Resilient Pierce County 2020 Culminating Report United Way of Pierce County

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Resilient Pierce County

In November of 2019, United Way of Pierce County received a grant from the Washington Department of Social and Health Services to facilitate a two year health and human service delivery that is personcentered, equity-focused, and served families in ways that are specific to the strength and needs of the chosen community. Thus, the Resilient Pierce County (RPC) team was formed and has worked with the Franklin Pierce and East Tacoma/Salishan communities to address reimagining health and human services, especially in light of COVID-19, with the following goal statement:

By working collaboratively and using a lens of equity, trauma, and resilience, we will dismantle and reimagine our current health and human systems to work effectively for the people and support ALICE families to overcome poverty.

To date, our work has included a partnership with Building Community Resilience (BCR) at the George Washington University where they provided an in depth gap and opportunities analysis for our two targeted communities. This report allowed us to understand the demographics, need-findings, and statistics to better understand the community. In addition, RPC partnered with the University of Washington's Global Innovation and Design Lab (GID) to help conduct a human centered design research project. It began in August 2020 by conducting focus groups with the community to understand first-hand the impact of COVID-19 on their access to health and human services and resources. In addition, the GID Lab hosted workshops with the RPC team to understand service provider barriers in an effort to garner a holistic view of the project. The culmination of the collaboration ended with United Way of Pierce County's annual Poverty to Possibilities Summit which contained a one-hour design thinking workshop with about 200 community partners ideating solutions to the needs and goals generated by our targeted communities.

RPC is passionate about maintaining a human centered and community-based approach to addressing barriers to services and equity in our communities and will continue our work in 2021.

Building Community Resilience Report

Excerpt from the Executive Summary from the Gaps and Opportunity Analysis by BCR

Purpose

The Resilient Pierce County collaborative seeks to understand adversity and resilience factors in zip codes in Franklin Pierce (98444 and 98445) and Salishan/East Tacoma (98404), which each have unique histories of systemic inequity and its resultant outcomes. This report, developed by The Center for Community Resilience (CCR), seeks to inform and support this effort by **identifying gaps in community resources, assessing outcome disparities, highlighting existing health, wellbeing, and economic supports. The report also points toward opportunities for collaboration and integration across partners that could improve the wellbeing and economic status of families in the communities under study. This analysis is relevant in the wake of the COVID-19 pandemic, which has widened preexisting inequities for families. At all points in this report, researchers at CCR identify data points that can inform community conversations and measure systems change.**

Background

The *Resilient Pierce County* collaborative consists of multiple cross-sector partners that serve Tacoma and Pierce County families, including public health, education, social services, behavioral health, faith-based organizations, library services, LGBTQ support services, and more.

This report supports three goals of the collaborative:

- Goal 1: Introduce the Pierce County/ Tacoma community to the concept of the "Pair of <u>ACEs</u>" and trauma-informed practice.
- Goal 2: Identify key adversity and resilience factors experienced by zip codes in Franklin Pierce (98444 and 98445) and Salishan/East Tacoma (98404).
- Goal 3: Use community data to reimagine service delivery for the targeted zip codes in Franklin Pierce and Salishan/East Tacoma.

Report Structure and Methods

Integrating the Pair of ACEs concept and <u>Baseline Resilience Indicators for Communities (BRIC)</u> <u>concept</u>, as suggested by Resilient Pierce County staff, CCR has analyzed a wide range of data and made connections to historical context and systemic inequities.

The report consists of five primary sections: 1.) Historical Context, 2.) Demographics, 3.) Built Environment and Public Infrastructure, 4.) Community Environments, 5.) Childhood Experiences and finally, a section detailing examples of how to use the data and potential next steps. Key findings and recommendations are presented throughout the report.

Key Findings

Key Finding #1: Demographics

Systemic factors are associated with a smaller proportion of community residents with a college degree, a lower median household income, and a smaller proportion of workers with occupations in management, business, science, and arts. Although we cannot make a causal relationships between systemic inequity and outcomes, we can identify three factors that are likely related. For example, lower educational attainment prevents residents from obtaining jobs in the management, business, science, and arts sectors, which in turn leads to lower median household income. Research demonstrates **families with limited English proficiency may have more difficulty accessing needed resources due to language barriers.**

Recommendations Summary: Resilient Pierce County collective action should focus on education, job opportunities, and living wage as key issues. Single-parent households and individuals with limited English proficiency are high priority populations. Collective action should build upon the community's strength in racial/ethnic diversity to increase the capacity and sustainability of single-parent households and those with limited English proficiency.

