

Appendices

Appendix A: Previously Conducted Health Needs Assessments

Table A1. Previously Conducted Health Needs Assessments that were Reviewed
2016 Hospital Council of Northern and Central California’s Community Health Needs Assessment
2017 Oral Health Barriers for California’s San Joaquin Valley Underserved and Vulnerable Populations
2015 Alcohol and Other Drug Strategic Prevention Plan
2014 Maternal, Child and Adolescent Health Needs Assessment
2012-13 Chronic Disease Community Health Needs Assessment

Appendix B: List of Participants and Question Guides*Table B1. List of Key Informants by Sector*

Date (2019)	Name	Organization	Title	Sector
March 29th	Genoveva Islas	Fresno Unified School Board of Education	Board Member	Academic
April 12th	Carlos Huerta	Program Director	Fresno Pacific	Academic
April 12th	Matilda Soria	Fresno County Superintendent of Schools	Local Planning Council Coordinator	Academic
May 29th	Carole Goldsmith	Fresno City College	President	Academic
May 3rd	Phil Erro	West Fresno County Farmer	West Fresno County Farmer	Agriculture
May 10th	Anonymous	Fresh Food Packing		Agriculture
May 10th	Ryan Jacobsen	Fresno County Farm Bureau	CEO/Executive Director	Agriculture
March 22nd	Deb Nankeville	Fresno Business Council	CEO	Business
May 8th	Nathan Ahle	Fresno Chamber of Commerce	President and CEO	Business
May 15th	Tara Lynn Gray	Fresno Metro Black Chamber of Commerce	CEO	Business
March 8th	Keith Bergthold	Fresno Metro Ministry	Executive Director	Community Leader
March 29th	Cruz Avila	Poverello House	CEO	Community Leader
April 5th	Yolanda Randles	West Family Resource Center	Executive Director	Community Leader
April 12th	Lowell Ens	EPU Children's Center	CEO	Community Leader
April 12th	Artie Padilla	Fresno County Trauma & Resillience Network/ ENP	Chair, FCHIP	Community Leader

April 19th	Sandra Flores	Fresno County Preterm Birth Collective Impact Initiative	Program Director	Community Leader
April 26th	Sandra Celendron	Fresno Building Healthy Communities	Executive Director	Community Leader
April 26th	Cesar Lucio	Reading and Beyond	Operations Director	Community Leader
May 3rd	Selina De La pena	Fresno American Indian Health Project	CEO	Community Leader
May 10th	Angelita Echeveste-Duran	Sanger Family Resource Center	Resource Center Director	Community Leader
May 15th	Jane Thomas	Fresno EOC	Director of Health Services	Community Leader
May 15th	Zachary Darrah	FIRM (Fresno Interdenominational Refugee Ministries)	Executive Director	Community Leader
May 15th	Francine Oputa	Way Ministry	Pastor	Community Leader
April 5th	Emilia Reyes	First Five	Executive Director	Community Leader
June 10th	Preston Prince	Executive Director	Fresno Housing Authority	Government
June 27th	H. Spees	Office of Mayor	Director of Strategic Initiatives	Government
April 26th	Joe Prado	Fresno County Department of Public Health	Division Manager	Government
May 23rd	Susan Holt	Department of Behavioral Health	Deputy Director	Government
March 15th	Carla Stanley	Central Valley Black Nurses Association	President	Health
March 22nd	John Capitman	Central Valley Health Policy Institute	Executive Director	Health

March 22nd	Ivonne DeTorsosian	St. Agnes Health Literacy & Empowerment	Director of Community Benefit and Outreach	Health
March 29th	Tim Curley	Valley Children's Hospital	Director of Business and Government Relations	Health
April 19th	Rose Marie Amaral	Nutrition Education Obesity Prevention Program (NEOP)	Health Educator	Health
April 26th	Janet Paine	Anthem Blue Cross	Program Director	Health
May 8th	Gregory Hund	CalViva Health	CEO	Health
May 10th	Miguel Rodriguez	United Health Center of the San Joaquin Valley	COO	Health
May 15th	Steven Voon	Tzu Chi	Executive Director	Health
May 17th	Reyna Villalobos	Clinica Sierra Vista	Director of Community Programs	Health
June 5th	Alma Martinez	Diabetes Collaborative	Chair, FCHIP	Health
April 5th	Jerry Dyer	Fresno Police Department	Chief of Police	Law
April 5th	Traci Fritzler	Deputy District Attorney	DA's Office	Law
May 3rd	Mark Salazar	Police Captain	Fresno Police Department	Law
June 11th	Tai Hartman	Executive Director	Healthy Smiles	Oral Health
June 7th	Jane Banks	Director	Health Services of FUSD	Oral Health
June 10th	Paul Hsaio	Dental Provider		Oral Health
June 20th	Yenedit Mendez/ Oralia Maceda	Co-Executive Directors	El Centro Binacional para el Desarrollo Indígena oaxaqueño	Oral Health
June 12th	Mark Cave	Dental Director	Clinica Sierra Vista	Oral Health
May 9th	Carolina Ilic/Jeff Long	City of Fresno/Handiride	Planning Manager	Transportation
May 17th	Moses Stites	Fresno Council of Government	General Manager	Transportation

Table B2. Type of Focus Groups and List of Partner Organizations that Contributed to the Recruitment of Participants and Venues

Type of Focus Group (FG)	Invited Participants/Organization	Champion Organization (If applicable)
Stakeholders: Community Partners (2 focus groups)	Fresno American Indian Health Project Poverello House West Family Resource Center Centro la Familia Fresno Building Healthy Communities EPU Children’s Center California Health Collaborative Fresno Economic Opportunities Commission (EOC) Sanger Family Resource Center Stone Soup Fresno Youth Leadership Institute The Fresno Center Westside Family Preservation Services Network AMOR Fresno Barrios Unidos Reading and Beyond Fresno Interdenominational Refugee Ministries (FIRM) Street Saints Faith in the Valley Nutrition Education Obesity Prevention Program (NEOP) Fresno County Preterm Birth Collective Impact Initiative PIQE	
Stakeholders: Law and Civil Service	American Civil Liberties Union Northern California California Rural Legal Assistance Foundation City of Fresno Police Department District Attorney’s Office Fresno County Police Department Legal Aid Agency- Central California Legal Services	

	*The National Alliance on Mental Illness was also asked to join based on their work building Crisis Intervention Team with law enforcement	
Stakeholders: Academic	Fresno City College Fresno County Superintendent of Schools Fresno State University Fresno Unified School District Fresno Pacific University	
Stakeholders Health	Adventist Health CalViva Health Central California Asthma Collaborative Central Valley Health Policy Institute Clinica Sierra Vista Community Medical Diabetes Collaborative FirstFive Fresno County Department of Public Health Kaiser St. Agnes Health Literacy & Empowerment United Health Center of the San Joaquin Valley	
Oral Health Focus Groups		
Oral Health Older Adults 65+	West Fresno Family Resource Center PACE	West Fresno Family Resource Center
Oral Health Adults 35 to 64 years old	Reading and Beyond Fresno City College Cedar Courts	Cedar Courts (Fresno Housing Authority)

Oral Health Needs of Children	Susan B. Anthony Elementary School	Susan B. Anthony Elementary School
Oral Health needs for Children with disabilities	Garfield School Reading and Beyond Loretta’s Little Miracles Break the Barriers EPU	EPU
Oral Health of Young Adults (22 years old - 35 years old)	Fresno City College North Fresno Church Pink House Reading and Beyond The Word Community Church Young Valley Professionals	
Vaping Focus Groups: Parents of Middle School Youth		
Vaping	Terronez Middle School West Fresno Middle School Parlier Junior High School Mendota Middle School	Terronez Middle School West Fresno Middle School Parlier Junior High School
Disadvantaged and Vulnerable Populations Focus Groups with Community Members		
LGBTQ+	Barrios Unidos Common Space Fresno State’s Gender and Cultural Center	

	My LGBTQ+ The Living Room	
Homeless	Poverello House Rescue Mission	Rescue Mission
Youth (Mentors)	Big Brothers Big Sisters Boys and Girls Club Boys and Men of Color Ivy League Project Women Empowered from Fresno Barrios Unidos Youth for Christ Youth Leadership Institute	
Low-income housing	Parc Grove Commons Cedar Courts	Cedar Courts
Foster Youth	Central California Social Welfare Evaluation, Research and Training (SWERT) Center City without Orphans Court Appointed Special Advocates (CASA) Family Builders Foster Care FSU Renaissance Scholars FUSD Foster Youth Support Youth for Christ	
SE Asian & Pacific Islander women and senior men/women	The Fresno Center Stone Soup Fresno Southeast Asian Community Task Force Kings Winery Medical Clinic FIRM	FIRM
Adults with disabilities	Center for the Blind Deaf and Hard of Hearing Service Center Fresno City College's Disabled Students Programs and Services	Resources for Independence Central Valley

	<p>Fresno State Students with Disabilities National Alliance on Mental Illness Resources for Independence Central Valley The Arc Fresno/Madera Counties</p>	
<p>55-65 older adults</p>	<p>Alzheimer’s Association Building Healthy Communities Central Valley Food Bank Centro la familia Clovis Senior Activity Center CSFU Diocese of Fresno Every Neighborhood Partnership Excellent Parent University First Five Fresno COG Fresno Madera Area Agency on Aging Fresno Rescue Mission Fresno Unified School District Holistic Center Mosqueda Center PACE Pre-term Birth Initiative RICV Solar Maintenance Pros Inc DBA The Retired and Senior Volunteer Program/Hands on Central California Valley Children’s Wells Fargo Corporate Philanthropy & Community Relations Group Workforce Connection</p>	

Ex-offenders or Immediate family of ex-offenders	COSA Focus Forward	COSA
Latino Immigrants (1st and/or 2nd generation)	Consulate of Mexico Centro Binacional para el Desarrollo Indígena Oaxaqueño (CBDIO) Cultiva la Salud Fresno Barrios Unidos	Mi Familia Vota
Syrian Refugees (first generation)	American Friends Service Committee, the Pan Valley Institute	American Friends Service Committee, the Pan Valley Institute
Native Americans	FAIHP	FAIHP
Place-Based Focus Groups with Community Members		
Community 1: Huron (rural)	City of Huron Huron Police Department Keenan Community Center Housing Authority in Huron United Health Care in Huron Huron Boys and Girls Club F.C.E.O.C. Huron Head Start Chestnut High School Huron Middle School	

	<p>St-Frances Cabrini Catholic Iglesia Bautista de la Comunidad Iglesia Renuevo Espiritual</p>	
Community 2: Pinedale (Urban)	<p>Pinedale Community Center Pinedale Community Association National Hardware Supply, LLC Pinedale Water District Fresno County Library in Pinedale Pinedale Boys and Girls Club Pinedale History Project Saint Agnes Roman Catholic Church Assembly of God - Pinedale Community of Fellowship</p>	
Community 3: Calwa	<p>Calwa (Urban)</p> <p>California Rural Legal Assistance Centro La Familia Calwa Elementary School Calwa Recreation & Park District Calwa Neighborhood Association Rapto Divino Calwa United Methodist Church United Apostolic Church</p>	
Community 4: Parlier	<p>Parlier (rural)</p> <p>United Health Centers Comprehensive Youth Services Parlier Boys and Girls Club Housing Authority in Parlier Delores Foundation WIC Agency Migrant Center Senior Center</p>	Parlier Unified School District

	<p>City of Parlier Department of Public Health - CalFresh Healthy Living Program Valley PBS (Ready to Learn Program) in Parlier</p>	
<p>Community 5: Blackstone</p>	<p>Heaton Elementary Susan B. Anthony Elementary Lowell Elementary Every Neighborhood Partnership Lowell Community Development Corporation Pregnancy Care Center Fresno City College Youth For Christ First Presbeteriayn WestCare Fresno EOC Fresno Center for Nonviolence</p>	
<p>Community 6: Mendota</p>	<p>Mendota (rural) Mendota Unified School District City of Mendota Centro La Familia AMOR (Alliance for Medical Outreach & Relief) California Health Collaborative (Path Project) Mendota Boys and Girls Club Housing Authority in Mendota Richard Health & Associates Westside Youth KIND (Kids in Need of Defense) RCS Fresno (Rape Counseling Services)</p>	
<p>Community 7: Sanger</p>	<p>Sanger (rural) City of Sanger - Parks and Recreation Department (Sanger</p>	

	<p>Community Center) Sanger Senior Center Sanger Community Task Force United Health Centers Comprehensive Youth Services - Sanger Family Resource Center Sanger Parlier Boys and Girls Club Fresno County Library - Sanger Housing Authority - Sanger Sanger Unified School District Department of Public Health - Cal Fresh Healthy Living Program Delores Foundation Proteus WIC Agency</p>	
Community 8: El Dorado	<p>El Dorado (Urban) El Dorado Park Community Development Corporation (CDC) Boys and Girls Club - Pinedale Stone Soup Fresno Reading and Beyond office in El Dorado Park Fresno Interdenominational Refugee Ministries (FIRM) office in El Dorado Park Turning Point St. Paul Catholic Newman Center Fresno State's Nursing Program</p>	Wesley United Methodist Church
Community 9: Central City	<p>Central-City (Urban) Hidalgo World Impact Community Center Valley Dream Center</p>	Hidalgo World Impact Community Center
Community 10: Southeast Fresno	<p>South-East Fresno (Urban) The Fresno Center</p>	The Fresno Center
Community 11: Southwest Fresno	<p>South-West Fresno (Urban)</p>	

	<p>Building Healthy Neighborhoods Every Neighborhood Partnership Parks and Recreation Housing Authority-Legacy Commons West Family Resource Center Edison High School District 3 City of Fresno Office Fresno EOC Local Conservation Corps Westside Church of God Saint Rest Baptist Church Street Saints, Barrios Unidos Rising Star Boys and Girls Club</p>	
--	---	--

Table B3. List of Community Feedback Meetings

<u>Geo/Group</u>	<u>Attendees</u>	<u>Work Grp</u>	<u>Total Surveys</u>	<u>Sp. Surveys</u>
Huron	7	6	6	6
Sanger	17	2	16	6
Calwa	4	0	4	3
Southeast	14	8	13	7
El Dorado	7	6	5	0
Pinedale	12	7	12	3
Mendota	18	9	16	10
Blackstone/Central City	25	5	23	13
Parlier	18	7	17	12
Southwest	12	6	12	5
Special Groups 1	9	2	7	0
Special Group 2	7	6	7	1
Stakeholders & KI's	21	0	21	0
All Participants	171	64	159	66

Appendix C: Identifying Place-based Need

Table C1 shows the 11 community sites that were selected to conduct a place-based focus group. These sites were selected by assessing the CalEnviroScreen version 3, regional opportunity index, and measures collected from the American Community Survey. The CalEnviroScreen demonstrates that percentile rank for every census tract in the state of California. Based on the CalEnviroScreen scores, the state redistributes money to census tracts ranked in the top 25% of the CES score. All 11 communities selected in Fresno County meet this criterion and are considered disadvantaged by SB 535. Among the 11 communities, SW City, Central City, Mendota, Parlier, Pinedale, and Blackstone are worse off than 95% of all of the communities across the state of California. The Regional Opportunity Index (ROI) scores are composite indicators of both place and people. The scores are standardized so that every unit change represent a standard deviation from the entire population. All of the census tracts are at least one standard deviation below their peers and communities like SW City, Mendota, and Huron are two standard deviations below. In other words, people living in SW City, Mendota, and Huron score worse on measures of poverty, education, and civic participation than 98% of all other communities.

