



**COMMUNITY
HEALTH
IMPROVEMENT
PLAN 2014-2020**



City of Long Beach
Department of
Health and Human
Services



Kelley Colozzi

Long Beach Community Health Improvement Plan (CHIP)

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A Call to Action

Dear Community Partners:

I am pleased to present the Long Beach Community Health Improvement Plan (CHIP). The CHIP is community-wide plan aimed at advancing the health of Long Beach. More importantly, it is a blueprint for collective action—one that compels each of us, individually and as organizations to dedicate our best thinking, energy, and commitment to making significant health improvements by 2020. I urge you to join the dedicated individuals who developed the CHIP and, together, we can make Long Beach a healthy and safe place for all:

- A healthy community nurtures individuals to thrive. It supports people to live a healthy and balanced life by ensuring access to nutritious food, safe exercise facilities, and opportunities to spend quality time with family and friends.
- A healthy community is an engaged community. It involves people in community activities, volunteering and sharing your talents.
- An engaged community works collaboratively in order to bring about environmental and behavioral changes that improve the health of the community and its members.

Adopt one of the goals, objectives and strategies in the CHIP as your own and align and integrate resources to address the key health and social issues in our community. Creating and maintaining a healthy and safe Long Beach will take a collective effort and continued commitment to serve and support each other. Let's move forward and turn the health improvement plan into a reality.

Sincerely,



Kelly Colopy,
Director, City of Long Beach Department of Health and Human Services

Acknowledgement of Community Health Improvement Plan Task Force Members

“Alone we can do so little; together we can do so much.”

— Helen Keller

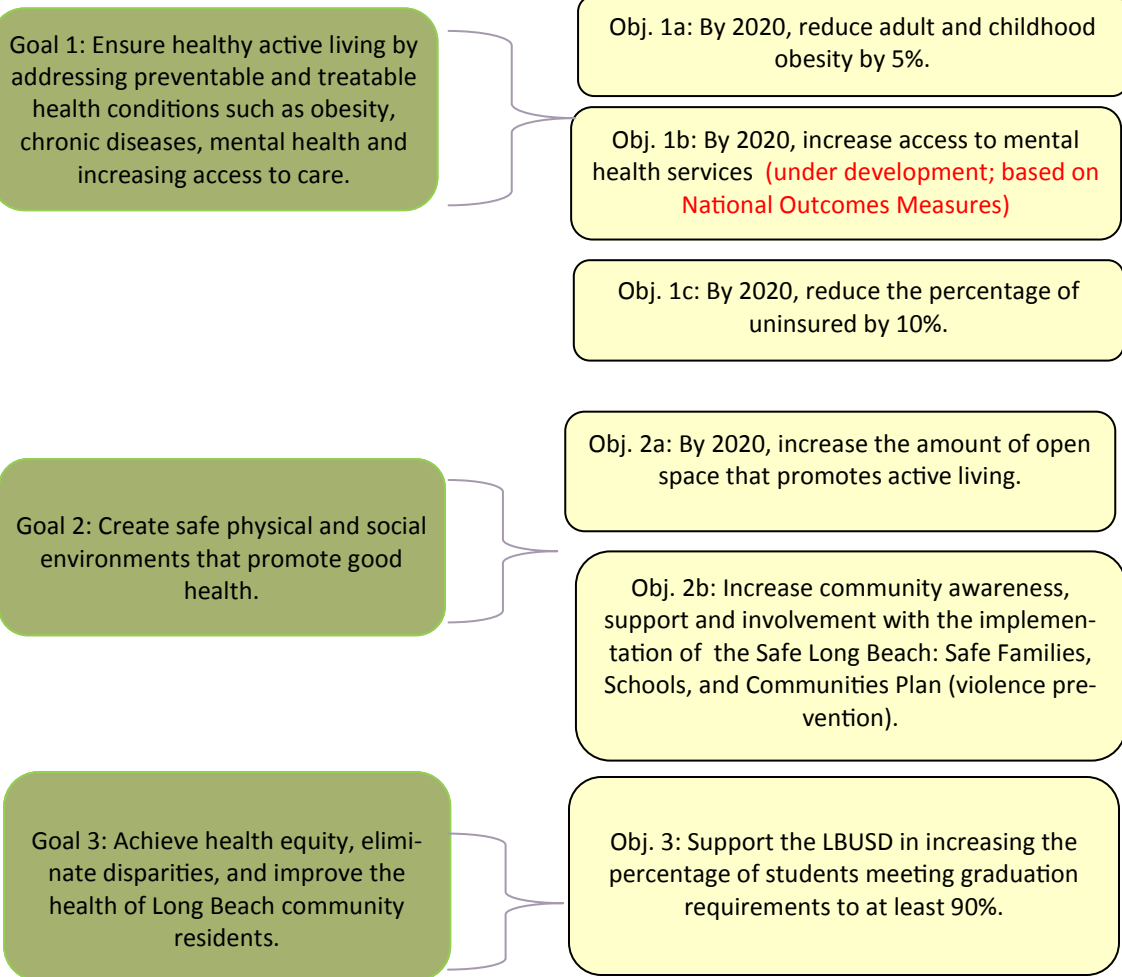
On November 7, 2012, the Long Beach Department of Health and Human Services (LBDHHS) convened a meeting of community stakeholders, representing a broad cross section of the City’s public, private and nonprofit organizations, to present the summary of the Community Health Assessment (CHA), and engage participants in prioritizing key health and social issues in Long Beach. This forum sparked the beginning of the development of the Community Health Improvement Plan (CHIP). Over 75 community leaders attended the meeting and over 50 community leaders volunteered to serve on the CHIP Task Force to develop specific strategies aimed at solving the top health and social issues in Long Beach.

The CHIP provides guidance to the Health Department, its partners, and stakeholders for improving and maintaining the health of Long Beach. The CHIP represents the collaborative spirit and unrelenting dedication of community leaders to make Long Beach the healthiest and safest place in the country. With their great energy, expertise and vision, the CHIP Task Force met monthly from December 2012 through May 2013 to develop the CHIP. The CHIP is a blueprint for long-term community action to advance healthy and safe places for all neighborhoods in Long Beach. Please join the CHIP Task Force in our community’s journey together towards a healthier and safer Long Beach.