Questions for the community

What systemic factors are driving the disparity in educational attainment, occupation, and income? How has COVID-19 impacted residents in the service industry and how have systems and services been supporting their families?

Key Finding #2: Built Environment and Public Infrastructure

Much of Franklin Pierce and East Tacoma/Salishan are in unincorporated areas. Public transit access, walkability, public educational resource access, health care access, and childcare resources all appear to be lacking in these three zip codes despite the high population density which may be attributed to their incorporation status. Living in an unincorporated area means the residents have less direct means to advocate for needed public infrastructures compared with Tacoma residents living just a few miles away.

Recommendations Summary: Resilience Pierce County could help residents in Franklin Pierce and East Tacoma/Salishan organize and advocate for an improved public infrastructure system. This could include advocacy efforts in support of municipal incorporation or annexation into the City of Tacoma. Franklin Pierce and East Tacoma/Salishan communities are currently under consideration for annexation.

Questions for the community

- Which public infrastructures do residents consider as essential and are lacking?
- What kind of community dialogue needs to occur to develop next steps?
- Who are Resilience Pierce County's potential partners for advocacy work?

Key Finding #3: Health and Housing

A disproportionate number of families are experiencing housing cost burden and are at risk for housing instability, which can lead to numerous negative health outcomes.

Recommendations Summary: Resilient Pierce County's collective actions should focus on housing and finance strategies to help families increase their incomes. For example, affordable housing options funded through public or private means can divert more income into savings or pay for other essential needs instead of housing.

Questions for the community:

What community efforts are already in place to address housing, finance, and health needs? How has the COVID-19 pandemic affected housing, finance, and health in Franklin Pierce and East Tacoma/Salishan?

Key Finding #4: Community Environments

Food insecurity, mental health needs, and educational participation are three adverse childhood experiences in Franklin Pierce and East Tacoma/Salishan. All three school districts (Tacoma, Franklin Pierce, Bethel) have high levels of food insecurity, and the three zip codes each have areas considered "low food access." Food insecurity can lead to numerous health issues, including increased mental health needs among parents and children. Furthermore, depressive feelings and suicidal ideation are on the rise among Pierce County students over the last decade. Increased and unaddressed mental health needs at home can then affect children's educational participation.

Recommendation Summary: The Collaborative should focus on increasing access to healthy and nutritious food as well as preventive and supportive services for children, adults, and families.

Questions for the community

- Tacoma-Pierce County Health Department declared racism as a public health crisis. How can Resilient Pierce County partner with the health department to work towards racial equity?
- How can local businesses be involved to address food insecurity? Work opportunities for African American and Native American youth?

Conclusion

This report provides data and perspective on the complex interactions of systemic inequity that generate outcomes Resilient Pierce County collaborative aims to reverse and improve.

Resilient Pierce County Health and Human Service Survey

Excerpt from UWT GID Lab United Way Report 2020-21

Purpose

One of the first items the RPC team wanted to complete was a survey to understand the basic challenges and helpful services in the communities during the wake of COVID-19. As service providers were quickly adapting to the stresses and impacts of a state quarantine and shutdowns, it was important to get a basic understanding of how the communities and service providers were being affected so we could identify the gaps and build from there. Thus, two surveys were created in collaboration with the Global Innovation and Design Lab who helped structure the surveys to follow the Trauma, Equity, and Resilience framework. The Resilient Pierce County Health and Human Service *Public* and *Service Provider* survey was sent out on July 27th to the East Tacoma/Salishan and Franklin Pierce communities and closed on August 31st. The public survey was also provided in Spanish to allow for the survey to be as accessible as possible. While 83 Service Providers responded to the survey, 61 (73.5%) completed it. The Community survey was started by 42 respondents, with 26 (61.9%) completing it.

