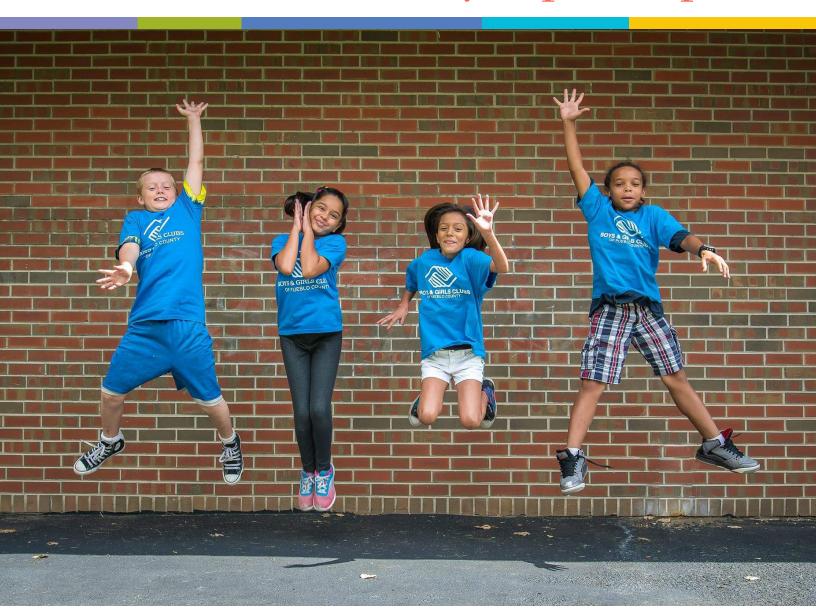
Community Input Report





Special Thanks

Thank you to more than 1,000 Coloradans who took the time to participate in a community conversation or to share perspectives through our online survey. These insights and ideas will help Caring for Colorado staff to understand the realities in Colorado communities. The results presented here will be used to inform our 2020–2025 Strategic Plan.

Special thanks for Community Resource Center for organizing and staffing our 25 community conversations. Special thanks to Stephanie Gommert, Nellie Staggs, Megan Carter and Maria Fabula for all they did to make the conversations happen.

Also, heartfelt thanks to Annie Taylor, MPH, who compiled survey results, synthesized notes from our community conversations, helped to write this report, and provided Caring for Colorado staff with data about Colorado communities to enhance our understanding of community needs.

Dear Friends and Partners,



When Caring for Colorado was formed in 1999, our founding Board of Directors spent a year listening to Coloradans across the state talk about their communities' health needs and how we could partner to help address those needs. What we learned from those conversations was instrumental in charting our path as a health funder.

Since then, we've invested more than \$115 million to improve health and health care for Coloradans, and particularly for people and communities with the greatest barriers to care and the least amount of resources. Through this funding, we've helped:

- Reduce health disparities;
- Prevent disease and promote good health;
- Ensure that Coloradans can access high-quality and affordable health care services;
- Build health systems to produce long-term benefits and improved health outcomes for individuals and communities; and
- Leverage resources to address the most pressing health needs in Colorado.

Together with our partners, we have made a difference.

Today, as communities across Colorado change and grow, so too must the work of Caring for Colorado. We are looking toward the future and asking, "What we can do to make the next generation of Coloradans the healthiest yet? What can we do to support children and families in realizing their full potential for health, well-being and opportunity in our state?"

To help us answer these questions, Caring for Colorado sought feedback from Coloradans. Beginning in September 2018 through March 2019, we conducted 25 community conversations in cities and towns across the state, and we solicited input through an online survey.

The results of the conversations and survey are described here. They paint a picture of changing health needs in our state and provide valuable input as Caring for Colorado shapes its funding priorities for the next five years and beyond.

Listening to and engaging with people throughout our state was an honor and privilege. We listened with the intention to respond to the serious, painful and complex needs we heard from Coloradans. The challenge is before us as we work to invest in communities to improve health and well-being for children, youth and families in our state. We welcome a partnership with you as we take this vitally important journey.

