamydia Incidence	Number of newly diagnosed chlamydia cases per 100,000 population.	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention California Dept. of Public Health, Sexually Transmitted Diseases Control Branch custom tabulation; Centers for Disease Control and Prevention, Sexually Transmitted Disease Surveillance	2020
SEXUAL HEALTH	Chlamydia Incidence, Youth Ages 10-19	Number of newly diagnosed chlamydia cases per 100,000 population ages 10-19	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2023
SEXUAL HEALTH	Gonorrhea Incidence, Youth Ages 15-19	California Dept. of Public Health, Sexually Transmitted Diseases Control Branch custom tabulation; Centers for Disease Control and Prevention, Sexually Transmitted Disease Surveillance; U.S. Census Bureau, National Population by Characteristics & National Intercensal Tables (Apr. 2023).	California Dept. of Public Health, Sexually Transmitted Diseases Control Branch custom tabulation; Centers for Disease Control and Prevention, Sexually Transmitted Disease Surveillance	2020
SEXUAL HEALTH	HIV Disease Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population due to Human Immunodeficiency Virus.. Regex Code(s): B2[0-4]	Alameda County Public Health Department, CAPE Unit	2019–2023
SEXUAL HEALTH	HIV Disease ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population due to Human Immunodeficiency Virus. Regex Code(s): B20	Alameda County Public Health Department, CAPE Unit	2020–2022
SEXUAL HEALTH	HIV Prevalence	Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population.	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2020
SEXUAL HEALTH	HIV/AIDS Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population due to Human Immunodeficiency Virus. ICD-10 Codes B20-B24	Contra Costa County Public Health Department	2019–2023

Category	Indicator	Description	Source	Year(s)
STRUCTURAL RACISM/ DISCRIMIN-ATION	Residential Segregation	Index of dissimilarity where higher values indicate greater residential segregation between Black and white people residing in a county.	United States Census Bureau, American Community Survey, 5-year estimates	2017–2021
UNINTENDED INJURY	Crash Fatalities	Number and rate of fatal crashes (bicycle, pedestrian, and vehicle) per 100 vehicle miles driven	Vitalsigns.mtc.ca.gov	2022
UNINTENDED INJURY	Drowning Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): W6[5-9]|W7[0-4]|X71|X92|Y21	Alameda County Public Health Department, CAPE Unit	2019–2023
UNINTENDED INJURY	Drowning Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes W65-W74, X71, X92, Y21	Contra Costa Health	2019–2023
UNINTENDED INJURY	Drowning ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): (T751..| W16[49]1.| (?!W16[49]) W16..1|W22041| (V9[02]| W6[5-9]| W7.|X71|X92| Y21)...) (A|$|\b)	Alameda County Public Health Department, CAPE Unit	2020–2022
UNINTENDED INJURY	Injury Deaths	Number of deaths due to injury (including assault and unintentional injuries) per 100,000 population.	National Center for Health Statistics - Mortality Files, as cited in Community Health Rankings	2016–2020
UNINTENDED INJURY	Injury Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 due to injury (including assault and unintentional injuries). ICD-10 Codes U01-U03, V01-Y36, Y85-Y87, Y89	Contra Costa Health	2019–2023
UNINTENDED INJURY	Motor Vehicle - Pedestrian ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): ((V0[2-4][19]|V09[23]|Y0[23]0)..)(A|$|\b)	Alameda County Public Health Department, CAPE Unit	2020–2022
UNINTENDED INJURY	Motor Vehicle Crash Deaths	Number of motor vehicle crash deaths per 100,000 population.	National Center for Health Statistics - Mortality Files	2014–2020
UNINTENDED INJURY	Motor Vehicle Crash Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes V02-V04, V09.0, V09.2, V12-V14, V19.0-V19.2, V19.4-V19.6, V20-V79, V80.3-V80.5, V81.0-V81.1, V82.0-V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2	Contra Costa Health	2019–2023
UNINTENDED INJURY	Motor Vehicle Transport Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): V0[2-4][1,9]|V092|V1[2-4][3-9]|V19[4-6]|V2[0-8][3-9]|V29[4-9]|V[3-7][0-	Alameda County Public Health Department, CAPE Unit	2019–2023

Category	Indicator	Description	Source	Year(s)
		9][4-9]|V80[3-5]|V811|V821|V8[3-6][0-3]|V87[0-8]|V892		
UNINTENDED INJURY	Motor Vehicle Transport ED Visits and Hospitalizations	Age-Adjusted Rate per 100,000 Population. Regex Code(s): ((V0[2-4][19]|V09[23]|V1[2-4][3-5,9]|V19[4-69]|V2[0-8][3-5,9]|V29[4-9]|V[3-7].[4-9]|V8[3-6][0-3]|V80[3-5]|V8[12]1|V87[0-8]|V892|X810|Y020)..|(X82|Y03|Y32)...)(A|$|\b)	Alameda County Public Health Department, CAPE Unit	2020–2022
UNINTENDED INJURY	Pedestrian Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): V0[2-4][1,9]|V092	Alameda County Public Health Department, CAPE Unit	2019–2023
UNINTENDED INJURY	Pedestrian Deaths, Contra Costa County	Age-Adjusted Rate per 100,000 Population. ICD-10 Codes V00-V09	Contra Costa Health	2019–2023
UNINTENDED INJURY	Share of Hospitalizations among children Ages 0-17 for Poisoning	Share of Hospitalizations among children Ages 0-17 for Poisoning	California Dept. of Health Care Access and Information custom tabulation	2021
UNINTENDED INJURY	Share of Hospitalizations among children Ages 0-17 for Traumatic Injuries	Share of Hospitalizations among children Ages 0-17 for Traumatic Injuries	California Dept. of Health Care Access and Information custom tabulation	2021
UNINTENDED INJURY	Unintentional Injuries (Accidents) Among Leading Causes of Death	Rank within county	California Department of Public Health, 2024 Death Statistics File	2019–2023
UNINTENDED INJURY	Unintentional Injury Deaths, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): V|W|X[0-5]|Y85|Y86	Alameda County Public Health Department, CAPE Unit	2019–2023
UNINTENDED INJURY	Unintentional Injury ED Visits and Hospitalizations, Alameda County	Age-Adjusted Rate per 100,000 Population. Regex Code(s): (T1[5-9]...|(T3[679]9|T414|T427| T4[3579]9)1.|(?!(T3[679]9|T414 |T427|T4[3579]9)) (T3[6-9]|T4[0-9]|T50)..1|((T5[1-46-9]|T6[0-35])9|(T58|T61)[01]|T64[08])1.|(?!(T5[1-46-9]|T6[0-35])9|(T58|T61)[01]|T64[08]))(T5[1-9]|T6[0-5])..1|(V|W)\d....|X[0-5]....|T71..1|T712[019].| T719..|T73...|T75[0234]..)(A|$|\b)	Alameda County Public Health Department, CAPE Unit	2020–2022

Appendix 3: Community Leaders, Representatives, and Members Consulted

The lists below contain the names of leaders, representatives, and members who were consulted for their expertise in the community. Leaders and representatives were identified based on their professional expertise and knowledge of target groups including vulnerable populations such as low-income individuals, minorities, and the medically underserved. Leaders who provided permission to be acknowledged are listed below, and those who preferred to remain anonymous are listed by their affiliated organization unless they did not wish to be listed at all. For privacy and confidentiality, no attendees of community-member focus groups are named.

Key Informant Interviews

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Alameda County	Arzelia Lopez, Nurse-Family Partnership Nurse Manager, Alameda County Public Health	Maternal/ infant health	1	Medically underserved	Leader	4/26/2024
Alameda County	Christine Dillman, Executive Director, Tri-Valley Haven	Violence/ community safety	1	Low-income, minorities	Leader	5/3/2024
Alameda County	Paris Davis, Intervention Programs Director, YOUTH ALIVE!	Violence/ community safety	1	Low-income, minorities	Leader, representative	5/3/2024
Alameda County	Ella Baker Center	Climate	1	Low-income	Leader	5/15/2024
Alameda County	Kimi Watkins-Tartt, Public Health Director, Alameda County Public Health Department	Public health	1	Low-income, minorities, medically underserved	Leader, representative	5/16/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Alameda County	Evette Brandon, Division Director, Alameda County Public Health Department	Public health	1	Low-income, minorities, medically underserved	Leader, representative	5/16/2024
Alameda County	Health Equity Policy and Systems Manager, Health Equity Division, Behavioral Health Department, Alameda County Health	Equity	1	Low-income, minorities, medically underserved	Leader	5/22/2024
Alameda County	Aaron Ortiz, Chief Executive Officer, The Alliance For Community Wellness	Mental health	1	Medically underserved	Leader	5/30/2024
Alameda County	Aislinn Bird, Director of Integrated Care, Psychiatrist, Alameda County Health Care for the Homeless	Homeless-ness, substance use disorder	1	Low-income, medically underserved	Leader	6/11/2024
Alameda County	Lucy Kasdin, Director, Alameda County Healthcare for the Homeless	Homeless-ness, substance use disorder	1	Low-income, medically underserved	Leader	6/11/2024
Alameda County	Abode Services	Housing	1	Low-income	Leader	6/13/2024
Alameda County	Alameda County Community Food Bank	Food insecurity	1	Low-income	Leader	6/26/2024
Alameda County	Alameda County Age-Friendly Coalition & Day Break Adult Day Center	Healthcare access	1	Low-income, medically underserved	Leader	7/16/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Alameda County	Pacific Center for Human Growth	Mental/ behavioral health	1	Medically underserved	Leader	7/23/2024
Alameda County	Matt Vander Sluis, Managing Director, Policies and Programs, Bay Area, Bay Area Regional Health Inequities Initiative (BARHII)	Climate/ sustainability	1	Low-income, minorities, medically underserved	Leader	7/29/2024
North Alameda County	Destiny Arts	multi	1	Low-income	Leader	6/10/2024
North Alameda County	Rising Sun Center	Income and employment	1	Low-income	Leader	6/12/2024
North Alameda County	Native American Health Center	Mental/ behavioral health	2	Minorities, medically underserved	Leaders	6/13/2024
North Alameda County	Planting Justice	Food insecurity	1	Low-income	Leader	6/18/2024
North Alameda County	Asian Health Services	Healthcare access	1	Minorities, medically underserved	Leader	6/26/2024
North Alameda County	Downtown Streets	Housing	1	Low-income	Leader	6/27/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
North Alameda County	Oakland Unified School District	Education	1	Low-income	Leader	7/3/2024
North Alameda County	Unity Council	Income and employment	1	Low-income	Leader	7/12/2024
North Alameda County	Trybe	Food insecurity	1	Low-income	Leader	7/15/2024
North Alameda County	East Oakland Youth Development Center	Income and employment	1	Low-income	Leader	7/15/2024
North Alameda County	Roots Health Center	Healthcare access	1	Minorities, medically underserved	Leader	7/30/2024
Alameda and Contra Costa counties	Latina Center	Community Safety	1	Low-income, minorities	Leader	Unknown
Alameda and Contra Costa counties	Senior Director, Fred Finch Youth & Family Services	Mental health	1	Medically underserved	Leader	5/14/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Alameda and Contra Costa counties	Greenlining Institute	Climate	1	Low-income	Leader	5/29/2024
Alameda and Contra Costa counties	East Bay Asian Local Development Corporation (EBALDC)/Berkeley Food and Housing Project/Bay Area Community Services (BACS)	Housing	3	Low-income	Leader	6/6/2024
Alameda and Contra Costa counties	Rubicon	Income and employment	1	Low-income	Leader	6/13/2024
Alameda and Contra Costa counties	NAMI	Mental/ behavioral health	1	Medically underserved	Leader	6/13/2024
Alameda and Contra Costa counties	Aliados Health AKA Community Clinic Consortium/Alameda Health Consortium/La Clinica de la Raza	Healthcare access	2	Low-income, minorities, medically underserved	Leader	6/18/2024
Alameda and Contra Costa counties	Eden Housing Resident Services, Inc.	Income and employment	1	Low-income	Leader	6/18/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Alameda and Contra Costa counties	J-Sei – AAPI Older Adults (Emeryville)	multi	1	Low-income, minorities, medically underserved	Leader	6/26/2024
Alameda and Contra Costa counties	Life Long Medical Care	Healthcare access	1	Low-income, medically underserved	Leader	7/17/2024
Contra Costa County	Contra Costa County Public Health Officer	Healthcare access	1	Low-income, minorities, medically underserved	Leader	6/4/2024
Contra Costa County	Contra Costa Family Justice Center	Community Safety	1	Low-income, minorities	Leader	6/5/2024
Contra Costa County	Hope Solutions	Housing	1	Low-income	Leader	6/7/2024
Contra Costa County	Contra Costa County Health Services - Health Care for the Homeless	Housing	1	Low-income, medically underserved	Leader	6/11/2024
Contra Costa County	Healthy Contra Costa (formerly Healthy Richmond)	Healthcare access	1	Medically underserved	Leader	6/18/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Contra Costa County	First Five Contra Costa	Education	2	Low-income	Leader	6/21/2024
Contra Costa County	Food Bank of Contra Costa & Solano	Food insecurity	1	Low-income	Leader	6/28/2024
Contra Costa County	St. Vincent de Paul RotaCare Clinic, Pittsburg	Healthcare access	2	Low-income, medically underserved	Leader	7/1/2024
Contra Costa County	Contra Costa County Aging and Adult Services	multi	1	Low-income, minorities	Leader	7/16/2024
Contra Costa County	Director, Contra Costa Behavioral Health Services	Behavioral health	1	Medically underserved	Leader	10/14/2024
Central Contra Costa County	Heather Fontanilla, Administrator, College Now & Career Pathways, Mt. Diablo Unified School District	Youth/ children, education	1	Low-income	Leader	5/28/2024
Central Contra Costa County	San Ramon Valley Unified School District	Youth/ children, education	2	Low-income	Leader	7/10/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
East Contra Costa County	Hijas Del Campo	Healthcare access	1	Minorities, medically underserved	Leader	6/18/2024
East Contra Costa County	Antioch Unified School District	Education	1	Low-income	Leader	7/17/2024
East Contra Costa County	Pittsburg Unified School District	Education	1	Low-income	Leader	7/18/2024
Central and East Contra Costa County	Monument Crisis Center	Food insecurity	1	Low-income	Leader	6/3/2024
Central and East Contra Costa County	Opportunity Junction	Income and employment	1	Low-income	Leader	6/7/2024
Central and East Contra Costa County	Village Community Resource Center	Mental/ behavioral health	3	Medically underserved	Leader	7/11/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
West Contra Costa County	RYSE Youth Center	Community Safety	1	Low-income	Leader	6/20/2024
West Contra Costa County	West Contra Costa School District	Education	1	Low-income	Leader	8/7/2024
Tri-Valley	Open Heart Kitchen	Food insecurity	1	Low-income	Leader	6/5/2024
Tri-Valley	Chief Executive Officer, Axis Community Health	Healthcare access	1	Medically underserved	Leader	6/20/2024
Tri-Valley	Ed Diolazo, Deputy Superintendent, Pleasanton Unified School District	Youth/ children, education	1	Low-income	Leader	6/26/2024
Tri-Valley	Christine Beitsch-Bahmani, Chief Executive Officer, City Serve of the Tri-Valley	Older adults	1	Low-income	Leader	7/24/2024
Tri-Valley	Livermore Valley Joint Unified School District	Youth/ children, education	3	Low-income	Leaders	8/12/2024
Tri-Valley	Matt Campbell, Assistant Superintendent, Dublin Unified School District	Youth/ children, education	1	Low-income	Leader	9/6/2024

Focus Groups

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Organizations[56]						
Alameda County	Host: Actionable Insights	Safety net clinics	12	Medically underserved, low-income	Leaders	6/11/2024
	Attendees:[57] • Asian Health Services • Dawnell Moody, Chief Medical Officer, Axis Community Health • Janet Escudero, Clinic Manager, Bay Area Community Health • Adriana Lopez, Special Assistant Promotores Program, City of Newark • Freedom Community Clinic • Licensed Clinical Social Worker; Job position: Program Supervisor, La Familia Counseling Services • Elvia Guevara, Director, Medical Operations, Native American Health Center • Susan Fernyak, MD, Medical Director, Order of Malta Clinic • Mary Alvarez Nutting, Senior Clinical Services Manager, Roots Community Health • Alejandro Lopez Munoz, Medical Site Manager, San Antonio Neighborhood Health Center • Martha Estrella, Resource Specialist, Tiburcio Vasquez Health Center					
Alameda County	Host: Actionable Insights	Substance use/ addiction	9	Medically underserved	Leaders	6/12/2024
	Attendees:[57] • Esther Veronika Rodriguez, Substance Use Disorder / Medication Assisted Treatment Program Supervisor, Bay Area Community Health • City of Fremont, Youth and Family Services					

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[56] Note, ASR conducted extra interviews in Contra Costa County in lieu of focus groups with experts/professionals or community leaders.

[57] One attendee did not give permission to be listed in this appendix.

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
	• Christopher Duerrmeier, Clinical Director, Discovery Counseling Center of the San Ramon Valley • Omar Malik, Program Manager, HAART Hayward • Sanjay Patel, Pharmacy Director, Haller's Pharmacy and Medical Supply • Asceneth Paez-Arroyo, Clinical Manager, Horizons Family Counseling • Caitlin Wallace, Program Supervisor - Adult Outpatient Substance Use, La Familia • Program Director, Lifelong • April Rovero, Executive Director, National Coalition Against Prescription Drug Abuse					
Alameda County	Host: Actionable Insights	Faith leaders	6	Minority	Leaders	6/12/2024
	Attendees: • Former Board President, Berkeley Zen Center • Gideon Lee, Pastor, Crosspoint Church • Youngmi Jung, Pastor, First United Methodist Church of Fremont • Mary Scott, Reverend, GraceWay Church • Kashmir Singh Shahi, Community Outreach Coordinator, Gurdwara Sahib Fremont • Rabbi Jackie Mates-Muchin, Senior Rabbi, Temple Sinai					
Alameda County	Host: Actionable Insights	Social services	8	Low-income	Leaders	7/22/2024
	Attendees: • Suzanne Shenfil, Human Services Director, City of Fremont • Christine Beitsch-Bahmani, Chief Executive Officer, City Serve of the Tri-Valley • Program Director, East Bay Agency for Children • Senior Director, Fred Finch Youth & Family Services • Mary Hekl, Chief Executive Officer , Hively • John Bost, Executive Director, Open Heart Kitchen • Leticia Galyean, Chief Executive Officer, Seneca Family of Agencies • Union City Family Center/New Haven Unified School District					

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Alameda County	Host: Actionable Insights	Workforce development	8	Low-income	Leaders	8/12/2024
	Attendees: • Amy Garlin, Medical Director, Alameda County Healthcare for the Homeless • Eva Jennings, EdD, Interim Vice President of Instruction, College of Alameda • Cristo Rey De La Salle East Bay High School • Blaine Torpey, Superintendent, Eden Area Regional Occupational Program • Jeff Oxendine, Founder, Chief Executive Officer, Healthcareer Connection • Carrie Dameron, Director of Registered Nursing Program, Ohlone College • Alcian Lindo, Program Manager, Tri-Valley Career Center • Angel-Max Guerrero, Pathway Programs Manager, UC San Francisco					
Tri-Valley	Host: Tri-Valley Non-Profit Alliance	WIC recipients	6	Low-income	Representatives[58]	8/12/2024
Community Members[59]						
Alameda County	Host: Family Health Services	Parents, Black community	16	Minority	Members	8/15/2024
Alameda County	Host: Hayward YMCA	Spanish-speaking, Latine, parents	9	Minority	Members	8/15/2024

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[58] No attendees of this focus group gave permission to be listed in this appendix.

[59] For privacy and confidentiality, no attendees of community-member focus groups are named.

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
Alameda County	Host: Regional Center of the East Bay / Disability Council	Individuals with disabilities	13	Medically underserved, minority	Members	8/19/2024
Alameda County	Host: LGBTQ Center	LGBTQ+ community	8	Medically underserved, minority	Members	8/22/2024
Alameda County	Host: Vision y Compromiso	Healthcare access, Spanish-speaking	22	Low-income, medically underserved, minority	Members	9/4/2024
Alameda County	Host: Alameda County Probation Department	Justice-involved population	13	Low-income, minority	Members	9/18/24
Alameda County	Host: Korean Community Center	Older adults, Chinese community	15	Minority	Members	10/28/24
East Contra Costa County	Host: African American Wellness Center	Black community	7	minority	Members	7/12/2024
East Contra Costa County	Host: Pittsburg Senior Center	Older adults	5	Low-income, medically underserved	Members	7/15/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
East Contra Costa County	Host: Village Community Resource Center	Spanish-speaking, Latine	9	Medically underserved, minority	Members	7/19/2024
East Contra Costa County	Host: First 5 East County	Individuals with disabilities	4	Medically underserved	Members	7/29/2024
Central Contra Costa County	Host: Monument Crisis Center	Spanish-speaking, Latine	6	Medically underserved, minority	Members	7/15/2024
Central Contra Costa County	Host: Full Circle of Choices	Individuals with disabilities	4	Medically underserved, minority	Members	7/18/2024
Central Contra Costa County	Host: Concord Senior Center	Older adults	7	Low-income, medically underserved	Members	7/25/2024
Central Contra Costa County	Host: Rainbow Community Center	LGBTQ+ community	3	Medically underserved, minority	Members	7/30/2024

Location	Name, Title, Agency	Topic	# of People	Target Group(s) Represented	Role in Target Group	Date Input Was Gathered
West Contra Costa County	Host: Multicultural Institute	Spanish-speaking, Latine	8	Medically underserved, minority	Members	7/17/2024
West Contra Costa County	Host: First 5 San Pablo	Individuals with disabilities	9	Medically underserved	Members	7/17/2024
West Contra Costa County	Host: Church of Christ	Black community	5	minority	Members	7/20/2024
West Contra Costa County	Host: Church of Christ	Older adults	7	Low-income, medically underserved	Members	7/21/2024
Tri-Valley	Host: Rotary District 5170, Area 5	Southeast Asian community	7	Minority	Members	10/3/2024

Appendix 4: Qualitative Research Materials

One set of English-language pre-surveys and qualitative protocols are included on the following pages of this appendix. For pre-surveys and protocols in other languages or for other areas, please contact Actionable Insights, LLC (inquiries@ActionableLLC.com).

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2024 CHNA Survey to Identify Health Needs - Experts/Leaders (Alameda County)

Welcome!

Thank you for clicking through to this survey. It will take less than 10 minutes to complete. **Please respond at least two days before your scheduled interview or focus group.**

Non-profit hospitals in the East Bay, including John Muir Health, St. Rose Hospital, Stanford Health Care Tri-Valley, UCSF Benioff Children's Hospital Oakland, and Washington Hospital Healthcare System, are conducting a community health needs assessment (CHNA) in accordance with IRS guidelines for non-profit hospitals. For the 2025 CHNA, a combination of statistical data and community input are being collected by these hospitals and their consultants, Actionable Insights. This research will generate a list of community health needs.

The survey you are about to complete briefly presents a list of health needs, including all that were prioritized by the community in Alameda County in 2022. You are welcome to add any needs you feel are missing. As a local expert/community leader, **you are being asked to choose up to five needs that you feel are the biggest health issues and/or conditions for the people whom you serve.** The results of this survey will be shared with Actionable Insights and the hospitals, and may also be shared with a limited number of additional non-profit hospitals, community-based organizations, and/or agencies such as the County's Public Health Department. During your upcoming interview/focus group, the Actionable Insights facilitator will ask you to discuss the top needs you chose.

To proceed, please enter your name below and click "Next."

* 1. Your name:

[   ]

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2024 CHNA Survey to Identify Health Needs - Experts/Leaders (Alameda County)

List of Health Needs to Select

* 2. Below is a list of health needs. The ones in bold were prioritized by the community during the 2022 Community Health Needs Assessment in Alameda County. They are presented in alphabetical order. Feel free to add any needs you feel may be missing. Please choose up to five needs that you feel are the biggest issues or conditions now for the people whom you serve. There may be overlap; please choose the five that best represent the needs you have in mind.

- [ ] **Cancer**

- [ ] **Climate**/healthy environment (including extreme weather, environmental contaminants, safe air and drinking water)

- [ ] Communicable Diseases (including TB, COVID, flu, salmonella; not including sexually transmitted infections)

- [ ] **Community and family safety**/intentional injury (including child/partner abuse, hate crimes, bullying and school safety, human trafficking, violent crime, arrest rates, and deaths in custody)

- [ ] **Diabetes and obesity**, AKA healthy lifestyles (including fitness and places to exercise; diet, nutrition, and access to fresh food)

- [ ] Disabilities (including vision, hearing, and mobility; neurodivergence such as autism or ADHD; and cognitive disabilities/developmental delays)

- [ ] **Economic security/stability** (including income, employment, child care, and digital access)

- [ ] **Education** (including pre-school, school test scores, learning gaps, vocational training, educational attainment, and wealth)

- [ ] **Food insecurity** (including anxiety about food insufficiency, household food shortages, reduced quality, variety, or desirability of food, diminished nutrient intake, and disrupted eating patterns)

- [ ] **Healthcare access and delivery** (including health insurance, costs of care and medicine, availability of primary and specialty care providers, wait times for appointments, quality of care, and linguistic/cultural competence in care delivery)

- [ ] Healthy aging (including arthritis, cognitive decline/dementia, Alzheimer's disease, aging-related vision and hearing loss, loss of mobility, falls)

- [ ] **Heart disease and stroke** (including heart attack, high cholesterol, and high blood pressure)

- [ ] **Housing and homelessness** (including safe, clean, and affordable housing, overcrowding, and tenant protections)

- [ ] Maternal and infant health (including prenatal care, premature births, and infant mortality)

- [ ] **Mental health** (including stress, anxiety, isolation, and depression; life satisfaction; eating disorders; trauma; and mental health disorders such as schizophrenia)

- [ ] Oral/dental health

- [ ] **Respiratory health** (including asthma, allergies, COVID-19, and COPD)

- [ ] Sexual health (including family planning and sexually-transmitted infections such as gonorrhea, chlamydia, or HIV)

- [ ] **Structural racism** (social, economic and political systems and institutions that perpetuate racial inequities through policies, practices and norms)

- [ ] **Substance use** (including vaping; the use of alcohol, tobacco, opioids, and other substances; addiction; and outcomes such as kidney or liver disease)

- [ ] **Transportation** (including safety and reliability, overall infrastructure, and access)

- [ ] Unintended injuries/accidents (including drownings, poisonings, and bicycle, pedestrian, and motor vehicle accidents)

- [ ] Other (please specify)

When you are done responding to the questions above, please click "Next" for your responses to be tallied.

