

African American Holistic Wellness and Resource Hub (AAHWRH) Steering Committee
Record of Action for Monday, November 18, 2024

Attendance:

Steering Committee Members:

- In-person (CAO Building, Martinez): **Phil Arnold; Vanessa Blum; Patt Young; Rohanna Moore**
- In-person (Black Parent Resource Center, Richmond): **Zelon Harrison**
- In-person (Urban Tilth, Richmond): **Chinue Fields**
- In-person (Genesis Church, Antioch): **Desirae Herron; Ashley Green**
- Online: **Jacqueline Smith; Sheryl Lane**
- Absent: **Mark McGowan; Taylor Sims; Alfonzo Edwards**

County Staff:

- In-person: **Kendra Carr and Peter Kim, Co-Directors, Office of Racial Equity and Social Justice (ORESJ)**
- Online: **Jill Ray, BoS District 2 Representative**

Public Attendees:

- In-person: **Shelley Arnold**
- Online: **Kerby Lynch; Randi Dean; Ryan Drake Lee; Shantell Owens; 510-520-1912; Stephanie Taddeo; Tonia Lediju; Cheryl Sudduth**

1. Roll Call and Introductions

(Staff announced that meeting would begin once a quorum of members were in attendance.)

Staff convened meeting at 5:39 PM, took a roll call attendance, and welcomed those in attendance. Staff reviewed the meeting agenda.

2. RECEIVE and APPROVE Record of Action for October 14, 2024 meeting of the Steering Committee for the African American Holistic Wellness and Resource Hub Feasibility Study, with any necessary corrections.

Public Comment:

None.

Rohanna Moore made the motion to receive and approve the Record of Action. Chinue Fields seconded the motion.

Conducted roll call vote to receive. 8 members voted yes (all present at time of vote). Item passed.

3. RECEIVE update and preliminary survey and listening session insights and DISCUSS the planning and next steps for the feasibility study.

Dr. Kerby Lynch, accompanied by Ryan Drake-Lee, of Ceres Policy Research, provided updates on the outreach, engagement, and planning for the feasibility study listening sessions and preliminary insights on research efforts to-date (See attached PPT slide deck for details). Highlights from the presentation are below:

Community Engagement Overview:

- *Partnered with multiple community organizations to host a series of listening sessions, both in-person and virtual.*
- *Organized sessions along target populations: justice-involved, Black women, Black men, Black elders, parents/families of 0-5 years old children*
- *Community survey closes at end of this week*
- *How we deliver services to community and where we deliver services*
- *Ceres Policy Research will provide more in-depth analysis on site selection research findings at the Nov 25 Equity Committee meeting*
- *Will do Town Halls by districts in late January through February*

Question from Steering Committee:

- *Rohanna Moore: When is the next CoCo Family Justice Center?*
 - *Dr. Lynch: Nov 20 at 1:00PM, virtually. Please email Dr. Lynch for an invite*
- *Sheryl Lane: What gaps have you identified?*
 - *Kerby: Elders above 55 are only 4% of respondents, so that is a gap in our engagement. LGBTQ and veterans were not necessarily pre-determined target groups, but they are represented in low numbers.*

Preliminary Insights from Survey Data

- *Demographics*
 - *Still validating respondents, preliminary sample size of 3500 people (not including unverified respondents)*
 - *Majority of respondents are ages 25-44 y/o; biggest gap with those older than 55+ y/o (only 4%).*
 - *Top locations represented are Antioch and Richmond*
 - *54% are males; 42% females (35% women ages 18-40); 2% trans, 2% non-binary*
 - *30% justice impacted; 35% mental health challenges, 45% parents of kids with IEP*
 - *(See graphs of demographic breakdown in slide deck for more detail)*
- *Community Priorities*
 - *Clear preference for integrated approach of both personal wellness and collective healing*
 - *Need for essential social services (housing, healthcare)*
 - *Need for accessibility, affordability and culturally-responsive services*
 - *Healthcare access; safety; mental, physical, emotional wellness*
 - *Wellness services; individual 1:1 services v. group-based, collective formats*

