Preparing the Community Resource Center to advance health equity in East San José

Our Needs Assessment Process >

System Partner Advisory Group
n = 22
meetings = 6

Resident Advisory Group
n = 18
meetings = 6

Stakeholder Gatherings
Resident sessions:
n = 8

Safety net partner sessions: n=3

1:1 convos: n=90

Focus Groups
n = 80+
groups = 14

Safety net Survey
n = 120+

Resident/ Member Surveys
n = 700

Data Pulls & Analysis
Collected and compiled publicly available and data shared by partners

Geographic Resource Mapping
Identified resource strengths and gaps within the CRC vicinity

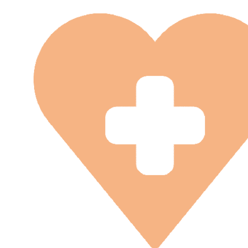
Medi-Cal/Medicare Member Journey Mapping
Internal alignment exercise

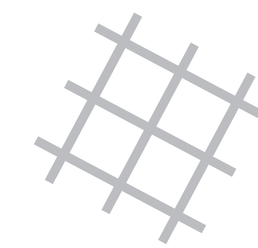
Participatory Priority-Identification Process
Priorities finalized based on stakeholder input

Our Framework >

Desired Results >

Strengthened social stability & resilience

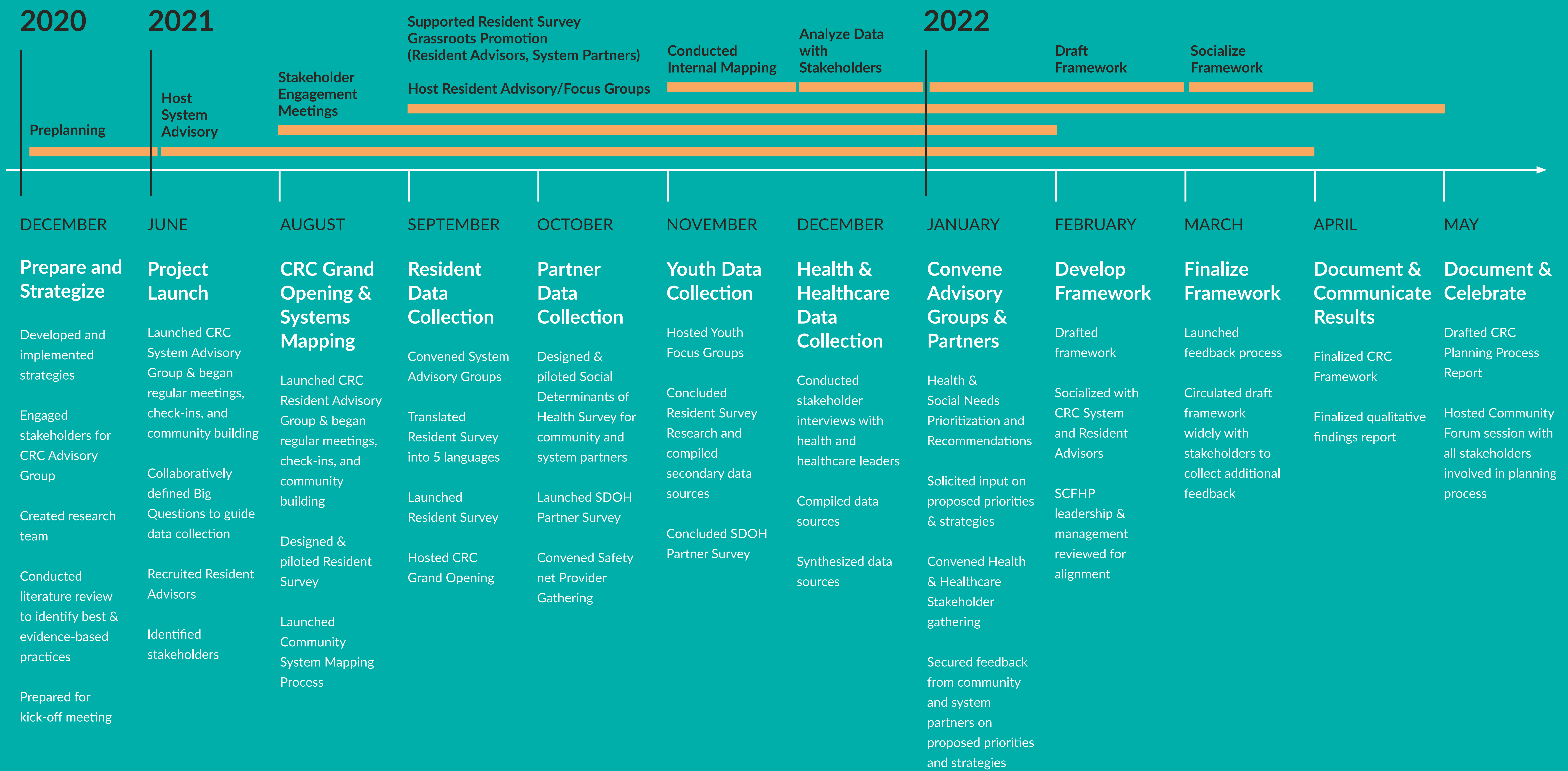

Improved health & wellness


Connected, supported, & engaged community

Robust and efficient resource system

