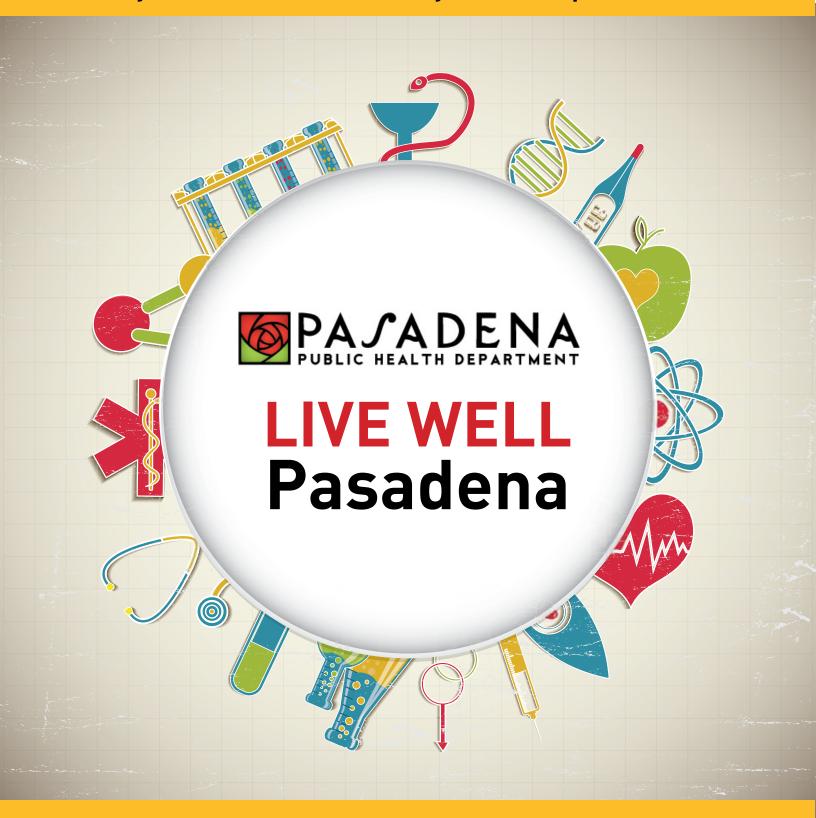
The City of Pasadena Community Health Improvement Plan



Invitation to Participate in the City of Pasadena Community Health Improvement Plan

Dear Community Partner,

The City of Pasadena Public Health Department is pleased to announce its premier endeavor to conduct a collaborative community health improvement plan (CHIP). By utilizing the findings found within the Quality of Life Index, the CHIP Planning Team will set focus areas, identify performance measures, and outline the process for improving the health of our community. The work of this team will provide guidance for the City, its partners, and stakeholders to outline collective efforts.

You and your organization are invited to participate in developing the CHIP. Your knowledge and experience working in your area are vital to creating a prioritized list of health issues and local objectives. Your attendance assures every facet of our community's health is represented when developing this comprehensive list. We hope that you can take time to be a part of this hallmark journey.

The meeting will outline the health indicators found within the 2012 Quality of Life Index and engage attendees to prioritize health issues and develop key strategies for addressing identified priorities.

We look forward to working with you.

Sincerely,

Dr. Eric G. Walsh, MD, DrPH

Director of Public Health/Health Officer

What is a Community Health Improvement Plan?

Pasadena Public Health Department and its community partners about how to improve the overall health and well-being of the city of Pasadena. The CHIP addresses more than the roles and responsibilities of the Public Health Department alone; it is also a comprehensive record of joint efforts undertaken to redress Pasadena's most immediate health concerns. This plan reflects the results of a participatory planning process that in-

significant involvement from by a variety of community members. The intent of this plan is to promote partnerships and coordinated efforts to improve the health of our eresidents.

The CHIP includes prioritized health issues derived from local community health assessments. For example, key community stakeholders drew from the City of Pasadena's 2012 Quality of Life Index and Huntington Hospital's HealthyPasadena.org to select the most pressing issues facing Pasadena today. The CHIP was created to document these collaborative efforts.