Key Findings

The feedback from the <u>Community</u> survey highlighted the following points:

- **Biggest challenges since COVID** (respondents could select as many options as applied):
 - affordable housing and/or housing payments
 - bills (e.g., car insurance, credit cards)
 - o childcare
 - food accessibility
- **Resources unable to access** (respondents could select as many options as applied):
 - Other (e.g., mental health care or counseling)
 - Education assistance
 - Food accessibility
- Biggest source of help
 - o Libraries
 - Food banks
 - Meals from school
 - Employers
 - Telehealth visits
- Biggest obstacle in receiving support/aid:
 - Finding mental health care
 - Resources are confusing to navigate
 - Paperwork required to receive assistance
 - o Childcare
 - Language barrier
- Biggest challenge anticipated during Recovery Phase:
 - Finding full-time employment
 - Knowing when it's safe to be around other people,
 - Making sense of misinformation, returning to work without a clear plan for kids
 - Accessing transportation
- The feedback from the Service Provider survey highlighted the following points:

• Service most requested/accessed:

- Housing aid
- Financial assistance
- Food accessibility
- Employment aid
- Behavioral health resources
- o Childcare
- Services that are no longer provided due to COVID-19:

- In-home services or in-person orientation and counseling
- Access to technology
- o After school programs, and childcare
- Biggest source of help included the following services, groups, or resources:
 - o 211
 - Rental assistance
 - o School buses providing meals
 - Federal CARES Act funding
 - State education resources

Biggest barrier(s) in serving clients:

- Technology
- Not meeting in-person
- Loss of staff due to cuts

• Biggest challenge anticipated during Recovery Phase:

- Employment opportunities
- Economic stability
- Debt taken on due to COVID-19
- o Outreach
- Technology and internet access
- Educational opportunities

• Policy Recommendations:

- Open CARES Act funding to help with employment
- Create additional funding for childcare providers
- Increase subsidy levels
- Provide free Wifi for families
- Increase funding for SNAP so families have more purchasing power

• Services or products to keep in place during recovery and beyond:

- Telehealth
- o Digital Work Opportunity Center
- Virtual meetings
- Diaper banks

Global Innovation and Design Lab Collaboration

Excerpt from UWT GID Lab United Way Report 2020-21

Purpose

The RPC team began a collaboration with the University of Washington's Global Innovation and Design Lab in July 2020 to help the RPC gather user research, conduct workshops and lead a design thinking workshop at the 2020 *From Poverty to Possibilities Summit*

Background

The Five Phase Design Process of the collaboration is shown below:

1.**Background research [July-August 2020]:** The GID Lab team conducted research on ALICE families and the <u>Trauma, Equity, Resilience</u> framework. The framework aligns closely with the GID Lab's Design Justice framework, which emphasizes recognition of users as innovators as well, not just as those in need. The GID Lab team assisted RPC in its creation and administration of user-centered surveys on health and human services, incorporating the priorities of both frameworks.

2. Need Finding: [August-September 2020]: The GID Lab team collaborated with RPC to collate survey reports and conduct individual interviews and focus group discussions with ALICE families as well as with service providers. Interviews and focus group discussions prioritized the East Tacoma/Salishan and Franklin Pierce communities. Taken together, results from the surveys, interviews, and focus groups provided a substantive understanding of barriers ALICE families faced, as well as their innovative strategies in place and ideas for the future.

3. **RPC Design Thinking Workshops:** [October 2020]: Using the extensive quantitative and qualitative data from ALICE families, the GID Lab team created four composite personas that informed two design thinking workshops for RPC. Each resulted in ideas and prototypes of solutions for ALICE families to access health and human services through the pandemic, as well as for service providers to deliver such services more effectively.

4. **Pre-design and Facilitator Training for From Poverty to Possibilities [October-November 2020]:** Ideas and prototypes from the RPC Design Thinking Workshops, as well as further follow-up interviews with ALICE families and service providers, were used to create eight holistic empathy stories for a design thinking workshop held during the November 20 From Poverty to Possibilities Summit. With over 350 registered participants, 40 facilitators from UW Tacoma and UWPC were trained to guide at least 40 small groups through ideation and prototyping at the event. In addition, a comprehensive prepacket was created and distributed to all registrants, which included description of the workshops, the design thinking process, the eight empathy stories, and specific steps to upload and share ideas and prototypes.