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2024 CHNA Survey to Identify Health Needs - Experts/Leaders (Alameda County)

Consent

* 3. In order to capture your words accurately, your interview/focus group will be recorded and the recording will be transcribed. A transcript of the interview/focus group discussion will be sent to the health care organizations and their consultants, and may also be shared with a limited number of additional non-profit hospitals, community-based organizations, and/or agencies such as the County's Public Health Department. If a quote from your transcript is used in the report, you will not be identified by name; only as a "local expert." Please indicate that you understand and agree to be recorded.

○ Yes, I understand and agree to be recorded.

○ No, I do not agree to be recorded. I will not participate in the interview/focus group.

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2024 CHNA Survey to Identify Health Needs - Experts/Leaders (Alameda County)

Report Acknowledgment

* 4. An appendix to the report will contain a list of experts consulted. Please indicate how you would like to be listed:

○ By name, title, and organization

○ Only my title and organization, not my name

○ Only my organization, not my name or role

○ Do not include me in the list at all

5. Please fill in the fields that correspond to your response above. If you agreed to be listed by name, we will use your name as you entered it at the beginning of this survey.

Title [   ]

Organization [   ]

* 6. In a few sentences, please tell us what your organization does and how it serves the community.

[   ]

* 7. In a sentence or two, how would you describe the geographic areas and populations you serve or represent?

[   ]

actionable insights

2024 CHNA Survey to Identify Health Needs - Experts/Leaders (Alameda County)

Question about Climate

* 8. In the past three years, have the people you serve been impacted by any of the following climate hazard events? (Please check all that apply.)

☐ Extreme heat (too hot to perform routine activities such as work or be at rest)

☐ Wildfire and/or wildfire smoke (exposure to unsafe conditions or difficulty breathing due to air quality)

☐ Drought (not enough access to clean water)

☐ Extreme rainfall/flooding (too much water)

☐ None. The people I serve were not impacted by a climate hazard event in the past three years.

☐ I prefer not to answer.

☐ Other (e.g., water quality issues, power outages, insect infestations, or diseases from parasites/bacteria/viruses):

[   ]

actionable insights

Climate Follow-Up

9. Please tell us how the climate hazard(s) impacted the quality of life and well-being of the people you serve (e.g., poor physical or mental health, economic or housing instability, etc.)

actionable insights

Demographics

The IRS would like the hospitals to describe who participated in the interviews and focus groups. We would appreciate it if you would answer the questions below, but responding is optional. We will only report these answers for experts as a group, not for individual participants.

10. What is your age? *(Please enter a number only.)*

11. Are you of Hispanic/Latinx ethnicity?

○ Yes

○ No

12. What is your race? (Please choose all that apply.)

- [ ] American Indian/Alaskan Native
- [ ] Asian (indicate specific ancestry, e.g., "Chinese," in Other field below)
- [ ] Black/African American
- [ ] Native Hawaiian/Other Pacific Islander
- [ ] White
- [ ] Some other race (please specify)

_____

13. Which of the following most accurately describes you?

- ( ) Female
- ( ) Male
- ( ) Non-binary
- ( ) Transgender
- ( ) Intersex
- ( ) Let me type...

_____

actionable insights

2024 CHNA Survey to Identify Health Needs - Experts/Leaders (Alameda County)
Thank you!

Thank you for responding to the survey. Your facilitator will review your responses prior to your scheduled interview/focus group. If you are finished with this survey, please click "Done."

Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

2024 CHNA Survey to Identify Health Needs - Community Members (Alameda County)

Welcome!

Thank you for clicking through to this survey. It will take less than than 10 minutes to complete. **Please respond at least two days before your scheduled focus group discussion.**

Health care organizations in the East Bay, including John Muir Health, St. Rose Hospital, Stanford Health Care Tri-Valley, UCSF Benioff Children's Hospital Oakland, and Washington Hospital Healthcare System, would like to understand the needs of the community better, including its physical, emotional, and environmental health. For this Community Health Needs Assessment, these organizations are collecting thoughts and opinions from people in the community with the help of their consultants and the Alameda County Public Health Department. This will help to make a list of community health needs.

This survey has a list of health needs. It includes the ones that were found in 2022 for Alameda County. You are welcome to add any needs you feel are missing. As a community member, **you are being asked to choose up to five needs that you feel are the most important for your community right now.** The Public Health Department, the health care organizations, and their consultants will receive the answers from this survey and then summarize them. They may also share them with a small number of other community based organizations and health care organizations, **without using your name or email address.** The Public Health Department's facilitator will lead a conversation about the needs that were rated as the most important, or pressing, in your upcoming focus group.

To proceed, please enter your email address below and click "Next."

* 1. Your email address:

[   ]

* 2. At the end of the focus group, you will receive a gift card as a "thank you" for participating. Which company's gift card would you like?

◯ Amazon

◯ Safeway

◯ Target

* 3. In order to get everyone's words exactly right, your focus group will be recorded. A written copy of the discussion without people's names will be sent to the County's Public Health Department, the healthcare organizations and their consultants. They may also share it with a small number of other community based organizations and health care organizations. If you are quoted, you will be identified only as a "community member" -- no names will be used. Please indicate that you understand and agree to be recorded.

◯ Yes, I understand and agree to be recorded.

◯ No, I do not agree to be recorded. I will not participate in the focus group.

Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

2024 CHNA Survey to Identify Health Needs - Community Members (Alameda County)

List of Health Needs to Select

* 4. Below is a list of health needs. The ones in bold were identified by the community in Alameda County in 2022. They are presented in random order. Please think about how important each need is for your community right now. Then, please choose up to five needs that you feel are the most important now for your community. There is a space at the bottom where you can add anything you feel may be missing. There may be overlap, but please do the best you can.

☐ **Cancer**

☐ **Climate**/healthy environment (including extreme weather, environmental contaminants, safe air and drinking water)

☐ Communicable Diseases (including TB, COVID, flu, salmonella; not including sexually transmitted infections)

☐ **Community and family safety**/intentional injury (including child/partner abuse, hate crimes, bullying and school safety, human trafficking, violent crime, arrest rates, and deaths in custody)

☐ **Diabetes and obesity**, AKA healthy lifestyles (including fitness and places to exercise; diet, nutrition, and access to fresh food)

☐ Disabilities (including vision, hearing, and mobility; neurodivergence such as autism or ADHD; and cognitive disabilities/developmental delays)

☐ **Economic security/stability** (including income, employment, childcare, and digital access)

☐ **Education** (including pre-school, school test scores, learning gaps, vocational training, educational attainment, and wealth)

☐ **Food insecurity** (including anxiety about food insufficiency, household food shortages, reduced quality, variety, or desirability of food, diminished nutrient intake, and disrupted eating patterns)

☐ **Healthcare access and delivery** (including health insurance, costs of care and medicine, availability of primary and specialty care providers, wait times for appointments, telehealth access, quality of care, and linguistic/cultural competence in care delivery)

☐ Healthy aging (including arthritis, cognitive decline/dementia, Alzheimer's disease, aging-related vision and hearing loss, loss of mobility, falls)

☐ **Heart disease and stroke** (including heart attack, high cholesterol, and high blood pressure)

☐ **Housing and homelessness** (including safe, clean, and affordable housing, internet/WiFi access, overcrowding, and tenant protections)

☐ Maternal and infant health (including prenatal care, premature births, and infant mortality)

☐ **Mental health** (including stress, anxiety, isolation, and depression; life satisfaction; eating disorders; trauma; and mental health disorders such as schizophrenia)

☐ Oral/dental health

☐ **Respiratory health** (including asthma, allergies, COVID-19, and COPD)

☐ Sexual health (including family planning and sexually-transmitted infections such as gonorrhea, chlamydia, or HIV)

☐ **Structural racism** (social, economic and political systems and institutions that perpetuate racial inequities through policies, practices, and norms)

☐ **Substance use** (including vaping; the use of alcohol, tobacco, opioids, and other substances; addiction; and outcomes such as kidney or liver disease)

☐ **Transportation** (including safety and reliability, overall infrastructure, and access)

☐ Unintended injuries/accidents (including drownings, poisonings, and bicycle, pedestrian, and motor vehicle accidents)

☐ Other need (please describe)

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└─────────────────────────────────────┘
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When you are done responding to the questions above, please click "Next" for your responses to be tallied. You will soon receive an invitation with details about the focus group. We look forward to meeting you!

Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

2024 CHNA Survey to Identify Health Needs - Community Members (Alameda County)

Questions About Climate

Please answer this question and the one on the next screen. You will be helping the University of California with research on climate and health.

* 5. In the past three years, were you impacted by any of these climate hazard events? (Check all that apply.)

☐ Extreme heat (too hot to perform routine activities or be at rest)

☐ Wildfire and/or wildfire smoke (being in unsafe conditions or finding it hard to breathe because of air quality)

☐ Drought (not enough access to clean water)

☐ Extreme rainfall/flooding (too much water)

☐ None. I was not impacted by a climate hazard event in the past three years.

☐ I prefer not to answer

☐ Other climate events that impacted you (for example, problems with water quality, or being in a power outage)

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Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

2024 CHNA Survey to Identify Health Needs - Community Members (Alameda County)

Climate Follow-Up Question

6. Please tell us how the event(s) you experienced impacted your life. For example, you could have had poor physical or mental health, lost your income or housing, etc.

Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

2024 CHNA Survey to Identify Health Needs - Community Members (Alameda County)

Demographics

Thank you for providing your responses to the survey questions! The IRS would like the hospitals to describe who participated in the interviews and focus groups. We would appreciate it if you would answer the questions below. Answering is not required. We will only report these answers for community members as a group, not for individual participants.

7. What city do you live in right now?

8. What is your age? *(Please enter a number only.)*

9. Do you think of yourself as: *(Check all that apply)*

- [ ] Lesbian or gay
- [ ] Straight or heterosexual (that is, not gay or lesbian)
- [ ] Bisexual
- [ ] Queer
- [ ] Pansexual
- [ ] Don't know
- [ ] Prefer not to answer
- [ ] Something else (please specify)

_____

10. What is your current gender identity? *(Check all that apply)*

- [ ] Female/woman/girl
- [ ] Male/man/boy
- [ ] Nonbinary, genderqueer, or not exclusively female or male
- [ ] Transgender female/woman/girl
- [ ] Transgender male/man/boy
- [ ] Don't know
- [ ] Prefer not to answer
- [ ] Another gender (please specify)

_____

11. Which category/categories describe you? *Mark all that apply AND add details on the next screen. You may report more than one group.*

- [ ] Asian
- [ ] Black or African American
- [ ] Latino/Latina/Latinx, Hispanic
- [ ] Middle Eastern or North African
- [ ] Native American, American Indian, or Alaska Native
- [ ] Native Hawaiian or Other Pacific Islander
- [ ] White
- [ ] Don't know
- [ ] Prefer not to answer

Please click "Next" for your answers to be tallied.

Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

2024 CHNA Survey to Identify Health Needs - Community Members (Alameda County)

Specific Demographics

12. Asian: Provide details below.

- ☐ Asian Indian
- ☐ Bangladeshi
- ☐ Chinese
- ☐ Filipino
- ☐ Hmong
- ☐ Indonesian
- ☐ Japanese
- ☐ Korean
- ☐ Pakistani
- ☐ Sinhalese
- ☐ Taiwanese
- ☐ Thai
- ☐ Vietnamese
- ☐ Specify (for example, Afghani, Burmese, Cambodian, Kyrgyz, etc.):

[   ]

13. Black or African American: Provide details below.

- ☐ African American
- ☐ Ethiopian
- ☐ Haitian
- ☐ Jamaican
- ☐ Nigerian
- ☐ Somali
- ☐ Specify (for example, Ghanaian, South African, Barbadian, Congolese, etc.):

[   ]

14. Latino/Latina/Latinx, Hispanic: Provide details below.

- ☐ Cuban
- ☐ Dominican
- ☐ Guatemalan
- ☐ Mexican or Mexican American
- ☐ Puerto Rican
- ☐ Salvadoran
- ☐ Venezuelan
- ☐ Specify (for example, Colombian, Ecuadorian, Argentine, etc.):

        _____

15. Middle Eastern or North African: Provide details below.

- ☐ Algerian
- ☐ Egyptian
- ☐ Iranian/Persian
- ☐ Lebanese
- ☐ Moroccan
- ☐ Syrian
- ☐ Specify (for example, Israeli, Iraqi, Tunisian, etc.):

        _____

16. Native American, American Indian, or Alaskan Native: Provide details below.

- ☐ American Indian
- ☐ Alaskan native
- ☐ Central or South American indigenous
- ☐ Mam
- ☐ Ohlone, including Chochenyo, Karkin, Ramaytush, Yokuts, or Muwekma
- ☐ Specify (for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat, Nome Eskimo Community, etc.):

        _____

17. Native Hawaiian or Other Pacific Islander: Provide details below.

☐ Chamorro

☐ Fijian

☐ Guamanian

☐ Marshallese

☐ Native Hawaiian

☐ Samoan

☐ Tongan

☐ Specify (for example, Palauan, Tahitian, Chuukese, etc.):

[   ]

18. White: Provide details below.

☐ English

☐ German

☐ Irish

☐ Italian

☐ Polish

☐ Spanish/Spaniard

☐ Tongan

☐ Specify (for example, Scottish, Norwegian, Dutch, French, etc.):

[   ]

Please click "Next" for your answers to be tallied.

Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

2024 CHNA Survey to Identify Health Needs - Community Members (Alameda County)

Thank you!

Thank you for responding to the survey. Your facilitator will review your responses prior to your scheduled focus group. Again, you will soon receive an invitation with details about the focus group.

If you are finished with this survey, please click "Done."

CHNA KII Protocol - Professionals (60 min.)

PREP

- Schedule call, send background, needs, consent, and demographics survey and main topics from page 2 [*minimum: 1 week ahead of time*]. [Insert QR code for survey]
- 48 hours before:
    - Review the individual's background on LinkedIn and/or their organization's website; review their survey response (health needs they identified).
    - Send reminder email; remind them of their survey response (most pressing needs among those they serve) and the main questions.
        - If they didn't respond to the survey, include the link and ask them to respond ASAP before the interview.

INTRODUCTION (5 MIN.)

[Start recording from the beginning of the session.]

- WELCOME: Thank you for agreeing to do this interview today. My name is [NAME] with Actionable Insights. I will be conducting the interview today on behalf of local healthcare organizations as part of the Community Health Needs Assessment process for them in San Mateo and Santa Clara counties.
- [*If they didn't submit survey:* In order to go ahead, we'll need you to take the survey we sent you. Here's the link; I'll wait while you complete it [*place in Zoom chat]*
- What the project is about:
    - Local nonprofit hospitals are conducting a Community Health Needs Assessment. It is a systematic examination of health indicators in San Mateo and Santa Clara counties that will be used to identify key problems and assets in a community and develop strategies to address community health needs. You are an important contributor to this assessment because of your knowledge of the needs in the community you serve or represent. The hospitals greatly value your input.
    - A CHNA is required of all non-profit hospitals in the U.S. every three years. The report based on this assessment will be a snapshot in time; this report will be published next year (in 2025) and consulted through 2028.
- We expect this interview to last no longer than 1 hour; does that still work for you?
- Today's main topics:
    - Better understand the needs you identified as most pressing in your area
    - Which populations are experiencing inequities related to the needs
    - How things may have changed in the past few years (trends)
    - The biggest challenges you see in addressing the needs
    - Key resources and any models or best practices you know of for addressing the needs
    - Other areas of concern
    - *[If not one of the needs identified:]* Your expertise as it relates to the community's needs
- What we'll do with the information you tell us today:
    - Will record so that we can get the most accurate record possible

- ○ Will not share the audio itself; transcript will go to the healthcare organizations and their consultants, like me.
    - ○ Hospitals will make decisions about which needs they can best address
    - ○ We can keep anything confidential; just let me know any time.
    - ○ The information you provide today will not be reported in a way that would identify you. *[Next part depends on their survey response:]* We plan to name *you/your organization* in the report where we list all the experts we consulted, but will not attach your name to any quotes we might use.
- ● Do you have any questions before we get started? [If we don't have the answer, commit to finding it and sending later via email.]
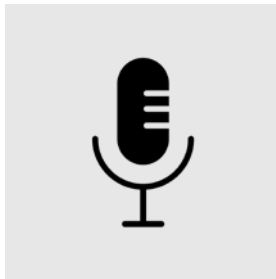
Kick on Zoom
recording!

HEALTH NEEDS DISCUSSION (35 MIN.)

Could you please pronounce your name and share your preferred pronoun? OK, [name], before we get down to the issues you identified, I'd like to ask you:

1. What are the healthiest characteristics of this community? [*Prompt if needed:* For example, a strong transportation system, an active arts and culture sector, safe and accessible spaces for physical activity]
    a. What strengths in the community amplify or support these healthy characteristics?

Thank you. Now, you identified [*read list from survey*] as the biggest health issues or conditions your community struggles with. For each of these needs, I'll ask you six things [*read only **bold text** to introduce this section*]:

1. Please briefly describe **how you see the need playing out.** What does it look like among the people you serve or represent?

2. **What** do **you think creates these issues**? [*Prompts for barriers if they are having trouble thinking of any:* Income/economic issues, language, culture/stigma, lack of awareness/education, policies/laws, budget cuts, lack of community resources, geographic location, transportation, housing, addiction, stress, being victims of abuse/bullying/crime]

3. This may overlap the previous question, but **are there certain people or geographic areas that have been affected by the issues** we've been talking about **more than others**? If so, in what ways? <u>In other words</u>, which specific groups of the population, if any, should the hospitals focus on to reduce disparities and inequities related to race or other factors? [*Prompts for populations if they are having trouble thinking of any*: income/education level, housing status, language,

immigration status, age, ethnicity, sexual orientation, gender identity, disability status, geographic location; intersectionality of any of these]

4. Next, **how things may have changed** in the last few years (since we know that the data always lag what is happening now)? What emerging trends or areas of concern have you seen since 2021? How has COVID recovery influenced the characteristics of these needs?

5. What are one or two of the biggest challenges to addressing the need?

6. [*1st time through only:* As you know, the hospitals will make decisions about which needs they can best address, and develop strategies to address them.] **What** do **you feel is needed to better address this need**, including **any models, best practices, or key community resources for addressing the need**? In other words, what are effective strategies to reduce health disparities and inequities in your community? [*Prompts if needed:* Is there work underway that is promising? Who is doing that work? Are there any best practices you have observed within your health system or organization, in our county agencies, national practices you've heard about, or practices you've read about in literature?]
    Probes: How would you like to see healthcare organizations like these hospitals address these needs? Who are the individuals or organizations that are important in connecting the sub-groups most affected by disparities to community resources that support this need?

OK, let's get started. For [name first need], [start at Q1; address all six questions, then go back to Q1-6 with second need, again with third need, then go on to the questions below.]

Only if their expertise was not related to one or more of the needs chosen:
FURTHER DISCUSSION: THEIR EXPERTISE (5-10 min.)

You were invited to share your expertise/experience about [*topic, e.g., substance use disorder, maternal health, or homelessness*]. Let's talk a little about that; how does it relate to the community's health needs? [*Probe:* What services does your organization provide to help meet those needs?]

Only if structural inequities were not already discussed:
FURTHER DISCUSSION: STRUCTURAL INEQUITIES (5-10 min.)

I know you didn't identify structural inequities as a specific need; would you mind...
● Speaking to any particularly detrimental structural inequities that are affecting the people you serve? How do those structural inequities show up?
● Identifying any equity initiatives or strategies you know of, which have momentum – that is, they seem to be making a positive impact?

ADDITIONAL COMMENTS (time permitting)

We have a few minutes left; is there anything else you would like to add regarding community health needs that we haven't already discussed? Any recent reports we should consult? Any other thoughts or comments we can convey to the hospitals?

REQUEST FOR ASSISTANCE WITH ASSETS LIST (2 min.)
The IRS requires that we get feedback from the community on potential resources available to address these health needs. We are compiling a list of resources by health need later this spring, which will be based on 2-1-1's list. **Would you be willing to review a list at that time, related to your area of expertise, and give us feedback?** *[Pause]* For example, we may ask whether the resources seem sufficient or if there are gaps; or if there are resources available that we have missed. *[Make a note as to whether they agree or not.]*

CLOSING (1 min.)
You can look for the hospitals' CHNA reports to be made publicly available on their individual websites in the second half of 2025. If anything occurs to you later that you would like to add to this interview, please feel free to send me an email.

Thank you so much for contributing your expertise and experience to the CHNA.

CHNA FG Protocol - Professionals (90 min.)

PREP

- Schedule group of 8-10 participants.
- Ahead of time [*minimum: 1 week ahead of time*], send participants:
    - Pre-focus group **consent/demographics & health needs survey** [INSERT LINK] [depending on group] and QR code for survey: [insert QR CODE]
    - FG date, time, and Zoom login information
    - Advise that the session will be recorded

- Prepare:
    - Slide of agenda/questions
    - Review pre-survey responses + create slide of top needs

- 48 hours before:
    - Send reminder email.
        - If they didn't respond to the survey, include the link and ask them to respond ASAP before the interview.

INTRODUCTION (10 MIN.)

- Hello everyone. Thank you for agreeing to participate in this focus group today. Today we are hosting a discussion about health here in [_____ County *or* Counties]. This session will run until [*time*] (one hour).
- My name is _____ and I'm with [*organization name and description, e.g.,* "a local consulting firm"]. My colleague will also introduce [her/him/their]self. [*Pause for their introduction.*] We are doing this focus group on behalf of local healthcare organizations as part of the Community Health Needs Assessment process for them in [COUNTY OR COUNTIES]. When we start our discussion in a few minutes, we will ask you to say your first name and your pronouns before speaking.

- What the project is about:
    - Local nonprofit hospitals are conducting a Community Health Needs Assessment. It is a systematic examination of health indicators in [COUNTY or COUNTIES] that will be used to identify key problems and assets in a community and develop strategies to address community health needs. You are an important contributor to this assessment because of your knowledge of the needs in the community you serve or represent. The hospitals greatly value your input.
    - A CHNA is required of all non-profit hospitals in the U.S. every three years. The report based on this assessment will be a snapshot in time; this report will be published next year (in 2025) and consulted through 2028.
- **Today's main topics:** show slide or point to agenda
    - Better understand the needs you identified as most pressing in your area
    - Which populations are experiencing inequities related to the needs
    - How things may have changed in the past few years (trends)
    - The biggest challenges you see in addressing the needs

- ○ Key resources and any models or best practices you know of for addressing the needs
- ● Confidentiality:
  - ○ Like you saw in the survey, we asked everyone if it was OK to record this discussion, and you all said yes. We are recording so that we can make sure to take down your words as accurately as possible.
  - ○ We will only use first names here. (If you want to use a pseudonym, that's OK too!)
  - ○ We can keep anything confidential; just let me know any time and we can delete it from the recording.
- ● What we'll do with the information you tell us today:
  - ○ Hospitals will make decisions about which needs they can best address
  - ○ The information you provide today will not be reported in a way that would identify you. We plan to name *you/your organization* in the report where we list all the experts we consulted unless you told us in the pre-survey that you didn't want us to be included, or only wanted your organization to be listed. We will not attach your name to any quotes we might use.
  - ○ When we are finished with all of the focus groups, we will read all of the transcripts and summarize the things we learn. We will also use some quotes so that the hospitals can read your own words. We will not use your name when we give them those quotes.
  - ○ If for any reason you are deciding that you do not want to participate, it is OK to leave the meeting now. No hard feelings!
- ● Guidelines:
  - ○ We know you have other things to do and we really appreciate you taking the time out of your day to be here. It is my job to move us along to keep us on time. I may interrupt you; I don't mean any disrespect, but it is important to get to all of the questions so we can finish on time.
  - ○ We understand that you may have other things going on on your end; we ask that you do the best you can to stay present, and let us know through the chat if you absolutely need to step away.
  - ○ It's OK to disagree, but please be respectful. We want to hear from everyone. Really want your personal opinions and thoughts, even – especially! – if they aren't the same as everyone else's.
- ● Do you have any questions before we get started? [If we don't have the answer, commit to finding it and sending later via email.]
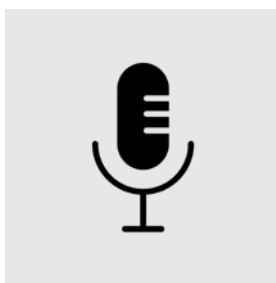
Kick on Zoom
recording!

HEALTH NEEDS DISCUSSION (35 MIN.)

OK, you identified [*read list from survey on PPT slide*] as the biggest health issues or conditions your community struggles with. For each of these needs, I'll ask this group six things [*read only **bold text** to introduce this section*]:

1. Briefly describe **how you see the need playing out.** What does it look like among the people you serve or represent? Remember, please say your name and your pronouns before speaking.

2. What do you think creates these issues? [*Prompts for barriers if they are having trouble thinking of any:* Income/economic issues, language, culture/stigma, lack of awareness/education, policies/laws, budget cuts, lack of community resources, geographic location, transportation, housing, addiction, stress, being victims of abuse/bullying/crime]

3. This may overlap the previous question, but **are there certain people or geographic areas that have been affected by the issues** we've been talking about **more than others**? If so, in what ways? <u>In other words</u>, which specific groups of the population, if any, should the hospitals focus on to reduce disparities and inequities related to race or other factors? [*Prompts for populations if they are having trouble thinking of any*: income/ed level, housing status, language, immigration status, age, ethnicity, sexual orientation, gender ID, disability status, geographic location; intersectionality of any of these]

4. Next, **how things may have changed** in the last few years (since we know that the data always lag what is happening now)? What emerging trends or areas of concern have you seen since 2021? How has the COVID recovery influenced the characteristics of these needs?

5. What are one or two of the biggest challenges to addressing the need?

6. What do you feel is needed to better address this need, including any models, best practices, or key community resources for addressing the need? [*Prompts if needed:* Is there work underway that is promising? Who is doing that work? Are there any best practices you have observed within your health system or organization, in our county agencies, national practices you've heard about, or practices you've read about in literature?] [*Probe*: How would you like to see healthcare organizations like these hospitals address these needs?]
   a. What are effective strategies to reduce health disparities and inequities in your community? [*Probe*: Who are the individuals or organizations that are important in connecting the sub-groups most affected by disparities to community resources that support this need?]

OK, let's get started. For [name first need], [start at Q1; address all six questions, then go back to Q1-6 with second need, again with third need, then go on to the questions below.]

<u>Only if</u> their expertise was not related to one or more of the needs chosen:
FURTHER DISCUSSION: THEIR EXPERTISE (5-10 min.)