Executive Summary

On January 31, 2013, over 50 community partners from a myriad of organizations gathered to prioritize health issues for the City of Pasadena. Representatives in attendance included City Council Field Reps, City of Pasadena Department Directors, local community groups, other government entities, and health-related organizations. This task force analyzed and categorized several topics from among the outstanding issues confronting Pasadena. Four topic areas were identified at that meeting: Access to Health Services, Obesity and Obesity-

Related Disease Prevention, Teen Pregnancy Prevention, and Mental Health and Substance Abuse Prevention.

Visions, goals, strategies and suggested tracking measures were identified for each topic area. Multidisciplinary workgroups convened several times after the initial planning meeting to refine the goals and objectives needed to make meaningful improvements in the four topic areas. The strategies in the CHIP are the methods team will intend to undertake during the next five years.

CHIP

As we implement the CHIP over the next five years, the workgroups and their respective organizations and community members intend to better align efforts to each other's missions to create a coordinated effort to a healthier Pasadena.

METHODS

The CHIP's authors utilized two methods to solicit partner feedback: an audience response system and facilitated discussion groups.

An audience response system is a systematic method for polling audiences and participants for their views. At the CHIP Planning Meeting, all audience members were given a voting device and asked to rank the magnitude and logistical feasibility of identified health issues.

Based on the audience response system, the top five major health concerns for the community are (in order): teen pregnancies; youth substance abuse; percentage of uninsured individuals; obesity; and mental health.

Facilitated discussion groups subsequently broadened the scope of the methodology. Tables occupied by at least 7 members from various organizations collectively agreed on a list of the top 3 or 4 most pressing health issues. Once those were established, the tables were then asked to formulate strategies and identify resources to address the issues. Those methods combined formulated the top topic areas for the workgroups.

In the workgroups participants identified the strategies etc. (see above)





TOPIC AREA: Access to Health Services

VISION: Increase equitable access to high-quality primary and specialty care services.

Access to care means coverage in a health care system, access to a health care location, and access to a trustworthy health care provider.96

Accessibility not only impacts overall physical, social and mental health status, but is also directly associated with disease prevention, treatment detection, quality of life, preventable death, and life expectancy. Barriers to access (including cost, health insurance, and availability) lead to delays in care, preventable hospitalizations, and unmet health needs. In 2014, an estimated 32 million Americans will have health insurance for the first time; making the need for accessible health care an even bigger priority.96 The issue of accessi-

bility spans a number of sub-topics within health care, including geographic availability, price, organization, and their social and cultural acceptability.159

Accessibility and the successful integration of health care are associated with better health outcomes and lower health care costs. In addition, the ease of access to primary care increases the likelihood of receiving preventive health care and decreases disparities in care.160 Since California has the largest uninsured population of any state in the country, local resident coverage is particularly important.161

Develop a sustainable system for non-eligible individuals for a plan, the uninsured or residually uninsured, to receive primary care that is geographically accessible.

OBJECTIVE: By 2015, expand and promote existing enrollment services to enroll eligible adults into a low-income insurance plan.

STRATEGY: Organizations like Young and Healthy, Pasadena Unified School District, and Pasadena Public Health Department will expand to aid in the identification and enrollment process for adult populations.

OBJECTIVE: By 2014, promote insurance enrollment through the health insurance exchange set to go live late-2013 through Live Well Pasadena Campaign to uninsured adults not eligible for low-income health insurance programs.

OPTION 1

OBJECTIVE: By 2015, increase number of patient visits who do not qualify for low-income insurance OR insurance through the exchange through a Public-Private Partnership Model by 10%. (Data would be number of visits to Low cost clinics)

OPTION 2

OBJECTIVE: By 2018, create a publicprivate partnership community clinic.

Strategy: Follow models similar to Young and Healthy Pasadena of the Church Health System in Memphis, Tennessee. Ideally local medical community representatives donate services and supplies in a usable pool so residents who can't afford insurance, or are residually uninsured for whatever reason, have the ability to access care when needed. This method takes incredible amounts of structure and relationships and a dedicated staff that can maintain those.



BACKGROUND: The implementation of the Affordable Care Act will create a health insurance exchange. The heath care exchange is a web portal that is essentially a health insurance broker. The exchange will display several plans at different premiums for a person to select. Because of rising health care costs, it is expected many of these premiums will be unattainable for certain populations with less dispensable income that can be dedicated to health care costs. This group is unique in the sense that it is not the poorest group, who would be covered by low-income or government-sponsored health insurance programs, or the richest group who would most likely be insured through an employed-based system or self-insured privately or through the health exchange. Nevertheless it is vital to promote the maximum amount of enrollment to the community to ease the burned on safety net providers and increase the number of insured adults in the Pasadena area.