Table C1. Indicators of socioeconomic status and pollution selected from the CalEnviroScreen version 3.0, Regional Opportunity Index (ROI), and the American Community Survey (ACS) by Census Tract, Fresno County, 2012-2017

	California	Fresno County	SW Fresno (93706)	Blackstone (93701)	Calwa (93725)	Central (93703)	SE Fresno (93727)	Pinedale (93650)	El Dorado Park (93710)	Sanger (93657)	Huron (93234)	Mendota (93640)	Parlier (93648)
Census Tract	-	-	2	6	12.02	28	29.03	44.04	54.09	62.01	78.02	83.02	85.02
Population	4636	4669	3167	6161	5936	5205	4329	3556	3560	2608	5269	6562	7923
CES 3.0 Percentile Rank	50	72.9	99	99	99	98	91	97	77	94	82	95	99
Pollution Burden Percentile Rank	50	72.5	99	98	99	80	67	94	56	73	61	73	93
Pop. Char. Percentile Rank	50	63.5	99	99	98	99	96	87	83	98	87	99	98
ROI: People z-score	-	-0.3	-2.2	2.43	-1.5	-1.9	-1.8	-1.4	-1	-1.4	-2.4	-2.2	-1.3
ROI: Place z-score	-	-0.4	-0.9	0.95	-2.3	-0.6	-0.8	0.8	-0.4	-0.8	-	-	-0.6

% below 150% FPL	36	50.7	86.8	89.5	70.7	80.2	80.6	65.1	63	79.2	88.4	87	74.7
% non US-Citizen	13	12	26	15	24	23	24	11	3	23	46	46	31
% less than HS diploma and Older than 25 years	18.8	27.1	42.3	46.9	52.3	57.4	47.9	29.2	14.7	54.5	67	65.6	54.6
% Linguistic Isolation	10	10	16.7	11.6	22.9	23.4	30.7	2.2	2.3	37.3	47.3	58	30.2
% living with a disability	10	12	13	10	12	13	19	20	21	7	8	7	7

In the state of California, San Francisco is the highest rated public transit use score of 80, according to Walk Score®. In Table C2, we show the walk, transit, and bike score according to Walk Score® for the geographic locations including in the current health needs assessment.

Table C2. Community scores of walk, transit, and bike (Walk Score®) by Community

	San Francisco, California	Fresno City	SW Fresno, 949 E Annadale Ave 93706	Blackstone, 2625 Merced St 93721	Calwa, 2486 South Page Avenue 93725	Central City, 1940 Hunter Ave #2 93703	SE Fresno, 5271 East Kings Canyon Road 93727	Pinedale, 501 West Alluvial Avenue 93650	El Dorado Park, 5344 North 4th Street 93710	Sanger, 1705 10th Street 93657	Huron, 16875 4th 93234	Mendota, 1282 Belmont Ave 93640	Parlier, 500 Tuolumne 93648
Walk	86	46	29	80	55	63	61	63	48	61	59	44	60
Transit	80	32	27	52	34	46	40	42	41	0	0	0	0
Bike	71	57	46	86	68	74	61	66	74	50	42	36	44

Figure C1 illustrates how the 11 communities selected for the CHNA compared to Fresno County as a whole as well as to the state of California by the indicators of the CalEnviroScreen version 3. Across all health indicators including asthma, low birth weight, and cardiovascular morbidity, the 11 geographies were worse than the rest of Fresno and California. Similarly, when considering socioeconomic indicators, the 11 geographies fared worse than Fresno and California across education, linguistic isolation, poverty, unemployment, and housing burden.

Figure C1. Population Characteristic Percentile Comparison of CA, Fresno, and Selected Underserved Fresno Census Tracts

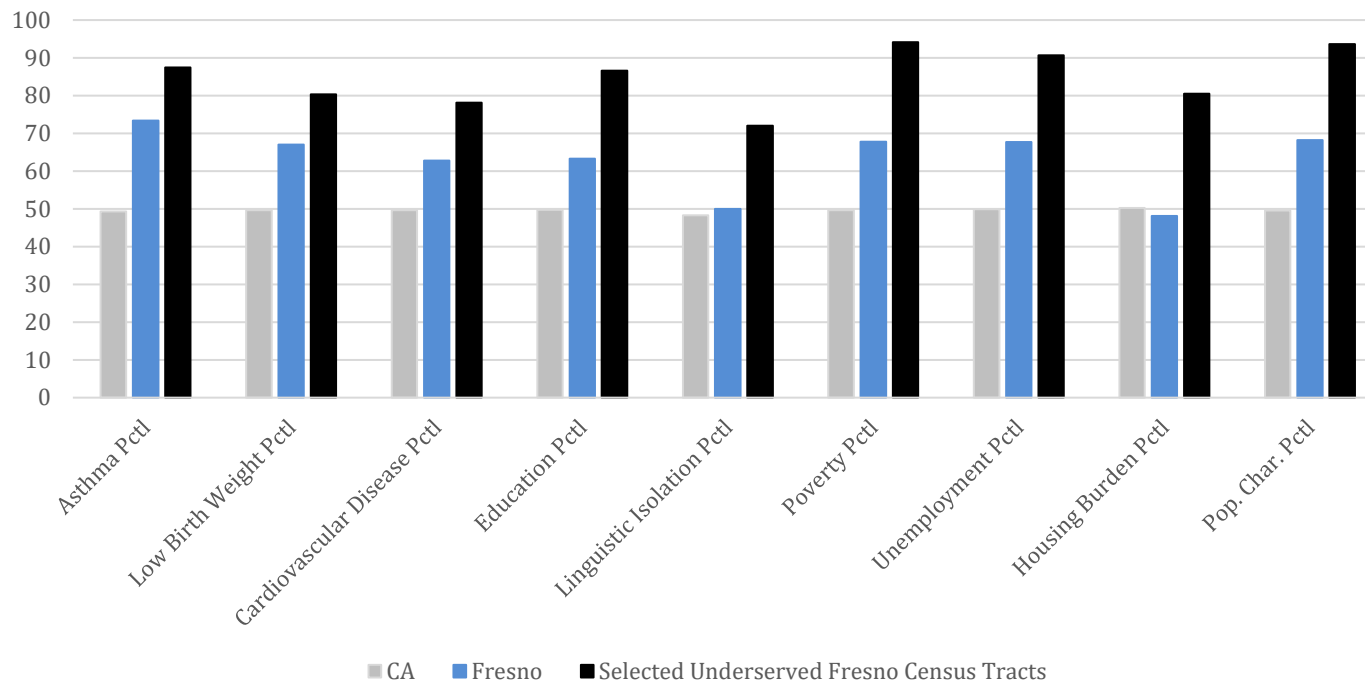
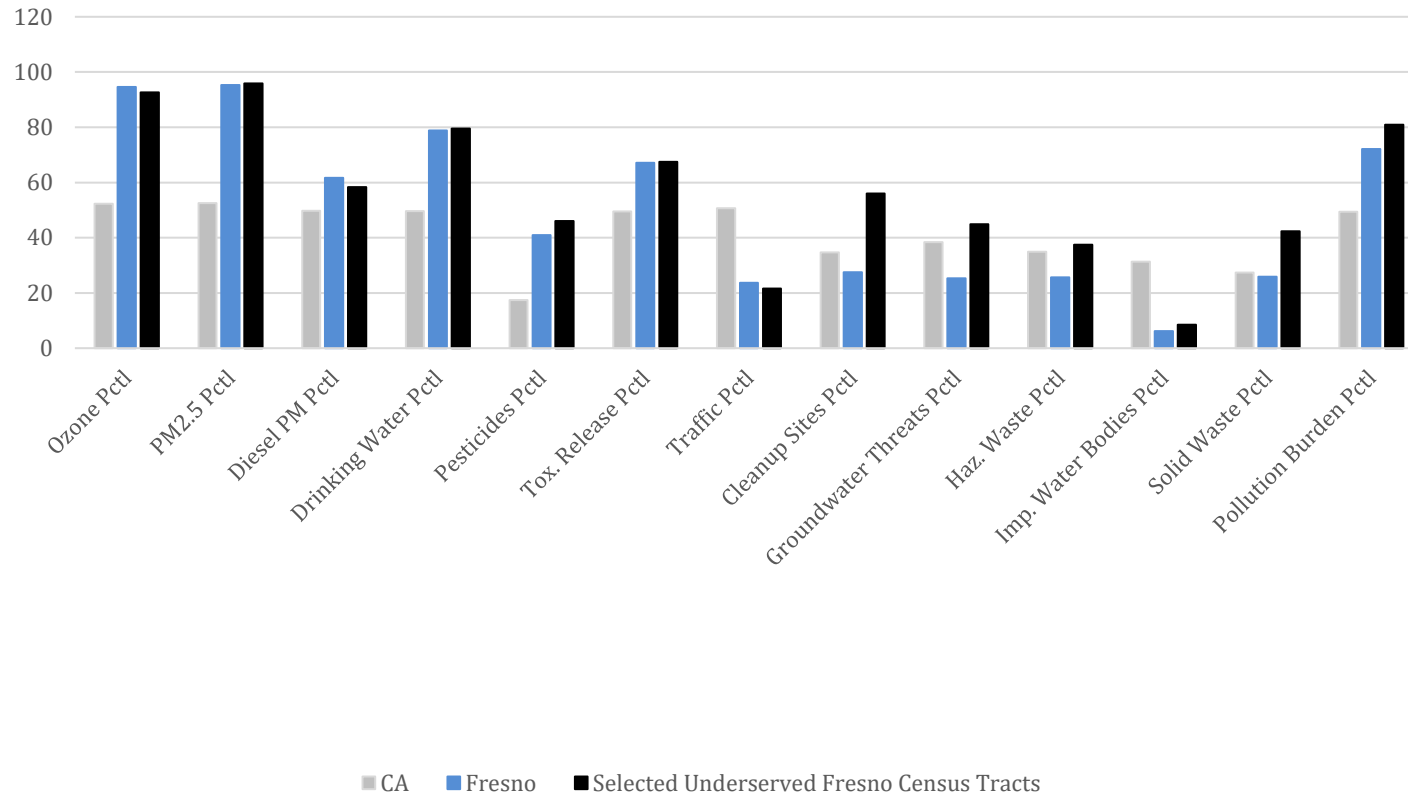


Figure C2 illustrates pollution across several media including water, air, and toxic waste sites by geography. Across the 13 measures of pollution, there are two measures where the state of California fairs worse when compared to the 11 geographies in Fresno. These two are traffic-related pollution and impaired water bodies. In terms of ozone, particulate matter 2.5, diesel particulate matter, drinking water, pesticides, toxic release sites, cleanup sites, groundwater threats hazardous waste sites, and solid waste sites, the 11 geographies fair much worse than the state of California.

Figure C2. Pollution Burden Percentile CA, Fresno, and Selected Underserved Fresno Census Tracts



Appendix D. Demographic and Socioeconomic Characteristics and Health Indicators

Table D1. Overall Demographic Information, Fresno County

Population		Net Change	% Increase	Population Density	
2011	2017			2011	2017
918,000	976,000	58,000	6.32%	155	163

Source: 2011, 2017 California Health Interview Survey

Table D2. Rate of Hospitalization by Major Diagnostic Criteria per 10,000 Fresno County Residents and Gender

Major Diagnostic Category	Gender	
	Female	Male
Certain conditions originating in the perinatal period	153.73	160.40
Complications of pregnancy; childbirth; and the puerperium	331.76	-
Congenital anomalies	3.96	4.68
Diseases of the blood and blood-forming organs	7.66	6.25
Diseases of the circulatory system	111.00	136.16
Diseases of the digestive system	96.79	81.31
Diseases of the genitourinary system	51.85	30.64
Diseases of the musculoskeletal system and connective tissue	47.89	43.20
Diseases of the nervous system and sense organs	24.89	23.36

Diseases of the respiratory system	72.37	74.77
Diseases of the skin and subcutaneous tissue	13.35	17.74
Endocrine; nutritional; and metabolic diseases and immunity disorders	47.68	41.06
Infectious and parasitic diseases	76.91	72.32
Mental Illness	76.46	84.53
Neoplasms	69.21	79.15
Residual codes; unclassified; all E codes [259. and 260.]	39.37	33.14
Symptoms; signs; and ill-defined conditions and factors influencing health status	2.96	2.23

Table D3. Rate of Hospitalization by Major Diagnostic Criteria per 10,000 Fresno County Residents and Race/Ethnicity

Major Diagnostic Category	Race/Ethnicity					
	White	Black/ African American	Hispani c/ Latino	Asian/ Pacific Islander	American Indian/ Alaskan Native	Other
Certain conditions originating in the perinatal period	129.46	174.27	169.95	168.63	142.96	125.46
Complications of pregnancy; childbirth; and the puerperium	126.06	205.01	185.16	181.63	164.40	108.91
Congenital anomalies	4.36	3.54	4.73	2.50	0.00	3.92

Diseases of the blood and blood-forming organs	7.36	23.44	5.81	4.89	2.38	3.49
Diseases of the circulatory system	200.59	216.73	76.61	92.48	138.19	110.65
Diseases of the digestive system	117.03	110.58	78.11	52.33	100.07	68.83
Diseases of the genitourinary system	60.75	55.51	32.25	24.45	54.80	30.06
Diseases of the musculoskeletal system and connective tissue	91.80	51.75	23.89	16.64	66.71	31.80
Diseases of the nervous system and sense organs	37.46	36.27	17.41	12.38	11.91	26.57
Diseases of the respiratory system	107.33	157.46	51.37	51.60	85.78	51.84
Diseases of the skin and subcutaneous tissue	22.47	23.66	13.21	4.58	23.83	6.53
Endocrine; nutritional; and metabolic diseases and immunity disorders	57.14	77.18	38.22	24.45	76.24	28.75
Infectious and parasitic diseases	114.99	100.63	53.14	58.15	64.33	49.66
Injury and poisoning	130.72	98.19	58.28	37.45	73.86	64.04
Mental Illness	98.92	168.74	53.27	32.35	102.45	121.11
Neoplasms	51.76	47.99	28.01	28.50	33.36	27.88
Residual codes; unclassified; all E codes [259. and 260.]	3.61	4.42	1.86	2.18	0.00	3.49
Symptoms; signs; and ill-defined conditions and factors influencing health status	28.47	26.10	9.03	9.05	7.15	5.23

Appendix E: Place-based Focus Groups Themes

Needs identified in place-based focus groups across all communities

Healthcare System. Across all communities, themes of healthcare coverage, access to care, and quality of care emerged. All communities expressed the lack of quality healthcare professionals in their neighborhood. In terms of the healthcare system, all communities expressed the lack of coverage through public and private insurance types and the lack of quality care at every level of the health care system. Southeast Fresno expanded on these themes to include the need for cultural humility in health services as well as the need to improve health literacy through the communication of materials.

Participants in all focus groups identified healthcare coverage, access to care, and quality of care as barriers to seeking care. Community members expressed that their insurance coverage is not adequate in terms of copays and deductibles. Many of the residents shared that their salary is too high to qualify for health support, but also too low to comfortably afford health and general living expenses. Access to care was a theme throughout all focus group discussions.

“My husband had a toothache and he's barely going to see the dentist but it's been two months, we go there because that's where they accept Medi-Cal and low-income.” - Huron

The lack of specialists, dentists, pharmacists, mental health services, and Medi-Cal acceptance rates are too low. Participants expressed that waiting periods are too long in both scheduling appointments and in the actual waiting room. Furthermore, participants noted that offices are open for a limited amount of hours during the day making it difficult to access services. When the patient visits their primary care physician and asks for a referral to a specialist, this request is often delayed or denied. All focus group participants expressed a disconnection from the healthcare system. Fresno County is an environment with a low number of healthcare facilities and providers as well as some of the highest rates of poor health in the state of California, all of which contribute to the disconnection between patients and physicians. Focus group participants expressed a lack of trust in providers and the overall healthcare system and a lack of health professionals who demonstrate care and compassion for their patients.