You were invited to share your expertise/experience about [*topic, e.g., substance use disorder, maternal health, or homelessness*]. Let's talk a little about that; how does it relate to the community's health needs? [*Probe:* What services do your organizations provide to help meet those needs?]

Only if structural inequities were not already discussed:
FURTHER DISCUSSION: STRUCTURAL INEQUITIES (5-10 min.)

I know the group didn't prioritize structural inequities as a specific need; would you mind...
- Speaking to any particularly detrimental structural inequities that are affecting the people you serve? How do those structural inequities show up?
- Identifying any equity initiatives or strategies you know of, which have momentum – that is, they seem to be making a positive impact?

ADDITIONAL COMMENTS (time permitting)

We have a few minutes left; is there anything else you would like to add regarding community health needs that we haven't already discussed? **Any recent reports we should consult?** Any other thoughts or comments we can convey to the hospitals?

REQUEST FOR ASSISTANCE WITH ASSETS LIST (2 min.)

The IRS requires that we get feedback from the community on potential resources available to address these health needs. We are compiling a list of resources by health need later this spring, which will be based on 2-1-1's list. **Would you be willing to review a list at that time, related to your area of expertise, and give us feedback?** *[Pause]* For example, we may ask whether the resources seem sufficient or if there are gaps; or if there are resources available that we have missed. *[Launch Zoom poll.]*

CLOSING (1 min.)

You can look for the hospitals' CHNA reports to be made publicly available on their individual websites in the second half of 2025.

If anything occurs to you later that you would like to add, please feel free to send me [or my colleague] an email.

Thank you so much for contributing your expertise and experience to the CHNA.

CHNA FG Protocol - Community Members (90 min.)

PREP

- Work with host to schedule group of 8-10 participants. If needed, create recruitment email/flier for host. Ahead of time, have host send participants:
  - Pre-focus group **consent/demographics & health needs survey** [INSERT LINK] [depending on group] QR code for survey: [insert QR CODE]
  - FG date, time, and location [or Zoom login information]
  - Advise that the session will be recorded
- Prepare:
  - PDF [or flipchart] of agenda/questions
  - PDF [or flipchart] of prior cycle health needs list (including definition of healthcare access) [**if no pre-survey**]
  - Review pre-survey responses [depending on group] + create slide of top needs
  - If in person: consent + demographics survey & health needs paper survey [**if no pre-survey**]
  - If virtual: consent language & Zoom poll of health needs [**if no pre-survey**]

INTRODUCTION (10 MIN.)

[Start recording from the beginning of the session.]

- Hello everyone. Thank you for agreeing to participate in this focus group today. Today we are hosting a discussion about health here in [_____ County *or* Counties]. This session will run until [*time*] (90 minutes).
- My name is _____ and I'm with [*organization name and description, e.g.,* "a local consulting firm"]. My colleague will also introduce [her/him/their]self. [*Pause for their introduction.*] We are doing this focus group for local hospitals, including [*list names of participating hospitals in the area*]. When we start our discussion in a few minutes, we will call on you and ask you to say your name and your pronouns before speaking.
- Purpose:
  - You are here today to let nonprofit hospitals [*if applicable:* and the health department] know what the biggest health needs are in your community. These can include health conditions and the things that make those conditions better or worse.
  - This is called the Community Health Needs Assessment (CHNA), which is required every three years by the IRS, so it is an official, public report.
  - Hospitals will look at the numbers (statistics) and at <u>what **you** say</u>, to plan how they will use their resources to improve health and wellness in your county. So your thoughts are really important to them.
- Today's questions: show slide or point to agenda
  - What are the needs?
    - Which groups of people are doing better or worse when it comes to the needs?
    - What can hospitals/health systems do to improve health in the community?
  - Lastly, we will get your perspective about equity and cultural competence when it comes to healthcare.
- Confidentiality:

- ○ Like you saw in the survey, we asked everyone if it was OK to record this discussion, and you all said yes. We are recording so that we can make sure to get your words right.
        - ○ We will only use first names here -- you will be anonymous. (If you want to use a fake name, that's OK too!)
        - ○ Will not share the audio [and video, if on Zoom]; just the transcript will go to the healthcare organizations and their consultants [*if applicable:* like me].
        - ○ When we are finished with all of the focus groups, [we *or* the consultants] will read all of the transcripts and summarize the things [we/they] learn. [We/They] will also use some quotes so that the hospitals can read your own words. [We/They] will not use your name when [we/they] give them those quotes.
        - ○ If for any reason you are deciding that you do not want to participate, it is OK to leave the meeting now. No hard feelings!
- ● Guidelines:
        - ○ We know you have other things to do and we really appreciate you taking the time out of your day to be here. It is my job to move us along to keep us on time. I may interrupt you; I don't mean any disrespect, but it is important to get to all of the questions so we can finish on time.
        - ○ We understand that you may have other things going on [on your end]; we ask that you do the best you can to stay present, and let us know [through the chat] if you absolutely need to step away.
        - ○ If no pre-survey: You have a choice of a $50 credit to Amazon or [XYZ]. Please [mark your choice on the sign-in sheet *or* chat your email address to my colleague [*name*] now, along with your choice]. If you don't tell [him/her/them] which one you prefer, we'll [give *or* send] you an Amazon credit.
        - ○ It's OK to disagree, but please be respectful. We want to hear from everyone. Really want your personal opinions and thoughts, even – especially! – if they aren't the same as everyone else's.
- ● Any questions before we begin? [If we don't have the answer, commit to finding it and sending later via email.]

HEALTH NEEDS DISCUSSION (50-60 MIN.)

If no pre-survey: Here's a list of health needs in your area from 2022. [*show slide or point to flip chart list*] You'll see that there are regular physical health conditions, like cancer, and other kinds of needs, like a healthy climate, and housing. We're going to read the needs, then take a poll for you to choose the five you think are the most important, or pressing, in your community. [*Read off needs, then: launch zoom poll or give five sticky dots to each person in the room. Give people a few minutes to complete.*]

If collected by pre-survey, start here: As a group, you identified [*read list*] as the most important needs in your community -- these are the needs that got the most votes in the pre-survey. For each of these needs, I'll ask you three things [*read only **bold text** in Q1-3 on the next page to introduce this section*].

But before we get down to the needs you all chose, I'd like to ask you to share:

What is one thing that you are proud of about your community? How might that relate to the overall health of your community? [*Prompt if needed:* For example, maybe your community is a place where the people are welcoming to everyone, which could mean people feel safe living there; or maybe there are lots of ways to enjoy nature here, which could mean it's easy for people to be physically active;

or there are good services for people who are in need, which could mean people generally have their basic needs taken care of.]

After each participant who wants to share has done so: OK, let's move on to talk about the needs you chose.

1. *[If on Zoom, facilitators call on participants one by one.]* "Please say your first name, and then describe **what the need looks like in your community**, **including what might get in the way** for people to [live healthier lives / have better outcomes: *use "have better outcomes" language if need is homelessness, economic stability, violence/safety, or transportation; use "live healthier lives" for all other needs]*. You can choose to pass if you didn't vote for the need and don't have anything to say about it." [*Prompts for barriers if they are having trouble thinking of any:* Income/economic issues, language, culture/stigma, lack of awareness/education, policies/laws, budget cuts, lack of community resources, geographic location, transportation, housing, addiction, stress, being victims of abuse/bullying/crime, poor access to resources]

2. This may overlap the previous question, but I'll ask you to identify **what groups of people are better or worse off than others** for that need and explain how or why. [*Prompts for populations if they are having trouble thinking of any*: income/education level, housing status, language, immigration status, age, ethnicity [**get specific**], sexual orientation, gender identity, disability status, geographic location]

3. Finally, I'll ask you to describe, for that issue, **what you think is most needed** to help your community become healthier / improve everyone's lives *[use "improve lives" language if need is homelessness, economic stability, violence/safety, or transportation; use "help become healthier" for all other needs]*.
    a. What is working already, that could be continued or expanded?
        i.   What would make it easier for people to access these resources?
    b. Formal resources like government agencies and community organizations can help [*pause*]; so can informal resources like community elders, faith leaders, teachers, and coaches [*pause*]. They can support good programs that are already happening. Or they can help bring services to your community, that aren't here already.
    c. Thinking of all these organizations and people in your community, **which ones** do you think could best help when it comes to this need?
    d. If you could choose a program, service, or other strategy that's not already here in your community, that you think could help, what would it be? [*Probe if necessary:* How could it help?]

OK, let's get started. For [name first need], [start at Q1; address all three questions, then go back to Q1-3 with second need, then again with third, then go on to the questions below.]

YOUR PERCEPTION OF EQUITY ISSUES (20-25 min.)

You have probably heard the words "cultural competence" before; they mean being able to understand the values and beliefs of people who are different from yourself, so you can communicate with them respectfully.

1. We've heard that not all providers know how to care for people in a **culturally competent and respectful** way. What do you think those providers are missing? What do you think they need to learn?

As you probably know, people have been talking about issues of <u>equity</u> now more than ever. "Equity" means fairness and unbiased treatment. When it comes to healthcare, we'd like to ask about your opinion on equity and cultural competence:

2. What do you think gets in the way of everyone having the **same access** to healthcare?

3. What do you think gets in the way of everyone getting the **same quality** of healthcare?

4. What can **hospitals and health systems** do to best address equity for you and the people in your community?

OTHER COMMENTS (time permitting)

Are there any other thoughts or information you would like to share that we have not already talked about?

CLOSING (1 min.)

Thank you for contributing your opinions and experience to the CHNA. The hospitals' CHNA reports will be available on their websites in the second half of 2025. After the assessment, they will be working on their plan for how they will use their resources to improve health and wellness in your county, and those plans will be available in late 2025 or early 2026.

You can contact us if you want any more information about the assessment. If anything occurs to you later that you would like to add, please feel free to send us an email.

Appendix 5: Community Assets and Resources

Programs and resources available to meet identified community health needs in each county are listed on the following pages.

Appendix 5a: Community Assets and Resources, Alameda County (excepting southern and central county areas)

Healthcare Facilities and Agencies

The following healthcare facilities are available in Alameda County.

HOSPITALS

- Alameda Health System, Alameda Hospital
- Alameda Health System, Highland Hospital
- John Muir Health
- Kaiser Foundation Hospital–Fremont
- Kaiser Foundation Hospital–Oakland
- Sutter Health Alta Bates Summit Medical Center
- UCSF Benioff Children's Hospital Oakland

FEDERALLY QUALIFIED HEALTH CENTERS

- Asian Health Services
- Baywell Health
- Brighter Beginnings
- La Clínica de la Raza (multiple locations)
- LifeLong Medical Care (multiple locations)
- Native American Health Center

OTHER HEALTH CLINICS

- Center for Elder Independence
- Order of Malta Clinic
- Roots Community Health Center

OTHER ORGANIZATIONS

- Alameda County Healthcare Services: HealthPAC
- Alameda County Social Services Agency
- East Bay Agency for Children
- Hemophilia Foundation of Northern California
- Operation Access

Assets and Resources by Identified Health Need

The following tables provide the names, summary descriptions, and websites for various assets and resources available in Alameda County to address identified health needs.

BEHAVIORAL HEALTH

Including Mental Health and Substance Use

Resource Name	Summary Description	Website	Area
Afghan Coalition	Supports and empowers Afghani refugee families, women, and youth to achieve health and wellness.	https://www.afghancoalition.org/	AC
Alameda County Behavioral Healthcare Services	Provides services to maximize the recovery, resilience and wellness of all eligible Alameda County residents who are developing or experiencing serious mental health, alcohol or drug concerns.	http://www.acbhcs.org/	AC
Alameda County Housing and Community Development	Develops housing and programs to serve the county's low- and moderate-income, homeless, and disabled populations.	https://www.acgov.org/cda/hcd/	AC
Alameda County Medical Center Substance Abuse Program	Offers high quality treatment and prevention services for residents seeking recovery from drug and alcohol addictions.	https://www.acbhcs.org/substance-use-treatment/	AC
Alameda County Social Services Agency	Provides benefits programs through cash assistance and CalFresh ("food stamps"), CalWORKs (assistance for families with children), General Assistance, and Medi-Cal Health Insurance.	https://www.alamedasocialservic es.org/public/index.cfm	AC
Alameda Health System	Aims to extend care, wellness, and prevention to all members of the community.	http://www.alamedahealthsyste m.org/	AC
Alameda Health System John George Psychiatric Hospital	Provides psychiatric emergency and acute care services to adults experiencing severe and disabling mental illnesses.	https://www.alamedahealthsystem.org/locations/john-george-psychiatric-hospital/	AC
Al-Anon	12-step program for adult relatives and friends of alcoholics or someone coping with alcoholism.	https://al-anon.org/	AC
Alateen	12-step program for teen relatives and friends of alcoholics or someone coping with alcoholism.	https://al-anon.org/for-members/group-resources/alateen	AC
Alcoholics Anonymous	12-step program for individuals who need help with alcohol addiction or excessive drinking.	https://www.aa.org/	AC

Resource Name	Summary Description	Website	Area
Asian Health Services - Specialty Mental Health	Provide children and youth ages 0-8 (early childhood) and 5-21 (children & youth) living in Alameda County with social-emotional support through screening, assessment, education, early intervention, medication support, and individual and family therapy.	http://www.asianhealthservices.org	AC
Bay Area Community Services	Provides behavioral health and housing services for teens, adults, older adults, and their families across the Bay Area.	https://www.bayareacs.org	AC
Beats, Rhymes and Life	Engages youth in Oakland to use hip-hop and self-expression as a form of therapy to facilitate healing.	http://brl-inc.org/	North AC
Boldly Me	Helps people with differences due to birth conditions, medical treatments, injury, disease, and self-perception heal from emotional trauma.	http://www.boldlyme.org/	AC
Building Futures	Provides a continuum of care through residential programs, crisis lines, and case management to help county residents build a future free of violence and homelessness.	http://www.bfwc.org/	AC
California Smokers Helpline	Free telephone program that helps smokers quit.	1-800-BUTTS	AC
The Center for Early Childhood Connections	Child and family therapy, assessments for 0-5, perinatal emotional support during infertility, pregnancy, adoption and postpartum.	http://www.thececc.org	North AC
Center for Human Development	Facilitates the growth and strengthening of communities by providing services for at- risk youth, individuals, and families.	http://chd-prevention.org/	AC
Chrysalis	Residential treatment program for women age 18+ living with mental health and substance use disorders.	https://www.horizonservices.org/chrysalis/	North AC
City of Berkeley Department of Health Services	Provides services to monitor the health of the community, prevent epidemics and the spread of disease, protect against environmental hazards, respond to disasters, and promote and encourage healthy behaviors.	https://www.cityofberkeley.info/publichealth/	North AC

Resource Name	Summary Description	Website	Area
Crisis Support Services of Alameda, County 24-Hour Crisis Line	Gives round-the-clock telephone support to people coping with difficult circumstances or emotions, or suicidal thoughts or feelings.	https://www.crisissupport.org/programs/crisis-line/	AC
CURA, Inc.	Helps individuals experiencing difficulties with substance abuse achieve sobriety, health, and wellness.	https://www.curainc.com/Home.html	AC
East Bay Agency for Children	Offers comprehensive services designed to reduce the incidence/impact of adverse childhood experiences and other traumas.	http://www.ebac.org/	AC
Family Education and Resource Center	Offers educational information on health, family relationships and well-being.	http://askferc.org/	AC
Family Paths 24-Hour Parent Support Hotline	Provides free, confidential counseling and information to anyone in need of parenting support as well as referrals to nearly 900 community resources.	https://familypaths.org/what-we- do/24-hour-parent-support/	AC
First 5 Alameda County	Offers continuous prevention and early intervention programs that promote optimal health and development, narrow disparities and improve the lives of children ages 0–5 and their families.	http://www.first5alameda.org/	AC
Flourish Agenda	Strives to help youth of color flourish.	https://flourishagenda.com/	AC
Fred Finch Youth & Family Services	Comprehensive behavioral health services for children, youth, young adults, and their families to address challenges that may include mental or emotional impairment, developmental disability, early trauma and abuse.	https://www.fredfinch.org	AC
Gamblers Anonymous	12-step program for people coping with a gambling addiction.	http://www.gamblersanonymous.org/ga/	AC
Girls, Inc.	Runs programs designed to empower and inspire girls and young women.	https://girlsinc.org/	AC
Hively	Hively Mental Health provides counseling services to individuals, families and children via MediCal and private payment options. We serve ALL ages.	https://behively.org/mental-health-services/	AC

Resource Name	Summary Description	Website	Area
Horizon Services, Inc.	Provides preventive, educational, and therapeutic services and environments for individuals, families, and the community.	https://www.horizonservices.org/	AC
Jewish Family and Community Services East Bay	Promotes the well-being of individuals and families of all ages, races, and religions with essential mental health and social services at every stage of life.	https://jfcs-eastbay.org/	AC
Kidango, Inc.	Runs free and reduced-cost pre-school/ child care centers.	https://www.kidango.org/	AC
Lincoln Families	Provides children with support and services, from an early age through high-school graduation.	http://lincolnfamilies.org/	AC
Mindful Life Project	Empowers underserved children to gain self-awareness, confidence, self-regulation, and resilience through mindfulness and other transformative skills.	http://www.mindfullifeproject.org/	AC
Mindful Littles	Empowering students, parents and teachers to feel good by doing good – engaging in meaningful service learning and mindfulness practices to strengthen connections with each other and their communities.	https://www.mindfullittles.org	AC
Narcotics Anonymous	12-step program for individuals coping with substance abuse or drug addiction.	https://www.na.org/	AC
National Alliance on Mental Illness (NAMI)	Offers education, support, and advocacy for people affected by mental illness.	http://www.namiacs.org/	AC
Niroga	Offers programs in schools to strengthen resilience and empathy, using trauma-informed Dynamic Mindfulness.	https://www.niroga.org/	AC
OneChild	Helps youth take action against sex trafficking through education, advocacy, mobilization, and survivor care and empowerment.	https://www.onechild.ca/	AC
Overeaters Anonymous	12-step program for people coping with compulsive overeating, undereating, food addiction, anorexia, bulimia, binge eating and/or excessive exercising.	https://oa.org/	AC

Resource Name	Summary Description	Website	Area
Pacific Center for Human Growth	Delivers LGBTQ-proficient mental health and wellness services to enhance the well-being of community members.	http://pacificcenter.org/	AC
Partnership for Trauma Recovery	Addresses the psychosocial impacts of trauma among international survivors of human rights abuses through culturally aware, trauma-informed, and linguistically accessible mental-healthcare, clinical training, and policy advocacy.	https://traumapartners.org/	AC
Rcoz	Platform to raise awareness and build acceptance of mental health issues among South Asians through storytelling and community dialogue with experts.	https://www.rcoz.us/	AC
Second Chance, Inc.	Offers individual and group substance abuse treatment.	https://secondchanceinc.com/	AC
Seneca Center	Provides a comprehensive continuum of school, community-based and family- focused treatment services for children and families experiencing high levels of trauma who are at risk for family disruption or institutional care for the children.	https://www.senecafoa.org/	AC
Side by Side	Helps youth overcome traumas caused by adversity and embrace resilience.	https://www.sidebysideyouth.org/	AC
Through the Looking Glass	Home-based support for parents with intellectual disability and their children. Adaptations (e.g. cognitive adaptations, adaptations in communication) and case management.	http://www.lookingglass.org	AC
Tobacco Control Coalition of Alameda County	Grassroots coalition of educators, professionals, and community members that work to prevent, reduce, and limit tobacco use in Alameda County through education, advocacy, and policy.	https://tobaccofreealamedacounty.org/	AC
Wellness Together	Partners with K-12 school districts and colleges to provide mental health services for students, families, and educators.	https://www.wellnesstogether.org/	AC

Resource Name	Summary Description	Website	Area
West Oakland Health Council	Parent organization of West Oakland Health Center, FQHC with multiple locations that offers medical and dental care as well as behavioral health and other services.	https://westoaklandhealth.org/about-us/	North AC
Women and Men on the Way	Provides an alcohol and drug free environment and recovery services in a home like setting for a period of 6-12 months with an ongoing aftercare plan.	https://womenandmenontheway.org/	AC
Women on the Way Recovery Center	Helps women who have limited resources or are experiencing homelessness recover from substance abuse through housing, treatment, and aftercare support.	https://www.rehab.com/women- on-the-way-recovery-center- phase-one/6416443-r	AC
YMCA of the East Bay	Offers a variety of programs through its five health and wellness centers, 20-plus childcare sites, a teen center, and three camps.	https://ymcaeastbay.org/	AC
Z-Cares Foundation	Providing youth mental health awareness training, documentary screening, webinars and conferences to enable thousands of youth and their parents and guardians to have positive dialogues and reduce the stigma around anxiety, depression and a broad range of mental health concerns.	https://www.zcares.org	AC

CANCER

Resource Name	Summary Description	Website	Area
American Cancer Society	Aims to freeing the world from cancer by funding and conducting research, sharing expert information, supporting patients, and spreading the word about prevention.	https://www.cancer.org/	AC
CancerCare	Professional oncology social workers provide free emotional and practical support for people with cancer, caregivers, loved ones and the bereaved.	https://www.cancercare.org/	AC
Every Woman Counts	Run by the California Department of Healthcare Services, provides free breast and cervical cancer screening and diagnostic services to California's underserved populations.	https://www.dhcs.ca.gov/services/Cancer/ewc/Pages/default.aspx	AC

Resource Name	Summary Description	Website	Area
The Leukemia and Lymphoma Society	Strives to find a cure for leukemia, lymphoma, Hodgkin's disease and myeloma, and to improve the quality of life of patients and their families.	https://www.lls.org/	AC
Tobacco Control Coalition of Alameda County	Grassroots coalition of educators, professionals, and community members that work to prevent, reduce, and limit tobacco use in Alameda County through education, advocacy, and policy.	https://tobaccofreealamedacounty.org/	AC
Women's Cancer Resource Center	Helps women with cancer improve their quality of life through education, practical assistance, and support services.	https://www.wcrc.org/	AC

CLIMATE/NATURAL ENVIRONMENT

Resource Name	Summary Description	Website	Area
Alameda County Department of Environmental Health	Ensures food and recreational safety, reduces exposures to toxics and pests, protects the quality of local water, air, and physical environment.	https://deh.acgov.org/index.page	AC
Alameda County Office of Sustainability	Leads implementation of county's Climate Action Plan.	https://www.acgov.org/sustain/	AC
Asian Pacific Environmental Network	Supports environmental justice movement with work focused on Asian immigrant and refugee communities.	https://apen4ej.org/	AC
Bay Area Climate Adaptation Network (BayCAN)	A collaborative network of local government staff and partnering organizations working to help the Bay Area respond effectively and equitably to the impacts of climate change on human health, infrastructure, and natural systems.	https://www.baycanadapt.org/	AC
Bay Area Air Quality Management District	Oversees and implements policies and regulations for the control of air pollution within the nine counties that surround San Francisco Bay.	https://www.baaqmd.gov/	AC
Bike East Bay	Promotes a healthy, sustainable community by making cycling safe, fun and accessible.	https://bikeeastbay.org/	AC
City of Oakland: Resilience Hubs	Supports enhancement of city facilities (e.g., libraries, recreational centers) to reliably serve as places of refuge during smoke days, extreme heat, and power outages.	https://www.oaklandca.gov/topics/resilience-hubs	North AC

Resource Name	Summary Description	Website	Area
Climate Protection Planning Program	Supporting development and implementation of Comprehensive Climate Action Plan, a roadmap for meeting regional near- and long-term greenhouse gas (GHG) reduction targets by reducing GHG emissions and enhancing carbon sinks in the Bay Area.	https://www.baaqmd.gov/en/plans-and-climate/climate-planning/bay-area-regional-climate-action-planning-initiative	AC
Collective Resilience	Supports the development of resilience hubs.	https://collectiveresiliencenow.org	AC
East Bay Regional Park District	Conserve open space resources and provide outdoor recreational opportunities for present and future generations.	https://www.ebparks.org/	AC
Friends of Lincoln Square Park	Supports the building of a community resilience center in Oakland's Chinatown.	https://www.friendsoflincolnsquarepark.org/	North AC
Local Clean Energy Alliance	Membership organization to promote the development and democratization of local renewable energy resources.	https://localcleanenergy.org/	AC
Sierra Club	Grassroots organization that supports efforts to appreciate and protect the environment and create a more sustainable future.	https://www.sierraclub.org/sfbay	AC
West Oakland Environmental Indicators Project	Conducts participatory environmental research and engages in environmental justice advocacy.	https://woeip.org/	North AC
Various cities' Environmental Services Divisions			AC

COMMUNITY SAFETY

Resource Name	Summary Description	Website	Area
A Safe Place	Provides domestic violence shelter and services.	https://www.asafeplace.org/	AC
Afghan Coalition	Supports and empowers Afghani refugee families, women, and youth to achieve health and wellness.	https://www.afghancoalition.org/	AC
Alameda County Court Appointed Special Advocates	Promotes and supports quality volunteer advocates to speak for the best interests of abused and neglected children in the dependency court system.	https://casaofalamedacounty.org/	AC

Resource Name	Summary Description	Website	Area
Alameda County Deputy Sheriffs' Activities League	Collaborates with residents on initiatives that reduce crime and improve community health.	https://www.acdsal.org/	AC
Alameda County District Attorney Accountability Table	Coalition of Alameda County-based organizations working together to advance public safety solutions.	https://acaccountability.org	AC
Alameda County Family Justice Center	Ensures the safety, healing, and self-empowerment of victims of interpersonal violence through supportive services related to counseling, trauma recovery, and resource referral.	http://www.acfjc.org/	AC
Alameda Family Services	Offers programs to improve the emotional, psychological, and physical health of children, youth and families.	https://www.alamedafs.org/	AC
Alternatives in Action	Offers school and community programs for youth.	https://www.alternativesinaction.org/	AC
Allen Temple Baptist Church Health and Social Services Ministries	Provides Alameda County Probation and Court Certified domestic violence batterers intervention classes.	https://www.atwellness.org/anger-management-domestic-violence-programs	North AC
Bananas	Supports families and individuals with children by providing referrals to childcare, education around imbursement for childcare, and workshops for parents.	https://bananasbunch.org/	AC
Bay Area Women Against Rape	Addresses the issue of sexual assault by providing support services to survivors and leading education efforts in the community around the topic.	https://www.bawar.org	AC
Berkeley Youth Alternatives	Helps at-risk youth through programs that emphasize education, health and well-being, and economic self- sufficiency.	https://www.byaonline.org/	North AC
Boys and Girls Clubs	Provide mentorship, programming (including sports, arts, wellness, and leadership), and safe places for young people.	https://www.bgca.org/	North AC
Building Futures	Provides a continuum of care through residential programs, crisis lines, and case management to help county residents build a future free of violence and homelessness.	http://www.bfwc.org/	AC
Calico Center	Works with law enforcement officers, child welfare workers, prosecutors, and other professionals to achieve justice for abused children by investigating abuse allegations and eliciting testimony from children.	https://www.calicocenter.org/	AC