5. From Poverty to Possibilities Summit Design Thinking Workshop [November 10, 2020]: Keynote speaker Dr. Wendy Ellis opened the event with a comprehensive presentation on the Trauma, Equity, Resilience framework, emphasizing the <u>Pair of ACES</u> model where conditions of childhood have a significant impact on the outcomes of adulthood. More information in the next section.

Key Findings

Community Focus Groups and Interviews:

Overall, 34% of the respondents were from Franklin Pierce, 53% from East Tacoma/Salishan, and 13% from other zip codes (98373 and 98406). Of the participants, 34% identified as White, 21% as Asian, 16% as Black, 16% as Latinx, and 16% as Other. In terms of age, 40% was between 25-34 years, 47% between 35-55 years, and 11% was between 56-74 years old. Eighty-four percent identified as Female and 16% as Male.

Participants noted similar challenges identified by RPC survey respondents, which included:

- Affordable childcare
- Affordable living expenses (e.g., housing or rental assistance)
- Access to healthcare, including mental health (e.g., expensive and difficult to navigate)
- Lack of communication or misinformation
- Crime or a lack of safety
- Kids on remote learning
- Transportation (e.g., car or public transportation)
- Social isolation
- Language barriers
- Employment (e.g., closures)
- Lack of awareness of programs and resources available

- Lack of entertainment
- Access to food
- Limited immigration services

Ideas to combat challenges included:

- Lowering costs
- Increasing information and resources on healthcare, especially for those who speak English as a second language
- Increasing institutional accountability
- Hosting virtual groups to discuss what people are experiencing
- Adapting to Zoom or other virtual services or move outdoors, when possible
- Including stakeholders in the discussion e.g., for affordable housing, this includes landlords, homeowners, and business owners
- Focusing more on coming together
- Setting up booths for free visits/drop-ins with social workers and health professionals with no insurance needed
- Creating a ball pump station in the neighborhood to pump up flat balls
- Identifying one source of truth for everyone
- Holding conversations with policymakers
- Creating more public housing
- Establishing a neighborhood grocery store

RPC Design Workshops

Constructing Personas: The GID Lab team and RPC Project Manager collated the data from the focus groups and interviews to create four personas. MURAL, a collaborative whiteboarding software was used to identify themes through affinity mapping to create the initial four personas. Each persona incorporated insights from six or more of the interviewees. Personas were as follows:

- The Hernandez Family facing ESL, behavioral health care, transportation, and reduced income challenges
- The Johnson Family facing remote schooling and internet, and childcare challenges
- Andy Chen facing affordable housing, employment, and behavioral health challenges
- Jessica Miller facing single parent, medical care, and community safety challenges

The RPC team members also conducted internal interviews to understand the barriers from service providers. The following *How Might We* Statements were ideated from these interviews:

- How might we find culturally responsive resources?
- How might we improve 211 and make that resource better for ESL?
- How might we use a universal resource (211) to direct families?
- How might we eliminate more steps in the system to help ESL families?
- How might we find/identify resources that are already available?
- How might telehealth provide multilingual communication or a translator?
- How might we connect to training or higher employment opportunities?
- How might we reach out to non-profits in the community to open up members only community centers?

The second workshop was focused on creating tangible prototypes and ideations for the HMW statements created in the last workshop. The following ideas were collected:

- Make 211 better provide **insurance types** so people know who takes what; make it accessible by other means than phone
- Eliminate steps in the system
- Create a health navigator to provide assistance to access mental health resources
- Show "You Might Also Like..." related items when users are signing up for government programs
- Create a closed-loop referral system
- Create common data systems
- Identify funding to incentivize innovations in collaboration
- Form advisory groups that include both recipients/clients and providers

2020 Poverty to Possibilities Summit

Excerpt from UWT GID Lab United Way Report 2020-21

Background

Dr. Divya McMillin led the design thinking workshop beginning with a quick summary of the frameworks and the background work, including the results of ALICE family and service provider surveys, interviews, and focus groups. She provided an outline of the workshop format and the over 150 participants were then moved into the 40 breakout rooms. Facilitators assisted participants through the steps of empathy-building through discussion of the story assigned to each group, followed by ideation and prototyping. Over 30 prototypes were produced, with six presented at the big group share session of the workshop. The subsequent sections of this report detail the framework and methodology of design phases, and the prototypes generated at the Summit.

