Social Determinants of Health

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, and worship that affect a wide range of health, functioning, and quality-of-life outcomes and risks. In the initiative proposal below, staff considered the social determinants of health and root causes related to the data that emerged from the 2019 CHNA, Action Team Lessons learned and community listening tours. The graph below from the 2019 CHNA, indicates that the top concerns of our community are mental health issues, homelessness/housing, drug abuse, economic issues and lack of access to care.

Health starts in our homes, schools, workplaces and communities. Conditions (e.g., social, economic, and physical) in these various environments and settings have a profound impact on the health of the community. Resources that enhance quality of life as well as access to social and economic opportunity can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, access to health services, and environments free of life-threatening toxins. By working to establish policies that address the root causes of Mental Health issues, Substance Abuse and Interpersonal violence, we can positively influence social and economic conditions and those that support changes in individual behavior as well as improve health for large numbers of people in ways that can be sustained over time.
A Word About Equity

Equity and health equity are two of Healthy Mendocino’s guiding principles. Looking at the inequities of our health data, and from research nationwide, we have identified four main populations that are disproportionately impacted: low income families, outlying communities, Native American communities and Latinx communities. We have set specific goals for addressing outlying communities and low-income families where possible, based on our partnerships and community conversations.

In communities of color, part of the health inequity is a result of disenfranchisement, institutionalized racism and for our Native American Tribal nations, historical genocide and its legacies. These issues cannot be easily or quickly solved. Any needs identified or solutions created must be done within these communities and not by outside agencies or organizations. This is the reason you will not see specific goals and strategies to address equity in our initiatives. Instead, our goals are to develop relationships with each of the Tribal Nations and the leaders of the Latinx communities throughout the county so that we can work with them to change practices and policies that continue to produce the inequities seen in our data. In addition, regardless of the initiative chosen, we will develop a separate expertise panel to assist us in addressing equity as we implement our strategies and goals.
Workforce Development

PROMOTING PATHWAYS FOR PROGRESS

Overview: Health is created where we live, work, play, pray and learn. Lack of meaningful or gainful employment accompanied by despair for the future sows the seeds for poor mental health and substance abuse. Promoting Pathways for Progress is aimed at building hope for a brighter and more prosperous tomorrow for some of our communities struggling with underemployment and for our youth who might not have exposure to a range of work possibilities. It is also an effort to support the development of our workforce to fill the needs of our agencies and business that work to improve community health.

Across sectors, our partners have discussed the frustration and difficulty of recruiting and retaining employees in key positions. Nurses, physicians, therapists, police officers and credentialed teachers are just a few examples of these positions. The impact to community health is direct and cumulative. Our access to care and mental health services are impacted, continuity is lost, and it is difficult to maintain and build organizational and systems capacity. Recruiting workforce from outside of the county is challenging because of housing constraints and wages are low and cost of living is high. It is difficult to fill these professional positions using our local workforce, as only 24.7% of the county population has a bachelor’s degree or higher, with only 7.6% holding post-baccalaureate or professional degrees. In some agencies and organizations even entry level positions are difficult to fill as the unemployment rate is 6.0%. This may be related to the fact that 18.1% of our community does not have a high school diploma or GED certificate.

While statistically we have very low unemployment rates, we seem to have either an under-employment issue or a wage issue, as 18.5% of the population and 24.8% of our children are living below the federal poverty line. Some outlying communities are hit disproportionately because educational and work opportunities are limited, and transportation may not be available to these opportunities. In addition, institutionalized racism and systems that support it have a role in inequities seen in communities of color. For Mendocino County, our Native American communities also continue to experience the impacts of historical genocide.

As a county we have had some success in developing certification and educational degrees and pathways to recruit, educate and employ within our local communities. The nursing educational pathway is a great example of an effective collaboration from high school to employment. We have
multiple agencies and collaborations working in this arena with long-standing relationships and victorious outcomes. However, in our community listening tours and key leader interviews we continue to hear of the need for more efforts to develop pathways of development from high school to graduate school. This is particularly true for outlying communities. The legalization of cannabis has shifted workforce and employment opportunities (both legal and illegal), affecting outlying communities the most. In addition, we hear stories of youth that do not have access to opportunities or models to develop a meaningful and gainful employment. For example, we hear from many of our partners about the need to have psychiatric nurses, particularly pediatric psychiatric nurses. How many Mendocino County youth (or adults) know what a psychiatric nurse does and why that might be an exciting and rewarding career to consider?