Resource Name	Summary Description	Website	Area
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	https://www.cceb.org/	AC
Center for Human Development	Facilitates the growth and strengthening of communities by providing services for at-risk youth, individuals, and families.	http://chd-prevention.org/	AC
Community and Youth Outreach	Provides outreach, mentoring, case management, and support to high-risk youth and young adults.	http://www.cyoinc.org/	AC
Community Violence Solutions	Works to end sexual assault and family violence by providing services to survivors of sexual assault or abuse and their families.	https://cvsolutions.org/	AC
Ella Baker Center for Human Rights	Organizes to shift resources away from prisons and punishment towards opportunities that make our communities safe, healthy, and strong.	https://ellabakercenter.org/	North AC
Exonerated Nation	Helps exonerated formerly incarcerated individuals transition to life outside prison.	https://exoneratednation.org/	AC
Family Support Services	Assists families who face serious challenges in successfully caring for their children.	https://fssba.org/	AC
Family Violence Law Center	Helps diverse communities in Alameda County heal from domestic violence and sexual assault, advocating for justice and healthy relationships.	https://fvlc.org/	AC
Fresh Lifelines for Youth	Prevents juvenile crime and incarceration through legal education, leadership training, and one-on-one mentoring.	https://flyprogram.org/	AC
Girls, Inc.	Runs programs designed to empower and inspire girls and young women.	https://girlsinc.org/	AC
Highland Hospital Sexual Assault Response and Recovery Team	Provides comprehensive services to victims of domestic violence and sexual assault.	https://www.alamedahealthsystem.org/sarrt/	AC
Hively	Hively helps families find and pay for child care, offers mental health support and provides basic necessities to families in need, helping to disrupt neglect and abuse.	https://behively.org/	AC
Immigration Institute of the Bay Area	Helps immigrants, refugees, and their families settle in the community by providing legal-aid services as well as education and community engagement opportunities.	https://iibayarea.org/	AC

Resource Name	Summary Description	Website	Area
KidPower International	Provides resources and training to support education on safety, including bullying solutions, sexual assault prevention, child abuse prevention, self-defense, and online safety.	https://www.kidpower.org/	AC
Koreatown Northgate (KONO)	Ensures the district (Telegraph Avenue from 20th to 35th Streets in Oakland) is safe, clean, and promoted.	https://www.koreatownnorthgat e.org/	North AC
The Latina Center	Focuses on uplifting the health and growth of the Latinx community by providing leadership and personal development opportunities.	https://thelatinacenter.org/	AC
Narika	Helps domestic violence survivors with advocacy, support, and education.	https://www.narika.org/	AC
Oakland Unite!	Targets the highest-risk community members and neighborhoods, with programs focused on interrupting violence as it is occurs and preventing future violence.	http://oaklandunite.org/	North AC
OneChild	Helps youth take action against sex trafficking through education, advocacy, mobilization, and survivor care and empowerment.	https://www.onechild.ca/	AC
Project Avary	Runs a program that meets the unique emotional needs of children with a parent in prison, starting at ages 8–11 and continuing for 10 years.	http://www.projectavary.org/	AC
Reentry Success Center	Supports formerly incarcerated individuals in transitioning back into the community.	http://reentrysuccess.org/	AC
Special Operations – Finding Kids	Hires boots-on-the-ground retired law enforcement and private investigators — at no cost to parents — to find missing and exploited children.	https://findingkids.org/	AC
STAND! for Families Free of Domestic Violence	Strives to break the cycle of violence in families impacted by domestic violence and child abuse by providing services around therapy, crisis lines and educational opportunities.	http://www.standffov.org/	AC
Youth Alive!	Works to prevent violence, and helps violently wounded people heal themselves and their community.	http://www.youthalive.org/	AC
Youth Uprising	Engages youth in East Oakland in leadership opportunities to drive the health and economic growth of the community.	https://www.youthuprising.org/	North AC

ECONOMIC STABILITY

See subsection on Food Security for free food resources.

Resource Name	Summary Description	Website	Area
Abode Services: Project Independence	Provides young adults leaving the foster care system with supportive housing and services aimed at helping them achieve self-sufficiency and stability in their lives, including case management, education and vocational training, employment placement, and financial literacy training.	https://abode.org/services	AC
Alameda County Social Services Agency	Provides benefits programs through cash assistance and CalFresh ("food stamps"), CalWORKs (assistance for families with children), General Assistance, and Medi-Cal Health Insurance.	https://www.alamedacountysocialservices.org/our-services/Health-and-Food/index	AC
America Works	Provides work readiness training, vocational training, career placement, career advancement, and employment retention services.	https://americaworks.com/	AC
Asian Pacific-Islander American Public Affairs	Partners with local, state, and federal government offices to provide internships that empower the next generation of community leaders.	https://www.apapa.org/internship	AC
Bay Area Legal Aid	Increases access to the civil justice system through legal assistance for low-income individuals.	https://baylegal.org/ Legal Advice Line: 1-800-551-5554	AC
Berkeley City College CalWORKS Program	Provides academic support for CalWORKs participants to succeed in both their educational and employment goals, including childcare assistance and work-study opportunities.	https://www.berkeleycitycollege.edu/calworks/	North AC
Building Opportunities for Self-Sufficiency	Operates programs and services designed to empower homeless, poor, and disabled individuals to become self-sufficient.	https://self-sufficiency.org/	AC
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	http://www.cceb.org/	AC
Clausen House	Provides housing, wellness programs, and advocacy for developmentally disabled adults in Oakland and the surrounding East Bay area.	https://clausenhouse.org/	North AC
Community Resources for Independent Living	Focuses on providing disabled individuals with peer-based resources and advocacy	http://www.crilhayward.org/	AC

Resource Name	Summary Description	Website	Area
	to improve their lives and their ability to navigate their environment.		
East Bay Asian Local Development Corporation	As the lead agency of SparkPoint Oakland, EBALDC assists families and individuals to stabilize their financial situations and develop asset-building tools as part of its work with and for the diverse populations of the East Bay to build healthy, vibrant, and safe neighborhoods through community development.	https://ebaldc.org/ https://ebaldc.org/sparkpoint-oakland/	AC
East Bay Community Foundation	Supports entrepreneurs of color through community-controlled and democratically governed loan fund for businesses with a strong social mission; funds economic justice nonprofits and impact investing.	https://www.ebcf.org/	AC
East Bay Community Law Center	Addresses the underlying causes of poverty and economic and racial inequality to improve opportunities in economic security, education, health and welfare, housing, and immigration.	https://ebclc.org/	AC
East Bay Works	Partners with job centers, economic developers, support service providers, and educational entities to provide benefits and services to employers, job seekers and youth ages 16–24 at no cost.	http://www.eastbayworks.com/	AC
The East Oakland Collective	Supports various programs including lending circles and financial literacy education.	https://www.eastoaklandcollective.com/	North AC
East Oakland Youth Development Center	Develops the social and leadership capacities of youth and young adults ages 6–24 so that they are prepared for employment, higher education, and leadership roles.	http://eoydc.org/	North AC
First Place for Youth	Supports youth, particularly those in foster care, in developing self- sufficiency and a sense of purpose by offering housing and case-management services.	https://www.firstplaceforyouth.org	AC
Give Teens 20 / Nav Z	Website with self-sufficiency resources for teens.	https://gt20.org/	AC
Hively	Provides help with affordable child care options and offers basic children's necessities (clothing, shoes, diapers, wipes) to families in need.	https://behively.org	North AC

Resource Name	Summary Description	Website	Area
Lao Family Community Development	Extensive menu of quality specialized jobs and career and employment programs.	https://lfcd.org/	North AC
Narika Seed Program	Job training program to foster economic independence and self-reliance among survivors of domestic violence and new immigrant populations that are particularly vulnerable to abuse and exploitation.	https://www.narika.org/seed-program	AC
One-Stop Career Center (EDD)	Offers free help to job seekers, including employment and training assistance, and serves a range of specialized clients including veterans, youth, laid-off workers, and employers.	https://www.careeronestop.org/LocalHelp/AmericanJobCenters/find-american-job-centers.aspx	AC
Rising Sun Center for Opportunity	Provides green training, employment, and residential energy-efficiency services.	https://risingsunopp.org	AC
Rubicon Programs	Equips East Bay residents with resources to break the cycle of poverty.	http://rubiconprograms.org/	AC
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	AC
Unity Council	Helps families and individuals build wealth and assets through sustainable economic, social, and neighborhood development programs.	https://unitycouncil.org/	AC
Youth Spirit Artworks	Engages homeless and low-income individuals in artistic jobs and training to help them develop skills, experience, and self-confidence.	http://youthspiritartworks.org/	AC
Various cities' Human Services Departments			AC

Economic Stability: Education

Resource Name	Summary Description	Website	Area
Alameda County Early Head Start and Head Start	Provides child development and family support services to facilitate children's health and education.	https://www.alamedafs.org/hs-ehs.html	AC
Alameda County Library	Offers family literacy days and free 1:1 learning for reading, writing, and speaking English better.	https://aclibrary.org/	AC

Resource Name	Summary Description	Website	Area
Alameda County Office of Education	Oversees school districts' budgets and educational plans, serves as a school district, and provides programs to the county's most vulnerable students. Also provides training and support services for educators.	https://www.acoe.org/	AC
Berkeley City College	Community college that provides instruction, student support and learning resources which enable students to earn associate degrees and certificates, and to attain college competency, careers, transfer, and skills for lifelong success.	https://www.berkeleycitycollege.edu/	North AC
College of Alameda	Community college that provides comprehensive and flexible programs and resources that empower students to achieve their goals.	https://alameda.edu/	North AC
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	https://www.cceb.org/	AC
Community Child Care Council (4C's) of Alameda County	Strengthens children and families by helping parents find and pay for affordable child care.	https://www.4c-alameda.org	AC
DayBreak Adult Care	Provides education, training, and support for family caregivers.	www.daybreakac.org	AC
Davis Street Community Center	Supports children and families through State Subsidized Alternative Payment Program(APP) and child development centers.	https://www.davisstreet.org	AC
First 5 Alameda	Provide funding and programming for childcare and learning (e.g., parenting classes, childcare provider training), as well as advocacy and partnership.	https://first5alameda.org/	AC
Give Teens 20 / NavZ	Website with self-sufficiency resources for teens, including information on funding for college.	https://gt20.org/	AC
Hidden Genius Project	Focuses on increasing diversity in the workforce and transforming communities by mentoring black male youth in technology creation, entrepreneurship, and leadership skills.	http://www.hiddengeniusproject.org/	AC

Resource Name	Summary Description	Website	Area
Hively	Provides education and training to child care providers and helps families find and pay for child care that promotes early childhood development and learning.	https://behively.org/	AC
Laney College	Community college that provides certificates, degrees, transfer pathways, career education, and lifelong learning opportunities.	https://laney.edu/	North AC
Merritt College	Community college that provides rigorous and engaging in-person and remote learning experiences that support students' desired academic and personal achievements.	https://www.merritt.edu/	North AC

School Districts in Alameda County (excepting southern and central county areas)

School District	Location	Website
Alameda USD	Alameda	https://alamedausd-ca.schoolloop.com/
Albany USD	Albany	https://www.ausdk12.org/
Berkeley USD	Berkeley	https://www.berkeleyschools.net/
Emeryville USD	Emeryville	https://emeryusd.k12.ca.us/
Oakland USD	Oakland	https://www.ousd.org/
Piedmont USD	Piedmont	http://www.piedmont.k12.ca.us/

Economic Stability: Food Security

Also see Economic Stability main table for resources.

Resource Name	Summary Description	Website	Area
18 Reasons	Empowers community members with the confidence to buy, cook, and eat good food every day.	https://18reasons.org/	AC
Acta Non Verba	Provides urban farming opportunities for children, youth, and families in East Oakland to deepen their understanding of nutrition, food production, and healthy living, and strengthen their ties to the community.	https://anvfarm.org/	North AC

Resource Name	Summary Description	Website	Area
Alameda County Community Food Bank	Pursues a hunger-free community by conducting food distribution services, CalFresh outreach, youth and student nutrition programs, and mobile produce stands at health-delivery centers.	https://www.accfb.org/	AC
Alameda County Food Resources	Lists community groups providing food assistance.	https://www.needhelppayingbills.com/html/alameda_county_food_banks.html	AC
Alameda County Deputy Sheriffs' Activities League	Collaborates with Alameda County adults and youth on initiatives to reduce crime and improve community health.	https://www.acdsal.org/	AC
Alameda County Nutrition Services– Women, Infants, and Children (WIC)	Promotes healthy eating at public events, conducts cooking demonstrations, teaches nutrition and cooking classes, provides nutrition education, plants gardens, and develops and implements healthy food and beverage standards.	http://www.acphd.org/nutrition- services	AC
Alameda County Public Health Department	Offers community-based activities that engage residents and local partners in the planning, evaluation, and implementation of health activities.	http://www.acphd.org/	AC
Alameda County Social Services Agency	Provides benefits programs through cash assistance and CalFresh ("food stamps"), CalWORKs (assistance for families with children), General Assistance, and Medi-Cal Health Insurance.	https://www.alamedasocialservices.org/public/index.cfm	AC
Building Blocks Collaborative	Committed to improving health conditions in our most troubled neighborhoods. Focused on food justice.	https://acphd.org/building-blocks/projects/bbc/	AC
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	https://www.cceb.org/	AC
City Slicker Farms	Reinforces self-sustaining access to food through urban farming, education, and recreation.	http://www.cityslickerfarms.org/	AC
Daily Bowl	Recovers excess food that would otherwise go to waste and delivers it to Bay Area agencies that feed families who are hungry.	https://dailybowl.org/	AC
Davis Street Community Center	Provides emergency food, clothing, utility assistance and housing support.	https://www.davisstreet.org	AC
The East Oakland Collective	Supports various programs including food distribution.	https://www.eastoaklandcollective.com/	North AC

Resource Name	Summary Description	Website	Area
First 5 Alameda County	Provide funding, programming, advocacy, and partnership to support children aged 0-5 and their families, including ensuring basic resources such as food.	https://first5alameda.org/	AC
Fresh Approach	Improves healthy food access in the community through farmers markets, community gardens, and cooking and nutrition classes.	https://www.freshapproach.org/	AC
LIFE Eldercare, Inc.	Offers Meals on Wheels, transportation, friendly visitors, and fall prevention for the elderly.	https://lifeeldercare.org	AC
Mandela MarketPlace	Builds health, wealth, and assets in low-income communities by creating local food enterprises.	https://www.mandelapartners.org/	AC
Meals on Wheels of Alameda County	Delivers nutritious meals to, and performs wellness checks on, frail and/or homebound seniors.	https://www.feedingseniors.org/	AC
Spectrum Community Services: Meals on Wheels, Senior Meals	Meals on Wheels offers healthy, home-delivered meals for seniors who are unable to prepare their own food and have difficulty with mobility; Senior Meals distributes freshly prepared, nutritious meals to various Alameda County locations where registered seniors can pick them up.	https://www.spectrumcs.org/senior-services	AC
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	AC

HEALTHCARE ACCESS AND DELIVERY

See also Healthcare Facilities and Agencies listed on the second page of this appendix.

Resource Name	Summary Description	Website	Area
Alameda County Healthcare for the Homeless	Increases access to quality healthcare for homeless individuals through free health centers and mobile clinics that provide primary care, substance abuse treatment, and other services.	https://www.achch.org/	AC
Alameda County Healthcare Services, School Health Services	Provide school districts an array of school-based, school-linked health and wellness services for youth and families, and partner with school districts to build school-based health and wellness systems.	https://achealthyschools.org/	AC

Resource Name	Summary Description	Website	Area
Bay Area Legal Aid	Improves access to the civil justice system through legal assistance for low-income individuals.	https://baylegal.org/	AC
California Department of Healthcare Services	Helps low-income and disabled people get access to affordable, integrated, high-quality healthcare, including medical, dental, mental health, and substance use treatment services, as well as long-term care.	https://www.dhcs.ca.gov/Pages/default.aspx	AC
Center for Healthy Schools and Communities	Provides integrated health and wellness services (medical, dental, behavioral health, health education, and youth development) in 29 school health centers throughout Alameda County.	https://achealthyschools.org/projects	AC
DayBreak Adult Care	Assists Alameda County seniors with accessing and navigating their care needs.	www.daybreakac.org	AC
Jewish Family and Community Services East Bay	Promotes the well-being of individuals and families of all ages, races, and religions with essential mental health and social services at every stage of life.	https://jfcs-eastbay.org/	AC
Operation Access	Enables Bay Area healthcare providers to donate surgical and specialty care to people in need.	https://www.operationaccess.org/	AC
Ronald McDonald Care Mobile Dental Clinic	Provides pediatric health services for underserved populations through health education and treatment and referral services.	https://rmhcbayarea.org/what-we-do/ronald-mcdonald-care-mobile/	AC
United Seniors of Oakland and Alameda County	Offers programs for older adults to educate, mobilize and enable seniors and their supporters to address the issues that affect their quality of life.	https://www.usoac.org/	AC, North AC
West Oakland Health Council	Parent organization of West Oakland Health Center, FQHC with multiple locations that offers medical and dental care as well as behavioral health and other services.	https://westoaklandhealth.org/about-us/	North AC

Access: Transportation

Resource Name	Summary Description	Website	Area
Alameda Alliance For Health Medi-Cal Transportation Benefit	Transportation services are offered through the Alliance's transportation provider, ModivCare. There is no cost when transportation is authorized by the Alliance.	https://alamedaalliance.org/members/medi-cal/benefits-and-covered-services/	AC

Resource Name	Summary Description	Website	Area
Alameda–Contra Costa Transit District (AC Transit)	Provides regional bus service.	http://www.actransit.org/	AC
Bay Area Rapid Transit (BART)	Provides elevated and subway rail travel across Bay Area counties.	https://www.bart.gov/	AC
Bay Wheels	Offers an affordable, accessible mode of transportation via a bicycle-sharing service (operated by Lyft), with discounted memberships for low-income individuals.	https://www.lyft.com/bikes/bay-wheels	AC
Bike East Bay	Promotes a healthy, sustainable community by making cycling safe, fun and accessible.	https://bikeeastbay.org/	AC
LIFE Eldercare, Inc.	Meals on Wheels, transportation, friendly visitors and fall prevention for the elderly.	https://lifeeldercare.org	AC
Paratransit	Public transit service for people who are unable to use regular buses or trains because of a disability or a disabling health condition.	https://www.eastbayparatransit.org/	AC

HEART DISEASE AND STROKE

See Economic Stability: Food Security for free food resources.

Resource Name	Summary Description	Website	Area
Alameda County Nutrition Services – Women, Infants, and Children (WIC)	Promotes healthy eating via nutrition advice, help with breastfeeding, referrals to services, and special checks to buy healthy food items.	http://www.acphd.org/wic.aspx	AC
Alameda County Public Health Department	Promoting and supporting healthy eating and physical activity.	https://acphd.org/nutrition-services/programs/	AC
Alameda County Social Services Agency	Provides benefits programs through cash assistance and CalFresh ("food stamps"), CalWORKs (assistance for families with children), General Assistance, and Medi-Cal Health Insurance.	https://www.alamedacountysocialservice s.org/our-services/Health-and-Food/index	AC
American Heart Association	Strives to prevent and cure heart disease.	https://www.heart.org/en/affiliates/california/greater-bay-area	AC
American Stroke Association	Resource for evidence-based information on stroke, post-stroke recovery, and caregiver info.	https://www.stroke.org/en/	AC

Resource Name	Summary Description	Website	Area
East Bay Regional Park District	Conserve open space resources and provide outdoor recreational opportunities for present and future generations.	https://www.ebparks.org/	AC
LIFE Eldercare, Inc.	Offers Meals on Wheels, transportation, friendly visitors, and fall prevention for the elderly.	https://lifeeldercare.org	AC
Various cities' Parks and Recreation Departments			AC

Healthy Eating, Active Living: Senior Centers in Alameda County *(excepting southern and central county areas)*

Name	Location	Website
Alameda Mastick Senior Center	Alameda	https://www.alamedaca.gov/Departments/Recreation-Parks/Mastick-Senior-Center
Albany Senior Center	Albany	https://www.albanyca.org/recreation/senior-center
Downtown Oakland Senior Center	Oakland	https://www.oaklandca.gov/topics/downtown-oakland-senior-center
East Bay Korean Senior Citizen Center	Oakland	https://eastbaykoreanamericanseniorcenter.org/index.html
East Oakland Senior Center	Oakland	https://www.oaklandca.gov/topics/east-oakland-senior-center
Emeryville Senior Center	Emeryville	https://www.ci.emeryville.ca.us/150/50-Adults
Fruitvale-San Antonio Senior Center	Oakland	https://unitycouncil.org/program/senior-center/
Judge Henry Ramsey Jr. South Berkeley Senior Center	Berkeley	https://berkeleyca.gov/community-recreation/seniors/senior-centers/judge-henry-ramsey-jr-south-berkeley-senior-center
North AC Berkeley Senior Center	Berkeley	https://berkeleyca.gov/community-recreation/seniors
North AC Oakland Senior Center	Oakland	https://www.oaklandca.gov/topics/north-oakland-senior-center
West Oakland Senior Center	Oakland	https://www.oaklandca.gov/topics/west-oakland-senior-center

HOUSING

Resource Name	Summary Description	Website	Area
Abode Services	Works with government, supporters, landlords, and clients to provide housing for people experiencing homelessness.	https://www.abodeservices.org/	AC
Alameda County Healthcare for the Homeless	Increases access to quality healthcare for homeless individuals through free health centers and mobile clinics that provide primary care, substance abuse treatment, and other services.	https://www.achch.org/	AC
Alameda County Housing and Community Development	Leads the development of housing and programs to serve low- and moderate-income households, people experiencing homelessness, and disabled individuals.	http://www.acgov.org/cda/hcd/	AC
Alameda Point Collaborative	Permanent supportive housing community for individuals experiencing homelessness, which aims to break the cycle of poverty by providing supportive services around education, employment, nutrition, and entrepreneurship.	https://apcollaborative.org/	North AC
Bay Area Community Services	Provides behavioral health and housing services for teens, adults, older adults, and their families across the Bay Area.	https://www.bayareacs.org/	AC
Bay Area Legal Aid	Increases access to the civil justice system through legal assistance for low-income people.	https://baylegal.org/	AC
Building Futures	Provides a continuum of care through residential programs, crisis lines, and case management to help county residents build a future free of violence and homelessness.	http://www.bfwc.org/	AC
Building Opportunities for Self-Sufficiency	Operates a variety of programs and services targeted towards empowering homeless, poor and disabled individuals to be self- sufficient.	https://self-sufficiency.org/	AC
Catholic Charities of the East Bay	A wide variety of services to aid youth, children and families facing eviction including rent assistance and funds for housing deposits.	http://www.cceb.org/housing- services-in-the-county-of-alameda/	AC
Clausen House	Provides housing, wellness programs, and advocacy for developmentally disabled adults in Oakland and the surrounding East Bay area.	https://clausenhouse.org/	North AC
DayBreak Adult Care	Housing navigation and support for vulnerable seniors in Alameda County.	www.daybreakac.org	AC

Resource Name	Summary Description	Website	Area
Downtown Streets Team	Provides case management and volunteer programs to homeless individuals (or those at risk of becoming homeless), to develop job skills and find employment and housing.	https://www.streetstea m.org/index	AC
East Bay Asian Local Development Corporation	Works with and for the diverse populations of the East Bay to build healthy, vibrant, and safe neighborhoods through community development.	https://ebaldc.org/	AC
East Bay Community Law Center Housing Program	Defends low-income tenants in eviction lawsuits brought against them.	https://ebclc.org/need-services/housing-services	AC
East Bay Housing Organizations	Works through organized campaigns focused on policy or a geographic community through ongoing committees.	http://ebho.org/resourc es/looking-for-housing/housing-developers/	AC
The East Oakland Collective	Supports various programs including advocacy for the rights of unhoused individuals, research on alternative housing models, and improvement of hygiene at encampments.	https://www.eastoakla ndcollective.com/	North AC
Everyone Home	Supports collaborative projects to end homelessness.	http://everyonehome.o rg/	AC
FESCO	Provides low/extremely low-income homeless families with food, emergency, transitional, permanent housing, and supportive services.	https://www.fescofamil yshelter.org/	AC
First Place for Youth	Supports youth, particularly those in foster care, in building self-sufficiency and a sense of purpose by offering housing and case management services.	https://www.firstplacef oryouth.org	AC
Homeless Action Center	Makes it possible for people who are experiencing severe homelessness, poverty, or disability to access social safety net programs through free, culturally sensitive legal representation.	http://homelessactionc enter.org/	AC
Lao Family Community Development	Operates a range of housing for families, seniors, and adults in need.	https://lfcd.org/	North AC
Lava Mae	Brings critical self-care services to people experiencing homelessness via mobile hygiene and pop-up care village programs.	https://lavamae.org/	AC

Resource Name	Summary Description	Website	Area
MidPen Housing	Nonprofit developer that owns and manages high-quality affordable housing for low-income families, seniors and people with special needs.	https://www.midpen-housing.org/	AC
Rebuilding Together East Bay North AC	Provides free rehabilitation and critical repairs to the homes of income qualified seniors, veterans, and people with disabilities.	https://rtebn.org/	North AC
Rubicon Programs	Equips East Bay residents with resources to break the cycle of poverty.	http://rubiconprograms.org/	AC
Satellite Affordable Housing Associates (SAHA)	Offers quality affordable homes and services that empower people and strengthen neighborhoods.	https://www.sahahomes.org/	AC
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	AC
Unity Council	Helps families and individuals build wealth and assets through sustainable economic, social, and neighborhood development programs.	https://unitycouncil.org/	AC
Women's Daytime Drop-In Center	Empowering women and children to move from the streets to a home by providing housing problem solving services and support, housing case management and referral services, and a transitional housing program.	http://www.womensdropin.org	North AC
Various cities' Housing and Human Services Departments			AC

MATERNAL AND INFANT HEALTH

Resource Name	Summary Description	Website	Area
A Better Way Inc.	Assessment/referral and parenting support and education through group classes, topic-specific trainings, and through peer-led support groups.	https://www.abetterwayinc.net/	AC

Resource Name	Summary Description	Website	Area
Alameda County Public Health: Family Health Services Black Infant Health Program	Help reduce stress, build resilience, promote healthy behaviors, and increase social support among pregnant and mothering Black women, and build a community that stands up against the injustices towards African-American women and their birthing experiences.	https://acphd.org/programs-and-services/black-infant-health/	AC
Brighter Beginnings: Family Partnership Program	Home visiting program designed to help families in CalWORKs who have infants and children under 3 years old participate.	https://www.brighter-beginnings.org/programs/parenting-and-child-development/family-partnership-program/	AC
Center for Early Childhood Connections	Social groups for parents and children, parent coaching and mentorship, assessments for 0-5, educational and non-clinical services for 0-8 and their caregivers.	http://www.thececc.org	North AC
Family Paths: Parenting Stress Helpline	Staffed by professional and volunteer counselors, who support parents and caregivers around a variety of parenting issues.	1-800-829-3777	AC
Twins by the Bay: Daytime Support Group for New and Expectant Parents of Multiples	Support group for new or expectant parents of multiples.	http://www.twinsbythebay.org	North AC

SEXUAL HEALTH

Resource Name	Summary Description	Website	Area
Alameda County Health Div. of Communicable Disease Control & Prevention	Multiple programs to address infectious diseases: - Chronic Hepatitis Program - Immunization Program - TB Control Program - Office of HIV Care and Prevention - Sexual Health Capacity Building	https://acphd.org/about/our-organization/dcdcp/	AC
East Bay Getting to Zero	Bring people together to collaborate on creative ways to implement the East Bay HIV strategic plan, supporting community members to have more equitable access to HIV testing, prevention and treatment services.	https://www.ebgtz.org	AC

Resource Name	Summary Description	Website	Area
Hep B Free Alameda County Collaborative	Community collaborative to end hepatitis B through testing, educating and treating.	https://acphd.org/hep-b/hep-b-free-alameda-county-collaborative/	AC
HIV/AIDS Care and Treatment Program (CA Dept. of Public Health)	Includes primary medical care and essential support services for people living with HIV who are low income and uninsured or underinsured.	https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_care_program.aspx	AC
HIV Education and Prevention Project of Alameda County	Provide harm reduction-based services in Alameda County and Contra Costa County, serve people who are at increased risk for HIV, hepatitis C and other infectious diseases.	https://heppac.org/	North AC
I Know	Free home test kit program is a simple and confidential way for young women, girls, transmen, and any person with a vagina to test for chlamydia and gonorrhea in the privacy of their own home.	https://alameda.dontthinkknow.org/frequently-asked-questions/home-test-kit-faq	AC
Immunization Partnership of Alameda County (IPAC)	Collaborative of private and public organizations interested in improving vaccine protection rates for all people of Alameda County, focusing on education and training for medical providers, school and child care personnel and parent groups.	510-267-3230	AC
Oakland TGA	Network of comprehensive services for people living with HIV.	https://oaklandtga.org/	AC
STI testing clinics directory	Maintains an extensive list of public and private STD testing locations and in-home STD testing options.	https://www.saferstdtesting.com	AC

STRUCTURAL RACISM/DISCRIMINATION

Many of the agencies/organizations addressing the other health needs also address racism/discrimination. The agencies/organizations listed below specifically address it.