- Linda Alexander, Best Central Long Beach, First Five LA
- Paula Barrow, Junior League of Long Beach, Homeless Services Advisory Committee
- Lorraine Brault, Long Beach Cares
- Georgia Case, Building Healthy Communities Long Beach, Idea Group
- Jenny Chheang, The California Endowment
- Martha Gonzalez, Miller Children’s Hospital
- Cindy Gotz, Long Beach Memorial Medical Center
- Marietta Jones, Community Member
- Lillian Lew, Families in Good Health
- Martha Long, Mental Health America Los Angeles
- Kate Marr, Legal Aid Foundation of Los Angeles
- Dolores Nason & Mario Rodriguez, Disabled Resource Center
- Elisa Nicholas, MD & Maria Chandler, MD, The Children’s Clinic Serving Children and Their Families
- Jessica Quintana & Lupe Velasco, Centro Community Hispanic Association

-
- Danielle Sees & Luanne Mauro-Atkinson, Head Start Long Beach Unified School District
 - Robin Sinks, Long Beach Unified School District, Board of Health
 - Hazel Wallace, Long Beach Cares
 - Joy Warren, City of Long Beach Department of Parks, Recreation and Marine
 - Zina Washington, Help Me Help You
 - Darla Wegener, City of Long Beach Public Library

Long Beach Community Health Improvement Plan At-A-Glance



Key Measures

- Reduction in percentage of children and adults who are obese
- Reduction in average number of days in the past 30 days that usual activities were limited due to poor physical and/or mental health
- Increase in the number of persons served (mental health services)
- Increase in numbers served compared to those in need (mental health services)
- Reduction in percentage of uninsured
- Increase in proportion of people who use active transportation (i.e. walk, bicycle, and public transit to travel to work)
- Reduction in crimes
- Increase in percentage of students meeting graduation requirements

Community Health Improvement Plan (CHIP) Background and Development Process

The Community Health Improvement Plan is a long-term, systematic plan to address issues identified in the Community Health Assessment (CHA). The purpose of the community health improvement plan is to describe how the LBDHHS and the community will work together to improve the health of the population in Long Beach. The CHIP is more comprehensive than the roles and responsibilities of LBDHHS alone, and was developed together with participation from a broad set of stakeholders and partners. Stakeholders and partners utilized their knowledge and understanding of the Long Beach community, as well as information contained in the CHA, to set priorities. The CHIP development process was on November 7, 2012 with a community meeting involving over 75 community partners from a variety of organizations and leaders that are invested in the health and safety of the city. The vision and values statements described in the CHIP reflect the key issues and themes that are of great importance to the community-at-large.

The CHIP Task Force members reviewed national and state prevention guidelines such as Healthy People 2020, National Prevention Strategy, and the Let's Get Healthy California Task Force Report to help inform its discussions and priority-setting. Ultimately, the Task Force selected goals that are aligned with Healthy People 2020.

The development of the CHIP was a community-driven process and informed by data gathered and synthesized in the CHA. Long Beach used the Mobilizing for Action Through Planning and Partnerships (MAPP) as a framework for developing its CHA, CHIP, and Strategic Plan. Developed by the National Association of City and County Health Officials (NACCHO), MAPP is a community-driven strategic planning tool for improving community health. Facilitated by public health leaders, this tool helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is not an agency-focused assessment tool; rather, it is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems.

The MAPP process consists of six phases:

- Phase 1: Organize for success and partnership development
- Phase 2: Visioning
- Phase 3: Conduct four MAPP assessments
- Phase 4: Identify strategic issues
- Phase 5: Formulate goals and strategies

Phase 6: Action cycle: plan, implement, evaluate

The MAPP framework guided the development of the CHA, CHIP and the Health Department's Strategic Plan and its six phases were used to engage Health Department employees, volunteers, community partners, and other stakeholders in the problem identification and solving process. The adaptation of the MAPP process to Long Beach is an ongoing, iterative process that is continually informed by population data, community engagement and feedback, and environmental scans of economic and political opportunities for action.

Implementation

The Long Beach Department of Health and Human Services will continue to convene the CHIP Task Force as it moves forward with implementing the CHIP. The Task Force will engage in more in-depth action planning around each goal and develop a system that fosters community engagement and coordination of services. The Health Department will use the collective impact framework to drive the implementation of the CHIP. The key elements of the collective impact framework are: 1) common agenda; 2) shared measurement; 3) mutually reinforcing activities; 4) continuous communication; and 5) backbone support. The CHIP serves as a foundation for a common agenda for improving health in Long Beach and the Health and Human Services Department will serve as the backbone support for convening and coordinating resources. The Health Department will continue to engage the CHIP and the community-at-large in developing shared measurement and an effective system of coordinating services and communication.

COMMUNITY PROFILE

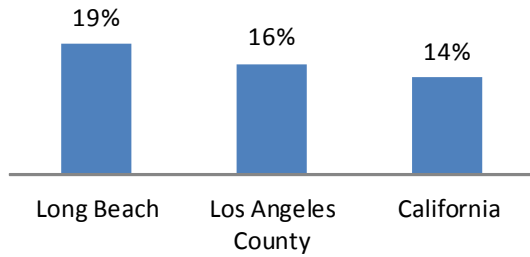
Population by Race/Ethnicity, 2010
Source: US Census, 2010

| | |
|----------------------------------|-------|
| Hispanic/Latino | 40.8% |
| White | 29.4% |
| Black/African American | 13.5% |
| Asian | 12.9% |
| Two or More Races | 5.3% |
| Native Hawaiian/Pacific Islander | 1.1% |
| American Indian | .7% |

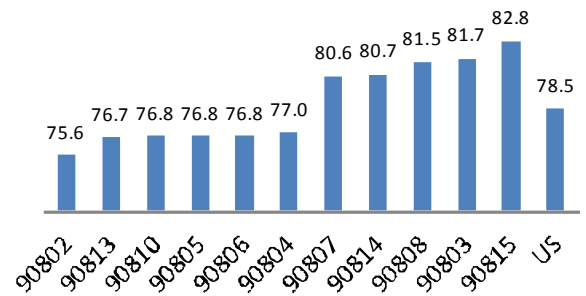
Population by Age Group, 2010
Source: US Census, 2010

| | |
|--------------------------|----------------|
| Under 18 | 24.9% |
| 18-24 | 11.7% |
| 25-44 | 30.5% |
| 45-64 | 23.6% |
| 65+ | 9.3% |
| Total Population: | 462,257 |

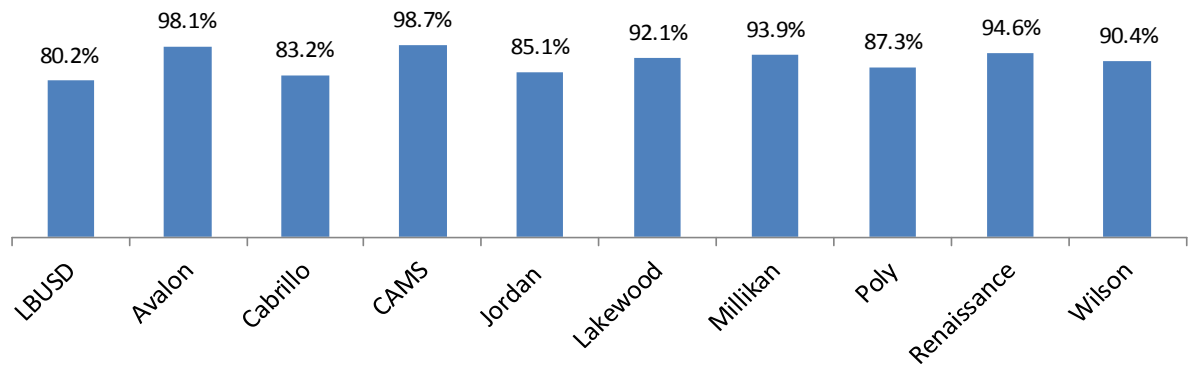
Poverty Level Compared to Los Angeles County and State, 2010
Source: US Census, 2010