SCFHP launched a needs assessment and planning process to determine how to best improve the health and wellbeing of East San José's most vulnerable residents. The result of the process is a framework that will guide our decision making at all levels.

Our Process



Our process is grounded in **East San José resident** perspectives, needs, experiences, and cultures

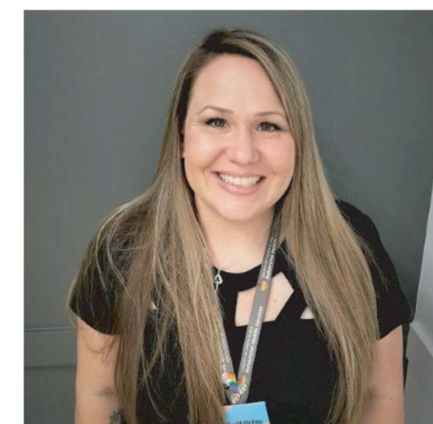
CRC Resident Advisory Group

CRC System Partners Advisory Group

A dedicated group of community leaders working to ensure the SCFHP Blanca Alvarado Community Resource Center can address the health and social needs of East San José communities.

Solandyi Aguilar
Food Distribution Coordinator
Veggielution

Elisa Marina Alvarado
LCSW
Honorary Member


Alicia Anderson
Program Manager
Santa Clara County: Behavioral Health Department

Dr. Arcel Blume
Director, Office of Cultural Competency
Santa Clara County: Division of Equity & Social Justice

Laura Buzo
Recreation Superintendent
City of San Jose: Parks, Recreation & Neighborhood Services

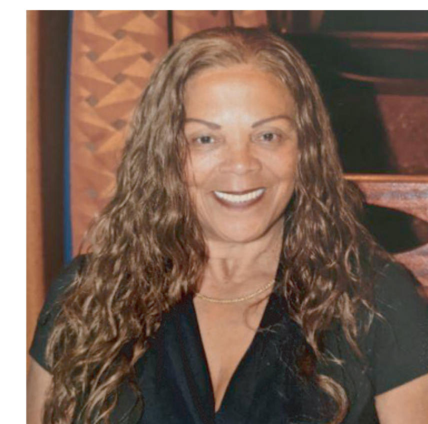
Laura Clendaniel
Director of Operations
Healthier Kids Foundation

Maria Garcia
Director of Programs
The Health Trust

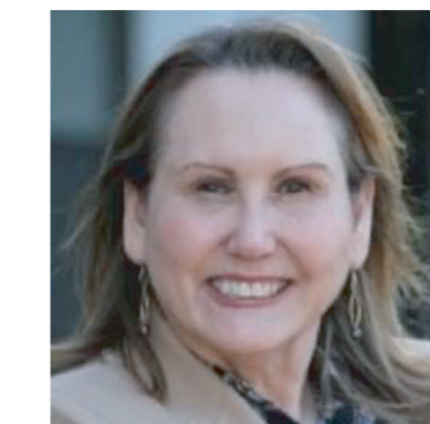
Claudia Harty
Program Manager
Parents Helping Parents