Yours in health,

Chris J. Wiant, MPH, PhD

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PRESIDENT AND CEO

Community input is important to us at Caring for Colorado. It shapes our work and helps us understand how to best target our resources as we strive to realize our mission.

COMMUNITY CONVERSATIONS LOCATIONS

- Alamosa
- Burlington
- Canon City
- Conejos
- Cortez
- Craig
- Del Norte
- Ft. Morgan
- Glenwood Springs
- Grand Junction
- Greeley
- La Junta
- Lamar
- Leadville
- Limon
- Meeker
- Montrose
- Pueblo (2)
- Ridgeway
- Salida
- Steamboat Springs
- Sterling
- Trinidad
- Yuma

In 2018–2019 we embarked upon series of community conversations across to Colorado to inform the development of a new 2020–2025 Strategic Plan. These conversations, together with a statewide survey and a deep look at community-level health data, provided us with meaningful information about the changing health needs in our state.

The following report details the high-level themes of what we heard. The information shared does not encompass every need expressed but represents what we heard again and again in conversations and from the survey.

Community Conversations

Between September 2018 and March 2019, Caring for Colorado staff hosted 25 community conversations across Colorado and spoke with more than 625 people. All conversations occurred outside of the Denver-metro area and were heavily weighted toward rural communities. As a Denver-based organization, we have a strong understanding of metro-area challenges. Therefore, we intentionally targeted our outreach into other Colorado communities. We also know that many of the complex challenges facing our state are amplified in our rural communities.

The goal of each meeting was to hear directly from residents, nonprofits and elected officials about their vision for their community and how Caring for Colorado could support efforts to realize that vision. The meetings were open to anyone and were discussion based.

Coming from the perspective of health and well-being, the questions that guided the discussions were:

- 1. What is it like to be a child or teen in your community?
 What could make it better?
- 2. What is it like to be a parent in your community? What could make this better?
- 3. What does your community need to promote health and well-being for your neighbors, friends and family?

From these conversations, several themes emerged.

The Needs of Parents and Caregivers

As community participants conversed about the needs of children and youth, the dialogue often quickly focused on what it takes to provide for a family today. The needs of children and youth don't exist in a vacuum. Those needs are largely influenced by the family's ability to provide a stable, safe and loving home. That said, during the community conversations there was a lot of discussion about what it takes to provide for a family, as well as what services and supports help make child rearing a rewarding and positive experience. Economic stability (i.e., good jobs), housing security, affordable and available child care, food security and access to health care were all mentioned as critical elements for raising healthy and happy children. There are many barriers in place throughout Colorado that make these basic resources for raising children extremely difficult to attain.

While Colorado has one of the strongest economies in the nation, this isn't the reality in many of our rural or urban economically distressed communities. In the conversations, community participants reflected on this growing economic divide and the lack of jobs that offer a livable wage as perhaps the biggest obstacle facing our state.

Communities also shared that many parents and caregivers are isolated, which can lead to poor outcomes for



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families. Suggested areas for improvement are more access to parenting classes, support groups and home visitation programs, all designed to reduce isolation and help new parents/caregivers feel supported in their important job of raising a family. Communities recognize that these resources need to be offered in ways that are inclusive and welcoming to people of different backgrounds, cultures, languages and of varying needs.

Behavioral health needs of parents and caregivers were expressed often. Increased access to mental health and substance use treatment services were always described as the top community health needs for parents. In many communities, the discussion of intergenerational poverty often was linked to inter-generational issues of mental health and substance use problems. Strengthening these resources within communities was viewed as a critical need and potential solution.

The Results for Parents and Caregivers

- High stress in "making it all work" to support a family.
- With high stress comes risk for behavioral health concerns without strong community supports to prevent and/or treat these issues.
- Families that are isolated/ unsupported and unable to reach their full potential as adults and parents.
- Ongoing financial hardship for families as good jobs continue to be hard to find in rural and urban economically distressed communities.
- Multiple jobs held by one person, jobs without benefits and employment insecurity, which leads to chaotic schedules and unpredictable income.
- Inability to save for college, retirement, emergencies, and simply to have extra money in the bank to meet life's needs.