Life Expectancy at Age 1 by Zip Code, 2010
Source: LBDHHS, 2010

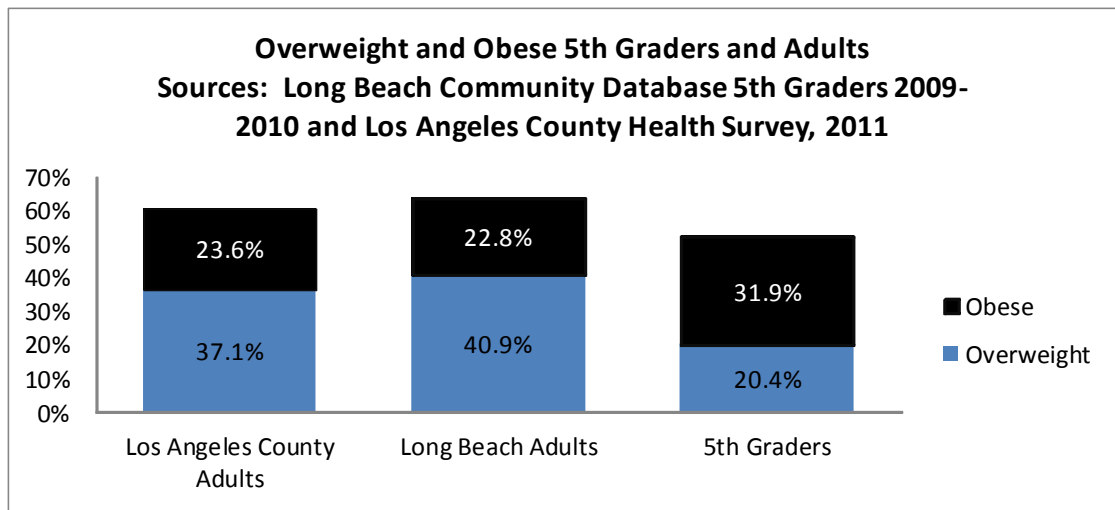


LBUSD High School Graduation Rate, 2012
Source: California Department of Education



COMMUNITY PROFILE (continued)

3 behaviors (lack of physical activity, poor nutrition, and tobacco use) contribute to **5** chronic diseases (heart disease, cancer, respiratory conditions, stroke and diabetes).
These 5 diseases account for **66%** of deaths in Long Beach.



Vision

Vision Statement: *Advancing Healthy and Safe Places for All*

Long Beach is a healthy and safe place where all members of our diverse communities are empowered to learn, grow, and prosper.

Value Statements

Our community is committed to reaching our vision by promoting and practicing these core values:

- **Collaboration:** We embrace our diversity and the unique contributions of our neighborhoods to our City's cultural fabric. Through our community partnerships, we develop positive relationships, foster innovative solutions, and strengthen our capacity to accomplish our vision.
- **Health and quality of life across the lifespan:** We strive to address health across a person's lifespan to ensure that all individuals have a strong start in life, live to their fullest potential, and that their legacies are celebrated in the latter stages of life.
- **Access for all:** We harness our collective thinking and power to ensure that our communities have easy and frequent access to health, educational, social and economic services they need to succeed in society.
- **Equality:** We strive to achieve social and health equity by identifying and addressing the root causes of inequities. We seek to eliminate all forms of disparities by empowering people to transform their communities.

Goals & Objectives

The goals of the Long Beach CHIP are aligned with national and state priorities established in Healthy People 2020, National Prevention Strategy, and Let's Get Healthy California Task Force Final Report. The objectives are based on readily available data sources and possible indicators that are realistic for Long Beach. The data cited in this plan are derived from the Community Health Assessment (CHA) compiled by Long Beach Department of Health and Human Services in 2012 from multiple data sources such as the 2010 Census, California Health Interview Survey, HealthyCity.org, and the Los Angeles County Health Survey. Every effort was made to compile the most recent Long Beach-specific data available at the time of the analysis.

Justification

The CHIP contains data from the CHA to underscore the criticality of addressing a particular health issue. More importantly, the health issues prioritized in the CHIP were ranked by community members at a stakeholders meeting convened in November 7, 2012 (Appendix A) and by the CHIP Task Force Members.

The strategies highlighted in the CHIP were adapted from:

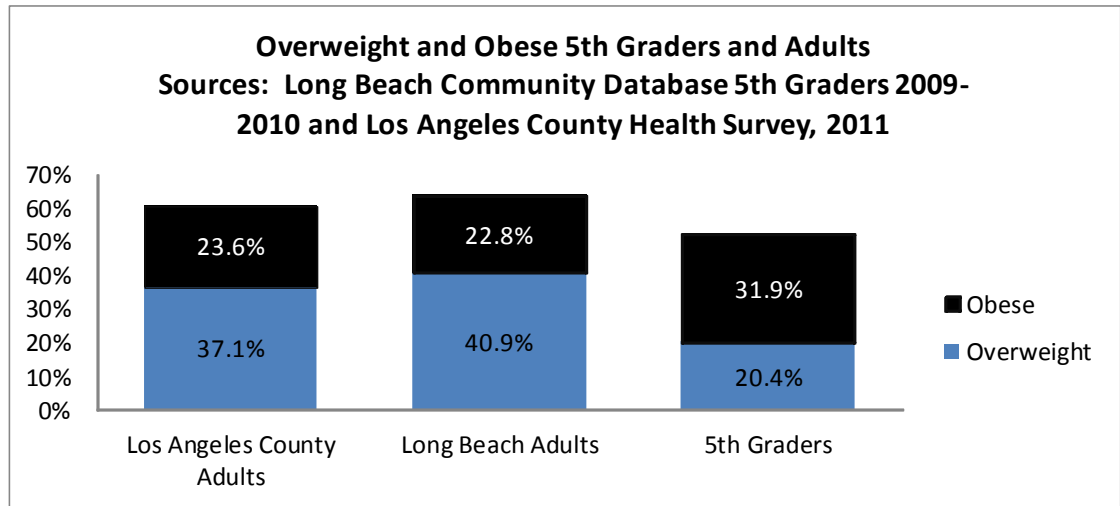
Guide to Community Preventive Services.www.thecommunityguide.org. Last updated: 10/25/2013.