Jessica Ho
Government & Community Affairs Manager
North East Medical Services

Zulema Inai
Director, Family Strengthening & Support
First 5 of Santa Clara County

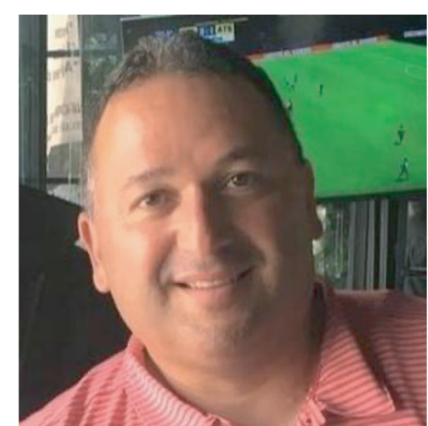

Betty Kelly
Health Ministry
Emmanuel Baptist

Tricia Kokes
Former Board Member
Silicon Valley Independent Living Center


Maritza Maldonado
Executive Director
Amigos de Guadalupe

Zulma Maciel
Director, Office of Racial Equity
City of San Jose

Maribel Montanez
Development Director
Gardner Family Health Network


Dionisio Palencia
Senior Community Impact Director
American Heart Association

Victoria Partida
Enrollment Lead
Community Health Partnership

Quyen Vuong
Executive Director
ICAN

Shivesh Puri
Associate Director of CareCorps
RocketShip Public Schools

Eric Mukuno
Director of Patient Services
HCA/Regional Medical Center

Maryam Adalat, MSW
Director, Student Services
East Side Union High School District

Vision
Visión
Tầm Nhìn

All members of our community from all backgrounds, identities, and abilities, feel valued, safe, and empowered with the knowledge, services, and resources to live their lives to the fullest.

Todos los miembros de nuestra comunidad de todos los orígenes, identidades y habilidades se sienten valorados, seguros y empoderados con el conocimiento, los servicios y los recursos para navegar por sus vidas.

Tất cả các thành viên trong cộng đồng của chúng ta, không phân biệt xuất thân, danh tính, hay khả năng, đều cảm thấy có giá trị, an toàn, mạnh mẽ và tự tin hơn khi nhận được kiến thức, dịch vụ và các nguồn hỗ trợ để cải thiện cuộc sống.

Our Approach to Creating Community Health Equity

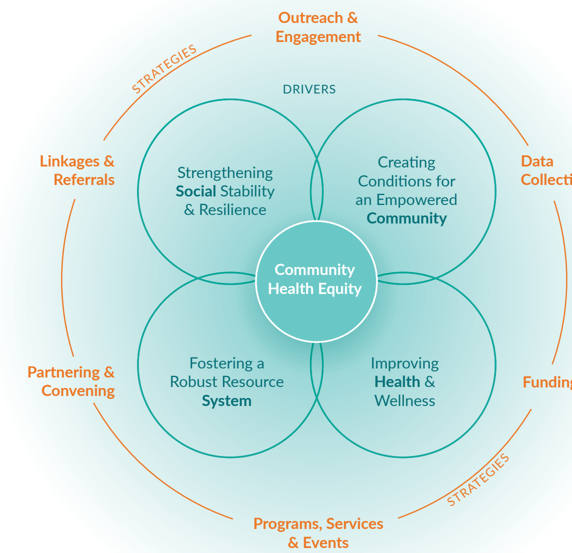
Purpose

A community resource center dedicated to improving health and well being by offering programs, services, resources and space to foster empowerment together with the communities of East San José.