The Needs of Children



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Participants discussed early care and education for young children during the conversations. Specifically, across all communities, access to available, affordable and quality child care was expressed as a tremendous community need. In many communities there is no infant care; toddler care is highly limited with long waiting lists to receive such care; there are few (if any) licensed child care facilities; and there are few licensed child care homes.

People working with young children expressed concerns over the growing social-emotional needs they see in very young children. People feel ill-equipped to understand the root causes of these needs as well as how to address the needs with a trauma-informed approach. Participants suggested solutions such as training for teachers, day care providers and medical providers on trauma-informed practices and care be prioritized. And, support for this training in rural communities is

critical as professional development opportunities are less available outside of metro areas.

Another need that was discussed is the lack of preschool options for young children. In many communities preschool is not universally available and usually there is a fee to participate. Also, the hours preschool programs are open often don't accommodate parents' work schedules, creating barriers to participation.

For elementary-aged children, the concerns tied to the four-day school week were discussed. These include food security for those students who are dependent on free and reduced breakfast and lunch while at school, and the worry that more children will be unsupervised at home while parents work. There was also concern voiced about older children (8–12) being put in the position of watching younger siblings because of the lack of affordable child care for the fifth day.

The Results for Children

- Stress for both children and families as the family works to "cobble together" child care.
- Children in unreliable care, moving from place to place as parents struggle to meet child care needs.
- Impeded ability for systems to identify young children with developmental needs, which can help to direct families into early intervention programs.
- Professional staff who are ill-equipped to meet the needs of young children who have or are experiencing trauma leading to systems that re-traumatize children due to lack of knowledge and professional support/ development.
- Missed opportunities for social and emotional growth and learning in a preschool setting.
- Inequity in outcomes for those whose families cannot pay the school fees and/or don't have the ability to get a child to preschool during the hours it is available.

The Needs of Youth

All the communities we visited discussed growing needs in the youth and young adult population. The major needs were:

Something to do! A repeated theme is that youth need more opportunities for positive, group enrichment activities that represent a diverse range of interests. These activities can be nestled within schools, but some of the highest need youth don't feel comfortable in school spaces and therefore need other options. Of great importance is that these spaces and activities are safe, inclusive, not overly structured or programmed and don't create barriers, such as fees, to participate.

Of grave concern in the communities we visited was the mental health needs of young people. Parents and other community members expressed deep and growing concern about the increasing rates of depression, anxiety, suicidal ideation and other mental health disorders they see at alarming rates. There was not consensus about the causes of this perceived increase; however, many people believe that social media, bullying, racism and LGBTQ identity plays a significant role as teens struggle with self-worth, self-esteem and feeling included.

Shockingly and sadly, in almost every community we visited, there was conversation about a recent teen suicide.

Substance use among young people is also a major community concern. We heard repeatedly that easy access



PUEBLO, CC

to drugs is pervasive in communities and that children and youth do not have trouble acquiring a wide range of drugs. Our culture is shifting to be more tolerant of drug use, which impedes prevention efforts. Finally, we heard in every community that youth vaping is on the rise and that it is perceived by young people as safe despite growing evidence to the contrary.

The four-day school week, adopted by many Colorado school districts, presents challenges within communities regarding ensuring youth are safe and their needs are met. Communities believe that this school schedule can work well for youth if the fifth day is supported through activities and enrichment and provides services that students rely on, such as breakfast and lunch programs. Communities are struggling to figure out how to best meet these needs so all children, regardless of ability to pay or without access to transportation, can participate in programs that support the fifth day.

The Results for Youth

- High stress among teens which impedes healthy brain development.
- Brain changes due to substance use at an early age, thus impacting a life trajectory.
- Lost opportunities for teens to just be kids and enjoy this phase of life.
- Reinforced inequities due to unequal opportunities for enriching activities because of cost and availability.
- Lost or suppressed talent among youth and young adults because communities aren't investing in this important time of human development.
- Loss of quality time between parents and adolescents, which buffers against teen stress and anxiety, as parents struggle to make ends meet in economically strained communities.