Keener, D., Goodman, K., Lowry, A., Szo, S., & Kettel Khan, L. (2009). *Recommended community strategies and measurements to prevent obesity in the United States: Implementation and measurement guide*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.

National Prevention Council, *National Prevention Strategy*, Washington DC: U.S. Department of Health and Human Services, Office of the Surgeon General, 2011.

Goal 1: Ensure healthy active living by addressing preventable and treatable health conditions such as obesity, chronic diseases, mental health, and increasing access to care.

Objective 1a: By 2020, reduce childhood and adult obesity in Long Beach by 5%.



Community based organizations, local government agencies, hospitals, and other partners in Long Beach have implemented a variety of activities and programs that promote health active living. The LBDHHS, for example, offer programs such as the Childhood Obesity Prevention and Healthy Active Long Beach programs to inform and educate individuals and families with the skills necessary to make healthy eating and fitness choices. These programs work with community based organizations and other partners to address societal support for positive behavior change such as increasing access to physical activity through organized walking clubs and increasing availability of fresh and fruits and vegetables at local corner stores. In addition, there are community coalitions that promote coordination of services such as the Long Beach Alliance for Food and Fitness.

While the obesity rate for Long Beach adults decreased from 31% in 2007 to 22.8% in 2011, the rate of overweight adults increased from 37% to 40.9% during the same years (LACHS, 2007 and 2011). Chief among the benefits of a healthful diet and physical activity is a reduction in the risk of obesity. Obesity is a major risk factor behind several of today's most serious health conditions and chronic diseases,

including high blood pressure, high cholesterol, diabetes, heart disease and stroke, and osteoarthritis. Obesity also has been linked to many forms of cancer. In Long Beach, 40.9 percent of adults are overweight (compared to 37.1% of all Los Angeles County adults) and 22.8 percent are obese (compared to 23.6% of all Los Angeles County adults) (Los Angeles County Health Survey, 2011).

In the Long Beach Unified School District (LBUSD), 31.9% percent of 5th graders are obese and 20.4% are overweight based on 2009-2010 data. Overweight and obesity rates vary by zip codes with zip code 90805 showing the highest obesity rate among fifth graders (38%) (Crampon , WJ, Humphrey JW, Norman AJ, 2011).

In certain ethnic communities, the aggregation of data to describe a large grouping of culturally diverse groups and traditional measures of overweight and obesity may mask the burden of other risk factors related to obesity such as hypertension, stroke, and diabetes. For illustration purposes, we cite a recent study in Orange County to highlight the need for an alternative way to measure the impact of chronic diseases among Asian populations. While distinct in many health and socioeconomic characteristics, Long Beach and Orange County both have a large Asian population.

The study found that Asian women, who have the highest prevalence rate of gestational diabetes (GDM) at 10%, were more susceptible to GDM at much lower body mass index (BMIs) (average=23), which is within the 'healthy body weight' range (BMI 18.5 – 24.9). By comparison, women in other racial/ethnic groups, such as Whites and Hispanics, who developed GDM tended to have higher average BMIs, in the 27 to 30 range (Orange County Healthcare Agency, 2012). It is therefore important to acknowledge that efforts to reduce obesity must also be accompanied by interventions that seek to decrease major risk factors for cardiovascular disease such as high blood pressure, high cholesterol, smoking, physical inactivity, diet and alcohol consumption.

Strategies

Programs and Services

- Support Parks, Recreation and Marine (PRM) and other organizations in their efforts to promote healthy and active lifestyles
- Promote accessible, low cost or free health and fitness classes offered by various agencies in Long Beach
- Build upon successful health and nutrition programs that teach practical skills to make healthy choices such as how to select fresh food, read food labels, cook healthy meals, and control food portions

-
- Partner with LBUSD and support its obesity prevention efforts
 - Promote and support mothers in exclusively breastfeeding their infants for the first 6 months of life
 - Support ethnic organizations in developing and implementing culturally sensitive healthy cooking and fitness classes
 - Support tobacco control prevention and policies
 - Support community-driven activities to promote active transportation like biking, walking, and using public transportation
 - Partner with PRM, Long Beach Police Department (LBPd), Public Works, neighborhood watch groups, and other community-based organizations to create safe environments for outdoor physical activity
 - Encourage childcare providers to promote healthy eating habits in young children by providing a variety of nutritious foods, limiting junk food and sugary drinks

Education and Public Awareness

- Expand the “Let’s Move Long Beach” campaign concepts to promote physical activity in Long Beach
- Increase the visibility of “Rethink Your Drink” campaign throughout the City
- Support coalitions and community driven efforts such as Long Beach Alliance for Fitness and Health, CenterSpace, Coalition for Healthy North Long Beach and community gardens
- Train physicians and other medical providers to prescribe physical activity and healthy nutrition to their patients
- Engage existing and new non-traditional partners in promoting healthy and safe communities in Long Beach

Policies

- Support and expand City policies promoting healthy snacks and beverages at City-sponsored meetings and activities or City-owned vending machines
- Support City-sponsored workplace wellness programs that provide opportunities for physical activity breaks and healthy nutrition in the workplace
- Increase access to affordable fresh fruits and vegetables by creating incentives for local storeowners
- Support complete streets and active transportation policies and programs

Objective 1b: By 2020, increase access to mental health services (under development; based on National Outcomes Measures)

An individual's mental health can impact the social and behavioral aspects of life. In Long Beach, programs and services exist to address mental health needs. For example, the Long Beach Police Department's Mental Evaluation Team (MET) is a partnership between law enforcement and mental health clinicians that provide immediate emergency assistance to all parts of the city in response to 911 calls whenever mental illness, psychiatric or emotional crisis is reported or suspected. In addition, LBDHHS has a mental health coordinator responsible for education, linking individuals to mental health services, and coordinating local efforts with Los Angeles County and mental health agencies in Long Beach.

Long Beach has a strong network of mental health service agencies that work together to improve coordination of services and identifying strategies to enhance capacity in the city. This strong network serves as a foundation for meeting new and increasing demands for mental health services in Long Beach.

The need for comprehensive mental health services is a critical public health issue. Approximately 11 million U.S. adults (4.8 percent) had serious mental illness (SMI) in 2009 (Mental Health, U.S., 2010). In Long Beach, that number would be about 16,368 adults. The California mental illness hospitalization rate was 551.7 per 100,000 for 2010. Mental illness hospitalization rates for Southwest Long Beach zip codes (90802, 90804, 90813), are 2 to 3 times higher than the State rate and 50-100 percent higher than other zip codes in Long Beach (HealthyCity.org, OSHPD, 2010).