“There are very few specialists... you have to drive very far to see a specialist and [wait a] very long time to be seen.” -Blackstone

Participants in all place-based focus groups expressed the lack of continuity of care where the patient and physician-led team are jointly involved in ongoing health care management. The services provided are not streamlined and not easy for the patient to navigate, understand what they qualify for, or where to go for follow-up visits. All communities expressed the lack of quality healthcare

professionals in their neighborhood. Southeast Fresno expanded on these themes to include the need for cultural humility in health services as well as the need to improve health literacy through the communication of materials.

"The doctor doesn't take the time to talk to the patients and find out from the patient what's wrong with them but they right away make a big list of what they need to do but they don't even know what the patient went in for and they come out being angry." Parlier

Economic Stability. In rural areas, themes emerged of employment and income. Rural community members work in the agricultural sector with low wages and seasonal employment opportunity. In the urban areas of Fresno City, financial investment, housing stability, and high cost were central concerns of community residents. The majority of earning go to daily living expenses and many urban community members expressed not having enough money to pay bills.

Neighborhood and Built Environment. Across all geographic areas there was a consistent and clear expression for the development, improvement, and maintenance of housing, transportation, safety, parks, walkability, environmental conditions, and access to healthy food options. Most focus groups discussed the lack of transportation especially school buses for children and the poor road conditions. Children have to walk far to get to school and usually along roads where there are no sidewalks. There is a need for pedestrian crossing, paths, sidewalks, and ADA compliance for accessibility to seniors. All focus groups expressed environmental hazards as major needs for public health improvement. The poor air quality, pesticides, and water contamination were the three areas of most need.

"I have another concern about my children, we wish we had school buses for the kids because they have to walk too far even when it's raining or when it's really hot. They walk more than two miles. This is the only school so that's why the kids are always late." -Parlier

Education. Focus groups across neighborhoods identified varying educational needs. Southwest and southeast Fresno expressed place-based educational needs including lack of dissemination and higher education opportunities. Participants noted that there is a lack of pathways to higher education to disrupt the cycle of poverty.

"I think the main thing is education. If we had 4 years college, everybody had four years of college, we'd have nice homes around here. But [we] work in agriculture so you have the lowest income possible and we feed the rich people and we can't even buy the vegetables that we pick. That's bad." Southwest Fresno

Community and Social Context. Across all communities, strong themes of social cohesion, social support, discrimination, civic participation emerged. Community members spent a lot of time and gave much thought to this area. The themes that developed were grounded in a strong sense of community. Community members described that social cohesion among community members as a direct

result from a lack of support systems and discrimination. Community members living in urban areas expressed a need for transparency in civic engagement and the incorporation of community members asks.

Participants were asked to rank the social determinants of health in order from greatest priority to lowest. Figure 20 shows the ranking of the social determinants of health for all of the participants of the place-based focus groups. Among the 145 individuals who participated in these sessions, 58 voted the health care system as the highest priority area. The second highest voted priority area was economic stability (n=37) followed by built and physical environment (n=27), education (n=15), and social and community context (n=8).

Table D1 shows a comprehensive list of the priority areas and topics discussed across all of the geographic focus groups. The priority areas are presented in order from most important to least based on community members’ ranking of the social determinants in Figure 15 where the priorities areas are 1) healthcare, 2) economic stability, 3) neighborhood and built environment, 4) education, and 5) community and social context.

Table E1. Summary of Themes and Needs from Place-based Focus Groups

Broad Narrative Across Communities	Priority Area
<p>1) Healthcare System Across all communities, themes of healthcare coverage, access to care, and quality of care emerged. All communities expressed the lack of quality healthcare professionals in their neighborhood. In terms of the healthcare system, all communities expressed the lack of coverage through public and private insurance types and the lack of quality care at every level of the health care system. Southeast Fresno expanded on these themes to include the need for cultural humility in health services as well as</p>	<p>Healthcare coverage</p> <ul style="list-style-type: none"> • Community members expressed unaffordable copays and deductibles • Residents do not qualify for support because income is above limit and yet struggle to afford health and general living expenses <p>Access to care</p> <ul style="list-style-type: none"> • Lack of specialists, dentists, pharmacists, and Medi-Cal acceptance • Limited office hours • Lack of mental health services • Patient requests for referral are generally declined • Lack of transportation and patients have to travel long distances because there are no local facilities <p>Cultural humility</p> <ul style="list-style-type: none"> • Lack of culturally and linguistically appropriate services <p>Health literacy</p>

<p>the need to improve health literacy through the communication of materials.</p>	<ul style="list-style-type: none"> • Need for clearly understandable materials on health management and navigation • lack of eligibility awareness throughout the healthcare process <p>Quality of Care</p> <ul style="list-style-type: none"> • Lack of trust in providers and healthcare system overall • Lack of health professionals who demonstrate care and compassion • Lack of continuity of care where patient and physician-led team are not cooperatively involved in ongoing health care management • Services are not streamlined for community members to know where to go for help, what they qualify for, and someone to follow-up • Waiting periods are too long in both scheduling an appointment and in the waiting room
<p>2) Economic Stability In rural areas, themes emerged of employment and income. Rural community members work in the agricultural sector with low wages and seasonal employment opportunity. In the urban areas of Fresno City, financial investment, housing stability, and high cost were central concerns of community residents. The majority of earning go to daily living expenses and many urban community members expressed not having enough money to pay bills.</p>	<p>Lack of Stable Economic Opportunity</p> <ul style="list-style-type: none"> • Employment opportunities are inconsistent due to seasonality of agricultural sector and low wages impact housing and affordable health care <p>Financial investment/support</p> <ul style="list-style-type: none"> • Blackstone and SW Fresno indicated a lack of investment and business development • Urban Fresno cited a lack of financial support to cover cost of rehabilitation services <p>Housing stability/affordable housing</p> <ul style="list-style-type: none"> • Inner city areas including El Dorado, SW Fresno, Central City consistently noted that unaffordable housing was a primary concern and is evidenced by increased rent, homelessness, and a lack of opportunities to afford the cost of living
<p>3) Neighborhood and Built Environment Across all geographic areas the there was a consistent and clear expression for the development, improvement,</p>	<p>Quality of housing</p> <ul style="list-style-type: none"> • Lack of utility series such as water shutting down without notice • Need for greater landlord responsibility <p>Transportation</p>

<p>and maintenance of housing quality, transportation, safety, parks, walkability, environmental conditions, and access to healthy food options.</p>	<ul style="list-style-type: none"> • Lack of public transportation including school buses and poor road maintenance was reported in most groups • Children have to walk too far to school due to a lack of buses <p>Parks and safety</p> <ul style="list-style-type: none"> • A lack of outdoor safe spaces • Lack of parks and current parks need investment • Poor lighting <p>Walkability</p> <ul style="list-style-type: none"> • There is a need for pedestrian crossing, paths, sidewalks, and ADA compliance for accessibility to seniors <p>Environmental conditions</p> <ul style="list-style-type: none"> • Proximity to pesticides • Water quality contamination concerns of pathogens and chemicals • Poor air quality due to factory chemicals, toxins, and farming pesticides. • Poor sanitation in regard to sewage and trash/litter. <p>Access to healthy food options</p> <ul style="list-style-type: none"> • Too many fast food restaurants in near proximity without alternative options • Food procurement is difficult due to the distance of grocery stores
<p>4) Education Focus groups across neighborhoods identified varying educational needs. Southwest and southeast Fresno expressed place-based educational needs including lack of dissemination and higher education opportunities.</p>	<p>Quality Education</p> <ul style="list-style-type: none"> • SW and SE Fresno expressed the need for local educational opportunities <p>Pipeline to Higher education</p> <ul style="list-style-type: none"> • There is a lack of pathways to higher education that will help to disrupt the cycle of poverty
<p>5) Community and Social Context Across all communities, strong themes of social cohesion, social support, discrimination, civic participation</p>	<p>Discrimination</p> <ul style="list-style-type: none"> • Environmental injustice in the distribution of water air pollution • Law enforcement discriminate against African-Americans, homeless, and the poor

<p>emerged. Community members spent a lot of time and gave much thought to this area. The themes that developed were grounded in a strong sense of community. Community members described that social cohesion among community members as a direct result from a lack of support systems and discrimination. Community members living in urban areas expressed a need for transparency in civic engagement and the incorporation of community members asks.</p>	<ul style="list-style-type: none"> • Unequal distribution of funding with a disregard for low-income communities <p>Social cohesion</p> <ul style="list-style-type: none"> • Lack of communication between residents and institutions • City neglect results in low morale for community members • There is a need for investment in spaces that promote social interaction • Lack of engagement for youth <p>Support system</p> <ul style="list-style-type: none"> • Continuing existing programs, commitment and support from local elected officials to develop quality community spaces • Lack of long-term investments in underserved neighborhoods • Lack of communication channels with law enforcement • Lack of resources for individuals with substance abuse problems, homelessness, legal counseling • Lack of navigators that connect children and adults with special needs • Lack of information of where funding is going to address neighborhood needs • Collaboration and communication across communities to understand what works and does not work <p>Civic participation</p> <ul style="list-style-type: none"> • Voting booths are systematically closed and not easy to access
---	--

Rural and Urban Communities Included in the Health Needs Assessment

Table E2 shows which communities were considered rural or urban by population density. Among the 11 communities, 7 were urban cores within the city limits of Fresno and 4 were in rural parts of the county.

Table D2. Place-based Focus Groups for Fresno County Community Health Needs Assessment

Census Tract	Zip Code	Neighborhood	Rural or Urban
6019000200	93706	SW City	Urban
6019002800	93703	Central City	Urban
6019008302	93640	Mendota	Rural
6019008502	93648	Parlier	Rural
6019006201	93657	Sanger	Rural
6019001201	93725	Calwa	Urban
6019002903	93727	South East Fresno	Urban
6019004404	93650	Pinedale	Urban
6019007802	93234	Huron	Rural
6019005409	93710	El Dorado Park	Urban
6019000600	93701	Blackstone	Urban

The following table shows the same priority areas listed in Table 5 and shows specific quotes from urban and rural communities that support the priority area. The priority areas are listed from most important to least important as voted by the focus group participants.

Table E3. Needs Suggested by Focus Group Participants by Priority Area and Geography

Priority Area	Urban Communities	Rural Communities
Health Care System		
<p>Health Care Coverage</p> <ul style="list-style-type: none"> • Community members expressed unaffordable copays and deductibles • Residents do not qualify for support because income is above limit and yet struggle to afford health and general living expenses 	<p>“Medication - It takes a while to get medication.” (Central City)</p> <p>“Insurance does not cover all medication; medication coverage is very low.” Central City³²</p> <p>"Some medications are not covered by insurance, so it's hard to get the medications." South East Fresno -³² "</p> <p>"The doctor, they cannot provide medications for the elderly people so that's why they don't get well." Southeast Fresno -³²</p> <p>“Dentist- they are very expensive; they charge a lot.” Central City</p> <p>“Not being able to get all of their info to get coverage.” Blackstone³⁵</p> <p>“What we need is a clinic that sees undocumented people, we don’t have medical insurance and it’s very hard to been seen. “ Blackstone^{35,36}</p>	<p>“[For] the people [with] the allergies, now that the season is changing now, it is very difficult, and expensive for medications.” (Mendota)</p>

	<p>"Health coverage, I think that's a challenge because...I feel like with me I make enough (not to qualify) but not enough (to cover premiums) Southwest Fresno- 28, - 35</p>	
<p>Access to Care</p> <ul style="list-style-type: none"> • Lack of specialists, dentists, pharmacists, and Medi-Cal acceptance • Lack of mental health services • Patient requests for referral are generally declined • Lack of transportation and patients have to travel long distances because there are no local facilities 	<p>"Dentist- they are very expensive; they charge a lot." Central City 1</p> <p>"...Lack of doctors." Central City 1</p> <p>"Not all providers take Medi-Cal, there's not a lot of doctors easily accessible in the community." (Southeast Fresno)</p> <p>"It takes a long time to get a specialist, I tried to see a neurologist and phssst, unreal... I need to see a neurologist because my surgery went haywire, but to see a neurologist is challenging, I had to wait till August, that's almost a year!" (El Dorado)</p> <p>"The In my house I have a kid with special needs and I had a very bad experience with several doctors, so I prefer to go to Charlie Mitchell Children's Hospital." (Blackstone)</p> <p>"Two things there are very few specialists; you have to drive very far to</p>	<p>"The need for services, providers, and services, AMOR hopefully within the next two years they will have weekends, late services and more providers hopefully they are a one stop shop, Mental... and other services. But we still have United Health, but they have no x-rays so you have to call the way to Fresno. There are a lot of service calls, so you have to wait... fire department. There're small things like that that impact health. "Mendota 1 'Again, it comes to we are rural, not a lot of people want to come out this way and a lot of companies will not take insurances for Medi-Cal." (Mendota)</p> <p>"The doctors are only here once or twice a week." (Huron)</p> <p>"Because most of the community is farming, the income is naturally going to be lower, which makes it less appealing to health care providers to come, which is why there are long waits." (Mendota)</p>

	<p>see a specialist and very long time to be seen." (Blackstone)</p> <p>Two years ago, I fractured my wrist and I had to go all the way to Hanford and I was lucky enough to have access to transportation but that was difficult." (Central City)</p> <p>"Healthcare, because if you have an emergency with your kids, and you don't drive and it's after hours that is a problem." (Blackstone)</p> <p>"The challenges are too like CVS, they have those people they call you and they say your meds are ready. You go down and your meds are not ready, the doctors send it straight to them. They have you going back and forth, that's crazy. A lot of people don't have rides to be running back and forth." Southeast Fresno - 11</p> <p>"Depending on the type of insurance, detox for drugs, it's hard to get in, you have to get on a waiting list, you have to have transportation to get there at 6:00 in the morning, its tough." El Dorado -11, 18</p>	<p>"We are missing providers...." (Mendota)</p> <p>"(Need) More doctors" (Mendota)</p> <p>"There's no eye doctor here except for the UHC or dentists." (Parlier)</p> <p>"If you are pregnant and diabetic, they won't see you, they just refer you to a specialist in Hanford." (Huron)</p> <p>"Reproductive concerns, we used to have a planned parenthood then that closed down. I don't know if it was a Planned Parenthood? It was for women's health." (Parlier)</p> <p>"... Children with Special needs, specifically for specialists for them." (Mendota)</p> <p>"They need specialist(s), she went once (child) and (they) pulled 6 tubes of blood to run test(s) and didn't treat him (child) and ended up in the ER." (Huron)</p> <p>"There's no eye doctor here except for the UHC or dentists. " (Parlier)</p>
--	--	--

		<p>"If you are pregnant and diabetic, they won't see you, they just refer you to a specialist in Hanford." (Huron)</p> <p>"More providers to treat health as a whole." (Mendota)</p> <p>'More Specialists, more education for us." (Mendota)</p> <p>"We heard that Fresno City has a lot of funds that they are looking to invest, they should invest in Mendota. Transportation is very important" (Mendota)</p> <p>"The ambulance has to come from out of town." (Parlier)</p>
<p>Cultural Humility</p> <ul style="list-style-type: none"> Lack of culturally and linguistically appropriate services 	<p>"It was hard to navigate Cover California a lot of paperwork to fill, and I had to go to many offices. Also, not a lot of offices would accept it." (Blackstone)</p> <p>"Lack of cultural competence by the doctor." (Blackstone)</p> <p>"What we need is a clinic that sees undocumented people, we don't have medical insurance and it's very hard to be seen." (Blackstone)</p> <p>"Lack of cultural competence by the doctor." (Blackstone)</p>	