FUTURE OPPORTUNITY: In the next five years, the workgroup will investigate implementation of a model like Hilton Head, South Carolina. Residents' monthly utility bills were rounded to the nearest dollar. Those funds were designated fund a local clinic for residually uninsured populations. In Pasadena, similarly secured funds could instead be used to subsidize exchange premiums for those that do not have 1) employer-based insurance, 2) those already covered by individual insurance (self-insured), or 3) those purchasing insurance through the health insurance exchange

OBJECTIVE: By 2015, reinstate the Outreach and Navigation Team to empower individuals to understand their health insurance plans and learn to better navigate their health services.

STRATEGY: The Outreach and Navigation Team was a partnership between PUSD, Young and Healthy, & PPHD. The program performed outreach to encourage residents to become enrolled and create awareness-level raising about health insurance plans. Trainings were offered that talked (in part) about keeping health histories, immunizations records, and when and how to use 911. In addition, these teams worked individually with people to help them better navigate their health insurance plans and the services they offered.

Funding sources will need to be identified through philanthropic grants, other grants, and traditional reimbursement of plans for outreach. Maternal Child, Health Access may pay for enrollment training and certification for Navigators/Enrollers for both adults and children. Funding for the local, certified Navigators/Enrollers would need to be secured elsewhere.

TOPIC AREA: Obesity & Obesity-Related Disease Prevention Meeting

VISION: We envision community environments that enable health eating and active living.

MOTTO: Eat. Play. Live

The shift from infectious diseases to chronic diseases is best exemplified by the rising rates of obesity. Recent epidemics of chronic health conditions such as obesity and diabetes in both adults and children indicate that cardiovascular disease will likely remain the leading cause of morbidity and mortality in years to come.205 In 2007 and 2008, 19.4% of adults and 20.7% of children in Pasadena were obese, respectively (Figure 7).205 To compound the situation, obesity does not equally affect all races. For example, adult Latinos (29.4%) and African Americans (29.2%) have notably higher obesity rates than their White (17.6%) and Asian/Pacific Islander (8.9%) counterparts. Among school-aged children, Pacific Islanders (37.1%) and Latinos (27.5%) have the highest obesity rates.

While risk for obesity is a complex mixture of genetics, diet, and cultural influences, physical activity is still an important component to reducing or preventing obesity. An assessment done in 2011 estimated that only 61% of adults in Pasadena were getting the minimum amount of weekly aerobic activity, and only 33% are getting the recommended aerobic and strengthening guidelines.

GOALS

Goal 1: Increase access to fresh/healthy food in neighborhoods with food deserts.

Goal 2: Increase access to physical activity in public recreation, parks, and open spaces.

Goal 3: Empower community members to take action and become part of the change.

Increase access to fresh/healthy food in neighborhoods with food deserts.

OBJECTIVE: By 2015, implement three strategies to promote the use and development of community gardens throughout Pasadena.

Strategy: In the City-School Work Plan efforts are detailed to continue efforts with local schools to develop school-based gardens and disseminating knowledge about gardening to local communities.

the importance and execution of community gardens.

Strategy: Follow model similar to Ron Finley's where neighbors host 'Dig-In's. A successful Dig-In starts with invited friends, family and neighbors to design, build and

Strategy:

Gardens has

Pasadena Learning

instructional materials and curriculum about

fruits and vegetables. It works through grass-root community of volunteers that work neighbor to neighbor to help collectively increase access to fresh produce.

start a new garden in a family's home that will produce fresh

Strategy: Community
Gardens will distribute
developed materials
that include bestpractices for rules and
regulations, templates
and other resources
to help cultivate a
successful community
garden.

Strategy: Working
with the Altadena
Farmer's Market and Los
Angeles Food Policy
Council, work to train and
certify informal food
producers to sell excess,
backyard fruits and

vegetables at Farmer's

Markets or "pop-up

veggie markets".

OBJECTIVE: By 2015, create a plan to convert pilot corner-store and food truck conversions to make fresh fruits and vegetables more accessible and visible at local markets.

STRATEGY: Develop a marketing/ business strategy for corner stores to sell more fresh fruits and vegetables in local corner stores, hand trucks and larger mobile trucks.