- *Barriers to accessing health/wellness services: 44% time constraints; 42% high cost*
- *Questions from Steering Committee:*
 - *Vanessa Blum: When does survey close?*
 - *Dr. Lynch: Midnight this Wednesday 11/20*
 - *Patt Young: Is it worthwhile to engage underrepresented communities for the survey?*
 - *Dr. Lynch: Yes, please do; and know that we can also do targeted outreach for the District-based Community Salons that will occur in January/February*
- *Insights from Listening Sessions:*
 - *So far, have done 13 sessions (much more than the originally planned 5-7 sessions), and still have 3 more planned.*
 - *Access to quality, timely, culturally-competent, respectful healthcare services.*
 - *Holistic Wellness Needs need to integrate mental, physical, and spiritual health*
 - *Need to mitigate and remove systemic barriers and reentry challenges for justice-involved individuals*
 - *Community-centered design must include continuous feedback loops*
 - *Inclusive and accessibility, both physical and financial, are essential to reach diverse community*
 - *Need education to increase awareness and access to wellness services and the importance.*
 - *Need support for economic and social empowerment; jobs, training, small business and entrepreneurship*
- *Questions from Steering Committee:*
 - *Rohanna Moore: Did you reach out and teenagers? Youth?*
 - *Targeted outreach to youth/TAY ages 18 and up*
 - *Zelon Harrison: Would be happy to gather youth together for future sessions or opportunities*
 - *Dr. Lynch: Yes, we will reach out for the District-based Community Salons*
 - *Regional breakdown?*
 - *Dr. Lynch: While majority of respondents live in Antioch and Richmond, other places indicated: Bay Point 10%, Concord 7%, Danville 5%, San Ramon 5%*
 - *Chinue Fields: We have good partnership with a local community senior center, is it too late to connect you with them? We meet with them 1:00PM on Wednesday for a food giveaway.*
 - *Dr. Lynch: I will reach out, we have another session that morning.*
- *Service Model Development*

- *Based on research, we are developing a model that is focused on community-based service delivery with an emphasis on different approaches toward health and healing. Key themes that emerged:*
 - *Most of services and standards of care are determined by what insurance provides; many people indicated the need for those who do not have insurance*
 - *Needs to be inclusive and accessible to those without transportation*
 - *Mental health services are limited for those who do not meet certain crisis levels or have official diagnoses*
 - *Physical wellness needs to include preventative care, and from people they can trust and relate to*
 - *Family support services need to include reproductive care, as well as services for children and adolescents*
 - *Trauma informed care that is culturally-competent; strong demand for Black service providers located within Black communities*
 - *People want a community-based decision making process that informs decisions regarding the hub*
- *Location:*
 - *people spoke to desire for scattered sites, in pre-existing community centers, multiple locations across the county (each over 40% of responses)*
 - *and mobile services, online/virtual services, and non-East County location (over 30% of responses)*
- *There is a plethora of need that cannot be addressed with \$7.5M, so very difficult and heartbreaking decisions will need to be made around what to prioritize (i.e. youth v. elders, violence prevention v. mental health, east v. west)*
- *There are several financial limitations to consider in regard to site selection: building codes, renovation v new build; market rates for new purchase of a sizeable bldg that is turn-key ready are beyond \$7.5M*
- *How do we prioritize decisions and begin the phased approach of establishing the hub?*
- *Questions/discussion from Steering Committee:*
 - *Patt Young: Very impressed with the reach into communities that typically do not feel safe enough to share; excited to see what comes out of this*
 - *Sheryl Lane: What do you mean by hybrid?*
 - *Dr. Lynch: As opposed to a single site where all services are offered; instead, it's a hybrid model that may include various modes of service delivery (i.e. mobile delivery, multiple small sites, etc)*
 - *Sheryl Lane: One stand-alone site does not seem to me that will meet all the needs of the community; and \$7.5M is just seed money, and will not meet the real need, and not sustain a long-term plan for any kind of hub, especially county-wide; in regard to the need to serve folks without insurance is a difficult question,*

that seems like a systems question; not sure how insurance companies operate in this regard.