Some of the identified barriers to matching open positions with community members are:

1. Either the appropriate training/education are not available, or community access is limited. Not all pathways that have been identified by employers are being fully utilized
2. Young adults do not have adequate agency or engagement in the workforce/educational process
3. Available workforce does not understand transferable skills and professional development, so they are not applying for open positions
4. Low wages compared to surrounding communities with high housing prices and low housing availability
5. Lack of culturally appropriate hiring practices and workplace culture, and/or flexible hours and/or job shares for single parent households
6. Lack of a professional community of peers and opportunities for spouses

Proposal

1. Create a map that serves to outline, enhance, communicate and support 3-4 key stepping-stone pathways for ongoing professional and educational development
2. Identify gaps in training and education
3. Work with outlying communities to identify solutions, particularly solutions where technology can contribute
4. Identify funding opportunities to support identified solutions
5. Communicate and celebrate the programs that create a stronger workforce. Highlight existing opportunities
6. Communicate the needs of employers and how addressing those needs will positively impact the health and strength of our community
7. Through partners who provide direct services to youth, better identify barriers for our youth to societal engagement and gainful employment
8. Explore ways to create more professional community connections
The following are the identified pathways.

**Pathway 1: Residential and Commercial Building Trade**

Construction site intern - general carpenter - specialty carpenter (finish) - contractor – building inspector

**Pathway 2: Health Care**

Home Health Aid – Phlebotomist - Medical Assistant - LVN - CNA - LPN - RN - P.A. - MD/DO

**Pathway 3: Mental Health/Social Worker**

Peer counselor/ Promotora – Social Service Intake Worker – Social Worker – Manager

**Pathway 4: Education**

Classroom aid - paraprofessional - Substitute Teacher - Teacher credential pathways - Teacher- Administrator or (Masters/college instructor, PHD professor)

**Goals and Strategies**

**Community Education and Engagement**

**Goal 1:** Create a Workforce Development Asset Map

**Strategy 1:** Create asset map as a living document to be shared with community partners

**Strategy 2:** Identify strengths, gaps, and opportunities

**Goal 2:** Create Pathways to Progress Map

**Strategy 1:** Assist the Mendocino/Lake Adult and Career Education (ACE) collaborative in the completion of the Construction Trades and Business pathways maps/brochures. Using existing template, create additional maps for Mental Health/Social Worker, Education (including early childhood education). The maps will show various entry and exit points to emphasize that entry-level positions or degrees can lead to a higher paying career. Each pathway will include high school opportunities, early training and certificates--AA and BA degrees--career options, salary scales, potential local employers, cost of educational/training programs, online opportunities, licensing requirements and professional trends (trends for future employment). The map will take existing programs and opportunities into account and will be made available to our collaborators and through online resources to use as a promotional and educational tool.

**Strategy 2:** Identify gaps in programs and opportunities.

**Strategy 3:** In collaboration with Mendocino/Lake ACE, work with underserved communities to identify possible solutions to increase opportunities to existing pathways.
Strategy 4: Use information to create a countywide document that outlines and sets priorities, identifies potential funding, and provides a basis for leveraging resources to build pathway support in outlying communities.

Goal 3: Promote the Pathways and Pathway Maps

Strategy 1: Tell the success stories – individuals – highlight purpose. Tell stories from community members who have engaged in various points along the pathways to highlight hometown successes and help young adults and others who do not have the experience or have not succeeded in traditional education envision themselves in those positions, create agency and believe that they can be successful.

Strategy 2: Tell success stories – organizations

Strategy 3: Share Map and the success stories through a range of media and social media outlets

Goal 4: Help make the connection between work and health

Strategy 1: Use research and existing campaigns to show that work serves multiple important functions in a healthy life: economic stability, community connections/support as well meaning and purpose.

Strategy 2: Share information and resources about meaningful work: how to find it, what that can look like, impacts on health.

Goal 5: Help engage youth and potential employees identify with a progressive pathway

Strategy 1: Tell success stories from each pathway by highlighting locals who have done all or part of the pathway, what they love about their job, how it has changed their lives (given them purpose, economic security or opened opportunities).

Strategy 2: Share these stories with partners, including high school counselors, Mendocino College Career Center, workforce development partners, youth partners (eg. the Arbor, 4H, Scouts) and employers. Encourage them to tell the stories of their employees.

Goal 6: Soft Skills

Strategy 1: Support and promote the expansion of soft skills workshops for students and adults (e.g. find ways to livestream or record for outlying areas).

Policy and Legislation

Goal 1: Advocate for a national and/or state workforce development policy

Strategy 1: Advocate for policies that include the challenges or rural workforce development. Work with partners to identify top priorities.
Changing Organizational Practices and Policies

Goal 1: Encourage internships and mentoring

**Strategy 1:** Collaborate with appropriate employment partners and service groups to encourage internships, mentoring, giving underserved employees a chance (felon-friendly workplace, workers with disabilities) flexibility in hours or other incentives to encourage educational development.

Goal 2: Assist employers to increase recruitment, retention, and satisfaction of under-represented communities

**Strategy 1:** Work with communities of color and equity panels to develop recommendations for culturally appropriate organizational hiring practices and workplace culture. Develop a list of recommendations and encourage employers to adopt practices.

**Strategy 2:** Work with existing equity teams within organizations to support external communication of workplace practices.

Goal 3: Convene a roundtable of Human Resource Managers

**Strategy 1:** Discuss and brainstorm ways to collectively build workforce rather than “poach and trade”. Develop strategies to provide more integrated skill and knowledge development.