Key Findings

A rich array of prototypes were shared, with some examples below. Please see the Prototypes section for a comprehensive description:

- Story 1 the barrier is food accessibility: an UberEATS app that delivers food bank boxes to families in low-income areas
- Story 2 the barrier is language: a Hoberman sphere to model/conceptualize the quality of relationships as they expand and contract due to challenges and setbacks
- Story 3 the barrier is affordable childcare: non-profits/service providers could pursue a timeshare model where they purchase blocks of time from childcare providers so families have the flexibility to use time slots as needed
- Story 4 the barrier is access to medical care: clustering clients or networking families to self-resource where families share best practices and are less dependent on service providers
- Story 5 the barrier is access to mental health resources: use breakout rooms so the user can achieve stronger, more close-knit social interaction
- Story 6 the barrier is social isolation: open up the local community center on a limited basis and have the user lead a class for other young people (to help build resume and be more engaged)
- Story 7 the barrier is technology: use community center to identify students, non-profits, churches, and other community organizations to do check-ins and provide support (e.g., technology, transportation)
- Story 8 the barrier is access to intimate partner violence resources: since internet accessibility is not guaranteed, resources need to be made available physically (e.g., job listings, posters, word of mouth)

Please see the Appendix for all of the prototypes and community stories

References

- Building Community Resilience. (2020) "Gap & Opportunity Analysis of Two Pierce County Communities", Center for Community Resilience, Washington, D. C.
- McMillin, D. and Kimura, K. (2020). "Resilient Communities Through Human Centered Design," From Poverty to Possibilities 2020, United Way of Pierce County, Tacoma, WA.

Please contact globalid@uw.edu/253.692.4590 for any questions.

Appendix

STORIES, PROTOTYPES, DESCRIPTIONS

STORY 1: ANDY TRYING TO ACCESS A FOOD BANK





1a: An Uber Eats app that delivers food bank boxes to families in low-income areas. It would streamline and provide a universal application based on what food banks have available.

Prototype 1a



Prototype 1b

1b: Design a system that untangles the intricacy of the resources available. The yarn represents how intricate those systems are and the resources are not easily accessible but can be slowly pulled apart. Basic needs (e.g., food, money, transportation) are prioritized. Instead of new systems, we want to build awareness and connect people to existing resources. Next would be promoting resources to the public.

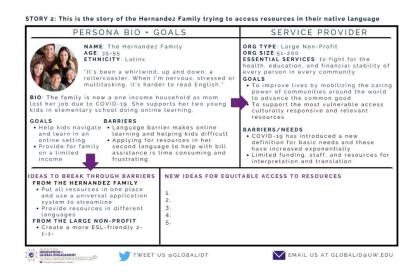
STORY 1 (CONTD): ANDY TRYING TO ACCESS A FOOD BANK



1c: The visual shows a more dignified solution to a food bank in the form of a food voucher. In addition, an educational/mentorship program that creates jobs and furthers education around financial literacy.

Prototype 1c

STORY 2: THE HERNANDEZ FAMILY TRYING TO ACCESS RESOURCES IN THEIR NATIVE LANGUAGE



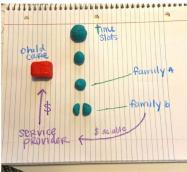


2a: Establish a tutoring system. Match high school students with elementary students who share language and community.