Strategies

Programs and Services

- Incorporate physical activity and healthy nutrition as part of a mental health diet in wellness programs
- Collaborate with organizations that serve ethnic populations that have demonstrated the need for culturally specific mental health services
- Support early diagnosis and intervention among children, adolescents, and adults
- Provide resources to support LBUSD in its efforts to provide mental health services to students
- Work with organizations that provide services to homeless individuals that experience mental illness, including those with unstable housing

-
- Partner with hospital emergency room departments and inpatient psychiatric units for discharge planning and community based services
 - Collaborate with local mental health agencies and the Los Angeles County Department of Mental Health to increase access to mental health services in Long Beach

Education and Public Awareness

- Reduce stigma associated with mental health by adopting national awareness campaigns such “Active Minds” (<http://www.activeminds.org/about>), “I’m the evidence”, and Mental Health First Aid
- Provide education and tools to pediatricians, primary care physicians and other medical providers to integrate mental health screenings in their practices
- Promote mental health awareness in Long Beach by engaging and educating non-traditional partners
- Collaborate with the Los Angeles County Department of Mental Health and/or Mental Health America to provide Mental Health First Aid training to non-medical professionals

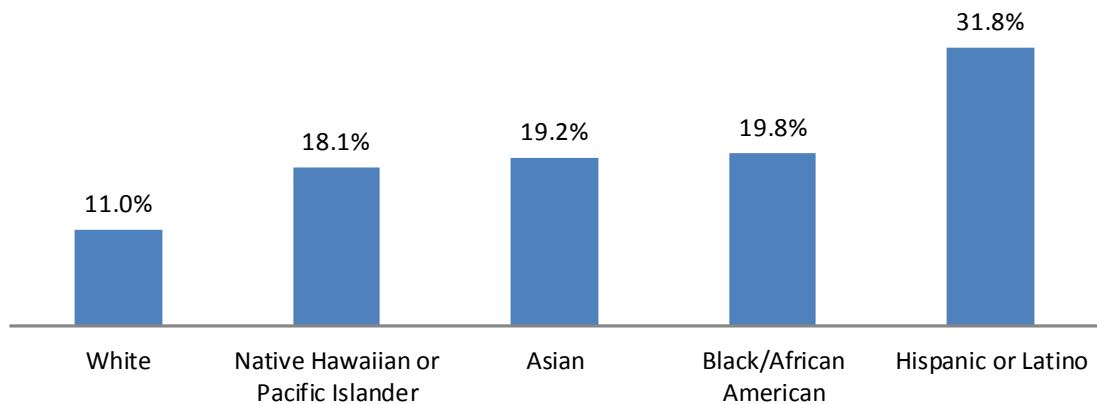
Policies

- Support the Long Beach Continuum of Care (CoC) to improve service delivery coordination; develop educational and policy recommendations; and promote workforce development to advance a comprehensive and coordinated approach to addressing mental health in the city
- Collaborate with the Los Angeles County Department of Mental Health and other agencies to ensure provision and funding of mental health services in Long Beach as prescribed in the Mental Health Services Act of 2004 (Proposition 63)

Objective 1c: By 2020, reduce the percentage of uninsured Long Beach residents by 10%.

Residents without Health Insurance by Race/Ethnicity, Long Beach, 2010

Source: American Community Survey, Table S2701



The passage of the Affordable Care Act seeks to significantly reduce the number of individuals without health insurance in the country. Many local organizations have scaled up their outreach and education efforts to increase community awareness about the new healthcare options available under the law. Long Beach has a strong history of collaboration among community agencies in increasing health insurance enrollment to those who are uninsured. For instance, the Long Beach Health Access Collaborative works together to enroll qualified individuals into Medi-Cal and Covered California.

The percentage of uninsured Long Beach residents is estimated to be 22.3%, which is higher than the level for California (18.5%). Health insurance coverage in Long Beach varies considerably by ethnicity, income level, and education. The ethnic group most likely to be uninsured is Hispanic or Latino, at 31.8%. The groups with the highest percentages of individuals lacking health insurance are those in the \$25,000-\$50,000 income level (31.9% uninsured) and those in the 100-199% federal poverty level (FPL) range (35.7% uninsured). Nearly half (45.7%) of Long Beach residents with less than a high school education are uninsured, and 31.6% of residents with a high school diploma or General Education Development (GED) are currently uninsured (U.S. Census, 2010).

In recent community health surveys, residents were asked about barriers to receiving health care. The top reasons adult respondents cited for not receiving health care were not having insurance (>80%) and not knowing how to utilize the benefits they had (>60%) (SMMC, 2012).

However, insurance coverage, health care access and utilization of preventive services may change due to the passage of the Affordable Care Act. A few aspects of the law should positively impact populations in need in Long Beach, and increase the affordability of preventive care. For instance, California has expanded its Medicaid program to cover more low-income individuals and families and discrimination against pre-existing conditions is now prohibited. All new plans must cover certain preventive services such as mammograms and colonoscopies without charging a deductible, co-pay or coinsurance. These changes will support an improved picture of health care access and utilization, especially for preventive services.

Strategies

Programs and Services

- Increase enrollment of individuals into expanded Medi-Cal and Covered California
- Support community health centers in increasing access to primary care and mental health services among the uninsured
- Expand the LBDHHS community health screenings to various geographic sites in Long Beach
- Reduce barriers to access to care by providing language interpretation, transportation, and other supportive services
- Provide training to medical providers on the provision of culturally competent care to diverse populations
- Provide training to medical providers on addressing barriers to care for people with disabilities
- Link individuals and families to patient-centered health homes to ensure optimal health, retention and continuity of care

Education and Awareness

- Support the Long Beach Health Access Collaborative to increase health insurance coverage among individuals and businesses who qualify for expanded Medi-Cal and subsidies or tax incentives under Covered California
- Engage non-traditional partners in promoting health insurance coverage in Long Beach

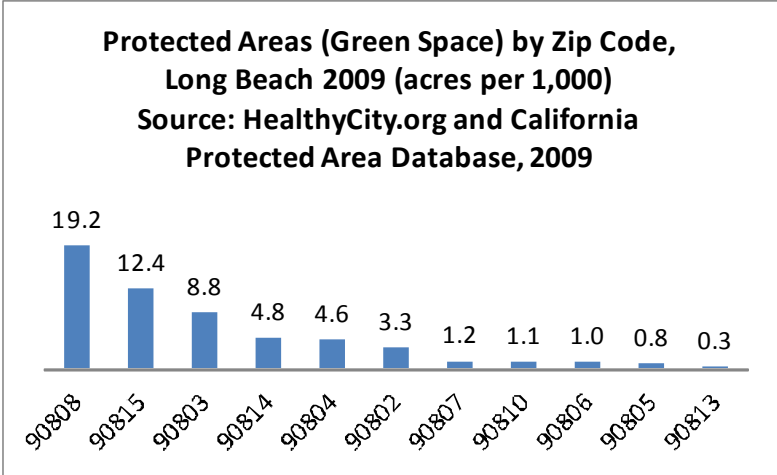
-
- Adopt and support The California Endowment's Health4All campaign to increase community awareness of populations that will continue to be uninsured despite the implementation of the Affordable Care Act
 - Support the Covered California statewide educational campaign efforts to cover uninsured individuals by using their educational materials and generate leads for enrollment
 - Increase community education about health insurance options including those individuals who may not qualify for subsidies