Equity Drivers

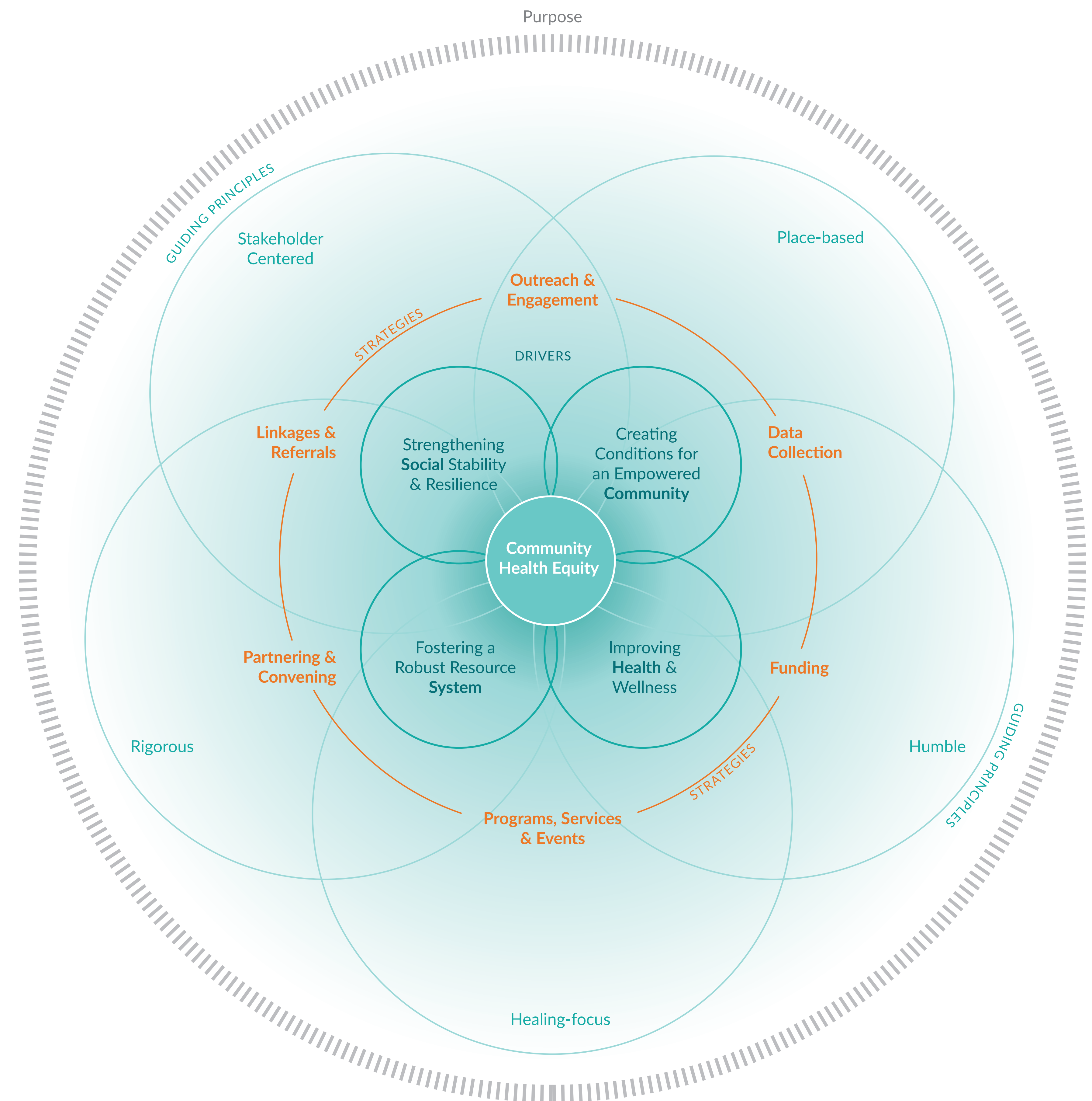
Four interrelated drivers must be addressed to increase community health equity in East San José.