Increase access
to physical activity
in public, recreation,
parks, and open
spaces.

STRATEGIES:

Promote and market recreation/
play and utilization of public parks
and open spaces. The campaign will
include messaging like biking to work,
more exercise, active living events
occurring in the area, and other active
living messages. The campaign will
also include motivational messaging
to encourage utilization of parks and
open space within Pasadena.

STRATEGIES:

Outreach to large area employers
to adopt a Health Food and Beverage
Vending and Procurement Policy. The City of
Pasadena has a pre-written policy that can be
adapted for use in occupational settings that
dictates how to procure and serve health foods
during work meetings. It also has vending
machine components that help to encourage
providing only healthier options. This strategy
also includes trainings and resource
materials provided by the City of
Pasadena Physical Active and
Nutrition Program.

STRATEGIES:

Promote and market
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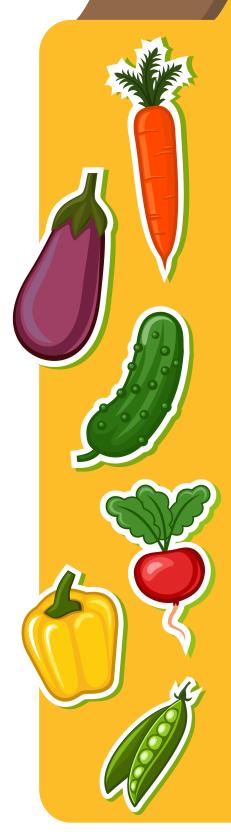
FUTURE OPPORTUNITY:

Outreach to large area employers to develop Workplace Wellness programs.

Workplace models already in place can be mirrored. Incentives for increased stairway usage and walking/exercising during breaks. A recently launched national campaign called "Fire Up Your Feet" targets families, students and schools to work together and create active lifestyles which inspire our children to be healthy and physically active. Resources are available that can be distributed a local schools in addition to work places.

FUTURE OPPORTUNITY:

Promote the development of neighborhoods that promote active living. The "Power of 10" was an idea discussed during the CHIP development process. This idea involves creating a space, separate from a park, in local neighborhoods that have 10 (could be less) different things that can be done in that space. This creates a gathering of people that stimulates activity and a sense of community for the neighborhoods that such areas would be located in.



OBJECTIVE: By 2014, develop clear, consistent messaging for community members to encourage self-care to facilitate healthy eating and active living behavior changes.

STRATEGY: Promote culturally-tailored campaigns programs like "Rethink Your Drink", 5-2-1-0, and "Portion Distortion" that provide information and location of resources for community members. This will be incorporated into the Live Well Campaign.

OBJECTIVE: By 2014, develop clear, consistent messaging for medical providers to encourage self-care to facilitate healthy eating and active living behavior changes.

STRATEGY: Promote and distribute 5-2-1-0 educational materials to medical providers. The 5-2-1-0 Campaign is: 5 – fruits and veggies, 2 – hours or less of recreational screen time (television, computer, etc.), 1 – hour or more of physical activity, and 0 – sugary drinks, more water and low-fat milk. The program will encourage providers to facilitate patient self-care. Additionally, it will have a referral resource matrix that providers can utilize to refer patients for low- to no-cost healthy eating, active living services.

OBJECTIVE: By 2015, identify and train a minimum of 100 community healthy eating, active living (HEAL) champions.

STRATEGY: Work with faith-based organizations, neighborhood associations, youth groups, and other community groups in an effort to empower the community toward healthy eating and physical activity. Outreach curriculum will incorporate Pasadena Public Health Department units including Defensive Dining and MyPlate. A unit will also be dedicated to garden planning curriculum.

TOPIC AREA: Teen Pregnancy

VISION: To create a nurturing environment that empowers youth to make healthy choices regarding relationships & sexual health, and determining their future.

Issues such as teen pregnancy place substantial social and economic costs on teen parents and their children.177 Teen pregnancy and birth significantly contribute to high school dropout rates among girls. Only an estimated 50% of teen mothers receive a high school diploma by age 22, compared to 90% of women who were not teen mothers.177 In addition, teen pregnancy accounts for approximately \$11 billion per year to U.S. taxpayers in increased health care and foster care costs, increased incarceration rates among children of teen parents, and lost tax revenue due to lower educational attainment and income among teen mothers.