	<p>“Even though it may not be great, the hospital next to us, CMRC, it is close so we can drive” (Blackstone)</p> <p>“Linguistically Appropriate Services” (Blackstone)</p> <p>“Problems with Healthcare Language (barrier).” (Blackstone)</p> <p>”Yes, for the Healthcare, the language barrier.” (Blackstone)</p> <p>" I think we need more culturally and linguistically appropriate services that people can access" (Southeast Fresno)</p> <p>“Even though it may not be great, the hospital next to us, CMRC, it is close so we can drive” (Blackstone)</p>	
<p>Quality of Care</p> <ul style="list-style-type: none"> • Lack of trust in providers and healthcare system overall • Lack of health professionals who demonstrate care and compassion • Lack of continuity of care where patient and physician-led team are not cooperatively involved in ongoing health care management 	<p>"I have gone to so many doctors to find ones you can deal with because a lot of times they can't hear what you are saying." (El Dorado)</p> <p>“And You need doctors who are kinder and really explain what is making you sick.” (Blackstone)</p> <p>“Sometimes the care you receive is very cold [not nice].” Central City - 20</p>	<p>“My son is a little bit heavy and went to the doctor for an earache. And so right away the doctor said you need to go see a nutritionist, you need to go do this. But that’s not the reason for the visit. And the doctor didn’t even ask. My son was angry and now he doesn’t want to go to the doctor. They even make me feel bad.” (Parlier)</p>

<ul style="list-style-type: none"> • Services are not streamlined for community members to know where to go for help, what they qualify for, and someone to follow-up • Waiting periods are too long in both scheduling an appointment and in the waiting room 	<p>“Also, because they have so many patients, when they go see you in the exam room, they rush you and they do not allow you to ask questions- in the clinics. (Blackstone)</p>	<p>"The doctor doesn't take the time to talk to the patients and find out from the patient what's wrong with them but they right away make a big list of what they need to do but they don't even know what the patient went in for and they come out being angry." (Parlier)</p> <p>“There's a lack of respect.” (Mendota)</p> <p>“[Need] more one on one time with your doctor. You wait for so long and you get in they check your lungs prescribe you something, And then they're gone. You don't have enough time to have a conversation.” (Parlier)</p>
<p>Economic Stability</p>		
<p>Economic Opportunity</p> <ul style="list-style-type: none"> • Employment opportunities are inconsistent due to seasonality of agricultural sector and low wages impact housing and affordable health care 	<p>“ work in the fields is seasonal”(Calwa)</p> <p>“ because most of the people in this community work in the fields and the salary does not compare to others”(Calwa)</p> <p>“ A lot of people work in the fields and they don't have enough money for rent or their basic needs”(Calwa)</p>	<p>“I put poverty. Only because since we are in a place where most people rely most of their income on agriculture, so there sometimes where when they have work and sometimes when they don't. And if they don't, then having to go to different cities. They're not able to have transportation or they're not able to have insurance and they're not able to cover the cost of going to the doctor, getting a prescription.”(Parlier)</p> <p>“We need more jobs”(Sanger)</p>

		<p>“Yeah, more jobs, work”(Sanger)</p> <p>“Lack of employment” (Sanger)</p> <p>“Most of the people here have higher rates of working outside.” (Sanger)</p> <p>“We have the highest unemployment in nation in Sanger” (Sanger)</p>
<p>Financial Investment/Support</p> <ul style="list-style-type: none"> • Blackstone and SW Fresno indicated a lack of investment and business development • Urban Fresno cited a lack of financial support to cover cost of rehabilitation services 	<p>“The elected officials tend to overlook SW Fresno when it comes to investing, they are investing in other communities around like .. NE, NW instead of putting the money in SW Fresno. Even if you go up the street to Ventura , you could start to the see difference in, you can see that the investment in Southeast Fresno compared to Southwest Fresno.” (SW Fresno)</p> <p>“There has been small investments that came down from the State, like with the TCC ... Transformative Climate Communities .. from the Southwest pacific plant.....so there has been investments but that’s just a bandaid approach to it, to the bigger problem.” (SW Fresno)</p>	

<p>Housing Stability/Housing Affordability</p> <ul style="list-style-type: none"> • Inner city areas including El Dorado, SW Fresno, Central City consistently noted that unaffordable housing was a primary concern and is evidenced by increased rent, homelessness, and a lack of opportunities to afford the cost of living 	<p>Yes very common, There is not much opportunity for owning, and little opportunity for renting anything over three bedrooms” (El Dorado)</p> <p>“New senior and low income housing is coming, but houses that they can own” (Central City)</p>	<p>“Since I have section 8 and when I earn a little bit more, I’m a single mother...under section 8 my rent is \$754. I have under 18 kids and I’m a single mother. So that’s why I chose poverty. Can’t cover the bills and on top of that medical bills.” (Parlier)</p>
<p>Neighborhood and Built Environment</p>		
<p>Quality Housing</p> <ul style="list-style-type: none"> • Lack of utility series such as water shutting down without notice • Need for greater landlord responsibility 	<p>The housing is not very well kept because there's always roaches and insects that are there a lot of the time.” (SouthEast Fresno –2)</p>	<p>“Roaches, fleas, bedbugs.” (Huron – 2)</p>
<p>Transportation</p> <ul style="list-style-type: none"> • Lack of public transportation including school buses and poor road maintenance was reported in most groups • Children have to walk too far to school due to a lack of buses 	<p>“Transportation is a Physical Environment problem.” (Blackstone-7)</p> <p>“A majority of us walk.” (Calwa -7)</p> <p>“The lack of traffic signals.” (Calwa – 8)</p> <p>“A lot of traffic.” (Central City – 8)</p> <p>“The neighbor doesn’t teach kids not to run to the cars, especially when my husband is backing out of the house.” (Blackstone – 8)</p>	<p>“Transportation is a challenge for a lot of people.” (Huron -7)</p> <p>(Needing the most immediate attention and why?) “Transportation...” (Mendota - 7)</p> <p>"I have another concern about my children; we wish we had school buses for the kids because they have to walk too far even when it’s raining or when it’s really hot. They walk more than two miles. This is the only school so that’s why the kids are always late." (Parlier -7)</p>

	<p>"We need to fix all the potholes to get over there." (Southwest Fresno – 8)</p> <p>"We had a bus route and it cost 100k...but it had rules, you can't have a stop because you don't have sidewalks." (Southwest Fresno – 8)</p> <p>"The traffic light, that they need here, because there are a lot of accidents" (Calwa – 8)</p> <p>"Like the kids walk to school. There's no sidewalk, they got to walk on the road, there's no bike lane." (Southwest Fresno)</p> <p>"Lights or traffic signal also, as you can see the school is near. There are no traffic signal around. (Calwa)</p>	<p>"Every time I am coming from Fresno I am stressed from the traffic." (Mendota – 8)</p>
<p>Parks and Walkable Neighborhoods</p> <ul style="list-style-type: none"> • A lack of outdoor safe spaces • Lack of parks and current parks need investment • Poor lighting 	<p>"You know, we have our senior community too, they like to walk the trails as well." (Southwest Fresno – 19)</p> <p>"We need parks and paths." (South East Fresno – 19)</p>	<p>'It has affected our elderly people. You know because senior citizens that were able to walk are not. They're just staying home in wheelchairs because there's nothing to stimulate their self-esteem so they can go out walking again" (Parlier 18)</p>
<p>Environmental Conditions</p> <ul style="list-style-type: none"> • Proximity to pesticides • Water quality contamination concerns of pathogens and chemicals 	<p>(in response to the list of 7 conditions)</p> <p>"We need to know what causes all that." (Southwest Fresno – 25)</p>	<p>"The airplanes are flying and spraying and the kids are coming out of school." (Huron)</p>

<ul style="list-style-type: none"> • Poor air quality due to factory chemicals, toxins, and farming pesticides. • Poor sanitation about sewage and trash/litter. 	<p>"...We found that some people to get protein, they are fishing in the pond at Palm and Nees...everyone has gone fishing there for years , yes, but the algae there is unhealthy, ponds that are not connected to the river will grow algae as the weather warms up. As the algae gets bigger, it has been known to become a toxin, at which point the fish and water will become a toxin- do not let your kids or dogs swim or drink the water." (Pinedale – 25)</p> <p>(Concerns)"Water has too much lead and chlorine." (Calwa-25)</p> <p>" The water quality – because I notice I get a lot of itching." (Central City -25)</p> <p>"The water has a lot of chlorine." (Central City -25)</p> <p>Sometimes you get very itchy after you shower, you don't know if you're sick or the chemicals in the water. All the dryness on the skin" Pinedale -25 (most concern?)" Contamination";</p> <p>"A lot of pollution" Central City (Why Ranking #1?) "Physical Environment because of pollution."</p>	<p>"If the homes are not kept up to par, (there's) the mold." Southwest Fresno</p> <p>"The pesticides in the water and the air." (Parlier)</p> <p>"There's a lot of chemicals that you breathe in – not only kids – adults and kids, and everybody." (Parlier -26, -27)</p> <p>"That makes us have these reactions sometimes, we're just full of hives – just scratching and scratching because of the environment." (Parlier -27)</p> <p>"Air quality- too much contamination..." (Mendota-26)</p> <p>"...pesticides, all of them affect our health." (Mendota-27)</p> <p>"We are a farming community. So, everything that you are saying is impacting us because we are a farming community; animal control, pesticides, we are away from Fresno, we are rural..." (Mendota-27)</p> <p>"Whatever they spray in the orchards and all the fields, and we are surrounded by that." (Parlier -26, -27)</p>
--	--	--

	<p>(Blackstone-)</p> <p>(Most concerned) "Contamination and pollution." (Central City)</p> <p>"Chemicals, pesticides, over spraying, when it's (in the) air, the air carried the dust...it goes into the people's house and affects their health." (South West Fresno – 27)</p> <p>(Concerns)" The chemicals being used." (Calwa-27)</p> <p>(most concern?)" Contamination"; (Central City-27)</p> <p>"I live in [inaudible] and they are spraying, I cannot leave my house because they are spraying, and I have asthma that's why they should have organic chemicals so that we aren't breathing it in. It affects me..." (Central City -27)</p> <p>(Concerns)" The chemicals being used." (Calwa-27)</p> <p>"I live in [inaudible] and they are spraying, I cannot leave my house because they are spraying, and I have</p>	<p>"Also very important, us parents, we buy bottled water because the water from here is really bad." (Parlier - 25, - 37)</p> <p>"The water has the 1 2 3, chemicals that were used in the 2nd world war. They have not eliminated these issues. Right now there's people that I have spoken to that are 60 and 70 years old who have cancer they never drank nor smoked because those chemicals you know stay in your body and that's why a lot of children have so many mental deficiencies and we don't know the cause. No studies have been done but I think the water has a lot to blame." (Parlier 25, 37)</p> <p>"Now we have water fountains in the schools for kids to drink...I think they change those every 2-3 years. In the cafeteria, it's not for the water our kids are drinking, the water with the filter; it's only for the cafeteria." (Parlier - 25, - 37)</p> <p>"The kids are drinking, those public water fountains do not have filters, and they are drinking water straight from the faucet. Not like the ones that they have in the cafeteria. Those water fountains have filters that they change every 2-3 years, that is what I heard. It's only for them</p>
--	--	---

	<p>asthma that's why they should have organic chemicals so that we aren't breathing it in. It affects me..." (Central City)</p> <p>"A lot of pollution" (Central City)</p> <p>"Having old dumping grounds, ya know, labels as 'parks' that hurts this community." (SouthWest – 33)</p>	<p>there, not for all the kids." (Parlier - 25, - 37)</p> <p>"The water is contaminated, E-Coli broke out a while ago." (Huron – 25)</p> <p>"The pesticides in the water and the air." (Parlier)</p>
<p>Access to Healthy Food Options</p> <ul style="list-style-type: none"> • Too many fast food restaurants in near proximity without alternative options • Food procurement is difficult due to the distance of grocery stores 	<p>Too many fast food (restaurants)" (southeast Fresno – 22)</p> <p>"Access to nutrition so that they don't get diabetes." (Central City)</p> <p>"Supermarkets...are too far." (Calwa-23)</p> <p>"Yeah (Grocery prices) they are too high, you can go to the exact same store on the other side of town and it's lower" (Southwest Fresno -23)</p> <p>"Access to nutrition so that they don't get diabetes." (Central City)</p> <p>"They don't give that much fresh food and when they do it's already very wilted, and you cannot benefit very much from it...healthier food that is</p>	

	<p>good for your health." (Southeast Fresno – 24)</p> <p>"Access to nutrition so that they don't get diabetes." Central City</p>	
Education		
<p>Quality of Education</p> <ul style="list-style-type: none"> • SE and SW Fresno expressed the need for local educational opportunities 	<p>I put education because if you don't get a higher education, then you're only getting minimum wage and all you can afford is the bad stuff like unhealthy food and bad insurance coverage." (SE Fresno)</p> <p>"I think the main thing is education. If we had 4 years college, everybody had four years of college; we'd have nice homes around here. However, work in agriculture so you have the lowest income possible and we feed the rich people and we can't even buy the vegetables that we pick. That's bad. (SW Fresno)</p>	<p>"I have another concern about my children; we wish we had school buses for the kids because they have to walk too far even when it's raining or when it's really hot. They walk more than two miles. This is the only school so that's why the kids are always late." (Parlier)</p>
<p>Pipeline to Higher Education</p> <ul style="list-style-type: none"> • There is a lack of pathways to higher education that will help to disrupt the cycle of poverty 	<p>"For education we wish there was more English classes for adults, but they do not have childcare to help. Cesar Chavez is there for everybody, but there is no childcare so what are we going to do"(Blackstone)</p>	<p>"I think something that contributes more to this, a lot of us who are used to farm work, it's easy for us to move here because that's the type of labor that what we will find, even if we want to move anywhere else, because we have a lack of education we come back to farming."(Mendota)</p>

Appendix F: Vulnerable Populations Survey Results

Specific vulnerable and underserved populations were selected to participate in the CHNA. There were 13 vulnerable population focus groups and included LGBTQ, homeless, youth, low-income housing, foster youth, SE Asian & Pacific Islander, Adults with disabilities, older adults, ex-offenders, Latino immigrants, Syrian refugees, Native Americans, and Punjabi. Below are the results of the vulnerable population survey.

Key Findings Table F1:

- 58% of the participants were women
- 8% of the participants were Spanish speaking
- 11% were veterans
- There was diversity in the age groups represented in the focus groups with most of the participants being 35-44 years of age (26%).

Table F1. Frequency and Percent of Vulnerable Population Focus Group Participants by Demographic Characteristic

Demographic Characteristic	Frequency	Percent
Gender		
Man	54	39%
Woman	81	58%
Transgender woman	2	1%
prefer not to answer	2	1%
Language Spoken		
English	130	92%
Spanish	12	8%
Veteran Status		
Yes	14	11%
No	119	89%
Age Group in Years of Age		
18-24	9	7%
25-34	21	15%
35-44	35	26%
45-54	20	15%
55-64	26	19%
65 and older	26	19%

Figure F1 displays the household income of 135 individuals who participated in the vulnerable population focus group sessions. This figure suggests that the intended low-income population did participate in the health needs assessment process.

Key Findings Figure F1:

- 60.7% (n= 82) of the sample had a household income less than \$30,000 per year.
- 22.2% (n= 30) of the sample had a housed hold income between \$30,000 and \$49,999 per year.