Resource Name	Summary Description	Website	Area
Alameda County District Attorney Accountability Table	Coalition of Alameda County-based organizations working together to advance public safety solutions.	https://acaccountability.org	AC
Asian Pacific-Islander American Public Affairs	Advocates on behalf of AAPI voices in the community.	https://www.apapa.org/	AC

Resource Name	Summary Description	Website	Area
Ella Baker Center for Human Rights	Organizes to shift resources away from prisons and punishment towards opportunities that make our communities safe, healthy, and strong.	https://ellabakercenter.org/	North AC
NAACP Oakland	Seek the enactment and enforcement of federal, state and local laws securing civil rights, and inform the public of the adverse effects of racial discrimination.	https://www.naacpoakland.org/	North AC
Showing Up for Racial Justice Bay Area	Through community organizing, mobilizing, and education, SURJ moves white people to act as part of a multi-racial majority for justice.	https://www.surjbayarea.org/	North AC

UNINTENTIONAL INJURY

Resource Name	Summary Description	Website	Area
Alameda County Health Emergency Medical Services: Injury Prevention Programs	Operates and supports several programs designed to prevent injuries and emergencies from occurring among children and older adults.	https://ems.acgov.org/CommtyResources/PreventionPrograms.page?	AC
Alameda County Transportation Commission: Bicycle Safety Education Program	Educates approximately 4,000 adults, teenagers and children annually in safe bicycle riding techniques. Encourages bicycle riders to ride their bicycles with greater control and awareness to enhance their travel safety.	https://www.alamedactc.org/programs-projects/bicycle-and-pedestrian/bicycle-safety-education	AC
Child Passenger Safety Program	Supports the standardization and quality- control course with content and instructors to ensure that information and materials being taught and disseminated are up-to-date, accurate, and consistent.	https://www.in.gov/cji/traffic-safety/occupant-protection/children/child-passenger-safety/	AC
City of Berkeley Department of Health Services	Provides a wide array of services to monitor the health of the community, to prevent epidemics and the spread of disease, to protect against environmental hazards, to respond to disasters, and to encourage healthy behaviors.	https://www.cityofberkeley.info/publichealth/	North AC
First 5 Alameda County	Offers continuous prevention and early intervention programs that promote optimal health and development, narrow disparities and improve the lives of children ages 0–5 and their families.	http://www.first5alameda.org/	AC

Resource Name	Summary Description	Website	Area
Mothers Against Drunk Driving (MADD)	Conducts advocacy activities as well as offering emotional support, education, resources, and referrals for survivors and families of victims of drunk- or drugged-driving crashes.	https://madd.org/sfbayarea/	AC
Safe Kids Alameda County	Coalition implements evidence-based programs, such as car-seat checkups, safety workshops and sports clinics, that help parents and caregivers prevent childhood injuries.	https://www.safekids.org/coalition/safe-kids-alameda-county	AC
Spectrum Community Services Fall Prevention Program	Programs to support exercise, walking, and balance to prevent older adult falls.	https://www.spectrumcs.org/senior-services/fall-risk-reduction	AC
Various cities' Fire Departments			CCC

Appendix 5b: Community Assets and Resources, Contra Costa County

Healthcare Facilities and Agencies

The following healthcare facilities are available in Contra Costa County.

HOSPITALS

- Contra Costa Regional Medical Center
- John Muir Health, Concord and Walnut Creek
- John Muir Behavioral Health Center, Concord
- Kaiser Foundation Hospital–Antioch
- Kaiser Foundation Hospital–Richmond
- Kaiser Foundation Hospital–Walnut Creek
- Sutter Delta Medical Center–Antioch
- Veterans Affairs Medical Center

FEDERALLY QUALIFIED HEALTH CENTERS

- Antioch Health Center
- Bay Point Family Health Center
- Brentwood Health Center
- Community Practice Clinic (multiple locations)
- Concord Health Center
- Contra Costa Health Services Mobile Clinic
- El Cerrito High School-Based Health Center
- Homeless Respite Care and Shelter Clinic - Concord
- Kennedy High School Health Clinic
- La Clínica (multiple locations)
- LifeLong Medical Care (multiple locations)
- Martinez Health Center
- Miller Wellness Center (Martinez)
- North Richmond Center for Health
- Pittsburg Health Center
- West County Health Center (San Pablo)
- Willow Pass Wellness Center

OTHER HEALTH CLINICS

- Brighter Beginnings
- Concord Veterans Center
- Planned Parenthood (multiple locations)
- RotaCare (multiple locations)

SKILLED NURSING FACILITIES

- Alhambra Convalescent Hospital – Martinez
- Antioch Convalescent Hospital – Antioch
- Creekside Healthcare Center – San Pablo
- Diamond Ridge Healthcare Center – Pittsburg
- Kindred Nursing and Healthcare – Concord and Walnut Creek
- Legacy Nursing and Rehabilitation Center – Martinez
- Lone Tree Convalescent Hospital – Antioch
- Martinez Convalescent Hospital – Martinez
- Moraga Post Acute – Moraga
- Orinda Care Center – Orinda
- Pittsburg Skilled Nursing Center – Pittsburg
- Pleasant Hill Post Acute – Pleasant Hill
- Rossmoor Post Acute – Walnut Creek
- San Miguel Villa – Concord
- San Pablo HealthCare Center – San Pablo
- Shields Richmond Nursing Center – Richmond
- Stonebrook Healthcare Center – Concord
- Tampico Terrace Care Center – Walnut Creek
- Vale Healthcare Center – San Pablo
- Vintage Estates of Richmond – Richmond
- Willow Pass Healthcare Center – Concord
- Windsor Manor Rehabilitation Center – Concord
- Windsor Rosewood Care Center – Pleasant Hill

OTHER ORGANIZATIONS

- Down Syndrome Connection of the Bay Area
- Exceptional Needs Network
- Hemophilia Foundation of Northern California

Assets and Resources by Identified Health Need

The following tables provide the names, summary descriptions, and websites for various assets and resources available in Contra Costa County to address identified health needs.

BEHAVIORAL HEALTH

Including Mental Health and Substance Use

Resource Name	Summary Description	Website	Area
#hersmile	Funds programs that empower and inspire people to thrive despite adversity, with the goal of promoting healing and resiliency during tragedies and difficult times.	https://hersmile.org/	CCC
Al-Anon	12-step program for adult relatives and friends of alcoholics or someone coping with alcoholism.	https://al-anon.org/	CCC
Alateen	12-step program for teen relatives and friends of alcoholics or someone coping with alcoholism.	https://al-anon.org/for-members/group-resources/alateen/	CCC
Alcoholics Anonymous	12-step program for individuals who need help with alcohol addiction or excessive drinking.	https://www.aa.org/	CCC
Bay Area Community Services	Provides behavioral health and housing services for teens, adults, older adults, and their families across the Bay Area.	https://www.bayareacs.org/	CCC
California Smokers Helpline	Free telephone program that helps smokers quit.	1-800-BUTTS	CCC
Center for Human Development	Facilitates the growth and strengthening of communities by providing services for at-risk youth, individuals, and families.	http://chd-prevention.org/	CCC
Child Abuse Prevention Council of Contra Costa County	Runs programs to prevent child abuse by strengthening families and building healthy communities in Contra Costa County.	https://www.capc-coco.org/	CCC
Contra Costa Crisis Center	Provides support, counseling, and hope to people in emotional or psychological distress.	http://www.crisis-center.org/	CCC
Contra Costa Health Services - Mental Health Clinics	Contra Costa Health provides mental health services to all residents of Contra Costa County who are experiencing a mental or emotional crisis, including children, adolescents, young adults, adults and older adults.	https://www.cchealth.org/get-care/healthcare-locations/mental-health-clinics	CCC
Contra Costa Trauma Recovery Center (Family Justice Center)	Free trauma-informed mental health support for trauma victims. Free individual therapy up to 16 sessions.	https://www.cocofamilyjustice.org/trauma-recovery-center/	CCC

Resource Name	Summary Description	Website	Area
Early Childhood Mental Health Program	Provide a variety of therapeutic services including family and child therapy, wrap around support, support groups and a therapeutic preschool. Focus on serving families with young children and prenatally.	https://www.ecmhp.org/	West CCC
Fred Finch Youth and Family Services	School-based mental health services for K-12 students in Antioch and Mt. Diablo Unified School Districts.	https://www.fredfinch.org/	CCC
Gamblers Anonymous	12-step program for people coping with a gambling addiction.	http://www.gamblersanonymous.org/ga/	CCC
Hume Center	Provide a variety of behavioral services for the whole family around the Bay Area.	https://www.humecenter.org/	CCC
James Moorehouse Project	Student wellness center at El Cerrito High School offering medical and dental services, counseling, and teacher/staff and parent support.	http://www.jamesmorehouseproject.org/	West CCC
Jewish Family and Community Services East Bay	Promotes the well-being of individuals and families of all ages, races, and religions with essential mental health and social services at every stage of life	https://jfcs-eastbay.org/	CCC
Lincoln Families	Provides children with support and services, from an early age through high-school graduation.	http://lincolnfamilies.org/	CCC
Lynn Center	Provides full range of early intervention services and supports to children and families who may be experiencing trauma, stress, loss, abuse, attachment and bonding issues, or various life changes. Services are provided on site, in client's home, at school or in the community.	https://www.vistability.net/bc-health-children	East CCC
Mindful Life Project	Delivers direct service mindfulness programs to TK-8 Title I schools.	https://mindfullifeproject.org/	CCC
Mindful Littles	Empowering students, parents and teachers to feel good by doing good – engaging in meaningful service learning and mindfulness practices to strengthen connections with each other and their communities.	https://www.mindfullittles.org	CCC
Monument Crisis Center	Offers various programming stress relief, relationship-building and community-building.	https://monumentcrisiscenter.org/	Central CCC, East CCC

Resource Name	Summary Description	Website	Area
Monument Impact	Integrated programs for immigrant, refugee and low-income communities focus on building workforce skills, promoting mental and physical health, and ensuring our community's voice is heard on critical local issues.	https://monumentimpact.org/	Central CCC, East CCC
Narcotics Anonymous	12-step program for individuals coping with substance abuse or drug addiction.	https://www.na.org/	CCC
National Alliance on Mental Illness (NAMI)	Offers education, support, and advocacy for people affected by mental illness.	http://www.namiacs.org/	CCC
Overeaters Anonymous	12-step program for people coping with compulsive overeating, undereating, food addiction, anorexia, bulimia, binge eating and/or excessive exercising.	https://oa.org/	CCC
Putnam Clubhouse	Helps adults in Contra Costa County coping with mental illness regain their lives.	https://www.putnamclubhouse.org/	CCC
Rainbow Community Center	Provide behavioral health, therapy, support groups, and HIV testing.	rainbowcc.org	CCC
Rcoz	Platform to raise awareness and build acceptance of mental health issues among South Asians through storytelling and community dialogue with experts.	https://www.rcoz.us/	CCC
RYSE Center	Along with other programming, offers counseling, support groups, wellness workshops, and safe spaces to young people.	https://rysecenter.org/	West CCC
Support4Recovery	Volunteer-run organization of people in recovery for the recovery community. Through scholarships and sponsored activities, offers direct assistance to children/teens impacted by addiction.	https://www.support4recovery.org/	CCC
Ujima: East	Supports families recovering from alcoholism, drug addiction, and behavioral health problems.	http://www.ujimafamily.org/programs/ujima-east-outpatient-treatment-program/	CCC
Village Community Resource Center	Offers parent peer support group, cancer support group, and Spanish-language mental health skill-building program.	https://www.vcrcbrentwoodca.org/	CCC

Resource Name	Summary Description	Website	Area
Wellness Together	Partners with K-12 school districts and colleges to provide mental health services for students, families, and educators.	https://www.wellnesstogether.org	CCC
YMCA East Bay - Richmond Parkway	Offers a variety of programs through its five health and wellness centers, 20-plus childcare sites, a teen center, and three camps.	https://ymcaeastbay.org/	West CCC
We Care Children	We Care supports families and children from birth to five years old with a wide range of early childhood education and mental health programs. Through targeted, compassionate, and effective early intervention services, We Care helps young children and their families reach their full potential, regardless of their abilities or circumstances.	https://www.wecarechildren.org/	CCC
Z-Cares Foundation	Providing youth mental health awareness training, documentary screening, webinars and conferences to enable thousands of youth and their parents and guardians to have positive dialogues and reduce the stigma around anxiety, depression and a broad range of mental health concerns.	https://www.zcares.org	CCC

CANCER

Resource Name	Summary Description	Website	Area
American Cancer Society	Aims to freeing the world from cancer by funding and conducting research, sharing expert information, supporting patients, and spreading the word about prevention.	https://www.cancer.org/	CCC
CancerCare	Provides free, professional support services and information to help people manage the emotional, practical, and financial challenges of cancer.	https://www.cancercare.org/	CCC
Every Woman Counts	Run by the California Department of Healthcare Services, provides free breast and cervical cancer screening and diagnostic services to California's underserved populations.	https://www.dhcs.ca.gov/services/Cancer/ewc/Pages/default.aspx	CCC

Resource Name	Summary Description	Website	Area
The Leukemia and Lymphoma Society	Strives to find a cure for leukemia, lymphoma, Hodgkin's disease and myeloma, and to improve the quality of life of patients and their families.	https://www.lls.org/	CCC
Village Community Resource Center: Lazarex	Assist cancer patients in finding and enrolling in relevant clinical trials, remove barriers to care through financial assistance programs, logistical support, and advocacy, and provide survivorship support.	https://www.vcrcbrentwoodca.org/lazarex/	Central CCC, East CCC
Women's Cancer Resource Center	Helps women with cancer improve their quality of life through education, practical assistance, and support services.	https://www.wcrc.org/	CCC

CLIMATE/NATURAL ENVIRONMENT

Resource Name	Summary Description	Website	Area
Bay Area Air Quality Management District	Oversees and implements policies and regulations for the control of air pollution within the nine counties that surround San Francisco Bay.	https://www.baaqmd.gov/	CCC
Bike East Bay	Promotes a healthy, sustainable community by making cycling safe, fun and accessible.	https://bikeeastbay.org/	CCC
Contra Costa Health Division of Environmental Health	Protects the community's health by ensuring safe food, drinking water, recreational water, and waste management practices. Works to prevent environmental hazards from harming people and the environment.	https://www.cchealth.org/about-contra-costa-health/divisions/environmental-health	CCC
East Bay Regional Park District	Conserve open space resources and provide outdoor recreational opportunities for present and future generations.	https://www.ebparks.org/	CCC
RYSE Center	Through internships and related programming, supports youth in organizing and advocating for a better future.	https://rysecenter.org/	West CCC
Sierra Club	Grassroots organization that supports efforts to appreciate and protect the environment and create a more sustainable future.	https://www.sierraclub.org/sfbay	CCC

Resource Name	Summary Description	Website	Area
West County Toxics Coalition	Membership organization empowers residents to become actively involved in the development and implementation of environmental justice policies and programs that affect their communities.	https://ej4all.org/wctc	West CCC
Various cities' Environmental Services Divisions			CCC

COMMUNITY SAFETY

Resource Name	Summary Description	Website	Area
Beyond Violence Collaborative	Partner organizations connect eligible John Muir Health patients, their families and others who were impacted by the violent event to health care services, mental health resources, job placement and educational programs, housing and food resources, legal services and other support programs.	https://www.johnmuirhealth.com/about-john-muir-health/community-commitment/our-programs/beyond-violence.html	CCC
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	https://www.cceb.org/	CCC
Center for Human Development	Facilitates the growth and strengthening of communities by providing services for at-risk youth, individuals, and families.	http://chd-prevention.org/	CCC
Child Abuse Prevention Council of Contra Costa County	Runs programs to prevent child abuse by strengthening families and building healthy communities in Contra Costa County.	https://www.capc-coco.org/	CCC
City of Richmond Office of Neighborhood Safety	Directs gun violence prevention and intervention initiatives (e.g., street/ school outreach, high risk conflict mediation) through Neighborhood Change Agents with lived experience.	https://www.ci.richmond.ca.us/271/Office-of-Neighborhood-Safety	West CCC
Community Violence Solutions	Works to end sexual assault and family violence by providing services to survivors of sexual assault or abuse and their families.	https://cvsolutions.org/	CCC
Contra Costa County Court Appointed Special Advocates	Promotes and supports quality volunteer advocates to speak for the best interests of abused and neglected children in the dependency court system.	https://www.cccocasa.org/	CCC

Resource Name	Summary Description	Website	Area
Contra Costa Family Justice Centers	Brings together the community to support the healing of family violence survivors as well as to integrate capable partners with a comprehensive service approach to renew individuals and the community from a trauma of family violence.	http://www.cocofamilyjustice.org/	CCC
Contra Costa Senior Legal Services	Provides free legal advice, assistance, representation, advocacy, and education for Contra Costa County residents aged 60 and older, especially issues of access to housing, economic security and prevention of physical, psychological or economic abuse.	https://www.ccsls.org/	CCC
First 5 Centers	Family Resource Centers offer a safe space for families and children to learn and connect to a variety of supports from positive parenting classes to advocacy opportunities. Community Resources Specialist offer one-on-one assistance connecting to community services, and can also provide resources such as food and diapers—all for free for any family interested.	https://www.first5coco.org/strengthening-families/first-5-centers/	CCC
HealthRIGHT 360	Contra Costa Reentry Network - reentry services for formerly incarcerated individuals returning to East & Central County.	https://www.healthright360.org/program/healthright360-contra-costa-reentry-network/	East CCC, Central CCC
Healthy Contra Costa (formerly Healthy Richmond)	Builds resident power to advance various campaigns, including community safety, positive school climate, and others.	https://healthycontracosta.org/	West CCC
Hijas del Campo	Offers food, health, education services, support and advocacy to migrant and seasonal farmworkers and their families.	www.hijasdelcampo.org	East CC
The Latina Center	Focuses on uplifting the health and growth of the Latinx community by providing leadership and personal development opportunities.	https://thelatinacenter.org/	West CCC
KidPower International	Provides resources and training to support education on safety, including bullying solutions, sexual assault prevention, child abuse prevention, self-defense, and online safety.	https://www.kidpower.org/	CCC

Resource Name	Summary Description	Website	Area
One Day at a Time	Provides youth with a supportive network of peers, opportunities for academic and personal growth, and exposure to positive transformative experiences.	https://www.odatec.org/	CCC
Reentry Success Center	Supports formerly incarcerated individuals in transitioning back into the community.	http://reentrysuccess.org/	West CCC
RYSE Center	Creates safe and empowering spaces for youth and young people aged 13-21; includes youth justice resources and programming (e.g., Restorative Justice diversion program).	https://rysecenter.org/	West CCC
Special Operations – Finding Kids	Hires boots-on-the-ground retired law enforcement and private investigators — at no cost to parents — to find missing and exploited children.	https://findingkids.org/	CCC
STAND! for Families Free of Domestic Violence	Strives to break the cycle of violence in families impacted by domestic violence and child abuse by providing services around therapy, crisis lines and educational opportunities.	http://www.standffov.org/	CCC

ECONOMIC STABILITY

See subsection on Food Security for free food resources.

Resource Name	Summary Description	Website	Area
America Works	Provides work readiness training, vocational training, career placement, career advancement, and employment retention services.	https://americaworks.com/	CCC
Asian Pacific-Islander American Public Affairs	Partners with local, state, and federal government offices to provide internships that empower the next generation of community leaders.	https://www.apapa.org/internship	CCC
Bay Area Legal Aid	Increases access to the civil justice system through legal assistance for low-income individuals.	https://baylegal.org/	West CCC
Beat the Streets, Inc.	Provides educational, employment, and life skill services to at-risk youth and young adults ages 11-29 and to children of incarcerated parents.	https://www.beatthestreetsca.org/	CCC
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	https://www.cceb.org/	CCC

Resource Name	Summary Description	Website	Area
Contra Costa County Employment & Human Services	Partners with the community to deliver quality services to ensure access to resources that support, protect, and empower individuals and families to achieve self-sufficiency.	https://ehsd.org/	CCC
Contra Costa Senior Legal Services	Provides free legal advice, assistance, representation, advocacy, and education for Contra Costa County residents aged 60 and older, especially issues of access to housing, economic security and prevention of physical, psychological or economic abuse.	https://www.ccsls.org/	CCC
East Bay Community Foundation	Supports entrepreneurs of color through community-controlled and democratically governed loan fund for businesses with a strong social mission; funds economic justice nonprofits and impact investing.	https://www.ebcf.org/	CCC
Ensuring Opportunity Contra Costa	Campaign to end poverty in the county through policy advocacy and community power building (e.g., convenings, town halls with elected officials, and issue-specific coalitions).	https://rcfconnects.org/initiative/ensuring-opportunity/	CCC
Monument Impact	Integrated programs for immigrant, refugee and low-income communities focus on building workforce skills, promoting mental and physical health, and ensuring our community's voice is heard on critical local issues.	https://monumentimpact.org/	Central CCC, East CCC
Opportunity Junction	Strives to help program participants develop skills and confidence towards employment and financial security.	https://www.opportunityjunction.org/	CCC
Rubicon Programs	Equips East Bay residents with resources to break the cycle of poverty.	http://rubiconprograms.org/	CCC
RYSE Center	Supports Youth Policy Institute on education and economic justice. Offers college access programming, tutoring, and employment preparation including internship and other activities.	https://rysecenter.org/	West CCC
St. Vincent de Paul of Contra Costa County	Provides aid to individuals and families in need via 700 volunteers who provide financial aid and referral to additional services. Additionally, SVdP provides a Family Resource Center in Pittsburg with a density of services.	svdp-cc.org	CCC

Resource Name	Summary Description	Website	Area
San Pablo Economic Development Corp.	Offers workshops, training, and classes for businesses, entrepreneurs, and individuals, including professional network-building, job readiness, skills training, and bilingual computer literacy programs.	https://www.sanpabloedc.org/	West CCC
SparkPoint	Brings together individuals, nonprofits, businesses, and government entities to fight for a strong, vibrant, and healthy community; also enables neighbors to invest in one another to fight for health, education, and financial stability.	https://uwba.org/	CCC
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	CCC
Unity Council	Helps families and individuals build wealth and assets through sustainable economic, social, and neighborhood development programs.	https://unitycouncil.org/	CCC
Various cities' Human Services Departments			CCC

Economic Stability: Education

Resource Name	Summary Description	Website	Area
Brentwood Center	A branch of Los Medanos College, course offerings include general education requirements, transfer courses, computer science, business, biological and physical sciences, and other occupational training.	www.losmedanos.edu/brentwood/	East CCC
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	https://www.cceb.org/	CCC
CocoKids	Champions and advances quality childcare and early education; help families find early care and education programs.	https://www.cocokids.org/	CCC