GOALS

Goal 1: Reduce the number of teen pregnancies and sexually transmitted diseases over the next 5 years.

Goal 2: Empower youth to conduct peer-to-peer conversations about healthy relationships and sexual health.

Goal 3: Empower parents/guardians, youth mentors and advocates to engage in communication/conversations about healthy relationships and sexual health.



Reduce the number of teen pregnancies and sexually transmitted diseases over the next 5 years.





OBJECTIVE: By 2013, implement the Positive Prevention curriculum in the schools that is evidence-based and comprehensive to include healthy relationships and sexual health.

STRATEGY: Recently PUSD partnered with Planned Parenthood of Pasadena and the San Gabriel Valley (PPP), to offer the Positive Prevention Curriculum for grades 7-12. The course is offered as a 7-class series with an 8th as a boosted. It integrates important family life skills through a standards-based intervention. Currently it is completely funded through Planned Parenthood.

GOAL 2 Empower youth to conduct peer-to-peer conversations about healthy relationships and sexual health.





OBJECTIVE: By 2015, replicate peer advisory group to other local high schools to empower youth to conduct peer-to-peer conversations about healthy relationships and sexual health.

STRATEGY: Currently there is a Peer Education Group running at Blair High School. Birthed from the health Centers Academy, and in response to a needs-assessment conducted there, the students were empowered to be peer advocates. They received formal trainings and lesson plans after school, and meet regularly to ensure they provide sound, knowledgeable advice as peer advocates. Volunteers from Teen Futures, Foothill Family Service, PPHD, Day One, Flintridge, etc. all could identify potential peer advocates.

Similar efforts could prove fruitful at larger public high schools in the Pasadena area; however, significant barriers exist. Firstly, funding must be allocated to have a person train and organize the peer advocates in the school. Meetings must be regular, and messaging consistent. Additionally, there must be significant buy-in from staff and students to participate.

To accomplish this objective, grant funding for a Peer Education Group would need to be secured.

Empower parents/guardians, youth mentors and advocates to engage in conversations about healthy relationships and sexual health.



OBJECTIVE: By 2014, incorporate messaging into Live Well Pasadena Campaign to raise awareness around teen pregnancy and talking to teens about sex that target parents/caregivers, clergy, and other adults that serve as role models/leaders to youth.

STRATEGY: Develop clear and consistent messaging about healthy relationships and sexual health as part of the Live Well Pasadena campaign. Efforts may include: billboards, bus stops, social networks, and other media. Content should include tips, resources, Frequently Asked Questions (FAQs), talk lines and should include a "landing site" that is an omnibus site with the aforementioned resources.

FUTURE OPPORTUNITY: There is interest in applying the Our Whole Live (OWL) Campaign to local faith-based institutions. By using a "whole teen" approach, facilitators can identify barriers to the attainment of their quality of life, including factors of health, to create priorities and skills to attain them.

OBJECTIVE: By 2015, develop materials to distribute to local medical providers about resources for teens about healthy relationships and sexual health.

STRATEGY: Develop materials with resources, tips, and contact information and distribute to local medical providers. Resources for the campaign, target FPAC and other doctors who typically have contact with youth. Also, include materials on how to offer "Teen Friendly Services" that encourages youth to engage the medical community for their health needs.



TOPIC AREA: Mental Health and Substance Abuse Prevention

VISION: Improve community-wide mental health through enhanced prevention and early-intervention strategies.

Mental health and substance abuse disorders have been largely excluded from focus in the current health care system. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), this largely unmet need negatively impacts the health and well-being of individuals, while placing an unnecessary financial burden on communities, schools, businesses, prisons, and the health care system. In 2011 it was estimated that about 600,000 people, or 8.3%, in Los Angeles County were currently living with depression.

GOALS

Goal 1: Increase community-wide awareness about mental illness, substance use disorders, and availability of community-based, culturally-sensitive therapies.

Goal 2: Increase identification and referral of 'at-risk' Pasadena residents to community-based programs designed to enhance resilience-building coping skills

Goal 3: Increase utilization of existing community-based mental health services to treat Pasadena residents suffering from a diagnosable mental illness and/or substance use disorder.



Increase community-wide awareness about mental illness, substance use disorders, and availability of community-based, culturally-sensitive therapies.