Policies

- Collaborate with the Long Beach Health Access Collaborative to identify and address barriers and solutions, including advocacy at statewide level, for health care resources for the residual population including but not limited to undocumented individuals
- Collaborate with the Long Beach Health Access Collaborative to identify barriers to access and advocate for improved access to prevention-oriented services in accessible locations such as school-based clinics
- Collaborate with the Long Beach Health Access Collaborative to identify characteristics of a client-centered and culturally/linguistically competent medical homes and develop recommendations for regional and statewide implementation of standards of optimal care for patient-centered medical homes (PCMH). The PCMH model is designed around patient needs and aims to improve access to care (e.g. through extended office hours and increased communication between providers and patients via email and telephone), increase care coordination and enhance overall quality, while simultaneously reducing costs.
- Monitor the impact of health reform in Long Beach and document successes, challenges and opportunities for improvement

Goal 2: Create safe social and physical environments that promote good health.

Objective 2a: By 2020, increase the amount of open space that promotes active living.



The Long Beach Parks, Recreation, and Marine (PRM) Department is an award-winning agency and has received numerous accolades for long-range planning, resource management, volunteerism, environmental stewardship and program development. PRM is dedicated to increasing park space and access for all Long Beach residents and has set of goal of creating a minimum of 8.0 acres of open space per 1,000 residents. With numerous capital improvement projects and the completion of the mobility element in the City’s General Plan, the City continues its commitment to improving the quality of life for its residents.

There is increasing attention and evidence for a positive relation between the amount of green space in the living environment and people’s health and well-being. Several studies have shown that a more natural living environment positively influences people’s self-perceived health and leads to lower mortality risks (de Vries et al, 2003).

Within Long Beach’s total 51.3 square miles, the quantity of green space varies greatly by zip code. Green space in Long Beach (as reported by the California Protected Area Database as open space, including federal, state, and special resource protection areas) is distributed as shown on the figure above by acres per 1,000 people. East and

Southeast (coastal) Long Beach has a significantly higher number of protected areas per person while the North and West parts of Long Beach have fewer. This lack of green space and the increased population in the North, West Central and Southwest sections of the city makes access to recreation open space more difficult for many of the youth in these areas. Elements such as park features, condition, access, aesthetics, safety, and policies could increase physical activity in these areas (Bedimo-Rung et al, 2005).

Strategies

Programs and Services

- Promote and support bicycle and pedestrian access, programs, and safety through Safe Routes to School, Public Works, complete streets and active transportation resources
- Promote and support outdoor sports and activities hosted by Parks, Recreation and Marine, and other City departments and community agencies, especially in underserved areas
- Encourage community driven “active” social activities, such as walking, biking, and hiking clubs and programs (Examples: Long Beach Area Walking Club, Bixby Knolls Strollers)
- Support programs and activities that foster community cohesiveness and engagement such as neighborhood associations, community service, neighborhood cleanups and tree planting
- Promote community involvement in the Long Beach Park Watch program to increase a sense of ownership of parks by neighborhood residents
- Increase community knowledge and participation in community gardens
- Increase community knowledge of and participation in accessing public transit

Education and Awareness

- Work with the City to inform and educate the community about the City’s General Plan and encourage input in the planning process to strengthen components that contribute to healthy living such as active transportation, green space, and complete streets
- Use existing resources such as websites and community calendars to promote events that foster community belonging and cohesion

Policies

- Monitor and track implementation of health and other elements that contribute to healthy living in the City's General Plan
- Support integrated services at parks such as co-location of libraries, tutoring programs, and social and learning activities provided by community agencies
- Support complete streets and active transportation policies

Objective 2b: Increase community awareness, support and involvement with the implementation of the Safe Long Beach: Safe Families, Schools, and Communities Plan (violence prevention).

Year End Part 1 Crime Statistics, Long Beach, 2008-2013

Source: Long Beach Police Department 3010 Reported Crime Statistics, 2008-2013

| | 2013 | 2012 | 2011 | 2010 | 2009 | 2008 | AVG 08-12 | 13 VS AVG |
|-----------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|
| Violent Crime | 2,345 | 2,705 | 2,856 | 2,735 | 3,162 | 3,151 | 2,922 | -19.7% |
| Property Crime | 13,085 | 14,227 | 12,951 | 11,715 | 12,723 | 13,098 | 12,945 | 1.1% |
| TOTAL | 15,430 | 16,932 | 15,807 | 14,450 | 15,895 | 16,249 | 15,867 | -2.8% |

According to the Long Beach Police Department, the overall crime rate in Long Beach have been declining since 2002. Long Beach ended 2013 with the lowest number of reported violent crimes in 41 years. When compared to 2012, the 2013 violent crime statistics reflect a decrease of over 13.5%. Property crime statistics also showed an 8.5% decrease.

In the United States, more than 1,500 children aged 0 to 17 years die from abuse and neglect (rate of 2.04 per 100,000 children) and approximately 905,000 children were confirmed by Protective Services as being maltreated (physical abuse, sexual abuse, psychological abuse and neglect; Administration for Children & Families, Child Maltreatment Report, 2006). A CDC study found that that the lifetime cost for each victim of nonfatal child maltreatment was \$210,012. That is higher than the per-person lifetime cost of stroke (\$159,846) and similar to the per-person cost of type 2 diabetes (between \$181,000 and \$253,000) (Child Abuse & Neglect, The International Journal, January 2012). According to the Long Beach Police Department, criminal incident rate against family and children in Long Beach is 17.0 per 10,000 (LBPD, 2012).

On March 9, 2013, the City of Long Beach launched its 18-month community engagement and planning process to develop the Safe Long Beach: Safe Families, Schools, and Communities Plan (violence prevention plan). The Long Beach Violence Prevention Plan Community Survey was distributed to all parts of Long Beach to gather input from community members regarding safety and violence. The survey was distributed in English, Spanish, and Khmer in 2013. 445 community members

completed the survey. The survey revealed that although 74% of respondents in Long Beach feel they are safe or very safe in their own communities, only 20% feel safe in all parts of Long Beach.

The LBDHHS is a member of the Long Beach Violence Prevention Plan Steering Committee and provides a public health perspective to the dialogue on how to best prevent violence in the community. As the *Safe Long Beach* violence prevention plan is developed, the LBDHHS will update the CHIP, with concurrence from the members of the CHIP Task Force, to ensure alignment with city-wide violence prevention goals and objectives.