Figure F1. Number of Vulnerable Population Focus Group Participants by Household Income (n= 135)

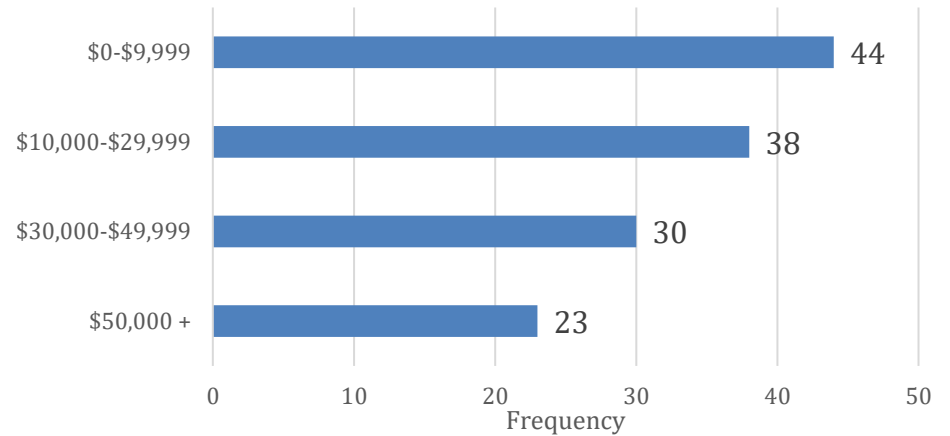
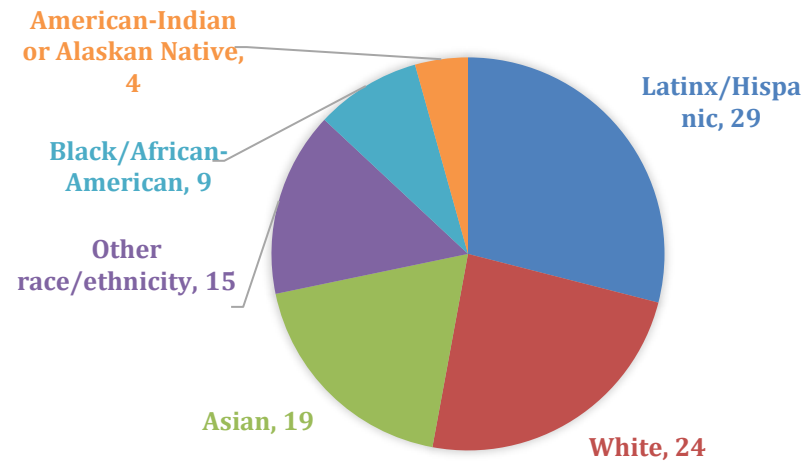


Figure F2. Percent of Race/Ethnicity



Vulnerable Populations Key Themes

Key Findings Youth:

- Participant discussed the lack of school-based health centers to establish continuity of holistic care for all youth in Fresno County.
- On the other hand participants talked about the lack of knowledge on how to navigate the healthcare system.
- Participants expressed the lack of accessible mental health services within the school system including the lack of counselors.
- Participants discuss the need to reduction of policing against youth of color and change the narrative of youth from low-income communities.
- Participants added that in Fresno there is a lack of safe open spaces for youth with 24/7 access.
- Participants discussed youths' inability to obtain appointment for physicals without parents' consent.
- Participants expressed the lack of genuine engagement of youth in early decision-making process.
- Participants added that they see a lack of mental health providers who openly announce they work with youth.

Key Findings Native Americans:

- Participants expressed the lack of cultural awareness and celebration in schools' materials about vulnerable populations.
- Participants discussed the continuous stigmatizations of vulnerable populations. For example, questioning by law enforcement when picking medicine.
- Participants expressed the lack of trust to decades of disfranchisement.
- Participants expressed recurrence of historical trauma.
- Participants talked about the lack of cultural sensitivity and acceptance of Native American medicine and importance of spirituality.
- Participants discussed the unequal access to financial aid among Native communities. Some tribes in Fresno count with more financial resources than others creating disparities in access to higher education.
- Participants expressed the lack of pathways to retain professionals in the valley, especially Native American health professionals.

Key Findings Low-income Housing:

- Participants expressed that they would like to have more information and resources brought to where they live, especially mental health resources/services.
- Participants discussed the lack of teachers in public schools that provide high quality education.

Key Findings LGBTQ+:

- Participants discuss the need for pathways towards higher education to create economic independence for the LGBTQ+. Participants mentioned that youth need awareness about these resources as sharing with parents/caregivers their identify increases their risk of expiring homelessness and find themselves without the financial support from their parents/caregivers.
- Participants expressed that among the LGBTQ+ community there is a lack of opportunities for safe social interactions.
- Participants among the LGBTQ+ expressed the stigmatization towards their community. Participants expressed that there is hyperawareness about surroundings and understanding what the safe spaces where they can feel accepted and the places that will not be healthy or stressful.
- Participants discussed the high rates of intimate partner violence.
- Participants talked about the lack of community events to destigmatize health issues among the LGBTQ+ community.
- Participants expressed that in Fresno there is a lack of mental health providers who openly announce that they provide services to the LGBTQ+.
- Participants discussed the lack of trust and fear of rejection by their medical provider. Participants expressed that this is harmful for their health. Some participants shared that they drive far away to visit Plan Parenthood because the participant felt that the staff and providers have the capacity to talk about health topics related to sexual health.
- Accessible health literacy related to sexual health including awareness of HIV prevention treatment.
- Providers that specialize on LGBTQ+ health needs.
- Participants discuss the need for law enforcement in areas in Fresno where the LGBTQ community live.
- Participants expressed the lack of grocery stores in areas were the LGBTQ+ community live.
- Participants expressed the need to raise awareness about abuse and bullying of the LGBTQ community in elementary schools.
- Participants discussed creating access to mental health screening and HIV screening at sites commonly used by the large population for example Walmart.

Key Findings Latino Immigrants:

- Participants discussed the lack of relationship building and unity among Latino Immigrants.

- Participants expressed the lack of dissemination of information that is layperson language among community members and local CBOs.
- Participants discussed the possibility of receiving travel reimbursement for visiting the doctor
- Participants alluded to the lack of patients' rights information. Participants would like to know more about their rights in a layperson language.
- Participants expressed the lack of local institutions that announce their support for the LGBTQ+ community.
- Lack of collaboration and support from local businesses supported by the LGBTQ+ community

Key Findings Homeless:

- Participants discussed that destruction of their property by law enforcement.
- Participants mentioned that outreach workers should receive training to gain capacity on how to approach and engage homeless community where they are.
- Participants mentioned the need for additional Homeless Engagement Resource Outreach (HERO) teams that provide housing support in Fresno.
- Participants expressed the lack of transportation to help them search for a home.
- Participants discussed the lack of designated areas where the homeless community could live.
- Participants expressed the need for accessible hygiene products, restrooms, and showers. The homeless community could be engaged in the maintenance of these facilities.

Key Findings Foster Youth:

- Participants expressed the need for child trauma education for foster parents. Many parents do not know how this affects the youths' current behavior. This is much needed as foster parents' lack of awareness of foster youth's health and emotional needs. For example, the impact of housing stability.
- Participants discussed the complex relationship that they have with social workers. Some participants expressed in many instances social workers gives different messages than foster parents regarding the youth's behavior. In other instances, parents discussed the lack of speedy answer and support from social workers regarding decisions about the health and education welfare of foster children. For example, getting approval for youth to participate in physical activities, how children can receive health care, approval for participation in community events, etc.
- Participants expressed challenges fostering children that are associated with local gangs.

- Participants voiced that more awareness needs to happen around foster parents' rights, so youth are aware of their rights and responsibilities.
- Lack of protocols so foster youth can have access to care.

Key Findings Ex-Offenders:

- Participants agree that financial support through grants should be made available for organizations that work with individuals who are release from prison/jail. Some of the services would include helping them build social skills.
- Participants expressed the need for support network and resources for individuals prior to release to help them reintegrate society.
- Participants agreed that social services should be working with incarcerated individuals who will be released so there is not time gap after they are released.
- Participants mentioned that within the prison system there is lack of counselors who could provide information about available resources. This could be addressed with classes for individuals with a release date.
- Participants said that all documents that they receive should utilize layperson language.
- Participants mentioned the need for a guidance book for ex-offenders of where to find resources and how to navigate the systems based on lived experience.
- Participants mentioned that they would like to be civically engage but there is a lack of volunteer opportunities.

Key Findings Adults with Disabilities:

- Participants agreed that adults with disabilities a more likely to experience caregiver abuse. Participants expressed the need for inspections of mental health facilities to prevent care giver abuse
- Participant expressed the lack of supportive assisting living within housing for disable individuals. They said that more needs to be done to educate and collaborate with homeowners to enable affordable housing for adults with disabilities.
- Participants said that they experience stigmatization from other communities that are not disable. Participants envision the utilization of social media to raise awareness.
- Participants expressed the lack of the American Disabilities Act (ADA) implementation by local and chain businesses. Participants suggested the integration of certification in business licensing. In addition, participants said that health professionals need ongoing education about the ADA.
- Participants mentioned the lack of training law enforcement has to deal with individuals with PTSD.

- Participants expressed that lack of engagement of adults with disability in decision-making process especially around issues regarding the build environment. The situation is similar with CBOs and other non-profit organizations. Participants alluded to the lack of a coalition that could potentially be working closely with local elected officials to address their priorities.
- Participant agree the lack of a regional hub where adults with disabilities can share their learned experiences navigating the healthcare system

Key Findings Adults 55-65 Years Old:

- Participants agreed that there is no clear concise community agenda that outlines seniors' policy priorities.
- Participants said that in Fresno they need business hubs that cater to older adults as is a growing population
- Participants expressed the lack of Senior Centers to foster opportunities for safe social interaction and health information is disseminated.
- Participants expressed the need for coordination of care. Extended hours at health centers could positively affect their ability to see providers.
- Participants mentioned the need for resources to improve language access.

Key Findings Syrian Refugee

- Participants discussed the lack of employment for refugee Syrian professionals.
- Participants mentioned the lack of resources and support to understand the American systems, especially for individuals that are interesting in starting their own business.
- Participants discussed the lack language access in the healthcare system.
- Participants mentioned that engagement of the Syrian refugees in projects on affordable housing.
- Participants pointed to the need to understand their individual rights.
- Participants mentioned the need to improve case management.
- Participants alluded to the need of improving the referral system.

Key Findings South East Asian

- Participants discussed the lack of language access services in the health care system.
- Participants expressed the lack of resources within the neighborhoods.
- Participants mentioned the need for language access in the local CBOs.

- Participants expressed the need for assistance from the Health Department to fill out documents.
- Participants talked about the need for recreational activities for the elderly.
- Participants discussed the need for U.S citizen preparation classes.

Key Findings Punjabi Sikh

- Participants expressed the need for Covered California enrollment representatives at sites where the Punjabi community feel comfortable.
- Participants mentioned the lack of specialists covered by Covered California.
- Participants discussed the lack of resources for the Punjabi Sikh community because of held presumptions of their socioeconomically status.
- Participants said that all documents that they receive should utilize layperson language.
- Participants discussed the need for culturally and language appropriate health literacy.
- Provide resources and information on how to navigate the health system for college students.
- Participants discuss the importance of a support network for individuals that try to seek help and disclose substance abuse.

Appendix G: Vaping and Tobacco

Four focus groups were conducted with parents of middle and high school students in Fresno County. The aim was twofold; to educate parents about vaping and vaping devices and to collect qualitative data about vaping among participants. The focus group guide was developed to gain more understanding about the level of awareness of vaping and vaping devices, the population targeted for marketing vaping products, perception about tobacco retailers and industry, and the general support for potential policy change. The analysis of the collected data revealed the following findings:

- Lack of awareness about vaping devices and how they are used.
- Participants believe that tobacco industry and tobacco retailers target their children and youth in general to market their products.
- Participants were highly concerned about the ease of accessibility to vaping products and the associated potential addiction. They also believe that vaping is a gateway for smoking cigarettes and drug use.
- Parents were concerned about the impact of vaping on their kids' school performance.
- Some parents expressed lack of trust in governmental action to control this issue.

Most participants expressed the need for immediate action and policies to control the accessibility of those products to their children.

Appendix H. Oral Health Focus Groups

Table H1 illustrates the main themes and codes that emerged in both the key informant interviews and the focus groups. Table H2 presents the top identified oral health needs priorities.

Detailed oral health needs assessment findings are presented in a separate report.

Table H1. Oral Health Needs and Emergent Themes

Key Informants	Focus Groups
<p>Challenges to Oral health care</p> <ul style="list-style-type: none"> ❖ System <ul style="list-style-type: none"> ▪ Cost ▪ Direct and indirect costs ▪ Coverage ▪ Limited coverage ▪ Low reimbursement rate ▪ General and oral health disconnection ▪ Lack of medical and dental provider collaboration ▪ Lack of system integration ▪ Education of link between nutrition and oral health • Entities compete with one another • Lack of appropriate linguistic, racial, and cultural reach-out <ul style="list-style-type: none"> ▪ Provider ▪ Business model ▪ Limited capacity to serve large number of patients ▪ Do not accept patients with public insurance 	<p>Challenges to Oral health care</p> <ul style="list-style-type: none"> ❖ System <ul style="list-style-type: none"> • Access to quality and timely services • Appropriate coverage <ul style="list-style-type: none"> • Limited coverage • • Cost of dental care <ul style="list-style-type: none"> • Competing priorities • Dental provider <ul style="list-style-type: none"> • Ineffective communication • Lack of trust • Lack of specialized dentists treating special needs kids • Shortage in dentists • Discrimination <ul style="list-style-type: none"> • Against public insurance beneficiaries • Stigma related to having a child with special needs/disability • Easier access to unhealthy food • Lack of access to information • Lack of proper funding allocation • Lack of support system • Transportation
<p>❖ Personal/interpersonal</p>	<p>❖ Personal/interpersonal</p>

<ul style="list-style-type: none"> • Lack of knowledge of link between nutrition and oral health • Lack of role modelling • Literacy • Self-care • Sense of self worth • Socio-economic status • Parents do not value oral health 	<ul style="list-style-type: none"> • Bad experience (self or others) • Competing priorities • Language and cultural barrier • Fear to go to dentist • Negative personal behavior • Patient health condition • Perception about importance of oral health
<p>Facilitators to oral health care</p> <ul style="list-style-type: none"> ❖ System <ul style="list-style-type: none"> • Services availability • Collaboration with other entities ❖ Personal/interpersonal <ul style="list-style-type: none"> • High income • Literacy 	<p>Facilitator to oral health care</p> <ul style="list-style-type: none"> ❖ System <ul style="list-style-type: none"> • Access to healthy food • Accessible services • Availability of information • Medical dental integration • Proper funding allocation • Provider availability • System support ❖ Persona/interpersonal <ul style="list-style-type: none"> • Being insured • Community engagement. Being informed • Good experience (self or others) • Motivation • Parental involvement/supervision • Set as a good parental example • Positive patient. Parent oral health behavior
<p>Suggested needed changes</p> <ul style="list-style-type: none"> ❖ System <ul style="list-style-type: none"> • Insurance coverage • Improve access to services • Integration of oral and general health • Workforce diversity 	<p>Suggested needed changes</p> <ul style="list-style-type: none"> ❖ System <ul style="list-style-type: none"> • Better dental coverage • Supportive policy changes • Lower the cost of dental care • More funding • More services for children

<p>Personal/interpersonal</p> <ul style="list-style-type: none"> • Patient behavioral change 	<ul style="list-style-type: none"> • Need for medical dental integration • Need for more providers • Need for support system • Access to healthy food <p>❖ Organizational</p> <ul style="list-style-type: none"> • School involvement • Provide more information • Special programs for kids with special needs <p>Personal/interpersonal</p> <ul style="list-style-type: none"> • better patient-provider communication
--	--

Table H2. Top Four Priorities of Oral Health Needs as Expressed among Key Informants (KI) and Focus Groups Participants (FGs) (Ranked from most to least frequently coded)

Top four priorities of needs among KI	Top four priorities of needs among FGs
<p>The need for more collaboration between entities in terms of medical-dental integration as well as organizational collaboration</p>	<p>Lowering the cost of dental care and expanding covered services</p>
<p>The need for more oral health education to the public in a culturally and linguistically appropriate standards</p>	<p>Improve the quality offered by Medi-Cal Dental program in terms of covered services and provider-patient communication</p>
<p>Improvement in patients’ oral health behavior and the way they value oral health care</p>	<p>Increase the availability of specialized dentists particularly for children with special needs</p>
<p>Lowering the cost of dental services and expanding covered services</p>	<p>Improve flow, dissemination of, and access to information about oral health</p>

Appendix I: Community Feedback on Initial Findings

Findings from the focus groups were presented to geo-specific, vulnerable populations, and stakeholders/key informants. The presenters spoke about each of the eight to ten priority areas along with graphs depicting state comparisons for a visual demonstration of disparity rates in Fresno County. Participants were shown preliminary results of the secondary and primary data analysis and asked to express the extent to which the preliminary results reflected their actual needs. Participants were then encouraged to take a stand in their communities via various capacities.