Prototype 2a

STORY 3: HARRISON FAMILY TRYING TO ACCESS AFFORDABLE CHILDCARE

PERSONA BIO + GOALS	SERVICE PROVIDER
Were the Harrison Family ME: 5::5: ETHNICITY: African American Were tired, it's not easy to juggle our ork and caring for our children." BIO: Two parents who both work at the office. Their school aged child and toddler both need childcare so the parents can attend work. GOALS Find affordable. (lexible childcare: Blance work and home ile online learning Bio: Two parents who both work at the office. Their school aged child and toddler both need childcare so the Balance work and home ile online learning	 RR TYPE: Large Non-Profit RR SIZES-20 ESSENTIAL SERVICES: to right for the health: education, and financial stability of every person in every community GOALS To improve lives by mobilizing the caring power of communities around the world to advance the common good To evolve as needed to support families through the pandemic BARNERS/NEEDS BARNERS/NEEDS Prior to the pandemic. Inding affordable childcare was difficult - now it's even more so
DEAS TO BREAK THROUGH BARRIERS FROM THE HARRISON FAMILY Childcare providers to forfer more flexibility so families don't lose therb spoid FROM THE LARGE NON-PROFIT Glive funding to childcare services so they can open with the ability to comply with safety regulations	FABLE ACCESS TO RESOURCES



3a: A time-share model where non-profits (service providers) can purchase blocks of times from childcare providers so families have the flexibility to use the time slots as needed without fear of losing their spots. The model would be flexible to provide families with time slots that are adaptable to meet their needs (e.g., cut a full-time spot in half, if needed). Qualified families could use the services for free, but other families could pay as they can use the blocks of time to make sure all are being used.

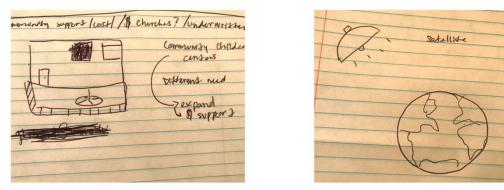
Prototype 3a



Idea/Prototype 3b

3b: More awareness to low-income families; county/state-wide systems change; work within current systems to increase participation; reflection on the diversity of the population they serve; specialized teaching to kids with behavioral issues

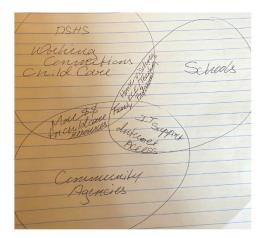
STORY 3 (CONTD): HARRISON FAMILY TRYING TO ACCESS AFFORDABLE CHILDCARE



Prototype 3c.i

Prototype3c.ii

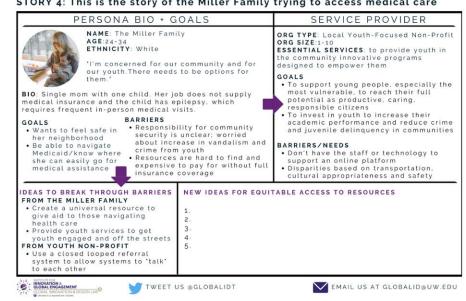
3c: Provide more funding and ability to expand existing community-based childcare buildings (3ci); use a satellite to bring wifi to larger groups of people (3cii)



3d: The prototype depicts a shielded support sphere where the family is supported by its community. Organizations, schools, government, businesses, etc. collaborate to ensure that the family has the resources they need when they need them. It recognizes the interconnectedness of a person's life and the solutions needed to resolve barriers have to be interconnected and collaborative from an equity perspective and long-term stability lens.

Idea/Prototype 3d

STORY 4: THE MILLER FAMILY TRYING TO ACCESS MEDICAL CARE



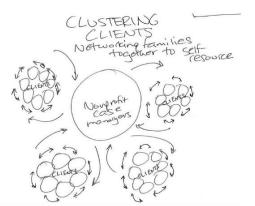
STORY 4: This is the story of the Miller Family trying to access medical care



Idea/Prototype 4a

4a: Jessica holds a diagram with the Doctor at the top, Employer, and State in one circle, and Resources in another circle. The family is at the center of this. Anna holds a door that symbolizes the opportunities available to the family and how systems that speak to one anotherto help this family receive the help they need.