Strategies

Programs and Services

- Support agencies that provide crisis hotlines, emergency shelter services, legal counseling, community education, support groups, and other services to victims of domestic, child, and elder abuse and violence
- Support organizations that provide mentorship and meaningful and engaging after-school activities for youth
- Encourage community engagement through neighborhood watch and clean-up programs, and other activities that promote a sense of community pride and cohesion

Education and Awareness

- Educate community agencies about evidence-based interventions that have been shown to reduce violence in the homes in the community. Examples of evidence-based interventions documented in the Guide to Community Preventive Services that contribute to preventing violence include early childhood home visitation, individual and group cognitive behavioral therapy, school-based programs, therapeutic foster care for chronically delinquent juveniles, and policies that facilitate the transfer of juveniles to adult justice systems
- Educate the community on how to recognize violence in the home and promote reporting via anonymous hotlines

Policies

- Advocate for local, state and national policies that advance the recommendations from the Long Beach violence prevention plan

Goal 3: Achieve health equity, eliminate disparities, and improve the health of all Long Beach community members.

Objective 3: Support the Long Beach Unified School District (LBUSD) in increasing the percentage of students meeting graduation requirements to at least 90%.

| | |
|--|-------|
| LBUSD | 80.2% |
| Avalon | 98.1% |
| Cabrillo | 83.2% |
| California Academy of Mathematics and Science (CAMS) | 98.7% |
| Jordan | 85.1% |
| Lakewood | 92.1% |
| Millikan | 93.9% |
| Poly | 87.3% |
| Renaissance | 94.6% |
| Wilson | 90.4% |

Completing high school affects health outcomes and several other social indicators (e.g. income) that are related to health. For instance, in 1999, the mortality rate of high school dropouts ages 25 to 64 was more than double the mortality rate of those with some college (National Vital Statistics Report, as cited in Cutler and Lleras-Muney 2006). On April 11, 2013, the LBUSD announced that graduation rates continue to rise. Data released by the state show that six Long Beach high schools have achieved graduation rates of at least 90 percent – a target specified in LBUSD’s 2011-16 Strategic Plan. Graduation rates among California’s public school students are climbing and dropout rates are falling, with the biggest gains being made among African-American and Hispanic students (CDE, April 2013). There are an estimated 82,256 students enrolled in K-12 schools in Long Beach (CDE Dataquest, 2012-2013). In the 2011-12 school year, 5,402 of the 6,738 members of the senior class graduated (80.2%) (CDE, 2012).

African American and Latino students in the LBUSD continue to surpass the graduation rates of their counterparts in Los Angeles County and statewide, in some cases by wide margins. Cabrillo and Jordan high schools showed strong gains. Cabrillo's graduation rate of 83.2 percent is up 5.5 percent, and Jordan's graduation rate of 85.1 percent is up 8.1 percent in just one year. These and other increases have boosted LBUSD's graduation rate to more than 80 percent district-wide.

Strategies

Programs and Services

- Support the LBUSD's Strategic Plan and associated efforts to increase high school graduation rates and increase the college and career readiness of all students
- Promote and support the WRAP (Winners Reaching Amazing Potential) after school program
- Promote and support free, affordable and quality after-school, mentoring and tutoring programs provided by community agencies in Long Beach
- Promote and support school-based clinics and youth-friendly health and wellness programs
- Encourage and provide multiple opportunities for meaningful community service among youth
- Educate the community about the importance of early childhood education

Education and Public Awareness

- Educate parents and neighborhood associations about LBUSD high school completion goals and elicit their support to provide a safe learning community for students in their neighborhoods
- Collaborate with school-based clinics to include high school graduation as part their "prescription for success"

Policies

- Coordinate with the LBUSD to ensure that all students complete high school

Evaluation and Community Report

The CHIP Task Force will meet semiannually in order to maintain accountability and commitment towards fulfilling the goals and objectives described in the CHIP. The meeting will occur at the beginning (January-February) and end (November-December) of each calendar year. The LBDHHS will track and monitor the status of the goals and objectives by using readily available information on population and program level data and performance indicators noted in the plan. A semiannual progress report will be developed and disseminated to the community-at-large through the LBDHHS' website, social media, and community forums. The CHIP Task Force will also serve as the catalyst for fostering and sustaining community-wide collaborations to sustain public attention and commitment to health and social conditions that impact the quality of life in Long Beach.

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 - Office of Statewide Health, Planning and Development. Patient Discharge and Facility Data. <http://www.oshpd.ca.gov/>
 - Orange County Healthcare Agency. Mothers with a Higher Pre-Pregnancy Body Mass Index are at Increased Risk for Gestational Diabetes Mellitus <http://www1.ochca.com/ochealthinfo.com/docs/admin/2012-GDM-BMI-Report.pdf>
 - St. Mary Medical Center Community Needs Assessment 2012.

Appendices

Appendix A Community Stakeholders Forum Ranking of Health and Social Issues

Appendix B LBDHHS Programs and Potential Community Partners and Possible Indicators

Appendix A

Community Stakeholders Forum Ranking of Health and Social Issues

Background: The community health improvement plan is a long-term, systematic plan to address issues identified in the community health assessment. The purpose of the community health improvement plan is to describe how the Long Beach Department of Health and Human Services (LBDHHS) and the community will work together to improve the health of the population in Long Beach. The CHIP process was initiated in Long Beach on November 7, 2012 with a community meeting involving over 75 community partners. Below is the ranking of health and social issues by the number of votes (in parenthesis) from the participants.

Health Issues

1. Obesity (46)
2. Mental health (40)
3. Access to care (16)
4. Air quality (15)
5. Diabetes (14)
6. Health needs of an aging population (12)
7. Substance abuse (9)
8. Asthma (7)
9. Sexually transmitted infections (7)
10. Violence (6)
11. Dental care (4)
12. Heart disease (2)
13. High blood pressure (2)
14. HIV/AIDS, breast cancer, chronic diseases/illnesses, equal access for people with disabilities (1)

Social Issues

1. Poverty (19)
2. Homelessness (12)
3. Educational attainment (9)
4. Affordable housing (8)
5. Community safety (5)
6. Unemployment (4)
7. Domestic violence (2)
8. Built environment, injury prevention, substandard housing (1)

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Appendix B

LBDHHS Programs and Potential Community Partners and Possible Indicators

Goal 1: Ensure healthy active living by addressing preventable and treatable health conditions such as obesity, chronic diseases, mental health and by increasing access to care.

Objective 1A: By 2020, reduce adult and childhood obesity in Long Beach by 5%.