Along with group-specific PowerPoint presentations of the summarized findings, demographic forms, surveys, and factsheets were distributed to each of the groups. A *Vulnerable Populations* brief was distributed at the place-based community feedback meetings.

Survey Results included a data summary identifying the number who attended, signed up for the work group, completed a survey, and the Survey Monkey analyses.

There were 159 respondents in total, which included 14 representatives of vulnerable populations, 21 stakeholders, and 124 residents across all geo-focused areas.

Place-Based Groups

At 75%, there were three times as many females than males who answered the survey. All ages from 18 to 65+ were represented with the highest concentration between the ages of 25 and 64 years old. Exactly 80% identified as “Hispanic or Latino”, 8.7% “White or Caucasian”, 4.35% “other”, 2.61% “Black or African American”, 2.61% “Asian/Asian Pacific Islander”, and 1.75% “American Indian or Alaska Native”.

Nearly half of the respondents had not participated in the community meetings or focus groups, yet priorities were mostly affirmed. About 90% of all respondents “agreed” or “strongly agreed” with the priorities that were identified, 11% remained neutral, and only 1% did not agree.

40 to 46% expressed interest in attending meetings on each identified priority area and 10 to 28% said that they would read materials and inform others. Similar results were found with regard to organizing initiatives as well as civic and advocacy activities at an average of about 18% per topic. An average of around 6% said that they had no interest or time for priorities 1 through 4; Economic Opportunity (1),

Access to Quality Care, (2), Affordable Housing (3), and Environmental Conditions (4). 8.33% were not willing to spend time on transportation (5) 3.4% each for Quality education (7) and Access to health food (8) but only 1.74% were not interested in making time for priority number (6), Parks and Safety.

Additionally, several participants mentioned issues that should have been on the list of priorities: homelessness, gang violence prevention, mental health services, drug rehab, air pollution, underperforming schools, as well as safe lighting and surveillance. There were also a few one-time mentions of specific topics such as empty lots, dog laws, landlords, safe youth activities/hangouts, services for people with disabilities, and redlining.

Vulnerable Populations

At 65%, there were significantly more females than males who answered the survey. 50% of respondents were between the ages of 25-44 and the other half were between the ages of 55-65. Nearly a third of participants identified as “Hispanic or Latino”, a third “White or Caucasian”, and the other 1/3rd split equally across all other categories at exactly 7.69% each.

Nearly 1/4 of the Survey Monkey respondents in this group had not participated in the community meetings or focus groups yet there were none that completely disagreed. About 85% of all Survey Monkey Respondents “agreed” or “strongly agreed” with the priorities that were identified, 7.69 % remained neutral, and approximately 15% did not agree fully. Two additional priorities were said to be missing, half-mentioned subject matter surrounding education and nearly half about gang and drug prevention. One person mentioned mandatory training for healthcare providers and insurance companies and several mentioned green transportations and expressed the opinion that people would use public transportation if it were improved.

Timely access to health care was the only one topic out of ten that did not have anyone state that they were not interested in taking a stand for. Very few were able to help organize and lead initiatives. No one was interested in advocating for economic opportunity, access to healthy foods, or quality of housing however, more than ½ were willing to participate in meetings regarding economic opportunities and access to healthy foods while a little over 35% would attend meetings regarding housing. Half or more were willing to participate in meetings on both access to quality and timely health care. Exactly 50% would read materials and inform others on transportation, housing, cultural humility, and parks and outdoor spaces. 20 to 35% were willing to do the same.

Stakeholders

At 66.67%, twice as many females participated than did males. Nearly ½ identified as “Hispanic or Latino”, 24% “Asian/Pacific Islander”, 15% “White or Caucasian”, 10% “Other”, 5% “American Indian or Alaskan Native”, and there were none that identified as “Black or African American”.

Over ½ of the stakeholder group participated in a focus group, community meeting, or key informant interview. Close to 43% had not participated yet there were none that disagreed, 80% either “agreed” or “strongly agreed” with the identified priority areas and 20% were neutral. A few did mention that housing should have been on the list and one mentioned that the needs of those with disabilities should also be a priority. Several felt that mental health should be bumped up on the list and air pollution moved down. One participant mentioned that access to quality healthcare should be number one.

Appendix J: Solutions Recommended by Focus Group Participants

Solutions identified in place-based focus groups

Below is a list of priority areas identified by focus group participants as solutions to improve health. A complete list of themes and topics can be found in the Table J1.

1. Increase community organizing and advocacy efforts and develop unified community agenda that outlines priorities.
2. Increase employment opportunities and improve professional development.
3. Holistic health care coverage so for example eye, dental care and prescriptions are covered.
4. Develop an infrastructure that creates safety for pedestrians in underserved areas such as at street intersections and parks.
5. College readiness of children from underserved communities
6. Improve dissemination of information of existing resource in multiple formats.
7. Increase collaboration among local organizations
- 8.

Table J1. Solutions Recommended by Focus Group Participants

Focus Groups	Recommendations
<p>1) Health Care System</p>	<p>Health coverage</p> <ul style="list-style-type: none"> • Increase Medi-Cal reimbursement rates (system) • Holistic Health Care Coverage (system/organizational) • Improve coverage qualification process (system) • Increase coverage provided by employers (organizational) • Health care for all (system) <p>Access to coverage</p> <ul style="list-style-type: none"> • Increase mobile care clinic for residents in neighborhood (system/organizational) • Increase collaboration with organizations that provide dental and eye care (Organizational) • Sooner appointments and better appointment system (organizational) <p>Cultural humility</p> <ul style="list-style-type: none"> • Linguistically appropriate services (organizational) • Language access (organizational)

	<p>Health literacy</p> <ul style="list-style-type: none"> • Improve health literacy in early education (organizational) • Learn healthy cooking options (personal) • Understanding medication coverage (personal/organizational) <p>Quality of care</p> <ul style="list-style-type: none"> • Customer satisfaction surveys and provider surveillance/healthcare quality assurance (organizational) • Improve provider’s attitudes (personal) • Apply same standard of care among privately and publicly insured (system) <p>Provider availability</p> <ul style="list-style-type: none"> • Increase specialists, pharmacies, dentists, mental health professionals, and health care access points (organizational/system) • Retention of providers (organizational) • Substance and rehabilitation centers (organizational/system)
<p>2) Economic Stability</p>	<p>Employment</p> <ul style="list-style-type: none"> • Increase employment opportunities (organizational/system) • Higher wages (organizational/system) • Increase professional development (personal/organizational/system) <p>Housing stability</p> <ul style="list-style-type: none"> • Enable home ownership (organizational/system) <p>Housing stability</p> <ul style="list-style-type: none"> • Affordable low-income housing (system) <p>Financial investment</p> <ul style="list-style-type: none"> • Provide incentives for business development (system)
<p>3) Neighborhood and Built Environment</p>	<p>Quality of housing</p> <ul style="list-style-type: none"> • Better quality of housing (organizational/system) • Housing for the homeless (system) • Collaboration with non-profits to provide long-term solution (organizational) <p>Transportation</p> <ul style="list-style-type: none"> • Financial investment in transportation (system)

	<ul style="list-style-type: none"> • Individuals should increase carpooling (personal) • Increase school buses (organizational) <p>Safety</p> <ul style="list-style-type: none"> • Increase safety in neighborhoods, surveillance offered by the landlord, and increase pedestrian safety (personal/organizational/system) • Animal control for dogs (personal/organizational) • Increase collaboration between communities and law enforcement (organizational/system) <p>Playgrounds/parks</p> <ul style="list-style-type: none"> • Provide recreational activities for children (organizational) • Investment in parks, increase clean and accessible parks, increase city maintenance, and build more parks (organizational/system) <p>Activity Center</p> <ul style="list-style-type: none"> • Exercise area for adults and children (organizational/system) • Utilize existing sports centers/joint-use agreements (personal/organizational/system) • Increase indoors areas for recreational use (organizational/system) <p>Walkability</p> <ul style="list-style-type: none"> • Increase city maintenance of the walking trails/streets, fix sidewalks, better lighting, and public restrooms (organizational/system) • Access to basic amenities for community residents and homeless individuals (system) <p>Environmental conditions</p> <ul style="list-style-type: none"> • Increase air quality control through utilization of organic pesticides, decrease automobile pollution, enforcement of environmental laws and regulations, remove industrial business out of Fresno City, and remove commercial production of cannabis (system) <p>Access to foods that support healthy eating</p> <ul style="list-style-type: none"> • Increase local affordable department and grocery stores (organizational) • increase healthy fresh food for children in the school district (organizational) • Increase policies for nutritious foods in schools (system) • Food bank (organizational) • Increase farmer’s markets and grocery stores with nutritional food in food desert areas (organizational)
--	--

	<p>Water</p> <ul style="list-style-type: none"> • Access to safe water (system) • Increase water infrastructure (system) <p>Land distribution</p> <ul style="list-style-type: none"> • Redistribution of land if alleys are not utilized (system) <p>Health Policy</p> <ul style="list-style-type: none"> • Non-smoking laws (system)
<p>4) Education</p>	<p>Language</p> <ul style="list-style-type: none"> • Free linguistic classes (organizational) <p>Access to higher education</p> <ul style="list-style-type: none"> • College readiness of children from underserved communities (system) • Increase adult school through collaboration with local organizations (organizational) <p>Capacity of local professionals</p> <ul style="list-style-type: none"> • Capacity on best practices working with children with disabilities (organizational)
<p>5) Community and Social Context</p>	<p>Support system</p> <ul style="list-style-type: none"> • Collaboration with local organizations and with faith-based organizations (organizational) • Coordination among community residents (personal) • Place-based programming for children with disabilities (organizational) • Local government approval and support to bring resources (system) <p>Social Cohesion</p> <ul style="list-style-type: none"> • Develop support systems among neighbors, socializing activities, and community coexistence (personal/organizational) • Develop self-efficacy (personal) • Pass leadership skills to fellow residents (personal/organizational) <p>Community engagement</p> <ul style="list-style-type: none"> • Community organizing/advocacy, stay informed and participate (personal/organizational) • Dissemination of information and existing resources (organizational) • Develop community liaison (personal/organizational) <p>Civic participation</p> <ul style="list-style-type: none"> • Advocacy at the Capitol (personal/organizational)

	<ul style="list-style-type: none"> • Suffrage (personal) • Develop a community agenda (personal/organizational)
--	---

The following table shows the solution priority areas listed in Table J1 and shows specific quotes from urban and rural communities that support the priority area. The priority areas are listed from most to least important as voted by the focus group participants. As mentioned above, the priority areas are listed from greatest to least importance with respect to how focus group participants voted on the social determinants of health. In Table J1, we used a solution-based ecological model to show the level at which the solution exists, and this can be found in parenthesis next to the bulleted topic. There are three levels to the solution-based ecological model. 1 = system/policy which is the highest level. 2 = organizational. 3 = personal/individual which is the lowest level in the ecological model. For example, the first priority area is health care coverage and the bulleted topic is “increase Medi-Cal reimbursement rates” which is a system/policy level solution.


Table J2. Solutions (Quotes) Suggested by Focus Group Participants by Priority Area and Geography

Priority Area	Urban Communities	Rural Communities
<p>Health coverage</p> <ul style="list-style-type: none"> • Increase Medi-Cal reimbursement rates (system) • Holistic health care coverage (system/organizational) • Increase coverage provided by employers (organizational) • Health care for all (system) 	<p style="text-align: center;">Health Care System</p> <p>“Access and changes to qualifications.” (SW Fresno)</p> <p>“Being able to get to them because there are no medical facilities except sierra vista - that’s it. So being able to have access to them being able to qualify for programs regardless if you are a working parent. Or whatever, just adjusting the qualifications, because we all still need help.”(SW Fresno)</p> <p>“Also when there is a table that you go by to get charged for your medical, for any little money that you make, you come off the scale. We need a scale that is more accessible to everybody so everybody can get some medical insurance somehow” (Blackstone)</p> <p>“Husband who works in the fields has no insurance coverage. So, his employer should offer Insurance.” (Central City #2)</p> <p>“I got a health issue. They ought to be .. ya know like the library has a bookstore that goes on a vehicle .. they should be a medical staff which should through the neighborhood”(SW Fresno)</p> <p>“Mobile clinical vaccinations close by”(Calwa)</p> <p>“the vaccinations clinics to be brought here at the school” (Calwa)</p> <p>“Especially us as adults when one is sent to get a flu shot,</p>	

	<p>sometimes our clinics can not provide it.”(Calwa)</p> <p>“like the health center, that organization, can send buses for dental, vision and diabetes testing.”(Calwa)</p> <p>“Bring campaigns here to the community again. Dentist, we come to the same thing, Not only regular doctors but eye doctors”(Calwa)</p> <p>“To have more health fairs “(Calwa)</p> <p>“About three years ago that dental wagon came through but the only ones that were taken in by that dental care, but then when dental care was added to Medicaid it stopped because they thought we didn’t need the help, but we do need the help”(Pinedale)</p>	
--	---	--

<p>Access to coverage</p> <ul style="list-style-type: none"> • Increase mobile care clinic for residents in neighborhood (system/organizational) • Increase collaboration with organizations that provide dental and eye care (Organizational) • Sooner appointments and better appointment system (organizational) 	<p>“More programs. So that people can get tested to make it easier to get them done because sometimes they ask you why don’t you get diabetes tests done, and it’s because one can’t” (Calwa)</p> <p>“The Wait time” (Central City #2)</p> <p>“That situation with appointments needs to change. In reality you make an appointment and if you die, you die because your appointment isn’t for another two months” (Central City #2)</p> <p>“Hospitals. They can advocate for better health insurance access.” (SW Fresno)</p> <p>“For them to give quicker appointments when one goes to clinics, they take too long” (Calwa)</p> <p>“rehab facilitation centers” (Calwa)</p> <p>“Equal access to healthcare for all” (Central City #2)</p> <p>“ What we need is a clinic that sees undocumented people, we don’t have medical insurance and it’s very hard to been seen” (Blackstone)</p> <p>“ Medical for everyone, for every adult” (Blackstone)</p>	<p><i>“When it comes to health care the regional center, they have a lot of programs that could come here” (Mendota)</i></p>
<p>Cultural humility</p> <ul style="list-style-type: none"> • Linguistically appropriate services (organizational) • Language access (organizational) 	<p>“Making sure that all languages are being met. The languages barriers are being met.” (SW Fresno)</p> <p>“When we mention language I sometimes think about not language but people being able to understand. Ya know, A lot</p>	