STORY 4 (CONTD): THE MILLER FAMILY TRYING TO ACCESS MEDICAL CARE



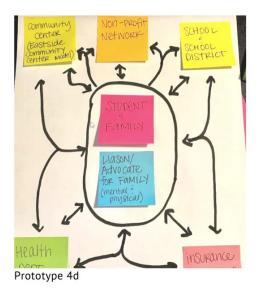
4b: Clustering clients allows families to network together to self-resource. Client families would share parenting best practices, childcare co-op. Less dependency on non-profit case managers to be guided to services.





4c: Our prototype represents a community garden and playground with resources for mom on Medicaid, etc. By building social relationships, neighborhood safety is enhanced.

Prototype 4c

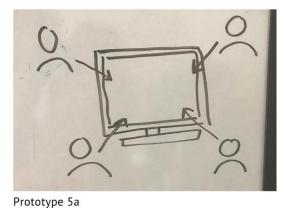


4d: Need a trusted liaison and advocate for the family - should be the school and school district. The prototype shows arrows to represent a network going back and forth (non-linear). The community center can provide wraparound services like the Eastside module.

STORY 5: ETHAN TRYING TO ACCESS MENTAL HEALTH RESOURCES

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STORY 5: This is the story of Ethan trying to access mental health resources
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Prototype 5b

5a: The prototype depicts a breakout room or a small Zoom meeting; Ethan may achieve stronger, more close-knit social interaction if his teacher creates more opportunities for small breakout groups or if he was moved into group counseling. 5b: Provide wraparound support, social connection, consistency, and structure with providers.

STORY 5 [CONTD]: ETHAN TRYING TO ACCESS MENTAL HEALTH RESOURCES

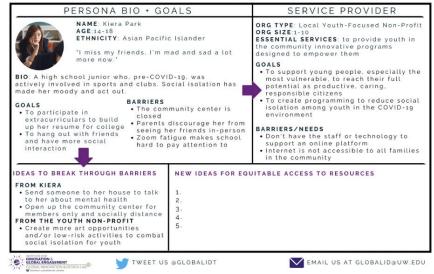


Idea/Prototype 5c

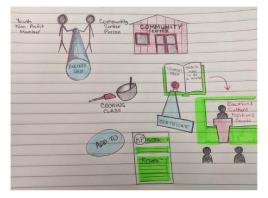
5c: The goal is to support Ethan. On one side his mental health provider/counselor meets with him weekly. On the other side, Ethan's friends/community members (possibly older students) meet with him as a tutor or support group (5 people or less to align with COVID-19 restrictions). Ethan's classroom teacher supports his online learning and advocates to change his IEP. The teacher is in touch with the provider and community group - and is shown kneeling to represent meeting Ethan at his level.

STORY 6: KIERA TRYING TO COMBAT SOCIAL ISOLATION

STORY 6: This is the story of Kiera trying to combat social isolation

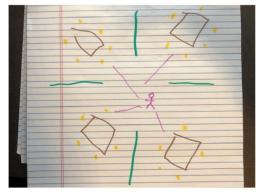


STORY 6 (CONTD): KIERA TRYING TO COMBAT SOCIAL ISOLATION



6a: Our group agreed Kiera was facing social isolation, not struggling with mental health. Our prototype gets the community center to open on a limited basis. Kiera would lead a class for other young people to help build her resume and be more engaged.

Prototype 6a



6b. Sketch of a school gym with a small group drop-in time for groups of five students or friends. Social distancing and masks would be used. It would be a time to play games, hang out, do homework/projects.

Prototype 6b



6c: A postcard in a frame that demonstrates their vision of the community. The idea is to have each school conduct a wellness check to ensure students like Kiera have the tools to connect. They would also provide referrals to local agencies that could connect her further (e.g., cultural center)

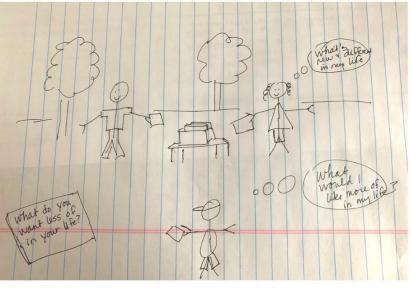
Prototype 6c

STORY 6 (CONTD): KIERA TRYING TO COMBAT SOCIAL ISOLATION



6d: A young Latinx of the same age group. Her family took her on a camping trip to get outside and create a new environment. They encouraged her to use her skills in costume creation to interact on social media with her friends. She received positive feedback that improved her self-esteem.