BACKGROUND: Enlightening more unconventional community members involved is a key initiative for mental health in the CHIP program. For example, community members who frequently see the same people day in and day out can identify a change in behavior or mental health irregularity in a person they see on a day-to-day basis. These people when equipped with knowledge can become informal mental health referral agents.

OBJECTIVE: By 2014, create a resource that can be used easily for mental health information, resources, and referrals.

STRATEGY: Create mental health resources to inform neighborhood leaders about mental illness and local providers who offer services.

FUTURE OPPORTUNITY: A mental health line to be included on a system like the 211 that will link community members to Pasadena-based programs.

OBJECTIVE: By 2015, utilize at least two strategies to campaign messages to promote peer advocates (ex- promotoras), targeting large housing complexes/neighborhood connections and ARTS busses.

STRATEGY: Develop a mental health messaging to promote peer advocates in the Live Well Pasadena Campaign. Messages should include identifying the indicators of mental illness and local resources available.

STRATEGY: Write an article for Pasadena InFocus and the CHDP Newsletter with a list of services and resources will be distributed. Information for the articles can be gleaned from the Survival Guide provided by the Humans Services and Recreation Department and from the City of Pasadena Library.

Increase identification and referral of 'at-risk' Pasadena residents to community-based programs designed to enhance resilience-building coping skills.

BACKGROUND: To encourage the participation of all residents in mental health services the terminology of 'highrisk' residents to 'at-risk' residents to create a more loosely defined definition of 'at-risk'. This will create a broader, more inclusive than exclusive definition that will make our mental health outreach available to more members of the community. 'At-risk' can be defined as anybody at any given place in life who has the potential to be at risk.

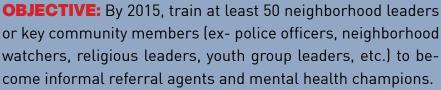


OBJECTIVE: By 2015, train at least 100 Pasadena-area workers, residents and others in the area to identify and utilize resilience-building coping skills.

STRATEGY: Train people in the Community Crisis Training offered by the Community Crisis Team, led by the Pasadena Public Health Department, to all local area residents, workers or visitors.

The training focuses on coping mechanisms during crises/ emergent events and recognizes that at any place in life a person can be at-risk for having a crises moment, necessitating mental health intervention. These trainings are designed to empower the individual with strategies to deal with crises and locate resources available when they are needed.









STRATEGY: Los Angeles County Department of Mental Health will host Mental Health First Aid Trainings for leaders of local community-based organizations, non-profits, faith-based institutions, etc. to equip leaders to identify mental health issues and learn how to refer to appropriate services.

STRATEGY: Distribute mental health cards that list mental health resources that police officers and other identified representatives can distribute to families with mental health issues that cannot be immediately resolved.



GOAL 3

Increase utilization of existing community-based mental health services to treat Pasadena residents suffering from a diagnosable mental illness and/or substance use disorder.



OBJECTIVE: (Ongoing) Identify funding opportunities to bring back evidence-based direct services for substance abuse particularly amongst youth.

STRATEGY: Locate funding to apply peer-to-peer model interventions, like Teens on Target, which is a violence prevention model with elements of substance abuse.



TOPIC AREA: Live Well Pasadena Campaign

VISION: Unified health messages to promote well-being and quality of life for those who live, work, learn and play in Pasadena.

IDENTIFIED TOPIC AREAS

ENCOURAGE PLAY:

- a. Use alternative transportation options.
- b. Use local parks with 'find your nearest park' feature.
- c. Know your daily recommended amount of exercise.
- d. Other active living messages.

ENCOURAGE HEALTHY EATING a "5-2-1-0" "Rethink

- a."5-2-1-0", "Rethink Your Drink", & "Portion Distortion" messaging.
- b. Other health eating messages.

MENTAL HEALTH AWARENESS:

- a. Suicide hotline numbers
- b. QR that links to a list of local resources including upcoming trainings
- c. 211 number (when available)

ACCESS TO HEALTH CARE MESAGING:

a. Promote knowledge of health care exchange

FAMILY LIFE MESSAGING: a. Resources about

- a. Resources about healthy relationships and sexual.
- b. Include link to 'landing site' that has resources, FAQs, local clinic locations.

SMOKING CESSATION PROJECT: a. Anti-smoking messaging b. Hotline resources (1-800-no-BUTTS) c. Link to public

health policies.