Resource Name	Summary Description	Website	Area
Contra Costa Boys & Girls Club	Runs an after-school youth development and extended learning program.	https://bgccontracosta.org/	CCC
Contra Costa College	Community college that offers associate degrees, certificates, transfer preparation, lifelong learning, and career educational opportunities aimed at helping students achieve their economic and educational goals, as well as courses designed to support lifelong learning.	www.contracosta.edu	West CCC
Contra Costa County Health Pathway Partnership	Brings together educators, local employers and community partners working to provide work based learning opportunities in health care to youth in Contra Costa County.	https://bahwp.org/ccchpp	West CCC
Contra Costa County Library	Offers adult and child literacy programs including free 1:1 and group learning for reading, writing, and speaking English better. Early literacy van visits families in underserved communities. Free program for adults to earn an accredited high school diploma and career certificate online.	https://ccclib.org/	CCC
Contra Costa County Office of Education	Provides support services to schools and districts in CCC, and has a long history of providing direct services to some of the County's most vulnerable students, including students who are incarcerated, homeless, in foster care, or have severe physical or emotional challenges.	https://www.cccoe.k12.ca.us/	CCC
Contra Costa County ROP	Provides career technical education at high schools and other facilities (a county special education facility, two adult detention facilities, and two adult training centers).	https://www.cccoe.k12.ca.us/Departments--Schools/Departments/Student-Programs/College-and-Career-Readiness/index.html	CCC
Contra Costa Early Head Start and Head Start	Offers services to children ages 0–5 years under the Head Start and Early Head Start and state preschool programs, which also include a Home Base Option. Direct comprehensive services include: disabilities, health services, mental health, nutrition, parent involvement, and school readiness.	https://ehsd.org/headstart/childcare-preschool/head-start-early-head- start-and-state-preschool/	CCC

Resource Name	Summary Description	Website	Area
Diablo Valley College	Community college that offers transfer opportunities, career education programs, and degrees as well as adult basic skills and ESL programming.	www.dvc.edu	Central CCC
East Bay Health Workforce Partnership	Connects locals with health employers and training programs seeking qualified applicants.	https://bahwp.org/	CCC
First 5 Centers (multiple locations)	The centers offer group classes, playgroups, school readiness activities, support groups, one-on-one assistance connecting to community services, and can also provide resources such as food and diapers—all for free for any family interested. Services for families and children ages 0-5.	https://www.first5coco.org/strengthening-families/first-5-centers/	CCC
Help Me Grow Program	Help Me Grow helpline offers parent education resources and supports to help children under 5 grow and develop.	https://helpmegrowcoco.org/	CCC
Hijas del Campo	Educational programs focused on children of farmworkers, ESL/ELD, first gen students.	www.hijasdelcampo.org	East CC
Junior Achievement of Northern California	Provides volunteer-led lessons in financial literacy, work and career readiness, and entrepreneurship to students in grades 1-12.	https://norcal.ja.org/	CCC
Los Medanos College	Community college that offers transfer and career-technical programs, support services, and diverse academic opportunities.	http://www.losmedanos.edu	East CCC
Monument Crisis Center	Offers youth enrichment programming, including tutoring, reading groups, and mentorship.	https://monumentcrisiscenter.org/	Central CCC, East CCC
Open House Center	An Adult Day Program that serves Individuals with Developmental Disability and Healthcare Needs.	https://www.openhousecenter.org/	CCC
Richmond Promise	Supports programming on college awareness, affordability, access, and success, including workshops, 1:1 coaching and mentoring, peer connection, and a scholarship.	https://richmondpromise.org/	West CCC
RYSE Center	Supports Youth Policy Institute on education and economic justice. Offers college access programming, tutoring, and employment preparation including internship and other activities.	https://rysecenter.org/	West CCC

Resource Name	Summary Description	Website	Area
Unity Council Early Start and Head Start	Offers services to children ages 0–5 years under the Head Start and Early Head Start and state preschool programs, which also include a Home Base Option. Direct comprehensive services include: disabilities, health services, mental health, nutrition, parent involvement, and school readiness.	https://unitycouncil.org/program/head-start-early-head-start/	CCC
Village Community Resource Center	Focuses on improving neighborhood conditions through prevention-based programs in the following three areas: education, health services, and social services.	http://www.vcrcbrentwoodca.org/	CCC

School Districts in Contra Costa County

School District	Location	Website
Acalanes Union High School District	Lafayette	www.acalanes.k12.ca.us
Antioch Unified School District (USD)	Antioch	https://www.antiochschools.net/
Brentwood USD	Brentwood	https://www.brentwood.k12.ca.us/
Byron USD	Byron	https://www.byronunionschooldistrict.us/
Canyon USD	Canyon	www.canyon.k12.ca.us
John Swett USD	Rodeo	www.jsusd.org
Knightsen Elementary School District	Knightsen	https://kes-kesd-ca.schoolloop.com/
Lafayette School District	Lafayette	www.lafsd.k12.ca.us
Liberty Unified High School District	Brentwood	https://ca01001129.schoolwires.net/
Martinez USD	Martinez	www.martinez.k12.ca.us
Moraga School District	Moraga	www.moraga.k12.ca.us
Mt. Diablo USD	Concord	www.mdusd.org
Oakley Union Elementary School District	Oakley	https://www.ouesd.k12.ca.us/
Orinda USD	Orinda	www.orindaschools.org
Pittsburg USD	Pittsburg	https://www.pittsburg.k12.ca.us/
Walnut Creek School District	Walnut Creek	www.walnutcreeksd.org
West Contra Costa USD	Richmond	www.wccusd.net

Economic Stability: Food Security

Also see Economic Stability main table for resources.

Resource Name	Summary Description	Website	Area
18 Reasons	Empowers community members with the confidence to buy, cook, and eat good food every day.	https://18reasons.org/	CCC
Catholic Charities of the East Bay	Offers services to aid youth, children, and families facing difficulties with immigration, eviction, literacy, or surviving traumatic violence.	https://www.cceb.org/	CCC
Contra Costa Health Services	Our mission at CCHS is to care for and improve the health of all people in Contra Costa County with special attention to those who are most vulnerable to health problems.	https://cchealth.org/	CCC
Food Bank of Contra Costa and Solano	Leads the fight to end hunger, in partnership with our community and in service of our neighbors in need.	http://www.foodbankccs.org/	CCC
Fresh Approach	Improves healthy food access in the community through farmers markets, community gardens, and cooking and nutrition classes.	https://www.freshapproach.org/	CCC
Healthy Hearts Institute	Empowers individual and community transformation through health and wellness.	https://www.healthyhearts.co/	CCC
Hijas del Campo	Provides free weekly culturally appropriate food distribution and food program assistance for farmworkers and their families.	www.hijasdelcampo.org	East CCC
Loaves and Fishes of Contra Costa	Provides daily hot and nutritious meals and groceries to anyone in need from five dining rooms and a mobile delivery unit serving partner agencies in East County.	https://www.loavesfishescc.org/	CCC
Meals on Wheels of Contra Costa	Funds nutritious meal deliveries to, and wellness checks on, frail and/or homebound seniors.	https://mowcontracosta.org/	CCC
Meals on Wheels Diablo Region	Delivers nutritious meals to, and performs wellness checks on, frail and/or homebound seniors in the Diablo region.	https://www.mowdiabloregion.org/	Central CCC, East CCC
Meals on Wheels West Contra Costa County	Delivers nutritious meals to, and performs wellness checks on, frail and/or homebound seniors in West county.	https://www.wccmow.com/	West CCC

Resource Name	Summary Description	Website	Area
Monument Crisis Center	Food distribution program to provide stability for low income and at-risk individuals and families in Contra Costa County.	https://monumentcrisiscenter.org/	Central CCC, East CCC
St. Vincent de Paul of Contra Costa County	Provides 18 food pantries and aid to individuals and families in need via 700 volunteers who provide financial aid and referral to additional services. Additionally, SVdP provides a Family Resource Center in Pittsburg with a density of services.	svdp-cc.org	CCC
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	CCC
White Pony Express	Helps eliminate hunger and poverty by delivering "the abundance all around us" to people in need.	https://www.whiteponyexpress.org/	CCC
Women, Infants & Children (WIC) nutrition program locations	Helps pregnant women, new mothers, and young children eat well and learn about nutrition and stay healthy. Provides services to pregnant and postpartum women, as well as children under 5 years old.	https://cchealth.org/wic/index.php	CCC

HEALTHCARE ACCESS AND DELIVERY

See also Healthcare Facilities and Agencies listed on the second page of this appendix.

Resource Name	Summary Description	Website	Area
Axis Community Health	The mission of Axis Community Health is to provide quality, affordable, accessible and compassionate healthcare services that promote the well-being of all members of the community.	https://www.axishealth.org/	Central CCC
Bay Area Legal Aid	Improves access to the civil justice system through legal assistance for low-income individuals.	https://baylegal.org/	West CCC
Brighter Beginnings	Brighter Beginnings supports healthy births and successful development of children by partnering with parents and helping to build strong communities.	www.brighter-beginnings.org	CCC

Resource Name	Summary Description	Website	Area
California Department of Healthcare Services	Helps low-income and disabled people get access to affordable, integrated, high-quality healthcare, including medical, dental, mental health, and substance use treatment services, as well as long-term care.	https://www.dhcs.ca.gov/Pages/de fault.aspx	CCC
Community Oral Health Program	Collaborates with schools and community partners to increase access to oral health services by linking children, youth, and families to no- or low-cost dental resources.	https://cchealth.org/dental/	CCC
Concord Veterans Center	Offer confidential help for veterans, service members, and their families at no cost in a non-medical setting. Services include counseling for needs such as depression, post-traumatic stress disorder (PTSD), and the psychological effects of military sexual trauma (MST).	https://www.va.gov/concord-vet-center/	Central CCC
Contra Costa Dental Clinics	Provides dental services in Contra Costa County.	https://cchealth.org/dental/dental-ccc.php	CCC
Contra Costa Dental Society	Serves members/the public and promotes oral health through communication, education, leadership, and service.	https://www.ccdds.org/	CCC
Contra Costa Family Justice Center: TeleCare	HIPAA compliant referrals for access to free healthcare.	https://www.cocofamilyjustice.org/telecare/#telecare-e-referral	CCC
Contra Costa Health Services	Our mission at CCHS is to care for and improve the health of all people in Contra Costa County with special attention to those who are most vulnerable to health problems.	https://cchealth.org/	CCC
Contra Costa School-Based Health Services	Offers school-based health services to children and students up to 19–20 years of age through mobile health clinic vans and satellite health centers throughout Contra Costa County.	https://cchealth.org/school-based- clinic/	CCC
DVC Community Dental Clinic	Low-cost, high-quality dental cleanings and preventive services provided by student enrolled in Diablo Valley College Dental Hygiene Program.	https://www.dvc.edu/academics/dental-hygiene/dental-hygiene-clinic.html	CCC
Healthy Contra Costa (formerly Healthy Richmond)	Builds resident power to advance various campaigns, including community health advocacy training, advocacy for access to health care for all county residents, and others.	https://healthycontracosta.org/	West CCC

Resource Name	Summary Description	Website	Area
Hijas del Campo	In partnership with Contra Costa Healthcare for Homeless offers a free weekly mobile clinic at Hijas del Campo headquarters as well as an on-site community health specialist to assist families to enroll in health programs.	www.hijasdelcampo.or	East CC
Independent Living Resources	Provides free assistive services to persons with disabilities, educate the public about the needs and abilities of the disability community, and advocates for systemic and social change.	https://www.ilrscc.org/	CCC
James Moorehouse Project	Student wellness center at El Cerrito High School offering medical and dental services, counseling, and teacher/staff and parent support.	http://www.jamesmorehouseproject.org/	West CCC
Jewish Family and Community Services East Bay	Promotes the well-being of individuals and families of all ages, races, and religions with essential mental health and social services at every stage of life.	https://jfcs-eastbay.org/	CCC
La Clínica de la Raza	The mission of La Clínica de La Raza is to improve the quality of life of the diverse communities we serve by providing culturally appropriate, high-quality, and accessible healthcare for all.	https://laclinica.org/	CCC
LifeLong Medical Care	Provides high-quality health, dental, and social services to under-served people of all ages; creates models of care for the elderly, people with disabilities and families; and advocates for continuous improvements in the health of our communities.	www.lifelongmedical.org	CCC
Monument Crisis Center	Offers physical health and dental screenings and referrals.	https://monumentcrisiscenter.org/	Central CCC, East CCC
Operation Access	Enables Bay Area healthcare providers to donate surgical and specialty care to people in need.	https://www.operationaccess.org/	CCC
Planned Parenthood of Northern California	Delivers comprehensive sexual and reproductive health services.	https://www.plannedparenthood.org/planned-parenthood-northern-california	CCC
Ronald McDonald Care Mobile Dental Clinic	Provides pediatric health services for underserved populations through health education and treatment and referral services.	https://rmhcbayarea.org/what-we-do/ronald-mcdonald-care-mobile/	CCC

Resource Name	Summary Description	Website	Area
RotaCare Pittsburg Free Medical Clinic at St. Vincent de Paul	Free medical care, (urgent and primary care), including free pharmaceuticals, lab tests, diagnostics, (X-Ray, Ultrasound, MRI), free diabetic medical supplies, free health education for diabetes and hypertension.	svdp-cc.org	CCC
RYSE Center	The Health Justice Center (HJC) at RYSE is a liberatory healthcare home for West Contra Costa youth and young adults.	https://rysecenter.org/	West CCC
The Mobile Health Clinic	Partnership program with Contra Costa County's Healthcare for the Homeless, John Muir Health, and RotaCare Bay Area to provide free medical care to low-income, uninsured and under-insured patients. Services include preventative, primary care, and mental health services.	https://www.johnmuirhealth.com/about-john-muir-health/community-commitment/our-programs/mobile-health-clinic.html	CCC

Access: Transportation

Resource Name	Summary Description	Website	Area
Alameda–Contra Costa Transit District (AC Transit)	Provides regional bus service.	http://www.actransit.org/	CCC
Bay Area Rapid Transit (BART)	Provides elevated and subway rail travel across Bay Area counties.	https://www.bart.gov/	CCC
Bay Wheels	Offers an affordable, accessible mode of transportation via a bicycle-sharing service (operated by Lyft), with discounted memberships for low-income individuals.	https://www.lyft.com/bikes/bay- wheels	CCC
Bike East Bay	Promotes a healthy, sustainable community by making cycling safe, fun and accessible.	https://bikeeastbay.org/	CCC
CountyConnection.com	Provides fixed-route and paratransit bus service for communities in Central Contra Costa County. Operates a fleet of 125 fully accessible transit buses and 63 para-transit vehicles.	https://countyconnection.com/	CCC
Mobility Matters	Facilitates collaboration and coordination among public and private transportation providers, creating a network of integrated options that primarily address the mobility needs of seniors, individuals with disabilities, and low-income individuals.	https://www.mobilitymatterscc.com/	CCC

Resource Name	Summary Description	Website	Area
Paratransit	Public transit service for people who are unable to use regular buses or trains because of a disability or a disabling health condition.	https://www.eastbaypar atransit.org/	CCC
Tri Delta Transit	Operates 15 local bus routes Monday-Friday, five local bus routes on weekends and holidays, door-to-door bus service for senior citizens and people with disabilities, and shuttle services for community events.	http://trideltatransit.com /	CCC
Walnut Creek Seniors Club Transportation Program	Adults with disabilities and older adults who live in Walnut Creek can schedule rides to medical appointments, grocery stores, activities, and more.	https://www.walnutcree kartsrec.org/programs-activities/transportation -program	Central CCC

HEART DISEASE AND STROKE

See Economic Stability: Food Security for free food resources.

Resource Name	Summary Description	Website	Area
American Heart Association	Strives to prevent and cure heart disease.	https://www.heart.org/en/affili ates/california/greater-bay-area	CCC
American Stroke Association	Resource for evidence-based information on stroke, post-stroke recovery, and caregiver info.	https://www.stroke.org/en/	CCC
Contra Costa Health Injury Prevention & Physical Activity Promotion Project	Supports health-promoting collaborations and initiatives to foster a safe environment for walking, biking, and other physical activity.	https://www.cchealth.org/serv ices-and-programs/prevention/injury-prevention-physical-activity-promotion-project	CCC
East Bay Regional Park District	Conserve open space resources and provide outdoor recreational opportunities for present and future generations.	https://www.ebparks.org/	CCC
Healthy and Active Before 5	Prevents obesity in kids ages 0–5 by building partnerships and environments for healthy eating and active play.	https://cchealth.org/obesity/b efore-five.php	CCC
Healthy Hearts Institute	Empowers individual and community transformation through health and wellness.	https://www.healthyhearts.co/	CCC
RYSE Center	Along with other programming, offers counseling, support groups, wellness workshops, and safe spaces to young people.	https://rysecenter.org/	West CCC

Resource Name	Summary Description	Website	Area
Women, Infants & Children (WIC) nutrition program locations, Brentwood and Pittsburg	Helps pregnant women, new mothers, and young children eat well and learn about nutrition and stay healthy. Provides services to pregnant and postpartum women, as well as children under 5 years old.	https://cchealth.org/wic/index.php	CCC

Healthy Eating, Active Living: Senior Centers in Contra Costa County

Name	Location	Website
Antioch Senior Center	Antioch	https://www.antiochca.gov/recreation/senior-center/
Brentwood Senior Activity Center	Brentwood	https://www.brentwoodca.gov/government/parks-recreation/recreation/senior-activities-and-programs/brentwood-senior-citizen-s-club
City of Martinez Senior Center	Martinez	https://www.cityofmartinez.org/departments/martinez-senior-center
Concord Senior Citizens Center	Concord	https://www.cityofconcord.org/Senior
Hercules Senior Center	Hercules	https://www.herculesca.gov/government/parks-recreation/50-adult-activities
Oakley Senior Center	Oakley	(925) 626-7223
Pinole Senior Center	Pinole	https://www.pinole.gov/recreation/senior-programs/
Pleasant Hill Senior Center	Pleasant Hill	https://pleasanthillrec.com/341/Seniors
Richmond Senior Citizens Center	Richmond	https://www.ci.richmond.ca.us/2179/Richmond-Senior-Center
San Pablo Senior Center	San Pablo	https://www.sanpabloca.gov/1144/Seniors

HOUSING

Resource Name	Summary Description	Website	Area
Bay Area Community Services	Provides behavioral health and housing services for teens, adults, older adults, and their families across the Bay Area.	https://www.bayareacs.org/	CCC
Bay Area Legal Aid	Increases access to the civil justice system through legal assistance for low-income people.	https://baylegal.org/	West CCC
Calli House	Short-term (<4 months) housing and supportive services program to address the immediate needs of runaway and homeless youth ages 18-24.	https://www.cchealth.org/services-and-programs/homeless-services/youth-services/drop-in-and-shelter	West CCC

Resource Name	Summary Description	Website	Area
Catholic Charities of the East Bay	A wide variety of services to aid youth, children and families facing eviction including rent assistance and funds for housing deposits.	http://www.cceb.org/housing- services-in-the-county-of-alameda/	CCC
Contra Costa Council on Homelessness	Planning body that coordinates the community's policies, strategies, and activities toward preventing and ending homelessness in Contra Costa County.	https://www.cchealth.org/about-contra-costa-health/leadership/commissions-advisory-groups/council-on-homelessness	CCC
Contra Costa Health Services – Health, Housing and Homelessness	Provides much-needed services and support to homeless individuals and families countywide.	https://cchealth.org/h3/	CCC
Contra Costa Senior Legal Services	Provides free legal advice, assistance, representation, advocacy, and education for Contra Costa County residents aged 60 and older, especially issues of access to housing, economic security and prevention of physical, psychological or economic abuse.	https://www.ccsls.org/	CCC
East Bay Housing Organizations	Works through organized campaigns focused on policy or a geographic community through ongoing committees.	https://ebho.org/	CCC
Hijas del Campo	Addressing current farmworker housing due to winter storms/climate changes, eviction prevention and farmworker homelessness.	www.hijasdelcampo.org	East CC
Hope Solutions (formerly Contra Costa Interfaith Housing)	Addresses the effects of poverty and homelessness by providing permanent housing solutions and vital support services to highly vulnerable families and individuals.	https://www.hopesolutions.org	CCC
Lao Family Community Development	Operates a range of housing for families, seniors, and adults in need, including CARE Casita San Pablo and the Rumrill Apartments permanent housing complex in San Pablo.	https://lfcd.org/	West CCC
Love-A-Child Missions Homeless Recovery Shelter	Provides women and children with services they need to ease and end their crisis of homelessness and substance abuse.	https://loveachildmissions.org	CCC

Resource Name	Summary Description	Website	Area
Philip Dorn Respite Center	Respite (recuperative) care program for homeless adults who are discharging from local hospitals and require medical stabilization services.	https://www.cchealth.org/services-and-programs/homeless-services/adult-services/respite-center	Central CCC
Richmond Neighborhood Housing Services	Provides affordable rentals to families and offers financial literacy programs.	https://richmondnhs.org/	West CCC
Rubicon Programs	Equips East Bay residents with resources to break the cycle of poverty.	http://rubiconprograms.org/	CCC
St. Vincent de Paul of Contra Costa County	Provides aid to individuals and families in need via 700 volunteers who provide financial aid to prevent homelessness, (rental & utility assistance) and referral to additional services. Additionally, SVdP provides a Family Resource Center in Pittsburg with a density of services.	svdp-cc.org	CCC
Satellite Affordable Housing Associates (SAHA)	Offers quality affordable homes and services that empower people and strengthen neighborhoods.	https://www.sahahomes.org/apply	CCC
Shelter, Inc.	Provides housing, services, support, and resources that lead to self-sufficiency for low-income, homeless, and disadvantaged families and individuals.	https://www.shelterinc.org/	CCC
Shepherd's Gate	Provides women and children with free, safe shelter, meals, and a long-term 12-16 month Christ-centered residential program.	https://shepherdsgate.org/	Central CCC
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	CCC
Trinity Center	Offers basic safety net services (e.g., meals, hygiene, laundry, clothing, mail/phone access) and case management services to individuals who are homeless or experiencing poverty.	https://www.trinitycenterwc.org/	CCC

Resource Name	Summary Description	Website	Area
Unity Council	Helps families and individuals build wealth and assets through sustainable economic, social, and neighborhood development programs	https://unitycouncil.org/	CCC
Various cities' Human Services Departments			CCC

MATERNAL AND INFANT HEALTH

Resource Name	Summary Description	Website	Area
Contra Costa Health: Adolescent Family Life Program	Free, voluntary program for pregnant and parenting youth that focuses on the positives in their lives. Working with a case manager, youth focus on their strengths, build resiliency, explore values, and set goals.	https://www.cchealth.org/services-and-programs/support-for-families/adolescent-family-life-program	CCC
Contra Costa Health: Black Infant Health Program	Improve health among Black mothers and babies by empowering pregnant and mothering Black women to make healthy choices for a brighter future.	https://www.cchealth.org/services-and-programs/support-for-families/black-infant-health-support	CCC
Contra Costa Health: Nurse Family Partnership	Each mother is partnered with a Public Health Nurse early in her pregnancy and receives ongoing nurse home visits that continue through her child's second birthday, including individualized goal planning, life coaching, and education.	https://www.cchealth.org/services-and-programs/support-for-families/nurse-family-partnership	CCC
Brighter Beginnings	Brighter Beginnings supports healthy births and successful development of children by partnering with parents and helping to build strong communities.	www.brighter-beginnings.org	CCC
First 5 Contra Costa County	Offers continuous prevention and early intervention programs that promote optimal health and development, narrow disparities, and improve the lives of children ages 0–5 and their families.	https://www.first5coco.org/for-families/	CCC
Planned Parenthood of Northern California	Delivers comprehensive sexual and reproductive health services.	https://www.plannedparenthood.org/planned-parenthood-northern-california	CCC
Women, Infants & Children (WIC) nutrition program locations	Helps pregnant women, new mothers, and young children eat well and learn about nutrition and stay healthy. Provides services to pregnant and postpartum women, as well as children under 5 years old.	https://cchealth.org/wic/index.php	CCC

SEXUAL HEALTH

Resource Name	Summary Description	Website	Area
Contra Costa Health Communicable Disease Program	Prevents the spread of contagious diseases in Contra Costa County.	https://www.cchealth.org/health-and-safety-information/communicable-disease-program	CCC
Contra Costa County STI Testing	Offers screening, diagnosis, and treatment for STIs including syphilis, gonorrhea, chlamydia, and HIV for Contra Costa residents.	https://www.cchealth.org/get-care/sexual-health-services/sti-testing	CCC
East Bay Getting to Zero	Bring people together to collaborate on creative ways to implement the East Bay HIV strategic plan, supporting community members to have more equitable access to HIV testing, prevention and treatment services.	https://www.ebgtz.org	CCC
HIV/AIDS Consortium	Advocates and supports people affected by HIV/AIDS, plans prevention and care services, develops recommendations, and advises governments and community leaders.	https://cchealth.org/hiv/consortium/	CCC
STI testing clinics directory	Maintains an extensive list of public and private STD testing locations and in-home STD testing options.	https://www.saferstdtesting.com	CCC

STRUCTURAL RACISM/DISCRIMINATION

Many of the agencies/organizations addressing the other health needs also address racism/discrimination. The agencies/organizations listed below specifically address it.

Resource Name	Summary Description	Website	Area
Contra Costa County Office of Racial Equity and Social Justice	Support advancement of equity within county administration and engage community to participate in county processes to increase access to resources and opportunities.	https://www.contracosta.ca.gov/9969/Racial-Equity-and-Social-Justice	CCC
Asian Pacific-Islander American Public Affairs	Advocates on behalf of AAPI voices in the community.	https://www.apapa.org/	CCC

Resource Name	Summary Description	Website	Area
Contra Costa County Racial Justice Coalition	Advocate for county adoption of policies to reduce racial disparities in local criminal justice system.	https://www.acceinstitute.org/contra_costa_county_racial_justice_coalition	CCC
NAACP East Contra Costa County Branch	Seek the enactment and enforcement of federal, state and local laws securing civil rights, and inform the public of the adverse effects of racial discrimination.	https://www.eastcountynaacp.org/	East CCC
NAACP Richmond Branch	Seek the enactment and enforcement of federal, state and local laws securing civil rights, and inform the public of the adverse effects of racial discrimination.	https://naacprichmondca.org/	West CCC
Racial Justice Action Contra Costa County	Works to educate and mobilize people in Contra Costa County to work for racial justice.	https://www.facebook.com/SURJCCC/	CCC

UNINTENTIONAL INJURY

Resource Name	Summary Description	Website	Area
Child Passenger Safety Program	Supports the standardization and quality- control course with content and instructors to ensure that information and materials being taught and disseminated are up-to-date, accurate, and consistent.	https://www.in.gov/cji/traffic-safety/occupant-protection/children/child-passenger-safety/	CCC
Contra Costa Health Injury Prevention & Physical Activity Promotion Project	Supports health-promoting collaborations and initiatives to foster a safe environment for walking, biking, and other physical activity.	https://www.cchealth.org/services-and-programs/prevention/injury-prevention-physical-activity-promotion-project	CCC
Contra Costa County Vision Zero	Initiative to implement multi-faceted action plan to reduce traffic fatalities in Contra Costa County.	https://www.contracosta.ca.gov/8532/Vision-Zero	CCC

Resource Name	Summary Description	Website	Area
First 5 Contra Costa County	Offers continuous prevention and early intervention programs that promote optimal health and development, narrow disparities, and improve the lives of children ages 0–5 and their families.	http://www.first5coco.org/	CCC
Mothers Against Drunk Driving (MADD)	Conducts advocacy activities as well as offering emotional support, education, resources, and referrals for survivors and families of victims of drunk- or drugged-driving crashes.	https://madd.org/sfbayarea/	CCC
Meals on Wheels Diablo Region Falls Prevention	Fall Prevention at Meals on Wheels Diablo Region offers Fall Screening, Education, Evidence-Based Individual and Group Exercise Classes, and Home Safety Modifications services.	https://www.mowdiabloregion.org/fall-prevention	CCC
Various cities' Fire Departments			CCC

Appendix 5c: Community Assets and Resources, Tri-Valley

Healthcare Facilities and Agencies

The following healthcare facilities are available in the Tri-Valley. For healthcare facilities available across Alameda County, see Appendix 5a; for healthcare facilities available across Contra Costa County, see Appendix 5b.