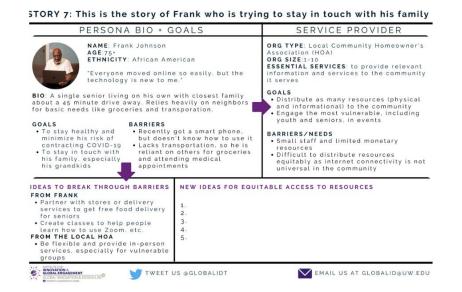
Prototype 6d



Prototype 6e

6e: Our group focused on addressing the isolation created by COVID-19. To create equitable access to resources and to address isolation, we recommend allowing for small groups to gather in-person, following social distancing guidelines. Allowing individuals to sign up for time slots on a given day would give them time to interact in-person. Activities could include art or sports - or even cards with thoughtful questions that people could respond to. Some individuals may be dealing with mental health issues (anger or acting out), so staff needs to be there to guide and ensure each person can express themselves and be heard.

STORY 7: FRANK WHO IS TRYING TO STAY IN TOUCH WITH HIS FAMILY





7a: Our group placed the community in the center and created a circle of connections for Franke, including school/colleges with students who can provide tech and social media guidance, non-profits/health services for resources, churches, and neighbors for check-ins, family and friends for support. The circle includes Frank who should not feel like a burden to others but act as a resource to others as much as they are to him.

Prototype 7a

Affirdable Heusing 1/2 low-income Seriors 1/2 low-income College 1/2 low-income College 1/2 low-income College Students + New grads

Prototype 7b

7b: We combined Story 1 and 7 to create multigenerational affordable housing. The goal would be to identify apartment complexes near colleges and rent to seniors and recent graduates. By building partnerships and enriching relationships, the area would be a fun, cool place to hang out (e.g., MultiCare to build a clinic).

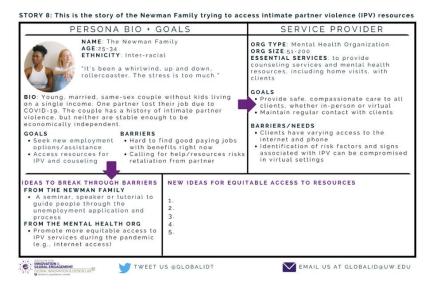
STORY 7 (CONTD): FRANK WHO IS TRYING TO STAY IN TOUCH WITH HIS FAMILY



Prototype 7c

7c: Get students, HOA members, other neighborhood groups to leave notes on their neighbors' front doors asking if they need assistance. For example, someone could teach Frank how to use his phone (distanced or through a window). At that visit, they could also see if Frank had other needs. Frank could then pay it forward and make more community connections in his demographics. It would also provide a good way for people to become more familiar with their community and get exercise.

STORY 8: THE NEWMAN FAMILY TRYING TO ACCESS INTIMATE PARTNER VIOLENCE (IPV) RESOURCES



STORY 8: THE NEWMAN FAMILY TRYING TO ACCESS INTIMATE PARTNER VIOLENCE (IPV) RESOURCES



Idea/Prototype 8a.i 8ai: Look for options in transitional housing/group home. Need communication between the couple, couple's therapy, to see if issues can be resolved.



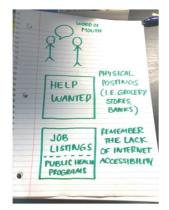
Idea/Prototype 8a.ii

8aii: There are mental, physical, and emotional aspects that play into this. Need to look at more options in addition to therapy, otherwise, the couple needs to part ways.

8b: Create a community center packed with resources for IPV. Community centers pictures with free or reduced transportation to get there. Also, provide mentorship at work.



Picture 8b



Prototype 8c.i



Prototype 8c.ii

8c: Due to the lack of internet accessibility, physical resources need to be made available within the community such as job listings, posters, and word-of-mouth. Mental health programs and resources are significantly limited for LGBTQ individuals so there needs to be a collaboration with the LGBTQ community regarding mental health needs to efficient and appropriate programming can be created for them.