- o Zelon Harrison: This \$7.5 M is designed to provide a start for us, and that Supervisors need to understand that more funding is needed, and beyond one time. Data will need to compel them.*
- o Vanessa Blum: A single space will not meet the need of the entire County, people will not travel; and there needs to be an ability to accept MediCal*
- o Rohanna Moore: Do we know outcomes from past efforts of delivering mobile or scattered options versus a fixed location to help us make an informed decision?*
- o Desiree Herron: When it comes to mobile vans, people don't know how to find or access; but a fixed center is a known quantity, people know where to go, it doesn't move, but it needs to be near public transportation. It can have partnerships to refer folks to and leverage what others are doing.*
- o Ashley Green: A central site can have Navigators that are aware of services that exist and connect them to various services beyond the central site and that do not involve a mobile van*
- o Patt Young: How does general population feel about mobile vans? I lean toward a central space but I lean on transit systems to provide transportation.*
- o Zelon Harrison: We need to also provide a resource that lets people know how to find Black providers, and providers who know how to serve Black communities well.*
- o Ashley Green: The tool needs to have resources divided along service categories and needs*

Public comment:

Shantell Owens: We need all supervisors to get behind this and decide that CC County makes Black communities a priority that deserves sustained investment. We need everyone to show up and apply pressure. Ceres has done a fabulous job in a short amount of time, and speaks to what can be done when we move with urgency; also surprised by some of the findings that were unexpected. I do not think a hybrid model will work; spreading out resources across multiple providers or spaces doesn't accomplish the concentrated outcomes in a focused area. We are also happy to host a listening session for young people at Genesis Church.

Cheryl Sudduth: Need to apply an equity lens on how we prioritize investment. Let's talk to the Health Dept in figuring a way to get Black folks insurance. The shuttles that AC transit uses are ADA shuttles that are funded by the Federal govt, so not a complete solution but part of the solution. What did the outreach and marketing of the survey look like? I did not see it, never received any information. If we hand-picked where the survey goes, we're hand picking who gets services.

Dr. Lynch: Not sure if I agree completely; this data represents a slice of responses that will inform service provision countywide; also, had only a 1 month period, the ideal amount of time is 4-6 months; also wanted to minimize the survey responses from bots

Jill Ray: We put in our Supervisor Anderson's news blasts, and shared with schools and city partners in our District 2.

Dr Lynch invited group to attend the Nov 25 Equity Committee for the next presentation on site selection.

Staff provided an update on the Request for Proposals process for services toward African American holistic wellness:

- Received 53 proposals in 5 categories by the 10/31/24 deadline.*
- Convened participatory review panel: 20 African American community members all with lived and subject-matter expertise that made up 7 review panels across 5 categories*
- Facilitated deliberation/review meetings with each of the review panels*
- Due to large number of submissions to Youth Development category (23), will be having a second and final round of review of the top-ranked applications this week*
- Originally anticipated bringing award recommendations to Equity Committee on Nov 25, but due to unexpected need for a second round or review, we will present recommendations at the Dec 16 Equity Committee meeting*

Vanessa Blum made motion to accept the update and move the item. Patt Young seconded the motion. Conducted roll call vote to. 10 (all present at time of vote) voted yes. Item passed.

4. DETERMINE the date, time, and location of future meetings

The next meeting is currently scheduled for December 9, 2024 from 5:30-7:00PM.

The meeting will take place at County Administration Building at 1026 Escobar Street, 2nd Floor, Martinez, CA 94553. Additional locations to be confirmed when agenda is posted.

5. Adjourn

Ashley Green made motion to adjourn. Vanessa Blum seconded the motion.

Conducted roll call vote to adjourn. 10 voted yes (all present at time of vote).

Meeting adjourned at 7:27 PM.