	<p>of people are not literate. So education, I mean, is very important” (SW Fresno)</p>	
<p>Quality of care</p> <ul style="list-style-type: none"> • Customer satisfaction surveys and provider surveillance/healthcare quality assurance (organizational) • Improve provider’s attitudes (personal) • Apply same standard of care among privately and publicly insured (system) 	<p>“I don’t want to sound like a broken record, but compassion. If the doctor has compassion for what you are doing. It’s all about love” (El Dorado)</p> <p>“A holistic place, you know like what they were saying in Fowler, a one stop shop” (Blackstone)</p>	

<p>Provider availability</p> <ul style="list-style-type: none"> • Increase specialists, pharmacies, dentists, mental health professionals, and health care access points (organizational/system) • Retention of providers (organizational) • Substance and rehabilitation centers (organizational/system) 	<p>“We need A Valley children’s right here” (Blackstone)</p> <p>“Also the fact that you go to Valley Children’s because you think that they will have everything but that is not always the case but sometimes if its urgent they need to fly the child to San Francisco.” (Blackstone)</p> <p>“also for example would like for there to be a pharmacy nearby. Sometimes it’s midnight and you have to find one way way way too far” (Calwa)</p> <p>“In the community - not to go over there ...they come to us and the building’s gotta be here.” (SW Fresno)</p> <p>“We need access to more clinics so that more people can be attended to” (Central City #2)</p>	
---	---	---

<p>Employment</p> <ul style="list-style-type: none"> • Increase employment opportunities (organizational/system) • Higher wages (organizational/system) • Increase professional development (personal/organizational/system) 	<p>“Working, so keep working and providing better wages so they aren’t on unemployment.” (Central City)</p> <p>“We can invest more in our community. WE can provide better paying jobs in our community” (SW Fresno)</p> <p>“Have job fairs” (SW Fresno)</p> <p>“Is it also like offering professional development. How to create resumes, job training” (SW Fresno)</p> <p>“The way I would address it is show what I know, if it’s good for me, it’s good for them, that’s what I did with my livelihood. I’m not in poverty but I see my neighbors ... they are just cut the lawn, fix the fence, paint a fence for a neighbor, that’s not going to get you out of poverty ... you got to have some decent job that pays...not 10 ,15, 20, ... it needs 25 an hour ... long time ago, when I got \$5 an hour don’t mean thing” (SW Fresno)</p> <p>“ One more thing, tooth paste, laundry detergent, soap, diapers all kinds of hygiene products are lacking in this community because you cannot buy them with food stamps and they tend to be low on the priority list after other necessities” (El Dorado)</p>	<p><i>“ To create more employment for women needed; like at Walmart” (Sanger)</i></p> <p><i>“*More stores in general” (Sanger)</i></p> <p><i>“Training for people who are unemployed” (Parlier)</i></p> <p><i>“We need more stores like Grocery Outlet, DD’s (retail clothing store)” (Sanger)</i></p>
--	---	--

<p>Housing stability</p> <ul style="list-style-type: none"> • Enable home ownership (organizational/system) • Affordable low-income housing (system) 	<p>“Provide more safe facilities for the homeless, so they are not contributing to the physical environment pollution and contamination” (Central City)</p> <p>“Affordable housing – not apartments though.”(SW Fresno)</p> <p>“I think a solution for .. I’m gonna go back to homelessness, just cause that’s where I live and because I see that everyday .. I see the Fresno rescue mission, but I want to see another agency or something to really come at it just because I feel like since they removed the tent camps .. it’s like a band aid over the problem ...they’re not really there. But they are still there, so don’t know. I think another agency needs to come in and deal with that” (SW Fresno)</p>	
<p>Financial investment</p> <ul style="list-style-type: none"> • Provide incentives for business development (system) 	<p>“Incentives for businesses to come into SW Fresno. They give for other areas, but not here.” (SW Fresno)</p> <p>“Institutions like the city, elected officials; we can incentivize businesses to come here and provide jobs. We can bring our summer youth jobs back here to keep our at-risk youth out of trouble” (SW Fresno)</p>	
<p>Quality of housing</p> <ul style="list-style-type: none"> • Better quality of housing (organizational/system) • Housing for the homeless (system) • Collaboration with non-profits to provide long-term solution (organizational) • Increase Medi-Cal reimbursement rates (system) 	<p>“Provide more safe facilities for the homeless, so they are not contributing to the physical environment pollution and contamination” (Central City)</p> <p>“Affordable housing – not apartments though.” (SW Fresno)</p> <p>“I think a solution for .. I’m gonna go back to homelessness, just cause that’s where I live and because I see that everyday .. I see the Fresno rescue mission, but I want to see another agency or something to really come at it just because I feel like</p>	

	<p>since they removed the tent camps .. It's like a band aid over the problem ...they're not really there. However, they are still there, so don't know. I think another agency needs to come in and deal with that" (SW Fresno)</p> <p>"Husband who works in the fields has no insurance coverage. So his employer should offer Insurance." (Central City #2)</p>	
<p>Transportation</p> <ul style="list-style-type: none"> • Financial investment in transportation (system) • Individuals should increase carpooling (personal) • Increase school buses (organizational) • Transportation access to health care 	<p>"Carpooling"(Pinedale)</p> <p>"More programs. So that people can get tested to make it easier to get them done because sometimes they ask you why don't you get diabetes tests done, and it's because one can't" (Calwa)</p>	<p><i>"We heard that Fresno City has a lot of funds that they are looking to invest, they should invest in Mendota. Transportation is very important." (Mendota)</i></p> <p><i>"We wish we had school buses for the kids because they have to walk too far even when it's raining or when it's really hot. They walk more than two miles. This is the only school so that's why the kids are always late." (Parlier)</i></p> <p><i>"So when there's something burning around and the air is extremely contaminated and they prohibit kids to do sports, and that's understandable. But the thing is that they come</i></p>

		<p><i>walking from so many miles away.” (Parlier)</i></p>
<p>Safety</p> <ul style="list-style-type: none"> • Increase safety in neighborhoods, surveillance offered by the landlord, and increase pedestrian safety (personal/organizational/system) • Animal control for dogs (personal/organizational) • Increase collaboration between communities and law enforcement (organizational/system) 	<p>“People need to slow down when they drive on this street out here; they take that corner and swoooooosh so drive slower.” (El Dorado)</p> <p>“I have a neighbor that keeps breeding dogs, and they sell them for a 100\$ and they do not feed them there should be some kind of control there” (Blackstone)</p> <p>“Offering 10\$ neutering fee or something once a month so they don’t have more dogs” (Blackstone)</p> <p>"maybe they can bring a bus to spay and neuter the animals." (Pinedale)</p> <p>“Shared priorities with Police Department” (Pinedale)</p>	<p><i>“Apartment owners need to have more security” (Huron)</i></p> <p><i>“Even street crossing are not safe. There needs to be a sign to designate pedestrian crosswalks” (Huron)</i></p> <p><i>“Street crossings” (Huron)</i></p> <p><i>“Safety—gangs and the dogs” (Huron)</i></p> <p><i>“Lighting” (Huron)</i></p> <p><i>“Give fines to the owners if their dogs are loose” (Parlier)</i></p>

<p>Playgrounds/parks</p> <ul style="list-style-type: none"> • Provide recreational activities for children (organizational) • Investment in parks, increase clean and accessible parks, increase city maintenance, and build more parks (organizational/system) 	<p>“more hands on activities for the kids” (El Dorado)</p> <p>“Where they can go camping and be out in nature [nature trips for youth]” (El Dorado)</p> <p>“ENP has Saturday sports so we are able to take our kids there so they can get exercise.” (Blackstone)</p> <p>“More parks in our neighborhoods so that our families can play and we can spend time together in a safe and healthy way” (Central City)</p>	
<p>Activity Center</p> <ul style="list-style-type: none"> • Exercise area for adults and children (organizational/system) • Utilize existing sports centers/joint-use agreements (personal/organizational/system) • Increase indoors areas for recreational use (organizational/system) 	<p>“Updating our parks. Adding more trails, putting exercise equipment in them.” (SW Fresno)</p> <p>“Yes, and we don’t have enough parks. When I was like ya know not a young guy ...10 ten years old, we used to have baseball all the way til midnight. Cosmic ... Frankage .. think white .. this place was booming, all the kids were involved in baseball, basketball, and on a Saturday you’d go to the playground and all the kids would hang in the playground and have fun. We’re losing... we lost our ..and I blame it on TV ... when there was no TV, everybody was outside and everybody knew their neighbors .. as soon as TV came in .. everybody was sucked into the house, nobody was walking the sidewalks” (SW Fresno)</p> <p>“Parks and Rec – get more involved in this area Parks are not being taken care of here. We have a lot of kids here and parks are not being taken care of” (Blackstone)</p>	<p><i>“We need a place like McDurmont Field house, where people can exercise inside and kids can play inside. Colorado has lots of pool and play areas inside. For extreme heat, we need to escape inside and still be active.” (Sanger)</i></p>

	<p>“Like all the beautiful parks in other parts of the city” (Blackstone)</p> <p>“Open centers for adults and children to exercise and be active that are of no cost or low cost” (Blackstone)</p> <p>“Planet Fitness is doing free gym services for teens for the summer, so maybe for adults too” (Blackstone)</p>	
--	--	--

<p>Walkability</p> <ul style="list-style-type: none"> • Increase city maintenance of the walking trails/streets, fix sidewalks, better lighting, and public restrooms (organizational/system) • Access to basic amenities for community residents and homeless individuals (system) 	<p>“Or maybe once a month free trash pickup” (Blackstone)</p> <p>“You know sometimes the dump is expensive, so offering a half off coupon to dump because sometimes people” (Blackstone)</p> <p>“For people to take care of their pets and not let them run on the streets. I was bitten by a dog in this area.” (Calwa)</p> <p>“The case would also be that people that have loose dogs, to have them be cited” (Calwa)</p> <p>“that they have walking paths that they be safe” (Calwa)</p> <p>“fix the park so we have a safe place to walk” (Calwa)</p>	<p><i>“The city, more maintenance on the city. Before they used to pull the weeds from the seating and now they just spray them” (Parlier)</i></p> <p><i>“The big problem is the tall grass because all of our kids walk through it, and there’s a lot of empty lots like that with high grass. The owners need to maintain the lots. If it’s not the city, then the owners” (Parlier)</i></p> <p><i>“We’re big families and we have multiple cars. We must park on the curb and then the cars are there. The sweeper doesn’t clean that, he just keeps going. So one of the solutions could be on those days when they go in to clean, have signs that say don’t park.” (Parlier)</i></p> <p><i>“Do something about the dogs. Dogcatcher or something. Fresno has the closest ASPCA. Bring them out here.” (Parlier)</i></p>
--	--	---

		<p><i>“We could get street lights fixed” (Parlier)</i></p> <p><i>“Everyone should wear vests so that people can see, bright colors, see while at night (community safety) I know in Fresno there’s a lot of killings on the corner, you know they get hit” (Sanger)</i></p> <p><i>“Even street crossing are not safe. There needs to be a sign to designate pedestrian crosswalks” (Huron)</i></p> <p><i>“Street crossings” (Huron)</i></p> <p><i>“I would like to see more green space, sidewalk completion. When I try to walk from my house to downtown, there are a lot of sidewalks missing and I have to walk on the road” (Sanger)</i></p>
--	--	---

<p>Environmental conditions</p> <ul style="list-style-type: none"> • Increase air quality control through utilization of organic pesticides, decrease automobile pollution, enforcement of environmental laws and regulations, remove industrial business out of Fresno City, and remove commercial production of cannabis (system) 	<p>“The fields, the repellents are causing the pollutions, so using some sort of organic material” (Central City)</p> <p>“Yes, I live in [inaudible] and they are spraying, I cannot leave my house because they are spraying, and I have asthma that’s why they should have organic chemicals so that we aren’t breathing it in. It affects me. Because of this I think we need to use an organic crop” (Central City)</p> <p>“Keep cars up to date on maintenance so they do not contribute to more pollution” (Central City)</p> <p>“Do not use the cars while the kids are on vacation to use public transportation so you aren’t contaminating the air more” (Central City)</p> <p>“Putting air monitors all over SW Fresno so we can monitor the air quality.” (SW Fresno)</p> <p>“The governmental officials are the ones in control of the contaminants, they know up to what level contaminant could be produced” (Calwa)</p> <p>“As we spoke in the meeting before they would send texts to everyone when the weather or the area is going to be really bad. they lets us know to be outside for too long” (Calwa)</p> <p>“With the dogs, there needs to be a limit or control for how many pets people can have. I had a neighbor that had 7, it’s that they do not take care of them they smell its bad for your health, there should be a fine for having too many dogs”</p>	<p><i>“To do something with the pesticides. We are surrounded by agriculture. Give us a schedule when they’re spraying.” (Parlier)</i></p> <p><i>“The removal the of the marijuana plant that they are about to establish” (Mendota)</i></p>
---	--	---

	<p>(Blackstone)</p> <p>“Multilingual people at SCPCA” (Blackstone)</p> <p>“To move industrial businesses outside of the city far away from people so it doesn’t affect people in the city” (Blackstone)</p>	
--	---	--

<p>Access to foods that support healthy eating</p> <ul style="list-style-type: none"> • Increase local affordable department and grocery stores (organizational) • increase healthy fresh food for children in the school district (organizational) • Increase policies for nutritious foods in schools (system) • Food bank (organizational) • Increase farmer’s markets and grocery stores with nutritional food in food desert areas (organizational) 	<p>“Give good food to the kids, they do now, but fresh foods, because my son was in fourth grade he received juice that was expired, and wasn’t refrigerated” (Central City)</p> <p>“Access to healthier food options at school for the children” (Central City #2)</p> <p>“The food at the school, for schools to offer healthier choices, the choices are milk or juice they should offer water too, or the food they offer it’s the same” (Blackstone)</p> <p>“The schools should make good changes for what they feed the kids Access to healthy foods” (Blackstone)</p> <p>“The school district should put regulations especially when it comes to feeding. They are good at making rules, they should be good at watching what they feed kids.” (Blackstone)</p> <p>Give healthy and fresh food, like food banks” (Central City)</p> <p>“ Food distribution” (Central City #2)</p> <p>“Supermarkets to be close by because they are too far” (Calwa)</p>	<p><i>“A food bank. Because I don’t know why we don’t have one” (Parlier)</i></p> <p><i>“Promote in school so that they can give healthier meals to the kids. More physical activity For them to be involved in more physical activity. We have it implemented in elementary schools in Parlier. Now we have physical sports for kids to participate in. I really hope they continue that because sometimes they start and then they stop.” (Parlier)</i></p> <p><i>“We need a vegetable swap meet, farmers market here. Year round only once a year right now.” (Sanger)</i></p> <p><i>“To go to the swap meet you have to travel way too far. Closer swap meets, too far in Fresno or Selma” (Sanger)</i></p>
<p>Water</p> <ul style="list-style-type: none"> • Access to safe water (system) • Increase water infrastructure (system) 	<p>“Better access to nutrition so that they don’t get diabetes” (Central City #2)</p>	

	<p>“To provide filters for water or provide affordable bottled water, because you can’t guarantee that the water they provide is clean” (Central City)</p> <p>“I live in an apartment so for the landlord to provide the water filters for the tenants” (Central City)</p>	
<p>Language</p> <ul style="list-style-type: none"> • Free linguistic classes (organizational) 		<p><i>“if they gave linguistic classes for my daughter that would be excellent” (Mendota)</i></p>
<p>Access to higher education</p> <ul style="list-style-type: none"> • College readiness of children from underserved communities (system) • Increase adult school through collaboration with local organizations (organizational) 	<p>“Hidalgo is helping with English classes for people who don’t know English; Cesar Chavez also gives English classes; Fresno Unified could help that” (Central City #2)</p> <p>“I think the main thing is education. If we had 4 years college, everybody had four years of college; we’d have nice homes around here. But work in agriculture so you have the lowest income possible and we feed the rich people and we can’t even buy the vegetables that we pick. That’s bad” (SW Fresno)</p> <p>“The more educated we are the better qualified we are for better paying jobs.” (Central City #2)</p>	
<p>Capacity of local professionals</p> <ul style="list-style-type: none"> • Capacity on best practices working with children with disabilities (organizational) 		<p><i>“Education both for parents and educators, so that they give the right treatment for our children, it’s very important that we connect, so that we can work better together for our special needs children.” (Mendota)</i></p>