Community Health Needs



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Many communities discussed the need for more 'upstream' approaches or those focused on prevention and supporting healthy lifestyles. The need for recreation services, walkable/bikeable communities, better access to healthy foods, health education and safe housing were repeatedly mentioned.

Community participants also voiced the need for greater access to primary and specialty care where you don't have to drive long distances to receive those services. Telehealth was often mentioned as a possible solution

Multiple communities discussed the inequitable challenges faced by new-comers to communities, especially immigrants. Similar challenges were noted for communities of color, non-English speakers, and, in some cases, all people living on low-incomes. These challenges included accessing culturally responsive care, overcoming isolation and stigma,

receiving translation services and, in some cases, a general "othering" of non-Caucasian groups. These challenges play out differently in each community, but it was clear that communities wanted to be intentional about how they addressed the diverse needs and backgrounds of their neighbors.

Despite many of the acute, pressing needs Colorado communities face, many individuals we heard from strongly believe in the power of investing in upstream approaches to produce better outcomes for future generations.

A strong sentiment was that investment in public policy solutions, at both the state and national levels, is essential for addressing the large, systemic inequities and barriers facing most Coloradans.

Throughout these conversations, many people highlighted the pride they feel in their communities, but also have a vision for how things could be better.

As many participants noted, their communities are resilient and surviving, but not *thriving*.

Finally, during the conversations, participants provided feedback on what is needed to **support nonprofits** in addressing the complex needs described in this report. Nonprofits asked Caring for Colorado to consider providing general operating support and capacity building funds to strengthen organizations. They also asked for multi-year grants to help stabilize programs and to help secure other funding.

There was recognition that the people working in nonprofit organizations are often living the same challenges that are present in communities: low wages, housing insecurity, stress/trauma. The desire to improve wages for workers in the nonprofit sector was highlighted as well as the need to support nonprofit workers, as they often are tackling some of the hardest and most complex issues within families and communities.

There was also discussion about having foundations be more vocal, and support and amplify community voices, to promote local, state and national policy solutions for addressing the complex needs facing Colorado.

Community Survey Results

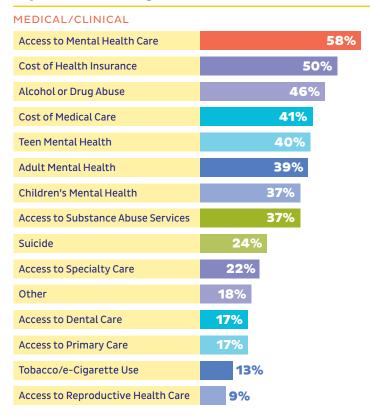
While Caring for Colorado was dedicated to hearing from Coloradans in person, it was also important to receive input from individuals who were not able to attend community conversations. To reach more of these Coloradans, CFC conducted an online survey which was open from October 1 to December 31, 2018. The survey was distributed through social media channels, partner networks and at each inperson community meeting.

A total of 335 Coloradans responded to the survey during the three-month period. Respondents were from throughout the state. While urban areas such as Denver, Arapahoe, Jefferson and Pueblo counties represented the highest percent of respondents, many other counties were represented. Of the 64 counties, 44 had at least one respondent. The respondents varied in age from 19–85 with the majority being between 36 and 65.

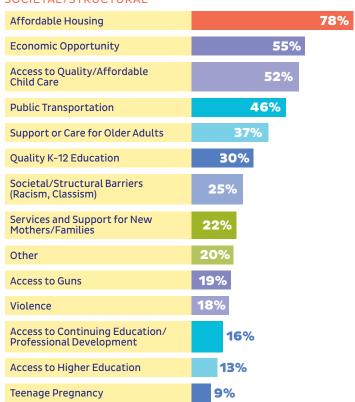
The respondents were primarily white (85%) and a little over 10% identified as Hispanic. There was a variety of professions represented with nonprofit staff member as the largest group (44%). A significant number of government employees (34%) and teachers/educators (25%) responded. The diversity of professions suggests the survey reached a wider audience than typical CFC activities, however the professions that were least represented (factory worker, manual labor, service industry) highlight the voices not represented.