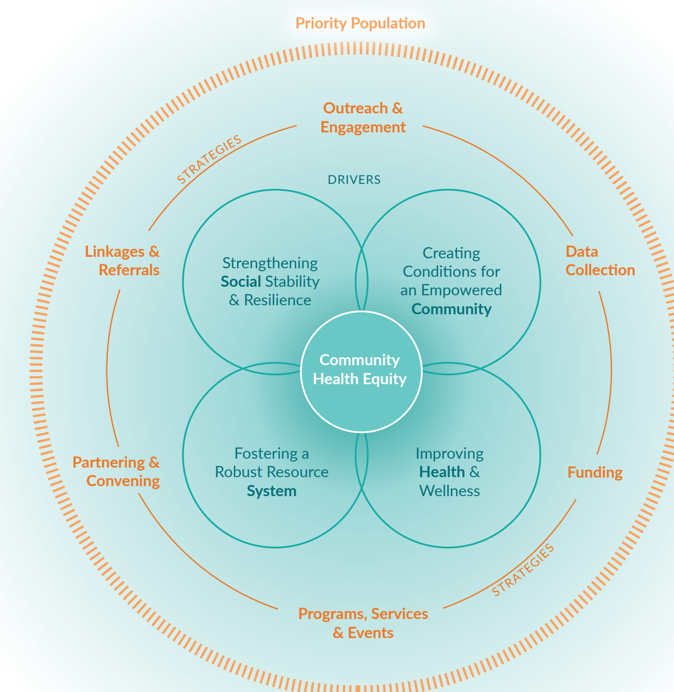
Each driver has a set of priorities, goals, and working strategies.



Cross-cutting Efforts

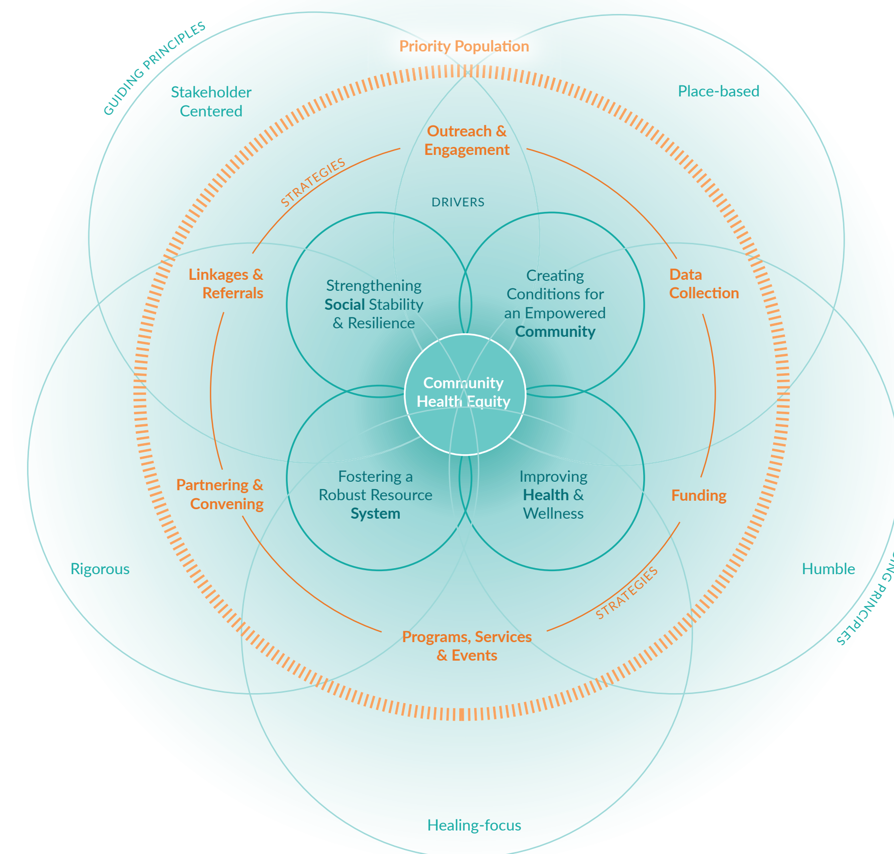
Six categories describe the types of work we do to move our drivers.





Priority Population

People experiencing limited resources from all backgrounds, identities, and abilities across East San José, regardless of immigration status.



