Keeping California Safe through a Health Resilience Network

The pandemic and its associated disruptions has revealed gaps in health awareness, education, access to food, and healthy living practices. Expanding the network of existing and trusted community-based Cooperative Extension professionals will accelerate the pace and scale of community empowerment by providing knowledge necessary for adopting safe and healthy practices (e.g., vaccination). Investing to link resources, knowledge, and actions across agencies and organizations through a UC ANR Health Resilience Network provides essential capacity, coordination, and science-based-solutions. The Network’s success supports wellness and healthy environments for all Californians, each and every day.

A Focus on Health

There is a new urgency for community health. COVID-19 revealed the fragile nature of many aspects of our current system. Sudden changes disrupted multiple aspects of our educational, food and health systems. Basic health and safety were no longer assured as even the basics of wellness and health were either no longer available, poorly understood or incorrectly applied. From food access to educational access (including Wi-Fi access) to health basics, our system saw people slip into often dangerous and unhealthy situations. Our state systems have struggled to deliver the right information, in the right form, at the right place and time. As a result, too many Californians have lost educational opportunities, fallen ill, or have become food insecure. A Health Resiliency Network can play a major role to build community health by reinforcing and adding another community outreach dimension to our health, food and education systems.

Opportunity and the Outcomes

Building a resilient health system requires inclusion of multiple players and delivery of science-based information that results in widespread adoption by communities. However, behavior change is complex, and relies heavily on the development of trust. UC ANR has in place a trusted statewide network of skilled and respected educators living in the communities that they serve. Emerging health system messages can feed into the UC ANR Cooperative Extension network that is active in all 58 counties. We will build on our existing school activities (implemented through our extensive 4-H youth programs, and our talented CalFresh Healthy Living and EFNEP “army” of community-based educators) as well as our broader community efforts (implemented through our advisors, UC Master Gardeners, UC Master Food Preservers, UC IPM). Of particular note is that our UC 4-H program already has experience in sharing CDC-curricula in schools and recently coordinated a statewide effort around completing the 2020 Census. Further, it is well documented that youth learning builds greater peer acceptance and influences adult learning.
An empowered cohort of UC ANR applied community liaisons and health educators will influence positive basic health-building behavior. The approach will address multiple aspects of health – starting with a focus on vaccination, while also embracing other disease prevention factors such as better nutrition and wellness practices. As such, the effort will not just support one part of healthier communities (vaccination), but will strengthen multiple foundational tenets required for broader community health. Our network will (as it already does) directly engage county and city governments, schools, local health and food system players, county planners, non-profit organizations, and the public to reduce California’s social vulnerabilities.

As a cohort, the UC ANR Health System Resilience Network will
1. Provide training and promotion to support vaccination and other health and preventative measures.
2. Work with other businesses and agencies to adopt practices that reduce the spread of communicable and preventable disease (e.g. working with schools to install windows that open for proper ventilation, working with restaurants to encourage sanitizing tables between patrons, providing training on safe in house product use (e.g., disinfectants), etc.)
3. Work on “Health-in-All Policy” initiatives at the county level (e.g. remove incentives for children to go to school sick - “100% attendance awards”, mandate hand-washing facilities at all public venues that meet capacity, encourage cart sanitation at retail stores)
4. Educate Californians on how infectious diseases are spread, and the measures they can take to reduce their risk.

The need for partnerships. It is worth noting that a number of states already have this type of health system in place for community health education. In an extensive review, the National Extension Committee on Organization and Policy concluded that state Cooperative Extension (e.g., UC ANR) is in fact the best placed organization for this type of work. However, success is best built on a combination of Community Health Specialists operating at the state level working with Educators at the community level. While UC ANR already offers an established employment home and network for the community level educators, establishment of a successful community health network requires multiple health partners operating at the state level.

Impacts

A resilient health system ensures Californians grow in health and wellness. The long term consequence of a Health Resilience Network is improved community health, reduced health care costs, a vibrant local economy, enhanced youth and adult education, and improved quality of life.

Why UC ANR

UC ANR with its network of UC Cooperative Extension (UCCE) experts has proven expertise to build stronger and resilient communities through leadership, outreach and technical skills in natural resources, agriculture, nutrition, youth development and community health. The UC ANR network is embedded with county governments and communities throughout California and provides direct access for communities to the extensive, world renowned and impactful research of the full University of California system. As a trusted long-term partner (>100 year history), UC ANR provides educational delivery that empowers communities at every level. UC ANR evaluates and develops practices, disseminates new research and innovations through trainings and guidance documents, provides coordination and capacity for local and state-level collaborative implementation and policy efforts, and helps identify and promote appropriate policies. UC ANR has an existing network of professionals to provide guidance, expertise, and coordination on food systems throughout the state. This effort will offer much needed support to bolster those efforts and fill critical needs.
Appendix for reference:

Possible support

• 1.0 FTE coordinator who works directly with external partners to identify messages and modes of delivery. This coordinator also works with our SWP directors to get content to them.
• SWP directors work with their teams (Community Educators, CE Advisors, volunteers) to share content as part of normal programming
• Additional CES capacity needed for more deliberate, coordinated approach
  o Perhaps buying out time for existing CES who are not 1.0 FTE (4-H, EFNEP, CFHL), to avoid hiring delay
  o Could add additional CES.
  o Could focus on rural areas, urban areas, or both
  o As a point of reference, a $1M investment (plus any IDC) would get a coordinator plus 7.5 to 9.0 CES time for a year. That could provide programming and impact for a large part of the state if existing employees already have connections. If hiring is required, working through EFNEP and CFHL could cover a lot of ground.