<p>Support system</p> <ul style="list-style-type: none"> • Collaboration with local organizations and with faith-based organizations (organizational) • Coordination among community residents (personal) • Place-based programming for children with disabilities (organizational) • Local government approval and support to bring resources (system) 	<p>“Schools. Educate on the importance of healthcare. Healthcare and mental health.” (SW Fresno)</p> <p>“I think they can provide more resources for the students.” (SW Fresno)</p> <p>“Yah from the school. Because working in education I see that there is resources are available but the quantity of it is like very limited. There’s only one, like, social worker for 400 students compared to like ...the need is much more, bigger than what is being met.” (SW Fresno)</p> <p>“The catholic charities to give clothes and furniture” (Central City)</p> <p>“To make more reports so they can listen to us in regards to what’s happening” (Calwa)</p> <p>“Cooperate with the organizations that are already working to address these areas” (Blackstone)</p> <p>"Attention to special needs not just for kids, but for adults too" (Pinedale)</p>	<p><i>“Community Engagement” (Sanger)</i></p> <p><i>“Health institutions, schools, city councils, and community and your neighbors” (Sanger)</i></p> <p><i>“The air pollution board” (Sanger)</i></p> <p><i>“Churches to do more education” (Sanger)</i></p> <p><i>“Programs for special needs children, providers for children with special needs, I have a child with special needs so that would be very important to me, regional meeting to gather all our children with special needs, or sports for the children. Many programs are in Fresno, but we do not have transport for our children. It would be very appreciated it organizations like yours can help us get these programs.” (Mendota)</i></p>
--	---	--

		<p><i>“Yes, as a follow up and we need more programs” (Mendota)</i></p> <p><i>“It’s very important to integrate our children into normal daily lives because I want other people to know how to interact with my children.” (Mendota)</i></p> <p><i>“Services are very important, therapies for our children,” (Mendota)</i></p> <p><i>“Invest money” (Huron)</i></p> <p><i>“If they get funding, use it for what it should be used for” (Huron)</i></p> <p><i>“WIC programs who educate women who are pregnant” (Mendota)</i></p> <p><i>“Pique -They bring a lot of education to our children” (Mendota)</i></p> <p><i>“Health- I have heard that united healthcare centers are</i></p>
--	--	--

		<p><i>providing classes on diabetes.” (Mendota)</i></p> <p><i>“Healthcare- it’s very important that we see it as a priority by involving people in sports that’s one way can make them healthier, we have a lot of diabetes asthma” (Mendota)</i></p> <p><i>“Community- the city—They aren’t addressing it, they have the power to bring things here and they aren’t” (Mendota)</i></p>
--	--	---

<p>Social Cohesion</p> <ul style="list-style-type: none"> • Develop support systems among neighbors, socializing activities, and community coexistence (personal/organizational) • Develop self-efficacy (personal) • Pass leadership skills to fellow residents (personal/organizational) 	<p>“You know I have something to say, not to look for a free handout but if they can clean up or something for them to do and give them a sense of pride” (El Dorado)</p> <p>“So keeping our areas clean, just today the wind has blown all kinds of stuff all over the place, I was sweeping the driveways with my neighbors, and it felt good being out there and having a clean environment” (El Dorado)</p> <p>“Talking with others and keeping the area clean” (Central City)</p> <p>“walk and walk to the park” (Central City)</p> <p>“A community watch could be set up, or cameras or something might be helpful” (El Dorado)</p> <p>“I mentioned earlier about cameras in the parking lot so maybe security at night time” (El Dorado)</p> <p>“Another solution that we can have is we as neighbors is keep an eye on one another because that is what we do in my area like we let neighbors know they keep an eye out on my car keep an eye out on this and that that has really helped” (Central City #2)</p> <p>“Bringing the community together. Creating community events and at those, providing education and resources. The churches, utilizing those community based organizations to bring the community together and show love and do not exclude, but include.” (SW Fresno)</p>	<p><i>“In general, we’re a group of 10 mothers and we have a group that gives food to the homeless. And the City opened a house in Parlier for the homeless, and that house was going to be designated for when it was really cold – that’s what the City said. But to them being cold is under 30 degrees but for them (the homeless) being cold is about 50 degrees so there’s a discrepancy there. As mothers, when we came to this country we were in similar situations. We have family here. The families cannot help to support you that much. The help comes from other people. As a community, we should be responsible for the people that are homeless here.” (Parlier)</i></p> <p><i>“What we are doing here, congregating uniting, everything we take here we should share with other, drop by drop the glass will be filled. Keep uniting ourselves and collaborate” (Mendota)</i></p>
--	--	--

	<p>“Get along with your neighbors for community” (Blackstone)</p> <p>“I know they have people coming together- you know like going to a park areas and having a potluck and getting to know each other” (El Dorado)</p> <p>“get the kids involved and have fun games for the kids” (El Dorado)</p>	<p><i>“We have to clean after ourselves when we’re out in public” (Huron) “Get to know your neighbors and your community” (Pinedale)</i></p>
--	--	--

<p>Community engagement</p> <ul style="list-style-type: none"> • Community organizing/advocacy, stay informed and participate (personal/organizational) • Dissemination of information and existing resources (organizational) • Develop community liaison (personal/organizational) 	<p>“I think it’s about being educated and informed about the resources. It’ my first time hearing about ‘your’ organization, so I think just being educated, informed, and involved” (SW Fresno)</p> <p>“Staying informed about all these factors” (Central City)</p> <p>“More organizations to give more information about resources and information about health and the contamination” (Central City)</p> <p>“If we know about agencies that can help. Let others know” (Calwa)</p> <p>“Go to Facebook and look for Alley Pals, and feel free to join us the page will tell you when the next one is.” (Blackstone)</p> <p>“Organizations to offer information about resources that are being offered in the community” (Blackstone)</p> <p>“Because we come to these meetings, we can go to our neighbors so that they know what is going on” (Blackstone)</p> <p>“ Information needs to be disseminated across the community via a bulletin board or something. We need several places where information can be posted.” (Pinedale)</p> <p>“we need a single source information center” (Pinedale)</p> <p>“you need to get them info- feed the community with numbers of who to call not everyone can read and write and</p>	<p><i>“The school right now has the L-CAP. It is money given to the schools from the government. They have the meetings for people to know about it but only 2 people are going right now. Meetings on L-CAP government money need to be advertised more. We are out there telling people about these meetings right now. It is money for low income or foster kids, kids that do not know English, to help them. The school board knows about it but the parents do not know about it.” (Sanger)</i></p> <p><i>“ We are part of the Resource Center and we are starting more programs that help the community; Diabetes collab trying to start up, Trying to just educate more of the community.” (Sanger)</i></p> <p><i>“They can do more outreach about health and continue to advocate.” (Sanger)</i></p> <p><i>There are services people are</i></p>
--	---	---

	<p>say what they want to say they keep their mouths eyes and ears shut– or thought the school to give out flyers with this information with who to call- they give out everything.” (Pinedale)</p>	<p><i>not aware of” (Sanger)</i></p> <p><i>“ Newspaper for the distribution of information” (Sanger)</i></p> <p><i>“ Facebook- everything good goes on Facebook” (Sanger)</i></p>
--	--	---

<p>Civic participation</p> <ul style="list-style-type: none"> • Advocacy at the Capitol (personal/organizational) • Suffrage (personal) • Develop a community agenda (personal/organizational) 	<p>“Going to the capital and lobbying to congressman so they can hear us” (Central City)</p> <p>“There’s a law for everything. And I’ll bet you there’s a rule, or law that these guys are not supposed to be doing that but they still do it because the people don’t gripe... and we don’t know the laws and the rules, ya know what I mean? And we don’t have no lawyers, so what the hell are we going to do? We just yell and jump up and down and ..they still spray” (SW Fresno) “Make sure that our issues are on the agenda.” (SW Fresno)</p> <p>“..I have a lot of stuff passed. I got the Price Master Plan updated. It wasn’t on the agenda. We put pressure on the city and brought it up because it hadn’t been updated since 1989.” (SW Fresno)</p> <p>“It has to be a group .. you can call your elected officials as much as you want to .. bombard them with local calls to get issues addressed” (SW Fresno)</p> <p>“I think the best idea all the little groups and communities ought to get together and, figure out when they’re going to go there, everybody go over there for one community and back them up 100%. When, in the other little community something’s needed, all the other little communities go up there and crowd the place, and if they don’t have no room, rent a [inaudible] Do you understand what I’m saying?” (SW Fresno)</p>	<p><i>“Go vote” (Parlier)</i></p> <p><i>“I think that us as citizens, saw results then everyone would be involved, but say, “Why should I go” (Huron)</i></p> <p><i>“Community- because it is important for us to realize the importance of participation, we can have great education but if we as a community are not aware of our priorities.” (Mendota)</i></p>
--	--	---

	<p>“It takes a village. “ (SW Fresno)</p> <p>“What I’m saying is .. I don’t know nothing but I know more than I did 2 years ago. There’s a chart .. we have a lawyer and she works with us, and I told her, ‘why are you making it so hard? Why don’t you just make me a flowchart so we could just follow what meetings we should attend and what meetings we don’t attend?’ What’s in our priority? That’s what we want. I think everyone should have a flowchart you gotta know how to go to get the money. How you get a grant .. from who do you get the grant. Who has the money, who does not have the money” (SW Fresno)</p>	
--	--	--

Key Informant Interview Guide

“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” –the World Health Organization

1. How does your organization help the community you serve stay healthy?
2. What conditions that impact health most concern you about the community you are serving?
 - A. What contributes to these conditions?
 - B. What is already working well to address these conditions?
 - C. What new solutions can address these conditions?
 - D. How can your organization be part of that solution?
3. What are the health issues that need to be addressed in your community?
4. What are the problems in the healthcare system that impact the community you serve?
 - A. What do you think are some changes that need to be made in the healthcare system to meet the needs of the community you serve?
 - B. What are the strengths of the healthcare system (for example, hospitals, clinics, and health centers) that work well for the community you serve?
 - C. Beyond the healthcare system, what can other institutions and community organizations do to meet the health needs of the community you serve?

You were asked to rank the following factors that affect our health, also known as social determinants of health, **health care system, community, education, physical environment, and poverty**. Please answer the following questions with these issues in mind.

5. Why did you rank them in this order?
6. For the factor that you ranked as number one, how is this factor being addressed? By whom?
7. What can you, and the community you serve do to address this factor?
8. What can institutions do to address this factor? Which institutions?
9. Thinking about all the concerns discussed today, which do you think are the three biggest concerns needing the most immediate attention, and why?
10. Five years from now, what would you want the local news to say about the health of your community, your efforts to improve health, and the local public health system?
11. Is there anything else you would like to add?

Oral Health Key Informant Guide

“Oral health is multi-faceted and includes the ability to speak, smile, smell, taste, touch, chew, swallow and convey a range of emotions through facial expressions with confidence and without pain, discomfort and disease of the craniofacial complex.” –the World Dental Federation

1. What does your organization do well to manage, prevent and promote good oral health?
2. How do the healthcare system and other sectors collaborate with you and your organization to promote oral health in the community?
3. In your opinion, what are the major causes of poor oral health that need to be addressed?
4. In your opinion, what are the changes that need to be made within the healthcare system and other sectors to promote oral health for those in most need?
5. If an oral health program is to be implemented in Fresno County, what do you suggest to be the vision, mission, and values of this program?
6. If an oral health program is to be implemented in Fresno County, how do you see yourself and/or your organization be part of this program?
7. Is there anything else you would like to add?

Focus Groups questions guide

“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” –the World Health Organization

1. What do you or others do to stay healthy?
2. What do you like most about living in your community?
3. In your community, what conditions that impact health most concern you?
 - a. What contributes to these conditions?
 - b. What is already working well to address these conditions?
 - c. What new solutions can address these conditions?
 - d. How can you be part of that solution?
4. What are the health issues that need to be addressed in your community? (For example, diabetes ...)
5. Where do you and members of your community get your health care services now?
 - a. What are the challenges in the healthcare system (for example, hospitals, and health centers, medical and dental clinics) that impact you and your community?
 - b. What health services (for example, hospitals, and health centers, medical and dental clinics) are convenient or work well for you and members of your community?
 - c. What health services are challenging to obtain/access for you and your community?
 - d. What do you think are some changes that need to be made in the healthcare system to meet the needs of you and your community?
 - e. Beyond the healthcare system, what can other institutions and community organizations do to meet the health needs of your community?

You were asked to rank the following factors that affect our health, also known as social determinants of health, **health care system, community, education, physical environment, and poverty**. Please answer the following questions with these issues in mind.

6. Why did you rank them in this order?
7. For the factor that you ranked as number one, how is this factor being addressed? By whom?
8. What can you, and your community, do to address this?
9. What can institutions do to address this factor? Which institutions?

10. Thinking about all the concerns discussed today, which do you think are the three biggest concerns needing the most immediate attention and why?
11. Five years from now, what would you want the local news to say about the health of your community, your efforts to improve health, and the local public health system?
12. Has anything from this conversation changed the way you think of health in your community compared to the beginning of our meeting, if so how?

Oral Health Focus Groups Questions Guide

1. Do you see any connection between your general health and the health of your mouth?

Please describe this connection and how you think the health of your mouth/oral health can be related to your general health and wellbeing?

2. Please describe how it feels when a person experiences good oral health?

Thinking of these descriptions of how it feels when a person experiences good oral health.

3. What do you do to promote good oral health?

4. What do you do to prevent oral health disease?

5. What are the challenges or barriers to promote good oral health?

6. What are the challenges or barriers to visiting a dentist regularly?

Thinking of the things beyond the healthcare system (for example access to low-cost sugary drinks, and sugary foods, lack of transportation, lack of insurance coverage)

7. What barriers stop you and your community from having good oral health?

8. What resources are in your community to help you achieve good oral health?

9. How can our organizations, institutions, community, health providers, policy makers, and/or others address these barriers?

In case the subject of communication between physicians and dentists and/or insurance issues were not mentioned, please ask these questions:

10. How do you think your physician can team up with your dentist to improve both your oral and general health and well-being?

Vaping Focus Groups Question Guide

1. How many have you heard of the term “vaping”? [*Tally the show of hands*]
 - a. When you hear that word, what does it mean to you?
 - b. Take a look at the pictures of the items on the poster board. Place either a checkmark next to each item that you recognize or an X next to an item if you do not recognize it.
 - c. *What have you heard about these products?*
2. Whom do you think tobacco companies are trying to target with these products?
3. What and where have you heard about e-cigarettes and youth? How does this make you feel?
4. How do you feel about local stores selling e-cigarettes and other tobacco products near schools and other youth-friendly areas?
5. Besides the impact on youth, how might having a lot of tobacco retailers in a neighborhood affect the health of the people who live there?

Each participant will be given one dot to vote with.

- A law that does not allow tobacco products to be sold within two blocks of schools.
- A law that limits the number of tobacco retailers that can operate in a community.
- A law that bans the sale of flavored tobacco products (including menthol).
- Other or none of the above

For the law with the most dots...

6. Why did you rank this as the most important?
 - a. What might be some arguments for or against such a law?
 - b. How much support do you think the community would have for such a law? Probe: Who might be in favor of passing a law like that in our city? Who might be opposed?
 - c. What role can parents play in getting a law like that passed by our city council?
6. Has anything about this conversation changed the way you think about vaping? And if so, how?