LBDHHS Programs & Community Partners

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|---|---|
| <ul style="list-style-type: none"> • Healthy Active Long Beach • Women, Infants and Children • Latino Diabetes Prevention and Management Program • Childhood Obesity Prevention and Advocacy • Tobacco Education Program • Health Promotion and Wellness Program • Maternal, Child and Adolescent Health • Parks, Recreation and Marine (PRM) • Long Beach Alliance for Food and Fitness • YMCA of Greater Long Beach • Long Beach Unified School District • Best Start Long Beach • Long Beach Memorial Medical Center • St. Mary Medical Center • Families in Good Health • The Children’s Clinic | <ul style="list-style-type: none"> • Building Healthy Communities Long Beach • CenterSpace • Coalition for Healthy North Long Beach • Community gardens • Long Beach Police Department • Bike Long Beach • Department of Public Works • Long Beach Transit • Junior League of Long Beach • Assistance League of Long Beach • Long Beach City College • California State University Long Beach • Private educational institutions • Safe Routes to School • Bikeable Communities • Walk Long Beach |
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Possible Performance Indicators

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| <ul style="list-style-type: none"> • Percent of children and adults considered obese • Number of health promoting policies adopted by the City of Long Beach • Number PRM health, fitness and nutrition classes and number of participants • Number of City-sponsored events and vending machines with healthy snacks and beverages • Number of City employees participating in wellness activities and events | <ul style="list-style-type: none"> • Number of events and participants in Bike Saturdays • Number of local storeowners selling affordable fresh fruits and vegetables • Number of participants and training for medical professionals on promoting healthy active lifestyle as part of medical care and treatment • Number of tobacco prevention education activities • Percent of mothers reporting breastfeeding in the first 6 months of the infant’s life |
|---|--|

Goal 1: Ensure healthy active living by addressing preventable and treatable health conditions such as obesity, chronic diseases, mental health and by increasing access to care.

Objective 1B: By 2020, increase access to mental health services (under development; based on National Outcomes Measures)

LBDHHS Programs & Community Partners

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| <ul style="list-style-type: none"> • Programs and community partners listed previously • Homeless Services Division and Multi-Services Center • Los Angeles County Department of Mental Health | <ul style="list-style-type: none"> • Mental Health America of Los Angeles • Mental Health Evaluation Team • Child Net, and Cambodian Association of America |
|---|--|

Possible Performance Indicators

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|---|---|
| <ul style="list-style-type: none"> • Percent of adults who receive mental health services they need • Increase in number of programs, providers and treatment slots for Long Beach residents • Number of referrals and technical assistance provided by the LBDHHS Mental Health Coordinator to individuals and community agencies | <ul style="list-style-type: none"> • Number of individuals receiving services from LA DMH-funded programs in Long Beach • Number of community based organizations trained in Mental Health First Aid • Number of participants and community workshops on mental health awareness • Number of service provider workshops and participants on mental health screening and resources |
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Appendix B

LBDHHS Programs and Potential Community Partners and Possible Indicators

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| Goal 1: Ensure healthy active living by addressing preventable and treatable health conditions such as obesity, chronic diseases, mental health and by increasing access to care. | |
| Objective 1C: By 2020, By 2020, reduce the percentage of uninsured Long Beach residents by 10%. | |
| LBDHHS Programs & Community Partners | |
| <ul style="list-style-type: none">• Medi-Cal Outreach Program (MCO)• Long Beach Health Access Collaborative• Building Healthy Communities Long Beach• The Children’s Clinic | <ul style="list-style-type: none">• St. Mary Medical Center• Families in Good Health• Westside Neighborhood Clinic• Long Beach Memorial Medical Center• Legal Aid Foundation |
| Possible Performance Indicators | |
| <ul style="list-style-type: none">• Number of Medi-Cal and Covered California enrollments in the City• Number of PHAT Tuesday participants linked to health insurance and care | <ul style="list-style-type: none">• Number of community partners engaged in the Long Beach Health Access Collaborative• Number of individuals reached who qualify for expanded Medi-Cal and Covered California |

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| Goal 2: Create safe social and physical environments that promote good health. | |
| Objective 2A: By 2020, increase the amount of open space that promote active living, particularly in socioeconomically disadvantaged areas of the city. | |
| LBDHHS Programs & Community Partners | |
| <ul style="list-style-type: none"> • Programs and partners listed in Objective 1a • Development Services Department Planning Division • Neighborhood Services Bureau • BikeLongBeach.org, Bikeable Communities • Women on Bikes SoCal • Neighborhood and business associations • Long Beach Transit | <ul style="list-style-type: none"> • Building Healthy Communities Long Beach • Best Start Long Beach • Public Works • Metro • Greater Long Beach YMCA • Walk Long Beach, CSULB |
| Possible Performance Indicators | |
| <ul style="list-style-type: none"> • Increase in percentage of green space (acres per 1,000 people) • Number of bicyclists in the City; number of participants and classes sponsored by PRM, CSULB, Bike Long Beach, and Bikeable Community | <ul style="list-style-type: none"> • Number of health elements integrated in the City's General Plan • Reduction in collisions • Increase in bike counts • Number of "active" social activities in the City • Number of participants and community service activities |

Appendix B

LBDHHS Programs and Potential Community Partners and Possible Indicators

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| Goal 2: Create safe social and physical environments that promote good health. | |
| Objective 2B: Increase community awareness, support and involvement with the implementation of the Safe Long Beach: Safe Families, Schools, and Communities Plan (violence prevention). | |
| LBDHHS Programs & Community Partners | |
| <ul style="list-style-type: none"> • Center for Families and Youth • Field Nursing and Home Visitation Services • Building Healthy Communities Long Beach • Best Start Long Beach • Neighborhood Services Bureau • Long Beach Police Department • Long Beach Unified School District • Parks, Recreation and Marine | <ul style="list-style-type: none"> • Centro Community Hispanic Association • Women’s Shelter of Long Beach • Legal Aid Foundation • Los Angeles County Department of Children and Family Services • Los Angeles County Department of Mental Health • End Abuse • Domestic Violence Council |
| Possible Performance Indicators | |
| <ul style="list-style-type: none"> • Number of community partners engaged in the Long Beach Violence Prevention Plan (LBVPP) development • Number of individuals participating in LBVPP focus groups and key informant interviews • Number of public health nurse field visits | <ul style="list-style-type: none"> • Number of evidence-based interventions implemented in the city • Number of participants and community awareness events • Number of agencies providing services to victims of violence • Number of agencies engaged in violence prevention strategies |

Goal 3: Achieve health equity, eliminate disparities, and improve the health of all groups.

Objective 3A: Support the Long Beach Unified School District (LBUSD) in fulfilling their strategic goal 2 and objective 2.1 as articulated in their 2011-2016 Strategic Plan.

LBDHHS Programs & Community Partners

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|--|---|
| <ul style="list-style-type: none">• Long Beach Unified School District• Center for Family and Youth• The Children’s Clinic | <ul style="list-style-type: none">• Best Start Long Beach• Building Healthy Community Long Beach• Families in Good Health |
|--|---|

Possible Performance Indicators

- | | |
|--|---|
| <ul style="list-style-type: none">• High school graduate rate• 2 year and 4 year community college enrollment | <ul style="list-style-type: none">• Number of students completing community service requirement |
|--|---|

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