Guiding Principles

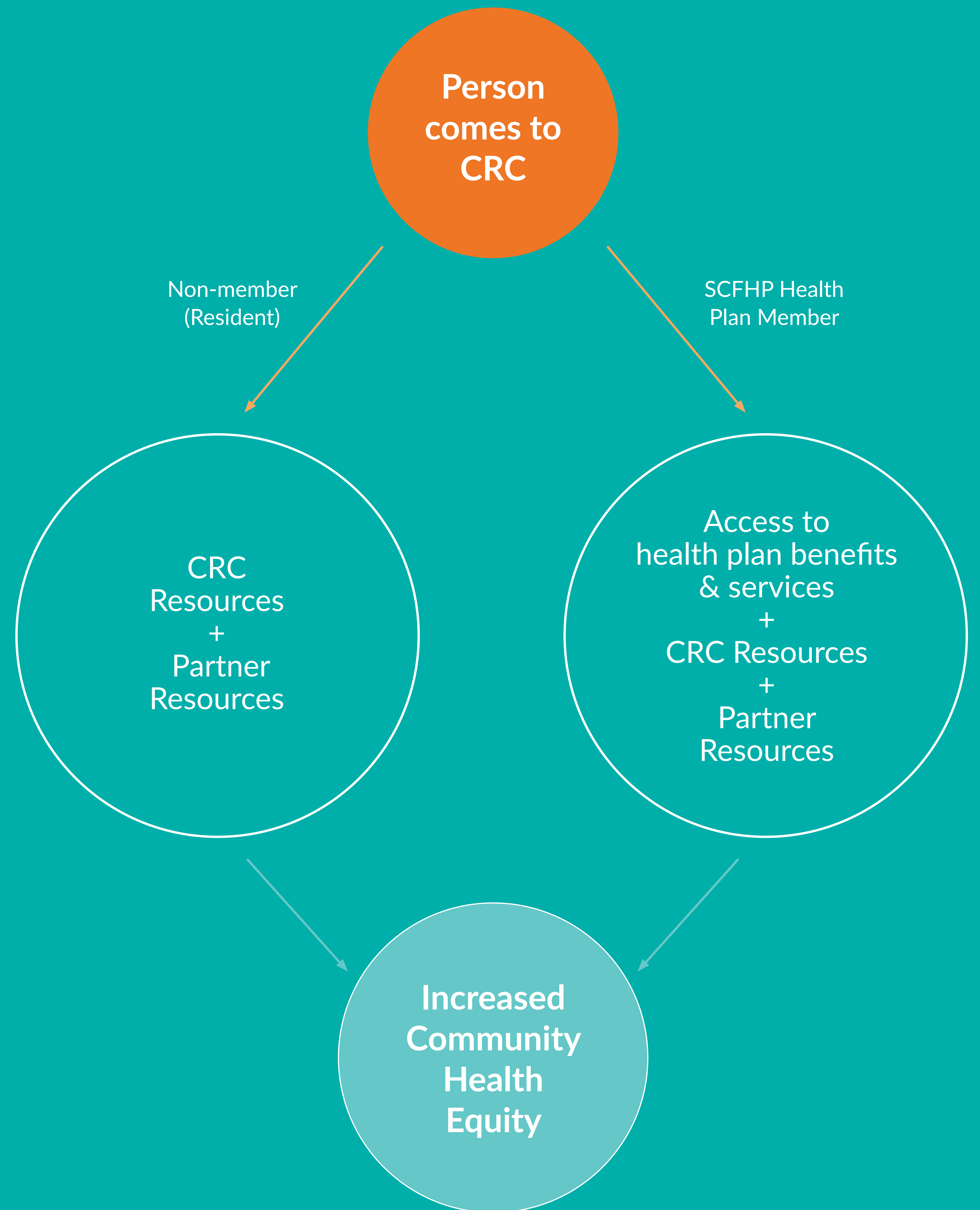
Five principles define our collective way of being. We are committed to living these principles in everything we do and effort we make.

Welcoming All
Dando la Bienvenida a Todos
Chào đón tất cả mọi người!

We prioritize physical and emotional accessibility in order to create an inclusive Center in which everyone feels safe, heard, valued, and welcomed.

Priorizamos la accesibilidad física y emocional para crear un Centro inclusivo en el que todos se sientan seguros, escuchados, valorados y bienvenidos.

Chúng tôi ưu tiên khả năng tiếp cận các sự trợ giúp về mặt thể chất và tinh thần nhằm tạo ra một trung tâm hòa nhập, trong đó mọi người đều cảm thấy an toàn, được lắng nghe, trân trọng, và chào đón.