Respondents were asked to select five challenges that exist in their community from two pre-determined lists. The first list included issues associated with medical, clinical, physical, oral, and mental health care, while the second included issues that largely represent the social determinants of health such as housing, transportation, education and violence. The chart below show the breakdown of responses for the medical/clinical challenges and the top selections from the social determinants of health list.

Top Health Challenges



SOCIETAL/STRUCTURAL



We also asked open-ended questions and invited people to provide comments. The most common health issues identified through these questions on the survey fell within the following four categories:

- Mental health
- Substance use
- Health insurance coverage and affordability
- · Access to primary health care

Mental Health

Mental health emerged as a prominent health challenge, rating among the top three challenges by 159 respondents. These 159 responses were for general mental health concerns and did not specify an age range. The concerns stemmed largely from rural areas where access to mental health providers, specifically psychiatrists, was reported as a significant issue. Other treatment shortfalls mentioned included lack of local inpatient services, access to high quality mental health care, stigma surrounding mental health, and lack of reimbursement for mental health care in non-clinical settings.

Substance Use

The issues surrounding substance use/abuse were resoundingly clear with 123 respondents including it in their three most pressing health challenges. The issues reported spanned from alcohol use among minors, marijuana use, opioid addiction, and a general lack of treatment. The requests for treatment were primarily focused on inpatient options which most respondents noted as almost completely unavailable. There was some, but minimal, mentions of tobacco and e-cigarette use as part of this issue.

Health Insurance

Health insurance was prominently featured in 98 respondents' most pressing health issues. The most common issue was affordability with respondents noting high deductibles, out of pocket costs, and premiums. The lack of health insurance was noted as a barrier to care – and specific issues with Medicaid, such as lack of accepting providers, were

also reference multiple times. It is clear with these responses that the issue of health insurance for many communities has shifted primarily from lack of coverage to affordability of the available coverage.

Access to Care

Finally, general health care access issues were included by 77 respondents. The challenges mentioned included lack of comprehensive primary care, low quality care, shortage of health care workforce, and limited clinic locations/hours. Some of the access issues were tied to underlying issues, such as transportation, but undoubtedly the availability, quality and timeliness of primary care is not meeting the needs of many Coloradans. Many of the issues raised were specific to rural areas where challenges such as limited providers covering large geographic areas are most prominent.

Community Successes

While much of the survey focused on challenges or issues in communities, respondents were also asked to provide an example of what is working well in their community. The responses varied but the following themes appeared:

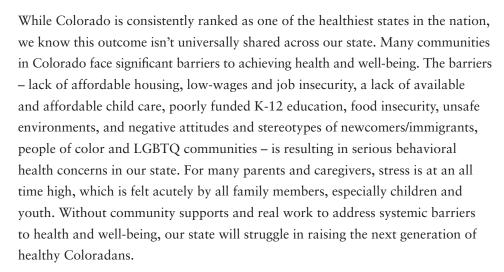
- Partnerships are strong in communities and essential for meeting community needs.
- Medicaid expansion is invaluable, but better access to providers who accept Medicaid is needed.
- Recreational activities, especially the great Colorado outdoors, is an asset.
- Youth empowerment programs are increasing in number but are still limited and needed.
- School-based interventions and collaborations are strong but work to sustain them is needed.

As we strive to address the pressing and future needs of Colorado communities, it is important to take note of these existing strengths within communities. We can build off these successes to create sustainable positive change.

Conclusion



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When CFC began these community conversations, we did not anticipate hearing the level of need, frustration and deep concern for our children, youth, families and neighbors throughout our state that was front and center at every conversation.

We have our work cut out for us as a state. Caring for Colorado is committed to both sharing these findings and developing our own role as we work to make our state equitable, where everyone can realize the goal of health and well-being. The input shared in this report will help shape our 2020–2025 Strategic Plan and direction moving forward as a statewide health funder.



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