HOSPITALS

- John Muir Health
- San Ramon Regional Medical Center
- Stanford Health Care Tri-Valley

FEDERALLY QUALIFIED HEALTH CENTERS

- Axis Community Health (multiple sites in the Tri-Valley)

OTHER HEALTH CLINICS

- Bay Area Community Health (multiple sites in the Tri-Valley)
- Center for Elder Independence (Livermore location)

OTHER ORGANIZATIONS

- ALS Cure Project
- Danville Rehabilitation Skilled Nursing Facility
- Down Syndrome Connection of the Bay Area
- Exceptional Needs Network
- Hemophilia Foundation of Northern California
- Operation Access

Assets and Resources by Identified Health Need

The following tables provide the names, summary descriptions, and websites for various assets and resources available in the Tri-Valley to address identified health needs. For assets and resources available across Alameda County, see Appendix 5a; for assets and resources available across Contra Costa County, see Appendix 5b.

BEHAVIORAL HEALTH

Including Mental Health and Substance Use

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
The American Legion – Mount Diablo Post 246	Support for military personnel and their families during and after return from service.	https://www.americanlegionpost246.org/whatwedo	TV
Axis Bridge Mental Health Urgent Care	Provides rapid access to mental health treatment to patients ages 5 and up.	https://axishealth.org/axis-bridge-mhuc/	TV
Axis Community Health Behavioral Health Services	Integrated behavioral health, providing mental health and substance use counseling for adults, teens, couples, families and children.	https://axishealth.org/ibh/	TV
Bay Area Community Services	Provides behavioral health and housing services for teens, adults, older adults, and their families across the Bay Area.	https://www.bayareacs.org/	TV
BeingwellCA	Provide schools, parents, students and communities with workshops, toolkits and training to improve mental health support. Put Wellness Centers in schools.	https://beingwellca.org	TV
Black Girls Mental Health Collective Foundation	Offer therapy vouchers for low income Black women who have limited or no access to maternal mental health services and provide scholarships for perinatal mental health and trauma-informed care.	https://www.bgmhfoundation.org/	TV
CityServe of the Tri-Valley	Provides counseling, mental health support, job training, and health services for individuals and families.	https://cityservecares.org/	TV
CURA, Inc.	Helps individuals experiencing difficulties with substance abuse achieve sobriety, health, and wellness.	https://www.curainc.com/Home.html	TV
Dovetail Learning	Provides resilience training and resources that support the dismantling of structures of systematic discrimination.	https://dovetaillearning.org	TV
Enneagram Prison Project	Provides compassionate self-awareness and self-regulation training to people in prisons and jails.	https://enneagramprisonproject.org	TV
Fred Finch Youth & Family Services	Comprehensive behavioral health services for children, youth, young adults, and their families to address challenges that may include mental or emotional impairment, developmental disability, early trauma and abuse.	https://www.fredfinch.org	TV

Resource Name	Summary Description	Website	Area
Harmony & Healing	Deliver professional live virtual musical visits for patients and loved ones. Performances lift spirits and take patients' and caretaker's minds off of health challenges with music.	https://www.harmonyandhealing.org	TV
Hume Center	Provides mental health prevention, intervention, and support.	http://www.humecenter.org	TV
Love Never Fails	Includes 12-step program for healing from abuse ("Fight for Love"), and offers therapy through its 18-month safe housing program for women aged 18+.	https://www.loveneverfailsus.com/fightforlove	TV
Mindful Littles	Empowering students, parents and teachers to feel good by doing good – engaging in meaningful service learning and mindfulness practices to strengthen connections with each other and their communities.	https://www.mindfullittles.org	TV
Missing Man Ministry	Grief care and recovery for families following the loss of a husband or father.	https://www.missingmanministry.org/	TV
Monument Crisis Center	Offers various programming stress relief, relationship-building and community-building.	https://monumentcrisiscenter.org/	TV
My Good Brain	Offers toolkit that uses art as a vehicle for change in teaching psychological tools for adaptive functioning in youth.	https://www.mygoodbrain.org	TV
National Coalition Against Prescription Drug Abuse	Provides kits and virtual training bi-monthly that equips participants with critical life-saving prescription drug and fentanyl education along with overdose rescue training.	https://www.ncapda.org	TV
Next Step	Provide free and confidential services that include pregnancy testing and ultrasounds performed by licensed medical professionals, pregnancy and parenting education and support, material resources, and reproductive grief care for women who have experienced abortion, miscarriage, stillbirth or infertility.	https://next-step.org/	TV
Project Eden	Provides adult outpatient addiction recovery treatment.	https://www.horizonservices.org/project-eden-adult-outpatient/	TV
Rcoz	Platform to raise awareness and build acceptance of mental health issues among South Asians through storytelling and community dialogue with experts.	https://www.rcoz.us/	TV

Resource Name	Summary Description	Website	Area
Reins in Motion	Enrich the lives of individuals with special needs and life threatening illness by connecting them with horses, animals, and outdoor education activities that promote healing and growth in all aspects of their lives.	https://www.reinsinmotionca.com	TV
Senior Support Program of the Tri-Valley	Provides programming and referrals for older adults, including case management, 1:1 counseling and emotional support, and wellness education (e.g., nutrition, fitness).	https://seniorservicescoalition.org/senior-support-program-of-the-tri-valley/	TV
Teen Esteem	Conduct classroom presentations, school assemblies and parent education events. Topics include: mental health, suicide, social media, gaming, substance abuse, prescription drugs, vaping, bullying & relationships.	https://www.teenesteem.org/	TV
Tri-Valley Haven	Offers services to survivors of domestic violence, sexual assault and homelessness, including restraining order assistance, counseling groups, financial assistance for survivors, groceries, and more.	https://trivalleyhaven.org/	TV
Tri-Valley Seek and Save	Marriage & Family Christian Therapists available to support women and men in crisis.	https://www.trivalleyseekandsave.org/	TV
Valley Humane Society	Canine Comfort Pet-Assisted Therapy volunteers visit medical facilities, schools, libraries, retirement homes, and even corporate offices. Interacting with animals soothes people in moments of stress and grief, helping them to manage their emotions and mental outlook.	https://valleyhumane.org/programs/canine-comfort-pet-assisted-therapy/	TV
Wellness Together	Partners with K-12 school districts and colleges to provide mental health services for students, families, and educators.	https://www.wellnesstogether.org/	TV
Z-Cares Foundation	Providing youth mental health awareness training, documentary screening, webinars and conferences to enable thousands of youth and their parents and guardians to have positive dialogues and reduce the stigma around anxiety, depression and a broad range of mental health concerns.	https://www.zcares.org	TV

CANCER

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
HERS Breast Cancer Foundation	Supports all individuals healing from breast cancer by providing post-surgical products and services regardless of financial status.	https://hersbreastcancerfoundation.org/	TV

CLIMATE/NATURAL ENVIRONMENT

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Bike East Bay	Promotes a healthy, sustainable community by making cycling safe, fun and accessible.	https://bikeeastbay.org/	TV
East Bay Regional Park District	Conserve open space resources and provide outdoor recreational opportunities for present and future generations.	https://www.ebparks.org/	TV
Go Green Initiative	Works together with schools to protect children from adverse environmental conditions, secure access to nutritious food, and conserve natural resources for the future.	https://gogreeninitiative.org/	TV
Grid Alternatives	Solar education and installation to advance economic and environmental justice.	http://gridalternatives.org	TV
Livermore Area Recreation and Park District (LARPD) Foundation	We provide financial assistance through scholarships to local youth, teens, adults, and senior citizens, giving them access to LARPD programs and activities to enrich their lives.	https://www.larpd.org/foundation	TV
Tri-Valley Air Quality Climate Challenge	Bring Air Quality & Climate lessons and expert advice to schools, public events, civic groups, & local governments, provide home air filter box fans to reduce exposure to air pollutants, and incentivize zero-emission electric landscaping equipment.	http://tvaqca.org/	TV

Resource Name	Summary Description	Website	Area
Tri-Valley Group of the San Francisco Bay Chapter of the Sierra Club	Grassroots organization that supports efforts to appreciate and protect the environment and create a more sustainable future.	https://www.sierraclub.org/sfbay	TV
Various cities' Environmental Services Divisions			TV

COMMUNITY SAFETY

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Contra Costa Family Justice Centers	Serving families affected by domestic violence, sexual assault, child abuse, elder abuse, and human trafficking.	http://www.cocofamilyjustice.org/	TV
Contra Costa Senior Legal Services	Provides free legal advice, assistance, representation, advocacy, and education for Contra Costa County residents aged 60 and older, especially issues of access to housing, economic security and prevention of physical, psychological or economic abuse.	https://www.ccsls.org/	TV
Love Never Fails	Wide variety of programs and services to protect and restore young people who have been sex-trafficked, including community outreach, "Project Look for Me" (organized searches), safe housing, wrap-around services, and economic empowerment.	https://www.loveneverfailsus.com/	TV
Narika	Helps domestic violence survivors with advocacy, support, and education.	https://www.narika.org/	TV
Set to Thrive	Thrive Bags for youth entering the foster care system with a new backpack or duffel bag, two days' worth of clothing, tennis shoes and hygiene items.	https://www.settothrive.org	TV
Special Operations – Finding Kids	Hires boots-on-the-ground retired law enforcement and private investigators — at no cost to parents — to find missing and exploited children.	https://findingkids.org/	TV

Resource Name	Summary Description	Website	Area
Tri-Valley Haven	Offers services to survivors of domestic violence, sexual assault and homelessness, including restraining order assistance, counseling groups, financial assistance for survivors, groceries, and more.	https://trivalleyhaven.org/	TV

ECONOMIC STABILITY

See subsection on Food Security for free food resources. See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Asian Pacific-Islander American Public Affairs	Partners with local, state, and federal government offices to provide internships that empower the next generation of community leaders.	https://www.apapa.org/internship	TV
Assistance League of Amador Valley	Supports Tri-Valley students in need with appropriate school clothing and books the students take home.	https://www.assistanceleague.org/amador-valley/	TV
CityServe of the Tri-Valley	Provides counseling, mental health support, job training, and health services for individuals and families.	https://cityservecares.org/	TV
Contra Costa Senior Legal Services	Provides free legal advice, assistance, representation, advocacy, and education for Contra Costa County residents aged 60 and older, especially for issues of access to housing, economic security and prevention of physical, psychological or economic abuse.	https://www.ccsls.org/	TV
Fostering Wishes	For foster youth, provide filled duffle bags, pay for high school extra-curricular activities, and award trade school scholarships to support their growth.	https://www.fosteringwishes.org/	TV
Futures Explored, Inc.	Provide Employment Training Program and supported employment, as well as tailored day services, for intellectually/developmentally disabled individuals.	https://www.futures-explored.org/employment-education	TV
Hively	Provides help with affordable child care options and offers basic children's necessities (clothing, shoes, diapers, wipes) to families in need.	https://behively.org	TV
i-GATE Development Corporation	Focused on job creation, including internships, at startups in the Tri-Valley, and building local network of entrepreneurs.	https://igateihub.org	TV

Resource Name	Summary Description	Website	Area
IGNITE Pathways	Hands-on workshops, school and community outreach, and mentorship programs in STEM (particularly robotics, electronics, AI, and neuro-science) for children and youth.	https://www.ignitepathways.org/	TV
Livermore Lab Foundation	STEM student programs support students from high school through college via full-year and summer fellowships, internships, programs, and events.	https://livermorelabfoundation.org/	TV
Love Never Fails	Includes survivor economic empowerment programming and Empathetic Employer Empowerment program.	https://www.loveneverfailsus.com/e-3	TV
Missing Man Ministry	Financial planning and counseling, home/auto repair and maintenance, transitional services, and emergency support for families following the loss of a husband or father.	https://www.missingmanministry.org/	TV
Mom Relaunch Foundation	Career support program to prepare women on a career break to reenter the workforce and become financially independent.	https://www.momrelaunch.org/	TV
Narika Seed Program	Job training program to foster economic independence and self-reliance among survivors of domestic violence and new immigrant populations that are particularly vulnerable to abuse and exploitation.	https://www.narika.org/seed-program	TV
Partners for Change Tri-Valley	16-week program for people to gain insight into common economic barriers and take actionable steps to overcome them. Explore cultural, familial, and trauma-related factors that shape relationships with money.	https://www.pfctv.org	TV
Paws in Need	Provide cost-share financial assistance to low-income, homeless, and elderly populations to help cover a one-time expense for urgent veterinary procedures.	https://www.paws-in-need.org	TV
Pledge to Humanity	Provides volunteer opportunities to students to assist in many local projects including coat drives, shoe drives, toiletry drives, and making and serving meals through local soup kitchens and shelters.	http://www.pledgetohumanity.org	TV
Rising Sun Center for Opportunity	Provides green training, employment, and residential energy-efficiency services.	https://risingsunopp.org	TV

Resource Name	Summary Description	Website	Area
St. Vincent de Paul	Provides aid to individuals and families in need via 700 volunteers who provide financial aid and referral to additional services.	svdp-cc.org	TV
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	TV
Tri-Valley Nonprofit Alliance	Anti-Poverty Collaborative brings together nonprofits, faith organizations, business leaders, and elected officials to highlight pockets of poverty in the Tri-Valley and work towards finding sustainable and innovative solutions.	https://www.tvnpa.org	TV
Tri-Valley Seek and Save	Providing for utilities, rent, groceries, clothing, and other living essentials on a case by case basis.	https://www.trivalleyseekandsave.org/	TV
Tri-Valley Haven	Offers services to survivors of domestic violence, sexual assault and homelessness, including financial assistance for survivors.	https://trivalleyhaven.org/	TV
Valley Veterans Foundation	Provides financial support and other resources for military student veterans and their families while they are pursuing post-secondary education.	https://valleyveteransfoundation.org/	TV
Various cities' Human Services Departments			TV

Economic Stability: Education

Resource Name	Summary Description	Website	Area
The American Legion – Mount Diablo Post 246	Offers participatory youth programs, sponsors scouting organizations, and hosts a high school oratorical contest.	https://www.americanlegionpost246.org/whatwedo	TV
Assistance League of Amador Valley	Supports Tri-Valley students in need with appropriate school clothing and books the students take home.	https://www.assistanceleague.org/amador-valley/	TV
Be A Mentor, Inc.	Recruits, screens, trains, and matches adult mentors with students through Volunteer Management System. Mentors spend a minimum of 1-2 hours a week with their mentee for a full year.	https://www.beamentor.org/wp	TV

Resource Name	Summary Description	Website	Area
Dublin Partners in Education	A K-12 education based non-profit organization that engages the community to raise much-needed funds in support of students and schools within the Dublin Unified School District.	https://www.dpie.org/	TV
Fostering Wishes	For foster youth, provide filled duffle bags, pay for high school extracurricular activities, and award trade school scholarships to support their growth.	https://www.fosteringwishes.org/	TV
Golden Gate Area Council Boy Scouts of America	Participatory learning experiences for children and adolescents.	https://www.ggacbsa.org	TV
IGNITE Pathways	Hands-on workshops, school and community outreach, and mentorship programs in STEM (particularly robotics, electronics, AI, and neuro-science) for children and youth.	https://www.ignitepathways.org/	TV
Las Positas College	Community college that offers curriculum for students seeking career preparation, transfer to a four-year college or university, or personal enrichment.	https://laspositascollege.edu/	TV
Livermore Lab Foundation	STEM student programs support students from high school through college via full-year and summer fellowships, internships, programs, and events.	https://livermorelabfoundation.org/	TV
One Go Education Support	Provides provide educational advocacy, consultation, guidance & support to families, educators, and the broader community, including reading and math intervention programs.	https://www.onegoeducationsupport.com/	TV
Pleasanton Partnerships in Education (PPIE) Foundation	Provides critical supplemental staff funding, STEAM grants and innovative business-school engagement programs.	https://www.ppie.org	TV
Project Sankofa Inc.	Provide culturally relevant programs, mentorship, and systemic support to foster Black academic success and educator retention.	https://www.linkedin.com/company/project-sankofa	TV
Quest Science Center	Public events focus on authentic, hands-on STEM exploration and learning activities.	https://quest-science.org	TV

Resource Name	Summary Description	Website	Area
San Ramon Valley Center	A full-service campus associated with Diablo Valley College, offering a range of degrees and certificates in in-demand fields.	www.dvc.edu/san-ramon	TV
School of Imagination & Happy Talkers	Inclusion-model pre-school classrooms for neurotypical and neurodiverse children; Happy Talkers program offers early autism screening, diagnosis, and early intervention.	https://schoolofimagination.org/	TV
Tri-Valley ROP	Offers high school students in the Tri-Valley hands-on career-technical education classes that explore careers and/or college majors and develop job skills and a robust Middle College High School Program.	https://www.tvrop.org/	TV
Valley Veterans Foundation	Provides financial support and other resources for military student veterans and their families while they are pursuing post-secondary education.	https://valleyveteransfoundation.org/	TV

School Districts in the Tri-Valley

School District	Location	Website
Dublin USD	Dublin	https://www.dublin.k12.ca.us/
Livermore Valley Joint USD	Livermore	https://www.livermoreschools.org/
Pleasanton USD	Pleasanton	https://www.pleasantonusd.net/
San Ramon USD	Danville, San Ramon	https://www.srvusd.net/

Economic Stability: Food Security

Also see Economic Stability main table for resources. See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Assistance League of Amador Valley	Provides weekly support to the Tri-Valley Haven Food Pantry.	https://www.assistanceleague.org/amador-valley/	TV
Axis Community Health WIC Program	Provides eligible women and children with programming that supports better nutrition, offers supplemental food, and makes referrals to health care and other community services.	https://axishealth.org/wic/	TV

Resource Name	Summary Description	Website	Area
Children's Emergency Food Bank	Provide canned and packaged food as well as gift certificates from local markets to obtain fresh foods, to give each family enough food for about a week.	https://childrensemergencyfoodbank.org	TV
Culinary Angels	Prepares and delivers free, organic, healthy meals to those actively going through cancer treatment and other serious health challenges, and their caregivers.	https://culinaryangels.org	TV
Fertile Groundworks	Teaches individuals and communities to grow healthy, nutritious food, organically and sustainably. Produce from the educational garden is given to local community kitchens and food pantries to help feed those in need.	https://www.fertilegroundworks.org/	TV
Food Bank of Contra Costa and Solano	Leads the fight to end hunger, in partnership with our community and in service of our neighbors in need.	http://www.foodbankccs.org/	TV
Go Green Initiative	Works together with schools to protect children from adverse environmental conditions, secure access to nutritious food, and conserve natural resources for the future.	https://gogreeninitiative.org/	TV
Little Miracles Inc.	Supply Tri-Valley families facing financial challenges with critical baby essentials such as diapers, clothing, formula, car seats, & cribs.	https://littlemiraclespleasanton.org	TV
Loaves and Fishes of Contra Costa	Provides daily hot and nutritious meals and groceries to anyone in need from five dining rooms and a mobile delivery unit serving partner agencies in East County.	https://www.loavesfishescc.org/	TV
Monument Crisis Center	Food distribution program to provide stability for low income and at-risk individuals and families in Contra Costa County.	https://monumentcrisiscenter.org/	TV
Open Heart Kitchen	Provides equitably access to nutritious food today, while building a food secure tomorrow. Community meals, senior center meals, pop-up pantries, and Open Heart Food Bank.	https://www.openheartkitchen.org/	TV
Senior Support Program of the Tri-Valley	Provides programming and referrals for older adults, including case management, 1:1 counseling and emotional support, and wellness education (e.g., nutrition, fitness).	https://seniorservicescoalition.org/senior-support-program-of-the-tri-valley/	TV

Resource Name	Summary Description	Website	Area
Spectrum Community Services: Meals on Wheels, Senior Meals	Meals on Wheels offers healthy, home-delivered meals for seniors who are unable to prepare their own food and have difficulty with mobility; Senior Meals distributes freshly prepared, nutritious meals to various locations where registered seniors can pick them up.	https://www.spectrumcs.org/senior-services	TV
St. Vincent de Paul	Provides 18 food pantries and aid to individuals and families in need via 700 volunteers who provide financial aid and referral to additional services.	svdp-cc.org	TV
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	TV
Tri-Valley Haven for Women: Food Pantry	Provides free groceries, fresh fruit and veggies to low-income Tri-Valley residents.	https://trivalleyhaven.org/food-pantry/	TV
Tri-Valley Seek and Save	Providing for groceries and other living essentials on a case by case basis.	https://www.trivalleyseekandsave.org/	TV
White Pony Express	Helps eliminate hunger and poverty by delivering "the abundance all around us" to people in need.	https://www.whiteponyexpress.org/	TV

HEALTHCARE ACCESS AND DELIVERY

See Healthcare Facilities and Agencies listed on the first page of this appendix. See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
CityServe of the Tri-Valley	Provides counseling, mental health support, job training, and health services for individuals and families.	https://cityservecares.org/	TV
Dentists on Wheels	Provide low-income, uninsured adults and seniors with free dental care.	https://dentistsonwheels.org/	TV
Gable Heart Beats Foundation	Funds heart screenings with an EKG and Echocardiogram and places AEDs in schools, sports parks and community facilities.	http://www.gableheartbeats.org	TV

HEART DISEASE AND STROKE

See Economic Stability: Food Security for free food resources. See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Gable Heart Beats Foundation	Funds heart screenings with an EKG and Echocardiogram and places AEDs in schools, sports parks and community facilities.	http://www.gableheartbeats.org	TV
Senior Support Program of the Tri-Valley	Provides programming and referrals for older adults, including case management, 1:1 counseling and emotional support, and wellness education (e.g., nutrition, fitness).	https://seniorservicescoalition.org/senior-support-program-of-the-tri-valley/	TV
Various cities' Parks and Recreation Departments			TV

Healthy Eating, Active Living: Senior Centers in the Tri-Valley

Name	Location	Website
Alcosta Senior & Community Center	San Ramon	https://www.sanramon.ca.gov/our_city/departments_and_divisions/parks_community_services/parks_facilities/facilities/alcosta_senior_community_center
City of Dublin Senior Center	Dublin	https://www.dublin.ca.gov/1053/Senior-Center
LARPD Senior Services Center	Livermore	https://www.larpd.org/senior-services
Pleasanton Senior Center	Pleasanton	https://www.cityofpleasantonca.gov/your-community/recreation/senior-services/

HOUSING

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Bay Area Community Services	Provides behavioral health and housing services for teens, adults, older adults, and their families across the Bay Area.	https://www.bayareacs.org/	TV
CityServe of the Tri-Valley	Provides counseling, mental health support, job training, and health services for individuals and families.	https://cityservecares.org/	TV

Resource Name	Summary Description	Website	Area
Contra Costa Senior Legal Services	Provides free legal advice, assistance, representation, advocacy, and education for Contra Costa County residents aged 60 and older, especially issues of access to housing, economic security and prevention of physical, psychological or economic abuse.	https://www.ccsls.org/	TV
Goodness Village	An affordable tiny home program that provides the Tri-Valley's formerly unhoused neighbors a safe and supportive community to live independently, heal, and thrive.	https://gvlivermore.org/	TV
HOPE Project Mobile Health Clinic	Homeless Outreach for People Empowerment Project is a mobile clinic that brings services to those in need. It provides health and social services to homeless people in five locations throughout southern and eastern Alameda County, in partnership between Abode Services and Bay Area Community Health.	https://bach.health/homeless-programs	TV
Love Never Fails	Wide variety of programs and services to protect and restore young people who have been sex-trafficked, including safe housing, wrap-around services, and economic empowerment.	https://www.loveneverfailsus.com/	TV
Monthly Miracles	Mobilize and engage donors through $1/month donations and use the funds to facilitate housing, vehicle aid, relocation services, or homelessness prevention.	https://monthlymiracles.org	TV
Open Heart Refuge	20-bed overnight shelter for unhoused folks and individuals experiencing crisis. Located at the Vineyard Resource Center in Livermore. Open 365 days a year.	https://www.openheartkitchen.org/refuge	TV
Shepherd's Gate	Provides housing and job skill training for women in transition as well as programs for their children.	https://shepherdsgate.org/	TV
Sleep in Heavenly Peace, Inc.	Twin beds are built and delivered fully furnished to children ages 3-17 who sleep on floors, couches, and other inadequate situations without the luxury of sleeping on a bed.	https://www.shpbeds.org/chapter/ca-alameda-co	TV

Resource Name	Summary Description	Website	Area
St. Vincent de Paul	Provides aid to individuals and families in need via 700 volunteers who provide financial aid to prevent homelessness, (rental & utility assistance) and referral to additional services.	svdp-cc.org	TV
Sunflower Hill	Affordable, independent housing community for people with I/DD, including programs that support independence.	https://sunflowerhill.org/	TV
Swords to Plowshares	Serve veterans experiencing homelessness and financial instability with counseling and case management, supportive housing, homeless prevention, employment, food assistance, and legal services.	https://www.swords-to-plowshares.org/about	TV
Tri-Valley Haven	Offers services for homeless individuals and families in severe economic need, including shelter, a food pantry, and transitional housing.	https://trivalleyhaven.org/	TV
Tri-Valley REACH	Builds local inclusive communities for adults with intellectual and developmental disabilities to live independently by providing resources, education, activities, community, and housing opportunities.	https://trivalleyreach.org/	TV
Tri-Valley Seek and Save	Permanent housing application assistance, occasional relocation funding.	https://www.trivalleyseekandsave.org/	TV
Various cities' Housing and Human Services Departments			TV

MATERNAL/INFANT HEALTH

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Black Girls Mental Health Collective Foundation	Offer therapy vouchers for low income Black women who have limited or no access to maternal mental health services and provide scholarships for perinatal mental health and trauma-informed care	https://www.bgmhfoundation.org/	TV

Resource Name	Summary Description	Website	Area
Little Miracles Inc.	Supply Tri-Valley families facing financial challenges with critical baby essentials such as diapers, clothing, formula, car seats, & cribs.	https://littlemiraclespleasanton.org	TV
Next Step	Provide free and confidential services that include pregnancy testing and ultrasounds performed by licensed medical professionals, pregnancy and parenting education and support, material resources, and reproductive grief care for women who have experienced abortion, miscarriage, stillbirth or infertility.	https://next-step.org/	TV

SEXUAL HEALTH

See assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

STRUCTURAL RACISM/DISCRIMINATION

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b). Many of the agencies/organizations addressing the other health needs also address racism/discrimination. The agencies/organizations listed below specifically address it.