Our Priorities, Goals, and Working Strategies

EQUITY DRIVER
Health

The Long-Term Change We Seek

Improving Health & Wellness — ESJ residents have the access, support, and knowledge necessary to care for their physical and mental health and well being.

Priorities & Goals

Healthcare Access
Goal: Increase access to health insurance for low-income communities and empower low-income communities impacted by health disparities to navigate the healthcare system.

Healthy Lifestyles
Goal: Increase habits around nutrition, exercise, and self-care that contribute to health and wellbeing.

Behavioral/Mental Health
Goal: Improve (resident and system) resilience through increased knowledge and utilization of practices and resources for managing stress and trauma.

Chronic Disease Management/ Long-term Health Issues
Goal: Reduce chronic disease-related health crises through improved prevention and management of chronic conditions.

Working Strategies

1. Expand access to health insurance
2. Empower patients to navigate the healthcare system
3. Partner with clinical and nonclinical partners
4. Respond to current needs

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1. Offer health education
2. Leverage Community Health Workers and Promotores
3. Health behavior change programs
4. Programming for older adults

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1. Programming on depression and anxiety
2. Reduce mental health stigma
3. Increase access to mental health programs
4. Address secondary trauma

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1. Offer high blood pressure and pre-diabetes awareness and education
2. Offering programming to prevent and control chronic diseases
3. Improve access to clinical preventive services
4. Education and awareness for chronic diseases

EQUITY DRIVER
Social

The Long-Term Change We Seek

Strengthening Social Stability and Resilience — All ESJ residents can fulfill their basic needs (food, shelter, and income).

Priorities & Goals

Healthy Food Access
Goal: Increase the capacity to secure and prepare nutritious food for oneself or one's family.

Stable Housing
Goal: Increase access and resources to safe and stable living situations for one's self and one's family.

Income Stability
Goal: Increase self-sufficiency (and income stability) in East San José.

Working Strategies

1. Promote food assistance programs
2. Improve awareness and confidence about food assistance

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1. Access to emergency housing programs
2. Access to homeless prevention programs

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1. Provide supportive services: financial education, legal services for immigration & tenant rights
2. Increase access to adult education and training

EQUITY DRIVER
Community

The Long-Term Change We Seek

Creating Conditions for an Empowered Community — ESJ residents have the knowledge and power needed to make decisions to support the health and wellbeing of their families and community.

Priorities & Goals

Welcoming, Accessible, and Inclusive Environment
Goal: Create a space in which every member of our community feels valued, important, and that they matter.

Community Relevance
Goal: Inform routine decision making with ongoing channels of information from members and community about their preferences and needs.

Linguistic Inclusivity
Goal: Ensure information and services are available in languages and educational levels that are dominant among members and residents.

Celebration and Community Building
Goal: Host regular events that bring and build community.

Working Strategies

1. Engender member & resident trust
2. Train staff on historic, systemic, and structural inequities of ESJ
3. Implement gold-standard language access practices

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1. Sustain resident advisory group
2. Sustain ESJ system partners group
3. Collect on-going data about health and social needs

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1. Ensure all programs are accessible to non-English language groups
2. Provide translation & interpretation

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1. Build relationships and foster trust through cultural events

EQUITY DRIVER
System

The Long-Term Change We Seek

Fostering a Robust Resource System — ESJ residents have strong relationships with service providers and access to relevant services. Providers throughout ESJ work together to seamlessly meet residents' and members' health and social needs.

Priorities & Goals

Collective Impact
Goal: Increase collaboration and coordination among local service providers in order to improve our collective ability to meet the needs of members and residents.

Effective Referral System
Goal: Improve the quality and reach of a closed-loop referral system between providers addressing basic needs.

Respond to Emerging Needs
Goal: Activate networks and referral systems to respond to local health and community issues.

Working Strategies

1. Strengthen the network among community and system partners
2. Identify collective impact opportunities with strategic partners to address health disparities in ESJ

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1. Identify and implement a resource navigation system
2. Collect client satisfaction data about CRC resource navigation process
3. Build and showcase live mapping tool on CRC website

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1. Leverage community and resident networks to quickly understand issues & respond by disseminating relevant resource and services information