STAIRWELL PROJECT: a. Encourage stairwell beautification and utilization community-wide.

ACKNOWLEDGEMENTS

INDIVIDUALS

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Mary Urtecho-Garcia

Patricia Valencia

Tina Williams

Serena Williams

Statice Wilmore

Eric Walsh

Wendy Wang

Lois Zagha

Christy Zamani

ORGANIZATIONS

All Saints of Pasadena

Altadena Town Council

American Health Services

Community Clergy Coalition

Community Health Alliance of Pasadena

Day One

El Centro de Acción Social

Flintridge Center

Foothill Family Service

Hathaway-Sycamores

HealthyPasadena.org

Huntington Hospital

John Muir Learning Garden

LA County Department of Mental Health

Learning Works

Loma Linda University

NELA Transition

Northeast Los Angeles Transition Group

Office of the Mayor

Pacific Clinics

Pasadena City Council

Pasadena Community College District

Pasadena Community Gardens

Pasadena Educational Foundation

Pasadena Fire Department

Pasadena Housing Department

Pasadena Learning Gardens

Pasadena Marathon

Pasadena Public Health Department

Pasadena Unified School District

Patron Saints

Planned Parenthood Pasadena & SGV

Rose Bowl Operating Company

URDC/Bill Moore Clinic

Young & Healthy

YWCA Pasadena-Foothill Valley



Access to Health Services

Goal 1: Develop a sustainable system for non-eligible individuals for a plan, the uninsured or residually uninsured, to receive primary care that is geographically accessible.

OBJECTIVES	BY WHEN?	STATUS
Expand enrollment services to adults		
Live Well Pasadena messaging for exchange		
Outreach and Navigation Team Instated		
Increase patient visits by 10% in low-cost clinics		
New public-private community clinic		

Obesity & Obesity-Related Diseases

Goal 1: Increase access to fresh/healthy food in neighborhoods with food deserts.

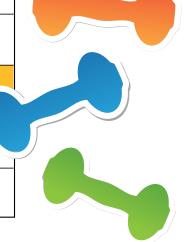
OBJECTIVES	BY WHEN?	STATUS
Three strategies around community gardens		
Plan for corner store conversions		

Goal 2: Increase access to physical activity in public recreation, parks, and open spaces.

OBJECTIVES	BY WHEN?	STATUS
Messaging to promote play		
New public-private community clinic		

Goal 3: Empower community members to take action and become part of the change.

OBJECTIVES	BY WHEN?	STATUS
Messaging for self-care		
Messaging for medical providers		
100 trained HEAL Champions		





Goal 1: Reduce the number of teen pregnancies and sexually transmitted diseases over the next 5 years.

OBJECTIVES	BY WHEN?	STATUS
Implement Positive Prevention Curriculum	2013	

Goal 2: Empower youth to conduct peer-to-peer conversations about healthy relationships and sexual health.

OBJECTIVES	BY WHEN?	STATUS
Create Peer Advisory Group in at least one additional	2015	
New public-private community clinic		

Goal 3: Empower parents/guardians, youth mentors and advocates to engage in conversations about healthy relationships and sexual health.

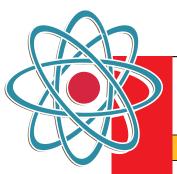
OBJECTIVES	BY WHEN?	STATUS
Messaging on teen pregnancy	2014	
Materials developed for local providers	2015	



Teen Pregnancy







Mental Health & Substance Abuse

Goal 1: Increase community-wide awareness about mental illness, substance use disorders, and availability of community-based, culturally-sensitive therapies..

OBJECTIVES	BY WHEN?	STATUS
Mental Health Resources developed	2014	
Mental Health Messaging	2015	
Mental Health Resources developed	2015	

Goal 2: Increase identification and referral of 'at-risk' Pasadena residents to community-based programs designed to enhance resilience-building coping skills.

OBJECTIVES	BY WHEN?	STATUS
100 Trained in resilience-building skills	2015	
50 Area Leaders trained	2015	

Goal 3: Increase utilization of existing community-based mental health services to treat Pasadena residents suffering from a diagnosable mental illness and/or substance use disorder.

OBJECTIVES	BY WHEN?	STATUS
Identify funding opportunities for substance abuse direct services	Ongoing	





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