Resource Name	Summary Description	Website	Area
Asian Pacific-Islander American Public Affairs	Advocates on behalf of AAPI voices in the community.	https://www.apapa.org/	TV
Dovetail Learning	Provide resilience training and resources that support the dismantling of structures of systematic discrimination.	https://dovetaillearning.org	TV
Hayward South Alameda County NAACP (Dublin)	Seek the enactment and enforcement of federal, state and local laws securing civil rights, and inform the public of the adverse effects of racial discrimination.	https://naacphayward.org/	TV
Tri-Valley Nonprofit Alliance Anti-Poverty Collaborative	The collaborative's mission is to eradicate poverty in the Tri-Valley by advocating, collaborating, educating, and amplifying messages to drive systems-level change around healthcare, education, affordable housing, food security, and economic justice.	https://www.tvnpa.org	TV

UNINTENTIONAL INJURY

See other assets and resources available for this need across Alameda County (Appendix 5a) and Contra Costa County (Appendix 5b).

Resource Name	Summary Description	Website	Area
Little Miracles Inc.	Supply Tri-Valley families facing financial challenges with critical baby essentials such as diapers, clothing, formula, car seats, & cribs.	https://littlemiraclespleasanton.org	TV
Mothers Against Drunk Driving (MADD Dublin)	Conducts advocacy activities as well as offering emotional support, education, resources, and referrals for survivors and families of victims of drunk- or drugged-driving crashes.	https://madd.org/sfbayarea/	TV
Various cities' Fire Departments			TV

Appendix 6: Community Benefit Investments and Impact, Fiscal Years 2023–2025

Community Benefit Programs and Partnerships in Fiscal Years 2023 and 2024

John Muir Health's community investments for FY23-FY25 included 3-year grants to 33 partner nonprofit organizations, direct service programs led by John Muir Health staff, and collaborations. A variety of programs and activities to address these needs include initiatives and community-based programs operated or substantially supported by John Muir Medical Center, Walnut Creek, John Muir Medical Center, Concord and John Muir Health Behavioral Health Center.

John Muir Health-Led Programs

HEALTHCARE ACCESS AND DELIVERY

• Community School Nurse
• Diabetes Education Empowerment Program
• Every Woman Counts
• Lung Cancer Screening
• Mobile Health Clinic
• Ronald McDonald Mobile Dental Clinic and Dental Collaborative of Contra Costa
• Specialty Care Program

BEHAVIORAL HEALTH

• Beyond Violence
• Complex Community Care Coordination
• Restorative Justice Initiative

HOUSING AND HOMELESSNESS PREVENTION

• Mobile Health Clinic

WORKFORCE DEVELOPMENT

• CLIMB Near Peer Mentorship Program
• Family Medicine Residency Program Vulnerable Populations Curriculum Program
• Pharmacy Residency Program
• Nursing Residency Program
• Young Healers High School Program

Community Partnerships[60]

HEALTHCARE ACCESS AND DELIVERY

• Contra Costa Health Services (Healthcare for the Homeless and Oral Health Program)
• Independent Living Resources <
• Inspiring Communities <
• Junior Achievement of Northern California <
• La Clínica de La Raza
• Lifelong Medical Care
• Meals on Wheels Diablo Region <
• Monument Impact <
• Operation Access <
• Order of Malta Clinic of Northern California <
• RotaCare Bay Area <
• St. Vincent de Paul <

BEHAVIORAL HEALTH

• Center for Human Development <
• Family Justice Centers of Contra Costa <
• Fred Finch Youth and Family Services <
• Meals on Wheels Diablo Region <
• Mental Health Connections <
• Monument Crisis Center <
• Monument Impact <
• NAMI of Contra Costa <
• One Day at a Time <
• Planting Justice <
• RYSE Center <
• Three Valleys Community Foundation
• Village Community Resource Center <
• Women's Cancer Resource Center <

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[60] < Denotes additional grant funding to support organization-selected interventions, training, and development.

HOUSING AND HOMELESSNESS
PREVENTION

• Alameda County Community Food Bank <
• Contra Costa Health Services Healthcare for
the Homeless

Community Partnerships, continued

• Food Bank of Contra Costa and Solano
Counties <
• Goodness Village <
• Healthy and Active Before Five <
• Hope Solutions <
• Philip Dorn Respite Center, CCC Housing and
Homeless Services
• Shelter, Inc. <
• Support4Recovery <
• Trinity Center <
• Vituity Cares Foundation
• White Pony Express <

SCHOOL PARTNERS

• Antioch Unified School District
• Bentwood Union School District
• Kerosene Lamp Foundation (Backpack Drive)
• Mt. Diablo Unified School District
• Pittsburg Unified School District
• San Ramon Valley Unified School District

Impact of Implemented Strategies in Fiscal Years 2023 and 2024

The following section describes the impact of John Muir Health's community benefit investments in FY23 and FY24, based on its implementation strategies for the 2022 prioritized health needs. Select partnerships and programs are highlighted in the charts that follow.

Community Health Need: Behavioral Health	
Long Term Goal:	The entire community has access to behavioral and mental health programming, support and direct services to promote whole health and emotional wellness.
Intermediate Goals:	1.Increase access to alternative mental health workforce to include Community Health Workers and *Promotores* training programs. 2.Increase access to behavioral and mental health services that provide prevention, direct service and support for vulnerable individuals and families. 3.Increase violence prevention and resiliency programming for vulnerable communities.

Selected high impact strategy examples and outcomes

<u>Beyond Violence Program</u>**: Provide intervention and referrals to violence-related trauma victims to prevent recidivism and provide support services for full recovery.** **Partner organizations include Center for Human Development, Family Justice Center, One Day at a Time and RYSE Center.**
• In 2023 and 2024, there were a total of 127 individuals who consented to receive Beyond Violence services at the following partner nonprofit organizations: RYSE Center in Richmond, One Day at a Time (ODAT) in Brentwood, Center for Human Development (CHD) in Concord and Family Justice Center in Antioch and Richmond. • Expanded age eligibility criteria, via partnership with Family Justice Centers for Antioch and Richmond service areas, to include any person over the age of 15.

Family Justice Centers of Contra Costa (FJC): Provide survivors of interpersonal violence with 1) system navigation services to address community and family safety; and 2) provide and connect to mental health services.

- In 2023 and 2024, FJC received 9,318 referrals for client navigation services in East, Central and West County.
- During the two-year period, FJC provided client navigation services to 6,584 individuals.
- On average, 92% of clients reported an increase in safety, 91% of clients reported an increase in their abilities to advocate for themselves, 86% of clients reported an increase in protective factors and resilience.
- In 2023 and 204, 6,584 clients were screened for, and 1,135 clients were connected to, mental health services.

Fred Finch Youth and Family Services: Provide linguistically appropriate direct mental and behavioral health services at no cost to low-income and uninsured individuals to include Mobile Health Clinic Saturday Clinic in Brentwood, Antioch Unified School District high schools and continuation schools, and Beyond Violence partner organizations (Center for Human Development and One Day At a Time).

- In 2023 and 2024, a total of 356 individuals were provided mental health counseling services for a total of 3,642 sessions.
- Services provided during the two-year period were as follows: Mobile Health Clinic (204 visits); Antioch High School (1,514 visits); Deer Valley High School (588 visits); Beyond Violence One Day At a Time and Center for Human Development (873 visits); Live Oak, Opportunity and Bidwell continuation schools (463 visits).

Mental Health Connections: Support and/or provide behavioral health intervention services to vulnerable adults with severe mental health illness through education and vocational rehabilitation support services.

- In 2023 and 2024, monthly attendance averaged 132 members representing a total of 437 total members who participated in program activities. Members spent a total of 80,326 hours participating in activities during the two-year period.
- Overall, 125 new members joined Mental Health Connections in 2023 and 2024; of those new members 58 were under the age of 30.
- 100% of members who indicated education in their career plan were referred to appropriate education resources and 244 members attended school and among them 19 returned to school.
- 100% of members who indicated employment in their career plan were referred to employment resources and 588 members were employed and among them 32 were placed in employment earning $16.50/hour on average.

Mentes Positivas en Acción (Positive Minds in Action) *Promotores* Program: Support the prevention and/or improvement in the levels of stress and depression in vulnerable communities through the Positive Minds in Action *Promotores* program offered by Monument Impact.

- In 2023 and 2024, a total of 28 (16 in-person and 12 virtual), 8-week courses were offered for a total of 257 participants that enrolled and began the MPA/MPA-Virtual program.
- 210 participants graduated from the program resulting in a graduation rate of approximately 82% over the two-year period.
- On average, 63% of participants reported reduced levels of stress and depression symptoms following completion of the class.

Monument Crisis Center: Support Monument Crisis Center's Senior Moments program to reduce social isolation and promote mental health among older adults.

- In 2023 and 2024, the Monument Crisis Center hosted a total of 38 Senior Moment events.
- 214 seniors were served in 2023 and 213 seniors in 2024 for a total of 3,089 encounters.
- Monument Crisis Center mailed a total of 5,320 Newsletters to seniors over the two-year period.

Village Community Resource Center (VCRC): Support the prevention and/or improvement in the levels of stress and depression in vulnerable communities through the Serena Mente *Promotores* Program.

- In 2023 and 2024, VCRC held a total of 24 Serena Mente Program groups with 263 program participants.
- Over the two-year period, 201 participants completed the Serena Mente Program.
- In total, VCRC held 8 follow-up groups with 126 total participants.
- A total of 22 stress reduction workshops were held in 2023 and 2024. 256 individuals participated in stress reduction workshops.
- VCRC held 58 external and 19 internal education classes for returning and new *Promotores* for a total of 462 cumulative training hours during the two-year period.

Community Health Need: Housing and Homelessness	
Long Term Goal:	The entire community has access to safe, healthy, and affordable housing.
Intermediate Goals:	1. Increase support of the Housing Navigators workforce and employment opportunities to communities prone to homelessness.
	2. Increase access to homelessness prevention resources to low-income and vulnerable communities.
	3. Increase access to housing resources and support services to provide unsheltered individuals and families with access to transitional supportive housing, respite care and recuperative housing, permanent supportive housing, and ultimately independent permanent affordable housing.
	4. Increase food security and decrease the food cost burden for low-income families to free up funds to cover housing costs.

Selected high impact strategy examples and outcomes

Alameda County Community Food Bank (ACCFB): Distribute nutritious food through 91 northern Alameda County partners and provide grants to partner agencies in northern Alameda County to increase their capacity to distribute free food during the extended economic recovery period.

- In 2023 and 2024, ACCFB provided capacity building grants to 6 partner agencies serving N. Alameda County communities, with a focus on agencies that are helping families to stay housed. Grants were provided for kitchen infrastructure, staffing and miscellaneous food distribution supplies.
- During the two-year period, ACCFB distributed 26,465,198 pounds of nutritious food in northern Alameda County communities, 52% of which was fresh food.

Goodness Village: Support for permanent affordable housing and supportive services for homeless and at-risk families and individuals.

- In 2023 and 2024, Goodness Village served a total of 34 individuals with all 28 homes currently occupied.
- There were a total of 6 new neighbors to Goodness Village in 2023 and 2024.
- During the two-year period, 34 neighbors were provided mental health support.
- In total, 34 neighbors participated in a vocational program and 12 neighbors secured a job.

Hope Solutions: Support for permanent affordable housing and supportive services for homeless and families and individuals at-risk of becoming unhoused.

- In 2023 and 2024, 866 households were newly housed, resulting in 1,308 unique individuals being housed.
- In 2023, 1,741 adults received case management services and in 2024, 2,000 adults received case management services.
- In 2023, 756 youth actively participated in the youth enrichment program and in 2024, 658 youth actively participated.
- In 2023 and 2024, 619 households prevented eviction for a total of 1,109 eviction prevention program participants.

Shelter, Inc.: Provide targeted, time-limited rental assistance to help vulnerable households in Contra Costa County remain safely housed, with an emphasis on households living in East County, West County, and the city of Concord. Program serves low-income households at immediate risk of becoming homeless due to a pending eviction.

- In 2023 and 2024, a total of 54 households, resulting in 135 individuals, were provided with emergency funds for back rent, utilities and other rental assistance.
- 100% of participants remained safely housed.
- In 2024, a total of 35 six-month and 25 one-year follow ups were conducted.

Support4Recovery: Provide housing grants to support people leaving treatment programs with a sober living environment, preventing many from living on the streets and becoming unsheltered.

- In 2023 and 2024, a total of 111 housing grants were provided to participants.
- A total of 108 individuals were placed at Contra Costa County sober living residences.
- On average, 87% of participants were successfully discharged from Support 4 Housing.
- During the two-year period 15 participants relapsed and 10 of those participants were re-referred and went to treatment.

Trinity Center: Support Trinity Center in serving homeless and working poor adult men, adult women and transitional age youth in Walnut Creek and Central Contra Costa County.

- In 2023, a total number of 1,390 unique individuals were served and 1,392 unique individuals were served in 2024.
- In 2023, the average daily attendance was 85 individuals and in 2024, Trinity Center had an average daily attendance of 78 individuals.
- In 2023 and 2024, Trinity Center provided a total of 90,467 services including 37,333 day shelter visits, 12,968 clothing closet visits, 13,213 shower visits, 5,972 loads of laundry, 4,201 case management sessions, 465 AOD counseling sessions and more.
- A total of 92 participants secured employment during the two-year period.
- A total of 267 participants received shelter and/or housing placements during the period.

White Pony Express (WPE): Support the food rescue program in East and Central Contra Costa County to provide food insecure individuals and families with fresh, nutritious foods that would have otherwise been thrown away.

- In 2023 and 2024, WPE recovered 7,906,234 pounds of food and delivered 7,534,172 pounds to 100 different partner organizations, composting the difference.
- WPE prevented 11,245 metric tons of CO_2 gas from entering the atmosphere during the two-year period.
- In addition to food bags, WPE also provided clothing, cold weather gear, hygiene kits and flowers at distribution sites.

Community Health Need: Healthcare Access and Delivery	
Long Term Goal:	Improve access to healthcare support services that are delivered with quality and compassion.
Intermediate Goals:	1.Increase access to linguistic services for vulnerable populations.
	2.Increase access to subsidized care and financial assistance for low-income and uninsured individuals.
	3.Increase access to comprehensive primary care, specialty care services, support services, and prevention programming for low-income, vulnerable, and uninsured individuals.

Selected high impact strategy examples and outcomes

Mobile Health Clinic: Provide comprehensive no-cost primary care for vulnerable adults who are unable to access care due to inadequate insurance coverage, availability of services, appointment timeliness or accessibility.

- Mobile Health Clinic served 629 unique individuals in 2023, and 560 unique individuals in 2024, for 1,856 encounters during Saturday Volunteer Physician Clinics and Wednesday/Thursday Residency Clinics.
- Approximately 84% of patients were non-English speaking and 100% of services met their linguistic needs (primarily Spanish).
- 99% of patients served were uninsured.
- Medi-Cal Enrollment services were offered alongside each Mobile Health Clinic, as eligibility criteria have expanded.

Mobile Dental Clinic: Provide health care support services for children in schools that serve low-income families through the Dental Collaborative of Contra Costa County, in partnership with La Clínica de la Raza, Lifelong Medical Care and Contra Costa Oral Health Program.

- Mobile Dental Clinic provided services to 466 unduplicated children in 2023, and 565 unduplicated children in 2024, for a total of 1,632 oral health services.
- 88 families were provided with insurance enrollment assistance.
- 3,781 children in schools that serve low-income families received dental assessments through the County Oral Health Collaborative. Of those children who received dental assessments, 3,711 children received fluoride treatments.

La Clínica Specialty Care Program: Provide specialty care services through the La Clínica Specialty Care program for vulnerable adults who are unable to access care due to lack of coverage.

- Providers were recruited to meet the needs of referred patients, which included gynecological oncologist, gynecologist, medical oncologist, diagnostic imaging, gastroenterologist, surgeon, cancer geneticist, and urologist.
- 100% of patients were uninsured.
- In 2023 and 2024, 373 patients were referred from La Clínica and among them, 353 were accepted into the Specialty Care Program (acceptance rate of 95%).
- For both years, a total of 8 cancer diagnoses were made.
- 946 procedures and interventions were provided throughout both years. The majority of interventions were consultations/follow-up with specialist and imaging.
- On average, 92% of patients completed treatment or received/scheduled for follow-up for both 2023 and 2024.

Operation Access: Provide specialty care services through Operation Access for vulnerable adults who are unable to access care due to lack of coverage.

- In 2023 and 2024, approximately 99% of Operation Access patients were uninsured.
- During both reporting years, the linguistic needs were met for 100% of patients, including Spanish, English, Portuguese, and Tagalog.
- On average, 48% of all OA services provided in CCC were provided by John Muir Health.
- A total of 255 surgical procedures were provided in a John Muir Health operating room during 2023 and 2024.
- A total of 9 new physicians were recruited during 2023 and 2024.
- On average, 97% of patients reported high levels of satisfaction with their OA experience.
- All patient quality of life improvement measures remained high.

Every Woman Counts Program: Provide free breast cancer screening for low-income women who are unable to access care due to lack of coverage.

- In 2023 and 2024, there were 69 Breast Cancer Screening Clinics.
- In 2023 and 2024, 100% of eligible patients were accepted to care. There were 435 breast cancer patients served in the clinics for a total of 512 encounters.
- On average, approximately half of women served at the breast cancer clinics (50%) were between ages 40-49. On average, 85% identified as Hispanic and 79% indicated a non-English language preference.
- 100% of patients were uninsured.
- Approximately 98% of breast cancer patients were provided with same day, "one stop" services, including: breast exams, diagnostic mammograms, ultrasounds and biopsies.
- In 2023 and 2024, the program provided 48 breast biopsies and 100% received biopsy results within 2 weeks. In total, 7 women were diagnosed with Breast Cancer and 100% were provided with appropriate follow-up to monitor their diagnosis.
- 100% of diagnoses were enrolled in the Breast and Cervical Cancer Treatment Program.
- 100% of patients received health education materials.

Meals on Wheels Diablo Region Fall Prevention Program (FPP): Provide access to health care support and care coordination services for vulnerable adults and seniors that address poor health outcomes, quality and satisfaction while improving efficiency through fall prevention safety trainings, home assessments and modifications, and education.

- In 2023 and 2024, FPP conducted 506 home assessments and completed home modifications for 100% of those assessed.
- In 2023 and 2024, approximately 62% of individuals had incomes at or below 200% FPL.
- FPP received 1,121 referrals over the two years and conducted 506 home safety assessments and modifications to the homes of older adults. Among these referrals, 128 people remained on the waitlist and 487 either declined services, moved to a different service or did not qualify for services.
- On average, 96% of seniors reported increased access to fall prevention services.
- Over two years, FPP conducted 46 education presentations, reaching 1,247 participants.
- On average, 94% of seniors reported increased knowledge about fall prevention, risk factors, and fall reduction strategies.
- Approximately 94% of seniors who received a home modification in 2023 and 2024 reported positive changes in their lives.
- 21 exercise sessions were offered with a total of 2,951 class encounters over the two years.

Junior Achievement of Northern California: Partner with Junior Achievement to lead Young Healers, a high school internship program for students interested in pursuing health careers, with a focus on underrepresented youth.

Spring Internship 2023 and 2024

- Number of students: 39 interns
- Number of JMH mentors/volunteers: 38
- Number of hours JMH mentors/volunteers participated in the program (training/preparation/deliver): 535 hours

Summer Internship Program 2023 and 2024

- Number of students: 56 interns
- Number of JMH mentors/volunteers: 39
- Number of hours JMH mentors/volunteers participated in the program (training/preparation/deliver): 455 hours

Young Healers Career Speaker Series 2023 and 2024

- Number of series offered: 10
- Number of students registered: 927 attendees
- Number of JMH mentors/volunteers: 10
- Number of hours JMH mentors participated in the program (training/preparation/delivery): 30 hours

CLIMB Mentorship Program 2023 and 2024

- Number of High School students: 14
- Number of College students: 16
- Number of 4th Year Medical Students: 18
- Number of 1st Year Residents: 5

Appendix 7: IRS Regulations Compliance Checklist

Section §1.501(r)(3) of the Internal Revenue Service code describes the requirements of the CHNA.

Federal Requirements Checklist	Regulation Section Number	Report Reference
A. Activities Since Previous CHNA(s)		
Describes the written comments received on the hospital's most recently conducted CHNA and most recently adopted implementation strategy.	(b)(5)(C)	Section #2
Describes an evaluation of the impact of any actions that were taken, since the hospital facility finished conducting its immediately preceding CHNA, to address the significant health needs identified in the hospital facility's prior CHNA(s).	(b)(6)(F)	Section #7
B. Process & Methods		
Background Information		
Identifies any parties with whom the facility collaborated in preparing the CHNA(s).	(b)(6)(F)(ii)	Section #4
Identifies any third parties contracted to assist in conducting a CHNA.	(b)(6)(F)(ii)	Section #4
Defines the community it serves, which: ● Must take into account all patients without regard to whether (or how much) they or their insurers pay for care or whether they are eligible for assistance. ● May take into account all relevant circumstances including the geographic area served by the hospital, target population(s), and principal functions. ● May *not* exclude medically underserved, low-income, or minority populations who live in the geographic areas from which the hospital draws its patients.	(b)(i) (b)(3) (b)(6)(i)(A)	Section #3
Describes how the community was determined.	(b)(6)(i)(A)	Section #3
Describes demographics and other descriptors of the hospital service area.		Section #3
Health Needs Data Collection		
Describes **data and other information** used in the assessment:	(b)(6)(ii)	
a. Cites external source material (rather than describe the method of collecting the data).	(b)(6)(F)(ii)	Appendices 1, 2, & 3
b. Describes methods of collecting and analyzing the data and information.	(b)(6)(ii)	Section #5
CHNA describes how it took into account input from persons who represent the broad interests of the community it serves in order to identify and prioritize health needs and identify resources potentially available to address those health needs.	(b)(1)(iii) (b)(5)(i) (b)(6)(F)(iii)	Section #5

Federal Requirements Checklist	Regulation Section Number	Report Reference
Describes the medically underserved, low-income, or minority populations being represented by organizations or individuals that provide input.	(b)(6)(F)(iii)	Section #5
a. At least one state, local, tribal, or regional governmental public health department (or equivalent department or agency) or a State Office of Rural Health.	(b)(5)(i)(A)	Section #5 & Appendix 3
b. Members of the following populations, or individuals serving or representing the interests of populations listed below. (Report includes the names of any organizations - names or other identifiers not required.)	(b)(5)(i)(B)	Section #5 & Appendix 3
I. Medically underserved populations	(b)(5)(i)(B)	Section #5 & Appendix 3
II. Low-income populations	(b)(5)(i)(B)	Section #5 & Appendix 3
III. Minority populations	(b)(5)(i)(B)	Section #5 & Appendix 3
c. Additional sources (optional) – (e.g. healthcare consumers, advocates, nonprofit and community-based organizations, elected officials, school districts, healthcare providers and community health centers).	(b)(5)(ii)	Section #5 & Appendix 3
Describes how such input was provided (e.g., through focus groups, interviews or surveys).	(b)(6)(F)(iii)	Section #5 & Appendix 3
Describes over what time period such input was provided and between what approximate dates.	(b)(6)(F)(iii)	Section #5 & Appendix 3
Summarizes the nature and extent of the organizations' input.	(b)(6)(F)(iii)	Section #5 & Appendix 3
C. CHNA Needs Description & Prioritization		
Health needs of a community include requisites for the improvement or maintenance of health status both in the community at large and in particular parts of the community (such as particular neighborhoods or populations experiencing health disparities).	(b)(4)	Section #6
Prioritized description of significant health needs identified.	(b)(6)(i)(D)	Section #6
Description of process and criteria used to identify certain health needs as significant and prioritizing those significant health needs.	(b)(6)(i)(D)	Section #5
Description of the resources potentially available to address the significant health needs (such as organizations, facilities, and programs in the community, including those of the hospital facility.	(b)(4) (b)(6)(E)	Appendices 5a, 5b, & 5c

Federal Requirements Checklist	Regulation Section Number	Report Reference
D. Finalizing the CHNA		
CHNA is conducted in such taxable year or in either of the two taxable years immediately preceding such taxable year.	(a)1	Sections #2 & #5
CHNA is a written report that is adopted for the hospital facility by an authorized body of the hospital facility (authorized body defined in §1.501(r)-1(b)(4)).	(b)(iv)	Section #8
Final, complete, and current CHNA report has been made widely available to the public until the subsequent two CHNAs are made widely available to the public. "Widely available on a web site" is defined in §1.501(r)-1(b)(29).	(b)(7)(i)(A)	By 12/31/2025
a. May not be a copy marked "Draft".	(b)(7)(ii)	By 12/31/2025
b. Posted conspicuously on website (either the hospital facility's website or a conspicuously-located link to a web site established by another entity).	(b)(7)(i)(A)	By 12/31/2025
c. Instructions for accessing CHNA report are clear.	(b)(7)(i)(A)	By 12/31/2025
d. Individuals with Internet access can access and print reports without special software, without payment of a fee, and without creating an account.	(b)(7)(i)(A)	By 12/31/2025
e. Individuals requesting a copy of the report(s) are provided the URL.	(b)(7)(i)(A)	By 12/31/2025
f. Makes a paper copy available for public inspection upon request and without charge at the hospital facility.	(b)(7)(i)(B)	By 12/31/2025

Further IRS requirements available:
- §1.501(r)-3(b)(iv) and (v): separate and joint CHNA reports
- §1.501(r)-3(d): requirements that apply to new hospital facilities, transferred or terminated hospital facilities, and newly acquired hospital facilities
- §1.501(r)-3(a)(2) and (c): implementation strategy requirements

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For more information, visit:
https://www.johnmuirhealth.com/about-john-muir-health/community-commitment.html

For more information, visit:
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